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Intergenerational Trauma: Understanding Why Parents with Kids In Care Don't Just Do the Right Thing!

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Nothing To Disclose

Objectives:

At the conclusion of this session, participants will be able to:

- Describe the relationship between adverse childhood experiences, attachment disruption, and intergenerational transmission of trauma.
- Explain how trauma impacts neurodevelopment, emotional regulation, executive functioning, and parenting capacity.
- Identify trauma-driven behaviors and survival adaptations that may interfere with parental engagement, treatment participation, and reunification efforts.
- Apply trauma-informed and healing-centered approaches that promote accountability, empathy, and improved outcomes for children and families.

Every parent has two stories:

The story we know…….And the story we don't.

Reflection:

Think about a parent you struggled with.

Don't say their name.

Ask yourself:

- What frustrated you?
- What assumptions did you make?
- What didn't you know about them?
- What part of you shows up to inquire?
- What is the story you are telling yourself?

The Parent's Story Begins Long Before They Become a Parent

Common histories among parents involved in child welfare

- Abuse
- Neglect
- Domestic violence
- Foster care
- Caregiver addiction
- Poverty
- Community violence
- Homelessness
- Incarceration
- Traumatic loss

Discussion:

What protective factors may have been missing?

CHILD MALTREATMENT & THE BRAIN

EARLY EXPERIENCES SHAPE A LIFETIME

When a child experiences abuse, neglect, or household dysfunction, their brain adapts to survive. These changes can affect emotions, learning, behavior, and relationships.

KEY PARTS OF THE BRAIN & HOW MALTREATMENT AFFECTS THEM

AMYGDALA

- The brain's alarm system.
- Detects threat and triggers fight, flight, freeze, or fawn.
- In maltreated children, it becomes overactive.

Result: Constant fear, worry, and being easily startled.

PREFRONTAL CORTEX

- The "thinking brain."
- Responsible for planning, impulse control, problem solving, and decision making.
- Development can be delayed or disrupted by toxic stress.

Result: Difficulty with focus, self-control, planning, and making good choices.

HIPPOCAMPUS

- Important for memory and learning.
- Helps us make sense of experiences and context.
- Chronic stress can reduce its size and impair function.

Result: Problems with memory, learning, and understanding cause and effect.

STRESS HORMONES

- Chronic activation of the stress response (cortisol and adrenaline) floods the body.
- High levels over time are toxic to the developing brain.

Result: Body stays on high alert, leading to exhaustion, health problems, and emotion dysregulation.

NEUROCEPTION

- The brain's ability to detect safety or danger in people, places, and situations.
- Maltreated children's **neuroception** becomes biased toward **danger**.

Result: The world feels unsafe, even when there is no current threat.

TOXIC STRESS overwhelms the brain and body, disrupting healthy development.

When stress is strong, frequent, or prolonged without adult support, it becomes **TOXIC.**

The brain adapts to survive, not to thrive.

HOW TOXIC STRESS CHANGES HOW THE BRAIN FUNCTIONS

HIGH TOXIC STRESS BECOMES THE NEW BASELINE

The body and brain get used to constant stress. Calm and safety may feel unfamiliar or uncomfortable.

THE BRAIN EXPECTS DANGER

The nervous system is always scanning for threats. This leads to hypervigilance, anxiety, and quick reactions.

DECISION MAKING NARROWS

Under stress, the brain focuses on survival. Thinking becomes black and white, and the ability to consider consequences decreases.

LEARNING DECREASES

Stress hormones interfere with attention, memory, and the ability to absorb and retain new information.

RELATIONSHIPS BECOME DIFFICULT

Trust is hard to build. Emotions may feel overwhelming. Connecting with others can feel unsafe or confusing.

THE WINDOW OF TOLERANCE

Our ability to handle stress is like a window.

INSIDE THE WINDOW: REGULATED
We feel calm, focused, connected, and able to cope.

ABOVE THE WINDOW: OVERWHELMED
Too much stress can lead to anxiety, panic, rage, or hyperactivity.

BELOW THE WINDOW: SHUT DOWN
Too much stress can lead to numbness, disconnection, withdrawal, or depression.

Toxic stress shrinks the window, making it harder to stay regulated.

HEALING IS POSSIBLE

Safe, stable, and nurturing relationships can help regulate the nervous system, build resilience, and support the brain in healing and growing.

SAFETY · CONNECTION · SUPPORT · HEALING

BEHIND EVERY BEHAVIOR IS A BRAIN TRYING TO SURVIVE.
When we understand the impact of maltreatment, we can respond with compassion, create safety, and help children move from surviving to thriving.

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What is the story you are telling yourself?

What are some common reasons we think are true about parents involved in the Child Welfare System?

Parenting Through a Survival Lens

Common misconceptions

"They don't care."

"They're manipulative."

"They're lazy."

"They love drugs more than their kids."

Reframe

- Trauma adaptations
- Fight
- Flight
- Freeze
- Fawn
- Dissociation
- Hypervigilance
- Avoidance
- Executive dysfunction
- Relationship instability

Case Example:

Parent misses visits.

Ask

What assumptions are made?

What else could be true?

Root Cause → Empathy The Human Perspective

We often spend our time asking:
"What's going on with this parent/child?"
Today, we'll also ask:
"What's going on with me?“

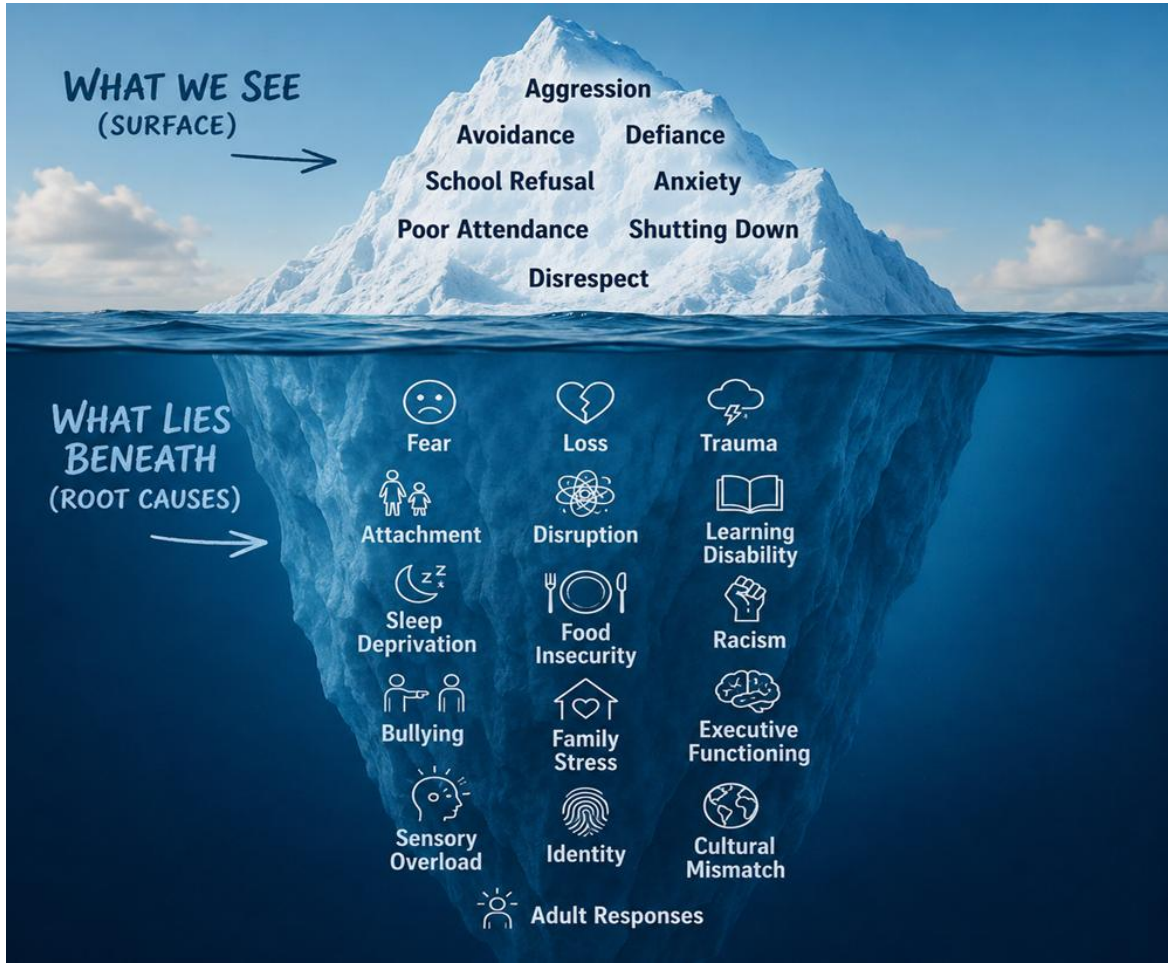
- Sometimes our curious, compassionate **Self** is leading.
- Sometimes our fixer, perfectionist, rule-enforcer, rescuer, or burned-out parts take over.

How we show up is part of the intervention

Root Cause → Empathy The Human Perspective

“Think of a student/family or person that challenges you(r) team the most.”

- What behavior comes to mind?
- What do adults usually do?
- Does it solve the problem?
- What is your emotional response?
- Where do you feel it in your body?
- What is the story you are telling yourself?



Root Cause → Empathy The Human Perspective

Like a fever to an illness:
Behaviors are DATA

Behaviors are COMMUNICATION

Behaviors are SYMPTOMS

SYMPTOMS are not the problem.

Symptoms are often the solution the nervous system has found- adaptations.

Behavior Is Communication

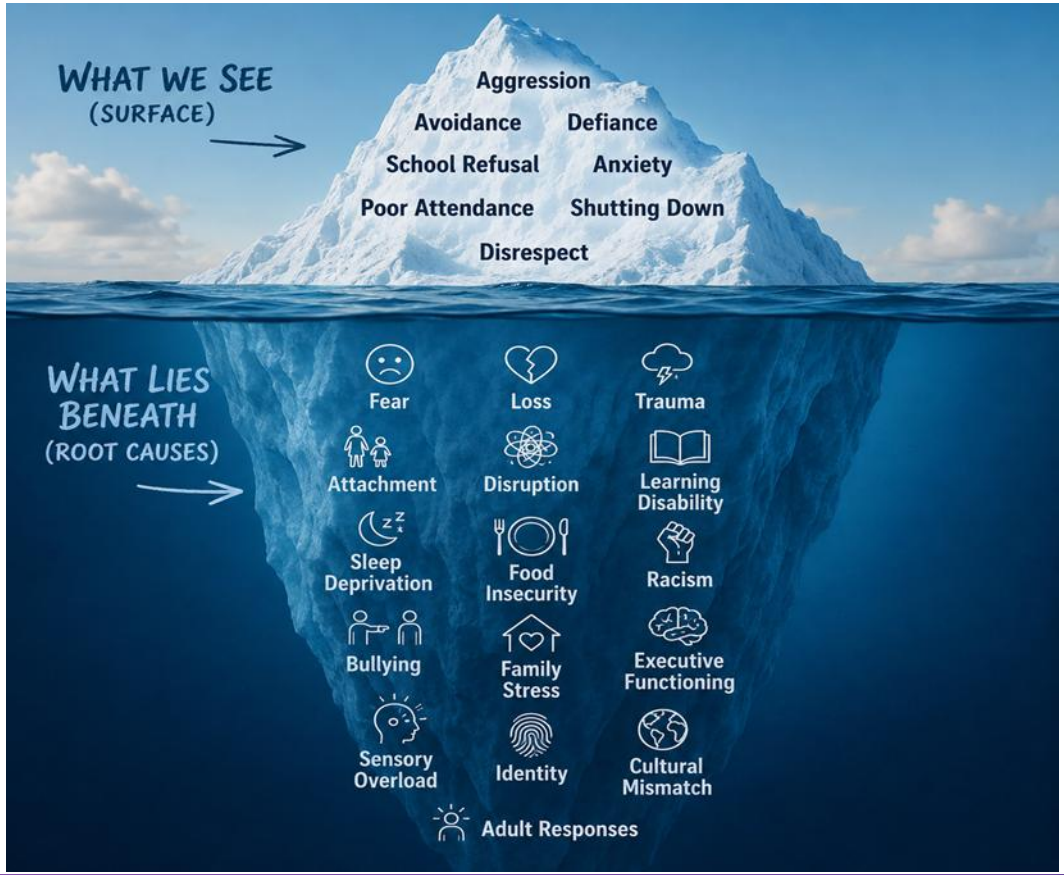
What We See vs. What May Be Happening

What We See (Observable Behaviors)	What May Be Happening (Possible Underlying Experiences)
• Defiance • Aggression • Withdrawal • Poor Concentration • School Refusal • Peer Isolation • Emotional Dysregulation • Hypervigilance • Somatic Complaints	• Fear • Shame • Loss or Grief • Trauma • Hunger or Food Insecurity • Exhaustion or Sleep Deprivation • Anxiety • Learning Differences • Rejection or Bullying • Family Stress • Need for Safety and Connection

Root Cause → Empathy The Human Perspective

"What happens if we only respond to the "*behaviors*" above the water?"

We have to dig deeper and deploy empathy to get to what lies beneath.



EMPATHY IS A PROFESSIONAL SKILL

Type of Empathy	What It Means	Looks Like in Schools	Example Statement
Cognitive Empathy	Understanding a student's perspective or way of thinking without necessarily agreeing with the behavior.	Pausing to ask, *"What might be driving this behavior?"* before responding.	*"Help me understand what happened."*
Emotional (Affective) Empathy	Recognizing and validating a student's emotions while remaining emotionally grounded yourself.	Acknowledging feelings before addressing behavior or problem-solving.	*"It looks like you're really frustrated right now."*
Compassionate Empathy	Understanding a student's experience and taking supportive action to help them succeed.	Providing support, accommodations, or connecting the student with resources while maintaining expectations.	*"Let's figure out the next step together so you can be successful."*
Boundaried (Professional) Empathy	Caring deeply while maintaining healthy professional boundaries and recognizing what is within your role and control.	Listening, supporting, and referring when appropriate without taking responsibility for solving every problem.	*"I care about what you're going through, and I'm going to connect you with someone who can help."*

Key Takeaway for the Slide

> **Trauma-informed empathy is not excusing behavior—it is understanding the need behind the behavior so we can respond in ways that build safety, connection, and accountability.**

Root Cause → Empathy The Human Perspective

What's going on inside of us? A framework of how we see situations and apply empathy as a professional skill. What shapes our perspective?

- ★ Empathy through an Internal Family Systems (IFS) lens shifts how we understand emotional connection.
- ★ Rather than being a single trait, empathy is viewed as a dynamic interplay of parts.
- ★ It involves engaging the core **Self** to hold space for others without losing emotional boundaries, blending, or experiencing "empathy fatigue".

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Walking in Their Shoes Activity

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What Is Intergenerational Trauma

- Intergenerational trauma occurs when the effects of trauma are passed from one generation to the next.
- Trauma may influence parenting, attachment, communication, emotional regulation, and family relationships.
- The original traumatic event may have occurred years earlier, but its effects can continue within the family system.
- Trauma can be passed down through learned behaviors, family beliefs, unresolved grief, chronic stress, and patterns of survival.
- Families may inherit survival patterns even when they do not know where those patterns began.

How Trauma Is Passed Between Generations

- Children learn how to understand safety, relationships, and emotions from their caregivers.
- A caregiver with unresolved trauma may be more reactive, emotionally unavailable, overly protective, or inconsistent.
- Family members may avoid discussing painful experiences, creating secrecy or confusion.
- Harmful coping strategies, such as substance use, aggression, emotional withdrawal, or unsafe relationships, may become normalized.
- Chronic poverty, discrimination, community violence, and limited access to support can reinforce traumatic patterns.
- Trauma is not inherited because a parent does not care; it is often transmitted through adaptations that once helped the parent survive.

The Impact on Parenting

- Parents affected by unresolved trauma may experience:
- Difficulty trusting professionals, family members, or service providers.
- Strong reactions to correction, authority, rejection, or perceived criticism.
- Difficulty recognizing and responding to a child's emotional needs.
- Challenges with consistency, structure, boundaries, and follow-through.
- Emotional shutdown, avoidance, anger, or impulsive decision-making.
- Fear that asking for help will lead to judgment, punishment, or loss.
- A parent's behavior may reflect fear and survival rather than a lack of love or concern.

The Impact on Children:

Children living within intergenerational trauma may:

- Remain constantly alert for danger.
- Struggle to regulate emotions and behavior.
- Have difficulty trusting adults or forming secure attachments.
- Experience problems with attention, learning, memory, and decision-making.
- Believe that conflict, instability, or emotional disconnection is normal.
- Develop survival behaviors such as aggression, withdrawal, people-pleasing, controlling behavior, or emotional numbness.
- Many challenging behaviors are protective responses developed in environments that did not feel safe.

Breaking the Cycle

Intergenerational trauma can be interrupted through:

- Safe, stable, and nurturing relationships.
- Trauma-informed mental health treatment.
- Consistent routines and predictable expectations.
- Parenting education that builds skills without shame.
- Opportunities to process grief, trauma, and family history.
- Supportive relationships with professionals who demonstrate patience, honesty, and respect.
- Strengthening cultural, family, spiritual, and community connections.
- Healing begins when families experience safety, connection, choice, and support.

Moving From Judgment to Understanding

Instead of asking:

“Why won’t this parent cooperate?”

“Why do they keep making the same choices?”

“Why don’t they just leave the unsafe relationship?”

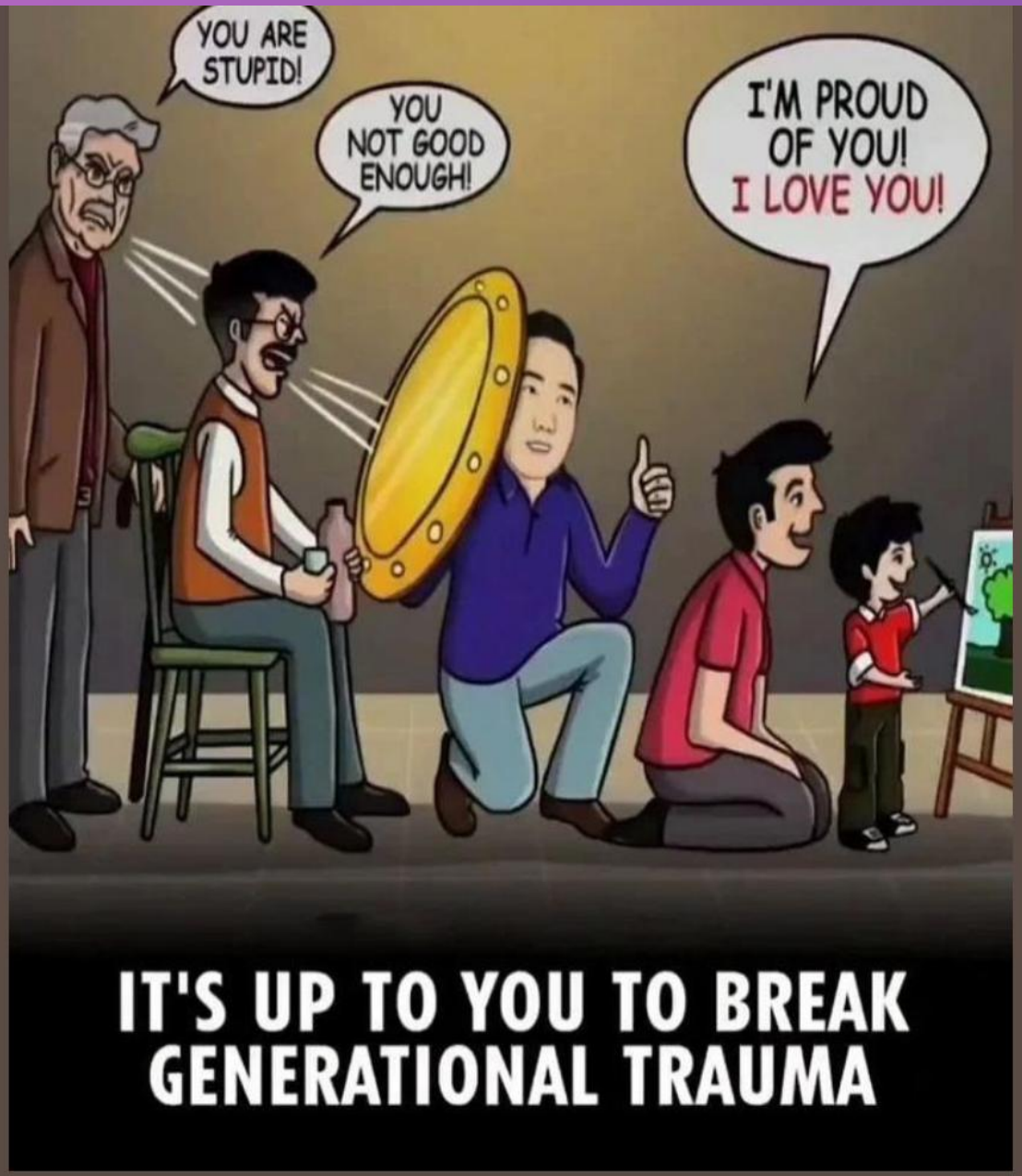
“Why can’t they put their child first?”

Consider asking:

- “What has this parent survived?”
- “What feels unsafe about this situation?”
- “What survival response may be occurring?”
- “What barriers are making change difficult?”
- “What support would help this family feel safer and more capable?”

Practical Strategies

- Build trust
- Use motivational interviewing
- Reduce shame
- Increase predictability
- Teach regulation
- Repair relationships
- Celebrate small wins
- Recognize grief
- Maintain accountability
- Healing-centered engagement
- Protective relationships
- Co-regulation
- Parent coaching
- Reflective functioning
- Executive functioning support
- Trauma therapy
- Substance use treatment
- Peer support
- Culture
- Hope



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