EDITORIAL

Carine Minne and Annie Pesskin

Since the December 2024 conference issue of the journal on The Perverse Organisation: Turning a Blind Eye to Sexual Violence, the IAFP has held it's thirty-third conference in the magnificent city of Sydney, focused on Locating the Disturbance in Violent Offending: Self, System, Society. Every day in the news, we hear and read of more violence, and in the past six months we have all witnessed our fragile world further deteriorate into a manifest global "borderline" state, one trying to defend its "ego" structures while oscillating between integration and fragmentation. Different nations have been regressing into "paranoid-schizoid" functioning evincing highly polarised ways of seeing adversaries and allies. Cycles akin to a collective repetition compulsion, i.e. replaying trauma of past conflicts, leads to an escalation of acting out with explosive confrontations and horrific violence. Many regions are caught up in the transgenerational traumas of war. Manic defence responses abound in the shape of frantic resource grabs and escalatory militarism and desperate attempts at unifications such as Weimar+ or China-Russia, could be understood as defences against uncertainty. Looking ahead, stability hinges on whether global actors can enter "depressive positions"—tolerating ambiguity and integrating their shadows—rather than defaulting to splitting, projection, and destructive symbiosis.

Never has it seemed so hard to maintain our position of trying to rehumanise the dehumanised, working with our patients and prisoners, when the global backdrop is so infested by violence.

In this issue, the first article by Annie Pesskin brings us back to our true roots in the womb where it all begins and how we can contribute to making it better again. Having listened attentively to talks at the IAFP day conference in March 2025, Shadows, Projections and Embodied Roles, Pesskin draws a powerful parallel: just as the placenta forms a biological bridge between mother and foetus, therapy, and all meaningful creation, unfolds in a liminal, co-created space. She refers to Siri Hustvedt's contribution who emphasised that identity and creative acts begin with a relational "we" and not isolated "selves". This relational foundation parallels Winnicott's argument that a baby, and by extension a self, emerges only through interaction with a nurturing caregiver. Over time, we internalise a network of "placentas": caregivers, teachers, friends, lovers, each scaffolding our growth and emotional regulation. Pesskin and her forensic colleagues highlight how early relational failures such as abuse and neglect can damage emotional co-regulation. These early malfunctions of the placental space can lead to hypervigilance, shame, and a drive to control or isolate. Left unregulated, shame can fracture the sense of two-in-oneness and can become a psychical placental rupture, a

wound so profound it later manifests outwardly in violence and scapegoating. Therapeutic repair resides in holding shame and vulnerability in a shared relational field and by reactivating placental possibilities in the therapy room, so that trust in minds or even in others' minds may be restored. From this renewed capacity for empathy and connection springs peace, cultivated like a fragile yet potent seed.

Marcus Evans' article on boys and identity explores the concept of psychic skin as an echo of the essential early caregiver—child bond and how inconsistent holding or emotional neglect prompts boys to build defensive "second skins" via stoicism or emotional detachment: brittle facades masking inner vulnerability. Maternal gaze and touch integrate sensory and emotional experience but when this is disrupted it can undermine mind—body cohesion, leading to disconnection between thought and feeling, often seen in withdrawn adolescent boys. Evans refers to Bion's model that highlights caregivers as emotional "containers", converting raw distress into tolerable mental content. Without this, boys struggle to think about feelings, resorting to rigid, action-based defences instead of emotional processing. The introduction of a third adult, often the father, can prise apart the mother—child fusion, signalling that attention can be shared. This triangular structure fosters symbolic thought, internalised boundaries, and a reflective capacity.

Absence or inconsistency here can force boys into rigid roles such as joining gangs or substituting online influences as surrogate authority figures, foregoing true emotional separation and boundary formation. Their internal world often becomes a battleground between unmet dependency and a longing to appear invulnerable, whilst shame around masculinity can lead to disavowal or a type of rigid bravado. Online platforms can either substitute for missing relational structures or reinforce defensive masculinity by prioritising bravado over vulnerability. Effective support gives boys time and space to mourn past shortfalls, separate emotionally, feel truly seen, and craft personal myths of manhood, enabling a shift from rigid withdrawal or bravado to inner flexibility, emotional self-regulation, and meaningful engagement in relationships and life.

The next article by Stuart Stevenson adds theoretical and practical scaffolding to clinical work in this area of masculine identity formation specifically with black male adolescents who have offended violently. Stevenson fuses concepts of a "racialised primal scene" and the absence of the black father's "paternal function" with Esther Bick's concept of psychic skin to forge a powerful theoretical scaffolding. He introduces the concept of a metaphorical "melanised psychic skin" as a container as it applies to racialised subjects, black- and brown-bodied people, that enables them to manage racialised projections and projective identifications, mitigating self-destructive enactments that can take them into the criminal sphere. He refers to the omission of the symbolic father prevalent in both clinical discussion and theorising, while specifying the importance of establishing a paternal function of the Black/ Indigenous father when working with racialised/colonised subjects:

His absence is symptomatic of colonisation, slavery, and the attack on African and indigenous family structures as a deliberate and calculated strategy of the coloniser and enslaver that, via the intergenerational transmission of trauma, is still relevant today.

Stevenson meets his ambitious task of "establishing a decolonising clinical framework and the environmental essentials".

The next article by Bijou Patel examines what the barriers are to the application of attachment-informed thinking in secure forensic settings. Attachment-informed care, rooted in Bowlby's model, emphasises understanding patients' early caregiver relationships (secure or insecure) to enhance engagement, risk assessment, and treatment in forensic settings. Insecure attachments—avoidant, ambivalent, or disorganised—are highly prevalent among forensic populations, often stemming from childhood neglect or trauma. These attachment patterns impair mentalization, emotional regulation, and trust in caregivers, contributing to violent behaviour and challenges in therapy. Embedding attachment thinking can turn the institutional environment into a secure base, fostering therapeutic alliances and reducing violence. Assessments like the Adult Attachment Interview (AAI), or selfreports (e.g. Experiences in Close Relationships (ECR) Scale) help personalise care—though tools remain underdeveloped in forensic contexts. The barriers identified are as follows: first, understanding and training gaps—staff often lack training to translate attachment theory into practice. Second, assessment limitations—AAI is resource-intensive and self-reports may miss real-time relational patterns. Third, staff's own attachment styles such as caregiver insecurity can hinder reflective practice or lead to burnout. She suggests reflective supervision and team-based reflective practice to enable staff to understand countertransference and maintain relational stability as well as clear frameworks (e.g. the See, Think, Act (STA)) needing to be paired with training in mentalization and communication skills plus improving transition times, both at admission and discharge, through graded pathways and participatory planning as these can buffer insecurity and support recovery. To succeed, implementation requires training, assessment tools, staff support, and coherent policy frameworks to create a true relational ecosystem.

The article by Cherrington, Milne, and Minne is a description of an audit carried out within a high-secure hospital setting in order to examine the demographics and mental health histories of homicide and attempted homicide offenders as well as details of the victims. The thinking behind this was that the rates of re-admissions of these mentally disordered offenders might have risen over the years as long-term continuity of treatments may have diminished. This is Part One of the audit and Part Two (to appear in a future issue) will examine a similar cross-section of patients from twenty-five years ago. The authors took a cross-section of patients in the hospital on one particular day in 2021 and the audit included looking at the patients' previous mental health histories and contact with services prior to the catastrophic offending. It is the authors' view that shorter admissions with regular changes in carers

or treaters are likely to aggravate the risk of relapse and re-admission, leading to more victims and further suffering for all involved. It is very interesting to read it next to Patel's article on attachment-informed thinking in secure forensic settings as both articles are deeply linked.

In Victoria Maringgele's literature review of sexual sadism, she distinguishes between consensual sadists who retain guilt and moral awareness on the one hand, and criminal sadists who lack this conscience on the other, enabling pathological harm. A further distinction is made between two types of sadistic offenders: first, non-perverse offenders (often with borderline organisations) acting impulsively to release primitive aggression tied to fragmented maternal introjects with their sadistic behaviour being chaotic, impulsive, and linked to identity fragmentation. Second, truly perverse sadists who maintain long-held sadistic fantasies and display controlled, ego-dystonic behaviours, isolating their destructive urges from their everyday self—a split that sustains their dual lives. A true perversion reflects a structured internal world containing sadistic fantasies, defended from shame by a split self, whereas borderline sadism erupts impulsively from fragmented early internal objects.

Sexual sadism arises not as a simple preference but as a psychically driven defence against vulnerability, developmental trauma, and identity fragility manifesting in distinct clinical groups depending on the structure and resolution of these internal conflicts. She concludes that sadistic sexual offenders do not always fit neatly into categories such as perverse or antisocial/narcissistic/borderline personality. Perhaps diagnosing such individuals is helpful for assessing risk, but it may also be a desperate attempt on the parts of clinicians to understand who or what they are.

Nava Ben-Or's article describes mass atrocities with extreme sexual violence, as deliberate acts designed to terrorise, with those acts targeting not only individuals, but also the collective psyche of a community, shattering our shared sense of safety and identity. Drawing on Kantian ethics, responsibility typically requires individual autonomy but when violence is committed en masse within a destructive ideology, holding members accountable individually becomes complex. The author proposes joint responsibility whereby participation in the terrorising group equates to shared accountability. Unlike individual rape, wartime sexual violence is systematic and symbolic with the aim of destroying a community's coherence and cultural identity. Sexual violence in conflict is strategically orchestrated to destroy dignity and community solidarity. This is not an individual pathology but rather an instrument of collective control and cultural destruction. Such sexualised violent atrocities occurred on 7 October 2023 in Israel. Current legal frameworks focus on individual autonomy and crimes against individuals but the author argues for a legal and moral reckoning that recognises rape, public humiliation, and forced nudity not just as personal harm but as systemic weapons targeting group identity, autonomy, and survival.

In our regular column, "A day in the life of ...", we asked a medical doctor working currently in Gaza to describe the conditions there presently. It is a truly devastating depiction of working and living under fire. The author requested to remain anonymous for reasons of safety and we are truly grateful to them for taking time out to convey to us and our readers what daily life is like there currently.

Ariel Nathanson dazzles us with his review of the global phenomenon that the Netflix series *Adolescence* became and it is very interesting to read this and relate it to Evans' article in this issue on boys and identity, as well as linking this to new online safety rules for children that became operative in the UK at the time of writing this editorial. It remains to be seen whether this new legislation will provide protection and how other countries will address these problems of harmful online content that affect not only children but adults too.

We have the honour of publishing an obituary to the Reverend Peter Timms, an outstanding man who contributed so much to prison welfare and trying to get society to see how important it was to look after the prison population, given how many are so traumatised, which led to their offending.

Anne Aiyegbusi evokes memories of the thirty-third IAFP conference that was held in Sydney in May 2025; and we have included a flyer of the thirty-fourth conference, due to be held in Malta in 2026.

As always, on behalf of all our contributors and readers, we would like to thank the patients and prisoners who continue to inspire us and help us towards a better understanding of their plights so that everyone can benefit via improved prevention. We thank our mentors and colleagues and appreciate the support from each other during these alarming times. As we wrote in the December 2024 issue, we keep up the hope that the appalling suffering of all those caught up in apparently intractable conflicts will ease and that those in leadership positions can find again the art of listening and of being heard, together. Only then is there a chance for the dehumanised to be rehumanised.

Carine and Annie would like to thank you all for your support over the years in our roles as editor-in-chief and managing editor. We are delighted that succession is in place and are sure that our journal will therefore continue to thrive.