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RESEARCH ARTICLE

Beyond Family Ties: Intergenerational Trauma as a Predictor of Mental Well-being Among Indonesian Youth

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Abstract: Intergenerational trauma has been recognized as a significant psychological factor affecting mental health outcomes across generations. This study examined the influence of intergenerational trauma and family relationship on the mental well-being of young adults in Indonesia. A total of 103 participants were recruited through convenience sampling and completed the Indonesian-adapted versions of the Historical Intergenerational Trauma Transmission Questionnaire (HITT-Q), the General Functioning of Family scale, and the Warwick-Edinburgh Mental Well-being Scale (WEMWBS). Results from multiple linear regression analysis indicated that the overall regression model was statistically significant , $F(2, 100) = 29.36$, $p < .001$. However, only intergenerational trauma had a significant independent effect ($B = -0.18$, $p < .001$), suggesting that higher levels of inherited trauma were associated with lower mental wellbeing. Family functioning did not show a significant independent effect ($B = 0.05$, $p = .739$). Descriptive analysis also revealed that 77.7% of participants were classified as having low levels of mental well-being . These findings underscore the importance of addressing intergenerational trauma in efforts to improve mental health outcomes, especially mental wellbeing among young adults in Indonesia.

Keywords: Family, Family Functioning, Intergenerational Trauma, Mental Well-Being, Young Adults

Abstrak: Trauma antar generasi telah diakui sebagai faktor psikologis signifikan yang memengaruhi hasil kesehatan mental lintas generasi. Studi ini meneliti pengaruh trauma antar generasi dan hubungan keluarga terhadap kesejahteraan mental kaum muda di Indonesia. Sebanyak 103 partisipan direkrut melalui pengambilan sampel acak dan menyelesaikan versi adaptasi bahasa Indonesia dari Historical Intergenerational Trauma Transmission Questionnaire (HITT-Q), the General Functioning of Family scale, and the Warwick-Edinburgh Mental Well-being Scale (WEMWBS). Hasil dari analisis regresi linier berganda menunjukkan bahwa model regresi secara keseluruhan signifikan secara statistik , $F(2, 100) = 29,36$, $p < 0,001$. Namun, hanya trauma antar generasi yang memiliki efek independen signifikan ($B = -0,18$, $p < 0,001$), menunjukkan bahwa tingkat trauma yang diwariskan lebih tinggi dikaitkan dengan kesejahteraan mental yang lebih rendah. Fungsi keluarga tidak menunjukkan efek independen yang signifikan ($B = 0,05$, $p = 0,739$). Analisis deskriptif juga mengungkapkan bahwa 77,7% peserta dikategorikan memiliki tingkat kesejahteraan mental yang rendah . Temuan ini menggarisbawahi pentingnya mengatasi trauma antar generasi dalam upaya meningkatkan hasil kesehatan mental, terutama kesejahteraan mental di kalangan dewasa muda di Indonesia.

Kata kunci: Keluarga, Fungsi Keluarga, Trauma Antargenerasi, Kesejahteraan Mental, Dewasa Muda

INTRODUCTION

Mental well-being represents an optimal condition in which individuals are not merely free from psychological disorders but are also able to function effectively, maintain healthy social relationships, and achieve a sense of meaning in life (Huppert, 2009; goin, 2002). In the present study, mental well-being is operationalized in accordance with the Warwick–Edinburgh Mental Well-Being Scale (WEMWBS), which conceptualizes mental well-being as a positive state of psychological functioning, positive affect, and interpersonal functioning (Tennant, 2007).Within Keyes' (2002) dual-continua model, mental well-being is not conceptualized as the mere absence of mental illness but rather as a distinct positive dimension encompassing both hedonic aspects, such as happiness and life satisfaction, and eudaimonic aspects, including purpose in life, personal growth, and meaningful relationships. Emerging adulthood is a developmental period characterized by identity exploration, shifting social roles, and the demands of adapting to higher education or the workforce, often rendering it a stage highly vulnerable to stress, anxiety, and diminished well-being (Arnett, 2000). Research has shown

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that psychological distress is increasingly prevalent among individuals aged 18–25, where academic pressure, family expectations, and limited access to mental health services are among the primary contributing factors (Matud et al., 2020). These findings highlight that the mental well-being of young adults in Indonesia remains a pressing concern that requires attention from individual, familial, and sociocultural perspectives.

One significant factor that may influence mental well-being is intergenerational trauma, which refers to the transmission of emotional pain and psychological distress across generations. In this study, intergenerational trauma is defined at the family level, referring to the transmission of unresolved parental trauma through family interactions, parenting practices, and emotional communication patterns, rather than collective or historical trauma at the societal level. This concept was first extensively discussed in the context of Holocaust survivors' descendants, where the second generation exhibited emotional distress, anxiety, and relational dysfunction despite not having experienced the original traumatic events directly (Danieli, 1998; Kellermann, 2001). According to Yehuda et al. (2018), intergenerational trauma operates through biological mechanisms (e.g., epigenetic alterations caused by chronic stress), psychological mechanisms (e.g., rigid or avoidant parenting styles), and social mechanisms (e.g., family narratives that suppress emotional expression). Within collectivist societies like Indonesia, where family structures tend to be hierarchical and emotional communication is often constrained by norms of propriety, the potential for trauma transmission may be heightened, as parents rarely disclose past traumatic experiences to their children (Amping et al., 2024). Unresolved trauma from previous generations can manifest as irrational fears, relational anxiety, and difficulties in emotion regulation among their descendants (Kellermann, 2001; Dekel & Goldblatt, 2008). Individuals raised in families with a history of trauma often develop an internal working model marked by tension and uncertainty, which may impair their ability to form secure attachments and sustain psychological well-being (Vitale, 2025). Cooper et al. (2019) further found that trauma extends beyond the individual to affect the broader relational system within families, where exposure to traumatic family narratives is consistently associated with higher symptoms of depression and anxiety among children, ultimately reducing their subjective well-being.

Although the effects of intergenerational trauma may leave profound emotional imprints, mental well-being is not solely determined by past family trauma. In many cases, the quality of family relationships and interactions plays a decisive role in how individuals interpret, manage, and recover from psychological wounds. One crucial aspect in this process is family functioning, which can serve as a significant protective factor for mental well-being. Olson (2000) defines family functioning through dimensions such as cohesion (emotional closeness among members), flexibility (the ability to adapt to change), open communication, and healthy emotional support. Well-functioning families tend to create emotionally safe environments that foster positive psychological development and protect their members from external stressors (Walsh, 2016). Conversely, dysfunctional families characterized by closed communication, unresolved conflicts, and lack of emotional support may exacerbate the negative impact of intergenerational trauma on mental well-being (McCrory et al., 2017). A study by Zhu et al. (2024) revealed that positive family functioning is associated with higher levels of gratitude and mental health among parents and children, reducing depressive symptoms and enhancing emotional well-being. Similarly, Xiang et al. (2022) found that family cohesion directly contributes to greater subjective happiness and lower psychological distress in Chinese families. Thus, positive family functioning is associated with better mental well-being through supportive communication patterns and emotional connectedness within the family (Walsh, 2016). Accordingly, in the present study, family functioning is examined as an independent predictor of mental well-being, rather than as a moderating or buffering variable. In the Indonesian context, the significance of family functioning for mental well-being cannot be separated from core cultural values such as mutual cooperation, respect for elders, and collective orientation (Khodijah et al., 2024). However, hierarchical family structures and cultural taboos surrounding discussions of trauma often lead to emotional repression that persists across generations (El-Khalil et al., 2025). When family members are unable to process trauma collectively, the resulting narratives are often marked by silence or guilt, which are subsequently transmitted to younger generations (Hesse & Main, 2000). Over time, such communication patterns may cultivate emotionally unsafe environments, potentially undermining the psychological well-being of younger family members (Gong et al., 2023). Therefore, examining the interrelationships between intergenerational trauma, family functioning, and mental well-being among Indonesian young adults is highly relevant, particularly given the strong influence of cultural norms on parenting patterns, emotional communication, and collective approaches to coping and recovery.

Previous studies have underscored the need for an integrative understanding of how intergenerational trauma and family functioning jointly shape mental well-being. Letourneau et al. (2024) found that families who engage in open communication about their traumatic histories tend to experience higher emotional well-being compared to those who maintain silence. This finding reinforces the idea that emotional openness and warmth within families can interrupt the psychological transmission of trauma. Likewise, Reed et al. (2023) emphasized that family functioning mediates the relationship between parental trauma and children's mental health, suggesting that the quality of family relationships is a stronger predictor of descendants' well-being than the mere existence of trauma itself. Reese et al. (2022) found that parents' adverse childhood experiences increase family stress, while positive childhood experiences improve family health, thereby reducing the transmission of trauma across generations. In other words, intergenerational trauma is not a deterministic psychological fate; rather, healthy family functioning serves as a resilience factor that mitigates its negative effects (Walsh, 2016). However, the present study focuses on testing the direct contributions of intergenerational trauma and family functioning to mental well-being, in line with the analytical model employed.

Nevertheless, research on this topic within the Indonesian context remains limited. Most studies on intergenerational trauma have focused on Western populations or post-conflict communities (Yehuda et al., 2016; Danieli, 1998), while Southeast Asian contexts, particularly Indonesia, with its distinct familial and cultural dynamics, remain underexplored. Existing studies often emphasize childhood trauma without addressing its intergenerational dimensions (Amping et al., 2024). Furthermore, empirical evidence examining intergenerational trauma and family functioning simultaneously as predictors of mental well-being among Indonesian emerging adults is scarce. Additionally, while family functioning has been examined in relation to

academic stress and adolescent behavior (Khodijah et al., 2024), its moderating role between intergenerational trauma and mental well-being has not been empirically investigated in Indonesia. Drawing on Bowen's (1978) Family Systems Theory, emotional experiences and interaction patterns within families are transmitted across generations through a multigenerational transmission process, in which unresolved emotional issues and conflict patterns persist until one generation consciously breaks the cycle through awareness and relational restructuring. Therefore, a study integrating the concepts of intergenerational trauma, family functioning, and mental well-being among young adults would provide both theoretical and practical contributions.

METHODS

Participant characteristics and research design

This study employed a cross-sectional quantitative design to examine the influence of intergenerational trauma and family functioning on the mental well-being of young adults in Indonesia. Data were collected through an online survey, which enabled efficient recruitment and ensured participant anonymity. A non-experimental approach was applied, and data were analyzed using regression analysis to examine the hypothesized relationships among variables. In line with this analytic approach, family functioning was examined as an independent predictor rather than as a buffering or moderating variable, and therefore no interaction terms were specified or tested. Participants were recruited using convenience sampling through online distribution across university networks and social media platforms. A total of 103 respondents completed the survey. The median age was *20 years*, with the majority (89.3%) classified as emerging adults (aged 18–29 years), which aligns with the operational definition of young adulthood adopted in this study (Arnett, 2000). Although a small proportion of participants were aged 30–40 years (10.7%), the analytical focus remained on emerging adults, consistent with the study's conceptual framework. Most participants identified as female (89.3%), while 10.7% identified as male. Regarding living arrangements, 88.3% reported residing with their families, and 11.7% reported living independently. In terms of parental marital status, 79.6% reported that their parents were married, 12.6% widowed, and 7.8% divorced. A detailed summary of participant demographics is presented in Table 1.

Table 1. Demographics of participants (N=103)

Variable	Frequency	Percent
Sex		
Male	11	10.7
Female	92	89.3
Age y.o (Mdn=20)		
18 - 29	92	89.3
30 - 40	11	10.7
Residency		
With family	91	88.3
Living alone	12	11.7
Parental Marital Status		
Married	82	79.6
Divorced	8	7.8
Widowed	13	12.6

All participants provided informed consent prior to participation. Ethical approval for this study was obtained through a self-ethical assessment from LPPM Universitas Negeri Jakarta on 5 February 2025. Participation was voluntary, and respondents could withdraw at any time without penalty. Given the trauma-related nature of the study, participants were informed in advance about potentially sensitive questions and were allowed to skip items they found distressing. Contact information for psychological support services was provided at the end of the survey to minimize potential emotional risk. Confidentiality and anonymity were strictly maintained, and no financial or material incentives were offered.

Sampling procedures

Participants were recruited using a convenience sampling method. The recruitment process was conducted online via *Google Form*, including Instagram, WhatsApp, and Telegram. This approach was selected to reach a wide range of emerging adults across different regions in Indonesia. Approximately 120 individuals were approached, and 103 completed the full survey.

Due to the predominance of female participants and the high proportion of respondents living with their families, the findings should be interpreted with caution, as these characteristics may limit the generalizability of the results to male populations or young adults living independently.

Measures and covariates

Three Indonesian-adapted self-report measures were employed in this study. The Historical Intergenerational Trauma Transmission Questionnaire (HITT-Q) was used to assess intergenerational trauma and demonstrated good construct validity and high internal reliability (*Cronbach's* α > .80) across subscales in the Indonesian context. The HITT-Q consists of 65 items, each rated on a 5-point Likert scale, which provides sufficient sensitivity to capture variations in transgenerational trauma processes (Békés and Starrs, 2024). The General Functioning of Family Scale (Indonesian version of the Chinese Family Assessment Inventory) was used to measure overall family functioning, exhibiting strong content validity (*CVI* = .86) and excellent reliability (α = .921) in previous Indonesian studies. This scale comprises 32 items rated on a Likert-type scale(Lubis, et al., 2024). The Warwick–Edinburgh Mental Well-being Scale (WEMWBS) measured participants' mental well-being and demonstrated good construct validity through Rasch analysis, item-person reliability above .80, and *Cronbach's* α values ranging from .89 to .93. The WEMWBS consists of 14 positively worded items assessing positive mental well-being over the past two weeks. Items are rated on a 5-point Likert scale (1 = none of the time to 5 = all of the time) (Tennant, 2007).

Data analysis

Data analysis was conducted using SPSS 25 version. Descriptive statistics were computed to summarize participants' demographic characteristics and scores on the main study variables. Subsequently, multiple linear regression analysis was performed to examine whether intergenerational trauma and family functioning significantly predicted mental well-being. Prior to analysis, the assumptions of normality, linearity, homoscedasticity, and multicollinearity were tested and met. The level of statistical significance was set at $p < .05$ for all analyses.

RESULTS OF STUDY

Prior to the main analysis, the data were examined to ensure that the assumptions of linear regression were met. The results of the normality test indicated that the data were normally distributed. In addition, linearity tests between intergenerational trauma (IGT) and mental well-being, family functioning and mental well-being, as well as between intergenerational trauma and family functioning, demonstrated linear relationships. Thus, the data met the assumptions required for conducting multiple linear regression analysis.

A multiple linear regression analysis was conducted to examine the effects of intergenerational trauma and family functioning on mental well-being. The results (see Table 3) showed that the overall model was statistically significant , $F(2, 100) = 29.36$, $p < .001$, This finding indicates that intergenerational trauma and family functioning jointly contributed significantly to the prediction of individuals' mental well-being . Based on Table 2, the regression model accounted for 37% of the variance in mental well-being ($R^2 = .370$; adjusted $R^2 = .357$). This suggests that although both predictors contributed simultaneously to the model, a substantial proportion of variance in mental well-being remained attributable to factors outside the scope of this study.

Table 2. Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.608a	.370	.357	8.610

Table 3. ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4352.449	2	2176.225	29.359	<.001b
	Residual	7412.580	100			
	Total	11765.029	102			

Table 4. Coefficients

Model		Unstandardized B	Standardized B	t	Sig.
1	(Constant)	63.482		20.481	<.001
	IGT	-.181	-.635	-5.536	<.001
	Family Functioning	.049	.038	.334	.739

Table 5. Score Categories

	Frequency	Percent
Low	80	77.7
High	23	22.3
Total	103	100.0

In addition to analyses based on continuous scores, mental well-being scores were also categorized into low and high groups to provide a descriptive overview of participants' well-being levels (see Table 5). This categorization was based on the hypothetical mean of the mental well-being scale, which was derived from the scale's theoretical minimum and maximum scores. Participants with observed scores below the hypothetical mean were classified into the low mental well-being category, whereas those with scores equal to or above the hypothetical mean were classified into the high mental well-being category. This approach allows for interpretation of scores relative to the theoretical midpoint of the scale rather than solely relying on the empirical distribution of the sample.

As shown in Table 5, the majority of participants (77.7%) were classified into the low mental well-being category, while 22.3% were classified into the high mental well-being category. This distribution indicates that most respondents in the present study reported levels of mental well-being below the theoretical average of the scale. It should be noted that although categorization based on the hypothetical mean facilitates substantive interpretation, the primary statistical analyses in this study relied on continuous mental well-being scores, as reflected in the regression and correlation analyses. Therefore, the categorization results should be interpreted descriptively rather than inferentially.

DISCUSSION

The present study examined the influence of intergenerational trauma and family functioning on the mental well-being of young adults in Indonesia. The results demonstrated that both variables significantly predicted mental well-being. However, only intergenerational trauma had a significant independent effect. These findings suggest that inherited traumatic experiences exert a stronger influence on psychological well-being than family functioning alone.

This finding supports prior research indicating that the psychological residues of trauma can persist across generations, shaping emotional regulation, attachment patterns, and stress reactivity even among individuals who did not directly experience the original traumatic events (Kellermann, 2001; Yehuda & Lehrner, 2018). Similar to previous studies that identified the long-term emotional and relational consequences of parental trauma, the present results suggest that the effects of unresolved distress are transmitted not only biologically but also through learned relational patterns and family narratives. As shown by Cooper, Wieling, and Pfeiffer (2019) and El-Khalil, Tudor,

and Nedelcea (2025), trauma that is not openly processed within the family tends to manifest as relational conflict, emotional withdrawal, or a lack of psychological safety, all of which may reduce descendants' capacity to form secure attachments and experience well-being. The current finding aligns with this perspective, indicating that young adults who inherit emotional tension from their parents' unresolved trauma may internalize feelings of guilt, anxiety, or hyper-responsibility that negatively influence their psychological health.

In collectivist contexts such as Indonesia, where communication is shaped by social hierarchies and emotional restraint (Amping et al., 2024; Khodijah et al., 2024), these mechanisms may be further reinforced. Families often prioritize harmony and respect for authority, which can inadvertently discourage open discussions about painful experiences. As a result, trauma is transmitted not through explicit storytelling but through silence, avoidance, or emotional distance, as described by Hesse and Main (2000). The present study's finding that intergenerational trauma significantly predicted mental well-being supports this notion: when traumatic emotions are left unacknowledged, they may resurface in the psychological experiences of the next generation, leading to diminished emotional resilience and lower well-being. Thus, this research extends previous findings by demonstrating how intergenerational trauma operates within the specific sociocultural framework of Indonesian families, where unspoken pain and hierarchical communication may sustain the emotional legacy of trauma across generations.

Although family functioning was found to be a significant predictor in the overall model, it did not exert an independent effect on mental well-being. This finding can be interpreted through the developmental lens of emerging adulthood, a period marked by identity exploration, autonomy, and the pursuit of self-definition beyond the family system (Arnett, 2000). During this stage, young adults typically shift their emotional reliance from family toward peers, romantic partners, and academic or professional environments. Consequently, their well-being becomes increasingly shaped by personal achievements, social comparisons, and individual coping resources rather than by immediate family dynamics (Vitale, 2025). This developmental transition may explain why, in the present study, family functioning did not have a strong direct association with mental well-being once intergenerational trauma was considered. However, when family dysfunction coexists with intergenerational trauma, the impact on mental health becomes substantially greater.

When families fail to process shared trauma, unresolved emotional pain becomes embedded within family interactions, often interacting with low cohesion and unresolved conflict to create an emotionally unsafe environment (McCrory, Gerin, & Viding, 2017; Reed et al., 2023). The present study's finding supports that framework by showing that when intergenerational trauma is accompanied by poor family functioning, the negative effects on mental well-being become more pronounced. Families that characterized by emotional restraint, avoidance of difficult topics, or rigid hierarchical structures create conditions where trauma remains underground and unprocessed. In these systems, pain is neither acknowledged nor addressed, leading to implicit transmission of trauma responses through behavioral modeling, emotional atmosphere, and unspoken family rules (Bowen, 1978; Isobel et al., 2021). Children in such environments may internalize anxiety, depression, or maladaptive coping mechanisms without understanding their origins, as the family system inadvertently perpetuates cycles of unresolved trauma across multiple generations.

Conversely, positive family characteristics, such as warmth, gratitude, and flexibility have been shown to promote emotional healing and psychological growth across generations (Zhu, Liu, Zhang, & Xu, 2024; Xiang et al., 2022). In this regard, these insights suggest that family functioning plays a dual role in serving as both a potential source of distress and a pathway toward recovery. The nature of family interactions can fundamentally shape whether inherited trauma becomes a source of ongoing distress or an opportunity for growth and healing. Families that maintain open communication and emotional attunement are more likely to transform inherited pain into resilience through empathy, forgiveness, and shared understanding. Such environments enable individuals to actively process and recontexttualize inherited pain, transforming it from an unspoken burden into a shared narrative that can be understood and integrated (Danieli, 1998; Masten & Monn, 2015). Within the Indonesian context, where collectivist values and familial interdependence remain central, these relational qualities are particularly vital. This open communication style allows younger generations to make sense of their parents' or grandparents' experiences, reducing the psychological weight of unexplained family patterns and fostering adaptive coping strategies that build psychological resilience. Thus, the present study extends previous findings by highlighting that while trauma may be transmitted across generations, the quality of family functioning determines whether this transmission results in psychological vulnerability or resilience.

This multifaceted dynamic provides a framework for interpreting the current study's findings. While family functioning did not emerge as a direct, independent predictor of mental well-being in the statistical analysis, this does not diminish its potential significance. Instead, in the future research, family dynamics may operate through moreinteractive pathways potentially functioning as a moderating variable that influences how strongly intergenerational trauma affects young adults' psychological outcomes (Reese et al., 2022; Yehuda & Lehrner, 2018). In other words, the quality of family relationships may determine whether inherited trauma becomes debilitating or manageable, even if family functioning alone does not directly determine overall mental health status.

Overall, the results highlight that intergenerational trauma remains a critical determinant of young adults' mental well-being, whereas family functioning appears to have a more context-dependent role. For young adults who are transitioning toward independence, family dynamics may influence well-being primarily through the emotional residues of intergenerational trauma rather than day-to-day family interactions. The descriptive findings further reinforce this interpretation, as the majority of participants (77.7%) in this study were classified in the low mental well-being category. This suggests that many Indonesian young adults may experience psychological distress or reduced emotional vitality, potentially linked to the cumulative effects of unprocessed familial trauma and limited emotional communication within families. The prevalence of low well-being among participants underscores the importance of addressing intergenerational trauma and promoting family-based interventions to enhance mental health outcomes.

Some limitations of this study include the cross-sectional design; future longitudinal data collection would strengthen the results. Furthermore, the sampling

technique used was convenience sampling; in future studies, purposive sampling could be used to target participants who have already experienced trauma. Furthermore, the number of participants was insufficient, and the psychological dynamics of IGT were not adequately depicted in this study, so further research is needed to explore the data in greater depth.

The practical implication of this research is that interventions to improve mental well-being in emerging adults need to consider trauma history. Individuals with moderate levels of mental well-being can receive psychoeducation on trauma awareness. However, individuals with low levels should be referred to a psychologist with expertise in trauma-informed therapy. Also, family-based psychoeducation and intergenerational dialogue programs can be developed to enhance emotional openness and trauma awareness within Indonesian families. Such initiatives can help break the cycle of silence surrounding past adversities and foster healthier communication patterns across generations. Promoting these approaches may strengthen young adults' mental well-being. Future research should examine how cultural values, such as collectivism and filial piety, influence the effectiveness of family interventions in addressing intergenerational trauma.

CONCLUSION AND RECOMMENDATION

This study demonstrates that intergenerational trauma significantly influences the mental well-being of young adults in Indonesia, whereas family functioning does not have an independent effect. These findings suggest that inherited emotional experiences from previous generations remain a key determinant of psychological health, particularly when family communication about past trauma is limited. Strengthening family psychoeducation and intergenerational dialogue may serve as an effective approach to prevent the continuation of trauma's psychological impact and to promote mental well-being among Indonesian young adults.

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DECLARATIONS

Ethics Approval And Consent To Participate

This study was reviewed and approved through a self-ethics assessment conducted by the Research and Community Service Institute (LPPM), Universitas Negeri Jakarta. All participants provided informed consent prior to their participation. Participation was voluntary, and confidentiality and anonymity of the data were ensured.

Consent For Publication

Not applicable.

Availability Of Data And Materials

The datasets used and/or analyzed during the current study are available from the corresponding author upon reasonable request via email.

Conflicts Of Interest Statement

The authors declare that they have no conflicts of interest.

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Artificial Intelligence was used solely to support grammatical and language editing of the manuscript. The authors take full responsibility for the content, interpretation, and integrity of the work.

Authors' contributions.

Anggi Mayangsari conceptualized the study, designed the methodology, theoretical foundation, conducted data analysis, and drafted the manuscript. Reny Rustyawati contributed to data analysis and statistical interpretation. Sri Juwita Kusumawardhani contributed to the theoretical framework and revision of the manuscript. Vivi Ariantika assisted with data collection and data preparation. All authors read and approved the final manuscript.

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REFERENCES

Amping, D. R., Adiyanti, M. G., & Ludji, I. (2024). Intergenerational Trauma: Exploring Transmission Mechanisms in Post-Conflict Families. Bisma The Journal of Counseling, 8(2), 225-234. https://doi.org/10.23887/bisma.v8i2.85107

Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. American Psychologist, 55(5), 469–480. https://doi.org/10.1037/0003-066X.55.5.469

Békés, V., & Starrs, C. J. (2024). Assessing transgenerational trauma transmission: development and psychometric properties of the Historical Intergenerational Trauma Transmission Questionnaire (HITT-Q). European journal of psychotraumatology, 15(1), 2329510. https://doi.org/10.1080/20008066.2024.2329510

Bowen, M. (1993). Family therapy in clinical practice. Jason Aronson.

Cooper, D. K., Wieling, E., & Pfeiffer, A. (2019). Bioecological implications of narrative exposure therapy in low-resource settings: Individual, family, community, and socio-political contexts. Australian and New Zealand Journal of Family Therapy, 40(4), 353-367. https://doi.org/10.1002/anzf.1392

Danieli, Y. (1998). International handbook of multigenerational legacies of trauma. Springer.

Dekel, R., & Goldblatt, H. (2008). Is there intergenerational transmission of trauma? The case of combat veterans' children. American Journal of Orthopsychiatry, 78(3), 281–289. https://doi.org/10.1037/a0013955

El-Khalil, C., Tudor, D. C., & Nedelcea, C. (2025). Impact of intergenerational trauma on second-generation descendants: a systematic review. BMC psychology, 13(1), 668. https://doi.org/10.1186/s40359-025-03012-4

Gong, W., Jiang, L. C., & Guo, Q. (2023). The role of family communication patterns in intergenerational COVID-19 discussions and preventive behaviors: A social cognitive approach. BMC Psychology, 11, 290. https://doi.org/10.1186/s40359-023-01331-y

Hesse, E., & Main, M. (2000). Disorganized infant, child, and adult attachment: collapse in behavioral and attentional strategies. Journal of the American Psychoanalytic Association, 48(4), 1097–1187. https://doi.org/10.1177/00030651000480041101

Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. Applied Psychology: Health and Well-Being, 1(2), 137–164. https://doi.org/10.1111/j.1758-0854.2009.01008.x

Isobel, S., Goodyear, M., Furness, T., & Foster, K. (2019). Preventing intergenerational trauma transmission: A critical interpretive synthesis. Journal of clinical nursing, 28(7-8), 1100–1113. https://doi.org/10.1111/jocn.14735

Kellermann, N. P. F. (2001). Transmission of Holocaust trauma-An integrative view. Psychiatry, 64(3), 256–267. https://doi.org/10.1521/psyc.64.3.256.18464

Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. Journal of Health and Social Behavior, 43(2), 207–222. https://doi.org/10.2307/3090197

Khodijah S., Harahap, F.H., Rahman., Andri Nurwandri., Ismail Nasution., & Nilasari Siagian. (2024). Comparison of Cultural Values in Families A Case Study: Indonesia and Cambodia. Global International Journal of Innovative Research, 2(9). https://doi.org/10.59613/global.v2i9.323

Lubis, R., Hinduan, Z. R., Jatnika, R., Baydhowi, & Agustiani, H. (2024). Development of the Family Function Scale: Indonesia Version. Journal of Family Issues, 45(7), 1611-1632. https://doi.org/10.1177/0192513X231181363

Masten, A. S., & Monn, A. R. (2015). Child and family resilience: A call for integrated science, practice, and professional training. Family Relations, 64(1), 5–21. https://doi.org/10.1111/fare.12103

Matud, M. P., Díaz, A., Bethencourt, J. M., & Ibáñez, I. (2020). Stress and psychological distress in emerging adulthood: A gender analysis. Journal of clinical medicine, 9(9), 2859. https://doi.org/10.3390/jcm9092859

McCrory, E. J., Gerin, M. I., & Viding, E. (2017). Annual Research Review: Childhood maltreatment, latent vulnerability and the shift to preventative psychiatry - the contribution of functional brain imaging. Journal of child psychology and psychiatry, and allied disciplines, 58(4), 338–357. https://doi.org/10.1111/jcpp.12713

Olson, D. H. (2000). Circumplex model of marital and family systems. Journal of Family Therapy, 22(2), 144–167. https://doi.org/10.1111/1467-6427.00144

Reese, E. M., Barlow, M. J., Dillon, M., Villalon, S., Barnes, M. D., & Crandall, A. (2022). Intergenerational transmission of trauma: the mediating effects of family health. International journal of environmental research and public health, 19(10), 5944. https://doi.org/10.3390/ijerph19105944

Reed, M., Bedard, C., Perlman, C. M., Browne, D. T., & Ferro, M. A. (2023). Family Functioning and Health-Related Quality of Life in Parents of Children with Mental Illness. Journal of child and family studies, 1–12. Advance online publication. https://doi.org/10.1007/s10826-023-02556-6

Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., & Stewart-Brown, S. (2007). The Warwick-Edinburgh mental well-being scale (WEMWBS): development and UK validation. Health and Quality of life Outcomes, 5(1), 63. http://www.hqlo.com/content/5/1/63

Vitale, F. (2025). Attachment to Dysfunctional Family Situations: A Psychological and Sociological Analysis. ShodhSamajik: Journal of Social Studies, 2(1), 8-16. https://dx.doi.org/10.29121/ShodhSamajik.v2.i1.2025.12

Walsh, F. (2016). Family resilience: A developmental systems framework. European Journal of Developmental Psychology, 13(3), 313–324. https://doi.org/10.1080/17405629.2016.1154035

Xiang, G., Li, Q., Du, X., Liu, X., Xiao, M., & Chen, H. (2022). Links between family cohesion and subjective well-being in adolescents and early adults: The mediating role of self-concept clarity and hope. Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues, 41(1), 76–85. https://doi.org/10.1007/s12144-020-00795-0

Yehuda, R., & Lehrner, A. (2018). Intergenerational transmission of trauma effects: putative role of epigenetic mechanisms. World psychiatry : official journal of the World Psychiatric Association (WPA), 17(3), 243–257. https://doi.org/10.1002/wps.20568

Zhu, X., Liu, H., Zhang, C., & Xu, Y. (2024). Family functioning, gratitude, and mental health: A study on intergenerational well-being. Frontiers in Psychology, 15, 1287. https://doi.org/10.3389/fpsyg.2024.1398210

ADDITIONAL INFORMATION

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