



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](#)

Beeghly, M. (2024). Toward a multi-level approach to the study of the intergenerational transmission of trauma: Current findings and future directions. *Development and Psychopathology*, 1–6.
<https://doi.org/10.1017/S0954579424000555>

A central goal in the field of developmental psychopathology is to evaluate the complex, dynamic transactions occurring among biological, psychological, and broader social-cultural contexts that predict adaptive and maladaptive outcomes across ontogeny. Here, I briefly review research on the effects of a history of childhood maltreatment on parental, child, and dyadic functioning, along with more recent studies on the intergenerational transmission of trauma. Because the experience and sequelae of child maltreatment and the intergenerational transmission of trauma are embedded in complex biopsychosocial contexts, this research is best conceptualized in a developmental psychopathology framework. Moreover, there is a pressing need for investigators in this area of study to adopt dynamic, multi-level perspectives as well as using developmentally guided, sophisticated research methods. Other directions for research in this field are suggested, including the implementation of collaborative interdisciplinary team science approaches, as well as community-based participatory research, to increase representation, inclusion, and equity of community stakeholders. A greater focus on cultural and global perspectives is also recommended.

Békés, V., & Starrs, C. J. (2024). Assessing transgenerational trauma transmission: development and psychometric properties of the Historical Intergenerational Trauma Transmission Questionnaire (HITT-Q). *European Journal of Psychotraumatology*, 15(1), 2329510. <https://doi.org/10.1080/20008066.2024.2329510>
Objective/Background: Despite increasing attention on transgenerational trauma, currently no comprehensive model and measure exists to be applied on various populations. This study represents the first step in the validation of such a model and a related scale. The Historical Intergenerational Trauma Questionnaire (HITT-Q) assesses family and offspring self-reported vulnerability and resilience, as well as offspring historical moral injury and current levels of insidious trauma. Method: We developed the HITT-Q based on the cross-population model (HITT model; [Starrs, C. & Békés, V. (2024). Historical and transgenerational trauma: A conceptual framework. *Traumatology*. In Press]) which incorporates key findings in existing population specific studies. For initial validation of the model and its measurement, Holocaust survivors' offspring (N = 1104) completed the HITT-Q, measures of current mental health symptoms (PTSD, C-PTSD, anxiety, and depression), and a resilience scale. Results: In line with the HITT model, confirmatory factor analyses supported a 12-factor solution with the following factors under theorized dimensions: I. Family Vulnerability: (1) Dysregulated and Trauma-related Communication; (2) Trauma-influenced Parenting, (3) Fear; (4) Distress; II. (5) Family Resilience, III. Offspring Vulnerability: (6) Escape; (7) Heightened Responsibility; (8) Trauma-related distress; IV. Offspring Resilience: (9) Coping; (10) Belonging; (11) Values; V. (12) Historical Moral injury. The 12-factor model showed acceptable to good internal validity, and comparison with an existing measure of transgenerational Holocaust trauma indicated good concurrent validity. Finally, the HITT-Q demonstrated predictive validity for mental health symptoms and current resilience. Conclusions: The current study represents the first step in validating the HITT-Q as a comprehensive measure of historical intergenerational vulnerability and resilience. Our findings provide strong support for the underlying model, and suggest that the HITT-Q represents a valuable scale for both research and historical trauma-informed care. The papers provides support for the underlying model of historical and transgenerational trauma. Findings showed that the Historical Intergenerational Trauma Questionnaire (HITT-Q) has 12 factors, and that it has good psychometric qualities, including internal, concurrent, and predictive validity. The Historical Intergenerational Trauma Questionnaire (HITT-Q) represent a valuable scale for both research and historical trauma-informed care. The papers provides support for the underlying model of historical and

transgenerational trauma. Findings showed that the Historical Intergenerational Trauma Questionnaire (HITT-Q) has 12 factors, and that it has good psychometric qualities, including internal, concurrent, and predictive validity. The Historical Intergenerational Trauma Questionnaire (HITT-Q) represent a valuable scale for both research and historical trauma-informed care.

Bonumwezi, J. L., Grapin, S. L., Uddin, M., Coyle, S., Habintwali, D., & Lowe, S. R. (2024). Intergenerational trauma transmission through family psychosocial factors in adult children of Rwandan survivors of the 1994 genocide against the Tutsi. *Social Science & Medicine*, 348, 116837. <https://doi.org/10.1016/j.socscimed.2024.116837> Thirty years after the 1994 genocide against the Tutsi in Rwanda, children of survivors are being increasingly documented to be at higher risk compared to their peers for adverse mental health outcomes. However, no studies in Rwanda have empirically explored family psychosocial factors underlying this intergenerational transmission of trauma. We investigated family psychosocial factors that could underlie this transmission in 251 adult Rwandan children of survivors (mean age = 23.31, SD = 2.40; 50.2% female) who completed a cross-sectional online survey. For participants with survivor mothers (n = 187), we found that both offspring-reported maternal trauma exposure and maternal PTSD were indirectly associated with children's PTSD via maternal trauma communication (specifically, nonverbal and guilt-inducing communication), and that maternal PTSD was indirectly associated with children's PTSD, anxiety, and depression symptoms through family communication styles. For participants with survivor fathers (n = 170), we found that paternal PTSD symptoms were indirectly associated with children's anxiety and depression symptoms via paternal parenting styles (specifically, abusive and indifferent parenting). Although replication is needed in longitudinal research with parent-child dyads, these results reaffirm the importance of looking at mass trauma in a family context and suggest that intergenerational trauma interventions should focus on addressing family communication, trauma communication, and parenting.

Bragman, A. (2024). *A prospective longitudinal investigation of the intergenerational transmission of intimate partner violence stemming from childhood exposure to inter-parental violence*. [Thesis]. <https://DalSpace.library.dal.ca/handle/10222/83870>

Intimate partner violence (IPV) is the most common form of violence against women. One hypothesized risk factor for victimization in women is their childhood exposure to IPV, suggesting the intergenerational transmission of IPV behaviour and its acceptance. This project sought (1) To observe the variation in childhood exposure to inter-parental violence in terms of the timing, form, and duration of exposure and (2) How the observed variation influences susceptibility to future IPV victimization in young adulthood. Using data from the Avon Longitudinal Study of Parents and Children, this study found exposure to psychological inter-parental violence to be highly prevalent and that most females were only exposed in one developmental stage (most commonly: late childhood). Childhood exposure (0-8) to inter-parental violence was associated with the highest likelihood of experiencing IPV victimization in young adulthood. Although preliminary evidence of intergenerational transmission of IPV was found, future studies are required to validate findings.

Graf, S., & Schechter, D. S. (2024). The Impact of Maternal Interpersonal Violent Trauma and Related Psychopathology on Child Outcomes and Intergenerational Transmission. *Current Psychiatry Reports*, 26(4), 166–175. <https://doi.org/10.1007/s11920-024-01491-7>

This review aims to outline some consequences that maternal history of trauma with and without related psychopathology, such as posttraumatic stress symptoms (PTSS), can have on their children's development and functioning. It then addresses mechanisms through which intergenerational transmission of interpersonal violence (IPV) and related psychopathology may occur.

Hajt6, V. (2024). "The Past Must Be Given a Place": Migration, Intergenerational Transfer, and Cultural Memory Practices in Belgian Families of Hungarian Descent. *HUNGARIAN HISTORICAL REVIEW: NEW SERIES OF ACTA HISTORICA ACADEMIAE SCIENTIARUM HUNGARICAE*, 12(4), 555–575. <https://hunghist.org>

This article investigates the intergenerational effects of migration on the memories of Belgian families of Hungarian origin, focusing specifically on how these effects can prompt the second and third generations of migrant families to bring their private memories and identity constructions into the public sphere. Their social participation becomes a crucial element in their quest to uncover their families' histories. While the memory of the migration experience was initially contained in the "archive" (the private sphere), it eventually transitions into the "canon" (the public sphere), becoming accessible to those outside the family circle. Using published biographies of second-generation members about their immigrant parents, photographic images, texts of a theatre play, group conversations on social media (Facebook), and interviews with members of the second and third generations, this article offers a varied source material to explore these questions. By pushing the boundaries of historical research and memory studies, it

demonstrates that the memories of migration can have longlasting effects that connect people and families with larger communities and the social sphere.

JohnAyala, A. (2024). Blacks' Intergenerational Trauma Triggered by Police Misconduct. *Doctoral Dissertations and Projects*. <https://digitalcommons.liberty.edu/doctoral/5282>

A plethora of studies on intergenerational trauma and a nascent body of studies regarding policing are amalgamated in this phenomenological research approach. This phenomenological study aimed to understand the adverse experiences of Black individuals' interactions with law enforcement and how these involvements contribute to the transmission of trauma. The intergenerational trauma of Blacks' experiences could be processed through Critical Race Theory (CRT), Personal Construct Theory (PCT), and Bowen's Multigenerational Family Systems Theory (BMFST). Each theory explains the relationship between a person's experiences, the generational response and functioning, and the existence of racial bias as proliferated in the oppression of one race. The data collection method involved interviews and observations, and the analysis employed horizontalization and theme clustering. The exploration of the participants' experiences and their subjective perspectives – cultural, familial, and individual meanings, beliefs, and values – provided an essential viewpoint on the potential intergenerational trauma transmission (IGTT) resulting from police misconduct.

Kalin, N. H. (2024). Psychopathology in Youth: Treatment, Parenting, and Intergenerational Transmission. *American Journal of Psychiatry*, 181(4), 255–258. <https://doi.org/10.1176/appi.ajp.20240138>

This issue of the Journal addresses mental health issues that are highly relevant to the well-being of youths that also inform an understanding of the risk to develop psychopathology. Childhood irritability and anxiety disorders are a focus, as are risk factors associated with the development of callous-unemotional traits, psychotic disorders, and alcohol use disorder. The issue begins with a comprehensive review of youth irritability (1), which emphasizes the importance of quantifying irritability as part of a clinical assessment, its presentation as a transdiagnostic symptom across childhood disorders, its genetics, and its treatment. To complement this review, a study assesses the effects of intranasally administered oxytocin on pathological irritability and brain function. Another study presents data characterizing sexually dimorphic white matter microstructural alterations in preadolescents with anxiety disorders, which are among the most common forms of childhood psychopathology. Two studies characterize factors associated with familial risk and the intergenerational transmission of psychopathology; the first examines factors related to the development of callous-unemotional traits in youths, focusing on associations with parents' negative parenting styles. The second assesses in a very large sample the risk of developing alcohol use disorder and other psychopathology in offspring of parents with alcohol use disorder. The last study in this issue uses EEG measures related to attentional processes as potential biomarkers to predict the development of psychotic symptoms in at-risk youths.

Kalocsányiová, E., Essex, R., Hassan, R., Markowski, M., Guemar, L. N., Kazmouz, M., Locke, C., Muhamud, G., Ntabyera, E., & Vogel, P. (2024). Intergenerational Contact in Refugee Settlement Contexts: Results from a Systematic Mapping Review and Analysis. *Journal of International Migration and Integration*. <https://doi.org/10.1007/s12134-024-01144-x>

The purpose of this article is to map research literature on intergenerational contact in refugee and international migration contexts. Using database searches on Scopus, Medline, CINAHL, PsycInfo and Education Research Complete, we identified 649 potentially relevant studies, of which 134 met the inclusion criteria and are mapped in the article by themes, date of publication, geographical distribution, study design, and targeted population. The review has been developed with input from migrant and refugee charities, and it identifies research trends in the field as well as multiple gaps in the literature. The results highlight the complex ways in which intergenerational contact impacts psycho-social wellbeing and integration, health, and education outcomes for both refugees and other migrant groups. Much of the research to date has focused on relationships within families. Studies exploring the potential tensions and benefits of intergenerational contact between refugees/migrants and members of the broader community are lacking.

Rimington, D., Roberts, R., Sawyer, A., & Sved-Williams, A. (2024). Dissociation in mothers with borderline personality disorder: a possible mechanism for transmission of intergenerational trauma? A scoping review. *Borderline Personality Disorder and Emotion Dysregulation*, 11(1), 7. <https://doi.org/10.1186/s40479-024-00250-7>

Background Dissociation is a feature of Borderline Personality Disorder (BPD), but rarely a focus for research, particularly in the perinatal literature. BPD partly has its aetiology in childhood and is characterised by emotional changes and difficulty with self-coherence that impacts on the processes of caregiving. Methods A scoping review was conducted to synthesise current perspectives on the effect of dissociation in caregivers with BPD, particularly

regarding the impact of caregiver dissociation on the interactional quality of relationship within parent–child dyads. Studies were included if they explicitly mentioned dissociation in the target population, or if dissociation was implied. A thematic analysis was conducted. Results 20 studies were included; 10 experimental or quasi-experimental; 2 presenting case material; and 8 non-systematic review articles. 4 studies used the Dissociative Experiences Scale (DES) to measure dissociation, while 2 studies included a ‘dissociative behaviour’ subscale as part of an observational measure. The remaining studies did not measure dissociation but referenced directly or indirectly a concept of dissociation. Conclusions Findings suggested there was some evidence that dissociation plays a unique role in BPD caregivers’ interactions with their offspring, however any findings should be interpreted with caution as the concept has been poorly operationalised and defined.

Shoib, S., Armiya’u, A. Y., Swed, S., Naskar, C., Chandradasa, M., Tsagkaris, C., Zaidi, I., & Saeed, F. (2024). The importance of addressing intergenerational trauma in refugees. *Nature Mental Health*, 2(1), 12–14. <https://doi.org/10.1038/s44220-023-00186-x>

Intergenerational trauma, passed down through generations, is a significant concern for refugees and their descendants. Millions of people are forcibly displaced worldwide, with profound effects on mental and physical health. Refugees face many challenges, from acculturation to legal uncertainties, leading to a range of emotional struggles.

Starrs, C. J., & Békés, V. (2024). Historical intergenerational trauma transmission model: A comprehensive framework of family and offspring processes of transgenerational trauma. *Traumatology*, No Pagination Specified-No Pagination Specified. <https://doi.org/10.1037/trm0000505>

The transgenerational impact of trauma is an emergent focus in the field of trauma research. A growing body of evidence suggests important consequences for the descendants of trauma survivors, at the individual, as well as the collective, and systemic levels. After a brief introduction to the main concepts and a summary of the key findings by population, the current article proposes a novel comprehensive model: the historical intergenerational trauma transmission model (HITT model). The HITT model comprises five higher-order dimensions, including family vulnerability, offspring vulnerability, family resiliency, offspring resiliency, and historical moral injury. In addition, we propose insidious trauma as an important contextual variable that affects the impact of historical trauma (HT) on mental health and functioning. This is the first conceptual HT model designed to be applicable across populations, and that can be utilized by both researchers and clinicians. The components of the theoretical model, the research and clinical implications of this approach, as well as future directions are discussed. (PsycInfo Database Record (c) 2024 APA, all rights reserved)

Syropoulos, S., Law, K. F., Mah, A., & Young, L. (2024). Intergenerational concern relates to constructive coping and emotional reactions to climate change via increased legacy concerns and environmental cognitive alternatives. *BMC Psychology*, 12(1), 182. <https://doi.org/10.1186/s40359-024-01690-0>

As the threat of climate change looms large, and we experience first-hand the impacts of rapid global warming, researchers and clinicians emphasize the need to better understand the impact of these changes on our mental health. Existing research suggests that coping with and emotional reactions to climate change can promote action to adapt to and mitigate the impacts of climate change and reduce its negative impacts to one’s mental health. In this pre-registered study (N = 771) we examined whether people who display extreme intergenerational concern would also constructively cope with climate change. Empirically-identified individuals showing high intergenerational concern reported more problem-focused and meaning-based coping, and less avoidant coping strategies with climate change. Further, even though they felt guilty, angry, sorrowful and isolated, these individuals also felt hopeful about the future. These effects were explained by increased concerns about one’s legacy and higher access to environmental cognitive alternatives. By instilling values that highlight intergenerational concern as a key priority, we could thus not only increase pro-climate action, but also help individuals actively and constructively cope with changes produced by climate change.

Templeton, J., Dixon, W., Morelen, D., Driggers-Jones, L., & Robertson, C. (2024). Exploring Intergenerational Trauma: The Impact of Caregiver Mental Health and Social Support on Adverse Childhood Experiences. *Appalachian Student Research Forum*. <https://dc.etsu.edu/asrf/2024/schedule/216>

Adverse childhood experiences (ACEs) are potentially traumatic events occurring before age 18 that have been identified as leading indicators of a myriad of negative health outcomes in adulthood. Specifically, ACEs have been linked to increased adult anxiety, depression, and difficulties in emotion regulation and to decreased perceived social support. These outcomes seem to be cyclic in nature and transmit intergenerationally. For instance, individuals exposed to early adversity have an increased risk for future health difficulties, which, in turn, increases the likelihood

of adversity for the individuals' children. Thus, the present study aimed to explore paths through which adversity may be transmitted intergenerationally, specifically through caregiver mental health (e.g., anxiety and depression), emotion regulation, and perceived social support. We expected these four pathways to mediate the relationship between caregiver and child ACEs. Data were collected on child and caregiver ACEs, as well as caregiver anxiety, depression, emotion regulation, and social support, using anonymous survey methodology among 326 caregivers with children between the ages of 3 months to 15 years old. REDCap survey links were published across various social media outlets and relevant listservs. Respondents primarily identified as white, female, well-educated, and middle-class. The children's sex distribution was approximately equal. ACEs were assessed using an expanded ACEs survey adapted from the Health-Resiliency-Stress Questionnaire, with caregivers completing the survey for both themselves and their children. Caregiver anxiety was measured using the Generalized Anxiety Disorder Assessment (GAD-7), depression using the Patient Health Questionnaire-9 (PHQ-9), emotion regulation using the Difficulties in Emotion Regulation Scale (DERS-18), and social support using the Multidimensional Scale of Perceived Social Support (MSPSS). As hypothesized, caregiver childhood adversity (i.e., their ACE scores) was positively correlated with their own reported anxiety [$r(326) = .24, p < .001$], depression [$r(326) = .23, p < .001$], and emotion regulation difficulties [$r(326) = .20, p < .001$], as well as with their children's ACE scores [$r(325) = .16, p < .01$]. Additionally, caregiver ACEs were negatively correlated with their experienced social support, $r(326) = -.18, p < .001$. Simple mediation analyses revealed significant indirect effects of caregiver ACEs on child ACEs through caregiver anxiety [$B = .03, 95\% \text{ BCa CI } (.006, .059)$], and depression [$B = .02, 95\% \text{ BCa CI } (.004, .045)$]. No significant indirect effects were found for difficulties in emotion regulation or perceived social support. In sum, caregiver mental health appears to be a strong pathway for and predictor of intergenerational trauma, indicating that efforts to mitigate caregiver mental health may promote successful developmental outcomes for generations to follow. However, future research should also give further consideration to the potential roles of emotion regulation and social support. These potential mediators have also been found to mediate the relationship between individual ACEs and their mental health.