



Transgenerational transmission of stress among internally displaced persons: Empirical analysis and family psychoeducation

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◆ **Abstract.** The relevance of the issue stems from the fact that the psychological consequences of forced displacement, in particular chronic stress and intensified post-traumatic symptoms, may give rise to mechanisms of transgenerational transmission of trauma due to the psycho-emotional interdependence of family members. The aim of the study was to examine the transgenerational transmission of stress in Ukrainian families of internally displaced persons under martial law and to develop an appropriate psychoeducational programme. The hypotheses put forward on the basis of a theoretical analysis of the source base were empirically tested. A high level of stress and trauma was found among the study group (26 people, including 13 adults aged 41 to 48 and 13 children aged 10 to 11). Half of the adults who are internally displaced persons tend to assess their current life as unpredictable, and the level of post-traumatic stress symptoms in children indicates a high probability of disorder. A statistically significant positive correlation was also found between the level of stress perceived by parents and the overall level of psycho-emotional distress in their children, confirming the mechanism of transgenerational transmission of stress. The empirical data obtained and the analysis of current psychological research formed the basis for the development of an appropriate family psychoeducational programme, which aims to improve the psycho-emotional state of children by supporting parental perception of stress and family dynamics. The programme includes components aimed at raising participants' awareness of stress and stress disorders, developing coping strategies and promoting post-traumatic growth. The practical significance is represented

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in the development of a family psychoeducational programme that combines the principles of working with the negative psychological consequences of war and the opportunities for post-traumatic growth in wartime conditions. The results of the study can be used to create programmes of social and psychological support for families of internally displaced persons, which will contribute to the mental health of families both in Ukraine and abroad

♦ **Keywords:** family dynamics; forced displacement; children's psycho-emotional distress; parental stress; resilience; post-traumatic growth

♦ Introduction

Military conflicts increase the relevance of the problem of forced displacement of persons due to a sharp increase in the number of refugees. The psychological consequences and social stigmatisation of the term “refugee” complicate the integration and adaptation of displaced persons (Fransen & De Haas, 2022; Salim, 2024). The relevance of the problem of forced displacement of persons in Ukraine has increased since 2014, following the annexation of Crimea and the occupation of eastern territories, and has significantly worsened with the start of Russia's full-scale invasion. Millions of Ukrainians have been forced to leave their homes, seeking refuge in other regions of the country or abroad. According to V. Andriiash *et al.* (2023), more than 5 million people have been granted internally displaced person (IDP) status, i.e. those who need protection due to threats to their lives, safety and rights in frontline or occupied areas. As noted by J.C. Morganstein *et al.* (2022), in addition to the direct physical threat in frontline and relatively safe regions, the population of Ukraine is under significant psychological stress as it faces the consequences of military action, including the destruction of homes, loss of family members and disruption of social ties, which creates a high level of stress. The above factors, combined with a sense of instability and the inability to plan for the future, cause severe chronic stress that affects all family members. This leads to the accumulation of traumatic experiences and the spread of post-traumatic stress symptoms among all age groups, including children and their parents. According to national statistics, the number of patients diagnosed with post-traumatic stress disorder (PTSD) in 2023 increased almost fourfold compared to 2021, and in January-February 2024, almost as many new cases were registered as in the whole of 2021, with the disorder being recorded among all age groups and both sexes (Significant increase in PTSD cases in Ukraine..., 2024). In the parent-child system, there is a cyclical relationship between mental health, and post-traumatic stress itself can be a two-way process. This process is called “transgenerational transmission of trauma” and mediates family health (Reese *et al.*, 2022). Traumatic experiences of parents can lead to functional disorders that affect the mental health of their children. At the same time, the research by P. Hyland *et al.* (2023) emphasised that in wartime, caring for a child who already has emotional or behavioural problems increases the risks to the mental health of parents.

A. Kotsakis Ruehlmann *et al.* (2023) noted that transgenerational transmission of trauma occurs through both psychosocial and biological mechanisms. Thus, prenatal

stressful events experienced by a pregnant woman may be associated with changes in DNA methylation in newborns. These modifications underlie the manifestation of further adverse effects in children. According to the findings of G. Uwizeye *et al.* (2023), intrauterine exposure to extreme stress is associated with poorer mental health in adulthood. C.J. Mulligan *et al.* (2025) found that children who did not directly experience a traumatic event themselves may inherit altered epigenetic mechanisms. In these studies, war is viewed as a complex biopsychosocial traumatic phenomenon that affects the entire family system. Thus, psychological support should include not only individual therapy but also family-oriented practices. The studies by L. Dell'Osso *et al.* (2022) and A. Kadri *et al.* (2022) have shown that the experience of war can be understood not only as destructive, since along with PTSD there is also PTSG (post-traumatic growth), i.e. positive psychological changes, the resources of which are, for example, deepening relationships and re-evaluating life priorities. Social and psychological support is an important factor in such changes and post-traumatic personal transformations. The family, as an integral system, has built-in mechanisms for adaptation, support and recovery, but effective promotion of post-traumatic growth requires an understanding of its principles and practical aspects. Despite the confirmed transgenerational transmission of trauma in global practice, modern Ukrainian psychology needs empirically based systemic interventions aimed at stabilising and increasing the resilience of IDP families. The aim was to empirically analyse the transgenerational transmission of war-related stress in Ukrainian IDP families and to develop an appropriate psychoeducational programme aimed at increasing the resilience and well-being of these families. The aim of the study was specified through the following objectives: to conduct a theoretical analysis of the phenomenon of transgenerational transmission of stress and its characteristics caused by war in IDP families; to empirically study the correlations between adult stress and children's psycho-emotional distress; and to develop a family psychoeducational programme aimed at increasing resilience and promoting post-traumatic growth.

♦ Materials and Methods

A cross-sectional empirical study was conducted in February-March 2025 at IDP assistance centres in Kharkiv, the “Zhyvy” public organisation, and some participants took part in remote surveys using online questionnaires. The empirical sample was formed using a targeted selection

method: it included parents who are legal representatives of children and have IDP status as a result of armed aggression (aged 41 to 48), as well as their children (aged 10 to 11). A total of 26 people took part in the study, including 13 parents and 13 children. The empirical collection of results was carried out in parallel. Participants filled out questionnaires in person at IDP assistance centres and the “Zhyvy” public organisation. Respondents who joined remotely filled out the questionnaires using the online tool Google Forms. In both face-to-face and online formats, all participants completed the questionnaires independently and separately, simultaneously and individually, which minimised the mutual influence of parents and children and the bias of responses. Data collection was carried out by research psychologists, which ensured compliance with the procedure and correct communication with the participants. The empirical study was conducted in accordance with the norms and provisions of the World Medical Association’s Declaration of Helsinki (WMA, 2024). Participation in the study was voluntary, anonymous, and confidential. The conceptual hypothesis of the study was that traumatic experiences of war and forced displacement cause transgenerational transmission of stress in the family systems of Ukrainian IDP families, where high levels of parental stress negatively affect the psycho-emotional state of children. The psychodiagnostic component of the empirical study was aimed at testing the hypothesis of a positive correlation between the level of perceived stress in adult IDPs and manifestations of psycho-emotional distress in their children, in particular symptoms of intrusion and avoidance. Spearman’s rank correlation coefficient was used to test the hypotheses. The choice of this non-parametric criterion was due to the small sample size, the atypical distribution of data (skewed towards high scores), the relevance of working with ordinal scores rather than raw values, and the need to determine the presence of a monotonic relationship. Microsoft Excel was used to calculate the data obtained.

Parental perceived stress (independent variable), which records the overall emotional burden of parents as a result of the traumatic experience of IDPs, was studied using the Ukrainian version of Cohen’s Perceived Stress Scale (Veldbrekht & Tavrovetska, 2022). This version of the methodology contains ten questions about the frequency of negative thoughts and feelings that have manifested themselves in the subject over the past month, which makes it possible to diagnose the degree of subjective assessment of the current life situation as uncontrollable and unpredictable. The psychometric properties of the Scale were confirmed in wartime conditions and a high internal consistency was determined using Cronbach’s alpha ($\alpha = 0.840$). The methodology has proven construct and predictive validity, correctly distinguishing resilient individuals from vulnerable ones, and its indicator is a predictor of mental disorders. Positive correlations between the Scale and the frequency of traumatic events confirm that the psychodiagnostic tool accurately measures the specified theoretical

construct. A shortened version of the Children’s Rating Inventory of Experiences (CRIES-8) in the Ukrainian adaptation from the Children and War Foundation (n.d.) was used to assess the impact of traumatic events on children. The study indicators were presented in scales that determine intrusive symptoms as well as avoidance symptoms. The appropriateness of choosing this particular methodology was based on its suitability for the age range of the subjects (children aged 8 years and older). According to S. Perin *et al.* (2005), this particular version of the methodology has proven clinical validity, classifying 75% to 83% of respondents as having/not having a diagnosis of PTSD. This confirms its effectiveness for screening for traumatic distress in children. As an auxiliary method, an interview was conducted with each participant, which allowed to identify the event that caused stress and its time of origin.

◆ Materials and Methods

As a result of diagnostics using the Ukrainian version of Cohen’s Perceived Stress Scale, it was determined that the average score in the subgroup of parents was 26.84 points, which is close to the high level (0-13 points corresponds to a low level, 14-26 points to a moderate level, and 27-40 points to a high level). The distribution of respondents by levels of perceived stress allowed to determine that only a small number of respondents had low levels of stress according to the questionnaire. In contrast, half of the sample of adult IDPs had high levels of stress, and one-third had moderate levels (Fig. 1).

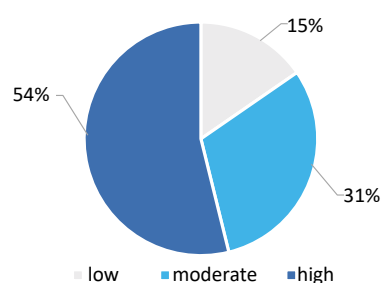


Figure 1. Distribution of adult IDPs surveyed according to the level of perceived stress (based on the Ukrainian version of Cohen’s Perceived Stress Scale)
Source: developed by the authors

Figure 1 shows that more than half of the adult sample tends to assess their current life as unpredictable, uncontrollable, and overwhelming. These results indicate a high level of subjective stress and reduced self-regulation ability, which can lead to decreased emotional regulation and increased vulnerability to psycho-emotional disorders, including anxiety, depressive symptoms, and distress. Prolonged exposure to high levels of subjective stress is also associated with cognitive impairment, reduced effectiveness of coping strategies, and depletion of adaptive resources. The results of the diagnosis of the children of the surveyed IDPs were presented in Table 1.

Table 1. Mean group scores of study participants on the subscales of the shortened version of the Child Rating Inventory of Event Severity (CRIES-8)

Level of manifestation in the subgroup	Subscale	
	Intrusion	Avoidance
Low	6.00	5.33
High	15.90	14.40

Source: developed by the authors

The overall level of post-traumatic symptoms in children is 25.92 points. This corresponds to a high probability of PTSD, since the control score on the scale is 17. The mean group profile of symptoms is 13.62 points on the Intrusion subscale and 12.31 points on the Avoidance subscale. The distribution of the subjects according to the level of PTSD manifestation showed that 77% of the child sample had a high probability of PTSD, and only 23% had a low probability. Thus, the child subgroup demonstrates pronounced traumatic symptoms. The children have experienced events that have had a significant psychological impact on them. In conversations with children, it was determined that war (in particular, the start of a full-scale

invasion), forced departure from their hometown/village, death of loved ones, separation from family, shelling, bullying in new educational institutions, etc. were identified by children as stressful events. A slightly higher level of manifestation on the Intrusion subscale compared to the Avoidance subscale may indicate repeated experiences of traumatic events, violent reactions to stimuli that remind them of these events, recurring nightmares, etc. Statistically significant correlations established using Spearman's rank correlation coefficient confirmed the association between the level of perceived stress among adult IDPs and the overall indicator of psycho-emotional distress among their children (Table 2).

Table 2. Correlation between the level of perceived stress in adult IDPs and the probability of PTSD and its symptoms in their children

	PTSD in children		
	Total score	Intrusion	Avoidance
Level of perceived stress in adult IDPs	0.70*	0.38	0.66*

Note: * $p \leq 0.05$

Source: developed by the authors

The link between the level of perceived stress in adult IDPs and the severity of avoidance symptoms in children indicates the possible influence of parental state on the child's behavioural responses, in particular on the assimilation of avoidance patterns manifested in the concealment of emotions and avoidance of discussing traumatic events. The tendency of a significant proportion of adults to perceive their current life as unpredictable and uncontrollable, as well as their elevated stress levels, may affect their behavioural responses, in particular contributing to irritability and emotional tension. Such manifestations can modify the child's behaviour: they may refrain from expressing their emotions in order not to increase tension in the family or to avoid negative reactions, which subsequently forms strategies of emotional blocking and avoidance. Thus, the symptoms are preserved because the child's psyche is unable to process the trauma, which in the long term can lead to complications in the course and duration of PTSD. At the same time, avoidance as a protective strategy can lead to a child who has experienced forced displacement seeking not only to avoid references to the traumatic event, but also to deep emotional experiences in general, as well as emotional detachment from parents and peers. The empirical results obtained are consistent with the study of children's emotional and behavioural reactions after migration by A.S. Andrade *et al.* (2023). The authors noted that chronic stress, interrelated with economic difficulties,

discrimination, loss of social contacts, and the burden of parental responsibility for the survival of children, is typical for migrant families and arises as a result of displacement, exhausting the family system. The findings of this study showed that, on the one hand, emotionally exhausted adult IDPs transmit their stress to their children, and on the other hand, the manifestation of PTSD symptoms in children leads to an increase in the level of perceived stress in adults.

Based on the analysis of the data, a family educational programme was developed, conceptually aimed at psychological influences that take into account the dependence of the reduction of a child's psycho-emotional tension on the level of parental perceived stress and family stress dynamics. Raising awareness of the peculiarities of the functioning of the psyche in crisis periods of life, in particular, the period of forced migration, is important for self-regulation of behaviour and the creation of a supportive environment (Kostruba & Kostruba, 2024). According to I.S. Todorova & D.V. Bulchenko (2024), obtaining understandable, professional, reliable information about mental health, ways to develop coping strategies, building relationships, etc. is one of the ways to improve well-being and relationships. In times of crisis, when the available information may not always be verified and a person's level of self-criticism may decrease under the influence of stress, it is important to include psychoeducation in support programmes for IDPs. The family psychoeducational programme is a comprehensive

systemic intervention consisting of five thematic modules focused on working with parents and the parent-child dyad. Module 1 aims to inform participants about the nature of stress and the consequences of traumatic events, their impact on the psycho-emotional state and functioning of the family. Module 2 involves learning emotional self-regulation skills and stabilising the psycho-emotional state in stressful situations. Module 3 focuses on developing adaptive coping strategies that contribute to the effective overcoming of stress factors. Module 4 includes rebuilding family communication, strengthening mutual support and social support as protective factors. Module 5 is aimed at activating the internal and external resources of the family and promoting the post-traumatic growth of its members. The programme is not intended to replace psychotherapeutic intervention, but to increase its effectiveness by providing parents with knowledge and tools to support family resilience. A key practical element is the "Guide to Promoting PTG in IDP Families". It contains structured, professional, and understandable information that helps destigmatise the difficult experiences of IDPs by explaining them as a natural reaction to traumatic circumstances. Practical recommendations are aimed at reconceptualising trauma, developing new coping skills, promoting family unity, and finding meaning and hope. The implementation of the guide and the comprehensive programme increases the level of understanding of the need for psychological treatment. The effectiveness of this approach is confirmed by data from a study of psychological interventions for PTSD, depression and anxiety in forced migrants by M. Molendijk *et al.* (2024), which indicates the advisability of including psychoeducation in the support of this category of clients, along with cognitive-behavioural therapy and desensitisation and eye movement desensitisation and reprocessing methods. According to the above-mentioned researchers, in such cases, the effects obtained were significant and persisted after the completion of psychotherapy.

A comparison of the results of stress assessment in the subgroup of adult IDPs with data from other Ukrainian studies, in particular N.P. Chelobitko & I.V. Yastremska (2024), showed a higher percentage of individuals with high levels of perceived stress in the present study (54% vs. 24%). This may indicate the specificity of the sample, as it included adults – parents who experience additional stress and responsibility for the safety and well-being of their children in conditions of uncertainty caused by the state of war. The prevalence of PTSD among internally displaced persons in Mogadishu (Somalia) revealed their consistency, indicating the almost inevitable impact of psychological stress and traumatic events on the lives of IDPs regardless of country, culture or reason for displacement. The traumatic experience of IDPs is seen not as a one-off event, but as a chronic process that can lead to high levels of PTSD and general psycho-emotional distress, as confirmed by a comparison of data from Ukraine and Somalia. According to the results of this study, 77% of children are likely to show signs of PTSD. These data are confirmed by the

results of the analysis by C. Spaas *et al.* (2022) on the mental health problems of refugees and migrants in European educational institutions. On the other hand, C. Spaas *et al.* found that discrimination is associated with an increase in mental health problems among refugee and migrant groups. These data are consistent with those obtained in this study of IDP children, which identified manifestations of bullying in new schools, which was a stressful event for children. Social rejection is a form of discrimination, so it can be hypothesised that bullying will exacerbate transgenerational trauma. However, this requires further research. An analysis of the emotional state of adolescents conducted by L.A. Strashok *et al.* (2024) revealed a dominant feeling of fear for the lives and fate of relatives among both IDPs and local residents. The high level of perceived stress among parents identified in this study likely exacerbates this fear. Almost half of the adolescents surveyed demonstrated or experienced their own aggressive reactions, which is consistent with the results of this study, as anger can be an intrusive reaction to high levels of stress and a risk factor for bullying. Accordingly, the development and implementation of psychoeducational programmes is considered necessary to support the mental health of IDPs on a global level. The work of L. Stark *et al.* (2022) emphasised that suicidal intentions among adolescents decrease with increased resilience, hope and school belonging, while more stressful life events and lower school belonging increase the risk of suicidal thoughts. The issue of separation from family also appears to be important. The results of this study correlate with the findings of C. Spaas *et al.* (2022), who studied the mental health of young refugees and migrants in European educational institutions. Family separation appears to be a more significant factor in PTSD among refugees than among migrants. The participants in this study have experienced/are experiencing separation from their loved ones. It is assumed that the high level of stress in adult internally displaced persons as a result of this separation may exacerbate the transgenerational transmission of trauma to children. Based on the analysis of the studies, it can be assumed that there are gender-specific manifestations of PTSD, in particular that the subgroup of forcibly displaced women belongs to a high-risk group, as transgenerational trauma potentially overlaps with gender vulnerability.

◆ Conclusions

The study emphasised that the experience of war and migration is a profound biopsychosocial traumatic phenomenon. Such circumstances affect the family system, disrupting its functioning. By identifying not only the negative consequences of traumatic events, but also the potential of PTG, the importance of providing social and psychological support to IDP families to increase their resilience and well-being was emphasised. The family, as a unique system, has built-in recovery mechanisms, which justifies the use of not only individual but also family-oriented interventions. The conceptual hypothesis confirmed in the study concerned the understanding of the traumatic

experience of war and, in particular, the experience of forced displacement as a factor causing transgenerational transmission of stress in the family system of Ukrainian internally displaced persons. Given the statistically significant correlation between the level of perceived stress of parents and the psycho-emotional distress of their children, as well as the high levels of distress in the study sample (54% of parents with high stress levels and 77% of children with a high probability of PTSD symptoms), it is assumed that the emotional exhaustion of parents is transmitted to their children. The increase in children's stress, in turn, exacerbates parental stress. In addition, a statistically significant correlation between the level of perceived stress in parents and symptoms of PTSD avoidance in children suggests that high parental stress contributes to the consolidation of traumatic experiences in children. Based on the empirical data obtained and a comparative analysis of current research, a family psychoeducational programme was developed to support PTSD, which can be used for further practical developments. A limitation

of the study was the small sample size and the cross-sectional data, which, compared to longitudinal studies, are not able to show the full specificity of the development of PTSD dynamics. Prospects for further research lie in an in-depth study of the gender characteristics of PTSD manifestations in IDP children with a larger sample size to test the hypothesis of increased risk for girls due to the overlap of transgenerational trauma and gender vulnerability.

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◆ Conflict of Interest

None.

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Трансгенераційна передача стресу внутрішньо переміщених осіб: емпіричний аналіз та сімейна психоедукація

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◆ **Анотація.** Актуальність проблеми обумовлена тим, що психологічні наслідки вимушеного переміщення, зокрема хронічний стрес і посилення посттравматичної симптоматики, можуть формувати механізми трансгенераційної передачі травми внаслідок психоемоційної взаємозалежності членів родини. Метою було дослідження трансгенераційної передачі стресу в українських родинах внутрішньо переміщених осіб в умовах воєнного стану та розробка відповідної психоедукативної програми. Емпірично перевірено гіпотези, висунуті на основі теоретичного аналізу джерельної бази. Виявлено високий рівень стресу та травматизації серед досліджуваної групи (26 осіб, з яких 13 дорослих віком від 41 до 48 років і 13 дітей віком від 10 до 11 років). Половина дорослих, які є внутрішньо переміщеними особами, схильна оцінювати своє теперішнє життя як непередбачуване, а рівень посттравматичних стресових симптомів у дітей свідчить про високу ймовірність наявності розладу. Також було визначено статистично значущий позитивний взаємозв'язок між рівнем стресу, що сприймають батьки, та загальним рівнем психоемоційного дистресу у їхніх дітей, що підтверджує механізм трансгенераційної передачі стресу. Отримані емпіричні дані та аналіз сучасних психологічних досліджень стали основою для розробки відповідної сімейної психоедукативної програми, в межах якої передбачено покращення психоемоційного стану дітей через супровід батьківського сприйняття стресу й сімейної динаміки. Програма включає компоненти, спрямовані на підвищення обізнаності учасників щодо стресу та стресових розладів, розвиток копінг-стратегій та сприяння посттравматичному зростанню. Практична значущість представлена у розробці сімейної психоедукативної програми, що поєднує принципи роботи з негативними психологічними наслідками війни та можливостями посттравматичного зростання в умовах воєнного часу. Результати дослідження можуть бути використані для створення програм соціально-психологічного супроводу родин внутрішньо переміщених осіб, що сприятиме підтримці ментального здоров'я родин як в Україні, так і поза її межами

◆ **Ключові слова:** сімейна динаміка; вимушене переміщення; психоемоційний дистрес дітей; батьківський стрес; резильєнтність; посттравматичне зростання