



SOCIAL CONNECTEDNESS  
FELLOWSHIP PROGRAM



**MOTHO TRAINING  
INSTITUTE TRUST**  
*Unleashing Potential*  
Est. 2007

# **“It takes a village to raise one child”:**

The Role of Social Connectedness in  
Overcoming Intergenerational Trauma During  
Early Childhood Development

By Unathi Mabena  
Social Connectedness Fellow 2022  
Samuel Centre for Social Connectedness  
[www.socialconnectedness.org](http://www.socialconnectedness.org)  
August 2022

# TABLE OF CONTENTS

<b>1. EXECUTIVE SUMMARY</b>	<b>3</b>
<b>2. INTRODUCTION</b>	<b>4</b>
2.1. Background	6
2.1.1. Intergenerational Trauma	8
2.1.2. Resilience	12
2.1.3. Social Connectedness	14
2.2. Research Method	16
2.3. Ethics and Limitations	20
<b>3. ISSUE, EVIDENCE AND KEY FINDINGS</b>	<b>23</b>
3.1. Theme 1: Intergenerational trauma has an impact on experiences of social connectedness	24
3.2. Theme 2: Social connectedness increased coping resources for children	27
3.2.1. Subtheme: Social connectedness increased children’s accessibility to coping resources	30
3.3. Theme 3: Connection as a coping resource	32
<b>4. RECOMMENDATIONS</b>	<b>36</b>
4.1. Introducing Trauma-informed care into existing organisations and structures	36
4.2. Support groups for parents and guardians	38
4.3. Investing in safe spaces	40
4.4. Inclusive community interventions to reduce familial risk	43
<b>5. IMPACT</b>	<b>44</b>
<b>6. CONCLUSION</b>	<b>45</b>
<b>BIBLIOGRAPHY</b>	<b>47</b>

## **1. EXECUTIVE SUMMARY**

Children are a highly marginalised group within society, which amplifies their risk of exposure to trauma. As early childhood development is a period of rapid development where children have limited coping capabilities and are dependent on their primary caregivers for physical and emotional support, children are especially vulnerable to experiences of adverse outcomes. The following research study aims to find the link between intergenerational trauma and social connectedness in early childhood development, particularly focusing on the COVID-19 pandemic and its impact on low-resource communities in South Africa. It employed a participatory approach in which telephonic interviews and a focus group were conducted. The sample was inclusive of one early childhood development practitioner and seven parents to collect data on the role social connectedness plays in experiences of intergenerational trauma during early childhood development. It was found that social connectedness abated experiences of intergenerational trauma during early childhood development by expanding children's resilience resources, as well as access to those coping resources. The common theme found in the resources required to face challenges in children was connection – connection to people in one's community and the resources found there. It is through connections that children are able to deal with the various challenges in their lives and generate resilience. This report recommends integrating trauma-informed care into existing organisations and structures within the community with the intention of amplifying trauma-sensitivity; creating support groups for parents and guardians in order to enhance the effectiveness of their support to their children; creating and investing in physical and psychological safe spaces in these communities to generate social connectedness; as well as creating inclusive community interventions with the aim of decreasing familial risk.

## 2. INTRODUCTION

The COVID-19 pandemic presented a great deal of challenges globally. It resulted in the drainage of resources, escalated the number of individuals, families and communities experiencing unemployment, and threatened global food security<sup>1</sup>. Although the pandemic continues to affect society at large, its impact is especially significant in more vulnerable populations and communities<sup>1</sup>; this is inclusive of children. As healthy and holistic early childhood development furnishes the foundation for successful educational outcomes, economic efficiency, lasting health, responsible citizenship, resilient communities, and effective parenting of the coming generations<sup>2</sup>, exposure to adversity during this period has long term implications that ripple into subsequent developmental stages<sup>3</sup>, and on future generations<sup>4</sup>. This is especially true in South Africa, as child abuse cases<sup>5</sup> and teenage pregnancy<sup>6</sup> rates surged during the hard lockdowns. Therefore, it is imperative to recognise the significant impact the pandemic had on young children, particularly those from low-resource communities in South Africa.

---

<sup>1</sup>Gilmer, T.P., Center, K., Casteel, D., Choi, K., Innes-Gomberg, D., and Lansig, A. E., "Developing trauma resilient communities through community capacity-building," *BMC Public Health* 21 (2021): 1681. <https://doi.org/10.1186/s12889-021-11723-7>

<sup>2</sup>Sibeko, N., "ECDs welcome handover to Department of Education", Benoni City Times, June, 15, 2022, <https://benonicitytimes.co.za/442551/ecds-welcome-handover-to-department-of-education/>

<sup>3</sup>Huston, A. C., & Ripke, M. N. *Developmental contexts in middle childhood: Bridges to adolescence and adulthood*. (Cambridge: Cambridge University Press, 2006). <https://doi.org/10.1017/CBO9780511499760>

<sup>4</sup>Howell, K. H., Miller-Graff, L. E., Martinez-Torteya, C., Napier, T. R., and Carney, J. R., "Charting a course towards resilience following adverse childhood experiences: Addressing intergenerational trauma via strengths-based intervention," *Children* 8 no. 10 (2021): 844.

<sup>5</sup>Mahlangu, P., Gibbs, A., Shai, N., Machisa, M., Nunze, N., and Sikweyiya, Y., "Impact of COVID-19 lockdown and link to women and children's experiences of violence in the home in South Africa," *BMC Public Health* 22 no. 1029 (2022):1-11. <https://doi.org/10.1186/s12889-022-13422-3>

<sup>6</sup>Dewa, C., "How teen pregnancies skyrocketed in lockdown," Eurozine, April, 22, 2022, <https://www.eurozine.com/teen-pregnancies-skyrocketed-in-lockdown/>

Children are a high risk population for exposure to trauma. Due to early childhood development being a rapid developmental period whereby they have limited coping capabilities and are dependent on their primary caregivers for physical and emotional support, children are especially vulnerable to experiences of adversity<sup>7</sup>. Exposure to life-threatening events is unfortunately woven into the fabrics of many South African children's lives<sup>8</sup>. South African media is flooded with many stories of crime and violence. The South African population has experienced compounding oppression, resulting in enduring political strife and violence caused by colonialism and apartheid, alongside high rates of criminal violence, domestic abuse, and accidental injury<sup>9</sup>. According to a study by Mahlangu and colleagues,<sup>5</sup> the COVID-19 lockdown exacerbated women and children's experiences of violence in the country— including increased instances of physical violence against children. South Africa's deep history<sup>10</sup> and current circumstances thus translate into a great number of individuals whose lives have been touched by trauma and, for many, these traumatic experiences are an inevitable part of daily life<sup>4</sup>. Herman<sup>11</sup> contends that one aspect of the past that needs to be dealt with is the deep-rooted traumatic impact of the violence that accompanies civil conflict. Lumsden<sup>11</sup> further advises that traumatic memories of

---

<sup>7</sup>De Young, A. C., Kendardy, J. A., and Cobham, V. E., "Trauma in early childhood: a neglected population," *Clinical child and family psychology review* vol. 14,3 (2011): 231-250.  
<https://doi.org/10.1007/s10567-011-0094-3>

<sup>8</sup>Kaminer, D., Impact of trauma on children and best practices for intervention," *Mental Health Matters*, no. 4 (2020): 23-25.

<sup>9</sup>Kaminer, D., and Eagle, G., "Trauma and Children," in *Traumatic Stress in South Africa*, ed. Debra Kaminer and Gillian Eagle (Wits University Press, 2010): 122–145.  
<http://www.jstor.org/stable/10.18772/22010105096.9>

<sup>10</sup>*Encyclopedia Britannica*, s.v. "History of South Africa", accessed August 16, 2022,  
<https://www.britannica.com/place/South-Africa/History>

<sup>11</sup> Adonis, C. K., "Exploring the Salience of Intergenerational Trauma among Children and Grandchildren of Victims of Apartheid-Era Gross Human Rights Violations," *Indo-Pacific Journal of Phenomenology* 16 no. 2 (2016): 163–79. <https://doi.org/10.1080/20797222.2016.1184838>

past strife are seldom forgotten, while Bar-Tal<sup>11</sup> argues that such memories resurface to affect not only those that have personally experienced the conflict and accompanying trauma, but also consecutive generations through what is known as transgenerational transmission of trauma, or intergenerational trauma. It is evident through a multitude of literature that historically persecuted, enslaved and marginalised communities carry the impacts of intergenerational trauma into the present, as society persists in its perpetuation of forms of racism, antisemitism, cultural genocide and many other forms of oppression<sup>12</sup>.

## **2.1. Background**

In the South African context, Simpson<sup>13</sup> and Gobodo-Madikizela<sup>14</sup> have explored this concept theoretically, examining transgenerationally transmitted trauma resulting from state repression under apartheid. On the contrary, Coetzer<sup>15</sup> explored the issue through a family systems perspective, which focuses on exchanges of behaviour and interaction patterns between family members. More literature includes the work of Dickerson and Fish<sup>16</sup>, who narrowed their focus to the perspectives of grandmothers' experiences of displacement of their families

---

<sup>12</sup>Buonagurio, N., "The Cycle Continues: The Effects of Intergenerational Trauma on the Sense of Self and The Healing Opportunities of Dance/Movement Therapy: A Literature Review," (capstone thesis, Lesley University, 2020).

[https://digitalcommons.lesley.edu/expressive\\_theses/280](https://digitalcommons.lesley.edu/expressive_theses/280)

<sup>13</sup>Simpson, M. A., "The Second Bullet", *International Handbook of Multigenerational Legacies of Trauma* (1998): 487–511. [https://doi.org/10.1007/978-1-4757-5567-1\\_30](https://doi.org/10.1007/978-1-4757-5567-1_30)

<sup>14</sup> Gobodo-Madikizela, P., *Breaking Intergenerational Cycles of Repetition: A Global Dialogue on Historical Trauma and Memory* (Toronto, ON: Verlag Barbara Budrich, 2016), <https://doi.org/10.2307/j.ctvdf03jc>

<sup>15</sup> Coetzer, W., "The impact of intergenerational trauma. Explorative perspectives and some pastoral notes," *Acta Theologica* 27, no. 2 (2007): 1-22. <https://www.ajol.info/index.php/actat/article/view/5497>

<sup>16</sup> Dickerson, B., and Fish, N. J., "Intergenerational trauma: Grandmothers' experiences of confronting HIV/AIDS in the aftermath of apartheid" (Paper, Beyond Reconciliation: Dealing with the Aftermath of Mass Trauma and Political Violence, Cape Town, WC, December, 2009).

in the Western Cape province during apartheid, within the context of the province's past of slavery. Adonis also explored the prominence of intergenerational trauma among children and the grandchildren of victims of apartheid, looking into the impact on the descendants of apartheid survivors<sup>9</sup>. Kim and colleagues also explored this area of research from a psychiatric lens, looking into the impact of maternal trauma on psychiatric outcomes of late adolescents and young adults in the South African context<sup>17</sup>. Although early childhood is an important phase of an individual's development, literature that focuses on the impact of intergenerational trauma on children is scarce. There is thus a window of opportunity to explore and expand this field of research, as well as to contribute towards broadening the enhancement of the early childhood development stage. As socioeconomic status plays a large role in the development of children, narrowing our focus on low-resource communities, which are largely affected by these circumstances, becomes key in this study.

Social connectedness plays a role in trauma-focused intervention as it fosters a pathway to building resilience and equipping communities with the resources required to overcome intergenerational trauma<sup>18</sup>. Social connectedness refers to the quality and quantity of meaningful relationships between an individual and their community, aimed at alleviating social isolation,

---

<sup>17</sup> Kim, A. W., Mohamed, R. S., Norris, S. A., Richter, L. M., and Kuzawa, C. W. "Psychological Legacies of Intergenerational Trauma under South African Apartheid: Prenatal Stress Predicts Increased Psychiatric Morbidity during Late Adolescence and Early Adulthood in Soweto, South Africa," *The Journal of Psychology and Psychiatry* 0, no. 0 (2022): 1-15.  
<https://doi.org/10.1101/2021.01.11.21249579>

<sup>18</sup> Pember, M. A., "Intergenerational Trauma: Understanding Natives' Inherited Pain," *Indian Country Today* (2016).

which is a consequence of and contributing factor to poverty<sup>19</sup>. In this particular study, the impact of social connectedness on intergenerational trauma within early childhood development is pertinent in painting a rich and in-depth picture of the experiences of low-resource communities. It will also narrow the critical gap in research by focusing on a participatory lens within this field of research. Therefore, this present study aims to discover, explore and understand the link between intergenerational trauma and social connectedness in early childhood development – specifically focusing on low-resource communities and their experiences during the COVID-19 pandemic.

### **2.1.1. Intergenerational Trauma**

The concept of intergenerational trauma was first introduced in psychiatric literature through descriptions of behavioural and clinical problems in the offspring of Holocaust survivors<sup>20</sup>. Hesse and Main defined this process as a mechanism by which parents with unresolved trauma transmit it to their children through particular interactional patterns, ensuing in the effects of trauma being experienced without the original traumatic event or experience<sup>21</sup>. Sotero further elaborates on this, expanding the definition three-fold. Initially, the dominant culture perpetuates a mass trauma on a population, which this could be in the form of colonialism, imperialism, war or even genocide; this is then followed by

---

<sup>19</sup> Synergos, “Deepening social connectedness: A review of Synergos’ work to reduce isolation in Southern Africa from 2013-2017” Synergos, n.d.  
<https://www.synergos.org/news-and-insights/2018/report-deepening-social-connectedness-southern-africa>

<sup>20</sup> Yehuda, R., and Lehrner, A., “Intergenerational transmission of trauma effects: putative role of epigenetic mechanisms,” *World Psychiatry* 17, no. 3 (2018): 243-257.  
<https://doi.org/10.1002/wps.20568>

<sup>21</sup> Isobel, S., Goodyear, M., Furness, T., and Foster, K., “Preventing intergenerational trauma transmission: A critical interpretive synthesis,” *Journal of Clinical Nursing* 28, no. 7-8 (2019): 1100-1113. <https://doi.org/10.1111/jocn.14735>



the affected population experiencing and or exhibiting physical or psychological symptoms in response to the trauma; and, in the final phase, the initial population passes these responses to the traumatic experience to subsequent generations, who, in turn, display reactions<sup>18</sup>. These emotional and behavioural reactions may vary across generations, however, they may be similar in manifestation<sup>22</sup>. There is also emerging research focused on the biological components of intergenerational trauma. There has been evidence in the field of epigenetics, which focuses on modifications which take place in subsequent generations as a result of this phenomenon. Epigenetics suggests that our genes can carry memories of the trauma experienced by our ancestors and can influence how we react to trauma and stress<sup>18</sup>. This area of research suggests that intergenerational trauma can manifest physiologically through genetic transmission. Therefore, in the most basic sense, intergenerational trauma acknowledges that exposure to a notably adverse experience impacts an individual to such a great extent that their subsequent generations find themselves grappling with their parents' post-traumatic state<sup>20</sup>. This is particularly relevant in this context, considering the history of oppression and violence perpetuated against marginalised communities in South Africa as a result of colonialism and apartheid.

Throughout history, there have been instances of transgressions against marginalised, persecuted and oppressed communities<sup>12</sup>. Much of literature on intergenerational trauma has emerged from the work with cultural and historical traumas in populations of marginalised communities<sup>21</sup> - from the Holocaust's

---

<sup>22</sup> Abdirahman, R., "Intergenerational Trauma" (master's thesis, Winona State University, 2020).

devastating impact on subsequent generations of survivors<sup>23</sup>, to civil wars such as the societal reverberations of the Stalin regime<sup>24</sup>, to trauma emerging from colonialism, slavery, racism and erasure of culture<sup>25</sup>. It is evident that communities which have been persecuted, enslaved, and marginalised carry the impacts of intergenerational trauma into the present, as society continues to perpetuate forms of racism, antisemitism, and cultural genocide<sup>12</sup>. This trauma is experienced through systemic oppression that continues to haunt these communities, as seen in the South African context. The trauma of being marginalised and oppressed continuously is generationally and culturally devastating.

The process of transmission of intergenerational trauma highlights the notion of parents transferring their unprocessed trauma to their children, who, as inheritors, continue to directly and/or indirectly live in the shadows of their

---

<sup>23</sup> Cohn, I.G., and Morrison, N.M.V., "Echoes of transgenerational trauma in the lived experiences of Jewish Australian grandchildren of Holocaust survivors," *Australian Journal of Psychology* 70 no. 3 (2018): 199-207.

Stanek, D., "Bridging past and present: Embodied intergenerational trauma and the implications for dance/movement therapy," *Body, Movement and Dance in Psychotherapy* 10 no. 2 (2015): 94-105.

Baum, R., "Transgenerational trauma and the repetition in the body: The groove of the Wound," *Body, Movement and Dance in Psychotherapy* 8 no. 1 (2013): 34-42.

<sup>24</sup> Gailené, Danute. "When culture fails: Coping with cultural trauma." *Journal of Analytical Psychology* 64 no. 4 (2019): 53-547.

<sup>25</sup> McKeon, M., "Patterns repeat: Transformation through creativity in research about land and colonialism," *Art/Research International: A Transdisciplinary Journal* 4 no. 1 (2019): 222-239.

Scharf, Miri, and Mayseless, Ofra. "Disorganizing experiences in second- and third-generation Holocaust survivors." *Qualitative Health Research* 21 no. 11 (2019): 1539-1553.

Menakem, R., *My Grandmother's Hands: Racialized Trauma and the Pathway to Mending our Hearts and Bodies* (Las Vegas, NV: Central Recovery Press, 2017).

Campbell, B., "Past, present, future: A program development project exploring post traumatic slave syndrome (PTSS) using experiential education and dance/movement therapy informed approaches," *American Journal of Dance Therapy* 41 no. 2 (2019): 214-233.

Nagata, D. K., Kim, J. H. J., and Nguyen, T. U., "Processing cultural trauma. Intergenerational effects of the Japanese American incarceration," *Journal of Social Issues* 71 no. 2 (2015): 356-370.

parents' raw pain and loss, in relation to their trauma<sup>26</sup>. Not only do they receive it, they also identify with it, ensuring a consistent cycle of unprocessed distress and trauma transmitted across generations<sup>26</sup>. For example, inequality on a macro-level may specifically place families of colour at risk for adverse outcomes. According to Howell and colleagues, mothers' exposure to racism has been associated with higher risk for preterm delivery, maternal depression and bestowing the risk of poor health outcomes in children<sup>4</sup>. For example, a study on the psychological legacies of intergenerational trauma under the apartheid system revealed that prenatal stress increased vulnerability of children in South Africa to psychiatric outcomes, which impact their psychological functioning<sup>27</sup>. In the South African context, this can look like cycles of poverty which entrap many marginalised individuals, transmitting lack of resources and economic inequality from one generation to the next.

The impact of intergenerational trauma is also understood to contribute to the development of various stress-related illnesses, such as depression, post-traumatic stress disorder, and cardiovascular diseases, among others<sup>28</sup>. In systematically marginalised communities, they manifest in higher rates of mental illness diagnosis<sup>24</sup>. Some of these communities have utilised research focusing on intergenerational trauma to raise awareness about the impact of legacies of

---

<sup>26</sup> Knight, Z. G., " In the shadow of Apartheid: intergenerational transmission of Black parental trauma as it emerges in the analytical space of inter-racial subjectivities," *Research in Psychotherapy: Psychopathology, Process, and Outcome* 22 no. 1 (2019): 345.

<sup>27</sup>Kim, A. W., Mohamed, R. S., Norris, S. A., Richter, L. M., and Kuzawa, C. W., "Psychological Legacies of Intergenerational Trauma under South African Apartheid: Prenatal Stress Predicts Greater Vulnerability to the Psychological Impacts of Future Stress Exposure during Late Adolescence and Early Adulthood in Soweto, South Africa," *Journal of Child Psychology and Psychiatry* (2022): 1-15.. <https://doi.org/10.1111/jcpp.13672>

<sup>28</sup>Kim, A. W., "How should we study intergenerational trauma? Reflections on a 30-year birth cohort study in Soweto, South Africa" *Somatosphere*, June, 16, 2020, 1-9.

oppression. For example, African and African diasporic groups have used these studies to push for reparative action and redistributive justice in their respective communities<sup>24</sup>. This highlights the potential of utilising this research to empower and open a window of opportunity for these communities and the children within them.

### **2.1.2. Resilience**

The idea that traumatic impact may ripple into subsequent generations also points to the possible transmission of resilience, flexibility and wisdom in survivors' children; not just vulnerability and damage<sup>29</sup>. The American Psychological Association defines resilience as the process of successful adaptation in the face of adversity, trauma, tragedy and threats, or great sources of stress<sup>18</sup>. The concept of resilience and healing is interlaced with the phenomenon of intergenerational trauma<sup>16</sup>. Denov and his colleagues compared intergenerational resilience to a family heirloom that is significantly passed down from one generation to the next, transferring relics of past traumas and challenges, but also successful coping strategies and adaptations in response to adversities<sup>30</sup>. Therefore, from an intergenerational perspective, just as challenges can be passed down from one generation to the next, so too can strengths and adaptive functioning<sup>30</sup>.

---

<sup>29</sup> Yehuda, R., Lehmer, A., and Bierer, L. M. "The public reception of putative epigenetic mechanisms in the transgenerational effects of trauma," *Environmental Epigenetics* 4 no. 2 (2018): dvy018.

<sup>30</sup>Denov, M., Fennig, M., Rabiau, M. A., and Shevell, M. C., "Intergenerational resilience in families affected by war, displacement, and migration: "It runs in the family"," *Journal of Family Social Work* 22 no. 1 (2019): 17-45. <https://doi.org/10.1080/10522158.2019.1546810>

Community resilience refers to a community's human, institutional, built, and natural capacity to withstand stress and adversity<sup>31</sup>. This definition of resilience highlights dynamic connections between individuals within communities – including psychological, social, economic and ecological – which all contribute towards assisting individuals facing adversity, through building their strengths and ability to adapt. A systems definition of resilience thus aligns with an intergenerational framework, as resilience can be passed down across generations when it is conceptualised as existing both within and beyond an individual<sup>30</sup>. This is particularly valid when looking into the resilience of children, as the ability to cope within early childhood development results from a child's connectedness to their communities and resources around them.

According to Howell and colleagues contextually, positive school environments, tight-knit communities and safe neighbourhoods have been linked to resilient results for children exposed to adverse childhood experiences<sup>4</sup>. Particularly, communities that permit safe play exploration and maximise children's capacities may cultivate adaptive outcomes and enhance positive functioning during early childhood development<sup>4</sup>. The community may thus illustrate a prominent mechanism for disrupting the harmful impact of intergenerational transmission of adverse events, particularly during early childhood development<sup>31</sup>. In that sense, resilience can be further elaborated as the capacity to cope with adversity and continue to develop<sup>32</sup>.

---

<sup>31</sup> Ungar, M., "Modeling Multisystemic Resilience: Connecting Biological, Psychological, Social, and Ecological Adaptation in Contexts of Adversity", in *Multisystemic Resilience: Adaptation and Transformation in Contexts of Change*, ed. Michael Ungar (New York, NY: Oxford Academic, 2021), 6-32. <https://doi.org/10.1093/oso/9780190095888.003.0002>

<sup>32</sup> Bousquet, F., A. Botta, L. Alinovi, O. Barreteau, D. Bossio, K. Brown, P. Caron, P. Cury, M. D'Errico, F. DeClerck, H. Dessard, E. Enfors Kautsky, C. Fabricius, C. Folke, L. Fortmann, B.

### **2.1.3. Social Connectedness**

Resilient systems are connected systems<sup>31</sup>. According to Ungar, the better connected a system is, the more likely it is to provide access to resources that systems need to overcome disruption when the system's own resources become overwhelmed<sup>31</sup>. Therefore, connectedness to those around you permits access to resources available to you, in order to overcome challenges and adversity. In early childhood development, this is crucial, as children do not have much autonomy to access and utilise many of the resources around them. They require caregivers and other adults - such as teachers, grandparents and older siblings, for example - to provide this access to the required resources to not only survive, but thrive. According to Shevell and Denov, connectedness is one of the core components of healing and recovery<sup>33</sup>.

Social connectedness is the key ingredient for resilience and wellbeing<sup>34</sup>. Social connectedness refers to being embedded in a resourceful network,<sup>35</sup> which creates a sense of belonging to a particular community. It translates to the relationships one generates with their communities, environment and the support they thus receive. Social connectedness simply encompasses feeling connected to individuals, community and the environment where they reside, including the

---

Hubert, D. Magda, R. Mathevet, R. B. Norgaard, A. Quinlan, and Staver, A., "Resilience and development: mobilizing for transformation," *Ecology and Society* 21 no.3 (2016):40.

<https://doi.org/10.5751/ES-08754-210340>

<sup>33</sup> Shevell, M. C., and Denov, M. S., "A multidimensional model of resilience: Family, community, national, global and intergenerational resilience," *Child Abuse & Neglect* 119 (2021): 105035.

<sup>34</sup> Frieling, M., Peach, E. K., and Cording, J., *The Measurement of Social Connectedness and its Relationship to Wellbeing* (Wellington, WLG: Ministry of Social Development, 2018).

<sup>35</sup> Schwartz, E., and Shrira, A., "Social Connectedness Moderates the Relationship Between Warfare Exposure, PTSD Symptoms, and Health Among Older Adults," *Psychiatry* 82 no. 2 (2019): 158-172. <https://doi.org/10.1080/00332747.2018.1534521>

resources within<sup>36</sup>. While strong ties, such as those with family members or close friends, provide social support and increase social capital, a personal or community network with weak ties also provides important contributions to one's social capital<sup>36</sup>. Weak ties, which refer to social connections that extend beyond relationships between close friends and family,<sup>33</sup> are significant in connecting people to various resources which can be found in their communities. For instance, such ties foster a sense of respect and a need for social connection between individuals, which is a notable resource in a community for assisting in the generation of resilience<sup>37</sup>. According to Schwartz and Shrira, social connectedness may alleviate the negative effects of trauma exposure<sup>35</sup>.

Using the multisystemic resilience framework, Masten & Motti-Steganidi found that various interconnected factors within the child, families, schools, and communities that interact and work together influence the ability to cope in children<sup>27</sup>. Increased connectedness amongst children increases the likelihood of access to resource systems required to overcome disruptions when the system's own resources become overwhelmed<sup>31</sup>. This is particularly important when looking at low-resource communities, where resource access is sparse. Encouraging social connectedness could increase children's access to resources, which are required to develop their adaptive capacities and overcome their traumas.

---

<sup>36</sup> Deitz, R. L., Hellerstein, L. H., St George, S. M., Palazuelos, D., and Schimek, T. E., "A qualitative study of social connectedness and its relationship to community health programs in rural Chiapas, Mexico," *BMC public health* 20 no. 1 (2020): 852.  
<https://doi.org/10.1186/s12889-020-09008-6>

<sup>37</sup> Norris, F. H., Stevens, S. P., Pfefferbaum, B., Wyche, K. F., and Pfefferbaum, R. L., "Community resilience as a metaphor, theory, set of capacities, and strategy for disaster readiness," *American Journal of Community Psychology* 41 no. 1–2 (2008): 127–150.  
<https://doi.org/10.1007/s10464-007-9156-6>

Through exploring the beliefs, values and experiences of low-resource communities during the COVID-19 pandemic, this present study will focus on understanding the link between intergenerational trauma and social connectedness as phenomena which affect children in early childhood development. This is the main research question which guided this research study: *what role did social connectedness play in experiences of intergenerational trauma in early childhood development during the COVID-19 pandemic?*

## **2.2. Research Method**

The study adopted a qualitative research approach, employing a participatory research design in order to amalgamate scientific knowledge with education and empowerment. Participatory research can be defined as a collection of research designs, methods, and frameworks that utilise systemic inquiry in direct partnership with those affected by the issue, with the intention to bring about change or elicit action<sup>38</sup>. Participatory research aims to engage those who are not necessarily trained in research practices, but belong to or represent the interests of the affected community<sup>38</sup>. This study was thus conducted in collaboration with the community members of Philippi, Western Cape, and Daveyton, Gauteng, in order for them to tell their own stories.

There are a multitude of benefits found with adopting this particular research approach. Firstly, the research can be informed by real-world, relevant

---

<sup>38</sup>Vaughn, L. M., and Jacquez, F., "Participatory Research Methods – Choice Points in the Research Process," *Journal of Participatory Research Methods* 1 no. 1 (2020): <https://doi.org/10.35844/001c.13244>



contexts<sup>38</sup>. Focusing on the impact of the pandemic on low-resource communities ensured that the research was contextually relevant. Secondly, results can be translated into community and non-academic settings<sup>38</sup>. This is important, as the production of results which are practical and valuable in the real-world ensures that communities involved in the research study are able to meaningfully utilise the findings in order to empower themselves and take action. Participatory research recognizes the innate value of ensuring that the community is engaged in research, rather than just a subject of the research. People with lived experiences are experts in their own lives and the issues they have faced, and thus offer a wealth of knowledge and insight to the researchers. In this instance, collaboration with the community of Philippi and community members from Daveyton allowed validation of popular knowledge, personal experiences, and the expressions of feelings of the community members. Through this approach, the process of inquiry in accordance with research goals goes beyond the generation of knowledge and into results that could possibly bring about real-world impact.

There were two methods of data collection employed in this study, telephonic interviews and a focus group. The sample was inclusive of 7 parents and 1 ECD practitioner, with 6 of the 7 parents participating in the focus group, and 1 of them participating in the telephonic interview. The practitioner participated in a telephonic interview as well. The primary research question was: *what role did social connectedness play in experiences of intergenerational trauma in early childhood development during the COVID-19 pandemic?* Our

goal was to understand how social connectedness can impact intergenerational trauma. Community members were asked open-ended questions in order to explore participants' full experience, and ensure they led the discussion.

- *How would you describe social connectedness?*
- *How do you think belonging could impact your community in newer generations and in older generations?*
- *Do you think a sense of belonging or social connectedness could impact people's or multiple generations' experiences of challenges? If yes, how so?*
- *How are children connected to the people in their communities, their environment, and resources available in communities such as this one?*
- *How do these experiences impact their abilities to thrive and live well in cases of challenges?*
- *What resources would be helpful in supporting communities, families and neighbourhoods in creating more experiences of belonging or social connectedness?*
- *What resources would help families better support their children's development in low-resource communities? Particularly their abilities to cope with challenges faced in their families and communities?*
- *How do you think the pandemic affected community bonds or people's experiences of connection?*
- *How do you think the pandemic affected children and children's experiences of connection, belonging or community?*

- *How can connections help children build their ability to face challenges or difficulties such as the pandemic?*

Probing was used depending on the participant's responses, in order to allow for the further exploration of these phenomena. This allowed me to gain deeper meaning and understanding behind responses given, allowing for further elaboration and comprehensive expression of the responses given by the participants to paint a richer, in-depth picture<sup>39</sup>.

Data collected was transcribed verbatim and analysed using thematic analysis, as described by Clarke and Braun<sup>40</sup>. The first phase was familiarisation with the data. The second phase required generating initial codes for the data pertinent to the research questions. The third phase included searching for themes in the generated codes and categorizing them into overarching themes. During the fourth phase, themes were reviewed and refined in order to ensure they were relevant to the study. Throughout the data analysis process, the focus was directed towards identifying how social connectedness played a role in intergenerational trauma affecting children in low-resource communities during the COVID-19 pandemic. This focus was directed by gaining insight into the everyday practices that people in low resource communities engage in, in their attempts to overcome trauma and foster resilience through social connectedness.

---

<sup>39</sup>Healey-Etten, V., and Sharp, S., "Teaching beginning undergraduates how to do an in-depth interview: a teaching note with 12 handy Tips," *American Sociological Association* 38 no. 2 (2010): 157–165. <https://doi.org/10.1177%2F0092055X10364010>

<sup>40</sup>Clarke, V., & Braun, V., "Teaching thematic analysis: overcoming challenges and developing strategies for effective learning," *The Psychologist* 26 no. 2 (2013): 120-123.

### **2.3. Ethics and Limitations**

The focus group was conducted at Philippi Arts Centre, which is a local non-profit organisation located in the neighbourhood, and therefore nearby and convenient for all participants located in Philippi, Western Cape. This aim of convenience was also applied to the telephonic interviews, as participants from Daveyton, Gauteng, were scheduled for telephonic interviews which were of no cost to them, and at a time most convenient to them. This ensured smooth participation regardless of the participant's physical location.

A person-centred research approach was employed for this particular study, centralising the personal subjective experiences of the participant. The best interests of the participants were also taken into account in every step of the research process. It was important to ensure that no participant was subjected to any form of harm through participating in the research, and their dignity was always prioritised. Personal reflexivity – which focuses on personal assumptions, values, experiences, etc. that influence research<sup>41</sup> – was important throughout the research process, and the practice of bracketing, which refers to a method in qualitative research aimed at mitigating the potentially harmful effects of preconceptions by the researcher that may taint the research process, was employed. This allowed me to stay aware of my own projections on the research process, as well as my own emotional wellbeing as a researcher tackling a sensitive and 'taboo' issue such as intergenerational trauma. This allowed me to empathetically listen and engage participants in order to fully hear and

---

<sup>41</sup>Bergold, J., and Thomas, S., "Participatory research methods: A methodological approach in motion," *Historical Social Research/Historische Sozialforschung* (2012): 191-222.

understand their stories, without any form of judgements imposed, or harm projected.

I also ensured that I was aware of my own position as a researcher, as well as the power dynamics that come into play when working with participants in the research process, particularly in a low-resource context. Understanding that I am coming in as an outsider, and thus needed to respect the popular knowledge found within the community was crucial, as people understand their own knowledge better than outsiders do<sup>42</sup>. Creating a 'safe space' was thus needed in order to facilitate sufficient openness that would encourage confidence within the participants in sharing their experiences, and making them aware that whatever they choose to share – no matter how unconventional or critical – will not be used against them. This was done by ensuring that every participant got a fair chance to speak uninterrupted, and every opinion they shared was respected. Prior to the discussion, participants were made aware and ensured that the focus group was a safe space for them to share their stories freely and candidly, and everyone's opinion needed to be respected. This was especially important during the focus groups where conflict could typically arise if an individual expresses a vastly different opinion from the group. It was important to ensure that conflict that emerged was jointly discussed and opinions shared were respected so that conflict tolerance could be achieved. However, during this study, no conflict was encountered between participants.

---

<sup>42</sup>Encyclopedia of Sociology, s.v. "Participatory Research", accessed August 2, 2022, <https://www.encyclopedia.com/social-sciences/encyclopedias-almanacs-transcripts-and-maps/participatory-research>

Participation was voluntary, with participants aware of the fact that they could withdraw from participating in the study at any time, as well as decline to answer any questions, for whatever reason, with no negative consequences. Participants could also request the retraction of any statements made for whatever reason after data collection, which could lead to the statements being considered void. However, during this study, there were no retractions made by participants, for any reason.

There was some difficulty attracting participants to the research study, as intergenerational trauma is a sensitive topic subject to stigma, especially in African communities. There is usually a disinclination to discuss such issues outside the household or in the presence of an outsider, which might have discouraged participation and involvement in the study for most community members. Collaboration with organisations within the community which are connected to community members improved enrolment into the study and improved participation.

Some limitations arose during the focus group, as some participants were more vocal and directed the conversation, while some were more reserved. While this potential for power dynamics is a common occurrence in focus groups, it likely influenced the discussion and may have influenced the views/opinions expressed. The sample size was also small and consisted mostly of much younger parents, with no parents above the ages of 35. This could have limited generalisation of the research findings, as well as narrowed the picture painted by limiting the views and experiences to those of much younger parents.

However, it also highlighted the voices of younger parents, who are usually at the highest risk of experiencing increased levels of stress when entering parenthood, and pose the highest risk of transmission of intergenerational trauma<sup>28</sup>. The lack of demographic diversity such as ethnicity and gender also influenced the generalisation of the findings. The lack of diversity within the sample might have led to the expression of dominant discourses within the communities and left out voices of those who are more marginalised, as communities are heterogeneous, complex and internally stratified. Those with less social capital, less free time or experiencing more marginalisation were harder to reach and thus not well represented in this study.

### 3. ISSUE, EVIDENCE AND KEY FINDINGS

Three main themes emerged from thematic analysis: intergenerational trauma has an impact on the experiences of social connectedness; social connectedness increased coping resources for children; and lastly, connection as a common theme in the coping resources enhancing children’s resilience.

**Table 1**  
*Overview of Themes and Subthemes*

<b>Theme 1:</b>	<b>Intergenerational trauma impacts experiences of social connectedness</b>
<b>Theme 2:</b>	<b>Social connectedness increased coping resources for children</b>
<i>Subthemes:</i>	<i>Social connectedness increased children’s accessibility to coping resources</i>
<b>Theme 3:</b>	<b>Connection as a resilience resource</b>

### **3.1. Theme 1: Intergenerational trauma has an impact on experiences of social connectedness**

Parents and guardians that participated in the research expressed that most of the traumas they have experienced, both as children and as adults, inform their child rearing practices. Traumas that the parents have inherited, experienced or witnessed – such as poverty, domestic violence, oppression and crime – have an influence on the manner in which they raise their children. This includes the way in which they permit their children to engage with their communities, the places they can go, who they interact with, and which resources they have access to and utilise. Zandi, one of the parents from the focus group highlighted the following:

*“as parents we go through traumas and we treat our kids depending on the traumas that we’ve been through as well...”*

She further added:

*“At some point, I had to realize that I’m treating [my daughter] based on my traumas... And this is one thing I say to people that don’t treat the child how you were treated. Don’t do that”*

According to Menzie’s model of intergenerational trauma, one of the indicators of intergenerational trauma is a lack of belonging or identification with a particular community or culture<sup>43</sup>. This lack of belonging interrupts the process of building meaningful relationships with others, and can create low levels of social engagement resulting in increased social isolation. This has an impact on

---

<sup>43</sup>Hoosain, S., “The transmission of intergenerational trauma in displaced families,” (doctoral thesis, University of the Western Cape, 2013).



the manner in which the individual connects with others, their resources, and their community, which is then transferred to their children and future generations. She further expresses the following:

*“It depends on also how much the parents have gone through...It's just that it depends on the parenting, in terms of how much of an 'out there' [the children] get. So I think for [them], they just want to do it all - but the parents, most of the parents most of the time, hold them back”*

In low-resource communities such as Philippi and Daveyton, which have higher crime rates due to decades of systemic poverty, and increased concern for residents safety,<sup>44</sup> there is a tendency to utilise social isolation as a coping mechanism, which further hinders community members' ability to feel a sense of belonging. According to Quinonez, crime in South Africa is a significant issue, driven and rooted in poverty, and an inadequate access to basic resources, which has been a result of apartheid and colonialism<sup>45</sup>. Townships such as Philippi were battlegrounds during apartheid. Such communities were places of refuge for those migrating due to apartheid policies such as the Group Areas Act of 1950 and political unrest, and became settlements for resistance against the apartheid system. Today, they still face various challenges such as poverty and unemployment, as a result of the deeply rooted consequences of these systems'

---

<sup>44</sup>Phaliso, S., “Philippi police station is only open during daylight,” *GroundUp*, July 25, 2020, <https://www.groundup.org.za/article/years-without-electricity-philippi-police-station-is-only-open-during-daylight/>

Masilela, P., “Daveyton police warn against a spike in crimes” *Benoni City Times*, June 4, 2021, <https://benonicitytimes.co.za/415035/daveyton-police-warn-against-a-spike-in-crimes/>

Friedman, B., “Philippi, Cape Town: 13 people killed in 48 hours,” *CapeTalk*, July 8, 2019, <https://www.capetalk.co.za/articles/354084/philippi-cape-town-13-people-killed-in-48-hours>

<sup>45</sup>Quinonez, K., “Poverty-related crime and extracurricular activities,” *The Borgen Project* (blog), September 6, 2021, <https://borgenproject.org/poverty-related-crime/#:~:text=Crime%20in%20South%20Africa%20is,crimes%20were%20reported%20%5B1%5D>.

selective development and perpetuated oppression<sup>46</sup>. The most common concern raised by parents and guardians included a fear of the safety and security of both themselves and their children. Zandi shared the following:

*“There's always a sense of I'm not feeling safe, I'm not feeling secure. I don't feel like I belong, I don't feel like there's a sense of comfortability because you're always trying to check and your guard is always up.”*

People employ this strategy to keep safe, but in doing so are more socially isolated from their community, resources such as pools and parks, and even from the community's members themselves. Nandi, one of the parents, expressed the following:

*“sometimes, parents want to keep the child safe knowing that I know my child is going to be at home - so if something bad happens, it's gonna have to come here [to the house], not you going out looking out for trouble”*

This tendency to isolate is driven by the need to protect children from danger and any threats to their wellbeing. This is informed by the traumatic experiences of the parent, such as being robbed or assaulted within the community. Nandi also shared the following:

*“My friends they keep their children in the yard because [the kids] will be like they're gonna go play. There is a park, but the resources are not there now, they are gone. [We don't know what happened to them]. They'll be like, [they are going to play at the park], but...there are older kids there and those older kids are there robbing [us]. So it's not safe for them to be at the park. So they're better safe here”*

As

---

<sup>46</sup>“Philippi,” *South African History Online*, April 18, 2019, <https://www.sahistory.org.za/place/philippi#:~:text=During%20apartheid%20it%20was%20a,for%20Farms%20in%20the%20area.>

Apartheid brought great hardship to marginalised communities, particularly Black people. The impact of the apartheid regime's racist and oppressive policies which brought about social and economic discrimination and exclusion, along with the underdevelopment of such communities through practices such as the provision of poor quality education and the restrictions on land ownership rights, rippled into the chronic poverty and inequality we see today. Even in the dawn of democracy and liberation, many of these communities, especially black people, still struggle with issues such as access to resources such as basic services<sup>47</sup>, inclusion in the economy<sup>48</sup> and positive mental health functioning<sup>49</sup>. This, compounded with the exploitation and disenfranchisement caused by colonialism, left many of these communities still grappling with the impact these systems have had on their ancestors' lives, their own lives and those of their children. These are the structurally embedded consequences of intergenerational trauma, caused by colonialism and the apartheid legacy's breakdown of socioeconomic infrastructure, such as poverty and increased violence.

---

<sup>47</sup>Campbell, J., "Despite Progress in South Africa After Apartheid, Problems Persist," *Council on Foreign Relations* (blog), May 2, 2019,

<https://www.cfr.org/blog/despite-progress-south-africa-after-apartheid-problems-persist>

<sup>48</sup>Mohamed, H., "30 years since Mandela was freed, where does South Africa stand?" *Al Jazeera*, February 10, 2020,

<https://www.aljazeera.com/news/2020/2/10/30-years-since-mandela-was-freed-where-does-south-africa-stand>

<sup>49</sup>Harriman, N. G., Williams, D. R., Morgan, J. W., Sewpaul, R., Manyapel, T., Sifunda, S., Mabaso, M., Mbewu, A. D., Reddy, S. P., "Racial disparities in psychological distress in post-apartheid South Africa: results from the SANHANES-1 survey," *Social Psychiatry and Psychiatric Epidemiology* 57 (2022): 843-857. <https://doi.org/10.1007/s00127-021-02175-w>

### **3.2. Theme 2: Social connectedness increased coping resources for children**

According to participants, children develop their resilience and the ability to cope with struggles through social modeling by the adults around them, including family, neighbours and role models. Bandura's social modelling theory explains the process of learning from one's environment through observations<sup>50</sup>. Mpho, one of the guardians that participated in the focus group, shared the following:

*"it's more likely that these children will grow up and still resemble whatever this community is, because that's all they see... the things that you're exposed to, you become them"*

According to Bandura's theory of social learning, individuals learn from their interactions with others in a social context<sup>51</sup>. Learning is seen as an interactive process of observing the behaviour of others, assimilating the behaviour and then developing similar behaviours through imitation<sup>45</sup>. In this context, this includes the reproduction of observed coping strategies – which include constructive and destructive mechanisms – children might adopt in order to face various traumatic experiences in their lives. Kgothatso, one of the ECD practitioners shared the following:

*"children are affected by the community because children are very impressionable...children are affected by our actions as adults, and what we do and what they perceive to be, and what we perceive to be right, they presume to be right too because as a child, I don't think they know the difference between right and wrong. So now, if we do the wrong thing*

---

<sup>50</sup>IGI Global, s.v. "social modelling", accessed August 9, 2022, <https://www.igi-global.com/dictionary/adolescents-food-communication-in-social-media/60789#:~:text=1...others%20do%20what%20they%20do>.

<sup>51</sup> Nabavi, R. T., "Bandura's Social Learning Theory & Social Cognitive Learning Theory," *Journal of Personality and Social Psychology* 1 (2012): 589.

*in front of the child, then the child doesn't know the right thing to do. But if we do the right thing, still not in front of the child, then the child also does not pick up the right things we should do, and picks up the wrong things because when they do the wrong things, usually we do them publicly. And when we do the right things, we usually do them apart or away from them”*

Coping strategies children develop thus become a product of the behaviour of the adults around them. This corroborates a study by Aronowitz, which demonstrated that marginalised children and adolescents in adverse circumstances exhibited capabilities to deal with and overcome adversity better when certain factors are present, including social connections with other adults and positive role modelling<sup>52</sup>. When children are much better connected to the adults around them, and these adults exhibit positive and constructive coping strategies, the opportunities to learn and develop these similar patterns of behaviour are enhanced. Dikeledi, one of the parents from the telephonic interviews, echoed a similar statement:

*“As adults, we learn from our mistakes...’I cannot do this in front of the kids, I think I can do better. I don’t want my kids to be the way I am, I don’t want them to grow up the way I am, I just want them to be better than me’... So I think the kids can learn from their elders knowledge”*

She further elaborated, stating the following:

*“It takes a village to raise a child. Children do what they see and what others do... So it’s up to us to teach our children good manners and raise them better... We would teach our kids good deeds. Like when you do good, you get good results”*

---

<sup>52</sup>Aronowitz, T., “The role of “envisioning the future” in the development of resilience among at-risk youth,” *Public Health Nursing* 22 no. 3 (2005): 200-208.

According to McAllister and McKinnon, resilient qualities can be learned or acquired<sup>53</sup>. Through positive role models and the exhibition of strengths and adaptive functioning, resilience can be passed down from the adults in the communities, to the children around them. Meaningful relationships to positive role models, guardians and older community members can provide the foundation for children to expand their coping abilities, through the provision of healthy and secure attachments. Thompson and colleagues suggest that attachment and resilience are complementary concepts with similar developmental conditions<sup>54</sup>. They both begin with a healthy childhood and lead to the development of an adaptive self-esteem, as well as social empathy, which emerge through positive connections with others and one's culture. The presence of attachments to positive adult figures in the community can expand the coping resources of the child, as explained by Kgothatso with the following quote:

*“They can actually be able to speak to adults that are not their parents, so another person that they're comfortable with...the adult would...shed some light to the children as to what is happening. So now they became closer. They became [closer to] other adults that are not their parents”*

Community members can provide resources such as care, support, knowledge and information, safety and security, food, etc. – all which aim to expand the pool of protective factors for the child beyond their families, and contribute towards their development and resilience.

---

<sup>53</sup>McAllister, M., and McKinnon, J., “The importance of teaching and learning resilience in the health disciplines: a critical review of the literature,” *Nurse education today* 29 no.4 (2009): 371-379. <https://doi.org/10.1016/j.nedt.2008.10.011>

<sup>54</sup>Thompson, G., Wrath, A., Trinder, K., and Adams, G. C., “The roles of attachment and resilience in perceived stress in medical students,” *Canadian medical education journal* 9 no. 4 (2018): e69-e77.

### **3.2.1. Subtheme: Social connectedness increased children's accessibility to coping resources**

The participants shared that the presence of resources in the community is overshadowed by a lack of access and/or barriers to those resources. Red tapism refers to this exact phenomenon, which Bozeman simplifies as the usage of excessive or meaningless paperwork, a high degree of formalization and constraint, unnecessary rules, procedures and regulations, inefficiency, and unjustifiable delays, which result in frustration and vexation<sup>55</sup>. These obstructions to resources and resource utilisation deter many from taking advantage of the resources around them. This is especially true in marginalised communities, where hurdles are placed before community members seeking resources. Participants shared that there are resources present in their communities, however, access to these resources is a challenge. Nonkosi, one of the parents from the focus group expressed the following:

*"The resources are there, but when you want to use them, they're not there. So you have to struggle, you have to fight, you have to know people in places in order for you to get help"*

Social capital, an aspect of social connectedness, presents the view of social connectedness as an asset held by individuals and their communities<sup>34</sup>. Portes described social capital as the ability of individuals to secure benefits as a result of membership in social networks and other social structures<sup>56</sup>. Social capital thus affords individuals the ability to expand their resources through the

---

<sup>55</sup>Bozeman, B., "A theory of government "red tape"," *Journal of public administration research and theory* 3 no. 3 (1993): 273-304.

<sup>56</sup>Kondo, V.P., "Red Tape and Belonging: Exploring the Lived Experiences of Social Exclusion for Zimbabwean African International Students Studying in Johannesburg, South Africa," (master's thesis, University of Johannesburg, 2018).

provision of social networks and access to social structures that increase accessibility to these resources. In communities characterised by rich social capital, members feel supported and integrated when their social networks are deep and diverse<sup>51</sup>. Many social capital researchers emphasise the importance of economic capital as the ultimate and eventual source of all other capital<sup>34</sup>. This study revealed that, through connections between community members and the social structures around them, parents and guardians feel they are able to access the required basic resources to contribute towards their children's resilience and positive adaptation, if their basic needs are being met. Mpho, further elaborated on this view through the following quote:

*“if the community is well connected to resources, they would be able to seek help... not only would they know that the resources are there, they would know how to utilize them and use those resources to benefit them... if there's more connectedness, there's more information flowing around.”*

Meaningful engagement between community members can open doors to more information, which increases access to resources. According to Kondo, the quality of an individual's interactions is central in determining the strength of their ties with others, which adds to the accumulation of social capital<sup>53</sup>. In this instance, weak interactions and marginalisation lead to an individual's inability to accumulate high social capital. It should be noted that low-resource communities on the margins are deprived of their social capital as a result of social exclusion by the oppressive systems and structures around them. However, through building meaningful relationships and strong bonds with community members, parents and guardians are thus able to be empowered to increase their children's coping resources by virtue of increasing their own social capital – which can



afford them more access. Social connectedness is thus beneficial in expanding access to resilient resources, especially during the pandemic, where many experienced physical, mental, economic and social challenges.

### **3.3. Theme 3: Connection as a resilience resource**

Many of the coping resources mentioned by participants as pivotal to the development of resilience in children included community involvement and support; a sense of belonging for children and their parents and guardians; as well as structures that promote community bonding such as parks and social clubs. The key thread between these protective factors was the component of connection – to one’s community and its members, as well as the resources such as information and knowledge within that community. This suggested that the resilience of a community greatly influences the resilience of children through the provision of necessary networks and resources to recover. The idea of raising a child collectively, as a broader community through active involvement and support of the child and their wellbeing, was a heavily emphasised notion by the participants. Nandi expressed the following regarding community involvement and support:

*“I think there could be sources where parents come down and talk about, like, 'My child is going through this' – like parents helping each other... we should come together as parents to share our different views on our kids, I think it will make a better community... We should have parenting groups, sessions on how to raise kids these days and what to expect or not. I think that would help”*

This statement was echoed by Zandi, as seen in the following quote:

*“I think we need to have support or focus groups where, as a mother, you're focused on how your mental health is...We don't even want to talk*

*about how [bad] it is... So if we would have those other support groups, or something like that,...we can heal the parents, and [then] heal the child from a young age”*

The gathering of community members in support of one another, and involvement in raising each other’s children, was suggested by most parents in the sample, with many mentioning the benefits of the additional support such as financial relief, childcare services, social support, among others.

According to Shevell and Denov, a community functions to support the growth of its members, promote socialisation and facilitate social inclusion<sup>30</sup>. However, in instances where a community is hit by collective trauma, such as the COVID-19 pandemic, the capacity to fulfil these functions is compromised<sup>30</sup>. Most parent participants expressed that a sense of belonging for both themselves and their children within the community permits a sense of community and solidarity amongst community members. This personal sense of connectedness can improve socialisation amongst community members and facilitate a sense of inclusion, which contributes towards resilience and combating trauma. In order to elaborate on her own experiences of deprived social connectedness and its impact on her sense of unity and support with her community members, Nandi stated the following:

*“I don't fit in... people are minding their own business... Everybody's busy doing their own thing... Everybody's too self-centered, trying to fix themselves without knowing that maybe some child, or my neighbor's kid, last night slept on an empty stomach”*

Kgothatso’s statement can support this view, as it demonstrates the impact of a sense of belonging within a community, as well as the contributions that add to children’s resilient resources:

*“The pandemic actually brought us closer, because then we were able to actually rely on each other...I see how people have grown close to each other because we were able to help each other out during [the] pandemic. One would babysit for the other while the other is at work, so meaning that we were able to come together and bond together as a community to make sure that one's children do not suffer while the pandemic is still happening”*

Participants also expressed the importance of communal places which encourage community bonding and connection, such as parks, community centres, museums and libraries. Facilities which promote socialisation and bonding were said to permit the beginning of dialogues between community members on challenges faced, promote bonding amongst members, and encourage inclusivity of various community members, including those on the margins. Activities which generate a sense of belonging and connection, such as play and team sports, were also mentioned by participants, as many expressed the importance of coming together for leisure and fun in order to generate shared positive wellbeing. Kgothatso shared the following”

*“One thing that I saw in my community was... they actually organized the funding for the learners, for the kids around the community, to actually come and play, they organized for them jumping castles and it was a community initiative. So we actually popped up R20 so that we could hire jumping castles, buy them popcorns so that they could actually come and enjoy themselves while in the midst of the pandemic. So it is so, they don't feel the gap... So they can interact with other children in a more fun space. So sometimes adults would actually play with them [umgusha] and skipping rope. They would actually come with them and play with them. So we were there building on [these] experiences”*

#### **4. RECOMMENDATIONS**

This study focused on exploring the role that social connectedness plays in helping children overcoming intergenerational trauma in low-resource

communities. Interviews and the literature have informed the following recommendations for Motheo Training Institute Trust and other organisations aimed at contributing towards and maximising the healthy and holistic development of children, particularly those within low-resource contexts in South Africa. These recommendations include integrating trauma-informed care into existing organisations and structures within these communities, creating support groups for parents and guardians, creating safe spaces within these communities, and creating inclusive community interventions which aim to decrease familial risk. These recommendations will be discussed below.

#### ***4.1. Introducing trauma-informed care into existing organisations and structures***

Zandi, one of the parental participants from the focus group, stated the following:

*“I feel like if the current organizations would be equipped, because one thing I've also realized is that [with] everyone - this person opens up an organization, is struggling with mental health currently, then they get the funding and all of that. After they move from that, and then another struggle [comes, then] they're gone! So how about we actually empower the organizations that are already there? Like for instance here, we know that there's a mental health problem around. Let's equip the organizations that are already there, because we deal with kids, we need to understand how to go about those things.”*

Resources should be focused on integrating trauma-informed care into already existing organisations within the community, such as non-profits and macrostructures like educational institutions. Trauma-informed care is an approach to mental healthcare which is conscious of the social, psychological and biological effects of trauma, with the centralisation of cultural sensitivity and

humility<sup>57</sup>. A trauma-informed approach recognises the significance of community-level and contextual factors which affect the exposure and recovery processes of a diverse range of adverse and traumatic events. Empowerment of such organisations is ideal, as they are already pillars within their communities and are easily accessible to community members, which is pertinent in providing an alternative to clinical care that is not stigmatised or extremely costly. This should not aim to burden these already encumbered organisations and structures with the weight of providing mental healthcare services. Instead, it should look into empowering them to provide the services and resources they already provide with trauma-sensitive hands. This can include referrals for mental health care services, access to psychoeducation, information on support groups for parents and so forth.

Connections to the community provide an advantage that affords such structures the reach, as they are already trusted by community members, and are functional in the provision of their various services. Often, the individuals who work there are familiar with the culture and general discourse or beliefs of the community. Integrating trauma-informed care into existing organisations which are already part of the everyday practices of community members can promote the adoption of this knowledge and its practices into the everyday lives of community members and create a sense of relation to the cause. This can be done through a capacity-building approach which involves the entire community

---

<sup>57</sup>Gilmer, T.P., Center, K., Casteel, D., Choi, K., Innes-Gomberg, D., and Lansing, A. E., "Developing trauma resilient communities through community capacity-building," *BMC Public Health* 21 (2021): 1681. <https://doi.org/10.1186/s12889-021-11723-7>

in the outreach and engagement of the community, and the implementation of said services.

A capacity-building approach identifies existing assets, skills and strengths within the community, and aims to mobilise and utilise them in order to improve the lives of its members. Through establishing collaborations, identifying needs and emerging issues, and providing access to resources, these existing organisations can activate members within the community and equip them with the skills to provide intervention, and context-appropriate care. Early childhood development centres are excellent places to introduce trauma-informed practice, as they already serve large groups of children. ECD centres already provide a framework that centers early childhood development. They can provide access to information and increase awareness about intergenerational trauma and resilience in children. Equipping practitioners with the knowledge to assist parents, guardians and their children in combating this phenomenon would provide safe spaces for both caregivers and their children to work through such sensitive issues, in a context where they already feel comfortable, relaxed and safe.

#### ***4.2. Support groups for parents and guardians***

Social support is a valuable resource in facing trauma and many other challenges. In the case of intergenerational trauma, the prevention of traumatic outcomes in the child is crucial to building better futures for children. Creating support groups for parents and guardians in order to equip them with the knowledge and skills to prevent transmission and generate resilient qualities in

their children, is an important prevention strategy. Support groups where parents can share information and give each other advice, bond with one another and hold space for their own experiences, provide financial relief and assistance, offer support according to fellow members' needs, and maintain a sense of hope can expand children's internal resources and resiliency by improving the capabilities of the parent to develop and cultivate them. Support groups can also aid in the reduction of stigma by facilitating the sharing of common experiences and reactions<sup>58</sup>.

Support groups which raise awareness and provide information and resources could also prevent parental relational traumatising – which refers to the process of parents transferring their trauma to their children through their interactions and relationships – by creating a safe space to share, connect and talk amongst one another<sup>56</sup>. One of the channels that intergenerational trauma is transmitted is through the silencing of trauma narratives. This is a process whereby family members conceal their trauma from their loved ones, in order to shield them from pain and the emotional burden of that experience; this can occur consciously or unconsciously<sup>12</sup> and intensifies the impact of the trauma as the trauma goes unspoken, unwitnessed or unclaimed<sup>59</sup>. This leads to future generations experiencing a gap in their own stories, which is detrimental to the formation of the self and building a complete picture of one's narrative<sup>12</sup>. The bridge to voicing and assimilating the unspeakable is empathic connection with

---

<sup>58</sup>Kaminer, D., and Eagle, G., "TRAUMA INTERVENTIONS FOR INDIVIDUALS, GROUPS AND COMMUNITIES," In *Traumatic Stress in South Africa*, (Johannesburg: Wits University Press, 2010), 80-121. <http://www.jstor.org/stable/10.18772/22010105096.8>

<sup>59</sup>Phillips, S. B., "The Dangerous Role of Silence in the Relationship Between Trauma and Violence: A Group Response," *International Journal of Group Psychotherapy* 65 no.1 (2015): 64-87. <https://doi.org/10.1521/ijgp.2015.65.1.64>

others<sup>57</sup>. Support groups can also provide an avenue for caregivers to generate their own trauma narratives and write their own stories of resilience. Expanding access to language, which can assist parents with coming to terms with their own internalised trauma, can help them extend this same skill to their children and transmit resilience. It is through language that we are able to liberate ourselves by naming what has happened to us, find healing and connect with others who share similar experiences.

It is important to integrate and adopt already available popular language within the community in dialogues around these topics and recognise the valuable insight it can provide in the development of resilience narratives. Support groups can also allow parents to learn from one another through sharing important resources on parenting, building a supportive network that promotes resilience, and connecting to organisations, which can improve their sense of wellbeing and their family's. There is potential and merit in giving parents and guardians a safe space to learn, where they are surrounded by others sharing similar experiences. Mpho, one of the participants from the focus group shared the following:

*"I think from getting people's different perspectives [we are able to learn]... I think out of connections and connection with others [there is a way for people to learn from others]... Also much more important, is perspectives. Hearing someone else saying something in a different way makes you grow in some sort of way"*

Nandi, who also participated in the focus groups, echoed her statement with the following:



*“they learn new things. Because if you connect with people, you learn new, different things every day... not [only do the kids] learn, [but] the parents also learn”*

### **4.3. Investing in safe spaces**

Following the idea of the creation of safe spaces for parents, the creation of safe recreational spaces for community members is of value, as it could provide a platform for community members to gather and socially connect with one another. The promotion of community bonding and building relationships between community members through fun and enjoyment could grow social capital amongst community members and contribute towards community resilience. Ensuring community members can feel safe in public recreational facilities such as parks, pools, and sports grounds, could encourage meaningful engagement and interactions amongst community members, build trust, and strengthen belonging. These ingredients would make a significant difference in the development of resilience in children. Children learn through play. Play allows children to utilise their creativity as they develop their imagination, dexterity, and physical, cognitive and emotional strength – all which contribute towards brain development<sup>60</sup>. Through play, children can create and explore a world they can master, assisting them in the development of new competencies, which result in enhanced confidence and resilience<sup>56</sup>. Investing in the creation of safe recreational areas can disrupt social isolation and encourage connectedness. Zandi, one of the participants from the focus group, shared the following with regards to creating spaces which allow play:

---

<sup>60</sup>Ginsburg, K. R., “The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bonds,” *PEDIATRICS* 119 no. 1 (2018): 182–91.  
<https://doi.org/10.1542/peds.2006-2697>

*“Because kids are so simple, they don't ask for a lot... we're finding that [the] majority of the kids come to the [art centre] - they're not interested in art, they're interested in playing. So just allowing them to play... Just treating them like they are kids...”*

When play is done in conjunction with parents and guardians, children can benefit from the practice of facing challenges in their lives with the help and guidance of caregivers. Therefore, creating safe recreational spaces could encourage these interactions between caregivers and their children, while encouraging development for the child.

Encouraging positive, healthy interactions between caregivers and their children facilitates bonding. Supporting attachment bonds between children and their caregivers is crucial in limiting children's experiences with trauma, and even healing intergenerational trauma. Supporting the attachment relationship between the child and the caregiver mediates a space where these aforementioned processes can occur. Therefore, creating opportunities for these safe spaces to develop is important in the offset of traumatic transmission. This can be done through collective involvement in recreational activities, provision of information and resources encouraging positive parenting practices, facilitating positive role modeling for the child, reinforcing healthy communication patterns between the child and caregiver, and promoting participation in various aspects of the child's life, such as their interests<sup>61</sup>. Making sure the attachment system – which could be the parent or their guardian – is responsive to the child's varying and changing needs, can initiate connectedness and create a safe space for the

---

<sup>61</sup>Voss, J. M., “Fostering Resilience for Children Living in Poverty: Effective Practices & Resources for EHDI Professionals” *National Center for Hearing Assessment and Management Utah State University*, December, 2015.  
[https://www.infantheating.org/issue\\_briefs/Fostering\\_resilience\\_in\\_children\\_living\\_in\\_poverty.pdf](https://www.infantheating.org/issue_briefs/Fostering_resilience_in_children_living_in_poverty.pdf)

child to face challenges and develop resilient qualities. Protective factors within the caregiver–child relationship, such as positive parenting, may bolster adaptive outcomes for children, highlighting the importance of enhancing parenting capacities within interventions aimed at ending cycles of adversity within the family system<sup>4</sup>.

#### ***4.4. Inclusive community interventions to reduce familial risk***

Interventions targeting individuals need to take into account the wider context within which individuals and their families may be compromised,<sup>21</sup> as the development of intergenerational trauma is embedded in family units and culture<sup>22</sup>. All family members do not need to experience a traumatic incident individually for traumatic outcomes to manifest. It is through interactions with one another that these traumatic outcomes are transferred amongst family members and sustained within the family unit, both consciously and unconsciously<sup>22</sup>. Interventions aimed at helping children overcome trauma and build resilience should be inclusive of their families in order to interrupt dysfunctional relational dynamics, which may maintain intergenerational trauma and subject children to challenges as a result. Raising the family's awareness of risk factors, such as maternal depression and harsh parenting, and activating resources within the unit such as improved communication patterns and access to external support, is critical and could prevent the manifestation of traumatic outcomes in children.

Involving other family members, such as siblings and grandparents, could also provide additional support and expand the child's pool of coping resources. Mobilising family members to support one another through engaging in

conversations centred around generating collective resilient narratives, building on each other's strengths through collaborative problem-solving, conjointly participating in positive activities, such as sports that promote familial bonding and encouraging positive role modeling, can improve the child's sense of belonging – which is also a coping resource. Isolating intervention to just the caregiver and child limits the opportunities to utilise an array of strengths found amongst family members – all which could have varying impact on the child – and the development of a holistic set of protective factors.

Lastly, interventions within the familial context should centralise daily stressors rather than psychiatric epidemiology. Daily stressors such as family conflict, trouble at school, and unemployment can pose a problem in the long run when they are accumulated<sup>62</sup>. They pose a risk on already present resilient capacities of families, which is why equipping families with extra information and support on how to deal with various daily stressors can make a difference in the sustenance of their coping resources. For example, a list of contacts they could reach out to when looking for assistance to deal with family conflict could provide additional support to face such daily stressors and conserve some of their resilient capabilities. On the other hand, it should also be noted that some daily stressors can be beneficial as they can enhance an individual's ability to cope with stressful moments by helping them deal with stressors with greater ease, which can lead to profound personal growth<sup>63</sup>. However, there should be more

---

<sup>62</sup>Charles, S. T., Piazza, J. R., Mogle, J., Sliwinski, M. J., and Almeida, D. M., "The Wear and Tear of Daily Stressors on Mental Health," *Psychological Science* 24 no. 5 (2013): 733–41. <https://doi.org/10.1177/0956797612462222>

<sup>63</sup>Dhabhar, F. S., "The short-term stress response - Mother nature's mechanism for enhancing protection and performance under conditions of threat, challenge, and opportunity," *Frontiers in neuroendocrinology* 49 (2018): 175-192. <https://doi.org/10.1016/j.yfrne.2018.03.004>

resilience factors than risk factors in place to facilitate this process and ensure that one comes out resilient after a challenge. In instances where such a stressor is a result of macrosystems beyond the family's control, for example, unemployment, ensuring that individuals have mechanisms in place to support themselves – and one another – is important. Ensuring family dynamics and interactions are positive and healthy does not diminish the issue, however, it creates a safe space to face it.

## **5. IMPACT**

The following research findings and recommendations can be employed by the Samuel Centre for Social Connectedness, Motheo Training Institute Trust, and other organisations in the child development sphere. The government can adopt these findings and recommendations as well in the implementation of policies centred around early childhood development, as well as in the facilitation of capacity-building projects in low-resource communities in South Africa. They may also collaborate and empower other organisations which interact and engage with children across the board in low-resource communities through increasing their access to knowledge and information, as well as equipping them with resources such as training, in order to enhance and expand their capacities to provide trauma-sensitive services and support resilience generation.

This study has also increased awareness of the impact of intergenerational trauma on children in the community of Philippi and the manner in which social connectedness can be used to abate its deleterious effects. It can be used to further increase awareness on the manner in which social

connectedness can contribute towards early childhood development in low-resource communities in South Africa by encouraging further research centred around this research area – particularly focusing on the child's wider context, such as taking on a family systems approach. Employing social connectedness from a wider lens can diversify the perspectives and open a dialogue which is inclusive of various other important role players in the child's life, such as their siblings.

## **6. CONCLUSION**

Social connectedness plays a significant role in the development of resilience during early childhood development. It functions to abate the impact of intergenerational trauma on children by rallying connections to people and resources around them. Therefore, social connectedness is a protective factor against intergenerational trauma and one of the avenues by which children face challenges in their lives. It expands access to resources and enhances children's resilient qualities as it promotes healthy relationships with others, particularly those with positively impactful adults in their lives. This not only improves access to coping resources, but facilitates healthy and secure attachments for the child, which is important in combating intergenerational trauma. This study highlighted the centrality of connection as the common theme amongst the resources required to combat intergenerational trauma in children from low-resource communities: particularly the importance of connections that create a sense of belonging for the child, creates psychological and physical safety and security and offer various forms of support, such as informational support.

This study was directed by a focus of contributing to the enhancement of early childhood development by investigating the required resources to equip children with the capacities to overcome challenges, particularly in contexts where many challenges of being a child are amplified by living on the margins. Further studies can focus on expanding on these findings by diversifying the sample of participants and the communities from which they were derived. For instance, widening the pool of participants to other significant figures in the child's life. Employing a more biological approach to intergenerational trauma, which studies epigenetic modifications, can widen the understanding of this phenomenon, as well as contribute towards this emerging field in intergenerational trauma research. Including more early childhood development practitioners and professionals that work closely with children such as social workers can also paint a richer picture of this topic. Expanding access to language used to define and explain intergenerational trauma and social connectedness through the adoption of indigenous languages could not only give marginalised groups the power to take charge of their own stories, but also paint a richer picture of these phenomena – this can also be explored further in future.

## BIBLIOGRAPHY

1. Gilmer, Todd P., Center, Kimberly, Casteel, Danielle, Choi, Kyle, Innes-Gomberg, Debbie, and Lansig, Amy E. "Developing trauma resilient communities through community capacity-building." *BMC Public Health* 21 (2021): 1681. <https://doi.org/10.1186/s12889-021-11723-7>
2. Sibeko, Ntombikayise. "ECDs welcome handover to Department of Education." *Benoni City Times*, June, 15, 2022. <https://benonicitytimes.co.za/442551/ecds-welcome-handover-to-department-of-education/>
3. Huston, Aletha C., and Ripke, Marika N. *Developmental contexts in middle childhood: Bridges to adolescence and adulthood*. Cambridge: Cambridge University Press, 2006. <https://doi.org/10.1017/CBO9780511499760>
4. Howell, Kathryn H., Miller-Graff, Laura E., Martinez-Torteya, Cecilia, Napier, Taylor R., and Carney, Jessica R. "Charting a course towards resilience following adverse childhood experiences: Addressing intergenerational trauma via strengths-based intervention." *Children* 8 no. 10 (2021): 844.
5. Mahlangu, Pinky, Gibbs, Andy, Shai, N., Machisa, Marcilene, Nunze, Ncediswa, and Sikweyiya, Yandisa. "Impact of COVID-19 lockdown and link to women and children's experiences of violence in the home in South Africa." *BMC Public Health* 22 no. 1029 (2022):1-11. <https://doi.org/10.1186/s12889-022-13422-3>
6. Dewa, Colleta. "How teen pregnancies skyrocketed in lockdown." *Eurozine*, April, 22, 2022. <https://www.eurozine.com/teen-pregnancies-skyrocketed-in-lockdown/>
7. De Young, Alexandra C., Kenardy, Justin A., and Cobham, Vanessa E. "Trauma in early childhood: a neglected population." *Clinical child and family psychology review* 14 vol. 3 (2011): 231-250. <https://doi.org/10.1007/s10567-011-0094-3>
8. Kaminer, Debbie. "Impact of trauma on children and best practices for intervention." *Mental Health Matters*, no. 4 (2020): 23-25.
9. Kaminer, Debbie, and Eagle, Gillian. "Trauma and Children." in *Traumatic Stress in South Africa*, 122-145. Wits University Press, 2010. <http://www.jstor.org/stable/10.18772/22010105096.9>
10. Encyclopedia Britannica, s.v. "History of South Africa", accessed August 16, 2022, <https://www.britannica.com/place/South-Africa/History>
11. Adonis, Cyril K. "Exploring the Saliency of Intergenerational Trauma among Children and Grandchildren of Victims of Apartheid-Era Gross Human Rights Violations." *Indo-Pacific Journal of Phenomenology* 16 no. 2 (2016): 163–79. <https://doi.org/10.1080/20797222.2016.1184838>
12. Buonagurio, Nora. "The Cycle Continues: The Effects of Intergenerational Trauma on the Sense of Self and The Healing Opportunities of Dance/Movement Therapy: A Literature Review." Master's thesis, Lesley University, 2020. [https://digitalcommons.lesley.edu/expressive\\_theses/280](https://digitalcommons.lesley.edu/expressive_theses/280)
13. Simpson, Michael A. "The Second Bullet" *International Handbook of Multigenerational Legacies of Trauma* (1998): 487–511. [https://doi.org/10.1007/978-1-4757-5567-1\\_30](https://doi.org/10.1007/978-1-4757-5567-1_30)



14. Gobodo-Madikizela, P. *Breaking Intergenerational Cycles of Repetition: A Global Dialogue on Historical Trauma and Memory*. Toronto, ON: Verlag Barbara Budrich, 2016. <https://doi.org/10.2307/j.ctvdf03jc>
15. Coetzer, W. "The impact of intergenerational trauma. Explorative perspectives and some pastoral notes." *Acta Theologica* 27, no. 2 (2007): 1-22. <https://www.ajol.info/index.php/actat/article/view/5497>
16. Dickerson, B., and Fish, N. J., "Intergenerational trauma: Grandmothers' experiences of confronting HIV/AIDS in the aftermath of apartheid" Paper presented at Beyond Reconciliation: Dealing with the Aftermath of Mass Trauma and Political Violence, Cape Town, WC, December, 2009.
17. Kim, Andrew W., Mohamed, Rihlat S., Norris, Shane A., Richter, Linda M., and Kuzawa, Christopher W. "Psychological Legacies of Intergenerational Trauma under South African Apartheid: Prenatal Stress Predicts Increased Psychiatric Morbidity during Late Adolescence and Early Adulthood in Soweto, South Africa," *The Journal of Psychology and Psychiatry* 0, no. 0 (2022): 1-15. <https://doi.org/10.1101/2021.01.11.21249579>
18. Pember, Mary Annette. "Intergenerational Trauma: Understanding Natives' Inherited Pain" *Indian Country Today*, 2016.
19. Synergos. "Deepening social connectedness: A review of Synergos' work to reduce isolation in Southern Africa from 2013-2017." *Synergos*, n.d. <https://www.synergos.org/news-and-insights/2018/report-deepening-social-connectedness-southern-africa>
20. Yehuda, Rachel, and Lehrner, Amy. "Intergenerational transmission of trauma effects: putative role of epigenetic mechanisms." *World Psychiatry* 17, no. 3 (2018): 243-257. <https://doi.org/10.1002/wps.20568>
21. Isobel, Sophie, Goodyear, Melinda, Furness, Trentham., and Foster, Kim. "Preventing intergenerational trauma transmission: A critical interpretive synthesis." *Journal of Clinical Nursing* 28, no. 7-8 (2019): 1100-1113. <https://doi.org/10.1111/jocn.14735>
22. Abdirahman, Ruqia. "Intergenerational Trauma". Master's thesis, Winona State University, 2020.
23. Cohn, Illana G., and Morrison, Natalie M.V. "Echoes of transgenerational trauma in the lived experiences of Jewish Australian grandchildren of Holocaust survivors." *Australian Journal of Psychology* 70 no. 3 (2018): 199-207.
- Stanek, Dörte. "Bridging past and present: Embodied intergenerational trauma and the implications for dance/movement therapy." *Body, Movement and Dance in Psychotherapy* 10 no. 2 (2015): 94-105.
- Baum, Rob. "Transgenerational trauma and the repetition in the body: The groove of the Wound." *Body, Movement and Dance in Psychotherapy* 8 no. 1 (2013): 34-42.
24. Gailené, Danute. "When culture fails: Coping with cultural trauma." *Journal of Analytical Psychology* 64 no. 4 (2019): 53-547.
25. McKeon, Margaret. "Patterns repeat: Transformation through creativity in research about land and colonialism." *Art/Research International: A Transdisciplinary Journal* 4 no. 1 (2019): 222-239.

- Scharf, Miri, and Maysel, Ofra. "Disorganizing experiences in second- and third-generation Holocaust survivors." *Qualitative Health Research* 21 no. 11 (2019): 1539-1553.
- Menakem, Resmaa. *My Grandmother's Hands: Racialized Trauma and the Pathway to Mending our Hearts and Bodies*. Las Vegas, NV: Central Recovery Press, 2017.
- Campbell, Bria. "Past, present, future: A program development project exploring post traumatic slave syndrome (PTSS) using experiential education and dance/movement therapy informed approaches." *American Journal of Dance Therapy* 41 no. 2 (2019): 214-233.
- Nagata, Donna K., Kim, Jackie H. J., and Nguyen, Teresa U. "Processing cultural trauma. Intergenerational effects of the Japanese American incarceration." *Journal of Social Issues* 71 no. 2 (2015): 356-370.
26. Knight, Zelda G. "In the shadow of Apartheid: intergenerational transmission of Black parental trauma as it emerges in the analytical space of inter-racial subjectivities." *Research in Psychotherapy: Psychopathology, Process, and Outcome* 22 no. 1 (2019): 345.
27. Kim, Andrew W., Mohamed, Rihlat S., Norris, Shane A., Richter, Linda M., and Kuzawa, Christopher W. "Psychological Legacies of Intergenerational Trauma under South African Apartheid: Prenatal Stress Predicts Greater Vulnerability to the Psychological Impacts of Future Stress Exposure during Late Adolescence and Early Adulthood in Soweto, South Africa." *Journal of Child Psychology and Psychiatry* (2022): 1-15.. <https://doi.org/10.1111/jcpp.13672>
28. Kim, Andrew. W. "How should we study intergenerational trauma? Reflections on a 30-year birth cohort study in Soweto, South Africa." *Somatosphere*, June, 16, 2020, 1-9.
29. Yehuda, Rachel., Lehrner, Amy, and Bierer, Linda M. "The public reception of putative epigenetic mechanisms in the transgenerational effects of trauma." *Environmental Epigenetics* 4 no. 2 (2018): dvy018.
30. Denov, Myriam, Fennig, Maya, Rabiau, Marjorie A., and Shevell, Meaghan C. "Intergenerational resilience in families affected by war, displacement, and migration: "It runs in the family"." *Journal of Family Social Work* 22 no. 1 (2019): 17-45. <https://doi.org/10.1080/10522158.2019.1546810>
31. Ungar, Michael, "Modeling Multisystemic Resilience: Connecting Biological, Psychological, Social, and Ecological Adaptation in Contexts of Adversity" in *Multisystemic Resilience: Adaptation and Transformation in Contexts of Change*, ed. Michael Ungar, 6-32. New York, NY: Oxford Academic, 2021. <https://doi.org/10.1093/oso/9780190095888.003.0002>
32. Bousquet, Francois, Botta, Aurélie, Alinovi, Luca, Barreteau, Olivier, Bossio, Deborah, Brown, Katrina, Caron, Patrick, Cury, Philippe, d'Errico, Marco, DeClerck, Fabrice, Dessard, Hélène, Kautsky, Elin E., Fabricius, Christo, Folke, Carl, Fortmann, Louise, Hubert, Bernard, Magda, Danièle, Mathevet, Raphael, Norgaard, Richard B., Quinlan, Allyson, and Staver, Charles. "Resilience and development: mobilizing for transformation." *Ecology and Society* 21 no.3 (2016):40. <https://doi.org/10.5751/ES-08754-210340>

33. Shevell, Meaghan C., and Denov, Myriam S. "A multidimensional model of resilience: Family, community, national, global and intergenerational resilience." *Child Abuse & Neglect* 119 (2021): 105035.
34. Frieling, Margreet, Peach, Eric K., and Cording, Jacinta. *The Measurement of Social Connectedness and its Relationship to Wellbeing*. Wellington, WLG: Ministry of Social Development, 2018.
35. Schwartz, Ella, and Shrira, Amit. "Social Connectedness Moderates the Relationship Between Warfare Exposure, PTSD Symptoms, and Health Among Older Adults." *Psychiatry* 82 no. 2 (2019): 158-172.  
<https://doi.org/10.1080/00332747.2018.1534521>
36. Deitz, Rachel L., Hellerstein, Leah H., St George, Sara M., Palazuelos, Daniel, and Schimek, Trisha E. "A qualitative study of social connectedness and its relationship to community health programs in rural Chiapas, Mexico." *BMC public health* 20 no. 1 (2020): 852. <https://doi.org/10.1186/s12889-020-09008-6>
37. Norris, Fran H., Stevens, Susan P., Pfefferbaum, Betty, Wyche, Karen F., and Pfefferbaum, Rose L. "Community resilience as a metaphor, theory, set of capacities, and strategy for disaster readiness." *American Journal of Community Psychology* 41 no. 1–2 (2008): 127–150.  
<https://doi.org/10.1007/s10464-007-9156-6>
38. Vaughn, Lisa M., and Jacquez, Farrah. "Participatory Research Methods – Choice Points in the Research Process." *Journal of Participatory Research Methods* 1 no. 1 (2020). <https://doi.org/10.35844/001c.13244>
39. Healey-Etten, Victoria, and Sharp, Shane. "Teaching beginning undergraduates how to do an in-depth interview: a teaching note with 12 handy Tips." *American Sociological Association* 38 no. 2 (2010): 157–165.  
<https://doi.org/10.1177%2F0092055X10364010>
40. Clarke, Victoria, & Braun, Virginia. "Teaching thematic analysis: overcoming challenges and developing strategies for effective learning." *The Psychologist* 26 no. 2 (2013): 120-123.
41. Bergold, Jarg, and Thomas, Sterfan. "Participatory research methods: A methodological approach in motion." *Historical Social Research/Historische Sozialforschung* (2012): 191-222.
42. Encyclopedia of Sociology, s.v. "Participatory Research", accessed August 2, 2022,  
<https://www.encyclopedia.com/social-sciences/encyclopedias-almanacs-transcripts-and-maps/participatory-research>
43. Hoosain, Shanaaz. "The transmission of intergenerational trauma in displaced families." Doctoral thesis, University of the Western Cape, 2013.
44. Phaliso, Sandiso. "Philippi police station is only open during daylight." *GroundUp*, July 25, 2020.  
<https://www.groundup.org.za/article/years-without-electricity-philippi-police-station-is-only-open-during-daylight/>  
Masilela, Penelope. "Daveyton police warn against a spike in crimes." *Benoni City Times*, June 4, 2021.  
<https://benonicitytimes.co.za/415035/daveyton-police-warn-against-a-spike-in-crimes/>

- Friedman, Barbara. "Philippi, Cape Town: 13 people killed in 48 hours." *CapeTalk*, July 8, 2019.  
<https://www.capetalk.co.za/articles/354084/philippi-cape-town-13-people-killed-in-48-hours>
45. Quinonez, Kristen. "Poverty-related crime and extracurricular activities," *The Borgen Project* (blog), September 6, 2021.  
<https://borgenproject.org/poverty-related-crime/#:~:text=Crime%20in%20South%20Africa%20is,crimes%20were%20reported%20%5B1%5D>.
  46. "Philippi," *South African History Online*, April 18, 2019.  
<https://www.sahistory.org.za/place/philippi#:~:text=During%20apartheid%20it%20was%20a,for%20Farms%20in%20the%20are>
  47. Campbell, John. "Despite Progress in South Africa After Apartheid, Problems Persist." *Council on Foreign Relations* (blog), May 2, 2019,  
<https://www.cfr.org/blog/despite-progress-south-africa-after-apartheid-problems-persist>
  48. Mohamed, Hamza. "30 years since Mandela was freed, where does South Africa stand?" *Al Jazeera*. February 10, 2020.  
<https://www.aljazeera.com/news/2020/2/10/30-years-since-mandela-was-freed-where-does-south-africa-stand>
  49. Harriman, Nigel G., Williams, David R., Morgan, Justin W., Sewpaul, Ronel, Manyapelo, Thabang, Sifunda, Sibusiso, Mabaso, Musawenkosi, Mbewu, Anthony D., Reddy, Sisiragha P. "Racial disparities in psychological distress in post-apartheid South Africa: results from the SANHANES-1 survey" *Social Psychiatry and Psychiatric Epidemiology* 57 (2022): 843-857.  
<https://doi.org/10.1007/s00127-021-02175-w>
  50. IGI Global, s.v. "social modelling", accessed August 9, 2022.  
<https://www.igi-global.com/dictionary/adolescents-food-communication-in-social-media/60789#:~:text=1.,others%20do%20what%20they%20do>.
  51. Nabavi, Razieh T. "Bandura's Social Learning Theory & Social Cognitive Learning Theory." *Journal of Personality and Social Psychology* 1 (2012): 589.
  52. Aronowitz, Teri. "The role of "envisioning the future" in the development of resilience among at-risk youth." *Public Health Nursing* 22 no. 3 (2005): 200-208.
  53. McAllister, Margaret, and McKinnon, Jessica. "The importance of teaching and learning resilience in the health disciplines: a critical review of the literature," *Nurse education today* 29 no.4 (2009): 371-379.  
<https://doi.org/10.1016/j.nedt.2008.10.011>
  54. Thompson, Galilee, Wrath, Andrew, Trinder, Krista, and Adams, Camelia G. "The roles of attachment and resilience in perceived stress in medical students." *Canadian medical education journal* 9 no. 4 (2018): e69-e77.
  55. Bozeman, Barry. "A theory of government "red tape"." *Journal of public administration research and theory* 3 no. 3 (1993): 273-304.
  56. Kondo, Valerie P. "Red Tape and Belonging: Exploring the Lived Experiences of Social Exclusion for Zimbabwean African International Students Studying in Johannesburg, South Africa." Master's thesis, University of Johannesburg, 2018.

57. Gilmer, Todd P., Center, Kimberly, Casteel, Danielle, Choi, Kyle, Innes-Gomberg, Debbie, and Lansing, Amy E. "Developing trauma resilient communities through community capacity-building." *BMC Public Health* 21 (2021): 1681. <https://doi.org/10.1186/s12889-021-11723-7>
58. Kaminer, Debbie, and Eagle, Gillian. "TRAUMA INTERVENTIONS FOR INDIVIDUALS, GROUPS AND COMMUNITIES." In *Traumatic Stress in South Africa*, 80-121. Johannesburg: Wits University Press, 2010. <http://www.jstor.org/stable/10.18772/22010105096.8>
59. Phillips, Suzanne B. "The Dangerous Role of Silence in the Relationship Between Trauma and Violence: A Group Response," *International Journal of Group Psychotherapy* 65 no.1 (2015): 64-87. <https://doi.org/10.1521/ijgp.2015.65.1.64>
60. Ginsburg, Kenneth R. "The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bonds." *PEDIATRICS* 119 no. 1 (2018): 182–91. <https://doi.org/10.1542/peds.2006-2697>
61. Voss, Jenna M. "Fostering Resilience for Children Living in Poverty: Effective Practices & Resources for EHDI Professionals." *National Center for Hearing Assessment and Management Utah State University*, December, 2015. [https://www.infanthearing.org/issue\\_briefs/Fostering\\_resilience\\_in\\_children\\_living\\_in\\_poverty.pdf](https://www.infanthearing.org/issue_briefs/Fostering_resilience_in_children_living_in_poverty.pdf)
62. Charles, Susan T., Piazza, Jennifer R., Mogle, Jacqueline, Sliwinski, Martin J., and Almeida, David M. "The Wear and Tear of Daily Stressors on Mental Health." *Psychological Science* 24 no. 5 (2013): 733–41. <https://doi.org/10.1177/0956797612462222>
63. Dhabhar, Firdaus S. "The short-term stress response - Mother nature's mechanism for enhancing protection and performance under conditions of threat, challenge, and opportunity." *Frontiers in neuroendocrinology* 49 (2018): 175-192. <https://doi.org/10.1016/j.yfrne.2018.03.004>