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# Intergenerational Trauma: A Scoping Review of Cross-Cultural Applications from 1999 to 2019
# Le traumatisme intergénérationnel : revue exploratoire des applications interculturelles de 1999 à 2019

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ABSTRACT
It has been over 20 years since the publication of Danieli's (1998) *International Handbook of Multigenerational Legacies of Trauma*, a seminal cross-cultural compilation examining the generational effects of mass trauma and intergenerational trauma (IGT). In the years since this book appeared, research on IGT has continued to be applied to many cultural groups, including those who have survived the Indian Residential Schools, the Khmer Rouge regime, or the Rwandan genocide. Previous reviews of IGT research have focused mainly on survivors of the Holocaust, which limits the cross-cultural application of this field of study. The purpose of this article is to provide a scoping review of scholarship published between 1999 and 2019 that aims to understand how IGT has been studied in cross-cultural applications. Overall, 29 articles were identified and reviewed. In light of the fact that cross-cultural perspectives on IGT are still emerging (Sirikantraporn & Green, 2016), the methodology and the cultural considerations described in this review can inform future cross-cultural IGT research.

RÉSUMÉ
Il y a déjà plus de 20 ans que Danieli (1998) publiait son ouvrage *International Handbook of Multigenerational Legacies of Trauma*, une compilation interculturelle majeure examinant les effets générationnels des traumatismes de masse et les traumatismes intergénérationnels (IGT). Depuis cette publication, on a continué d'appliquer la recherche sur les IGT à plusieurs groupes culturels, notamment les survivants des pensionnats pour Autochtones, du régime des Khmers rouges, et du génocide rwandais. On a déjà mené des revues sur les recherches sur les IGT, mais elles portaient surtout sur des populations ayant survécu à l'Holocauste, ce qui en limitait les applications interculturelles. Cet article a pour but de fournir une revue exploratoire d'études savantes publiées de 1999 à 2019 et visant à mieux comprendre de quelle façon les IGT ont été étudiés dans des applications interculturelles. En tout, on a recensé et

passé en revue 29 articles. À mesure que se dégagent des perspectives interculturelles sur les IGT (Sirikantraporn & Green, 2016), la méthodologie et les considérations culturelles décrites dans cette revue peuvent servir de base aux futures recherches interculturelles sur le sujet.

Intergenerational trauma (IGT) has been studied extensively for over 50 years (Danieli, 1998). IGT refers to the notion that psychologically traumatic events experienced during an individual's lifetime can significantly influence the well-being of their offspring (Bombay et al., 2009). As a construct, it was originally developed to understand the unique psychosocial challenges of the families of Holocaust survivors (Rakoff, 1966). Since then, IGT has been applied to many ethnic groups, including Indigenous Peoples (Brave Heart & DeBruyn, 1998; Bombay et al., 2009), Japanese Americans (Nagata & Cheng, 2003), Armenians (Karenian et al., 2011), and Cambodians (Field et al., 2013). Yet, the concept of IGT can be understood as being uniquely rooted in Jewish cosmology and praxis of responsibility toward parents and ancestors (Kidron, 2012). Given this understanding, it is important to consider IGT's construct equivalence in its cross-cultural applications.

This paper examines cross-cultural research published between 1999 and 2019 and offers a review of methodologies used to study IGT. The intention of the review is to inform future cross-cultural research on IGT. Given that it has been over 20 years since the publication of Danieli's (1998) seminal volume *International Handbook of Multigenerational Legacies of Trauma*, it is suitable to examine the literature that has followed this book's publication. Danieli's (1998) work involved the application of IGT across many ethnic groups to understand the effects of generational and mass trauma. Yet, since its publication, IGT continues to be applied to various ethnic groups without a methodological review from a cultural standpoint. Several methodology-based reviews have been published on IGT (see Sagi-Schwartz et al., 2008; Solkoff, 1981, 1992; van IJzendoorn et al., 2003), but these reviews have focused mainly on Holocaust survivor families, excluding all other populations. The presence of over 500 published articles on IGT and Holocaust survivor families demonstrates that there is already clear representation of this facet of IGT in the literature (Kellermann, 2008), while cross-cultural perspectives of IGT are still emerging (Sirikantraporn & Green, 2016).

**Intergenerational Trauma and Culture**

The concept of intergenerational transmission of trauma was first noted in 1966 by Canadian clinicians who were concerned about the children of Holocaust survivors who were seeking treatment (Rakoff, 1966). A review of the literature shows that there are many terms that are similar to and/or associated with IGT, such as multi-generational, transgenerational, historical, collective, and cultural

trauma, along with synonymous terms such as the intergenerational transmission of trauma (Danieli, 1998; Felsen, 1998). These terms originate from a range of academic fields that place emphasis and/or expand on various characteristics associated with IGT. For example, cultural trauma has sociological roots and refers to wounding experienced in the collective memory of a community (Sztompka, 2000). Meanwhile, historical trauma broadens the concept of IGT by emphasizing cultural and cumulative historical loss that extends beyond a singular large-scale event (Elias et al., 2012; Whitbeck et al., 2004).

Culture plays a significant role as a transmitter, a buffer, and a healer when it comes to IGT (Danieli, 2007). Culture can be defined as "a highly complex, continually changing system of meaning that is learned, shared, transmitted and altered from one generation to another" (Chun et al., 2006, p. 31). Although culture is fluid and socially constructed (Moodley & Palmer, 2006), for this review, culture will be situated in the domain of ethnicity as a comparative construct. Using the term ethnicity is warranted because the dominant representation of IGT comes from Holocaust survivor families who are rooted in a Jewish world view (Kidron, 2012); therefore, examining other cultural understandings of IGT can provide further breadth when it comes to studying IGT cross-culturally. For the field of IGT research to progress, similar populations (i.e., shared ethnicity) must be studied and compared in order to understand variation in individual, familial, and societal traumas (Danieli, 2007). Consequently, the aim of this scoping review is to understand how IGT has been studied in its cross-cultural applications outside of Holocaust research and to provide recommendations for future cross-cultural research.

## Scoping Review of Cross-Cultural IGT Methodologies

A scoping review is a systematic approach to providing a broad understanding of a particular topic (Munn et al., 2018). The objective of this scoping review is to inform the methologies of future cross-cultural IGT studies by addressing the following questions:

1. What studies have been conducted between 1999 and 2019 that are outside Holocaust research and that emphasize culture as a key variable?
2. What methodologies and cultural considerations have been undertaken to study IGT?
3. What methodological recommendations can be drawn for future cross-cultural IGT research?

This review follows the scoping review steps initially outlined by Arksey and O'Malley (2005) and refined by Levac et al. (2010). These steps include (a) identifying the research question, (b) identifying relevant studies, (c) establishing the study selection, (d) charting the data, and (e) collating, summarizing, and

reporting the result (Arksey & O'Malley, 2005, p. 22). It also utilizes a PRISMA extension for scoping reviews checklists (see Tricco et al., 2018).

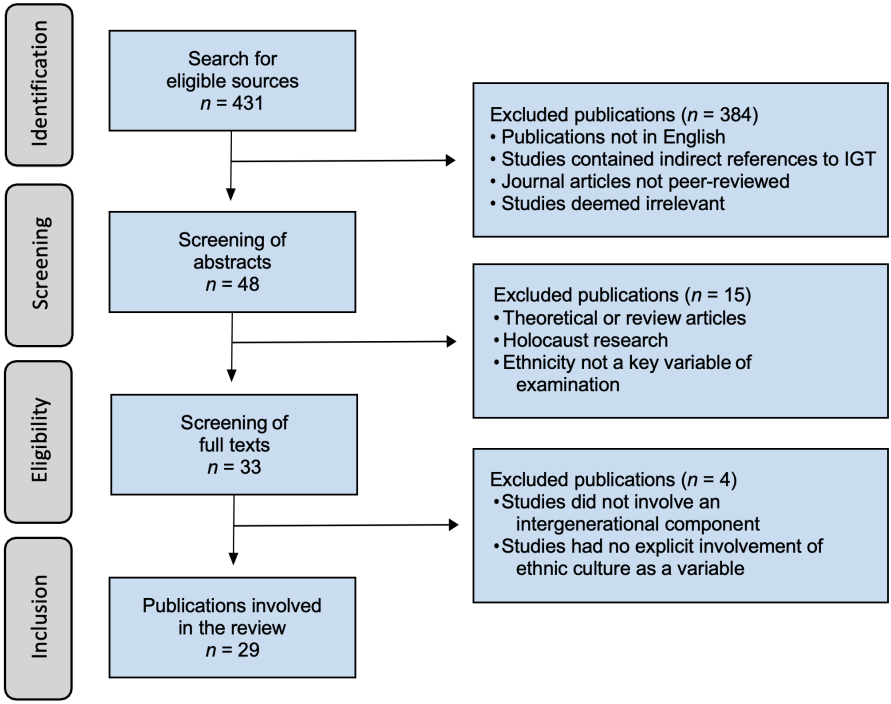
To identify relevant studies, the parameters for article selection included the following: (a) the application of IGT or similar constructs (i.e., historical trauma, transmission of trauma) to an ethnic group whereby ethnicity serves as a key variable in the study; (b) work that does not include research on the families of Holocaust survivors; (c) published peer-reviewed empirical studies (qualitative, quantitative, or mixed-methods) that examined the phenomenon of IGT (i.e., studies that do not include intervention research); (d) research that outlines an intergenerational link through outcomes and/or transmission processes related to IGT; and (f) studies published between 1999 and 2019. Only peer-reviewed articles in English were included in the review given that the authors were capable of reviewing English-language publications only.

Relevant studies were located as a result of searches in research databases (PsycINFO, PsycARTICLES, ERIC), Google Scholar, and relevant journals (e.g., *Journal of Traumatic Stress*, *Journal of Orthopsychiatry*, *Traumatology*, and *Transcultural Psychiatry*). Search terms that were used for IGT included intergenerational trauma, intergenerational transmission of trauma, multi-generational trauma, transgenerational trauma, collective trauma, multicultural trauma, post-traumatic stress disorder, PTSD, genocide, cultural trauma, and historical trauma. These search terms were utilized as single-item word searches or were paired with search terms for demographic groups such as Indigenous, Aboriginal, Asian, Hungarian, Cambodian, Chinese, and Russian. These groups were chosen due to their members' experiences of significant collective traumatic events in the 20th century (e.g., the Khmer Rouge regime). Books, book chapters, article reviews, and special journal issues were also reviewed in order to find articles that were commonly cited in the IGT literature. The results of the search are illustrated in Figure 1.

Within the determined parameters, 431 articles were identified for this review. After screening eligible references to ascertain their relevance to the topic, 48 articles remained for abstract screening, at which point 15 articles were removed because they were a theoretical review article, they did not incorporate ethnicity as a key variable in the study, or they were associated with Holocaust research. After a full textual review of the remaining articles, four articles were removed due to the absence of explicit intergenerational relationships referenced in the article or due to the absence of explicit links to ethnicity as a core component of the study. Overall, 29 articles were identified for this review with 21 studies utilizing a quantitative methodology and eight studies using a qualitative research design. The majority of the studies were cross-sectional, with only one longitudinal study in the group (see Vaage et al., 2011).

To review the methodologies of each study, the authors utilized guidelines established by Coughlan et al. (2007), Ryan et al. (2007), and Carter and Little (2007) for critiquing research methodology. This paper is structured based

Figure 1
*Screening Process for the Included Studies*




on the following methodological components: (a) conceptualization and focus of inquiry, (b) research design, (c) participants and sampling, and (d) data collection and analysis. Each section examines how cultural considerations were incorporated into the studies' methodologies and provides recommendations for future research.

**Conceptualization of Intergenerational Trauma and Focus of Inquiry**

Conceptualization refers to how studies define, operationalize, and measure a construct (Babbie, 2010). IGT consists of three components: (a) the degree and nature of parental traumatization, (b) the intergenerational transmission process of trauma, and (c) the behavioural and experiential characteristics of survivors' children and subsequent generations (Felsen, 1998). Although most studies included in the sample appeared to define IGT in this manner, there were differences in how these components were defined and operationalized.

In the selected studies, parental traumatization was determined by individual and/or collective dimensions of experience. The collective dimension involved

exposure to significant historical events experienced by a cultural group, such as Japanese American internment camps (Nagata & Cheng, 2003), the 1948 Nakba (Atallah, 2017), the Holodomor genocide (Bezo & Maggi, 2015), and the Armenian genocide (Karenian et al., 2011), or to continuous events that did not have a distinct end point, such as colonial oppression (Whitbeck et al., 2004). The latter was identified as a form of historical trauma with a socio-cultural emphasis that impacted multiple generations, both individually and systemically, including families, communities, and cultures (Elias et al., 2012). Studies that had a socio-cultural emphasis utilized the historical trauma construct. For example, Liem (2007) noted that the Korean War was a historical trauma for Korean Americans, in the sense that it is a cultural narrative that continues to be silenced.

Studies that had a collective emphasis adhered to a flexible criterion for the inclusion of participants in the study. It was assumed that the historical association or exposure to these events warranted inclusion in the study, such as attendance at Residential Schools (Ehlers et al., 2013; Elias et al., 2012; Pearce et al., 2008) or having lived through the Khmer Rouge regime (Lin & Suyemoto, 2016). These studies also determined that being part of a subgroup itself may predispose someone as having experienced trauma, such as being a refugee (Vaage et al., 2011) or a child soldier (Song et al., 2014).

When studies defined traumatization from an individualized lens, the link to the socio-historical context and the collective cultural experience was de-emphasized. These studies determined traumatization in terms of either traumatic exposure (TE) or adverse childhood experiences (Bombay et al., 2011; Palosaari et al., 2013; Siegel & Han, 2018), meeting a diagnostic criterion of post-traumatic stress disorder (PTSD; Roth et al., 2014), and/or presenting with post-traumatic stress symptoms (PTSS; Burchert et al., 2017). Most positivist/post-positivist research determined traumatization through clinical interviews and through measures designed to assess the impact of and exposure to psychological trauma (see Burchert et al., 2017; Roth et al., 2014). Other studies that utilized exposure to trauma came from a stress model that was determined according to individual experiences of significant stressors (Bombay et al., 2014; Song et al., 2013). For these studies, being part of a collective event or a group identification would not be sufficient for the determination of traumatization, but rather, trauma had to manifest from a clinical interpretation.

When it came to the conceptualization of trauma transmission, most studies provided a model or a theory for understanding this process, including attachment theory (Han, 2006; Song et al., 2014), parenting (Field et al., 2013; Palosaari et al., 2013), communication patterns (Lin et al., 2009; Lin & Suyemoto, 2016; Nagata & Cheng, 2003), secondary traumatization (Karenian et al., 2011; Lee & Clarke, 2013), and epigenetics (Perroud et al., 2014). The terminology of secondary traumatization or secondary traumatic stress is used throughout IGT literature and appears to be a similar construct; a defining characteristic that may

be a facet of IGT is the acknowledgement that trauma was transmitted through "knowing about a traumatizing event experienced by a significant other" (Figley, 1995, p. 7).

Lastly, the consequences for traumatized individuals' offspring and subsequent generations were in the form of a psychopathological outcome, risk factors and vulnerabilities, impacts on family relationships and communication, effects on coping and resilience, and/or identity construction and meaning making. Psychopathology was the most commonly identified factor for correlational or outcome-based research and was determined by the presence of addictions (Whitbeck et al., 2004), suicidality (Elias et al., 2012), depression (Bombay et al., 2014), post-traumatic stress symptoms or PTSD (Burchert et al., 2017), or anxiety (Field et al., 2013). Meanwhile, other studies conceptualized this component of IGT as general negative mental health outcomes (Vaage et al., 2011), externalizing and internalizing behavioural outcomes (Fargas-Malet & Dillenburger, 2016; Siegel & Han, 2018), experiences of racial discrimination (Bombay et al., 2014), psychosocial vulnerability (Pearce et al., 2008), attachment security (Palosaari et al., 2013), personal meaning making in relation to parental and historical trauma (Liem, 2007), family relationships and bonds (Field et al., 2013; Song et al., 2013), susceptibility to violence (Spencer & Le, 2006), attitudes toward cultural community (Karenian et al., 2011), perceived discrimination and threat (Bombay et al., 2014), and identity (Lee & Clarke, 2013). It is important to note that many studies examined multiple constructs and were not limited to examining only one facet of offspring impact.

The focus of inquiry of each study corresponded to the components of IGT that researchers wanted to emphasize. This was either the process of IGT (the mechanism of IGT or how trauma may transmit from generation to generation), the outcome of IGT (the manifestation of IGT in subsequent generations), or both. With transmission processes, Kellermann (2001) summarized that in Holocaust IGT research, the transmission process occurred in interpersonal relations, socialization, communication, and genetics. The reviewed studies appeared to be consistent with Kellermann's categorization. For instance, Nagata and Cheng (2003) explored patterns in the ways that traumatic events were communicated in families. Han (2006) examined the relationship between trauma and attachment. Song et al. (2013), Song et al. (2014), and Field et al. (2013) explored how parenting styles were related to trauma and to challenges in subsequent generations. Cromer et al. (2018) examined how socialization in the form of acculturation was associated with historical loss identification, and Perroud et al. (2014) examined epigenetic factors related to PTSD. As for research emphasizing the outcome of IGT, these studies either (a) focused on providing a correlational link between parental trauma and the consequential impact on the subsequent generation or (b) examined how members of the subsequent generation understood their experience in light of parental or historical trauma.

**Cultural Considerations for Construct Conceptualization and Focus of Inquiry**

A confusing nomenclature of associated constructs that are used interchangeably (i.e., secondary trauma, transgenerational trauma, and intergenerational transmission of trauma) continues to limit clarity in IGT research (Danieli, 2007). The differentiation between collective and individualized traumatization may reflect variants of IGT that have been represented in the literature despite sharing the same nomenclature. Unfortunately, this may have contributed to confusion in the conceptualization of IGT and masked the underlying mechanisms that differentiate IGT from other similarly associated constructs (Cromer et al., 2018). A way to move forward is to utilize different terminology to delineate collective and individual versions of IGT, to strive for agreement among construct definitions, and to examine variation in its underlying mechanisms (Cromer et al., 2018; Danieli, 2007). The collective variant of IGT may be better identified as being cultural, collective, and/or historical trauma and focuses on how a collective responds to and makes sense of traumatic events, while the individualized perspective can be situated as a transmission of trauma within family systems or termed as an intergenerational transmission of trauma (Cromer et al., 2018; Danieli, 2007; Lehrner & Yehuda, 2018).

The challenge of studying IGT associated with mass or collective trauma within cultural groups is that both the collective experience as well as idiosyncratic individualized responses can overlap (Hatala et al., 2016). An individual's response is not necessarily reflective of the collective response, but there may still be consistency with joint collective experience. The differential focus may also depend on the theoretical discipline, for instance in Kidron's (2012) anthropological research: although IGT was part of the study, the focus was on the participant's collective cultural understanding of trauma.

In light of the fact that IGT is a social and generational construct, from a cultural standpoint it was valuable for studies to provide the contextualization of what contributed to the traumatic event(s) that a collective was exposed to. For instance, Field et al. (2013) described the historical and political events related to the Cambodian genocide and the Khmer Rouge regime, while Nagata and Cheng (2003) elaborated on conditions of Japanese American internment camps. Both studies offered a cultural framework for understanding the IGT phenomenon. In Nagata and Cheng's (2003) study, IGT impacted communication and parenting according to normative cultural understandings of these constructs. Similarly, the socio-historical contextualization of historical trauma has provided further understanding of why colonization had such a significant cultural impact on Indigenous communities (Bombay et al., 2011; Cromer et al., 2018; Whitbeck et al., 2004).

Nonetheless, there are still challenges in the conceptualization of IGT due to the range of ways that parental traumatization is operationalized in relevant studies. Some studies emphasized the importance of defining trauma as PTSD

or PTSS, whereas others examined it as a stress model or as the exposure to a collective traumatic experience. Identification of parental traumatization as having gone through a collective traumatic event can be overly flexible, which can result in confounding factors that make it difficult to support correlational or causal claims, but it does offer an opportunity to examine collective or cultural traumatic memory. This divergence in conceptualization can be reflective of differing circumstances related to the limits of conducting research on politically sensitive events where it may not be culturally appropriate or ethically safe to determine traumatization as PTSD (see Bezo & Maggi, 2015; Siegel & Han, 2018). In order for the literature to move forward, it will require a clear definition of IGT and clear parameters for operationalization. This is important for cross-cultural applications of IGT, since it will help researchers understand how IGT can be adapted to fit within the world view of the culture in question.

**Recommendations for Future Research.** The reviewed studies demonstrated that the current IGT literature has expanded from its historical emphasis on psychopathology in subsequent generations to a more nuanced understanding of IGT (i.e., narrative meaning, values, communication, and resilience). However, although culture was discussed in most studies, few examined directly the explicit role of culture as part of the process of IGT. Exceptions to this highlighted the various directions that can be taken to amplify cultural perspectives. The first would be through identifying cultural meaning making: for example, Song et al.'s (2014) study stressed the role of culture and how IGT influenced *Indero*, a Burundian concept of parenting, while Atallah's (2017) themes of *Muqawama*, *Awda*, and *Sumoud* were Arabic concepts associated with the transmission of adaptation across generations. Drawing on these cultural perspectives allows for opportunities to explore dimensions of meaning making along with resilience as vital components associated with IGT (Hatala et al., 2016). The second direction would be to intentionally integrate psychological constructs that directly examine culturally associated domains in IGT studies such as acculturation and enculturation (Cromer et al., 2018), racial socialization (Nagata & Cheng, 2003), and racial trauma (Nagata et al., 2019).

## Approaches to Research Design

The design of a study should reflect the paradigmatic assumptions that underpin it, such as epistemology, ontology, methodology, or axiology (Carter & Little, 2007; Crotty, 1998; Ponterotto, 2005). Applying Ponterotto's (2005) paradigmatic delineation (positivist, post-positivist, constructivist-interpretivist, critical-ideological) to the reviewed studies reveals that all the quantitative studies can be considered to be positivist. As for the qualitative studies, researchers adhered to post-positivist (i.e., Lin et al., 2009; Song et al., 2014), constructivist-interpretivist (i.e., Hatala et al., 2016; Lee & Clarke, 2013), and critical-ideological paradigms (i.e., Atallah, 2017; Kidron, 2012; Liem, 2007; Lin & Suyemoto, 2016).

Most quantitative research adhered to a correlational design that aimed to determine an association between parental traumatization and some form of outcome in the subsequent generation. Two studies integrated design features to decrease confounding factors—Song et al. (2014) integrated matched pairing and Bombay et al. (2014) involved the randomization of a discriminatory stimulus—but the rest of the quantitative studies involved quasi-experimental research designs (i.e., Field et al., 2013; Siegel & Han, 2018) that compared participants exposed to IGT to participants who did not have an affiliation to IGT. All of these studies were also cross-sectional, although there was one study that applied a longitudinal research design (see Vaage et al., 2011).

Other studies expanded upon the correlational connection between parental traumatization and offspring consequences by examining potential mechanisms associated with IGT. Cromer et al. (2018) utilized an acculturation scale, a historical loss scale, and a measure for betrayal trauma to differentiate the possible processes involved with historical trauma and IGT. Meanwhile, Perroud et al. (2014) examined the epigenetic modifications associated with IGT transmission by comparing Tutsi women exposed to the Rwandan genocide during pregnancy with those who were not exposed to the genocide. Another example was demonstrated in Fargas-Malet and Dillenburger's (2016) study that explained the process of IGT using behavioural principles (behavioural analysis) to connect the verbal behaviour of parents with the behavioural repertoire of their offspring.

Among the qualitative studies, the following designs were used: grounded theory (Atallah, 2017; Lee & Clarke, 2013; Song et al., 2014), comparative case study (Kidron, 2012), phenomenology (Lee & Clarke, 2013; Lin & Suyemoto, 2016), and narrative analysis (Liem, 2007). With three of the studies (see Bezo & Maggi, 2015; Hatala et al., 2016; Liem, 2007), the specific qualitative research design was not explicitly stated and had to be deduced. For example, Liem (2007) focused on narratives of Korean American participants who experienced the Korean War directly or indirectly. Although Liem's study was not explicitly a narrative study, the focus on narrative as well as its clear critical discourse likely situates it as a form of narrative research.

For some of the studies, specific decisions related to culture and trauma were integrated into their design. The majority of the research with Indigenous populations highlighted the involvement of Elders, members of advisory boards, and Indigenous healing practices as a way to support participants (see Ehlers et al., 2013; Hatala et al., 2016; Pearce et al., 2008; Whitbeck et al., 2004). Whitbeck et al. (2004) noted how each participant was provided with a gift of wild rice and invited to participate in the study as a way to illustrate specific design considerations for honouring Indigenous world views. Although cultural design elements were not as prevalent in the non-Indigenous studies, there were exceptions to this generalization. Lee and Clarke (2013) discussed how the primary investigator was part of the Hmong community and made decisions concerning study

components such as informal interview locations that reflected the researcher's knowledge of the community. In Palosaari et al.'s (2013) study, the researchers decided to use verbal consent as opposed to written consent due to legitimate political fears related to written statements within the community. Other studies such as Atallah (2017) and Lin and Suyemoto (2016) consulted a cultural advisor and identified their cultural positionality, respectively. It is important to note that modifying a methodological design according to culture is generally considered a weakness of most cross-cultural research and is not necessarily limited to IGT research (Sanchez et al., 2006).

With decisions related to studying psychological trauma, it is likely that all the studies followed ethical guidelines when dealing with participants' vulnerability to trauma. As a result, most studies did not include any statements about ethics or design elements to accommodate psychological trauma. Nonetheless, there were exceptions reflecting a form of intentional research reporting practice. This was shown in Pearce et al.'s (2008) study, which emphasized that personnel worked actively to ensure that physical and emotional support was provided in the form of traditional healing, addictions services, and secure housing. Another example is Song et al.'s (2013) and Song et al.'s (2014) studies, which discussed how relationships were built to ensure that the participants trusted the researchers and that the researchers helped the participants obtain and receive adequate mental health support. Lastly, Bezo and Maggi's (2015) study identified how its authors wanted to minimize interview-related stress among first-generation participants by not asking them explicitly about personal experiences of trauma. These examples highlight how research designs can be shaped in a manner that can result in practical benefits and can support members of the community in question when inquiring about potentially aversive phenomena.

**Cultural Considerations for Research Design**

It is important to recognize that there are clear challenges when it comes to IGT research. It is not possible to conduct a truly experimental research design given the ethical nature of studying trauma and the practical limitations of studying a generational phenomenon. In the studies reviewed here, most research was exploratory or correlational and did not incorporate design strategies such as matched pairings to mitigate confounding factors. These methodological concerns were reflected in early IGT research with Holocaust survivors (see Solkoff, 1981, 1992) and may be due to the nascent nature of cross-cultural IGT research as well as to earlier identified issues regarding conceptualization.

Nonetheless, there are notable strengths found in some exemplary studies that described additional considerations for integrating culture and social support into their research design. Pearce et al. (2008) and Song et al. (2013) provided excellent models as to how trauma and culture can be honoured through specific design choices. Likewise, the incorporation of Indigenous protocols (see Hatala et al.,

2016; Whitbeck et al., 2004) has been vital for establishing respect and cultural safety when studying historical trauma and IGT. Although discussing research ethics is not necessary in report writing, highlighting ethical decisions provides a model of intentional research design and reporting that can align with explicit social justice orientations in research (Kennedy & Arthur, 2014).

The studies evaluated in this scoping review were mainly cross-sectional and correlational. Therefore, research is limited to the temporal time frame in which it was conducted and there can be no causal inferences made (Creswell, 2014). The temporal snapshot is a challenge for the IGT literature given that (a) IGT is a construct that spans generations and cannot be captured to its fullest extent in the time frame of most research designs and that (b) there are many possible confounding factors that can influence the transmission of trauma between multiple generations. Studies such as those by Whitbeck et al. (2004) and Ehlers et al. (2013) attempted to examine other associated constructs such as remembering historical loss in order to mitigate temporal limitations. A historical loss construct is then situated within a psychological dimension and can be correlated with other constructs such as acculturation (see Cromer et al., 2018). Nonetheless, generational and temporal elements are an ongoing limitation in the study of IGT due to the many confounding factors that can occur through the passage of time.

Some of the qualitative studies reviewed here did not state their methodological design explicitly, making it difficult to assess these research components. This is problematic given that the flow of epistemology, methodology, and method helps to discern the internal consistency in qualitative research and whether or not the research design fits with underlying epistemological assumptions (Carter & Little, 2007). Furthermore, the majority of the qualitative studies did not have a strong exposition of their design. Nearly half the studies noted that they consisted of qualitative studies but did not discuss the rationale for this choice or explain how credibility and trustworthiness had been addressed.

**Recommendations for Future Research.** For the field to move forward, similar recommendations as discussed in previous methodological critiques of IGT still apply, such as utilizing comparison groups and examining non-clinical samples (Solkoff, 1981, 1992). Future qualitative studies should describe the methodology and the rationale for utilizing qualitative research rather than simply noting that the study was qualitative (Carter & Little, 2007). These studies should also elaborate on trustworthiness criteria and procedures to ensure quality in qualitative research (Morrow, 2005). Qualitative research can benefit by the inclusion of clear descriptions of epistemology, methodology, and method and provide well-defined logical connections between these three pillars of qualitative research (Carter & Little, 2007). Nonetheless, it is important to recognize that there are real practical challenges to studying IGT that require creative research design choices.

Within the view of cultural considerations, future studies need to consider the notion of construct equivalence—that is, whether the examined construct can be understood conceptually as the same construct in other cultures (Sanchez et al., 2006). Acknowledging construct equivalence can come in different forms, either through an explicit explanation of how a construct fits within a cultural view as shown in Nagata and Cheng's (2003) study, and/or through its integration into specific design choices as was the case in Ehlers et al.'s (2013) study involving Indigenous Elders in determining the appropriateness of the research. Researchers can also apply the intentional cultural protocols that Indigenous scholars utilize when studying historical trauma. Given the socio-political nature of trauma (Alexander, 2012), integrating these protocols such as the inclusion of cultural advisors or the involvement of stakeholders can help develop cultural safety and ensure that IGT research is conducted in an ethical and culturally safe manner.

**Participants and Sampling**

The purpose of each study's respective inquiry determined whether parents, their offspring, or parent–offspring, grandparent–parent–offspring, or family units were identified as target participants. Studies that did not involve a multi-generational sample directly utilized the perspective of the participant to determine parental traumatization or IGT impact on offspring, depending on the participant's generation. For example, Lin and Suyemoto's (2016) study involved the offspring generation to identify traumatic experiences communicated to them from their parents, while Siegel and Han (2018) had parents identifying psychological adjustment issues in their own children.

There was a broad representation of ethnic populations identified in this review. An overview of the participant populations is indicated in Appendix 1. Most studies involved an intersection of cultures such as Cambodian American, but only a few studies acknowledged this intersection as a key consideration (see Cromer et al., 2018; Lee & Clarke, 2013). The majority of the studies also involved a non-clinical sample, with only a handful of studies examining clinical samples (see Field et al., 2013; Karenian et al., 2011).

In terms of the sampling strategies used, studies tended to utilize convenience sampling, although only a few studies provided a rationale for this design choice. For example, Song et al.'s (2014) study elaborated on the challenges related to gaining access to former child soldiers, which required convenience sampling. Often convenience sampling occurred through a partnership with organizations that worked or were connected with the population of interest (see Nagata & Cheng, 2003). Within convenience sampling, snowball sampling was used to gain access to other "hard to reach" participants, some who either mistrusted researchers or had sensitivities to being studied due to previous traumatic experiences (see Liem, 2007; Lin et al., 2009). With particularly vulnerable populations, researchers worked with cultural stakeholders or a liaison (e.g., a non-profit organization)

to establish relationships with the community and with participants (Atallah, 2017; Hatala et al., 2016).

To mitigate confounding factors, researchers used variants of randomized sampling, including multi-stage stratified random sampling (Elias et al., 2012) and randomized two-group cluster sampling (Palosaari et al., 2013). Other studies with an idiographic focus highlighted cultural variation within ethnic groups by recruiting participants from different villages (Burchert et al., 2017), geographic regions (Burchert et al., 2017), or tribal associations (Cromer et al., 2018). Generally, it seems that sampling strategies and choices were dependent on available resources, the circumstance of a particular study, partnerships developed between educational institutions and community organizations, and accessibility of a sample. The lack of randomization in the sampling strategies may be reflective of limitations accessing members of politically and socially silenced groups as well as challenges related to research conducted in these communities. Nonetheless, it is also important to note that the emphasis on randomization is associated with positivist/post-positivist research and is not characteristic of other research paradigms.

### Cultural Considerations for Sampling

Studies that offered explanations for sampling choices provided insight into the unique challenges with studying IGT. For example, Song et al. (2013) elaborated on security risks that limited access to participants, while Ehlers et al. (2013) described the use of venue-based sampling to ensure that "hard to reach" populations were involved. Most of the research also had a gender bias, with most samples consisting either mostly of women (i.e., Bezo & Maggi, 2015; Siegel & Han, 2018) or entirely of women (Burchert et al., 2017; Roth et al., 2014). The lack of male samples is a limitation in the current research, given that there can be unique gender and cultural interactions in the trauma transmission process (Burchert et al., 2017; Vaage et al., 2011).

**Recommendations for Future Research.** Future studies will need to consider the nuances of biculturalism, polyculturalism, bilingualism, and multilingualism in their sampling choices (Sanchez et al., 2006). Further, in order to understand the links of trauma narratives within a family, it is helpful in a research study to examine members of two or three generations. Treating a family as a unit of study (Field et al., 2013) or studying the family and its representatives across several generations (Atallah, 2017) are examples of how IGT can be examined within family contexts. Lastly, recognizing cultural variations within ethnic groups can be helpful in challenging the assumption that samples represent a cultural monolith.

### Data Collection and Analysis

In the quantitative studies reviewed here, data collection was commonly conducted using surveys and/or structured interviews. For parental traumatization,

trauma measures included the PTSD Self-Rating Scale (Karenian et al., 2011), the Harvard Trauma Questionnaire (Field et al., 2013), and the civilian version of the PTSD checklist (Burchert et al., 2017), although some studies used trauma measures for both parent and offspring generations (see Burchert et al., 2017). For the impact of IGT on offspring, measures used included the Beck Depression Inventory (Bombay et al., 2011), the Hopkins Symptom Checklist (Siegel & Han, 2018), the Behavior Problem Index (Siegel & Han, 2018), and the Strengths and Difficulties Questionnaire (Fargas-Malet & Dillenburger, 2016; Vaage et al., 2011). Other studies developed their own scales and measures specifically for their study (Elias et al., 2012; Palosaari et al., 2013) or made modifications to an existing measure to ensure it fit with the context and the culture in question (see Bombay et al., 2011; Palosaari et al., 2013). Studies that did not use self-report surveys incorporated biological measures associated with IGT (see Ehlers et al., 2013; Perroud et al., 2014). Overall, these studies utilized correlational and regression analysis to provide a link between parental traumatization and its impact on offspring generations.

All qualitative studies used semi-structured interviews. Although most of these studies involved individual interviews, exceptions included the use of a focus group format (Song et al., 2014) and the use of family interviews (Atallah, 2017; Bezo & Maggi, 2015). There were also specific forms of semi-structured interviews: for instance, Hatala et al. (2016) employed life history interviews in order to understand the ways that participants narrativized their experiences of historical trauma. Open-ended and unstructured interviews were also used (Liem, 2007) or added to semi-structured interviews (Lin et al., 2009). To triangulate the data, studies utilized observational and field notes (Song et al., 2014), multiple in-depth interviews with participants (Lin et al., 2009), or family interviews to inform individual interviews (Atallah, 2017).

Analysis in the qualitative studies mainly employed some form of content or thematic analysis. A statement about positionality or bracketing was offered by several of the studies (see Lee & Clarke, 2013; Lin et al., 2009; Lin & Suyemoto, 2016; Song et al., 2014), which corresponded with the paradigmatic commitment of each one. Discussing positionality is valuable in qualitative research because it reveals a researcher bias that may influence or be involved in co-constructing the presented knowledge (Morrow, 2005). Lastly, both Song et al. (2014) and Lee and Clarke (2013) incorporated member checking to ensure trustworthiness in the presented data.

**Cultural Considerations for Data Collection and Analysis**

In general, there are limitations to survey research when applied cross-culturally. These include response bias, measurement equivalence, brevity and vagueness of measurement items, issues with memory, and non-representative samples (Sanchez

et al., 2006; Tweed & DeLongis, 2006). For most of the reviewed quantitative studies, measures were not culturally adapted, nor were there explicit acknowledgements of cultural limitations such as differences in cultural understanding and standardization to the cultural group in question. Correlational IGT research can be limited because it results in circular reasoning and lacks explanatory value (Fargas-Malet & Dillenburger, 2016). Another challenge to IGT research is that it is predicated upon the assumption that individuals conceptualize their experiences as traumatic and are aware of how trauma has affected them and their families. However, due to the nature of trauma and/or the silencing of trauma in families and communities, this awareness may not necessarily be accessible to all participants (Danieli, 1998; Lin & Suyemoto, 2016). Furthermore, identifying certain types of traumatic incidents may not be approved or recognized in certain cultures (see Siegel & Han, 2018).

Nonetheless, there were studies that incorporated cultural considerations throughout the data collection and analysis. For instance, Burchert et al. (2017) utilized a Khmer version of the PTSD checklist, Palosaari et al. (2013) noted how translations and back-translations were employed to ensure linguistic compatibility of measured constructs, and Field et al. (2013) translated the Harvard Trauma Questionnaire to the Cambodian language and incorporated questions related to the Khmer Rouge regime. Among the qualitative studies were strategies employed to ensure trustworthiness and cultural credibility such as providing a positionality statement, member checking, triangulation, and a thorough breakdown of the analysis strategy. Other strategies that were utilized to ensure cultural safety included conducting interviews in locations where participants felt most comfortable, such as their homes (Atallah, 2017), interviewing in a more conversational manner that is consistent with how knowledge is shared in a cultural community (Hatala et al., 2016), and conducting interviews in their participants' language (Bezo & Maggi, 2015). Some of the studies also centralized linguistic meaning structures into their analysis by identifying themes that have cultural relevance consistent with the participants'world views (Atallah, 2017; Song et al., 2014).

**Recommendations for Future Research.** Future qualitative studies would benefit from an explanation of the strategies used for analysis as well as from the utilization of a myriad of techniques to ensure credibility and trustworthiness of the data, such as member checking and expert peer review of the research findings (Morrow, 2005). With quantitative studies, it is important to recognize that there is a risk of conducting imposed-etic research, where a cultural reference point of a construct is misapplied across different cultures (Wong et al., 2006). These studies can benefit by coordinating and working with members of the cultural communities in question to ensure that the measures used reflect the knowledge of that community (Tweed & DeLongis, 2006). An example of this is illustrated in Bombay et al.'s (2011) study, whose researchers worked with the community

to ensure cultural adaptation of the measures that were utilized. Multilingual and bilingual research can also be an opportunity to affirm cultural understandings and variations in generational differences in language capacity, especially for cultural diasporas (Sanchez et al., 2006).

## Summary

There has been progress since 1999 in terms of cross-cultural applications of IGT. Themes and lessons garnered from this scoping review of methodologies can help shape future studies and offer guidance for continued research on IGT. Examining the IGT literature reveals that there are emerging perspectives that have resulted from IGT research with ethnic groups. To an extent, certain areas of research on families of Holocaust survivors have matured and are reflected in the societal consensus in acknowledging this atrocity. This consensus has helped move IGT research forward and paved the way for the systematic examination of the generational impact of mass trauma, thus contributing to the legitimization of historically silenced events. In that sense, research on IGT is inherently linked with social justice, given that an implicit goal of this research is to uncover, affirm, and honour silenced family and communal trauma narratives and experiences.

There are limits to this scoping review. First, the review is limited to studies of IGT research published between 1999 and 2019 and does not take into consideration studies on the trauma of Holocaust survivors, which was outside of the purpose of the review, even though there are extensive methodological implications that can be garnered from research on this population. Second, culture is a broad construct—there are intersectional identities not explicitly acknowledged in this review. Given that the emphasis was on ethnicity, research on other populations such as veterans was not included. Lastly, the review was limited to English-language publications and does not include culturally specific IGT literature that has appeared in other languages.

The review shows that there are promising perspectives that can be garnered from cross-cultural research on IGT. It is therefore vital for cultural considerations and world views to be integrated into methodologies for research to be conducted ethically and responsibly. Since there are many other cultural groups that have experienced collective trauma, research on IGT can offer an avenue of research for second and third generations of survivors of human atrocities to share the experiences of their families and ancestors. In doing so, these stories and lived experiences can be acknowledged in public and academic discourse. IGT narratives can serve as "teaching tales" that can provide an understanding of the effects of historical and cultural trauma across generations. Potentially, this knowledge can also provide direction for clinical practice with IGT survivors.

## Appendix 1: Cross-Cultural Intergenerational Trauma Research, 1999–2019

**Note**

In what follows, *conceptualization* refers to how intergenerational trauma variables were determined and examined in the study.

**Atallah (2017)**

**Study Objective(s).** To examine intergenerational resilience on Palestinian refugee families in Israel.

**Conceptualization of IGT Variables.** Historical trauma exposure (elders were 1948 Nakba survivors); racial socialization; transgenerational protective factors; structural violence.

**Research Design.** Qualitative (critical social theory).

**Sample Size.** $N = 30$ (5 families, 3 generations).

**Sample Ages.** 18–90.

**Sample Cultural Group(s).** Palestinian.

**Data Collection and Analysis.** Semi-structured interviews with families and individuals; grounded theory analysis.

**Cultural Consideration(s).** Cultural advisor involved; family defined by participant; participant linguistic meaning structures used to determine themes.

**Bezo & Maggi (2015)**

**Study Objective(s).** To trace how potential trauma from the Holodomor genocide impacts future generations.

**Conceptualization of IGT Variables.** Trauma exposure (first-generation survivors of the 1932–1933 Holodomor genocide).

**Research Design.** Qualitative.

**Sample Size.** $N = 45$ (15 families, 3 generations).

**Sample Ages.** 22–91.

**Sample Cultural Group(s).** Ukrainian.

**Data Collection and Analysis.** Semi-structured interviews; thematic analysis.

**Cultural Consideration(s).** Interviews conducted in Ukrainian.

**Bombay et al. (2011)**

**Study Objective(s).** To gauge whether levels of depressive symptoms differed due to parental exposure to Indian Residential Schools (IRS) and stressor experiences that may contribute to such differences.

**Conceptualization of IGT Variables.** Trauma exposure (attendance of IRS by parents); depressive symptoms; stressor experiences (adverse childhood experiences; adult trauma; perceived discrimination).

**Research Design.** Quantitative (cross-sectional).
**Sample Size.** *N* = 143 (67 parents who attended IRS, 76 who did not).
**Sample Ages.** 18–64.
**Sample Cultural Group(s).** Indigenous (Canada).
**Data Collection and Analysis.** Surveys; regression analysis.
**Cultural Consideration(s).** Self-location of author; support and suggestions received from First Nations community representatives; partnership with Indigenous health organizations.

**Bombay et al. (2014)**
**Study Objective(s).** To understand the processes that contribute to differences in perceived discrimination and depressive symptoms due to parental exposure to IRS.
**Conceptualization of IGT Variables.** Trauma exposure (attendance of IRS by parents); identity centrality; depressive symptoms; discrimination appraisals; past discrimination.
**Research Design.** Quantitative (cross-sectional).
**Sample Size.** *N* = 399 (223 parents who attended IRS, 176 who did not).
**Sample Ages.** 18–69.
**Sample Cultural Group(s).** Indigenous (Canada).
**Data Collection and Analysis.** Surveys; path analysis.
**Cultural Consideration(s).** Discrimination appraisal scales reviewed by several members of Indigenous communities to ensure their cultural relevance.

**Burchert et al. (2017)**
**Study Objective(s).** To assess the effects of maternal PTSS and PTSD on trauma symptoms in Cambodian offspring born after the Khmer Rouge regime.
**Conceptualization of IGT Variables.** Maternal trauma symptomology (PTSD or PTSS); offspring trauma symptomology; post-war vulnerability.
**Research Design.** Quantitative (cross-sectional).
**Sample Size.** *N* = 378 (mothers and offspring).
**Sample Ages.** 40+ (mothers), 18+ (offspring).
**Sample Cultural Group(s).** Cambodian.
**Data Collection and Analysis.** Standardized interviews using measures; regression analysis.
**Cultural Consideration(s).** Measures back-translated blind; interviews conducted in Khmer.

**Cromer et al. (2018)**
**Study Objective(s).** To use institutional betrayal trauma theory to understand historical trauma and trauma transmission in families.

**Conceptualization of IGT Variables.** Trauma exposure (family history of boarding school attendance); interpersonal childhood trauma; acculturation; historical loss awareness.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 59$.

**Sample Ages.** 18–67.

**Sample Cultural Group(s).** Native American.

**Data Collection and Analysis.** Survey; regression analysis.

**Cultural Consideration(s).** Native Elders and members of Native American Student Union involved to support administration of surveys.

**Ehlers et al. (2013)**

**Study Objective(s).** To examine historical trauma and its psychopathological impact on subsequent generations of Indigenous people.

**Conceptualization of IGT Variables.** Historical trauma (thoughts of historical loss); psychopathology (symptoms of trauma, PTSD, substance dependence, affective/anxiety disorder, conduct/anti-social personality disorder); cultural identification.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 306$.

**Sample Ages.** 18–70.

**Sample Cultural Group(s).** Native American (at least 1/16 Native American heritage).

**Data Collection and Analysis.** Semi-structured diagnostic interviews using measures; regression analysis.

**Cultural Consideration(s).** Study reviewed by Indian Health Council, tribal review group overseeing health issues for reservations.

**Elias et al. (2012)**

**Study Objective(s).** To examine how parent/grandparent exposure to IRS and trauma is linked to suicidal behaviours.

**Conceptualization of IGT Variables.** Trauma exposure (attendance of IRS by parents/grandparents); lifetime history of abuse and suicidality; social demographic factors.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 2953$.

**Sample Ages.** 18–45+.

**Sample Cultural Group(s).** Indigenous people in Canada.

**Data Collection and Analysis.** Semi-structured interviews; regression analysis.

**Cultural Consideration(s).** Community-level consent provided by local band chief and council.

**Fargas-Malet & Dillenburger (2016)**

**Study Objective(s).** To examine links between parental exposure to conflict-related trauma in Northern Ireland between 1969 and 1988 (the Troubles) with offspring perceptions of society.

**Conceptualization of IGT Variables.** Trauma exposure (parental experiences of conflict); children's understanding of Northern Ireland before and after their birth; parental identification of offspring mental health.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 73$ (35 parents, 38 offspring).

**Sample Ages.** 9–10 (offspring), 30+ (most parents).

**Sample Cultural Group(s).** Northern Irish.

**Data Collection and Analysis.** Survey for parents; drawing for offspring; content analysis of drawings; ANOVA; correlational.

**Cultural Consideration(s).** None identified.

**Field et al. (2013)**

**Study Objective(s).** To examine the impact of parental styles on trauma transmission from mothers who survived the Khmer Rouge regime (one study with Cambodian participants, one with Cambodian American participants).

**Conceptualization of IGT Variables.** Trauma exposure (experiences of events from Khmer Rouge regime); maternal trauma symptoms; offspring assessment of parenting style; offspring depression/anxiety measure.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** Study 1: $N = 46$ (mother-daughter pairs). Study 2: $N = 15$ (mother-offspring pairs).

**Sample Ages.** Study 1: 44.8 (mothers [mean]), 16–18 (daughters). Study 2: 47.8 (mothers [mean]), 16.1 (offspring [mean]).

**Sample Cultural Group(s).** Cambodian American.

**Data Collection and Analysis.** Semi-structured interviews using measures; correlational analysis; mediation analysis.

**Cultural Consideration(s).** Cross-cultural validity of measures used identified; measures translated into Khmer.

**Han (2006)**

**Study Objective(s).** To examine how parental trauma affects offspring's sense of coherence as mediated by attachment.

**Conceptualization of IGT Variables.** Trauma exposure (parental refugee status); perceived parental trauma; parent–child attachment; sense of coherence; perceived emotional support.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 188$ (refugee children).

**Sample Ages.** Not specified.

**Sample Cultural Group(s).** Vietnamese, Cambodian, Hmong.
**Data Collection and Analysis.** Survey; regression analysis.
**Cultural Consideration(s).** None identified.

**Hatala et al. (2016)**
**Study Objective(s).** To explore interpersonal and resilient responses of Cree Elders to historical trauma.
**Conceptualization of IGT Variables.** Historical trauma exposure (IRS, marginalization, racism); resilience.
**Research Design.** Qualitative (social constructionist).
**Sample Size.** *N* = 4 (Cree Elders).
**Sample Ages.** 53–83.
**Sample Cultural Group(s).** Indigenous.
**Data Collection and Analysis.** Life history interview; analysis of semantic structure.
**Cultural Consideration(s).** Traditional Indigenous ethics and cultural protocols followed; themes based on cultural understandings.

**Karenian et al. (2011)**
**Study Objective(s).** To examine the psychological impact of collective trauma experiences in the 1914-1918 Armenian genocide on Armenians and their descendants.
**Conceptualization of IGT Variables.** Trauma exposure (loss of family member due to 1914–1918 events); PTSD symptoms (self-rated); relationship to cultural community.
**Research Design.** Quantitative (cross-sectional).
**Sample Size.** *N* = 689.
**Sample Ages.** 16–91.
**Sample Cultural Group(s).** Armenian (living in Greece or Cyprus).
**Data Collection and Analysis.** Survey; regression analysis.
**Cultural Consideration(s).** PTSD Self-Rating Scale adapted to be relevant to these 1914–1918 events.

**Kidron (2012)**
**Study Objective(s).** To compare the genocidal legacies of Cambodian Canadian and Jewish Israeli trauma descendants.
**Conceptualization of IGT Variables.** Trauma exposure (descendants of Khmer and Holocaust survivors).
**Research Design.** Qualitative (comparative case study).
**Sample Size.** *N* = 78 (23 Cambodian Canadians, 55 children of Holocaust survivors).

**Sample Ages.** 17–26 (Cambodian Canadians), 35–55 (children of Holocaust survivors).

**Sample Cultural Group(s).** Cambodian Canadian; descendants of Holocaust survivors.

**Data Collection and Analysis.** Semi-structured interviews; content analysis.

**Cultural Consideration(s).** Universality of trauma theory and IGT according to cultural understandings challenged.

**Lee & Clarke (2013)**

**Study Objective(s).** To make meaning of IGT for 1.5 generation Hmong participants associated with the memory of the Secret War of Laos.

**Conceptualization of IGT Variables.** Trauma exposure (potential trauma from parents due to war); secondary trauma; social memory; bicultural identity.

**Research Design.** Qualitative (hermeneutic phenomenology).

**Sample Size.** $N = 5$.

**Sample Ages.** 21–35.

**Sample Cultural Group(s).** Hmong American.

**Data Collection and Analysis.** Semi-structured interviews and focus group; content analysis.

**Cultural Consideration(s).** Methodology focuses on context of life and lived experiences; considers bicultural identity.

**Liem (2007)**

**Study Objective(s).** To construct oral histories of Korean Americans' personal and family experiences during the Korean War.

**Conceptualization of IGT Variables.** Trauma exposure (personal and family experience of war); historical trauma; collective memory.

**Research Design.** Qualitative (case studies).

**Sample Size.** $N = 36$.

**Sample Ages.** Not specified.

**Sample Cultural Group(s).** Korean American.

**Data Collection and Analysis.** Oral history interviews; narrative analysis.

**Cultural Consideration(s).** Individual and cultural meaning making emphasized; interviews conducted at locations chosen by participants.

**Lin & Suyemoto (2016)**

**Study Objective(s).** To understand how experiences of trauma from older generations are communicated between generations in families.

**Conceptualization of IGT Variables.** Intergenerational communication about trauma (from offspring perspective); trauma exposure (refugee families).

**Research Design.** Qualitative (phenomenology).

**Sample Size.** $N = 13$.

**Sample Ages.** 18–25.
**Sample Cultural Group(s).** Cambodian American.
**Data Collection and Analysis.** Semi-structured interviews; phenomenological analysis.
**Cultural Consideration(s).** Positionality statement provided; themes verified with participants and cultural experts.

**Lin et al. (2009)**
**Study Objective(s).** To describe the influences of education on the family communication of socio-cultural trauma.
**Conceptualization of IGT Variables.** Intergenerational communication of trauma (from offspring perspective); trauma exposure (refugee families); influence of education.
**Research Design.** Qualitative (grounded theory).
**Sample Size.** $N = 15$.
**Sample Ages.** Early to mid-20s.
**Sample Cultural Group(s).** Cambodian American.
**Data Collection and Analysis.** Semi-structured interviews; content analysis.
**Cultural Consideration(s).** Concept of silence in communication examined from trauma and cultural lenses.

**Nagata & Cheng (2003)**
**Study Objective(s).** To examine parental intergenerational communication of race-related trauma to offspring.
**Conceptualization of IGT Variables.** Intergenerational communication of trauma (from parent perspective); trauma exposure (former Japanese American internees); racial socialization.
**Research Design.** Quantitative (cross-sectional).
**Sample Size.** $N = 450$.
**Sample Ages.** 69.7 (mean).
**Sample Cultural Group(s).** Japanese American.
**Data Collection and Analysis.** Survey; regression analysis.
**Cultural Consideration(s).** Cultural concepts integrated to understand results.

**Palosaari et al. (2013)**
**Study Objective(s).** To examine the intergenerational effects of parental war trauma to offspring attachment and mental health, as mediated by psychological maltreatment.
**Conceptualization of IGT Variables.** Trauma exposure (parent exposure to the Gaza War); offspring attachment; mental health challenges (depression, PTSS, aggression); psychological maltreatment.
**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 240$.

**Sample Ages.** 10–12 (children), 37.6 (mothers [average]), 42.4 (fathers [average]).

**Sample Cultural Group(s).** Palestianian.

**Data Collection and Analysis.** Surveys; structural equation modelling.

**Cultural Consideration(s).** Questionnaires were back-translated; verbal consent to respect contextual concerns with written consent.

**Pearce et al. (2008)**

**Study Objective(s).** To situate historical trauma as a factor associated with sexual abuse and negative health outcomes for young Indigenous people in Canada.

**Conceptualization of IGT Variables.** Trauma exposure (at least one parent attending IRS and/or taken from biological parents into care); sexual abuse history; negative health and mental health outcomes.

**Research Design.** Quantiative (cross-sectional).

**Sample Size.** $N = 543$.

**Sample Ages.** 14–30.

**Sample Cultural Group(s).** Indigenous.

**Data Collection and Analysis.** Interviews; regression analysis.

**Cultural Consideration(s).** Participants given opportunity to be interviewed by an Indigenous person; Indigenous study personnel involved in the design of the research instrument; partnership with First Nations organizations.

**Perroud et al. (2014)**

**Study Objective(s).** To examine the epigenetic transmission of maternal stress associated with the Tutsi genocide.

**Conceptualization of IGT Variables.** Trauma exposure (mother exposed to Tutsi genocide during pregnancy); PTSD and depression severity; epigenetic modifications.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 50$ (25 mother-child pairs exposed to genocide; 25 mother-child pairs not exposed).

**Sample Ages.** 28 (mothers at childbirth [mean]), 17–18 (children at time of study).

**Sample Cultural Group(s).** Rwandan.

**Data Collection and Analysis.** Clinical interview; DNA analysis; t-test, chi-square, regression analysis.

**Cultural Consideration(s).** None identified.

**Roth et al. (2014)**

**Study Objective(s).** To determine whether maternal PTSD was associated with mental health symptoms in the children of Rwandan women.

**Conceptualization of IGT Variables.** Trauma exposure (mother lived in Rwanda during 1994 genocide); maternal PTSD symptoms; offspring mental health issues (depression, anxiety, aggressive anti-social behaviour).

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** *N* = 125 women and their children.

**Sample Ages.** 24–59 (mothers), 12 (offspring).

**Sample Cultural Group(s).** Rwandan.

**Data Collection and Analysis.** Clinical interview with measures; correlational analysis; t-test.

**Cultural Consideration(s).** Interviews conducted at participants' homes; instruments back-translated.

**Siegel & Han (2018)**

**Study Objective(s).** To examine the link between potentially traumatic events experienced by parents/grandparents and the psychological adjustment of offspring.

**Conceptualization of IGT Variables.** Potentially traumatic events; prenatal mental health and marital relationships; parent–child relationships; psychological adjustment (internalizing and externalizing behaviours).

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** *N* = 2282 children and their parents and teachers.

**Sample Ages.** Not specified (first-grade students).

**Sample Cultural Group(s).** Chinese.

**Data Collection and Analysis.** Survey; regression analysis.

**Cultural Consideration(s).** Cultural family structure considered in research design.

**Song et al. (2013)**

**Study Objective(s).** To compare mental health and protective factors of offspring of former child soldiers to those of civilian population.

**Conceptualization of IGT Variables.** Trauma exposure (parents were former child soldiers); mental health issues and exposure to violence (offspring); coping skills and supports (offspring).

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** *N* = 30 (15 former child soldiers, 15 civilians).

**Sample Ages.** 26 (parents [mean]), 4–11 (offspring).

**Sample Cultural Group(s).** Burundian.

**Data Collection and Analysis.** Survey; Mann-Whitney U tests.

**Cultural Consideration(s).** Non-governmental organizations involved; acknowledged limitations of measures not being validated for the population.

**Song et al. (2014)**

**Study Objective(s).** To understand how trauma is transmitted from former child soldiers to their offspring.

**Conceptualization of IGT Variables.** Trauma exposure (parents were former child soldiers); parenting; resilience.

**Research Design.** Qualitative (grounded theory).

**Sample Size.** *N* = 40 (25 former child soldiers and offspring; 15 civilian offspring).

**Sample Ages.** Not specified.

**Sample Cultural Group(s).** Burundian.

**Data Collection and Analysis.** Semi-structured interviews; focus group; observational data; content analysis.

**Cultural Consideration(s).** Participant language (Indero) used as a cultural framework to understand analysis.

**Spencer & Le (2006)**

**Study Objective(s).** To examine the effects of parental trauma and immigrant stress on violence among offspring youth.

**Conceptualization of IGT Variables.** Trauma exposure (parent with refugee status); family structure; youth violence (serious and partner/family violence).

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** *N* = 329.

**Sample Ages.** 14–15.

**Sample Cultural Group(s).** Cambodian American, Chinese, Lao/Mien, Vietnamese.

**Data Collection and Analysis.** Structured interviews using measures; structural equation modelling.

**Cultural Consideration(s).** None identified.

**Vaage et al. (2011)**

**Study Objective(s).** To study the association between psychological distress of Vietnamese refugees and their children's mental health 23 years after resettlement.

**Conceptualization of IGT Variables.** Trauma exposure (father's refugee status); parent PTSD symptoms; family cohesion; offspring mental health.

**Research Design.** Quantitative (longitudinal).

**Sample Size.** *N* = 50 families (50 fathers, 52 mothers, and 27 offspring).

**Sample Ages.** 4–23 (offspring).

**Sample Cultural Group(s).** Vietnamese in Norway.

**Data Collection and Analysis.** Structured interviews using measures; linear regression.

**Cultural Consideration(s).** Interviews conducted in language participants comfortable with; cultural dimensions in analysis identified.

**Whitbeck et al. (2004)**

**Study Objective(s).** To examine the connection between historical loss, discrimination, enculturation, and alcohol abuse.

**Conceptualization of IGT Variables.** Historical trauma and grief (historical loss); enculturation; perceived discrimination; alcohol abuse.

**Research Design.** Quantitative (cross-sectional).

**Sample Size.** $N = 452$.

**Sample Ages.** 25–68.

**Sample Cultural Group(s).** Indigenous.

**Data Collection and Analysis.** Structured interviews using measures; structural equation modelling.

**Cultural Consideration(s).** Research team invited to partner with reservations; advisory boards consulted and involved; discussed how results fit within a cultural world view.

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* Denotes studies included in the methodological review.

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