

## HISTORICAL TRAUMA AND CULTURAL HEALING

### Articles List – Historical Trauma

*These journal articles relate to historical trauma, also sometimes referred to as intergenerational trauma, transgenerational trauma, or post traumatic slavery disorder in the professional literature base. Broad survey articles along with those focused on historical trauma in African American, American Indian and Canadian First Nations, Armenian, Australian Aboriginal, Burundian, Cambodian Refugee, Caribbean and Caribbean American, Central and South American, Hmong American, Holocaust, Japanese American, Korean American, Latino American, Middle Eastern, Northern Ireland, Refugee, South African, Southeast Asian, War Veteran, and West African contexts are included. This list is offered as a supplemental resource to the video series located at <http://z.umn.edu/htplaylist>. It is for those interested in exploring in-depth issues related to the causes, results, and healing of historical trauma.*

CITATION	SUMMARY
<i>General/Cross-Cultural</i>	
<p>Abrams, M. S. (1999). Intergenerational transmission of trauma: Contributions from the literature of family systems approaches to treatment. <i>American Journal of Psychotherapy</i>, 53(2), 225-231.</p>	<p>Trauma has long been recognized as having an impact on mental health and is a component of many classic cases, such as Freud's case of Schreber, who was physically mistreated by his doctrinaire, disciplinarian father. The long-range generational effects of trauma have been widely reported in the literature, especially regarding the Holocaust. It has been almost two decades since the publication of the classic work, <i>Generations of the Holocaust</i> (1), edited by Martin S. Bergmann and Milton E. Jucovy. This book powerfully illustrates the impact of wartime experiences on the children of Holocaust survivors. However, it is clear that intergenerational trauma is not confined to war experiences, but is quite widespread.</p>
<p>Connolly, A. (2011). Healing the wounds of our fathers: Intergenerational trauma, memory, symbolization and narrative. <i>Journal of Analytical Psychology</i>, 56(5), 607-626. doi:10.1111/j.1468-5922.2011.01936.x</p>	<p>This paper explores the history of psychoanalytical approaches to intergenerational trauma, both from the Freudian and from the Jungian schools, and addresses the need when we speak of intergenerational or transmitted trauma to better define the nature and the different categories of trauma with particular reference to extreme and cumulative traumas such as those experienced by the survivors of the Nazi death camps and the Russian gulags.</p>
<p>Devakumar, D., Birch, M., Osrin, D., Sondorp, E., &amp; Wells, J. C. (2014). The intergenerational effects of war on the health of children. <i>BMC medicine</i>, 12(1), 57.</p>	<p>Looking first at the nature and effects of exposures during conflict, and then at the potential routes through which harm may propagate within families, we consider the intergenerational effects of four features of conflict: violence, challenges to mental health, infection and malnutrition. Conflict-driven harms are transmitted through a complex permissive environment that includes biological, cultural and economic factors, and feedback loops between sources of harm and weaknesses in individual and societal resilience to them. We discuss</p>

	<p>the multiplicative effects of ongoing conflict when hostilities are prolonged.</p>
<p>Durham, M., &amp; Webb, S. S. N. (2014, October). Historical trauma: a panoramic perspective. <i>The Brown University Child and Adolescent Behavior Letter</i>, 30(10), 1-5.</p>	<p>Many times families enter the therapeutic setting with complex trauma histories. These histories are complex in that every generation seems to be affected by adversity, mental health issues, substance use, and some governmental agency involvement. Untreated traumatic stress has serious consequences for children, adults, and families. Public health research has made great strides in understanding the impact colonialism, slavery, war, and genocide have on families and what we can do to address this in the context of a presenting problem. To be clear, not all families carry the burden of what happened generations ago, some families are more resilient than others and are able to acknowledge the past while looking toward the future. In this article, we aim to address this while providing some ways we can work with families who present with these complex histories.</p>
<p>Goodman, R. D. (2013). The transgenerational trauma and resilience genogram. <i>Counselling Psychology Quarterly</i>, 26(3-4), 386-405. doi:10.1080/09515070.2013.820172</p>	<p>The understanding of trauma within counseling has expanded to include the salience of ecosystemic factors and to acknowledge the importance of multicultural and social justice considerations. Transgenerational trauma and resilience offers a framework that examines trauma across generations, attends to ecosystemic concerns, and adheres to a strengths-based perspective. However, given the complexity of trauma counseling and attending to the multitude of ecosystemic factors, counselors and psychologists may struggle to conduct comprehensive assessments and interventions with their clients. Genograms have long been used to clarify complex family and psychological patterns through visual representations, and are, therefore, a promising tool to meet this need. The Transgenerational Trauma and Resilience Genogram (TTRG) was created as a dynamic tool that can assist practitioners in conducting compressive trauma assessment and intervention from a transgenerational trauma and resilience framework.</p>
<p>Katz, M. (2003). Prisoners of Azkaban: Understanding intergenerational transmission of trauma due to war and state terror (with help from Harry Potter). <i>Journal for the Psychoanalysis of Culture and Society</i>, 8(2), 200-207.</p>	<p>I have worked with patients whose communist families lived through the period of American state terror known as McCarthyism; with Vietnam war vets and the children of veterans; with survivors of state terror and torture in Bosnia, Iran, Africa, and South America; and with children of survivors of the Shoah. In each of these instances, one recognizes the legacies of psychic and physical trauma. There are striking similarities in the generational transmission of those terrors through psychological structures, which preserve a relationship to the traumatized parent, affecting the individual's memory and development. The patients with transmitted trauma find themselves occupied with states of dread and worry. Personal and professional successes often coexist with inexplicable states of despair and avoidance. Tragically, the tyranny of history is perpetuated through these transmissions. These marked generations need to move into their own skin.</p>
<p>Lev-Wiesel, R. (2007). Intergenerational transmission of trauma across three generations: A preliminary study. <i>Qualitative Social</i></p>	<p>This qualitative study reports a preliminary investigation of the intergenerational transmission of trauma across three generations, and across three types of trauma. Representatives of three families in which the first generation had experienced a trauma were examined. Trauma included experiencing the Holocaust, being placed in a transit camp following immigration from Morocco, and being forced to</p>

Work, 6(1), 75-94.  
doi:10.1177/1473325007074167

dislocate as the result of a war. The representatives of successive generations were administered qualitative, open-ended interviews regarding their life as survivors or victims, or as the second/third generation of survivors/victims. A content analysis revealed that the intergenerational transmission of three types of trauma was perpetuated across three generations.

Mohatt, N. V., & Tebes, K. (2014). Historical trauma as public narrative: A conceptual review of how history impacts present-day health. *Social Science & Medicine*, 106, 128-136.  
doi:10.1016/j.socscimed.2014.01.043

Theories of historical trauma increasingly appear in the literature on individual and community health, especially in relation to racial and ethnic minority populations and groups that experience significant health disparities. As a consequence of this rapid growth, the literature on historical trauma comprises disparate terminology and research approaches. This critical review integrates this literature in order to specify theoretical mechanisms that explain how historical trauma influences the health of individuals and communities. We argue that historical trauma functions as a public narrative for particular groups or communities that connects present-day experiences and circumstances to the trauma so as to influence health. Treating historical trauma as a public narrative shifts the research discourse away from an exclusive search for past causal variables that influence health to identifying how present-day experiences, their corresponding narratives, and their health impacts are connected to public narratives of historical trauma for a particular group or community. We discuss how the connection between historical trauma and present-day experiences, related narratives, and health impacts may function as a source of present-day distress as well as resilience.

Pickering, J. (2012). Bearing the unbearable: ancestral transmission through dreams and moving metaphors in the analytic field. *Journal of Analytical Psychology*, 57(5), 576-596.  
doi:10.1111/j.1468-5922.2012.02004.x

This paper explores how untold and unresolved intergenerational trauma may be transmitted through unconscious channels of communication, manifesting in the dreams of descendants. Unwitting carriers for that which was too horrific for their ancestors to bear, descendants may enter analysis through an unconscious need to uncover past secrets, piece together ancestral histories before the keys to comprehending their terrible inheritance die with their forebears. They seek the relational containment of the analytic relationship to provide psychological conditions to bear the unbearable, know the unknowable, speak the unspeakable and redeem the unredeemable. I clarify the back and forth process from dream to waking dream thoughts to moving metaphors and differentiate the moving metaphor from a living symbol. I argue that the containment of the analytic relationship nested within the security of the analytic space is a necessary precondition for such healing processes to occur.

Schindlmayr, T. (2006). Reconsidering intergenerational concerns. *International Journal of Social Welfare*, 15(2), 181-184.  
doi:10.1111/j.1468-2397.2006.00427.x

This article argues that most government policies towards intergenerational issues are deficient. Government attention has focused largely on environmental and economic considerations, at the expense of other concerns such as social dimensions. Some of these neglected issues, such as social inequality and generational legacies are presently hindering the formation of social capital and social development, as well as preventing individuals from reaching their full potential. These examples highlight that governments should consider a broader range of concerns within the context of reviewing the underlying intergenerational contract in each society as a result of demographic, economic and political changes.

<p>Sotero, M. (2006). A conceptual model of historical trauma: Implications for public health practice and research. <i>Journal of Health Disparities Research and Practice, 1</i>(1), 93-108.</p>	<p>Historical trauma theory is a relatively new concept in public health. The premise of this theory is that populations historically subjected to long-term, mass trauma-colonialism, slavery, war, genocide-exhibit a higher prevalence of disease even several generations after the original trauma occurred. Understanding how historical trauma might influence the current health status of racial/ethnic populations in the U.S. may provide new directions and insights for eliminating health disparities. This article offers an analysis of the theoretical framework of historical trauma theory and provides a general review of the literature. A conceptual model is introduced illustrating how historical trauma might play a role in disease prevalence and health disparities. Finally, implications for public health practice and research are discussed.</p>
<p>Tint, B. S. (2012). Trauma, Intergenerational transmission of. <i>The Encyclopedia of Peace Psychology</i>. doi:10.1002/9780470672532.wbpep284</p>	<p>George Santayana once said: “Those who cannot remember the past are condemned to repeat it.” As we consider the generations of those who have endured communal conflict around the world, it appears possible that the opposite holds more truth: that those who do remember their past, live their past, and honor their past, are continuously replaying the cycles of struggle and conflict that are their legacy. These cycles of conflict continue in part because of the intergenerational transmission of trauma for both individuals and groups. While there has been a great deal of research dedicated to exploring the effects of psychological trauma on individuals, only recently has there been exploration surrounding the effects of collective trauma on groups in conflict and the intergenerational transmission of the psychological wounds impacting large numbers of people.</p>
<p>Ward, A. (2013). Understanding postcolonial traumas. <i>Journal of Theoretical and Philosophical Psychology, 33</i>(3), 170-184. doi:10.1037/a0033576</p>	<p>Psychological theories have alternately been embraced and rejected by those working in the field of postcolonial studies. This essay briefly surveys some of the early psychological approaches to colonization offered by writers Octave Mannoni and Frantz Fanon, before focusing on a group of writers most commonly termed “trauma” theorists—Cathy Caruth, Dominick LaCapra, and Marianne Hirsch—in order to think about the important possibilities created by recent psychological formulations for the ever-shifting terrain of postcolonial studies. The application of psychology to the study of postcolonialism offers a deeper understanding of the effects on the psyche of those who experienced not only colonial traumas (including slavery, forced migration and colonisation) and their descendants, as well as the effects of more recent 20th- and 21st-century traumas of the postcolonial world.</p>
<p>Weingarten, K. (2004). Witnessing the effects of political violence in families: Mechanisms of intergenerational transmission and clinical interventions. <i>Journal of Marital and Family Therapy, 30</i>(1), 45-59. doi:10.1111/j.1752-0606.2004.tb01221.x</p>	<p>In this era of globalization, when news about political violence can haunt anyone, anywhere, those whose families have suffered political violence in the past are particularly vulnerable to current distress. Skilled in understanding transgenerational processes, family therapists need to be familiar with the mechanisms by which children are exposed to the effects of political violence suffered by their elders—that is, the ways in which they become their witnesses. This article presents a framework for understanding how the trauma of political violence experienced in one generation can “pass” to another that did not directly experienced it, and proposes a model to guide clinical intervention.</p>

Walkerline, V., Olsvold, A., & Rudberg, M. (2013). Researching embodiment and intergenerational trauma using the work of Davoine and Gaudilliere: History walked in the door. *Subjectivity*, 6(3), 272-297. doi:10.1057/sub.2013.8

The work of French psychoanalysts Françoise Davoine and Jean-Max Gaudillière centres on the understanding of the ways in which large historical traumas associated with war are brought to life by descendants, often generations later, who carry an experience that they cannot understand and that erupts as psychosis. In this article, we show how we developed a method for engaging with interviews with women who were serial migrants. In paying attention to their story, we show how we attended to the complex manifestations in the material of the embodied experiences associated with a history of slavery, colonization, poverty and migration. Our aim was to develop a mode of working, which did not pathologize but still recognized the transmission of suffering and distress in complex ways and its twists and turns across generations.

Walls, M. L., & Whitbeck, L. B. (2012). Advantages of stress process approaches for measuring historical trauma. *The American journal of drug and alcohol abuse*, 38(5), 416-420. doi:10.3109/00952990.2012.694524

Despite growing attention to historical trauma (HT) as a key mechanism for documented Indigenous health disparities like alcohol abuse, the complexities of conceptualizing and measuring HT-related constructs have limited empirical tests of these relationships. In this article, we review the current evidence surrounding one HT measure: the Historical Loss Scale. In addition, we provide examples of the benefits of treating historical cultural losses as stressors within sociological and Indigenous stress process models of health.

Weingarten, K. (2004). Witnessing the effects of political violence in families: Mechanisms of intergenerational transmission and clinical interventions. *Journal of Marital and Family Therapy*, 30(1), 45-59. doi:10.1111/j.1752-0606.2004.tb01221.x

In this era of globalization, when news about political violence can haunt anyone, anywhere, those whose families have suffered political violence in the past are particularly vulnerable to current distress. Skilled in understanding transgenerational processes, family therapists need to be familiar with the mechanisms by which children are exposed to the effects of political violence suffered by their elders—that is, the ways in which they become their witnesses. This article presents a framework for understanding how the trauma of political violence experienced in one generation can “pass” to another that did not directly experienced it, and proposes a model to guide clinical intervention.

*African American Contexts*

Apprey, M. (1999). Reinventing the self in the face of received transgenerational hatred in the African American community. *Journal of Applied Psychoanalytic Studies*, 1(2), 131-143. doi:10.1023/A:1023081004567

There are many clinical methods for understanding and transforming the impact of historical trauma, and reinventing the self in the clinical process. However, the approach advocated here requires that regardless of what clinical method of intervention is chosen, a particular strand must run through the process of treatment to produce durable and meaningful change. The strand includes understanding human suffering, the way that particular suffering is mentalized by the victimized group and subsequently reenacted by generations to come.

Broussard, P. A. (2013). Black Women's Post-Slavery Silence Syndrome: A Twenty-First Century Remnant of Slavery, Jim

To say that the American justice system has done an insufficient job of protecting Black women over the last two hundred years is an understatement of epic proportions. The twenty-first century, post-slavery and post-Jim Crow world of Black women continues to reverberate from the detrimental psychological remnants of the

Crow, and Systemic Racism-Who Will Tell Her Stories. *J. Gender Race & Justice*, 16, 373-421.

dehumanizing institution of slavery. Some pundits, when commenting on the current status of Black Americans, subscribe to the theory that time heals all wounds, and therefore, Black folks should just get over slavery and Jim Crow and quit using them as excuses for the current status of the Black psyche. The flaw in that logic is that a wound that is not treated may fester, form a keloid, become infected, or cause the entire body to become septic. It can be argued that because, metaphorically speaking, no medical attention has been administered to the psyches of Blacks in the United States, four-hundred-year-old injuries continue to infect the collective body. If this in fact is the case, the question becomes who bears the responsibility for the original injury and what remedy will render the injured parties whole again?

Eyerman, R. (2004). The part in present: Culture and the transmission of memory. *Acta Sociologica*, 47(2), 159-169. doi:10.1177/0001699304043853

The aim of this article is to outline a theory cultural trauma, with reference to slavery and the formation of an African American identity. With this in mind, the concepts 'collective memory' and 'collective identity' are discussed and linked with a theory of intellectual generations. It is proposed that the notion of an 'African American' emerged as part of the efforts of a generation of black intellectuals to come to grips with their, individual and collective, rejection by American society after being promised full integration following the end of the Civil War (1861-5). Slavery, not so much as experience, but as a form of memory, was a focal point of reference in this process.

Gump, J. P. (2010). Reality matters: The shadow of trauma on African American subjectivity. *Psychoanalytic Psychology*, 27(1), 42.

Few psychoanalytic theories accord social, political, and cultural realities a role in the development of the psyche. This silence distorts and constricts our understanding of all subjects, but is particularly pernicious for the nondominant, as it renders significant aspects of their subjectivities invisible. African American subjectivity is an instance of such omission. The trauma of slavery critically shaped our subjectivity, yet this impact is rarely acknowledged. In fact, the subjugation, cruelties, and deprivations of slavery have given a traumatic cast to African American subjectivity. Through the intergenerational transmission of trauma this wounding has endured. This article examines the effect of African American historical reality on subjectivity. In particular, transmission of slavery's essential characteristic—a relationship of domination—is explored. A clinical case manifesting instances of these issues is discussed.

Mims, S., Higginbottom, L., & Reid, O. (2001). *Post traumatic slavery disorder*. Pyramid Bulders Inc.: Dorchester, MA.

PTSlaveryD is a curriculum designed to help you develop a clear understanding of the social, emotional, and economic dynamics that are impairing Black Peoples' ability to capitalize on their own knowledge, information and learning clearly, coherently and independently on behalf of their own personal development; as well as that of their family and community. We will begin by introducing Post Traumatic Stress Disorder (PTSD) and the root words and meanings that relate to the evolution of the definition for Post Traumatic Slavery Disorder (PTSlaveryD). In this way you will have the information you need to compare and contrast PTSD with PTSlaveryD. The introduction is designed to examine disorders such as depression, anxiety, schizophrenia, schizo/schizoid, cognitive disorders, retardation, lack of impulse control, anger and all the behaviors that accompany them. After PTSD we will define PTSlaveryD and the behavioral relationships between Post Trauma and the African experience.

Wilkins, E. J., Whiting, J. B., Watson, M. F., Russon, J. M., & Moncrief, A. M. (2013). Residual effects of slavery: What clinicians need to know. *Contemporary Family Therapy*, 35(1), 14-28. doi:10.1007/s10591-012-9219-1

Marriage and family therapists grapple with the intersection of societal influence and African American clients' presenting problems. Questions include: what impact has the historical trauma of slavery had on African Americans and what are the clinical implications of this trauma? This paper reviews the literature on the various residual effects of slavery (RES) within the African American community. A case vignette and a broad discussion of therapeutic techniques will be used to highlight the clinical implications of RES.

*American Indian and Canadian First Nations Contexts*

Bombay, A., Matheson, K., & Anisman, H. (2009). Intergenerational trauma: Convergence of multiple processes among First Nations people of Canada. *Journal of Aboriginal Health* 5(3), 6-47.

Stressful events may have immediate effects on well-being, and by influencing appraisal processes, coping methods, life styles, parental behaviours, as well as behavioural and neuronal reactivity, may also have long lasting repercussions on physical and psychological health. In addition, through these and similar processes, traumatic experiences may have adverse intergenerational consequences. Given the lengthy and traumatic history of stressors experienced by Aboriginal peoples, it might be expected that such intergenerational effects may be particularly notable. In the present review we outline some of the behavioural disturbances associated with stressful/traumatic experiences (e.g., depression, anxiety, posttraumatic stress disorder, and substance abuse disorder), and describe the influence of several variables (age, sex, early life or other experiences, appraisals, coping strategies, as well as stressor chronicity, controllability, predictability and ambiguity) on vulnerability to pathology.

Bombay, A., Matheson, K., & Anisman, H. (2011). The impact of stressors on second generation Indian residential school survivors. *Transcultural Psychiatry*, 48(4), 367-391. doi:10.1177/1363461511410240

From 1863 to 1996, many Aboriginal children in Canada were forced to attend Indian Residential Schools (IRSs), where many experienced neglect, abuse, and the trauma of separation from their families and culture. The present study examined the intergenerational impact of IRS exposure on depressive symptomatology in a convenience sample of 143 First Nations adults. IRS experiences had adverse intergenerational effects in that First Nations adults who had a parent attend IRS ( $n = 67$ ) reported greater depressive symptoms compared to individuals whose parents did not attend ( $n = 76$ ).

Bombay, A., Matheson, K., & Anisman, H. (2014). The intergenerational effects of Indian residential schools: Implications for the concept of historical trauma. *Transcultural Psychiatry*, 51(3), 320-338. doi:10.1177/1363461513503380

The current paper reviews research that has explored the intergenerational effects of the Indian Residential School (IRS) system in Canada, in which Aboriginal children were forced to live at schools where various forms of neglect and abuse were common. Intergenerational IRS trauma continues to undermine the well-being of today's Aboriginal population, and having a familial history of IRS attendance has also been linked with more frequent contemporary stressor experiences and relatively greater effects of stressors on well-being. It is also suggested that familial IRS attendance across several generations within a family appears to have cumulative effects. Together, these findings provide empirical support for the concept of historical trauma, which takes the perspective that the consequences of numerous and sustained attacks against a group may accumulate over generations and interact with proximal stressors to undermine collective well-being.

<p>Brave Heart, M.Y.H. (1999) Gender differences in the historical trauma response among the Lakota. <i>Journal of Health &amp; Social Policy</i>, 10(4), 1-21.</p>	<p>The historical trauma response is a constellation of characteristics associated with massive cumulative group trauma across generations, similar to those found among Jewish Holocaust survivors and descendants. Trauma response features include elevated mortality rates and health problems emanating from heart disease, hypertension, alcohol abuse, and suicidal behavior. This article explores gender differences in the historical trauma response among the Lakota (Teton Sioux) and the correlation with health and mental health statistics.</p>
<p>Brave Heart, M. Y. H. (2003). The historical trauma response among natives and its relationship with substance abuse: A Lakota illustration. <i>Journal of psychoactive drugs</i>, 35(1), 7-13.</p>	<p>Historical trauma (HT) is cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma experiences; the historical trauma response (HTR) is the constellation of features in reaction to this trauma. The HTR often includes depression, self-destructive behavior, suicidal thoughts and gestures, anxiety, low self-esteem, anger, and difficulty recognizing and expressing emotions. It may include substance abuse, often an attempt to avoid painful feelings through self-medication. This article will explain HT theory and the HTR, delineate the features of the HTR and its grounding in the literature, offer specific Native examples of HT and HTR, and will suggest ways to incorporate HT theory in treatment, research and evaluation. The article will conclude with implications for all massively traumatized populations.</p>
<p>Brokenleg, M. (2012). Transforming cultural trauma into resilience. <i>Reclaiming Children and Youth</i>, 21(3), 9-13.</p>	<p>The author draws from research and experiences in Native American and First Nations cultures to show the impact of cultural trauma. The Circle of Courage model provides the core goals for transforming trauma into resilience.</p>
<p>Crawford, A. (2014). "The trauma experienced by generations past having an effect in their descendents": Narrative and historical trauma among Inuit in Nunavut, Canada. <i>Transcultural Psychiatry</i>, 51(3), 339-369. doi:10.1177/1363461512467161</p>	<p>"Sivulirijat aksururnaqtukkuurnikugijangat aktuiniqaqsimaninga kinguvaanginnut" translates as "the trauma experienced by generations past having an effect in their descendants." The legacy of the history of colonialism is starting to take narrative shape as Inuit give voice to the past and its manifestations in the present through public commissions such as the federal Truth and Reconciliation Commission and the Inuit-led Qikiqtani Truth Commission. However, an examination of other discursive contexts reveals a collective narrative of the colonial past that is at times silent, incomplete or seemingly inconsistent. This paper examines these narrative alternatives for recounting historic trauma in Nunavut, while also considering the implications of understanding historical trauma as narrative.</p>
<p>Czyzewski, K. (2011). Colonialism as a broader social determinant of health. <i>The International Indigenous Policy Journal</i>, 2(1).</p>	<p>A proposed broader or Indigenized social determinants of health framework includes "colonialism" along with other global processes. What does it mean to understand Canadian colonialism as a distal determinant of Indigenous health? This paper reviews pertinent discourses surrounding Indigenous mental health in Canada. With an emphasis on the notion of intergenerational trauma, there are real health effects of social, political, and economic marginalization embodied within individuals, which can collectively affect entire communities. Colonialism can also be enacted and reinforced within Indigenous mental health discourse, thus influencing scholarly and popular perceptions. Addressing this distal determinant through policy work necessitates that improving Indigenous health is</p>

	<p>inherently related to improving these relationships, i.e. eliminating colonial relations, and increasing self-determination.</p>
<p>DeBoer, T., Distasio, J., Isaak, C. A., Roos, L. E., Bolton, S. L., Medved, M., ... &amp; Sareen, J. (2015). What are the Predictors of Volatile Substance Use in an Urban Community of Adults Who are Homeless?. <i>Canadian Journal of Community Mental Health</i>, 34(2), 1-15.</p>	<p>The present study explored the prevalence of volatile substance use (VSU) in a community of homeless adults. The importance of individual life history characteristics (history of traumatic events, residential school history, mental and physical health conditions) were also examined with respect to past-year volatile substance use in this sample. Overall, the results indicate that a variety of traumatic events, particularly residential school history and a number of mental and physical health conditions, were significantly associated with VSU in this urban Canadian sample. These findings have novel implications for community interventions for VSU and highlight the importance of conceptualizing cultural and historical traumas in understanding VSU.</p>
<p>Denham, A. R. (2008). Rethinking historical trauma: Narratives of resilience. <i>Transcultural Psychiatry</i>, 45(3), 391-414. doi:10.1177/1363461508094673</p>	<p>There is significant variation in how people experience, emplot and intergenerationally transmit trauma experiences. Despite this variation, the literature rarely illustrates alternative manifestations or resilient responses to the construct of historical trauma. Based upon person-centered ethnographic research, this article highlights how a four-generation American Indian family contextualizes historical trauma and, specifically, how they frame their traumatic past into an ethic that functions in the transmission of resilience strategies, family identity, and as a framework for narrative emplotment. In conclusion, the author clarifies the distinction between historical trauma — the precipitating conditions or experiences — and the historical trauma response — the pattern of diverse responses that may result from exposure to historical trauma.</p>
<p>Duran, E., Firehammer, J., &amp; Gonzalez, J. (2008). Liberation psychology as the path toward healing cultural soul wounds. <i>Journal of Counseling &amp; Development</i>, 86(3), 288-295. doi:10.1002/j.1556-6678.2008.tb00511.x</p>	<p>Oppression resulting in soul wounding has afflicted indigenous communities and the counseling profession. Internalized oppression has become part of oppressive practices inflicted on communities served. The authors delineate a liberation psychology that leads toward the psychological and spiritual emancipation of individual clients, communities, and the counseling profession.</p>
<p>Evans-Campbell, T. (2008). Historical trauma in American Indian/Native Alaska communities. <i>Journal of Interpersonal Violence</i>, 23(3), pp. 316-338.</p>	<p>Over multiple generations, American Indian communities have endured a succession of traumatic events that have enduring consequences for community members. This article presents a multilevel framework for exploring the impact of historically traumatic events on individuals, families, and communities. The critical connection between historically traumatic events and contemporary stressors is also discussed at length.</p>
<p>Fast, E., &amp; Collin-Vézina, D. (2010). Historical trauma, race-based trauma and resilience of indigenous peoples: A literature review. <i>First Peoples Child &amp; Family Review</i>, 5(1), 126-136.</p>	<p>This literature review examines the various responses to trauma suffered by indigenous peoples as a result of governmental policies geared towards assimilation. Both traumatic and resilient responses are demonstrated at the individual, family and community levels. Much of the research that has been done in the United States to develop theories around historical trauma and race-based traumatic stress may also be applied to Canada's First Nations due to similar histories of oppression and colonization. Overall, the research finds</p>

	<p>that self-government and a connection to culture and spirituality result in better outcomes for indigenous peoples.</p>
<p>Goodkind, J. R., Hess, J. M., Gorman, B., &amp; Parker, D. P. (2012). "We're Still in a Struggle" Diné Resilience, Survival, Historical Trauma, and Healing. <i>Qualitative health research</i>, 22(8), 1019-1036. doi:10.1177/1049732312450324</p>	<p>As part of a community/university collaborative effort to promote the mental health and well-being of Diné (Navajo) youth, we explored the relevance of addressing historical trauma and current structural stressors, and of building on individual and community strengths through healing and social transformation at multiple levels. We explore the fit of an historical trauma healing framework and present implications for intervention and transformation through revitalization of traditional knowledge, culturally based healing practices, intergenerational education, and social change strategies designed to eliminate social inequities.</p>
<p>Goodkind, J., LaNoue, M., Lee and Lance Freeland, C., &amp; Freund, R. (2012). Feasibility, acceptability, and initial findings from a community- based cultural mental health intervention for American Indian youth and their families. <i>Journal of community psychology</i>, 40(4), 381-405. doi:10.1002/jcop.20517</p>	<p>Through a CBPR partnership, university and American Indian (AI) tribal members developed and tested Our Life intervention to promote mental health of AI youth and their families by addressing root causes of violence, trauma, and substance abuse. Based on premises that well-being is built on a foundation of traditional cultural beliefs and practices, and that it requires a process of healing and understanding, the 6-month intervention had four components: 1) recognizing/healing historical trauma; 2) reconnecting to traditional culture; 3) parenting/social skill-building; and 4) strengthening family relationships through equine-assisted activities. Engagement and retention were challenging, suggesting that families faced numerous barriers to participation. Youth who completed the program experienced significant increases in cultural identity, self-esteem, positive coping strategies, quality of life, and social adjustment.</p>
<p>Hill, J. S., Lau, M. Y., &amp; Sue, D. W. (2010). Integrating trauma psychology and cultural psychology: Indigenous perspectives on theory, research, and practice. <i>Traumatology</i>, 16(4), 39-47. doi:10.1177/1534765610388303</p>	<p>Several scholars have called for a greater integration of trauma psychology with cultural psychology; however, challenges to successful integration exist and should be carefully considered. Indigenous scholars and researchers have successfully bridged the gap between the two fields in recent years with regard to theory, research, and clinical application. Therefore, Indigenous perspectives, informed by historical, cultural, and epistemological standpoints, are uniquely positioned to provide a transformational framework for redirecting the process and impact of integrating cultural psychology with trauma psychology. We review theoretical, empirical, and clinical intervention examples and explore implications for the integration of trauma psychology and cultural psychology within a framework that respects Indigenous communities' sovereignty and rights to self-determination.</p>
<p>Marsh, T. N., Coholic, D., Cote-Meek, S., &amp; Najavits, L. M. (2015). Blending aboriginal and western healing methods to treat intergenerational trauma with substance use disorder in aboriginal peoples who live in northeastern Ontario, Canada. <i>Harm Reduction Journal</i>, 12(1).</p>	<p>As with many Indigenous groups around the world, Aboriginal communities in Canada face significant challenges with trauma and substance use. The complexity of symptoms that accompany intergenerational trauma and substance use disorders represents major challenges in the treatment of both disorders. There appears to be an underutilization of substance use and mental health services, substantial client dropout rates, and an increase in HIV infections in Aboriginal communities in Canada. The aim of this paper is to explore and evaluate current literature on how traditional Aboriginal healing methods and the Western treatment model "Seeking Safety" could be blended to help Aboriginal peoples heal from intergenerational trauma and substance use disorders</p>

Maxwell, K. (2014). Historicizing historical trauma theory: Troubling the trans-generational transmission paradigm. *Transcultural psychiatry*, 51(3), 407-435. doi:10.1177/1363461514531317

The premise that “trauma” is transmitted across generations is central to the historical trauma discourse currently circulating in indigenous communities and professional networks in Canada. Historical trauma may be understood as the offspring of two older and apparently antithetical discourses: Native healing, and colonial professional critiques of indigenous family life. While the former has maintained a therapeutic focus on restoring intergenerational social relations, the latter has pathologized indigenous parenting and child-rearing practices. The emergence of historical trauma marks a global shift in the moral economy by which victimhood status, acquired through individual experiences of physical and especially sexual abuse, has come to wield greater currency than collective struggles against colonialism.

Menzies, P. (2010). Intergenerational trauma from a mental health perspective. *Native Social Work Journal*, 7, 63-85.

Over the past few decades, intergenerational trauma as an explanation for the array of social conditions that exist within aboriginal communities has been put forward by a number of researchers. Through in-depth interviews, this study explored the men’s personal and family histories, seeking links between personal homelessness and intergenerational trauma. An interpretation of the data from these interviews and from a focus group with other homeless Aboriginal men isolated the indicators of intergenerational trauma within four domains: individual, family, community, and nation. The indicators of intergenerational trauma within these domains are synthesized in the Intergenerational Trauma Model.

Pearce, M. E., Blair, A. H., Teegee, M., Pan, S. W., Thomas, V., Zhang, H., Schechter, M. T., & Spittal, P. M. (2015). The cedar project: Historical trauma and vulnerability to sexual assault among young aboriginal women who use illicit drugs in two Canadian cities. *Violence Against Women*, 21(3), 313-329. doi:10.1177/1077801214568356

This study explored trends of sexual assault and associated risk factors within a cohort of young Aboriginal women who used drugs in Vancouver and Prince George, Canada, between 2003 and 2010. Results demonstrated no change in the trend of sexual assault over time; however, odds of sexual assault were significantly higher for women who had at least one parent who attended residential school, had experienced childhood sexual abuse, were involved in sex work, had been offered money to not use condoms, had used injection drugs, had injected cocaine and opiates daily, had binged with injection drugs, and had difficulty accessing clean syringes. Findings highlight the urgency of interventions addressing the complexity of risk and opportunities for healing.

Roy, A. (2014). Intergenerational trauma and Aboriginal women: Implications for mental health during pregnancy. *First Peoples Child & Family Review*, 9(1), 7-21.

Intergenerational trauma (IGT) explains why populations subjected to long-term, mass trauma show a higher prevalence of disease even several generations after the original events. Residential schools and other legacies of colonization continue to impact Aboriginal populations, who have higher rates of mental health concerns. Poor maternal mental health during pregnancy can have serious health consequences for the mother, the baby, and the whole family; these include impacting the cognitive, emotional and behavioural development of children and youth. This paper has the following objectives: 1) To define intergenerational trauma and contextualize it in understanding the mental health of pregnant and parenting Aboriginal women; 2) To summarize individual-level and population-level approaches to promoting mental health, and examine their congruence with the needs of Aboriginal populations; 3) To discuss the importance of targeting IGT in both individual-level and population-

	level interventions for pregnant Aboriginal women.
<p>Smith, D., Varcoe, C., &amp; Edwards, N. (2005). Turning around the intergenerational impact of residential schools on aboriginal people: Implications for health policy and practice. <i>Canadian Journal of Nursing Research, 37</i>(4), 38-60.</p>	<p>This paper reports on the first wave of results from a study exploring the views and experiences of community-based stakeholders on improving care for pregnant and parenting Aboriginal people in Canada. The issue of poor access to prenatal care by Aboriginal women and families is viewed through a post-colonial lens within a historical and social location. This case study was guided by participatory research principles. "Turning around" the intergenerational impact of residential schools was identified as pivotal to care. The results suggest that pregnancy and parenting must be understood as reflecting both the unique individual and family experiences of Aboriginal people and the intergenerational impact of residential schools as an instrument of collective violence and as a key factor in Aboriginal Canadians' inequitable health status and access to health services.</p>
<p>Quinn, A. (2007). Reflections on intergenerational trauma: Healing as a critical intervention. <i>First Peoples Child &amp; Family Review, 3</i>(4), 72-82.</p>	<p>The high numbers of Aboriginal children placed in provincial and territorial care demonstrates the need for effective interventions that directly address the legacy of trauma from colonialization. This paper argues that healing is a critical component of any intervention seeking to help Aboriginal Peoples and their children. Research on healing and recent government initiatives and legislation directed at preserving traditional Aboriginal healing practices are discussed. This article concludes with recommendations for various community members involved in the healing of Aboriginal Peoples.</p>
<p>Waldram, J. B. (2014). Healing history? Aboriginal healing, historical trauma, and personal responsibility. <i>Transcultural psychiatry, 51</i>(3), 370-386. doi:10.1177/1363461513487671</p>	<p>What can an exploration of contemporary Aboriginal healing programs such as those offered in Canadian prisons and urban clinics tell us about the importance of history in understanding social and psychological pathology, and more significantly the salience of the concept of "historical trauma"? The form of Aboriginal "healing" that has emerged in recent decades to become dominant in many parts of the country is itself a reflection of historical processes and efforts to ameliorate the consequences of what is today often termed "historical trauma." There is a tension between the attribution of this distress to both specific (e.g., residential schools) and generalized (e.g., colonialism) historical factors. "Historical trauma" represents an idiom of distress that captures a variety of historical and contemporary phenomena and which provides a language for expressing distress that is gaining currency, at least among scholars, and that the contemporary Aboriginal healing movement represents an effort to deal with the absence or failure of both "traditional" Aboriginal healing and government-sponsored medical and psychological services to adequately deal with this distress of colonialism.</p>
<p>Walters, K. L., Mohammed, S. A., Evans-Campbell, T., Beltrán, R. E., Chae, D. H., &amp; Duran, B. (2011). Bodies don't just tell stories, they tell histories. <i>Du Bois Review: Social Science Research on Race, 8</i>(01), 179-189. doi:10.10170S1742058X11</p>	<p>Increasingly, understanding how the role of historical events and context affect present-day health inequities has become a dominant narrative among Native American communities. Historical trauma, which consists of traumatic events targeting a community (e.g., forced relocation) that cause catastrophic upheaval, has been posited by Native communities and some researchers to have pernicious effects that persist across generations through a myriad of mechanisms from biological to behavioral. Consistent with contemporary societal determinants of health approaches, the impact of historical trauma calls upon researchers to explicitly examine theoretically and</p>

00018X	empirically how historical processes and contexts become embodied.
<p>Walters, K., Simoni, J.M., Evans-Campbell T. (2002). Substance use among American Indians and Alaska Natives: Incorporating culture in an "indigenist" stress-coping paradigm". <i>Public Health Reports</i>, 117(1), S104-S117.</p>	<p>This article proposes a new stress-coping model for American Indians and Alaska Natives (AIs) that reflects a paradigmatic shift in the conceptualization of Native health. It reviews sociodemographic information on AIs, rates of substance abuse and related health outcomes, and the research supporting the model's pathways. OBSERVATIONS: Although health outcomes among AIs are improving, large disparities with other racial and ethnic groups in the United States remain. Many health-related problems are directly linked to high rates of substance use and abuse. CONCLUSION: Eurocentric paradigms focus on individual pathology. An "indigenist" perspective of health incorporates the devastating impact of historical trauma and ongoing oppression of AIs. The model emphasizes cultural strengths, such as the family and community, spirituality and traditional healing practices, and group identity attitudes.</p>
<p>Weaver, H. N., &amp; Hertz, M. Y. H. B. (1999). Examining two facets of American Indian identity: Exposure to other cultures and the influence of historical trauma. <i>Journal of Human Behavior in the Social Environment</i>, 2(1-2), 19-33.</p>	<p>Specialized content about factors that influence the cultural identity of Native people must be included within the social work knowledge base to increase practitioners' effectiveness with this population. This article explores some of the factors which shape cultural identity for Native people and the implications of Native cultural identity for social work practice. The authors begin by recounting theoretical perspectives on culture, then report the findings of two studies that examine different factors which impact upon identity. The first study examines the impact of exposure to more than one culture on a sense of identity among Native youth in the Northeastern United States. The second study examines historical trauma and unresolved grief among the Lakota. Implications of multicultural exposure and historical unresolved grief for social work practice with Native people are discussed.</p>
<p>Whitbeck, L. B., Adams, G. W., Hoyt, D. R., &amp; Chen, X. (2004). Conceptualizing and measuring historical trauma among American Indian people. <i>American journal of community psychology</i>, 33(3-4), 119-130. doi:10.1023/B:AJCP.0000027000.77357.31</p>	<p>This article reports on the development of two measures relating to historical trauma among American Indian people: <i>The Historical Loss Scale</i> and <i>The Historical Loss Associated Symptoms Scale</i>. Measurement characteristics including frequencies, internal reliability, and confirmatory factor analyses were calculated based on 143 American Indian adult parents of children aged 10 through 12 years who are part of an ongoing longitudinal study of American Indian families in the upper Midwest. Results indicate both scales have high internal reliability. Frequencies indicate that the current generation of American Indian adults have frequent thoughts pertaining to historical losses and that they associate these losses with negative feelings.</p>
<i>Armenian Genocide Contexts</i>	
<p>Altounian, J. (1999). Putting into words, putting to rest and putting aside the ancestors: How an analysand who was heir to the Armenian genocide of 1915 worked through mourning. <i>The International Journal of</i></p>	<p>Discusses the intergenerational psychic transmission of collective trauma on the basis of the author's personal experience as a descendant of victims of the Armenian genocide of 1915. She shows how the processes of transmission are encumbered within a diaspora community by the incorporation of objects in the throes of mourning, the invalidation of prohibitions by murder-become-it, and lack of differentiation between the sexes. A parallel is drawn between the characteristic secrecy of the genocidal project on the part of the perpetrators and the sense of illegitimacy of the victims' descendants,</p>

*Psychoanalysis*, 80(3), 439-448.

exacerbated in the case of the Armenian catastrophe by the refusal of the state that inherited the genocide to confess to it and consequently, its erasure from Western consciousness.

Danielian, J. (2010). A century of silence. *The American Journal of Psychoanalysis*, 70(3), 245-264.  
doi:10.1057/ajp.2010.12

This paper addresses how crimes of genocide go beyond a need for naked power, economic aggrandizement, or territorial conquest. Such crimes involve psychogenic and psychodynamic underpinnings that can be terrifying to contemplate. Yet their psychological study is essential. The Armenian genocide has been taken as a point of reference. Because the Armenian genocide has resulted in nearly a century-long effort of perpetrator denial, it can provide an important case study of how long-standing trauma and denial reinforce each other and illuminate each other. As a result, this genocide has aptly been called the “secret genocide,” the “unremembered genocide,” and a “crime without a name.” The author holds that genocidal trauma (and trauma in general) is contagious and the contagion is likely to be insidious. All who come in contact with it can come away marked, including victim, victim families and progeny, observers, advocates, researchers, and yes, perpetrators.

Karenian, H., Livaditis, M., Karenian, S., Zafiriadis, K., Bochtsou, V., & Xenitidis, K. (2011). Collective trauma transmission and traumatic reactions among descendants of Armenian refugees. *International journal of social psychiatry*, 57(4), 327-337.  
doi:10.1177/0020764009354840

Aims: To investigate the psychological impact on contemporary Armenians of traumatic events suffered by Armenians during the period 1914–1918. Conclusion: The results are indicative of a long-lasting (though gradually fading) cross-generational traumatizing effect of the discussed events. Clinicians having to deal with patients belonging to cultural or ethnic groups that suffered persecutions in the past should take into account the probable effects caused by a trauma-transmission mechanism.

#### *Australian Aboriginal Contexts*

Barney, K., & Mackinlay, E. (2010). 'Singing Trauma Trails': Songs of the Stolen Generations in Indigenous Australia. *Music and Politics*, 4(2), 1-25

This article examines the trauma caused by government policies, underlying philosophies and justifications which allowed for the forcible removal of Aboriginal and Torres Strait Islander children from their families. Discussions then turn to the effects of these policies on the Indigenous community today and the way in which Indigenous Australian performers and songwriters tell the story of the Stolen Generations through the medium of contemporary song. Examples of song texts are examined to come to an understanding of how Indigenous Australians attempt to tell both “stories of pain and stories of healing” (Atkinson, 2002, 96) in order to reconcile the traumatic effect of protectionist and assimilationist policies on their lives. It also shows the determination of Indigenous people to tell the story of the past, present, and transgenerational trauma of the Stolen Children so that the same mistakes will not be made again.

Cox, D., Young, M., & Bairnsfather-Scott, A. (2009). No justice without healing: Australian Aboriginal people and family violence. *Australian Feminist Law*

To have justice without healing is not possible, it is just short changing people. To heal, a person must be able to come to a place that is safe and allows them to deal with the pain of the past, process this and begin their healing journey. If people don't heal, they will not be able to change their behaviours and will continue to be victims and perpetrators of violence. Aboriginal people in Australia must be able to govern their own path of healing, to deal with past injustices, such

*Journal*, 30(1), 151-161.  
doi:10.1080/13200968.2009.10854421

as colonisation and its effects, in order to move into a future which will sustain their livelihood and foster a just society.

Edney, R. (2003). The Stolen Generation and sentencing of Indigenous offenders. *Indigenous law bulletin*, 5(23).

The Human Rights and Equal Opportunity Commission's Report *Bringing Them Home* was a landmark document that detailed the circumstances in which Indigenous children were removed from their families as part of government policy. The consequences of that policy have been significant. It has undermined the 'social capital' of Indigenous communities throughout Australia and caused intergenerational trauma and suffering in those communities. The concept is still contested by particular quarters of Australian society, however, it is generally conceded that an Indigenous person's membership of the stolen generation produces negative consequences, particularly relating to sense of identity and place. Such consequences have resulted in psychic and cultural harm, and often significant distress throughout the life course of affected individuals. One of these consequences is involvement in the criminal justice system through offending behaviour. This article will suggest a basis upon which membership of the stolen generation may be properly taken into account when sentencing an Indigenous offender.

Hunter, E. (1998). Considering Trauma in an Indigenous Context. *Aboriginal and Islander Health Worker Journal*, 22(5), 9-18.

An overview is presented of experiences of trauma faced by a particular group of Indigenous populations, Aboriginal and Torres Strait Islander Australians. Features of Aboriginal and Torres Strait Islander history and circumstances that underlie and inform experiences of and response to trauma are explained.

Danieli, Y. (2007). Assessing trauma across cultures from a multigenerational perspective. In *Cross-cultural assessment of psychological trauma and PTSD*(pp. 65-89). doi:10.1080/10398560902948746

Psychoanalysis is used to explore the effects of the annihilation of culture and how this leads to a loss of identification with a collective subjectivity and triggers catastrophic symptoms including loss of collective hope, the rise of addictive and self-destructive behaviours, and the intergenerational transmission of trauma among Indigenous Australian communities. I propose restorative educational interventions for young Indigenous children that seek to engage them with ancestral memory, cultural narratives, and a sense of purpose so that healing from historically transmitted trauma may be initiated and a grounded sense of subjectivity restored.

Pihama, L., Reynolds, P., Smith, C., Reid, J., Smith, L. T., & Te Nana, R. (2014). Positioning historical trauma theory within Aotearoa New Zealand. *AlterNative*, 10(3).

This article explores the relevance of historical trauma theory for Maori research. In exploring the impact of historical trauma upon Maori it has become clear that the terminology associated with historical trauma theory is considered controversial in Aotearoa New Zealand. As such, this article provides an overview of key definitions relevant to historical trauma and explores these in relation to recent reporting related to the use of the terms "holocaust" and "genocide" in the context of colonization in Aotearoa New Zealand.

Ralph, N., Hamaguchi, K., & Cox, M. (2006). Transgenerational trauma, suicide and healing from sexual abuse in the Kimberley region, Australia. *Pimatisiwin: A Journal of*

It is contended that transgenerational trauma—the transfer of the impacts of historical trauma and grief across successive generations of Aboriginal people—is manifest in the current social issues of interpersonal violence, suicide and sexual abuse in remote communities and towns of the Kimberley region. For Aboriginal youth, exposure to multiple layers of trauma results in a cumulative effect on the emergence of trauma symptomatology, which includes an

*Aboriginal & Indigenous Community Health*, 4(2), 116-136.

increased risk of self harm, destructive behaviour and suicide. Research conducted in this region between 2000 to 2002 found support for a relationship between Aboriginal youth suicide, trauma exposure and post traumatic stress disorder. These findings were echoed in the daily work of staff with the Kimberley Aboriginal Medical Services Council (KAMSC) Regional Centre for Social and Emotional Well Being.

Walters, J. A., Morgado, P., Kilander, G., Khabarova, L., Molotkova, N., Decamous, G., & Cadle, B. (2011). The psychological and social consequences of trauma and race relations on the Australian Indigenous people. *International Journal of the Humanities*, 9(8), 149-164.

Following colonization, the Australian settlers' perception of the indigenous people was that their cultural beliefs and behaviors were inferior and deemed to extinction. This perception led to the development and implementation of a policy which resulted in the forced removal of Aboriginal children from their homes. These children were placed with individuals and institutions with the goal of teaching them to think and act white in order to "breed out" the Aboriginal race. The unthinkable trauma and loss experienced due to this forced separation from their mothers, families, and cultural heritage made these children vulnerable and they often were physically, emotionally and sexually abused. This has resulted in generations of Aborigines struggling to confront the consequences of trauma and loss for the stolen generation and their families. This paper uses a psychoanalytic approach to understand Australia's race relations and focuses on several urban Aboriginal individuals and families who are struggling with the psychological and social consequences of intergenerational trauma.

#### *Burundian Contexts*

Song, S. J., de Jong, J., O'Hara, R., & Koopman, C. (2013). Children of former child soldiers and never-conscripted civilians: A preliminary intergenerational study in Burundi. *Journal of Aggression, Maltreatment & Trauma*, 22(7), 757-772. doi:10.1080/10926771.2013.813881

Studies around the world show that former child soldiers (FCSs) have mental health strengths and limitations, and highlight the important role of families and communities in reintegration to society. However, there are limited data that examine the mental health risks and protective factors of the offspring of FCSs, especially as compared to civilian populations. We compare psychological, social, and familial factors between FCSs and civilian parents and children. This article discusses the importance of evaluating the children of FCSs from an ecological perspective through longitudinal studies as well as interventions that incorporate family-centered care.

Song, S. J., Tol, W., & Jong, J. (2014). Indero: Intergenerational trauma and resilience between Burundian former child soldiers and their children. *Family process*, 53(2), 239-251. doi:10.1111/famp.12071

Since many former child soldiers are aging and having children of their own, this study aimed to understand how the effects of trauma are passed to the next generation. In this qualitative study, semi-structured interviews, focus groups, and observations were conducted with 25 former child soldiers and 15 matched civilian parents. Analysis used a grounded-theory approach. Trauma may be transmitted from former child soldiers to their offspring via (a) the effect on indero (how to raise a child); (b) severe parental emotional distress; and (c) community effects. Incorporating themes of indero values on how to raise children, the effects of parental post traumatic stress and depressive symptoms on offspring, and the stigma associated with the families of former child soldiers may provide key areas of intervention in mental healing.

*Cambodian Refugee Contexts*

Field, N. P., Muong, S., & Sochanvimean, V. (2013). Parental styles in the intergenerational transmission of trauma stemming from the Khmer Rouge regime in Cambodia. *American Journal of Orthopsychiatry*, 83(4), 483-494.  
doi:10.1111/ajop.12057

The impact of parental styles in intergenerational transmission of trauma among mothers who survived the Khmer Rouge regime in Cambodia, in power from 1975 to 1979, and their teenaged children was examined in 2 studies. In Study 1, Cambodian female high school students and their mothers were recruited. Each daughter completed anxiety and depression measures as well as assessment of her mother's role-reversing, overprotective, and rejecting parental styles, whereas the mothers completed measures of their trauma exposure during the Khmer Rouge regime and PTSD symptoms. The mother's PTSD symptoms were predictive of her daughter's anxiety. Moreover, the mother's role-reversing parental style was shown to mediate the relationship between her own and her daughter's symptoms. In support of their generalizability, the results were replicated in Study 2 in a Cambodian-American refugee. The implications of the findings within the larger literature on intergenerational trauma transmission stemming from genocide are discussed.

Han, M. (2006). Relationship among perceived parental trauma, parental attachment, and sense of coherence in Southeast Asian American college students. *Journal of Family Social Work*, 9(2), 25-45.  
doi:10.1300/J039v09n02\_02

This paper empirically examined the effect of parental trauma on SEA American late adolescents' sense of coherence, as mediated by parent-child attachment. The findings demonstrated the deleterious effect of parental trauma on attachment and their offsprings' sense of coherence. Further, attachment mediated the effect of parental trauma on adolescent's sense of coherence. The findings demonstrate the reality that what happened in one generation will affect what happens in the following generation and emphasize the importance of working with SEA populations using a family system approach.

Lin, N. J., Suyemoto, K. L., & Kiang, P. N. C. (2008). Education as catalyst for intergenerational refugee family communication about war and trauma. *Communication Disorders Quarterly*, 30(4), 195-205.  
doi:10.1177/1525740108329234

This article describes influences on intergenerational communication within refugee families about sociocultural trauma and explores how education may positively affect this communication process. Drawing on qualitative research and grounded theory through a larger study concerning intergenerational effects of and communication about trauma in Cambodian American refugee families, this article highlights ways that education may contribute to healing broken narratives within refugee families affected by war and genocide. Although focusing on Cambodian American experiences, we suggest that the role of education may be similarly helpful in facilitating intergenerational communication for other individuals with personal and familial experiences with trauma, such as students from refugee families who have fled Vietnam, Somalia, Bosnia, and other sites of forced migration.

Sack, W. H., Clarke, G. N., & Seeley, J. (1995). Posttraumatic stress disorder across two generations of Cambodian refugees. *Journal of the American Academy of Child & Adolescent Psychiatry*, 34(9), 1160-1166.  
doi:10.1097/00004583-

*Objective:* To examine the expression of war-related trauma as manifested by *DSM-III-R* rates of posttraumatic stress disorder (PTSD) and major depressive disorder in two generations of Cambodian refugees living in the western United States. *Results:* PTSD was found to be significantly related across parent-child generations. A non-significant generational trend was also found for depressive disorders. A number of environmental variables measured in the study (amount of reported war trauma, loss, living arrangements, treatment received, socioeconomic status) were not related to these findings. Parents were more likely to report an earlier onset of PTSD symptoms. *Conclusions:* This study suggests that PTSD in refugees may cluster in families.

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Whether this phenomenon is caused by a genetic susceptibility to trauma awaits further research. PTSD and depressive disorders in refugee populations, while often comorbid, appear to follow different courses over time.

*Caribbean and Caribbean American Contexts*

Adams, C. J. (1999). The construction of identities among Caribbean-Americans. *Caribbean quarterly*, 1-12.

The construction of Caribbean identities has been a daunting task given the historical forces at work in the region, the resulting enframing ideologies/metanarratives, the stultifying structural arrangement and the austere and discriminatory systems of distributive justice. In this section I will discuss three themes that are constants in the history of the psychology of Caribbean identities. The themes are (1) trauma and pain, (2) constriction of reflective space, and (3) the near silencing of authentic voice.

Sutherland, P. (2011). Traditional Healing and Spirituality Among Grenadian Women: A Source of Resistance and Empowerment. *Canadian Woman Studies*, 29(1-2).

Grenada is a small island in the Caribbean with a history of violence, conflict, and trauma. The connection between history and contemporary life is an important one to explore as the past appears to be inextricable linked to the present. Moreover, it continues to bear unremittingly and often despairingly on the lives of Grenadian women. Like most Caribbean societies, Grenada came into being with the destruction of its Indigenous population and the importation of large numbers of Africans for the purpose of slavery by European colonizers. Although slavery was abolished in 1834, Grenada's turbulent history did not end with the eradication of the slave trade. Reducing women's bodies and sexuality to commodities that can be bought, sold, negotiated, and regulated has its origins in the slave trade. The literature is replete with articulations of how black women's bodies and sexuality have represented contested sites for struggles over agency and survival from slavery onward. It seems that through traditional healing rituals and the connection with the spirits, women are provided with an avenue to express and process their suffering, transcend everyday experiences of violence and trauma where their bodies are constantly being imposed upon, and embark on a journey of recovering or reclaiming their sense of self.

*Central and South American Contexts*

Dickson- Gómez, J. (2002). The sound of barking dogs: violence and terror among Salvadoran families in the postwar. *Medical Anthropology Quarterly*, 16(4), 415-438. doi:10.1525/maq.2002.16.4.415

This article examines the trans generational transmission of trauma among campesinos living in a rural, repopulated community in El Salvador. Through their reactions to and interpretations of everyday events, campesino parents who lived in the guerrilla camps explicitly transmit trauma to children who did not experience the recent civil war. Illness narratives by sufferers of nervios transmit trauma and point to the basic immorality of the war, an immorality that continues today. In addition, the symptoms of nervios constitute a mechanism by which trauma is implicitly transmitted. Symptoms of nervios point to what generally is not and, indeed, cannot be voiced; the destruction of primary relationships in the family and unresolved grief and helplessness, which, through the responses of family members to the sufferer, are reproduced and reenacted in the present family context.

<p>Espinoza, D. (2010). Superando la teta asustada: Structural violence, intergenerational trauma, and indigenous Peruvian women's agency. NACCS Annual Conference Proceedings. Paper 5.</p>	<p>Most studies on war and political violence in Peru are centered in rural villages throughout Ayacucho, the region most affected by the political violence (Theidon 2001). Anthropologists need to critically examine how such historical patterns of violence, trauma, and inequality also impinge on the lives of contemporary urban communities. Anthropologist Kimberly Theidon's work provides a useful framework to begin such an inquiry. Her work on the legacies of armed conflict in Ayacucho explores how painful memories accumulate in the body and how one can literally suffer from the symptoms of history: "Memories also sediment in our bodies, converting them into historical processes and sites" (2009: 9).</p>
<p>Ramos, E. (2013). Crucial conversations: Exploring intergenerational trauma in post-conflict Guatemala. <i>Columbia Social Work Review</i>, 4, 11-23.</p>	<p>Guatemala is a country fractured by years of sociopolitical conflict and instability. In the summer of 2011, I secured grant funding to implement supportive counseling and educational services, in conjunction with a local nonprofit organization, to help local children better understand and process the profound effects of the country's civil war, which ended in 1996. Upon beginning this project, however, it became apparent that many of the children with whom I interacted had limited or no knowledge of the conflict. This article explores the pervasive and systematic avoidance of discussing widespread psychosocial trauma and the potential effects of this avoidance on parents, children, and the greater community. I compare these observations with existing social work and psychology research literature, drawing from the concept of intergenerational trauma, or the transference of trauma symptoms from parent to child. I then discuss whether the avoidance of trauma discussion with children can protect their psychological well-being and prevent the transference of trauma, or if such avoidance leads to increased risk of individual psychological impairment and cyclical community problems. Based upon this analysis, the article finally discusses implications for social workers confronting psychosocial trauma in post-conflict settings.</p>
<p>Viñar, M. U. (2012). Political Violence: Transgenerational Inscription and Trauma. <i>International Journal of Applied Psychoanalytic Studies</i>, 9(2), 95-108. doi:10.1002/aps.1310</p>	<p>Threatened by voices by popular dissent, some South American governments used massive imprisonments, systematic torture of prisoners, executions, indictments, and forced exile to silence and intimidate thousands of men and women. This profoundly disturbed all aspects of "normal" life from the co-existence of different groups of the population to the core of the family. The traumatic effect produced by these events, which are both repressive to, and sustained in children's personality development, and the family as a whole, cannot be ignored. This article will look at the way in which terror is imprinted upon the psyche of victims of violence, and the effects of the transmission of that imprint from one generation to the next if there is no treatment intervention.</p>
<p><i>Hmong American Contexts</i></p>	
<p>Han, M. (2006). Relationship among perceived parental trauma, parental attachment, and sense of coherence in Southeast Asian American college students. <i>Journal of Family Social Work</i>, 9(2),</p>	<p>This paper empirically examined the effect of parental trauma on SEA American late adolescents' sense of coherence, as mediated by parent-child attachment. The findings demonstrated the deleterious effect of parental trauma on attachment and their offsprings' sense of coherence. Further, attachment mediated the effect of parental trauma on adolescent's sense of coherence. The findings demonstrate the reality that what happened in one generation will affect what happens in the following generation and emphasize the importance of working</p>

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doi:10.1300/J039v09n02\_02

with SEA populations using a family system approach.

Lee, K. Y., & Clarke, K. (2013). The significance of social memory in 1.5-generation Hmong-Americans: Implications for culturally competent social work practice. *Journal of Ethnic And Cultural Diversity in Social Work*, 22(2), 162-177. doi:10.1080/15313204.2013.785376

Approaches to working with culturally diverse populations require sensitivity to and knowledge of the context, historical experience, and evolving identity of various socio-cultural and ethnic groups. This exploratory qualitative study examines how the 1.5 generation of Hmong in higher education make meaning of the trauma of the Secret War in Laos as a part of their identity and current lives in the United States. The Secret War trauma and subsequent forced migration left many older Hmong traumatized, and may predispose the 1.5-generation Hmong to secondary traumatic stress disorder symptoms. Four themes emerged in the study: the continued clandestineness of the Secret War, shared hardship, gratefulness, and bicultural identity. This study gives a snapshot of the complex legacy of grief for lost family, a sense of exclusion from mainstream society, and gratitude to parents that is a hallmark of many young Hmong-Americans.

#### *Holocaust Contexts*

Baider, L., Goldzweig, G., Ever-Hadani, P., & Peretz, T. (2006). Psychological distress and coping in breast cancer patients and healthy women whose parents survived the Holocaust. *Psycho-Oncology*, 15(7), 635-646. doi:10.1002/pon.1010

Psychological distress levels of breast cancer patients whose parents were Holocaust survivors ('second-generation Holocaust' patients) were previously shown to be significantly higher than those of a matched group of patients with non-traumatized parents. In this study, we investigated whether this effect reflects only the generally higher distress levels of second-generation Holocaust women or whether breast cancer patients with traumatized parents also present lower adaptation abilities, which result in increased distress to the breast cancer diagnosis. These two factors (cancer × second generation) had a synergistic effect on the levels of depression and psychoticism. These results support the hypothesis that, at least on some psychological measures, the cumulative distressing effect of having traumatized parents and breast cancer diagnosis is higher than the effect of each factor alone.

Gorden, C. (2011). Time is on my side: The intergenerational transmission of unmourned trauma and its impact on agency, narrative, and time. *Contemporary Psychoanalysis*, 47(3), 364-385.

This article focuses on the intergenerational transmission of Holocaust trauma to the second generation and the notion of unconscious identification as a significant mechanism in the transmission of these traumas. Through extended clinical material, I will illustrate the critical alterations to one's sense of time, agency, and personal narrative when, as a second-generation survivor, one does not accept and mourn the traumatic losses of the previous generation. The article details the theoretical and phenomenological links and workings connecting trauma, mourning, and time, and how disruptions may result in transmission to the next generation.

Gottschalk, S. (2003). Reli(e)ving the past: Emotion work in the Holocaust's second generation. *Symbolic Interaction*, 26(3), 355-380. doi:10.1525/si.2003.26.3.355

Although most studies of the Second Generation typically account for their social psychological orientations by relying on psychiatric and psychological models, I propose an alternative "listening" to this cohort. I analyze in-depth interviews by adopting Hochschild's insights on emotion work as a sensitizing framework and suggest that (1) four interrelated types of "deep acting" they continuously feel compelled to perform can account for the psychological "symptoms" commonly attributed to them and (2) these types of deep acting constitute adjustments and reactions to problematic emotional dynamics characterizing their survivor families. I conclude with a discussion of

	the reciprocal effects of this emotion work.
<p>Kidron, C. A. (2003). Surviving a distant past: A case study of the cultural construction of trauma descendant identity. <i>Ethos</i>, 31(4), 513-544. doi:10.1525/eth.2003.31.4.513</p>	<p>Despite the abundance of psychological studies on trauma related ills of descendants of historical trauma, and the extensive scholarly work describing the memory politics of silenced traumatic pasts, there has yet to emerge a critical analysis of the constitutive practices of descendants of historical trauma. This article presents an ethnographic account of a support group for descendants of Holocaust survivors, proposing that the discursive frame of intergenerational transmission of Post Traumatic Stress Disorder (PTSD) and support group based narrative practices allow descendants to fashion their sense of self as survivors of the distant traumatic past. The discursive frame of transmitted PTSD acts as both a mnemonic bridge to the past and a mechanism of identity making, as participants narratively reemplot their life stories as having been personally constituted by the distant past.</p>
<p>Mazor, A., &amp; Tal, I. (1996). Intergenerational transmission: The individuation process and the capacity for intimacy of adult children of Holocaust survivors. <i>Contemporary family therapy</i>, 18(1), 95-113. doi:10.1007/BF02196853</p>	<p>This article deals with the intergenerational processes of adult children of Holocaust survivors. By exploring their level of individuation from the parental family and their capacity for intimacy with spouses, the research findings reveal that: Adult children of survivors are emotionally more interconnected to their parents than are their counterparts (using the MIS). Adult children of survivors have a lower intimacy capacity with their spouses in comparison with the control group. These findings are explained from an intergenerational perspective regarding a post-traumatic population.</p>
<p>Prager, Jeffrey. "Lost childhood, lost generations: the intergenerational transmission of trauma." <i>Journal of Human Rights</i> 2.2 (2003): 173-181. doi:10.1080/1475483032000078161</p>	<p>Focuses on intergenerational transmission of trauma, largely within the context of the Holocaust. Interaction between psychological experience and social context; Relational nature of generational groupings; Transmission of behaviors and expectations.</p>
<p>Rowland-Klein, D., &amp; Dunlop, R. (1998). The transmission of trauma across generations: Identification with parental trauma in children of Holocaust survivors. <i>Australian and New Zealand Journal of Psychiatry</i>, 32(3), 358-369. doi:10.3109/00048679809065528</p>	<p>Objective: This study examines the phenomenology of intergenerational transmission of trauma with the aim of elucidating the interactional process of transmission within an object relations framework. Conclusions: The data suggest that unconscious processes are at least partially involved in the transmission of trauma. A form of projective identification is proposed as an explanatory mechanism which brings together diverse aspects of the observed phenomena: projection by the parent of Holocaust-related feelings and anxieties into the child; introjection by the child as if she herself had experienced the concentration camps; and return of this input by the child in the form of compliant and solicitous behaviour associated with enmeshment and individuation problems. Further research may establish these phenomena as a particular form of Secondary Traumatic Stress Disorder.</p>
<p>Soloman, Z., Kotler, M., &amp; Mikulincer, M. (1988). Combat-related posttraumatic stress</p>	<p>The authors assessed the impact of the Nazi Holocaust on the course and symptoms of posttraumatic stress disorder (PTSD) among Israeli combat stress reaction casualties. They examined a sample of 96 such casualties of the 1982 Lebanon War whose parents had gone through</p>

disorder among second-generation Holocaust survivors: Preliminary findings. *American Journal of Psychiatry*, 145(7), pp. 865-868.

the Nazi Holocaust and compared them to casualties who did not have such family history for 3 consecutive years beginning 1 year after their participation in the war. Results showed that 2 and 3 years after their participation in the 1982 Lebanon War, the children of Holocaust survivors, i.e., "second-generation" casualties, had higher rates of PTSD than did the control subjects, as well as a somewhat different clinical picture. Clinical and methodological implications of the findings are discussed.

Van Ijzendoorn, M. H., Bakermans- Kranenburg, M. J., & Sagi- Schwartz, A. (2003). Are children of Holocaust survivors less well- adapted? A meta-analytic investigation of secondary traumatization. *Journal of traumatic stress*, 16(5), 459-469. doi:10.1023/A:1025706427300

H. Keilson (1979) coined the term "sequential traumatization" for the accumulation of traumatic stresses confronting the Holocaust survivors before, during, and after the war. A central question is whether survivors were able to raise their children without transmitting the traumas of their past. Through a series of meta-analyses on 32 samples involving 4,418 participants, we tested the hypothesis of secondary traumatization in Holocaust survivor families. In the set of adequately designed nonclinical studies, no evidence for the influence of the parents' traumatic Holocaust experiences on their children was found. Secondary traumatization emerged only in studies on clinical participants, who were stressed for other reasons. A stress-diathesis model is used to interpret the absence of secondary traumatization in nonclinical offspring of Holocaust survivors.

Wiseman, H., Metz, E., & Barber, J. P. (2006). Anger, guilt, and intergenerational communication of trauma in the interpersonal narratives of second generation Holocaust survivors. *American Journal of Orthopsychiatry*, 76(2), 176-185. doi: 10.1037/0002-9432.76.2.176

The nature and expression of anger and guilt in sons and daughters of Holocaust survivors were studied by a quantitative and qualitative analysis of relationship narratives. Findings are discussed in relation to the reciprocal over-protectiveness between the surviving parents and their children in the context of intergenerational communication of trauma.

Yehuda, R., Daskalakis, N. P., Lehrner, A., Desarnaud, F., Bader, H. N., Makotkine, I., ... & Meaney, M. J. (2014). Influences of maternal and paternal PTSD on epigenetic regulation of the glucocorticoid receptor gene in Holocaust survivor offspring. *American Journal of Psychiatry*, 171(8), 872-880.

Objective: Differential effects of maternal and paternal posttraumatic stress disorder (PTSD) have been observed in adult offspring of Holocaust survivors in both glucocorticoid receptor sensitivity and vulnerability to psychiatric disorder. The authors examined the relative influences of maternal and paternal PTSD on DNA methylation of the exon 1F promoter of the glucocorticoid receptor (GR-1F) gene (NR3C1) in peripheral blood mononuclear cells and its relationship to glucocorticoid receptor sensitivity in Holocaust offspring. Results: A significant interaction demonstrated that in the absence of maternal PTSD, offspring with paternal PTSD showed higher GR-1F promoter methylation, whereas offspring with both maternal and paternal PTSD showed lower methylation. Lower GR-1F promoter methylation was significantly associated with greater postdexamethasone cortisol suppression. The clustering analysis revealed that maternal and paternal PTSD effects were differentially associated with clinical indicators and GR-1F promoter methylation.

*Japanese American Contexts*

Nagata, D. K., & Cheng, W. J. Y. (2003). Intergenerational communication of race-related trauma by Japanese American former internees. *American Journal of Orthopsychiatry*, 73(3), 266-278. doi:10.1037/0002-9432.73.3.266

The present study investigated the intergenerational communications between Japanese Americans who were unjustly ordered into U.S. concentration camps during World War II and their offspring born after the war. Survey data were collected from 450 2nd-generation (Nisei) Japanese American former internees to assess patterns of communication with their children about the internment. The study and its results are discussed in relation to racial socialization and the influence of ethnicity on reactions to traumatic stress.

Nagata, D. Trierweiler, S. & Talbot, R. (1999). Longterm effects of internment during early childhood in third generation Japanese Americans. *American Journal of Orthopsychiatry*, 69(1), 19-29.

A national survey investigated the long-term effects of World War II internment on family communication, ethnic preference, confidence in personal rights, and attitudes toward redress among 564 third-generation Japanese Americans (sansei) who were infants or young children during incarceration. Findings were compared to those for noninterned sansei with and without parents who had been interned. Differences between interned and noninterned sansei were found primarily in family communication and family distance.

*Korean American Contexts*

Chang, E. T., & Liem, R. (2003). History, trauma, and identity: The legacy of the Korean War for Korean Americans. *Amerasia Journal*: 2003, Vol. 29, No. 3, pp. 111-130.

This article focuses on three central tenets in an oral history project focusing on Korean American family histories encompassing the pivotal event of the Korean War. The project, thus, runs counter to the American "reverence" for the present and future, rather than the past, an inclination that is arguably especially problematic in the case of the Korean War which has already been rendered "forgotten" in popular discourse. Recovering memories of this past can contribute not only to understanding the lasting psychological impacts of intense social and political conflict but also to exploring prospects for personal and social reconciliation. My objective is to examine legacies of the Korean War that can be inferred from family histories and their implications for identity and community building, especially for younger Korean Americans who did not experience the conflict personally.

Liem, R. (2007). Silencing historical trauma: The politics and psychology of memory and voice. *Peace and Conflict: Journal of Peace Psychology*, 13(2), 153-174. doi:10.1080/10781910701271200

This article proposes a multifaceted model of the silence accompanying historical trauma, drawing on some of the first oral histories conducted with Korean Americans about personal and family experiences during the Korean War. It examines (1) the enforcing of silence among Korean Americans by the state, community, and family, and by unresolved individual trauma; (2) memories hidden in that silence; and (3) public remembering expressed through the arts as a means of breaking silences and fostering healing.

*Latino American Contexts*

Estrada, A. L. (2009). Mexican Americans and historical trauma theory: A theoretical perspective. *Journal of*

The observed intergenerational stress response to negative social and historical events is at the core of historical trauma theory, which has been applied to Native Americans, African Americans, and Pacific Islanders, among others. The historical and social experiences of the Mexican population living in the United States have many parallels that

<p><i>ethnicity in substance abuse</i>, 8(3), 330-340. doi:10.1080/15332640903110500</p>	<p>lend themselves to the application of historical trauma theory to macro-level and micro-level influences on access to health care, physical health status, and mental health status, including substance abuse among Mexican Americans. This article highlights the legacy of Spanish colonialism and Anglo-American neo-colonialism on Mexicans and Mexican Americans in the southwestern United States through a potential application of historical trauma theory.</p>
<p>Phipps, R. M., &amp; Degges-White, S. (2014). A New Look at Transgenerational Trauma Transmission: Second- Generation Latino Immigrant Youth. <i>Journal of Multicultural Counseling and Development</i>, 42(3), 174-187. doi:10.1002/j.2161-1912.2014.00053.x</p>	<p>Transgenerational trauma, which was first documented in the 1960s to describe trauma symptoms experienced by descendants of holocaust survivors, has been linked to psychological and physiological transmission factors. Although traumatization still occurs among contemporary immigrant groups, particularly Latino immigrants, little attention has been paid to the experiences of these individuals. The authors present the relevant cultural considerations and conditions that support the need for proactive assessment of transgenerational trauma in U.S.-born Latino youth.</p>
<p><i>Middle Eastern Contexts</i></p>	
<p>Barron, I. G., &amp; Abdallah, G. (2015). Intergenerational trauma in the occupied Palestinian territories: Effects on children and promotion of healing. <i>Journal of Child and Adolescent Trauma</i>, 8(2), 103-110.</p>	<p>Addressing a gap in the trauma recovery literature, the current study seeks to deepen understanding and encourage discussion of intergenerational trauma for Palestinian children living under military occupation. Differing definitions of intergenerational trauma and the plethora of terms used to describe children's traumatic experiences are explored. A historico-political and social context analysis is applied to understanding the creation and maintenance of intergenerational trauma in the occupied Palestinian territories. The cumulative impact of historical and collective trauma and loss, and daily humiliation on children's symptoms are analyzed using a developmental trauma framework. Effective healing of intergenerational trauma is then set within cultural beliefs and the formation of identity. Finally, a framework for shaping future research is proposed.</p>
<p>Daud, A., Skoglund, E., &amp; Rydelius, P. A. (2005). Children in families of torture victims: Transgenerational transmission of parents' traumatic experiences to their children. <i>International Journal of Social Welfare</i>, 14(1), 23-32. doi:10.1111/j.1468-2397.2005.00336.x</p>	<p>This article details a study to test the hypothesis that immigrant children whose parents have been tortured before coming to Sweden suffer from depressive symptoms, post-traumatic stress symptoms, somatisation and behavioural disorders. Fifteen families where at least one of the parents had experienced torture were compared with fifteen families from a similar ethnic and cultural background where their parents might have experienced violence but not torture. The fathers in the tortured group scored higher than their wives only on the sub-scale for guilt. According to the DICA-interviews, the children of tortured parents had more symptoms of anxiety, depression, post-traumatic stress, attention deficits and behavioural disorders compared with the comparison group. Social workers, psychiatrists, psychologists and teachers need to be aware of a possible transmission of parents' traumatic experiences to their children and to develop treatment methods for children of torture victims.</p>
<p>Kaitz, M., Levy, M., Ebstein,</p>	<p>The goals of this article are to discuss the potential risk of children</p>

R., Faraone, S. V., & Mankuta, D. (2009). The intergenerational effects of trauma from terror: A real possibility. *Infant mental health journal*, 30(2), 158-179.  
doi:10.1002/imhj.20209

whose parents were traumatized by terror, to present literature on parenting in the context of terror, and to consider factors that may mediate the transmission of trauma-effects from parents to children. Mediators considered are parents' traumatic distress, disturbed parent-child interactions, trauma-related disturbances in parents' thinking, and effects of stress on children's neural functioning. Also discussed are genetic and environmental factors that may moderate the transmission of intergenerational effects and promote children's risk and resilience. The authors conclude that empirical studies are needed to learn more about the intergenerational transmission of trauma-effects and processes that underlie it. The authors join others in the call to improve evaluation, treatment, and support of trauma victims and their children to stymie the transmission of problems from one generation to the next.

Volkan, V. (2008). Trauma, Identity and Search for a Solution in Cyprus. *Insight Turkey*, 10(4), 95-110.

Massive traumas at the hands of "enemies" affect both individuals and societies for decades. For the Cypriot Turks, their massive trauma started in 1963-1964 when they were forced to live in subhuman conditions in enclaves geographically limited to three percent of the island for eleven years. What happened during the summer of 1974 obviously traumatized the Cypriot Greeks too on a massive scale. Psychoanalysts who have studied the trans-generational transmission of massive social trauma inform us that if the impact of such trauma is denied or repressed, it will still manifest itself in various ways in new generations. The "therapeutic" way of dealing with previous generations' massive social traumas is not to deny or repress what happened to the ancestors, but to be aware of the history. There could be no solution on the island without understanding and addressing traumas of both communities.

#### Northern Ireland Context

Downes, C., Harrison, E., Curran, D., & Kavanagh, M. (2012). The trauma still goes on...: The multigenerational legacy of Northern Ireland's conflict. *Clinical child psychology and psychiatry*, 18(4), 583-603.  
doi:10.1177/1359104512462548

Numerous studies have been conducted internationally on the subject of multigenerational trauma; however, little is currently known about its existence in the context of the Northern Ireland conflict. The present study explored the outcomes of and mechanisms through which the trauma of one generation impacts on subsequent generations in this context. Using an Interpretative Phenomenological Approach (IPA), this study examined the subjective experiences, beliefs and perceptions of four mothers from Northern Ireland, all of whom had endured trauma during their childhoods. The results are discussed in terms of the existing theories on multigenerational trauma, and implications for practice are explored.

Ferguson, N., & Michaelsen, M. M. (2013). The Legacy of Conflict-Regional Deprivation and School Performance in Northern Ireland. *Ruhr Economic Paper*, (419).

The relationship between deprivation and educational outcomes has been the subject of a long-running and deep debate in the economic literature. Recent discussions have focused on causality, with experimental and quasi-experimental approaches taken, yet, predominantly, the literature continues to proxy deprivation with measures of wealth. This paper explores a much wider measure and identifies a causal relationship between regional deprivation and school performance in Northern Ireland. Combining panel data on Key Stage II results from each of Northern Ireland's primary schools with the 2005 Northern Ireland Multiple Deprivation Measure, we show the net negative impact of this wider measure, whilst an extension explores the impacts of each single domain. Using an error-

	<p>component two-stage least squares model, we account for school and neighbourhood selection and the potential endogeneity of our deprivation measure, showing spatial variation in historical violence, which occurred during The Troubles, to be a valid instrument for deprivation.</p>
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<p>Rice, C. A., &amp; Benson, J. F. (2005). Hungering for revenge: The Irish famine, the troubles and shame-rage cycles, and their role in group therapy in Northern Ireland. <i>Group Analysis</i>, 38(2), 219-235. doi:10.1177/0533316405052380</p>	<p>The authors assert that one may view intractable political violence as a genre of ‘emplotted’ action in which society enacts, writes and organizes its narratives into a symbolic system and a mode of historical explanation and a configuration of group relations, which have a storytelling capacity of their own. We demonstrate that in Northern Ireland there is a constant making and narrating of history and that this repetitive and reciprocal ritual of reliving history is a means of managing a profound psychic trauma and displacement which engenders and entrenches political violence, that profoundly affects therapists and their group members.</p>
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*Refugee Contexts*

<p>Dalgaard, N. T., &amp; Montgomery, E. (2015). Disclosure and silencing: A systematic review of the literature on patterns of trauma communication in refugee families. <i>Transcultural psychiatry</i>. doi:10.1177/1363461514568442</p>	<p>This systematic review aimed to explore the effects of different degrees of parental disclosure of traumatic material from the past on the psychological well-being of children in refugee families. A majority of studies emphasize the importance of the timing of disclosure and the manner in which it takes place, rather than the effects of open communication or silencing strategies per se. A pattern emerged in which the level of parental disclosure that promotes psychological adjustment in refugee children depends on whether the children themselves have been directly exposed to traumatic experiences, and whether the children are prepubescent or older. The process of trauma disclosure is highly culturally embedded. Future research needs to address the culturally shaped variations in modulated disclosure and further explore how modulated disclosure can be facilitated in family therapy with traumatized refugee families.</p>
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<p>Hudson, C. C., Adams, S. A., &amp; Lauderdale, J. (2015). Cultural expressions of intergenerational trauma and mental health nursing implications for U.S. health care delivery following refugee resettlement: An integrative review of the literature. <i>Journal of Transcultural Nursing</i>, 26(3), doi:10.1177/1043659615587591</p>	<p>The purpose of this integrative review of the literature is to examine cultural expressions of intergenerational trauma among refugees following resettlement, and to determine culturally sensitive mental health care practice implications for health care practitioners working in U.S. health care delivery. Six recurrent themes were identified important to refugee health care delivery: silence, communication, adaptation, relationship, remembering, and national redress. Practitioners need to consider cultural influences of intergenerational trauma in processing grief related to loss and how artistic modes of expression are experienced, both individually and communally, in refugee health care delivery.</p>
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*South African Contexts*

<p>Hamber, B. (2000). Repairing the irreparable: dealing with the double-binds of making reparations for crimes of</p>	<p>This paper explores the competing and often diverging psychological needs of the individual and the society with regards to making reparations for gross violations of human rights. The South African Truth and Reconciliation Commission's mandate and policy recommendations with regards to reparations for survivors and</p>
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the past. *Ethnicity and Health*, 5(3-4), 215-226. doi:10.1080/713667456

families of victims of human rights abuses are outlined. Thereafter, some of the psychological benefits and double-binds of making reparations are explored. Suggestions are then made with regard to how the process of making reparations for essentially irreparable loss can be eased. It is only the ongoing combination of truth, justice and survivor-support that may one day be sufficient to make some survivors feel at ease with the idea of accepting reparations as a symbolic replacement for what has been lost.

Lazarus, S. (2006). Indigenous approaches to health promotion: Challenges for education support in South Africa. *South African Journal of Psychology*, 36(3), 521-546. doi:10.1177/008124630603600306

This article explores whether and how an integrated approach to health promotion, which draws on indigenous and other worldviews and approaches, can be developed to address more effectively biopsychosocial challenges that constitute barriers to learning and development in education contexts. More specifically, the article aims to investigate whether and how indigenous perspectives to health promotion have been incorporated into support services in Native American contexts and what lessons can be learnt from this for the South African context. The following key challenges relating to incorporating different views of and approaches to health promotion in education in South Africa were identified: facilitating 'paradigm shifting' or mindset change; addressing power dynamics relating to ongoing colonialism; developing culturally responsive education support services and life skills education curricula; and developing strong school-community partnerships. The article argues that these challenges could be successfully pursued within a South African health promoting schools framework that reflects the different perspectives of role players in this context.

Moon, C. (2009). Healing past violence: Traumatic assumptions and therapeutic interventions in war and reconciliation. *Journal of Human Rights*, 8(1), 71-91. doi:10.1080/14754830902717726

Since South Africa's Truth and Reconciliation Commission (TRC), a therapeutic moral order has become one of the dominant frameworks within which states attempt to deal with a legacy of violent conflict. As a consequence, the grammar of trauma, suffering, repression, denial, closure, truth-revelation, and catharsis has become almost axiomatic to postconflict state-building. The rise of the postconflict therapeutic framework is tied, ineluctably, to the global proliferation of amnesty agreements. This article examines the emergence and application of two therapeutic truisms that have gained political credence in postconflict contexts since the work of the TRC. The article shows how, and to what effect, these truisms coalesce powerfully at the site of postconflict national reconciliation processes. It argues that the discourse of therapy provides a radically new mode of state legitimation. It is the language through which new state institutions, primarily truth commissions, attempt to acknowledge suffering, ameliorate trauma and simultaneously found political legitimacy.

Paulse, J., & Lazarus, S. (2010). Colonisation, apartheid and historical trauma as risks for male violence: Report on proceedings of symposium. *African Safety Promotion Journal*, 8(1), 49-61.

This article provides a synopsis of the proceedings of a symposium held at the Traditions 1 Conference in Soweto, Johannesburg, from 18 to 19 November 2009, under the auspices of the University of South Africa (UNISA) Institute of Social and Health Sciences (ISHS). Within the context of Traditions 1, the Symposium on Colonisation, Apartheid and Historical Trauma provided a platform for various people to collectively explore whether and how various forms of historical colonisation (including structural racism through apartheid) is acting as a risk factor to males as victims and perpetrators of interpersonal violence. As well as adding to the current understanding of underlying factors impacting on the high violence rates in South Africa, a central



	<p>aim of this symposium was to identify ways of addressing the challenges raised, for the purposes of contributing to violence prevention, and safety and peace promotion in South Africa.</p>
<p>Prager, J. (2015). Danger and deformation: A social theory of trauma part II: Disrupting the intergenerational transmission of trauma, recovering humanity, and repairing generations. <i>American Imago</i>, 72(2), 133-155. doi:10.1353/aim.2015.0008</p>	<p>This essay is the second of a two-part <i>American Imago</i> article on a social theory of trauma. Measures to disrupt the transmission of traumatic experiences and their social sequelae are discussed as an ongoing cross-generational challenge, in which traumatic pasts capture a portion of a nation's self-understanding. The essay examines how to repair societies and to recover lives freed from past experiences when trauma felt by earlier generations impinges both on collective healing and on in-the-present autonomy. It focuses on post-apartheid South Africa, where recovery from past racist practice requires measures to reduce its continuing effects on those who survived or were born after the 1994 abolition of apartheid. Derived from lessons learned in the psychoanalytic consulting room, three propositions are offered to understand the phenomenology of traumatic experiences. These three insights can help undo trauma's lasting impacts in subsequent generations, including the persistence of racism: trauma is a memory illness, whose healing can only be done in the present; traumatic transmission across generations often occurs unconsciously and affectively; and traumatic symptoms surface as the result of an in-the-present interpersonal or societal failure.</p>
<p>Swartz, L., &amp; Drennan, G. (2000). The cultural construction of healing in the Truth and Reconciliation Commission: implications for mental health practice. <i>Ethnicity and Health</i>, 5(3-4), 205-213. doi:10.1080/713667455</p>	<p>The Truth and Reconciliation Commission (TRC) has been widely hailed by mental health practitioners and others as a source of psychological healing. In this article we consider this claim and its relevance to clinical practice. Recent research in anthropology and related disciplines in South Africa and elsewhere raises questions about the cultural construction of traumatic memory and healing. We argue that these questions have bearing on how we understand the role of mental health practitioners and mental health institutions in the post-TRC period. Case material is used to illustrate our view that it is important to distinguish between individual and collective healing.</p>
<p><i>Southeast Asian Contexts</i></p>	
<p>Nguyen, S. T. (2013). The Effect of Trauma Transmission: Psychosocial Development of Second-Generation Southeast Asian American College Students. <i>Journal of the Indiana University Student Personnel Association</i>, 35-44.</p>	<p>Southeast Asian American students, in particular, have unique cultural experiences, such as being raised by refugee parents and navigating a bi-cultural identity. Utilizing Kodama, McEwen, Liang, and Lee's (2002) psychosocial development of Asian American identity, this article examines the effects of psychosocial development on second-generation Southeast Asian American college students from their refugee parents' transmitted psychological trauma. With this understanding, student affairs professionals can better assist this student population to explore their identities through the negotiation of the seven psychosocial developmental tasks.</p>
<p>Spencer, J. H., &amp; Le, T. N. (2006). Parent refugee status, immigration stressors, and Southeast</p>	<p>The study examines independent effects of parents' refugee camp experiences and immigration stress on serious or family/partner violence among youth. Findings contribute evidence on the intergenerational effects of community-level trauma that can help</p>

Asian youth violence. *Journal of Immigrant and Minority Health*, 8(4), 359-368. doi:10.1007/s10903-006-9006-x

policy makers better integrate family and community strategies to reduce youth violence. Refugee communities may not transform easily into stereotypical immigrant Asian communities characterized by little youth violence. Results suggest that the refugee process, as experienced second-hand through the children of refugees, has a strong effect on externally oriented violence (serious violence) and on family/partner violence for particular subgroups. Therefore, community-oriented policy makers should join social workers in developing programs to address youth violence in Southeast Asian families and communities.

*War Veteran Contexts*

Dekel, R. (2008). Is there intergenerational transmission of trauma? The case of combat veterans' children. *American Journal of Orthopsychiatry*, 78(3), 281-289.

This article is a review of the literature on intergenerational transmission of posttraumatic stress disorder (PTSD) from fathers to sons in families of war veterans. The review addresses several questions: (1) Which fathers have a greater tendency to transmit their distress to their offspring? (2) What is transmitted from father to child? (3) How is the distress transmitted and through which mechanisms? And finally, (4) Which children are more vulnerable to the transmission of PTSD distress in the family? Whereas the existing literature deals mainly with fathers' PTSD as a risk for increased emotional and behavior problems among the children, this review also highlights the current paucity of knowledge regarding family members and extrafamilial systems that may contribute to intergenerational transmission of PTSD or to its moderation.

O'Brien, K. J. (2004). The intergenerational transference of Post-Traumatic Stress Disorder amongst children and grandchildren of Vietnam veterans in Australia: An argument for a genetic origin. Review of current literature. In Bailey, C., Cabrera, D., & Buys, L. (Eds.) *Social Change in the 21st Century Conference; Centre for Social Change Research; Queensland University of Technology*.

Where does Post-Traumatic Stress Disorder (PTSD) have its origins? Does it have a genetic basis, or is it a learned psychological response to a severe life-endangering experience? If PTSD has genetic origins, then this condition could be passed down from one generation to the next and put the offspring at risk for developing or acquiring related conditions. If PTSD is a learned condition from our environment, then it could be 'taught' to our children. In either case, there is an increasing awareness in the behavioural research community that more young people are being diagnosed with PTSD than before. This paper examines a current trend in recent research that proposes a radical, yet rational perspective.

Zerach, G., & Aloni, R. (2015). Secondary traumatization among former prisoners of wars' adult children: the mediating role of parental bonding. *Anxiety, Stress, & Coping*, 28(2), 162-178. doi:10.1080/10615806.2014.923097

Background and Objectives: The aversive impact of combat and parents' combat-induced posttraumatic stress disorder (PTSD) on young children has been examined in a few studies. However, the long-term toll of war captivity on secondary traumatization (ST) and the parental bonding of adult children remain unknown. This study examined ST symptoms and parental bonding among adult children of former prisoners of war (ex-POWs' children) that were compared to adult children of comparable veterans (controls' children). Furthermore, we examined the mediating role of parental bonding and exposure to stress in the association between group and ST symptoms. Results: Ex-POWs' children reported a higher number of ST symptoms

and lower levels of fathers' care, as compared to controls' children. Importantly, exposure to stress stemming from fathers' behaviors and fathers' care was found to mediate the association between research group and ST.

*West African Contexts*

Pressley-Sanon, T. (2011). Acting Out: Performing Memory of Enslavement in Ouidah, Benin Republic. *Journal of Pan African Studies*, 4(5), 57-80.

Using examples from Ouidah, Benin Republic this essay examines a few ways that the descendants of slave traders, enslaved and witnesses "act out" issues of trauma resulting from the slave-trading history, sometimes with the conscious hope of healing the physical and psychic rupture between African and African diasporic peoples; other times in a seemingly uncontrollable compulsion. Memory, an exercise of the living, and especially of those who remember so that cultures may not die, impose both a responsibility and a curse on those who choose to remember.

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