For many survivors of childhood abuse, symptoms of Post-Traumatic Stress Disorder (PTSD) may re-occur, or never arise, until they become a parent. A significant number of parenting survivors do not recognize the increased depression, anxiety, or onset of flashbacks as symptoms of PTSD, weaving in and out their journey to raise a family. Instead, many will internalize debilitating shame and question their ability, and even their right to parent.

According to the National Center for Victims of Crimes, 1 in 5 girls and 1 in 20 boys will be a victim of sexual abuse. The abused children all have one thing in common – they eventually become adults. Naturally, most of these adults become parents, many whom have never spoke about what happened to them, leaving trauma symptoms to lie dormant, festering, until acts of Parenting 101 expose them to triggers which send them spiraling. Most suffer silently, alone, and confused. It doesn’t have to be that way. And in fact, it shouldn’t be.

One night, as a new mom, I walked into my daughter’s bedroom to kiss her goodnight before heading to bed myself. As I went to my daughter’s bed, I was halted by a physical reaction to what I was doing. I had this sudden, unexplainable sickness in my stomach and felt panicked. I had this thought that I was violating her personal space by being in her room while she slept. I felt repulsed by the idea of kissing her on her cheek. In that moment, I was able to recognize my thoughts and physical symptoms as irrational and was able to kiss my baby girl goodnight; however, I had yet to understand where this was all coming from.

Following that episode, I started to recognize that same mental and physical pattern while performing basic acts of care with my children. The sickness and panic was there when I changed diapers, bathed them, gave affection, when affection was requested, when I breastfed, when I disciplined either of them – it became the norm for me to feel “off” anytime I was in the role of Mom. But who do you turn to with this kind of revelation? How does one ask for help
because her children are making her physically and mentally sick? I often asked myself, “What the hell is wrong with me that I feel like this?”

This is the PTSD I have had to learn to cope with as I raise my children, because I was sexually abused as a child. I’m now able to recognize that panicked physical reaction I experience stems from the eight years my abuser walked into my room at night, and the lack of protection I had from others in my life. I was told “I love you” by my abuser, every time he abused me. I believe that is the reason that I felt ill when I went to kiss my daughter goodnight and tell her that I love her.

Becoming a mother added a whole new, difficult layer to my recovery. I became triggered by things that I did with, around, and for my children. I was triggered by certain people around my children. I was triggered by their sheer existence, in that I now could see how innocent of a child I was, at the time my abuse began.

I have worked in the field of mental health for the past 10 years and invested a significant amount of time working through my trauma before becoming a mother. Even with professional and personal experiences in recovery work, I was unable to recognize what I was experiencing as PTSD, nor was I ever forewarned this may happen.

With research such as the Adverse Childhood Experiences study (ACEs) beginning to come to the surface, we are learning that there is science behind how survivors of childhood abuse experience adulthood and parenting. Prolonged abuse and the toxic stress that follows distorts connections in the brain that associate things correctly, like love and fear. Also, a survivor’s nervous system develops in an abnormal manner, leaving the survivor with a faulty fight/flight/freeze response.

It wasn’t until I connected with other parenting survivors of childhood abuse online that I shed the belief that I was broken and not worthy of being a parent. Through sharing my experiences, I learned how common this is for parenting survivors. Once I was able to break through the shame, I was able to re-enter therapy and talk truthfully about what I was experiencing. At that point, I began learning about PTSD and triggers. Even though the process of acknowledging my reality as a mom was brutal, it finally started to make sense.

It isn’t always a choice for an abuse survivor to associate “normal” feelings with “normal” things. For example, a parenting survivor may experience a desire to push her child away when the child asks to snuggle and watch a movie, despite wanting to participate in the loving act. Intellectually, she may understand that this is a normal way of showing affection; however, her body recognizes that kind of touching as stressful, unpleasant, or even harmful.

Bessel A. van der Kolk, in his book The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma, teaches us that “Trauma victims cannot recover until they become familiar with and befriend the sensations in their bodies.” He further states, “The mind needs to be reeducated to feel physical sensations, and the body needs to be helped to tolerate and enjoy the
comforts of touch. Individuals who lack emotional awareness are able, with practice, to connect their physical sensations to psychological events. Then they can slowly reconnect with themselves.”

That’s what makes being a parenting survivor so difficult. Survivors do not often experience parenthood as their peers do and often feel alone because of this. This can add one more layer of fear, frustration and shame to their day to day experiences, especially when they have never heard anyone speak about parenting as they are experiencing it.

*It takes an incredible amount of energy and conviction to weave through PTSD while raising children. For many, the child is the trigger, meaning you can’t avoid it.*

One has to be willing and able to work through the incongruent feelings she experiences while parenting, and choose to analyze and process her reactions at a later time in order to continue healing. That is incredibly difficult to do when already experiencing sleep deprivation and other exhausting demands of parenthood.

I think most parents feel like they are winging it, but growing up in dysfunctional families often leave a person without a visual of what a “good” parent looks like. Add trying to understand PTSD symptoms to that process when no one ever talks about this and it is a recipe for the cycle of dysfunction to continue.

*A parenting survivor has to commit to raising her children, while at the same time re-raising herself. Often times, this is done with little to no support.*

There are so many missed opportunities for providers to prepare new parents for what may occur. First and foremost, *Ask!* Looking back, I was never asked by my primary care physician if my childhood abuse was affecting me as an adult or parent. The lactation specialist never asked if I had experience with childhood sexual abuse when I struggled to breastfeed my child. My previous therapist never warned me that this may be one more thing I may need to learn to navigate when we discussed my plan to start a family.

I remain shocked that with all that is written about and for survivors, and about and for parents, no one has recognized and addressed parents *who are* survivors. As an advocate for parenting survivors, I am continuously amazed at the response I get when I speak on the topic, by both professionals and parents in the communities. The most common responses I get is “I’ve never heard anyone talk about this before” or “I didn’t know this happens to other parents.” It’s a shame.

*Understanding what triggers are and why they occur has saved my life, and allowed me to parent in a break-the-cycle fashion. It has allowed me to use the triggers to assist in my recovery, and no longer hinder it.*
It is my goal to increase awareness on the topic of parenting as a survivor by educating community medical, mental health and human service providers on the role childhood trauma has in becoming a parent.

The good news, as Bessel A. van der Kolk and other leading trauma and forward thinking experts like Peter Levine (Waking the Tiger: Healing Trauma), Judith Herman (Trauma and Recovery: The Aftermath of Violence–From Domestic Abuse to Political Terror) and Brené Brown (Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead) are proving that there is hope, if you are willing to do the work. And believe me, it is work!

With trauma-informed care becoming a buzzword of sorts, and with the ACEs study adding science-based evidence to validate the actions and reactions of abuse survivors, I can only hope that the 1 in 5 girls and the 1 in 20 boys will be more prepared for the role PTSD may have in their lives, as they become new moms and dads.

Note, essays such as this one are part of the reason we have a Parenting with ACEs group. Caring about Parenting with ACEs is the only requirement for joining this group. All are welcome. To create trauma-informed programs and communities, for children and their parents, the experience of parents must be considered, welcomed, invited and considered crucial.