

Intergenerational Trauma: Exploring Transmission Mechanisms in Post-Conflict Families

Donnye Rura Amping1*, Maria Goretti Adiyanti², Irene Ludji3 💿

1,2,3 Magister Sains Psikologi, Universitas Kristen Satya Wacana, Salatiga, Indonesia

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ABSTRAK

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ABSTRACT

Trauma akibat konflik komunal menciptakan dampak yang berkelanjutan walaupun konflik tersebut telah berakhir. Trauma tidak hanya mempengaruhi individu yang mengalaminya secara langsung, tetapi juga berdampak pada keluarga dan lingkungan sosial, yang pada gilirannya membawa dampak melintasi batas generasi. Penelitian ini bertujuan untuk mengeksplorasi dan menganalisis mekanisme transmisi trauma antargenerasi dalam keluarga pascakonflik, di mana trauma dapat ditransmisikan baik secara langsung maupun tidak langsung melalui interaksi psikologis, keluarga, dan sosial. Pendekatan yang digunakan adalah kualitatif dengan desain studi kasus, melibatkan orang tua yang mengalami konflik dan anak yang tidak terlibat langsung. Data dikumpulkan melalui observasi dan wawancara mendalam, lalu dianalisis dengan metode deskriptif kualitatif, serta validitasnya diperkuat menggunakan triangulasi sumber data. Hasil penelitian menunjukkan bahwa transmisi trauma dalam keluarga terjadi melalui dua aspek utama: pola asuh dan pengaruh lingkungan sosial. Pola asuh yang terbentuk dari pengalaman traumatis orang tua pasca konflik, terutama yang belum tertangani dengan baik, cenderung overprotektif dan penuh instruksi ketat. Lingkungan sosial menjadi tempat bagi anak menkonfirmasi trauma yang diterima dari pola asuh orang tua yang kemudian memperkuat transmisi trauma ini. Kedua aspek ini saling berkaitan dalam membentuk pola dan proses transmisi trauma antargenerasi.

Trauma due to communal conflict creates a lasting impact even after the conflict has ended. Trauma not only affects individuals who experience it directly, but also has an impact on the family and social environment, which in turn has an impact across generational boundaries. This study aims to explore and analyze the mechanisms of intergenerational trauma transmission in post-conflict families, where trauma can be transmitted both directly and indirectly through psychological, family, and social interactions. The approach used is qualitative with a case study design, involving parents who experience conflict and children who are not directly involved. Data were collected through observation and in-depth interviews, then analyzed using qualitative descriptive methods, and their validity was strengthened using triangulation of data sources. The results of the study indicate that the transmission of trauma in families occurs through two main aspects: parenting patterns and the influence of the social environment. Parenting patterns that are formed from traumatic experiences of parents after conflict, especially those that have not been handled properly, tend to be overprotective and full of strict instructions. The social environment becomes a place for children to confirm the trauma received from parenting patterns which then strengthen the transmission of this trauma. These two aspects are interrelated in forming patterns and processes of intergenerational trauma transmission.

1. INTRODUCTION

Traumatic experiences due to prolonged conflict not only leave deep wounds on individuals directly involved, but also have long-term impacts that cross generational boundaries (Brunzell et al., 2016; Esmaeili, 2011; Ullah et al., 2023). Research on the impact of trauma on conflict victims has been quite extensive, with the main focus still limited to individual psychological conditions such as depression and PTSD. However, studies that explore how this trauma is passed on to the next generation in the post-

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conflict context in Indonesia are still very limited, creating a gap in understanding its long-term impacts. Trauma that penetrates into social structures, changes family dynamics, communities, and reshapes the cultural identity of the affected community. As a result, trauma is not only a personal experience, but develops into a collective phenomenon that is passed on to the next generation, forming a cycle of trauma and instability that is difficult to break (Alexander, 2012; McNally, 2005; Motta, 2008). The new generation, although not directly experiencing conflict, often still carries the psychological burden of the previous generation. Collective trauma caused by prolonged conflict often creates a psychosocial crisis, which is seen through symptoms such as resentment, fear, distrust, prejudice, despair, and increased social violence in society (Gogali, 2009; Hedman, 2008; Mochmann, 2017). Attachment to the past and concerns about threats to peace and uncertainty about the future contribute to the transmission of trauma across generations. This trauma is passed down through narrative stories, emotions, internalized behavioural patterns, and inherited cultural values and identities. This transmission process takes place through relationships between individuals in families, communities, and societies, from generations experiencing conflict to generations that have not even experienced conflict (Green, 2008; Reuben, 2015). Thus, the transmission of trauma is one real manifestation of how conflict, although historically past, continues to instil its influence in the family, social, psychological, and emotional life of subsequent generations.

The concept of intergenerational trauma first emerged in psychiatric studies examining descendants of Holocaust victims, which then developed into research on victims of wars, such as World War II, the Vietnam War, the Cambodian War, the Rwandan War, and the Bosnian-Serbian War, which showed that psychological wounds from war can be transmitted to the next generation (Danieli, 1998). This suggests that the traumatic experiences of one generation can have a lasting psychological impact that is inherited through mechanisms of memory processing, learning, and identification. In addition, trauma can also leave epigenetic traces on the nervous system, which increases the vulnerability to mental disorders in subsequent generations (Dalgaard et al., 2019; Volkan, 2001).

Furthermore, previous researchers argue that intergenerational trauma transmission can occur through a variety of mechanisms by identifying four main approaches to understanding trauma transmission: psychodynamic relational, sociocultural, family systems, and biological models (Danieli, 1998; Kellermann, 2001). Trauma is passed down through inadequate parenting, parental emotions, and close emotional relationships, creating a cycle of repeated trauma across generations. Relatedly, Rowland-Klein and Dunlop note that trauma transmission often begins within the family environment, either through explicit stories or silence by silencing trauma (Rowland-Klein & Dunlop, 1998). Children learn about their family's past suffering and internalize victim identities. Ultimately, trauma passed down across generations not only affects daily life, but also the social dynamics within the family. The family, as the primary social unit, can be a source of support that facilitates healing, but on the other hand, it can also be a place where trauma remains alive and difficult to break. In some cases, the family can function as a "trauma-organized system" (Banyard et al., 2001), where trauma patterns spread across family members, affecting generation after generation. This suggests that a healthy society requires healthy families (Grand & Salberg, 2017; Song & Ventevogel, 2020). Thus, trauma becomes an integral part of the family structure that helps shape the psychological condition of the next generation.

Research on the transmission of trauma across generations has been extensively conducted in various global conflict contexts. For example, study in Palestine highlighted the important role of family communication in influencing how trauma is passed from one generation to the next (Dalgaard et al., 2019). This study showed that the content of the conversation, how it is delivered, and the impact of the communication can determine the extent to which trauma is inherited. In Afghanistan, other researchers examined the mechanisms of trauma transmission involving factors such as family systems, emotional bonds, parenting styles, and epigenetics (Ullah et al., 2023). The study concluded that inherited trauma can affect people's mental health and create ongoing emotional burdens on future generations. Meanwhile, various dimensions of trauma transmission, including biological, psychological, socio-cultural, and political aspects, which are passed on subtly through words, actions, and even silence (Danieli & Maidan, 2023).

Although many studies on trauma transmission have been conducted in various parts of the world, similar studies in the Indonesian context, especially related to internal conflicts such as those in Poso, are still very limited. The Poso conflict that took place between 1998 and 2001 left deep traces of trauma (Laha et al., 2021; Nutfa et al., 2016), not only for those directly involved in the violence, but also for the generations born after. The lack of research exploring how this trauma is transmitted from one generation to the next is an important gap in scientific studies. Post-conflict trauma that occurs in Indonesia, especially in Poso, requires a deeper understanding of the factors that play a role in the

transmission process, such as family communication patterns, local culture, and the social dynamics that surround them.

This study will fill this gap by comprehensively exploring how trauma from the Poso conflict is transmitted across generations. By focusing on families affected by the conflict, this study will not only examine communication mechanisms within families, but also other factors such as parenting patterns and the influence of the social environment. This approach is expected to provide new insights into the dynamics of trauma transmission in the local Indonesian context, especially in understanding the complexity of post-conflict trauma transmission in Poso. The findings of this study are expected to enrich the existing scientific literature and contribute to reconciliation and trauma healing efforts for communities affected by conflict in Indonesia.

2. METHOD

This study employs a qualitative research design with a case study approach (Cresswell, 2012; Moleong, 2017; Smith, 2009) to explore the mechanisms of intergenerational trauma transmission within a family affected by the Poso conflict. The case study approach allows an in-depth examination of a single family unit to understand the complex dynamics of trauma as experienced across generations. Data were collected using multiple methods, including semi-structured interviews, observations, and documentation, to capture the multifaceted nature of the phenomenon. Purposive sampling was employed to select the family, ensuring that participants were representative of the study's focus. This approach aligns with the study's aim to gain a nuanced understanding of trauma's persistence and impact over time. The study participants comprised a father, a mother who directly experienced the Poso conflict, and children born after the conflict. This composition enabled an exploration of both direct and indirect experiences of trauma, offering a comprehensive view of intergenerational dynamics. To further enrich the data and ensure credibility, supporting interviews were conducted with relatives and neighbors. These external perspectives were crucial in triangulating the data, thus providing additional layers of validation for the findings. The triangulation process is a standard qualitative research method that enhances the reliability and robustness of the study's results.

Data analysis was conducted using a qualitative descriptive approach, organized into three key stages: data reduction, data presentation, and conclusion drawing. Each of these stages was carried out interactively, ensuring that the process was iterative and responsive to the emerging data. This methodology allowed for the systematic categorization of data, making it possible to identify patterns and themes that illustrate the transmission of trauma. The interactive nature of the analysis facilitated a continuous refinement of insights, thereby ensuring the accuracy and depth of the findings. Importantly, data analysis occurred simultaneously with data collection, a hallmark of qualitative research that promotes a comprehensive and contextual understanding of the studied phenomenon. This concurrent approach allowed the researchers to adapt their methods and refine their focus as new insights emerged, ensuring a holistic examination of the post-conflict family context. The findings provide a rich understanding of how the Poso conflict has shaped familial relationships and contributed to the perpetuation of trauma across generations, highlighting the enduring effects of conflict on family systems.

3. RESULTS AND DISCUSSION

Result

Parents

Based on the research results, the emotional and psychological trauma experienced by parents after the conflict in Poso caused a deep and prolonged burden. Every time they remember the conflict, intense anxiety arises. This trauma not only triggers feelings of restlessness and restlessness, but also has an impact on physical conditions, such as shortness of breath and nightmares that continue to haunt them, even after years have passed. This disturbed mental state makes parents live in hypervigilance, as if threats from the past are still lurking. Psychologically, they also have difficulty trusting others and prefer to limit social relationships as a form of self-protection from potential further dangers. This condition hinders their ability to build healthy and stable social relationships.

Trauma also has a significant impact on parenting styles. Parents tend to adopt a very controlling style, driven by a deep fear for their children's safety. They feel the need to control almost every aspect of their children's lives, including who they interact with and where they play. While this control is intended as a form of protection, excessive control actually inhibits the child's independence and exploration, and can potentially damage the emotional connection between parent and child. This excessive anxiety in parenting is one way in which parental trauma affects the overall family dynamic.

Furthermore, the results of the study showed that parental trauma affects their behavior in everyday life, especially in interactions with children. Traumatized parents show overprotective behavior, with a tendency to closely supervise and control their children. This reflects their deep anxiety about their children's safety, so that strict control becomes a way to relieve these fears. In addition, trauma also has an impact on parents' social relationships. Parents choose to isolate themselves from the social environment, avoiding interaction with strangers because of fear and distrust. The fear that others may pose a threat or harm to the family causes parents to withdraw from social life. Although this isolation was initially intended as protection, it ultimately worsens loneliness and reduces the social support that is essential for their emotional recovery.

Strict Parenting and Overcontrol

In families experiencing trauma, a striking transmission pattern is seen in the excessive parenting style. Parents in this study projected their anxiety by implementing strict control over their children's activities. Such as when children are forbidden to open the door to strangers and are required to always be careful when outside the house. This parenting pattern is a response to the traumatic experiences experienced by the parents. The mother participant explained more specifically that the child was only allowed to go out in the afternoon and had to peek out the window before interacting with outsiders. As a result, the child felt limited in exploring his environment, where excessive danger and uncertainty caused anxiety. Further findings suggest that parents who implement this parenting style are at risk of experiencing anxiety problems and difficulties in developing self-confidence. Furthermore, the mother participants also kept their children away from activities such as scouting and camping activities at school, only allowing participation in school sports under strict supervision. These protective measures created disproportionate fear and limited the child's social interactions, thus exacerbating feelings of fear of the surrounding environment.

Dysfunctional Family Communication

In addition to parenting style, trauma experienced by parents also significantly affects communication patterns in the family. Research findings show that parents tend to be less open in discussing past traumatic experiences, resulting in dysfunctional communication patterns. Parents' fears and anxieties are conveyed implicitly through excessive prohibitions and instructions, creating an atmosphere of uncertainty that increases children's anxiety. This avoidance of direct discussion of trauma forms a dysfunctional communication pattern, which becomes a major channel for the transmission of trauma between generations. The inability of parents to talk about trauma directly leads to the expression of anxiety through actions and implicit messages. Although children do not fully understand the prohibitions given, they still absorb the fears experienced by their parents. Without adequate explanation, instructions such as "take care of yourself" or "stay home" only add to the child's ongoing fear. In this context, a pattern of closed communication reinforces the anxiety of children growing up in an environment full of fear. In addition, unresponsive parenting patterns and negative parental attributions of the outside world as threatening contribute to this miscommunication, which ultimately exacerbates the child's fear and wariness.

Over-caution

One of the most dominant effects of trauma in the findings of this study is a sense of hypervigilance towards the surrounding environment. Mothers, who often experience post-conflict anxiety, teach their children to always be alert to the people around them. For example, when children are taught not to easily trust strangers, and to always make sure guests who come to the house before opening the door. This pattern is seen in daily care, when children are given instructions to always be careful on the road, not to play too far from home, and to avoid places that are considered dangerous.

Suspicion of Certain Social Groups

Other traumas emerge in the form of deep suspicion of certain groups or communities. Fathers and mothers who experienced the conflict directly felt that the group was dangerous and should be suspected. This message was consistently conveyed to children through warnings and stories about the dangers of the group. Until this suspicion develops into a mindset where children see certain groups as potential enemies to be avoided. This then impacts the child's ability to interact with people from different backgrounds, creating social isolation that reinforces fear and distrust.

Deep Fear of the Threat of Violence

Fear is another trauma that dominates the parenting patterns of the parents in this study. They often expressed fear of potential threats. This fear is transmitted to children through strict rules at home, such as a ban on going out without supervision or playing away from home. This instilled fear makes the child often feel unsafe, even in an environment that is actually safe. This fear is not only limited to physical concerns, but also affects the child's confidence in interacting in the outside world. He grows up with the feeling that danger is always lurking, inhibiting his ability to feel freedom and comfort in the social environment.

Prejudice Against Other Groups

The next finding is prejudice inherited from parents to children. Parents' experiences related to conflict create negative perceptions of certain groups. This prejudice is conveyed through stories that are often told by parents who actually give negative tendencies to other groups outside their group by describing them as threats. So this prejudice shapes children's views of different groups, even though they may have never directly experienced violence from them. As a result, children grow up with the view that different groups are threats, which limits their ability to build healthy relationships with people from different backgrounds.

Excessive Self-Protection

In addition, trauma is also transmitted in the form of overprotective behavior. Children are taught to always be alert to potential threats and to protect themselves very tightly. For example, children are reminded to always close doors and lock windows, even during the day. This overprotectiveness instills a deep fear in the child of the outside world. The child feels that threat is always present, even in safe situations, and this affects how he navigates his social environment.

Social Withdrawal

Social withdrawal is another way trauma is transmitted. Fears and prejudices instilled by parents make children tend to withdraw from social interactions, especially with children from different groups. Children spend more time at home and around them and under the supervision of parents, rather than participating in social activities outside. This social withdrawal reinforces the child's isolation and hinders the development of social skills. Fear of the outside world and certain groups limits the child's opportunities to learn and interact with others, which is important for emotional and social development.

Social

The social environment, including community and friendships, plays an important role in the transmission of trauma. Findings in the study indicate that this process occurs in various contexts, such as when gathering at a friend's house, talking while working in the garden, or at other social gatherings. This is reflected in the story of the mother participant who described that conversations about conflict experiences emerged spontaneously in social gatherings such as when visiting a neighbor's house, when working in the garden or other gatherings. These conversations, although not always planned to discuss specifically the conflict event, spontaneously the traumatic event remains a topic that often arises. This shows that the social environment of Dusun Pengungsi provides a space for individuals to share and strengthen narratives about the traumatic experiences they have experienced. As the findings obtained from the results of interviews with child participants, which provide information that social interactions among children also occur. Children provide information that interactions between friends occur both in the Dusun Pengungsi environment and at school. So this shows that the social environment plays a role in the transmission process.

In addition to direct social interaction, social media also influences how trauma is transmitted. Media such as YouTube and Google, become additional sources of information that reinforce the narratives that children hear indirectly from parents and directly from friends. Children who are curious about the conflict stories they hear seek additional information through digital media, which deepens their understanding of the trauma experienced by their community. Internet use amplifies the visual dimension of traumatic narratives, giving them a deeper understanding of events they previously only heard about through oral accounts. Through the role of media and social institutions, the transmission of trauma not only occurs within the family environment, but is also reinforced by narratives outside the home, which ultimately influences how the younger generation understands and responds to traumatic experiences.

Child

At the internalization stage, children begin to absorb and internalize the values and beliefs they receive from their parents and their environment. The values brought by parents, especially those related to traumatic experiences, are indirectly absorbed by children as part of a self-protection mechanism. In this study, this process is seen in children who actively seek information and observe their parents' interactions. This observation helps shape children's understanding of the social environment, where the values and beliefs obtained from parents and the environment are internalized in a way that children deeply understand what causes everything they receive to happen. The trauma experienced by parents subtly influences children's perceptions and emotional responses to the world around them. The internalization process is seen when children adopt fear and distrust of certain groups based on the narratives they hear from their family and community environments. Their fear of certain groups of people comes from traumatic experiences transmitted verbally and nonverbally by their parents and environment. As when children mention their deep fear of individuals from certain groups, especially those who have an identity that is closely related to traumatic events that are tended by their parents and environment. In relation to the environment, children do not only accept these values passively, but actively try to verify information from other sources, such as YouTube. This desire shows a complex internalization process, where children not only absorb information, but also try to strengthen and validate their understanding.

The next finding is the application stage, where children begin to apply the values they have internalized in everyday life, where the values received from parents become the basis for children's decision making and actions. In this case, the child shows how the trauma values instilled by their parents are manifested in everyday actions. Such as when the child avoids interacting with children from different groups at school because of the fear he learned from his parents. This action reflects how parental trauma directly shapes the child's behavior. In addition to avoiding social interaction with certain groups, children also show protective habits taught by their parents. This can be seen when children close the door of the house and are careful when interacting with outsiders. This habit not only shows the implementation of verbal instructions, but also illustrates the implementation of the values of protection and vigilance instilled by parents. Closing the door is a symbol of self-protection efforts learned from the family environment. These applied values show that parental trauma can manifest in the form of specific behavioral patterns in children, where children imitate the protective actions carried out by parents in the context of everyday life.

Fear and Over-Vigilance

Protective parenting, especially in post-conflict environments, ultimately creates psychological impacts in the form of fear and hypervigilance in children. Traumatized parents tend to apply strict rules to protect their children, which in turn instills fear of the outside world. As seen in child participants, deep fear of certain groups becomes an internalized pattern in them, creating psychological impacts such as anxiety and stress.

Development of Negative Perceptions and Dependence

Children who grow up in an environment full of trauma and fear often develop negative perceptions of certain groups. This is due to the traumatic narratives that are continuously conveyed by their parents and social environment. In the case of children, negative perceptions of certain groups become schemas that direct their reactions to symbols and social interactions. Habits formed from instructions such as closing doors and windows of the house as a form of protection also show how children internalize the values of vigilance applied by their parents.

Impact on Social Behavior and Interaction

Children who experience intergenerational trauma not only internalize fear values but also apply them in their social interactions. Child participants showed behaviors of avoiding interactions with children from groups perceived as different, reflecting the application of fear values taught by their parents. Therefore, the values of fear and vigilance applied by parents have a direct influence on children's behavior in their social context.

Feeling Restrained and Annoyed

An environment full of strict rules and repeated warnings can cause children to feel constrained and irritated. Children who grow up in this situation may experience frustration because they feel they are not free to explore and interact with the outside world. In the findings of this study, children's sense of autonomy is often hampered by overprotective parenting. As a result, children feel stressed and dissatisfied with the restrictions imposed on them.

These findings suggest that the stages of trauma transmission involve recognition, internalization, and implementation. This transmission mechanism does not occur passively but through structured and consistent parenting patterns, reflecting traumatic experiences that are transmitted into the child's behavior and beliefs. This mechanism is illustrated in the Table 1.

Mechanism	Introduction Stage: Communication in Teaching Mindfulness	Internalization Stage: Formation of Understanding and Attitudes through Experience	Implementation Stage: Implementation of Values and Attitudes in Daily Life
Trauma Transmission Process	At the introductory stage, parents introduce children to the concept of alertness and self-protection through intense communication, both verbal and non-verbal, especially related to the social sphere.	In the internalization stage, children begin to absorb and integrate the values of caution into their understanding. Reinforcement from the social environment makes the views of parents as accepted truths and these values become an integral part of the child's identity.	At the implementation stage, internalized values are manifested in real actions, such as high awareness of the environment or avoiding certain groups.

Table 1. Trauma Transmission Process in Parenting and Social Patterns

Based on previous findings, the mechanism of intergenerational trauma transmission is not only through the process of recognition, internalization, and application, but this study also found that in the process there are deeper transmission patterns. These findings show that parental trauma is not conveyed verbally, but through strict and protective parenting patterns. In this mechanism, the four main patterns involved are method, origin of values, content of values, and frequency and consistency of delivery.

Parents as explained earlier, in an effort to protect their children, unconsciously project fear and anxiety through excessive control, strict instructions, and repeated prohibitions. The values conveyed are often negative, such as a sense of wariness and distrust of the outside world, both implicitly and explicitly. The frequency and consistency of these messages reinforce the child's internalization, which then forms a pattern of defensive behavior and creates a high level of vigilance. This study shows that the trauma experienced by previous generations affects the way children understand and interact with the world around them, replicating inherited attitudes of anxiety and distrust. More clearly illustrated through the Table 2.

Mechanism	Method/Means of Delivering Values	Origin of Transmitted Values	Transmitted Value Content	Frequency and Consistency of Value Delivery
Trauma Transmission Patterns	Parents practice strict and overprotective parenting, providing direct instructions, close supervision, and limiting the child's social interactions with strangers.	Values stem from traumatic experiences during conflict, which shape fear and distrust of different groups.	The values transmitted include fear, suspicion, and negative views of certain groups, which are instilled through consistent instructions and warnings.	The frequency and consistency of delivery is very high, with parents constantly reminding children of the dangers, creating an environment of warnings and boundaries.

Table 2. Transmission Patterns in Parenting Patterns

Post-conflict traumatic experiences have a profound impact on parenting and child development. Unresolved trauma leads to overprotective and overly instructive parenting, where parents try to protect their children from harm but instead hinder their independence and self-confidence. Parental trauma affects interactions with children, who often internalize fears and develop anxiety and dependency. The mechanisms of the process and patterns of trauma transmission are the main findings of this study, which shows how the trauma of parents who are directly involved in conflict can be transmitted to children who are even born long after the conflict event.

Discussion

This study found that parents who experienced trauma tend to apply strict and overly controlling parenting patterns. Parents project their anxiety by limiting their children's activities. As a result, children feel constrained in exploring the environment and experience excessive anxiety. This parenting pattern that emphasizes hypervigilance reinforces fear and limits children's social interactions. This finding is in line with research which shows the relationship between caregiver mental health and parenting behavior in post-conflict contexts (Appleyard & Osofsky, 2003; Jensen et al., 2021). These limitations have an impact on children's cognitive and emotional development, which is often dominated by fear and uncertainty.

Parents who choose to avoid open discussions about past traumatic experiences create an atmosphere of uncertainty for children. Parents' fears are conveyed implicitly through prohibitions such as "take care of yourself" or "don't go out of the house" without clear explanation. Although children do not always understand the reasons behind these prohibitions, they still absorb their parents' anxieties. This pattern opens up a gap for the transmission of trauma. This finding is supported by research which shows that trauma from events such as genocide can be transmitted through protective and overcontrolling parenting mechanisms (Esmaeili, 2011; Scharf, 2007).

Parents' decision to remain silent about their trauma is often intended to protect their children from pain. However, the inability to verbalize trauma often creates nonverbal signals that continue to affect their children. These findings support previous findings who showed that Holocaust survivors are often reluctant to talk about their traumatic experiences in order to protect their children from the horrors of their experiences, unspoken trauma is still transmitted through nonverbal signals which are important mechanisms in the transmission of trauma, where facial expressions and tone of voice convey unspoken anxiety (Bradfield, 2013; Rowland-Klein & Dunlop, 1998).

However, this study also found a deeper mechanism process, where the trauma transmission process begins with the introduction stage, when parents indirectly teach their children to be wary by projecting and emphasizing certain subjects, communities or social environments as something bad and dangerous. This finding suggests that parents who have experienced trauma tend to bring fear into their parenting, creating an environment full of negative messages about certain subjects or areas that in turn shape children's perceptions of their environment. In an effort to protect children from potential dangers, parents unknowingly instill deep fears, so that children learn about the world around them through the lens of their parents' trauma. The findings at this introduction stage form a clear path for how the transmission mechanism begins.

After the introduction stage, children enter the internalization stage, where they begin to absorb and accept the values instilled by their parents. At this stage, children begin to observe their parents' behavior and verify information from other sources, such as friends or social media. This shows that the internalization process is not only passive, but involves active information seeking by children. Previous research supports this finding, where they found that parental trauma contributed to harsh parenting, which was related to internalization symptoms in children (Fitzgerald et al., 2020; Suardi et al., 2017).

The implementation stage is the final phase in the trauma transmission process. At this stage, children begin to apply the values they have internalized in their daily lives. The level of frequency and consistency of the delivery of these values is very important, because the values received from parents serve as the basis for children's decision-making and actions. For example, a child may avoid interacting with children from different groups, reflecting avoidance behavior instilled by parents. This action shows how parental trauma directly shapes the child's behavior, reinforcing defensive behavioral patterns. In addition, children also adopt protective habits, such as carefully closing the door of the house when interacting with outsiders. This habit illustrates the application of instilled protective values, where closing the door becomes a symbol of an effort to protect oneself from potential threats.

Throughout this process, trauma transmission involves not only observation and modeling but also social interaction and active information seeking. Children adopt self-protection mechanisms even though they feel burdened by the values inherited from their parents. The fear and distrust transmitted to children have a significant psychological impact. This psychological impact can appear in the form of anxiety, depression, and trust issues in children of parents who have experienced severe trauma (Danieli & Maidan, 2023; Yehuda et al., 2016).

The results of this study indicate that the transmission of intergenerational trauma in families occurs through two main aspects that contribute to each other: parenting patterns and the influence of the social environment. Parenting patterns that are formed from parents' traumatic experiences after the conflict, especially those that have not been handled well, tend to be overprotective and full of strict instructions. Parents' efforts to protect their children often hinder the development of children's independence and self-confidence. Children internalize their parents' fears, which gives rise to anxiety and excessive dependency. In addition, the social environment becomes a place for children to confirm the trauma received from parental parenting patterns which then strengthen the transmission of this trauma. This trauma transmission mechanism shows how trauma experienced by parents can be transmitted to their children, even to generations born long after the conflict event, through deep transmission patterns and processes.

This study also has several limitations, especially related to the limited sample coverage of families in the Poso area, so the generalization of the research results to a wider population still needs to be studied further. Further research is expected to involve larger and more diverse samples, in post-conflict contexts in various locations. This study is expected to provide and expand understanding of intergenerational trauma transmission, so that it can help in the development of more effective interventions for families and communities affected by conflict.

4. CONCLUSION

Trauma resulting from communal conflict has enduring effects that transcend the experiences of individuals, influencing families and social environments across generations. This study reveals that intergenerational trauma transmission in post-conflict families occurs primarily through two interconnected mechanisms: parenting patterns and the influence of the social environment. Parents who have experienced unresolved trauma from the conflict often adopt overprotective and highly directive parenting styles, inadvertently transmitting their trauma to their children. Simultaneously, the social environment serves as a space where children internalize and validate the trauma experienced through these parenting practices, further reinforcing the transmission process. These findings underscore the intricate interplay between family dynamics and social contexts in perpetuating trauma, highlighting the need for comprehensive interventions that address both individual and systemic factors to mitigate the impact of intergenerational trauma in post-conflict communities.

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