

**A Tree of Life Informed Exploration of Intergenerational Trauma in  
Second-Generation British Eritreans**

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**Submitted to the University of Hertfordshire in partial fulfilment of the  
requirements of the degree of Doctor of Clinical Psychology**

**August 2025**

*Word Count: 29,992  
Excluding title page, contents, abstract, tables, figures, footnotes, references and  
appendices*

### **Acknowledgements**

First and foremost, all praise and gratitude are due to Allah. None of this would have been possible without His guidance, mercy, and the countless ways in which He has paved the path for me.

To my participants, I cannot thank you enough for your openness, trust, and courage. I am profoundly grateful for the privilege of witnessing your experiences. My hope is that you find recognition and validation in these words, and that this thesis speaks to your experiences.

To my supervisors, Dr Jacqui Scott and Dr Haben Ghezai thank you for your invaluable guidance, reflections, and encouragement throughout this journey. Your feedback and insights have strengthened this work in ways I could not have achieved alone. To my EbE, your time, perspective, and thoughtful contributions have been an incredible asset, working alongside you has been a gift.

I dedicate this work to my family, who have been unwavering pillars of strength and have walked this journey alongside me. To my siblings, whose ideas, conversations, and debates have challenged and inspired me, and who believed in this project before I even had the words for it. To my parents, whose sacrifices, love, support, and *du'ā'* have sustained me at every step; and especially to my mother, without whom none of this would have been possible.

Finally, I dedicate this work to all Eritrean women, whose strength, resilience, and dignity inspire me endlessly.

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### **Abstract**

**Rationale and Aims:** The experiences of second-generation British Eritreans, a community shaped by colonialism, war, and forced migration, are absent from intergenerational trauma research, despite growing recognition of the mental health needs of racialised communities in the UK. This study explored how intergenerational trauma shapes their psychosocial wellbeing, situating lived experiences within historical, cultural, and structural contexts.

**Methods:** Using a critical realist approach, 18 participants took part in Tree of Life and Forest of Life narrative workshops, followed by semi-structured interviews. Data were analysed using reflexive thematic analysis to identify patterns across interviews.

**Findings:** Five themes were identified: (1) *Survival is not the End: Inherited Wounds from War to the Diaspora*, (2) *"You're Just a Spectator": Intergenerational Storytelling and Emotional Inheritance*, (3) *Reconstructing Family in the Diaspora: Survival, Roles and Relational Ruptures*, (4) *Fragmentation to Fluidity: Carving Out an Existence Along the Margins*, and (5) *Carrying the Weight: Emotional Wounds and the Search for Healing*.

Trauma was experienced as an ongoing, structurally embedded condition, reproduced through cultural silencing, disrupted family systems, identity misrecognition, and systemic exclusion, alongside adaptive resilience through spirituality, cultural memory, and collective storytelling.

**Discussion:** Findings challenge individualised, Eurocentric therapy models, proposing a shift from "What happened to you?" to "What do you carry?". This reframing validates inherited survival strategies, recognises systemic injury as a clinical concern, and positions second-generation British Eritrean experiences as critical to reshaping how intergenerational trauma is theorised, researched, and addressed in clinical practice.

## **CHAPTER 1: INTRODUCTION**

### **1.1 Chapter Overview**

In this chapter, I lay the foundations for my thesis on intergenerational trauma in the Eritrean diaspora in the United Kingdom. I begin by outlining my epistemological stance and reflexively positioning myself as a researcher whose lived experience shapes the inquiry. To provide historical grounding, I offer an overview of Eritrea's modern historical context, highlighting key events such as colonialism, armed resistance, and mass forced displacement that are relevant to the study's exploration of intergenerational trauma and second-generation Eritreans.

Following the historical context, I define key conceptual frameworks, situating intergenerational trauma within broader psychological, sociological, and cultural discussions. By synthesising literature, I identify gaps in the field and build a rationale for this research. The chapter concludes by laying the foundation for the systematic literature review that follows.

### **1.2 Epistemological and Researcher Positionality**

#### **1.2.1 Epistemological Stance**

Epistemology fundamentally asks, "*How do we know what we know?*" and explores how knowledge is created and understood (Crotty, 1998). In contrast, ontology is concerned with understanding the nature of reality and existence, asking, "What is the form and nature of reality and, therefore, what is there that can be known about it?" (Guba & Lincoln, 1994, p.108). For this study, I adopt a critical realist ontological position, which asserts that while reality exists independently of individual perception, understanding of that reality is shaped by social, cultural, and historical contexts (Archer, 1995; Bhaskar, 1978).

This position is relevant for studying intergenerational trauma in the Eritrean diaspora, as it acknowledges the material impact of real-world events, such as war, displacement, and imperialism, while recognising that individuals and communities interpret these experiences in diverse ways. Unlike positivism, which seeks universal, quantifiable truths, a critical realist position acknowledges these events as part of an objective reality that has shaped Eritreans lives (Bhaskar, 1978). I am able to engage with the realities of colonial violence, forced displacement, war and the structures that continue to subjugate Eritreans in various contexts outside of Eritrea.

Adopting a critical realist stance allows me to explore how distress is produced through historically rooted structures, such as colonialism, immigration policies and systemic inequalities. Thus, trauma or distress is approached not just as a personal wound but as a socio-political legacy, negotiated within culture, family, and collective experiences.

### **1.2.2 Researcher Positionality: Insider-Outsider Perspective**

*"The qualitative researcher's perspective is perhaps a paradoxical one: it is to be acutely tuned-in to the experiences and meaning systems of others—to indwell—and at the same time to be aware of how one's own biases and preconceptions may be influencing what one is trying to understand."*

(Maykut & Morehouse, 1994, p.123).

I approach this research as a second-generation Eritrean Muslim woman, born and raised in London. My identity has been shaped by the intersections of diaspora, race, and religion. I grew up amid discourses that framed Muslims, Blackness, and immigration through suspicion and criminalisation. This climate informed my awareness of how socio-political narratives shape the lives of marginalised communities.

Working with diverse communities, I witnessed racial inequalities within mental health services (Bignall et al., 2019; Devonport et al., 2023; Grey et al., 2013). I observed how subjugating discourse shaped clinician-patient dynamics, team discussions and diagnostic practices (Alam et al., 2024; Maynard, 2023), perpetuated by "circles of fear" (Keating & Robertson, 2002).

These patterns extended to my community. Eritrean service users often encountered clinicians unaware of histories, cultures, or identities. Despite Eritreans being one of the largest refugee communities in the UK (Office for National Statistics, 2023), there appeared to be a lack of curiosity about who Eritreans were or their context, frequently subsumed under a generic 'Black' identity, a "one-size-fits-all" approach (Bennett et al., 2007). This clinical disinterest mirrored a broader global pattern of Eritrean invisibility. During the independence struggle (1961-1991), the international community "*turned a blind eye to the plight of Eritreans*" (Berketeab, 2007, p.82) in favour of geopolitical interests aligning with Ethiopia. The indifference I witnessed in NHS settings felt like a microcosm of the geopolitical abandonment of Eritrea's right to self-determination.

As Dyche and Zayas (1995) assert, "*never assume with a client; always inquire*" (p. 2). The failure to ask about family histories, cultural meanings, or political trauma meant that Eritrean distress was often medicalised and pathologised without context. I found understanding through literature that highlighted human distress within the historical, social, cultural, and collective experience (Brave Heart, 1998; Fanon, 2008/1952; Herman, 2022/1992; Younis, 2022).

I approach this research as an insider-researcher, bringing a nuanced understanding of the socio-political landscape shaping Eritrean experience. This allows deep engagement with participants' narratives within broader systemic frameworks. I acknowledge the potential

biases and, as Asselin (2003, p.100) notes, I aim to approach data collection with "eyes open," assuming nothing about participants' experiences despite shared cultural ties.

I aim to remain aware of my positionality throughout, engaging in reflexivity to ensure interpretations are guided by participants' voices rather than my preconceptions. I intend to honour the complex, layered realities of Eritrean intergenerational experiences within a framework that does not erase their socio-political roots.

To meaningfully engage with intergenerational trauma in the Eritrean diaspora, it is necessary to understand the history that shaped patterns of displacement. The following section provides a necessarily selective overview of Eritrea's modern history, focused on events with direct relevance to the second-generation British Eritrean.

### **1.3 Contextualising Eritrean Histories and Forced Displacement**

This thesis focuses on the experiences of second-generation British Eritreans, exploring how their familial migration context has been shaped by Eritrea's 30-year struggle for independence. Therefore, the historical background that follows will focus on this context.

#### **1.3.1 Historical Context: Colonialism, War and Resistance**

Eritrea's modern history is shaped by colonial subjugation, national liberation struggles and forced displacement. Eritrea became Italy's first colony in 1890 until the 1940s (Negash, 2004). Italian colonial rule introduced systems of racial segregation, economic exploitation, and epistemic violence (Barrera, 2002; Morten et al., 2021; Wrong, 2005). Under fascist rule in the 1930s, Eritreans were subjected to deepened racial hierarchies, limited educational opportunities, and mostly subordinate positions (Morten et al., 2021). Following Italy's defeat in World War II, Eritrea fell under British administration between

1941–1952 (Kibreab, 2005), continuing patterns of external governance that excluded Eritreans from self-determination (Červenka, 1977).

In 1952, the United Nations (UN) federated Eritrea with Ethiopia, establishing a union that preserved some Eritrean autonomy but without meaningful Eritrean consent (Negash, 1997). Later, Ethiopia formally annexed Eritrea, fully absorbing it into its territory and dissolving its autonomy, which triggered the thirty-year war for independence (1961–1991). The war involved mass violence, displacement, and the strategic erasure of Eritrean identity (Negash, 1997; Kibreab, 2007). As Lyob (1995) argues, the Ethiopian regime sought to suppress Eritrean sovereignty claims by denying their colonial past and recasting them as internal rebels rather than a colonised people seeking decolonisation. This suppression was compounded by international abandonment and lack of support for Eritrean independence (Wrong, 2005), as described by Hill (2004, p.9): *"This independence came from the Eritreans' long history of being ignored by the rest of the world. The indifference and neglect they had suffered had left them with a ferocious sense of individuality."*

### **1.3.2 Eritrean Diaspora in the United Kingdom**

#### **1.3.2.1 Defining "Diaspora" in this Research**

The enduring impacts of colonialism, war, and forced migration have shaped Eritrea's political trajectory and given rise to a global Eritrean diaspora. The concept of diaspora has been widely debated (Bhandari, 2021; Clifford, 1994). Early definitions focused on forced dispersal and exile, often referencing the Jewish experience and centring themes such as victimhood, trauma, collective memory, and longing for return (Safran, 1991). Broader and flexible interpretations include voluntary migration, cultural hybridity, and ongoing transnational ties (Clifford, 1994).

In this research, diaspora refers to the Eritrean community in the UK, whose migration has been shaped by war, displacement, and colonial legacies. This aligns with Clifford's (1994) view of diaspora as both a site of rupture and cultural production, allowing exploration of how identity, memory, and belonging are negotiated across generations.

### **1.3.2.2 Waves of Displacement and UK Settlement**

The Eritrean diaspora is shaped by successive waves of displacement during the thirty-year war (1961–1991), leaving thousands seeking refuge globally (Tewolde, 2005). Currently, Eritreans represent a significantly growing refugee population with 663,085 seeking international protection as refugees or asylum-seekers globally as of 2024 (UNHCR, 2025).

The first significant waves of displacement accelerated in the mid-1970s, following the rise of the Derg regime in Ethiopia, which escalated repression of Eritrean civilians. Many initially sought refuge in neighbouring Sudan before resettlement through international programmes to countries including the UK, Germany, Sweden, Canada, and the United States (Bascom, 1998). Another significant escalation in displacement occurred after Ethiopia's "Red Star Campaign" in 1982, the largest military offensive, leading to intensified violence and widespread displacement (Connell, 1997). Further waves of displacement occurred in the late 1980s, as the Eritrean People's Liberation Front (EPLF) advanced toward victory, many civilians, including children separated from their families, fled the intensifying conflict.

Initially, many Eritreans considered their migration temporary, hoping to return post-independence; however, shifting political alliances, renewed conflict, and restrictive host-country policies often led to unplanned and reactive migration patterns (Thiollet, 2007). Consequently, Eritreans remain among the largest nationalities claiming asylum in the UK, receiving among the highest granted rates at initial asylum decisions (Home Office, 2025).

According to the (ONS) (2023) census, there were 26,100 Eritreans in England and Wales. This was the first time Eritrea was listed as a distinct ethnic identity in national data, reflecting the growing presence in Britain. However, statistics may underrepresent current numbers, given the recent inclusion of Eritrean as an ethnic identity. It is also probable that many Eritreans are accounted for under broader categories such as Black African or Black British, which complicates visibility in data.

Having outlined the historical background of the Eritrean diaspora, the following section discusses the conceptual frameworks used to understand trauma. While trauma has been widely studied in psychology, many dominant models remain individualised, limiting their relevance for communities shaped by collective and structural violence.

## **1.4 Framing Narratives of Suffering**

### **1.4.1 The Limits of Dominant Trauma Models**

Dominant psychological narratives around trauma have largely been shaped by medicalised frameworks. One of the most widely recognised is the Post-Traumatic Stress Disorder (PTSD) diagnosis, which conceptualises trauma as resulting from exposure to a life-threatening event, leading to identifiable symptoms including hypervigilance, emotional numbing, re-experiencing, and avoidance (American Psychiatric Association, 2013).

The PTSD framework emerged in response to geopolitical events such as the aftermath of the Vietnam War and increased recognition of domestic violence and childhood sexual abuse (Herman, 2008/1992). It represented a decisive shift in legitimising the psychological consequences of violence. However, while offering invaluable insights into trauma as a clinical phenomenon, it is understood as an individualistic, single-event conceptualisation of

distress (Kirmayer et al., 2007). This diagnostic orientation assumes that trauma is discrete, with a beginning and end, disrupting an otherwise stable life course (Summerfield, 2001). Such assumptions are inadequate when applied to forcibly displaced or colonised communities, whose suffering is cumulative, chronic, and structurally embedded rather than singular or exceptional. For Eritrean communities, trauma exists not in discrete moments but in a long, layered history of colonial domination, war, exile, repression, and silence. Moreover, returning to a pre-trauma baseline is often irrelevant in contexts where "normality" has never been free from political violence.

These limitations have prompted calls for alternative frameworks reflecting more collective, historically grounded, and systemic understandings of trauma. The following subsections outline key theoretical models that inform this study, while also addressing their relevance and limitations for understanding Eritrean intergenerational experiences.

#### **1.4.2 Reframing Trauma and Moving Beyond the Individual**

It is essential to acknowledge the contested nature of the term "trauma" itself. Rooted in medical discourse, "trauma" carries pathologising implications that may not adequately capture how communities understand their own experiences of suffering, adversity, or hardship. Many Eritreans may conceptualise experiences through frameworks of endurance, divine testing, or collective struggle rather than clinical categories of trauma and recovery (Ghezai, 2017; Fennig & Denov, 2025).

This research uses "trauma" not because it perfectly captures Eritrean experience, but because it represents the dominant discourse through which psychological suffering is understood in Western academic and clinical contexts. Where possible, this thesis also uses terms like "suffering," "adversity," and "hardship" to acknowledge that medicalised language may not reflect how communities themselves understand experiences. This linguistic choice

reflects a broader tension: working within existing academic frameworks while recognising their limitations for capturing non-Western ways of understanding distress.

### **1.4.3 Intergenerational Trauma Literature**

Intergenerational trauma theory (IGT) refers to the transmission of trauma across generations, whereby psychological and physiological impacts experienced by one generation are passed on to future generations (Danieli, 1998; Kellermann, 2001). While initial conceptualisations emerged from clinical work with Holocaust survivors' descendants (Rakoff et al., 1966; Yehuda et al., 2001), the theory has expanded across contexts including Indigenous communities (Brave Heart, 1998), descendants of slavery (Degruy-Leary, 2017), and forcibly displaced populations (Sangalang & Vang, 2017). Mechanisms of transmission are multifaceted, including disrupted attachment, silence, family narratives, socialisation, and emerging epigenetic evidence (Giladi & Bell, 2013; Yehuda & Lehrner, 2018). The following section provides an overview of theories explaining how trauma can be passed down intergenerationally.

### **1.4.4 Mechanisms of Intergenerational Trauma Transmission**

Various psychological frameworks contribute to understanding how trauma transmits across generations. Attachment theory (Bowlby, 1969; Ainsworth, 1979) suggests unresolved trauma in caregivers may rupture emotional attunement, leading to attachment and emotional regulation difficulties in children. Psychodynamic theories suggest transmission through unconscious processes such as projection, introjection, and identification, with unprocessed parental experiences absorbed by children (Kellerman, 2001; Faimberg, 2005).

Family systems theory highlights how trauma can disrupt familial roles and boundaries, often resulting in role reversals, enmeshment, or emotional silencing affecting identity formation

and autonomy (Davidson & Mellor, 2001; Minuchin & Fisherman, 1981). Attachment Narrative Therapy Model (ANT) draws on attachment, systemic and narrative theory, recognising transgenerational processes and patterns within families (Dallos & Vetere, 2021).

IGT research has deepened these insights through empirical evidence. Braga et al. (2012) identified silence, humour, and fragmented disclosure as key patterns in family communication. Across families, intergenerational narratives shape identity formation (Thompson et al., 2009), especially in contexts of shared collective experiences (Veronese et al., 2023).

Ecological systems theory (Bronfenbrenner, 1979) emphasises the interplay between individuals and multiple contexts, including family, community, and sociopolitical systems. Social learning models suggest children may internalise coping mechanisms and behavioural patterns through observation and reinforcement (Bandura & Walters, 1977). Sociocultural models incorporate broader historical and structural influences such as racism, colonialism, and forced displacement, recognising how cultural disconnection, historical silencing, and collective memories contribute to trauma persistence or transformation across generations (Sotero, 2006; Alexander, 2004).

Epigenetic research suggests that trauma can affect gene expression across generations. Yehuda et al. (2014) and Yehuda and Lehner (2018) found that Holocaust survivors' offspring with PTSD exhibited lower methylation of the glucocorticoid receptor gene (GR-1F) and lower cortisol levels, indicating altered stress regulation. Further study findings suggest the possibility that trauma becomes "biologically embedded," affecting not only psychological wellbeing but also physiological stress systems (Bader et al., 2014; Daskalakis et al., 2021). Beyond Holocaust survivors, Sarigedik et al. (2022) found reduced amygdala volume in

children of earthquake survivors, highlighting potential trauma-linked neurodevelopmental changes.

While these studies are essential in highlighting the impact of trauma, focus on biological models may risk shifting attention from structural and historical causes, inadvertently reinforcing deterministic or pathologising interpretations (Atkinson et al., 2010; Kirmayer et al., 2007). Gone (2013) challenges the prevalence of biological explanations, suggesting that these may pathologise communities when removed from their political and cultural grounding.

IGT literature is beginning to recognise heterogeneity across populations. Sangalang and Vang's (2017) review of refugee families highlights different findings depending on national recognition, sociopolitical context, and community support. Daud et al. (2005) found heightened PTSD symptoms among refugee children in Sweden, while other studies show resilience in similarly affected groups. This complexity reinforces the need for nuanced, culturally grounded methodologies that move beyond deficit models and capture both suffering and resistance. Findings from a systematic literature review on intergenerational collective trauma, which includes trauma from war, genocide, systemic oppression and natural disaster, highlighted physiological, psychological, and social impacts on second-generation descendants (El-Khalil et al., 2025). It identified biological effects and changes to stress regulation and brain structure; findings that are consistent with previous studies (Yehuda et al., 2016). It also provides a social-relational model for how trauma is expressed intergenerationally through emotional restraint, identity fragmentation, and distrust (Giladi & Bell, 2013).

Overall, IGT literature has evolved into a multidisciplinary field but remains skewed toward clinical pathology, biomedical determinism, and Eurocentric frameworks. Indigenous and postcolonial scholars (Fanon, 1963/1961; Walters et al., 2011) argue that trauma must be

understood not just as an inherited wound but as a response to ongoing postcolonial conditions. These critiques emphasise the need to incorporate structural violence, cultural narratives, and spiritual worldviews, dimensions often excluded from dominant models.

#### 1.4.5 Historical Trauma

Historical trauma theory (HTT) builds on intergenerational trauma by explicitly linking structural violence, political subjugation, and cultural rupture to collective memory (Brave Heart, 1998). Developed primarily from work with Native American and First Nations populations, HTT conceptualises trauma not as an isolated event, but as the cumulative psychological and emotional wounding across generations resulting from group trauma, such as colonisation, genocide, slavery, and cultural erasure (Brave Heart, 1998; Sotero, 2006; Evans-Campbell, 2008).

More recent definitions of HTT have expanded beyond colonisation as a prerequisite. Mutuyimana and Maercker (2023, p.730) define it as "*psychological and emotional injuries shared collectively across generations resulting from past collective traumatic experiences or events... associated with various clinical psychological disorders and risk behaviours within a group that share a similar social, historical, and political background.*"

Unlike PTSD, which focuses on discrete events and intrapsychic symptoms, HTT centres systemic violence and its reproduction through institutional racism, poverty, land dispossession, and cultural suppression (Gone, 2013; Atkinson, 2002; Wesley-Esquimaux & Smolewski, 2004). Atkinson's traumagram illustrates how unaddressed historical trauma becomes embedded in family systems through patterns of violence, substance misuse, and internalised oppression (Atkinson, 2002). Therefore, HTT is increasingly recognised not only as a clinical construct but as a political and cultural one.

#### **1.4.6 Collective Trauma**

Collective trauma refers to the psychological and emotional impact of traumatic events experienced by groups or societies. It extends beyond individual suffering to include shared meaning-making, memory, and identity reconstruction processes. Hirschberger (2018) defines it as "*psychological reactions to a traumatic event that affect an entire society...an ongoing reconstruction of the trauma in an attempt to make sense of it* (p. 1).

While collective trauma may emerge from both natural and human-made events, cultural trauma theory (Alexander, 2004; Eyerman, 2001) highlights how trauma becomes collective through the social construction of meaning around it. According to this view, the traumatic quality of an event is not inherent but produced through collective narratives, public acknowledgement, and the perception that a group's identity has been irreparably harmed.

Collective trauma does not remain fixed in time; instead, it is transmitted across generations through inherited narratives, silence, mistrust, and embodied cultural practices (Volkan, 2001; Hirschberger, 2018). These intergenerational effects are shaped not only by family and community but also by political recognition or erasure of the traumatic event (Czyzewski, 2011; Danieli, 1984; Lin et al., 2009).

#### **1.4.7 Postcolonial Trauma Theory**

Postcolonial trauma theory focuses on the psychological impact of colonisation, epistemic violence, and cultural domination (Fanon, 1963/1961; Bhabha, 1994; Craps, 2013). A postcolonial lens challenges individualised, medicalised, and event-based approaches that have shaped Eurocentric understandings of trauma. Fanon (2008/1952) argued that colonial violence distorts subjectivity, producing internalised inferiority, alienation, and a fractured sense of self. As Said (1989) describes, "*To be one of the*

*colonised is potentially to be a great many different, but inferior, things, in many different places, at many different times."* (p. 207).

Central to postcolonial theory is Bhabha's (1994) concept of unhomeliness, the condition of being physically housed but psychologically and culturally displaced. This concept captures the experience of diaspora communities who may be settled in new countries yet remain psychologically uprooted from the cultures of origin, describing a liminal space where individuals exist between cultures.

Postcolonial trauma theory calls for theories that are culturally sensitive, less Eurocentric, and grounded in the lived realities of global communities and suggests that trauma might not always be the only lens to understand every kind of suffering (Andermahr, 2015). A decolonised trauma theory has been proposed to actively engage with non-Western modes of knowing, including orality, forgiveness, spirituality, and ritual (Visser, 2015).

### **1.5 Research on the Eritrean Diaspora**

Second-generation populations in the UK, particularly those from African backgrounds, remain under-researched in psychological literature. Much of the existing literature on refugee wellbeing has focused on more widely recognised groups, such as Syrians and Afghan refugees, often in response to geopolitical crises (Gladwell & Elwyn, 2012; Husni et al., 2014; Jones, 2010; Paudyal et al., 2021; Robertson-Rose, 2022; Tattan et al., 2020; Wood et al., 2022). There are growing research contributions to addressing their respective mental health needs (Beuthin et al, 2023; Hosseini et al., 2024).

Eritrean communities are especially marginalised, despite research highlighting the heightened mental health risks faced by refugees due to pre-migration trauma, post-migration stress, and systemic inequalities (Close et al., 2016). While limited, existing

literature on Eritreans in the UK offers insights into identity, parenting, and integration.

Tsegay (2023) and Ali et al. (2018) both highlight how Eritrean parents seek to break intergenerational parenting practices, navigate between collectivist values and British norms, and strive to protect cultural identity while responding to challenges such as systemic racism, lack of familial support, and fear of cultural loss. These studies suggest that identity negotiation is central to the diaspora experience, though both are limited in scope, with narrow samples and minimal attention to structural inequalities. Other studies have explored the mental health of Eritrean refugees and violence against women in the UK (Ghezai, 2017; Pollard & Howard, 2021; Tsegay & Tecleberhan, 2023, 2025).

Further research on the lived experiences of Eritreans is necessary to address the community's unique challenges. Responses to the needs of the Eritrean community have often been reactive and crisis-driven. For instance, Lambeth Council commissioned a report to assess the needs of Eritrean communities in the London boroughs of Lambeth and Southwark, prompted by the murder of Eritrean teenager Arsema Dawit in 2008. The report aimed to better understand the sociocultural context and specific challenges faced by the Eritrean community, to identify acute concerns and inform appropriate interventions (Eritrean Community Needs Report, 2009).

Similarly, in 2017, a series of suicides among young Eritrean refugees in London highlighted severe gaps in mental health provision and the failure of services to adequately meet the needs of this population. In response, the Da'aro Youth Project was established as a community-led initiative to provide culturally responsive support for young Eritrean asylum seekers and refugees (Da'aro Youth Project, n.d.). These examples illustrate a broader pattern of reactive rather than proactive institutional engagement, where action occurs after critical incidents. They reflect both the urgency of need and the lack of sustained, preventative attention from formal support systems.

## **1.6 Summary**

This chapter introduced key frameworks that move beyond individual pathology to consider systemic, intergenerational, and collective dimensions of suffering, which are important for understanding the lived realities of diasporic communities such as the Eritrean diaspora. The next chapter builds on this by presenting a systematic literature review of empirical studies on trauma in refugee and post-conflict communities to identify frameworks and gaps relevant to the Eritrean experience.

## **CHAPTER 2: SYSTEMATIC LITERATURE REVIEW**

### **2.1 Chapter Overview**

This chapter presents a systematic literature review (SLR), building on the theoretical foundations introduced earlier, relevant to the experiences of the Eritrean diaspora in the UK. The review was prospectively registered on PROSPERO (CRD420251012076). It aims to identify, evaluate, and synthesise existing literature (Centre for Reviews and Dissemination, 2009), particularly as it manifests within refugee populations (Sangalang & Vang, 2016).

### **2.2 Rationale for the Current SLR**

Trauma theories have increasingly shifted from individualised, medicalised frameworks such as PTSD to approaches that centre political and historical context. Intergenerational, historical, collective and postcolonial trauma theories offer broader perspectives on how trauma is passed down across generations.

These frameworks have predominantly been focused on Holocaust survivors and Indigenous communities who remain in their ancestral lands despite a colonial legacy and cultural loss (Brave Heart, 1998; Kellermann, 2001, 2013; Whitbeck et al., 2004). Biological and psychological studies have established the intergenerational transmission of trauma (Yehuda & Lehrner, 2018), yet such models risk pathologising individual responses and overlooking the intersection of structural, political, and historical factors of distress (Fanon, 1963; Atallah, 2017).

Literature on collective trauma covers events impacting a group of people, including natural disasters or community-wide disruptions, which might not reflect the specific postcolonial realities relevant to the Eritrean diaspora (Eyber & Ager, 2004; Silove, 2018).

There is a shortage of conceptual frameworks addressing communities like the Eritrean diaspora, whose history includes colonisation, war and forced migration (Hepner, 2009). Eritrean diaspora experiences often involve extended separation from homeland ties, cultural disruptions, and challenges related to identity and intergenerational relationships (Bernal, 2014).

Comparable patterns can be observed among other diaspora and forcibly displaced communities affected by systemic marginalisation, cultural repression, and colonial or postcolonial violence. Examples include Palestinians, Rohingya, Western Sahrawis, Tibetans, and Uyghurs. Despite differing political and legal contexts, these communities share experiences of protracted displacement, contested national identities, and collective trauma shaped by structural and historical injustice (Beiser & Hou, 2016).

An initial scoping review identified gaps in trauma frameworks tailored specifically to such contexts. An SLR (Palitsky et al., 2024) aimed to offer a broad synthesis across various populations and trauma types. As the review included trauma from natural disasters, the review was less specific in addressing the nuanced historical and sociocultural dimensions pertinent to Eritreans and comparable communities.

There remains no SLR focused on how historical, collective, and intergenerational trauma is conceptualised in diaspora communities formed through forced migration. This gap restricts both theoretical development and clinical relevance, and without a grounded synthesis of how trauma is understood across relevant populations, efforts to conceptualise or respond to trauma within communities like the Eritrean diaspora risk being reductive or culturally irrelevant.

### **2.3 Aims of the Review**

This review addresses a gap by examining theoretical frameworks of trauma to synthesise how intergenerational, historical, and collective trauma are conceptualised in refugee and post-conflict diaspora communities. The guiding question is: *What does the existing empirical literature tell us about frameworks developed to understand historical, collective, and intergenerational trauma in refugee and post-conflict diaspora communities?*

### **2.4 Conceptual Lens**

Following narrative synthesis guidance (Popay et al., 2006), this review adopts a decolonised lens (Fanon, 1963/1961; Maldonado-Torres, 2007). This lens views distress as rooted in historical and structural violence, relationally transmitted, culturally expressed, and requiring frameworks that centre lived experience, political context, and community resilience. It also guided the study selection, interpretation, and synthesis of findings.

### **2.5 Methodology**

A narrative synthesis approach was used (Popay et al., 2006) due to the review's conceptual focus on synthesising frameworks to understand trauma across refugee and post-conflict diaspora communities.

This method suited the heterogeneity of study designs, populations, and conceptual models in the literature, integrating qualitative and mixed-methods studies. It was chosen over meta-synthesis, realist synthesis and thematic synthesis for its flexibility and suitability for conceptual mapping. Narrative synthesis enabled critical reflection on how intergenerational, historical, and collective trauma is conceptualised, and supported the identification of gaps, emerging frameworks, and epistemological limitations.

The SLR adheres to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines (Page et al., 2021). Literature search used inclusion and exclusion criteria informed by the SPIDER tool (Cooke et al., 2012) (See Table 1). SPIDER was chosen for its relevance to conceptual framework reviews. While traditionally applied to qualitative and mixed-methods oriented research, this review included qualitative, quantitative, and mixed-method studies to capture relevant empirical studies.

**Table 1**

*SPIDER Framework for Literature Review*

<b>SPIDER</b>	
<b>S-SAMPLE</b>	Refugees, asylum seekers, displaced communities, post-conflict diaspora communities, specifically Eritrean diaspora and comparable groups experiencing forced displacement and historical trauma. No age restrictions were applied to include multigenerational perspectives.
<b>P-PHENOMENON OF INTEREST</b>	Conceptual, theoretical, explanatory frameworks developed to understand historical trauma, intergenerational trauma, collective trauma, displacement trauma or cultural trauma
<b>D-DESIGN</b>	Empirical studies using qualitative, quantitative or mixed-method designs.
<b>E-EVALUATION</b>	How trauma is conceptualised, the strengths and limitations of frameworks
<b>R-RESEARCH TYPE</b>	Empirical and peer-reviewed studies

The review focused on refugees, asylum seekers, forcibly displaced persons, and post-conflict diaspora communities, including second- and third-generation descendants.

Populations shared socio-political and historical contexts similar to Eritreans in the diaspora, shaped by forced displacement, systemic violence and colonialism.

The phenomenon of interest was conceptual frameworks to understand historical, collective, and intergenerational trauma, including cultural, socio-political, or decolonial models. Studies were included regardless of geographic setting and could be qualitative or quantitative, with no age or publication date limits.

Exclusions were PTSD and Complex Post Traumatic Stress Disorder (C-PTSD)—only studies, non-empirical works, and non-English publications. PTSD frameworks were excluded for individualising distress (Burstow, 2005), misaligning with the review’s focus. While intergenerational trauma was first recognised over 50 years ago (Rakoff, 1966), early literature focused on Holocaust survivors (Danieli, 2013; Shmotkin et al., 2011). Broader literature emerged from the 1990s onwards, alongside key developments in trauma theory and refugee studies (Chou & Buchanan, 2021; Brave Heart, 1998; Eyerman, 2001). The table below reflects the inclusion/exclusion criteria.

**Table 2**

*Inclusion and Exclusion Criteria for SLR*

Inclusion	Exclusion
<ul style="list-style-type: none"> <li>• Studies focused on refugee or post-conflict diaspora communities</li> <li>• Including descendants of forcibly displaced persons</li> </ul>	<ul style="list-style-type: none"> <li>• Studies primarily focused on PTSD or C-PSTD</li> <li>• Studies that did not include a conceptual or theoretical framework</li> </ul>

- 
- Studies exploring historical, collective, intergenerational or cultural trauma
  - Studies that included or applied a theoretical or conceptual framework
  - Empirical studies with qualitative, quantitative, or mixed methodologies
  - Non-empirical studies (e.g. commentaries, opinion pieces, editorials)
  - Studies focused on military veterans unless identified as refugees
  - Studies on diasporic populations without a European colonial legacy
- 

### 2.5.1 Search Strategy

An electronic search was conducted across PubMed, Medline, Scopus, CINAHL and PsychInfo (all searched on 23.06.2025). These databases were selected to capture interdisciplinary literature spanning health, psychology, migration studies, and social sciences, which are relevant to the conceptual focus on trauma, displacement, and identity.

The search strategy was developed in line with the inclusion and exclusion criteria and was also informed by a preliminary scoping literature search. Boolean operators (“AND”/“OR”) were used to combine search terms within and across these concepts.

Search terms were initially kept broad to maximise the output. However, the preliminary search revealed a limited number of relevant studies. To improve relevance, the strategy was revised to include methodological filters (concept 4), which focused the search on empirical studies. No geographical restrictions were applied at the search stage to avoid prematurely excluding potentially relevant literature. Table 3 provides a summary of the search terms used across all databases.

**Table 3**

*SLR Search Terms*

<b>Concept 1: Population</b>	“Post-Conflict Diaspora” OR “Asylum Seeker” OR “Forcibly Displaced” OR Diaspora” OR “Second-Generation Immigrants” OR “Refugee”
<b>AND</b>	
<b>Concept 2: Phenomenon of Interest</b>	“Intergenerational Trauma” OR “Historical Trauma” OR “Collective Trauma” OR “Cultural Trauma” OR “Displacement Trauma”
<b>AND</b>	
<b>Concept 3: Frameworks</b>	“Conceptual Framework” OR “Theory” OR “Model” OR “Explanatory Model” OR “Trauma Theory” OR “Construct” OR “Theoretical model” OR “Trauma” OR “Framework” OR “Trauma Model” OR “Framework”
<b>Concept 4: Methodology</b>	“Qualitative” OR “Quantitative” OR “Mixed Methods”

Alerts were created on each database to monitor newly published studies during the review period. Additionally, reference lists of included articles were reviewed (snowballing) to identify further relevant literature not captured through the database search.

**2.5.2 Selection Process/Data Extraction**

The search strategy returned a total of 332 papers. Of these papers, 42 duplicates were automatically removed by Covidence, and one additional duplicate was manually identified, resulting in 289 papers. Titles and abstracts were screened, and 261 studies were excluded for not meeting the inclusion criteria. A full-text review of 28 papers was conducted.

Following the preliminary search, much of the literature on intergenerational, collective and historical trauma was focused on Holocaust survivors and Aboriginal communities. While this body of work is significant, it risks dominating the evidence base and marginalising voices from colonised and displaced populations. To align with the review's aim of exploring trauma in refugee and post-conflict diaspora communities, an additional exclusion criterion was later introduced. Studies involving populations without a historical legacy of European colonisation were excluded.

Of the 28 full-text articles assessed, seven studies were excluded for focusing on populations such as Holocaust survivors or diaspora populations from Bhutan and China. While these groups have experienced significant trauma and displacement, their historical and structural contexts were not directly comparable to the Eritrean context. The review was therefore limited to communities from regions such as Palestine, Somalia, Cambodia, Sri Lanka, and other areas where experiences of colonisation, conflict, and subsequent diaspora formation created comparable structural contexts relevant to understanding the Eritrean diaspora experience.

I noticed that very few studies from South America appeared in my search, despite the region's extensive European colonial legacy. This raised questions for me about whether intergenerational and historical trauma is under-researched in Latin American contexts or whether relevant studies were published using different conceptual language or in non-English outlets that were not captured by my search terms and database selection.

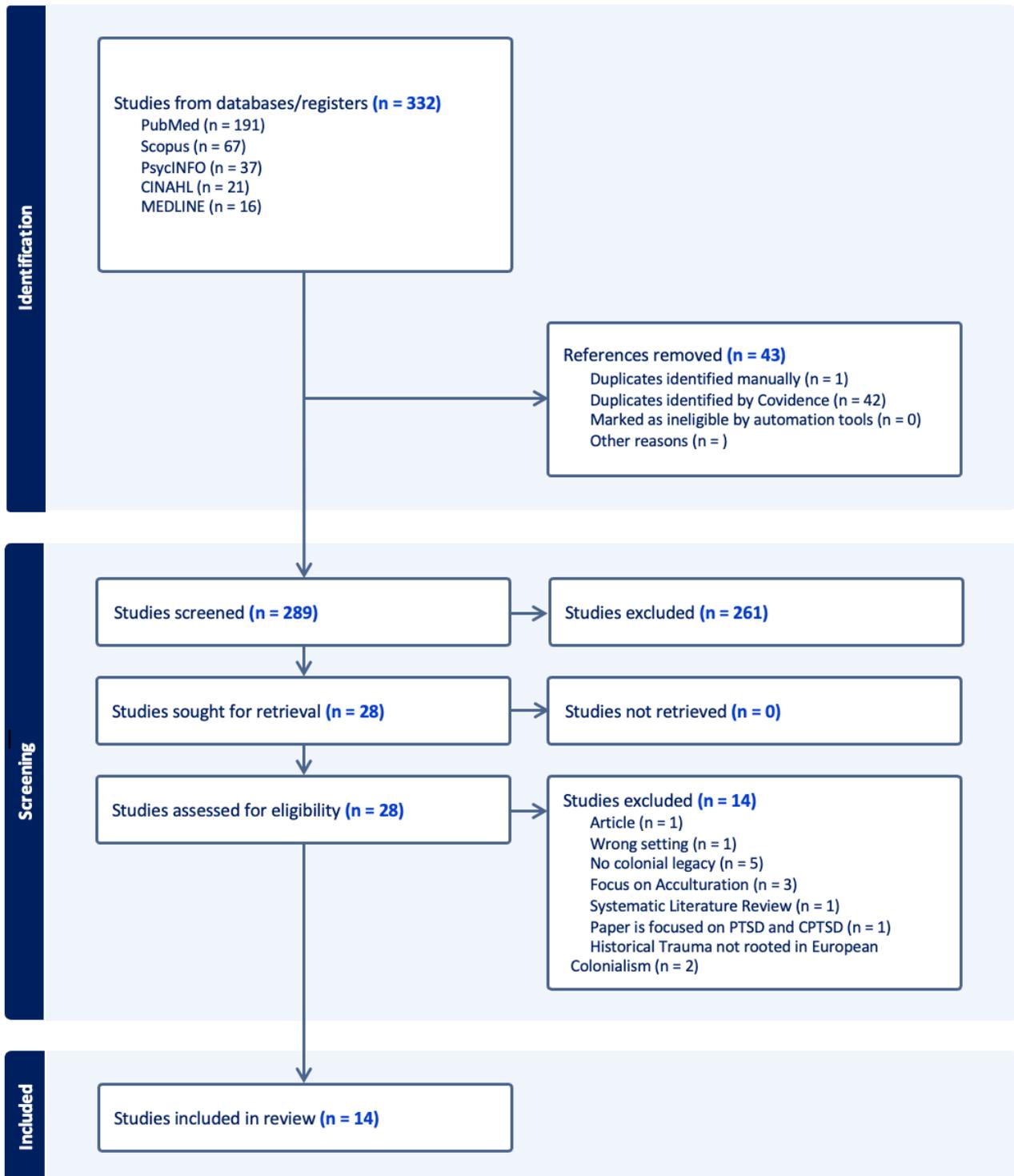
From the remaining twenty-one papers, three were excluded for primarily focusing on acculturation, and one used a clinical diagnostic framework, e.g. PTSD, which did not align with the review's conceptual lens. Another paper was excluded for exploring trauma in a population that had not migrated and remained in their country of origin, and one was a systematic literature review.

This resulted in a final sample of 14 studies that met all inclusion criteria. Reference lists of these 14 studies were reviewed, but no additional eligible papers were identified. All screening and selection were conducted by the primary researcher due to resource limitations. Figure 1 provides a PRISMA flow diagram outlining the selection process.

**Figure 1**

*PRISMA Flow Diagram of Selection Process*

Frameworks for Understanding Historical, Collective, and Intergenerational Trauma in Refugee and Post-Conflict Diaspora Communities



## **2.6 Preliminary Synthesis**

### **2.6.1 Summary of Key Characteristics of Included Studies**

The final search identified 14 empirical studies that focused on intergenerational or collective and/or historical trauma across a range of cultural groups and socio-political contexts. The majority were conducted in high-income countries, with additional studies based in the Occupied West Bank. The populations studied included Palestinian, Cambodian, Syrian, South Sudanese, Somali, Tamil, Vietnamese, Hmong, and Karen refugees.

Most of the studies employed qualitative methodologies, including grounded theory, phenomenology, thematic analysis and participatory action research (PAR). One study used a mixed-method approach, combining quantitative path analysis supplemented with qualitative interviews. All included studies presented or applied a conceptual or explanatory framework for understanding intergenerational, collective and historical trauma.

Four of the studies focused on Palestinian communities (Atallah, 2017; Elkhalid et al., 2025; Mahamid, 2020; Veronese et al., 2023), three conducted in the Occupied West Bank and one in the United States. Although Palestinians in the West Bank do not strictly fit the definition of a post-conflict diaspora, they remain a refugee and displaced community unable to return home.

Three studies explored the experiences of the Cambodian diaspora (Lin, 2009; Lin & Suyemoto, 2016; Pol-Lim & Slater, 2024). Four studies concentrated on other Asian populations, specifically Tamil and Vietnamese communities (Hoffman et al., 2023; Hoffman, 2025; Thambinathan et al., 2025; Jeyasundaram & Trentham, 2020). Two studies focused on Syrian and South Sudanese populations (Matos et al., 2021; Gitau et al., 2023), and one study looked at Hmong and Somali populations (Dini & Solheim, 2025). A summary of each study's key characteristics is presented in Table 4 below.

**Table 4**

*Key Characteristics of Included Studies*

Title of Paper Author(s) Year Published	Population and Context	Aims Data Collection and Analysis	Key Concepts or Frameworks and Summary of Findings	Strengths and Limitations
<p><b>Atallah, 2017</b></p> <p><i>A community-based qualitative study of intergenerational resilience with Palestinian refugee families facing structural violence and historical trauma</i></p>	<p><b>Context:</b> Occupied West Bank</p> <p><b>Population/ participants:</b> 30, 18-90 years old (3 generations Nakba survivors, children of Nakba survivors and grandchildren of Nakba survivors)</p>	<p><b>Aims:</b> To understand how resilience is developed and transmitted across generations facing historical trauma and structural violence.</p> <p><b>Sampling:</b> Purposive Sampling</p> <p><b>Methodology:</b> Semi-structured interviews</p> <p><b>Focus:</b> Family stories of displacement, life under occupation, and intergenerational survival and resistance narratives</p> <p><b>Data Analysis:</b> Grounded theory, Situational analysis</p>	<p><b>Key Frameworks Used:</b> Postcolonial, family resilience, social justice</p> <p><b>Main Findings:</b> Community-based perspective on historical and intergenerational trauma. Intergenerational resilience represented through the Palestinian Family Trees of Resilience (PRFTR) Resilience emerged across three interconnected themes</p> <ol style="list-style-type: none"> <li>1. Muqawama: Resistance under occupation</li> <li>2. Awda: Return to cultural roots and dignity</li> <li>3. Sumoud: Perseverance through intergenerational hardship</li> </ol>	<p><b>+</b>: Community-based participatory approach. Collaborated with grassroots NGO and involved cultural advisors to increase cultural relevance. Multigenerational perspective, including three generations. Developed a culturally grounded metaphor to frame resilience. Use of culturally meaningful language. Use of a decolonial approach</p> <p><b>-</b>: Language barrier: lead researcher relied on translator, and only 15% of the interviews were checked for accuracy due to funding constraints. Generalisability is limited due to sample size and sample from one refugee camp.</p>

<p><b>Lin &amp; Suyemoto, 2016</b></p> <p><i>So You, My Children, Can Have a Better Life: A Cambodian American Perspective on the Phenomenology of Intergenerational Communication about Trauma.</i></p>	<p><b>Context:</b> Cambodian Americans born to parents who left between 1975 and 1990, living in Boston, United States</p> <p><b>Population/participants:</b> 13 participants between 18-25 years old</p>	<p><b>Aims:</b> To explore how Cambodian American children of Khmer Rouge survivors experience intergenerational communication about trauma</p> <p><b>Sampling:</b> Via snowballing and personal contacts of the researcher</p> <p><b>Methodology:</b> Inductive, semi-structured</p> <p><b>Focus:</b> Interviews focused on family history, growing up in the US, knowledge of elders' lives in Cambodia, and participants' reflections on the interview experience.</p> <p><b>Data analysis:</b> Thematic analysis, social constructivist and critical ideological frameworks</p>	<p><b>Key Frameworks Used:</b> Collective trauma through a constructivist and critical lens, including phenomenology, social constructivist and critical ideological paradigms.</p> <p><b>Main Findings:</b> Intergenerational trauma is actively constructed, resisted, and reshaped within diasporic, racialised, and culturally complex family contexts. Intergenerational Communication about Trauma (IGCT) is a dynamic, interactional process shaped by:</p> <ol style="list-style-type: none"> <li>1. <b>Bidirectional Roles:</b> Both older and younger generations influence IGCT.</li> <li>2. <b>Influencing Factors:</b> Sources of information (family stories, media, school, etc.), opportunities for learning, interpersonal connectedness, emotional distress tolerance, motivation for empathy and learning</li> </ol>	<p><b>+</b>: Community-based and culturally grounded. Researcher reflexivity and transparency, emphasis on researcher positionality, avoiding assumptions and reducing interpretive bias. A nuanced understanding beyond the trauma transmission model to highlight agency, resilience, and variation across families.</p> <p><b>-</b>: Small sample size, limited generalisability; findings are exploratory. Lack of multigenerational data: Only young adults were interviewed; no direct input from parents or grandparents. Participants interpret family trauma second-hand, which may introduce inaccuracies.</p>
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			<p>3. <b>Continuum of IGCT:</b> Ranges from interactive (open, coherent) to disrupted (silent, emotionally charged, or fragmented).</p> <p>4. <b>Negative Effects of Disrupted IGCT:</b> Misunderstandings, emotional distancing and negative assumptions about family history</p>	
<p><b>Hoffman et al., 2023</b></p> <p><i>The Impact of Parent Torture and Family Functioning on Youth Adjustment in War-Affected Families: A Path Analysis Describing Intergenerational Trauma and the Family System.</i></p>	<p><b>Context:</b> Karen refugees resettled in the United States</p> <p><b>Population/Participants:</b> 96 Karen refugee families from Burma (Southeast Asia), resettled in the US.</p>	<p><b>Aims:</b> To understand how parental torture and family functioning affect emotional and behavioural outcomes in young people, and to understand intergenerational trauma.</p> <p><b>Methodology:</b> Quantitative path analysis and qualitative interviews.</p> <p><b>Quantitative Data Collection:</b> Structured assessments with maternal, paternal caregivers, and youth. Used FACES IV (family functioning), SQD and PTSD measures</p>	<p><b>Key Frameworks Used:</b> Intergenerational Trauma Theory, Social Interaction Learning (SIL) Model and Family Systems Theory</p> <p><b>Main Findings:</b> Parent torture had both direct and indirect negative effects on youth adjustment, mediated by parent mental health, physical health and youth trauma exposure and gender</p> <p>Family functioning was a protective factor and was positively associated with better youth outcomes, buffering against trauma-related stress</p>	<p><b>+</b>: Mixed methods approach providing richer context. A comprehensive family perspective, a study conducted on maternal and paternal caregivers and young people. The study focused on an understudied population, contributing to knowledge on refugee populations</p> <p><b>-</b>: Cross-sectional design, limiting the ability to establish a causal relationship between variables. Sampling bias, limiting generalisability to the broader Karen refugee</p>

		<p><b>Qualitative Data Collection:</b> Semi-structured interviews with 33 maternal caregivers</p> <p><b>Focus:</b> experiences during the war and in refugee camps, family dynamics, communication about past traumas, parenting challenges, coping strategies, physical and mental health impacts of trauma</p> <p><b>Data Analysis:</b> For Quantitative, path analysis using R software. For qualitative, thematic coding with narrative excerpts used to contextualise statistical results</p>	<p>Qualitative interviews revealed how youth absorbed parental trauma through observation and silence, contributing to emotional burden and behavioural changes.</p>	<p>population. Limited exploration of cultural factors.</p>
<p><b>Jeyasundaram &amp; Trentham, 2020</b></p> <p><i>Experiences of Intergenerational Trauma in Second-Generation Refugees: Healing Through Occupation</i></p>	<p><b>Context:</b> Greater Toronto, Ontario, Canada</p> <p><b>Population/participants:</b> 12 Tamil and Vietnamese children of refugees</p>	<p><b>Aims:</b> To explore how intergenerational trauma is expressed in the occupational lives of second-generation Tamil and Vietnamese refugees.</p> <p><b>Sampling:</b> Purposive sampling</p> <p><b>Methodology:</b> Semi-structured interviews</p>	<p><b>Key Frameworks Used:</b> Occupational science framework, focusing on how individuals use daily activities to cope with and heal from trauma. Intergenerational trauma theory and the constructivist and interpretivist lens</p>	<p><b>+</b>: Focus on second-generation refugees. Integrates occupation-based approaches with trauma theory, adding a nuanced perspective. Rich, qualitative data capturing pathways to resilience and healing.</p>

		<p><b>Focus:</b> Family trauma narratives, identity, emotional and psychological impacts of growing up with trauma-affected caregivers and coping mechanisms, with an emphasis on occupation as tools for healing and identity reconstruction</p> <p><b>Data Analysis:</b> Thematic Analysis</p>	<p><b>Main Findings:</b> Intergenerational Trauma was influenced through 4 main themes:</p> <ol style="list-style-type: none"> <li>1. Socio-historical transmission of trauma: trauma passed down through historical narratives of war, displacement, and persecution</li> <li>2. Cultural transmission of trauma: Trauma reinforced through cultural norms, expectations, and silence around emotional expression. Cultural identity is often shaped by unspoken suffering and survival values.</li> <li>3. Familial transmission of trauma: trauma transmitted via parental behaviours, e.g. emotional withdrawal, hypervigilance, in/direct communication about past experiences</li> <li>4. Healing from intergenerational trauma by engaging in meaningful occupations (e.g., education, advocacy, arts) helped participants process inherited trauma, rebuild identity, and promote resilience.</li> </ol>	<p>-: Limited diversity in sample size as intersectionality was not accounted for. Challenges with distinguishing between the influence of culture vs the influence of intergenerational trauma on the second-generation</p>
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<p><b>Hoffman et al., 2025</b></p> <p><i>Ushering a Witness: A Psychosocial Theory of Maternal Intrafamily Trauma Communication in the Refugee Family System</i></p>	<p><b>Context:</b> United States</p> <p><b>Population/participants:</b> 33 Karen maternal caregivers from Burma</p>	<p><b>Aims:</b> To develop a theory of how refugee mothers communicate trauma to their children within families.</p> <p><b>Sampling:</b> Purposive</p> <p><b>Methodology:</b> Narrative Interviews</p> <p><b>Focus:</b> Maternal trauma history in the context of forced migration and displacement. How, when, and why they chose to disclose or withhold traumatic experiences from their children. The emotional, relational, cultural, and situational factors that shaped their decisions about trauma communication.</p> <p><b>Data Analysis:</b> Grounded Theory</p>	<p><b>Key Frameworks Used:</b> A psychosocial theory of maternal intrafamily trauma communication. Explains how refugee mothers weigh emotional, cultural, and relational factors when deciding whether, when, and how to disclose traumatic experiences. Draws on constructivist grounded theory, Trauma theory, attachment and emotion regulation concepts, cultural and relational frameworks.</p> <p><b>Main findings:</b> Psychosocial theory of communication explained using three interconnected processes.</p> <ol style="list-style-type: none"> <li>1. Ushering a Witness: Mothers selectively involve children in trauma narratives to honour the past and build resilience.</li> <li>2. Balancing Protection and Connection: Mothers navigate the tension between shielding children and developing emotional closeness.</li> </ol>	<p><b>+</b>: First model specifically assessing intergenerational trauma among Karen refugee families. Mixed-methods integration, providing both breadth and depth. Community-based, culturally sensitive approach. Useful for designing family-focused trauma interventions.</p> <p><b>-</b>: Primarily maternal perspectives in qualitative data. Findings may not generalise beyond Karen or similar Southeast Asian refugee communities</p>
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			<p>3. Emotionally Situated Communication: Decisions about disclosure are shaped by emotions, cultural values, family dynamics, and perceived child readiness.</p> <p>Theory suggests a flexible, relational approach to trauma communication, rather than a simple binary of silence vs. disclosure.</p>	
<p><b>Lin et al., 2009</b></p> <p><i>Education as Catalyst for Intergenerational Refugee Family Communication About War and Trauma.</i></p>	<p><b>Location:</b> Northeastern United States</p> <p><b>Population/ participants:</b> 15 Cambodian Americans born to parents who left Cambodia between 1975-1990, between 18-20s years old</p>	<p><b>Aims:</b> To explore intergenerational trauma communication in Cambodian American families</p> <p><b>Sampling:</b> Snowballing</p> <p><b>Methodology:</b> 1-3 unstructured in-depth individual interviews</p> <p><b>Focus:</b> Family histories and how stories were communicated</p> <p><b>Data Analysis:</b> Grounded Theory</p>	<p><b>Key Frameworks Used:</b> Grounded theory and intergenerational communication model</p> <p><b>Main Findings:</b> The findings suggest that education can facilitate intergenerational communication.</p> <p>Silence about trauma is both culturally embedded and psychologically protective</p> <p>Silence can be expressed through avoidance, emotional numbing, fragmented or indirect storytelling</p>	<p>+: The data led to the development of a model of learning that shows learning as a co-constructive process involving the participant, the ingroup (Cambodian American community), and the outgroup (mainstream American community).</p> <p>-: Limited generalisability due to sample size. Participants were recruited from the Northeastern US, limiting applicability to Cambodian American communities in other regions. Educational bias, as most</p>

			<p>Communication about trauma often occurs accidentally via indirect modes of communication.</p> <p>Social and circular silence contributes to the ongoing social marginalisation of Cambodian American experiences.</p> <p>Education opportunities for empowering cultural histories can foster ethnic pride and psychosocial development</p>	<p>participants have taken at least one Asian American course.</p>
<p><b>Dini &amp; Solheim, 2025</b></p> <p><i>Making Sense of Complexity in Refugee Family Systems: Second-Generation Somali and Hmong Refugee Adults' Reflections on Their Relationships with Their First-</i></p>	<p><b>Location:</b> Minnesota, United States</p> <p><b>Population/participants:</b> 6 participants, 3 Second-generation Somali American and Hmong American (18-27 years old)</p>	<p><b>Aims:</b> To understand the lived experiences of second-generation adult refugees growing up with their first-generation parents</p> <p><b>Sampling:</b> Purposive</p> <p><b>Methodology:</b> Phenomenological</p> <p><b>Focus:</b> Identity, resilience, intergenerational trauma, cultural and generational gaps, relationship with parents</p>	<p><b>Key Frameworks Used:</b> Family systems theory, intergenerational trauma theory</p> <p><b>Main Findings:</b> 4 main themes emerged:</p> <ol style="list-style-type: none"> <li>1. The relationship quality between parent and child is impacted by cultural continuity, emotional disconnection, and trauma transmission.</li> <li>2. Integration of Intersecting Identity Dimensions: Navigating identity through cultural clash, code-</li> </ol>	<p>+: Culturally grounded, insider-outsider research team, focus on underrepresented groups, deep qualitative insight, emphasis on resilience and applies a systemic lens.</p> <p>-: Difficulties with generalisability due to small sample size. Only includes Somali and Hmong experiences; findings may not apply to other refugee communities.</p>

<p><i>Generation Refugee Parents</i></p>		<p><b>Data Analysis:</b> Phenomenological data analysis</p>	<p>switching and queer identity conflict</p> <ol style="list-style-type: none"> <li>3. Resiliency Resources: Through internalising a refugee mindset, sibling support, and community healing.</li> <li>4. Moving Forward: Desire to break cycles, concern for cultural loss and accepting parents as humans.</li> </ol>	
<p><b>Elkhalid et al., 2025</b></p> <p><i>Baba, you're not gonna live forever ... we need these stories": Intergenerational storytelling in Palestinian families connecting history, identity, and (the loss of) place.</i></p>	<p><b>Location:</b> Across the United States</p> <p><b>Population/participants:</b> Palestinians 25 participants (18-82 years old)</p>	<p><b>Aims:</b> To explore how intergenerational family storytelling (IGFS) affects the meanings, values, and beliefs related to Palestinian identity among Palestinian families in the US.</p> <p><b>Sampling:</b> Purposive and snowballing</p> <p><b>Methodology:</b> Semi-structured interviews</p> <p><b>Focus:</b> family stories, intergenerational communication, resilience, being Palestinian and living in the US</p>	<p><b>Key Frameworks Used:</b> Decolonial approach, centring Palestinian knowledge systems. Communicated Narrative Sense-Making (CNSM) theory and the ecological systems model.</p> <p><b>Main Findings:</b></p> <ol style="list-style-type: none"> <li>1. Intergenerational Storytelling as Identity Work. Storytelling within Palestinian families served to connect to ancestral history, collective memory, and national identity, preserving narratives of displacement, loss, and resistance in the context of settler colonialism.</li> </ol>	<p><b>+</b>: Culturally grounded by focusing on Palestinian family dynamics. Use of a qualitative and narrative-based approach that centres participants' voices and experiences. Links family storytelling to larger structural and historical forces (e.g., settler colonialism, displacement).</p> <p><b>-</b>: The sample may not be representative in reflecting all Palestinian diaspora experiences. The study primarily focuses on a single generation perspective.</p>

		<p><b>Data analysis:</b> Phronetic iterative approach</p>	<p>2. Tension between silence and sharing stories between generations.</p> <p>3. Storytelling as Resistance and Survival</p> <p>4. Agency of youth in memory Transmission: younger generations played active roles in initiating storytelling and shaping its meaning within their families and communities.</p>	
<p><b>Gitau et al., 2023</b></p> <p><i>'My Dad Was, Is a Soldier': Using Collaborative Poetic Inquiry to Explore Intergenerational Trauma, Resilience, and Wellbeing in the Context of Forced Migration</i></p>	<p><b>Location:</b> Sydney, Australia</p> <p><b>Population/participant:</b> 1 participant, South Sudanese</p>	<p><b>Aims:</b> To explore how collaborative poetic inquiry can be used to express and understand intergenerational trauma, resilience, and wellbeing in the context of forced migration, through the poetry</p> <p><b>Sampling:</b> Purposeful, collaborative selection of a single co-researcher-poet; no broader participant recruitment</p> <p><b>Methodology:</b> Collaborative Poetic Inquiry</p>	<p><b>Key Frameworks Used:</b> trauma-informed, culturally safe, and decolonial approaches, to explore intergenerational and collective trauma.</p> <p><b>Main Findings:</b> Poetry as a means of conveying war, intergenerational trauma, identity, cultural pride, pain, and inherited suffering. Poetry as Resistance and Healing. The poem challenges dominant Western and colonial narratives about trauma and refugees, offering a culturally grounded way to express distress and healing.</p>	<p><b>+</b>: Decolonial, trauma-informed approach demonstrating how poetic inquiry can contribute to the understanding of intergenerational trauma. This study is valuable in that it challenges the traditional research approach- participants as co-researchers</p> <p><b>-</b>: Single case focus and this limits generalisability to broader refugee experience. Analysis based on an interpretive arts-based approach, introducing nuanced subjectivity in</p>

		<b>Data Analysis:</b> Critical Discourse Analysis		comparison to traditional research approaches.
<p><b>Mahamid, 2020</b></p> <p><i>Collective Trauma, Quality of Life and Resilience in Narratives of Third-Generation Palestinian Refugee Children</i></p>	<p><b>Location:</b> Palestinian refugee camps in the West Bank.</p> <p><b>Population/participants:</b> 30 third-generation Palestinian refugee children (14-16 years old; 17 females, 13 males)</p>	<p><b>Aims:</b> To explore how third-generation Palestinian refugee children narrate historical and collective trauma, its ongoing impacts and resilience</p> <p><b>Sampling:</b> Snowball</p> <p><b>Methodology:</b> Qualitative, semi-structured interviews</p> <p><b>Focus:</b> Quality of life, resilience and collective trauma</p> <p><b>Data analysis:</b> Thematic Content Analysis</p>	<p><b>Key Frameworks Used:</b> Collective trauma, resilience frameworks, quality of life, ecological model</p> <p><b>Main Findings:</b> Nakba is viewed as an ongoing, traumatic “losing experience” that continues to shape participants’ lives. Trauma is transmitted intergenerationally through stories, cultural memory, and persistent displacement. Children report poor quality of life and a high level of resilience and demonstrate strong psychological adaptability.</p>	<p>+: Insights from marginalised groups, rich narratives revealing how trauma lives across generations, highlight resilience and agency</p> <p>-: Limited theoretical depth, context is confined to West Ban refugee camps, which may differ from broader diaspora settings</p>
<p><b>Matos et al., 2021</b></p> <p><i>‘The War Made Me a Better Person’: Syrian Refugees’ Meaning-Making Trajectories in the</i></p>	<p><b>Location:</b> Portugal</p> <p><b>Population/participants:</b> 39 Syrian war-exposed adults (19-37 years old)</p>	<p><b>Aims:</b> To explore how Syrian refugees reconstruct meaning after experiencing collective trauma</p> <p><b>Sampling:</b> Snowball</p> <p><b>Methodology:</b> Semi-structured interviews</p>	<p><b>Key Framework Used:</b> Park’s Integrated Meaning-Making Model (2010)</p> <p><b>Main findings:</b> War shifted collective identity and pre-war assumptions. Participants engaged in ongoing, meaning-making,</p>	<p>+: Highlights posttraumatic growth, emphasis on both individual and collective influences, offers rich qualitative accounts.</p> <p>-: Interviews not conducted in Arabic, which may limit expression. The sample only</p>

<p><i>Aftermath of Collective Trauma</i></p>		<p><b>Focus:</b> Reappraisal of the Syrian war in resettlement, meaning-making, and perceived psychological adjustment</p> <p><b>Data analysis:</b> Thematic analysis</p>	<p>reappraisal of self, purpose and identity.</p>	<p>focused on educated student refugees and was not reflective of the broader Syrian refugee population. The study focused on collective meaning trajectories and did not explore religious or spiritual coping, which may be significant for this population</p>
<p><b>Thambinathan et al., 2025</b></p> <p><i>Architectures of counter remembrance: co-constructing memory box autobiographies with second-generation Tamil refugees</i></p>	<p><b>Location:</b> Toronto, Canada</p> <p><b>Population/participants:</b> 12 Second-generation Tamil refugee</p>	<p><b>Aims:</b> To explore historical trauma and intergenerational healing through co-constructed memory box autobiographies</p> <p><b>Sampling:</b> Purposive</p> <p><b>Methodology:</b> Participatory Action Research (PAR) with memory box autobiographies</p> <p><b>Focus:</b> Memories and postmemories of Genocide, memory box narratives, historical trauma and intergenerational healing, ancestral history and family relationships and diaspora experiences</p>	<p><b>Key Framework Used: Historical trauma, intergenerational trauma, Postmemory</b></p> <p><b>Main Findings:</b> 5 main threads emerged</p> <ol style="list-style-type: none"> <li>1. Intergenerational joy as resistance</li> <li>2. Fragmented, evolving post memories</li> <li>3. Legacies of state violence</li> <li>4. Community activism and knowledge</li> <li>5. Diaspora disconnect and guilt</li> </ol>	<p><b>+</b>: Innovative method, strong theoretical foundation, community-led research (PAR), culturally grounded</p> <p><b>-</b>: Small sample size of 12 participants, mostly women from Toronto. Potential researcher bias due to shared identity with participants, which may influence interpretation</p>

		<b>Data Analysis:</b> Phase 1, co-construction of memory boxes and Phase 2: Reflexive visual and thematic analysis		
<p><b>Veronese et al., 2023</b></p> <p><i>Transgenerational trauma and collective resilience: A qualitative analysis of the experiences of settler-colonial violence among three generations of Palestinian refugees</i></p>	<p><b>Location:</b> Palestinian refugee camps across 5 locations in the West Bank.</p> <p><b>Population/participants:</b> 45 participants between 13 and 85 years old</p>	<p><b>Aims:</b> To explore experiences of settler-colonial violence over three generations of Palestinian refugees.</p> <p><b>Sampling:</b> Snowball</p> <p><b>Methodology:</b> semi-structured interviews</p> <p><b>Focus:</b> To explore understandings of transgenerational and collective trauma</p> <p><b>Data analysis:</b> Thematic content analysis</p>	<p><b>Key Framework Used:</b> Collective trauma, decolonial perspective, ethnic-racial identity model, resilience and collective healing</p> <p><b>Main Findings:</b> The four themes encompassed</p> <ol style="list-style-type: none"> <li>1. The impact of Al-Nakba</li> <li>2. Hardships, challenges, and quality of life</li> <li>3. Coping strategies</li> <li>4. Dreams and hopes for the future.</li> </ol> <p>The results have been discussed using local idioms of distress and resilience.</p>	<p>+: Offering rich insight into the impacts of historical and collective trauma and socio-political events on the lives of 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> generations. Culturally grounded and offers a decolonial perspective.</p> <p>-: Limited generalisability as sample confined to the West Bank. Limited research reflexivity. Limited practical applications or policy recommendations.</p>
<p><b>Pol-Lim &amp; Slater, 2024</b></p> <p><i>Understanding Parental Historical Trauma and the Effect on Second-</i></p>	<p><b>Location:</b> California, United States</p> <p><b>Population/participants:</b> 20 Second-Generation</p>	<p><b>Aims:</b> To understand the impact of historical trauma on the children and grandchildren of Cambodian Genocide survivors concerning educational attainment</p> <p><b>Sampling:</b> Purposive</p>	<p><b>Key Framework Used:</b> Historical Trauma Theory, Intergenerational trauma theory and Survivor guilt theory.</p> <p><b>Main Findings:</b> 3 main themes identified</p>	<p>+: Rich qualitative data contributes new insights into education and identity among Cambodian American youth</p> <p>-: Small sample size and challenges with generalisability. Research reflexivity was</p>

<p><i>Generation Cambodian Americans.</i></p>	<p>Cambodian American</p>	<p><b>Methodology:</b> Qualitative semi-structured interviews</p> <p><b>Focus:</b> Historical trauma, family dynamics, transmission of trauma, coping and resilience</p> <p><b>Data Analysis:</b> Thematic analysis</p>	<ol style="list-style-type: none"> <li>1. Denial: Parents avoided discussing the genocide, leaving children disconnected from their heritage and confused about their family's past.</li> <li>2. Unresolved Grief: Parents' unprocessed trauma led to emotional distance, mistrust, and anxiety in the home, negatively impacting the children's wellbeing and academic focus.</li> <li>3. Overprotection: Parents, shaped by fear and insecurity, imposed strict controls that often hindered their children's independence and academic support.</li> </ol>	<p>minimally discussed. Resilience was identified but underexplored in the study.</p>
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## 2.7 Quality Appraisal

To assess the methodological quality of included studies, the Critical Appraisal Skills Programme (CASP) checklist of qualitative research was used. This tool is widely used in qualitative evidence synthesis, due to its clarity and accessibility for researchers (Long et al., 2020). CASP enables systematic appraisal across domains such as rigour, credibility and relevance.

The results of the CASP quality assessment are summarised in Table 5. All studies included in the review articulated their research aims and used appropriate methodologies to address their inquiries. The majority used research designs and data collection methods suited to exploring intergenerational, historical and collective trauma. While one study did not detail its recruitment strategy, the remaining studies provided clear descriptions and primarily used purposive and/or snowball sampling. Hoffman et al.'s (2023) study was appraised using the CASP qualitative checklist for its qualitative component only, as this was the element contributing to the synthesis; the quantitative component was not assessed, as all other included studies were qualitative.

Given the focus on refugee and post-conflict diaspora populations, often categorised as marginalised communities, recruitment approaches must be understood as relational, intentional, and ethnically complex. As Lewis et al. (2023) emphasise, recruitment in such contexts should involve collaboration with trusted community organisations, for cultural sensitivity in research. Most studies in this review demonstrated degrees of this relational approach, with several primary researchers noting insider-outsider positionality, a factor that likely contributed to building trust.

**Table 5**

*Quality Appraisal of Included Studies*

Papers	Was there a clear statement of the aims of the research?	Is qualitative methodology appropriate?	Was the research design appropriate to address the aims of the research?	Was the recruitment strategy appropriate to the aims of the research?	Was the data collected in a way that addressed the research issue?	Has the relationship between researcher and participants been adequately considered?	Have ethical issues been taken into consideration?	Was the data analysis sufficiently rigorous?	Is there a clear statement of findings?	How valuable is the research?
Lin & Suyemoto, 2016	Yes	Yes	Yes	Yes	Yes	Yes	Can't tell	Yes	Yes	Develops a phenomenological model to explain intergenerational communication about trauma in Cambodian American families
	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Insights into second-generation Tamil and

<i>Jeyasundaram et al., 2020</i>										Vietnamese refugees and how communal care and occupations can foster healing from intergenerational trauma
Hoffman et al., 2023	Yes	Yes	Yes	Yes	Yes	Can't tell	Yes	Can't tell	Yes	Paper provided a model for intergenerational trauma on the adjustment of Karen refugee youth
Hoffman et al., 2025	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Paper proposed a conceptual pathway of communication in war-affected families
<i>Lin et al., 2009</i>	Yes	Yes	Yes	Yes	Yes	Can't tell	Can't tell	Can't tell	Yes	Highlights the role of education in intergenerational communication about trauma in refugee families

<i>Dini, 2025</i>	Yes	Yes	Yes	Yes	Yes	Yes	Can't tell	Yes	Yes	Study highlights the complexities of trauma, culture, and identity in refugee families, and shows how family, culture, trauma, and identity intersect in ways that can inform research, policy, and practice.
<i>Elkhalid et al., 2025</i>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Provides insight into how intergenerational family storytelling shapes Palestinian experiences
<i>Gitau et al., 2023</i>	Yes	Yes	Yes	Can't tell	Yes	Yes	Yes	Yes	Yes	The study is valuable for centering refugee voices, using

										decolonial poetic methods, and offering a rich, personal insight into intergenerational trauma and resilience.
<i>Mahamid, 2020</i>	Yes	Yes	Yes	Yes	Yes	Can't tell	Yes	Yes	Yes	This study is valuable for amplifying the voices of third-generation Palestinian refugee children and illustrating how collective trauma persists across generations. It offers culturally grounded insight into trauma, memory, and resilience.
<i>Matos et al., 2021</i>	Yes	Yes	Yes	Yes	Yes	Can't tell	Yes	Yes	Yes	The study provided insights into

										<p>Syrian refugees in a Western host country and applied a trauma framework to a post-conflict diaspora community. The study demonstrated how meaning-making occurs, emphasising the social and cultural dimensions of collective trauma</p>
<p><i>Thambinathan et al., 2025</i></p>	Yes	<p>This study introduces an innovative methodology and centres underrepresented voices from the Tamil diaspora. The study applies historical</p>								

										trauma and postmemory theory in a decolonial, community-engaged way. It also provides insights into intergenerational healing, cultural remembrance and refugee narratives
<i>Veronese et al., 2023</i>	Yes	Yes	Yes	Yes	Yes	Can' tell	Yes	Yes	Yes	Study highlights how trauma and resilience are co-constructed across generations and embedded in political and historical context. Study offers a decolonial, community-based lens on trauma that

										challenges dominant Western models
<i>Atallah, 2017</i>	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	This study is valuable as it offers a decolonial, community-based, empowering, and culturally grounded framework for understanding how Palestinian refugee families draw on generational and collective resilience. It shifts the lens from trauma to resilience, from an individualistic to a collective perspective, and from a Western

										paradigm to a Palestinian epistemology.
<i>Pol-Lim &amp; Slater, 2024</i>	Yes	Yes	Yes	Yes	Yes	Can't tell	Can't tell	Yes	Yes	Explores the impact of parental historical trauma on second-generation Cambodian Americans

Studies were judged as demonstrating in-depth reflexivity if they clearly described the researcher's positionality, acknowledged potential biases, and reflected on how these influenced the research. This was particularly important given the focus on trauma and marginalised populations, where power dynamics and interpretive bias can influence findings. Most studies addressed reflexivity to some extent; for example, Hoffman et al. (2023) offered an account of the lead researcher's insider–outsider position, collaboration with a Community Advisory Board, and trauma-informed adaptations. Atallah (2017) also reflected on their dual identity, linguistic limitations, and community engagement. A few studies, such as Lin et al. (2009), lacked meaningful reflexive insight; rather, the study drew on their role as educators and focused on how educational contexts can facilitate intergenerational communication and healing around sociocultural trauma. This emphasis shaped the study, but it also meant that key elements of reflexivity, such as identity, bias, and power in the research relationship, were underexplored.

Of the 14 studies, 11 acknowledged ethical considerations to varying degrees. Some offered detail, for example, Matos et al. (2021) outlined their procedure for informed consent, confidentiality and participant support. Others, such as Jeyasundaram et al. (2020), mentioned obtaining institutional ethical approval but provided limited elaboration on how ethical principles were applied. In contrast, four studies did not address ethical issues, for example, Lin et al. (2009) did not refer to consent procedures, ethics board approval, or safeguarding measures for participants' emotional wellbeing. This lack of ethical transparency is a notable limitation, particularly given the sensitivity of the research topic and the vulnerability of the participant populations.

Several studies provided details on their data analysis process, with varying levels of rigour. According to the CASP checklist, rigour in analysis is indicated by a transparent explanation of how themes or categories were derived, whether contradictory data were considered, how data extracts were selected, and researcher reflexivity. For example, Dini & Solheim (2025)

offered a comprehensive account of their process, using bracketing, iterative coding, and triangulation with cultural insiders and outsiders. While most studies met the CASP standards for transparency and credibility, Lin et al. (2009) mentioned grounded theory but provided little insight into how coding was conducted or how conclusions were reached. This lack of methodological transparency makes it difficult to assess the robustness of their analysis.

Overall, most studies included were of moderate to high quality. Most met CASP criteria across key areas, including methodological rigour, recruitment approaches and reflexivity. While a few studies lacked detail in ethics or analysis, which may reflect limited reporting, all were retained due to their relevance and contribution to the review's aims.

## **2.8 Narrative Synthesis: Exploring Relationships Within and Between Studies**

This section presents the process and findings of the conceptual mapping of the included studies (Appendix A). The narrative synthesis was carried out through an iterative and interpretive process, during which included studies were read multiple times to enable familiarisation with their contexts, methods and findings. As each paper was reviewed, key sentences, concepts, and thematic ideas were highlighted, and comparisons were made across studies to identify similarities, differences, and evolving concepts.

Connections between emerging ideas were explored through concept maps, which supported the identification of conceptual relationships within and across the studies. Through this iterative process, concepts were gradually refined and consolidated, leading to the development of four overarching concepts. These concepts highlight how trauma is passed down in refugee and post-conflict diaspora communities through diverse, culturally mediated processes shaped by political history and systemic oppression. An earlier version

of the concept map developed during the initial stages of analysis is included in Appendix A to illustrate the development of the synthesis process.

The following provides an overview of the four concepts (Table 6), followed by detailed descriptions of each concept with supporting evidence. The findings are then integrated to examine interconnections between concepts, followed by a review of the synthesis’s strengths and limitations.

**Table 6**

*Concepts and Subconcepts from Identified Papers*

Concepts	Sub-concepts
Storytelling and Silence as Dual Communication Processes	<ol style="list-style-type: none"> <li>1. Storytelling as Resistance and Identity Formation</li> <li>2. Strategic Silence and Protective Withholding</li> <li>3. Dynamic Communication Processes</li> </ol>
Embodied, Somatic, and Symbolic Transmission	<ol style="list-style-type: none"> <li>1. Somatic and Non-Verbal Transmission</li> <li>2. Cultural and Symbolic Transmission</li> <li>3. Postmemory and Inherited Experience</li> </ol>
Resistance, Agency, and Healing	<ol style="list-style-type: none"> <li>1. Active Resistance and Creative Agency</li> <li>2. Cultural Concepts of Resilience</li> <li>3. Hope and Legacy</li> </ol>
Structural Violence and Systemic Trauma	<ol style="list-style-type: none"> <li>1. Historical and Ongoing Oppression</li> <li>2. Intersectional and Systemic Impacts</li> <li>3. Institutional and Comparative Recognition</li> <li>4. Adaptive Responses to Structural Constraints</li> </ol>

### **2.8.1 Concept 1: Storytelling and Silence as Dual Communication Processes**

Across the included studies, storytelling functioned as a channel for trauma transmission and a means of protecting against it. Families draw on both narrative sharing and silence, making choices shaped by cultural norms, emotional safety, and political context.

#### **2.8.1.1 Storytelling as Resistance and Identity Formation**

In Palestinian communities, storytelling is described as a deliberate act of cultural preservation and political resistance (Atallah, 2017; Elkhalid et al., 2025; Mahmud, 2020; Veronese et al., 2023). Narratives are embedded in collective rituals and symbolic practices, transmitting historical trauma while reinforcing identity and solidarity. Elkhalid et al. (2025) describe how second- and third-generation Palestinian Americans use family stories to connect with their heritage and understand displacement. As one participant explained, *“storytelling is a very big part of our culture”* (Elkhalid et al., 2024), highlighting its role in sustaining memory and dignity under ongoing structural violence and occupation.

This conscious narrative practice contrasts with contexts where transmission appeared to be less intentional. Tamil families were found to construct counter-narratives by interweaving joyful memories alongside stories of loss. *“My mom talks about her childhood without always focusing on the bad stuff... stealing mangoes... seeing elephants... running down the street to her cousin’s house to play.”* (Thambinathan et al., 2025)

In these studies, storytelling functioned as a process of meaning-making, balancing the weight of trauma with assertions of cultural resilience.

### 2.8.1.2 Strategic Silence and Protective Withholding

Studies on Cambodian American, Vietnamese, Tamil, Somali, Hmong and Karen families reveal storytelling as a relational, culturally mediated, protective and bidirectional process (Dini & Solheim, 2025; Hoffman 2023,2025; Jeyasundram et al., 2020). Hoffman et al. (2023) describe Karen mothers deliberately withholding traumatic details: *“Yeah. I don’t talk about those things. I just keep them in my heart. I don’t need to tell them that.”*

Hoffman et al. (2025) extend this in their *Ushering a Witness* model, showing how non-verbal cues, mood shifts, and emotional atmospheres communicate distress indirectly, serving as embodied transmissions. This model positions children, particularly daughters, as witnesses who bear emotional burden and interpret suffering without an explicit narrative (Hoffman et al., 2025).

Studies on Cambodian American families similarly reflect selective disclosure shaped by cultural norms (Lin et al., 2009):

*“They never ever would try to tell me anything too gory or they were always, you know very protective of who I was even at 17, when I’m like, “Tell me!” You know, they were always very careful.....A bad past is not a good thing to pass on to someone else. It is taboo; it’s bad luck; it’s bad taste to do that.*

Lin et al. (2009) note that such silence is compounded by socio-political marginalisation of Cambodian genocide narratives in public discourse, where a lack of recognition in host societies further perpetuates silence in families.

### 2.8.1.3 Dynamic Communication Processes

Across studies, trauma communication is described as bidirectional and negotiated, emerging through the interplay of disclosure and withholding. Outside of studies on Palestinians, storytelling was often initiated by younger generations, but its form is shaped by emotional readiness, timing, and cultural expectations (Lin and Suyemoto, 2016; Pol-Lim & Slater, 2024). Papers reveal storytelling as a complex familial negotiation of curiosity, emotional boundaries and protection.

Narratives are often fragmented, with families receiving incomplete stories. As one participant noted: *“There are so many gaps in all the stories and they’re all distinct... If I were to try to think of it like a book or a movie, it’s really hard for me to know, what sequences led to what?”* (Thambinathan et al., 2025). The quote illustrates how stories were often incomplete, and this appeared in several studies whereby family narratives evolved over time (Mahmid 2020, Lin and Suyemoto 2016; Gitau et al., 2023).

Social media emerged as a bridge in storytelling processes. Lin and Suyemoto (2016) illustrate how diaspora youth use online resources to piece together family histories. These platforms both triggered distress and enabled healing, positioning the younger generation as active seekers of inherited narratives.

Overall, storytelling appeared as a culturally and contextually informed process, offering opportunities to resist erasure, cultural continuity, and protection from harm. Together, they formed a negotiated process whereby families balance disclosure and protection.

### 2.8.2 Concept 2: Embodied, Somatic, and Symbolic Transmission

Studies reveal trauma transmission through embodied responses, sensory cues, and symbolic practices. These non-verbal pathways appear across studies, suggesting

processes that transcend cultural boundaries while maintaining culturally specific expressions.

### **2.8.2.1 Somatic and Non-Verbal Transmission**

Studies consistently document trauma transmission through bodily and emotional channels that bypass conscious communication. The “*Ushering a Witness*” model (Hoffman et al., 2025) demonstrates how, in Karen families, non-verbal cues, mood changes, and emotional dysregulation convey distress, with daughters becoming emotional interpreters who absorb their mothers’ unspoken distress.

A participant in Dini and Solheim (2025) described hypervigilance as an inherited embodied response: *“I never realised the hypervigilance that was occurring in the family. And then, as I age, I realise... I will get spooked by loud noises.....this hypervigilance about our surroundings gets kind of passed onto us with us not really knowing that that was happening.”* This illustrates survival responses embedded in family life and transmitted unconsciously without explicit teaching or awareness.

Lin et al. (2009) highlight somatic expressions in Cambodian American families. These embodied responses suggest trauma is held and transmitted through the body in ways that resist verbal processing. Dini & Solheim (2025) further show that emotional atmospheres, parenting practices, and identity tensions in Somali and Hmong families can act as transmission systems in which presence and emotional attunement carry trauma.

### **2.8.2.2 Cultural and Symbolic Transmission**

Palestinian studies exhibit how material objects and symbolic practices serve as trauma carriers across generations. Veronese et al. (2023) find that first-generation Palestinian pass down their histories of collective and historical trauma through oral histories

and house keys, representing the collective memory and resistance. The preservation of keys from lost homes acts as a tangible connector to ancestral lands, communicating both loss and hope for return home.

Thambinathan et al. (2025) identify sensory triggers through photographs, smells and places, whereby descendants experience emotionally charged memories of events they did not live through. Gitau et al. (2023) similarly highlight South Sudanese connection to land spirituality and ancestry as central to sustaining intergenerational narratives of loss and resilience.

### 2.8.2.3 Postmemory and Inherited Experience

Second and third-generation individuals often appear to experience embodied memories they did not directly witness (Elkhalid et al., 2025). One Tamil participant described returning to Sri Lanka to find an empty plot where their mother's home was meant to be:

*When we went and I asked my mom, okay, show me where your house is, and she pointed to an empty plot of land. I'm like, well, where's your house? And it was just remains. That was the first memory of my understanding of what our reality really was* (Thambinathan et al., 2020)

This reveals how physical spaces carry trauma independently of family narratives, and how inherited memories are vulnerable to material loss. These experiences often produce identity dissonance and cultural estrangement, especially when descendants inherit emotional fragments without complete narratives (Dini & Solheim, 2025; Jeyasundram et al, 2020).

Trauma appears to be communicated not only through words but through bodies, emotional environments, symbolic items, and sensory memory. These pathways differ from

frameworks that may prioritise verbal or cognitive processing, demonstrating how families convey trauma through relational presence, material culture, and embodied practices that bind descendants to histories they did not directly live.

### **2.8.3 Concept 3: Resistance, Agency, and Healing**

Several studies demonstrate how refugee communities transform their experiences of historical violence into sources of strength, identity, and collective healing. These studies highlight community-based practices of resistance and meaning-making that sustain dignity and agency.

#### **2.8.3.1 Active Resistance and Creative Agency**

In the Palestinian context, storytelling acts as an intentional counter to erasure and ongoing oppression (Atallah, 2017; Elkhalid et al., 2025; Mahamid, 2020; Veronese et al., 2023). Second and third generation Palestinians actively seek family narratives not only for personal understanding but as cultural reclamation. As one participant shares:

*I remember hearing these stories and asking, wanting to understand more about my family roots, my family's experiences, trying to understand more about their lives. What Palestine was like before 1948, what the village was like, what life was like and then learning what happened... when the Zionist invaded and destroyed their way of life* (Elkhalid et al., 2025)

This quote demonstrates subsequent generations' agency in constructing historical understanding through family engagement, transforming inherited trauma into political consciousness. Similar patterns appear in Tamil communities, where engagement with historical memory become acts of service and advocacy: "that's *where my work has been—educating young people in the community about what happened and what continues to*

*happen [to Tamil people in Sri Lanka]. I think it's a really big part of my healing"*

(Jeyasundaram et al., 2020).

Studies reveal how communities were able to transform inherited trauma into collective empowerment and cultivate joy as a form of resistance (Thambinathan et al., 2025).

### **2.8.3.2 Cultural Concepts of Resilience**

Palestinian resilience is embedded in indigenous concepts muqawama (resistance), awda (return), and sumud (perseverance) as articulated in Atallah's (2017) Palestinian Refugee Family Trees of Resilience. These concepts frame sophisticated endurance and defiance as collective experiences rather than individual coping. Muqawama encompasses material and psychological resistance, sumud reflects steadfastness in the face of adversity, and awda sustains future-oriented hope.

Acts such as cultural preservation, defending dignity, and family-based resistance are reinterpreted as dignifying rather than pathological. Other communities display parallel frameworks, for example, Syrian healing through shared cultural meaning-making (Matos et al., 2020), and South Sudanese resilience grounded in land spirituality and ancestral ties (Gitau et al., 2023). These examples extend resilience beyond clinical constructs into cultural, spiritual, and ecological domains.

### **2.8.3.3 Hope and Legacy**

The concept of return (awda) operates as both a psychological process and an ongoing resistance approach, anchoring displaced generations to ancestral lands and futures imagined in the face of exile (Atallah, 2017; ElKhalid et al., 2025). Across contexts, the younger generation demonstrates commitment to legacy preservation (Jeyasundaram &

Trentham, 2020; Thambinathan et al., 2025; Veronese et al., 2023). Such responsibility reframes trauma as an incentive for cultural continuity projects.

Educational and political activism also emerge as healing strategies (Lin et al., 2009; Thambinathan et al., 2025). In most studies, understanding family histories drives community organising, political advocacy, and human rights engagement, processing trauma through collective action rather than solely through individual therapy (Elkhalid et al., 2025; Veronese et al., 2023).

Several studies demonstrate how refugee communities dynamically reframe inherited trauma into practices of resistance, resilience, and meaning-making under conditions of displacement and subjugation. These processes, rooted in cultural frameworks and collective action, highlight community-led healing.

#### **2.8.4 Concept 4: Structural Violence and Systemic Trauma**

Several studies reveal that trauma in refugee and post-conflict communities cannot be understood as isolated psychological events and must be situated within ongoing systems of structural violence, systemic oppression, and institutional marginalisation. Studies consistently demonstrate how historical trauma is compounded by contemporary forms of exclusion, discrimination, and policy-based harm that create continuous traumatisation across generations.

##### **2.8.4.1 Historical and Ongoing Oppression**

In the Palestinian context, trauma is experienced as a structural rather than a historical event, as reflected in the following quote: “*Refugee experience means ongoing pain for me and for all Palestinian children who live in camps; it is really very difficult to live in a camp*” (Mahamid, 2020). This statement reveals how refugee camp conditions, shaped by

material deprivation, spatial confinement and political violence, constitute conditions of protracted structural violence (Veronese et al., 2023).

Tamil experiences reveal state violence through denial, symbolic destruction, and continued marginalisation despite the conflict ending. *“The government hasn’t taken responsibility at all..... it’s still the same as before; they’re just not killing us.”* (Thambinathan et al., 2025).

For Cambodian Americans, historical erasure and public invisibility create additional harm. Lin et al. (2009) illustrate how exclusion from educational and public discourse deepens trauma through systemic neglect.

#### **2.8.4.2 Intersectional and Systemic Impacts**

Studies reveal how refugee status intersects with multiple forms of marginalisation to create compounded trauma experiences. Vietnamese participants describe *“model minority”* burden and economic marginalisation: *“To say that all Asians are doing well is unfair. There are people who grew up in low-income housing and crime-ridden communities.”* (Jeyasundaram & Trentham, 2020).

Workplace discrimination reinforces economic insecurity, with parents warning children, *“Be careful what career path you pick—not everyone wants to work with Asians”* (Jeyasundaram et al., 2020). This demonstrates how structural racism creates chronic insecurity that families must navigate across generations.

Political marginalisation manifests through the delegitimisation of refugee protest, as seen in Tamil diaspora activism during the 2009 Sri Lankan conflict: *“At school, it was just, ‘you guys caused traffic,’ but it was never, ‘all those people died.’”* (Jeyasundaram et al., 2020).

Studies highlight how systemic factors create opportunities and constraints for refugee communities, faced with navigating systemic oppression away from the conflict and instability left behind.

#### **2.8.4.3 Institutional and Comparative Recognition**

The studies reveal hierarchies of suffering, where some communities' traumas receive public acknowledgement while others remain marginalised in policy, media, and education (ElKhalid et al., 2025; Hoffman et al., 2025; Lin et al., 2009; Veronese et al., 2023). This unequal recognition impacted collective memory and access to resources, as one Cambodian American participant reflected: *"I still believe that not a lot of people know what Cambodians have been through. I feel like what Jewish people went through was more publicised."* (Pol-Lim & Slater, 2024)

Such disparities are reinforced by institutional silencing, including genocide denial, erasure from historical records, and the exclusion of certain narratives from public discourse (Thambinathan et al., 2025). These practices constitute an ongoing form of structural violence, perpetuating the invisibility of specific communities' experiences.

#### **2.8.4.4 Adaptive Responses to Structural Constraints**

Across included studies, families appear to develop adaptive strategies in response to ongoing challenges. Several studies reveal parents' approach to parenting through overprotectiveness or social isolation as responses to perceived lack of safety. These adaptations suggest families actively respond to ongoing threats rather than simply transmitting historical trauma.

Several studies illustrate how structural violence shapes intergenerational family roles and responsibilities as families adapt to structural marginalisation and resource scarcity. These

patterns indicate how ongoing oppression creates family system changes that affect trauma transmission and healing possibilities.

### **2.8.5 Integration of Concepts**

The four concepts identified in this synthesis are interconnected and mutually reinforcing. Storytelling and silence are key pathways for embodied and symbolic transmission, shaped by structural violence and transformed through resistance and healing.

Structural violence drives protective silence and intentional storytelling, while producing embodied responses communicated across generations. These processes also serve as sites of agency, where communities develop culturally grounded resistance that transforms trauma into strength. Trauma in refugee and post-conflict diaspora communities therefore, requires frameworks recognising the interplay of harm and healing, silence and voice, and individual and collective responses within systemic oppression.

The literature shows that trauma is both individual and collective, transmitted within families and intensified by structural violence. This challenges clinical models focused solely on micro-level interventions. Effective frameworks must pair personal healing with systemic change, addressing trauma within contexts of marginalisation, exclusion, and institutional violence.

### **2.9 Strengths and Limitations of the Synthesis**

In addition to assessing the methodological quality (section 2.7), this section reflects on the synthesis's overall robustness. This review adhered to principles of transparency, rigour, and reproducibility, guided by PRISMA and the Popay et al. (2006). Use of SPIDER for inclusion criteria, CASP for quality appraisal, and a clear conceptual framework enhanced trustworthiness.

Most included studies were of moderate to high quality, supporting confidence in the synthesis, though some studies showed limited reflexivity or ethical transparency. The evidence base was geographically skewed, towards high-income countries, with few studies on the Global South, and none on the Eritrean diaspora, limiting transferability. Restricting to English-language studies may have further narrowed the scope.

The conceptual lens adopted may have influenced the interpretation of studies grounded in clinical paradigms. Most studies focused on second-generation experiences, with limited engagement in third-generation or multigenerational trauma transmission, highlighting a key gap in studies.

## **2.10 Discussion**

This review synthesised empirical literature on frameworks for understanding historical, collective, and intergenerational trauma in refugee and post-conflict diaspora communities. The SLR addressed the research question by identifying four interconnected concepts: storytelling, silence, structural violence, and resistance.

A narrative synthesis revealed a prevalence of culturally grounded over universalised models, challenging Eurocentric theories by framing silence as protective, resilience as political, and storytelling as both resistance and care. Frameworks emphasised indigenous concepts, symbolic practices, embodied responses, and relational processes, highlighting the need for approaches that reflect cultural variation in distress and healing.

Storytelling and silence appeared as pathways for embodied and symbolic transmission, shaped by structural violence and transformed through acts of resistance and healing. These processes also act as sites of agency, where communities develop culturally grounded practices that transform inherited trauma into strength.

Trauma in refugee and post-conflict diaspora communities is both individual and collective, transmitted within families and intensified by systemic oppression. This challenges clinical models focused only on micro-level interventions, pointing to the need for frameworks that couple personal healing with structural change. In therapeutic contexts, this highlights the importance of linking what happens in the therapy room to wider social and political realities, so that individual experiences are understood within their broader historical and structural contexts. From the SLR, it is also clear that second-generation individuals are deeply influenced by their parents' traumatic histories. While the review identified a rich literature, African diasporic contexts remain significantly underrepresented. This gap highlights the need for empirical research focused on communities such as the Eritrean diaspora.

### **2.11 Rationale for Current Study: Existing Trauma Frameworks in Understanding Eritrean Diasporic Experiences**

While some research has explored Eritrean refugee experiences, there is little understanding of how intergenerational trauma is expressed within Eritrean families, particularly among second-generation British Eritreans. How they make sense of their inherited histories, negotiate belonging, and navigate wellbeing in contexts marked by racialisation, marginalisation, and silence remains underexplored.

This study seeks to address that gap by highlighting second-generation voices to explore the need for trauma frameworks that move beyond individualised, symptom-based models towards approaches that attend to cultural, familial, and structural dimensions of suffering and survival.

To meaningfully understand these experiences, trauma needs to be approached as relational, historical, and socially embedded. Bronfenbrenner's (1979) ecological systems

theory provides a useful lens, situating individual experiences within interconnected family, community, institutional, and socio-political contexts. For the Eritrean diaspora, trauma emerges from entangled forces: colonial legacies, racialisation in host societies, restrictive immigration policies, and inherited adversity across generations.

Existing frameworks, such as historical or intergenerational trauma, while offering expansive lenses, often originate from Holocaust studies or Native American communities. Applying them without critical adaptation risks homogenising communities or reducing them to narratives of suffering (Gone, 2013), obscuring resilience, agency, and culturally specific coping strategies.

Similarly, dominant evidence-based models in Clinical Psychology remain rooted in Eurocentric traditions entangled with colonial logics (Ahsan, 2020). These frameworks tend to universalise distress, flattening cultural difference and erasing political histories (Wood & Patel, 2017; Bennett et al., 2007; Younis, 2022), rendering groups like the Eritrean diaspora invisible or misinterpreted within systems designed to heal but not necessarily to understand.

In light of these conceptual, methodological, and representational gaps, the present study seeks to address them with the following research question and aims.

## 2.12 Research Question

This project intends to answer the following research question: *How do experiences of intergenerational trauma influence the psychosocial wellbeing of Second-Generation British Eritreans?*

### Aims:

1. *To explore and understand the processes, including parenting practices, through which intergenerational trauma may be conveyed or experienced within Eritrean refugee/immigrant families*
2. *To understand how cultural factors specific to the Eritrean community influence the transmission and expression of intergenerational trauma, and its impact on the psychosocial wellbeing of second-generation British Eritreans.*
3. *To identify the coping strategies and adaptive methods second-generation British Eritreans have developed in response to their unique intergenerational experiences.*
4. *To contribute to the broader understanding of intergenerational trauma transmission in refugee populations, to develop recommendations for culturally sensitive mental health interventions and support systems for second-generation immigrants.*

## CHAPTER 3: METHODOLOGY

### 3.1 Chapter Overview

This chapter presents the research method used to study the question: "*How do experiences of intergenerational trauma influence the psychosocial wellbeing of Second-Generation British Eritreans?*" I outline my rationale for a qualitative approach, provide an overview of the research design and conclude the chapter with a quality assessment of the present study.

### 3.2 Rationale for Qualitative Research

This study adopts a qualitative approach to understand the experiences of second-generation British Eritreans. Qualitative research is broadly understood by Sandelowski (2004, as cited in Hammersley, 2012) as "*an umbrella term for an array of attitudes towards and strategies for conducting inquiry that are aimed at discovering how human beings understand, experience, interpret, and produce the social world*" (p.1).

As Eritrean experiences are rarely the subject of psychological research, a qualitative study was considered appropriate. Unlike quantitative approaches, which may create distance between the researcher and participant, qualitative research enables deeper immersion in the data to better understand individual perspectives (Krahn & Putnam, 2003).

#### 3.2.1 Rationale for Reflexive Thematic Analysis (RTA)

Reflexive Thematic Analysis (RTA) was chosen for this study due to its flexibility, reflexivity, and alignment with critical realism (Braun & Clarke, 2006, 2019, 2021). RTA is suited for exploring complex phenomena, such as intergenerational trauma within the Eritrean diaspora, as it allows for both individual and collective meaning-making while acknowledging socio-political structures (Willig & Rogers, 2017; Fletcher, 2017).

A key reason for selecting RTA over alternative approaches was its flexibility to engage with latent themes, patterns of meaning that go beyond the descriptive content of participants' accounts and attempts to reflect underlying assumptions, ideologies or social influences (Byrne, 2022). Given that the Eritreans navigate histories of war, forced migration, and socio-political trauma (Kibreab, 2007), RTA enables an exploration of how these experiences are processed and transmitted across generations. Unlike IPA, which prioritises individual meaning-making, or narrative analysis, which focuses on life stories (Smith, 2017; Riessman, 2008), RTA allows for pattern identification across participants, making it more appropriate for capturing shared experiences (Braun & Clarke, 2021).

RTA's emphasis on researcher reflexivity is particularly relevant for this study, as I occupy an insider-researcher position, a second-generation British Eritrean. My positionality comes with both privileges and challenges, as my own lived experience may inevitably shape data interpretation, power dynamics in interviews, and theme development (Aguilar, 2025). RTA embraces researcher subjectivity as a resource rather than a limitation, allowing for reflection on how my background and assumptions influence the research process (Braun & Clarke, 2021; Terry et al., 2017).

RTA's compatibility with critical realism enables an exploration of both subjective experiences and structural conditions (Danermark et al., 2019). While individual trauma narratives are central, this study also considers the role of historical, political, and social forces, such as postcolonial displacement, forced conscription, and racialised exclusion in the UK, in shaping the Eritrean diaspora's lived experiences (Hepner, 2009). By applying RTA within this framework, this research can move beyond surface-level descriptions to interpret how participants' accounts may reflect broader systemic and structural influences shaping intergenerational experiences of trauma (Archer et al., 2013).

### 3.2.2 Consideration of Alternative Approaches

I considered Narrative Analysis (NA) and Interpretative Phenomenological Analysis (IPA) as potential approaches for this study. NA focuses on how individuals construct and convey stories about their lives, emphasising the social construction of identity through storytelling (Esin, 2011; Rosenwald & Ochburg, 1992; Riessman, 1993). While NA would have allowed for a rich, in-depth analysis of a few participants' narratives, my research aimed to identify shared patterns of meaning across a broader group within the Eritrean diaspora.

IPA is concerned with individual meaning-making and aims to provide idiographic insights into lived experiences (Smith, 2017). As Alase (2017) summarises, "*IPA is more concerned with the individual lived experience and posits that experience can be understood via an examination of the meanings which people impress upon it.*". While IPA allows for identifying patterns across participants, its primary focus is on how individuals make sense of a particular shared experience. In contrast, my study aimed to explore and identify what those shared experiences are within the Eritrean diaspora. Given these considerations, I opted for RTA, which allows for a broader thematic exploration of collective experiences while still acknowledging individual narratives within a shared cultural and social context.

### 3.3 Narrative-Informed Approaches Within the Study

This subsection explains how narrative therapy informed practices; the Tree of Life (ToL) and Forest of Life (FoL) were used within this study. I first outline the Narrative Therapy principles from which these practices originate, then justify their use in relation to the study's critical realist stance and research aims. I then discuss their cultural relevance for work with the Eritrean diaspora.

### **3.3.1 Narrative Therapy (NT)**

Narrative therapy (NT) is a therapeutic approach that views identity as shaped through stories people tell about their lives (White & Epston, 1990). Central to this approach is the belief that people can "re-author" their narratives, moving away from problem-saturated stories to narratives that highlight strengths and agency (White, 2007). By 'externalising' problems, narrative therapy allows individuals to reframe their experiences (Morgan, 2000; White, 2007).

NT's focus on challenging dominant discourses resonates with my study, as Eritrean diasporic experiences are often shaped by narratives related to colonialism, forced migration and refugee identity (Bereketeab, 2007; Connell, 2016; Tsegay, 2023; Yohannes, 2021). These dominant stories emphasise trauma and struggle, leaving limited room for narratives that centre strength or community resilience (Erel & Reynolds, 2018). While NT is rooted in social constructionist tradition, its emphasis on the socio-cultural contexts of identity and experiences supplements this study's critical realist stance, recognising the interplay between individual agency and structural conditions (Bhaskar, 1975).

I adopted NT principles, using the Tree of Life and Forest of Life to facilitate conversations that challenge dominant narratives and highlight alternative stories. These culturally sensitive approaches encourage reflection on heritage, culture and strength while positioning experiences within broader community narratives (Ncube, 2006; Denborough, 2008).

### **3.3.2 Rationale for Using ToL/FoL in the Study**

In this study, I used the ToL and FoL to create reflective and culturally grounded spaces for participants, drawing on their therapeutic roots. ToL was originally developed as a

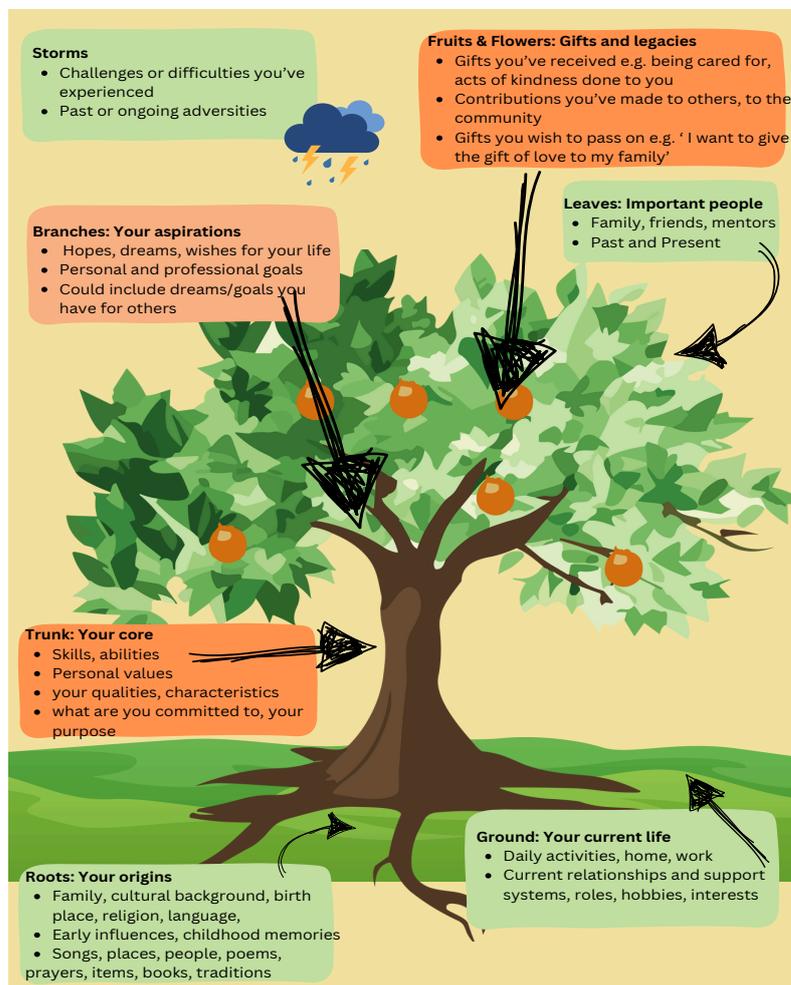
therapeutic tool (Ncube, 2006), and its use in research, such as Saarelainen's (2015) work with cancer patients, demonstrated its adaptability for exploring participants' experiences.

ToL uses the tree metaphor to guide participants through storytelling, with roots symbolising heritage, trunks representing strengths and values, and branches signifying hopes and aspirations. While rooted in a narrative framework, this metaphorical structure aligns with a critical realist ontology by enabling exploration of how participants' experiences and identities are shaped by both observable experiences and broader historical and social contexts (Ncube, 2006). To support participant engagement with these metaphors, a visual aid was developed (Figure 2), adapted from the original ToL by Ncube (2006).

Although the ToL/FoL were initially designed to contribute to the data collection process, their role evolved as the study progressed. Given the richness and volume of the interview data, and the time constraints of the project, the analytic focus was refined to the interviews. While this was the case, the ToL/FoL workshops provided an important reflective and culturally grounded space that helped participants explore identity, intergenerational experiences, and belonging, while also fostering trust, openness, and a sense of cultural safety before the interviews took place.

**Figure 2**

*Visual Tree of Life*



Framework used to guide narrative-based data collection. Adapted by the researcher based on Ncube (2006)

The FoL complements the ToL by shifting the focus towards collective resilience. It encourages participants to situate their individual experiences in a community context, highlighting connections between personal meaning-making and shared social realities. This collective approach resonates with critical realism's emphasis on the interplay between structure and agency, helping to highlight how community members navigate and make sense of their shared reality (Ncube & Denborough, 2010).

From a critical realist stance, reality exists independently of our knowledge or perception of it, but our understanding of it is mediated through social, cultural and historical contexts (Bhaskar, 1978). The ToL and FoL approaches acknowledge this layered nature of reality through their symbolic framework.

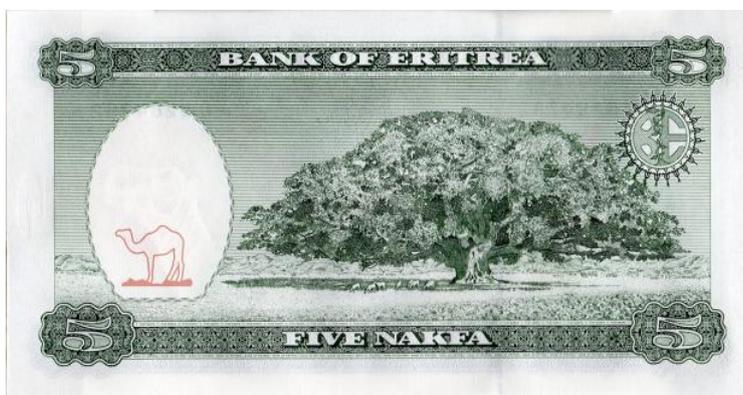
By creating reflective spaces that are culturally meaningful and strength-based, these techniques enrich the research, revealing patterns and themes that may not emerge through individual interviews alone. The FoL further provides a visual and symbolic representation of community resilience, emphasising the interconnectedness of individual and collective narratives. The ToL/FoL support the development of alternative narratives by helping participants reconnect with their cultural identities and communal strengths, which may have been marginalised by dominant discourses (Dyurich & Oliver, 2019).

### **3.3.3 Cultural Relevance**

The ToL/FoL is delivered in a group setting, aligning with Eritrean cultural traditions. Eritrea's oral storytelling heritage (Adem, 2020) and the symbolism of the sycamore tree in community gatherings, customary law, and justice (Libsequal, 2001) made the ToL relevant for this study. The significance of the sycamore tree is reflected in national symbols, appearing on the Eritrean banknote, visually reinforcing its association with tradition (see figure 2).

**Figure 3.**

*Eritrean Banknote*



Culture Symbol of the sycamore tree (*Da'aro*) on the Banknotes

Using the ToL and FoL techniques, I sought to create a culturally sensitive research environment that honours Eritrean traditions of communal storytelling and knowledge sharing. The group format mirrors traditional practices of collective meaning-making and sharing (Negash, 2003).

This approach allows second-generation British Eritreans to challenge externally imposed narratives and reclaim their narrative, providing insights into the transmission of intergenerational trauma and resilience. ToL does this by creating a collective and reflective space, enabling participants to share their stories in ways that feel meaningful to them (White & Epston, 1990).

### 3.3.4 Adapting the ToL/FoL for Research

The ToL and FoL were adapted to balance between achieving richness in engagement while presenting the tool in a practical manner. Previous studies have successfully modified the ToL, e.g. one-day workshops or multiple sessions (Ncube, 2006;

Elhassan & Yassine, 2017; Jacobs, 2018; Fleming et al., 2023; Parham et al., 2019), demonstrating that core therapeutic elements can be preserved in varied formats. As Denborough (2008) emphasises, the ToL's adaptability allows it to be responsive to different settings while maintaining its central principles.

The most significant modification was condensing the multi-session format into a single session, focusing on the 'roots', 'ground', 'trunk', 'branches', 'leaves' and 'fruits'. Each element was selected for relevance to the research aims while maintaining its metaphorical meaning. The "storms" component was shifted from individual reflection to scaffold a collective discussion on shared experiences, aligned with Ncube's (2010) emphasis on collective narrative practices.

To facilitate engagement, participants received preliminary information about the ToL approach via the participant information sheet (Appendix C). This preparation phase outlined the approach's therapeutic origins and explained its adaptation for research, helping participants understand the research context.

### **3.3.5 Cultural Considerations**

This study's methodological approach was grounded in cultural considerations specific to the Eritrean community, treated as superficial adaptations but as integral to the research design, aligning with culturally informed methods (Smith, 2021).

#### **3.3.5.1 Venue Selection**

To support cultural familiarity, ToL/FoL sessions were held in an Eritrean venue. This aligned with Afrocentric research principles that emphasise cultural and social embeddedness (Mkabela, 2005). While not all participants were familiar with the space, its cultural relevance fostered comfort and connection. This choice reflects research that

centres cultural values and traditions in community engagement, facilitating authenticity and trust among marginalised groups (Hood et al., 2023; Liamputtong, 2010).

### **3.3.5.2 Language Considerations**

Although data collection was conducted in English, the use of Eritrean languages such as Tigrinya and commonly spoken languages like Arabic was welcomed to support cultural expression. Temple and Young (2004) emphasise preserving cultural concepts in their original language, which informed the incorporation of *Da'aro* (sycamore tree) as a culturally resonant symbol representing the ToL.

## **3.4 Rationale for Semi-Structured Interviews**

I chose semi-structured interviews to explore intergenerational trauma for its balance between flexibility and focus (Kallio et al., 2016). Structured interviews were too rigid for this under-researched area, while unstructured interviews risked insufficient coverage of key trauma transmission themes.

Semi-structured interviews allowed me to guide discussions using open-ended questions while remaining responsive to themes (DiCicco-Bloom & Crabtree, 2006). Due to limited research on Eritrean intergenerational trauma, this flexibility supported the 'co-construction' of meaning as participants reconstruct their experiences (Britten, 2006). It also ensured that core topics such as trauma transmission, cultural identity and family dynamics were consistently explored. This approach was critical for understanding how war trauma and displacement shape family relationships and psychosocial wellbeing across generations.

### **3.4.1 Interview Schedule Development**

To develop the semi-structured interview schedule (Appendix K), I drew on Galletta's (2013) principles for balancing depth with structure, creating space for storytelling while addressing key domains of inquiry. Questions were informed by theoretical frameworks relevant to intergenerational trauma, identity, and psychosocial wellbeing, designed to trace both individual and systemic influences. Table 4 outlines the four main topic areas alongside the theories informing each area.

Bronfenbrenner's Ecological Systems Theory (1979) provided an overarching structure, ensuring that interview prompts explored experiences across micro (family), meso (community), exo (institutional), and macro (socio-political) levels. This systemic lens was supported by Narrative Inquiry (Clandinin & Connelly, 2000), which helped shape a chronological flow to the interview, beginning with migration histories and moving toward present-day reflections on identity and wellbeing.

The interview schedule was refined through supervisory consultation, a pilot interview with a second-generation British Eritrean, and feedback from an Expert by Experience (EbE). The EbE's input helped shape the phrasing and sequencing of questions to enhance accessibility, advising against assumptions in wording and reducing language that might be unfamiliar to participants. Feedback from the pilot interview led to simplified phrasing and the inclusion of relevant examples as prompts.

**Table 7**

*Interview Schedule Development*

Phase Two: Semi-Structured Individual Interview		
Areas explored	Theoretical and conceptual frameworks	Example Questions
<p><b>Section 1</b></p> <p>Family Background and Migration History</p>	<p>Intergenerational trauma theory (Danieli, 1998; Kellermann, 2001)</p> <p>Narrative Inquiry (Wells, 2011)</p> <p>Bronfenbrenner's Ecological Systems Theory (1979)</p>	<p>Can you tell me about your parents' experiences of leaving Eritrea and settling in the UK?</p>
<p><b>Section 2</b></p> <p>Family life and intergenerational impact: Parenting, family dynamics, communication, and emotional expression</p>	<p>Family systems theory (Bowen, 1978/1993)</p> <p>Tree of life, Narrative theory (Ncube, 2006)</p> <p>Social learning theory (Bandura, 1977)</p> <p>Attachment theory (Bowlby, 1969; Ainsworth, 1978)</p>	<p>"How did your family deal with or express emotions like sadness, anger, or grief during your upbringing?"</p>
<p><b>Section 3</b></p> <p>Identity</p>	<p>Critical Race Theory (Delgado &amp; Stefania, 2023)</p> <p>(Bell, 1980)</p> <p>Phinney's Model of Ethnic Identity Development (1992)</p> <p>Postcolonial Theory (Bhabha, 1994; Fanon, 1963)</p> <p>Intersectionality (Crenshaw, 2013)</p>	<p>Has Blackness, in any way, influenced your sense of identity? If so, in what ways?"</p>
<p><b>Section 4</b></p>	<p>Bronfenbrenner's Ecological Systems Theory (1979)</p>	<p>In what ways, if any, has your</p>

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Psychosocial wellbeing Mental health	Psychosocial development theory (Erikson, 1950)	background as a second-generation Eritrean impacted your wellbeing?
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### 3.5 Expert-by-Experience Involvement

#### 3.5.1 Selection Criteria

I recruited an Eritrean community member as an Expert by Experience (EbE), selecting someone with lived experience as a second-generation British Eritrean. I approached an individual I had previously worked with in mental health services, knowing their relevant insights.

#### 3.5.2 Role and Contribution of the EbE

The EbE helped shape the research topic, offering perspectives on displacement, war, and British Eritrean identity, and ensuring cultural relevance in the interview schedule. This approach reflects the value of co-production in research for achieving cultural sensitivity and meaningful engagement (Brett et al., 2014). They co-facilitated ToL/FoL group sessions, contributing to a culturally inclusive environment and enriching discussions. In our debrief, they reflected on what resonated with their experiences, what differed, and what they found most meaningful.

### 3.6 Ethical Considerations

#### 3.6.1 Ethical Approval

Ethical approval was granted by the University of Hertfordshire (UH) Health Science, Engineering and Technology Ethics Committee with Delegated Authority with protocol number LMS/PGR/UH/05810 (Appendix B). The Code of Human Research Ethics (BPS,

2021a) and the Code of Ethics and Conduct (BPS, 2021b) were followed to ensure the study adhered to ethical guidelines.

### **3.6.2 Informed Consent**

Prospective participants were able to access the participant information sheet (Appendix C) using a QR code on the research poster (Appendix E). The participant information sheet outlined the study's aims, rationale, data protection, confidentiality, ethical approval information and right to withdraw. Participants who wished to participate were able to book a screening call, lasting for approximately 15 minutes.

During the initial screening call, participants were given the opportunity to ask questions about the study. Given my personal connections within the community, it was important to build trust and rapport with prospective participants. Clear guidance on confidentiality measures was emphasised to provide clarity. Individuals who agreed to take part were sent a consent form (Appendix D) via email to complete and return before participating in the ToL session.

### **3.6.3 Right to Withdraw**

Participants were informed that participation was voluntary and of their right to withdraw from the study at any time during the data collection phase without having to provide a reason or experience any disadvantage (as stated in the consent form). I explained to participants that they retained the right to withdraw at any stage of the research, but their data could only be withdrawn up to two weeks after their individual interview had taken place.

### 3.6.4 Confidentiality

In line with ethical guidelines, I discussed confidentiality with each participant in detail to ensure they understood their involvement and how their data would be handled. I outlined this information in the participant information sheet, consent forms and reiterated it during the screening call, the ToL session, and individual interviews. During the interviews, participants were also reminded that they could skip any questions they did not wish to answer and could pause at any time to ensure their emotional safety. Participants were informed about voice and photo recordings. Participants agreed to maintain the confidentiality of information shared by others during the ToL/FoL session. Consent forms confirmed participants' understanding of the study, the handling of their data, and the security and anonymity measures in place.

Participants consented to the anonymous sharing of their ToL for dissemination purposes. In the ToL session, I gave participants the opportunity to conceal parts of their tree or to remove potentially identifiable information before photo recordings were taken for analysis and dissemination purposes. To protect participants' identities, all participants were provided with the option to choose a pseudonym to honour the significance of naming, as highlighted by Zabeeh (2012), and to respect participants' agency in the research process. Allowing participants to choose their own pseudonyms aligns with ethical practices, fostering a sense of ownership and ensuring their identity is represented in a way that feels meaningful to them (Allen & Wiles, 2016; Lahman et al., 2015).

Consent forms, which included identifying information such as names and signatures, were securely stored separately from recordings and transcriptions. Additionally, the EbE signed a confidentiality agreement (Appendices R, S) and received a document outlining their responsibilities and ethical obligations towards participants. These responsibilities were mutually agreed upon between the EbE and myself to ensure a shared understanding of ethical considerations throughout the research process.

### **3.6.5 Data Protection**

All data collected was password protected and stored in encrypted files on the university's OneDrive and only accessible by me as the primary researcher. All participant names were replaced with pseudonyms, and identifiable information was removed to maintain confidentiality.

### **3.6.6 Remuneration**

Participants were reimbursed for their participation with a maximum of £20 shopping voucher. This was not included in the recruitment advert to avoid any potential financial incentivisation. Similarly, EbE received financial remuneration as a token of appreciation for their time and emotional contribution to the project.

### **2.6.7 Managing Potential Distress and Risk**

Risk assessment (Appendix T) was a critical part of this research, particularly because of its focus on intergenerational trauma (Lewis & Graham, 2007). I considered the potential for psychological and physical harm and developed strategies to mitigate any distress for all parties involved.

To address risk of psychological harm, I provided participants with clear information about the study, a list of mental health resources, and detailed debrief information (Appendix F). In the ToL/FoL sessions, I considered the possibility that participants might know one another, whether through familial or social connections within their community. To ensure everyone felt comfortable, I prioritised psychological safety (Edmondson, 1999) by allowing participants to create their own personal Tree of Life and giving them full agency over how much or how little they chose to share with the group.

Drawing on recommendations for trauma-informed research, maintaining confidentiality is important to prevent re-traumatisation and to ensure participants feel safe (Nonomura et al.,

2020; Jefferson et al., 2021). Thus, confidentiality was emphasised to protect participants' psychological wellbeing throughout the study. The consent form explicitly stated that all information shared would remain confidential, and there would be an expectation that participants respect the confidentiality of other group members' identities. To further protect participants' emotional wellbeing, I incorporated breaks during the ToL/FoL session and allowed participants the option to skip questions in the interview, adopting a trauma-informed approach to research (Nonomura et al., 2020).

Trauma-informed research encourages a safe research environment (Epp et al., 2022). The ToL/FoL session was held at a venue which complied with all relevant building regulations, holds public liability insurance, and adheres to health, safety, and fire regulations, with these documents available for review. Regarding physical wellbeing, the risk assessment considered measures related to potential eye strain during online interviews, scheduling breaks, ensuring proper seating arrangements, and maintaining appropriate session lengths with refreshment breaks.

As emphasised by Tracy (2010), ethical research requires careful consideration of participant and researcher safety; therefore, to maintain the safety of the researcher, lone working arrangements were also made. These measures were put in place to minimise any risks related to the venue and ensure a safe environment for all involved. To manage the emotional impact on myself as the researcher, my primary supervisor was available to provide support or consultation via phone if needed. For the EbE, debriefing sessions followed the ToL/FoL session to manage potential emotional impact, aligning with best practices in qualitative research (Guillemin & Gillam, 2004).

### **3.6.8 Researcher's Wellbeing**

An important consideration throughout the research process was my own wellbeing, given the personal resonance of the topic. As a second-generation British Eritrean, the

research aligned with my own experiences, and I found significant overlap between the experiences shared by participants and my own. My insider/outsider position allowed for deeper insight while also presenting challenges in maintaining emotional boundaries.

To support my own wellbeing, I engaged in continuous reflexivity, regularly reflecting on the similarities and differences between my experiences and those of the participants. I kept a reflective journal to process my emotions and thoughts throughout the research process. This helped me manage any emotional responses and remain aware of the impact of participants' stories. My professional background and personal connection to the community allowed me to approach the research with compassion, while my supervisory team provided support and guidance with any challenges that arose during the study.

### **3.7 Procedure**

#### **3.7.1 Recruitment Strategy**

Recruitment for the study took place between October and November 2024. An organisation supporting Eritrean communities in the UK allowed me to share my recruitment poster through their WhatsApp community group. Given the small size of the Eritrean community in the UK, I utilised purposive and snowball sampling to further recruit participants. I created a dedicated Instagram account to share the recruitment poster (Appendix E), and also posted this on my personal LinkedIn account. When initial recruitment was slow, I shared the poster with individuals in my personal network who may know eligible participants. This method is particularly effective in marginalised communities, as individuals are often more likely to participate and trust a researcher if they are referred by someone within their social network (Ellard-Gray et al., 2015).

This combined recruitment strategy resulted in a good response rate. Recruitment was stopped after completing four ToL sessions, with a total of eighteen participants (twelve females and four males) who met the inclusion and exclusion criteria for the study.

### **3.7.2 Selection Criteria**

This study focused on the children of forcibly displaced Eritreans due to the armed struggle for independence. Participants were required to be of Eritrean background, with both parents Eritrean and displaced for socio-political factors, and aged 18 or older at the time of participation.

Given the relatively recent Eritrean settlement in the UK, the study adopted a broader definition of "second-generation" to include both UK-born individuals and those who arrived in their formative years. Eligible participants were either UK-born or had arrived in the UK before age 12.

This age threshold is supported by research on identity and language acquisition. Erikson's (1968) psychosocial theory suggests identity formation occurs during adolescence, while Arnett (2000) highlights its continuation into emerging adulthood. Language acquisition studies further show that children who migrated before age 12 typically achieve native-like proficiency (Singleton & Ryan, 2004).

Although second-generation immigrants are typically defined as individuals born in the country to which their parents migrated (Sekhon & Szmingin, 2005; Potter & Phillips, 2006), Rumbaut (2004) includes children who arrive before age 12 within the 1.5 generation or second generation. Using this broader definition enables the study to capture a wide range of experiences among Eritreans who have experienced significant identity formation and

socialisation in the UK context. Table 7 presents the inclusion and exclusion criteria for participant selection.

**Table 8**

*Inclusion and Exclusion Criteria for Participant Recruitment*

Inclusion criteria	Exclusion criteria
<ul style="list-style-type: none"> <li>• Both parents are Eritrean.</li> <li>• Over the age of 18 at the time of the study.</li> <li>• Parent/s displaced or forced to leave Eritrea due to war or socio-political factors.</li> <li>• Either born in the UK or arrived in the UK before the age of 12. If not born in the UK, completed at least 5 years of schooling in the UK</li> <li>• If parent/s did not arrive in the UK directly from Eritrea, parent/s came to the UK from transit countries (e.g., Saudi Arabia, Ethiopia, Sudan, Egypt).</li> <li>• Raised in either a two-parent or single-parent Eritrean household in the UK.</li> <li>• If one or both parents were not born in Eritrea, they claimed asylum in the UK due to socio-political factors related to Eritrea.</li> <li>• Parents claimed asylum in the UK due to socio-political factors, war, displacement, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Experiencing acute mental health distress</li> <li>• Under the age of 18 at the time of the study.</li> <li>• Did not experience parenting in an Eritrean household in the UK.</li> <li>• Arrived in the UK after the age of 12 or claimed asylum in the UK as an unaccompanied minor (i.e., arrived and claimed asylum before age 18 without parent/s).</li> <li>• Parents were not displaced, forced to leave Eritrea, or did not claim asylum due to war or socio-political factors (including persecution or oppression outside of Eritrea).</li> </ul>

### 3.7.3 Participant Demographics

I aimed to recruit between 15-20 participants to allow for meaningful patterns to be drawn from the data and to account for potential dropouts (Guest et al., 2006). Established guidelines for qualitative research recommend 6-20 participants for studies aiming to understand shared experiences and thematic patterns (Vasileiou et al., 2018).

Eighteen participants were recruited in total; eight participants were sourced through social media and ten through snowball sampling methods. Demographic information is presented below in Table 3. Individuals who expressed interest in participating but did not meet the inclusion criteria were excluded for the following reasons: not being able to attend the ToL session in person or having arrived in the UK after the age of twelve.

**Table 9**

*Participants' Demographic Information and Group Allocation*

No.	Participant	Gender	Age	ToL/FoL Group Allocation
1	Aman	Male	28	1
2	Bloom	Female	38	1
3	Massawa	Female	20	2
4	Salma	Female	25	1
5	Rania	Female	31	1
6	Hana	Female	27	1
7	Helen	Female	32	2
8	Aisha	Female	32	3
9	Mohammed	Male	25	2

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10	Jamila	Female	36	2
11	Jonathan	Male	35	4
12	Elilta	Female	22	4
13	Simon	Male	32	3
14	Nadia	Female	38	3
15	Amira	Female	21	4
16	Salina	Female	28	4
17	Maryam	Female	21	3
18	Senait	Female	37	4

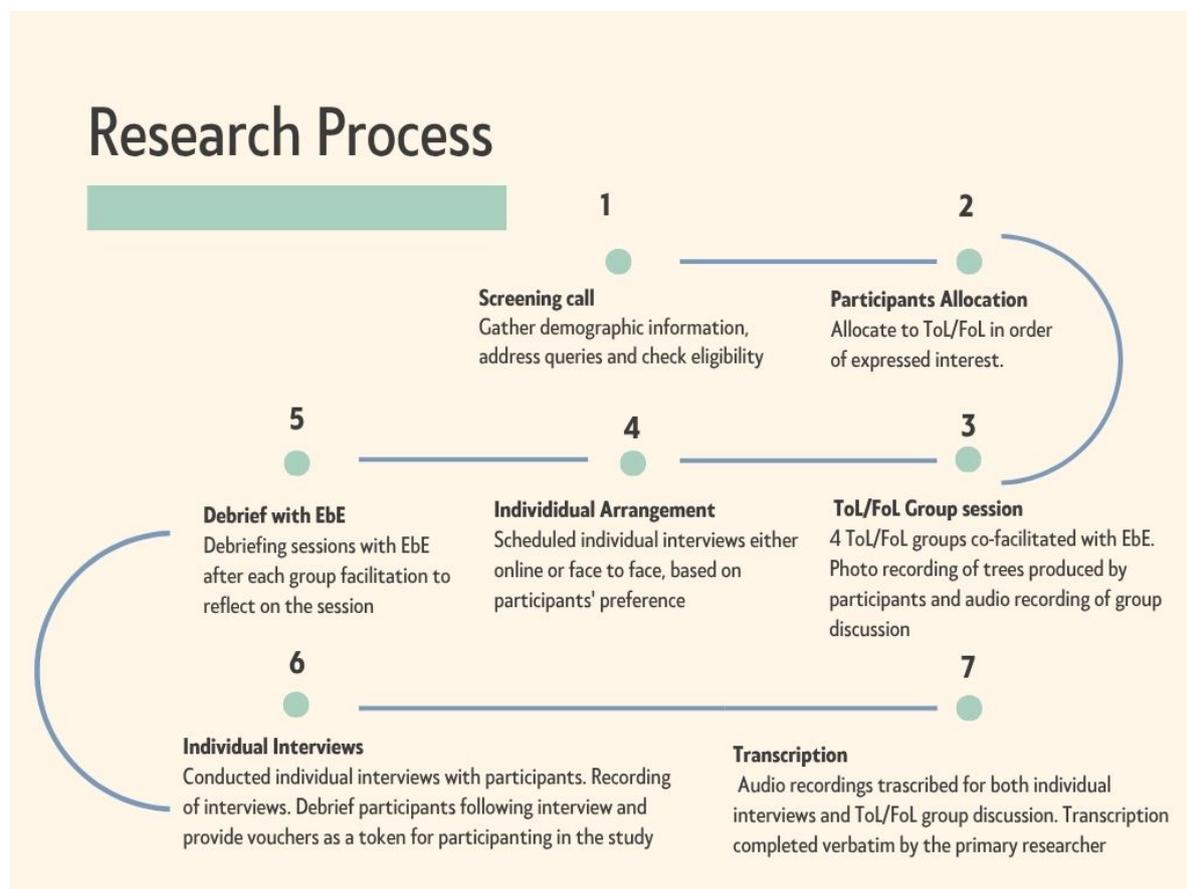
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### 3.8 ToL/FoL and Data Collection Process

The research process took place across two sequential phases. Phase one involved the ToL/FoL sessions, which served as culturally sensitive spaces to build trust, connection and reflection among participants. Phase two consisted of individual semi-structured interview, which formed the primary source of data analysis. Figure 4 provides a step-by-step breakdown of the research process.

**Figure 4**

*Flow Diagram of Research Process*



### **3.8.1 Phase One: ToL/FoL Group Sessions**

Four ToL/FoL group sessions were held with eighteen participants, groups one and four had five participants each, while groups two and three had four participants. Sessions were held at an Eritrean community venue.

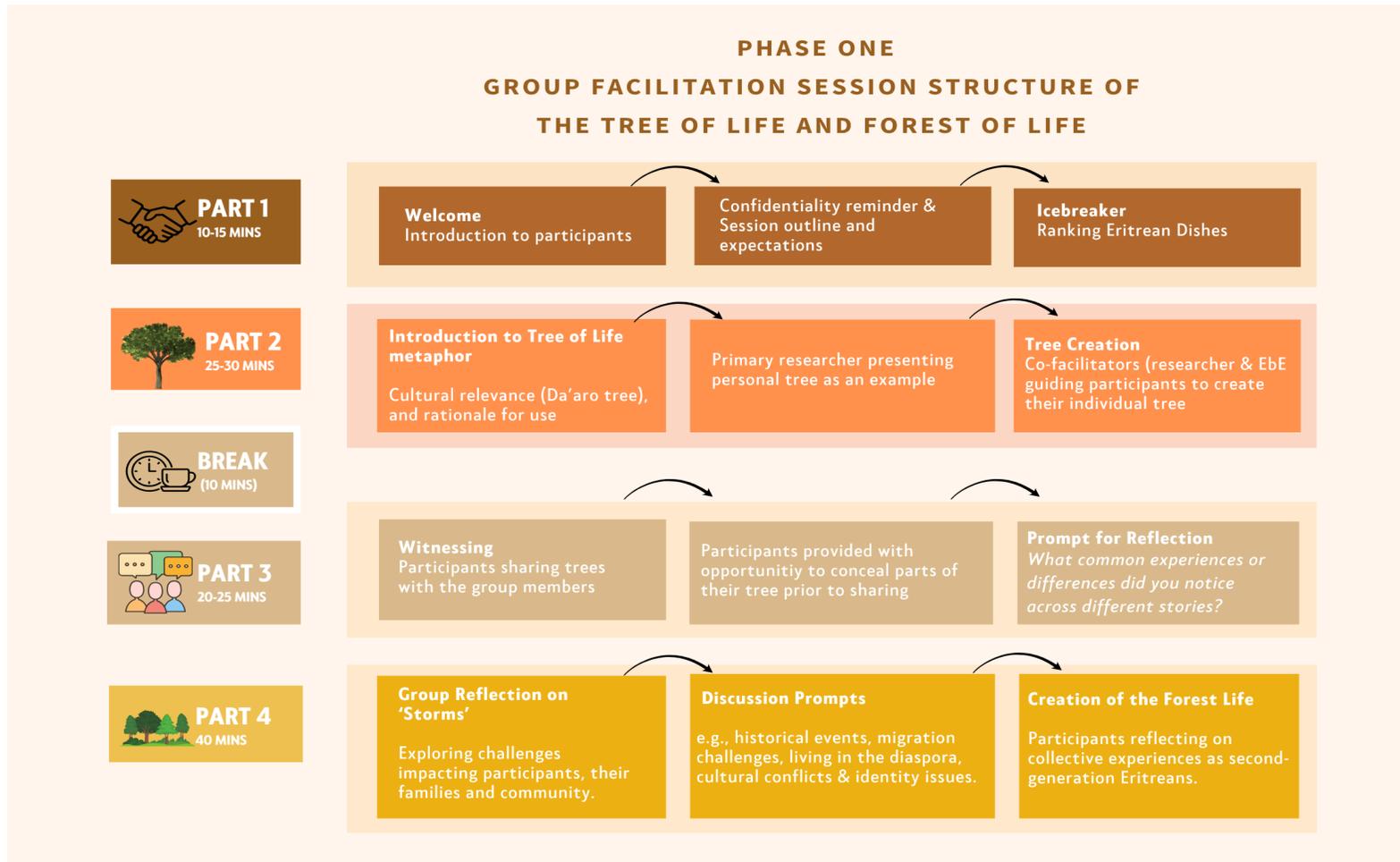
#### **3.8.1.1 Session Structure**

Each session was scheduled for two hours and followed a structured format. Participants received materials including A3 paper, coloured pencils and pens, ballpoint pens, post-it notes, and a ToL outline (Figure 2). To support those unfamiliar with the metaphor, I presented my own tree as an example. Given the compressed format, this visual aid helped establish clarity and emotional safety.

Figure 5 below provides an overview of the four-part facilitation structure for the ToL/FoL session, including timings, activities, and reflective components.

**Figure 5**

*Outline of Phase 1: Tree of Life and Forest of Life Group Session*



### **3.8.1.2 Implementation and Adaptations during ToL/FoL Sessions**

The ToL/FoL sessions were co-facilitated by myself and the EbE. We shared responsibilities during the main components of the sessions, jointly guiding participants through tree creation and offering support where needed.

During the FoL discussion, I structured the conversation, while the EbE helped navigate sensitive topics and drew out deeper reflections. This co-facilitation ensured that participants benefited from both research expertise and lived experience perspectives. It also helped manage group dynamics, ensuring all participants had opportunities to contribute while maintaining focus on the research aims.

Each group aimed to run for two hours. However, the first session extended to three hours due to the time taken for 'witnessing', where participants shared their trees. Sharing styles, humour or speaking in greater depth, made the process longer than anticipated. Participants were given the choice to continue, and all agreed. Care was taken to ensure no one felt obliged to stay, and participants were reminded they could leave at any point without judgment.

After the first session, we introduced adaptations. We reflected on the richness of sharing the full tree and how it enhanced group dialogue. From the second session onwards, participants were informed that the session might run over time. This transparency helped manage expectations and facilitated smoother pacing.

To support time management, we also asked participants to focus on selected sections of their tree, such as the roots or ground, rather than presenting it in full. This preserved reflective depth while keeping within the scheduled timeframe. As a result, most sessions adhered to the two-hour duration, though some extended by 15–30 minutes.

These adaptations honoured the spirit of the ToL/FoL method while remaining culturally sensitive and respectful of participants' time and emotional labour.

### **3.8.2 Phase Two: Semi-Structured Interviews**

#### **3.8.2.1 Interview Process**

Phase two of the research involved semi-structured interviews. Participants were offered the choice of conducting the interview in-person or online via Microsoft Teams. All interviews, apart from one, were conducted in person, at the same venue where the ToL/FoL was facilitated.

Prior to each interview, consent was re-checked and confidentiality was reiterated.

Participants were informed that they were welcome to skip any questions they did not wish to answer and that they could pause at any time to ensure their emotional safety. Interviews lasted between 45-145 minutes.

During and after the interviews, I engaged in reflexivity by documenting any emerging thoughts that surfaced. If necessary, I sought clarification by asking participants to elaborate on specific points or provide examples. My primary approach was to capture my own reflections and interpretations, ensuring an awareness of how my positionality and prior experiences might shape the research process (Berger, 2015; Finlay, 2002).

Following individual interviews, participants were debriefed, and I conducted a check-in to ask how they were feeling. Participants were provided with a debrief sheet (see appendix F) including information on relevant support services.

### 3.9. Data Analysis

The data analysis followed the six-phase approach of RTA (Braun & Clarke, 2006, 2019, 2021). RTA was chosen for its flexibility and emphasis on the researcher's active role in meaning-making. This approach was inductive and deductive: initial coding was informed by participant accounts (data-driven), while the research aims guided theme development (theory-driven). I remained reflexive throughout, reviewing how my assumptions and positioning influenced interpretation (Appendix Q).

1. Familiarisation: I began data analysis by reading and re-reading transcripts to familiarise myself and engage deeply with the data. Initial impressions and notable patterns were documented. This process was active and reflexive, not just passive reading.
2. Generating Initial Codes: I generated initial codes by going through the transcripts line-by-line (Appendix M) and identifying key features to summarise important aspects of participants' accounts (Appendix N). While primarily inductive and grounded in participants' words, the coding was also informed by the study's aims and theoretical framing. This allowed the analysis to move fluidly between close engagement with the data and interpretation through a critical realist lens. Initial codes served as building blocks for developing meaningful interpretations. Reflexivity was maintained throughout by remaining aware of how my assumptions and position could shape interpretations (Appendix L, P). Consistent with a critical realist epistemology, the analysis aimed to identify patterns in the data while also attending to the broader structural and contextual mechanisms shaping participants' experiences. While meaning was derived from the data, interpretation was informed by an understanding that such accounts are situated within and shaped by underlying social structures.

3. Searching for Themes: I reviewed initial codes generated and started to group initial codes into potential themes by looking for relationships between different codes to consider how they cluster together to form broader patterns (Appendix O). Both semantic (explicit) and latent (underlying) meanings were examined to ensure a comprehensive understanding of the data.
4. Reviewing Themes: I reviewed the developing themes to evaluate their coherence and analytic clarity. I considered whether each theme meaningfully captured a central pattern across the data while remaining distinct from other themes. I re-read relevant extracts to check whether they supported the developing themes and adjusted where needed by merging, redefining, or discarding themes to better reflect the richness and complexity of participants' accounts.
5. Defining and Naming Themes: I refined and named each theme by clarifying its core meaning and the specific story it told in relation to the research questions. I aimed for theme names that were clear, concise, and representative of the analytic insights being communicated.
6. Writing the Report: I wrote up the analysis by weaving the themes into a coherent narrative. I selected quotes to ground the analysis in participants' voices while demonstrating how each theme addressed the research aims. I maintained a reflexive stance, recognising my interpretive role in shaping the analysis.

### **3.10 Reflexivity**

As part of qualitative research, reflexivity involves considering the impact I will have on the data collection and analysis. I maintained a reflective diary to capture my thoughts, observations, and emotional responses during data collection and analysis (Ortlipp, 2008). During interviews, I made notes of thoughts and feelings that came up for me during and after interviews to document further reflections (Darawsheh, 2014). This helped me critically think about my own experiences and how these experiences may influence interpretations.

Discussions with my supervisory team provided a space for critical dialogue and consideration for alternative interpretations (Berger, 2015). This helped me remain open and curious and acknowledge my influence as an insider researcher.

### **3.11 Methodological Limitations and Adaptations**

#### **Adapting the ToL/FoL**

The ToL/FoL approaches were originally designed as multi-session therapeutic interventions. For this study, they were adapted as research tools and delivered in a single session. While this format could not offer the same therapeutic outcomes, it still supported meaningful reflection and participation. Despite the condensed delivery, participants described the space as deeply validating and safe. Several participants shared voluntary feedback and emails expressing how meaningful the session had been for them.

#### **Sampling**

Snowball sampling was essential for accessing this community, but it may have resulted in participants with similar networks, limiting the diversity of perspectives. It may have excluded socially withdrawn or disconnected second-generation Eritreans. All participants were from London, raising questions about regional variation. The in-person nature of the research may have restricted participation from those outside London.

#### **Group Dynamics**

The group format may have influenced what participants felt comfortable sharing, potentially limiting discussion on sensitive topics. Power dynamics and group conformity, including deference to dominant voices, likely shaped contributions (Morgan, 1997). My role as researcher may have introduced implicit hierarchies (Finlay, 2002), influencing disclosure and reducing data depth and nuance (Dwyer & Buckle, 2009).

### 3.12 Quality Assessment

I used Tracy's (2010) Eight Criteria for Quality in Qualitative Research to assess methodological rigour, robustness, and transparency. The framework's eight domains, worthy topic, rich rigour, sincerity, credibility, resonance, significant contribution, ethics, and meaningful coherence, supported a structured quality assessment. Each criterion is summarised in the table below.

**Table 10**

*Quality Assessment of Empirical Study*

Tracy's (2010) criteria for quality.	How was this achieved?
<p>Worthy topic?</p> <p>The topic research is:</p> <ul style="list-style-type: none"> <li>• Relevant</li> <li>• Timely</li> <li>• Significant</li> <li>• Interesting</li> </ul>	<p>Tracy (2010) suggests that research should address meaningful, relevant issues. This study explores the intergenerational experiences of second-generation British Eritreans, a population whose experiences are overlooked within public discourse and the academic sphere in the UK. The focus on forced migration, war trauma, contextualised by socio-political histories, offers important contributions to understanding intergenerational experiences in diasporic communities in the context of historical and collective trauma.</p>
<p>Rich Rigor?</p>	<p>The study is approached by bridging between several frameworks, such as</p>

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<p>The study uses a sufficient, abundant, appropriate, and complex:</p> <ul style="list-style-type: none"> <li>• Set of theoretical constructs</li> <li>• Data and time in the field</li> <li>• Sample(s)</li> <li>• Context(s)</li> <li>• Data collection and analysis processes</li> </ul>	<p>intergenerational trauma theory, historical and collective trauma theory and family systems theory to understand the complex interplay between parental exposure to war trauma and displacement and being a second-generation migrant. The combination of individual and group methods (semi-structured interviews and Tree of Life (ToL) and Forest of Life (FoL) sessions) provided depth and richness to the data. This is by capturing both individual and collective experiences.</p>
<p>Sincerity</p> <p>The study is characterised by</p> <ul style="list-style-type: none"> <li>• Self-reflexivity about subjective values, biases, and inclinations of the researcher (s)</li> <li>• Transparency about the methods and challenges</li> </ul>	<p>As an insider-outsider researcher, I maintained critical awareness of how my positionality as a second-generation British Eritrean might influence the research process (Camic et al., 2003). This meant considering how my values, biases and personal experiences shape my approach to the research, rapport with participants, methodological approach and analysis of data. This was done by keeping a reflective diary, making notes during interviews, and engaging in debriefing with my supervisory team and EbE. These practices allowed me to continuously evaluate my assumptions</p>

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	<p>and biases while remaining transparent about my lens.</p>
<p>Credibility</p> <p>The research is marked by:</p> <ul style="list-style-type: none"> <li>• Thick description, concrete detail, explication of tacit (non-textual) knowledge and showing rather than telling</li> <li>• Triangulation or crystallisation</li> <li>• Multivocality</li> <li>• Member reflections</li> </ul>	<p>Credibility was strengthened through thick descriptions of participants' narratives.</p> <p>Triangulation was achieved using multiple data collection methods (ToL/FoL and interviews) to support the trustworthiness of the findings. The involvement of an EbE ensured cultural sensitivity, alongside my insider researcher position to enhance credibility. Use of journaling and debriefing process with the supervisory team to support reflexivity and maintain transparency. As an insider researcher, I had access to tacit knowledge; to the contextual understandings in how the unarticulated is understood through cultural idioms, silences, and humour (Altheide &amp; Johnson, 1994)</p>
<p>Resonance</p> <p>The research influences, impacts, or moves particular readers or a variety of audiences through:</p> <ul style="list-style-type: none"> <li>• Aesthetic, evocative representation</li> <li>• Naturalistic generalisations</li> <li>• Transferable findings</li> </ul>	<p>The use of the ToL and FoL techniques highlights the "evocative" power of stories. These approaches created culturally meaningful spaces for participants to re-author their experiences and share stories through a creative medium. The study has been written up to include direct participant quotes and images of participants' ToL, providing resonant data that is expected to</p>

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	connect with both academic audiences and the Eritrean community.
<p>Significant Contribution</p> <p>The research provides a significant contribution:</p> <ul style="list-style-type: none"> <li>• Conceptually/theoretically</li> <li>• Practically</li> <li>• Morally</li> <li>• Methodologically</li> <li>• Heuristically</li> </ul>	<p>This study makes a theoretical, methodological, and practical contribution by extending narrative therapy concepts into qualitative research. The adaptation of the ToL and FoL techniques highlights the value of culturally sensitive, strengths-based methods for exploring intergenerational experiences in marginalised communities. The study extends knowledge by contributing to a wider body of literature on understanding intergenerational trauma, historical and collective trauma.</p>
<p>Ethical</p> <p>The research considers</p> <ul style="list-style-type: none"> <li>• Procedural ethics (such as human subjects)</li> <li>• Situational and culturally specific ethics</li> <li>• Relational ethics</li> <li>• Exiting ethics (leaving the scene and sharing the research)</li> </ul>	<p>Ethical approval was granted by the UH ethics committee, and ethical rigour was maintained throughout the research process. Ethical considerations made include obtaining informed consent, confidentiality, voluntary participation, risk of harm to participants, researcher and EbE. Given the sensitive nature of participants' narratives, attention was paid to creating supportive and respectful research spaces. A distress management protocol was put in place, providing participants with support services, a reminder of informed consent, the ability to</p>

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withdraw at any time and the use of breaks. I adhered to data management guidelines, including restricted access to data and secure deletion protocols post-study completion.

Meaningful Coherence

The study

- Achieves what it purports to be about
- Uses methods and procedures that fit its stated goals.
- Meaningfully interconnects literature, research questions/ foci, findings, and interpretations with each other

This research demonstrates coherence by effectively aligning the research questions, methods, and theoretical framework. By integrating narrative therapy principles as a methodological approach, I creatively applied its strength-based storytelling elements to explore subjugated narratives. The study demonstrates meaningful coherence by using a critical realist framework with RTA to explore both surface-level patterns and latent themes shaped by cultural and systemic influences. The combination of individual interviews and group sessions supported the generation of rich data, enabling deeper engagement with both personal and collective narratives. This approach enhanced the depth and trustworthiness of the findings by capturing a broader range of experiences and interactions.

## CHAPTER 4: RESULTS

### 4.1 Chapter Overview

This chapter presents findings from the reflexive thematic analysis of individual interviews. It begins by outlining the contextual role of the Tree of Life (ToL) and Forest of Life (FoL) sessions, which supported participants' engagement and informed the analytic process. The chapter then presents the five overarching themes developed from the interview data, illustrating how participants understood and articulated their intergenerational experiences.

### 4.2 Contextualising the Findings: The Role of the Tree of Life and Group Sessions

Although I initially intended to analyse the ToL and FoL sessions, the richness and volume of interview data required a focused analytic scope. The group sessions were therefore used to inform and contextualise the interviews, rather than being included in the formal analysis.

The ToL/FoL sessions offered a culturally grounded space for participants to reflect on intergenerational trauma, identity, and belonging through the *Da'aro* (sycamore tree) metaphor. Participants created individual trees (Appendix G) before engaging in a collective "Storms" discussion, where they explored personal and community-level challenges, such as historical trauma, forced migration, racism, and diasporic identity and how these were endured or overcome. Figure 6 presents participants' reflections on the "storms" discussion. Further group reflections are provided in Appendix H.



The 'storms' discussion was conversational and co-constructed, empowering participants to build on one another's reflections. It served as a springboard for the Forest of Life (Appendix I), where trees were brought together and further reflections were shared (Appendix J).

The group explored guiding questions such as:

- What common themes or challenges echo across different trees?
- What does it mean to be a second-generation Eritrean in the UK?
- What hopes do you hold for future generations?

Transcripts of group discussions offered insight into shared meaning-making. Although not formally analysed, I identified four overarching themes, visually mapped onto a conceptual tree (Figure 7) and summarised in Table 10. Each summary captures collective insights and how meaning was shaped across individual and communal narratives. These reflections shaped the tone and refined my interpretive lens as an insider-researcher.

The collective reflections helped participants begin articulating their experiences, influencing the direction and depth of the subsequent interviews. Having already reflected on identity, parental experiences, and intergenerational relationships, participants entered interviews with greater openness and clarity. This enriched the narratives and informed the analytic focus of the study. For example, the language participants used during the group discussions, particularly around their parents' experiences of hostility and racism in the UK, shaped the sensitivity and perspective I brought to the analysis, guiding how I attended to themes of exclusion and belonging.

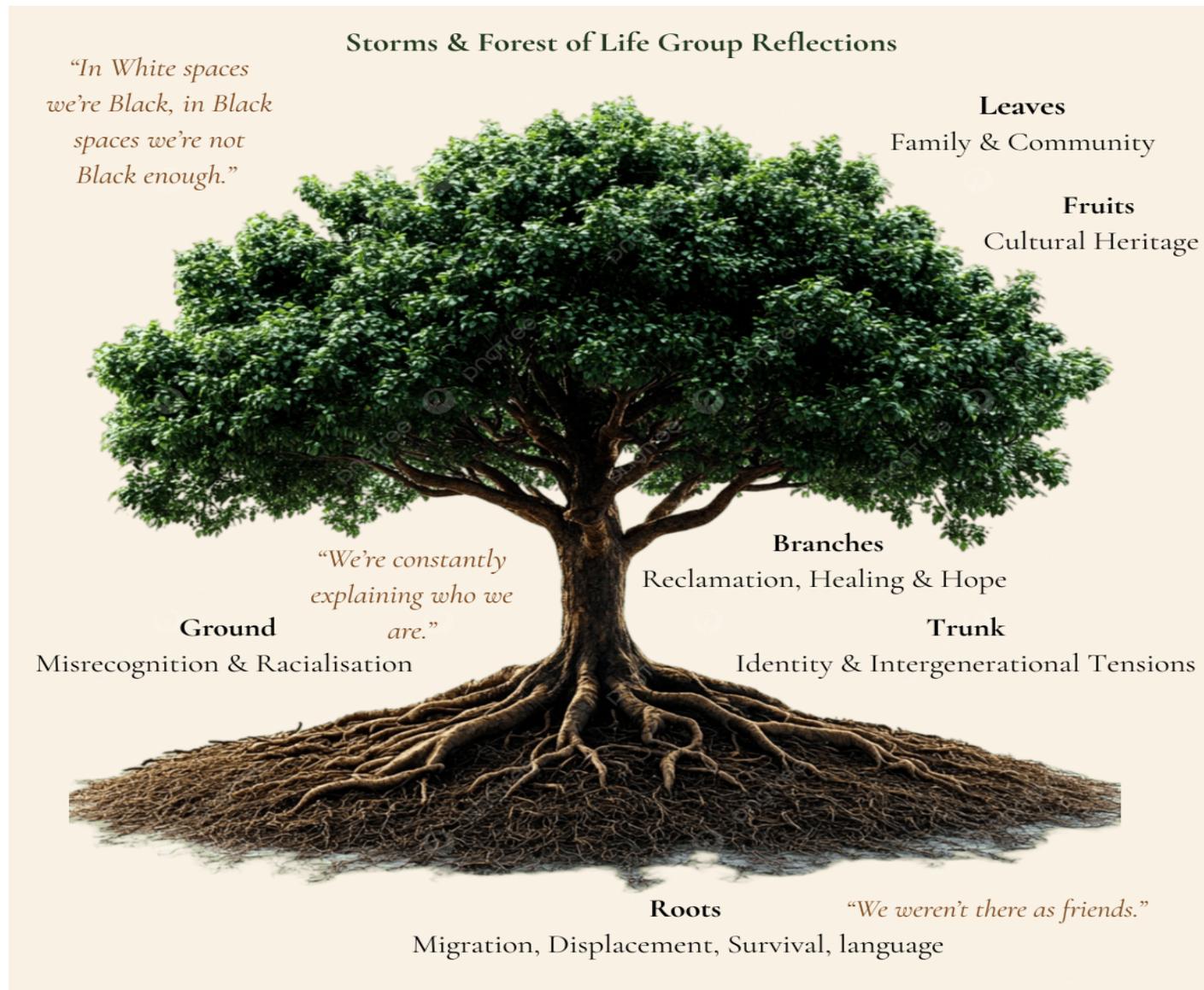
**Table 9**

*Tree of Life and Forest of Life Group Discussion*

Theme	Description
Identity, Misrecognition & Racialisation	Identity described as fluid and context-dependent. Experiences of racial misrecognition and not being fully seen in either White or Black spaces. Emotional exhaustion from self-explanation.
Migration, Displacement & Survival	Parental migration to the Middle East was driven by survival. This migration shaped parenting practices and led to cultural loss, which was compounded by resettlement in England and experiences of racial invisibility.
Cultural Continuity, Language & Intergenerational Tensions	Tigrinya was rooted in heritage, while Arabic felt borrowed through migration. Intergenerational silence, gendered expectation, and cultural disconnect shaped how identity and tradition were carried forward.
Reclamation, Healing & Hope	A desire to reclaim Eritrean identity through pride, language, family, and community. Healing often came through professional roles in healthcare, community work, or academia as pathways for meaning-making.

**Figure 7**

*Thematic Visual of Storms and Forest of Life Group Reflections*

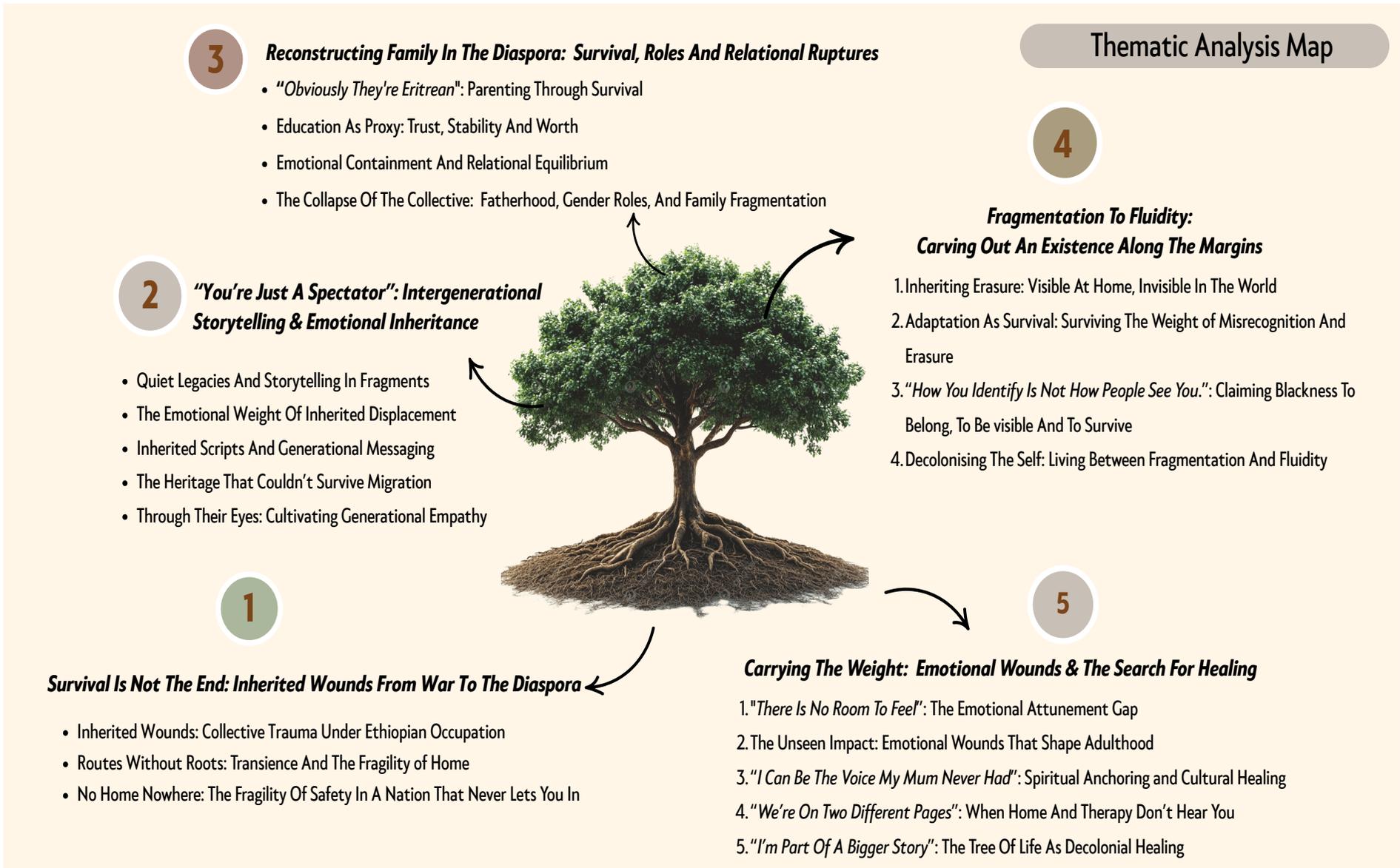


### **4.3 Interview Findings**

Five overarching themes were formed, each capturing how second-generation British Eritreans navigate inherited trauma, cultural identity, intergenerational silences, and emotional healing. Themes are supported by participant quotes, offering insight into the nuanced nature of second-generation diasporic experience. A thematic map (Figure 8) visually represents these themes.

Figure 8

Thematic Map of Intergenerational Trauma of Second-Generation British Eritreans



### **4.3.1 Theme 1: Survival is not the End: Inherited Wounds from War to the Diaspora**

This theme, explored through three subthemes, captures how participants' lives are embedded within histories of war, displacement and resettlement. These inherited experiences were not simply remembered but lived through emotional, relational, and structural imprints.

#### **4.3.1.1 Subtheme 1: Inherited Wounds: Collective Trauma Under Ethiopian**

##### **Occupation**

Participants described family narratives of systemic oppression under Ethiopian regimes. While they did not directly witness these events, participants recalled stories of collective trauma.

Aman described how his mother became central to family survival after the death of her siblings: *"Her older siblings ended up being drafted into the army. She took on a lot of responsibility... she was the engine of the family."* The metaphor of an "engine" captures the burden of responsibility experienced when war devastated families and familial roles were renegotiated.

Participants' accounts of state violence were often communicated in fragments. Nadia shared her father's experience of witnessing mass executions: *"They were literally slaughtering the young men."* Senait described the broader system of dehumanisation her father faced:

*The Ethiopian government was stripping assets, taking a house off you because they could... like the way they describe apartheid in South Africa, if they saw an Eritrean walking the street, you got beaten up. You got fined unnecessarily, you got spat on.*

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(Senait)

Senait's account echoed themes of racialised state violence. These memories provided a lens to interpret historical injustice and broader patterns of oppression.

Some families were actively involved in the struggle for independence "*They were both soldiers*" (Jonathan) or were "*[Grandfather] active in resistance*" (Rania). These accounts describe resistance as an inherited legacy, rooted in suffering, agency and struggle against oppression.

Participants also inherited cultural marginalisation, as educational deprivation and cultural suppression shaped many parents' childhoods. Salina described how her mother's education ended abruptly: "*Ethiopian forces shut down all the schools in the area*", and Amira spoke of her father's resistance to learning Amharic in a system designed to suppress Eritrean identity.

*He [father] told me a lot about how they were taught Amharic at school, which he didn't like, he was a bit more mischievous when it came to those kinds of classes because he was very aware of the situation.*

(Amira)

Acts of epistemic violence were recounted as part of family histories, conveying an emotional and political legacy of resistance. These stories added depth to participants' intergenerational histories, shifting the view of trauma from only victimising.

Participants spoke of ambiguous loss where relatives disappeared or were later confirmed dead: "*Mum doesn't know... he was just gone for three years*" (Salina) and "*She didn't know*

*until the lists came out. He died in 1985, but she didn't know until 1992"* (Bloom). These absences introduced grief into family narratives as a delayed and structurally unresolved experience.

These inherited wounds, rooted in fear and loss, were part of a prolonged state of instability. They formed a foundational backdrop for participants' upbringing, in which narratives of threat, absence, and resistance shaped their accounts across subsequent themes.

#### **4.3.1.2 Subtheme 2: Routes without Roots: Transience and the Fragility of Home**

This subtheme reveals the reactive nature of forced migration. Movements were often improvised responses to immediate conditions, with the UK emerging not as an intended destination but a continuation of survival.

*"Every step kind of came as it came. It wasn't like the UK was their end goal. The first thing was just walking to the next country to get out of the situation they were in."*

(Jamila)

Many families fled Eritrea during the 1970s under life-threatening conditions. Aman recounted his mother's reliance on smuggling networks: *"Her dad arranged it with Beni Amer people to smuggle her to Sudan."* Salma remembered her mother being detained during her escape: *"They were stopped and put in an area. It sounded like a prison."*

Accounts of physical hardship were common: *"My grandma was wearing sandals, and her toe was broken"* (Jamilia). Salina described her mother's solitary journey as a teenager: *"She was 16... a two-week journey from Keren to the border."* These stories convey the toll of escaping, particularly on women and girls, reflecting the hardship of early displacement.

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Displacement fragmented family structures: *“My grandma went without them, they grew up without my grandma”* (Eliita). Massawa shared: *“She [mother] was like I felt a lot of loss and separation from a young age.”* These early experiences of family rupture created templates where attachment felt precarious and subject to disruption.

These separations were structurally imposed rather than chosen. Senait described her father’s moral dilemma: *“My dad ran away to Sudan very quickly, he was there for the funeral, but he said that he knew he couldn’t sleep in his house, but he also knew he couldn’t just run because there’s a widow.”* Senait’s account highlights the impossible decisions faced under systemic violence, where care, survival, and social responsibility interconnect.

Sudan emerged as a space of relative safety and cultural belonging: *“Her [mother] culture is more Sudanese than Eritrean”* (Mohammed). Many families continued to experience displacement across the Middle East, subjecting families to exploitative and precarious roles: *“She [mother] had appendicitis, but the woman who was employing her didn’t want to send her [for treatment]”* (Salina). These accounts reveal how forced migration not only relocated families but introduced new hierarchies of vulnerability, where suffering was unacknowledged and unprotected.

Later migration to Europe brought a new kind of alienation: *“In Arabic it’s called Ghurbah. The sense of not belonging, being out of place in a different society”* (Massawa). Here, ‘Ghurbah’ encapsulates a diasporic experience of cultural and emotional dislocation. A linguistic expression of exile that captures the enduring sense of alienation.

Families arrived in Britain not as newcomers from Eritrea, but as unwilling nomads, shaped by serial displacement. Their journeys reflected the weight of multiple migrations and survival experiences before resettlement even began.

#### **4.3.1.3 Subtheme 3: No Home Nowhere: The Fragility of Safety in a Nation That Never Lets You In**

Resettlement in Britain (1970s- 2000s) was shaped by economic difficulties, social exclusion, housing inequalities and rising anti-immigrant sentiment. Participants described the immediate disorientation of resettlement: *“You go to a place you don’t know the language; you don’t know the system. You look odd to everybody”* (Nadia).

Language became a marker of difference: *“People look at you differently because you have a burden of an accent”* (Bloom). The framing of accent as “burden” positioned parents as perpetual outsiders and revealed how belonging was conditional on sounding “British enough”.

Otherness extended beyond White British society. Salina recounted: *“Other Black people making xenophobic comments, relating to the fact that they’re refugees.”* Shared racial identity did not guarantee solidarity, and migration status created new forms of exclusion within racialised communities.

Discrimination also appeared within institutions: *“He [father] went to university with a very Arabic Muslim sounding name... he came with a plan and everything to do that question, but the professor gave it to someone else”* (Amira). This reveals how, through denial of opportunity, the precarity of inclusion was reinforced.

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Participants described experiences of direct violence, particularly post 9/11. Bloom shared her mother's experience: "*Even though she's not Muslim, a lot of the post 9/11 bombing stuff. She was beaten up on the bus.*" Violence stripped away cultural nuance, and religious and cultural symbols were flattened under broader, racialised assumptions.

Aisha described the severity of far-right hostility: "*There were days where they couldn't leave the house... My uncle was attacked brutally and set on fire... Our house was petrol bombed... we were evacuated and moved into emergency housing.*" Threat of safety extended beyond rhetoric, shaping the geography of where families could live.

Structural barriers fragmented families, Nadia reflected on her mother's migration as a single parent: "*Leaving Saudi, the way she described it.....I think she had a lot of stress, and she just harboured it in her body. That kind of came out eventually, because in 2000 she got sick.*" Here, displacement left a somatic imprint whereby unprocessed trauma became embodied.

Despite hardship, participants recalled resilience and moments of connection: "*They had a good community of friends that also moved, they were Eritrean and East African*" (Salma). Even meeting basic needs brought comfort: "*She [mother] was just happy to have a house*" (Elilta). Others valued political stability: "*He [father] is quite appreciative of the country.... he always votes Labour, I think most refugees do*" (Jonathan).

Resettlement in Britain was neither a story of linear integration nor of total alienation but a complex negotiation between marginalisation and belonging. Families faced violence, instability, and disrupted kinship but also cultivated support systems, reclaimed joy, and carved out spaces of belonging.

### **4.3.2 Theme 2: “You’re Just a Spectator”: Intergenerational Storytelling and Emotional Inheritance**

This theme explores how narratives of war, displacement and survival were communicated. Participants describe storytelling as a form of cultural transmission and loss through five subthemes.

#### **4.3.1.2 Subtheme 1: Quiet Legacies and Storytelling in Fragments**

Participants described growing up with fragmented accounts of their parents’ histories. Stories surfaced through overheard conversations, selective storytelling, humour, or silence. These indirect forms of storytelling required active interpretation.

*“I always hear his opinion about that time through him telling other people, and I happen to be in the room, or I have overheard”* (Jonathan). *“You’re just a spectator, so you’re just listening and hearing these stories. They would mention the Derg... how their siblings went to war... but wouldn’t go into detail”* (Hana).

Storytelling often lacked emotional context, shared from a distance or disguised through humour: *“But I don’t know if he’s joking. This is the man my dad is”* (Salina).

Silence was equally common, experienced as a cultural norm or relational distance: *“Eritrean parents don’t like to have deep conversations”* (Bloom) and *“I guess it’s because of the relationship we have...we are very surface level”* (Jonathan).

These partial disclosures seemed to serve as emotional protection, perhaps shielding parents from re-living trauma and children from becoming overwhelmed. In the context of prolonged displacement, indirect storytelling appeared to be a strategy of containment rather than neglect.

#### 4.3.2.2 Subtheme 2: The Emotional Weight of Inherited Displacement

*“Sometimes he still has nightmares of some of the things that he had to witness”*

(Salina).

Although parents rarely expressed emotions directly, trauma was not absent, and it emerged through sensory triggers, dreams, and embodied behaviours. *“Loud noises like bonfire night.....I don’t know if they understand what Bonfire Night does to war-torn people”*

(Bloom).

When stories were shared, they often lacked emotional depth: *“She shared stories, but she wouldn’t share feelings..... she was so blasé about it”* (Nadia). Participants spoke of the dismissiveness and emotional distancing to narratives shared. Perhaps this offered a way of staying functional and protected when safety remained precarious. Yet this protective silence also had costs: *“He [father] said that story once and every time I see that food now, I cannot disconnect.... It’s a memory that always comes straight away to me”* (Jamila).

Aman recalled, *“The first time I went to Eritrea, that was my Mum’s first time in years, and she sees a picture of her parents and she starts crying almost hysterically.”* Some chose not to probe further, aware that knowing more might deepen the emotional burden:

*I don’t think I want to know any more than I already know about what my family has gone through. I still want to see my country, and I kind of keep hope alive, I would say for myself and for them.*

(Jamila)

This subtheme illustrates how trauma becomes inherited through embodied presence rather than verbal disclosure. Participants absorbed their parents’ unprocessed pain through

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emotional atmospheres, demonstrating that silence does not prevent transmission but creates different pathways for intergenerational impact.

### 4.3.2.3 Subtheme 3: Inherited Scripts and Generational Messaging

Beyond stories, participants described receiving implicit behavioural scripts shaped by survival. These included caution, restraint, preparedness, and distrust of systems. Often, these scripts clashed with British values of openness and self-expression.

*All of these rules ... you have to be quiet. I always felt like I wasn't a woman because I was very different to that idea..... I'm living in England, where they're encouraging you to figure out what you enjoy and who you are....and then it's not in line with the tradition.*

(Bloom)

Some messages reflected trauma or systemic mistrust: *"My dad's younger sister passed away in hospital... when they're speaking to people with an accent... they might not take it as seriously"* (Maryam). This experience became a cautionary script: *"He realised how people view him... it's always about when you first meet a person. Give your best self...have your guard up and don't be foolish"* (Maryam).

Other common messages included: *"don't share anything outside of this house"* (Bloom), *"be prepared at all times"* (Salina) or *"Most of it was about like politeness and not bothering others"* (Aman). *"My mum didn't want us to be afraid the same way Eritreans usually are"* (Massawa). These accounts reflect messages entrenched in fear, hypervigilance and threat.

For Eliita, the emotional atmosphere she was raised in impacted her experience of anxiety:

*I always think the worst thing's going to happen, and I think that comes from my Mum because she's also very anxious and like don't expect too much. I always think like, something's gonna go bad, which I think comes from that culture of a lot of struggle.*

(Eliilta)

This subtheme illustrates the complex navigation between inherited survival wisdom and contemporary cultural values. Participants found themselves caught between protective scripts rooted in historical trauma and the need to challenge inherited messages that became restrictive in contexts of relative safety.

#### **4.3.2.4 Subtheme 4: The Heritage That Couldn't Survive Migration**

*"I just wish I could experience that environment of everyone speaking in Tigrinya and making jokes" (Massawa).*

This subtheme captures familial and cultural loss, a grief rooted not only in what was lost, but in what was partially passed down. For example, emotional closeness was often met with resistance: *"I'm always curious at what was their true feelings at each stage of their life....what was their aspiration....if they had that kind of luxury and freedom?" (Bloom)* but *"Every time we asked, my dad would just say, I'll tell you another time" (Helen).*

Even when stories were shared, they required careful planning: *"I have to really go out my way to ask and get them at the right to time to talk" (Nadia).* Others felt permitted to probe when physical injuries were visible: *"He did have this scar on his abdomen. And then he explained the story of how he got shot..... It's only because there's like visual representation of that history, I pressed.....and he shared that story" (Helen).* These quotes illustrate how intergenerational dialogue was relationally curated, requiring a process of careful navigation and emotional negotiation.

Language loss was compounded by prioritising integration: *"We were pushed into learning English..... we never practised Tigrinya" (Hana)*, and for others, a desire for cultural closeness was dismissed: *"Because we're dis-attached, it's like, we want to understand everything, but they kind of hand wave it"* (Mohammed).

*Lebanese, Kosovan, Moroccans, a lot of them would go back to their extended family over the summer, whereas for us that rarely happened.... when I went Saudi, all my cousins were around their cousins growing up....a richer family experience, I feel like we kind of missed out.*

(Aman)

Cross-cultural comparison offered a lens to name what was felt by observing cultural richness in others. Cultural loss was not just emotionally, but structurally limited by family scattered globally.

This subtheme illustrates cultural loss, as grief rooted not in a single rupture but in accumulated absences which consequently became a barometer for how 'Eritrean' participants felt: *"I feel unique and alone in that, other people seem to have more Eritrean culture....a lot more than me"* (Salma).

#### **4.3.2.5 Subtheme 5: Through Their Eyes: Cultivating Generational Empathy**

Participants described learning to view their parents not only as caregivers but as survivors shaped by historical violence. This shift from critique to understanding required emotional labour and contextual understanding. This process recurred across participants, and the following quote encapsulates the subtheme in depth:

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*I feel like a lot of Eritreans, whether they went to war or not, everyone has been affected by it [war], especially our family and parents and grandparents and beyond that. I don't know how they could be normal. If you haven't gone to war yourself, your brother has your sister has. So, everything that I've said about my parents, maybe it's normal, for them to be that way. I'm looking at it from a Western sort of comfort zone. They just they had to get on because they can't just be sitting there crying about a friend getting blown up....tomorrow it could be their day.*

(Jonathan)

Jonathan's reflection demonstrates the emotional labour of moving from critique to empathy. Shifting from judgment to understanding required acknowledging positional privilege and a trauma-informed lens. Across accounts, participants described learning to "make room" for their parents' emotional limits. Generational empathy emerged as a relational skill, developed reinterpretation and compassion.

### **4.3.3 Theme 3: Reconstructing Family in the Diaspora: Survival, Roles and Relational Ruptures**

This theme explores how forced migration reshaped family life. Displacement compressed extended kinship into emotionally constrained nuclear units, redefined parenting roles, and altered how care, authority, and emotional expression were negotiated.

#### **4.3.3.1 Subtheme 1: "Obviously They're Eritrean": Parenting Through Survival**

When asked what it was like growing up with Eritrean parents, Simon commented, "*Obviously they're Eritrean*" (Simon). The statement appeared to carry an unspoken, collective familiarity with strictness, fear and protection.

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Parenting was frequently described as rigid and highly monitored *“helicopter parents, very militant”* (Jonathan) and *“I think they were a bit cold”* (Simon), creating an environment of surveillance: *“I’m always being watched”* (Helen) and *“The park has to be in view of the window”* (Jamila). These quotes illustrate how parenting created a restrictive environment and hindered development: *“I wasn’t really developing like a normal child would in terms of like personality or social skills, or because of that being stunted a little bit by his [father’s] side”* (Helen). Hindered development was perhaps compounded by parenting that was described as functional and focused on meeting basic needs: *“It was like, OK, the kids go to school, come back and do well in school, my job is to feed them, keep the house clean, make sure they don’t get into trouble.... it was that simple”* (Aman).

This control described earlier extended into emotional and physical spaces: *“There wasn’t a discussion... it was kind of like do as you are told, there was no room for negotiation... get the look when you’re outside. Petrified. You don’t know what’s going to come to you at home”* (Nadia). The quote illustrates the psychological burden of a childhood marked by chronic terror and unpredictability, in which emotional expression was prohibited within a context of powerlessness.

Jonathan shared: *“It was really tough because my dad would go with me to a lot of places. And honestly, I would forget how to spell my name. It’s really bad anxiety”* (Jonathan). The intensity of surveillance created anxiety from parental presence and illustrates an embodied, visceral response to survival-based parenting.

Efforts to shield children from perceived threats in unfamiliar environments were often expressed through discipline: *“Maybe they witnessed people killing... I don’t know if subconsciously that instilled some kind of violence in them. I also think it was what they thought was the thing to be done to prevent your kids going off track”* (Jamila). The quote

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reveals how parents' efforts may have led to the unconscious reproduction of witnessed violence as a disciplinary strategy.

These survival focused dynamics created role reversals where children became parentified and became emotional regulators and system navigators: *"My parents can get angry quite quickly, like it goes zero to 100 quite quickly... I used to find myself being the mediator"* (Amira) and *"I was the admin assistant, receptionist, part-time cook. You're given responsibilities that are not yours, but it's not even your parents' fault. It's just the way... England is"* (Bloom).

This form of structural parentification stemmed not from neglect but from necessity. Children often assumed roles not because of parental failure but due to systemic exclusion of their parents. Yet their parenting approaches often clashed with participants' views on what parenting should be: *"Parenting should be nurturing someone into growing into who they are. Whereas Eritrean parenting, it's nurturing someone to be something you already have an idea about"* (Bloom).

In this context, emotional nurturing or expressive parenting may not be prioritised, perhaps in response to the conditions that shaped parents' lives. Despite the challenges, many held their parents with compassion *"There's no book, how to raise your kid. I think they've just tried their best..... I don't judge them for the bad things"* (Simon).

### 4.3.3.2 Subtheme 2: Education as Proxy: Trust, Stability and Worth

In the absence of open emotional attunement, education became a proxy for emotional safety and approval.

*"The only thing that I'd say that my parents were not very flexible on was education. You need to be educated"* (Aisha). *"Our parenting style wasn't even strict outside of education"* (Mohammed). Educational pressure was intense and non-negotiable: *"You need to study. Just locked in the house"* (Eilila), and deviations from the expected path triggered conflict: *"It was like a storm when my older brother wanted to go to college instead of 6<sup>th</sup> form"* (Maryam).

Career choices outside of traditional narratives of success were met with opposition: *"They were not happy with my career choice.... the resistance, it's hard making it as a creative in general, but it's even harder when you don't have support"* (Bloom).

However, when narratives of success were followed, position within the family shifted: *"I earned their trust because I was good at school, they were quite lenient with me.... I was made an example at home"* (Amira), and education became a measure of parental approval.

*My brother was quite mischievous at school, so my Dad was angry a lot with him. I just kind of went under the radar just because I was good. I didn't really see any emotion towards me. I just think it was just like normal... it felt static.*

(Amira)

The quote illustrates how academic success paradoxically led to emotional neglect.

Similarly, some described success without recognition: *"I was academic, but I didn't get any rewards for that. There was way more disciplining than acknowledgement"* (Jamila). Parents often misunderstood struggles, seeing them through a non-migratory lens: *"They never saw that... What do you mean you got a U in English? Are you thick?"* (Jonathan).

Education emerged as the primary currency for success, trust, and family pride, replacing emotional connection as the pathway to parental approval. This created a paradox where academic achievement offered belonging while leaving participants feeling emotionally unseen, as success became an expectation rather than a source of genuine warmth or connection.

#### 4.3.3.3 Subtheme 3: Emotional Containment and Relational Equilibrium

Participants described growing up in households where emotions were suppressed to maintain stability in the household. *“My parents expect emotions to be presented or not present, like some things shouldn’t be expressed, like why are you angry?”* (Amira). Emotional expression was policed and questioned, *“Why are you crying?”* (Elilta).

Emotion regulation was internalised early *“There wasn’t much room, you have to take your pain and go somewhere else. I did a lot of hiding feelings”* (Nadia), and this pattern was described as generational: *“Suck it up.... Get over it sort of thing. I understand that because when I see my grandma I know.... My mum never had space for emotions”* (Nadia).

Conflict was often repressed rather than resolved: *“if it’s me and my siblings having an argument, it would be trying to end the argument and that being their [parents’] solution”* (Hana), but years of suppression led to emotional distance:

*Everything blows up between me and them [parents] because I don’t say anything.... It’s built up over years. There’s no safe space..... We just don’t do small talk. When someone my age is like buddy, buddy with them I’m like ugh, get a room, I just don’t have that relationship.*

(Jonathan)

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The consequences of suppression created a sense of relational unfamiliarity, where parents remained emotionally distant.

Participants traced this to both generational hierarchy and structural barriers: *“My dad... he’ll be offended that you’d question him? ...He grew up in a authoritative household, he’s like, how dare you even negotiate?”* (Nadia). Open communication was perceived as challenging to hierarchical family structures and communication breakdown was not just avoidance but a consequence of displacement *“Me and my mum don’t speak the same first language and that is when I think about like English families, they have that privilege...being second generation you genuinely don’t speak the same language”* (Bloom).

Conflict was often diffused through religious framing: *“If anyone was angry.... there was always like.... gratitude. Alhamdulillah, we have a roof over our head, we have each other”* (Amira). This often bypassed the conflict, and it represents a broader cultural pattern of avoidance: *“Eritreans generally brush everything under the rug and it’s not actually fixing the problem. It’s the whole talking thing.... they’re like, urgh, why do we have to waste time talking?”* (Bloom).

Even minor emotional expression was treated with caution and as a threat: *“She [mother] will try and diffuse it when there was never much of an issue. You know, friendly banter...I don’t know if that’s because, like she’s seen like fallouts between her siblings”* (Aman).

These patterns reflect emotional suppression as a stabilising force, prioritising family cohesion over individual expression. Participants learned that vulnerability was discouraged and potentially disruptive. *‘Our parents’ generation were not taught to challenge their parents’ ideas, they don’t even understand the concept of me saying what you said hurt my*

*feelings*" (Bloom), reflecting an intergenerational script whereby collective composure came at the expense of individual emotional attunement.

#### **4.3.3.4 Subtheme 4: The Collapse of the Collective: Fatherhood, Gender Roles, and Family Fragmentation**

*For them, family...its people they were never able to be around, that they had to be removed from. It's a life that they never got to fully live and experience that was cut off for them at a very early age.... spending significant periods without having that maternal or paternal support or influence. Like considering my Mum having children in the UK, experiencing motherhood without a mother and my father..... fatherhood without having his father nearby.*

(Aisha)

This quote reframes diaspora families as structurally disrupted, mourning losses that were never acknowledged. Displacement not only disrupted extended family structures, it also shifted the nuclear family. Some experienced delayed reunification, disrupting early attachment:

*I remember he [dad] was just going out to the shops.... I was like, hey, I think you forgot your suitcase and he's like.... I'm coming back. It was too much of a shock for me as a kid. I loved the dynamic I had, just me and my Mum. It was a shift that I wasn't looking forward to or accepting.*

(Helen)

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This quote positions the father as a relational threat to a renegotiated family and how displacement disrupted attachment, creating long-term relational rupture: *“that did fracture our relationship. I was close to my dad growing up. It was never the same”* (Nadia).

This grief was also felt by fathers: *“I spoke to Mum about it, and she said to me....your dad couldn’t sleep for weeks. It must have been an isolating experience for him. Foreign country, establishing yourself up within a family that’s yours”* (Nadia).

*“My mum was the breadwinner. My dad never worked... even though my Mum was supportive”* (Helen). The quote suggests that displacement also disrupted traditional gender roles, and there may have been an external barrier to the father accessing employment.

The loss of extended family removed traditional support systems: *“When we came to the UK, it was just our home that was the hub, there wasn’t many buffers around it”* (Nadia), and *“My Mum.... didn’t have a support network”* (Mohammed). Family separation was structurally compounded by immigration policies: *“since we left the EU, my auntie trying to move to London is like near impossible”* (Maryam).

Displacement reshaped family life from extended interdependent networks into emotionally compressed nuclear units where survival-oriented parenting replaced emotional connection. Education became a proxy for love and a source of pressure. Silence, structure, and suppression rooted in trauma and cultural scripts constrained intimacy. Care remained present but obscured by responsibility and fear.

### **4.3.4 Theme 4: Fragmentation to Fluidity: Carving Out an Existence Along the Margins**

This theme, explored through four subthemes, traces the identity negotiations of second-generation Eritreans in the UK. It highlights how participants navigate between

erasure and visibility, reflecting a shifting space shaped by migration, colonial history and racialisation.

#### 4.3.4.1 Subtheme 1: Inheriting Erasure: Visible at Home, Invisible in the World

For many, Eritrean identity was nurtured at home: *“My parents, if they could tattoo the Eritrean flag on us, they would”* (Senait). But described layered identities shaped by migration: *“We have our parents’ home country then we have the places where they migrated... then UK identity and then we also have our Islamic identity or our Christian background”* (Massawa).

Aman's experience captures the extent of erasure: *“I didn’t even know I was Eritrean for like a big chunk of my childhood. I thought I was Ethiopian because I’m told that’s the answer to give”* (Aman). This was shaped by the asylum context of the 1990s, when families sometimes claimed Ethiopian identity for safety. Eritrean identity was put *“in the background”* (Massawa) and often confusing, *“It’s like a grey cloud”* (Mohammed).

With this varied foundation, participants entered public spaces where being Eritrean was invisibilised. When asked, *“Where are you from?”* participants' answers were never enough: *“I say no I’m Eritrean. And they would say are you making that country up?”* (Aman).

*“I’ll just show them on the map, and they will go where is that..... it’s on the map here you know”* (Jonathan). This cartographic denial captures the profound dismissal of identity. Misrecognition extended to monolithic racial assumptions, *“You get called Somali”* (Simon) and *“You’re too light and you don’t look like all the other Eritreans”* (Amira).

These burdens had lasting impacts: *“People not understanding where you’re from is like, I know it’s not a big deal, but to this day probably affected me a lot more than I think”*

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(Jonathan). The long-term impact demonstrates how both implicit and explicit reminders of cultural misrecognition create a persistent sense of being an outsider, complicating one's sense of belonging.

Justifying identity often required more than naming a country, it meant reclaiming history:

*How do I do it in a way that's not taking away from being Eritrean or taking away from the Eritrean struggle by comparing us to Ethiopia, it's hard to like articulate without going on a big tangent about the war.*

(Amira)

Simple questions about origin demanded complex, politically loaded explanations, and it carried fear of minimising the liberation struggle.

Despite persistent invisibility, many expressed certainty in their identity: *"I never at any point claimed another country.....I feel proud of myself that despite the invisibility I never went, oh, I'm Sudanese or I'm Saudi"* (Massawa). The quote illustrates resistance against imposed identities and the determination to reclaim one's own.

These experiences reflect a broader historical parallel, just as Eritrea fought for international recognition during its liberation struggle, participants faced a similar fight for recognition in schools and daily life. These experiences of invisibility, being forced to justify a nation, a history, a phenotype, formed a complex foundation for identity formation.

#### 4.3.4.2 Subtheme 2: Adaptation as Survival: Surviving the Weight of Misrecognition and Erasure

*As a kid you go to school and you interact with different people.....when people ask where you're from and people not knowing Eritrea, I guess then it makes you not less proud, but you just don't want to say it because you know the reaction you're going to get.*

(Helen)

To survive cultural erasure, participants adapted to their environments in different ways. Many described feeling *"slightly embarrassed to talk about it or explain"* (Simon). This withdrawal appeared to be protective: *"I don't want to be the different one"* (Elilta) or claiming another identity to cope with alienation, *"So you end up saying, Ethiopian just to get it over and done with"* (Maryam). These quotes illustrate how the fear of being "the odd one out", and the need to assimilate can lead to internalised shame based on how others value and perceive their identity.

*"I've always identified as Eritrean. There's nothing that would have clouded that. I would say you minimise identity when surrounding yourself with other cultures"* (Hana). The quote highlights how minimising became necessary to withstand the discomfort of being unknown while others coped through humour, *"I used to play like a guessing game and make people guess which country I'm from and they never used to get it right"* (Salma).

Misrecognition became an expected threat, creating a state of vigilance to assess when disclosure of cultural identity was safe: *"I always judge by how that person is talking to me and I'll judge whether they know Africa well enough for me to be, yeah, I'm Eritrean"* (Jonathan).

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The implications of self-erasure and minimising identity came at a personal cost, for example: *“Pronunciation of names, you get accustomed to pronouncing it how people pronounce it. So automatically I used to pronounce my name the wrong way”* (Hana). The ‘automatic’ adaptation to *‘just make things easier’* (Hana) for others illustrates a surrendering of parts of the self as a means of survival, reflecting an avoidance or discomfort of self-assertion.

In social interactions, taking a *“backseat”* (Massawa) and being *“less dominant in conversations”* (Salma) in non-Eritrean spaces taught participants to take up less space to not feel left out *“I’m just having to nod my head because I’m not part of the conversation, but I have to engage otherwise, I’m gonna feel excluded”* (Massawa).

These ways of coping offered protection from exclusion but came at the cost of suppressing oneself and fragmenting the self to meet dominant expectations. Surrendering or “leaving” the Eritrean: *“side because no one knows”* who you are reflects the depth of invisibility and a desire to: *“always trying to fit in and trying to feel ok”* (Jonathan).

### **4.3.4.3 Subtheme 3: “How you identify is not how people see you.”: Claiming Blackness to Belong, to be Visible and to Survive**

This subtheme explores how British society racialised participants as “black”, an identity that paradoxically was imposed and withheld. At the core of participants’ experiences was a negotiation of belonging and visibility.

*“You realise how other people see you, they see you as a black person”* (Mohammed). For Muslim female participants, visible markers of religion further complicated racialisation: *“People see the hijab and assume I’m South Asian or Somali”* (Nadia).

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Experiences of discrimination reaffirmed Blackness: *“You are faced with the same discrimination as any other black person”* (Helen) and *“I didn’t feel the racism was because I was Eritrean. I felt the racism was because I was black”* (Senait).

Blackness conflicted with some family narratives: *“My dad was very specific, we’re not black, we’re Eritrean”* (Helen). Some parents viewed themselves as *“darker skinned”* (Massawa).

This tension created racial dissonance, asking *“am I black or not?”* (Helen) and fear of *“denying my blackness”* (Massawa).

Yet, Blackness offered connection: *“It helped ease that transition of being Eritrean because if people don’t know what Eritrea is, people know about black culture, it helped me connect with other people”* (Salina).

Belonging was reinforced by framing the Eritrean struggle as Black resistance: *“I was always taught about the Eritrean struggle and black community struggles so I could see a similarity between them”* (Amira).

Blackness became strategic affiliation, to legitimise experiences of racism: *“If I said [racism was] because I’m Eritrean, I’ve lost it. I had to look for other black people and find allyship there”* (Senait).

Yet Blackness was questioned and often policed:

*I know that I’m Black, but I don’t really know where I fit in and especially because it was mostly like Nigerians and Ghanaians. I don’t think they felt like I was part of them. It was often like, ‘Oh, you’re not really Black.*

(Elilta)

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The policing of Blackness pushed participants to interrogate what Black is: “*Black is one word to encompass a whole range of people. Black doesn’t just mean, a West African or an African American. It is such a wide term*” (Mohammed) and the importance of questioned homogenising groups: “*It’s like pretending that we’re just exactly the same.... it’s not fair to them or to us*” (Massawa).

Despite the tensions, participants asserted their Blackness: “*I had people telling me I wasn’t Black and like interrogating why that was. To me, I am a Black woman. I own it*” (Bloom).

Claiming Blackness became a means of visibility and collective resistance, despite Blackness being contested, a contentious debate of “*Are East Africans Black?*” (Mohammed). This debate reveals the instability of identity and constant negotiation required for survival, belonging, and visibility.

### 4.3.4.4 Subtheme 4: Decolonising the Self: Living between Fragmentation and Fluidity

Participants moved from imposed identity categories and, rather than accepting imposed racial categories, participants engaged in what can be described as decolonial identity practice, shaped by spiritual grounding, cultural reclamation, and a process of reframing.

“*You’re aware that you’re not the same as white British people*” (Mohammed). When Britishness was denied, several participants redefined a British-affiliated identity:

*I don’t say I’m British just because I know I’m going to have to end up saying I’m Eritrean. No one will accept that I’m British based on my appearance. I 100% see myself as a Londoner. I see it as a separate identity to British. I feel I’m a Londoner as much as I feel Eritrean. I don’t see a conflict between the two, it’s easy to adopt both of them.*

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(Jamila)

Participants rejected colonial categorisation: *“It is about others enforcing and imposing that identity onto you rather than me creating it, I think identity is subjective and socially construed”* (Maryam). When racial categories felt rigid and fragmenting, spirituality and religion offered transcendent belonging that moved beyond colonial racial logic: *“I believe in God, I just look at myself the way God sees me... He doesn’t see me as a woman or a Black person or an Eritrean. He sees me as just someone worth loving”* (Bloom).

Spirituality offered belonging that transcended racial and ethnic categories. Even in diverse religious spaces, some found belonging rooted in shared faith: *“Being around other Muslims from a different ethnicity... I felt I had equal claim to that religion”* (Mohammed), reflecting how religion offered a form of belonging that was not gatekept or outlined by others.

Participants found belonging in inherited strength and resistance *“When my parents tell me these stories and seeing the strength and the resilience of the people. It’s hard not to feel proud about that collective effort to get our independence. I’ve always felt proud to say, I’m Eritrean”* (Salina).

Instead of resolving identity into a fixed category, participants embraced multiplicity. Identity became an ongoing, creative practice that could hold contradictions with compassion: *“I can dip into different spaces whenever I like and participate in these conversations. I can merge different parts of my identity. It is a very creative space to be in rather than a limiting space”* (Massawa).

The subtheme reveals identity as an ongoing practice of creative resistance against the colonial demand for fixed and singular categories. Participants moved from imposed

fragmentation to fluidity through spiritual transcendence, cultural identity and creative hybridity. Holding complexity, multiplicity, and self-determination, reflects the transformative potential of decolonial consciousness.

#### **4.3.5 Theme 5: Carrying the Weight: Emotional Wounds and the Search for Healing**

The theme explores the enduring legacy of early childhood experiences and participants search for healing, understanding and wellbeing. It explores the limitations of support from mainstream mental health services and how collective spaces for meaning-making can offer a restorative healing.

##### **4.3.5.1 Subtheme 1: “There is no room to feel”: The Emotional Attunement Gap**

Participants described the absence of emotional templates for processing distress. *“When it came to grief, we weren’t able to see it, those emotions that show vulnerability weren’t communicated. I don’t know what grief looks like”* (Helen).

Massawa shared a painful longing for emotional reciprocity:

*Seeing my mum cry is so rare. I used to wish that like, why don’t you cry about me? Why is it that my sadness doesn’t tug at your heartstrings? That caused a bit of sadness in me over the years.*

(Massawa)

The quote reveals how survival-oriented parenting led to emotional misattunement, potentially rupturing the parent-child attachment bond. Emotional isolation was reinforced through parenting approaches: *“When we were upset it would be, there’s no need to cry or they would say go to your room. You automatically think that would be the case for when you’re upset about something outside of something they’ve caused”* (Hana).

These early lessons in emotional dismissal fostered a long-term pattern of self-silencing:

*If I punch you in the face, I can't be the one deciding how much I hurt you, right?  
You're the one who's feeling the pain, you should be the one expressing how I made  
you feel, and I should be in a position to say sorry even if that's not what I meant. So  
I just nod and say I'll do better until it blows up again in a few months.*

(Jonathan)

These accounts demonstrate how survival-based parenting inadvertently produced an emotional attunement gap. Their narratives describe their claim to feel, name, and make meaning of pain that was never acknowledged.

#### **4.3.5.2 Subtheme 2: The Unseen Impact: Emotional Wounds That Shape Adulthood**

Participants carried emotional and psychological burdens that left lasting imprints on adulthood. *"I hate doing application forms now. That muscle is built as a child, just having to do everything, so annoying"* (Bloom).

This stored memory of childhood burdens created lasting constraints on their ability to perform seemingly straightforward practical tasks and revealed how parentification positioned participants as emotional and logistical anchors within their families. For example:

*I have so much exhaustion. My body is getting older. I feel like I've fallen into this administrative role, the PA of the family... I don't feel like I have the same safety net, but I know they all feel that they have the safety net with me. I feel like I don't have the capacity to look after anyone else. I feel like I'm depleted, and when I think of marrying or having kids, I don't have the reserves for that... I can't cope with it.*

(Jamila)

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The cumulative impact of these roles created profound limitations on participants' capacity for personal development.

*It's like someone watching over you. I don't know if you've been to an exam or something and like a teacher goes past you and you're like, why am I messing up big time or why are you standing there, it's anxiety. Even to this day, we live far, but when a phone rings, I'm like, what's wrong?*

(Jonathan)

The quote illustrates the chronic state of hypervigilance in response to the fear experienced in childhood.

These accounts reveal how survival-driven parenting approaches left internalised wounds expressed as psychological and emotional depletion. Participants' reflections reveal how prematurely carrying the weight of emotional labour has lasting, often unseen impacts.

### **4.3.3 Subtheme 3: "I Can Be the Voice My Mum Never Had": Spiritual Anchoring and Cultural Healing**

Participants drew on religion, culture, and community as sources for healing.

Resilience emerged through spiritual practice, cultural memory, transformed family dynamics and collective connection.

Religion offered emotional regulation and existential guidance: *"Connecting with my religion helped me a lot, once I made that hajj [pilgrimage]... things started to fall into place"* (Nadia).

*"The ultimate kind of answer for this, in terms of contentment and feeling like things will work out... for me the answer is through religion... through my connection with the Quran"*

(Mohammed). Amid the uncertainty and instability of life in the UK, religion offered stability and grounding.

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For Massawa, prayer was both calming and expressive:

*Prayer is where I feel calmer, in my prostration. I make a lot of Dua'a [supplication] to Allah. I enjoy that part of my Islam because it's the part where I express myself. Some people forget that it's a two-way conversation with Allah and he's there to help us through our daily struggles.*

(Massawa)

Her description moves from bodily experience (prostration) to dialogical relationship, positioning prayer as an emotional release supporting daily life.

Beyond spirituality, memories of Eritrea held embodied healing and grounding: *"I went to Eritrea a few years ago... there's a mountain next to her [grandmother] house... I'll close my eyes and I'll like think of that image and it will calm me down"* (Salina). The quote reveals how ancestral landscapes function as emotional anchors and how diasporic identity can be sustained through imagination and cultural memory.

Participants also found strength in redefining family relationships: *"I have a very good relationship with them [parents] now... once they see that you're an adult they become a bit more open... we've bridged that gap"* (Hana). This shift from silence to mutual recognition reflects a growing capacity for intergenerational repair.

Struggles inherited from parents were often reframed as empowerment:

*I'm inspired by Eritrean women. These women walk through the world not being seen at all. The ability to articulate myself and do the kind of work that I do, I feel stronger in it because I know that I can be the voice that my Mum never had.*

(Bloom)

Rather than being paralysed by inherited pain, Bloom reclaims it as a source of purpose, linking personal expression with collective resilience. Cultural proximity fostered healing: *“When I started volunteering, just being surrounded by an Eritrean would make me feel much closer to my culture. I definitely underestimated the power of that, even if it’s not actively speaking about being Eritrean”* (Maryam).

Participants cultivated healing through spiritual grounding, cultural memory, family repair, and communal presence. In doing so, they moved beyond survival, cultivating generative sources of meaning, belonging, and empowerment.

#### **4.3.5.4 Subtheme 4 “We’re on Two Different Pages”: When Home and Therapy Don’t Hear You**

Beginning with emotional invalidation at home, several participants moved toward destigmatising mental health, only to find mainstream services often misaligned with their realities.

*I’ve had therapy in the past. I found it uncomfortable that you’re going to talk to a stranger about your business and you’re not used to that. I don’t think I would talk to the older generation because there’s this idea that you’re mad.*

(Bloom)

Participants described normalising therapy at home: *“I’m very transparent, I’ll tell Mum, I’m going to go speak to my therapist. It freaks her out, she just thinks, are you crazy? And I’m like no Mum, I’m just going to have a chat”* (Nadia). The quote illustrates participants challenging intergenerational silence and reclaiming emotional presence as a form of resistance.

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When seeking support, some experienced a lack of attunement: *"The person I had said something once and I was like, OK, we are on two different pages, there's no overlap here"* (Jamila) which was compounded by a lack of cultural understanding: *"I didn't want to be guided in a way that goes against my culture and religious beliefs; we don't have such an individualistic culture"* (Jamila).

This also extended to intergenerational contexts: *"They don't consider intergenerational trauma. They were kind of like, we're not here to discuss that. That's why I went to private therapy because I felt like there wasn't space in any NHS mental services to really explore that"* (Salina).

These were not isolated frustrations; they revealed a broader issue. Eurocentric models are limited in addressing histories of migration, trauma, and spirituality. Mohammed expands this critique:

*I couldn't be open only because of my Islamic side of things. The reality is that the Eritrean community, whether you're Muslim or Christian, they are religious and that plays such a vital role to their identities that if you feel like you can't bring that into the conversation, then you're not going to engage with those services.*

Lack of psychological safety pushed some participants to only consider therapists who could understand their culture and experience: *"I always encourage my friends to go and see a black therapist. Just the notion of being with someone who's from a similar background, you already feel understood"* (Bloom).

These accounts reflect that in seeking care, participants were not just looking for support; they were looking for resonance, refuge, and a culturally grounded way to feel seen and heard.

#### 4.3.5 Subtheme 5: “I’m Part of a Bigger Story”: The Tree of Life as Decolonial Healing

In contrast to individualised approaches, the ToL created a decolonial site of resistance and healing where cultural and collective identity became central.

*I came in there not feeling like I belong as an Eritrean. Speaking to the people there was really helpful. I’ve been feeling more confident about my identity. It did help me see myself as part of a bigger story, rather than feelings of vulnerability and weakness being just my issue, I’m seeing it as part of a history of these issues that might be found within the Eritrean community.*

(Massawa)

Massawa described a transformative repositioning of internalised isolation to collective belonging. This represents a shift away from Eurocentric therapeutic approaches, reaching new understandings through collective framing rather than isolated introspection.

Elilta shared the sense of validation ToL provided:

*It was quite insightful. I don’t think you get the opportunity to be in a room of like other Eritreans and hear about their experience. It felt like a safe space. It helps you be at peace with the way you grew up and not blame yourself for certain things. When you hear it, you kind of see, this is something that other people experience as well, like second-generation Eritreans. It helps you to give an explanation to the way that you are.*

(Elilta)

Rather than locating distress within the individual, ToL sessions situated distress within intergenerational, historical, and cultural contexts.

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This theme revealed how culturally grounded, community-oriented therapeutic spaces disrupted individualistic models by centring relationality, narrative continuity, and cultural affirmation. For participants, healing came not from clinical neutrality but from being witnessed as part of a culturally and historically rooted collective.

## CHAPTER 5: DISCUSSION

### 5.1 Chapter Overview

This chapter begins with a summary of the main findings, aiming to answer the question “*How do experiences of intergenerational trauma influence the psychosocial wellbeing of Second-Generation British Eritreans?*” The chapter continues by situating the findings within the literature while highlighting original contributions from the study. The discussion progresses from theoretical integration to considering the strengths, limitations and clinical implications of the study. The chapter ends with future directions for research and dissemination plans.

### 5.2 Summary of Key Findings

This study explored how intergenerational trauma influences the psychosocial wellbeing of second-generation British Eritreans through five interconnected themes that reveal trauma as an ongoing, structurally embedded experience rather than a distinct historical event.

Theme one revealed that physical safety in the UK did not resolve inherited wounds from war and displacement. Participants described their lives being shaped by parents’ experiences of systematic violence under Ethiopian occupation, reactive migrations across multiple countries, and ongoing marginalisation in Britain.

Theme two discussed how trauma histories were communicated through fragmented storytelling, protective silence, and implicit survival scripts. Parents communicated caution, emotional restraint, and self-reliance. These messages, rooted in survival, conflicted with British values of emotional openness and individualism.

The third theme explored how displacement compressed extended kinship networks into emotionally constrained nuclear units. Parenting became survival-focused, education served as a proxy for emotional connection, and participants often assumed parentified roles. Emotional expression was suppressed to maintain family stability, creating proximity without intimacy.

The fourth theme captured identity negotiations in a society that rendered Eritrean existence invisible. Participants faced existential erasure and exhausting demands to explain their heritage. They navigated contested racial categories, particularly Blackness, before ultimately embracing fluid, self-determined identities grounded in spirituality and culture.

The final theme looked at the emotional wounds carried, expressed through hypervigilance, depletion, and emotional attunement gaps. It captures participants' search for healing through spiritual grounding, cultural connection, and collective recognition rather than individualised therapeutic approaches.

These themes reveal intergenerational trauma as a complex interplay of inherited histories, structural exclusion, and adaptive resistance that requires culturally grounded, historically informed understanding and intervention.

### **5.3 Rooted in Context: Theoretical Lenses for Understanding the Findings**

To deepen understandings of the themes, the following section situates the findings within relevant psychological, sociocultural, and decolonial theories that contextualise intergenerational trauma and resilience.

### **5.3.1 Theme 1: Survival is not the End: Inherited Wounds from War to the Diaspora**

The findings address the research question by demonstrating how intergenerational trauma functions as an evolving condition in the lives of second-generation British Eritreans. While historical trauma theory (Brave Heart, 1998) explains how collective trauma can echo across generations, these findings suggest that for participants' families, trauma is actively reproduced through protracted displacement, systemic exclusion, and fragmented cultural transmission.

These findings apply HTT to diasporic contexts where structural and ongoing displacement continue to reproduce trauma. Atallah's (2017) study of Palestinian refugee families similarly situates intergenerational experiences within ongoing structural violence and political abandonment, showing how trauma and resilience are co-produced through forced displacement and resistance.

Participants described parental journeys as multi-sited, typically shaped by a sequence of displacements to Sudan, the Middle East, and finally the UK. These trajectories challenge dominant framings of forced migration as linear or destination-focused (Crawley & Skleparis, 2018; Van Hear, 2002). Eritrean displacement emerges as a continual negotiation of safety under instability, echoing Ayalew's (2018) critique of simplified migration narratives, suggesting that migration is a non-linear and socially entangled process.

Participants highlighted how these movements were driven not by long-term strategy, but by immediate threats, with each location offering temporary refuge. Sudan often featured as a site of relative safety and cultural imprinting, while the Middle East imposed exploitative roles and fragility (Kibreab, 2005). Participants described these cultural encounters as contributing to layered identities characterised by fragmentation and complexity. These findings complicate assumptions in refugee discourses that focus on arrival as an endpoint of the

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refugee experience. For these families, arrival in the UK was not the end of the trauma but a reconfiguration of it within new social, political, and institutional contexts.

While many theories of trauma transmission focus on psychological or relational mechanisms, the current findings highlight the structural reproduction of trauma.

Resettlement in the UK introduced families to new forms of marginalisation. Families were placed in under-resourced, racialised environments marked by economic hardship and institutional neglect. This aligns with Lipsitz's (2007) concept of systemic abandonment, where care is replaced by containment, and marginalised communities are visible yet unsupported. These findings support critiques by Fanon (1961/1963), who argued that colonial wounds persist through the state's ongoing invalidation of racialised identity, a dynamic present in the UK resettlement experience.

Participants' narratives were not wholly defined by rupture. Families engaged in adaptive practices by preserving cultural traditions in fragmented forms to create informal support systems. This supports critiques of resilience discourses that overemphasise coping without attending to structural harm (Joseph, 2013).

This theme demonstrates that intergenerational trauma among second-generation British Eritreans is not simply inherited through memory and that it is structured through historical violence, shaped by displacement, and perpetuated through marginalisation. These findings call for trauma frameworks that centre not only psychological but cultural, structural, and political dimensions of harm and for interventions that honour both the losses and the adaptive capacities families carry.

### **5.3.2 Theme 2: “You’re just a spectator”: Intergenerational Storytelling and Emotional Inheritance**

Stories were rarely passed down as coherent narratives; instead, they were communicated in fragments, through humour, selective facts, protective distancing, and silence. These findings align with literature on intergenerational trauma (Braga et al., 2012; Lin et al., 2009; Lin & Suyemoto, 2016; Wiseman et al., 2006; Hoffman et al., 2025). Despite the withheld stories, the imprints of war and displacement were acutely present in the subtleties of parents’ emotional restraint, cautious worldviews, and somatic expressions of unresolved grief (Kellermann, 2001; Lin & Suyemoto, 2016).

Parental silence can be understood as a culturally shaped coping strategy, reflecting not only Eritrean norms around emotional containment but also an ongoing feeling of instability and unresolved displacement. As Fennig and Denov (2022) note, in contexts of protracted trauma and structural exclusion, silence may serve as protection against overwhelming distress.

Parental silence may also reflect what Danieli’s (1981, 1984) described as conspiracy of silence, where trauma remains unspoken not due to denial, but due to the lack of recognition from broader society, as observed in Holocaust survivors who refrained from sharing their experiences with those who were not themselves Holocaust survivors. A similar dynamic appears in the Eritrean context, where silence may be compounded by a political and historical legacy. As Bereketeab (2007) notes: “*You are alone, no one cares about you, you can only depend on your own sources.*” This geopolitical marginalisation fosters what he calls “*a social-psychology pregated with a sense of ferocious national determination and independence*” (p.82). Hill (2004) similarly describes Eritreans as having developed a “*ferocious sense of individuality*” (p. 9) after decades of global neglect. These quotes highlight a core argument that silence in Eritrean families is not just psychological trauma but

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perhaps a response to intergenerational invisibility, shaped by abandonment, colonial subjugation, and a national ethos of self-reliance. From a postcolonial lens, intergenerational silence reflects a deeply political inheritance, rooted in histories of marginalisation.

In addition to silence, parents often communicated trauma through implicit messages: be cautious, emotionally restrained, polite, remain neutral and do not expect too much. These messages align with what Danieli (1998) and Kellermann (2001) describe as inherited scripts, shaped by fear, marginalisation and unresolved trauma. These behaviours can be explained as historically learned strategies for navigating generations of colonial violence; as Fanon explained, "*The first thing which the native learns is to stay in his place, and not to go beyond certain limits.*" (Fanon, 1963, p.52).

What is particularly important here is how these strategies were received in a British context. Second-generation Eritrean participants experienced intergenerational tensions when these inherited messages clashed with British cultural norms that encourage openness, individualism, and expressive identity. These findings bear similarities to second-generation communities in different contexts ( Jeyasundaram & Trentham, 2020; Lin & Suyemoto, 2016).

These intercultural tensions are well-established in the acculturation gap literature (Birman, 2006; Telzer,2011), creating a form of intergenerational dissonance, where children raised in relatively safe environments receive messages that contradict both their social surroundings and internalised familial ways. The findings suggest that the gap is not just generational or cultural but rooted in survival from geopolitical violence.

For some participants, this silence ignited empathy and a longing to bridge generational gaps. For others, it felt emotionally overwhelming, creating a sense of exclusion from one's

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history. This ambivalence resonates with postmemory theory (Hirsch, 2008), where the second generation inherits narratives and the emotional atmospheres and unspoken wounds of their parents. This theme supports Hirsch's claim that postmemory is not only about remembering but about inheriting the aftermath. These dynamics are mirrored in research on the Eritrean diaspora, where second-generation Eritreans internalised collective memories shaped by nationalistic struggle and survivors' guilt despite being raised outside Eritrea. Postmemory can create a sense of inherited obligation, shaping identity through historical transmission (Hirt, 2021).

Many participants moved toward what could be called intergenerational empathy, a consciously cultivated recognition of parents' trauma. This sits in contrast with findings from a study on Iran-Iraq war survivors' children, which found that severe parental trauma reduced offspring empathy (Salimi & Sajjdi, 2022). In this study, empathy did not appear as passive acceptance but as an intentional act of narrative reclamation, a way to hold both pain and meaning.

Overall, this theme provides an alternative understanding of silence as a historically embedded form of intergenerational communication. While it can create disconnection and grief, it also communicates protection and survival. By merging psychological theories, postcolonial frameworks, and trauma studies, this theme suggests that silence must not be pathologised or understood in isolation. Instead, it should be recognised as a legacy of survival in the face of structural neglect. These findings extend historical trauma and postmemory theories by reframing silence not only as a relational rupture but also as a historically rooted mode of communication.

### **5.3.3 Theme 3: Reconstructing Family in the Diaspora: Survival, Roles and Relational Ruptures**

This theme explored how forced migration reshaped Eritrean family life, compressing expansive kinship systems into emotionally burdened nuclear units. Parenting became centred on survival, discipline, and caution, while emotional expression was viewed as destabilising. These ruptures were structural and historical reconfigurations, shaped by cultural bereavement, inherited trauma, and colonial legacies. While cultural loss was discussed in Theme 2, overlaps can be addressed together more seamlessly.

#### **Cultural Bereavement and Inherited Loss**

Migration dismantled social architectures that sustain identity by disrupting kinship systems. Eisenbruch's (1991) theory of cultural bereavement describes grief experienced when separated from cultural meaning systems. Participants reflected not only on their losses but on those their parents could not articulate, giving rise to inherited bereavement. A grief passed down through emotional silences, fragmented memories, and parenting shaped by unresolved trauma.

Displacement not only removed Eritrean families from geographic place, but from a cultural and relational womb, a severing described in Eisenbruch's (1997) metaphor as being cut from the "placenta" of the homeland. The loss of extended kinship disrupted multigenerational caregiving structures (Nadel, 1946), leaving parents isolated in unfamiliar systems and children without the buffering presence of aunts, grandparents, or community.

This emotional and cultural dislocation is supported by Bhabha's (1994) notion of unhomeliness, being physically housed but psychologically and culturally displaced. The data extends postcolonial theories of hybridity by revealing how participants experienced it as subversive, unstable, and often painful. Their inherited identities were composed of

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fragments, interrupted languages, and unspoken histories rather than cohesive cultural traditions. For second-generation Eritreans shaped by forced migration, what was inherited was often disjointed; therefore, hybridity can be reframed as a psychosocial load, shaped by absence and adaptation within contexts of rupture.

This disconnection produced what attachment theory (Bowlby, 1969) might describe as ecological disruption when a child is not anchored within a secure base of cultural familiarity and kin support. However, attachment theory's Eurocentric focus on parent-child dyads may not capture traditional Eritrean family structures, where security is distributed across extended kinship networks (Keller, 2018). Instead, participants were raised in households cut off from their village roots, with parents navigating trauma, racism, and systemic exclusion. As one participant reflected, "It was just our home that was the hub" (Nadia). Displacement therefore restructured the family not only physically, but psychologically, shifting the emotional labour and survival work inward.

Participants described how parenting, while rooted in care, became rigid and controlling. These patterns reflect parenting styles influenced by trauma, shaped by fear, though not neglect. Through the lens of intergenerational trauma theory (Danieli, 1998), we understand these practices as survival scripts. Scripts that become internalised ways of navigating danger, passed down through discipline, silence, and vigilance.

One of the most consistent dynamics for participants was the emotional overinvestment in education. Academic success became a proxy for love, trust, worth and a substitute for emotional attunement. Participants described a paradoxical presence of education whereby compliance and achievement led to relational invisibility and non-compliance led to relational visibility. This aligns with Bourdieu's (1977) concept of symbolic capital; education operated as emotional currency within both the host society and the home. The roots of this value

system may lie in Eritrea's colonial past, where education was repeatedly denied under Italian, British, and Ethiopian regimes (Negash, 2005; Mengesha & Tessema, 2019). What was once withheld became sacred, but this intensity also produced conditional affection, where success became a precondition for closeness.

Many participants described assuming adult responsibilities from a young age, acting as translators, administrators, or emotional mediators. This reflects existing literature on structural parentification (Denov & Bryan, 2012), where children take on developmentally incompatible roles. The findings suggest that this stems not from parental failure but from systemic exclusion, as has been found in previous research with refugee children (Denov & Bryan, 2012). These role reversals place children in positions where they must navigate complex institutional, linguistic and cultural barriers.

From a psychological perspective, these dynamics impact developmental hierarchies, placing children in roles of responsibility and emotional containment during their formative years. This premature role-flipping can shape long-term difficulties in setting boundaries, processing emotions, and trusting caregivers (Engelhardt, 2012). Participants often showed immense empathy, recognising that "there's no book on parenting," yet still carried the weight of being "receptionist, cook, admin assistant" for families displaced.

Across accounts, emotional suppression emerged as another central theme. Feelings were discouraged: "Why are you crying?" (Eliita) as vulnerability was viewed as a threat to family stability. Emotion socialisation theory (Eisenberg et al., 1998) explains how children learn emotional restraint in families where survival takes priority over expression. This silencing was often multigenerational and a legacy of hierarchical family models appearing to stem from colonial socialisation. As one participant noted, "they don't even understand the concept of me saying 'you hurt my feelings'" (Bloom).

Paternal absences due to delayed reunification were seen to disrupt family bonds further. Participants described fractured attachments, particularly with fathers returning to families already reconfigured. Displacement also challenged traditional gender roles, often forcing mothers into unsupported caregiving and financial labour, deepening family stress. Without extended kin networks, nuclear units carried the full emotional and economic weight of survival.

What emerged was not simply a story of familial dysfunction, but of adaptive containment, love and care restructured by trauma. Families remained close in proximity, yet distant in emotional connection. Parenting was often protective but emotionally muted. Education offered status, but sometimes replaced intimacy. In these compressed spaces, children inherited not only their parents' trauma but also the strategies for surviving it.

#### **5.3.4 Theme 4: Fragmentation to Fluidity: Carving Out an Existence Along the Margins**

This theme explores the intricate, multifaceted identities of second-generation British Eritreans, shedding light on how intergenerational trauma, inherited cultural silence, and sociopolitical invisibility shape their psychosocial wellbeing. Unlike more widely recognised diaspora communities, participants described a form of existential erasure, where their cultural and national presence was questioned or invisible. This environment created a sustained burden of identity negotiation in which the self was not only fragmented but persistently interrogated, echoing the broader emotional impact of intergenerational trauma.

The persistent question, "Where are you from?" speaks to the concept of interpellation (Althusser & Brewster, 1971), where individuals are positioned through dominant ideologies. Participants were often placed in reductive or inaccurate racial and national categories, leading to repeated acts of self-explanation or strategic erasure. These experiences reflect critical race theory's concern with epistemic violence (Delgado & Stefancic, 2023), whereby

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dominant cultural narratives erase non-Western knowledge systems, deepening the intergenerational silence participants had already inherited.

In response to this misrecognition, participants adapted in ways that could be understood through a schema therapy conceptualisation of surrender, avoidance, or overcompensation (Young et al., 2003). Many described adapting through self-silencing, minimising, strategic invisibility, identity shifting, use of humour or emotional withdrawal to negotiate hostile and invalidating environments.

Janina Fisher's (2017) trauma model offers further insight. When identity is continually misrecognised, the self may fragment into compliant, invisible, or reactive parts. In this sense, fragmentation becomes a survival strategy, shaped by both inherited trauma and contemporary sociopolitical misrecognition. This was particularly evident in racial identity as participants described being racialised as Black in the UK, while simultaneously experiencing exclusion from pan-Black communities and rejection of Blackness within some Eritrean family narratives. This dissonance reflects Hall's (1990) theory of diasporic identity as incomplete and always becoming. Some participants claimed Blackness as a space for political solidarity and belonging, while for others it was a disputed and unsteady category.

Spirituality appeared as a counterforce to this fragmentation. For many, God offered an unconditional recognition not found in social spaces. Faith transcended national and racial categories, aligning with transpersonal psychology's framing of identity as multidimensional and inclusive of spiritual being (Rowan, 2013). Religious belonging provided a space where one could be fully seen without the burden of explaining oneself, in contrast to dominant frameworks that demanded self-categorisation, spiritual spaces allowed for a more expansive self-concept.

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Participants also exercised narrative agency by reclaiming their Eritrean heritage through cultural storytelling and historical memory. They positioned themselves within a legacy of resilience and independence, finding in Eritrea's struggle for international recognition a mirror for their fight for identity validation. This parallels McAdams' (1993) concept of narrative identity, where individuals create coherence by crafting stories that integrate trauma, strength, and survival. Rather than resolve identity into singular categories, participants embraced contradiction. Drawing on Anzaldúa's (1987) borderlands theory, their experiences can be understood as inhabiting third spaces that allow hybridity, contradiction, and fluidity.

Through these identity practices, participants redefined survival not as silence or assimilation, but as creativity and resistance. This aligns with Bhabha's (1994) concept of hybridity, the third space where colonised subjects negotiate, subvert, and reimagine imposed identities. The second-generation Eritrean experience, shaped by existential erasure, misrecognition, and adaptive resilience, ultimately exemplifies a movement from fragmentation to fluidity. Identity here is not a fixed inheritance but a conscious, relational, and often spiritual endeavour.

This theme addresses the research aim of exploring coping strategies developed by second-generation Eritreans in response to their unique intergenerational experiences. Participants' identity work was not only a response to personal adversity but also a collective act of healing and resistance, reclaiming visibility in the face of inherited erasure and contemporary misrecognition. Their struggle for self-definition mirrored Eritrea's struggle for global recognition, revealing identity as both a personal and political act of endurance and creativity.

### **5.3.5 Theme 5: Carrying the Weight: Emotional Wounds and the Search for Healing**

This theme explored the enduring emotional consequences of survival-based parenting shaped by displacement and trauma, as well as participants' evolving search for healing through spiritual, cultural, and collective avenues. The findings reflect a complex interplay of emotional misattunement, developmental trauma, and culturally rooted survival. These findings deepen our understanding of how intergenerational trauma influences the psychosocial wellbeing of second-generation British Eritreans, while also highlighting how cultural and contextual factors shape its transmission and response.

Participants' accounts of emotional suppression and misattunement highlight the impact of insecure caregiving relationships, shaped not by neglect but by the emotional cost of survival in exile. The absence of parental emotional reciprocity, evident in participants' accounts, reflects ruptures in attunement foundational to secure attachment (Bowlby, 1980; Ainsworth et al., 1978). Participants described internalised, emotionally dismissing messages which constrained their emotional development and cultivated self-silencing that persisted into adulthood (Eisenberg et al., 1998), which emphasises that children learn emotional expression through modelling and reinforcement.

However, this emotional unavailability would need to be situated within broader historical and structural conditions. As discussed in Theme 1, Historical Trauma Theory (Brave Heart, 1998) also explains trauma endured by parents may be transmitted through emotionally blunted caregiving, especially when parents are impacted by insecurity and systemic marginalisation, conditions that require emotional suppression rather than vulnerability. This reframes what may appear as emotional neglect as parenting in response to structural violence.

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As discussed in Theme 3, participants also described enduring impacts of parentification, where they assumed adult responsibilities as children. This aligns with literature on complex trauma (van der Kolk, 2005) and parentification theory (Hooper, 2007), revealing how premature emotional labour shaped patterns of exhaustion, hypervigilance, and depleted relational capacity. These insights highlight how psychosocial wellbeing is shaped not only by inherited trauma but also by the roles and responsibilities assumed in response to disrupted family systems. A process central to the study's focus on how intergenerational trauma is experienced and embodied.

Participants sought meaning and healing through spiritual grounding, cultural memory, and relational repair. Religion provided a space where emotional expression, existential clarity, and unconditional belonging were accessible without judgment. Massawa's description of prayer as a two-way conversation, Bloom's sense of wholeness with God and Mohammed's spiritual anchoring in the Qur'an align with transpersonal psychology (Rowan, 2005; Pargament & Saunders, 2007). These practices offered emotional regulation and symbolic safety that mainstream services often lacked. Similarly, Salina's mental return to Eritrean landscapes as a source of calm reflects how diasporic memory and cultural imagination can sustain emotional grounding, even in exile. These stories reflect post-traumatic growth (Tedeschi & Calhoun, 1995) and the narrative thickening described in narrative therapy (White & Epston, 1990).

Many found mainstream mental health services culturally dissonant or psychologically unsafe. NHS therapy often lacked cultural and spiritual sensitivity, replicating epistemic violence by excluding religious or historical dimensions of distress. This misalignment reflects a well-documented gap in culturally responsive care (Sue et al., 2009; Thompson, 2004) and highlights the inadequacy of Eurocentric, individualistic models for diasporic communities with collective and relational worldviews (Fanon, 1963; Bulhan, 1985). These

findings are not surprising, as found in a body of literature in mainstream services not meeting the needs of marginalised communities (Alam et al., 2024; Bansal et al., 2022).

In contrast, the Tree of Life (ToL) session emerged as a transformative site of culturally grounded, decolonial healing. The ToL methodology enabled participants to externalise pain and reconstruct their stories using the metaphor “Da’aro”, rooted in culture, ancestry, and strength.

The ToL exemplifies decolonial and liberation psychology (Martín-Baró, 1996; Watkins & Shulman, 2008), which centres relationality, history, and cultural affirmation over individualised models of distress. Healing was not rooted in clinical introspection, but in shared storytelling, witnessing, and cultural anchoring. These findings contribute to the study’s final aim: generating recommendations for culturally congruent mental health interventions. For second-generation Eritreans navigating layered trauma, healing requires not only therapeutic tools but culturally rooted spaces that recognise their history, affirm their multiplicity, and restore collective dignity.

Overall, this theme illuminates how intergenerational trauma is felt, negotiated, and transformed through emotional labour, spiritual practice, cultural memory, and collective healing. It challenges reductive models of distress and calls for interventions that honour both the pain and power embedded in diasporic inheritance.

#### **5.4 Strengths and Limitations**

The following section considers the strengths and limitations of this study, reflecting on the research design, methodology, and contextual factors that shaped the findings.

### **5.4.1 Strengths**

To my knowledge, this is the first study to explore the experiences of second-generation Eritreans in the UK, offering insight into identity, collective, historical, and intergenerational trauma, and healing. Participants articulated identity on their terms, generating rich contextualised data. Although the sample size limits generalisability, the priority for this qualitative research was for depth over breadth (Patton, 2014).

By focusing on a rarely researched community, the study addresses long-standing critiques about the exclusion of marginalised voices in psychological and social research (Hill Collins, 2000; Hooks, 1994). Several participants expressed that it was the first time they had been invited to reflect on identity in this way, illustrating research as a restorative and empowering process (Maiter et al., 2008), echoing broader decolonial principles of storytelling as resistance (Cahill, 2007; Tuck & Yang, 2014).

Methodological innovation was another strength. Adapting the ToL/FoL into a culturally sensitive, two-phase approach enabled psychological safety before individual interviews. Expert-by-experience involvement, my insider perspective, reflective journaling, and a diverse research team combining Eritrean cultural knowledge with outsider perspectives all enhanced depth, trust, and rigour.

### **5.4.2 Limitations**

The study's geographic scope, limited to London, captures a specific diaspora subculture shaped by urban multiculturalism. Eritreans in smaller UK cities may encounter different forms of racialisation, visibility, and cultural retention (Hall, 1990; Brah, 2005).

Snowball sampling may have produced overlapping social networks, limiting potential diversity. In-person ToL sessions may have excluded individuals with mobility or caring

responsibilities. Condensing ToL from a multi-session therapeutic format to a single research session represents a methodological compromise, though participant feedback suggested the sessions remained meaningful.

Time constraints may have prevented full exploration of the data and limited participant involvement in theme development. Most significantly, only second-generation perspectives were included; incorporating first-generation perspectives would deepen understanding of how stories are transmitted, withheld, or transformed across generations.

### **5.5 Reflexivity: Insider Positionality as Empowered Praxis**

My position as an insider researcher was not a methodological limitation but a strength, adding depth and richness to the research. Shared cultural background allowed deeper trust, cultural resonance, emotional safety, understanding and visibility. It also offered validation, a space to be seen when your very identity is not recognised. More importantly, my insider position represented a purposeful use of institutional access to amplify systematically marginalised voices. As a member of the second-generational Eritrean diaspora, I was committed and motivated to shed light on what is often invisible in dominant discourse. This aligns with decolonial research, which welcomes researchers to be not neutral observers but as sites of political engagement and narrative justice (Aguilar et al., 2025).

The insider-researcher position, while valuable for building trust and shared understanding, carries its own risks. Shared cultural background can lead to assumed knowledge, blind spots, or overidentification with participants (Dwyer & Buckle, 2009). Reflexive practice was embedded throughout the research process, but the possibility of bias remains an acknowledged tension in insider research, as noted in the literature (Merriam et al., 2001; Chavez, 2008). I was mindful to keep a reflective diary (Appendix Q) to be transparent about

my biases and assumptions, reflecting on what assumptions I held when interpreting findings.

## **5.6 Implications for Clinical Psychology: Beyond One-Size-Fits-All Therapy**

This research highlights the limitations of individualised, Western therapy for second-generation diaspora communities, offering clinical insights into intergenerational, collective and historical trauma. For second-generation British Eritreans, distress was not only psychological but relational, historical, cultural, and systemic. While the recommendations here are grounded in this group's experience, they may be relevant to others with similar cultural and historical contexts (Dupuis-Rossi, 2020; Jones et al., 2020; McKenna & Woods, 2012; Mir et al., 2019; Ratts, 2017).

### **5.6.1 Reframing Inherited Scripts as Survival Strategies**

Intergenerational messages such as “don't expect too much,” (Eliita) and “don't share anything outside of this house” (Bloom) emerged from displacement, instability, and systemic racism. Clinicians can approach these as survival maps rather than cognitive distortions, honouring them as intergenerational wisdom. Considering the use of narrative techniques, such as “What messages do you think were passed down in your family to keep you safe?” could support clients in differentiating between scripts that still serve them and those they are ready to reframe, honouring inherited scripts as historical intelligence they carry.

This research found that silence was a recurring intergenerational strategy for emotional containment, shaped by culture and history. Therapists can begin by resisting pathologising silence, to explore its function relationally and contextually: What has silence protected? What role has it played in sustaining family bonds or shielding others from harm? Recognising silence as adaptive may reduce shame and open relational possibilities.

### **5.6.2 Identity Fragmentation and Misrecognition as Systemic Injury**

Participants described a strain of invisibility and inaccurate categorisation. Therapy can offer a space to hold social and political pain, not just psychological distress. This is by validating experiences of invisibility as a form of trauma, particularly when the nature of the misrecognition is a recurring experience. Clinical work can validate the emotional toll of misrecognition to allow clients to define their identity on their own terms, including fluid, contradictory, or hybrid forms. Asking clients, “How do you want to be seen?” and “Where do you feel most like yourself?” may offer grounding.

### **5.6.3 Cultural Bereavement as Invisible Grief**

Cultural loss was described not only through migration, but from the absence of language fluency, traditional rituals and intimacy. This grief resembled disrupted attachment, a deep longing mixed with avoidance or shame. From a therapeutic perspective, validating feelings of disconnection and cultural insecurity as part of an inherited condition of displacement rather than a personal failing can offer a perspective shift. Treating cultural reconnection like attachment repair and offering space where this grief is witnessed without needing to be fixed can be powerful in supporting clients with reaching a negotiated form of cultural closeness.

### **5.6.4 Healing Through Non-Western Approaches and Collective Storytelling**

The ToL method demonstrated the value of shared storytelling, allowing participants to locate themselves in cultural history and externalise self-blame. Narrative approaches such as Michael White’s *saying hullo again* (White, 1988) may offer relevance for cultural bereavement. Rather than encouraging individuals to let go of cultural connections, therapy could support clients in reconnecting with fragmented heritage.

The findings from the study position faith as emotional regulation and cultural memory as grounding. Participants often found wholeness and emotional safety in God, spirituality, or imagined returns to Eritrea, acting as restorative anchors. Therapy could integrate practices such as prayer, storytelling rituals, or cultural metaphors as central to healing.

### **5.6.5 Recognition of Systemic Violence as a Clinical Concern**

Lin et al.'s (2009) study highlights how intergenerational silence among Cambodian American families reflects both cultural restraint and the absence of public recognition of collective trauma. This mirrors the Eritrean context, where silence stems from geopolitical invisibility and contributes to intergenerational dissonance within Western environments, emphasising emotional expression.

Participants described how systemic racism and cultural erasure compounded inherited trauma. Clinical Psychologists must widen formulation scope to include socio-political context, validating racism, structural exclusion and refugee precarity as legitimate sources of distress. When public discourse welcomes subjugated stories, recognition gives people permission to acknowledge suffering and seek recovery pathways (Herman, 1992).

### **5.6.6 Broadening Trauma-Informed Inquiry: From “What Happened to You?” to “What Do You Carry?”**

Trauma-informed practices have evolved from pathologising (“What is wrong with you?”) to recognising distress as a response to adverse life events (“What happened to you?”) (Sweeney et al., 2018; Johnstone & Boyle, 2018). Findings from this study suggest the need for a further evolution, particularly when working with communities impacted by historical trauma and forced displacement. Hence, I propose a new guiding question: “**What do you carry?**”.

“What do you carry?” invites clinicians to engage the broader ecology of trauma, drawing on Bronfenbrenner’s (1979) systems theory, recognising trauma as layered, inherited, and systemic, not just rooted in an individual biography. To my knowledge, this shift has not been formally articulated in trauma literature, and it represents an original contribution to how trauma can be framed and responded to in clinical practice.

This question makes space for indirect and intergenerational experiences such as family silences, collective grief, or cultural erasure that remain unacknowledged in dominant clinical frameworks. For communities like the Eritrean diaspora carrying inherited histories of violence, displacement, and silence, “**What do you carry?**” invites deeper inquiry, asking: “**What has been passed down? What remains unspoken? What are you holding that you were never given the words for?**” This paradigm shift supports more culturally grounded, historically attuned therapeutic practice by understanding and naming what is carried.

These recommendations call for a shift in therapeutic practice which highlights the dimensions of inherited suffering while honouring the wisdom in survival strategies developed across generations. “What do you carry?” signals a decolonial, contextually grounded reorientation, learning into community psychology and narrative practices that prioritise collective wellbeing, social justice, and co-authored histories. Such approaches enable communities to reclaim and share stories as tools for healing.

### **5.7 Future Research Directions**

This study voices the experiences of second-generation Eritreans. Future research, including parental voices, would deepen understanding of how trauma is passed down. It could provide further insights into the lived experiences of collective trauma, displacement and resettlement as explored in this study, but from the parents’ lens. As the Eritrean

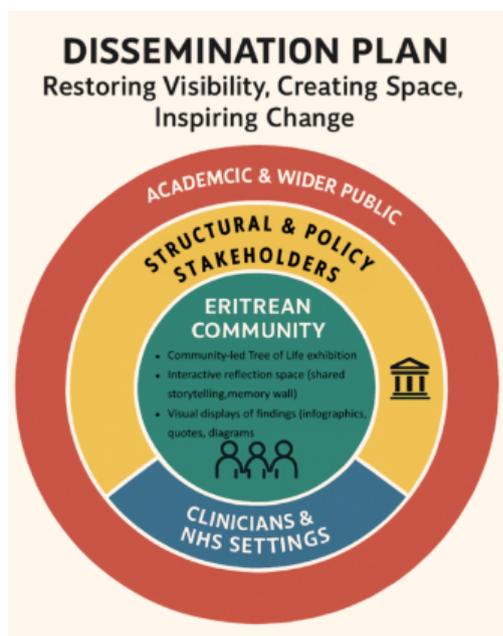
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diaspora community is growing in the UK (ONS, 2023), it would be essential to explore how parenting in the diaspora is negotiated with the view to better supporting refugee families in the future. Such research would create opportunities for understanding, healing and intergenerational dialogue. This could contribute to clinical psychology and family therapy literature and collective models addressing trauma.

### 5.8 Dissemination

**Figure 9**

*Dissemination Plan*



Dissemination aims to follow an ecological model (Figure 9) starting with the community at its core, expanding to clinicians, and academic audiences.

**Community Dissemination:** At the heart of dissemination is the Eritrean community, the core audience and source of this research. Inspired by the ToL, a community-led exhibition will be held, aiming to blend storytelling and research into a culturally grounded gathering. Participants' ToL will be displayed alongside quotes, infographics, and creative presentation

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of findings. Interactive elements like a collective Tree of Life or community memory wall will invite shared contributions. This model can be adapted for other diaspora communities experiencing comparable intergenerational trauma. This will be supplemented with findings shared through infographics, short visual essays, and social media storytelling to ensure that knowledge is accessible.

**Clinical Dissemination:** Findings are relevant to clinicians working with racially minoritised or refugee-background clients. Participants described therapy spaces that often failed to recognise the complexity they carry. Key findings to disseminate include the paradigm shift from “What happened to you?” to “*What do you carry?*”, moving towards a lens that holds space for collective and historically embedded distress. Dissemination aims to include training workshops and clinical publications.

**Academic Dissemination:** Plans include presentations at the DClinPsy research conference and the British Psychological Society (BPS) Community Psychology Festival. Academic publications will focus on key contributions, use of ToL in qualitative inquiry, the “What do you carry?” paradigm, and the study’s empirical findings.

## 6. Conclusion

This study amplified the voices of second-generation British Eritreans, revealing how intergenerational trauma persists through inherited grief, displacement, structural exclusion, and adaptive resistance. Rather than pathologising silence, the findings reframe it as a protective survival strategy, while showing how identity, spirituality, and collective storytelling can transform pain into meaning.

By integrating psychological, sociocultural, and decolonial lenses, the research expands historical trauma theory beyond individual memory to include cultural and systemic dimensions. The adapted Tree of Life methodology demonstrated the value of culturally rooted, relational spaces that sustain identity and history, offering a practical model for decolonial, community-based healing.

Proposing a shift from “*What happened to you?*” to “*What do you carry?*”, the study invites trauma-informed practice to recognise inherited, layered, and systemic distress. In doing so, it honours Eritrean voices and asserts that visibility itself can be an act of justice and repair.

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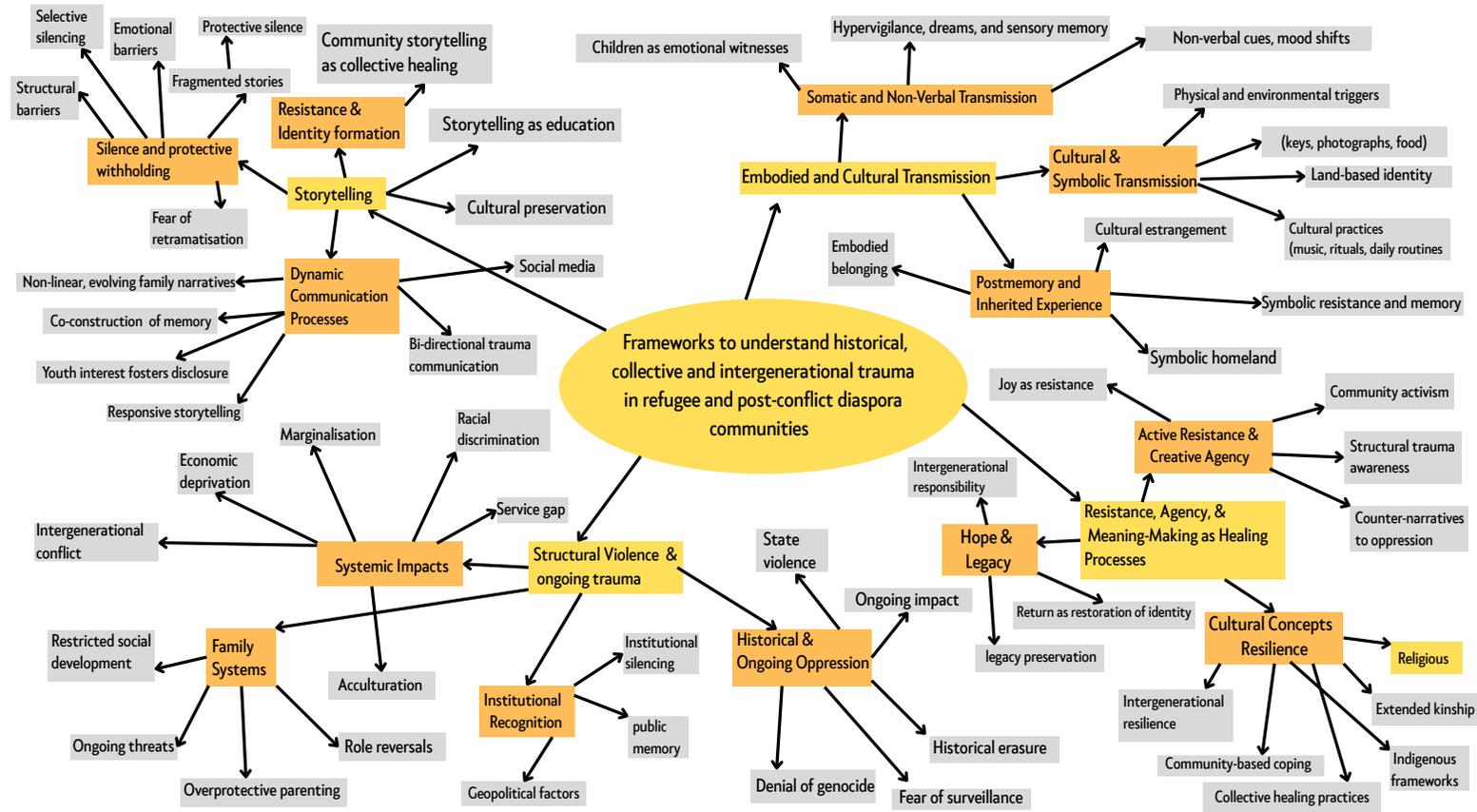
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APPENDICES

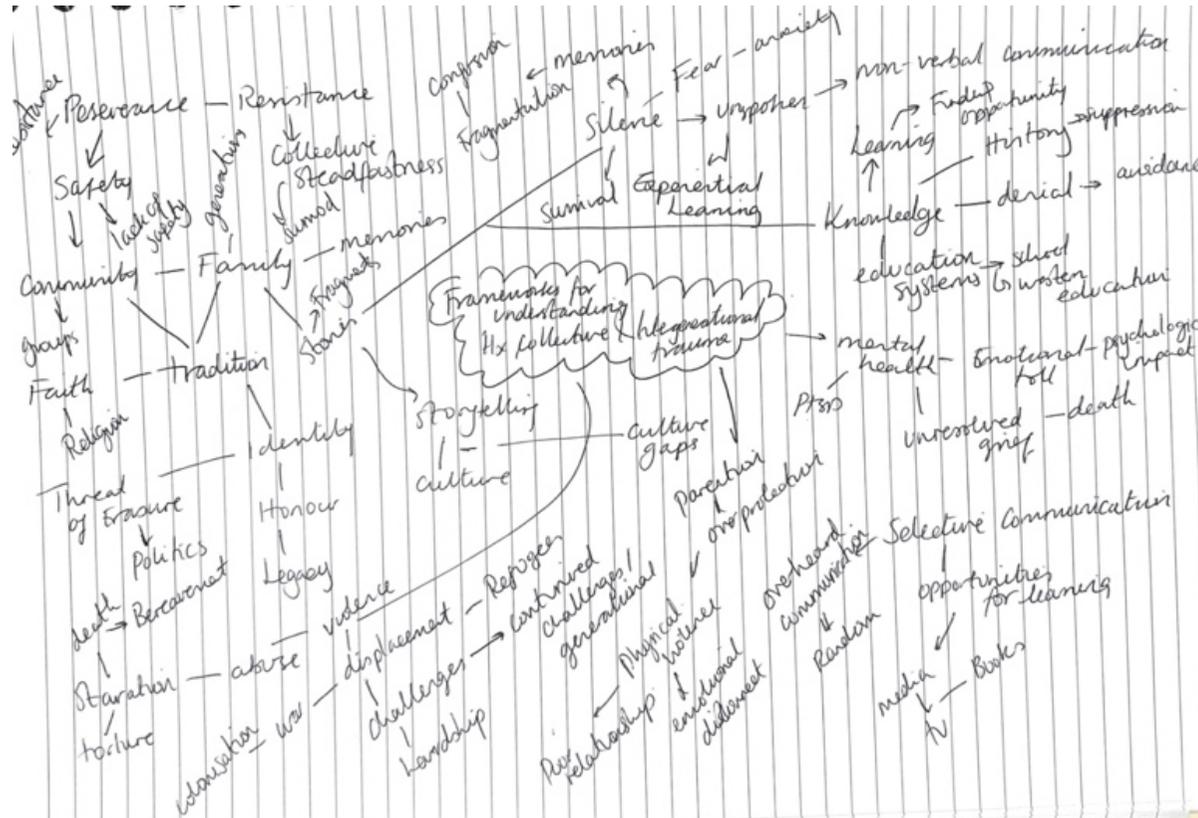
Appendix A

Conceptual Mapping of Systematic Review Papers

Final Conceptual Map



Example of Initial Conceptual Mapping Process



# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 210 SECOND-GENERATION BRITISH ERITREANS

## Appendix B

### Ethical Approval Notification



#### HEALTH, SCIENCE, ENGINEERING AND TECHNOLOGY ECDA

#### ETHICS APPROVAL NOTIFICATION

**TO** Raneem Idris  
**CC** Dr Jacqueline Scott  
**FROM** Dr Rebecca Knight, Health, Science, Engineering and Technology  
ECDA Vice-Chair  
**DATE** 02/10/2024

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Protocol number: **LMS/PGR/UH/05810**

Title of study: Da'aro of Strength and Struggle: A Tree of Life Exploration of  
Intergenerational Trauma in Second-Generation British Eritreans.

Your application for ethics approval has been accepted and approved with the following conditions by the ECDA for your School and includes work undertaken for this study by the named additional workers below:

**Dr Haben Ghezai (Secondary Supervisor)**  
**Ariam Abraham (Consultant/EbE and not associated with UH)**

#### General conditions of approval:

Ethics approval has been granted subject to the standard conditions below:

**Permissions:** Any necessary permissions for the use of premises/location and accessing participants for your study must be obtained in writing prior to any data collection commencing. Failure to obtain adequate permissions may be considered a breach of this protocol.

**External communications:** Ensure you quote the UH protocol number and the name of the approving Committee on all paperwork, including recruitment advertisements/online requests, for this study.

**Invasive procedures:** If your research involves invasive procedures you are required to complete and submit an EC7 Protocol Monitoring Form, and copies of your completed consent paperwork to this ECDA once your study is complete.

**Submission:** Students must include this Approval Notification with their submission.

#### Validity:

This approval is valid:

From: 02/10/2024

To: 31/01/2025

# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 211 SECOND-GENERATION BRITISH ERITREANS

## Appendix C

### Participant Information Sheet

#### **Research study title: Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Experiences of Second-Generation British Eritreans.**

#### **PARTICIPANT INFORMATION SHEET**

Primary researcher: Raneem Idris (Trainee Clinical Psychologist, University of Hertfordshire)

Primary supervisor: Dr Jacqui Scott (Clinical Psychologist and Senior Research Lecturer, University of Hertfordshire)

Secondary Supervisor: Dr Haben Ghezai (Clinical Psychologist)

#### **Invitations**

I'm Raneem Idris, an Eritrean, born and raised in London and a Trainee Clinical Psychologist currently carrying out my major-research project, in fulfilment of my Doctorate in Clinical Psychology course requirement. I am inviting you to take part in my major research project and before you decide whether to do so, it is important that you understand the research that is being undertaken and what your involvement will include. This project has been granted ethical approval by The University of Hertfordshire Health, Science, Engineering and Technology ethics committee with delegated authority. **The UH Protocol No is LMS/PGR/UH/05810.**

Please take the time to read the following information carefully and discuss it with others if you wish. Do not hesitate to ask anything that is not clear or for any further information you would like to help inform your decision. Please take the time to decide whether you wish to take part.

Thank you for reading this.

#### **What is the Purpose/rational for the project**

Eritreans have experienced a multitude of adversities and research suggests that the challenges of one generation may influence the experiences of the next generation. Second-generation Eritreans come from families who may have been subjected to collective trauma such as forced migrations, war, displacement, and these experiences are understood in term of impact on first-generation/refugee population, but little is known about how these experiences may have influenced or shaped the psychosocial wellbeing of second-generation Eritreans.

To understand how these experiences have influenced British Eritreans psychosocial wellbeing (social, emotional and psychological), this project aims to explore the intergenerational experiences of second-generation Eritreans born or raised in the UK. By individuals sharing their lived experiences, this can provide insight into how trauma is transmitted through generations as well as shed light on individual strengths and resilience.

#### **Why have I been invited?**

You have invited to take part in this research because you are over the age of 18 and you are either a British born Eritrean or an Eritrean who came to the UK with parents who identified as refugees or immigrants and had a significant part of your upbringing in the UK.

## A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 212 SECOND-GENERATION BRITISH ERITREANS

### **What will happen if I take part?**

- If you decide to take part, you will initially be invited for an initial telephone call with Raneem to discuss the project and ask any further questions.
- The research involves a 2-stage process, you will be invited to attend a Tree of Life session (2 hours) along with up to 5 other participants which will be co-facilitated by the primary researcher and an Expert by Experience.
- The Tree of Life (ToL) session will be audio recorded.
- The Tree of Life is a narrative therapy approach that focuses on a strength-based approach to mental health. For the purposes of this research, the aim of the session is to get you to think about your cultural background, early experiences, your current context, and your strengths through creative expression by creating a tree that symbolises and represents aspects of your life. For further information on the Tree of life, please visit the following website <https://dulwichcentre.com.au/the-tree-of-life/>
- In the session you will be asked to share your tree with the other members in a way that feels comfortable for you.
- After you have created your own Tree of Life, and shared your tree with the group, all participants will be asked to collectively create a Forest of Life. This will involve bring all the individual trees to create a Forest of your collective experiences, identifying what might be similar and different between your experiences.
- For the purposes of the research, please be aware that the session will be audio recorded.
- Part 2 of the research will involve inviting you to a 60-minute semi-structured interview in which you will be asked questions to explore your experiences of being raised by refugee/immigrant Eritrean parents with experiences of forced migration, displacement, fleeing war and any other experiences of collective trauma.
- The interview is to explore how these experiences have shaped your experiences as a second-generation British Eritrean.

**What will happen if I don't want to carry on with the study?** You do not have to take part in the study. If you do decide to take part and then decide not to continue with the study, you have the right to withdraw up to 2 weeks after the interview. If you wish to withdraw, please contact the details below to remove and destroy your data.

### **What are the possible benefits of taking part?**

- By participating in the research, you will help contribute to an area of research that has not been explored before. The experiences of second-generation Eritreans are overlooked, especially in a UK context. Your participation will be important in developing an understanding of how collective trauma may be transmitted across families and the wider community. And this may not only be relevant to the Eritrean community but also to other groups sharing similar collective experiences of trauma or adversity.
- By sharing your experiences, you will be able to contribute to helping mental health practitioners better understand people with similar experiences.

### **What are the possible disadvantages and risks of taking part?**

- Some questions during this study may evoke memories of challenging or distressing experiences. We acknowledge that this could potentially cause emotional discomfort.
- During the Tree of Life (ToL) session, a trained facilitator will be present to offer support if you experience any distress. They can provide a listening ear and, if necessary, guide you to appropriate professional support services.

## A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 213 SECOND-GENERATION BRITISH ERITREANS

- For the interview portion of the study: You have the right to pause the interview at any point if you need a break. You may choose to skip any question that you do not wish to answer. You are free to conclude the interview early if you feel unable to continue.
- If you experience any distress during or after participation in this study, we can provide information on support services and resources available to you.

### **What will happen to the data collected within this Major Research Project?**

- Your data will be stored electronically and will be stored with password protection on the University of Hertfordshire One Drive system for no longer than 5 years after which time it will be destroyed under secure conditions. For further information on the university research management please visit; <https://www.herts.ac.uk/research/research-management/ethics-and-research-integrity>.
- The data will be anonymised prior to storage and demographic information will be used but identifiable information will not be included.

### **What will happen to the results of this study?**

- The results will be presented as a part of a Major research project at the University of Hertfordshire in partial fulfilment of the Clinical Psychology Doctorate. The project aims to understand the experiences of Second-generation British Eritreans and the research team plan to write up this project for publication in a peer-reviewed journal to be disseminate in research conferences, as well as shared in a more accessible way with members of the Eritrean community.

### **Will the data be required for use in further studies?**

- The data will not be used in any further studies.

### **Who has reviewed this study?**

- This study has been reviewed by: The University of Hertfordshire Health, Science, Engineering and Technology Ethics Committee with Delegated Authority. The UH protocol number is <enter>

### **Who can I contact if I have any questions?**

If you would like to find out more about the study or ask any questions before taking part, please speak to or email Raneem Idris ([raneem.idris1@nhs.net](mailto:raneem.idris1@nhs.net)) or the Principle Supervisor, Dr Jacqui Scott at [j.scott25@herts.ac.uk](mailto:j.scott25@herts.ac.uk) or Secondary Supervisor, Dr Haben Ghezai at [drhabenghezai@gmail.com](mailto:drhabenghezai@gmail.com)

Although we hope it is not the case, if you have any complaints or concerns about any aspect of the way you have been approached or treated during the course of this research, please write to the University's Secretary and Registrar at the following address:

**Secretary and Registrar**  
**University of Hertfordshire**  
**College Lane**  
**Hatfield**  
**Herts**  
**AL10 9AB**

A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 214  
SECOND-GENERATION BRITISH ERITREANS

**Thank you very much for reading this information and considering taking part in this research.**

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SECOND-GENERATION BRITISH ERITREANS

**Appendix D**

Consent Form

Title of Project: **Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Trauma of Second-Generation British Eritreans.**

Name of Primary Researcher: Raneem Idris (Trainee Clinical Psychologist)

1. I confirm that I have been given a Participant Information Sheet giving particulars of the research projects, including its aim(s), methods and design, the names and contact details of key people and, as appropriate, the risks and potential benefits, how the information collected will be stored. I have been given details of my involvement in the study.
2. I have been assured that I may withdraw from the study at any time without disadvantage or having to give a reason during the data collection phase.
3. In giving my consent to participate in this study, I understand that voice and photo recordings will take place and I have been informed of how/whether this recording will be transmitted/displayed.
4. I agree to maintain the confidentiality of all information shared by other participants during the Tree of Life and Forest of Life session.
5. I have been told how information relating to me will be handled: how it will be kept secure, who will have access to it, and how it will or may be used.
6. I understand that this research forms part of a Major Research Project for a student on the Doctorate for Clinical Psychology course at University of Hertfordshire. As such, the project has been granted ethical approval by the University of Hertfordshire ethics board.
7. I understand that my data will be shared anonymously and that the purpose/aims related to sharing this information.
8. I consent to my Tree of Life being shared for dissemination purposes anonymously.
9. I am aware that the findings of this project may be written up for publication in a peer-reviewed journal in the future and may be shared in conferences, workshops and infographics.

Signature of participant.....

Date.....

A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 216  
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Signature of (principal) investigator.....

Date.....

Name of (principal) investigator [in BLOCK CAPITALS please]

.....

## Appendix E

### Recruitment Poster

**University of  
Hertfordshire** **UH**

**SEEKING SECOND-GENERATION BRITISH ERITREANS FOR  
RESEARCH**



# Da'aro of Strength and Struggle



SCAN ME

**A Tree of Life Exploration of Intergenerational Trauma of Second-  
Generation British Eritreans**

**WHAT IS THIS STUDY ABOUT?**

- We are exploring how adversities—like **war, forced displacement, and family separation** have been passed down through generations in the **Eritrean community**.
- **We want to** understand how these experiences shape identity, well-being, and impact future generations.

**WHAT WILL BE INVOLVED?**

We aim to discuss how your family's journey has influenced your life in 2 ways

**Part 1:** A Tree of Life workshop

**Part 2:** 1-1 interview (approx 60 mins)

**WHO CAN TAKE PART ?**

- Are you over 18 ?
- Are both your parents Eritrean ?
- Were you raised in the UK with at least one parent ?
- Did your parent(s) leave Eritrea due to conflict ?

**WHY PARTICIPATE ?**

Your experiences matter and can help us understand the ripple effects of the community's past.

By sharing your story, you'll contribute to:

- **Building** a deeper understanding of intergenerational impacts
- **Enhancing** mental health support for British Eritreans
- **Contribute** to the broader discourse on migration and identity in the UK



For more info, please contact  
Raneem (Trainee Clinical  
Psychologist) at  
[ri22aak@herts.ac.uk](mailto:ri22aak@herts.ac.uk)

The University of Hertfordshire Health, Science, Engineering and Technology Ethics Committee with Delegated Authority  
UH Protocol NoUH Protocol No: LMS/PGR/UH/05810

# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 218 SECOND-GENERATION BRITISH ERITREANS

## Appendix F

### Debrief Sheet

#### **DEBRIEF SHEET: Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Trauma of Second-Generation British Eritreans.**

Thank You for participating in this study! We appreciate your time and effort in participating and your contribution is invaluable in helping us understand the intergenerational experiences of the Eritrean community in the UK.

The information below explains what this study is about and why it was conducted. If you have any additional questions about this study, feel free to contact the primary researcher, Raneem Idris ([ri22aak@herts.ac.uk](mailto:ri22aak@herts.ac.uk)).

**What You Did:** By participating in the **Tree of Life Session** you created a tree that symbolised various aspects of your life, including your background, current experiences, and strengths. By sharing your trees, you participated in creating a collective "Forest of Life" to represent community strength and interconnectedness. In the **semi-structured interviews**, we delved deeper into your upbringing and your experiences of being raised by refugee/immigrant parents, focusing on aspects such as parental availability, family communication, and how these experiences shaped your psychosocial well-being.

**Why This Study is Important:** Understanding these intergenerational experiences can inform culturally sensitive mental health interventions and provide a systemic understanding of the challenges faced by second-generation immigrants. This research seeks to highlight the unique cultural and historical contexts of the Eritrean community, which are overlooked in mainstream mental health literature.

**Your Rights:** Participation in this study is voluntary. You can withdraw from the study at any time up until two weeks after having completed the semi-structured interview. Please let me know as soon as you can if you prefer to withdraw your data. If you choose to withdraw, any data collected up to that point will be destroyed upon your request.

**Advice and support:** You may experience some psychological discomfort due to discussing personal and potentially traumatic experiences. We have support resources available and can signpost you to appropriate services if needed. Please see below for a list of national services you may find useful.

#### **Support Resources:**

**Samaritans** (116 123): 24/7 helpline offering emotional support to anyone in distress.

**Mind** (0300 123 3393): Provides advice and support to anyone experiencing mental health problems.

**NHS 111:** Non-emergency medical advice, can direct to appropriate mental health services.

**Shout** (Text 'SHOUT' to 85258): 24/7 text-based mental health support service.

**Aashna:** Provides a list of therapists working to recognise the ways in which culture, faith, religion, colour, social background, sexuality, gender and neurodiversity affect people's experiences.

<https://www.aashna.uk>

**The Black, African and Asian Therapy Network:** A community for therapists and counsellors from the African, Caribbean, and Asian heritage <https://www.baatn.org.uk/>

If you have any questions or concerns about this study, please contact:

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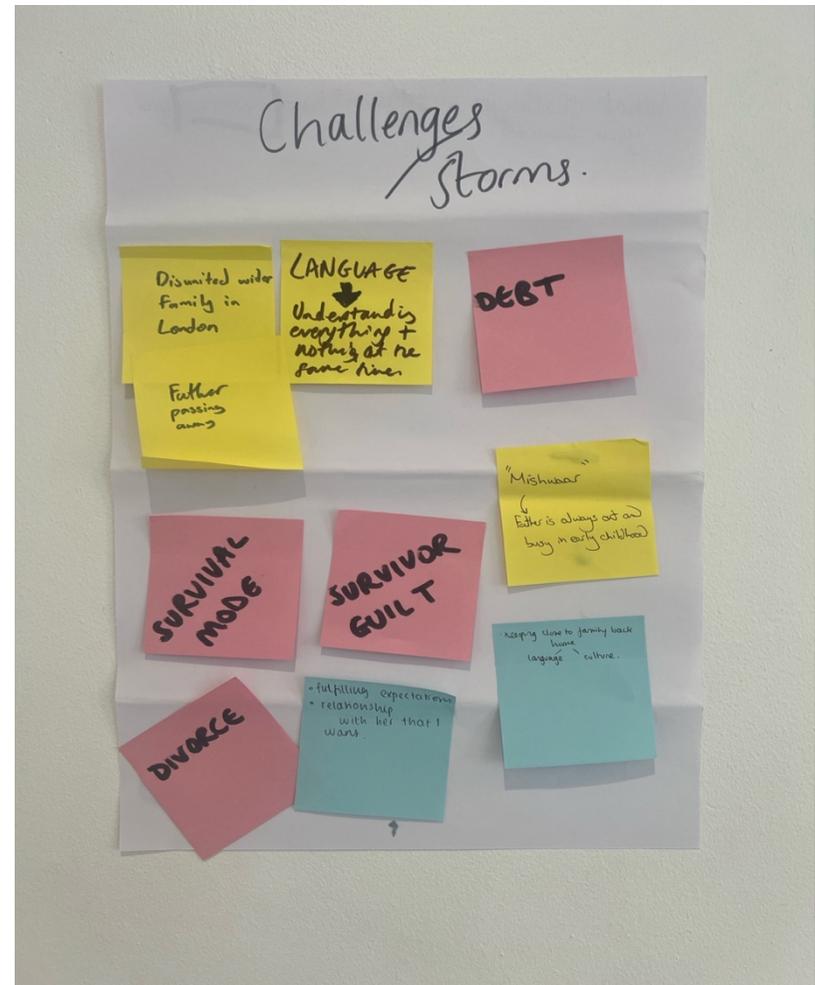
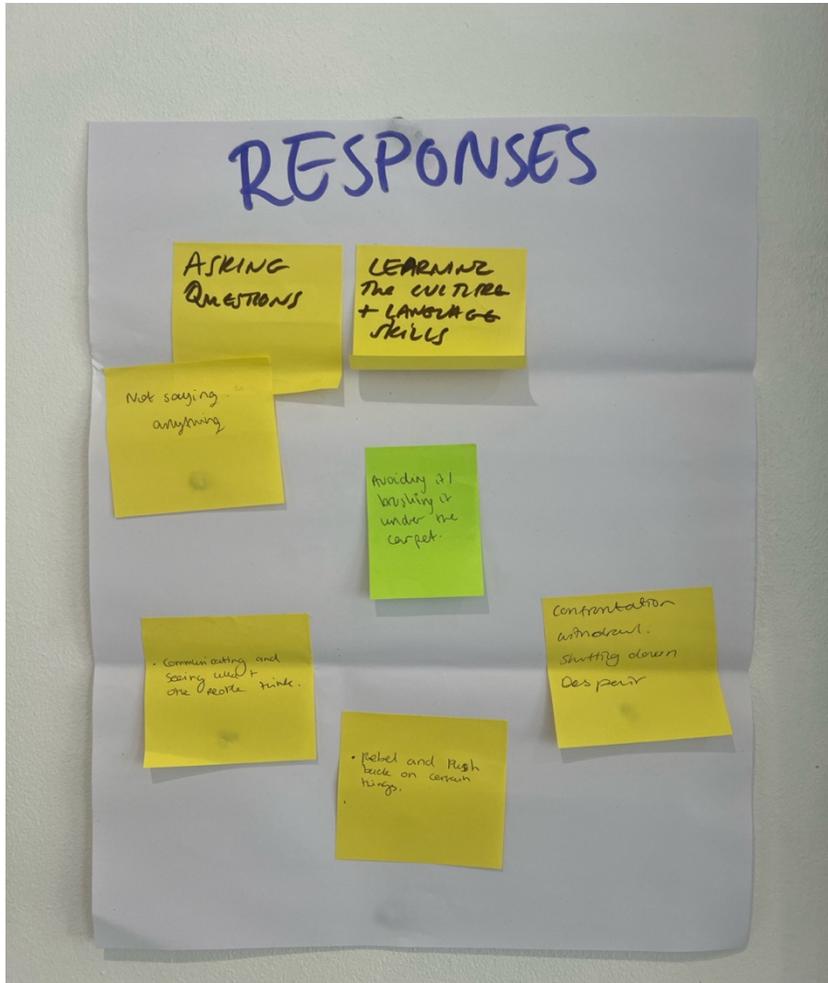
**Primary Researcher:** Raneem Idris: [ri22aak@herts.ac.uk](mailto:ri22aak@herts.ac.uk)

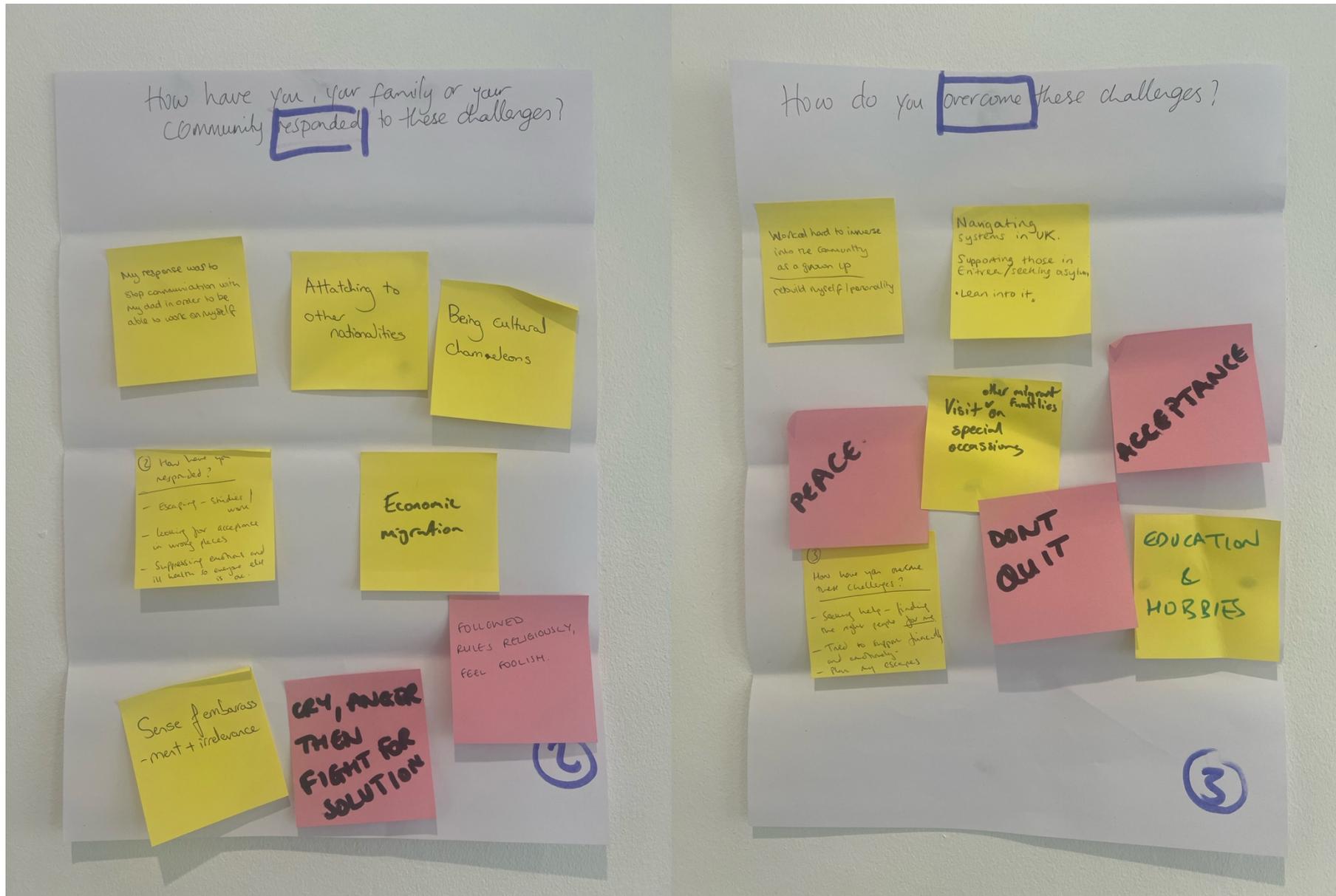
**Principal Supervisor:** [j.scott25@herts.ac.uk](mailto:j.scott25@herts.ac.uk)



## Appendix H

### Group Discussion of Storms





Social media - claiming identity  
Sexualisation of Eritrean women

Misconceptions

**Challenges**  
**Being Stones**  
**Authentic**

Code Switching \* Not taking space

Intersectionality  
Repression  
Seeking connection.

Confused  
Trying to reconnect.

**Not being enough**

Border Reclaim Blackness  
Redefining Yourself

**Learning the history** **detached**  
others telling you who you are from others

**Shame** 'Your not black/black' Questioning if your African

**Mixed messages about identity**  
**'too British or too Eritrean'**  
Colonialism Always having to react to the world around us or which other people want humans or think of us.  
Who defines it ← Questioning (what is blackness)

Family

disconnection  
Poor treatment

Border of an accent  
Not being taken seriously

Parenting your parents  
Push to integrate

**Learning to try to honour heritage**

Unrealistic expectations

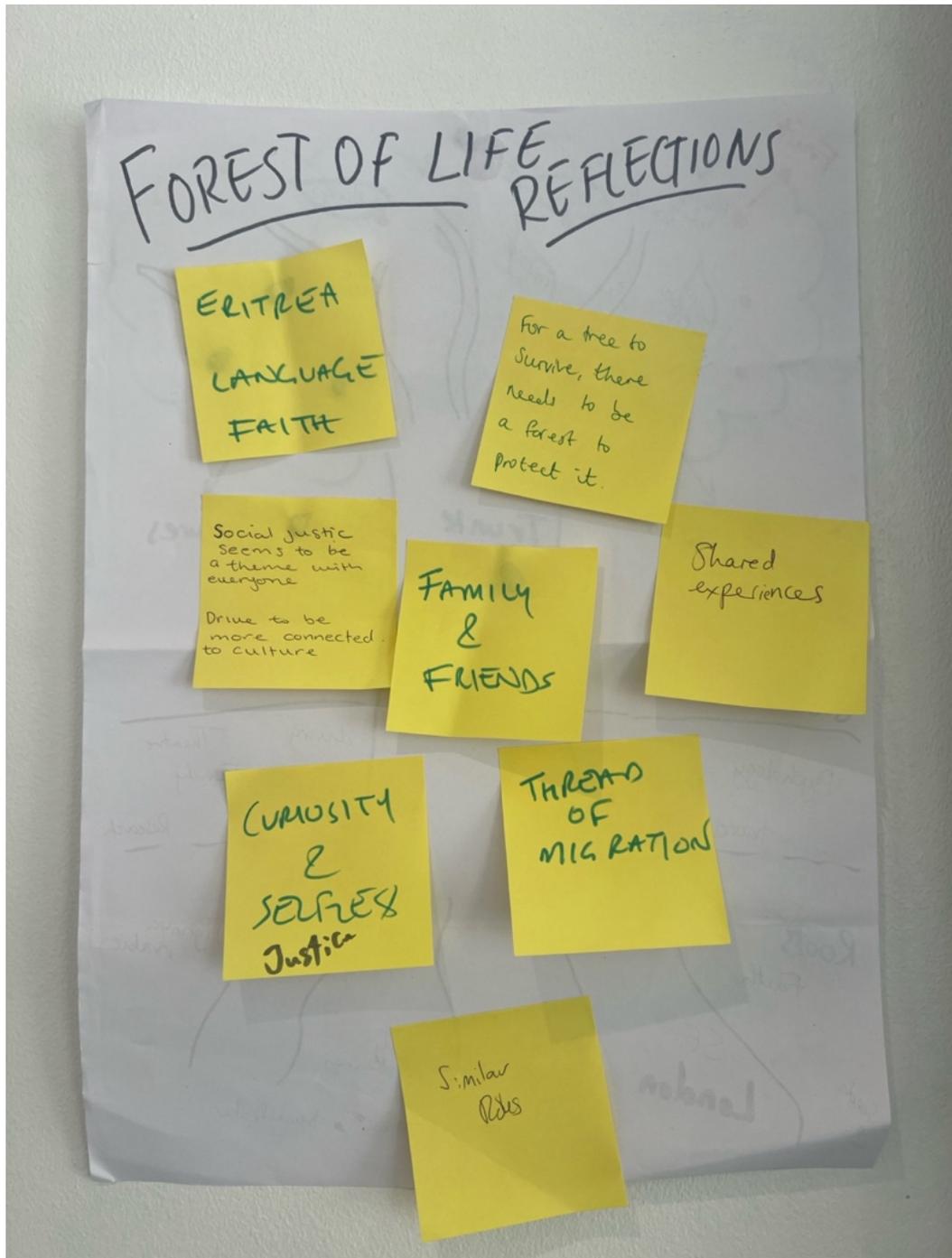
- lack of exposure & difficult experiences around war/migration



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**Appendix J**

Forest of Life Reflection



## **Appendix K**

### Interview Schedule Outline

1. How did you find the Tree of Life and Forest of Life session?
  - a. What reflections came up for you?
  - b. What did you notice about yours and others' ToL in the FoL?

### **Section 1: Family Background & Migration History**

#### *Migration Context*

2. Can you tell me about your family/parent(s) background?
  - a. Where did they grow up?
  - b. What challenges did they face before coming to the UK? Were there political, economic, or social factors that influenced your family's migration?
  - c. How did your parents come to the UK, what was their journey like?
3. How have your parents described their experiences of leaving Eritrea and settling in the UK?
  - a. Did your family openly discuss these challenges? If not, why do you think they weren't open about them?
  - b. What was it like hearing about your parents' experiences (feelings/emotions)?
  - c. Were there aspects of your family history you wish your parents had shared more with you?

#### *Refugee Experiences*

4. Can you tell me about your parent(s)' experiences as refugees in the UK?
  - a. Did they face any challenges (e.g., finances, housing, resources, racism, discrimination etc)?
  - b. How did they navigate these challenges and what support systems were available to them?

## A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 227 SECOND-GENERATION BRITISH ERITREANS

- c. How has your understanding of your parents' refugee experience evolved as you've grown older?
- d. Has this influenced how you relate/approach your own challenges?

### **Section 2: Family Life & Intergenerational Impact**

#### *Parenting & Family Dynamics*

- 5. Can you tell me about your experiences of being raised by Eritrean parent(s) in the UK and how would you describe your parents' parenting style? E.g., strict, controlling, anxious, supportive, encouraging?
  - a. What methods or approaches did your parents use to support you/encourage you and discipline you growing up?
  - b. Can you share how perhaps your parents' past experiences affected their parenting?
- 6. How would you describe your relationship with your parents: As a child? Now as an adult? What changes have you noticed? What roles or responsibilities did you take within your family?

#### ***Communication & Emotional Expression***

- 7. While growing up, how did your family deal with or express emotions during your upbringing? Emotions like sadness, anger, grief, worry, fear or gratitude etc.
  - a. What family or cultural beliefs influenced emotional expression?
  - b. How did your parents express love or affection towards you?
  - c. How were you comforted as a child e.g. when you cried or were angry?
- 8. What guidance did your parents give about approaching life and interacting with others? E.g. did they encourage you to always be polite or to work hard? or perhaps they emphasised being cautious around strangers?
- 9. Growing up, how did your family deal with challenges, stress, or disagreements?
  - a. Were there any cultural or family beliefs that influence how challenges, stress or disagreements were addressed?

## A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 228 SECOND-GENERATION BRITISH ERITREANS

- b. Are there specific Eritrean cultural practices or beliefs that have helped you or your family cope with difficulties?"

### **Section 3: Identity**

#### *Cultural Identity*

10. How did you understand or make sense of your identity growing up in the UK?
  - a. What challenges did you face specifically related to being Eritrean and how have you been able to navigate the challenges of being a second-generation British Eritrean?
  - b. Has Blackness, in any way, influenced your sense of identity, if so in what ways?

### **Section 4: Wellbeing & Support Systems**

#### *Impact on Wellbeing*

11. In what ways did your experiences of being a second-generation British Eritrean show up in the following areas.
  - a. Work/studies?
  - b. Friendships?
  - c. Relationships?
  - d. Society?
12. In what ways, if any, has your background as a second-generation Eritrean impacted your well-being? This might include things like mood, worry, feeling anxious, or overall emotional wellbeing.
  - a. If so, how did you manage (coping skills, some people cope by praying, listening to music, speaking to friends or would you avoid things?), did you seek support and if not, would you seek help or support from MH services? Who do you turn to for support if needed?
  - b. Are there any cultural or personal factors might influence you?

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SECOND-GENERATION BRITISH ERITREANS

- c. Have you had any experiences with mental health services? What worked well or could have been better? If not, what do you think would be needed to support second-generation Eritreans?

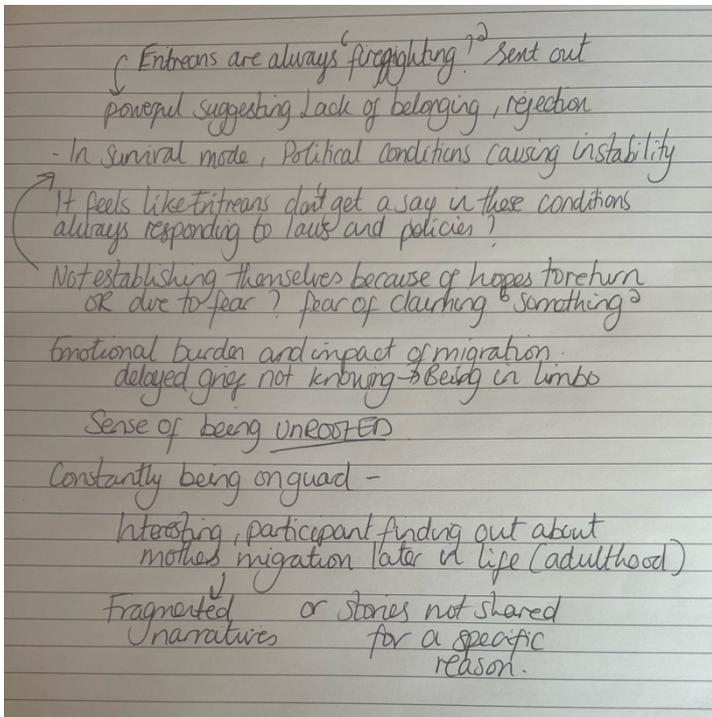
**Closing Questions**

13. Is there anything else you'd like to share about your experiences that we haven't covered?

# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 230 SECOND-GENERATION BRITISH ERITREANS

## Appendix L

### Post Interview Reflections



The label of refugee, how the label almost feels unfitting and that it minimises/ does a disservice to the experiences of refugees. The narratives around refugees commonly are negative ones and hearing the challenges experiences by the participant and her family, it feels like the word refugees dishonours their experiences and downplays the strength that comes with overcoming challenges designed to break an individual. And this links back to systems of oppression that are mass producing problems at all levels,

How you are viewed by the system as a black Muslim hijab wearing women. Being 'othered', needing to prove your worth or that you are competent enough to be acknowledged or seen by others. Not being yourself, because being yourself comes at a cost, a cost of not being seen or heard in moment when your life can be in danger.

I felt like I was taken on a journey, a journey through history. Hearing about the physical violence that some Eritreans were subjected to, born out of hatred for the 'other', xenophobia, hatred as a direct reflection of the UK's race relational context was difficult to hear. As I have had no personal experience of such level of violence, I was shocked and sad to hear about the violence the participant's family was subjected to

# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 231 SECOND-GENERATION BRITISH ERITREANS

## Appendix M

### Interview Transcript Expert

Interviewer: Have you had any experiences with mental services?

Interviewee: I was interested in CBT for a little bit so I did do like a few sessions. Like, see what that was about and I kind of understood the framework. I didn't necessarily implement it to its fullest or even did enough of those like sessions to understand like the full benefits. But I experienced a couple of sessions to see what it's like but I didn't continue. So that's like maybe the only like, official thing, but then unofficially, reading up on different techniques, time management, emotional management. I find this stuff interesting to read about, so I've read about that stuff as well.

Interviewer: OK. What would you say worked well and what could be better when you had the sessions?

Interviewee: Well, for me it what didn't work well was the person that I tried it with. The gap for me was that I thought I couldn't be open only because of my Islamic like side of things. You know, just not feeling comfortable to introduce that element into the conversation or to talk about it. It just didn't feel like it worked. I understood some of the techniques about it but other than that it just didn't really resonate.

RI: What was it about the therapist that made it difficult to bring in religion?

O: The fact that he wasn't a Muslim, I think the honest truth of it was that if it was someone who I shared that in common with that with, then it would have opened up the conversation. But because it wasn't, and interestingly enough, it was a South Asian person. But again, that shows you that even though like, it's not the fact that he was South Asian, it's the fact that it was religion for me that would have made me feel more comfortable. But the conversation couldn't progress, or it couldn't be fully transparent because that's an aspect that I was holding back. In terms of for example, like in this conversation now like right now like we've talked about how Islam and being a Muslim, how that plays a role right in upbringing in this and that. And I can feel very comfortable to share it here, but I didn't feel like. Yeah. And I yeah, that dimension was not introduced in that setting so. The conversation wasn't really as rich as what it could be.

## Appendix N

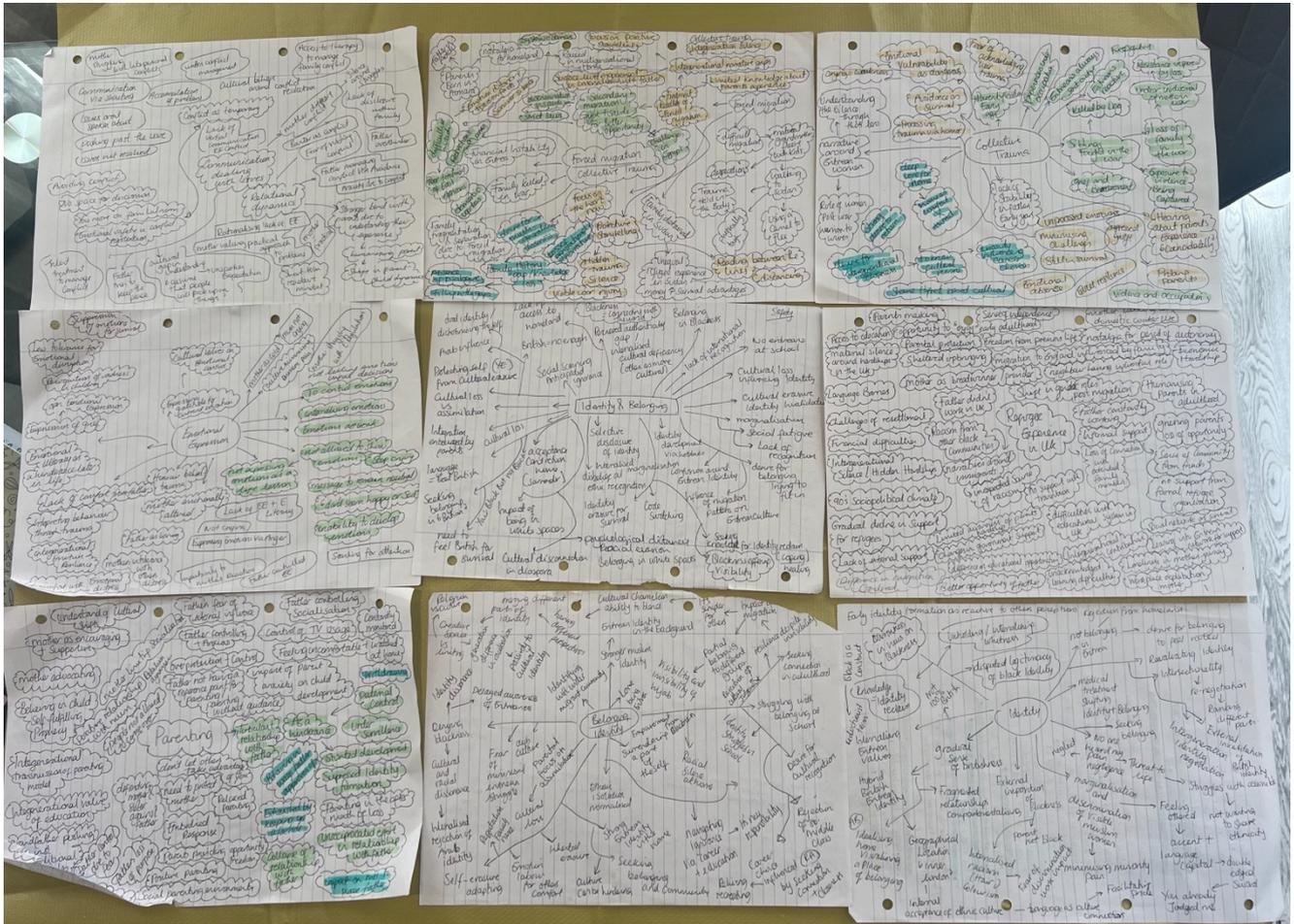
### Initial Coding of Transcript

<p>Father role modelling good character Importance of manner Importance of being good to others</p>	<p>Interviewee: Be considerate of others. Be really polite. And then like whenever we were polite to others, you know, they would kind of like, reward us and say well done. My dad has really good manner with other people for example. I feel like I just naturally picked those up and that was encouraged.</p>
<p>Instilling Islamic values</p>	<p>But then, like a lot of it's like is like, you know, Islamic upbringing took care of the rest. You know, like, being kind to strangers, poor people, that kind of thing. Respect your parents,</p>
<p>Cautious around stranger Not being a burden on others</p>	<p>of course. I guess school might say, you know, don't trust strangers or something. We still don't be rude at the same time like. Most of it was about like politeness, and like, you know, not putting others out or bothering others as opposed to not like not trusting others. The only you know thing</p>
<p>Intergenerational influence of survival skills/Mother encouraging self-protection Mother as street smart Father focused on moral values</p>	<p>in the opposite direction would be like my mum would say if someone hit you at school, hit them back. I feel like Mum was like the more street smarts out of it compared to like my dad. Yeah, yeah, yeah. I feel like my dad seemed to like as long as he took care of, like, the moral side of it. Everything else kind of, we kind of pick up by ourselves. Like it will take care of itself.</p>
<p>Lack of emotional literacy Gradual awareness and understanding</p>	

# A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 232 SECOND-GENERATION BRITISH ERITREANS

## Appendix O

### Thematic Analysis



## Appendix P

### Reflections During Analysis

#### Reflection on parental identity loss

*Participants' parent- once a soldier with purpose, now stripped of that identity  
Going from fighter to someone stripped of purpose—what must that feel like? Being a  
soldier might have once meant pride, hope, service. Once that's taken away, what are you  
left with? Unless you're able to separate yourself from the cruelty of others, that loss of  
meaning seeps into everything. And children are raised in that silence—with parents who  
once believed in a better future. What kind of inheritance is that?*

I wonder if there is harmony because of a need to survive- in order for Eritrea to be free, there was a need for unity, a need for people to come together against a common enemy and perhaps its also a survival thing in the west, if you are agreeable, a peoples pleaser, you get along with everyone, you meet others needs than you aren't going to have any external issues but you'll end up with a mishmash and an accumulation of problems that you internalise- that perhaps might turn into self-scarifying. And I wonder how colonialism fed into Eritreans timid and subdued energy- maybe a generalisation.

This reflection is profoundly insightful — you're weaving together historical trauma, cultural adaptation, and psychological embodiment in a way that exposes how survival strategies shape not just political choices but interpersonal dynamics and emotional expression.

**Personal Reflections:** I hadn't considered the depths of how transformative the ToL would be for my participants. I suppose to my knowledge this is the first time Eritreans have been brought together in this way, to connect in a meaningful way, offering an opportunity for conversations around identity, belonging etc. I probably on some level underestimated how validating this space could be and that people left feeling less alone in their challenges or experiences.

## Appendix Q

### Reflexive Diary

*As I'm analysing the data I noticed that I was initially engaging with the data in a passive away, emotionally distant- perhaps as a way to protect myself from the emotional impact of participants experiences. As an insider researcher I noticed that was holding back, not fully investing in the process. Through discussions with peers, I was encouraged to approach the data from a therapist's or psychological perspective- which should have been natural but perhaps I was stuck in being distant and a 'researcher'- This shift from an emotionally removed stance to helped me become attuned to what I was reading and step into my therapist lens. This helped me connect with the data in a meaningful way and it felt more natural- unpacking a lot more from people's experiences and connect with the wider psychological theories and the wider socio-political context. Though this process has been emotionally challenging- its left me with richer understandings of the data, enriching my analysis. The challenges of being an insider researcher are around knowing when to take a pause, knowing when to reach out for support- which has been difficult in this journey of analysis.*

*It's interesting to reflect on the fact that I noticed myself analysing the data from my western lens and my western framework on individualism- I noticed when I was going through the data and a participant spoke about being a women- this idea of servitude, of women being submissive and palatable and needing to be liked in a way or being agreeable- I noticed myself rejecting this mindset and almost feeling like that is such a repressive mentality and i was favouring a western framework of individualism- the needs of the self above the collective- when I peel back the layers what am I actually doing here- what I'm really doing is not thinking about what it means for a women to be submissive or palatable and perhaps that serves the needs to the collective-also language ! perhaps it was the meaning those words help that felt comfortable. More generally, makes me wonder about how much of the ideas around femininity and masculinity ideals in Eritrea were cultural- where did narratives around being a woman or a man stem from, if there is such a hybridity of influences in Eritrean, how can we disentangle what is religion, tribal influences, colonial powers- hard to pull apart but important to hold in mind.*

## Appendix R

Expert by Experience Confidentiality Agreement

### **Confidentiality Agreement for Expert by Experience in the Research study titled Da'aro of Strength and Struggle: *A Tree of Life Exploration of Intergenerational Trauma in Second-Generation British Eritreans.***

Purpose of the agreement: The Expert by Experience will be participating in Tree of Life (ToL) and Forest of Life (FoL) group sessions as part of a research study conducted with the University of Hertfordshire in partial fulfilment of a Doctorate in Clinical Psychology. This Agreement is to ensure the confidentiality of information shared during these sessions and to protect the identity of all participants.

- **Confidential Information:** The EbE agrees that all information shared during the ToL and FoL sessions, including but not limited to personal stories, experiences, and any identifying information of participants, is considered confidential.
- **Obligations:** The EbE agrees to: a) Keep all Confidential Information strictly confidential; b) Not disclose any Confidential Information to any third party. c) Use Confidential Information solely for the purpose of fulfilling their role in the research study; d) Take all reasonable precautions to protect the confidentiality of the information; e) Not identify or discuss individual participants outside of the research context.
- **Exceptions:** This Agreement does not apply to information that: a) Is already in the public domain.
- **Duration:** The obligations under this Agreement even after the conclusion of the research study.
- **Breach:** Any breach of this Agreement may result in immediate termination of the EbE's involvement in the study.
- **Acknowledgment:** The EbE acknowledges that they have read and understand this Agreement and agree to be bound by its terms.

Signed:

A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 236  
SECOND-GENERATION BRITISH ERITREANS

\_\_\_\_\_ Date: \_\_\_\_\_

Name of Expert by Experience

\_\_\_\_\_ Date: \_\_\_\_\_

Primary Researcher: Raneem Idris (Trainee Clinical Psychologist), University of  
Hertfordshire.

## Appendix S

### Expert by Experience Roles and Responsibilities

#### **Roles and Responsibilities of Expert by Experience in the Research study titled *Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Trauma in Second-Generation British Eritreans.***

This document outlines the roles, responsibilities, and support provided to the Expert by Experience (EbE) participating in the study titled; *Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Trauma in Second-Generation British Eritreans.*

Roles and Responsibilities. The Expert by Experience will:

1. Co-facilitate Tree of Life (ToL) and Forest of Life (FoL) group sessions.
2. Offer cultural and experiential insights as a second-generation British Eritrean.
3. Assist in creating a culturally safe space for participants.
4. Provide feedback on the interview schedule.
5. Maintain confidentiality as per the signed Confidentiality Agreement.
6. Participate in regular debriefing sessions with the primary researcher.

The Expert by Experience will not:

1. Be involved in individual interviews.
2. Have access to raw data from the study.
3. Be required to share personal experiences as part of their role.

Ethical Responsibility and Support: To support the Expert by Experience, the research team commits to:

1. Conduct regular debriefing sessions after each group session with the primary researcher.
2. Provide information on support services should the EbE require further support.
3. Provide fair reimbursement for the EbE's time and expertise.
4. Acknowledge the EbE's contribution in research outputs, with their consent.
5. Respect the EbE's right to withdraw from the study at any time.

By signing below, the Expert by Experience acknowledges that they have read, understood, and agree to the roles, responsibilities, and support outlined in this document.

Signed:

\_\_\_\_\_ Date: \_\_\_\_\_

(NAME OF EXPERT BY EXPERIENCE)

\_\_\_\_\_ Date: \_\_\_\_\_

A TREE OF LIFE INFORMED EXPLORATION OF INTERGENERATIONAL TRAUMA IN 238  
SECOND-GENERATION BRITISH ERITREANS

Primary Researcher: Raneem Idris, Trainee Clinical Psychologist, University of Hertfordshire

**Appendix T**

Risk Assessment

**UNIVERSITY OF HERTFORDSHIRE  
ETHICS COMMITTEE FOR STUDIES INVOLVING THE USE OF HUMAN PARTICIPANTS ('ETHICS COMMITTEE')**

**FORM EC5 – HARMS, HAZARDS AND RISKS:  
ASSESSMENT AND MITIGATION**

Name of applicant: Raneem Idris

Date of assessment: 16.07.2024

Title of Study/Activity: Da'aro of Strength and Struggle: A Tree of Life Exploration of Intergenerational Trauma in Second-Generation British Eritreans.

If you are required to complete and submit a School-specific risk assessment (in accordance with the requirements of the originating School), it is acceptable to make a cross-reference from that document to form EC5 in order not to have to repeat the information twice. The purpose of Form EC5 is to consider how a participant might react to the activities in the study and to indicate how you will manage such reactions; the Form also addresses the safety of the investigator and how any risks to the investigator will be managed.

Activity Description				
1. IDENTIFY RISKS/HAZARDS	2. WHO COULD BE HARMED & HOW?		3. EVALUATE THE RISKS	4. ACTION NEEDED
<p><u>Activities/tasks and associated hazards</u> Describe the activities involved in the study and any associated risks/ hazards, both physical and emotional, resulting from the study. Consider the risks to participants/the research team/members of the public.</p> <p>In respect of any equipment to be used read manufacturer's</p>	<p><u>Who is at risk?</u> e.g. participants, investigators, other people at the location, the owner / manager / workers at the location etc.</p>	<p><u>How could they be harmed?</u> What sort of accident could occur, eg trips, slips, falls, lifting equipment etc, handling chemical substances, use of invasive procedures and correct disposal of equipment etc. What type of injury is likely? Could the study cause discomfort or distress of a mental or emotional character to participants and/or investigators? What is the</p>	<p><u>Are there any precautions currently in place to prevent the hazard or minimise adverse effects?</u> Are there standard operating procedures or rules for the premises? Have there been agreed levels of supervision of the study? Will trained medical staff be present? Etc/</p>	<p><u>Are there any risks that are not controlled or not adequately controlled?</u></p> <p>List the action that needs to be taken to reduce/manage the risks arising from your study for example, provision of medical support/aftercare, precautions to be put in place to avoid or minimise risk or adverse effects NOTE: medical or other aftercare and/or support <b>must</b> be made available for participants and/or investigator(s) who require it.</p>

instructions and note any hazards that arise, particularly from incorrect use.)		nature of any discomfort or distress of a mental or emotional character that you might anticipate?			
Online Interviews	Participants and researcher	<p>Minor risk</p> <p>Participant: May experience discomfort, blurred vision, or headaches.</p> <p>Researcher: Could face the same issues, potentially more severely due to conducting multiple interviews.</p>	Individuals will be responsible for the use of their own devices and these devices are commonly and safely used.	No	<p>Provide phone number in case of difficulties, offer reassurances such as offering to reschedule the interview if necessary.</p> <p>Recommend participants take regular breaks (e.g., 20-20-20 rule: every 20 minutes, look at something 20 feet away for 20 seconds)</p>
<p>Fatigue from sitting for extended periods for online interviews</p> <p>Neck and shoulder pain from poor posture during long interviews</p>	Participant and researcher	<p>☒ Participant: Could experience temporary discomfort or exacerbation of existing conditions.</p> <p>☒ Researcher: May develop chronic pain or posture issues due to repeated session</p> <p>☒ Participant: May experience temporary discomfort or restlessness.</p> <p>☒ Researcher: Could develop chronic issues</p>		No	<p>Suggest stretching exercises between interviews</p> <p>Schedule regular breaks</p> <p>Suggest standing or moving around between interviews</p>

		related to sedentary behaviour. Interviews are expected to take up to 90 minutes.			
Potential for spreading infectious diseases (e.g. colds, flu, COVID-19)	Participant and researcher	Participant: Risk of contracting illness from others in the session. Researcher: Higher risk due to exposure to multiple groups over time.		No	Follow current health guidelines (e.g., encourage people not to attend if they feel unwell) Provide hand sanitizer and ensure good ventilation
Muscle strain from sitting in one position for too long	Participant and researcher	☒ Participant: May experience temporary discomfort. ☒ Researcher: At risk of developing chronic issues due to repeated sessions.		No	Incorporate movement breaks into the session Provide comfortable seating options
Dehydration or hunger if sessions are lengthy without adequate breaks	Participant and researcher	☒ Participant: Could experience discomfort, fatigue, or difficulty concentrating. ☒ Researcher: May face similar issues, potentially more severe due to talking more.		No	Offer refreshments and light snacks chedule regular breaks

<p>Emotional distress</p>	<p>Participant and researcher</p>	<p>Participants may experience anxiety, sadness, or anger during or after sessions.</p> <p>The emotional nature of the work may lead to burnout and conflict balancing the roles of researcher and community member may cause internal conflict.</p>		<p>No</p>	<ul style="list-style-type: none"> <li>• Provide a list of mental health resources for participants</li> <li>• Debrief information sheet for participants</li> <li>• Researcher will make use of support network as needed</li> <li>• Researcher will make use of supervision and debrief if felt needed with supervisor</li> <li>• There will be an agreement made with participant before the start of the Tol session that they can take a short break if they become distressed and participants will be followed up during the break if support is required.</li> </ul>
<p>Risk of re-traumatisation</p>	<p>Participant and researcher</p>	<p>For participants: Discussing traumatic experiences may trigger distressing memories or emotions.</p>		<p>No</p>	<ul style="list-style-type: none"> <li>• Provide clear information about the nature of the study in advance</li> <li>• Participants can be informed they only</li> </ul>

		<p>Researcher: The researcher's own trauma history may be activated.</p>			<p>need to share what they feel comfortable to share with the group</p> <ul style="list-style-type: none"> <li>• If participants are retraumatized or experience high levels of distress the primary researcher offering support and ensuring participants feel safe and able to take care of themselves or support them to think about options for getting further support</li> <li>• Allow participants to skip questions or stop at any time</li> <li>• Supervisors will be aware of when sessions are taking place and they or other supports will be available to the researcher via telephone if needed</li> <li>• Schedule debrief session with supervisor.</li> </ul>
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Venue					<ul style="list-style-type: none"> <li>• Building regulations, public liability insurance, health and safety and fire regulations are available by the venue.</li> <li>• Participants will be informed of fire exits at the start of the ToL session</li> </ul>
Lone working					<ul style="list-style-type: none"> <li>• The primary researcher will inform the research team of dates and times for the interviews.</li> <li>• The primary researcher will make contact with the primary supervisor to inform of completed interviews</li> <li>• The primary researcher will carry a charged mobile phone at all times</li> </ul>

Signed by applicant: Raneem Idris	Dated: 13.09.2024
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