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Commentary: Considering the role of attachment and racial injustice in adolescent risk-seeking and justice involvement

Nicole Nehrig[1,2] (iD) | Tracy A. Prout[3] (iD)

[1]VA New York Harbor Healthcare System, New York, New York

[2]Department of Psychiatry, New York University, New York, New York

[3]Ferkauf Graduate School of Psychology, Yeshiva University, New York, New York

Correspondence
Nicole Nehrig, VA New York Harbor Healthcare System, Manhattan Campus; NYU Department of Psychiatry, 423 East 23rd Street, New York, NY 10010.
Email: njnehrig@gmail.com

1 | INTRODUCTION

In this issue, Kerig (2019) has provided a comprehensive overview of the relationship between early trauma exposure and later engagement in self-destructive and risky behaviors. She details prevailing models of the relationship between childhood trauma and subsequent risky behaviors in order to build a clear argument toward the proposal that risk-seeking behaviors can help us understand how trauma becomes associated with juvenile offending. The sheer diversity of factors that create vulnerability to posttraumatic stress symptoms (PTSS) and involvement with the juvenile justice system requires a unifying framework that can aid in measurement, clinical assessment, and intervention with this population. This review article is timely in its response to recent changes in the DSM-5 symptomatology of posttraumatic stress disorder (PTSD), and the author covers a broad range of literature that can inform contemporary psychotherapeutic approaches to trauma in the care and rehabilitation of young people involved with the justice system.

While the author briefly discusses early attachment ruptures and relational trauma in her formulation, the devastating impact of these formative experiences on psychosocial development is somewhat underrepresented. In this commentary, we elaborate on the role of attachment in adolescent posttraumatic risk-seeking behaviors. Further, we discuss the essential issue of race and institutionalized oppression from a perspective of intersectionality and social justice. Finally, implications for mental health treatment and justice system reform are proposed. The perspective we offer here is informed by our clinical and research work with populations that overlap with the one described by Kerig (2019), but at different points in the lifespan. The first author is a staff psychologist and researcher at a VA medical center who works primarily with veterans who have histories of both childhood and combat trauma, and for whom a history of risk-seeking behaviors and justice involvement are common. The second author is a professor of clinical child psychology and one of the developers of regulation-focused psychotherapy for children with externalizing behaviors (RFP-C; Hoffman, Rice, & Prout, 2016). Many children with externalizing behaviors have experienced adverse childhood experiences (ACEs) and, without early intervention, are at increased risk for justice involvement in adolescence. Both authors work with diverse patient populations from minority and low-income backgrounds.

2 | DIGGING DEEPER: THE ROLE OF ATTACHMENT IN POSTTRAUMATIC RISK-SEEKING

Among justice-involved youth, 97% of males and 98% of females have been exposed to ACEs (Baglivio & Epps, 2016). Childhood traumas often occur in the context of insecure attachment or are the proximal cause of it. Not only does insecure attachment in childhood put individuals at greater risk for traumatic experiences, but there is also ample empirical evidence supporting attachment style as both a mediator and a moderator of childhood abuse and detrimental psychological and relational outcomes across the lifespan.

An alternative conceptualization, that moves beyond PTSD and incorporates attachment adversity in the context of interpersonal trauma, is developmental trauma disorder (DTD). As a proposed diagnostic category, DTD provides an integrative framework that incorporates the profound emotional, biological, cognitive, behavioral, interpersonal, and self/identity dysregulation that occurs in the aftermath of victimization and disrupted attachment. This formulation highlights the complex, interconnected relationship between childhood trauma, later victimization, and the development of psychological difficulties such as complex PTSD (C-PTSD; Herman, 1992), mood and anxiety disorders, and personality disorders, such as borderline personality disorder (BPD) and antisocial personality disorder (APD). It is difficult to disentangle PTSS related to childhood trauma from BPD, which has led some to suggest that BPD may be synonymous with C-PTSD, as BPD is found in approximately 70% of individuals with histories of childhood physical and/or sexual abuse (Herman, 1992). The self-destructive behaviors and relational patterns that are characteristic of BPD can be understood as reenactments of past trauma. Disorganized attachment may be at the root of this cluster of symptoms that are typically classified as C-PTSD or BPD. Individuals with disorganized attachment have typically experienced persistent trauma, such as physical or sexual abuse or unpredictable and erratic caregiving. These traumatic experiences, often at the hands of a caregiver, leave the child feeling simultaneously comforted and frightened, vacillating between clinging to and avoiding attachment figures. Disorganized attachment is, in fact, an *adaptation* to a profoundly confusing and relationally traumatizing environment. Kerig (2019) offers a valuable synthesis of wide-ranging literature that highlights how risk-seeking behaviors develop and the *function* they serve. We propose that these behaviors are also imbued with *meaning* and serve as a form of communication, with the self and others, about internal working models and a deeply fragmented sense of self.

The model of relationships within a disorganized attachment framework is one that includes excruciating emotional pain mixed with occasional caregiving, causing one to cling to abusive attachment figures in the hopes that amidst the abuse, some needs will be met. Dangerous or threatening actions on the part of the caregiver tend to, paradoxically, increase the strength (but not the quality) of the attachment. In the case of self-destructive or risky behaviors, individuals with acutely disrupted attachments seek to ameliorate the impact of trauma through situations that approximate basic human needs. As discussed by Kerig, the fear of losing an important relationship may lead youth to prioritize relationship preservation over self-protection.

It is not childhood abuse itself that causes later psychiatric symptoms, but rather trauma survivors' attempts to cope with the abuse. Childhood abuse leads to a form of splitting, either "I am bad or my parent is." The conclusion of this model of the self in relationships is the internalization of a sense of badness and self-blame for the abuse survivor, as a way to make sense of their experience. Risk-seeking becomes a way to confirm the badness, which, despite its negative repercussions, may be preferred to the overwhelming sense of chaos and unfairness that would result otherwise.

How does an increased emphasis on the role of attachment revise our understanding of PTSS, risk-seeking, and involvement in the juvenile justice system? Kerig (2019) describes risk-seeking behaviors as "intentionally motivated," but allows for the possibility that there may not be conscious recognition of their intention. Privileging the role of attachment and unconscious processes that lead traumatized youth to engage in risk-seeking may have significant implications for treatment, juvenile justice programs, and research. In her review, Kerig (2019) calls for a more humane conceptualization of prototypical conduct disorder symptoms, arguing that trauma-informed models can help youth develop better affect regulation skills to decrease reliance on posttraumatic risk-seeking behaviors to self-regulate. However, we need to extend this by recognizing how societal forces perpetuate and exacerbate the effects of childhood trauma by blaming the victim when they become labeled as "juvenile offenders," rather than framing offending behaviors in the context of trauma. Under the best circumstances, the challenges of adolescence are great. Identity development is a painful, but ideally rewarding process. In the context of childhood abuse and neglect, with a sense of oneself as bad, and all the anger and shame that results, identity development is nearly impossible.

3 | THINKING INTERSECTIONALLY: A SOCIAL JUSTICE PERSPECTIVE ON POSTTRAUMATIC RISK-SEEKING

Although Kerig (2019) discusses gender differences in posttraumatic risk-seeking behaviors, notably absent is any discussion of the disproportionate impact of early childhood trauma on other demographic groups. At the intersection of race, gender, and income, we find exponentially higher rates of ACEs and a wider range of adverse experiences beyond those queried on the original ACE studies. These associations become more complex among justice-involved youth. For example, youth with more ACEs are less likely to be committed for homicide or property offenses, but more likely to be committed for sexual offenses (DeLisi et al., 2017). Additionally, white incarcerated youth have higher mean rates of ACEs than youth of color in the juvenile justice system (DeLisi et al., 2017). Finally, race and gender impact the judicial disposition of youth, with males and minority youth more likely

to be committed to residential placement postarrest (Zettler, Wolff, Baglivio, Craig, & Epps, 2018).

Beyond the data, the meaning and import of ACEs, PTSS, and risky behaviors across demographic groups belie a fracture in our humanity. Through racial and economic profiling, which are endemic to schools, hospitals, and communities, young people of color from poor communities are automatically suspects regardless of whether they have committed a crime or not. This confirms and exacerbates the internalized sense of badness that initially took root as a result of childhood trauma. The school to prison pipeline is in fact a cradle to prison pipeline for adolescents whose lives have been characterized by income inequality, insufficient resources, systemic oppression, and interpersonal trauma. The pipeline begins with inadequate and unevenly distributed prenatal care and is myelinated by racial disproportionality in child welfare system involvement, the overrepresentation of children of color in exclusionary school-based discipline practices, racial and economic disparities in access to adequate pediatric mental health care, and the panopticon of police and digital surveillance (Raible & Irizarry, 2010). Black and Latinx youth in poor urban communities bear the brunt of militarized schools and over-policing, and are more likely to be caught in the grip of the prison industrial complex. The gates and metal detectors of schools give way to the locked doors of inpatient psychiatric hospitals; for many of the adolescents described by Kerig (2019), these are simply stopovers on the way to prison.

In addition to the higher and more severe incidences of ACEs, "weathering," describes the long-term physical, mental, emotional, and psychological effects of racism and of living in a society characterized by white dominance and privilege. Weathering severely challenges the abilities of youth of color to thrive. Weathering includes stress-induced wear and tear on black and brown bodies, leading to health vulnerabilities, including the early onset of chronic diseases and susceptibility to infection. It can lead to poorer academic outcomes in youth of color who experience cognitive interference as a result of stress that impairs concentration and performance, resulting in increased discipline, and decreased teacher engagement.

There is a missing link in most scholarship on the constructs described by Kerig (2019). Unless we, as mental health researchers and providers, take into account our own complicity in the vectors of oppression and privilege, we cannot participate in the development of culturally responsive solutions. We must consider how our various forms of privilege limit our ability to understand the lived experiences of traumatized adolescents who engage in risk-seeking behaviors. What role do we play in the matrix of oppression? How can we create research designs, clinical interventions, and policies that provide a counter-narrative

to the criminalization of traumatized and marginalized youth?

4 | A CALL FOR COMPASSIONATE CARE

Adolescents who present with posttraumatic risk-seeking behaviors have been tragically failed by the implicit social contract to nurture and guide our youth. Pathologizing vital adaptations to a traumatic environment exacerbates the feelings of worthlessness and helplessness that are so prevalent among victims of childhood trauma. Placing the onus of responsibility on justice-involved youth confirms just-world beliefs that so often result from childhood abuse. Adolescent risk-seeking behaviors signal a deep, underlying identity fragmentation, not simply a problem behavior that can be identified, measured, and extinguished. Risk-seeking behaviors are a form of communication. These adolescents need help processing trauma, victimization, and attachment difficulties, not to be pathologized for their efforts to manage these experiences. For a sense of basic safety to be established after abuse, the survivor needs others' help to (re)build a positive and cohesive sense of self. This requires that another person be tolerant of the survivor's need for intermittent closeness and distance and respect their autonomy as they create an identity informed by, but outside of, the context of trauma (Herman, 1992).

In a stepped-care model of treatment, approaches like TARGET can be useful in providing psychoeducation, recontextualizing risk-seeking behaviors as responses to trauma, and helping young people build skills in emotion regulation. However, TARGET and similar skill-based approaches do not address the deep emotional pain, betrayal, and identity diffusion that characterize the lived experience of traumatized youth who become justice-involved. Traumatized youth in the justice system experience chronic emptiness, a fragmented and contradictory sense of self, an underdeveloped and shallow concept of others, relationships characterized by pain—all hallmarks of a disorganized attachment style. For many of these adolescents, simply being able to trust a therapist, attend sessions regularly and be engaged in them, is a tremendous challenge and marks great progress in the healing of attachment wounds. Primary therapeutic tasks with this population should be to help adolescents experience and internalize representations of protection and to (re)build identity. These are lofty goals that take time, steadfast therapeutic care, and understanding that risk-seeking and criminal behaviors are often rooted in deeply implicit and automatic self-states.

Mental health outcomes and access to care are differentially affected by multiple, intersecting facets of identity and oppression, including race, ethnicity, sex, language,

sexual orientation, gender identity, socioeconomic and immigration status, religion, and disability. An intersectionality-informed mental health approach embraces rather than avoids the complexities that are essential to understanding social inequities. Situating the experience of justice-involved youth in the context of larger societal forces can begin to alleviate the internalized sense of a damaged and unworthy sense of self. We must attend to the higher incidence of negative experiences, such as ACEs and racial and economic profiling, that often shape the identities of marginalized adolescents. Critical race theory, phenomenology, and deconstructionist perspectives are a rejoinder to the narrow path we often take in traditional behavioral science. Restorative practices that seek to improve and repair relationships between individuals and their communities offer one possibility that can incorporate these perspectives.

Specifically, restorative justice programs offer a more compassionate model of rehabilitation that may be indicated for trauma-exposed justice-involved youth. Providing support and resources for these adolescents to reconcile with the victim and the community can help the adolescent repair harm, access critical mental health and social support services, and explore the context and meaning of their behavior rather than distancing themselves from it. Restorative justice also offers the opportunity to transform relationship patterns, and experience others as invested in their success by conveying the humanistic message that we all make mistakes and can work together to fix them. Justice-involved youth are almost always victims before they enter the justice system; they need the support of a restorative justice approach to process their experiences as both victims and offenders.

Kerig (2019) brings together a wide body of literature to reveal the direct impact of trauma on adolescent risk-seeking and justice involvement. Her argument is rooted in science and has important implications for treatment and future research. However, it can benefit from person-centered, attachment-based, and intersectional perspectives. This commentary seeks to add to the view advanced by Kerig in order to further elaborate the phenomenological and social justice context. When empirical research is paired with developmental science of attachment and a critical and intersectional perspective, it has an even greater potential to transform communities, interrupt the cradle to prison pipeline, and provide healing from trauma and oppression.

ORCID

Nicole Nehrig https://orcid.org/0000-0002-9495-8126
Tracy A. Prout https://orcid.org/0000-0002-3650-5890

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