Adolescence, should we turn it into a disease?

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On Thursday, June 3rd 2010, the Association of the Revue heard a presentation by Dr. Oliver REVOL, a pediatric psychiatrist and chief of Neuro-Psychiatry at the Pierre Wertheimer Neurological Hospital of Lyon. We shall complete our report on this fascinating conference by publishing an interview with him in our next issue.

The increasing number of questions posed by problems arising from the behavior of teenagers make it logical for us to ask whether or not we should consider adolescence to be a disease. The answer is obvious: of course not! And we can affirm that response with empirical evidence. Most adolescents we see in consultation do well without having any need for psychiatric assistance, an observation confirmed by a French Ministry of Health 2002 study that found only one out of eight adolescents suffered from mental disorders. This, of course, clearly implies that seven out of eight enjoy good mental health.

If adolescence is not a disease, it could become one if friends and families of teenagers fail to understand the profound changes these young people are passing through or misinterpret the manifestations of this crucial life stage.

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But it is just one life crisis among many, including birth, early infancy, and mid-life.

If the task of education is to provide students access to autonomy, to educate students ex ducere, by leading into the fullness of life, adolescence is the final stage.

A psychological passage, unleashed by the physiological stage of puberty, adolescence is clearly a “critical” moment in which teenagers must survive a transformation of their complexes focused on:

- Rediscovery of the emotions of their childhood, like anger against the parent of their own sex and attraction toward the parent of the opposite sex, suffering all the sensations of guilt these feelings arouse.
- Multiple changes that are imposed upon them, physical, of course, but intellectual as well as they gain access to formal thought patterns that suddenly enable them to debate as equals with the adults around them.
- Losses, grief for the lost past, for their childhood body … This grieving stage manifests itself by teenagers turning inward, losing interest in school, free time, and social relations, all of which find closure only when the youngsters regain enough energy to treasure the memory of their childhood. It is essential for family and adult friends of teenagers to respect the privacy of adolescents passing through this stage and never to intrude upon the grieving process.
- Conflict between identity and identification. Before becoming adolescents children grow up by trying to resemble the parent of the same sex. But to construct their own identities, adolescents must disengage themselves from parental images, a challenge that is always upsetting because it demands they renounce the life that they loved and miss profoundly, especially if there are no objective reasons for rejecting their parents. This explains the paradoxical aggressiveness of children who have been particularly cherished, because they were adopted or suffered from chronic illness. As Boris Cyrulnik put it metaphorically, “Children who can find nothing bad to say about their parents must have lived a life in a gilded cage from which they can escape only by using violence.” Knowing this, we can comfort certain distraught parents by telling them, “The reason this stage is so painful is that your children really love you.”
- Feelings of uselessness that arise when teenagers realize that, in spite of certain areas of physical, intellectual, and sexual competence, they still don’t have the power to make important decisions.
Adolescence is a crisis like many others, but it is much more noticeable than the rest

The manifestations of adolescence are particularly striking.

- **Opposition or being negative**
  Parents frequently complain that adolescents are negative and it is our task to explain to them that it is normal, desirable, and, in fact, necessary in triggering a teenager’s essential passage through disengagement. In this connection, it is always edifying to identify for the teenager’s loved ones that opposition obeys Archimedes’s Law: the more parents insist on a point, the more teenagers will resist it. They decide, more or less consciously, “to choose a sore spot and push where it hurts.” That explains why the worst fights are about school.

- **Problems with mood swings**
  These physiological moments of sadness are universal but poorly understood by both by adolescents and their families. They are a component of the normal grieving period that young people go through and must be distinguished from depression. These mood swings vary widely but they are always difficult for parents to comprehend. Teenagers may become bored or irritable and their asthenia, both physical and emotional, will annoy and perturb their parents, whose consternation psychologists can soothe by helping them to understand their children’s puzzling behavior. Their stubborn, even aggressive attitude, reflects their anxiety about the changes in the rules of life that seem to confront them, proceeding warily over strange new terrain (“fools rush in where angels fear to tread...”). At this stage, their peevish and negative attitude towards family members is almost a sign of good psychological health, operating in the same way as physical and psychic fatigue as a protection against the frightening new sexual and aggressive impulses invading their persona. (“Rather than risking the commission of some grave or reprehensible act, it is better to do nothing at all.”)

A STAGE VERY MUCH “OF THE MOMENT”

Every type of adolescent behavior should be re-examined in the light of sociological factors:
- adolescence used to last for 10 years; now it persists for 25!
- people obey rules far less scrupulously today than they did in the past (less and less do people in office, including prime ministers and presidents, set a good example by living up to respectable standards of conduct);
- the framework of society seems to be crumbling under the attack of lawlessness, chronic unemployment, and AIDS;
- our culture has become “adolescent-centric” setting up teenagers as role models. Adolescence thus becomes a model for a society based on individualism, ultra-liberalism, and the “economic” to the detriment of the symbolic.
Finally, teenagers know that this stage of their lives, there is only one certainty: the ties that bind them to their parents are indefectible. Renouncing a comfortable, reassuring relationship to enter a perilous world is difficult for the most fragile adolescents who, like Peter Pan, never want to grow up.

STRATEGIES TO DEAL WITH THE CRISIS

Most adolescents find methods for dealing with this new life stage all by themselves. They begin a process of “logical introspection” to help them tame the surging impulses within. Adolescence is an age of narcissistic preoccupation pushed to the limit, a time of prolonged gazing into mirrors, of attempts to regain control of their bodies. Powerless to control a period of faltering growth or confused by the appearance of sexual characteristics, they may attempt to regain control by changing their appearance with personalized facial piercings, tattoos, or even scarring. With brilliant coloring or extravagant hair styling, they can proclaim their independence from the previous generation and, at the same time, affirm their control over their own bodies. Parents should re-examine such behavior in this light, never, of course, openly approving it. They may even, if it seems advisable to inform their children of possible risks, or give advice, but never issue warnings because that might push an impressionable teenager into a retaliatory act of arch-provocation.

Identification with a group is a second step in the passage through adolescence. After having studied themselves scrupulously, teenagers may, at length, open the hatchways and take a look at others. Their belonging to a group, easily recognized by their choice of music or clothing, is a strong and reassuring sign. It means that achieving autonomy and disengaging themselves from childhood ties is on the march. And so much the better if these new codes are far different from those endorsed by their parents, provided the youngsters continue to respect the fundamental values of their families.

Finally, adolescents may deal with this difficult period by “acting out” with bursts of verbal violence and door slamming, sometimes accompanied by uncharacteristic risky activities like extreme mountain biking and snow boarding that have to be lived out like other anti-depressive activities including searching for immediate gratifications that break the daily routine, give new sparkle to life and, above all, offer a new sensory perspective that allows adolescents to avoid the painful process of thinking.

WHEN ADOLESCENTS HAVE NO COPING STRATEGIES, THIS PHASE OF LIFE MAY BECOME PATHOLOGICAL

Although most adolescents adopt successful adaptive strategies, others are unable to find in their personal psychic armament or in the reassurance
of their loved ones, a capacity for coping. These are the ones that need to discover some way to spare themselves the worst problems of adolescence.

And when teenagers rely primarily on avoiding tactics they slip into a pathological state. Some may confront the law with multiple offenses or try evasion by fugue, running away from home, being frequently absent from school or even develop a school phobia. Others may struggle with obsessive-compulsive thoughts, with peaks of delirium or with their sexuality in a kind of mental anorexia. Still others may attempt or succeed in killing themselves, making self-destruction, with 1000 suicides per year, the second greatest cause, after motor vehicle accidents, of mortality of 15–25 year-olds in France.

When teenagers show signs of inability to cope with the problems of adolescence by themselves, they should receive a prompt psychiatric evaluation.

SOME ADVICE ON HOW TO DEAL WITH ADOLESCENTS

Even before the first consultation, family members should learn as much about the dynamics of adolescence as possible. Family members can best deal with teenagers by using certain simple techniques that establish a climate of empathy. And these same strategies will continue to be useful as the teenagers mature.

- **A necessity**: adaptation.
- **A principal**: Some problems are serious, others are not. Health, safety, social integration, and respect for family values are vital. Matters that are not serious are the way teenagers look, the condition of their rooms, their participation in household tasks, their grumpiness in the morning, and their failure to be diligent with their schoolwork.
- **But two attitudes are highly desirable**: loving firmness and empathy in its literal sense of suffering together as expressed by the understanding remark, “I feel your pain.”
- **One imperative**: to remember. Parents should remind themselves that they too had to find their way through the tricky road of adolescence with all its roadblocks and false routes and they survived the trip successfully without mortgaging their future.
- **One mission**: for parents is to start reassuring their children as soon as the first signs of adolescence appear. They should have foresight, and always make themselves available, and always be coherent. They should accompany their teenagers along the adolescent road until they achieve autonomy.

Finally they should remember that adolescence is a passage, one that is necessary and that everyone must make, and that it even a “normal” passage is difficult but indispensable
in finishing the organization of the psychic life of the future adult\textsuperscript{10}. This is not the stuff from which diseases are made!

There are no well-balanced adolescents, there are only balancing acts.

REFERENCES