

# Trauma Exposure & Impulsivity Symptoms in Court-Involved Youth

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In juvenile justice settings, adolescents with complex trauma histories often develop a wide range of mental health consequences such as depression, anxiety, poor impulse control, or aggression; and are often labeled with potentially unwarranted diagnoses as a result (Ford, Chapman, Connor, & Cruise, 2012). Many symptoms of attention deficit disorders (e.g., inattentiveness, daydreaming, drowsiness, and impulsivity) may be the result of trauma-related internalizing disorders, thereby complicating the primary diagnosis (Becker & Langberg, 2012). Adolescents adjudicated for illegal sexual behavior report higher rates of trauma-related psychopathology, with one study reporting 77.5% of the sample experienced at least one traumatic event (Newman et al., 2018). Once incarcerated, the cumulative effect of complex trauma and poly-victimization has a considerable impact on the cognitive, behavioral, and mental outcomes of these youth (Alexander, McCallum, & Thompson, 2020). Therefore, understanding how trauma impacts the development of these behavioral symptoms can improve accurate diagnosis and subsequent treatment for either attention deficit-hyperactivity disorder (ADHD) or post-traumatic stress disorder (PTSD).

The current study examined the role trauma exposure played in symptoms of impulsivity in a sample of adjudicated male youth. Participants included youth ( $n = 1,597$ ) in a court-mandated residential treatment facility. The Millon Adolescent Clinical Inventory (MACI; Millon & Davis, 1993, 2003) was used to assess impulsive propensity, family discord, and childhood abuse. Linear regression analyses were used with the child abuse and family discord scales entered as predictors and the impulsivity scale as the dependent variable. The overall model was significant,  $F(2, 1596) = 690.78, p = .000$ , indicating a positive association between trauma predictors and impulsivity. Family discord primarily drove the association ( $\beta = .68, p = .00$ ), accounting for 42.3% of the variance. This relationship is depicted in Figure 1. The child abuse scale was not a significant predictor ( $\beta = .02, p = .42$ ) of impulsive symptoms.

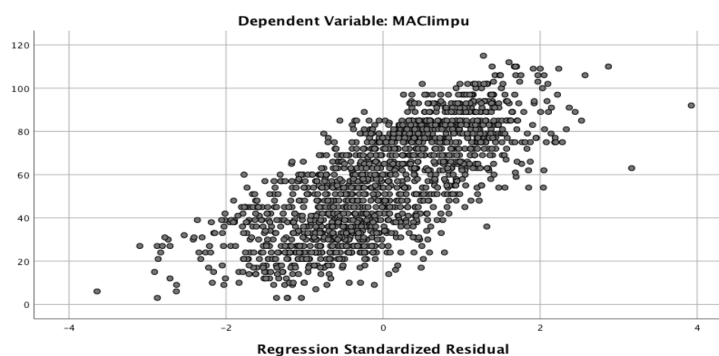


Fig. 1 Scatterplot of main findings.

These results highlight the need for adequate trauma assessment and screening when working with court-involved youth. Those witnessing indirect trauma in homes characterized by high family conflict and tension were positively associated with higher rates of impulsive and aggressive behavior. These external behavioral symptoms are common to ADHD, but also to childhood PTSD. These results imply that inadequate trauma assessment in youth could increase the chance for misdiagnosis. These results also speak to the socialization of adolescent males and the potential harms associated with toxic forms of masculine expressions. An inability to properly name and express trauma-related emotions may lead to explosive behaviors and impulsivity, which could lead to law enforcement or subsequent court involvement (Mulvey and Iseline, 2008). Furthermore, studies of cortisol reactivity have found multiple response patterns for youth in high-stress environments, such as those with high family or neighborhood conflict (Guidice, Ellis, & Shirtcliff, 2011). Those with mild to moderate trauma showed high reactivity patterns characteristic of the impulsive symptoms seen here; while others with more severe trauma showed a numbing pattern not displayed here. Future studies are needed to truly understand the various neurological impacts of trauma exposure.

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## Statement of Research Advisor

Madysen's research highlights some of the excellent undergraduate scholarship from the Juvenile Delinquency Lab in the Department of Psychological Sciences. The lab is supported by a more than 20-year public-public partnership with the Alabama Department of Youth Services. She will expand on this theme as an upcoming 2022-2023 College of Liberal Arts Undergraduate Research Fellow.

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## Authors Biography



Madysen E. Maggio is a senior-year student pursuing a B.A. degree in Psychology at Auburn University. She has played key research roles in the misdiagnosis of ADHD in the juvenile population. She is a double minor in social work and counseling. She plans to work with adolescents in the Foster Care System and address early onset trauma.



Kelli R. Thompson is an Assistant Research Professor and Director of the Juvenile Delinquency Lab in the Department of Psychology at Auburn University. She received her B.S. in Human Development and Family Studies from Auburn in 2005. She received her M.A. in Theology from Fuller Theological Seminary in 2008 and her Ph.D. in Applied Developmental Psychology from the University of New Orleans in 2016.