

RESTLESS ADOLESCENCE AND PSYCHOPATHOLOGY: BETWEEN NEW WAYS OF BEING AND NEW PSYCHIATRIC PSYCHOPATHOLOGIES

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SUMMARY

The article addresses the emergence of new ways of expressing adolescent discomfort, ways that are consequence of a new way of functioning, of thinking and of being completely different from that which has been studied to date from Psychopathology. This raises profound questions which lead to rethink both the diagnostic equipment of the therapist, his setting and the way to develop the therapeutic process. The article proposes some keys to understanding these emergencies and, on the basis of the experience matured, some guidelines for intervention.

Key words: adolescence - parental abuse – hikikomori - violent adolescents

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INTRODUCTION

The transition to adolescence, where the hopes and sorrows of a growing generation are stirred, points out to us new ways of suffering. Accustomed to the canons of classical psychopathology, we risk feeling lost in the face of phenomena such as the filio-parental violence and the social withdrawal. Yet both seem to have become the new way for adolescents to express and create discomfort. It is likely that in the future more and more psychiatrists and psychotherapists will have to deal with these issues. What we want to highlight even more is the fact that these phenomena, so different and distant, depictions of an adolescent discomfort that is expressed in many other forms, offer us an insight into the adolescent mind that's completely new and different from what we have been accustomed to dealing with until recently. A mind that lives and thinks differently not only for contents and values, something the clashing generations have been accustomed to for ages, but for the very way of treating and processing information and elaborating life experiences.

FILIO-PARENTAL VIOLENCE

Filio-parental violence or "parental abuse" is something very different from those sporadic violent conducts that have characterized intra-family dynamics since the family exists. It is well known that in some cases and under certain conditions children can become violent towards their parents. These episodes, discontinuous and occasional, have never been a reason of interest for Psychopathology. These were behaviours related to other psychic issues, e.g., psychoses, or the result of a serious deterioration of family interactions, as could happen in multiproblematic families.

Filio-parental violence is a phenomenon that has met with psychiatric interest only recently, so much so that

the proliferation of studies about it is still sparse. Filio-parental violence is understood as "any phenomenon caused by a child with the intention of causing physical, emotional or economic harm to gain control over the parent" (Cottrell 2001). The characteristic of this type of behavior, according to Pereira, is that it is linked not only to control but also to the need to achieve an objective that is perceived as beneficial to oneself (Pereira 2006). It finds its maximum expression in adolescence but it is also present in childhood. It affects indiscriminately all types of families, thus making it impossible to link this symptom to the presence of particular socio-economic or psychosocial conditions. Violence against parents is practiced by both girls and boys. It is predominantly directed against mothers over fathers. A study carried out in Spain by the Pereira group showed that 92.7 % of teenagers between 13 and 18 had acted psychologically violently against a parent at least once in a year, and 10.7% had done so also from the physical point of view (Pereira 2011). These are teenagers who have respectful behavior in school and in society, a conduct in accordance with the rules. The research showed that 14% of the teenagers had insulted or threatened the parents for more than six times in a year, while 3% had attacked their parents several times in a serious way. These figures are comparable to those of other countries in the Western world and even in China, that expresses an educational culture different from the Western one, the presence of the phenomenon is detectable. In the United States, back in 2003, the spread of the phenomenon stood between 14% and 20% (Ulman, Strauss, 2003), a percentage that increases between 34-64% if verbal and psychological violence are taken into account. In the United Kingdom the recorded percentage is around 14.5% (Browne et al. 1998). Italy does not have systematic surveys of the phenomenon. An indirect figure is provided by the 56% - increase in

complaints of domestic abuse against minors (Suigo 2021). A growing number of children face adolescence by beating or insulting their parents, thus creating the conditions of a terrible intrafamilial suffering that's difficult to manage. The reasons why the phenomenon is still underestimated is that the parents have a hard time asking for help. In general, the call for help occurs when the relationships have deeply deteriorated and physical aggressions or damages must be confronted. Until then, the parents passively suffer the escalation, thus contributing unknowingly to its development. Unfortunately, it is also true that the psychological intervention has its greater chance of success in early intervention while the entrenchment of power relations that have destroyed the parental dimension makes the treatment very difficult if not unsuccessful. Another factor that hampers the spread of an adequate caretaking of the families is the tendency, by psychotherapists, to blame the parents, already tried and destroyed in their identities as educators.

SOCIAL WITHDRAWAL

On the opposite front, but not too much, we have social withdrawal. Social withdrawal is a conduct of isolation from the outside world which involves the rejection of social relations (Lancini 2020). A phenomenon that is sometimes accompanied by actions of intrafamilial violence, overlapping with parental abuse, but is very often characterized by an escape from the world, a closure towards any possibility of confrontation with the developmental tasks, that takes away from young people the possibility of building their own future. Social withdrawal is on the rise, like filio-parental violence. In Italy there are about 200,000 socially withdrawn but it is likely that the figure will know a great expansion in the years to come (Lancini 2020).

The socially withdrawn, being less 'explosive' than the violent child, is more tolerated by family members and this leads to a lack of willingness to seek treatment. The withdrawal is very often preceded by warning phenomena such as the progressive deterioration of the relationships, giving up external activities, the increasing difficulty to go out and face the gaze of others. Although many socially withdrawn teenagers appear to be completely 'normal' from the psychic point of view, the severity of sub-threshold phenomena accompanying the choice of shutting oneself up should not be underestimated. In addition to the profound theme of shame and social anxiety, it is not uncommon to detect low mood, paranoid and persecutory ideation, insufficient sense of reality. It must also be taken into account the fact that years of social withdrawal contribute to the development of more serious pathological conditions as a result of social isolation and relational closure.

TWO FACES OF RESTLESS ADOLESCENCE

If, on one hand, social withdrawal and filio-parental violence seem to have very little in common, they are characterized by numerous similarities. Both conditions are an answer to the difficulty imposed by the developmental task that the teenager has to face.

The bursting of the 'new birth', to which the adolescent is called, poses numerous challenges which cause distress and pain and, in some cases, produce an actual paralysis and the development of symptomatic conducts. By 'developmental tasks' we mean those related to personal autonomy, the need to rethink one's own body undergoing transformations, the emerging sexuality, the need to build one's own identity and self-designing on the way to a personal self-realization, to the projection towards the future. These important objectives become a source of distress if they collide with a Self that's fragile but characterized by omnipotent unresolved expectations and by a substantial inability to handle the emotions of frustration, anguish, pain that accompany every transformation.

The family discovers the troubled teenager and ends up being traumatized, condemns the systematic flight from responsibilities, excessive demands, extreme conducts, moral and social disengagement, but does not consider all these characteristics as a result of an education who has cultivated omnipotence instead of solving it, thus giving up guiding the child towards a progressive adaptation to the worlds, and not supporting childhood fragility by directing it towards the acquisition of resilience, self-esteem and sense of effectiveness.

Mothers and fathers of our time tend to be prisoners of an idealism that leads to sugarcoat the educational relationship, without conflicts but also paradoxically devoid of deep relationality (Aldi 2020). Worried about keeping up with an educational task that coincides with the idealized perspective of creating well-being for the child, parents set up a growth system that impoverishes relational opportunities, of problem solving and of emotional management of the child. For the children, we program English lessons, sports, music, planning of the homework and the shared management of the studying activities: a program that absorbs the parents in a commitment that leaves them exhausted but that, paradoxically, deprives the child of the possibility of putting themselves to test and acquire emotional skills of autonomy and self-confidence because the spaces for an autonomous experimentation are reduced. The adults' need for control eliminates from the infants' horizon important experiences of maturation in which the child discovers his own resources and his own limits. The parent, looking for confirmation about their own educational ability through the perception of a happy and satisfied child, strives to avoid frustrations, gives up modulating negative emotions and carrying out that normative role that allows adaptation to reality.

The consequence of this growth profile is that the child is very busy “doing” and very little “being” (Aldi 2020). The development of children can be represented as a relational desert, rich in games to entertain them but poor in relationality. The resulting emotional vacuum prevents the development of emotional skills because the processes of mentalization and modulation of affection are not backed by adults.

The counterbalance to the relational vacuum just described is the richness of “things” surrounding the child, among which the technological instruments stand out. Children of our age are immersed, like adults, in a “mediasphere”, a symbolic place in which social communication occurs mainly through information technology (Simone 2012). It is estimated that, normally, a person spends about 6 hours or more on the Web: of these six hours, two happen through mobile devices. A substantial part of the development of the children, therefore, takes place in front of a screen and this has precise consequences for their brain development (Carr 2011).

ICONIC MINDS

Marshall McLuhan said that the medium is the message (McLuhan & Fiore 1967). The medium of communication has a considerable influence on the way in which the communicative message is developed and, consequently, on the very way of thinking and organizing thought. The invention of the press allowed for the extensive development of information thus allowing, through reading and writing, to communicate with a large number of people. From then on, the argumentative structure that was at the basis of the oral tradition became widespread and it found an opportunity for reinforcement and consolidation in writing. An argument needs a premise, a logical development and a conclusion. It requires a time for reflection, a time needed to implement that retreating into oneself typical of reflection. Reflective thinking, in turn, is the basis on which, through the analysis of our own experiences, we build our personal identity and the relationship with the world (Mortari 2004).

The possibility of spending many hours in front of a screen and little time with their fellow human beings determines an imbalance that puts reflective thinking at a great disadvantage compared to the iconic imagination, a type of thinking that proceeds by assonance, analogy and images.

Thinking by images is, as a matter of fact, very different from thinking through reflection. The image conveys a global message in which a lot of information is absorbed into a single totality but one is not able to organize them in a hierarchical order. The fruition of the image is singular, immediate, quick, often not-repeatable because it's not possible to return to it. It favors, therefore, a shallow thinking, not prone to analysis, unable to deal with complexity and difficulty (Simone 2012).

Textual thinking is slow, hierarchically organized, logically determined, available several times and therefore object of a wider reflection. It's normal that its quotations are in rapid decline when confronted with the affability of communication.

The image generates assonances because it evokes the rise of other images. But the link between them is analogical rather than logic-deductive, proceeds by assonances, emotional evokings, fragments of experiences. The iconic minds thrive on images and fragments without feeling the need to build logical connections and temporal continuities. Reflective thinking retains, instead, a coherent narrative dimension and is able to discover any dissonance in the logic of the story. This is because it's bound to rules and laws imposed by an education in sequentiality, analyticity and logic of thought processes.

THE UN-THINKING

The convergence of a deep relational poverty and an excessive reliance on iconic thinking can determine a serious deficit in the construction of the functions that contribute to the development of reflective thinking. Essential factors are, in fact, missing, such as: the confrontation with the otherness as an opportunity for self-knowledge, the ability to read one's own inner world, the perspective ability – that is, to think in terms of the consequences of one's own actions.

The other is necessary to the psychic development not only as a figure of protection but also as a lovingly frustrating figure. Through a healthy frustration it is possible to adjust the relationship between our own needs and the world, resize omnipotent demands, practice pain management, modulating emotions, all factors that make the adolescent more capable of addressing the tasks of adolescence (Aldi 2019).

The possibility to test ourselves, and so to make mistakes, and confront difficult tasks allows to reflect on our own limits and our own resources, thus helping to create a self-image that's both realistic and adapted to the environment but also to provide for actions of growth for self-improvement.

The perspective vision comes from the possibility of having to achieve goals by using the resources available. It cannot be supplied by a way of life in which everything is decided and organized by the adult world.

To this, we can add the tendency to use modes of imaginative thinking, because such mode emphasizes ease over complexity. The iconic world is in fact easy to access and decode but, as already said, it also lacks complexity and structural organization, is destined to pick up pieces of experience without being able to construct a continuity between them. The consequence is the construction of a cognitive structure that avoids complexity, prefers the simple and immediate over the project for the Self, the immediate satisfaction over the evaluation of the consequences of our own actions, pleasure over sacrifice.

PSYCHOPATHOLOGY OF UN-THINKING

Classical psychopathology has been nourished by a narratology rich in contents. Although these contents might have looked like delusion, hallucination, melancholia, a dissociative personality organization, we have always dealt with narratives that, in their chaos or disorder, tried to give meaning and unity to the Self.

The reality of current adolescent pathology is, instead, the encounter with the narrative void, with the difficulty of constructing narratives, with the inability to decode experiences, to give meanings to the events. The difficulty of mentalizing one's emotions, the poverty of reflective processes, the inability to make plans, makes the adolescent world poor and bleak. In this vacuum of thinking and identity the temperamental element finds place to mark the destiny of troubled adolescents. Those who structurally possess an intense volitional and emotional charge can meet with acting-outs and pulsional discharges. Violent children belong to this category. Those who are characterized by a more deflected component of mood, more inhibition and retreating into themselves evolve toward social withdrawal. In between we find a wide swamp where there's a restless and often problematic adolescence that expresses its discomfort in a thousand different ways (cutting, eating disorders, bullying and cyberbullying, suicide).

The great challenge, for those who work with these young people, is to be confronted with a blank of thinking that makes therapeutic work complex. The absence of narration deprives the therapist of the material on which he built his own interpretative theories and his toolkit. Voluntariness and the wide possibility of controlling the symptomatic behavior makes any pharmacological perspective useless and unsuccessful. The caregiver can experience a sense of impotence and incapacity that leads to defensive reactions and hostility. It happens, then, that they entrench themselves within the strict rules of a setting to which the patients do not adhere to send them home and, like Pilate, wash their hands of it or that it gets to full-fledged hostile and denigratory reactions towards the parents and the teenagers themselves.

NEW SETTINGS AND NEW STRATEGIES

In reality these young adolescents are treatable if you take care to make the classical tools of therapy flexible without giving up the scientific rigour that characterizes the intervention (Pereira 2006).

For example, it may be wrong to entrench behind the rigidity of classical therapeutic settings, which lead to giving up treatment if the patient adheres to or opposes them. We have found a good success in caretaking of parents whose children refused the psychotherapy.

Working on parental function and analyzing the dysfunctional family dynamics has made possible a recovering of power by the adults that has allowed to direct the teenager towards itineraries of awareness and growth. It would be advisable to always consider parents as integral part of the cure, by providing them with parallel pathways to those carried out by the children or with sessions of family psychotherapy. These sessions will aim to resolve dysfunctional dynamics that fuel the problem-behaviour and unknowingly support the negation mechanisms implemented by the young adolescent, mechanisms that lead to consider the cares of a therapist unnecessary. Recognizing that we are in front of an actual pathology of family dynamics and of parental functions, identifying parents as people to help and not to blame, is a good starting point.

The impossibility of communicating with their own child generates, in fact, distressing and painful experiences to which the adult reacts by activating behavioral defenses and reactions that do not solve the situation and worsen it.

Another significant variation is given by the possibility of engaging forms of home visiting, through which the therapist builds a contact with the patient by going to his home. They are necessary experimentations and attempts that, sometimes, turned out to be conclusive to establish that relational bridge that allows the starting of a dialogue. The modalities of approaching the adolescent require sensitivity, carefulness and a precise knowledge of the familiar and personal background of the young patient.

Finally, in situations of violence and aggressiveness harmful for the parents and dangerous for the teenager himself, interventions must be arranged involving law enforcement and social services. Such intervention must not, however, take on a punitive or vengeful character but it must be part of a project of caretaking in which each component acts to raise awareness of the problematic nature that hides behind the problem-behavior.

It is necessary to educate and instruct operators who come into contact with violent or socially withdrawn teenagers so that they won't act only in a normative way but can also collaborate to the recovery of the teenager.

The treatment of these teenagers must face the need to harmonize and control the problem-behaviours and the same time accept their vulnerability, an operation at all easy when it's met with the tangible signs of violence and the rejections of all forms of dialogue.

We are faced with new challenges to which psychiatry must be able to give an answer. Scientific research, training, education and information must be key actions in a project of caretaking of these new disturbing pathologies. Otherwise we risk losing a substantial share of the human capital of the new generations and paying very high social costs.

To counteract these necessary concerns, there is evidence that teenagers in treatment get transformed and give in return a wealth of humanity and sensitivity that problematic behaviors had completely removed. Let's, therefore, look at this restless adolescence with the eyes of those who know how to grasp its needs, anguishes, hopes and sensitivity.

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