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CONTEMPORARY ADOLESCENCE: STILL THE 'AGE BETWEEN'?

Contemporary adolescence is organised now around two distinct phases. The transition from childhood to early adolescence, through the impact of puberty, is a period of intense growth and far-reaching changes – physically, cognitively, emotionally. This is followed by a long transition into adulthood, which, though inclusive of diverse ‘pathways’, is usually extended, lasting approximately for a decade from mid/late teens until the mid-twenties. Primarily affected by social changes, this long transition to adulthood severely tests traditional thinking about the adolescent process, particularly the central concept of identity formation. Upheavals in the social world and the changing contexts for young people mean that a new sense of turbulence has become apparent, evidenced by concerns about increasing adolescent mental health problems and the emergence of new kinds of problems.

This chapter elaborates on emerging new ways of characterising adolescence and explores the meaning of the two distinct ‘phases’ of development. This leads to an evaluative discussion about the limits of some traditional theories and provides some newer ways of orienting to adolescence from a psychosocial perspective. Linking with this are considerations about ways of working therapeutically with young people in difficulties. Bion’s theory of container-contained is applied to thinking about ways in which anxieties of contemporary adolescence can be understood and addressed.

From the ‘age between’ to a central life stage

In the middle decades of the twentieth century, adolescence – though recognised as an important period for growth and development, and often a troublesome one for adolescents and those in contact

with them – was treated as a kind of passing phase. Derek Miller (1969), one of the founders of the Tavistock Clinic's Adolescent Department,¹ described adolescence as 'the age between', a relatively short period of transition between childhood and adulthood, characterised by rapid changes and growth and playing a very significant role in the maturation of the individual. The 'age between' was divided into three stages: early adolescence, organised by the experience of puberty; mid-adolescence, when there may be a short period of opposition to authority, 'lasting 6 months or so', following which the adolescent entered late adolescence, left school and became 'adult'. In late adolescence, the preoccupation was with 'trying out' the inner resources that had been developed over childhood as the adolescent entered adult society.

The idea of the 'age between' positions adolescence as a transient state, preoccupied with leaving one age – childhood – and entering another – adulthood. The space in the 'age between' is therefore filled by loss and expectation, which intermingle to generate the particular tensions and turbulence of adolescence. The period in which Miller wrote – the 1960s – was a fertile period for theorising adolescence, but – almost imperceptibly initially, and then unavoidably obviously – changes in the context for and experiences of adolescence have become so great that a yawning gap now exists between these early theorisations and the actual experience of adolescents today. Despite some reports to the contrary,² the beginning of adolescence has changed very little in the past 50 years, in that puberty starts at around the same time and extends over the same period of 4–5 years (between the ages of 10 and 15); the period of transition to adulthood has lengthened significantly. Gluckman and Hanson (2006) show that the age at which adolescent to adult transitions are completed – using marriage and parenthood as indicators – is as late as 29/30 today, against 23/24 in the middle of the twentieth century.³ Whereas, to use Miller's work again as an example, adolescence was thought to end with the teenage years, contemporary views consider adolescence as extending to the mid or even late twenties. There is evidence that adolescents today who complete the transition to adulthood by the end of the teenage years are disadvantaged and at risk of social exclusion (Jones, 2006). The length of adolescence is one key factor that suggests that the idea of the 'age between' inadequately conveys the meaning of contemporary adolescence; a period lasting for a span of 15–20 years is impossibly long to stay 'between'.

Along with the extension in time, the adolescent process is thought of as increasingly complex; this is accompanied by some

fierce debates. Firstly, there has been controversy over whether the early adolescent period is inevitably turbulent and characterised by conflict between adolescents and their parents. Secondly, it has been asserted that the problems of adolescence are getting worse and the mental health of young people is deteriorating. Thirdly, it has been disputed whether the problems of adolescence are 'cured' by the passing of time, or whether interventions are required to prevent the onset of psychosocial difficulties that endure into adulthood. These debates are indicative of the changing nature of adolescence and initiate the need to reconceptualise based on the emergence of greater knowledge – from different sources – about both the early adolescent experiences of puberty and the later sojourn in the long period of role transition to adulthood. We can begin to explore these issues through a case example:

Case example: turbulence or transition?

Maria requested a therapeutic consultation when she was 21, because feeling depressed and having a lack of self-confidence in herself increasingly troubled her. In her consultation, Maria was very tearful and said that she felt 'stupid' for being so easily moved to tears. She felt she should be stronger, but that she is 'pathetic'. She said she is very close to her parents, especially her mother, with whom 'she could talk about almost anything'. Her mixed-race parents got on OK too, though they had had some difficulties when she was younger, when they had argued a lot about her older stepbrother, mother's son.

Maria said her adolescence had not been particularly difficult or traumatic. There had been very little conflict between her and her parents. She had got on well at school, had progressed to university, continuing to live at home, and was nearing the end of her course. She had many friends, enjoyed a 'going out' lifestyle and had boyfriends. One of these had been serious for a time, but though she is still keen on him, he wants 'some space'. Now, in comparison with her teens she is 'very up and down', and she described within herself feeling 'wobbly, not at all solid'. She felt others around her were more secure and more confident. Her brother in particular 'made her feel stupid'. He and his friends could talk about things – like chaos theory and complexity – but she felt she had nothing to say. She wished she could talk like them. She felt she ought to be more independent, especially that she ought to be more separate from her mother, but she did not like being alone and did not know what she wanted to do in the future.

Maria's situation illustrates some of the key features that need to be taken into account when thinking about contemporary adolescence.

She lives in a mixed-race reconstituted family and lives at home while going to university. She is asking for therapeutic help at the age of 21, when, in traditional terms, she would be considered 'adult' rather than 'adolescent'. She is depressed, uncertain as to why, and she comments on the closeness and openness of her relationship with her mother and her lack of conflict in her teens.

Maria's is one narrative about adolescence, and one of the crucial features of contemporary adolescence – and thinking about adolescence – is that there is considerable diversity. It is misleading to think, still, about a single normative experience of adolescence. Thus the case example introduces – but cannot inclusively represent – some key issues.

Consistent with the idea of the 'age between' was the view that, though inevitably turbulent, the adolescent's need and drive towards development led to the resolution of the problems of adolescence. Time was the cure:

Whilst this is a time of turbulence, disturbance and struggle, often of inner uncertainties and chaos, the adolescent's growing discovery of his [*sic*] own sexually maturing body and physical strength, alongside his developing mind and intellect, usually enables him to move from dependence to independence.

(Wise, 2000, p. 7)

Ruggiero (2006, p. 550) describes how thinking about adolescence has veered between 'a historical opposition between "sitting on the fence" (A. Freud, Winnicott, Meltzer) and being more interventionist (prevalent today)'. In 'sitting on the fence', there is faith in development trusting 'to the *vis medicatrix naturae* (healing power of time)'.

The more interventionist approach focuses on the way that adolescent difficulties transform into adult psychosocial disorders, for which a preventive, interventionist approach with adolescents is needed. Yet this is not simply a debate about whether either view – intervention or trusting to nature – is 'correct', for lying beneath the surface is a conflict about whether the emotional impact of adolescence can be tolerated, or not, by others in contact with adolescents. The non-interventionists seem, today, to have a touching faith in development, which is perhaps contrary to the evidence that difficulties first occurring at adolescence persist into adulthood. Contained in the non-interventionist approach, though, is a greater willingness and capacity to tolerate adolescence, not to be made unduly anxious by it, nor 'phased' by the intense emotional impact

adolescents can exert on anyone close to them. The interventionists, on the other hand, are preoccupied with identifying risks. Two approaches towards risks are available: they can be either modified, through thought, or avoided, through risk aversion. This distinction is important for the delivery of services to adolescents, as we shall see later (Chapter 5).

The view that intervention is necessary is particularly influenced by recent epidemiological studies that show that most adult disorders begin in adolescence, between the ages of 12 and 24,⁴ though often these are not detected until adulthood. Between one in four and one in five adolescents have a recognisable mental disorder in any year (Patel et al., 2007). Of course this fact can be looked at from two directions. The vast majority of adolescents (four in every five) do not have mental ill health. It is not true, therefore, that all adolescents fit the stereotype of being unstable (Graham, 2004). It is important to recognise that some adolescents succeed in negotiating adolescence: understanding why and in what circumstances is possible once this is accepted. On the other hand, a significant minority of adolescents have a recognisable mental disorder, and this implies that the risks and hazards, to which adolescents can be exposed, leave them vulnerable to the development of psychosocial disorders, which peak during the adolescent years. Suicide, self-harm, substance misuse, offending behaviour, depression and eating disorders are among the risks. Rather than growing out of these problems, if untreated, they can persist into adulthood and have detrimental effects on adult functioning (Smith and Rutter, 1995; Graham, 1986; Achenbach, 1998; Patel et al., 2007; Toumbourou et al., 2007).

The mental health of young people is enormously vulnerable because of the many, diverse challenges they face in adolescence and also because of a propensity to engage in at-risk behaviour. Some young people are also exposed to harmful circumstances which affect their mental health ... Singly or more usually in combination, these at-risk behaviours and adverse circumstances increase the vulnerability of young people to psychosocial disorders.

(Baruch, 2001, p. 3)

From this perspective, adolescence is a highly vulnerable period, which requires intervention; just allowing maturation to take place would neglect the opportunities for intervening to reduce risks and at worst condemn the adolescent to long-term problems. Moreover, mental health problems have implications for other aspects of

adolescent development, including education achievements, substance use and abuse, violence and reproductive and sexual health (Patel et al., 2007).

We can apply these different views to our case example. Maria's depression, her tearfulness and her feelings of low self-worth – as she puts it, feeling 'pathetic' and 'stupid' – seem central to her difficulties. The causes, however, are not clear. Do they indicate longer-term problems arising out of adolescent difficulties? Or are they responses to the immediate process of change and transition she is encountering? Is she, in other words, still in a process of change and development? Is her 'identity' still being formed?

Some adolescents find that the social transitions expected of them are overwhelming. Both the transition into adolescence from childhood, which requires experiencing the powerful changes of puberty and, usually, changing schools and the late, long transition into adulthood create conditions of uncertainty and change. Maria can be identified as someone who is experiencing anxiety about the late adolescent transition, but who, in reporting that her teenage years were not particularly full of conflict, seems to fit with the view that

There is little evidence to support the notion of wide ranging conflict between the generations. ... findings from research are unequivocal. Serious conflict between parents and adolescents is true only of a small minority of families, which should bring some comfort to those parents who contemplate the onset of adolescence with trepidation.

(Coleman and Hendry, 1999, p. 80)

Some adolescents, it is argued, make a smooth transition through adolescence, while others have a more stressful and turbulent experience. Parents and teenagers, like Maria and her mother, can remain connected to each other rather than becoming estranged. They can spend as much time together in adolescence as in earlier childhood, and although adolescents spend less time in total in the family, there can be a compensating sense of increased communication between them. Since adolescence is often thought of as synonymous with turbulence, it can come as a surprise that some accounts of adolescence refer to the continuity of relationships between parents and adolescents, the absence of communication breakdown with parents, the absence of symptoms of psychological distress and difficulty in relation to peers and adults (Coleman and Hendry,

1999, p. 209). Turmoil may be located in a minority of adolescents, a highly significant minority from the point of professional practice, since these are more likely to be the adolescents who are encountered by professionals.

These accounts caution against a normative approach to adolescence in which turmoil is assumed to be universal. In fact turmoil may be thought of as denoting a particular social construction of adolescence, and therefore an adult-centred approach (Roche and Tucker, 1997). As Van Heeswyk points out, the 'stormy' view of adolescence 'is the theory that underpins the commercial exploitation of young people' (1997, p. 29), who are characteristically represented as 'inherently deviant or deficient' or, more specifically,

presented as either actively deviant or passively at risk and sometimes as both simultaneously. In general young men are more likely to be presented as actively deviant, especially in aggressive forms and especially if they are working class and/or black. Young women are more likely to be constructed as passively at risk.

(Griffin, 1997, p. 18)

From this perspective, it is not just individual differences that determine whether adolescence is turbulent or proceeds in a smooth transition to adulthood, but the social context, in which some groups are more vulnerable than others, especially in terms of race, gender, class and sexuality. The contextual differences of individuals - and the availability of resources, primarily in the form of reliable and trustworthy relationships with adults - are extremely significant in whether adolescents succeed in working through the impacts of adolescence or succumb to stressful experiences, with a consequent risk to long-term mental health. The capacity within relationships between parents and adolescents to manage conflicts, understand emotionality and have adaptive strategies for resolving difficulties when they arise is fundamental; these relationships are founded on a bedrock of stability throughout childhood and reflect the integral nature of qualities of negotiability and trust on both sides. When there are problems in the parent-adolescent relationship, these can be sorely tested by the intensity of emotionality in adolescence - again this is likely to be experienced on both sides. This is experienced in different ways during adolescence, and to take this discussion further, it is necessary to think separately about the two distinct phases of contemporary adolescence.

The impact of puberty

It is widely accepted that the growth and change initiated by puberty heralds the start of adolescence. Psychoanalytic thinking about adolescence has developed some detailed accounts of the impact of the bodily changes of puberty. Melanie Klein (1922) wrote of 'the tempestuous uprush of instincts arising at puberty' (p. 56). Peter Blos (1962, 1967) discussed the eruption of infantile feelings as the pubertal adolescent experienced a crisis of separating from childhood ways of relating to parents. Now, faced with the emergence of an adult body, the adolescent identifies with the same-sex parent, and with emergent adult sexual and parenting potentiality. That is, s/he may, with this body, one day become a mother or father. Traditionally, the perspective these theories take is triangular, or Oedipal.⁵ Powerful passions are stirred up and revived in the adolescent, including desire for and competition with parents. The passions of infancy and early childhood take place, in adolescence, in a context in which the new physical capacities of the adolescent make such wishes potentially realisable. Taking the boy's relationship with the father, Anderson discusses the shift in power from childhood to adolescence as relative to the parent, and as potentially destabilising:

It is the very balance of a relatively weak child and relatively strong parents which, whatever the impulses and anxieties is a background bedrock of reality which allows for a sense of safety. In adolescence the situation is extremely different. The boy is suddenly quite strong, and with more cognitive capacity, and he could kill his father if he did not prevent himself, and yet the impulse is just as strong.

(Anderson, 1999, p. xvii)

The emergence, or revival, of these passionately felt emotions unbalance relationships with parents, forcing a reorganisation or renegotiation of these relationships. Depending on the perspective, psychoanalytic accounts focus on separating, identifying and the loss of childhood relationships. These accounts also emphasise the importance of anxiety, feeling vulnerable and, through the increase in physical and cognitive capacity, an emergent sense of power. This is especially thought of as the power to act, which in both sexual and aggressive aspects can feel both liberating and frightening. These terms – anxiety, vulnerability and power – are very important ones in thinking about adolescence.

Thus, central psychoanalytic ideas about early adolescence – that it is a turbulent time, which places tremendous stress on the adolescent – contrast diametrically the idea of smooth transition, which usually emanates from a more academic psychology or sociology. Perhaps these differences represent incompatible approaches – Van Heeswyk (1997, p. 29) suggests that psychoanalysts have had more fun! From this perspective, which locates turbulence in a small but vulnerable section of adolescents, emerges the accusation that psychoanalytic theories have generalised, mistakenly, from the pathological. On the other hand, those accounts which describe smooth transitions are often based on self-report rather than contemporary clinical accounts and may tend to emphasise 'coping' rather than feeling overwhelmed. Many accounts point out that the miserable, abject and difficult aspects of adolescence are 'forgotten' by adults (Jacobs, 1990; Griffin, 1997; Sayers, 1991). These disowned aspects of having a more turbulent time of it in adolescence are then projected back on to adolescents by adults, who do not wish to know about the feelings they themselves experienced in adolescence.

Jacobs (1990) discusses how memories of adolescence tend to be split between idealisation of moments of success, achievement and energy, and those which are abject and miserable. He thinks that early adolescence embodies the latter and late adolescence the former:

Early adolescence ... is 'a time of awkwardness, of disproportions, of frightening sexual maturation, of pimples, and of new and untried feelings. Nothing is set. Nothing is solid. Everything is in flux and change'. The aim with early adolescence, is to get past it and then, not to look back. In contrast, late adolescence is idealised, especially as future experiences include disappointments and frustrations.

Sayers (1991) interviewed adults who had either 'forgotten' their adolescence or who recalled it as a nightmare. She quotes Andre Green:

We outgrow adolescence with the idea of having lived through an exalting moment that we will never forget, but, in reality, sometimes when we look back we realize we had a narrow escape.
(Green, 1992)

Whether, for example, Maria has been more affected by puberty than she recalls and whether she is putting the misery of her earlier

adolescence out of mind can only be discovered by further exploration with her. She does say that she feels wobbly, not solid inside, and that compared with others, such as her brother, she questions the strength of her own mind and the capacity to commit herself to expressing her own thoughts. She does express the idea that she is uncertain in her identity.

Our understanding of puberty has been changed by recent studies of the changes in the brain.⁶ Neuroscientific developments open up the possibility of bringing together several hitherto disparate strands. According to these studies, the turmoil of the pubertal years and the impulsiveness of some adolescent behaviour may have a neural cause. This evidence claims that later development – in the period of puberty particularly, but continuing through adolescence – of the brain affects, among other things, the cognitive controls needed for mature behaviour; these are therefore underdeveloped in adolescence. Changes to the brain at puberty have an effect on cognition, affect regulation, learning and memory; the brain shows ‘greater neural plasticity’ (Patton and Viner, 2007, p. 1132). Stressful experiences during puberty can affect brain development adversely, increasing vulnerability to psychopathologies; enrichment of the social and learning environments may be able to reverse the effects of early adverse experiences. It is possible that greater neural plasticity thus provides what Blos (1967) has described as ‘a second chance’ in development in early adolescence.

Adding emerging knowledge about brain development to the picture we have of puberty enables new alignments to be considered. Maturity increases the capacity to control behaviour – and the adolescent requires a ‘facilitating environment’ while these changes take effect: time is one ‘cure’, having stable and understanding relationships with parents is another. On the other hand, adverse contexts increase the potential for stressful experience leading to lasting disorders; intervention is necessary when there is adversity, in order to reduce the potential for enduring problems taking root in early adolescence. This also demonstrates the need to connect internal, biological and psychological and external – social – aspects of experience.

Psychosocial perspectives on adolescence

Adolescence is a psychosocial concept. In societies where there is an early rather than extended transition to adulthood, the social contribution in many cultures is usually in the form of a ritualised passage

into adulthood. In extended adolescence the interaction between the social context and psychological development is more complex. One of the unique differences in the way that adolescence has been organised since the mid-twentieth century, in the developed world, is that 'the development of reproductive capacity and sexual activity precede role transitions into parenthood and marriage by more than a decade' (Patton and Viner, 2007, pp. 1131-2). This produces what Gluckman and Hanson (2006) call a mismatch of biological and psychological transitions. This 'mismatch' has been theorised as important for development, a problem that infantilises young people (Graham, 2004) and provokes risks and opportunities.

Erikson's concept of the 'psychosocial moratorium' theorised the new organisation of adolescence, developing the idea of a 'playful' space for the consolidation of identity in the time gap between the development of biological maturity and taking up adult roles. In the psychosocial moratorium, the adolescent aims to suspend commitment and to explore the possibilities available in society in the quest for identity. For Erikson, identity was essential for psychic survival, for 'there is no feeling of being alive without a sense of identity' (Erikson, 1968, p. 129). Developing an identity means separating from others, becoming an individual and gaining a sense of self and other. The adolescent has to distinguish between self and others through formulating answers to the questions 'who am I and who am I like? And also who am I not?'

Though considered playful, in the sense of not being committed, the moratorium generated considerable pressure and intensity. The adolescent can be in a pained state and 'is apt to suffer more deeply than he ever did before or ever will again from a confusion of roles' (Erikson, 1968, p. 167). Under these tensions, there are conflicting pressures either to regress or to attempt to 'foreclose' on suspending commitment or the exploration of desires. Anxieties can lead to actions, the development of patterns of delinquency or promiscuity, which can become fixed as anti-social or self-destructive patterns of relating and behaving. All of these have the impact of restricting the quest for identity, the test of which is the commitment to and engagement with intimacy; 'only an attempt to engage in intimate fellowship and competition or in sexual intimacy fully reveals the latent weakness of identity' (Erikson, 1968, p. 167). The capacity of the individual to become involved and remain true to the self demonstrates whether the identity, which has been forged in the moratorium, will stand the test of application to the real-life tasks of adulthood.

Erikson's work on identity underpins contemporary thinking about adolescence. On the other hand, this model of adolescence is restrictive and probably outmoded by the emergence of more recent ways of thinking about relationships. Erikson has been criticised specifically for focusing on individualism, autonomy and achievement through his antipathy towards collectives (Sayers, 1991) rather than paying attention to the importance of relationships (Noam, 1999), and thus being predominantly 'masculine' and diminishing femininity in his approach.⁷ The essential mechanism of a 'fit' or 'misfit' between the individual and the culture, which varies from time and place, is a flexible and adaptable one. However, the conceptualisation of identity as the outcome is far too solid and unitary for the experience of modernity, which is characterised by unpredictability and uncertainty. In other words, Erikson had a rather stable view of societies. Even as he was conceiving 'Identity, Youth and Crisis', Emery and Trist were formulating ideas about turbulent systems, in which 'dynamic properties arise not simply from the field itself. The "ground" is in motion', and this leads to increasing uncertainty (1969, p. 249). In modernity, all that is solid melts into air.

Identity crisis

At this point, we can return to Maria's predicament. She is facing an uncertain future, not knowing what she wants to do. In terms of her identity, she feels wobbly and unable to make commitments. She is close to her mother, but the process of separating from her and finding her own mind has probably not taken place. She finds she cannot join in discussions and thus feels ill-equipped to enter social relationships. It is probable that she has not been able to work out her rivalry with her brother, and his with her. The context of this is an uncertain future in a complex society. Appropriately, she says that she cannot talk about chaos theory and complexity!

It is possible when working with adolescents to notice 'Eriksonian' identity conflicts and struggles, as adolescents seek direction and aim to test commitments. They may also pull back from commitment, appropriately, because it feels too early, or 'foreclosing'. They may communicate a sense of being in flux. On the other hand, it is often the case that the withdrawal into an identity-forming moratorium indicates a defensive withdrawal from relationships, and the idealisation of the past, indicating a difficulty in undertaking internally the process of mourning that is needed in order to relinquish childhood.

Isolation and lack of engagement

Bill, an 18-year-old, maintains that he cannot commit himself to knowing what path to take in his life because he has no way of knowing what he wants to do, or what would be best for him. He proposes this as an existential dilemma that, since the aim of life is death, there is little point in choosing any particular form of engagement. This stance means that he pulls back from relationships and spends very long periods of time on his own. Yet behind this rationalisation lies a very painful predicament in which he feels he has to cover up a sense of failure. He sees himself as very bright and yet he has the greatest difficulty in applying himself to his studies. Rather than engage with frustrations, he withdraws to 'start over again', saying he needs 'time out'. On one occasion he failed an exam and was completely devastated. He felt it was all downhill from childhood, in which he idealised himself as a little boy Bill who was 'good at everything'. He felt he could still 'do anything' and he compared himself with David Beckham, who had simply had a lucky break. Idealisation of the past was supported by his grandiosities. His fear that he was 'losing it' constituted a crisis of loss and a fear of loss of control.

Distress in intimacy

Kirsty, also 18, has a boyfriend, and the relationship has become fairly serious. At first she hoped it would be more successful than her previous relationships, which had been very short-lived, but eventually the relationship began to fall apart in mutual recriminations and hurt. Kirsty felt unable to be with her boyfriend without feeling extremely pained, jealous, suspicious and furious, and was also quite incapable of spending any time apart from him without experiencing intense loneliness. In an overwhelmed and distressed state, she stopped seeing him and said she wanted a life without commitment, where she felt free. Kirsty oscillated between feeling overwhelmed when involved and lonely when withdrawing from others.

In both these examples the 'identity crisis' is centrally about a difficulty encountered in making and sustaining emotional contact with others. In slightly different ways, both Bill and Kirsty experience a need to withdraw from contact with others through difficulties in regulating or managing the emotional impact of contact. In both cases there is a sense of loss involved in the experience of engagement, and both withdraw from attempting to manage intense feelings to idealisations of states where this is not felt to be so urgent. Both experience a loss of control through engagement, through becoming overwhelmed by the emotions that are thus generated.

Identity and transition today: turbulence and risks

One way of thinking about the qualitative psychosocial changes for young people since Erikson formulated his ideas about identity is to adapt Roberts's (1995) well-used metaphor of train and car journeys. Roberts suggests that adolescence used to be like a train journey. The route is predictable and the destination prearranged. It is possible to travel together with others and develop a sense of cohesion, community and camaraderie with other passengers, who share the same route and aim for the destination. Though there are possibilities of changing route, these can only be made at planned stops.

In contrast, contemporary adolescence is more like a car journey. There is an appearance of freedom and autonomy over the journey compared with trains, and a sense of control over the choice of routes and destination through the individual driver constantly making a series of individual decisions. There is much less of a collective sense of travelling together in a car, though 'virtual contact' can be maintained with others through radio, stereo, mobile phone and even an on-board Internet connection.

The train journey is rather like Erikson's model of identity, where the journey provides the 'moratorium'. The predictability of the train journey is replaced by the confusing image of the car journey, which provides a semblance or illusion of control and independence, but unequal opportunities (some start the car journey in a Porsche!), and greater responsibility for decision-making and isolation from others. In the car journey the problem is about joining with others as well as separating from them. Additionally the car journey confronts the driver with a set of unpredictable risks.

The first wave of adolescence in the mid-twentieth century, the rise in teenage spending power and the spread of rock music, with images and language of unconventionality, was strongly supported by and transmitted through media (Martin, 1981). The second wave of adolescence in the late twentieth and early twenty-first centuries is characterised by globalisation, consumerism and the invasion of 'space' by increasing numbers and intensities of images and increasing fragmentation. Frosh (1991) characterises this as 'This babble - the constant speech of mass media and computer, all different, all distorted - produces a set of competing discourses that are experienced subjectively as mysterious and confusing, but yet are constitutive of our consciousness of the world' (p. 58) and which lead to 'incomprehension and misrecognition', so that the 'fragmentation of the cultural environment becomes a buzzing and booming

confusion in the head' (p. 188). For adolescents, this 'babble' has taken form in generating new communication methods, which have radical impacts on friendship networks and intimacy. MSN, My Space and Facebook lead twenty-first century virtual peer networks into new ways of being with and separate from others; it is possible to amass great numbers of 'friends', feel in contact with others and never be alone. Of course the risks of these virtual social networks are well documented and generate a 'moral panic' in the media.

The effects of change through globalisation and technological advances are to blur the distinction between adolescence and adulthood, through creating a context for adulthood which is distinctly 'adolescent', with an 'upside' which provides a sense of excitement and the thrill of new possibilities, alongside a questioning or deconstruction of old certainties. In this lie great possibilities for rethinking relationships, for overthrowing old prejudices and for 'individualisation', subjectively or objectively feeling free of the old constraining structures of thought and action. On the 'downside' there is an exposure to the fragmentation of the cultural environment and to new risks. Consistency and stability of relationships are central to the potential for fragmentation. In the absence of a bedrock of certainty and predictability, anxiety and a fear of loss of control are heightened. There is in this sense an encounter with loss – loss of a sense of a centre and of a past in which there are certainties of tradition. Whether excitement and thrill or a sense of loss and a fear of loss of control are uppermost, these are essential reactions to the changes of modernity and mirror the movement from latency to adolescence. The loss of the 'bedrock' of certainty means that everyone is in the process of 'leaving home', or – to mix the developmental analogy – it is not only God who ceases to exist, but also latency, the intermission of certainty, reliability and predictability, which are sidelined to the periphery of 'anorak' activities such as collecting stamps and pricing antiques.

Adolescents do not simply have to deal with the problem of leaving childhood certainties and dependencies but they also have to gain a way of relating to adult postmodern society. This means encountering turbulence in the sociocultural context and the fluctuating, shifting, rapidly changing and uncertain adult world. It means moving into an adult world, which is extremely diverse and definable in many different ways.

Two themes which emerge from this analysis and which are extremely important for contemporary adolescence are, firstly, the experience of loss and the importance and difficulty of mourning,

and secondly fear of loss of control. The anxieties and defences that are brought about by both these issues are important to a consideration of adolescent identity development and in particular to the forms of feeling that flow from contemporary conditions.

Late adolescence and emerging adulthood

There has been considerable new thinking and discussion about the impact of late modernity and postmodernity on adolescence. Much of this emanates from the individualisation in risk society theory (Beck, 1992). The diversity of adolescent experiences precludes a normative or monolithic approach to identity, such as Erikson's. Post-traditional identity is characterised as more open, fluid, complex and questioning of traditions (Johannsson, 2007). It is more differentiated and inclusive of a number of identifications; it is reflexive, and changes over time in a 'continuous project of self' (Thomson et al., 2004). It is influenced by and makes use of the vast flow of information through, predominantly, the Internet. There is a choice between keeping in touch with new information, or becoming marginalised outside reflexive society (Johannsson, 2007, p. 105).

The individualised, calculative approach to information and risks has changed the way that identity is theorised. Though refined, debated and critiqued, the approach is central to contemporary thinking about identity. A central debate is the relationship between structures and individual agency. There are those, for example Arnett (2000, 2004), who propose a new life stage of emerging adulthood.

Arnett's (2004) thesis is that throughout their twenties, young people make increasing commitments to more stable partnerships, and adult identity through preferred occupational pathways. They typically do not regard themselves as adults, but as on the *threshold* of making long-term commitments. Around the mid-twenties, there is a reduction in the amount of time young people are engaged in drinking, using drugs, delinquency (Arnett, 2000). Arnett posed the question, 'what does it mean to make the transition from adolescence to adulthood?' and, using survey data, found that the criteria used by his young adult respondents were essentially individualistic:

- Accepting responsibility for oneself
- Making independent decisions
- Becoming financially independent
- Standing alone as a self-sufficient person

These individualised, abstract, even moral criteria replace (for these American respondents) the traditional concrete or actual events that signify rites of passage from adolescence to adulthood, the traditional markers of transition: finishing full-time education, beginning full-time work and marriage. These, Arnett suggests, are seen as 'irrelevant to the attainment of adult status'. However, Arnett's respondents also identified criteria for adulthood that promoted mature relatedness, including developing greater concern for others and avoiding behaviour that might harm others. Tensions between more narcissistic and more relational objectives are indicative of the potential conflicts in risk societies. The biographies of young people studied by Thomson et al. (2004) showed that alongside the individualised 'continuous project of self' there were also ideas about maturity expressed in more relational terms, developing, through this, the idea of thinking about the needs of others. Thus the tension of identity involves the reflexive, narcissistic 'what's in it for me?' (Johannsson, 2007, p. 105) and the interdependent 'you have to think of someone else now' (Thomson et al., 2004, p. 224).

There is recognition that increasing inequalities and social exclusion indicate the problematic side to individualisation. Agency is in fact limited by structures and leads to biographies grounded in different backgrounds of class, place, gender and ethnicity. Identity depends on and is conditioned by the biographical history of the individual - what has taken place before. It is wrought within a complex matrix, made up of social capital, 'the personal, financial, social and cultural resources to which the growing individual has access, and by the social and institutional contexts through which the individual moves' (Bynner, 2005, p. 379).

Self-esteem, resilience and a sense of competence are necessary for young people to negotiate their way through this matrix. These concepts are summarising categories containing complex interpersonal and intrapsychic experiences and dynamics, as we shall discuss (Chapter 2). However, if we accept them for now as a starting point, it follows that they are interrelated. Experiences of competence may encourage investments in a particular area of activity, and this encourages self-esteem. There occur critical moments which form turning points in an individual's life course that involve retrospective self-definition (Thomson et al., 2004). These then form trajectories or pathways in which '... the effective exercise of agency in both creating and responding to new opportunities. There can be "stagnant" or "damaged" transitions; there can also be repaired and progressive transitions' (Bynner, 2005, p. 379).

A particular field for these experiences is education, in a context where skills needed for employment increasingly require the acquisition of higher levels of educational qualifications and society is invested in a discourse in which educational attainment is at the centre. Young people can experience competence, enhancing a particular aspect of identity, through educational success, or alternatively a sense of failure, exclusion and loss of esteem through not achieving. Clinical experiences of working with adolescents show that it is very difficult to not buy into the educational route to adulthood; not only do they feel they have failed, but also that they are left behind and isolated as more 'successful' peers go on to university. The case example of Bill, above, is one example where failing an exam was experienced as catastrophic.

Social exclusion is often the experience of those who take 'fast track' routes to adulthood, which do not include post-secondary education; these young people leave education at or before the minimum leaving age, have no longer a 'working class' job market available and are subject to early family formation, teenage pregnancy, and offending or drug and alcohol misuse. On the other hand, 'slow track' transitions involve a longer period of semi-independent living whilst undertaking education, deferring financial independence, full-time employment and family formation and dependence on parental support.

Thus adolescence is 'a window of risk' (Furlong and Cartmel, 1997) when viewed from the perspective of changing social contexts. Social exclusion, through 'fast track' transitions to adulthood and 'slow track' extensions to adolescence and emerging adulthood, increase the potential for damage to identity and mental health. Individualisation promotes the idea of individual responsibility for life events, an 'epistemological fallacy' according to Furlong and Cartmel (1997), who add that 'As individuals are made to feel more responsible for life-events, uncertainty and risk have taken their toll on young people's mental health' (Furlong and Cartmel, 1997, p. 9).

The view that adolescent mental health is deteriorating in contemporary conditions is supported by recent research (Collishaw et al., 2004) but media attention for increased levels of depression, self-harm, offending and so on tends to separate the evidence for mental health disorders from understanding of the causes and meaning which is to be found in the nature of the experiences of growing up, becoming more adult in contemporary societal contexts. These discussions about the worsening of adolescent mental health also lose sight of the moments in individual biographies when

possibilities for growth and development, rather than destructive or self-destructive ways of relating, can be turned to and grasped. 'Agency' can be available within the constraints and opportunities of individual, interpersonal and social contexts.

Narcissism, negotiability, fragmentation and containment

Tensions between growing up in an individualised risk society and developing relational capacities and aims are reflected in the recent development of psychoanalytic thinking about adolescence. Particularly, the concept of narcissism⁸ has been revisited in order to understand the ways that development and growth can take place within unfavourable contexts that buck the trend, so to speak, of the emergence of more destructive and self-destructive ways of relating. Waddell (2006) points out that it 'is the swiftness with which what seem to be deeply entrenched narcissistic structures may be modified or modulated in response to even quite small internal or external change' (p. 23). Alternatively, the opposite route can be taken – more intensive narcissistic states can be equally rapidly be taken up with consequent increases in problematic behaviours. Often these changes – in one direction or another – occur around changes towards tolerating being more separate or dependent (Flynn and Skogstad, 2006).

Case example

Kathryn, 18, came for assessment for therapy in a very distressed state; she was depressed, self-harming and had recently taken an overdose. She talked about always being depressed; the quality of her presentation and discussion of her background promoted the idea that she was very deeply involved with self-destructive ways of relating. Whenever she felt alone, or threatened with being on her own, she would get into a tearful rage which could escalate to the point that she would self-harm. However, she made a good contact in her once weekly therapy, and after a few weeks reported a seemingly small incident in which, feeling desperately alone and abandoned, and about to fly into one of her wild tearful rages she managed to stop, and sat down to have a coffee in a café. Strangely, she reported, as though she had for the first time discovered this, she didn't mind being on her own; it was actually quite pleasant.

Kathryn's allowing herself to be on her own for this moment allowed her a new possibility, one she had not suspected, but which

gave her a momentary sense of a new competence, one which she could report back to her therapy and build upon it. Her new competence is about bringing within her range of options something that previously she felt terrorised her. Her experience was linked with a sense that she felt a connection to her therapy, which provided her a sense of containment and an opportunity to discover a more negotiable side of herself. The role of containment is central to therapeutic work with adolescents of all ages, and this will be illustrated using a case example of someone in the midst of the process of extended adolescence, or 'emerging adulthood', in which he demonstrated some destructive and self-destructive behaviour.

Case example

Howard, at 21, was in his last year at university when he was referred for psychotherapy. He arrived about thirty minutes late for the first appointment, and came into the consulting room tightly clutching a piece of paper, which I saw was his appointment letter. Looking tense, he sat down without taking off his coat and apologised for being late, in a way which suggested he was making a great effort to be off hand, or 'cool'. He had an air of self-deprecation, which continued when he told me he really did not know why he was here. His doctor had suggested he came, because he kept 'going mad when he got drunk'. He said he did not think he was a priority – as many other people might have more need of counselling.

He then told me something of himself, his family and his earlier adolescence. His teens, he said, had not been particularly 'turbulent', though his mother had been ill and father was away at work a great deal. His older brother and sister had been much more in need of parental attention, and he had 'got on with it' completing his schooling, taking a 'gap year' to 'get away from it all' and then going to University. Now, however, he was in constant conflict with his mother, who he felt favoured his siblings, and his father was 'as useless as a hole in the head'. This description could have been applied to himself, for when he described what it meant to 'go mad when he got drunk', he told me about times, which he subsequently could not remember, in which he became violent towards others and put himself at risk, in ways which suggested he was not able to think about protecting himself.

Young people, like anyone else can be very anxious at the prospect of having a therapeutic consultation, and this seemed to be prominent in the way he started this meeting. He was palpably anxious, and his lateness and tension, the way he clutched the letter communicated this. He was trying on the surface to be 'cool', and

keep himself 'buttoned up', as he sat with his coat wrapped round him, as though forming a protective skin,⁹ but intense emotion was near the surface. In his first contact in therapy, Howard's need for containment of his anxieties is to the forefront.

The container–contained relationship

Bion's ideas about the relationship between the container and contained occupy a very central place in current psychoanalytic thinking. Bion (1962) described a process which begins in early infancy when the infant, expels or projects emotions which are too powerful, intense or unknown, into the mother.¹⁰ If the mother is receptive to the infant's states of mind, and feels the infant's feelings in herself, it is possible that the infant's states of mind and feelings, can be tolerated and known by the mother, and that some sense can then be made of them. Feelings that were too powerful for the infant to hold within her/himself can be thus made tolerable. This 'contains' the emotions and the mother acts as a 'container' for them. The mother's state of mind in this process of containment, which Bion (1962) called 'reverie', constitutes openness to emotional communications of these kinds. That is, the mother's mind is not predetermining of the meaning of the infant's communications and needs, but some space is available for uncertainty and ambiguity in communications, and for new ways of thinking about meaning.

Britton (1998) emphasises the aspect of Bion's theory in which the container–contained relationship enables precursors of thought to be transformed from 'nearly sensory-somatic' qualities into 'something more mental'. Bion called the 'nearly sensory-somatic' as beta-elements and the 'something more mental' as alpha-elements. The beta, or precursors of thought, leaves the mind to enter the realms of somatic, perceptual or action. Britton gives the example of an adult analysand, Miss A, who literally expelled unwanted thoughts down the lavatory. '*There were days when she did this so often that she broke the mechanism*' (1998, p. 19). Britton's patient remembered in her adolescence traumatically going to an air raid shelter with her mother and being caught between wishing to escape a suffocating experience in the shelter and her fear of bombs falling in the street.

Her conflict was intense and apparently irresolvable. She collapsed in the doorway, retaining consciousness but becoming paralysed, mute and entirely without bodily sensations. ... It was this state of anaesthesia that had been used by her internal voice as a threat

ever after, compelling her to perform compulsively her irrational activities – ‘If you don’t do this you will get the feelings’. The feelings she dreaded were actually the experience of having no feelings.

(p. 20)

Faced with the predicament of being stuck at the threshold, where both inside and outside felt intolerably dangerous, Miss A sought ‘sanctuary and meaning’ in her analysis. She tried to find, in other words, a place that was safe and where, once she was inside it, she could gain coherence of her thoughts. Communication takes place through the projection of feelings, unconsciously, as well as through direct verbal communication. It is through the mother/therapist being receptive to the unconscious communications – projections – that the infant/patient has the opportunity of being understood, and of gaining self-understanding and coherence.

If we return now to Howard, there are two points that can be considered about his identity in relation to his need for containment. Firstly, the experience he describes of ‘going mad’ happens in a way that he does not consciously understand. He does not appear to know which intense emotions drive this behaviour, and when he has such an incident, it is experienced as a rupture to his sense of continuity and coherence. His identity is that he is subject to these rupturing passages, and the sense of having a continuous identity is threatened, but restored through getting to know these processes, in emotional contact with someone else, who performs the function of containing through availability and receptivity. Identity formation occurs within these relationships rather than as a solitary pursuit.

At the beginning of the therapeutic consultation, Howard was unsure whether he would be ‘held in mind’. He says he is not a priority. He conveys in his anxiety that he has to work very hard to contain himself, taking a very tight grip on his paper, wrapping his coat round him and trying to keep emotions in check by playing them down, dismissing them, trying, as it were to make them smaller. This communicates a thought that ‘grown ups’ do not need to be looked after in this way, but rather, they aim to do it for themselves; he wants to be, and to be seen to be a ‘grown up’.

Being held in mind, and not being held in mind

Adolescent anxieties about starting therapy include feeling unsure how it will help, or even will it take place. A fragile sense of newly formed and hard-won independence may feel easily crushed. It is

important to distinguish between the fragility of adolescent independence and a more deeply seated sense of not being 'held in mind', which has led to patterns of relating to others based on a need for self-sufficiency because there is no expectation of being helped. For Howard, both anxieties about his performance in therapy and a deeper lack of containment were present in varying degree.

Having a sense of being kept in mind provides the opportunity to reflect on emotional experiences. Having a notion that someone takes in one's thoughts and predicaments and takes them seriously enables communication of inner states to take place. For example:

Case example

A youth worker is aware that a 17-year-old, Jack, is in difficulties following a traumatic loss. She asks Jack if he would like to talk about himself, but Jack declines, saying talking will only make it worse. The youth worker says OK, but adds that it seems that it must be bad, then. Some time later she sees Jack is still in the same state of mind and again asks him if he wants to talk about it. He again declines but seems to hesitate as though he would like to talk, if only he could. Some time later, the youth worker meets Jack by chance, and this time he begins the conversation and says that he really would like to talk about it, if possible, because he is very troubled by his thoughts, but he will be nervous about talking to someone.

The youth worker's attention for this young person, over a period of time conveys to Jack that he is kept in mind. Jack has to struggle with the idea he has that talking may increase the difficulty rather than easing it. Britton (1998) describes the experience of an absence of containment as leading to a particular state of mind in which there is reduced hope or faith in the possibility of communicating to others about states of mind:

If a mother fails to absorb the infant's projective identification and resists any attempt by the child to know her mind, she gives the child a picture of a world that does not want to know it and does not want to be known'.

(1998, p. 23)

He goes on to describe two different relationships based on the failure of the container-contained relationship. The first is akin to the adolescent fear that the newly achieved independence will be overtaken and lost in contact with adults. There is a 'fear of

being taken in and then destroyed, of one's nature being taken in by another's devouring curiosity and consumed in the process, of oneself being comprehended and nullified during the process' (p. 25). Alternatively there is a fear that the containing person will deny access, entry and acceptance. These represent a fear of loss of identity and fear of loss of agency.

Containing transition and turbulence in adolescence

Positive experiences of relationships between adolescents and parents involve the capacity to engage, on both sides, in intense negotiations, and the capacity to adapt to the process of adolescence through restructuring relationships (Coleman and Hendry, 1999). Thus, at a family level, adolescence is not conflict free, nor is there absence of potential emotional conflict, but if changes are engaged with and negotiated the quality of turbulence is transformed.

Containment addresses potential turbulence. Waddell (1998) points out that the re-emergence of conflicts in adolescence 'tests the quality of early containment and internalisation' (p. 128). The adolescent has to make use of the resources that have been provided in infancy and early childhood to understand, make sense of and contain the impact of anxiety, conflict, ambiguity and uncertainty of internal change in adolescence. The adolescent, in other words, draws on the experiences of being contained in infancy and early childhood. Moreover, as well as drawing on past experiences of parenting, the adolescent make demands of parents in the present context. These demands may be severe, or intense.

Through the need for containment, the adolescent's quest for identity is undertaken in close relationship with others. If the parent and the adolescent can tolerate experiences of uncertainty, anxiety, change, ambiguity, as well as oscillations of feeling, the quality of turbulence is transformed. The mental flexibility required by these processes is extremely significant.

If we now return to the case discussed earlier, Howard, and consider his adolescence, Howard suggested that the transition through his teens contrasted with the turbulence and dilemmas of the present. Through his teens Howard focused on a structure – study at school and University – and a strategy – to 'get away from it all'. Now he is uncertain what to do, or what route to take. He has to make decisions. This is like switching from a train journey to a car, to return to Roberts' metaphor. Howard now feels uncertain about

the future. His conflicting feelings about his parents – in his current relationships with them, and in his mind – his representations of them, are pushed into the forefront.

It is possible that the smoother 'transition' through his teens has given an illusion of a journey towards adulthood, but one in which the problems have been shelved rather than resolved. In trying to 'get away from it all' he took flight – understandably, perhaps – from a difficult situation in the family, but he is now left with an unsatisfactory, even dangerous internal situation. In his need to draw on internal resources to make decisions for the future, he has become aware of the difficulty this internal situation presents, and this has made thinking about himself unbearable. As soon as he thinks, he drowns her thoughts (literally, given the role of alcohol in his difficulties). In this way he is still 'getting away from it all'.

Between us, Howard and I need to find a way in which he can use therapy to think his own thoughts and bear the emotional discomfort. But through the lack within of a flexible, containing aspect of himself, the discomfort of his own thoughts is burdensome. He wishes to put the burden into me, in the manner of a container-contained relationship. His communication to me is that he wishes me to take in these overwhelming thoughts. When I try to return these in tolerable form, Howard complains that I 'make him think'. He was disturbed by trying to hold his own feelings, and by feelings of depression and loss. Discomfort and depression were the consequences for Howard of engaging with what Anderson and Dartington (1998) call the 'adolescent process':

If the adolescent is to successfully achieve adulthood, he [sic] must re-negotiate every aspect of his relationship with himself, and with his external and internal objects in a new context – this activity is what we often refer to as the adolescent process. It is like a review of the life that has been lived so far. ... all adolescents have to deal with the experience of being out of balance to some extent. Indeed it seems to be those young people who have the inner strength and resources to bear to continue the experience of being naturally out of balance, as well as an environment which can support this, who can achieve the best adjustment in adult life.

(1998, p. 3)

There is an echo of Erikson's thinking of the relationship between the individual and society in this formulation of the adolescent

process, but with the difference that the emphasis is placed on the process of engagement with relationships, both internal and external. There is an emphasis, in other words, on what happens when the adolescent is in contact with others, and how the processes of containing emotionality leads to the claiming or reclaiming of individuality. The process of seeking identity has to take place through and within relatedness with others.

Summary

The upheavals of puberty and the long transition to adulthood have created new conditions and contexts for adolescence. The separation of the period of biological maturation from the period of role transition to adulthood is central to understanding adolescence in contemporary societies. This situation generates diverse views which either lament the lack of responsibilities given to adolescents (and young adults) or see it as providing an opportunity for the development of more open, reflexive identities. All the recent social evidence adds to the picture that the quality of the adolescent transition to adulthood is diverse, largely affected by stratification and exclusion (Bynner, 2005).

Recent psychosocial approaches to understanding biographies of young people emphasise the tension between individualised and relational aspects of identity. The renewed interest in narcissism in adolescence, from a psychoanalytic perspective helps to orientate to this tension. It has recently been discussed, variously, that in considering adolescence it is necessary to

- take account of threshold states in late adolescence/early adulthood (Arnett), which represent development and aspiration still in progress or transition rather than final destinations being reached
- explore the quality of transitions; whether they are creative or stagnant (Bynner) and the impact of these on identity, or subjectivity (see chapter 2)
- recognise there is often an absence or confusion of structure, pressing time limits or deadlines (e.g. exam time tables) alongside an apparently endless process (e.g. becoming qualified enough, financially independent etc)
- be aware of the potential for development, emotionally, psychologically, cognitively, and this instils fluidity even where the trends for an individual appear stuck and (self)destructive

PROOF

CONTEMPORARY ADOLESCENCE: STILL THE 'AGE BETWEEN'?

- be aware of the emotional impact of internal and external change on a sense of stability, and the propensity for this to stimulate fear of fragmentation. This indicates the importance of containment in therapeutic work in turbulent conditions
- conversely be aware that an experience of competence in a particular field can trigger hope and a new means of experiencing self more hopefully.

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