

## The Parenting Experiences of Childhood Abuse Survivors: Findings from a Meta-Synthesis

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### Abstract

Childhood abuse has been linked to a wide range of adverse health outcomes and may also influence the transition into parenthood. This study aimed to explore how individuals with a history of childhood abuse experience becoming parents. We conducted a meta-ethnographic synthesis of 13 qualitative studies. The analysis identified three overarching themes: (1) Personal experiences of abuse intensified the motivation to be a nurturing parent; (2) Abuse histories created challenges in navigating the parenting role; and (3) Parenthood offered a pathway toward healing and recovery. Findings suggest that survivors often demonstrated a strong commitment to giving their children a better upbringing than their own. Nonetheless, many parents reported difficulties related to self-efficacy, attachment, and emotional regulation that surfaced in their parenting experiences. Despite these challenges, parenthood was also described as a source of growth and healing. The implications of these findings are further discussed.

**Keywords:** Childhood abuse, Trauma, Parenthood, Parenting, Survivors

### Introduction

Childhood maltreatment—including neglect, physical violence, emotional abuse, or sexual abuse at the hands of caregivers—remains a widespread problem with severe consequences for both individuals and society [1]. Estimates from the World Health Organization (WHO) suggest that nearly three-quarters of children between the ages of 2 and 4 experience psychological or physical violence from their caregivers, while about 20% of girls and 7.5% of boys are subjected to sexual abuse [2]. Evidence also shows that exposure to one form of abuse often increases the likelihood of experiencing others [3]. Such adverse experiences have been consistently linked

to long-term physical and psychological health difficulties [3] and are associated with enormous economic costs, amounting to an estimated seven billion dollars globally, or roughly 8% of the world's GDP [1]. Although becoming a parent is often considered a major life transition that brings new demands and responsibilities [4], individuals with a history of abuse may face added challenges. For these parents, the transition can be complicated by lingering effects of their childhood experiences, including low parental confidence, heightened stress, and the absence of positive role models [5, 6]. Research has also demonstrated that traumatic experiences may shape parenting behaviors [7, 8] and contribute to patterns of intergenerational trauma [9, 10]. These findings highlight the need for a deeper understanding of how survivors of childhood abuse experience becoming parents.

Previous attempts to synthesize qualitative research have shed light on this issue. Siverns and Morgan [11], applying a trauma-theoretical perspective across 11 studies, found that parents' identities were shaped

Access this article online

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Received: 24 May 2025; Accepted: 12 August 2025

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**How to cite this article:** Kankanhalli S, Yoong D. The Parenting Experiences of Childhood Abuse Survivors: Findings from a Meta-Synthesis. *Int J Soc Psychol Asp Healthc*. 2025;5:102-13. <https://doi.org/10.51847/1t3UhDq8zU>

through the lens of trauma, emphasizing the protection of their children and reliance on external support. Similarly, Herbell and Bloom [12] synthesized 11 studies exploring mothers with adverse childhood experiences, describing their efforts to disrupt cycles of abuse, adopt protective strategies, and seek help, while also reporting persistent fears of losing custody to authorities.

#### *Rationale and aims*

Most available research on the impact of childhood abuse on parenting has relied on quantitative methods (e.g., Greene *et al.* [13]; Iyengar *et al.* [7]). Our study builds on previous meta-syntheses by incorporating more recent qualitative work, including perspectives from both mothers and fathers. Unlike earlier reviews that emphasized trauma-specific frameworks (e.g., Siverns and Morgan [11]), we aimed to examine parenting experiences from a broader standpoint. While childhood abuse is a serious form of adversity associated with elevated health risks [3], we acknowledge that it does not inevitably lead to trauma-related symptoms in all survivors.

By focusing on diverse forms of abuse—including neglect, emotional abuse, physical and sexual violence, and exposure to domestic conflict—this study sought to provide a more nuanced understanding of how survivors

navigate the transition to parenthood. Our synthesis offers insights not only for researchers but also for practitioners and parents themselves, with the goal of informing supportive practices and interventions.

#### **Materials and Methods**

To address the research aim, we employed a qualitative meta-synthesis approach. This method enables the comparison and integration of findings from multiple qualitative studies, thereby generating new insights into a given phenomenon [14, 15]. For the analytic process, we drew primarily on the meta-ethnographic comparative framework [16, 17], complemented by systematic coding techniques informed by reflexive thematic analysis [18].

#### *Search strategy and study selection*

In line with step two of the meta-ethnographic method [16], we developed a search strategy in collaboration with a university librarian to identify eligible primary studies. Inclusion was restricted to peer-reviewed publications that employed qualitative or mixed-methods designs. To ensure both relevance and manageability, we limited the search to studies published within the past 20 years. The specific search terms and detailed inclusion criteria are presented in **Table 1**.

**Table 1.** Search strategy and inclusion criteria

Search terms and strategy	Inclusions criteria
(child* NEAR/2 (violen* OR abus* OR trauma* OR advers* OR neglect*) OR “trauma assessment” OR “early life harshness” OR violen* NEAR/2 child*) AND (becom* NEAR/2 (mother* OR father* OR parent* OR caregiver) OR motherhood OR fatherhood OR parenthood OR parent* NEAR/2 (style OR behav*) OR postnatal) AND (impact OR interview* OR experienc* OR qualitativ* OR narrative OR phenomenolog* OR interpret* OR identify* OR address* OR inquir* OR expos* OR “grounded theory” OR analysis)	1. Participants exposed to abuse (physical, psychological, sexual) and/or neglect by care giver before age of 16 2. Articles contain direct quotes from qualitative studies 3. Participants have been interviewed about their experiences as parents/care givers for children 4. Articles are written in English or Norwegian 5. Articles have been peer reviewed and are published within the last 20 years

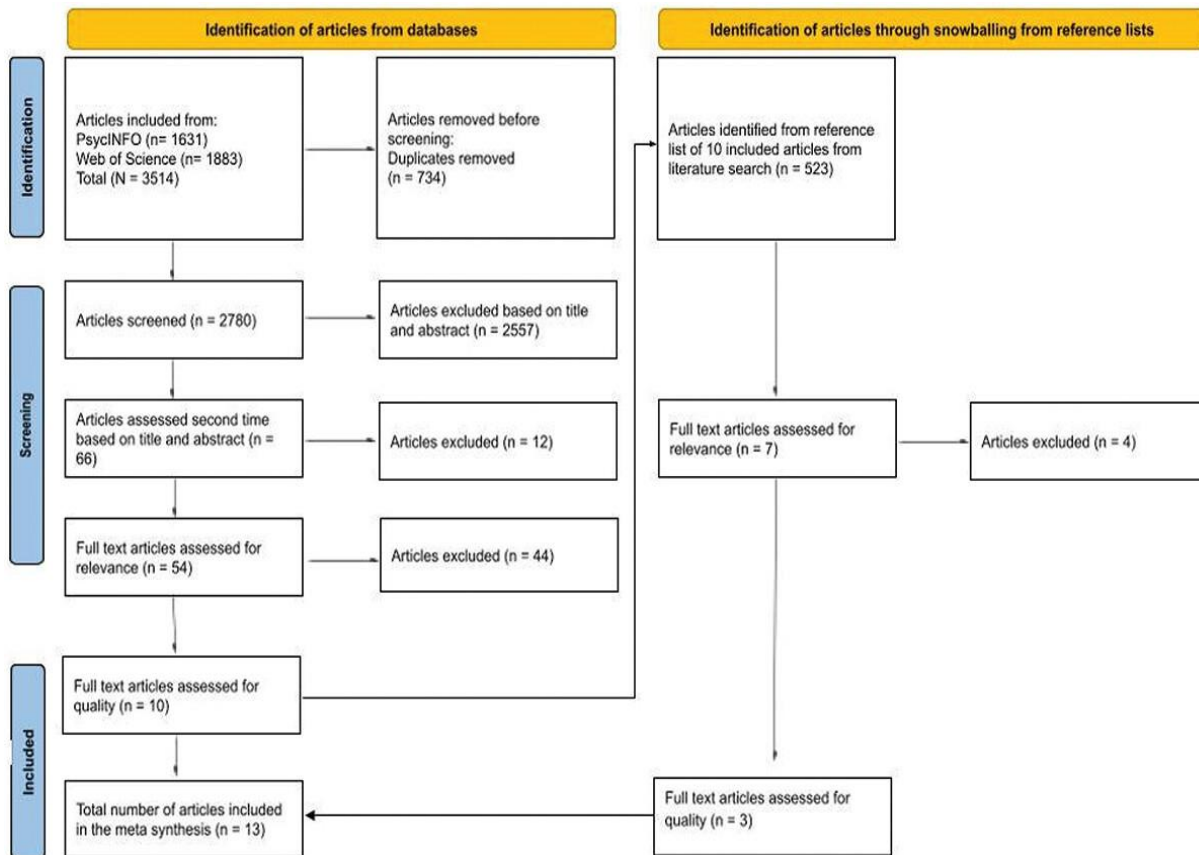
The database search was conducted in April 2023 using PsycINFO and Web of Science (WOS). This search generated 1,631 records from PsycINFO and 1,883 from WOS, which were imported into EndNote [19]. Duplicate removal was performed in two steps. First, EndNote’s automatic function identified and removed 501 duplicates. Then, the second and third authors

manually screened the database, eliminating an additional 233 duplicates. Following this process, 2,780 unique articles remained.

Screening for eligibility was carried out by the second and third authors under the supervision of the first author. To ensure consistency, the authors initially reviewed 10 articles together to align their interpretation of the

inclusion criteria. Subsequently, 90 titles and abstracts were independently assessed by both authors, after which consensus was reached. The remaining 2,680 records were divided between the second and third author for independent screening. This process identified 54 potentially relevant studies, which were retrieved in full text for further assessment. Of these, 44 were excluded, resulting in 10 studies meeting the inclusion criteria.

Because standardized search terms for qualitative methodologies are limited, the reference lists of the included studies were also reviewed to locate additional eligible articles. From 523 references screened, 7 were identified as potential fits and underwent full-text assessment. Three of these met the criteria and were added to the final sample. In total, 13 studies were included. An overview of the study selection process is provided in **Figure 1**.



**Figure 1.** Flow diagram selection process

#### *Quality assessment and included studies*

All 13 articles that met the inclusion criteria were evaluated for methodological quality using the **Critical Appraisal Skills Programme** [20] together with the “Critique” items from the EPICURE framework [21]. The assessment showed that every study reached an acceptable level of quality, so no articles were excluded at this stage.

The studies were published between 2009 and 2022 and represented research from several countries: the United States (n = 5), the United Kingdom (n = 2), and one study

each from Ireland, Canada, Australia, Israel, South Africa, and Sweden. Each investigation was carried out within a single cultural context, and none explicitly addressed cultural influences on parenting experiences. Sample sizes were typically small, ranging from 3 to 19 participants, with the exception of three U.S. studies that recruited larger groups of mothers with histories of childhood sexual abuse (CSA).

Most research was gender-specific, with nine studies including only women and two focusing exclusively on men. Just two studies recruited participants of more than

one gender. Altogether, 197 individuals took part, the majority being women ( $n = 173$ ), with ages spanning from 20 to 72 years.

While all studies met the criteria for inclusion, their research foci differed widely. A substantial portion concentrated on CSA: seven explored the experiences of mothers, and one focused on fathers. Within this group, some examined parenthood broadly, whereas others targeted narrower issues, such as breastfeeding or the transmission of trauma across generations. The

remaining studies addressed parenting in complex developmental settings, including histories of foster care (two studies), growing up with a caregiver with psychosis (one study), or with a caregiver struggling with substance abuse (one study).

Overall, the body of literature was marked by heterogeneity in terms of focus, participant groups, and research settings. Further details of the included studies are summarized in **Table 2**.

**Table 2.** Overview and description of the 13 included articles

Lead Author and Year	Study Objective	Recruitment Method	Study Participants	Country	Qualitative Methods	Key Themes/Findings	Abuse Exposure
Aparicio <i>et al.</i> [22]	Understand the motherhood experiences of teenage mothers in foster care with abuse histories	Not specified	6 teenage mothers in foster care with abuse histories	USA	Semi-structured interviews (three per participant), Interpretative Phenomenological Analysis (IPA)	1. Darkness and despair 2. Moments of hope amid struggles 3. Fresh starts	N*: 6 PV*: 4 SA*: 2 WDV*: 4
Byrne <i>et al.</i> [23]	Examine how childhood sexual abuse (CSA) impacts women's experiences during pregnancy, childbirth, and postpartum	Recruited via local psychological healthcare services; clinicians contacted eligible participants	3 mothers (aged 27–40) with CSA experiences	UK	Semi-structured interviews (three per participant), Narrative analysis	1. Identity experiences 2. Embodiment experiences 3. Parenting experiences	SA*: 3
Cavanaugh <i>et al.</i> [24]	Investigate the experiences and needs of mothers with CSA histories	Recruited through advertisements	44 mothers (aged 20–58) with CSA experiences	USA	Semi-structured interviews, Thematic analysis	1. Parenting experiences 2. Future aspirations	SA*: 44 PV*, WDV*: Unknown number
Coles [25]	Study how CSA survivors experience breastfeeding	Recruited via advertisements	11 mothers at various breastfeeding stages (6 weeks to 2 years post-birth)	Australia	Semi-structured interviews (five mothers interviewed twice), Thematic analysis	1. Breastfeeding strengthens mother-baby bond 2. Breastfeeding validates maternal body 3. Managing breastfeeding via maternal-sexual divide 4. Public breastfeeding and issues of exposure/control	SA*: 11

Dandy <i>et al.</i> [26]	Explore fatherhood experiences among individuals with foster care backgrounds	Recruited via advertisements at an NGO supporting former foster care individuals	5 fathers (aged 25–66) with foster care experience	UK	Semi-structured interviews, Interpretative Phenomenological Analysis (IPA)	1. Reflecting on past to progress 2. Revisiting past experiences 3. Breaking negative cycles	ACE: Unspecified maltreatment and abuse
Gichaz <i>et al.</i> [27]	Investigate parenting from an intergenerational perspective among CSA survivors	Recruited via leaflets at a crisis center for sexual abuse	19 mothers (aged 60–72)	Israel	Semi-structured interviews, Interpretative Phenomenological Analysis (IPA)	1. Early parenthood challenges for aging incest survivors 2. Adult children as a triumph over incest experiences	SA*: 19 PV*: Unknown number
Haiyasoso and Trepal [28]	Examine parenthood experiences among CSA survivors	Recruited via advertisements and university emails	9 mothers (aged 24–61)	USA	Semi-structured interviews, Narrative analysis	1. Balancing protection and independence 2. Using relational images to guide parenting 3. Functioning in relational contexts	SA*: 9 Other ACEs: Not specified
Kadish [29]	Explore how women are affected by growing up with a caregiver with psychosis	Convenience sampling via research group contacts	5 mothers (aged 28–53)	South Africa	Semi-structured interviews, Thematic content analysis (interpretivist-constructivist approach)	1. Impact of maternal psychosis on motherhood and feminine identity	ACE: Unspecified type
Lange <i>et al.</i> [30]	Study parenting experiences and support needs of CSA survivors	Recruited via NGOs focused on abuse, violence, mental health, and parenting	35 mothers (aged 20–40) with 1–5 children	USA	Digital questionnaires (CTQ-SF, CES-D), Semi-structured interviews, Thematic analysis	1. Protecting children from abuse 2. Child abuse concerns 3. Mother-child dynamics 4. Breastfeeding experiences 5. Views on child and motherhood 6. Coping strategies	SA*: 35 PA*: 13 PV*: 14 Emotional N*: 14 Physical N*: 10
Matthews and Desjardins [31]	Understand how adults with childhood abuse histories envision family life	Recruited via advertisements	15 participants (13 women, mean age 30)	Canada	Two interviews per participant (life story and semi-structured), Thematic analysis	1. Transforming dysfunction into positive motherhood	PA*: 15 PV*: 12 N*: 11 WDV*: 6
O'Brien <i>et al.</i> [32]	Explore fatherhood experiences among CSA survivors	Recruited via three NGOs for CSA survivors	11 fathers (mean age 45) with 1–4 children	Ireland	In-depth semi-structured interviews, Interpretative Phenomenological Analysis (IPA)	1. Facing past trauma in fatherhood 2. Healing through fatherhood	SA*: 11 Other ACEs: Not specified



Tedgard <i>et al.</i> [33]	Examine how growing up with substance-abusing caregivers affects parenting	Recruited via newborn mental health intervention programs	19 parents (13 mothers, no couples, children aged 1–5)	Sweden	Semi-structured interviews, Qualitative content analysis	1. Lack of support for emotional regulation 2. Parenting challenges	Emotional N*: 18 PA*: 15 PV*: >8 WDV*: ≥1
Wright <i>et al.</i> [34]	Investigate motherhood experiences among CSA survivors	Recruited via advertisements	79 mothers (mean age 38.2, children from infants to adults)	USA	Written narratives (all participants), Semi-structured interviews (15 participants), Grounded Theory	1. Challenges of mothering as a survivor 2. Developing a mothering identity	SA*: 79 Other ACEs: Not specified

N\* = Neglect, PV\* = Physical violence, PA\* = Psychological abuse, SA\* = Sexual abuse, WDV\* = Witnessing domestic violence.

### *Synthesizing findings across studies*

Meta-synthesis of qualitative research provides a way to combine and interpret results from multiple studies, even when there is variation in focus, methodology, or context. In this study, we applied a meta-ethnographic approach, concentrating on translating and comparing findings across the 13 included studies to develop integrated insights. The synthesis, however, is inherently limited to the information reported in the primary studies, and certain perspectives or underexplored topics may remain unaddressed due to gaps in the existing literature.

The second and third authors carried out the synthesis under the first author's supervision. The process began with summarizing and contrasting findings across all studies (steps 3 and 4 of meta-ethnography; Noblit and Hare [16]), using Miro [35] to visually organize the material. Next, in steps 5 and 6, findings were "translated" across studies and synthesized to produce new interpretations and conceptual understanding [16, 17]. This involved iterative line-by-line coding of the results sections, guided by reflexive thematic analysis [18], alongside use of Miro to detect broader patterns and overarching themes. NVivo 12 [36] was used to manage coding and support data organization.

The final thematic structure was developed through repeated discussions among all authors, with refinements made during manuscript preparation (step 7 of meta-ethnography; Noblit and Hare [16]). Every included study contributed to each theme, ensuring the synthesis reflected the full scope of the data.

### *Researcher reflexivity*

The first author, a mother and professor of clinical psychology, has extensive experience in trauma research and qualitative methods, including meta-synthesis, and supervised the second and third authors during their Master's thesis, on which this article is based. The second

author is a recently qualified clinical psychologist, a Norwegian man in his early thirties, without parenting experience, with a professional interest in trauma. The third author is also a newly qualified clinical psychologist, without children, with interests in developmental psychology, family dynamics, and trauma. The team maintained reflexivity throughout the study, actively discussing how their personal experiences and professional backgrounds shaped interpretation, particularly noting the second and third authors' lack of direct experience with parenting.

### *Ethics statement*

This study did not require ethical approval, as it analyzed data already published in peer-reviewed articles.

## **Results and Discussion**

Synthesizing the findings from the 13 studies revealed three central themes: (1) experiences of childhood abuse strengthen the drive to be a caring parent, (2) past abuse introduces challenges to parenting, and (3) parenthood can offer a pathway toward healing.

### *Theme 1: experiences of childhood abuse strengthen the drive to be a caring parent*

Participants consistently described challenging childhoods that left lasting impressions. Many reported that their caregivers had failed to provide the support they needed, which fueled a determination to ensure their own children experienced what they themselves had lacked. At the same time, participants were often haunted by memories of abuse and aware of patterns of intergenerational harm, creating concern about whether they could parent successfully.

Across most studies, parents expressed a strong desire to give their children a more secure and nurturing

upbringing than their own. Many wanted to parent differently from their own parents: “I really dislike the way my parents were, and I don’t want to be like my mother at all” [33]. Providing stability and safety emerged as a central goal: “I just wanted a stable place for him” [22]. For some, avoiding childhood trauma entirely was paramount: “I just wanted my kids to get through childhood unscathed” [28].

Despite this strong motivation, many participants described anxiety and self-doubt. Their histories made them feel the need to prove their parenting capabilities to themselves and others: “It triggers not being good enough. If I’m good enough then I can prove that it’s not my fault” [34]. Others described this as an ongoing struggle to validate themselves as competent parents: “Peter told of needing to prove that he was an ‘OK dad’ and reflected that ‘it’s very difficult to prove that you’re innocent’” [26]. Concerns about repeating generational cycles of abuse further reinforced these anxieties, which in turn affected their experiences of parenting.

#### *Theme 2: past abuse introduces challenges to parenting*

Across the studies, parents reported that their history of abuse complicated their parenting. Twelve of the thirteen studies noted that trauma-related emotional reactions interfered with everyday caregiving. Participants frequently experienced fear or distress that disrupted emotional closeness with their children, and some expressed low confidence in their abilities as parents [23, 26, 27, 32-34].

Routine parenting activities could trigger intense emotional reactions tied to past experiences. Tasks such as diapering [28, 30], cleaning [30], or breastfeeding [25, 30] sometimes elicited intrusive thoughts and memories: “It would cross my mind sometimes with diapering them... especially with little boys getting erections” [34]. Such reactions led some parents to avoid certain situations or leave them to their partners, reinforcing feelings of inadequacy.

Past abuse also affected trust and family dynamics more broadly. One participant described how constant vigilance during childcare strained their relationship, though their partner was understanding: “My husband was scrutinized every nappy change... however, he accepted this as he knew my history” [30]. Fear could hinder emotional connection with children, and the child’s gender sometimes intensified these concerns: “I didn’t want her to be abused because I knew I’d love this child and I wouldn’t want any harm to come” [23].

#### *Parenting difficulties and struggles*

Some parents described substantial challenges in their role, sometimes feeling they could not meet the standards they set for themselves. In certain cases, parents relied on their children for emotional support rather than assuming the adult role: “I kept her home from school a lot, when she was little, so I wouldn’t have to be alone. You know, she was my best friend in the world really” [34]. Others noted that moments of anger could escalate, occasionally resulting in behaviors that could be emotionally or physically harmful to their children, which then triggered deep feelings of shame and guilt. Even when parents successfully created a safe environment, complex emotions often emerged, such as longing for the childhood they themselves had missed: “I envy their childhood... without child sexual abuse, without emotional abuse, without physical abuse” [30]. Additionally, some parents found it hard to relate to their child’s difficulties, particularly if the child had experienced a more stable upbringing: “I have trouble relating to my daughter’s problems... I can understand why I had problems... but feel she doesn’t have a reason to be troubled” [34].

#### *Theme 3: parenthood as a path to healing*

Despite these struggles, many participants described parenthood as transformative and offering opportunities for growth and healing. While caring for a child could trigger memories and reactions tied to past abuse, it also fostered a renewed sense of responsibility, purpose, and personal value. Parenthood often encouraged individuals to confront and work through their unresolved issues, providing a chance to seek support and pursue personal growth.

Several participants highlighted the profound positive impact of having a child. Parenthood created new meaning and a sense of achievement in life: “It was a life changing experience... having a baby really changes your life... it was a journey, a good one, I wouldn’t change it for the world” [23]. For some, parenthood became a defining accomplishment, offering a sense of pride and identity: “It’s the one thing I’ve done right... being a father, creating a life, it is the be all and end all to me” [26]. Mothers in particular described breastfeeding as a way to reconnect with their bodies, seeing them in a functional and nurturing light rather than sexualized, while also strengthening the bond with their child: “It’s the love. It’s the giving of my milk to him and

sharing with him... to have this little baby attached to you makes me feel a really strong connection" [25].

The relationships formed with their children were themselves restorative. Many participants noted that the love and care they could give helped them develop self-compassion and repair past emotional wounds: "Having beautiful, open relationships with my own children... has helped me to heal a lot of my past experiences" [30]. Yet, these experiences also brought up feelings of grief and anger toward their own caregivers for what they had missed: "I thought to myself—look at what I lost out on... Suddenly, I was the mother... and it's so natural to give love to your child" [29]. Watching their children grow safely and happily stirred bittersweet emotions about their own childhoods: "She just runs around and plays and has no fears... I'm so glad that she has that, but it makes me sad too" [34].

In several studies, parenthood also motivated participants to actively address their personal challenges. Many pursued therapy, parenting programs, or self-help strategies to manage their reactions and work through trauma so they could become better caregivers: "If I didn't get help for myself before, just for me, I have to do it now" [24]. Learning to understand their automatic emotional responses and how past abuse affected them was crucial for breaking cycles of harm [31]. For some, this awareness initially intensified concerns about repeating harmful patterns, making it important to balance processing their own emotions with protecting their children from distress: "Being a survivor you learn to control your feelings... until I know that I can have the time that I need to deal with it without scaring them or whatever" [34]. Across the studies, participants emphasized that parenthood offered multiple opportunities for personal growth and emotional healing. Our meta-synthesis exploring how survivors of childhood abuse experience the transition into parenthood highlights that participants across the 13 included studies were deeply motivated to provide their children with a childhood unlike their own. Many drew on their past experiences with abuse to guide their parenting choices, consciously identifying behaviors to avoid and envisioning more positive ways of raising their children. This strong motivation reflects a fundamental parental desire to protect one's child, which appears especially pronounced among those who experienced childhood maltreatment. These parents often feel an urgent need to ensure that their children do not endure the same hardships they once faced.

The findings resonate with earlier meta-syntheses on the topic. Herbell and Bloom [12] highlighted how mothers with a history of abuse strive to break intergenerational cycles, and Siverns and Morgan [11] noted the role of trauma in shaping parental identity. Our synthesis adds nuance to this literature by showing that both mothers and fathers share a strong desire to give their children a better start in life while simultaneously encountering significant challenges due to their own histories of abuse. Furthermore, we expand on Siverns and Morgan's [11] findings by illustrating how professional support, therapy, and external resources can contribute meaningfully to parents' healing processes.

Despite their dedication, many participants reported persistent fears of repeating the abusive patterns they had experienced. This aligns with broader research indicating that childhood abuse can increase the risk of transmitting maltreatment to the next generation [13]. At the same time, however, most parents demonstrated the ability to break the cycle. Yet, everyday parenting tasks—such as setting boundaries, breastfeeding, or diapering—often triggered strong trauma-related reactions, complicating their caregiving. Interpersonal difficulties, particularly in co-parenting relationships, were frequently amplified, and awareness of generational patterns of abuse sometimes intensified self-doubt. Across studies, participants described feeling torn between their commitment to provide better parenting and fear of perpetuating past harm, resulting in shame and uncertainty about their parenting capabilities.

These findings reflect broader patterns observed among trauma survivors, who often experience shame, guilt, and low self-esteem while navigating high personal expectations and instinctive reactions [37]. Many participants in the included studies reported low parental self-efficacy and distress when they perceived themselves as falling short. These experiences are consistent with prior research showing that survivors of childhood abuse frequently struggle with diminished self-esteem and confidence in their abilities [38, 39].

Parental self-efficacy is a critical factor in how challenges are perceived and managed [40]. Low self-efficacy can heighten feelings of insecurity, making parents more vulnerable to self-doubt and fear of inadequacy. For survivors of abuse, these challenges are further compounded by core trauma-related experiences such as lack of control and disrupted attachment [41]. Posttraumatic reactions—including intense emotional and physiological responses triggered by reminders of



past trauma—can disrupt everyday caregiving, such as breastfeeding or diapering [42]. In this way, trauma-related responses may perpetuate low parental self-efficacy, creating a cycle in which survivors' past experiences continue to influence their present parenting challenges.

#### *Healing potential and implications*

Across the included studies, participants frequently described how parenthood offered a unique opportunity for healing. For some, simply forming a bond with their child was restorative, providing emotional experiences that helped repair past wounds. For others, becoming a parent acted as a catalyst to pursue professional support and interventions to address unresolved issues. These findings underscore the importance of supporting parents with a history of abuse, particularly in strengthening their confidence and self-efficacy in the parenting role.

Interventions that target emotion regulation, self-awareness, and recognition of how past abuse shapes present reactions may be especially beneficial. Evidence suggests that therapeutic support can effectively enhance parental self-efficacy [43, 44]. Additionally, opportunities to engage with positive parental role models may help survivors develop healthier parenting practices. However, trust issues are common among survivors, and fear of judgment or intervention from child protective services can deter parents from seeking help. Addressing these concerns in a sensitive and nonjudgmental manner is therefore essential to reduce barriers to support. Clinicians and practitioners should remain mindful of how posttraumatic reactions can interfere with routine parenting tasks and the ways in which a history of abuse can influence trust and openness, in order to foster safe and effective help-seeking behaviors [45].

#### *Methodological considerations*

Conducting a systematic search is a critical component of qualitative meta-synthesis. In comparing our work with Siverns and Morgan [11], who addressed a largely overlapping research question, several methodological challenges become apparent. The lack of standardized terminology for qualitative studies necessitates very broad search strategies, resulting in extensive screening processes. In our review, for example, 4037 potential articles were reduced to 13 included studies, while Siverns and Morgan [11] screened 5288 articles to include 11.

This broad approach, while necessary, carries a considerable risk of overlooking relevant studies. Despite similar search strategies, eight of the studies included in Siverns and Morgan's meta-synthesis were not retrieved in our search, and conversely, we identified four articles published before September 2018 that were not included in their review. Additionally, six studies published after their search date were incorporated into ours. These discrepancies highlight the ongoing challenges in identifying qualitative research and point to the need for improved methods to ensure comprehensive coverage and maximize the potential of qualitative meta-synthesis in generating robust knowledge.

#### *Limitations*

Meta-synthesis offers a valuable approach for integrating qualitative research findings, providing a more comprehensive understanding of a given phenomenon. Nevertheless, this method has inherent limitations, as does the present study. The conclusions drawn are confined to the body of research available and identifiable through systematic searches. Examination of the 13 included studies reveals notable gaps in the literature, particularly regarding participant demographics and contextual diversity.

A significant limitation is the overrepresentation of women in the existing research. Nine of the 13 studies focused exclusively on mothers, and 11 of the 13 included only one gender. Consequently, fathers' perspectives remain underexplored, and the interaction between gender and the impact of childhood abuse on parenthood is poorly understood. Addressing this gap is essential, especially considering the diverse focus and contexts of the included studies, highlighting the need for future research that includes both mothers and fathers.

Another limitation is the lack of attention to cultural context. All included studies were conducted within a single cultural framework, with no study explicitly examining how cultural beliefs about parenthood influence experiences of parenting after trauma. Research spanning multiple cultural contexts, particularly in low-income countries with less developed welfare systems, is scarce. This restricts the transferability of our findings and underscores the need for studies that consider cultural differences in parenting norms, support systems, and openness in discussing abuse. Despite these limitations, cross-cultural literature suggests that core experiences of trauma, trauma responses, and parent-child attachment share

commonalities, indicating that our findings still provide meaningful insights into survivors' experiences of parenthood.

## Conclusion

This meta-synthesis explored how survivors of childhood abuse navigate the transition into parenthood, revealing a complex interplay of challenges and healing opportunities. Across studies, parents expressed a strong commitment to providing their children with a better childhood than they themselves experienced, accompanied by fears of inadequacy and perpetuating intergenerational cycles of abuse. Many participants struggled with low parental self-efficacy and difficulties in emotional regulation, which sometimes hindered help-seeking behaviors.

At the same time, parenthood offered avenues for personal growth and healing, fostering positive experiences that strengthened relational bonds and enhanced confidence in parenting abilities. By including both mothers' and fathers' perspectives, this study extends previous research beyond a purely trauma-focused lens.

The synthesis also highlights methodological challenges in qualitative meta-synthesis, including difficulties in identifying relevant studies due to a lack of standardized keywords. Moreover, it emphasizes critical gaps in the literature, such as the need for research on fathers' experiences and a broader range of childhood abuse types beyond child sexual abuse. Addressing these gaps is essential to deepen our understanding of how childhood abuse shapes the parenting experience and to inform interventions that effectively support parents with histories of abuse.

**Acknowledgments:** None

**Conflict of Interest:** None

**Financial Support:** None

**Ethics Statement:** None

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