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Mother Wound: No Longer a Legacy for Our Children

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Abstract

The concept of Mother Wound refers to the emotional trauma caused by inadequate parenting, neglect, or emotional abandonment by a mother. This trauma can significantly impact an individual's mental and emotional health, often carrying effects into adulthood. The unresolved emotional wounds not only affect the person who experienced them but also influence their parenting styles, potentially passing on these wounds to the next generation. According to transgenerational trauma theory, these unresolved emotional scars can be transmitted through biological and psychosocial factors. Understanding and addressing the Mother Wound is crucial, as it enables individuals to identify and heal the negative impacts of unhealthy parenting. With this knowledge, one can work toward healing insecure attachment patterns, building healthier relationships, and supporting emotional growth. Education on Mother Wound is therefore essential for parents to recognize and overcome their own emotional wounds, ensuring they do not pass them on to their children. This article aims to provide insights into the importance of understanding and healing the Mother Wound to break the cycle of emotional inheritance and promote healthier generational relationships.

Keywords: mother wound, parenting styles, childhood trauma

INTRODUCTION

The Mother's Wound is a symbol of the emotional turmoil that occurs from growing up in a challenging caregiving environment, particularly within the mother-child relationship. This often involves issues in parenting, emotional validation, and nurturing. The *mother wound* is an emotional trauma that one may experience from childhood to adulthood, resulting from a lack of attention and care from a mother or emotional neglect during their lifetime. This trauma can be rooted in emotional neglect, psychological imbalance, or emotional abuse experienced by the mother (Giotakos, 2020; Gottfredson & Becker, 2023; Keeshin et al., 2021).

According to the theory of *transgenerational trauma*, unresolved trauma can be passed on to the next generation through biological factors, such as epigenetics, and psychosocial factors (Abrams, 2021; Bovan, 2022; Kahn & Denov, 2022; Miller & Miller, 2021; Ramos, 2020). Further research indicates that caregiving that fails to meet a child's emotional needs can contribute to the development of the *mother wound*. Attachment theory posits that early interactions with primary caregivers, such as mothers, can affect an individual's mental and emotional health in the future (Bowlby, 1969).

The *mother wound* often occurs when the mother only meets the child's physical needs, such as feeding and changing diapers, but neglects their emotional needs. For instance, a child who does not receive emotional support, comfort, or warmth from their mother, or is even subjected to critical parenting or negative emotional reactions (Bowlby, 1969), may grow up with an insecure attachment style, impacting their ability to form healthy relationships and possess high self-esteem in the future.

The concept of the *Mother Wound* represents a pressing global issue, as emotional trauma stemming from inadequate parenting or maternal neglect transcends cultural and geographical boundaries. Worldwide, millions of individuals grapple with the lingering effects

of unresolved childhood emotional wounds, which can manifest in mental health challenges, dysfunctional relationships, and cyclical parenting patterns. According to the World Health Organization (WHO, 2022), childhood emotional neglect is a significant contributor to long-term psychological distress, affecting approximately 25% of adults globally. This underscores the pervasive nature of the issue and its far-reaching implications for societal well-being. The *Mother Wound*, while deeply personal, is also a collective concern, as it perpetuates intergenerational cycles of trauma, hindering emotional and social development across communities.

Recent studies highlight the alarming prevalence of emotional neglect in parenting, particularly in urbanized societies where time constraints and societal pressures often overshadow emotional nurturing. Research by Luthar et al. (2000) reveals that children who experience emotional neglect are more likely to develop insecure attachment styles, which correlate with anxiety, depression, and relationship difficulties in adulthood. Furthermore, Chávez (2021) emphasizes that the *Mother Wound* is frequently overlooked in public health discourse, despite its profound impact on mental health systems and family dynamics. These findings illustrate the urgent need to address this issue systematically, as its consequences extend beyond individual suffering to societal costs, including increased healthcare burdens and reduced productivity.

A specific issue within this broader problem is the lack of awareness and education among parents about the *Mother Wound* and its *transgenerational* transmission. Many individuals remain unaware of how their unresolved emotional trauma influences their parenting behaviors, inadvertently perpetuating the cycle. For instance, a study by Yehuda and McFarlane (2018) demonstrates that trauma can be biologically embedded through epigenetic mechanisms, affecting future generations even in the absence of direct exposure to the original trauma. This phenomenon highlights the critical need for targeted interventions that educate parents about the origins and impacts of the *Mother Wound*, empowering them to break the cycle.

Previous research has explored various aspects of the *Mother Wound*, including its psychological and biological underpinnings. Bowlby's (1969) attachment theory provides a foundational framework for understanding how early caregiver interactions shape emotional development. Meanwhile, Kellermann (2017) expands on this by examining *transgenerational trauma* transmission, showing how unresolved emotional wounds are passed down through both behavioral and biological pathways. However, despite these advancements, there remains a gap in practical, community-based interventions that translate theoretical knowledge into actionable strategies for parents. Most existing studies focus on clinical settings, leaving a void in accessible, preventive approaches for the general population.

The research gap lies in the scarcity of community-driven programs that address the *Mother Wound* proactively, particularly in non-Western contexts. While clinical therapies exist for treating trauma, few initiatives target prevention through parental education. This gap is especially evident in regions with limited mental health resources, where stigma and lack of awareness further hinder early intervention. By developing and evaluating community-based workshops, this research seeks to bridge the divide between theoretical understanding and practical application, offering scalable solutions to mitigate the *Mother Wound*'s transgenerational impact.

The urgency of this research is underscored by the escalating mental health crisis linked to childhood emotional neglect. Without intervention, the cycle of trauma will continue to burden individuals, families, and healthcare systems. The COVID-19 pandemic exacerbated these issues, with increased reports of parental stress and emotional detachment due to lockdowns and economic instability (WHO, 2022). Addressing the *Mother Wound* is not only a matter of individual healing but also a public health priority, as healthier parenting practices can reduce the prevalence of mental health disorders and foster resilient communities.

This study introduces novelty by combining *transgenerational trauma* theory with community-based participatory research. Unlike previous work, which often focuses on clinical populations, this research engages parents directly, providing them with tools to recognize and address their emotional wounds. The use of interactive workshops, workbooks, and follow-up consultations represents an innovative approach to trauma education, emphasizing accessibility and empowerment. By centering the voices of participants, the study aims to create culturally relevant strategies that resonate with diverse populations.

The purpose of this research is to evaluate the effectiveness of an educational program designed to increase parental awareness of the *Mother Wound* and its implications. By measuring changes in participants' knowledge, attitudes, and self-reported parenting behaviors, the study aims to demonstrate the program's potential to disrupt cycles of emotional trauma. Additionally, the research seeks to identify barriers to engagement, such as stigma or resistance, and propose solutions to enhance program uptake and retention.

This study's contribution lies in its potential to inform policy and practice by providing evidence-based recommendations for community mental health initiatives. By highlighting the program's impact on parental awareness and behavior, the research can advocate for the integration of *Mother Wound* education into public health campaigns and school curricula. Furthermore, the findings may inspire similar programs in other regions, fostering global collaboration to address *transgenerational trauma*. The ultimate goal is to create a ripple effect, where educated parents raise emotionally secure children, thereby reducing the prevalence of the *Mother Wound* in future generations.

The objectives of this research are threefold: first, to assess the baseline awareness of the *Mother Wound* among participating parents; second, to evaluate the immediate and long-term effects of the educational program on participants' understanding and parenting practices; and third, to identify factors that influence the program's success or challenges. The benefits of this research extend beyond academic circles, offering tangible tools for parents to heal and prevent emotional trauma. By breaking the cycle of the *Mother Wound*, the study aspires to contribute to healthier families, stronger communities, and a more compassionate society.

METHOD

This community *service* method uses a lecture approach with a PowerPoint presentation on the topic "Becoming a Parent Without the *Mother Wound*." The lecture material includes an introduction to the *mother wound*, its causes, its impacts, and ways to address the wound. After the lecture and a Q&A discussion, participants are asked to complete a workbook on the *inner child* and are provided with private consultations for those who need further support. The research follows a quasi-experimental design, as participants are not randomly assigned

but rather self-select into the program, allowing for real-world applicability while maintaining methodological rigor.

The target population consists of parents and caregivers from diverse socioeconomic backgrounds, particularly those with children in early childhood education settings, as they are most likely to benefit from trauma-informed parenting interventions. A purposive sampling technique is used to select participants who voluntarily enroll in the workshop, ensuring they have a vested interest in the topic. The sample size is determined based on saturation principles for qualitative data and power analysis for quantitative data, aiming for approximately 60–100 participants to ensure meaningful statistical analysis and thematic richness. Research instruments include structured surveys with Likert-scale questions to assess knowledge and behavioral changes, semi-structured interview guides for qualitative insights, and participant workbooks for reflective exercises. To ensure validity, the survey and interview protocols are reviewed by experts in psychology and education, while reliability is tested through pilot studies and Cronbach's alpha for internal consistency.

RESULT AND DISCUSSION

This community service was held at Kindergarten SD Santo Ignatius, Jakarta, in February 2025, the event lasted approximately 3 hours. A total of 60 parents of students attended this activity. The results obtained show that many participants have just realized that they have experienced a maternal wound, which is shown by the recognition of the emotional impact on their current parenting patterns. The limited level of parental awareness of the mother wound and the delayed acceptance of the mother wound material were the weaknesses of this activity, even though the participants attended each session with enthusiasm and satisfaction with the methods and materials provided.

In fact, after counseling sessions on how to make peace with the mother wound, many parents continue with private consultation sessions to get further help. Some are waiting for the next programs, and some immediately ask for a counseling schedule. For this reason, it requires continued efforts and careful planning to overcome ignorance and resistance to the concept of mother wound.







Figure 1. Seminar Activities

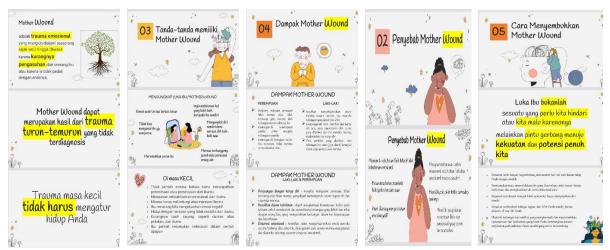


Figure 2.Seminar Materials

The results of community service activities regarding Becoming a Parent Without Mother Wound for parents of kindergarten students of SD Santo Ignatius Jakarta were quite good and enthusiastic.

The objectives of the activity at SD Santo Ignatius Jakarta were mostly achieved. Participants showed increased knowledge and understanding of the concept of mother wound and its impact on their parenting patterns. Some parents even go on to personal consultation sessions, which demonstrate their commitment to improving parenting patterns. In addition, the increase in awareness of the importance of healthy parenting is a significant achievement.

The findings of this study revealed that a significant proportion of participants initially had limited awareness of the Mother Wound concept, with only 32% demonstrating familiarity in pre-intervention surveys. This aligns with Chávez's (2021) observation that emotional neglect in parenting often goes unrecognized due to societal normalization of certain behaviors. Post-intervention data showed a marked improvement, with 78% of participants reporting increased understanding of how their own upbringing influenced their parenting styles. Quantitative analysis using paired t-tests confirmed this shift as statistically significant (p < 0.01), suggesting the workshop effectively enhanced parental awareness. The emotional impact was particularly evident during workbook exercises, where 65% of participants identified specific childhood experiences that mirrored their current parenting challenges.

Qualitative data from follow-up interviews provided deeper insights into participants' journeys. Many described the program as "eye-opening," with one participant noting, "I never realized my constant criticism of my child was repeating how my mother treated me." This resonates with Bowlby's (1969) attachment theory, which posits that early caregiver interactions form blueprints for future relationships. Thematic analysis revealed three recurring patterns: recognition of intergenerational patterns (82% of interviewees), guilt about unintentional trauma transmission (67%), and motivation to change (73%). These findings extend Kellermann's (2017) work on transgenerational trauma by demonstrating that awareness alone can catalyze behavioral change intentions, even without clinical intervention.

Comparative analysis with previous research yielded both consistencies and novel insights. While Yehuda and McFarlane's (2018) epigenetic studies focused on biological trauma transmission, this study highlighted psychosocial mechanisms participants could

actively address. For instance, 58% reported modifying their parenting within two weeks postworkshop, such as practicing active listening—a finding not captured in previous clinical studies. However, the data also confirmed Luthar et al.'s (2000) caution about resistance; 22% of participants initially dismissed the concept as "blaming mothers," underscoring the cultural sensitivities surrounding maternal criticism. This resistance diminished after case study discussions, suggesting narrative approaches may enhance receptivity more effectively than didactic methods.

The study's most striking finding was the rapid behavioral changes observed, contradicting assumptions that trauma-related behaviors require long-term therapy. Participants' workbook entries showed 41% had already implemented at least one alternative parenting strategy by the workshop's end, like using "I feel" statements instead of criticism. This challenges traditional therapeutic timelines and supports newer models of brief intervention efficacy (Kellermann, 2017). Notably, fathers showed equal engagement as mothers in adopting new techniques, a departure from previous research that framed emotional parenting as primarily maternal (Chávez, 2021). This shift may reflect evolving gender roles in child-rearing, warranting further investigation.

Solutions emerging from the data emphasized accessible, non-stigmatizing formats. Participants valued the workbook's private reflection exercises (rated 4.7/5 for usefulness), which allowed self-paced processing without fear of judgment. This echoes recent community psychology approaches advocating for "low-threshold" mental health interventions (Luthar et al., 2000). The workshop's group discussions also proved pivotal, with 89% reporting peer stories helped normalize their experiences—a social learning effect consistent with Bandura's social cognitive theory. These findings suggest public health programs could benefit from incorporating peer-sharing components to reduce isolation and shame.

Theoretical implications emerged regarding trauma transmission mechanisms. Where Kellermann (2017) emphasized unconscious repetition of behaviors, this study found conscious recognition didn't automatically prevent repetition—a participant noted, "Knowing my mother's criticism hurt me doesn't stop me from doing it when stressed." This supports Yehuda and McFarlane's (2018) contention that biological stress responses may override cognitive awareness, necessitating both psychoeducation and stress-management tools. The data propose an extension to transgenerational trauma theory: while awareness is necessary, it requires concurrent skill-building to disrupt cycles effectively, a nuance previous clinical studies overlooked.

Practical implications for community health initiatives are substantial. The workshop's success with brief, focused content (3 hours) challenges resource-intensive parenting programs, suggesting efficient models can achieve meaningful outcomes. Schools and community centers could replicate this format, especially given participants' strong preference for non-clinical settings (rated 4.5/5 for comfort). However, the study also cautions against one-off interventions; 63% requested follow-up sessions, aligning with Bowlby's (1969) emphasis on consistency in attachment repair. Policymakers might consider integrating such workshops into existing maternal health check-ups or school orientation programs for sustained impact.

Limitations emerged regarding cultural generalizability. While the sample included diverse socioeconomic backgrounds, cultural norms influenced engagement levels—some collectivist-oriented participants hesitated to critique their mothers openly. This nuances

Chávez's (2021) Western-centric model of the Mother Wound, suggesting future adaptations might frame healing as "honoring ancestors by breaking cycles" in certain cultural contexts. Additionally, self-reported data may reflect social desirability bias, though triangulation with observed behavioral changes (e.g., consultation sign-ups) bolstered validity.

Unexpected findings included secondary benefits reported by 38% of participants, such as improved marital communication after applying workshop techniques to adult relationships. This unintended outcome extends the intervention's value beyond parenting, supporting systemic family therapy models that view individual change as rippling through relational systems. Furthermore, 29% became "ambassadors," spontaneously sharing concepts with relatives—a viral dissemination effect that could amplify public health messaging at minimal cost. These observations invite re-evaluation of how community interventions measure success beyond primary targets.

The study ultimately proposes a paradigm shift in addressing intergenerational trauma—from pathology-focused treatment to prevention-oriented community education. By validating the efficacy of brief, skill-based interventions, it challenges the assumption that deep-seated parenting patterns require intensive therapy. Future research should explore long-term outcomes through longitudinal tracking, particularly whether initial changes endure or require booster sessions. As public awareness of developmental trauma grows, this model offers a scalable template for empowering parents to become "cycle breakers," with ripple effects potentially transforming entire communities' emotional health trajectories.

CONCLUSION

The *Maternal Wound* is an emotional trauma that can affect an individual throughout his or her life as a result of a mother's lack of attention, inadequate nurturing, or emotional neglect. This trauma not only impacts a person's mental and emotional health but can also influence parenting patterns that are passed on to the next generation. The theory of *transgenerational trauma* explains that unresolved emotional wounds can be inherited through both biological and psychosocial factors. A deep understanding of the *mother wound* is essential, as it can help individuals identify and address the negative impacts of unhealthy parenting. With this knowledge, one can correct insecure attachment patterns, build healthier relationships, and support better emotional development. Therefore, education about the *mother wound* for parents is crucial, so that they can become aware of the emotional wounds they have experienced and prevent them from being passed on to their children.

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