

Racial inequities and neuroimaging findings in ABCD

Nathaniel G. Harnett, PhD

Director, Neurobiology of Affective and Traumatic Experiences Laboratory | McLean Hospital
Assistant Professor of Psychiatry | Harvard Medical School



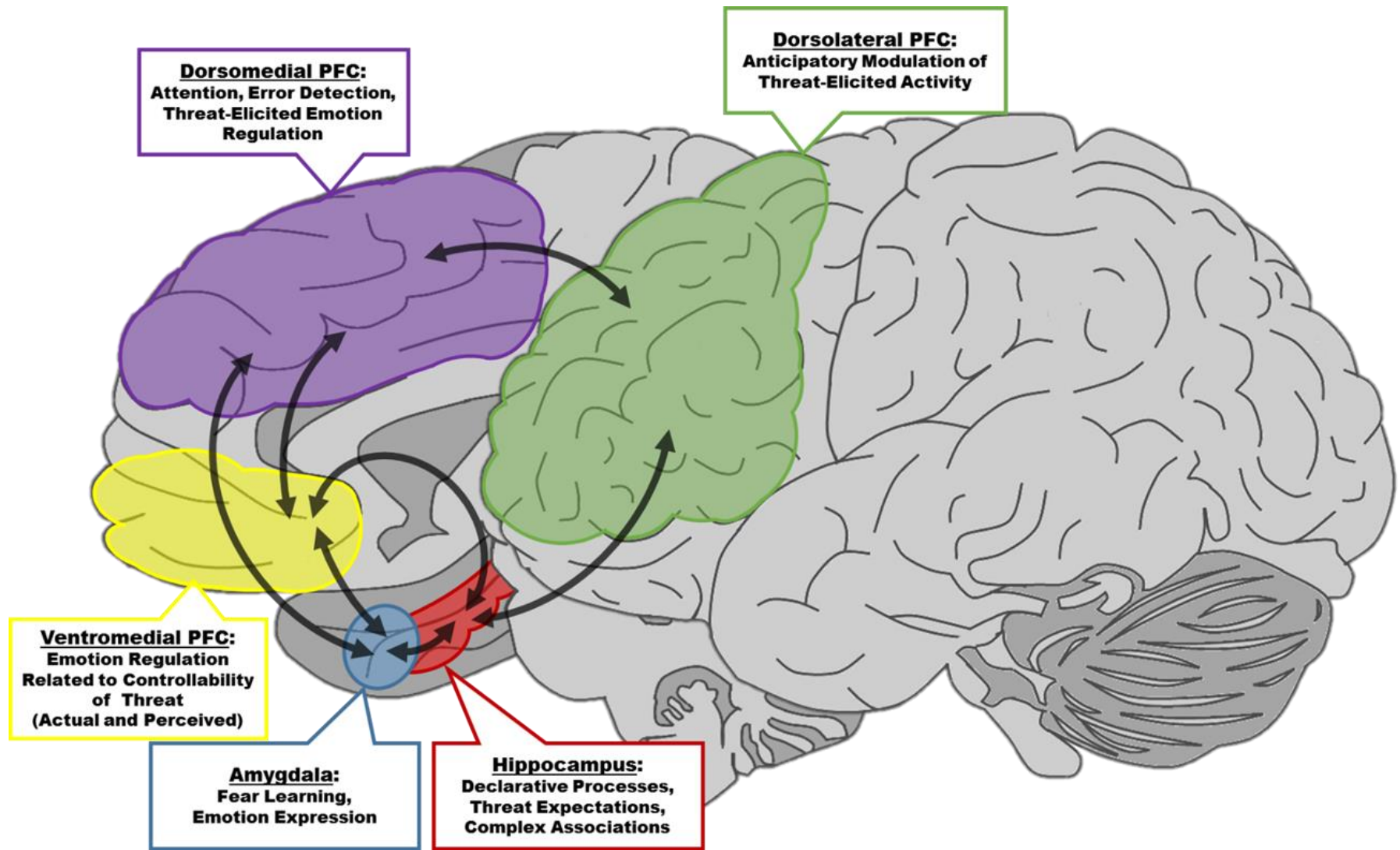
McLean HOSPITAL
HARVARD MEDICAL SCHOOL AFFILIATE



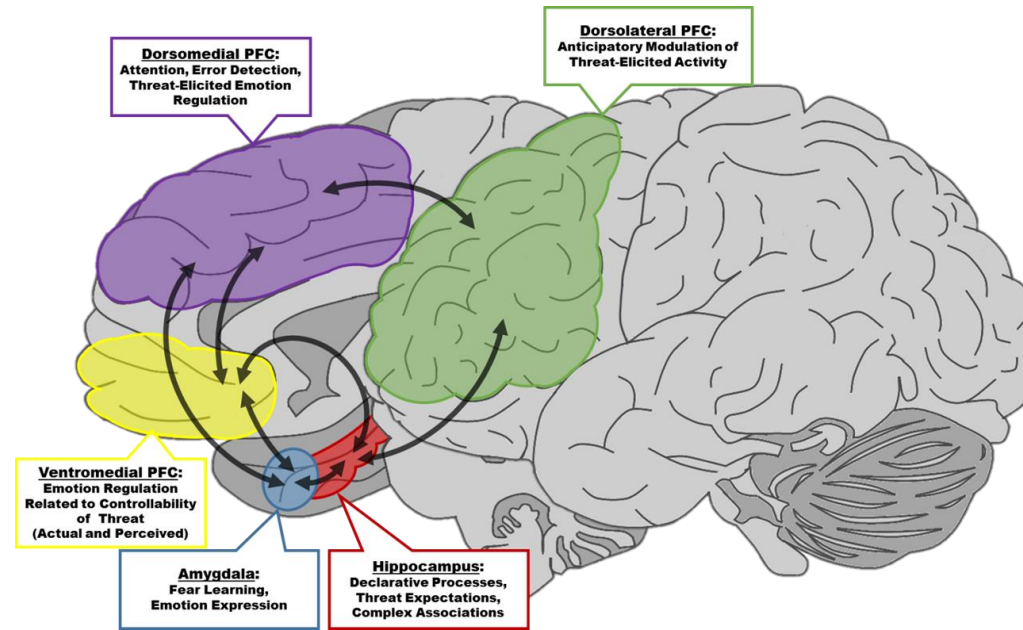
NATELAB
NEUROBIOLOGY OF AFFECTIVE AND TRAUMATIC EXPERIENCES



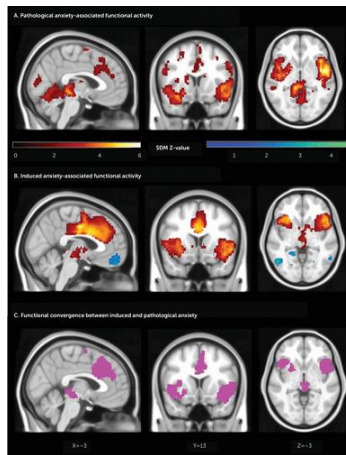
**HARVARD MEDICAL SCHOOL
AFFILIATE**



Neural circuitry of threat learning

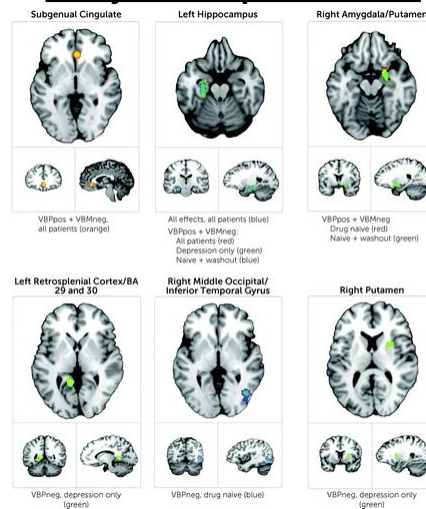


Anxiety



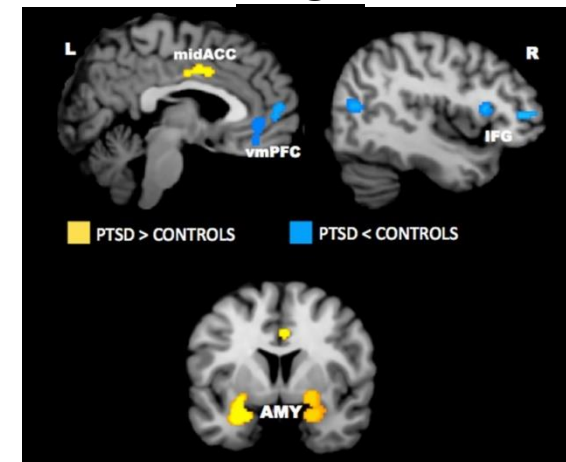
Chavanne & Robinson, 2020

Major Depression



Gray et al., 2020

PTSD



Hayes et al., 2012

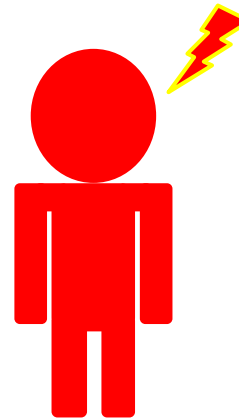
”Healthy”



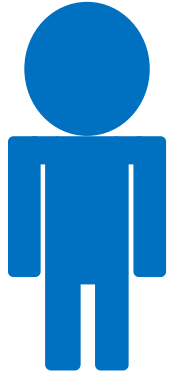
Discreet
Trauma



PTSD



"Healthy"



Pretraumatic Stressors



Peritraumatic stressors



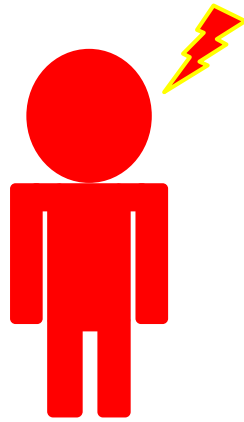
Discreet Trauma



Posttraumatic stressors



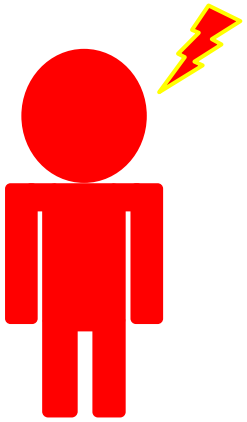
PTSD



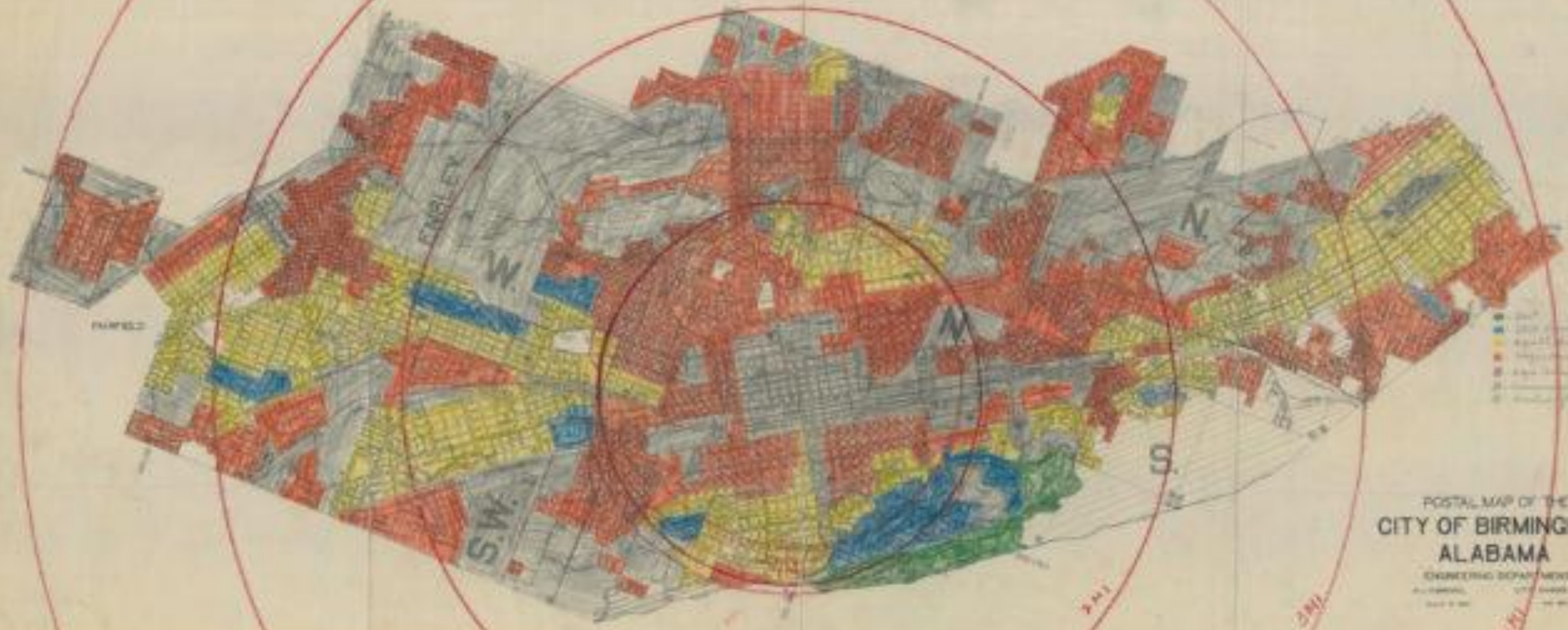
"Healthy"



PTSD

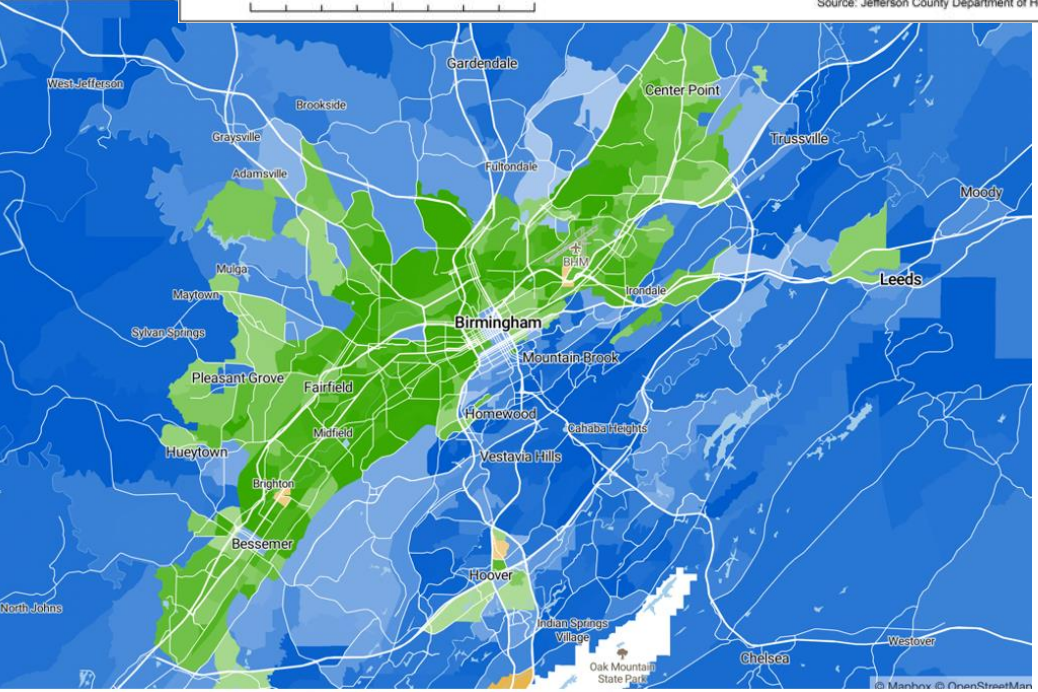
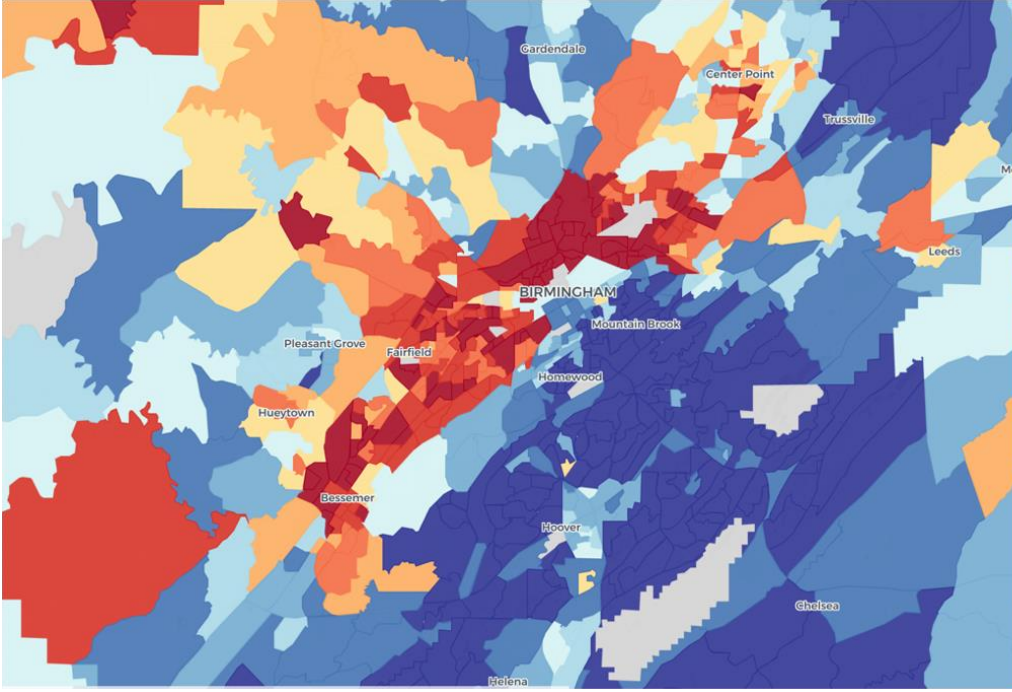
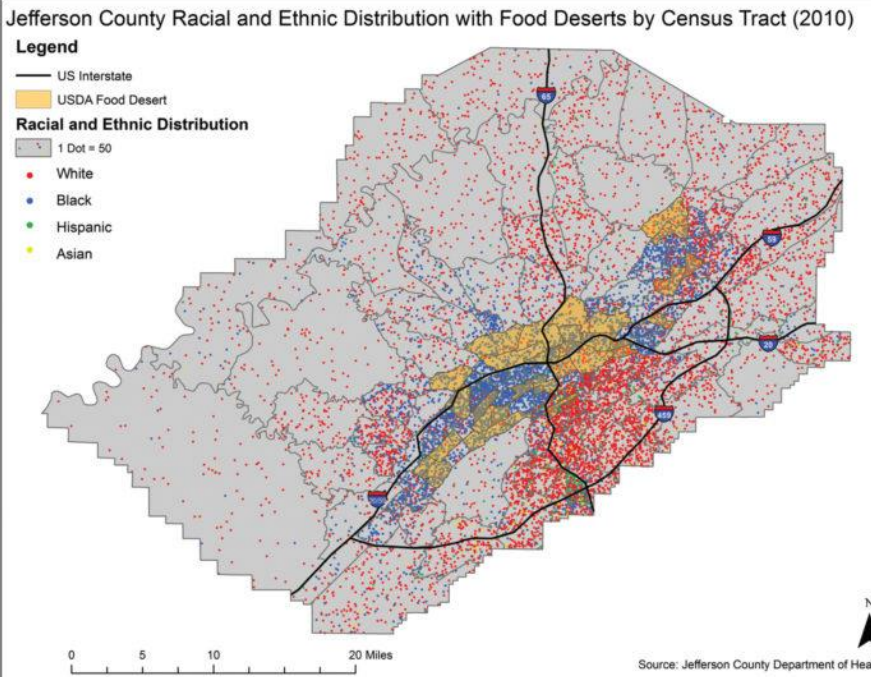
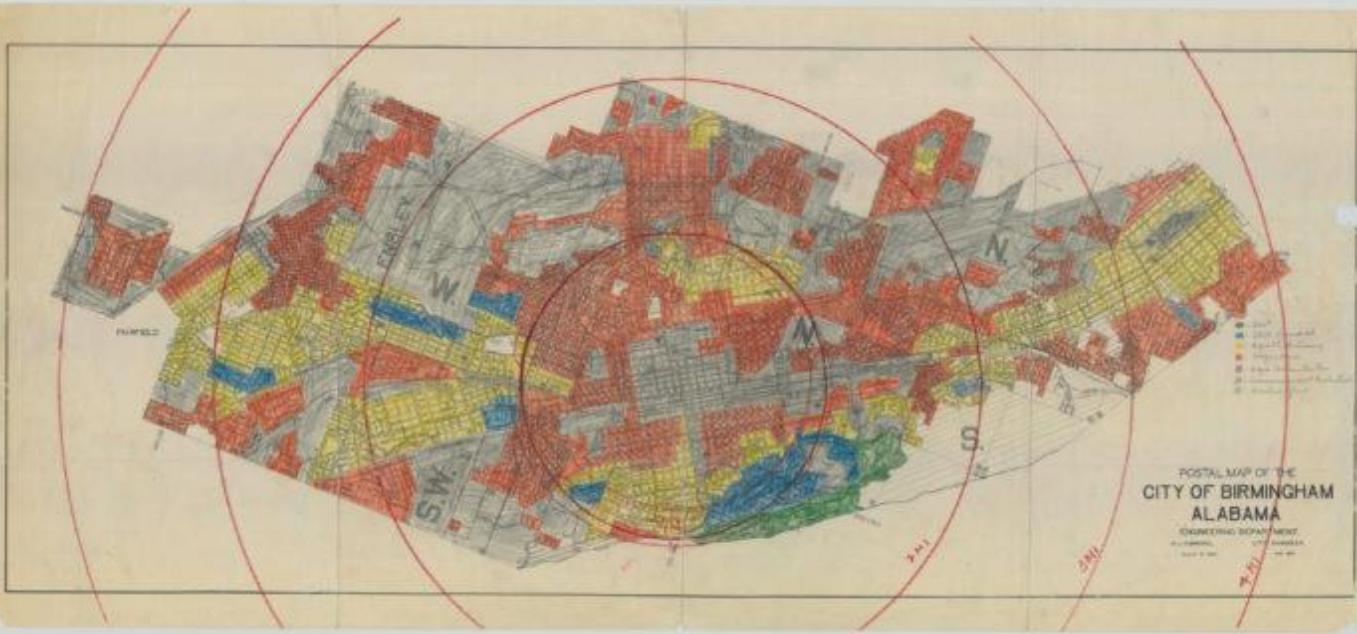


Environmental/chronic/lifetime stress



- Blue
- Yellow
- Red
- Green
- Grey

POSTAL MAP OF THE
CITY OF BIRMINGHAM
ALABAMA
ENGINEERING DEPARTMENT
CITY ENGINEER



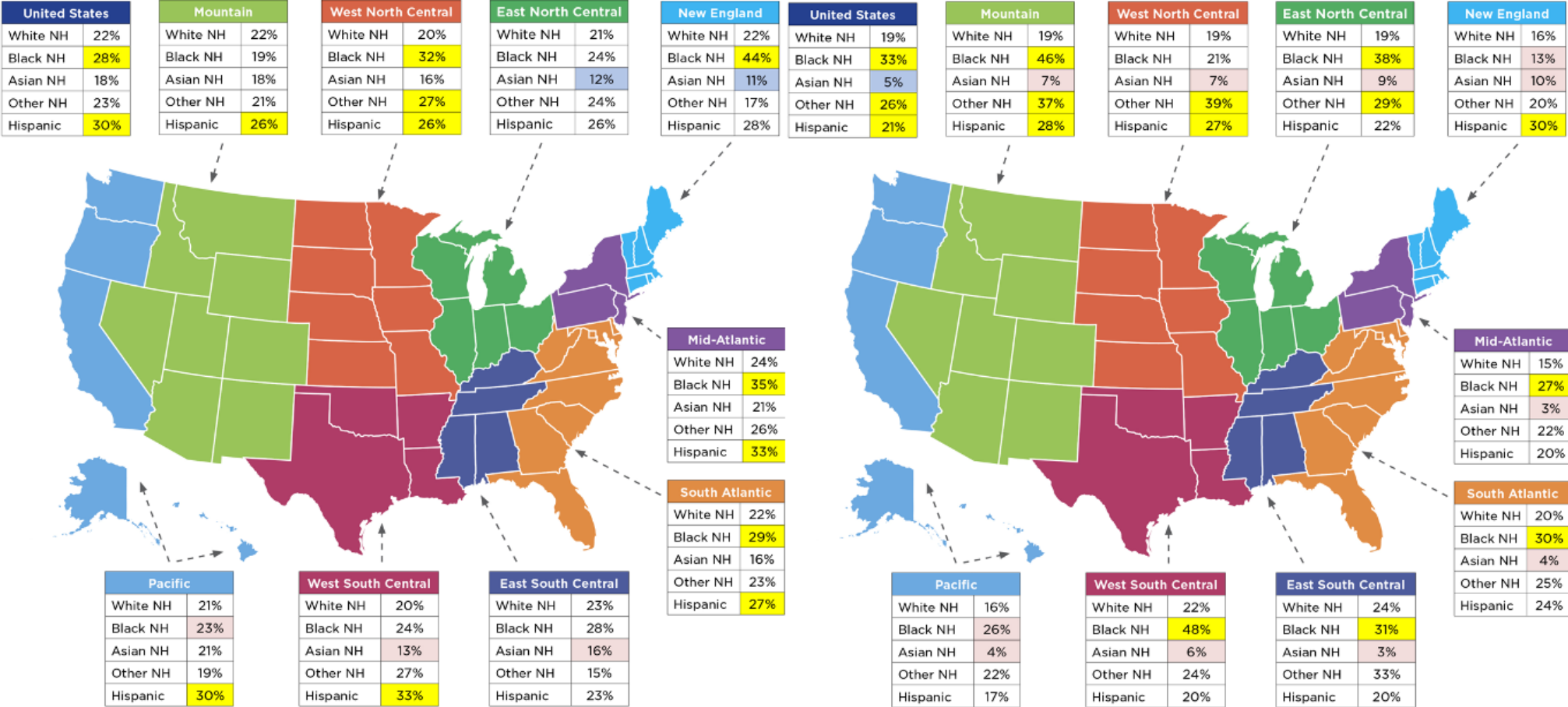
Majority Race Key



Pretraumatic and environmental factors are racialized

Percentage of children with 1 ACE

Percentage of children with 2 or more ACEs



NH=Non-Hispanic

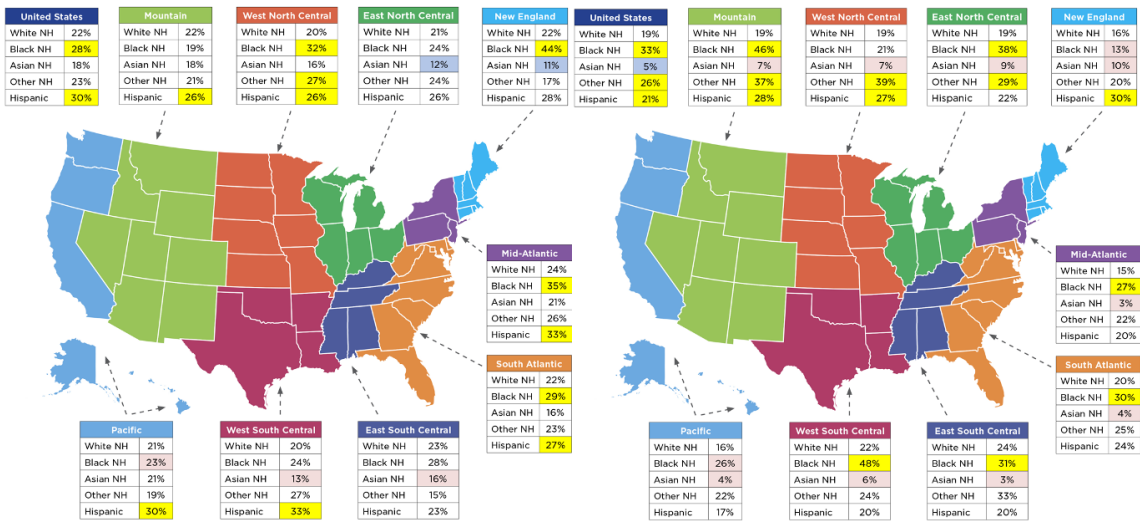
NH=Non-Hispanic

Yellow shading = Percentage is higher than white non-Hispanic children at a statistically significant level.
 Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
 Red shading = Estimate should be interpreted with caution, because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

Yellow shading = Percentage is higher than white non-Hispanic children at a statistically significant level.
 Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
 Red shading = Estimate should be interpreted with caution, because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

Pretraumatic and environmental factors are racialized

Percentage of children with 1 ACE | Percentage of children with 2 or more ACEs

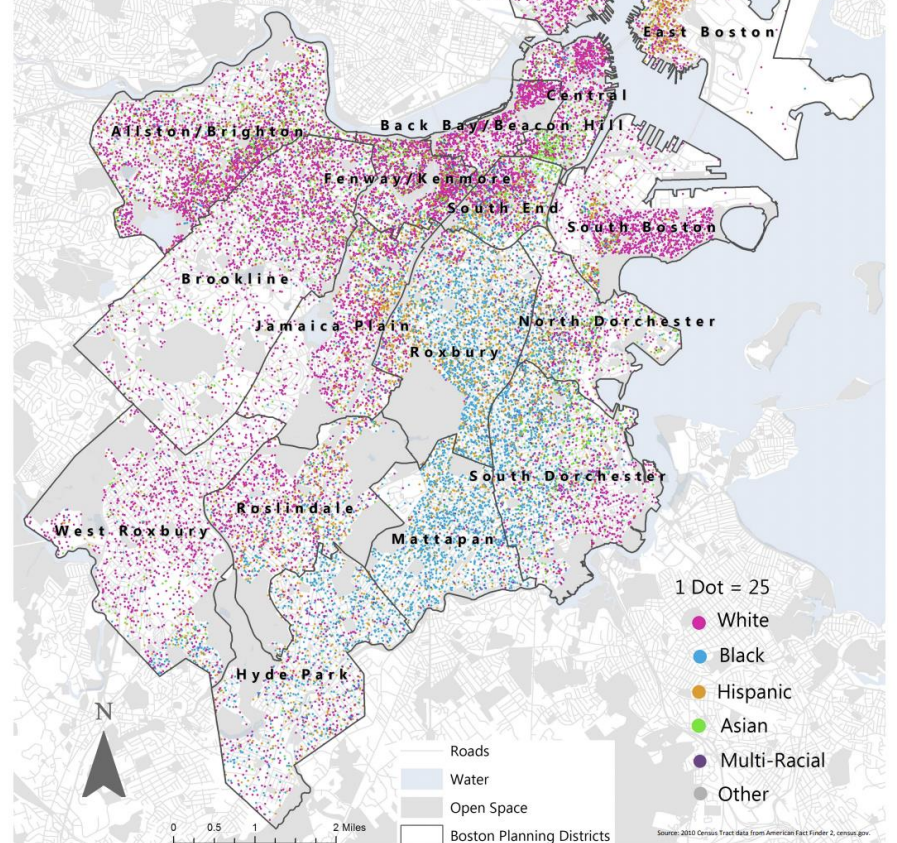


NH=Non-Hispanic
 Yellow shading = Percentage is higher than white non-Hispanic children at a statistically significant level.
 Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
 Red shading = Estimate should be interpreted with caution, because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

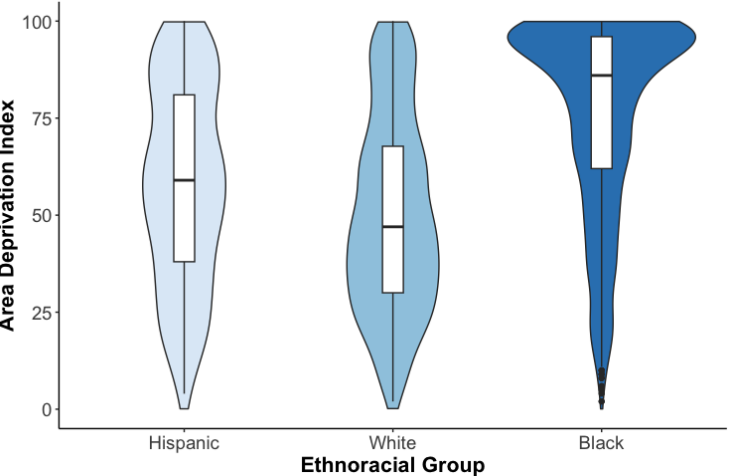
Premature death rates per 1,000 by T stop, 1999-2001



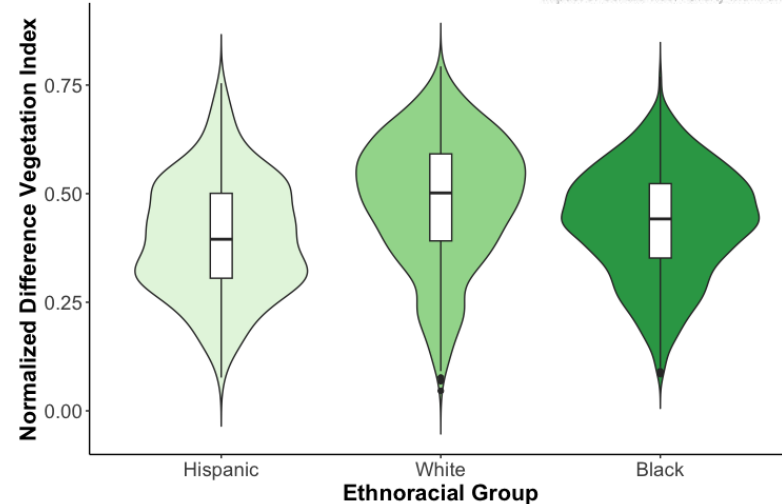
2010 Boston Racial/Ethnic Demographics



Neighborhood Disadvantage by Ethnoracial Group

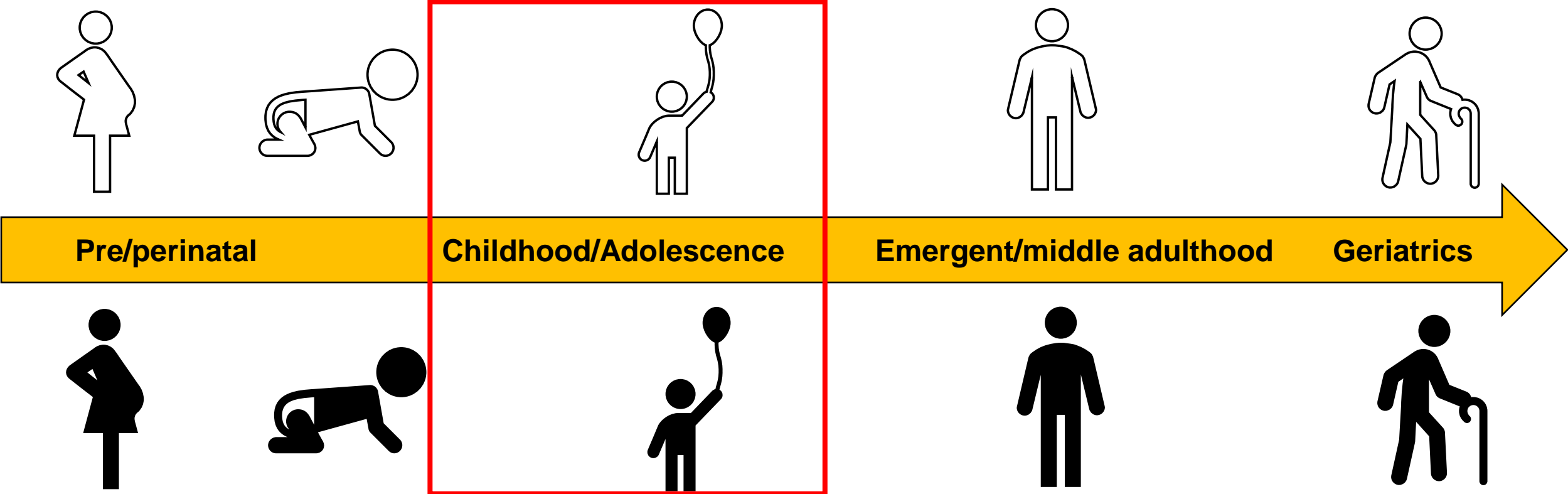
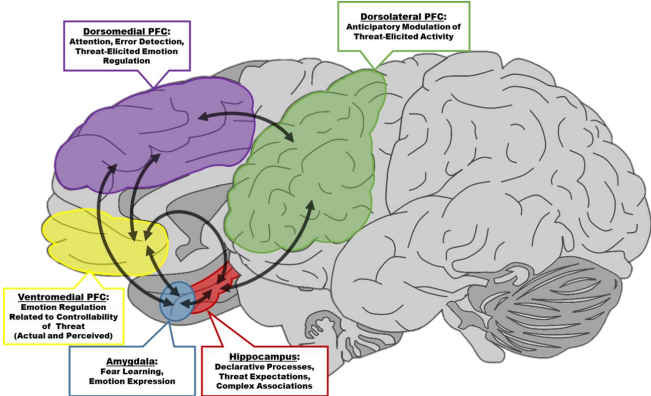


Greenspace by Ethnoracial Group



Chen JT, Rehkopf DH, Waterman PD, Subram. Impact of Census Tract Poverty within and acn

How do disparities in stressor exposure impact PTSD-related neurocircuitry?

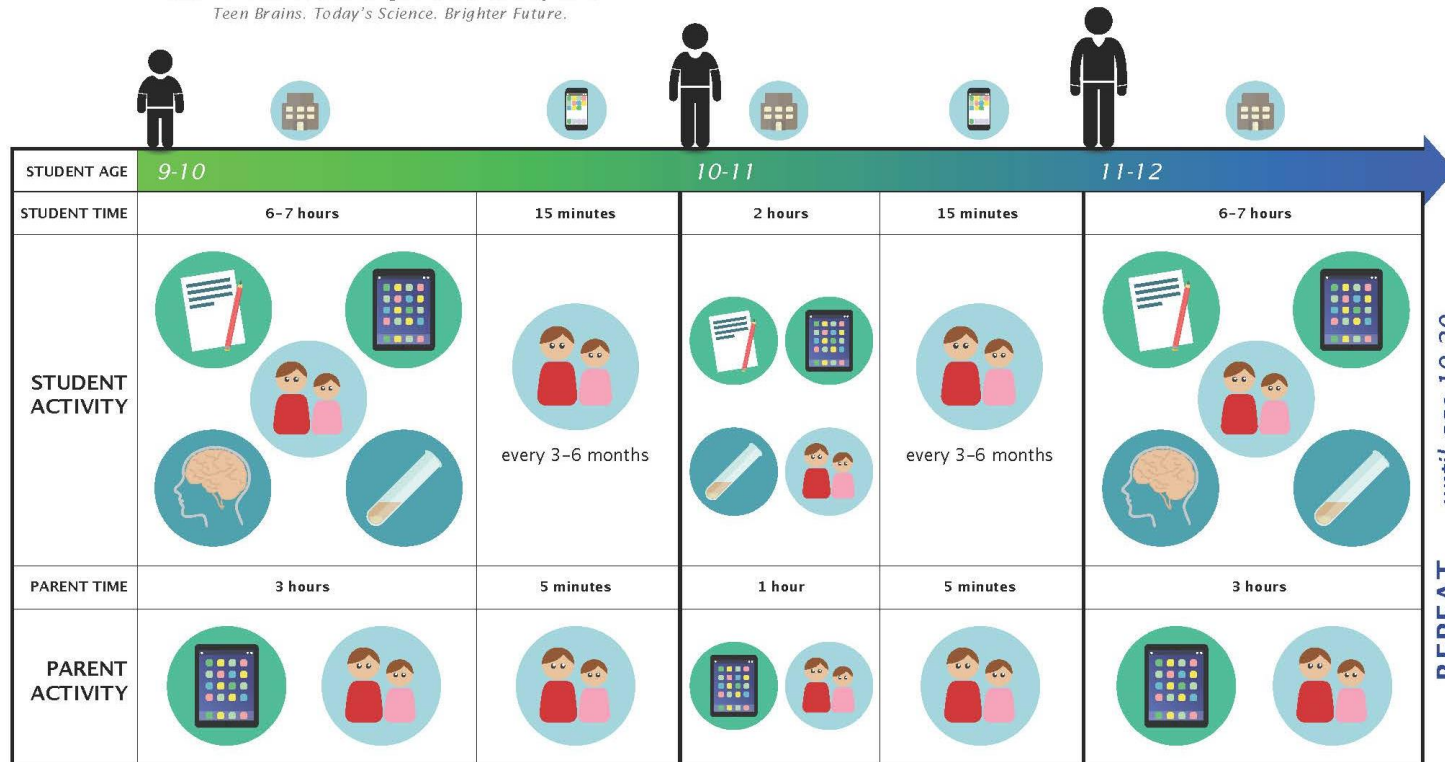


Inequity and brain structure in children



Adolescent Brain Cognitive Development®
Teen Brains. Today's Science. Brighter Future.

ABCD Study TIMELINE OF EVENTS



REPEAT ... until age 19-20

LEGEND

- In-Person Visit
- Phone Call
- Paper and Pencil Tests
- iPad Tasks
- Brain Scan
- Biosamples
- Interview

Demographics:

- Parent reported race and SAAB
 - ▣ Black/White, Male/Female

Experiences and context:

- Family conflict
- Family hardship
- Trauma load
- Family income
- Parent education
- Parent employment
- Neighborhood disadvantage

Neuroimaging:

- Gray matter volume



Inequity and brain structure in children

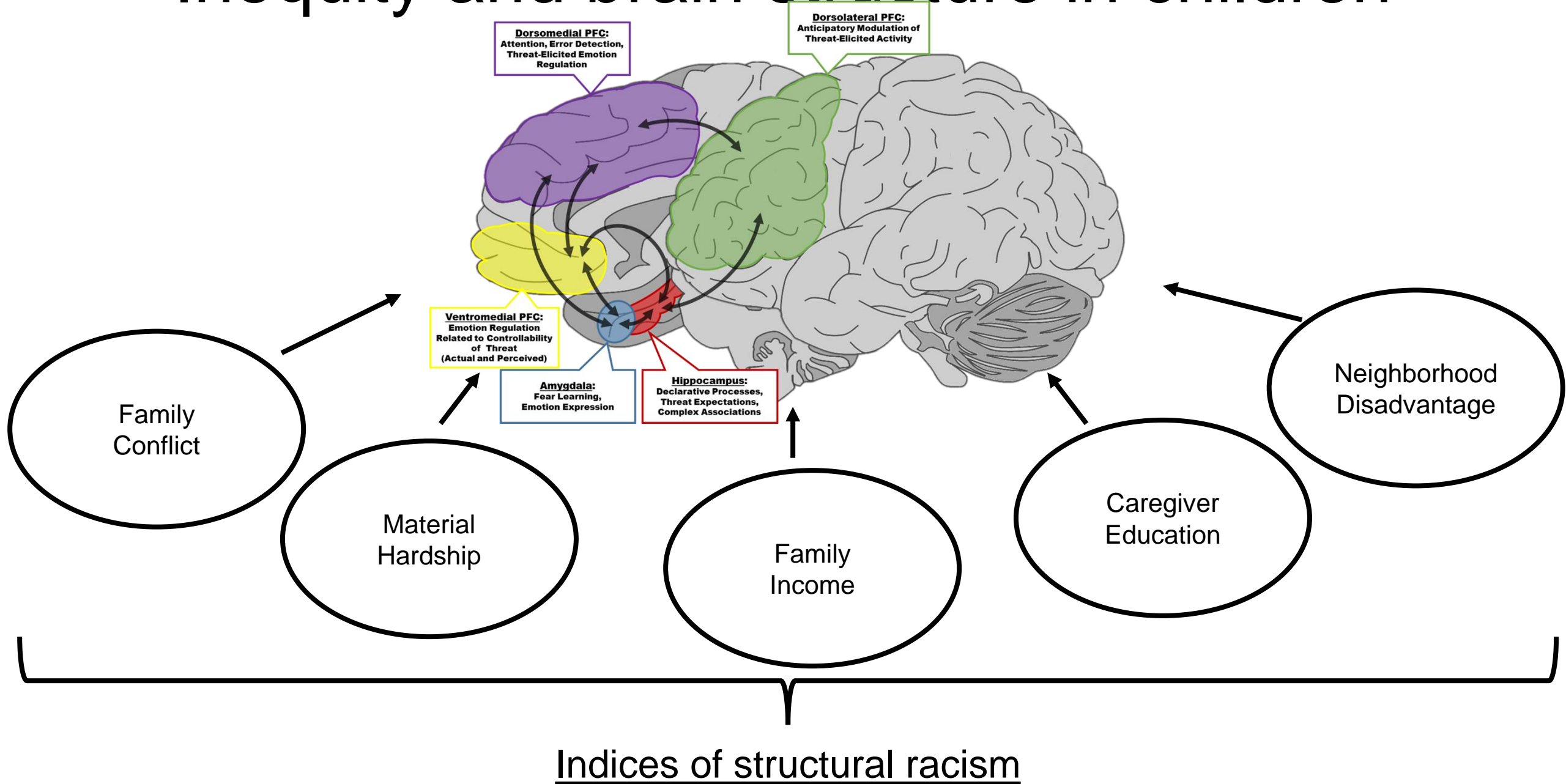


TABLE 1. Demographic characteristics of participants in a study of childhood adversity and brain structure

Characteristic	Total N	White American		Black American		Analysis		
		Mean	SD	Mean	SD	Statistic	df	p
		N	%	N	%			
Age (months)	9,382	119.03	7.50	118.82	7.26	t=1.09	9380	0.28
Gender	9,382					$\chi^2=5.86$		0.02
Male		3,989	53.1	934	50.1			
Female		3,527	46.9	932	49.9			
Parental education	9,373					t=33.15 ^a	2802	<0.001
Grade school		288	3.8	221	11.9			
High school diploma or equivalent		520	6.9	449	24.1			
Some college		1,054	14.0	436	23.4			
Associate's degree		907	12.1	314	16.9			
Bachelor's degree		2,490	33.1	237	12.7			
Master's degree		1,719	22.9	179	9.6			
Doctoral or professional degree		534	7.1	25	1.3			
Parental employment	9,121					$\chi^2=344.90$		<0.001
Not currently employed		409	5.6	342	19.0			
Currently employed		6,914	94.4	1456	81.0			
Annual family income	8,654					t=40.30 ^a	1985	<0.001
<\$5,000		88	1.2	225	14.2			
\$5,000–\$11,999		128	1.8	178	11.2			
\$12,000–\$15,999		97	1.4	93	5.9			
\$16,000–\$24,999		226	3.2	155	9.8			
\$25,000–\$34,999		301	4.3	194	12.2			
\$35,000–\$49,999		463	6.5	211	13.3			
\$50,000–\$74,999		987	14.0	221	13.9			
\$75,000–\$99,999		1,164	16.5	122	7.7			
\$100,000–\$199,999		2,611	36.9	153	9.7			
>\$200,000		1,004	14.2	33	2.1			
		Mean	SD	Mean	SD			
Neighborhood disadvantage ^b	8,840	90.30	23.91	105.94	22.25	t=-25.66 ^a	2706	<0.001
Family conflict ^b	9,363	1.96	1.94	2.43	2.01	t=-9.17 ^a	2786	<0.001
Material hardship ^b	9,296	0.30	0.89	1.01	1.49	t=-19.63 ^a	2166	<0.001
Trauma history ^b	9,043	0.48	1.10	0.67	1.02	t=-7.26 ^a	2965	<0.001

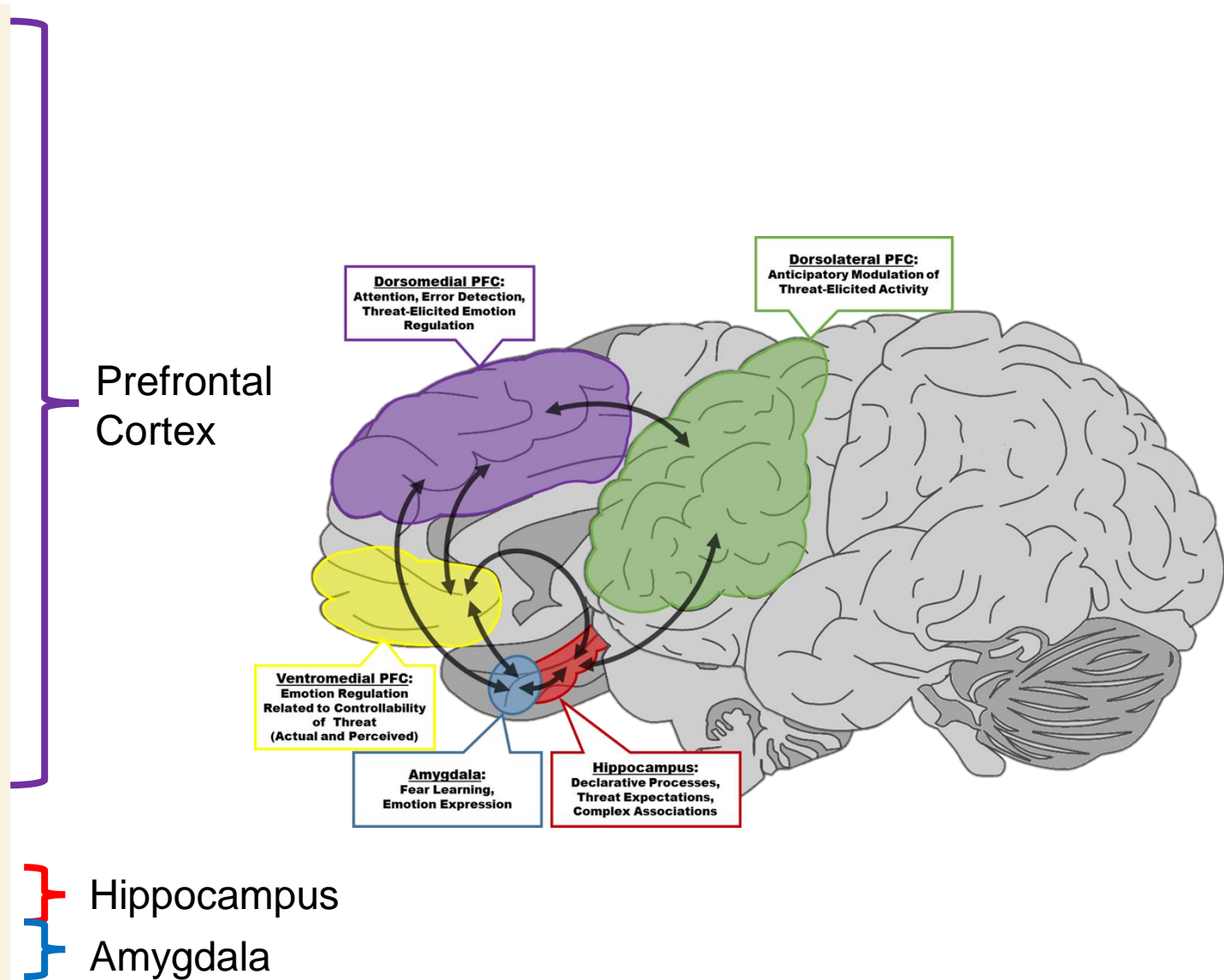
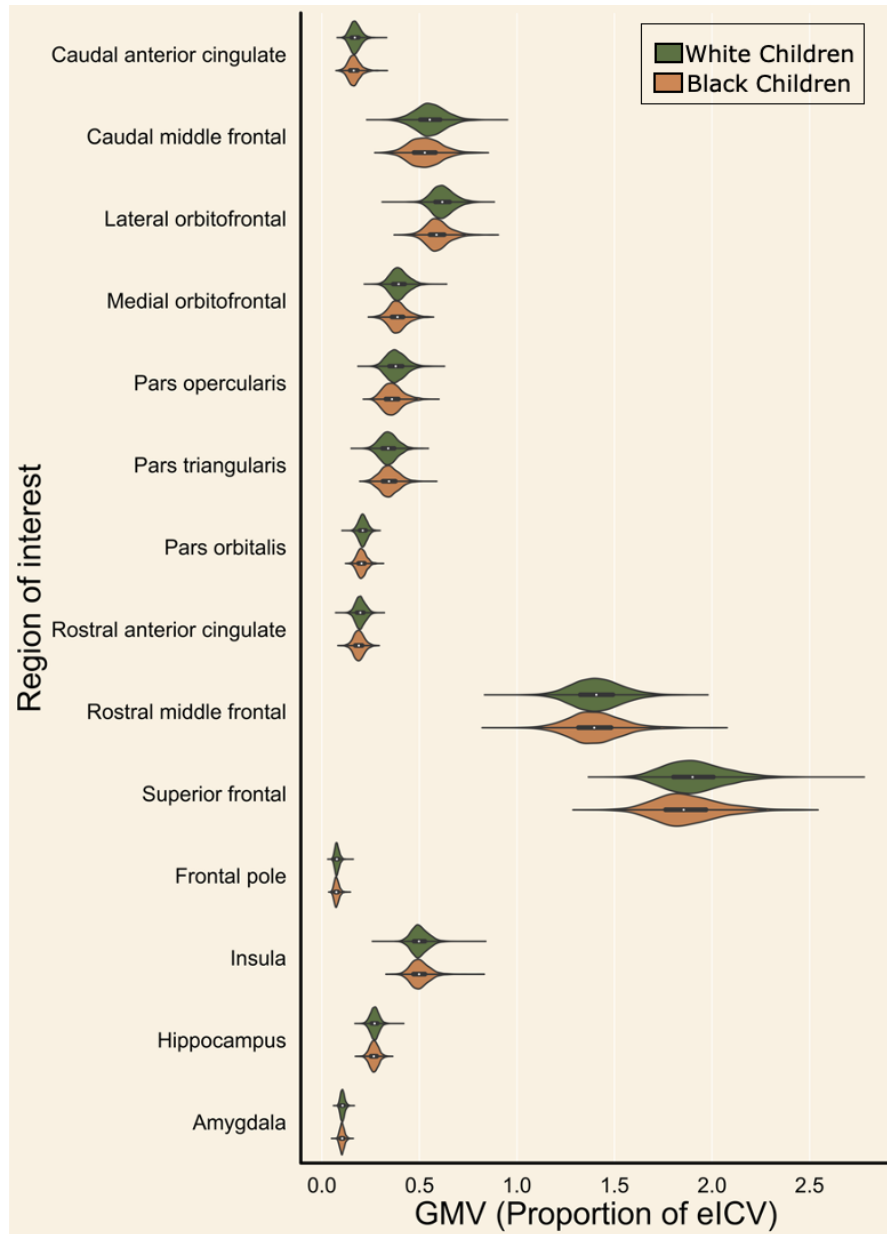
^a The test was corrected for unequal variances because of violation of Levene's test for homogeneity of variance.

^b Neighborhood disadvantage, family conflict, material hardship, and trauma history are four of the seven indices of adversity included in the statistical models. Neighborhood disadvantage was quantified using the weighted Area Deprivation Index sum score. Family conflict was quantified using the Youth Family Conflict Scale. Material hardship was quantified using the questions in the participant demographic screener. Trauma history was assessed using the Schedule for Affective Disorders and Schizophrenia for School-Age Children for DSM-5. See the Methods section for further detail.

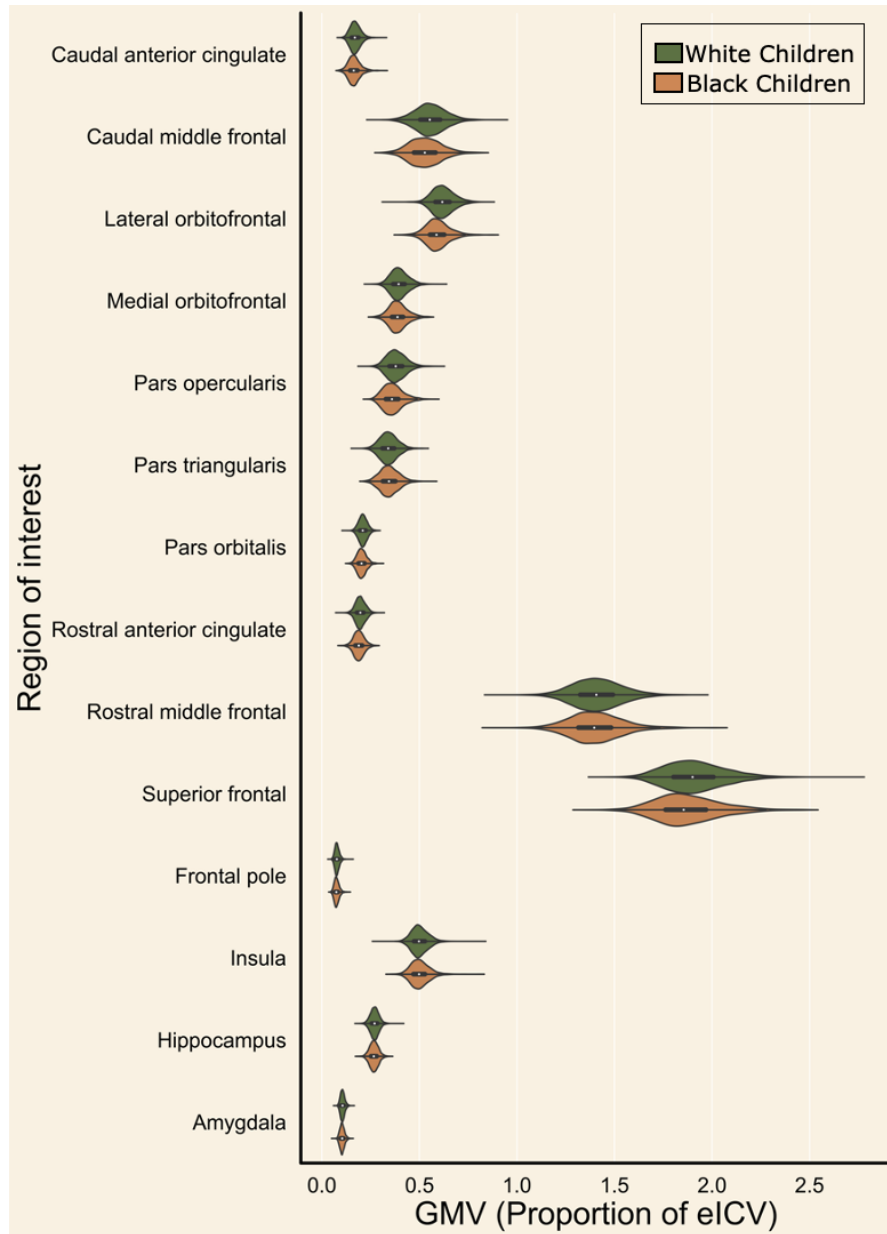
Compared to White children, Black children in the ABCD study:

- Have caregivers with **less education**
- Have **more unemployed** parents
- Have **lower family income**
- Come from **more disadvantaged neighborhoods**
- Experience **more family conflict**
- Experience **more financial hardship**
- Have **greater endorsement of traumatic events**

Inequity and brain structure in children



Inequity and brain structure in children



Prefrontal Cortex

The differences between Black and white children are *small*. But they are still *significant* and can have important effects on how kids might develop into adulthood.

Hippocampus

Amygdala

Inequity and brain structure in children

Table S2. Summary of linear regression analysis predicting PTSD symptom severity

Predictor	β	<i>t</i> -statistic	<i>p</i>
Parental employment	-0.03	-2.63	0.01
Parental education	0.01	0.52	0.60
Family income	-0.06	-4.13	< 0.001
Material hardship	0.10	8.46	< 0.001
Family conflict	0.04	3.58	< 0.001
Neighborhood disadvantage	-0.00	-0.09	0.93
Trauma history	0.26	23.61	< 0.001

Notes. $N = 7,623$. Participant's adversity exposure was significantly associated with their PTSD symptom severity, $F(7, 7623) = 132.06$, $p < 0.001$, $R^2 = 0.11$. PTSD symptom severity is an index created by summing twenty-five items assessing present PTSD symptoms from the full parent-reported K-SADS-5 diagnostic interview (NDA: abcd_ksad01).

Table S3. Correlations between PTSD symptom severity and GMV

Region	PTSD Symptom Severity			
	Before		After	
	<i>r</i> -value	<i>p</i> -value	<i>r</i> -value	<i>p</i> -value
Caudal anterior cingulate cortex	-0.03	0.004	-0.02	0.169
Caudal middle frontal gyrus	-0.01	0.203	0.01	0.546
Lateral orbitofrontal cortex	-0.02	0.142	-0.01	0.571
Medial orbitofrontal cortex	0.01	0.678	-0.00	0.751
Pars opercularis	-0.00	0.996	0.01	0.370
Pars triangularis	0.01	0.233	-0.00	0.803
Pars orbitalis	-0.00	0.893	-0.00	0.805
Rostral anterior cingulate cortex	-0.02	0.108	-0.01	0.376
Rostral middle frontal gyrus	-0.02	0.126	-0.02	0.151
Superior frontal gyrus	-0.02	0.033	-0.03	0.030
Frontal pole	-0.01	0.291	-0.01	0.607
Insula	-0.00	0.748	-0.01	0.318
Hippocampus	-0.01	0.476	-0.00	0.758
Amygdala	-0.00	0.930	0.01	0.566

Note: Bold values indicate $p < 0.05$. "Before" indicates gray matter volume (GMV) estimated from residuals of linear mixed effects models that included age, gender, scanner, and family relatedness. "After" indicates GMV estimated from residuals of linear mixed effects models that included additional terms for adversity metrics noted in the main text.

Inequity and brain structure in children

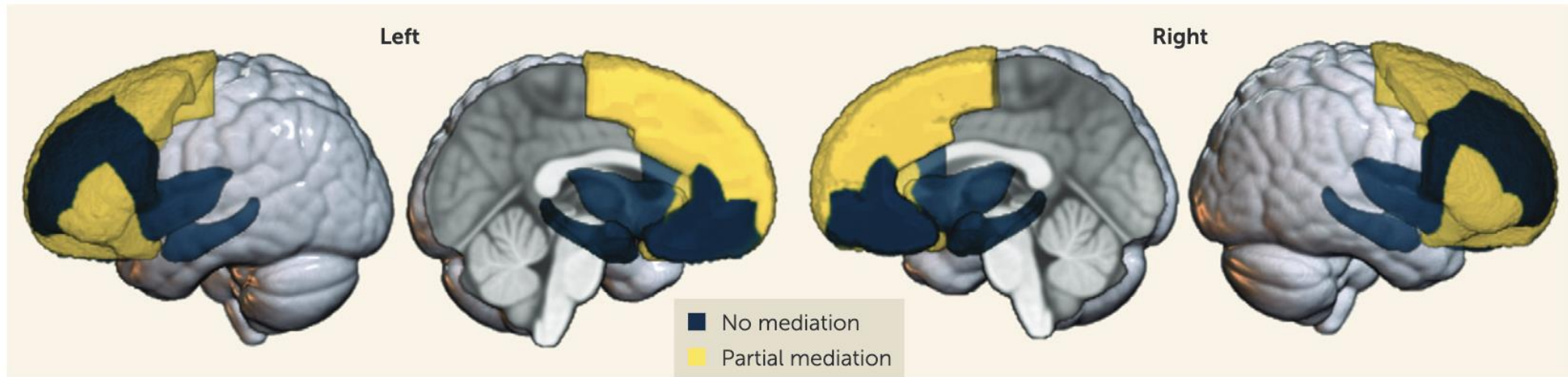
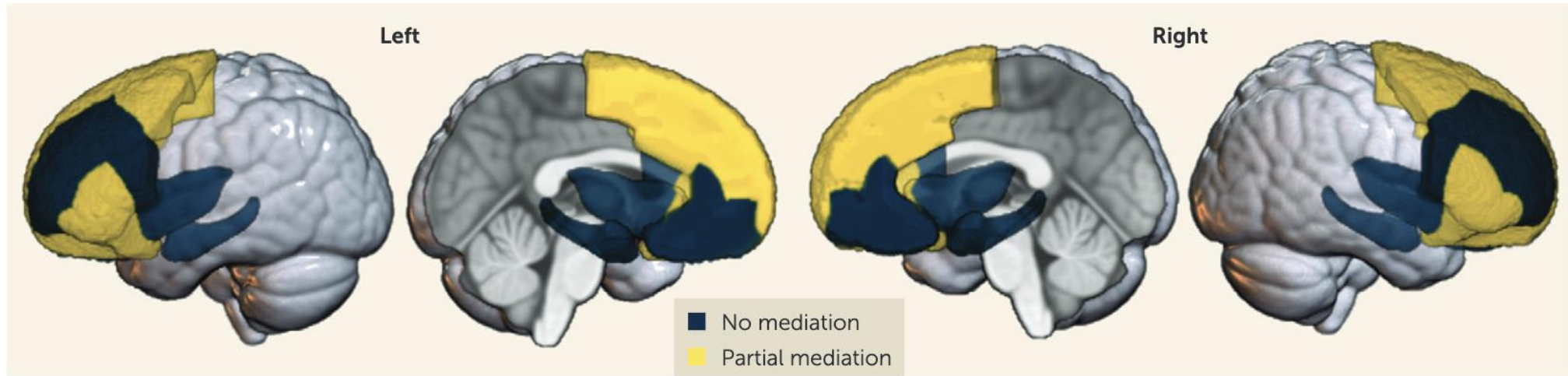


TABLE 4. Summary of parallel mediation analyses of race-related effects on gray matter volume accounting for adversity^a

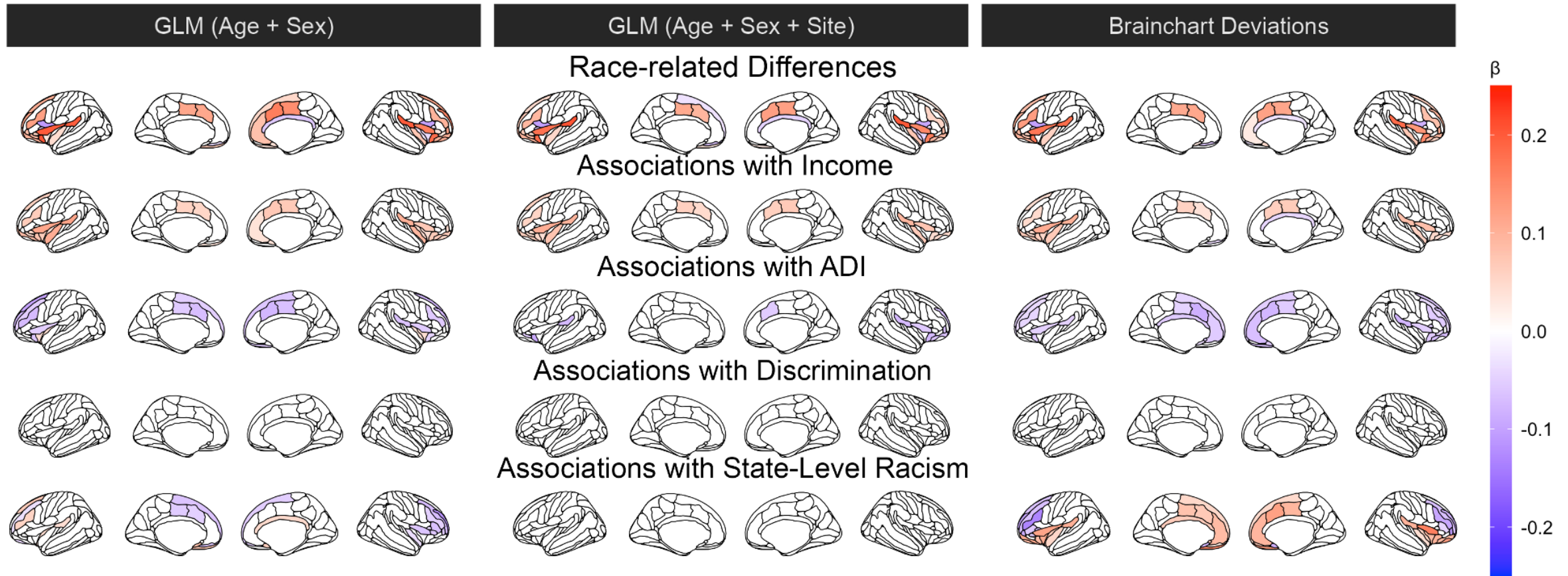
Region	Total Effect (c)	p	Total Indirect Effect (ab)	p	Direct Effect (c')	p	Percentage Mediated ^b (%)
Caudal anterior cingulate cortex ^c	-0.17	<0.001	-0.04	0.006	-0.13	<0.001	26.04
Caudal middle frontal gyrus ^c	-0.29	<0.001	-0.09	<0.001	-0.20	<0.001	30.58
Lateral orbitofrontal cortex ^c	-0.45	< 0.001	-0.03	0.034	-0.41	<0.001	7.40
Medial orbitofrontal cortex	-0.03	0.333	-0.02	0.287	-0.01	0.748	—
Pars opercularis	-0.31	<0.001	0.01	0.613	-0.32	<0.001	2.57
Pars triangularis ^c	0.13	<0.001	0.06	<0.001	0.08	0.02	42.42
Pars orbitalis ^c	-0.19	<0.001	-0.04	0.008	-0.15	<0.001	21.88
Rostral anterior cingulate cortex	-0.29	<0.001	-0.03	0.098	-0.27	<0.001	8.93
Rostral middle frontal gyrus	0.02	0.597	-0.09	<0.001	0.10	0.001	—
Superior frontal gyrus ^c	-0.20	<0.001	-0.10	<0.001	-0.10	0.003	50.76
Frontal pole ^c	-0.19	<0.001	-0.04	0.006	-0.15	<0.001	23.28
Insula	0.05	0.116	0.02	0.155	0.02	0.501	—
Hippocampus	-0.12	<0.001	-0.01	0.765	-0.11	<0.001	4.27
Amygdala	-0.14	<0.001	-0.01	0.582	-0.13	<0.001	6.67

Inequity and brain structure in children



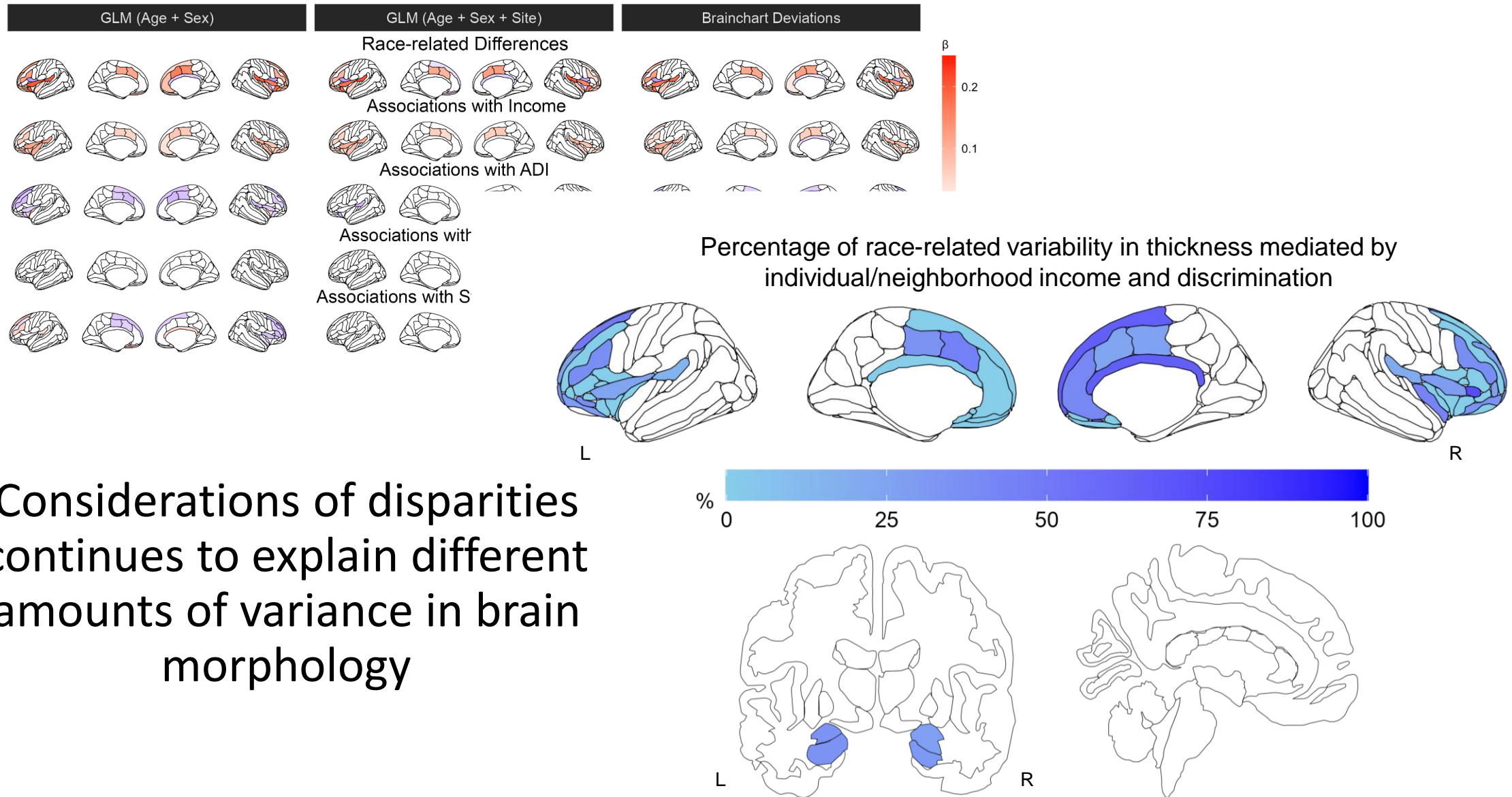
Structural racism changes the structure of brain regions important for responding to threat in children.

Inequity and brain structure in adolescence



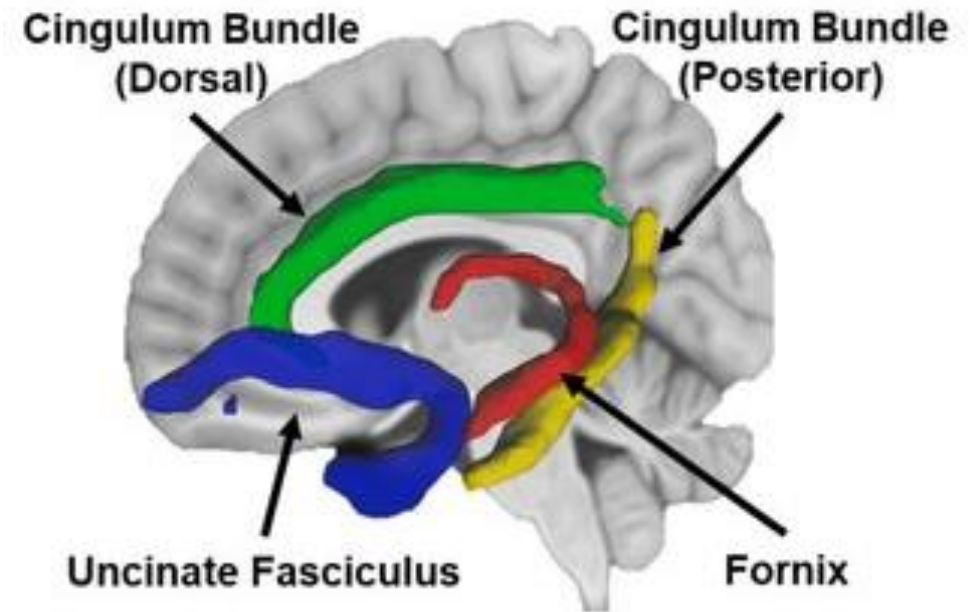
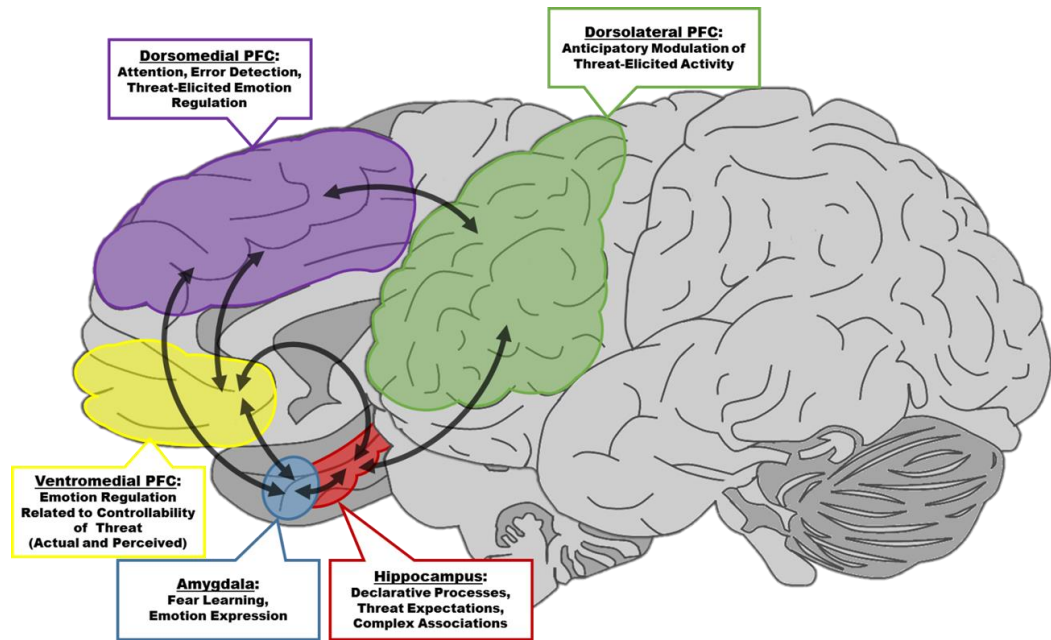
Cortical thickness in a subset of the same adolescents (11-12yo) show similar effects. Modeling choice impacts the extent of effects. Further associations with “deviations” from “normative” development

Inequity and brain structure in adolescence

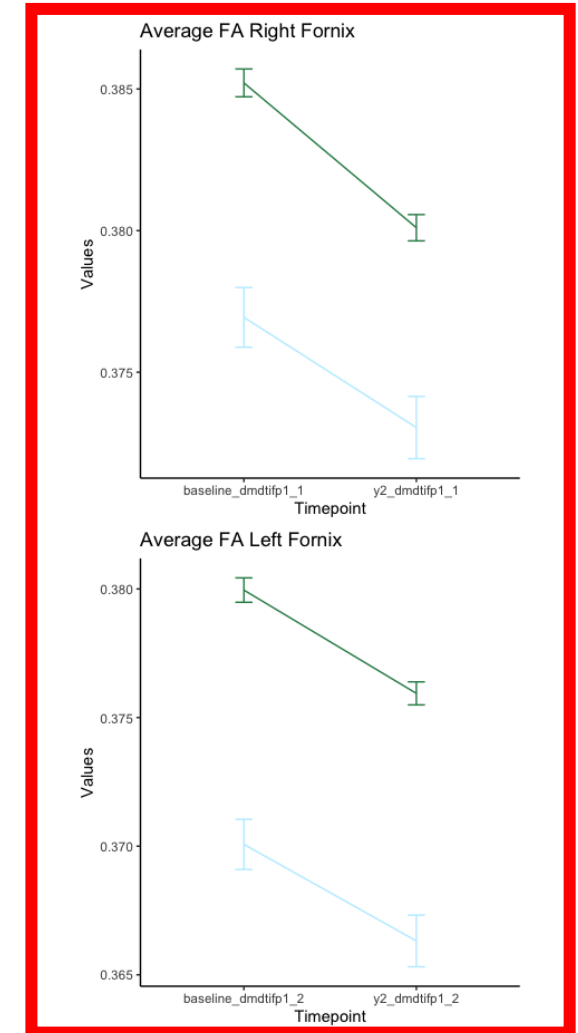
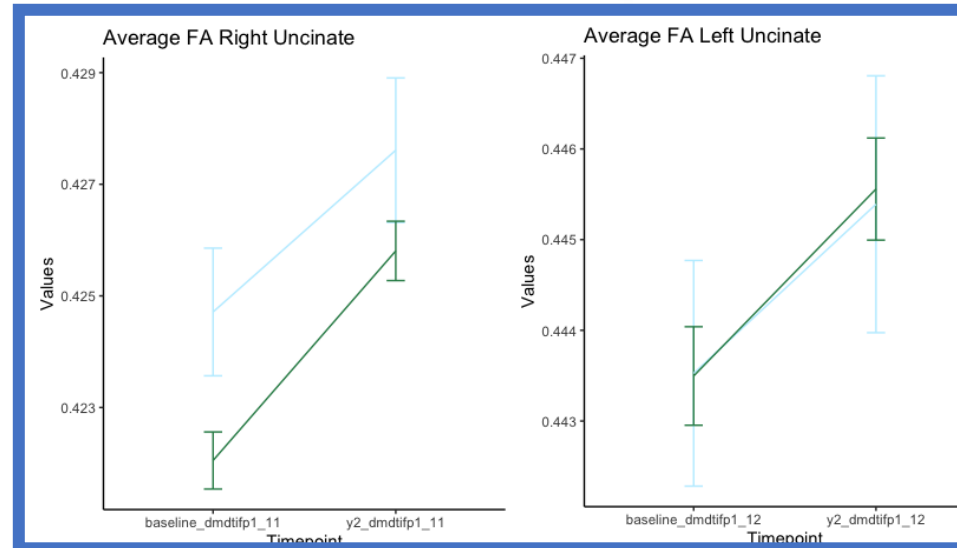
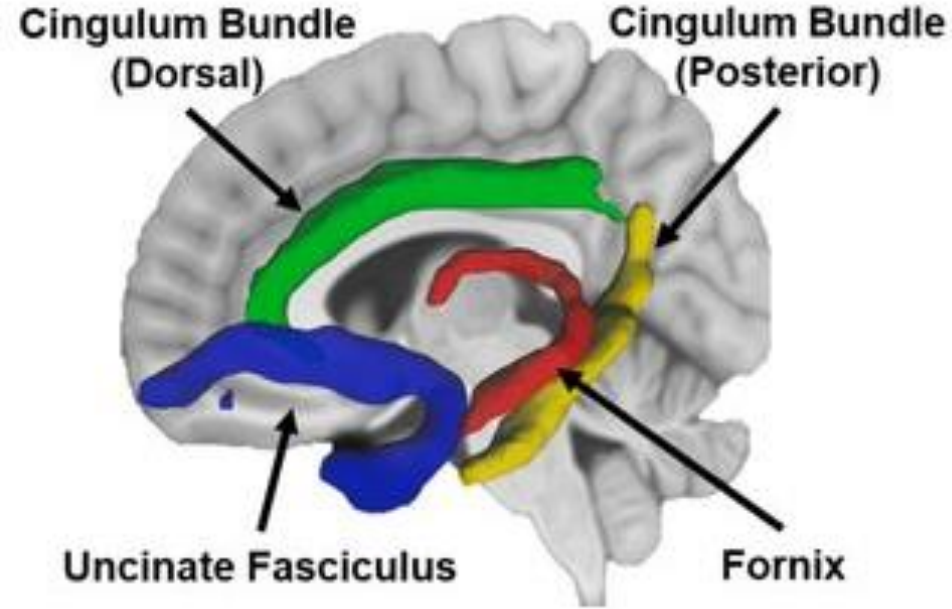
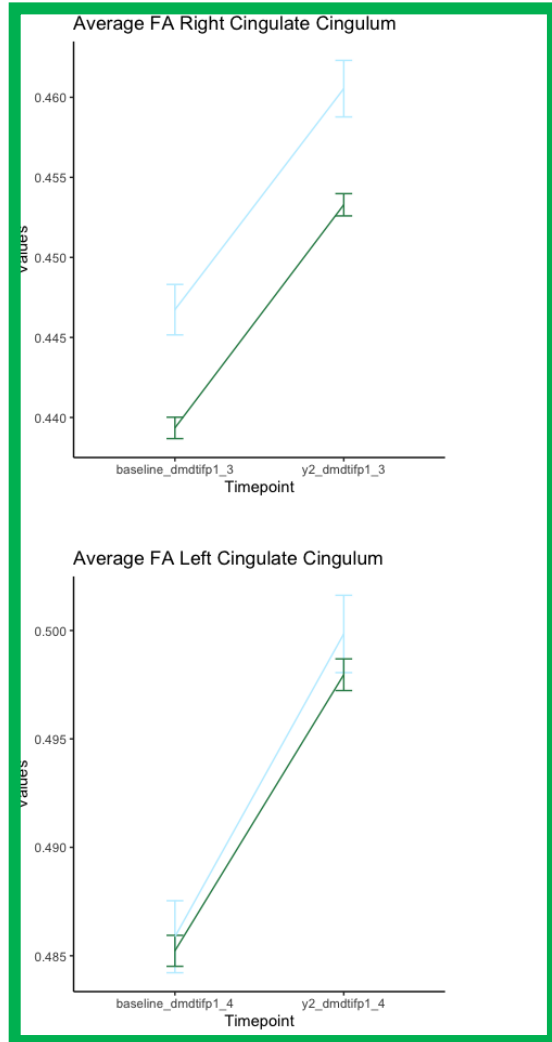


Considerations of disparities continues to explain different amounts of variance in brain morphology

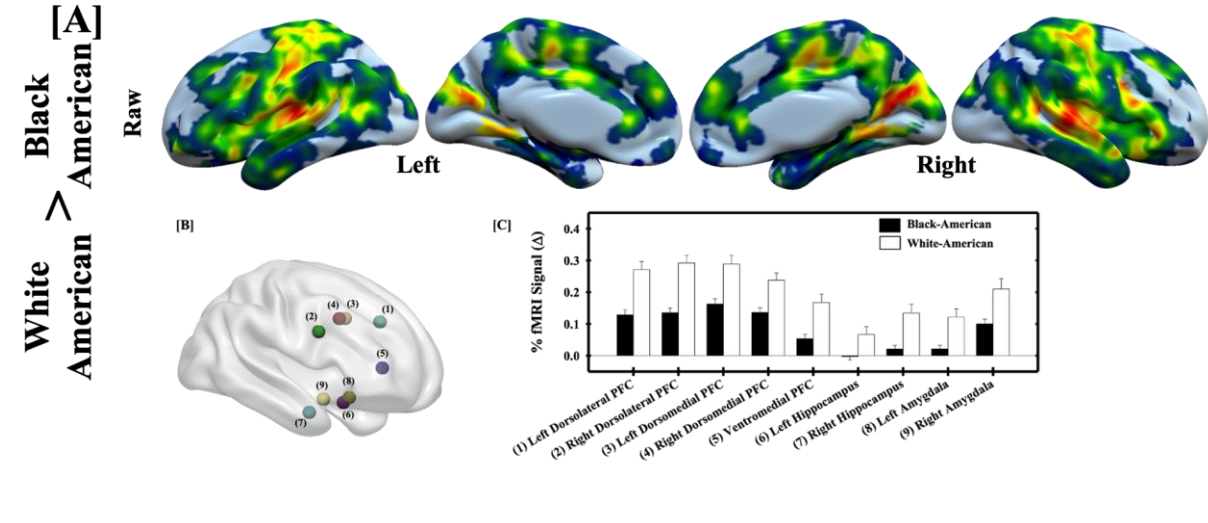
But structural differences may be modality specific



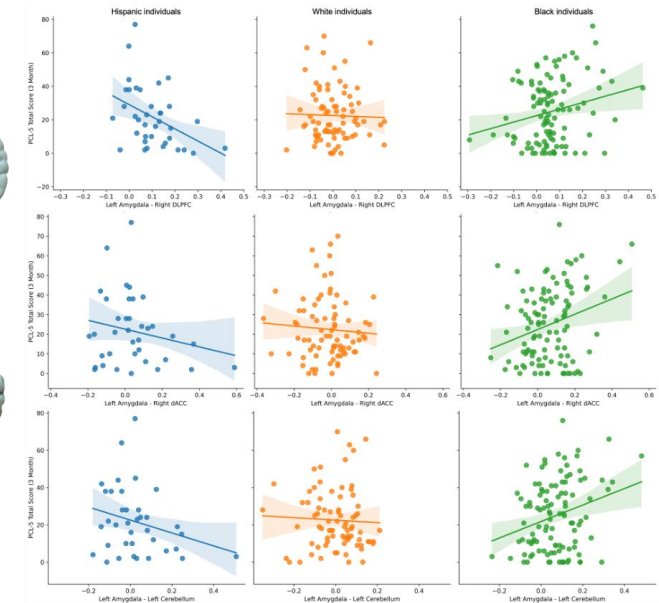
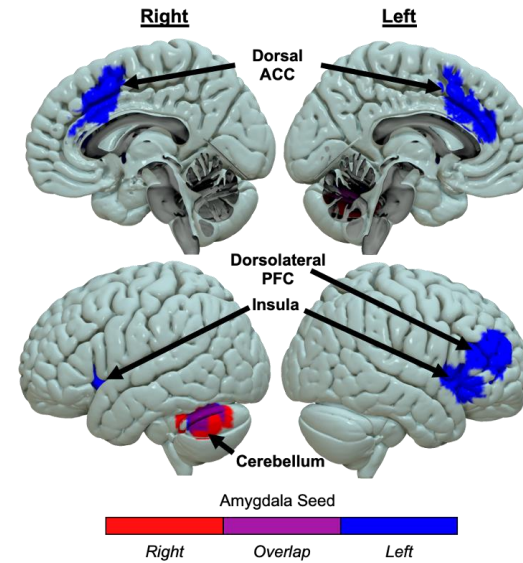
But structural differences may be modality specific



Potential long-term impacts



Blunted neurophysiological reactivity to threat in Black compared to white young adults (18-23) (Harnett et al., 2019, *NeuroImage*)



Differential predictive utility of resting-state fMRI of threat network for future PTSD symptoms (18-75) (Harnett et al., 2023, *Molecular Psychiatry*)

Compounding effects of structural inequities

1. Racial inequities contribute to altered structural morphology of threat neurocircuitry in children and adolescents.
2. Racial inequities during development contribute to blunted neural reactivity to threat in young adulthood.
3. Racial inequities contribute to differences in tonic arousal that are tied to PTSD susceptibility.

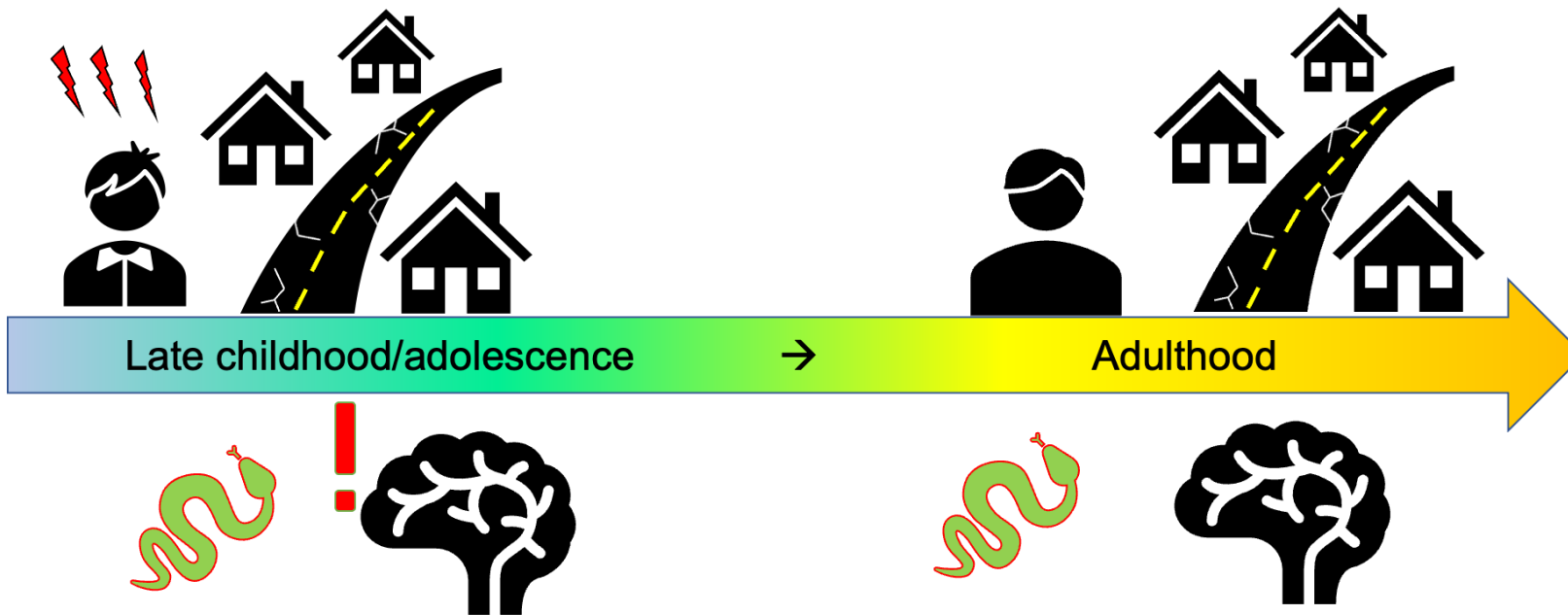
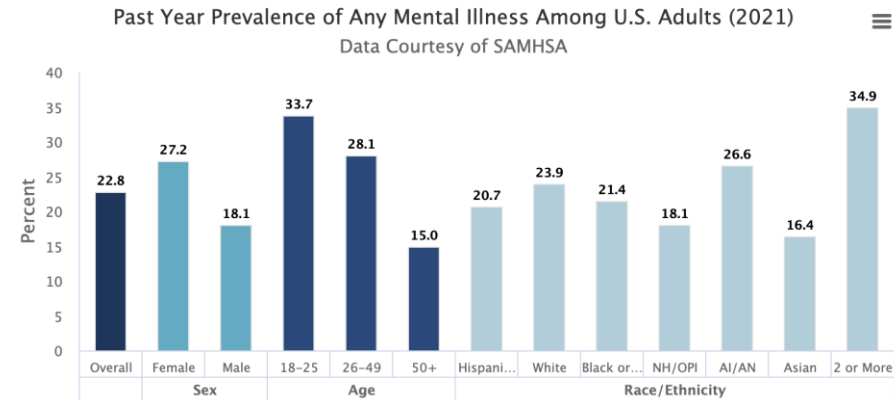


Figure 1



Acknowledgements



nharnett@mclean.harvard.edu



@nateurneuro.bsky.social



- E. Kate Webb
- Grace Rowland
- Samantha Wong
- University of North Carolina – Chapel Hill
- Samuel McLean

McLean Hospital

- Kerry J. Ressler
- Ressler Lab
- Nathalie Dumornay
- Sarah Hill
- Julia Merker
- Karlye Phillips
- Lauren Lebois
- Antonia Seligowski
- Lisa Nickerson
- Diego Pizzagalli
- Milissa Kaufman

Emory University

- Jennifer Stevens
- Sanne van Rooij
- Negar Fani
- Lauren Hudak
- Barbara Rothbaum
- Alex Rothbaum
- Rebecca Hinrichs
- Vasiliki Michopoulos

Funding:

- **UAB OVPED, Ford Foundation Predoctoral Fellowship, President and Fellows of Harvard College, F99NS105171, K00MH119603, Brain Behavior Research Foundation (NARSAD), K01MH129828, R01MH094757, R21MH106902, F32MH101976, K01MH102415, and U01MH110925**

Georgia State University

- Sierra Carter

UAB

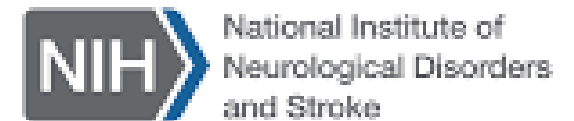
- David C. Knight
- Kimberly H. Wood
- Muriah D. Wheelock
- Amy J. Knight
- Edward W Ference III

Wayne State University

- Tanja Jovanovic
- Sterling Winters

Temple University

- Vishnu Murty



Data used in the preparation of this article were obtained from the Adolescent Brain Cognitive Development (ABCD) Study (<https://abcdstudy.org>), held in the NIMH Data Archive (NDA). This is a multisite, longitudinal study designed to recruit more than 10,000 children age 9-10 and follow them over 10 years into early adulthood. The ABCD Study is supported by the National Institutes of Health and additional federal partners *under award numbers U01DA041022, U01DA041028, U01DA041048, U01DA041089, U01DA041106, U01DA041117, U01DA041120, U01DA041134, U01DA041148, U01DA041156, U01DA041174, U24DA041123, and U24DA041147*. A full list of supporters is available at <https://abcdstudy.org/nih-collaborators>. A listing of participating sites and a complete listing of the study investigators can be found at <https://abcdstudy.org/principal-investigators.html>. ABCD consortium investigators designed and implemented the study and/or provided data but did not necessarily participate in analysis or writing of this report. This manuscript reflects the views of the authors and may not reflect the opinions or views of the NIH or ABCD consortium investigators. The ABCD data repository grows and changes over time.