



Nationaal
Psychotrauma
Centrum

Generaties en trauma alertering

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Familiepatronen kunnen worden overgedragen van generatie op generatie wat betreft gevoelens, gedragingen en herinneringen. In het onderbewuste worden herinneringen opgeslagen. Het zijn met name de niet verwerkte verlieservaringen en trauma's die apart worden opgeslagen en een individu kan sturen in het opnieuw creëren van situaties waar zijn of haar (voor)ouders zich in bevonden.

Regelmatig zet de ARQ-bibliotheek nieuwe publicaties over *Generaties en trauma* op deze lijst. Voor eventuele fulltext of voor eerdere updates kunt u ook mailen naar de [ARQ-bibliotheek](#). Deze alertering en meer vindt u ook in ons [themadossier Generaties en Trauma](#)

Atari-Khan, R., Alshabani, N., Rabgay, S. D., Elhedk, F. R., Clifford, A., Gomariz, S., & Sahib, W. (2024). Understanding intergenerational trauma among Arab, Middle Eastern, and North African (Arab/MENA) Americans. *Qualitative Psychology*, No Pagination Specified-No Pagination Specified. <https://doi.org/10.1037/qap0000310>

Arab, Middle Eastern, and North African Americans experience various forms of racial–ethnic trauma in the United States, including historical and intergenerational trauma (IGT). The population has been migrating to the United States since the 1800s, and the number of migrants has risen in recent decades due to war, persecution, and family reunification. As a result, the children of these migrants may be exposed to IGT, with research suggesting that descendants of individuals who have experienced trauma are more susceptible to poor mental health outcomes. Using semistructured interviews, alongside the art of storytelling and empowerment through critical consciousness, this study investigated how IGT may be transmitted to Arab, Middle Eastern, and North African second-generation immigrants in the United States. Data from 12 participants were analyzed using interpretative phenomenological analysis. Two superordinate themes were identified from the interviews and included (a) process of IGT and (b) family communication. The first superordinate theme included the following subthemes: historical family context, perceived parent trauma responses, transmission of emotional pain, and immigrant guilt. The second superordinate theme included the following subthemes: silence, avoidance of emotion, intergenerational storytelling, and responsibility to pass down stories. Clinical and research implications are examined, emphasizing the integration of storytelling into research studies to enhance meaning-making for both participants and researchers. For clinicians, the application of narratives in therapeutic work is explored as a potential healing mechanism in individual and group therapy settings. (PsycInfo Database Record (c) 2024 APA, all rights reserved)

Blackwell, C. K., Cella, D., & Mansolf, M. (2024). Intergenerational transmission of adverse and positive childhood experiences and associations with child well-being. *Child Abuse & Neglect*, 157, 107050. <https://doi.org/10.1016/j.chiabu.2024.107050>

Background Parental adverse childhood experiences (ACEs) contribute to offspring adversity and poor health outcomes, but little is known about whether and to what extent parental positive childhood experiences (PCEs) influence offspring positive experiences and well-being. Objective To investigate the association between parent and child ACEs and PCEs and their impact on child well-being and psychopathology. Participants and setting A national sample of $n = 1016$ US parents of 1–5-year-olds completed online surveys in September 2019. Methods Mediation analysis in a path modeling framework was used with stratified probability weights for generalizability to the US population. Results Each additional parent PCE equated to 0.32 (95 % CI: 0.20, 0.45) increase in child PCEs and each additional parent ACE equated to 0.18 (95 % CI: 0.06, 0.31) increase in child PCEs and 0.13 (95 % CI: 0.08, 0.18) increase in child ACEs. In turn, an increase in 1 child PCE was associated with 0.10–0.16 SD increase in well-being and 0.06–0.10 decrease in psychopathology, and each additional child ACE equated to 0.10–

0.18 SD increase in psychopathology. Conclusions Results support the intergenerational transmission of PCEs and ACEs, advancing understanding of the role that parent PCEs play in promoting child PCEs and fostering child well-being. Findings underscore the importance of extending clinical surveillance of ACEs to include PCEs in pediatric and adult healthcare settings. Dual-generation programs that address the negative consequences of parental ACEs may be able to increase their impact by adding a parallel emphasis on PCEs and providing parents with tools to foster PCEs in their children.

Boer, B. de. (2024). *Het verband tussen Ouderlijke PTSS Symptomen en Internaliserende Problemen bij Jonge Vluchtelingkinderen Met Geslachtsafhankelijke Verschillen* [Master Thesis].
<https://studenttheses.uu.nl/handle/20.500.12932/48121>

Momenteel is er een wereldwijde groeiende vluchtelingenpopulatie, met een verscheidenheid aan mentale problemen. Het is essentieel om de impact van de psychische gezondheid van ouders op het welzijn van kinderen binnen deze gemeenschappen te begrijpen, zodat er gerichte en effectieve interventies ontwikkeld kunnen worden waar zowel ouder als kind baat bij hebben. Het huidige cross-sectionele onderzoek richt zich op de relatie tussen ouderlijke posttraumatische stressstoornis (PTSS) symptomen en internaliserende problemen bij jonge vluchtelingkinderen (2-6 jaar), met speciale aandacht voor mogelijke geslachtsafhankelijke verschillen. Participanten uit Syrië en Oekraïne (N=25) hebben vragenlijsten ingevuld voor inzicht in internaliserende problematiek van de kinderen en vaststelling van PTSS-symptomen. De resultaten tonen een positieve associatie tussen ouderlijke PTSS-symptomen en internaliserende problemen bij kinderen, maar deze was niet statistisch significant. Additionele analyses onthulden een significante relatie tussen ouderlijke PTSS-symptomen en problemen met leeftijdsgenoten bij kinderen. Geslachtsafhankelijke verschillen werden niet significant bevonden. Deze bevindingen benadrukken het belang van het begrijpen van de impact van ouderlijke PTSS op de mentale gezondheid van vluchtelingkinderen en wijzen op de behoefte aan gerichte interventies om deze kwetsbare populatie te ondersteunen.

Darves-Bornoz, J.-M. (2024). Intergenerational transmission of resilience, resistance and trauma: Philosophical persistency in existential analysis. *In Analysis*, 8(3), 100468.
<https://doi.org/10.1016/j.inan.2024.100468>

Context Resilience is implicitly thought to be a capacity that some have without having done much to obtain it, so that the notion of resistance to existential wounds, such as trauma among others, remains necessary. Resistance does not always cause healing and fulfillment, especially in child trauma, but it is legitimate to embark on it. All therapies consist in resuming a development, whatever the blockage that stopped it: existential or organic, current or archaic, due to a personality or temperament. They attempt thus an intergenerational neo-transmission. Objective This article defends five theoretical theses that are equally useful in practice and technique. They underline the strength of existential psychoanalysis, as each individual appears dissimilar in the face of a potential narcissistic wound, including trauma. Method Five paragraphs in the article first summarize a thesis in their title, and then explain its roots and extent. Their arguments rely on observational and epidemiological clinics, as well as psychodynamic and philosophical theories. In trauma, we parallel theory and technique with practice to approach knowledge. Helping survivors often excludes their confrontation to an experimental repetition, with or without some mathematical methodology. Results (1) Perceptions are not neutral. Any event, narcissistic wound or trauma is perceived by the subjects through their own vision of the world, which can then fracture. Subjects should reconstruct their perception of the world, but they do not always do that. (2) Resistance spontaneously evokes military fight or, in a psychoanalytical framework, a psychological obstruction by patients. The meaning of resistance in our case is different. Resisting a traumatic destruction is an emotional and intellectual effort to move beyond stupefying awareness. (3) Existence fragments the psyche, but not necessarily up to pathology. Trauma often dissociates fragments, whereas other experiences rarely so isolate. (4) The intergenerational transmission of internal images, from psyche to psyche, influences exposure to adverse events. It also exists, once the event occurred, an intergenerational transmission of vulnerability or resistance to trauma: it refers less to the fragmentation

of psyche than to the transmission – or not – of associative praxis enabling a conversation between the individualized sectors of psyche. (5) All psychoanalyses move thoughts from fragments of the psyche to others. Associating these fragments frees thought and prevents mistakes. Associative effort on internal images makes identity truer. It frees from repetitions and alienating identifications. Otherwise, an alienated or poorly associative self would remain unaware of the close link of some dissociated fragments. Conclusion The ideas presented here emerged insistently throughout decades of interventions and diverse human practices (Europe, Middle East, Americas). While the most common therapies today are described by their own proponents as useless for persistent traumatic states, on the contrary, existential psychoanalysis appears appropriate to authentically base an existence. Furthermore, it treats symptoms: notably, it reduces the recourse to dissociative archaic defenses, whether expressed psychologically or physically. However, it aims elsewhere. Existential psychoanalysis seeks to reveal to subjects that they are abdicating their freedom if they consider received ideas about the world as free choices.

Gillen, M., Goodman, A., Danaher, F., Bosson, R., Greenwald, M., & Jasrasaria, R. (2024). Intergenerational Trauma and Resilience among Im/Migrant Families: Child Mental Health Outcomes and Psychosocial Mechanisms of Transmission. *Health, 16*(10), 888–920.

<https://doi.org/10.4236/health.2024.1610063>

Research Background: Psychological stressors leading to poor mental health outcomes accumulate throughout the migration process. The impact of a parent or caregiver's posttraumatic stress on non-traumatized children is significant and may lead to adverse development and mental health outcomes. Research Objectives: The objective of this review is to explore both the consequences of parental trauma transmission on descendants' psychological adjustment and well-being, and the mechanisms through which trauma has been transmitted among im/migrant populations. Methods: Criteria outlined in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) statement guided this systemic review. The questions guiding this review are: (a) What are the consequences of parental trauma transmission on the psychological adjustment and well-being of im/migrant offspring? And (b) What are the psychosocial mechanisms of trauma and resilience transmission among im/migrant populations? Each potential study was assessed based on relevance to the review question(s). Results: Parental trauma can lead to adverse mental health outcomes among descendants including increased internalizing and externalizing problems, the adoption of coping behaviors and worldviews, and worsening school performance. Mechanisms that influence trauma transmission include parental trauma symptom severity, the parent-child dyad, social learning, and family stressors. Pathways of resilience exist across socioecological levels to include individual resilience such as coping skills and meaning making, family resilience, structural protective factors, and social and cultural protective factors. Conclusions: Despite the prevalence of traumatic events throughout the migration process, im/migrant families display strong levels of resilience. Mental health services and providers should incorporate a strength-based approach in designing interventions that are culturally responsive and take into accounts the broader ecological contexts in which im/migrant families live.

Huang, A. Y., Bonumwezi, J., Wang, K., Mew, E. J., Habintwali, D., & Lowe, S. R. (2024). Childhood Trauma as a Mediator of Intergenerational PTSD Symptom Transmission in Rwanda: A Cross-Sectional Study. *Journal of Loss and Trauma, 0*(0), 1–24. <https://doi.org/10.1080/15325024.2024.2422610>

Research on intergenerational trauma (IGT) indicates a link between parent and offspring PTSD symptoms. Studies suggest that parents' PTSD symptoms could contribute to harsh parenting practices, such as childhood maltreatment, in turn increasing risk for PTSD symptoms in their offspring. However, the potential mediating role of cumulative and subtypes of offspring childhood trauma in intergenerational PTSD symptom transmission, along with the impact of parental sex, remain understudied. This cross-sectional study examined whether the link between parent and offspring PTSD symptoms among survivors of the 1994 genocide against the Tutsi in Rwanda to their offspring was mediated by cumulative and subtypes of offspring childhood trauma, and how these relationships vary by parental

sex. Adult children of genocide survivors, all born after the genocide (N = 166; Mage=23.03, SD = 1.94; 47.6% female), completed an online survey. We performed a series of models investigating childhood trauma as a mediator of maternal and paternal IGT transmission. We found significant indirect effects of maternal PTSD symptoms on offspring secondary PTSD symptoms via sexual abuse and physical neglect, and of paternal PTSD symptoms on offspring secondary PTSD symptoms via cumulative childhood trauma, sexual abuse, and physical abuse. The findings demonstrate variation in IGT via childhood trauma subtypes and parental sex. Future research, including longitudinal and multi-informant studies, should examine these sources of variation further to provide insight into how interventions could be tailored to prevent and mitigate the intergenerational transmission of PTSD symptoms.

Karamehić-Muratović, A., & Kromják, L. (2024). [The Elephant in the Room: Experiences of Intergenerational Trauma in Second-Generation Bosnian Americans](#). In *Intergenerational Trauma in Refugee Communities*. Routledge.

With nearly 30 years after the end of the 1992–1995 Bosnian genocide, questions about the intergenerational effects of traumatic memories among Bosnian Americans remain critical considering that trauma passed down to progeny is cumulative. Based on oral histories and interviews conducted by the Center for Bosnian Studies and the Bosnian Family and Youth Study in St. Louis, Missouri, several themes relevant to trauma among second-generation youth emerged. First, the youth grapple with their parents' war experiences, and the employment of post-traumatic stress disorder (PTSD) as a “trope” central to one's traumatic story becomes a validated social determinant of behavior among families. Second, a tension in the scarce and prolonged communication of knowledge about the past is bound up with the parental dilemma of whether to silence or voice traumatic memories. Third, an identity crisis as youth struggle both as a Bosnian and an American can be related to an intergenerational dissonance in how to remember and communicate past trauma. Fourth, the youth's rationalization of parental experiences of trauma and survival can facilitate positive communication in families, and strengthen identity construction. Together, the themes related to traumatic war experiences and memories gleaned from narratives of Bosnian American youth suggest that intergenerational trauma characterizes interactions among first- and second-generation Bosnian Americans, and child–parent relationships specifically.

Kler, S. (2024, November). *A Constructivist Grounded Theory Exploration of Intergenerational Trauma Among LGBTQ+ BIPOC Individuals - ProQuest*.

<https://www.proquest.com/openview/869823196fa9288e55ca8411de8db292/1?pq-origsite=gscholar&cbl=18750&diss=y>

Many scholars have argued that existing conceptualizations of trauma such as the Diagnostic and Statistical Manual of Mental Disorders (5th Ed.; DSM-5) conceptualization are inapplicable for individuals of marginalized communities. Individuals of marginalized communities may experience historical trauma, racial trauma, identity-related trauma, or collective trauma. Moreover, the effects of these forms of trauma may persist throughout different generations via biological transmission (eg, epigenetics) or via interpersonal transmission (eg, emotion socialization, cultural socialization, attachment, communication styles, behavioral socialization). The generational effects of these forms of trauma are referred to as intergenerational trauma. There has been a paucity of empirical explorations of intergenerational trauma, especially among those with multiple marginalized identities (eg, LGBTQ+ BIPOC individuals). This study explored experiences of intergenerational trauma and healing among 10 LGBTQ+ BIPOC individuals through semi-structured interviews. Their responses were analyzed using constructivist grounded theory methodology and the Intergenerational Trauma Experiences and Healing (ITEH) model was generated to describe the social processes involved in the participants' experiences of intergenerational trauma. The ITEH model involves several social processes including: (a) experiencing multifaceted forms of intergenerational trauma, (b) carrying intergenerational trauma's impacts on the self, (c) seeing intergenerational trauma's impact on others/generations, and (d) healing from

intergenerational trauma. Research, clinical, and advocacy implications of the ITEH model are discussed.

Liu, A. Y., Gubbels, J., & Orobio de Castro, B. (2024). The Effectiveness of Trauma-Informed Parenting Programs for Traumatized Parents and Their Components: A Meta-Analytic Study. *Clinical Child and Family Psychology Review*. <https://doi.org/10.1007/s10567-024-00503-5>

Parents who have been exposed to trauma face distinct challenges in parenting that can lead to negative child developmental outcomes and intergenerational transmission of trauma. Parenting programs for traumatized parents seem promising, but the existing evidence on their effectiveness has not yet been synthesized. This study aimed to examine the overall effect of trauma-informed parenting programs on (a) parenting and (b) parental mental health outcomes by conducting two three-level meta-analyses. Moderator analyses were performed to identify whether program components, delivery techniques, and other study and program characteristics were associated with effectiveness. A literature search conducted up to August 2024 yielded 15 studies reporting on 110 effect sizes. Significant overall effects were found of trauma-informed parenting programs on both parenting outcomes ($d = 0.75$, 95% CIs = [0.09, 1.15], $p = .027$) and parental mental health outcomes ($d = 0.21$, 95% CIs = [0.09, 0.32], $p < .001$). The first meta-analysis on parenting found no significant moderators, while the second meta-analysis on parental mental health indicated that programs emphasizing child disciplining skills yielded smaller effects ($d = 0.04$) compared to programs without this component ($d = 0.31$). Programs using modeling techniques yielded larger effects ($d = 0.32$) compared to programs without ($d = 0.14$). Larger program effects on parental mental health were also found for programs with longer durations and when individual sessions were used. Thus, evidence supports the effectiveness of trauma-informed parenting programs in improving parenting and reducing parental mental health problems.

Marambire, E. T., Abdulahi, A., Wondie, A., Gize, A., Mekonnen, A. T., Khadka, K., Manhica, I., Quinn, N., Saiwal, N., Mufune, T., Valiyakath, V. Q., & Froeschl, G. (2024). Intergenerational impact of drought and famine on health systems in developing countries – symposium proceedings. *BMC Proceedings*, 18(23), 24. <https://doi.org/10.1186/s12919-024-00310-4>

The 2024 edition of the One Health symposium explored the intergenerational health impacts of drought and famine in developing countries, with a focus on innovative strategies for resilience-building in healthcare infrastructures. Organized by students of the CIHLMU Center for International Health at Ludwig-Maximilians-Universität Munich, Germany, the event convened experts and participants from diverse backgrounds to address the urgent challenges posed by climate change-induced crises. Through presentations, panel discussions, and collaborative exchanges, the symposium underscored the profound health and socioeconomic implications of climate-related disasters, emphasizing the need for cross-sectoral cooperation and transformative action. Key recommendations emerged, including integrating climate change considerations into health systems, fostering multidisciplinary collaboration, and empowering communities to withstand future challenges. Despite the severity of the current situation, the symposium instilled optimism and determination among participants, inspiring a collective commitment to building a brighter and more resilient future for generations to come.

Montanari, S., Terenzi, B., Spera, M. C., Donofrio, G., Chieffo, D. P. R., Monti, L., Kotzalidis, G. D., Sani, G., & Janiri, D. (2024). Intergenerational transmission of childhood trauma in youths with mood disorders and their parents. *Journal of Affective Disorders*. <https://doi.org/10.1016/j.jad.2024.11.013>

Objective Childhood trauma is a significant environmental stressor linked to mood disorder. It can affect not only the individuals directly involved but also the next generation through the intergenerational transmission of trauma. This study aimed to investigate, for the first time, the co-occurrence of childhood trauma in youths with mood disorders and their parents. Methods We assessed 443 individuals, 100 youths with DSM-5 mood disorders, 100 youths healthy controls (HCs), 92 s' parents and 161 adult HCs. History of childhood trauma was obtained using the Childhood Trauma Questionnaire (CTQ). The distribution patterns of childhood trauma subtypes was estimated through a multivariate model.

Intraclass correlations (ICC) were calculated to account for the familial clustering of the sample. Results We found significantly higher scores for Patients as compared to Young-HC in all the subtypes of childhood trauma ($p < 0.05$). Considering Parents and Adult-HC groups, Physical abuse ($p = 0.001$) and Emotional neglect showed higher scores in Parents ($p < 0.001$). Regarding the familial clustering of the sample, emotional ($p < 0.001$) and sexual abuse ($p = 0.001$), and emotional ($p = 0.3$) and physical neglect ($p = 0.003$) showed statistical significance, but only emotional abuse revealed a medium level ICC (0.25). Conclusions Our study highlights the effect of intergenerational transmission of childhood trauma on the diagnosis of mood disorders in youths. Our findings underscore the significance of systematically assessing childhood trauma, in particular emotional abuse, in youths with mood disorders and their parents. Additionally, there is urgent need for evidence-based preventive measures aimed at promoting positive parenting strategies and emotionally supportive environments for children.

Otten, R., & Ha, T. (2024). Towards a better understanding of inequity and the psychological processes underlying the intergenerational transmission of socioeconomic status. *Social Science & Medicine*, 360, 117330. <https://doi.org/10.1016/j.socscimed.2024.117330>

As poverty in the U.S. is increasing and the income gap continues to rise, addressing disparities in socioeconomic status (SES) has become a national priority. This study employs the Interactionist Model, a well-established theoretical framework for examining the intergenerational transmission of SES. Specifically, using longitudinal data from a sample of 998 adolescents, 47.2% of whom are females, from diverse ethnic backgrounds, we investigated how parents' SES influences both their material and immaterial resources, and subsequently affects their offspring's SES through inhibitory control during adolescence. Our findings support an indirect effect wherein parental SES influences the SES of the next generation via parental material and immaterial investments. Additionally, we demonstrate that immaterial investments influence the next generation's SES, mediated by inhibitory control. The implications of these findings are further discussed.

Parolin, Z., Pintro-Schmitt, R., Esping-Andersen, G., & Fallesen, P. (2024). Intergenerational persistence of poverty in five high-income countries. *Nature Human Behaviour*, 1–14. <https://doi.org/10.1038/s41562-024-02029-w>

Childhood poverty increases the likelihood of adult poverty. However, past research offers conflicting accounts of cross-national variation in the strength of—and mechanisms underpinning—the intergenerational persistence of poverty. Here the authors investigate differences in intergenerational poverty in the United States, Australia, Denmark, Germany and the United Kingdom using administrative- and survey-based panel datasets. Intergenerational poverty is decomposed into family background effects, mediation effects, tax and transfer insurance effects and a residual poverty penalty. The intergenerational persistence of poverty is 0.43 in the United States (95% confidence interval (CI) = 0.40–0.46; $P < 0.001$), compared with 0.16 in the United Kingdom (95% CI = 0.07–0.25; $P < 0.001$) and 0.08 in Denmark (95% CI = 0.08–0.08; $P < 0.001$). The US disadvantage is not channelled through family background, mediators, neighbourhood effects or racial or ethnic discrimination. Instead, the United States has comparatively weak tax and transfer insurance effects and a more severe residual poverty penalty. If the United States were to adopt the tax and transfer insurance effects of its peer countries, its intergenerational poverty persistence could decrease by more than one-third.

Weststrate, N. M., Turner, K., & McLean, K. C. (2024). Intergenerational Storytelling as a Developmental Resource in LGBTQ+ Communities. *Journal of Homosexuality*, 71(7), 1626–1651. <https://doi.org/10.1080/00918369.2023.2202295>

LGBTQ+ people continue to be threatened by systemic censorship and erasure in public spaces and discourses, making community-based resources for positive development crucial. In this study, we examined one such developmental resource—LGBTQ+ intergenerational storytelling about cultural-historical events. LGBTQ+ adults ($N = 495$) ranging in age from 17 to 80 years ($M = 39.22$, $SD = 19.89$) responded to an online survey about LGBTQ+ intergenerational storytelling and relationships. Results

showed that although LGBTQ+ intergenerational storytelling was reported to occur infrequently, sharing stories across generations was considered important, and LGBTQ+ people desired even greater intergenerational connection. Intergenerational narratives reported by participants were primarily about cultural-historical events involving adversity and oppression (e.g. AIDS crisis), policy and legislation (e.g. marriage equality), and protest, resistance, and activism (e.g. Stonewall uprising). Stories were mostly told by older friends in private or social settings for the purpose of passing on LGBTQ+ history. Lessons learned through storytelling were diverse but tended to focus on appreciation and affirmation. Valuing intergenerational storytelling was associated with positive psychosocial identity. This study suggests that intergenerational storytelling may be an important developmental resource for LGBTQ+ people and other marginalized communities.

Zha, J., Li, R., He, H., Fang, P., Huang, R., Xing, T., & Wan, Y. (2024). The chain mediating role of parenting stress and child maltreatment in the association between maternal adverse childhood experiences and executive functions in preschool children: a longitudinal study. *Child and Adolescent Psychiatry and Mental Health*, 18(1), 145. <https://doi.org/10.1186/s13034-024-00837-6>
Previous researches found that maternal adverse childhood experiences not only affect the psychological behavior of preschool children, but also have direct or indirect negative effects on the executive functions and cognition of offspring. And, the possible social psychological mechanism between maternal adverse childhood experiences and preschool children's executive functions is still not clear.