

Annals of Human and Social Sciences www.ahss.org.pk

RESEARCH PAPER

Parental Unresolved Trauma and Mental Health in University Students: A Phenomenological Approach

Khadija Azam

MS Scholar, Department of Clinical Psychology, School of Humanities and Social Sciences, Behria University Lahore Campus, Lahore, Punjab, Pakistan

Corresponding Author

Khadija.azam403@gmail.com

ABSTRACT

This study examines how parental unresolved trauma affects university students' mental health. This study collected a heterogeneous sample of 10 university students aged 18–25 utilising purposive non-probability sampling using the qualitative survey research methodology. Eaton (2017) created an interview guide based on the current Calgary University Manual. It comprised on three steps e.g. item generation, try out and end product. Colaizzi's Phenomenological method used that comprises seven steps to generate the themes and subthemes. The findings of the study revealed a significant association between diverse parental unresolved trauma leads to higher levels of stress, anxiety, and depression among university students. The study recommended measures and support networks to reduce parents' trauma's harmful effects on children's schooling and mental health. Research shows that parents' unresolved trauma and mental health are sensitive issues that need attention. Counselling, school-based trauma treatment, and parental trauma education have been considered in light of the study findings.

Keywords: Mental Health Issues, Parental Unresolved Trauma, University Students

Introduction

Parenting techniques are described as clearly visible actions taken by parents to socialize their children. Parenting strategies meant to encourage academic achievement, for example, include displaying involvement by attending parent-teacher meetings or regularly supervising children's homework. Other parenting practices pertain to positive reinforcement, discipline, or problem solving. Parenting has gained ample research attention from various scientific disciplines. Many theoretical frameworks emphasize that parenting plays a vital role in child development, which has fueled research investigating the impact of parenting on child development for over 75 years. When studying parenting, researchers can take various strategies by considering parenting practices, parenting dimensions or parenting styles (Darling & Steinberg, 1993).

Exposure to trauma may lead to several possible outcomes. One is that an individual may garner new information from the situation and integrate the information into the present situation, resulting in adaptation and a newfound understanding that eventually helps the individual to avoid future danger. These individuals would be considered "resolved" with regard to the trauma or loss. In another scenario, an individual experiencing trauma or loss may either retain too much information about the traumatic event or dismiss the importance of it, in ways that are maladaptive to future processing of information. These individuals will be classified as having unresolved trauma, which refers to an individual's maladaptive psychological response to a dangerous event that continues to adversely affect the individual's strategic functioning. For example, mothers with what is termed a "preoccupied unresolved trauma" may maintain a focus on bringing their past trauma to the present and exaggerating emotions or affect, whereas mothers with a "denied or blocked unresolved trauma" may rely on omitting details or feelings associated with the past trauma. While both types of traumas have associated behaviors which allow the mother to protect against overwhelming feelings, such patterns of behavior may become maladaptive when

directly applied to mother-infant relationships. Perhaps a mother with preoccupied unresolved trauma may be hyper-vigilant in response to her infant's distress, while a mother with a denied unresolved trauma may under-respond to her infant's distress (Crittenden & Landini, 2011).

Mental health encompasses an individual's emotional, psychological, and social well-being. It affects the way people think, feel, and behave, along with their approach to stress, relationships, and decision-making. Mental health is crucial at every stage of life, spanning from childhood and adolescence to adulthood. Mental health includes a diverse array of conditions and disorders, such as anxiety disorders, mood disorders, personality disorders, psychotic disorders, eating disorders, substance abuse disorders, and numerous others. These conditions can influence an individual's thinking, behaviour, mood, and overall functioning.

It is essential to acknowledge that mental health holds equal significance to physical health. A positive mental health state is linked to increased productivity, better academic and work performance, and greater life satisfaction. Mental health disorders are prevalent and can impact individuals of all ages, genders, races, or socioeconomic backgrounds. They do not indicate weakness or personal shortcomings; instead, they are medical conditions that necessitate appropriate diagnosis, treatment, and support. The signs and symptoms of mental health issues can differ significantly based on the particular condition, but they may encompass ongoing sadness, anxiety, irritability, mood fluctuations, social withdrawal, alterations in appetite or sleep habits, challenges with concentration, overwhelming worries or fears, thoughts of self-harm or suicide, and substance abuse. Timely identification and action are essential for fostering favourable mental health results. It is crucial to seek assistance from mental health professionals, including psychiatrists, psychologists, counsellors, or therapists. These experts possess the skills to identify and address mental health issues through a range of methods, such as therapy, medication, or a blend of the two. Alongside professional assistance, self-care and the support of family and friends are crucial for sustaining good mental health.

Unresolved trauma is a major risk factor for mental health issues. When people are exposed to trauma, their brains can become programmed to remain on high alert and fearful. This can result in a variety of mental health issues, such as anxiety, depression, and posttraumatic stress disorder (PTSD), and substance misuse. The study explores the link between trauma experiences and women's drinking and drug use problems. It found that past-year problem drinking and drug use in women who experienced sexual assault are linked to various types of trauma, substance use coping, and PTSD. Structural equation modelling was used to examine the association between trauma, substance use coping, PTSD symptoms, and recent alcohol and drug use in 1863 women. Results showed that PTSD symptoms completely mediate the connection between non-interpersonal trauma and drug usage to cope, while interpersonal trauma only partially moderates the relationship between child sexual abuse and substance use. The study suggests that different types of trauma and coping mechanisms may be major risk factors for sexually assaulted women (Ullman et al., 2013). According to the research, executive impairments and abnormal default mode network functions in healthy adults are linked to childhood trauma (Lu et al., 2017).

Literature Review

In a cross-sectional study, the role of parental unresolved trauma was examined in the manifestation of trauma-related symptoms in children. The study included a sample of 250 parent-child dyads and utilized self-report measures to assess parental trauma and children's trauma-related symptoms. The results indicated a positive association between parents' unresolved trauma and the severity of trauma symptoms in their children, such as intrusive thoughts and avoidance behaviors. The authors emphasized the importance of

early detection and intervention to address parental trauma and mitigate its impact on children's mental health (Garcia et al., 2017).

In a longitudinal study, the long-term effects of parents' unresolved trauma were investigated on their children's mental health outcomes. The study followed a sample of 200 families over a period of 10 years and utilized measures such as standardized questionnaires and diagnostic interviews. The results revealed that parents' unresolved trauma was a significant predictor of various mental health problems in their children, including post-traumatic stress disorder (PTSD) symptoms and behavioral difficulties. The authors highlighted the importance of addressing parental trauma in clinical interventions to promote better mental health outcomes for children (Johnson & Williams, 2019).

A qualitative study was conducted which explored the existing literature on the intergenerational transmission of trauma and its impact on children's mental health. The review included 25 studies that examined the relationship between parents' unresolved trauma and various mental health outcomes in their children. The findings consistently demonstrated a significant association between parental trauma and increased risk of mental health problems, such as anxiety, depression, and conduct disorders, in the offspring. The authors emphasized the need for trauma-informed interventions that address both parental trauma and children's mental health needs (Brown & Jones, 2021).

In a qualitative study, the researchers explored the lived experiences of parents with unresolved trauma and the implications for their children's mental health. The study involved in-depth interviews with 20 parents who had experienced various forms of trauma. Thematic analysis of the interview transcripts revealed that parents' unresolved trauma significantly influenced their parenting behaviors, which in turn affected their children's mental health. The findings emphasized the need for targeted interventions to address both parents' trauma and its impact on children (Davis et al., 2015).

Hypothesis

It is hypothesized that the current study finding would help in identifying the first core themes and subthemes regarding Parents' Unresolved Traumas and Mental Health in their university-going children.

Theoretical Framework

Unresolved trauma refers to traumatic experiences that have not been adequately processed or resolved, leading to ongoing psychological and emotional distress. It is a complex phenomenon with various theoretical explanations. Several theories have been proposed to explain the impact and manifestation of unresolved trauma. The PTSD model, attachment theory, emotional regulation theory, and cognitive theory are among the frameworks used to understand the impact and manifestation of unresolved trauma. These theories highlight the profound and long-lasting effects that unresolved trauma can have on an individual's mental health and functioning. (Bowlby, 1969).

The emotional regulation theory also provides insights into unresolved trauma. This theory suggests that individuals who have experienced trauma may have difficulties regulating their emotions and may exhibit emotional dysregulation as a result. Unresolved trauma can disrupt an individual's ability to modulate and express emotions appropriately, leading to intense emotional reactions and difficulties in emotional self-regulation (Cloitre et al., 2004).

Model

The bio-psychosocial model explains that how the biological, psychological and social well-being of university students are affected by parental unresolved trauma. The bio-psychosocial model is a theoretical framework that explores the interplay between biological, psychological, and social factors in understanding health and illness. It is originally proposed by George L. Engel in 1977, it emphasizes the interconnectedness of these factors and their interaction to cause disease.

The model is applied to health and wellness, emphasizing the importance of maintaining wellness in all aspects of life. Bio-psychosocial model is consisting of three components: biological factors (genetics, physiology, anatomy, epidemiology, and nutrition), psychological factors (thoughts, emotions, and behaviors), and social factors (family, community, culture, and socioeconomic status). The bio-psychosocial model explains how seemingly healthy individuals can develop mental illnesses and why some are more prone to mental illness than others. The model provides evidence that mental health can still be experienced if a person's bio-psychosocial balance is disturbed.

Biological factors, such as genetics and physiology, can impact mental health outcomes, while psychological factors, such as thoughts and emotions, can influence children's mental health outcomes. Understanding these factors can inform interventions to support university students' mental health. Social factors, such as family and community, can also contribute to mental health outcomes. By considering these factors, interventions can be developed to support university students' mental health.

Material and Methods

Qualitative Survey Research Design is used to gain a comprehensive understanding of the phenomenon. Also explore the relationship between parents' unresolved trauma and mental health. In this research a total of 10 to 15 university students were included. The study recruit a diverse sample of university students aged 18-25 years. Purposive non-probability sampling technique was used. The inclusion criteria were university students with the age of 18 to 25 years old. The exclusion criteria were university students who are below 18 or above twenty-five were excluded from the study. An interview guide was design considering the latest Calgary University Manual (Eaton, 2017). It comprised on three steps e.g. item generation, try out and end product. Age , Socio-economic status, Residential place and Profession was used as a demographics. Researcher take history from participants with informed consent. Researcher use interview method for collecting data with the respect of ethical consideration.

Results and Discussion

Colaizzi's phenomenological method is used which consists of seven steps

Table 1
Significant statements

	Significant statements				
Sr.	Significant statement	Participants	Transcript	Line	
no			No.	No.	
Item	1: Do you think any of your parents have experien	ced any unresolv	ved trauma in th	eir past	
life?					
	Yes! It has been 8 years since my father died, and a				
1	few years later my brother also died.	A	1	3	
	Yes! My mother has faced physical violence in her				
2	marital life, which has caused her to become	В	2	3	
	depressed.				
2	Yes! My mother has lost her brother 3 years ago, and	C	3	3	
3	he was still young.	C	J	J	

4	Yes! My father got married at a very young age while he wasn't even ready for marriage yet. And the marriage happened with a girl slightly older than him.	D	3	3
5	Yes! Experience of parent's unresolved trauma, which was the death of my younger brother.	Е	4	3
6	Yes! This is about my mother's early marriage. She got married at the age of 17, and had first child at the age of 19. My father was much older than her.	F	4	3
7	Yes! After my father's death, my mother remarried. She stayed with us for 12 years after his death.	G	5	3
8	Yes! My Parents separated when I was 14 years old and I live with my mother in my maternal grandmother's house.	Н	6	3
9	Yes! My mother had Hepatitis C and experienced very critical situations during her illness.	I	7	3
10	Yes! The trauma was that my parents have faced a big quarrel in which my father and my brother was injured badly.	J	7	3

Table 2

Sr.	Significant statement	Participants	Transcript	Line
no			No.	No.
Item	2: Are the memories of their past trauma still haunt	ing them? How?		
1	Yes! My mother has been very distressed since the death of my father and brother. Her blood pressure remains high. Whenever she finds something belonging to them at home, it triggers memories and she becomes emotional.	A	1	5
2	Yes! My mother has struggled a lot in her life, and that unresolved trauma still disturbs her. She is always worried and often breaks down in tears. She also feels very weak. She is concerned about the future of her children because my father doesn't fulfil our needs.	В	2	6
3	Yes! My mother has also been emotionally weak after losing her brother. She often cries and takes a lot of tension, which affects her blood pressure and sugar levels. Her sugar levels remain high, and she has developed cataracts in her eyes.	С	2	5
4	Yes! My father got married at a very young age while he wasn't even ready for marriage yet. And the marriage happened with a girl slightly older than him, so because of that, there hasn't been proper understanding developed between them.	D	3	7
5	My parents are depressed after the death of my brother, and they didn't seem to be able to cope with everyday life. They avoid activities and places that remind them of their son. My mother has difficulty with sleeping and concentrating.	E	4	6
6	My mother didn't have any support from her family, so she felt very isolated and alone. It was very difficult for her. She's still working through the trauma because my father is very controlling. My mother finds it difficult to cope with the challenges of her marriage.	F	4	6
7	When we were young, my mother faced many difficulties and critical situations after my father's death. After that, she had a second marriage in very difficult circumstances. My mother is still facing many challenges, and it has been 12 years since that incident happened, causing her to face various psychological issues due to her second marriage.	G	5	6
8	After the separation, it's hard for my mother to fully invest in new relationship because she's afraid of experiencing that pain again. She blames herself	Н	6	6

	sometimes for the separation. The memories of the separation continue to have an impact on some aspects of her life. Those memories have made it challenging for her to trust others fully, as she fears being hurt again.			
9	Yes! My mother thought that her disease may recur. Whenever she is unwell, or face any health issue, this issue triggers her and force her to think about the past critical health issue that she had faced due to her illness.	I	7	7
10	Yes! Like if my mother remembers anything regarding that incident of big quarrel in which my father and my brother was injured badly, she feels upset and panic.	J	7	7

Table 3

	Table 3			
Sr. no	Significant statement	Participants	Transcript No.	Line No.
Item	3: Do you feel any mental distress due to their unres	solved trauma?		
1	My mental health has been greatly affected since the death of my father and brother because I was very attached to them. It also affected my academic life as I couldn't focus on my studies, and my grades suffered. My mother takes a lot of tension, and her blood pressure remains high. We are afraid of losing her too.	A	1	9
2	My mental health is affected by my parents' arguments and conflicts. My father doesn't provide financial support, and my grandfather has been supporting us financially since the beginning of my mother's marital life. I experience stress, anger issues, and anxiety. I feel insecure, and have lack of confidence.	В	2	10
3	I was mentally disturbed as well, constantly thinking about how to accept the unexpected loss of loved ones and how to cope with the pain and loss.	С	2	9
4	Seeing my parents fighting causes me a lot of mental distress. I feel mentally disturbed and it seems like we will have to face all these things in the future. When parents do not understand their children and do not give them time, children become distant.	D	3	13
5	I started to have nightmares and trouble sleeping after the death of my younger brother, and I was always anxious and on edge. I had trouble concentrating on my studies. I started to develop anxiety.	E	4	11
6	I have definitely been affected by my mother's early marriage. I've seen her struggle with anxiety and depression, and I've also seen her struggling in relationship. I've also had to deal with the stigma of being from a broken home. I'm struggling with mental health. I have been diagnosed with anxiety and depression, and have been struggling with anger issues.	F	4	11
7	I have faced a lot of mental health issues after my father's death and mother's remarriage. I have been dealing with depression and anxiety. I have nightmares, difficulty sleeping and concentrating.	G	5	13
8	I started having nightmares after my parent's separation, and I would often wake up feeling anxious and scared. I also started having trouble concentrating on my studies, and I was more irritable and withdrawn. I also felt very insecure and worried about the future.	Н	6	12
9	Yes! I'm facing anxiety issues after my mother's illness. It looks like I have Thanatophobia (fear of	I	7	11

	death of loved one), that how can I live a happy life if			
	something happens to my mother?			
10	Yes! I feel much upset. That incident of big quarrel in which my father and my brother was injured badly caused a lot of stress and still I had physical and psychological issues due to that incident.	J	7	10

Table 4 Formulated meanings from significant statements

Significant Statements	Formulated Meanings
She said "It has been 8 years since my father died, and a few years later my brother also died". (A) "Experience of parent's unresolved trauma, which was the death of my younger brother. My parents were never really the same after my brother died". (E) She said "After my father's death, my mother remarried. She stayed with us for 12 years after his death". (G) "My mother lost her brother 3 years ago, and he was still young". (C)	The death of a loved one was a very difficult and traumatic experience for the participants.
"My father got married at a very young age while he wasn't even ready for marriage yet. And the marriage happened with a girl slightly older than him". (D) "This is about my mother's early marriage. She got married at the age of 17, and had first child at the age of 19. My father was much older than her". (F)	Parent's early marriage had a devastating effect on the participants and caused them trauma.
"My Parents separated when I was 14 years old and I live with my mother in my maternal grandmother's house". (H) "My mother has faced physical violence in her marital life, which has caused her to become depressed". (B) "The trauma was that my parents faced a big quarrel in which my father and my brother were injured badly. That incident badly impacts my mother and other family members often, if my mother hears anything related to that incident, she feels panic". (J)	Family problems affected participant's mental health.
"My mother had Hepatitis C and experienced very critical situations during her illness. But she has recovered but currently she is in depression. She thinks that she is not cured properly, that disease may recur and she could die. She always looks worried and depressed". (I)	Parental physical illness affected participant mental health as well as increased their risk of emotional and behavioural problems.

Table 5

Significant Statements	Formulated Meanings
She said "My mother has been very distressed since the death of my	The most common problems
father and brother. Her blood pressure remains high. Whenever she	were blood pressure, sugar level,
finds something belonging to them at home, it triggers memories and	and cataracts in eyes.
she becomes emotional". (A)	
"My mother has also been emotionally weak after losing her brother.	
She often cries and takes a lot of tension, which affects her blood	
pressure and sugar levels. Her sugar levels remain high, and she has	
developed cataracts in her eyes". (C)	
"My mother is always worried and often breaks down in tears. She	
also feels very weak. She is concerned about the future of her children	
because my father doesn't fulfil our needs". (B)	
She said, "My mother thought that her disease may recur. Whenever	
she is unwell, or faces any health issue, this issue triggers her and	
forces her to think about the past critical health issue that she had	
faced due to her illness" (I)	

"Whenever my mother remembers anything regarding the incident of my brother's quarrel she feels upset and panic". (J)

"There are a lot of arguments between my parents that don't make any sense. They take out their anger on the children. They are also not emotionally attached to each other, which has deeply affected their children. There is still an emotional gap between them and their children". (D)

"My parents became withdrawn and depressed after the death of my younger brother, and they didn't seem to be able to cope with everyday life. My parents avoid activities and places that remind them of their son. My mother has difficulty with sleeping and concentrating". (E)

"My mother didn't have any support from her family, so she felt very isolated and alone. It was very difficult for her. She's still working through the trauma (early marriage) because my father is very controlling. He had anger issues and irritability (short tempered)". (F)

"After my father's death, my mother faced many difficulties and critical situations, so she had a second marriage in very difficult circumstances. My mother is still facing many challenges, as some relatives have stopped talking to her, including some of their children. That incident, causing her to face various psychological issues due to her second marriage". (G)

"My parents were hurt after the separation, and they didn't really talk about it with me. My mother blames herself sometimes for the separation". (H)

The mother experiences panic attack, anger, emotional instability, depression, sleep disturbances, concentration problem, isolation, irritability and self-blaming.

Table 6

Significant Statements

She said "My mental health has been greatly affected after my father's death because I was very attached to them. It also affected my academic life as I couldn't focus on my studies, and my grades suffered. My mother takes a lot of tension, and her blood pressure remains high". (A)

"I felt like I had to take care of my parents when my younger brother died, and I didn't have anyone to take care of me. I felt like I was carrying around a lot of weight, and I didn't know how to deal with it. I started to have nightmares and trouble sleeping, and I was always anxious and on edge. I had trouble concentrating on my studies. I started to develop anxiety". (E)

"I started having nightmares about the separation after my parent's separation, and I would often wake up feeling anxious and scared. I think it's made me more sensitive to conflict and rejection. I'm always worried that people are going to leave me, and I have a hard time trusting them. I also started having trouble concentrating on my studies, and I was more irritable and withdrawn. I also felt very insecure and worried about the future". (H)

"My mental health is also affected by my parents' arguments and conflicts. My father doesn't provide financial support, and my grandfather has been supporting us financially since the beginning of my mother's marital life. I experience stress, anger issues, and anxiety. I feel insecure, and have a lack of confidence". (B)

She said "I feel very upset, since there was a big quarrel in which my father and my brother were badly injured. That incident caused a lot of stress and still I had psychological issues". (J) She said "I have seen my mother struggling with anxiety and

depression, and I've also seen her struggling in relationships as she got married at a very young age. I've also had to deal with the stigma of being from a broken home. I'm struggling with mental health. I have been diagnosed with anxiety and depression, and have been struggling with anger issues". (F)

"I have faced a lot of mental health issues after my mother remarried. I have been dealing with depression and anxiety. I have nightmares, difficulty sleeping and concentrating". (G)

Formulated Meanings

The participant's father's death had a negative impact on her mental health, academic performance, and her mother's health, resulting in high blood pressure.

Participants experienced mental health issues following their brother's death, parental separation, and Thanatophobia, including nightmares, anxiety, concentration difficulties, conflict, trust, insecurity, and financial struggles.

He said, "I have been facing anxiety issues ever since my mother's illness. It looks like I have Thanatophobia (fear of death of loved one), that how can I live a happy life if something happens to my mother?" (I) She said "I was mentally disturbed after my uncle's death and Participants experienced mental constantly thinking about how to accept the unexpected loss of distress due to the unexpected loss of loved ones and how to cope with the pain and loss". (C) loved ones and potential future "Seeing my parents fighting causes me a lot of mental distress. I challenges due to their parents' feel mentally disturbed, and it seems like we will have to face all conflict. these things in the future". (D)

Table 7
Developing clusters of themes and themes from formulated meanings

Developing clusters of themes and themes from formulated meanings		
Formulated Meanings	Cluster Theme	Emergent Theme
Item 1 The death of a loved one was a very difficult and traumatic experience for the participants.	Death	
Parent's early marriage had a devastating effect on the participants and caused them trauma.	Early Marriage	Natural and Man- made disasters
Family problems affected participant's mental health.	Family disputes	_
Parental physical illness affected participant mental health as well as increased their risk of emotional and behavioural problems.	Physical Illness	-
Item 2 The most common problems were blood pressure, sugar level, and cataracts in eyes.	Blood pressure, Sugar level Cataract's in eyes	Dhysical and montal
The mother experiences panic attack, anger, emotional instability, depression, sleep disturbances, concentration problem, isolation, irritability and self-blaming.	Panic attack, anger, emotional instability, depression, sleep disturbances, concentration problem, isolation, irritability and self-blaming.	- Physical and mental health issues
Item 3 The parental trauma affected the academic performance of the participant.	Academic issues	Academic and Mental Health Issues
The participants experienced sleep disturbances, thanatophobia, nightmares, anxiety, concentration, irritability, difficulties, conflict, trust, insecurity, stress and low self-esteem, worry, mental distress and financial struggles.	Sleep disturbances, thanatophobia, nightmares, anxiety, concentration, irritability, difficulties, conflict, trust, insecurity, stress and low selfesteem, worry, mental distress and financial struggles.	

Table 8
Thematic Map

Thematic Map	
Theme Cluster	Emergent Themes
Death	Natural and Man-made
Early marriage	disasters
Family disputes	
Physical illness	
Blood pressure,	
Sugar level	Physical and Mental
Cataract's in eyes	health issues
Panic attack, anger, emotional instability, depression, sleep disturbances,	
concentration problem, isolation, irritability and self-blaming.	
Academic issues	
Sleep disturbances, thanatophobia, nightmares, anxiety, concentration,	Academic and Mental
irritability, difficulties, conflict, trust, insecurity, stress and low self-esteem,	Health Issues
worry, mental distress and financial struggles.	

Natural and Man-made disasters

In the emergent theme "Natural and Man-Made disasters" of Item no. 1, 4 participants reported that they lost their loved ones. 2 participants reported that their parents got married at a very young age. 2 participants reported that they have family disputes while 1 participant reported that their mother had physical illness (Hepatitis C).

Physical and Mental health issues

In the emergent theme "Physical and Mental health issues" of Item no. 2, participants reported that they and their parents experienced physical and mental health issues due to their parents' unresolved traumas. 2 participants reported that they have blood pressure issue, 1 participant reported that her mother is diabetic patient and has developed Cataract's in her eyes, 1 participant reported that she had Panic attacks, 4 participants reported that they had anger issues, 3 participants reported that they are emotional instable, depression issue reported in 1 participant, and sleep disturbances, concentration problem, isolation, irritability and self-blaming also reported in 1 participant.

Academic and Mental Health Issues

In the emergent theme "Academic and Mental Health Issues" of Item no. 3, participants reported that they struggle with their Academic and Mental Health Issues due to their parents unresolved trauma. 1 participant reported that her academic life affected after the death of her brother and father. 2 participants reported that they started to have nightmares and difficulty with sleeping and concentrating after her brother's death and mother's remarriage. 1 participant reported that he has thanatophobia due to his mother's illness, 1 participant reported that she has stress, anxiety issues and mental distress due to her parent's conflicts.

The study focuses on the themes of natural and man-made disasters (parent's exposure to natural and man-made disasters and its impact on their children's mental health), Physical and Mental health issues, Academic and Mental Health Issues in children due to unresolved trauma of parents.

The study involved participants who experienced various physical and mental health issues due to their parents' unresolved traumas. Some experienced blood pressure issues, panic attacks, anger issues, emotional instability, depression, sleep disturbances, concentration problems, isolation, irritability, and self-blaming. Some struggled with academic and mental health issues, such as nightmares, difficulty sleeping and concentrating, thanatophobia, stress, anxiety issues, and mental distress due to their parents' conflicts. One participant reported that her academic life was affected after the death of her brother and father, while two participants reported nightmares and difficulty sleeping and concentrating after her brother's death and her mother's remarriage. One participant reported thanatophobia due to his mother's illness, while another experienced stress, anxiety issues, and mental distress due to her parents' conflicts.

Table 8
Summary Table

Participant	Parental Unresolved Trauma	Mental and Physical health issues in University Students
A, C, E, G	Death of family members	High blood pressure, nightmares, trouble sleeping, anxiety, poor concentration, depression, anger issues.
В	Physical violence to mother	Stress, anger, anxiety, insecurity, low confidence.
D, F	Parents early marriage	Anxiety, depression, anger, poor emotional attachment.

II	Parental	Nightmares, anxious, scared, poor concentration, irritable,
Н	seperation	insecurity, withdrawn.
I	Mother illness	Anxiety, thanatophobia.
J	Family disputes	Stress, upset, panic

Discussion

The aim of the study is to investigate the connection between parental unresolved trauma and university students' mental health and to learn more specifically about how parental unresolved trauma affects university students' mental health.

In the response of item no. 1 some participants reported that the death of a loved one was a very difficult and traumatic experience for them. Some participants reported that their parental early marriage had a devastating effect on them and caused them trauma. Family problems are also reported by some of the participants which affected their mental health. Parental physical illness also reported by one of the participant which affected their mental health as well as increased their risk of emotional and behavioral problems.

In the response of item no. 2 and 3 participants reported the parental trauma affected their academic performance, mental health and physical health. The most common problems were blood pressure, sugar level, and cataracts in eyes of one of participant mother. The mother experiences panic attack, anger, emotional instability, depression, sleep disturbances, concentration problem, isolation, irritability and self-blaming due to unresolved trauma. The participants reported that they experienced sleep disturbances, thanatophobia, nightmares, anxiety, concentration, irritability, difficulties, conflict, trust, insecurity, stress and low self-esteem, worry, mental distress and financial struggles due to parental unresolved trauma.

A study funded by the National Institute of Mental Health, aimed to understand how trauma is passed from one generation to the next, highlighting the lack of understanding about how parents who experienced difficult childhood situations may pass on these risks to their children. The study revealed that childhood adversity negatively impacts mothers' mental health during and after pregnancy, which in turn affects their children's mental health, highlighting the importance of understanding the effects of childhood adversity on mental health. The study involved 541 mother-child pairs and collected data from 89 children aged 6 years and older.

The findings showed that maternal experiences of childhood neglect were associated with worse mental health, higher levels of anxiety and depression symptoms, and increased social withdrawal in children. The children also reported more anxiety-related performance fears, physical symptoms, and restlessness. Maternal experiences of childhood abuse were linked to worse mental health among mothers after birth, which in turn was linked to their children feeling more anxious, depressed, and withdrawn at 7.5 years of age. The study also found a link between maternal mental health and their children's brain activity, with children of mothers experiencing worse mental health after birth showing weaker connectivity between the amygdala and prefrontal cortex, crucial for emotion regulation and processing (Uy et al., 2022).

Recommendations

Parental unresolved trauma significantly affects university students' mental health, leading to anxiety, depression, and academic difficulties. Research is needed to understand genetic factors, parenting styles, and family dynamics. Interventions should focus on trauma effects, coping mechanisms, and supportive campus environments. Firstly, universities should consider implementing counselling and mental health support services that are specifically suited to students who may be dealing with the effects of parental unresolved

trauma. This could involve offering specialized workshops or support groups. Secondly, it's important to raise awareness among university staff and faculty about the potential impact of this issue on students. Training programs could be developed to help educators recognize signs of distress and offer appropriate assistance. Lastly, further research into the specific ways parental unresolved trauma affects students could provide valuable insights, and it's recommended that universities support and fund such studies to enhance our understanding and develop more targeted interventions.

Implications

The topic of parental unresolved trauma and mental health is a sensitive one, and it is important to be mindful of the potential impact on participants. Participants may need support during and after the research process, and it is important to have resources in place to provide this support. Creating a more trauma-sensitive society which involve addressing the root causes of trauma, such as poverty, violence, and discrimination. Creating trauma-informed schools which involve training teachers and staff on how to identify and support students who have been impacted by trauma. Implementing school-based trauma treatment programs. These programs can provide students with the support they need to heal from trauma and succeed in school. Educating parents about the impact of unresolved trauma on their children and how to create a safe and supportive home environment. Help parents to develop healthy coping mechanisms and stress management skills. Promote resilience and self-care among parents.

References

- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th Ed.). *American Psychiatric Publishing*.
- Barber BK. Parental psychological control: revisiting a neglected construct. *Child Development*. 1996; 67:3296–3319.
- Barber BK. (2002). Reintroducing parental psychological control. In: Barber BK, editor. *Intrusive parenting: How psychological control affects children and adolescents*. Washington, DC: American Psychological Association
- Bean RA, (206). Barber BK, Crane DR. Parental support, behavioral control, and psychological control among African American youth: The relationships to academic grades, delinquency, and depression. *Journal of Family Issues*, 27, 1335–1355.
- Bowlby, J. (1969). Attachment and loss: Vol. 1. Attachment. Basic Books.
- Brown, A. D., & Jones, J. D. (2021). Intergenerational Transmission of Trauma and Its Impact on Children's Mental Health: A Systematic Review. *Journal of Traumatic Stress*, 34(1), 99-109.
- Cloitre, M., Stovall-McClough, K. C., Miranda, R., & Chemtob, C. M. (2004). Therapeutic alliance, negative mood regulation, and treatment outcome in child abuse-related posttraumatic stress disorder. *Journal of Consulting and Clinical Psychology*, 72(3), 411–416.
- Coie JD, Dodge KA. Aggression and antisocial behavior. In: Damon W, Eisenberg N, editors. *Handbook of Child Psychology*. 3: Social, Emotional and Personality Development. New York, NY: Wiley & Sons; 1998. pp. 779–862.
- Cummings EM, Davies PT, Campbell SB. *Developmental Psychopathology and Family Process*. New York, NY: The Guilford Press; 2000.
- Darling N, Steinberg L. Parenting style as context: an integrative model. *Psychological Bulletin*. 1993; 113:487–496.
- Davis, L., (2015). Parenting behaviors among mothers with unresolved trauma: Associations with children's mental health. *Journal of Traumatic Stress*, 28(4), 362-369.
- Fan, S., & Koski, A. (2022). The health consequences of child marriage: a systematic review of the evidence. *BMC Public Health*, 22(1). https://doi.org/10.1186/s12889-022-12707-x
- Galambos NL, Barker ET, Almeida DM. Parents do matter: trajectories of change in externalizing and internalizing problems in early adolescence. *Child Development*. 2003; 74:578–594.
- Garcia, K. L., Mannarino, A. P., & Chard, K. M. (2017). Parents' unresolved traumatic experiences are related to their children's trauma symptoms. *Journal of Traumatic Stress*, 30(1), 49-56.

- Hesse E., Main M. (1999). Second-generation effects of unresolved trauma as observed in non-maltreating parents: dissociated, frightened, and threatening parental behavior. *Psychoanal. Inq.* 19, 481–540
- Johnson, R. J., & Williams, J. (2019). Parents' unresolved trauma predicts their children's mental health outcomes: A 10-year longitudinal study. *Journal of Child Psychology and Psychiatry*, 60(11), 1174-1182.
- Jones, L., & Lee, C. (2016). Parents' unresolved trauma and its influence on their children's mental health: A qualitative study. *Journal of Child and Family Studies*, 25(1), 91-102.
- Osterweis, M., Solomon, F., & Green, M. (2013). Bereavement during childhood and adolescence. Nih.gov; National Academies Press (US).
- Ullman, S. E., Relyea, M., Peter-Hagene, L., & Vasquez, A. L. (2013). Trauma histories, substance use coping, PTSD, and problem substance use among sexual assault victims. *Addictive Behaviors*, 38(6), 2219–2223.
- Uy, J. P., Tan, A. P., Broeckman, B. B. F. P., Gluckman, P. D., Chong, Y. S., Chen, H., Fortier, M. V., Meaney, M. J., & Callaghan, B. L. (2022). Effects of maternal childhood trauma on child emotional health: maternal mental health and frontoamygdala pathways. *Journal of Child Psychology and Psychiatry*. https://doi.org/10.1111/jcpp.13721