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## Three generations later; Examining transnationalism, cultural preservation, and transgenerational trauma in United States Indo population

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# Three generations later

## Examining transnationalism, cultural preservation, and transgenerational trauma in United States Indo population

JAMIE D. STERN

### ABSTRACT

This paper examines the relationship between transnationalism, cultural preservation, and transgenerational trauma in the United States (US) Indo population. The information being analysed was compiled by the author from two separate surveys which took place between 2012 and 2021. This data was initially intended to act as a census for the scattered US Indo community however the salient information necessitated that the census be ongoing and that another survey be developed to measure effects of lingering trauma which has been passed down generationally. The two surveys invited Indos from around the globe to participate in data collection, which led to the development of the first Indo population maps of the twenty-first century and hidden impacts of transgenerational trauma. The trauma of the Indo experience during and after World War II affected the first, second, and third generations both similarly and differently with expressions being exacerbated as the population dispersed globally.

### KEYWORDS

The Dutch East Indies; Dutch-Indo; Indo diaspora; United States; cultural maintenance; transgenerational trauma; transnational; Bersiap; World War II; assimilation.

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## PROLOGUE

This journey into examining the relationship between transnationalism, cultural preservation, and transgenerational trauma in the United States (US) Indo<sup>1</sup> population has been carefully curated over the past decade-plus. My involvement began in an effort to connect with my heritage, which then evolved into massive research projects both as independent endeavors and research for The Indo Project.<sup>2</sup> In my work, I developed two primary surveys, which invited Indos from around the globe to participate in data collection. These surveys led to two salient developments: (1) The first Indo population map of the twenty-first century and (2) the hidden impacts of transgenerational trauma in this population. The trauma of the Indo experience during and after World War II affected the first, second, and third generations both in similar ways, but also with differences which were exacerbated as the population dispersed globally.

Through this period of time, it was interesting to observe how the Indo community in the US felt about their roots as Indos and their connections to the Netherlands as well as Indonesia. There is such variety in the way Indos regard their roots; it is complex and difficult to understand. This initially created a lot of confusion for me as an academic. I was searching for concrete viewpoints, but discovered that each individual I met or corresponded with has experienced history from their unique vantage point. Their memories are influenced by positive and negative experiences which they have personally lived through.

Some Indo individuals feel fondly towards the Dutch and negatively towards the Indonesians. Others feel fondly towards the Indonesians and negatively towards the Dutch. This is a consequence of being caught in the middle of two distinct cultures and being the hybrid population which was arguably forced to justify their right to exist. This is possibly one of the main core traumas experienced by the Indo people. While this perspective was not felt by all, it was certainly experienced by many. Proof exists in the echoes of the first generation<sup>3</sup> which encouraged their children to aim high in their studies and careers. This message is not unique in that many cultures<sup>4</sup> encourage their offspring to excel and achieve; however, the driving emotional momentum for Indos came from the acknowledgment that it was critical to “become” someone in this world of notable standing, achievement, and financial success. As a hybrid people, the Indos were seeking stability and questing to legitimize their existence in the world. They were accepted neither by the Indonesians or by the Dutch, which resulted in needing to prove that they too should be allowed to exist. This parallels with other hybrid culture

<sup>1</sup> Indo is a contraction of “Indo-European”.

<sup>2</sup> The Indo Project is a nonprofit US-based organization focused on the preservation of Indo culture and history. For more information, visit [www.TheIndoProject.org](http://www.TheIndoProject.org).

<sup>3</sup> The first generation of Indos is defined by The Indo Project as those who were born in the former Dutch East Indies before WWII and who have family roots going back several generations.

<sup>4</sup> See Appendix 2 for additional details on cultural comparisons.

groups who have had to prove that they belonged, or risk being shunned by the larger, pureblood population(s).

In trying to understand the US Indo viewpoint on transnationalism, it appears to be sectioned into three general groups which tend to overlap:

Group 1: Some Indos have retained their Dutch identity, which can include citizenship or dual US and Dutch citizenship. Members of this group frequently visit the Netherlands to see family and friends. While the cuisine enjoyed by this group includes Indonesian food, it also includes a lot of Dutch and Dutch-Indonesian fusion foods.

Group 2: Indos who identify heavily with their Indonesian heritage often visit Indonesia and frequently eat Indonesian food. They embrace Indonesian styles of dress and will proudly incorporate traditional clothing pieces in their wardrobe depending on the occasion. Old fashioned patterns (relating to geographical origin) on *batik* and *kebaya* items of clothing are revered but modern newer styles are also embraced.

Group 3: Many second-<sup>5</sup> and third-generation<sup>6</sup> Indos identify as American and have not retained Dutch, Indo, or Indonesian customs beyond occasionally eating foods which belong to the cultures.

When I originally began researching the US Indo population, I experienced limited interest from academic institutions. The micro minority<sup>7</sup> was so small that it was largely disregarded. This skewed my perspective and left me with the assumption that there was very little interest in the Indo experience. While this is true in the US, it is not true of the Netherlands or in Indonesia. This is a relevant observation because it highlights the psychological frustration which has been felt by first-, second-, and third-generation Indos residing in the US; there is little knowledge of who the Indo people are in the main-stream society and little interest has been expressed in them. This prompted the first generation of Indos to become culturally disconnected from their heritage. They chose to assimilate by quietly letting go of their heritage and trying their best to fit in with general American society. For some this process allowed for growth and prosperity, but for others it was traumatic, with a deep sense of loss which remained with them for the rest of their lives.

In 2018, Mr Hamdan Hamedan, the Executive Director of Indonesian Diaspora Network-United, contacted me regarding the original research I had been conducting on the US Indo population. To my surprise, the Indo

<sup>5</sup> Second-generation Indos are defined by The Indo Project as individuals who were born after the start of WWII, who experienced the transition of either repatriation to the Netherlands or emigration out of the Netherlands to other countries, or both.

<sup>6</sup> Third-generation Indos are defined by The Indo Project as individuals who have one or both parents and/or grandparents who belong to the first and second generations.

<sup>7</sup> My estimated calculations suggest that the current US Indo population is approximately 100,000 give or take 10,000. See Appendix 1 for calculation.

diaspora was considered to be a part of the Indonesian diaspora experience. He explained the various faces of the Indonesian diaspora. Mr Hamedan expressed a welcoming point of view which embraced the Indo people as still being a part of the Indonesian people. From my previous research, this caught me off guard on account of the fact that the Indos had been expelled from Indonesia (by force in many cases) in the aftermath of WWII. From 1945-1946 they endured the horrifying Bersiap period while concurrently experiencing the other intensities associated with the Indonesian War of Independence from 1945-1949; and in 1957, President Sukarno decreed that all remaining 46,000 Dutch citizens (Tim Hannigan 2015: 220) had to leave. As time passed, the vitriol and violent hostility once felt towards the Indo population by indigenous Indonesian people has subsided. Succeeding generations appear to be interested in embracing their Indo "cousins" as an extension of the Indonesian global population. An ancestral connection to Indonesia is the only criteria needed for Indos to be considered a part of the Indonesian diaspora. This invites those with Indonesian roots to reconnect culturally and identify with their Indonesian heritage. For some Indos who feel interested and emotionally connected to Indonesia, this offers an opportunity for transnationalism. From the perspective of a psychotherapist, this appears to be an offering for cultural healing.

Mr Hamedan described<sup>8</sup> the curiosities that his team had about the Dutch-Indos and US Indos, and what became of them. He was curious about their global dispersion and how they referred to themselves. Many Indos in the US identify as Dutch-Indos if they were born in the Netherlands. Those who were born in the US tend to use the term Indo and sometimes Indo-Dutch. The choice is largely based on personal preference.

Mr Hamedan was curious if the US Indos continued to practise any traditional customs or display traditional Indonesian mannerisms. He wondered about any connections to the native Indonesian population and if members of the Dutch-Indo community in the United States felt fondly about their Indonesian roots. The answers to these fascinating questions tend to vary by generation and by the individual as noted previously.

#### INDO IDENTITY IN THE UNITED STATES

Before we can discuss Indo identity, it is important to define terms. In the United States, the word *Indo* typically refers to people of mixed indigenous Indonesian and European heritage. As noted in the prologue, it is accepted as a truncated term for Indo-European.

The majority of Europeans who immigrated to the Dutch East Indies (as Indonesia was known for the 350 years prior to the founding of the modern nation) originated in the Netherlands. The influx of European people blending with Indonesians led to the Indo hybrid population. The majority of these people were typically produced by the union of a male European (most

<sup>8</sup> Hamdan Hamedan, personal communication, 2018.

often Dutch, but also of other nationalities), and a native woman generally of Javanese descent (or sometimes of another ethnicity group in the Austronesian classification).

Among the Dutch East Indies population, there was a subgroup of non-mixed people other than indigenous Malay. Such an individual was referred to as a *totok*. The origin of the word *totok* is Javanese, and is a term that has been in use since the eighteenth century. It is a colonial term. In the US, the word *totok* is fading in the collective memory of the Indo people as new generations, often from marriages between Indos and persons of other ethnic stock, replace those who are passing away. The word *totok* is well defined in the Netherlands as a term to refer to the population which is included under the term *Indische Nederlander*. They are not considered to be Indos, who are comprised exclusively of mixed heritage. This is parallel with the US Indo population who also consider *totoks* to be separate from the Indos. However, in the US, the Indo community is so small it necessitates being as inclusive as possible in an effort to preserve the history and culture. This inclusivity has offered opportunities for individuals who are exclusively Dutch, exclusively Indonesian, or mixed with the ethnic and cultural variety of the general US population, to be embraced and welcomed in an effort to contribute and celebrate Indo heritage. The US Indo community welcomes all who are interested in Indo history and offers a community to anyone who has roots in the Dutch East Indies.

#### *Indo-at-heart: A cultural consideration*

A different angle of consideration has been emerging regarding the non-mixed individuals who associated with the Indos. In the Dutch East Indies, it was not uncommon for fully Dutch (or other European descent) and fully Chinese to associate and socialize with Indos. This appears to have been a form of cultural appreciation which existed before there was even a need to document it. It was simply felt on the emotional level and validated through friendships, working relationships, and marriages. Through anecdotal references, the use of the word *Indo* was occasionally applied (possibly in isolated instances) to individuals who were purely of European descent but who *culturally* identified with the Indos and felt deeply connected because their birthplace was the Dutch East Indies. This was a rare occurrence but nevertheless, one that occasionally happened. More often however, the word *totok* was and is used to describe these people. Specifically then, a *totok* is an individual exclusively of European ancestry, or in many cases, of Chinese ancestry. Many *Totoks* considered themselves to *be* people of the Dutch East Indies (Netherlands Indies). They possessed a love and devotion to the nation, whether it be known as the Dutch East Indies, or Indonesia. They typically integrated themselves into Indo society without distinction and usually without discrimination regarding their skin colour or other racial characteristics.

While many Indos disagree with the use of the term Indo being applied to those who were of purely European descent, the discussion existed in



social circles and sometimes turned into heated arguments. The *totoks* can be panoplied under the term *Indische Nederlander* which is seen in the Netherlands as well as in the US. While this is the correct terminology, it does not convey the deep emotional connection felt by many *totoks* who were often parents of Indo children. The semantics create a distinction between *totoks* and Indos, while the heart creates the deep longing and connection to family and friends in the Dutch East Indies. Perhaps the phrase Indo-at-heart has room to exist in this discussion. Through personal communications separated by forty years, two distinct anecdotal examples surfaced.

Anecdotal example 1: Nanny B. identified as a *totok* of European heritage. The Dutch East Indies was her home as it had been for multiple generations of her ancestors. She married an Indo man and had four Indo children with him. Her heart belonged to the Dutch East Indies and she was culturally an Indo. In the US, during the 1970s a neighbour who was Indo would regularly tell her that based on how she spoke and other cultural practices she was truly an Indo.

Anecdotal example 2: In the Netherlands, in 2016, a museum curator (René) described his upbringing in the Dutch East Indies. He was a *totok* who was abandoned by his family of origin and adopted by an Indo family. He described his heart as that of an Indo. Culturally, he was an Indo.

Much of the scholarly work which has been conducted on the Indo diaspora attempts to create clear distinctions between the peoples. While this is necessary to create quantifiable data and measure the effects of social stratification, it misses the grey areas of overlap and ignores emotional and cultural connections which were meaningful to thousands of people. This area of focus has room to be studied and is not yet conclusive.

### *Use of the word Indo*

Most Indos are proud of the word *Indo* as their designation, but this has not always been the case. *Indo* was once considered an insult or a racial epithet. Its acceptance as a cohesive, comprehensive name for the European and Eurasian group of Dutch Indies people has taken decades and has been the topic of emotionally heated debate. The proud use of the term Indo was largely influenced by Tjalie Robinson, an Indo activist and one of the Netherlands' greatest writers (Rudy Kousbroek 2005).

Today, *Indo* is the accepted identifier for the people of Dutch East Indies heritage in the US. In a personal communication, Priscilla McMullen, President and Co-founder of The Indo Project Inc. very eloquently explained this point:

We, Indos, are a displaced, fractured people and this is due partly because of our Diaspora as well as the way we describe ourselves [...] Indischen; Dutch Indonesian; Dutch, etc. As to using the word "Indo", a word only has a negative connotation if one internalizes and then projects it in that way. It is mostly the older generations that think that way. If one is proud to be called an Indo, then others will perceive it that way. The Indo Project chose to use "Indo" as it stands

for a shortened form of Indo-European, as a way to be inclusive rather than exclusive because there are many among us who have other European bloodlines mixed in with Indonesian. We can only obtain formal recognition and respect from others if we demand it and take pride in who we are. By calling ourselves Indos we stop confusing the general public and ensure that they remember the name. It is called “branding”. As to what our children, grandchildren or any offspring should call themselves [...] take a cue from the other ethnicities in the USA. There are many generations of Italian-Americans, Irish-Americans, Armenian-Americans, Greek-Americans, etc. and no one gets them confused as to where their roots are. (McMullen 2012).

Creating ideal terminology to refer to the Indo identity has been a challenging and heavily debated subject within the Indo community. Layers of emotional trauma have fueled the debate. Existing in between the Dutch culture and the Indonesian culture has left the Indos feeling fractured. It was hard to feel as though they belonged. A deeply engrained human need, driven by evolution, is to belong. A sense of belonging allows human beings to feel community and above all, the ability to feel safe.

### *Becoming Americans*

In a way, the feeling of not belonging is part of what allowed the first generation (who experienced life in the Dutch East Indies prior to World War II) the ability to move on from the Netherlands and seek to assimilate or adopt the customs of their new homeland. Many migrated to the US and assimilated efficiently. Smaller numbers migrated to Australia, other parts of Europe, South America, and parts of Asia. For those who arrived in the US, the desire to be accepted was deeply felt. Having carried layers of pain and trauma from all the warring, chaos, and intrinsic feelings of inadequacy simply based on their generally mixed heritage, the first generation of Indos pushed to achieve a new identity for themselves; they were Americans.

As the second generation grew up in the US, they began to wonder about their heritage. They would ask where they came from and who they were. Terri S. recounted a primary school project, which required that she described her family’s heritage. She realized she did not know and went to ask her father and elder sister. They described themselves as Eurasian. Terri reported not learning the term Indo until many years later. She also emphasized that her father encouraged his children to assimilate. Many second-generation Indos living in the US, identify transnationally as Dutch, both Dutch and Indonesian, or Indonesian. In the Netherlands, the word *Indisch* was understood as having roots in the Dutch East Indies, but in the US it was not. In trying to explain one’s heritage to a person unfamiliar with Indo history, it was often easiest<sup>9</sup> to just explain that they were Dutch and Indonesian. Some went on to identify as Indonesian given that the majority of foods which are prepared in most Indo households are either Indonesian dishes or inspired by Indonesian flavors;

<sup>9</sup> This speaks to the lack of awareness and understanding of migration to the United States in general and of the Indo diaspora in particular in American education.



these dishes are often mixed with Dutch foods for a fusion of flavour which is uniquely Indo. Some Indos born in Indonesia post-sovereignty retained the Indonesian ethnic designation which was a simplified way of explaining where they were from. Other Indos from the second generation went on to identify exclusively as Dutch because that was their nationality at birth. As recounted by Jim (pseudonym): "I have a good chuckle when I tell people that I am Dutch. They expect to see a tall, blond, blue-eyed man, and instead they look confused by my shorter stature as they try to place my ethnically-mixed features".

At present, the third-generation residing in the US is heavily mixed, in that they often have one parent who is Indo and one parent who is either American or of another ethnic or cultural background. They are still claimed and celebrated by the Indo community. They are considered to be the most precious and most intended results of their grandparents' efforts in survival.

Upon learning about their heritage, members of the third generation often attempt to honour their Indo roots and bridge any gaps they might find left over by residual generational trauma. Many have embraced both Dutch and Indonesian cultures as elements of their unique identity. While previous generations often carried the pain and trauma of war, feeling betrayed in a variety of ways, and not feeling accepted by either the Dutch or Indonesians, their children have gone on to have varying amounts of curiosity about themselves. Some have become very involved in cultural preservation. They recognize the necessity of recording their grandparents' experiences and acknowledge that, if we do not learn from history, we are doomed to repeat it. Other members of the third generation are far less involved. There is a general lack of understanding about their family history because of previous generations making a point to move on and not dwell in the past. Often, Indo history was simply not conveyed within households. This might be both a blessing and a curse because it protects descendants from painful knowledge but it also disconnects them from their ancestors' past. Those who are unaware of Indo history appear to find it easier to embrace the individual cultural components of their Dutch and Indonesian roots. Simultaneously, others find it challenging to ignore the atrocities committed by both the Dutch and Indonesians. This leads to salient questions about forgiveness, righting wrongs, and moving on which is addressed in *Elements of healing*, below.

### *Elements of healing*

Similar to the Indos, other ethnic or cultural groups have had tremendous challenges to their survival. They often tend to have homogeneous ethnic compositions. In migration or in the establishment of enclaves, they tend to be reasonably cloistered in proximity, and this appears to assist in maintaining their ethnic or cultural identity. These factors by comparison ease a lot of the emotional distress which can potentially come from population migration. Transgenerational trauma can be seen in populations which have experienced colonization, slavery, and displacement trauma. Many cultures

and communities such as; First Nations and native American communities, African Americans, Australian Aborigines, and New Zealand Maori, as well as societies exposed to genocide, ethnic cleansing or war; such as Cambodians, Armenians, Rwandans, Palestinians, and communities in the former Yugoslavia (R. Yehuda and A. Lehrner 2018: 244) are all examples of marginalized groups who have experienced transgenerational trauma. Many marginalized groups have mobilized and collected together to fight for justice on behalf of their people. The global Jewish population post-WWII is an example of people who pushed to have their voices heard and for their history never to be forgotten.

In the case of the Indos, it appears that the first generation attempted to distance themselves from painful memories of war, loss of life, and a lost homeland. They were not trying to forget as much as they were just trying to survive and forge a new life for themselves and their children in the US. Their focus was on the future and creating security. As recounted by Terri S. who discussed her father's experiences, "What can be done except to move on? The past is in the past".

The Indos, just like other people, have seen through their own individual experiences that people change, they learn from their errors, they have room to grow, and they can develop into improved versions of themselves. Can this be true of nations? This is a question which can be answered as time moves forward and as the world has an opportunity to witness behaviour. For some Indos, forgiveness towards the Dutch and/or Indonesians has been possible. This issue varies widely between individuals. Depending on how a person might feel and how their lives were impacted, forgiveness is not always possible because the traumas are just too deep. Some feel that vindication and righting of wrongs can help them to heal, while others find any gestures hollow and insincere. Efforts to receive reparations from the Dutch Government have been made. Some Indos have received a little compensation, recognition, or back-pay for military or civil service. However, many of the Indo population who deserved compensation have already died. Small numbers of families continue to fight on behalf of their deceased parents and grandparents to gain recognition for their loved ones, recover land, possessions, and receive back-pay.

Nancy Leunissen is an example of a daughter who spent over twenty years looking for evidence that her father, Charles Leunissen, was a prisoner-of-war (POW) during WWII. He was never formally recognized for his time as a POW. He was a member of the Dutch Navy, and held in a Japanese labour camp where he suffered from starvation and horrific torture, including having all his teeth pulled out with pliers. Nancy was featured on the Channel 8 News in Tampa, Florida, US, in March 2019, as she discussed finding lost footage of her father. Her father never shared the suffering that he endured. Nancy said "He always looked at the positive. He never looked at the negative. That's what he told us, even when times were bad" (John Rogers 2019). Nancy was successful in preserving her father's memory. She was able to arrange for Dutch officials to present him with a medal posthumously. Nancy continues her efforts to gain the same recognition for her now deceased uncle and grandfather (who died as a POW).

As recounted by Conny while describing the Japanese occupation: "They were horrible indeed. There were also Japanese soldiers that roamed the country freely and interacted with the population. One account being how they helped my mother when her baby son (my brother Peter) died suddenly at just two months old; they called it crib death. With my father being in camp, they (Japanese soldiers) stepped up helping my mother. They summoned her doctor and made sure my mother had all the help she needed. They also helped with the burial. My mother was given a month of rest and her *baboes* (nannies) were allowed to come back to help her. They were very helpful, my mother said. This only gave us the affirmation that even the enemy was human [...] that this war also disrupted their normal lives. My mother was very grateful. The Japanese prison camp was hell as my father witnessed, but outside those walls most Japanese had a heart".

Forgiveness is considered (by many) to be a gift we offer to ourselves. It is not necessarily for the other person's benefit. It is an effort to release the burden of pain which we carry so that we can find our strength to continue onward. Simultaneously, some Indos have found that compassion for humanity is more healing than the idea of forgiveness, and this is what they gravitate towards. Other Indos practice subtle acknowledgment of the past, and simply want to keep moving forward with their focus on the present and future. How people have coped with these traumas has been just as varied and unique as the individual traumas themselves. There are many scars which carry over in the form of transgenerational trauma.

#### TRAUMAS BEING SET INTO MOTION

After the collapse of the Dutch East Indies, the Netherlands allowed nearly 350,000 displaced Indos to repatriate home to their fatherland. Dutch compatriots were already citizens of the Netherlands. The Indos born in the Dutch East Indies were considered repatriates and were allowed into the Netherlands if they could provide valid documentation of citizenship and sometimes family lineage. Having endured World War II, the Indonesian War of Independence, and its initial deadly *Bersiap* period, Indos were emotionally, physically, and financially depleted. Suffering one geopolitical crisis after another, the Indos were in no position to stop and rest. Some chose to leave while others endured and tried to re-establish normalcy in their lives by staying in Indonesia as it was gaining sovereignty. As time moved forward, many Indos found that they had to leave newly independent Indonesia and find safety elsewhere for the sake of their families.

The Institute for Social Research of the Dutch People (*Instituut voor Sociaal Onderzoek van het Nederlandse Volk*), the Sociological Institute of the Dutch Reformed Church (*Sociologisch Instituut Van de Nederlands Hervormde Kerk*), and the Catholic Socially Ecclesiastical Institute (*Katholiek Sociaal Kerkelijk Instituut*) described Indo migration from Indonesia to the Netherlands (J.H. Kraak and P. Ploeger 1956). This research was later supported with the description of four distinct waves of Indo migration, from Indonesia to the Netherlands (J. Ellemers

and R.E.F. Vaillant 1985). These different waves of migration likely contributed to the prevention of emotional processing for the Indo people. When survival is the main focus and top priority, people do not have a chance to heal from what they have endured.

A harrowing reality included a smaller population of Indos who were unable to provide proper documentation because of lost paperwork. During this time, Indonesian militants and agitators behaved chaotically as a response to the Japanese capitulation and emboldened by the Independence movement. The militants (sometimes referred to as freedom-fighters) and agitators would incite mobs as they rallied around the radical Indonesian military leader, Sutomo, in 1945. This created a destructive climate which complicated life even more and compromised safety for the Indos. Sutomo, incited ethnic cleansing through his nationally broadcast speeches<sup>10</sup> which specifically targeted Indos and Ambonese<sup>11</sup> civilians: "Torture them to death, eradicate those bloodhounds of colonialism root and branch. [...] The immortal spirits of your ancestors demand of you: revenge, bloody revenge!" (Hans Meijer 2004). Children<sup>12</sup> in orphanages were left behind if they could not prove their citizenship of the Netherlands. Those who remained in Indonesia, if they survived, tried to acculturate into the Indonesian population while enduring discrimination and danger.

When the repatriated Indos arrived in the Netherlands, their massive influx challenged the resources available to the Dutch population. This created layers of social tension and scarcity of resource which were felt throughout a nation which was barely beginning to recover from World War II. Efforts to integrate the Indos into Dutch society were challenging for some, while helpful to others.

The effects of this transition were noticeable, which is what was detected by the Institute for Social Research of the Dutch People, the Sociological Institute of the Dutch Reformed Church, and the Catholic Socially Ecclesiastical Institute. From their studies, they documented that the migration from Indonesia to the Netherlands took place in four distinct waves.

The topic of migration was discussed in depth at the "Migrant (R) e-Collections" seminar held at the Lorentz Foundation Center, Leiden University, Netherlands, in August 2016. This week-long event brought together leading field researchers for what was not only a seminar but also a workshop and think-tank. The research scientists came from Australia, Brazil, the United Kingdom, the US<sup>13</sup>, and different parts of the Netherlands. It was determined that migration is prompted by an impetus.

In the case of the Indos, the impetus of these waves fell into four different categories and had distinct characteristics which would later surface as different types of traumas in the population. The traumatic experiences were varied and unique to each individual within the Indo population but connected

<sup>10</sup> Surabaya, 24-11-1945.

<sup>11</sup> The Ambonese people were from Ambon and its adjacent islands in the Maluku Archipelago.

<sup>12</sup> Today, they are elderly and in dire need of medical care and medicine. (Personal communication, Priscilla McMullen, Co-founder of The Indo Project, 2012)

<sup>13</sup> I was an invited member of the seminar and demonstrated Neurofeedback Therapy as a tool in evaluating trauma in displaced peoples prompted by forced migration.

overall to what they collectively endured.

#### *Wave 1: 1945-1950*

The first wave of migration to the Netherlands primarily consisted of *totoks* as well as some Indo prisoners of war, plus individuals who were escaping the chaos which ensued while Indonesia was establishing its independence. Many from this group sought medical treatment for the physical injuries, and trauma inflicted upon them during the war. Uncertain of the changes to come, some people from this group returned to Indonesia as it was becoming a sovereign nation in an attempt to resume their positions and lives. Many who were military (KNIL) were regrouped back into the army. Those who stayed in the Netherlands were typically widows, orphans, and individuals of retirement age. There were some who decided not to return because the Netherlands was seen as a safer place (Stern 2014: 20). Those who endured this experience did not have enough information available to them about where they would be safest. It was a challenge knowing who to trust. The chaos of all they endured left them haunted and wanting to be away from where their trauma happened.

#### *Wave 2: 1949-1951*

The second wave of migration overlapped with the first wave. It consisted of Dutch government civil servants. This group included administrators, ex-military personnel, and their families. Apart from being targeted by angry radicals, they no longer had employment with the state in the wake of the transfer of sovereignty in 1949 (Stern 2014: 20) signifying the end of colonialism in the largest part of the archipelago. By default, this group no longer had civil employment available to them. They had to leave Indonesia, and typically did not have the intention of returning.

#### *Wave 3: 1952-1957*

The third wave consisted of a group who left because they were repelled by a hostile retaliatory environment created by official repression resulting from Dutch colonial claims to New Guinea (Stern 2014: 20). Specifically, the Dutch retained Netherlands New Guinea citing that the people were ethnically different (Melanesian) from the Indonesians. At this time Dutch citizens were harassed (sometimes violently) by the Indonesian government. Since these individuals had never been to the Netherlands, they were hesitant to flee after the transfer of sovereignty. These individuals experienced first-hand the changes which occurred in the beginnings of Indonesia as an independent nation. Though reluctant at first to leave, concerns about their safety as well as financial hardships combined to force their migration (Stern 2014: 20). In 1957, President Sukarno nationalized the remaining Dutch companies and expelled thousands of remaining Dutch citizens who were ethnically Indo. This group experienced loss of careers, familial connections, friendships, possessions, and



more. Their property was sometimes confiscated by the government as well.

#### *Wave 4: 1957-1964 and beyond*

The fourth and final wave was a group who had experienced life in independent Indonesia, and were typically Indonesian citizens at this point. Children attending school during this time were vehemently discouraged from speaking Dutch in any classroom settings. Indonesia was fully its own nation at this time. This group encountered multiple challenges which ultimately forced them to leave. They sought entrance to the Netherlands with the intention of gaining citizenship. Many from this migration group had previously been Dutch citizens and were interested in regaining their citizenship. This group removed themselves from Indonesia gradually because of the intense social and civil unrest. They found it challenging to absorb into the new Indonesian society because their families had left, there was hostility towards them and job opportunities were disappearing. By 1959, the policy of economic nationalism had banned commercial activities by foreign nationals in rural areas. The expulsion also extended to the ethnically Chinese rural population, who were either relocated to urban areas or chose to return to China. This was a deliberate effort by President Sukarno to return wealth and economic autonomy to the free nation of Indonesia; however, the effects on the Indo and Chinese populations who were forced to emigrate, were economically and emotionally devastating, and led to countless traumatic stories of having to begin again.

This wave is said to have ended in 1964 when the Dutch government officially closed the repatriation program (Stern 2014: 21). However, scholars have found that migration continued to a lesser extent thereafter. Throughout this time religious factors played an important role. The predominant religion placed pressure on those who did not subscribe to its beliefs. This contributed to motivation to leave. Today, Indonesia is known as the largest Islamic country in the world.

#### AFTER REPATRIATION

In the Netherlands, during the 1950s and 1960s, it was anticipated that assimilation of the Indos would occur easily. The repatriates were already recognized as Dutch citizens. This allowed the Dutch government to feel confident in expecting a rapid assimilation process. However, social differences such as appearance, accents, and customs were sufficiently different. This encouraged racism and prejudices which caused assimilation to feel nearly impossible for many. The government scattered an estimated 350,000 Indos throughout the country as a preventative measure against the formation of "ghettos"; the Dutch believed that Indos living in close proximity to each other would hinder their own progress in assimilating (Stern 2014: 25).

Social frustrations began to emerge. It was not acknowledged that the Indos had been educated in Dutch, attended Dutch-run schools, and often knew more about the history of the Netherlands than many of their Holland-



born peers (Contractpensions, 2009). The Indo population experienced racism. Because of their different physical appearances, they were considered to be easy targets. Their darker skin, darker hair, almond shaped and/or darker eyes, often juxtaposed with European features were easy to distinguish from the typical Dutch appearance – tall, light-eyed, with fair-skin. Indo children were often taunted by others using racial slurs like “*aap*”, Dutch for monkey, to describe them. Adult Indos found that in the workforce, they were perceived as less competent than the Dutch population. Indos who had earned degrees in the Dutch East Indies or had experience in their field of work or study were still looked down upon and often were not given career opportunities for which they were qualified (Stern 2014: 25).

In 2012, I developed a survey for my graduate thesis work, entitled “The 2012 Indo Survey”. This survey also functioned as census data collection for the Indo community which was promoted and supported by The Indo Project. This data collection also allowed me to develop the first Indo population distributions maps of the twenty-first century.

In the survey findings, an important theme became noticeable. While a small number of Indos indicated that they found the Dutch population to be very accepting of them during their transitional experience into life in the Netherlands, a large number felt the exact opposite. Many described not feeling accepted by their fellow countrymen. This was the impetus to a second migration. Tens of thousands of Indos left the Netherlands.

#### SECOND MIGRATION OF INDOS OUT OF THE NETHERLANDS

Some of the repatriates decided not to stay in the Netherlands and migrated globally in search of more opportunities for themselves and their families. Many migrated to warmer climates such as the US and Australia. The years of most active migration by Indos to the US spanned the period from the late 1950s through early 1960s (Stern 2014: 25). During these years an estimated 60,000 immigrants arrived in America, at least half of whom took up residence in Southern California (D.H. Hoffmeyer 1971). Roughly seventeen percent of the Netherlands’ Indo population migrated to the US during this time.

#### EMERGENCE OF TRANSGENERATIONAL TRAUMA

As described in the prologue, two surveys which were developed to gather data from the US Indo population are being referenced in this article. Survey 1, entitled “The 2012 Indo Survey”, was developed under the auspices of The Indo Project and formed the bulk of census and geographical mapping data which is now used by The Indo Project and the California-based Embassy of the Netherlands (which has used my maps uncredited in showing the Indo population distribution). Survey 2, entitled “Indo Generational Trauma Survey”, gathered data in 2021 and was developed in an effort to understand more fully the experiences of trauma which have been passed down generationally. These surveys led to the observation of transgenerational trauma existing within the US Indo population.

Originally, this work gave the impression that the Indos are one of the most successful immigrant groups ever to assimilate within our country. The US is unique in that it offers immigrants the opportunity not only to acculturate, but truly to become a part of the nation through assimilation. After appreciating how hard the Indos worked to become highly productive members of US society, the cost became clearer. There was loss of historical knowledge because trauma was preventing it from being passed down. There was progressive loss of culture because it was supplanted by American culture. There was also a loss of language, with many young Indo children being instructed not to speak Dutch so that they could focus on learning English. Within a generation, Indos no longer had ease of access to Dutch literature and Dutch printed information which described the Indo experience because they could not understand it. Without any understanding of the language and the history, most were left in the darkness of confusion, which fostered progressively less interest. Simultaneously, it created a lot of room for emotional and reactive trauma to be passed down without any cognitive context.

Survey 1 received numerous reports from Indos who are members of the second generation, describing peculiar behaviour which they witnessed in their parents. The second generation is defined by The Indo Project as Indos who were born during or after World War II, who left Indonesia as babies or children; or who were born in the Netherlands sometime after their parents arrived as repatriates. Their parents, who experienced the Indonesian War of Independence and the Bersiap period first-hand, were vague about the details of their lives prior to immigrating to the US. It is recognized that the first generation of Indos found imperative to carve out a life for themselves and their families while simultaneously adjusting to their new homeland. However, this often meant suppressing memories of their life in the Dutch East Indies (or Indonesia). This phenomenon has been researched extensively by Dr Harald Merckelbach. Survey 2 which focused exclusively on effects and symptoms of transgenerational trauma in the Indo population, supports the work which Merckelbach conducted twenty years ago.

Harald Merckelbach, Theo Dekkers, and Ineke Wessel (2002) observed that of the twenty-five patients studied, all of whom experienced the Indonesian war atrocities as adolescents, all were less able to recall autobiographical information. His finding indicates that, while many of the first generation does not like to dwell on the past, there is a significant population who simply cannot recall details because of the level of trauma they sustained (Stern 2014: 28). From the psychotherapy perspective, this was likely dissociation<sup>14</sup> which protected the individual from processing devastating memories. Dissociation is a natural defence mechanism in which the human brain engages in when the experiences

<sup>14</sup> The American Psychiatric Association describes “dissociation” as having problems with memory, identity, emotion, perception, behaviour, and sense of self. Dissociative symptoms can potentially disrupt every area of mental functioning. Linked to trauma, dissociation is the experience of detachment or feeling as if one is outside one’s body, or having loss of memory, or amnesia.

exceed the emotional capacity and preparedness that the person has to process the information.

It was reported that many individuals would consciously and subconsciously avoid situations which might dredge up bad memories. These findings align with the written responses found in Survey 1. Many survey participants noted family members suffering from varied levels of forgetfulness and inability to recall certain events during their time in Japanese internment camps. Other survey participants volunteered information about their daily lives in which they described feeling anxious, nervous or fearful of certain experiences, even those which are merely distantly related to events they experienced during warring and the Bersiap period (Stern 2014: 28). Some participants explained that they have met with psychologists because they feared that they were “going crazy” as they relived the traumatic events through nightmares. Their diagnosis was Post Traumatic Stress Disorder (PTSD) which is extremely common among those who experience war and traumatic upheavals. The concept of children enduring the aftermath of their parents’ trauma is a familiar experience for the second-generation Indos. They are experiencing the effects of transgenerational trauma. Theresa Stichick Betancourt and Kashif Tanveer Khan (2008) describe children’s resilience after a traumatic event and explains that further research should focus on how war-affected children cope. Children are often referred to as resilient because they have a great capacity for neuroplasticity and healing. However, what appears to be resilience is often a freeze or fawning response that the child has learned as a mode of survival. If they are quiet or well-behaved, they are regarded more favourably than their louder and more dysregulated counterparts. A “resilient” child often fights depression and anxiety later in life. Betancourt and Khan also explain that benefit can come from finding social support in peer and extended social networks (Stern 2014: 28).

Currently, Indo groups on social media, such as Facebook, are providing some of this much needed emotional support. This support typically focuses on venting emotional pain. Having a place to share feelings and thoughts without having to explain the history and culture allows people to feel more supported and connected. The sense of not being alone in this has been very cathartic. It also promotes emotional processing. In one discussion between friends who connected on social media:

Nancy discussed the Japanese raiding her grandparents’ home before WWII: “They took over the house, took all the men; my grandfather, my papa, and my beloved uncle were all taken prisoner. They put my grandmother and great-grandmother in the maid’s quarters”.

Conny commiserated and shared her story: “They plundered my grandmother’s and my parents’ home. My mother hid her pictures and a few other valuables. My other grandmother left Indonesia and moved to Switzerland. The stories I was told were horrible. The Japanese were working with the Americans to free Indonesia from Holland. My father was in the Japanese prison camp for two years. He only survived by eating rats and other critters. The Japanese gave the prisoners one cup of rice a day. My father was a government employee. Oh, I’ve got stories [...]”.

Tamara observed the sharing of these stories which promoted deep emotional processing within her. She reflected on her own experiences growing up in the US with her Indo father. This conversation allowed an incredibly healing realization to happen for her. She believed all her life that her father didn't like her. She explained that during her childhood, "he would yell at me all the time. He didn't want me to do the wrong things. Now I see that this was all fear driven. He didn't want me to be hurt. He was afraid of something happening to me. What he went through in the camps as a little boy was so bad". Tamara has described multiple examples of her childhood where she would be joking or playing. It triggered fear instead of humour in her father which is very common in trauma survivors. Tamara's father passed many years ago, but this provided her heart with some peace. It wasn't that her father did not like her, he was hypervigilant from all of his accumulated trauma, and he was just trying to keep her safe. Trying to keep her safe often came out in ways which sounded more reactive than loving. But it was only because of love (and fear) he was reacting as intensely as he did.

These experiences recounted by Nancy, Conny, and Tamara, were shared with visitors who came to The Indo Project booth during the 32nd Annual Holland Festival, held on 4 September, 2022, at Gemmrig Park in Long Beach, California. This invited a discussion among multiple visitors who are of the second generation. They shared memories of their parents after their families immigrated to the US. Family arguments and fights would get started over Japanese products. They described how their parents would not purchase (or ride as a passenger) in popular Japanese vehicles. They would gossip or become angry if a family member purchased a Japanese car. They would not consume Japanese foods, such as sushi, which began to grow in popularity during the 1960s and has continued to be a popular cuisine among Americans. Watching these family feuds unfold left many members of the second- and third-generation sad, confused, or exasperated. The individuals sharing these memories came to the understanding that it was trauma driving these reactions in the first generation. These types of reactions were not universal, but they were common.

#### EXPRESSIONS OF TRANSGENERATIONAL TRAUMA

At present, the US Indo population consists of a small, remaining portion of first-generation Indos. To review, first-generation Indos, as defined by The Indo Project, consist of Indos who were born in the former Dutch East Indies before WWII and who have family roots going back several generations. This group will be referred to as P1, for parental 1, which is the nomenclature used in biology to track and distinguish different generations from one another. (See Table 1). The parental generation was the group who have endured, first-hand, the bulk of the historical upheavals and war traumas. This group was preponderantly adults.

The second-generation Indos were born after the outbreak of World War II, and experienced the transition of repatriation to the Netherlands, or

emigration out of the Netherlands to other countries. The second-generation Indo population living in the US typically experienced both repatriation to the Netherlands and emigration out to the United States. This group will be referred to as F1 for filial 1. The first filial generation experienced trauma and upheaval during their childhood. They grew up experiencing second-hand trauma from their parents or detachment and lack of information about the events that their families endured.

The third-generation Indos in the US, generally have one (or both) parents (and grandparents) who belong to the first and second generations. This group will be referred to as F2 for filial 2. The second filial generation has reported the experience of disconnected symptoms of trauma which lack context. There have been subtle effects which highlight the peculiar impacts of transgenerational trauma such as propensities towards anxiety and depression.

The fourth-generation Indos in the US, have great-grandparents and grandparents who belong to the first- and second-generation. This group will be referred to as F3 (filial 3). The third filial generation is actively being studied. Their input is not yet conclusive.

P1 (parental 1)	First generation	born in the former Dutch East Indies before WWII and who have family roots going back several generations
F1 (filial 1)	Second generation	born after the outbreak of World War II, and experienced the transition of repatriation to the Netherlands, or emigration out of the Netherlands to other countries
F2 (filial 2)	Third generation	generally have one (or both) parents (and grandparents) who belong to the first and second generations
F3 (filial 3)	Fourth generation	have grandparents and great grandparents who belong to the first and second generation

Table 1. Generations defined.

Currently, the second (F1) and third (F2) Indo generation members are well advanced into their adulthood. There has been an opportunity to witness and observe how they have coped and managed in their lives with this heavy historical past in their lineage. Many have come forward to report the interesting and peculiar effects of the transgenerational trauma which they have experienced.

Within the Indo community, personal and anecdotal experiences often include an acknowledgment of family members who seemed overly stressed and constantly worried. Issues of substance abuse, domestic violence, and constant emotional dysregulation<sup>15</sup> have plagued numerous Indo families. These pains are often hidden and sources of humiliation. Much of their

<sup>15</sup> Emotional Dysregulation is defined as the inability to regulate and organize emotions to produce an appropriate emotional response and subsequent return to baseline (E. Moehler, R. Brunner, and C. Sharp 2022).



suffering has been in silence and only visible to those closest to the situation. As described by the author of this article:

When I was a child in the early 90s, I would visit and stay with my Grandmother (*Oma*) who lived in Bell Gardens, California (US). She was very kindhearted but chronically tense. Looking back, I wish that her anxiety and symptoms of Post-Traumatic Stress Disorder (PTSD) could have been soothed and resolved. She was so jumpy, so pessimistic, and often sad. She spoke a little about “the camps” in the Dutch East Indies and how there was almost never any food to eat. She occasionally shared tragically small glimpses of what had happened to her, but it was never in any sequential order and there was no historical context; just faraway moments that appeared to have hints of dissociation. Bluntly, my dear *Oma* drove everybody in our family a little bit crazy. Her reactive behavior kept everyone tense. Her stress became our stress, and it was exhausting for everyone who encountered it. There was also this impotent rage that lingered from hearing about the horrors that she endured. This secondary trauma was frustrating. We felt helpless knowing that *Oma* had been through so much. All we could do was listen and offer her love. We had limits though [...] and sometimes members of the family found her to be too overwhelming or too hysterical to be around.

This excerpt showcases the surface level effect of transgenerational trauma which is the transmission of trauma from one generation to the next through social-environmental factors. Growing up in an environment in which a parent is chronically anxious, depressed, explosive, fearful, or otherwise maladjusted, will often create an atmosphere of dysregulation within the family unit. This type of dynamic can create complications in achieving a healthy attachment between parents and their children.

Human development is seen as a process of creating and maintaining attachments towards the primary attachment figure and other significant people (John Bowlby, David Scott May, and Marion Solomon 1989: 156). An unhealthy attachment style typically creates challenges for individuals as they develop and mature. Attachment theory, developed by John Bowlby, focuses on the evolutionary and ethological theory observed in relationships between humans. Attachment theory primarily holds the position that young children must develop a close relationship with their primary caregiver(s) in order to achieve normal social and emotional development. Bowlby felt that too little emphasis was placed on the environment and too much on the internal conflict which ultimately boiled down to constitutional differences (Bowlby, May, and Solomon 1989: 154). Therefore, within western society it is now encouraged to create a generally secure attachment for young children. This allows them to develop a balanced and well-adjusted sense of self, as well as the ability to build healthy relationships and connections with others, while being able to achieve independence. Challenges reported by the second generation (F1) included struggles with their sense of self and their place in



the world. Having experienced the effects of their parents' trauma and often tense behaviour, the second-generation hungered to establish themselves but simultaneously grappled with where they belonged.

Secure attachment ideally remains consistent and simultaneously open to change. This ability to be open to change is a critical component of a healthy neuroception of safety. The trauma experienced by the first-generation (P1) and second-generation (F1) appears to have experienced impacts in their neuroception. Many Indos experienced fear or frustration when confronted with more change, which they had to endure. Many were able to cope, but others found it challenging. Simultaneously, some felt less affected and found excitement in change.

In 2015 "M" described how his aunt would save everything just in case she needed it at a later time. He said "My *Tante* (aunt) always has a full refrigerator but some things have been in there forever! She says it's still good. She saves every plastic container or cookie tin. She's always prepared to welcome people and feed them. I think she's also prepared in the event that there is not enough food [...] She was almost starved to death".

Tom (pseudonym) described in 2012 "My *Opa* [grandfather] was in the Dutch army. He was a POW in Burma, captured by the Japanese. He ate rice every day and still loves to eat rice. I'm not sure how he could continue to like it so much after what happened. As kids he told us it was like a four year long summer camp. Only recently have we learned how horrific the experience really was".

Some examples of avoiding change include maintaining habits, not leaving a location once settled, keeping and storing items beyond what is practical, hoarding, and avoiding doing something differently. This was highlighted in the pessimistic rhetorical question "What for?" which was often uttered in Dutch by an Indo parent or grandparent who did not see the value in their offspring's current interest or idea.

Neuroception is the mechanism which allows the autonomic nervous system to discern between safety and danger. Through neuroception, your autonomic nervous system is either open to connection and the possibility of change or locked in a protective response and stuck in a survival story (Deb Dana and Stephen W. Porges 2020: 22). Difficult relationships lead to a disjointed or distorted model, with dissociated areas which remain frozen and out of awareness (Bowlby, May, and Solomon 1989: 156). Having unhealthy attachments early in childhood will often lead to challenges in coping through trauma later in life. Table 2 shares the four agreed upon attachment styles as stated by Harvard University (Attachment Styles 2022).

Secure	Secure attachment is typically exhibited by a comfort with building relationships or having independence. This is often considered a healthy attachment style.
Anxious/Preoccupied	Anxious attachment is typically exhibited by a dependence on relationships and other people. This is often considered an unhealthy attachment style.
Dismissive/Avoidant	Avoidant attachment is typically exhibited by a rejection of intimacy and independence, however, their independence is more to avoid dependence on others rather than feeling secure. This is often considered an unhealthy attachment style.
Fearful/Disorganized	Disorganized attachment is normally exhibited by a fear of intimacy and avoidance of relationship-building. This is often considered an unhealthy attachment style.

Table 2. Attachment styles.

Unhealthy attachment styles can occur when a caregiver is emotionally or physically unavailable. For those who have experienced unhealthy attachments, it creates challenges in coping with life and traumas. A person who did not receive care from an emotionally grounded and psychically present individual might experience signals from their autonomic nervous system which are not necessarily healthy for or appropriate to given situations. This can hinder their ability to distinguish danger from safety and vice-versa. These types of experiences will impact a person's neuroception and possibly further ingrain unhealthy reactions and expectations.

As recounted by Alice: "My dad was my everything. He was my hero. I had less time with him because he was busy working a lot to support our family. He was easy to upset and would become highly agitated very quickly. I didn't know how much trauma he had been through. He was very reactive but he loved me a lot. I became too tolerant of reactive people. I grew up and married a narcissistic man who was also very reactive. I've been going to therapy to untangle these issues".

During childhood, a person will learn to cope and adjust to the type of environment they are experiencing. Later in life, as they take these coping skills into new environments such as their schooling, employment, and romantic relationships, they might notice some inter-personal struggles.

In Survey 2, the data was gathered from a random sample of the Indo population. This sample varied between the ages of twenty-eight and eighty-two. This survey encompassed a group of individuals which spanned across the four different Indo generations. There were high reports of expression of trauma (see Table 3).

Expressions of trauma	Percent of survey Participants who have experienced this expression
Overthinking	59%
Difficulty in fully trusting people	59%
Frequent anxiety	57%
Being overly hard on themselves	57%
Having the need to prove themselves	54%
Always feeling responsible for the actions of others	51%
Felt neglected growing up	51%
Needing to control things in an effort to feel safer	49%
Needing external validation from others	46%
Fear of abandonment	46%

Table 3. Expressions of trauma.

The expressions of trauma and childhood dysregulation, listed in Table 3, were the ten highest scoring symptoms out of fifty potential answers. This list was developed using input from the Indo survey participants, as well as criteria from the ACE scoring system. In the US, the ACE scoring system measures the Adverse Childhood Experiences which an individual has had. It is a method of measuring the amount of toxic stress a person endured as a child and assesses the potential for health ailments in adulthood (Stop Abuse Campaign 2022). The higher the ACE score, the higher the chance a person has of suffering from a range of psychological and medical problems like chronic depression, cancer, or coronary heart disease (Stop Abuse Campaign 2022). In comparing the data from Survey 2, with the ACE scoring system and with measurements of anxiety in the general US population (J. Elflein 2022), the Indo survey participants displayed approximately double the amount of dysregulation found in the general US population. More research is required to compare and contrast adequately the mental wellness of the US Indo population with the general US population.

Overthinking, difficulties in trusting people, frequent anxiety, being hard on oneself, and needing to control circumstances to feel safer all speak of challenges in the individual's neuroception. Having the need to prove oneself, feeling responsible for others, feeling neglected through childhood, requiring external validation, and having a fear of abandonment, all correlate to early attachment challenges. Half the survey population identified with feeling the effects of their parents' trauma and noticing that these effects might have impacted them in various ways. The survey results show a distinct pattern of roughly half the population noticing carryovers of trauma and familial stressors which go beyond what is anecdotally considered to be "normal" in childhood development. When a person recognizes their own sustained traumas, they might be well-

adjusted enough to process their traumas in a healthy way and release them productively. This promotes a person to experience a fulfilling and well-adjusted life which does not feel haunted by their past experiences. When a person does not have the ability, support, or chance to process their traumas, they tend to retain a neuroception of danger and live within their survival story. This “survival story” is the narrative that they subconsciously see for themselves, and it might discolour how they view the world around them. Common narratives usually include absolutes such as “always” and “never”. These absolute terms leave almost no room for emotional flexibility and trap the individual into a false frame of mind which convinces them that what they are experiencing emotionally is all that they ever will experience in general. This supports devastating thought processes and our natural inclination towards the human negativity-bias. These survival stories came into existence because of what the individual endured. Once the danger is over however, the individual continues to remain in the emotional momentum of victimhood. These internal survival stories are not necessarily occurring within a conscious state of being. Rather, these survival stories are visible in reactions, harsh words, dreams, and strained or challenged social interactions. The narratives often reflect internal concepts similar to the following:

- I am always the victim
- Everything bad happens to me
- Nothing ever goes right
- I never deserve these bad things
- I am not worthy
- I am guilty
- I am bad

Survivors of trauma may live in their survival story. It might be a reflection of the sheer devastation which their trauma brought into their lives. It can be further hindered by an upbringing which had an unhealthy attachment style. Sometimes, the magnitude of this emotional pain is a derivative of the sense that one is “bad”. The sense that one is intrinsically “bad” is a lingering concept from childhood which never adjusted to adulthood. In childhood, children are not yet equipped with the tools to understand that problems around them are not necessarily their fault. They will internalize these issues and develop a deep belief that they are intrinsically “bad”. They are not bad. They simply need to be taught that sometimes bad things happen to good people and it is not because they deserve it. This is where healthy attachments would inform the child that they are indeed alright and not the cause of the problems which surround them. Without this opportunity to be informed, a person can grow up to suffer from constant overthinking, experience difficulties in trusting others, frequent bouts of anxiety, being overly hard on themselves, having the need to prove themselves, feeling responsible for the actions of others, feeling neglected, needing to control their environment to feel safer, needing external validation, and having deep fears of abandonment.

Anecdotal story as recounted by Toby (pseudonym): My brother John (pseudonym) always had a chip on his shoulder. He was born in 1951 and enjoyed living in Indonesia. He was very spoiled and well taken care of. He was the first born and a male child which allowed him to experience tremendous praise for just existing. He had a *babu* (nanny) and a lot of toys. After our family fled in 1958 because of ethnic cleansing, John was never the same. We arrived in the Netherlands where we stayed for a handful of years. The weather was harsh as were the children. John was then the eldest of four children and very unruly. When we immigrated to the US, his behaviour became worse. He would beat up on everyone in the family except my dad and older sister. He would strangle my mother and behaved as though he hated her. His abuse repeatedly left me beaten to a pulp. He would beat me especially hard when I tried to protect my baby brother who was in a wheelchair. Eventually he joined the military which we thought would straighten him out. It didn't – he became a deserter during the Vietnam War and the FBI ransacked our home looking for him. He went on to have two failed marriages and as far as I know his third one is still going. He was abusive to his first two wives. Maybe he learned his lesson with the third. All of us adult children are now estranged and have not spoken since our parents died.

A caregiver who is moving through trauma or stuck in their survival story, is likely to be challenged by their emotional availability for their children. As seen in the anecdotal story above, John likely experienced too much change, too quickly, and coped through aggression. His caregivers were preoccupied with the challenges of surviving. Many Indos across the generations shared this experience in varying forms. Some have had harsh experiences that left them traumatized by their upbringing and others had less severe experiences which have taught them how to live life differently from their parents.

Another method which conveys transgenerational trauma to subsequent generations is through the phenomenon termed secondary trauma. Secondary trauma is a traumatizing vehicle which conveys trauma through the form of traumatic stories and retellings. These stories will haunt the listener and /or leave them filled with impotent rage. Spouses and children will find themselves pained by the knowledge that their loved one endured so much. It can create an angry mobilization response spurred on by the urge to get up and do something about it, often with nowhere to funnel that energy productively. The children and spouses feel helpless about a situation which happened to their loved one in the past, and it feels terrible for them.

In speaking with Louise B., a dear friend and past volunteer for The Indo Project, she described how transgenerational trauma in her family came in the form of sadness about her mother's experiences. She described a story about using butter sparingly. When she was a little girl, she would watch her mother spread butter on a piece of toast. Resources were scarce. Her mother would coat the entire piece of toast in the thinnest layer. Decades later, Louise continued this practice using the same butter knife her mother used when she was a child. Then one day, the realization occurred to her "You can have more butter, girl!". For her entire life up to this point, she had been reenacting the

concept of scarcity. While it was “just” regarding simple butter, the emotional depth of where this practice came from was meaningful and associated with trauma from a time of great uncertainty.

#### AN EMOTIONAL TIMELINE OF TRAUMA IN THE INDO COMMUNITY

The first-generation (P1) Indos discussed in this research experienced the horrors of WWII, the Indonesian War of Independence, and the Bersiap period firsthand. The members of this population who managed to survive, endured starvation, torment, and extreme loss. Their focus was purely on survival. The *totoks* who interacted with the Indos found themselves singled out because of their appearance. The Indos who were mixed with indigenous Indonesian had a foundational experience of being considered less than their Dutch and European counterparts. Being societally wedged between the Europeans and the Indigenous Indonesians created a complex stratification between the different groups. Those who were of mixed blood experienced social challenges which dated back to the early days of colonization. Having grown up with stigmatizations of being the in-between group, Indos had to prove themselves worthy of respect while sometimes distancing themselves from the indigenous Indonesian population. This quietly (and not so quietly) fostered tensions between the indigenous Indonesian population and the Indos.

The first-generation (P1) Indos endured WWII, Japanese internment camps, being held and worked to the verge of death as prisoners-of-war, and losing their loved ones, possessions, career paths, and even their identities during the War of Independence. Later, during the Bersiap period, the Indos endured the rage and anger which much of the indigenous Indonesian population felt towards them. Their anger and hatred towards the Dutch was not without reason. However, the Indos who were caught in between, and under duress, were forced to select a nationality for themselves, Dutch or Indonesian, knowing that life would be forever changed.

Psychologically, the demands of this situation were devastating for so many. It can be likened to a child being forced to choose between their parents. Some of the circumstances which surfaced were so deadly and violent that many Indos did not have a choice and simply fled for their lives. Those who did have a choice were forced to decide between their motherland (the former Dutch East Indies) or the fatherland (the Netherlands).

During this phase, the majority of the second generation (F1) was being born. They knew snippets of life in the former Dutch East Indies and they experienced the upheaval of repatriation which included moving to the other side of the globe to a new place which was very different from where they had been born. The second generation (F1) was swept up in instability and constant change. Their parents were managing as well as they could to survive and carve out a new life offering their children safety to grow and develop. Experiences varied between negative and positive which is the natural cadence of life, however the negative aspects shaped a lot for the second generation (F1). They watched their parents cope silently with war and displacement traumas.



The second generation (F1) observed a lot of the trauma held in the first generation (P1). This influenced their goals and priorities. Many went on to achieve academically and in their careers. This might have been related to survival, controlling change, and creating a sense of internal safety. Both the second (F1) and third generations (F2) living in the US, surpass the US national average with Masters and advanced professional degrees. See Table 4 for the statistical values. Pushing relentlessly hard to do well academically, promotes being looked on favourably by recruitment managers. A person is seen as intelligent, disciplined, having strong will-power, and a good work ethic, all characteristics which are looked on favorably in our society. On account of praise, job prosperity, and other generally favourable outcomes, it behooves a person to be a high achiever. While the outcomes are positive, it is possible that some of this achievement was fueled by “trauma drive” which allows an individual to operate chronically under survival stress factors. In the future, more about this topic can be measured by asking individuals if they had experiences of burnout and what this entailed for them.

	US national average from 2005 (ages 25 and older)	Second-generation Indos	Third-generation Indos
Bachelors	30%	20%	30%
Masters	8%	12%	11%
Advanced professional degree (PhD, MD, Ed., JD, et cetera)	3%	4%	5%

Table 4. Advanced education levels.

Within the United States Indo population, there was a deep focus on assimilation into the general population. While the first generation (P1) Indos were typically married to other Indos, the second generation (F1) was encouraged to find a spouse or partner from within the general American population. In Survey 1, the participants indicated the ethnic or cultural group to which their spouse or life partner belongs (for details, see Table 5).

The effects of cultural loss are most visible in the third-generation (F2) Indos. Survey 1 reported that 65 percent of the third-generation (F2) Indo population learned English as their first language. Only 5 percent of these individuals went on to learn Dutch fluently. This means that 60 percent of the third generation (F2) is not able to speak Dutch and therefore cannot understand the Dutch documentaries on the Indo experience. Almost 70 percent of this English-speaking group said that they would love to be able to read books and watch films and documentaries about the Indo experience. This brings to surface the necessity for our younger Indo generations to have information accessible in English, an objective which is a main priority of The Indo Project.

American	46.5% of Indos married Americans which is very common in the second generation who spent their childhood in the United States. This is also very common among the third generation because the majority of them were born in the United States. An analysis was conducted to find out what the "American" category was culturally and ethnically comprised of. The majority of the respondents said extractions from: French, German, Hispanic, Irish, Italian, Polish, and Swedish.
European	15.8% of Indos married a European person.
Indo	15.3% of Indos married other Indos. This is especially common among the first generation.
Dutch	7.1% of Indos married a Dutch person, which is common in the first-generation and typical of the second generation who were either raised in the Netherlands or spent a portion of their childhood there.
Native American	3.3% of Indos married a person of Native American heritage.
Jewish	3% of Indos (all female respondents) married Jewish men.
Mexican	2.4% of Indos married a Mexican person which was very common among the younger second-generation Indos as well as the third-generation Indos.
Asian	1.9% of Indos married an Asian person.
Indonesian	1.7% of Indos married an Indonesian.
African American	1.6% of Indos married an African American person.
Middle Eastern	0.9% of Indos married a Middle Eastern person.
Indian	0.5% of Indos married an Indian person.

Table 5. Ethnic/Cultural background of spouse and life partners of Indos in the US.

Cultural loss has reportedly been a source of disconnect for the third generation (F2) Indos. While traumas were not necessarily shared in verbal details, confusion around place of origin and understanding left the opportunity for family members to feel isolated from each other if not attributable to distance, because of emotions. While this was not the case for all, it was experienced by many. In Survey 2, the third generation (F2) described what they could recall from their grandparents' experiences (memories from the first generation (P1)) (see Table 6). They selected the significant experiences which they knew their grandparents had endured and also selected the behaviour which their grandparents displayed.

The third-generation (F2) survey participants were asked to describe what their parents (the second generation (F1)) had endured and the behaviour they displayed. In Table 7, the most prevalent behavioural / emotional experience was the presentation of anxiety which seems to have affected 76 percent of the survey participants' parents. Developing in households which have members who have endured significant traumas will undoubtedly convey anxiety and other emotional dysregulation to children.

War	84%
War imprisonment	76%
Loss/ death of loved ones	73%
Anxiety	57%
Racism/ discrimination from others	54%
Anger	49%
Fear	49%
Poverty	41%
Abuse	38%
Starvation	38%
Depression	32%
Emotional abuse	32%
Physical violence	32%
Post-Traumatic Stress Disorder	27%
Oppression	24%

Table 6. Trauma in the first generation as recalled by their grandchildren.

Anxiety	76%
Anger	60%
Depression	57%
Financial distress	57%
Fear	40%
Emotional Abuse	38%
Racism/ discrimination from others	38%
Abuse	36%
Physical Violence	35%
Post-Traumatic Stress Disorder	35%
Fear of loss	32%
Fear of death	32%
Irritability	32%
Isolation	30%
Low self-esteem	30%
Codependency	27%
Chronic illness	27%
Poverty	27%
Agitation	24%
Nervousness	24%
Starvation	24%
Neglect	22%
Perfectionism	19%

Paranoia	14%
Sexual abuse	14%
Substance use	11%
Lethargy	8%

Table 7. Trauma in the second generation as recalled by their children.

When the third-generation (F2) survey participants were asked to select the emotional experiences they identified with, the results showed the greater details which result from traumas being carried. The third generation (F2) participants could either link their emotional experiences to the environment in which they grew up or they felt clouded and unsure of why they were impacted to the extent they were. Table 8 displays the variety of common emotional states and experiences which were reported by the third-generation survey participants.

Overthinking	60%
Difficulty in fully trusting people	60%
Experience of frequent anxiety	57%
Being overly hard on oneself	57%
Having the need to prove themselves	54%
Always feeling responsible for others	51%
felt neglected growing up	51%
Attempting to control everything (linked to needing to feel safe)	49%
Needing validation from others	46%
Fear of abandonment	46%
Depression	43%
Feeling unexplained burdens which do not stem from self	43%
feeling compelled to people-please (trying to make others happy, even when it is to your own detriment)	43%
Low self-esteem	41%
Experiencing chronic illness/pain (migraines, headaches, back pain, ulcers, skin conditions, fatigue, digestive issues, etcetera)	38%
Tendency to attract toxic partners	38%
Takes comments too personally, struggles to let go of other's (mean) comments	38%
Financial distress	35%
Perfectionism	35%
Co-dependency (needing to making others happy first before you feel happiness or see value in yourself)	32%
De-prioritizing of your own needs (and wants)	32%
Hypervigilance -- Living on high alert	32%
Lack of healthy boundaries in your relationships (trouble saying "no" when you need to)	32%

Tolerant of abusive behaviour from spouses or other people	32%
Fear of loss	30%
Have sleep disturbances (trouble falling asleep, staying asleep, nightmares, etcetera)	30%
Experiences signs of post-traumatic stress disorder	27%
Overly concerned about the future or past, and struggling to enjoy the moment	27%
Experience of frequent anger	24%
Irritability	24%
Experiencing frequent nervousness	24%
Lethargy	22%
Self-medicating through substance use	22%
Developed addiction	19%
Eating disorders	19%
Fear of death	19%
Fixings others and always needing to help	19%
Self-devaluing	19%

Table 8. Trauma in the third generation.

While there have been numerous events and changes affecting the general US population, this far into life among the third-generation (F2) Indos, there appears to be remnants of trauma which have been passed down and have been influential in the lives and functioning of this group.

#### EPIGENETICS

A more recent and provocative claim is that the experience of trauma is passed to subsequent generations through epigenetic mechanisms affecting DNA function or gene transcription (Yehuda and Lehrner 2018). There is an innate genetic factor in the activation of the trauma response (and emotional responses) to internal and external stimuli. Epigenetics is the developing study of this phenomenon. Epigenetic factors are the activation of a biochemical mechanism response to extreme internalized stress. It turns on certain genes which can be detrimental to the well-being of an individual. Epigenetic responses and transgenerational trauma are activated or heightened by a person's past trauma and potentially antagonized in stressful (high cortisol producing) situations.

Researchers from the Max Planck Institute of Immunobiology and Epigenetics in Freiburg have shown robust evidence that not only the inherited DNA itself but also the inherited epigenetic instructions contribute in regulating gene expression in the offspring (Max-Planck-Gesellschaft 2017). It is speculated that offspring receive a fine-tuned important gene regulation machinery which can be influenced by environment and individual lifestyle (Max-Planck-Gesellschaft 2017).



As described by the author of this article:

Today, I look at *Oma's* experience with such tenderness, compassion, and respect. She was born in 1916 in the Dutch East Indies. She was a "*totok*" – a fully European blooded Indo. Her father passed when she was two years old. She and her mother were on the run because her father's family wanted to remove her from her mother's care. The instability of her childhood created ruptured attachments. Once a young adult, her first husband died of gangrene, while enlisted in the military. He was a POW. She was placed in a Japanese internment camp where she desperately tried to care for her diabetic mother. Then the Bersiap Period happened. Sometime after, she met my *Opa* who carried his own trauma from childhood and suffering as a POW. They married and started their family. More trauma came in the form of civil unrest that threatened my *Oma's* life for being entirely of European blood.<sup>16</sup> Not willing to risk his family's safety, my *Opa* uprooted everyone and left. Through repatriation to the Netherlands and immigration to the United States, *Oma* experienced more stress. Once in the United States, the most devastating news came – her youngest child, was diagnosed with the incurable muscle wasting disease, Duchene Muscular Dystrophy. *Oma* dutifully took care of her son, her other children, and her husband until the other kids grew up, her youngest passed in 1989, and was followed unexpectedly by her husband in 1992. *Oma* was suddenly living alone after a life of caring for everyone except herself. Creating this trauma timeline for my *Oma* allowed for a bit of insight. I could see connections that were not originally as clear. As described by Indo-Dutch therapist Marcel van Doorn,<sup>17</sup> in the Netherlands, creating family constellations and genograms can help to visually connect and facilitate understanding about the way trauma is transmitted to the next generation. It can look like a family tree with the addition of the types of adversities that family members may have endured. Marcel van Doorn also explains that "trauma is in your body, and in your DNA". For more information on healing this type of trauma, the works of Dr. Peter Levine (author of *The Body Keeps the Score*) are highly useful. Personally, I can see how I have a tremendous tendency towards anxiety. While I never experienced the horrors that my *Oma* did, something within myself was activated by a series of early losses during my childhood, and it left me in a hypervigilant state thereafter.

#### EXAMPLES OF THE EFFECTS OF TRANSGENERATIONAL TRAUMA

In Survey 2, the participants were asked if, while growing up, they had ever encountered situations at home in which they felt as if their feelings were invalidated. Examples were shared by the participants. The top three included:

<sup>16</sup> The safety issue was a result of President Sukarno's decree in 1957 that Indo and *totok* people be removed from Indonesia.

<sup>17</sup> For more information about Marcel van Doorn, please visit: <https://www.meerdanbabipangang.nl/oor/?fbclid=IwAR2PvBv3qBGP1944XjQ9Ye-1lCQpm47C6Y1ijCgCpWWISEjgclcsJ2rLBAY>.

- “You think that’s bad? I survived war!”
- “In the camps, we had nothing to eat. Eat your food”
- “Stop crying, or I will give you something to cry about”

While these comments might come across as a parent who is just trying to put the situation into perspective for their child and demonstrate that things are not as bad as they think, it creates invalidation. This invalidation can do more harm to young people than a parent might realize. Without context and the security of knowing that their troubles meant something to their parents, many Indo children grew up feeling invalidated and as if their immediate concerns did not matter. This trained many to diminish their own troubles which impacted solution-finding and their mental peace. In the example of “You think that’s bad? I survived war!” the survey participant described how each time they had a social issue at school, their parent immediately diminished their problem and offered no opportunity to find a solution. This caused the participant to stop going to their parent for emotional support and taught them that nothing they experienced was “bad” because it was not a war situation. They found themselves in therapy years later trying to understand how to hold space for their emotions, deal with social issues (no longer on the playground, but now in the workforce) so that they could process what they were feeling and move forward.

In the example of “In the camps, we had nothing to eat. Eat your food”, the survey participant recounting this comment went on to describe their disordered eating. They felt guilty if they did not eat everything, so they developed an unhealthy relationship with food caused by the emotional stress they felt in trying to appease their parent. They would either avoid eating food or they would overeat. The participant explained “I felt so anxious at dinnertime because I knew I would get in trouble, and this made me feel sick to my stomach before even starting to eat”.

In the example of “Stop crying, or I will give you something to cry about”, the survey participant recounting this comment described their childhood as completely invalidating to them. They said when they felt scared or nervous it was not taken seriously. They learned to never cry or show their emotions in front of people. Instead of understanding that tears are a healthy outlet, they saw it as weakness and felt humiliated for themselves and others who allowed for such a display.

Did you feel like your feelings were invalidated by your parent(s) while growing up?	
All the time	13.5%
Often	32.5%
Sometimes	32.5%
Rarely	13.5%
Never	8%

Table 9. Experiences of invalidation.

In Table 9, Survey 2 shows the distribution of how frequently people felt invalidated by their parents while growing up. While many Indos grew up in emotionally secure households – 78 percent of our survey population said that they grew up in environments which they found to be invalidating at least sometimes, with 13.5 percent of this group saying that it was invalidating all the time.

#### CULTURAL PRESERVATION IN HEALING TRAUMA

Distinctive cultural characteristics, clothing styles, and foods can be, indeed often are, distinctive characteristics of human populations. Their manifestation is considered as significant cultural phenomena (Karen Tranberg Hansen 2004). Food is a point of nostalgia for the Indo people. It triggers the senses of the primary olfactory cortex, where higher-level processing of olfactory information takes place. It forms a direct link with the amygdala and the hippocampus (Rachel S. Herz and Trygg Engen 1996). Only two synapses separate the olfactory nerve from the amygdala, which is involved in experiencing emotion and emotional memory. In “The remembrance of things past”, French novelist Marcel Proust (Maya Pines 1995) describes what happened to him after drinking a spoonful of tea in which he had soaked a piece of madeleine, a type of cake:

No sooner had the warm liquid mixed with the crumbs touched my palate than a shudder ran through my whole body, and I stopped, intent upon the extraordinary thing that was happening to me. An exquisite pleasure had invaded my senses with no suggestion of its origin. Suddenly the memory revealed itself. The taste was of a little piece of madeleine which on Sunday morning, my Aunt Leonie used to give me, dipping it first in her own cup of tea. Immediately the old gray house on the street, where her room was, rose up like a stage set and the entire town, with its people and houses, gardens, church, and surroundings, taking shape and solidity, sprang into being from my cup of tea. (Pines 1995).

Once this emotional memory is triggered, the warm feelings of family and older times flood back. This phenomenon is typically referred to as *tempo doeloe* meaning “days of old”. It relates to the craving the Indos have for better days, the olden days, before the war and political unrest turned their lives upside down and caused their entire population to be displaced. Today, the most unifying practice in Indo culture is a home-cooked Indo meal. The food primarily favoured at an Indo table is Indonesian food sometimes mixed with traditional Dutch dishes. By engaging in these culinary traditions, Indos are able to connect with their roots and often find the experience to be peaceful. By taking time to enjoy a beloved and nostalgic meal, an individual affords themselves the opportunity to:

- heal or process deep emotions through familial connection and spending time with loved ones
- feel emotionally grounded

- process old traumas
- connect with their inner child
- hold space for themselves
- feel a sense of greater connection and purpose

## CONCLUSION

Upon examining the impact of historical events on the Indo people, it is clear that they have endured tremendous strife in their effort to survive. The Indo people collectively have spent a lot of time in survival mode and have incurred emotional (and physiological) impacts which deserve to be healed. As the generations continue, the knowledge of Indo history must continue as well. In the US, the story of the Indo experience illustrates what successful assimilation can look like, however, it does not have to be at the expense of culture and identity. In the case of the Indo people, the diminutive US population size militates against better understanding of the Indo experience. Indos who lived through the horrors are passing on, but their offspring can continue to help in an effort to honour their lives by thrusting the knowledge of their parents and grandparents onto the world stage.

Through Survey 1, it became clear that the Indos have been highly efficient in assimilating with the US population. Overall, they are a successful population and tend to be contributors to society. Simultaneously, the loss of culture, loss of Dutch language, and lack of historical knowledge have left much of the younger generations detached from their Indo identity. The cause of this appears to have been the effective assimilation process and the first-generation's tendency to avoid sharing their past. As discussions about strange occurrences began to surface within families, the issue of trauma and generational trauma became more apparent, which necessitated the launching of Survey 2 which was trauma focused. Survey 2 offered definitive proof that much of the Indo population was carrying emotional scars from trauma which had been passed down in a variety of ways to younger generations. This information supported foundational work previously conducted by Dr Merckelbach, which focused on memory recall and PTSD in the Indo population.

The Indos have repeatedly pushed to survive, and for most, without a safety net of community available to them. By creating a deep understanding of the Indo experience, trauma healing can take place through acknowledgment and validation. Some Indos find comfort in a transnational experience in which they feel connected to the Netherlands or connected to Indonesia. Others continue to feel detachment and are disinterested in a transnational experience because it is too painful.

Solutions can be found using the Indo experience as an example to assist other marginalized populations in not only finding new opportunities, but a chance to recuperate and experience more peace which will endure for future generations. Finding peace, stability, and opportunity appears to be one of the main goals in the migratory patterns seen in the Indos. It simply comes down to the fact that all human beings crave safety for themselves and their families.

To foster environments which feel safe, trauma needs to be processed. Transgenerational trauma can be healed in succeeding generations. Trauma responses do not have to be inherited or accepted as ingrained knowledge. Trauma healing can take place by connecting with one's roots, allowing space for transnationalism as it feels appropriate, inclusively inviting those with roots in the Dutch East Indies to contribute to the cultural preservation, honouring one's own unique healing path, and supporting one's mental health. Additionally, as a psychotherapist, I encourage people not to judge their path of healing or to be afraid of it – there is no longer any need to suffer in silence.

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## APPENDIX 1

To determine population growth, this equation was used:  $x(t) = x_0 \times (1 + r)^t$

$x_0$  = The initial Indo population to immigrate to the United States was recorded as approximately 60,000 in the late 1950s and early 1960s.

$r$  = The average standard United States growth rate between the 1960s through 2020 was determined by USAfacts.org to be 0.82%.

$t$  = The amount of time for the growth period was 60 years.

Population estimate: 97,938 which has been rounded up to 100,000.

## APPENDIX 2

The Indos focused on assimilating into the US population. Their drive was trauma-based in that they needed to provide security for themselves, their families, and prove that they had the right to exist in this world too. This can be compared and contrasted to the Japanese American population and the Jewish American population.

The Japanese Americans and Jewish Americans are homogenous groups living in the US who have culture and community that exists outside of the US. This difference offers additional cultural preservation to these populations. This is different from the Indos who do not have a homogenous Indo population to continue adding members to the Indo community. The Indo community continues to become diluted while the Jewish and Japanese communities have opportunities to be replenished.

In the Jewish community, striving for education is likely an offshoot of "piety" (religious devotion). Specifically, Torah study is the sign of a pious Jew. Piety was valued in the orthodox Jewish community. Therefore, those who were well versed in Torah were perceived as intelligent and highly regarded in their community. Mothers would prize such individuals as a "choice" marital partner for their children - primarily girls. This is likely a social example of "natural selection" at work. It follows that intelligent persons would seek to apply their brainpower in other fields, often medicine and law, which typically led to prestige, financial, and social success.

In the Japanese American community, multiple generations have been studied. In the first generation, those members were born in Japan and immigrated to the US. They are referred to as the "Issei". In the second generation, they were US born and experienced incarceration in the American internment camps with their parents during WWII. The second generation is referred to as the "Nisei". The third generation consists of the grandchildren of the immigrants. This generation is referred to as the "Sansei". The fourth generation is referred to as the "Yonsei", and is referenced as the "spoiled generation", which may parallel the social experience of the Indo fourth-generation. Often, they have had opportunities and advantages offered to them by their families.

Motivation for the Japanese to secure success was driven by the quest for a better life for their children. The Issei in the United States and their children lived modestly and more or less discreetly, by and large, but emphasized education as a means for their children to succeed. The Japanese sought success for their descendants which perhaps justified their own sacrifices as an original culture that emphasized family. They also assimilated and intermarried, largely with white Americans.

The comparison between these three culture groups demonstrates how striving for success can be a common cultural characteristic of immigrant and minority populations in the US. These characteristics may even provide complementary foundational values that allow these cultural groups to intermarry. At the same time, the sources of this common drive for success are different. All three cultural groups were focused on survival. Beyond that, the Indos were focused on proving their right to exist due to the collective trauma of not belonging, which translated to aiming for success. The Jewish population was focused on proving their religious devotion, which translated to aiming for success. The Japanese with their deep ancestral devotion, focused on pushing their families towards honour and success. They are the same, and yet different.