

Mental Health Psychoeducation After Armed Conflict in Tambrauw Regency, West Papua Province

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Abstract

Armed conflict in Tambrauw Regency, Southwest Papua, caused a prolonged disruption of learning activities, increased anxiety, displacement of communities, and a decline in motivation among teachers and students. This study aims to describe mental health psychoeducation as a trauma recovery effort to restore the teaching and learning process at Bamusbama Junior High School after the November–December 2024 conflict. The method began with a needs assessment through interviews and observations to identify psychological conditions, learning motivation, and factors inhibiting school resumption. A two-day psychoeducation intervention was then conducted using lectures, discussions, role plays, games, and workshops involving principals, teachers, students, parents, communities, and local government. The results showed a significant decrease in anxiety, increased resilience, and increased motivation to learn and teach, as seen from pre–post evaluation and behavioral changes. Students who were previously absent or displaced returned to school, and teachers resumed teaching after months of closure. Mental health psychoeducation proved effective in restoring a sense of security and rebuilding learning culture in post-conflict settings. This indicates that trauma recovery-based psychoeducation is an appropriate strategy to restore educational function in armed conflict areas and can be implemented in other similar contexts.

Keywords: Psychoeducation, Mental Health, Trauma, Post-Conflict, Motivation, Papua

Introduction

Papua is a part of Indonesia that has long experienced socio-political conflict, including armed clashes between separatist groups and security forces. This conflict is not a new occurrence, but rather the accumulation of decades of tension and instability, resulting in social wounds, a loss of security, and damaged trust between groups. This situation also has a serious impact on human resources, especially the younger generation. One of the affected areas is the Bamusbama District, Tambrauw Regency, Southwest Papua. The conflict that occurred in November–December 2024 resulted in damage to public facilities, the closure of schools for more than four months, and waves of displacement to forests and neighboring villages. Children lost their learning environment, routines, and peer support, while teachers especially those from outside Papua experienced threats, anxiety, and trauma, making them reluctant to return to work. Armed conflict thus creates significant psychological impacts on teachers and students as vulnerable groups within the education ecosystem (Shamsi & Khalili, 2026; Arega, 2023; Slone & Peer, 2021; Jordans et al., 2016; Tol et al., 2008).

From a psychological perspective, armed conflict is a source of trauma that can damage a person's emotional structure and memory. Trauma not only causes temporary fear, but also changes the way the brain works, especially the parts that regulate attention, emotions, and learning abilities. The trauma experienced by students and teachers in Tambrauw is not only personal trauma, but also relational trauma, which destroys trust in the social environment.

Schools, which were previously considered safe spaces, have become spaces associated with threats. When the sense of security is lost, children's motivation to learn and teachers' motivation to teach decline dramatically. This is in line with the literature on trauma: the learning process can only function optimally when the nervous system is in a safe and stable condition (Teicher & Samson, 2016; van der Kolk, 2014; Herman, 1992; Maynard et al., 2019; Herrenkohl et al., 2019).

Furthermore, interventions should be tailored to the local context, taking into account cultural norms, community values, and the specific experiences of both students and teachers. Programs that combine counseling, peer support, and participatory activities can help rebuild trust and promote social cohesion. Addressing trauma collectively also enables students and teachers to develop coping strategies, regain a sense of normalcy, and re-engage with education more effectively. Without these psychological and community-centered measures, educational recovery risks being superficial, leaving underlying fears and insecurities unaddressed (Lange et al., 2022; Capurso et al., 2022; Alzaghouli et al., 2022; Allen et al., 2021; Raniti et al., 2022).

In addition, the lack of psychological support for teachers can have long-term consequences on the quality of education in the region. Teachers serve not only as educators but also as role models and emotional anchors for students. If their anxiety and trauma are left unaddressed, it may lead to increased absenteeism, lower teaching performance, and even attrition from the profession. Therefore, providing counseling, peer support groups, and safe working conditions is essential to ensure that teachers can continue their roles effectively. Supporting teachers psychologically also indirectly benefits students, as a confident and secure teacher fosters a more stable and nurturing learning environment (Cafaro et al., 2023; Parrott et al., 2024; Newton et al., 2024; Higgen et al., 2022).

Moreover, resilience-building in post-conflict contexts requires coordinated efforts at multiple levels. Schools must not only ensure physical safety but also foster emotional security through counseling programs, peer support networks, and trauma-informed teaching practices. Community involvement is equally crucial, as social cohesion and mutual trust reinforce the recovery process. Without addressing these psychological and social dimensions, simply resuming educational activities risks perpetuating fear, mistrust, and disengagement among both students and teachers (Masten, 2014; Masten, 2021; Hobfoll et al., 2007).

Therefore, post-conflict education policies must integrate mental health support and resilience training as core components, recognizing that healing the human psyche is as important as rebuilding infrastructure in essence, recovery is not only about restoring normal routines but also about rebuilding confidence in the safety and reliability of the environment. By prioritizing psychological well-being alongside structural recovery, communities can foster sustainable resilience, allowing both teachers and students to engage fully in education despite past traumas.

Resilience is collective. Children can recover if they are accompanied by stable teachers and supportive parents. Teachers can recover if there is a guarantee of security, social acceptance, and support from the community. Schools can recover when there is collaboration between education agencies, community leaders, and local governments. Therefore, post-conflict interventions must transcend classroom boundaries. Interventions should not only be provided to children, but the entire social system must be involved. Mental health-based psychoeducation is one method that can serve as a bridge for recovery between students, teachers, families, and communities. Psychoeducation not only provides knowledge about trauma and ways to cope with anxiety, but also offers new social experiences that restore a sense of security. Through role-playing, discussions, workshops, and reflective games, children and teachers can express emotions that have been suppressed. Children learn to recognize their

own sources of strength. Teachers learn to understand stress responses as something normal, not a weakness. Shared activities such as eating together, praying together, and symbolic games can strengthen social bonds that have been broken by conflict.

Therefore, efforts to revive students' enthusiasm for learning and teachers' commitment to teaching in post-conflict settings must prioritize trauma recovery. The focus should extend beyond merely improving academic performance; it is essential to rebuild a sense of safety and psychological stability. Similarly, recovery is not only about reinstating school routines but also about restoring the very identity of learning and the role of teachers as trusted guides. Implementing mental health-focused psychoeducation in schools such as SMP Bamusbama in Tambrauw can accelerate this recovery process, as it addresses the underlying cause psychological trauma. By providing structured support, opportunities for emotional expression, and coping strategies, such interventions empower both students and teachers to re-engage with education meaningfully, strengthen resilience, and rebuild trust within the school and broader community.

Literature

Bronfenbrenner's Ecology

According to Bronfenbrenner, individual development is influenced by interacting environmental systems, ranging from the individual, microsystem, mesosystem, exosystem, to the macrosystem. In the context of Bamusbama Junior High School, this theory is relevant because it shows that trauma and decreased motivation do not only stem from the personal experiences of students and teachers, but are also influenced by the social conditions around them. Micro and mesosystems, such as relationships between students, teachers, parents, and the local community, have weakened due to conflict and displacement. Exosystems, such as education agency policies, also have an impact on the speed of the school's recovery. Meanwhile, at the macrosystem level, the political and security conflict in Papua affects the sense of security in schools. Thus, this theory helps us understand that the psychological problems experienced by students and teachers after the conflict are the result of interactions between various environmental systems, not just individual factors.

Abraham Maslow's Hierarchy of Needs Theory

In the context of education in post-conflict areas, Maslow's theory is particularly relevant because schools cannot force students to immediately return to academic demands when their basic needs are not being met. Under normal circumstances, schools are safe and structured environments. However, in conflict areas, schools can be associated with anxiety. Therefore, post-conflict recovery must begin with interventions that can restore this perception of safety. Interventions such as psychoeducation, emotional support, group activities, and play therapy-based activities are forms of fulfilling the basic need for psychological safety, as they provide new positive experiences that replace threatening memories. Through this process, motivation to learn and teach is not forced instantly, but is built gradually according to the hierarchy of needs. The more security is created, the greater the opportunity for social needs, self-acceptance, self-esteem, and ultimately self-actualization needs to emerge, as reflected in the desire to return to learning and teaching.

B.F. Skinner's Behaviorist Theory

Skinner emphasizes that human behavior is shaped by stimulus-response patterns influenced by the environment. In Bamusbama, prolonged exposure to conflict, threats, and fear acts as negative stimuli, leading to avoidance, procrastination, or reluctance to attend school. Over time, these responses can become habitual, resulting in decreased motivation. Therefore, post-

conflict recovery must introduce new positive stimuli such as encouragement, verbal praise, social support, and psychoeducational interventions to restore adaptive learning and teaching behaviors. Consistent reinforcement can gradually replace maladaptive patterns, rebuild confidence, and strengthen self-efficacy in both students and teachers. Involving parents, teachers, and community members ensures that these adaptive behaviors are reinforced not only in school but also in daily life, fostering a safe, supportive, and resilient educational environment where learning and teaching can thrive despite past trauma.

Methods

The intervention method applied in this program was preceded by a needs assessment phase, conducted through interviews and direct field observations, to identify psychological conditions after the conflict, levels of learning motivation, as well as factors that supported or hindered the reopening of schooling activities. Data in this phase was collected from the school principal, teachers, and several students to obtain a comprehensive picture of the real conditions in the field. The method used in this program began with a needs assessment through interviews and field observations to determine the psychological conditions after the conflict, motivation to learn, and factors that supported and hindered the resumption of schooling. Data was collected from the school principal, teachers, and several students. Based on the needs assessment results, a two-day mental health psychoeducation program was implemented using combined methods such as lectures, discussions, role plays, games, and workshops, all adapted to the participants' psychological needs. On the first day, the intervention focused on teachers and students through activities such as coloring emotional expressions, recognizing anxiety triggers, exchanging experiences, and strengthening resilience. On the second day, the program expanded to involve parents, community members, village officials, district government, and the education office, as strengthening the broader social support system is essential for ensuring the sustainability of the teaching and learning process. The results of the intervention were then evaluated using pre-test and post-test comparisons to see changes in anxiety levels, resilience, and motivation before and after psychoeducation. The evaluation was also supplemented by observations of behavioral changes and reports from the principal that teaching and learning activities were active again after the intervention. Thus, this research method combined qualitative assessment (observation and interviews) and simple quantitative evaluation through pre-tests and post-tests, then applied trauma recovery-based psychoeducation intervention to restore the psychological condition of teachers and students.

Results and Discussion

In the context of education in post-conflict areas, Maslow's theory is particularly relevant because schools cannot force students to immediately return to academic demands when their basic needs are not being met. Under normal circumstances, schools are safe and structured environments. However, in conflict areas, schools can be associated with anxiety. Therefore, post-conflict recovery must begin with interventions that can restore this perception of safety. Interventions such as psychoeducation, emotional support, group activities, and play therapy-based activities are forms of fulfilling the basic need for psychological safety, as they provide new positive experiences that replace threatening memories. Through this process, motivation to learn and teach is not forced instantly, but is built gradually according to the hierarchy of needs. The more security is created, the greater the opportunity for social needs, self-acceptance, self-esteem, and ultimately self-actualization needs to emerge, as reflected in the desire to return to learning and teaching.

Table 1. Paired Samples Statistics

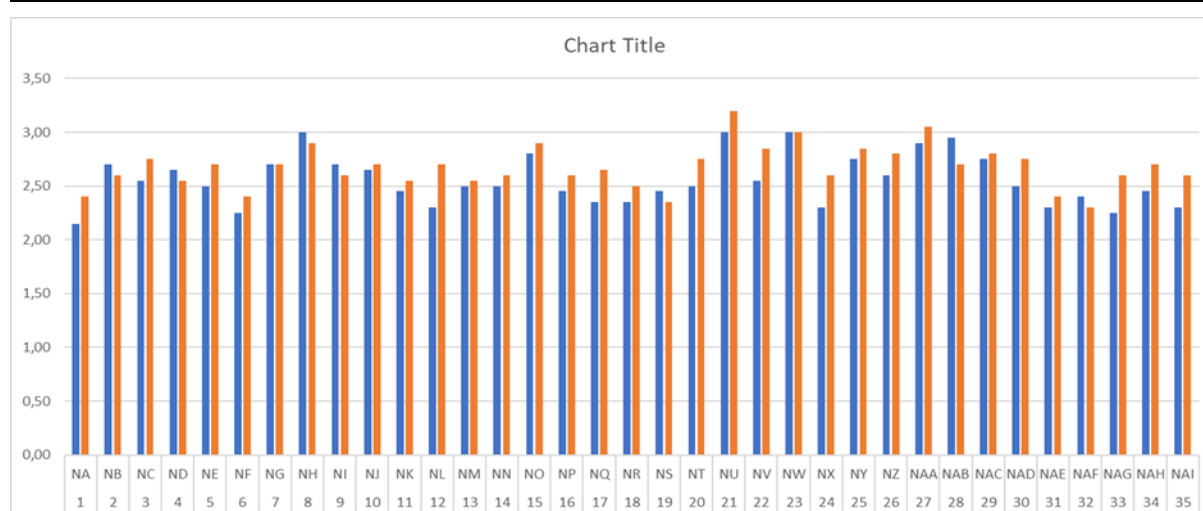
Pair	Condition	Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Before treatment	2.5571	35	0.23425	0.03960
Pair 1	After treatment	2.6757	35	0.19755	0.03339

Table 2. Paired Samples Correlations

Pair	Variables	N	Correlation	Sig.
Pair 1	Before treatment & After treatment	35	0.751	0.000

Table 3. Paired Samples Test

Pair	Mean	Std. Deviation	Std. Error Mean	95% CI Lower	95% CI Upper	t	df	Sig. (2-tailed)
Pair 1	-0.11857	0.15628	0.02642	-0.17226	-0.06489	-4.489	34	0.000



After the psychoeducation program was implemented, students who had previously been absent or were still displaced finally returned to school in Bamusbama. This psychoeducation proved to be effective in reducing anxiety, strengthening resilience, and restoring motivation to learn and teach among participants. The improvement was visible not only through behavioral changes such as the willingness of students and teachers to reengage in school but also through the overall increase in emotional stability and confidence within the school community. The return of students who initially felt unsafe to attend school shows that psychological recovery plays a central role in rebuilding the learning culture that was disrupted by conflict.

From the results of the table above, it can be concluded that mental health psychoeducation had a significant effect in reducing anxiety, increasing resilience, and enhancing learning and teaching motivation among students, which can be considered a successful intervention. Another equally important achievement is that both teachers and students have begun to actively participate again in the teaching and learning activities at Bamusbama Junior High School, marking a meaningful step toward the recovery of educational normalcy in a post-conflict environment. This also indicates that when psychological needs are addressed and social support is strengthened, educational institutions in conflict-affected areas can recover faster and more sustainably, allowing students and teachers to rebuild hope, routine, and future orientation.

Discussion

The mental health psychoeducation provided had a positive impact in reducing anxiety, increasing resilience, and restoring student motivation to learn and teacher motivation to teach at Bamusbama Junior High School. The two-day intervention resulted in immediate behavioral changes in educational activities at the school. After the psychoeducation was implemented, students began to attend school regularly again, teachers resumed active teaching, and the learning process, which had been suspended for five months, was reopened. This shows that psychological recovery is key to restoring the education system in post-conflict areas to normal. In addition, the community began to resume their daily activities as usual, and attention to the role of teachers as drivers of education also increased again.

According to Lingga (2019), the success of a mental health intervention can be evaluated from several main aspects. The first aspect is the subject of the intervention. The active participation and involvement of participants strongly determines the outcome of the intervention. This is evident in the psychoeducation at Bamusbama, where teachers and students were enthusiastic, actively joined all sessions, completed pre-tests and post-tests seriously, and responded well during role plays and games. Their involvement was not passive, but reflective and meaningful, showing that they were not only present as “participants”, but also internalizing every session as part of their personal recovery process.

The second aspect is the intervention action itself. The psychoeducation that was implemented did not merely deliver mental health theories, but also applied interactive patterns such as role playing, parent workshops, and activities to build community support networks. These methods allowed participants to not only understand the concepts cognitively, but also experience positive emotional stimulation that strengthened adaptive abilities and resilience. In other words, the intervention did not merely “teach content”, but also created corrective emotional experiences that functioned as healing processes, which is an important indicator in trauma recovery based interventions.

The third aspect is the outcome of the intervention. Its success can be seen from changes in teacher and student behavior, increased understanding of resilience, and changes in attitudes toward the teaching and learning process. These results are reinforced by the increase in the average pre-test and post-test scores (as shown in Table 3 in the document), which indicate that the psychoeducation provided positively influenced the participants’ understanding and psychological condition (Rifayanti et al., 2018). The fourth aspect refers to the success criteria that were established at the beginning of the program, namely that the minimum target was for teachers and students to be able to resume their learning and teaching roles at school. Based on the final results, this target was successfully achieved. The final aspect is the time factor, which shows that although the psychoeducation was only conducted over two days, it still had a significant impact on motivation, emotional recovery, and behavior after the conflict.

Conclusion

Based on the explanation above, it can be concluded that the main problem faced by the school community in Bamusbama is the decline in learning motivation among students and the decrease in teaching motivation among teachers, caused by the disruption of their mental health due to exposure to armed conflict. Psychoeducation intervention is the most relevant approach because it aligns with the developmental characteristics of junior high school students and fits the post-conflict condition that requires trauma recovery. Psychoeducation is not only directed at students and teachers, but also involves parents, the wider community, and village/district governments, because educational recovery cannot stand alone without the support of the surrounding social environment. Therefore, strengthening school-based trauma recovery

programs and collaborative support systems is essential to ensure that the process of restoring teaching and learning activities can run sustainably and effectively.

Suggestion

The recommendation is that there is a need for a structured psychoeducation design that can be integrated into learning materials so that mental recovery and academic recovery can proceed simultaneously. This model can also be applied to other conflict areas in Papua experiencing similar conditions so that children do not lose learning time when displacement occurs, and it can strengthen educational resilience in conflict-affected areas.

References

- Allen, L., Jones, C., Fox, A., Copello, A., Jones, N., & Meiser-Stedman, R. (2021). The correlation between social support and post-traumatic stress disorder in children and adolescents: A meta-analysis. *Journal of Affective Disorders*, 294, 543–557. <https://doi.org/10.1016/j.jad.2021.07.028> [University of Birmingham](#)
- Alzaghouli, A. F., McKinlay, A. R., & Archer, M. (2022). Post-traumatic stress disorder interventions for children and adolescents affected by war in low- and middle-income countries in the Middle East: Systematic review. *BJPsych Open*, 8(5), Article e153. <https://doi.org/10.1192/bjo.2022.552> [University of the Highlands and Islands](#)
- Arega, N. T. (2023). Mental health and psychosocial support interventions for children affected by armed conflict in low-and middle-income countries: A systematic review. *Child & Youth Care Forum*, 52(6), 1431–1456. <https://doi.org/10.1007/s10566-023-09741-0> [OpenAlex](#)
- Cafaro, C. L., Gonzalez Molina, E., Patton, E., McMahon, S. D., & Brown, M. (2023). Meta-analyses of teacher-delivered trauma-based and trauma-informed care interventions. *Psychological Trauma: Theory, Research, Practice, and Policy*, 15(7), 1177–1187. <https://doi.org/10.1037/tra0001515> [DePaul University Research Portal](#)
- Capurso, M., De Stasio, S., & Ragni, B. (2022). Universal crisis psychoeducational interventions in schools: A scoping review. *School Psychology International*, 43(4), 339–380. <https://doi.org/10.1177/01430343221104986> [Sage Journals](#)
- Herman, J. L. (1992). *Trauma and recovery: The aftermath of violence—from domestic abuse to political terror*. Basic Books. [Google Books](#)
- Herrenkohl, T. I., Hong, S., & Verbrugge, B. (2019). Trauma-informed programs based in schools: Linking concepts to practices and assessing the evidence. *American Journal of Community Psychology*, 64(3–4), 373–388. <https://doi.org/10.1002/ajcp.12362> [Wiley Online Library](#)
- Higgen, S., Mueller, J. T., & Mösko, M. (2022). Review: Universal mental health interventions for young students in adverse environments—A systematic review of evaluated interventions. *Child and Adolescent Mental Health*, 27(3), 281–293. <https://doi.org/10.1111/camh.12493> [ACAMH](#)
- Hobfoll, S. E., Watson, P., Bell, C. C., Bryant, R. A., Brymer, M. J., Friedman, M. J., Friedman, M., Gersons, B. P. R., de Jong, J. T. V. M., Layne, C. M., Maguen, S., Neria, Y., Norwood, A. E., Pynoos, R. S., Reissman, D., Ruzek, J. I., Shalev, A. Y., Solomon, Z., Steinberg, A. M., & Ursano, R. J. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. *Psychiatry: Interpersonal and*

- Biological Processes*, 70(4), 283–315. <https://doi.org/10.1521/psyc.2007.70.4.283> PubMed
- Jordans, M. J. D., Pigott, H., & Tol, W. A. (2016). Interventions for children affected by armed conflict: A systematic review of mental health and psychosocial support in low- and middle-income countries. *Current Psychiatry Reports*, 18, Article 9. <https://doi.org/10.1007/s11920-015-0648-z> Springer
- Lange, B. C. L., Nelson, A., Lang, J. M., & Stirman, S. W. (2022). Adaptations of evidence-based trauma-focused interventions for children and adolescents: A systematic review. *Implementation Science Communications*, 3, Article 108. <https://doi.org/10.1186/s43058-022-00348-5> Springer
- Lingga, B. (2019). Manajemen asuhan keperawatan sebagai acuan keberhasilan intervensi keperawatan. <https://doi.org/10.31219/osf.io/eb45w>
- Masten, A. S. (2014). Global perspectives on resilience in children and youth. *Child Development*, 85(1), 6–20. <https://doi.org/10.1111/cdev.12205> DOI
- Masten, A. S. (2021). Resilience in developmental systems: Principles, pathways, and protective processes in research and practice. In M. Ungar (Ed.), *Multisystemic resilience: Adaptation and transformation in contexts of change* (pp. 113–134). Oxford University Press. <https://doi.org/10.1093/oso/9780190095888.003.0007> Experts@Minnesota
- Maynard, B. R., Farina, A., Dell, N. A., & Kelly, M. S. (2019). Effects of trauma-informed approaches in schools: A systematic review. *Campbell Systematic Reviews*, 15(1–2), e1018. <https://doi.org/10.1002/cl2.1018> PubMed
- Newton, L., Keane, C. A., & Byrne, M. K. (2024). Trauma-informed programs in Australian schools: A systematic review of design, implementation and efficacy. *Children and Youth Services Review*, 156, Article 107368. <https://doi.org/10.1016/j.childyouth.2023.107368> Charles Darwin University
- Parrott, E., Lomeli-Rodriguez, M., Rahman, A., Direzkia, Y., Bernardino, A., Burgess, R., & Joffe, H. (2024). Fostering resilient recovery: An intervention for disaster-affected teachers in Indonesia. *SSM - Mental Health*, 6, Article 100355. <https://doi.org/10.1016/j.ssmmh.2024.100355> LJMU Research Online
- Raniti, M., Rakesh, D., Patton, G. C., & Sawyer, S. M. (2022). The role of school connectedness in the prevention of youth depression and anxiety: A systematic review with youth consultation. *BMC Public Health*, 22(1), Article 2152. <https://doi.org/10.1186/s12889-022-14364-6> King's College London
- Rifayanti, R., Saputri, A., Arake, A. K., & Astuti, W. (2018). Peran role model dalam membentuk perilaku pro-lingkungan. *Psikostudia: Jurnal Psikologi*, 7(2), 12-23.
- Shamsi, A., & Khalili, R. (2026). A systematic review of psychosocial interventions for children affected by armed conflict: Mapping what works, for whom, and under what conditions. *BMC Psychology*, 14, Article 1219. <https://doi.org/10.1186/s40359-026-04726-9> Springer
- Slone, M., & Peer, A. (2021). Children's reactions to war, armed conflict and displacement: Resilience in a social climate of support. *Current Psychiatry Reports*, 23(11), Article 76. <https://doi.org/10.1007/s11920-021-01283-3> Israeli Research Community Portal

- Teicher, M. H., & Samson, J. A. (2016). Annual research review: Enduring neurobiological effects of childhood abuse and neglect. *Journal of Child Psychology and Psychiatry*, 57(3), 241–266. <https://doi.org/10.1111/jcpp.12507> PubMed
- Tol, W. A., Komproe, I. H., Susanty, D., Jordans, M. J. D., Macy, R. D., & de Jong, J. T. V. M. (2008). School-based mental health intervention for children affected by political violence in Indonesia: A cluster randomized trial. *JAMA*, 300(6), 655–662. <https://doi.org/10.1001/jama.300.6.655> PubMed
- van der Kolk, B. A. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. Viking.