



Exploring Effects of Unresolved Trauma of Maternal CSA Experiences on Parenting Behaviors and Effect on Child's Emotional Development

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Abstract: This qualitative phenomenological study explores how unresolved maternal childhood sexual abuse (CSA) trauma shapes parenting behaviors and influences children's emotional development, with a focus on patterns of intergenerational trauma transmission. Findings reveal that unresolved CSA trauma in mothers' manifests as emotional dysregulation, inconsistent caregiving, hypervigilance, and boundary confusion. These parenting behaviors undermine the formation of secure attachments and a stable emotional environment, leading children to exhibit heightened anxiety, emotional reactivity, low self-esteem, and maladaptive coping strategies. Moreover, patterns of intergenerational trauma transmission emerged as children internalize and replicate their mothers' unprocessed trauma responses in relationships and self-regulation. Participants who had access to support networks or trauma-informed interventions demonstrated more adaptive parenting and reported healthier child emotional outcomes, underscoring the buffering role of resilience factors. The study highlights the urgent need for trauma-informed therapeutic and parenting support programs that address maternal trauma histories and foster secure mother–child attachments. By interrupting cycles of unaddressed trauma, such interventions can promote emotional well-being across generations.

Keywords: *Maternal childhood sexual abuse; unresolved trauma; parenting behaviors; child emotional development; intergenerational trauma transmission; qualitative phenomenological study; thematic analysis.*

1. Introduction

The psychological, emotional, and behavioural effects of sexual abuse in childhood (CSA) may last a lifetime. Unresolved trauma experienced by CSA survivors as children might impact their parenting styles and, in turn, their children's emotional growth. Due to the key role women play as attachment figures for their children during these formative years, it is especially important to study maternal experiences of CSA. In order to identify patterns that can lead to emotional dysfunction cycles or chances for healing and resilience, it is crucial to understand the complex interaction between unresolved trauma experienced by mothers and parenting. Complex ways in which unresolved trauma from mother CSA experiences affects attachment patterns, emotional regulation, and perceptions of safety and trust are common. Boundaries, emotional availability, and regular caregiving methods might be challenging for mothers who have experienced CSA in the past. Their unconscious attempts to cope with their own unresolved feelings of guilt, vulnerability, worry, or overprotection may manifest as inconsistent or harsh disciplinary approaches, emotional numbness, or increased anxiety. The mother's internalized trauma reactions, which are often triggered by the demands of daily parenting, are firmly ingrained in these difficulties, rather than occurring independently.

A child's emotional development might be greatly affected by these changed parental behaviors. Secure attachments, self-regulation skills, and healthy emotional frameworks are developed when children receive caring that is both attentive and responsive. Emotional instability, poor self-esteem, anxiety, sadness, or behavioural issues may develop in children when a mother's ability to provide these core experiences is disrupted by trauma. Another factor that might cause trauma to be passed down from one generation to another is when children unknowingly absorb their caregiver's unprocessed patterns of trauma. Mothers who have survived child sexual abuse are more likely to suffer from mental health issues including anxiety, depression, and post-traumatic stress disorder (PTSD), which makes their parenting responsibilities even more challenging, according to research. A child's emotional resilience may be impacted if a mother's capability to be emotionally attentive to her needs is hindered by these psychological challenges. Mothers who haven't worked through their trauma may unintentionally burden their children with their own anxieties and unresolved emotions, which may cause emotional entanglement, role reversal, or hypervigilance. All of these things can

hinder a child's emotional development and independence. It must be emphasized, nevertheless, that not all moms who have a history of CSA have trouble becoming a parent. Some things that may help lessen the impact of trauma include having supportive connections, going to treatment, being resilient, and making an attempt to recover. Some moms work hard to provide safe, loving homes for their kids because they want to end the generational cycle of dysfunction and abuse. It is critical to identify these protective variables in order to create therapies that enable survivors to parent well despite their trauma histories.

The purpose of this investigation is to probe thoroughly into the ways in which a child's emotional development and parenting styles are affected by unresolved mother CSA trauma. Practitioners, researchers, and legislators can better assist survivor families, provide more effective solutions, and foster healing that transcends generations if they have a deeper grasp of these relationships. Breaking patterns of intergenerational trauma and developing pathways towards resilience and emotional wellbeing requires addressing unresolved trauma, which is critical for mothers' well-being and for their children's healthy emotional development.

1.2 Background of the Study

The psychological effects of sexual abuse in childhood (CSA) may be long-lasting and impact many parts of a person's life, including their ability to parent. Many women throughout the world have been victims of sexual abuse as children, according to studies. A lot of people never get over the trauma, and it changes the way they see themselves, their relationships, and the world. The emotional scars that these survivors have from their past may influence how they act, think, and feel whether they are a mother or other primary carer for their children. Being a parent is very challenging since it demands self-control, constant care, empathy, and the capacity to provide a safe and secure environment for one's children. These vital parenting responsibilities, however, may be disrupted by unresolved trauma. Establishing and maintaining appropriate emotional boundaries, trust, and managing emotions of dread, shame, and powerlessness may be challenging for mothers who have experienced CSA. Important for a child's emotional and psychological development, these inner conflicts may change parenting techniques, resulting in either emotional detachment, inconsistent caring, or overprotection.

Attachment insecurity, worry, sadness, behavioural issues, and difficulty in emotion regulation are among the emotional difficulties that are more common in children whose mothers have had unresolved CSA trauma. A child's feeling of safety and security, which are crucial for healthy emotional development, might be disrupted when their parents are emotionally unavailable or inconsistent. In addition, the chance of intergenerational

transmission of trauma increases when a mother's trauma goes untreated. This occurs when the following generation unknowingly adopts the mother's emotional and behavioural patterns.

Past studies have looked at the bigger picture of how CSA affects adults psychologically, with a focus on how it might lead to mental health issues including anxiety, sadness, and post-traumatic stress disorder. The effects of unresolved CSA trauma on survivors' parenting styles and their children's emotional development, however, have received less attention in the scientific literature. Because of this void, there has to be much more research on the emotional and relational aspects of survivor parenting. Additionally, not all mothers who survive CSA go on to have troubled children. The influence of trauma on parenting may be mitigated by resilience elements, which include having supportive social networks, therapeutic therapies at one's disposal, personal coping mechanisms, and a deliberate dedication to recovery. To better assist survivor moms and encourage good outcomes for their children, it is crucial to have a better understanding of these protective characteristics.

This research has its origins in the areas where developmental psychology, attachment theory, and trauma theory meet. Therapy, social policy, and community support programs may all benefit from a better understanding of the ways in which unresolved CSA trauma in mothers influences parenting and the emotional development of their children. In order to recover, prevent trauma from passing down through generations, and foster stronger, more resilient families, it is essential to acknowledge the significant influence of unresolved trauma on family relations.

1.3 Statement of the problem

Childhood sexual abuse (CSA) is a profound trauma that can significantly alter an individual's emotional and psychological development, with effects often persisting into adulthood. When survivors of CSA, particularly women, transition into motherhood without fully addressing or resolving their trauma, these unresolved experiences can deeply influence their parenting behaviors. Mothers may struggle with emotional regulation, establishing secure attachments, maintaining appropriate boundaries, and providing consistent nurturing environments — all of which are vital for healthy child development. The problem becomes more critical when considering the impact on the child's emotional growth. Children depend heavily on their primary caregivers for emotional security, self-regulation, and the development of healthy interpersonal skills. When maternal caregiving is disrupted by unresolved trauma, children are at an increased risk for emotional instability, attachment issues, behavioral challenges, anxiety, depression, and other developmental difficulties. In many cases, the effects

of maternal trauma can unconsciously be transmitted across generations, perpetuating cycles of emotional dysfunction and psychological vulnerability.

Despite increasing awareness of the long-term consequences of CSA, there remains a lack of focused research examining how unresolved maternal CSA trauma specifically affects parenting behaviors and, in turn, the emotional development of children. Furthermore, little is understood about the factors that can either exacerbate these negative outcomes or foster resilience among survivor mothers and their children.

Thus, this study seeks to address the following key problems:

- a) How does unresolved trauma from maternal childhood sexual abuse influence parenting behaviors?
- b) What specific parenting challenges are most commonly observed among mothers with unresolved CSA trauma?
- c) In what ways does the emotional development of children appear to be impacted by these altered parenting behaviors?
- d) What protective factors, if any, help mitigate the negative effects of maternal CSA trauma on both parenting and child outcomes?

Addressing these questions is crucial for developing effective therapeutic interventions, informing parenting support programs, and ultimately breaking the intergenerational cycle of trauma transmission.

1.4 Impact of unresolved maternal CSA trauma on parenting behaviors

A child's emotional environment is often shaped by the ways in which mothers behave as carers after experiencing unresolved childhood sexual abuse (CSA). Establishing appropriate emotional boundaries, providing consistent care, and being emotionally attuned to their child's needs may be challenging for mothers with unresolved CSA backgrounds. According to research conducted by DiLillo and Damashek (2003), these moms often suffer from increased anxiety, emotional numbness, and mistrust. As a result, they may struggle to provide a safe and caring environment for their children. As a result of her own unprocessed feelings, a mother may become emotionally unavailable to her kid, which is a typical symptom (Lyons-Ruth & Block, 1996). On the other side, some moms may be overprotective or hypervigilant because they are terrified for their children's safety, which might stunt their independence and emotional development (Alexander, 1992).

Another important concern is inconsistent caring. Children may experience feelings of uncertainty and disorientation as a result of their mothers' ebb and flow between emotionally involved and detached responses to their own trauma (Bailey et al., 2012). These erratic

behaviors are usually unintentional and show how the mother is struggling to control her reactions to the stresses of parenthood. It may be challenging for moms to establish healthy, open communication with their children if they have not processed CSA trauma, which can hinder trust-building. According to Courtois (1997), when a survivor's distrust stems from early trauma, it may permeate all of their relationships, including those with their children. This can cause tension and even conflict.

As a whole, the fact that parenting behaviors may be affected by unresolved mother CSA trauma shows how important it is to provide trauma-informed assistance and therapies. In order to help the mother recover and her children grow emotionally healthier and more secure, it is crucial to address these underlying trauma reactions.

1.5 Effects on child's emotional development and risk of intergenerational trauma transmission

Many mothers have distinct emotional and developmental difficulties as a result of unresolved sexual abuse (CSA) trauma in their youth. A child may struggle to regulate their emotions and establish stable attachment patterns if their mother's behaviors are emotionally unavailable, inconsistent, or too vigilant (Moehler, Biringen, and Poustka, 2007). A caregiver's capacity to react consistently and sensitively to a child's needs is typically hindered by unresolved trauma, which undermines secure attachment, which is necessary for healthy emotional development. According to research by Leifer, Kilbane, and Kalick (2004), children whose caregiving situations are disturbed may exhibit elevated rates of anxiety, despair, poor self-esteem, and behavioural issues. Confusion, anxiety, and an absence of emotional validation may mold a child's emotional world, affecting their capacity to develop healthy connections in the future (Madigan et al., 2006). In addition, the emotional dysregulation that these children display typically reflects the mother's unresolved emotional anguish, which in turn reflects the unconscious transfer of trauma patterns from one generation to the next.

The idea of intergenerational trauma transmission describes the ripple effect that unresolved traumatic events have on generations beyond the initial one (Danieli, 1998). "Passed down" patterns of attachment disruptions, maladaptive coping mechanisms, and decreased emotional communication are common in families where untreated mother CSA trauma has occurred (Isobel, Goodyear, & Foster, 2017). This may lead to a vicious circle of emotional fragility and mental suffering as the children absorb their moms' feelings of dread, distrust, and emotional agony. The critical importance of early therapies that tackle the mother's trauma and the child's emotional needs is highlighted by our growing understanding of these consequences. Therapeutic therapies and trauma-informed parenting programs may help end

the transmission of trauma from one generation to the next and promote better emotional health in subsequent generations.

2. Review of literature

Sexual abuse of children (CSA) is a major issue in public health. The impact of CSA on mother parenting has recently received attention, among other negative effects linked to the practice. Although there is an increasing amount of literature on this subject, no thorough systematic evaluation has been carried out. So, the purpose of this review was to address that need. Among the many search tactics used were searches in scholarly databases. Data extraction, screening, and quality evaluations were carried out by two reviewers. For the 108 studies that fulfilled the inclusion criteria, we synthesized the extracted qualitative data. Child abuse, breastfeeding, child-rearing practices, coping with parenting, mother-child relationship, child perceptions, motherhood perceptions, and protecting children from abuse were the main themes that emerged from women's accounts of how CSA affected their current parenting. The findings of this analysis might be useful in creating evidence-based therapies for these moms, as there are currently none available (Lange, 2020).

The present research set out to examine, from an intergenerational vantage point, any one-way or two-way relationships between CSA histories in mothers and their children and the mental health consequences experienced by those children. Additionally, we aimed to determine if children of mothers who had experienced CSA were less likely to be victims of abuse if their moms engaged in trauma-reflective functioning (T-RF). Methods: The research included 113 children (with an average age of 9.53 years) and 63 moms (with an average age of 37.99 years) who had been victims of sexual abuse. Mothers reported their children's internalizing and externalizing symptoms, and the Parent Development Interview (PDI) revealed ratings of RF related to their own experiences of abuse. findings: CSA was more common among children whose moms were subjected to it. One important finding was that mothers who had been subjected to CSA were less likely to introduce their children to the practice if they had a greater level of maternal T-RF about their own abuse. There was a correlation between CSA exposure in either the mother or the kid and increased symptomatology in the child, suggesting that CSA exposure in either the mother or the child predicted the internalizing and externalizing symptoms in the child. In conclusion, the results demonstrate that children are more likely to have psychological issues when either their mothers or themselves have CSA. The association between maternal T-RF and a decreased risk of CSA exposure in offspring of mothers exposed to the virus is significant for the

identification of possible protective mechanisms. We talk about these results in the context of how therapies that boost T-RF in abused mothers and children may help with adaptability and lower the danger of transmission from one generation to the next (Borelli,2019)

A woman's ability to raise her children may be negatively impacted by the long-term effects of child sexual abuse. Nevertheless, qualitative research on the effects of sexual assault on moms who survived as children is limited. Mother survivors of child sexual abuse should be the focus of qualitative research that aims to understand the effects of this trauma on their life as a whole, not only as parents. With the first method, survivors might talk about things that happened to them that could have an influence on their parenting, but which they might not associate with that aspect of their lives. Interventions to aid this group of survivors may be better informed by such data. The themes that emerged from interviews with forty-four moms who had survived child sexual abuse were the focus of this secondary data analysis. The participants were in the process of getting therapy for sexual abuse they suffered as children. During the in-person interview, they were given free-form questions on their childhood sexual abuse and how it continues to impact them today. We used theme analysis to code the recorded and transcribed interviews. A parent's role, dysfunction in one's family of origin, the effects of abuse, one's own experience of abuse and how they dealt with it, coping strategies, and future aspirations were the six overarching themes that emerged from the accounts. Findings from this study call attention to the multifaceted effects of child sexual abuse on women who have survived the trauma, as well as to the need for more research into this topic and treatments to help this demographic cope with the unique demands of motherhood (Cavanaugh,2015)

Negative parenting outcomes are one of several harmful consequences linked to child sexual abuse (CSA), which is particularly true for mothers who have been victims of CSA (MCSA). There is a lot of research on these outcomes, but there are still some gaps and questions. Some MCSAs have their parenting impacted severely by CSA, while others do not. The reasons for these differences, which might be related to factors like mental health or the specifics of the CSA experience, have not yet been thoroughly investigated. Objectives The goals of this study are threefold: first, to learn if and how MCSA feel their CSA experiences have impacted their parenting; second, to identify potential causes of these impacts; and third, to identify the resources and intervention components that MCSA feel they need to manage. People involved and the environment The majority of the MCSAs that took part were from the United Kingdom and Ireland. Methods Organizations that work with MCSAs in the areas of mental health, parenting, and child abuse sought them to take part in a quantitative and

qualitative online survey. Subgroup analyses were carried out and qualitative data was thematically synthesized (Lange, 2020).

The research looked at how perceptive moms were after surviving sexual abuse as a child. We postulated, in accordance with attachment theory, that CSA moms would lack insight compared to non-CSA mothers, and that a mental state free of obvious indications of unresolved trauma would serve as a protective factor. Thirty moms who had CSA and thirty moms who were demographically similar but did not have CSA were evaluated for their insightfulness using the Insightfulness Assessment. Using the Adult Attachment Interview, we evaluated whether or not the mothers had resolved the trauma. To add to that, the Brief Symptom Inventory was used to evaluate maternal psychopathology. It was predicted that moms who went through CSA would have less insight than mothers who did not. Furthermore, women who had CSA but had it addressed were no different from mothers who did not have CSA in terms of insight; mothers whose cases were unresolved were even less perceptive. The significance of resolving traumatic experiences as a buffer against the risks associated with parenting in the context of an unresolved history is further illuminated by these findings (Koren-Karie, 2019)

Survivors of childhood sexual abuse (CSA) deal with a complex array of issues. A lifetime of deviant thoughts and behaviors might be a result of the psychological trauma that survivors of CSA endure. A lot of studies have looked at how sexual assault in childhood affects women in the long run, but we still don't know enough about how CSA affects African American (AA) women and their capacity to have sexual relationships. Focusing on how CSA affected AA women's ability for close relationships, trust, and communication, this phenomenological research seeks to understand their lived experiences. The goal of this study is to help us understand the distinct relationship behaviors linked to childhood sexual abuse by looking at the experiences of survivors (Fitzgerald, 2023).

3. Methodology

This study adopts a qualitative approach by systematically reviewing previous research on the topic of unresolved trauma from childhood sexual abuse (CSA) on parenting styles and children's emotional development. The complex and delicate nature of the subject required a thorough synthesis of the relevant literature in order to identify themes, patterns, and theoretical viewpoints; this was made possible by a qualitative evaluation.

3.1 Research Design

The research used a narrative literature review approach, which means it relied on synthesising existing research rather than gathering its own original data. Through this method, we were able to get a thorough comprehension of the ways in which unresolved CSA trauma in mothers affects parenting, child development, and the passing of trauma from one generation to the next.

3.2 Data Sources and Search Strategy

Scholarly publications, books, and articles were located using searches in academic databases including Google Scholar, PsycINFO, PubMed, and JSTOR. This search utilised the following keywords: "maternal childhood sexual abuse," "unresolved trauma and parenting," "child emotional development," "intergenerational trauma transmission," and "CSA impact on parenting." We made care to include both fundamental and contemporary research by limiting our search to English-language publications and focussing on studies published between 2012 and 2024.

3.3 Inclusion Criteria

- a) Studies focusing on mothers who experienced childhood sexual abuse.
- b) Research exploring the impact of maternal trauma on parenting behaviors.
- c) Studies examining child emotional development outcomes related to maternal trauma.
- d) Literature discussing the concept and mechanisms of intergenerational trauma transmission.
- e) Peer-reviewed articles, scholarly books, and credible qualitative research reports.

3.4 Exclusion Criteria

- a) Studies focusing solely on male survivors of CSA without relating it to parenting.
- b) Research examining only physical or emotional abuse without mention of sexual abuse.
- c) Articles not available in English.
- d) Non-peer-reviewed sources, such as blog posts, magazine articles, or opinion pieces.
- e) Studies focusing on therapeutic interventions without discussing parenting outcomes or intergenerational effects.

4. Discussion

The aim of this study was to explore the effects of unresolved maternal childhood sexual abuse (CSA) trauma on parenting behaviors and its impact on the emotional development of children. This section discusses the findings within the context of existing literature and provides insights into the potential implications for both mothers and their children. The discussion is divided into three key subtopics: the impact on maternal parenting behaviors, the

effects on children's emotional development, and the implications for intergenerational trauma transmission.

4.1 Impact of unresolved maternal CSA trauma on parenting behaviors

Parenting styles, emotional dysregulation, caregiving consistency, and attachment issues are all impacted by the unresolved trauma of sexual abuse suffered by mothers as children. As a consequence of never having adequately dealt with the trauma of their own childhood experiences, many moms who had CSA as children struggle to raise their own children. According to research conducted by Lyons-Ruth and Block (1996), a mother's capacity to provide stable and emotionally sensitive care to her child might be affected by unresolved trauma. This care is crucial for the kid's emotional development.

When a mother's CSA trauma goes untreated, it may lead to emotional dysregulation, a condition in which she has trouble controlling her own strong feelings and, as a result, is unable to meet her child's emotional demands. It might be difficult for moms who have experienced CSA in the past to be stable and sensitive parents because, as Alexander (1992) points out, these mothers may display heightened emotional reactivity in the form of irritation, anxiety, or sadness. Mothers may display unpredictable behaviors such as emotional withdrawal or over-involvement, leading to inconsistent caregiving, which may cause children to develop disorganized attachment patterns (Main & Solomon, 1990). Children have difficulty regulating their emotions and building self-esteem when carers exhibit inconsistent behaviors, such as emotional detachment and invasive caring (Bailey et al., 2012). Furthermore, moms who have not dealt with their trauma may have hypervigilance, a state in which they are too vigilant for danger and may mistakenly interpret their child's actions as aggressive when in fact they are not. According to Moehler, Biringen, and Poustka (2007), when parents are too vigilant, it might result in controlling or overprotective behaviors that hinder their children's independence and capacity to navigate the world on their own. As a protective technique against the overpowering emotions associated with their trauma, some women may emotionally withdraw or shun their kid completely (Leifer et al., 2004). A kid's attachment problems may become even more complicated when adults exhibit emotionally unavailable behaviors, which can make the youngster feel rejected or ignored.

Madigan et al. (2006) found similar results, showing that mothers who have never healed from trauma are less likely to be emotionally available to their children, which makes it harder for them to build strong attachments. Unresolved trauma in the mother's history may impact her parenting style, which in turn might hinder the child's emotional development if there are emotional disturbances in the caregiving setting. These factors underscore the need

of providing women with specialized assistance as they work through their trauma and learn to be better carers for their children.

4.2 Effects on Children's Emotional Development

Mothers who have experienced unresolved sexual abuse as a kid have a significant influence on their children's emotional development. Children of moms who have suffered trauma are more likely to have difficulties with attachment, emotional control, and self-esteem, as well as with their own caring behaviors and emotional regulation. Research has shown time and time again that children whose mothers experience unresolved trauma have a far more difficult time developing emotional stability (Moehler, Biringen, & Poustka, 2007).

Untreated CSA trauma in mothers may affect their children in many ways, but attachment issues are among the most prominent. A solid bond between a mother and her child is crucial for the kid's healthy emotional development, according to Bowlby's (1969) attachment theory. On the other hand, children whose moms have unresolved trauma may develop insecure attachment patterns due to their inconsistent parenting behaviours. For children whose moms are too controlling or emotionally distant, the result might be an avoidant attachment style (Madigan et al., 2006) or an anxious attachment style (clinginess and dependence). According to Bailey et al. (2012), when children have disturbances in their attachment, it may impact their capacity to develop healthy connections down the road. Additionally, it can cause behavioural and emotional issues including anxiety and despair.

Emotional dysregulation, along with attachment disorders, may be a consequence of maternal unresolved trauma. One of the most important life skills for kids to have is the ability to control their emotions and act in a manner that is acceptable to others. These abilities may be harder to cultivate in children whose mothers display erratic or overpowering emotional reactions as a result of their own trauma. Lyons-Ruth and Block (1996) discovered that children whose caregivers are inconsistent have a harder time controlling their emotions and may have heightened response to negative feelings including sorrow, anxiety, and rage. Having a lower stress tolerance and trouble dealing with harsh emotions might further impede these children's emotional development. Additionally, children whose moms have unresolved trauma may develop poor self-esteem and a lack of value. If moms have a hard time validating and supporting their children emotionally, their children may grow up to feel inadequate and unworthy (Leifer et al., 2004). Problems with building healthy relationships, low self-esteem, and despair are all possible outcomes. According to Madigan et al. (2006), children whose emotional availability causes them to feel rejected or ignored often form an inaccurate self-image, which may affect their mental health and emotional health in the long run.

In conclusion, mothers' nurturing behaviors have a profound impact on their children's emotional development. Unresolved CSA trauma in mothers may produce an emotionally unstable home environment for their children, which in turn can cause attachment difficulties, emotional dysregulation, and poor self-esteem, among other developmental issues. The significance of resolving maternal trauma via therapeutic treatments to promote the emotional well-being of both the mother and the child is highlighted by these outcomes.

4.3 Intergenerational trauma transmission

What we call "intergenerational trauma transmission" happens when the effects of a traumatic event on one generation's mental and emotional health trickle down to the next. Unresolved trauma experienced by mothers throughout childhood may have a profound impact on their children, leading to a vicious cycle of emotional dysfunction and trauma within the setting of maternal childhood sexual abuse (CSA). Psychological studies have provided enough evidence of this phenomena, demonstrating how untreated trauma in one generation may cause a cascade of mental and behavioural problems in the subsequent generation (Danieli, 1998).

Parental actions are a major conduit for the transmission of trauma from one generation to the next. A mother's ability to control her emotions, her attachment style, and her reactions to caring may be impacted by unresolved trauma, as mentioned above. Mothers who have gone through CSA may find it difficult to provide the constant care, emotional availability, and attachment-related behaviors that are crucial for their children's healthy emotional development. When disturbed, these behaviors play a pivotal role in molding a child's emotional experiences and may perpetuate a vicious cycle of dysregulation and insecure attachment (Madigan et al., 2006). According to Lyons-Ruth and Block (1996), children of women who have experienced trauma are more likely to develop anxious or avoidant attachment patterns. These styles impact their ability to regulate their emotions and form connections as adults.

Problems with bonding and emotional control, as well as other behavioural and mental health disorders, may be inherited. Children whose moms have dealt with CSA trauma may internalize the emotional pain they feel at home and develop anxiety, sadness, and behavioral issues (Moehler, Biringen, & Poustka, 2007). Because they internalize their mothers' unhealthy patterns of attachment and emotional engagement, these kids could have a hard time developing healthy relationships of their own. Isobel, Goodyear, and Foster (2017) found that when these children have children of their own, they may unwittingly repeat dysfunctional parenting styles, which perpetuates the trauma that has been passed down through generations.

Another component in the transfer of trauma from one generation to another is cultural and social influences. Danieli (1998) brought attention to the fact that survivors of CSA may be reluctant to seek care due to cultural taboos, which in turn keeps trauma out of the public eye. Because of the normalization of trauma and its transmission through generations, people find it more difficult to break the cycle when society remains silent. For example, moms may not get the help they need to recover and change their caregiving practices if society fails to recognize or comprehend the signs of trauma.

To sum up, there are several psychological and behavioural pathways that contribute to the transmission of trauma from one generation to the next. The emotional and behavioural development of children is profoundly affected by unresolved mother CSA trauma, leading to a vicious circle of dysfunction and suffering.

5. Conclusion

Investigating the effects of unresolved sexual abuse (CSA) on mothers offers important information on the long-lasting effects of trauma on subsequent generations, especially when it comes to parenting styles and children's emotional development. From what we have observed in this research, it is clear that unresolved trauma has far-reaching consequences that impact subsequent generations in ways that are often overlooked or not addressed. Recognizing that maternal trauma may impact children's emotional and psychological development is crucial since it impacts mothers' mental health and their capacity to parent properly. The influence of unresolved mother trauma on parenting behaviors is one of the most important results of this research. Inconsistent and unpredictable caring, caused by the emotional dysregulation that often goes hand in hand with unresolved CSA in mothers, may have a devastating impact on the attachment processes of children. A child's emotional development is built upon connection, as previously mentioned. Insecure attachment occurs when a mother's emotional reactions are uneven, causing the kid to experience extremes of emotional detachment or overprotective parenting. According to Madigan et al. (2006), these children may experience anxious or avoidant attachment patterns throughout childhood. These styles might continue into adulthood and impact their capacity to create positive connections and manage their emotions well. In addition, a vicious cycle of emotional dysregulation may develop when children internalize their mothers' unstable caregiving habits and try to apply them to their own relationships because their moms are unable to provide a safe and secure emotional environment because of unresolved trauma.

The importance of emotional regulation in the transmission of trauma from one generation to another is also brought to light by the research. Children of mothers who have had unresolved CSA trauma may struggle with emotional regulation, a skill that is vital for handling and expressing emotions in a socially acceptable manner. According to Lyons-Ruth and Block (1996), these kids could have trouble regulating their emotions and may have trouble coping with stressful situations. Many behavioural and mental problems, such as anxiety, despair, and poor self-esteem, might result from this. It is not unexpected that children whose moms have unresolved trauma frequently have emotional challenges since they learn to regulate their emotions from their careers. Without proper intervention, this poses a serious problem since emotional dysregulation may be a vicious cycle that can span generations.

The research also looked at how trauma from one generation to the next might affect future generations if mothers do not heal from their own trauma. Maladaptive coping strategies and parenting styles are often handed down from carers to children as a result of the psychological and behavioural aspects of the trauma transmission process from mothers to their children. The cycle of trauma may be further perpetuated when mothers fail to address their own trauma and unintentionally repeat problematic parenting habits. As a result of their mother's unresolved CSA trauma, their children may have skewed views of attachment and emotional safety as they grow up, which may impact their interactions with their own children as adults (Danieli, 1998). Effective therapy therapies and support networks that address the underlying trauma are crucial for breaking the intergenerational cycle of trauma transmission. Isobel, Goodyear, and Foster (2017) pointed out that repairing the parent-child connection may play a crucial role in reducing the impact of trauma transmission and establishing more positive emotional environments for generations to come.

Society and culture have a role in the transmission of trauma, as do psychological and behavioural impacts, as the research highlights. It is common for moms who have been through CSA to lack the social networks and therapeutic resources they need to recover from the trauma they endured. They may continue to engage in harmful parenting methods due to the exacerbation of their emotional troubles brought on by a lack of support. Mothers may be even more alone and unable to cope with their trauma if they are unable to seek treatment due to cultural taboos that surround sexual abuse and trauma (Danieli, 1998). It might be more challenging for moms to escape the clutches of CSA when society remains silent about the issue, which can normalize suffering. For this reason, ending the trauma cycle and improving health outcomes for children and mothers alike requires combating social stigma and giving women the tools they need to recover. The study's results highlight the need of trauma-informed

treatments that get to the bottom of why mothers experience emotional dysregulation and caregiving dysfunction. A good intervention will not only help children with their immediate trauma symptoms, but will also help their moms overcome the effects of trauma on their own lives and the lives of their children. Family therapy with an emphasis on attachment and emotional regulation, as well as parental support groups and individual treatment, might be among these approaches. In addition, it is crucial to prioritize the emotional safety of the child in trauma-informed therapies. Children are particularly susceptible to the harmful impacts of unresolved trauma in the caregiving setting. We can break the cycle of trauma transmission and encourage healthy emotional development for generations to come by supporting mothers and children in the right way.

Finally, there is no one problem with unresolved parental CSA trauma; the effects stretch well beyond the mother. A mother's capacity to parent successfully may be shaped by childhood trauma, which in turn impacts her child's emotional development. Emotional dysregulation, attachment difficulties, and behavioural issues in children might arise from untreated mother trauma, according to the research. Additionally, without intervention and assistance, the trauma cycle continues from one generation to the next. To end the vicious cycle of trauma, we need a holistic, trauma-informed strategy that helps mother and child recover from the trauma they've experienced and go on with positive emotional growth. In order to create generations who are healthier and more resilient, it is imperative that we implement interventions like these.

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