

THE ADOLESCENT MIND

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INTRODUCTION.

This paper looks at the adolescent stage of development - what it is and how it has changed. It then looks at one aspect of teenagers and that is teenagers and drug use. In subsequent editions of the TA Times I will be following up with more on this important stage of development.

HOW OLD IS THE ADOLESCENT

So what ages are being discussed here?. Sometimes psychologists disagree on the exact ages constitute adolescence . Below is a list of ages that correspond with different stages of human development. (Where two ages are given it is female first and male second.) Of course as in all human development, these stages are approximations that have quite a bit of variation.

| | |
|--------------------|----------------------|
| Infancy | Birth to 2 years |
| Early childhood | 2 to 6 years |
| Middle childhood | 6 to 11/13 years |
| Preadolescence | 11/13 to 13/15 years |
| Early adolescence | 13/15 to 15/17 years |
| Middle adolescence | 15/18 to 17/19 years |
| Late adolescence | 18/21 to 19/21 years |
| Early adulthood | 21 to 35 years |
| Middle adulthood | 35 to 50 years |
| Late adulthood | 50 to 65 years |
| Early old age | 65 to 75 years |
| Old age | 75+ years |

Diagram 1.

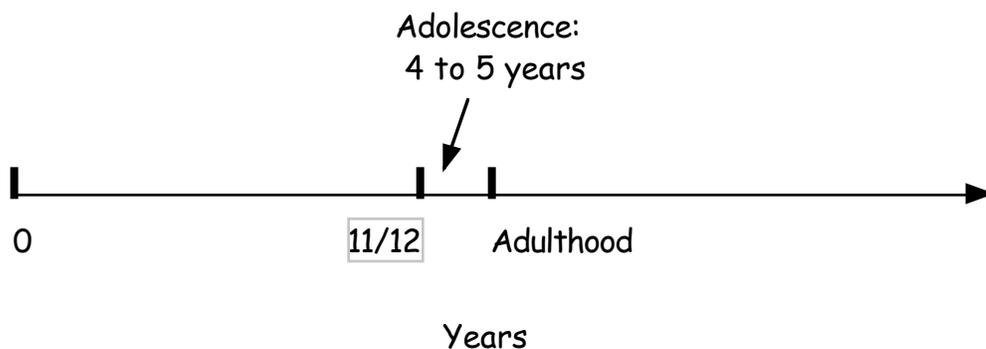
This is somewhat of a culturally biased article in that I am discussing here what generally happens in westernised democratic societies. It is acknowledged that other societies have much shorter periods for adolescence. According to the above diagram adolescence begins around 11 to 13 years of age and stops around 18 to 21 years of age. I would suggest that this is now even somewhat out of date and in such western societies adolescence is increasing in its duration. That is it is lasting longer than it has in the past.

CHANGE IN THE AGES OF ADOLESCENCE OVER TIME

3 or 4 generations ago some adolescents finished their schooling by age 12 or 13 and then went to work shortly after. They could then be married and starting a family anytime after age 16 and were maintaining themselves economically by age 18 or younger. Now days this is far less common.

In this day people turn adolescent around 11 (females) and 12 (males). Girls on average mature 2 years earlier than boys who do not catch up until the last years of adolescence. Adolescence can finish around 18 to 25 years of age, where they become economically and psychologically independent with a regular job and the establishment of a family of their own. This is shown in diagram 2 below

Once upon a time (30 to 40 years ago)



Now days

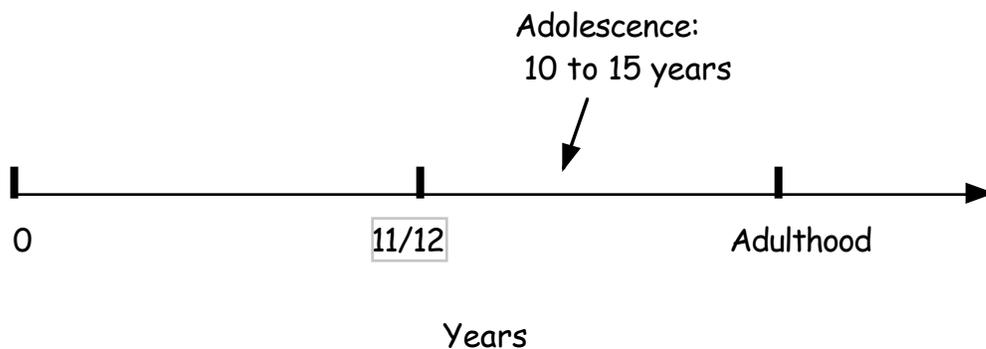


Diagram 2.

So why has this change occurred?. There seems to be a number of reasons for this.

* First, as a general rule the more educated a society is the longer adolescence will be. If one is receiving schooling then one is not working. If one is not working then

one does not have economic independence which is a key feature in finishing adolescence - no longer being financially dependent on others, usually the parents.

Take as an example the training in psychology in Western Australia. 5 to 10 years ago it was possible to become a psychologist and work as a psychologist with a 4 year (full time) degree. So the individual would be at 'school' at least until they were about 22 to 23 years of age. Now it is becoming so that one needs a 6 year psychology degree. This means, that if one studies full time they will not be in a position to earn a full income until they are about 24 to 25 years of age. To do this one would have essentially have been at full time 'school' from age 6 to age 25. No time to gain realistic financial independence and no time to have been out in the work force and dealing with life that did not involve full time education. Such a person at age 25 will be financially dependent and lack any significant life experience in the work force world. So for these people it could be argued that adolescence is not going to begin to end until the age of 25.

* Marriage is tending to occur later. One does not hear much about weddings occurring with 18 and 19 year olds as they did not so long ago. So in this way people do not have to be 'grown up' so early.

* Related to this is child birth occurring later and numbers of children is reducing. This allows people to be more irresponsible in this sense, all they have to do is look after self and not a child.

* As a society we tolerate this period called adolescence more so than in the past. In the city where I live every year there is a week or fortnight called 'schoolies week'. This is where those who have just completed high school (17/18 year olds) go on vacation as soon as their last examinations end. On this vacation they drink too much alcohol, take drugs and engage in gratuitous sex. Whilst I am sure there are many who do not do such things, this is what is highlighted in the press year in and year out. In general it is tolerated by society and even viewed with amusement by some. I would imagine that there are many societies around the world who would not tolerate such things at all.

Not only do we as a society tolerate the adolescent but we go as far as to tolerate somewhat deviant and anti-social adolescent behaviour. We let them be this without trying to force them into being adults with the appropriate behaviour at an early age.

* As some societies becomes more affluent they do not need the group of 'adolescents' to be working so as to maintain a functioning society. Hence such societies are in a position to be come more educated, and governments like in Australia certainly have policies that promote a more educated society.

Another consequence of some societies becoming richer is that its focus changes. There is less attention on meeting the basic survival needs of food and shelter. This can result in more attention turning to the introspection of ourselves

(more self actualising). One of these things can be more of a focus on psychology and human development. More time and money allows a society to do more navel gazing. So the humanities increase in influence and we have psychologists and others being more vocal and influencing thinking in society and in government policy making. So we become more understanding of the adolescent stage of development because it is being studied more and talked about more.

* Life span increases. Over that past 50 to 70 years the average life span has increased by about 20 years. So in this sense there is less of a need to hurry through the developmental stages. As people can now be adults for longer they can then proceed through adolescence at a slower rate.

So it would seem that changes like these in some societies over the past 50 years has resulted in the stage called adolescence becoming longer and longer. Not so much starting all that much earlier but taking much longer to complete.

FEATURES OF ADOLESCENCE

With more study on this stage of development what has been concluded. Collins(1991) has collected some of the 'expert' statements that have been made to describe adolescents, (Diagram 3)

As suffering turmoil
As being pathological
As having a marginal status
As being at a not-quite-age
As in a no-man's land
As at the way station
As the new rebel-without-a-cause
As being sexually unemployed
As being narcissistic
As being a not-quite-somebody
As being an idealist-perfectionist
As being in the learner's permit stage
As being caught in a period of rolelessness
As being disenfranchised

Diagram 3.

These will be discussed more in the next instalment of the adolescent mind.

WHY TEENAGERS TAKE DRUGS

Teenagers take drugs for a variety of reasons. Many are similar to adult use reasons but there are a few that are more likely for teenagers.

Types of drug use.

Some of these come from, Commonwealth Department of Human Services and Health(1994).

1. Experimental use - using the drug to sample the experience. They have heard about drugs and are inquisitive to find out what they are like. This is typical of adolescent and early adulthood drug taking.

2. Rebellious use - The person takes the drugs because it is a rebellious act. They have been told not too by someone or society in general. This a type of drug use that is more common in teenagers.

3 Risk use - This is a teenager reason. Risk taking behaviour is part of the teenager psyche. They sometimes are motivated to do things because they are risky. From time to time one sees television advertisements that show young drug users having negative experiences while taking drugs. These are designed to scare teenagers off taking drugs. However these could have the complete opposite effect, because it shows some of the risks involved in taking drugs (You never know what you are really taking). That risk factor may be appealing for the reasons I just mentioned.

4. Recreational use - this involves using drugs for recreational leisure activities or social purposes such as enhancing social interaction. This is more typical of adulthood drug taking over a long period of time such as the 'cocktail party' or the 'after work drink'. However it also does occur in adolescence. It is more for reasons of Free Child pleasure than from a Rebellious Child reaction to those perceived as authority.

5. Circumstantial use - Specific purpose to induce calmness, endurance, alertness, freedom from pain - soldiers, truck drivers, students, overwrought mothers, the bereaved, job applicants.

6. Symptomatic use - this involves the use of a drug so one can avoid unpleasant experiences or memories or to avoid having to deal with here and now challenges and responsibilities. If the person suffers bad anxiety from early trauma, drugs can be used to sedate the anxiety away. If the person starts to hear 'chatter in their head' (auditory hallucinations) the depressant effect of some drugs can reduce it. This type of use is sometimes called 'self medication'. This type of drug use is very

suited to a Redecision therapy type of counselling which address particular early traumatic events.

7. Dependent use - feeling compelled to use the drug such as is implied in 'drug addiction' or 'drug dependency'. This is the type of individual who has a strong compulsion, desire or obsession to keep using drugs. They seem to not have the ability to have 'just a few drinks', and they just keep drinking. This is the type of person who is usually seen as the 'real drug addict'. The person who finds it very difficult indeed to stop taking drugs. Treatment of these people is very difficult as the desire to take drugs is so resistant to change. At times it is just necessary to help them manage their lives so that they can eventually grow out of the drug use. Sometimes they can stop because they become addicted to something else such as religion.

THE COSTS OF DRUG USE

The two diagrams below show that it is the smallest groups - symptomatic and dependent users that are the most noticeable and the most 'expensive' for society. It is the dependent and symptomatic users who use up much more of the health and legal services in a society from the prisons, to courts, to police, to drug rehabilitation, to hospitals, ambulances services and so forth, than the other types of users.

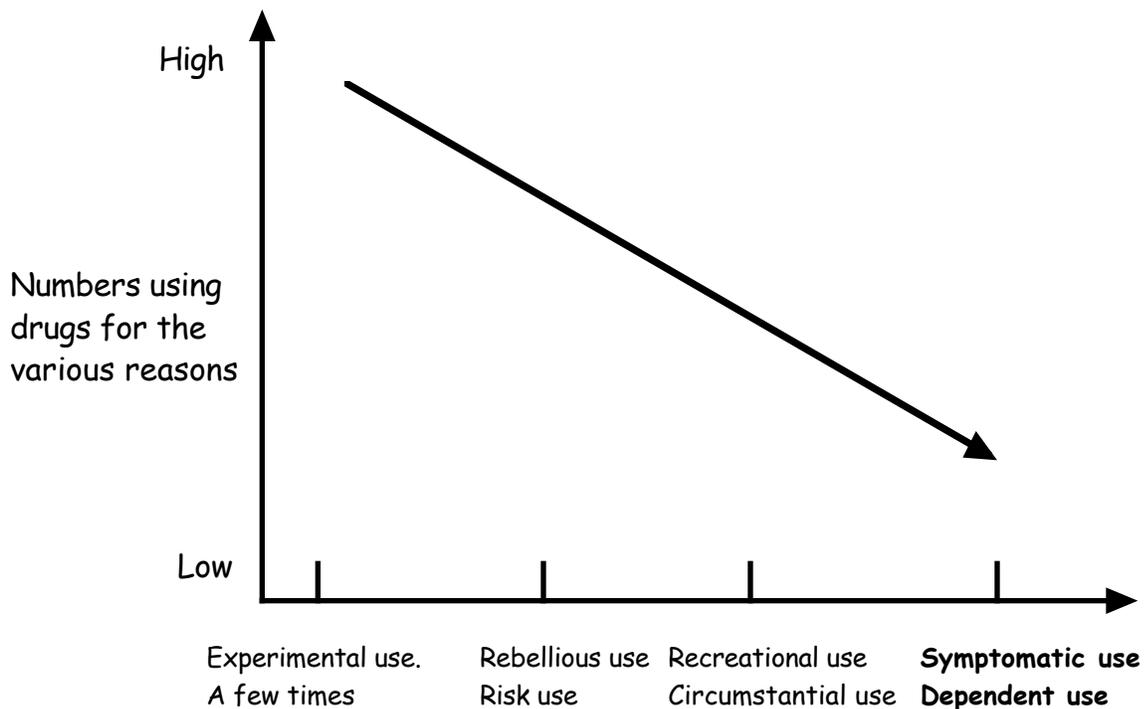


Diagram 4

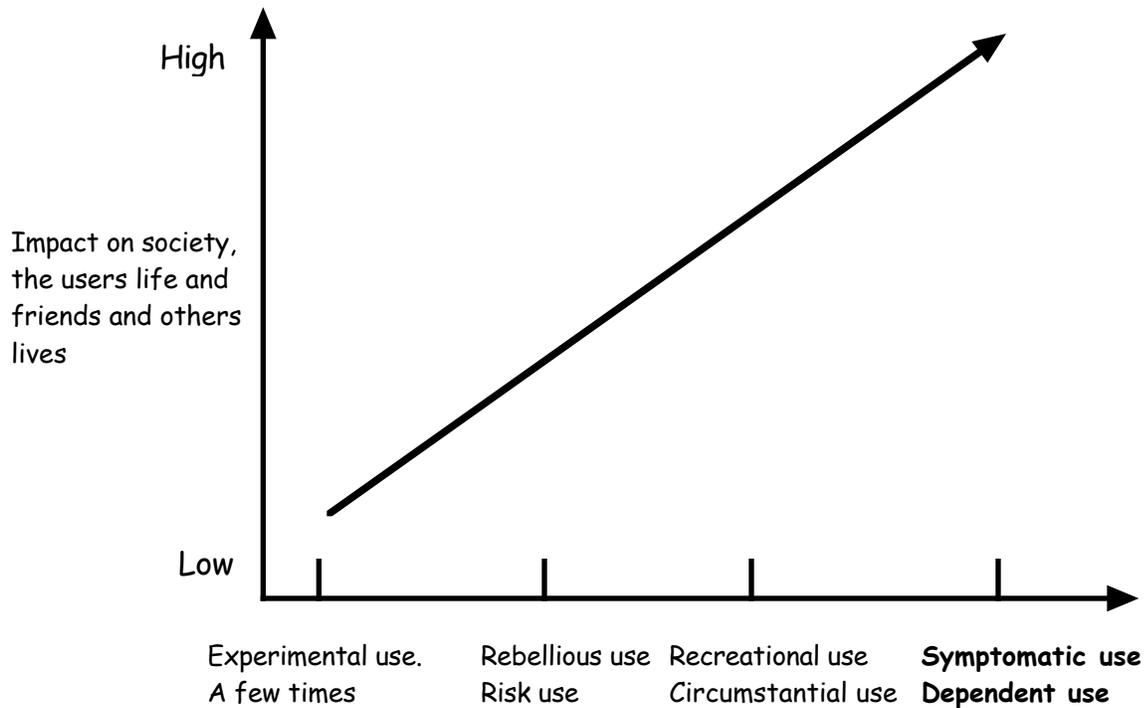


Diagram 5

Those who experiment briefly with drugs are the biggest in numbers but get noticed least and have the smallest cost to society and friends and relatives. The drugs result in much less damage to relationships of close family and friends than does the dependent user who close relationships can be devastated because of the drug use and being in the drug subculture.

WHAT DO YOU DO WHEN YOU FIND OUT YOUR TEENAGER IS TAKING DRUGS?

The first thing you do is not panic. There is a good deal of hype about drugs in particular in the media. If you find some marijuana in your daughter's bedroom it does not mean that she is on a path to become a life long heroin addict like some of the press suggest. More than half of teenagers will try marijuana at least once.

Second, one needs to answer a moral question. Some view taking illegal drugs as immoral and not the right way to live life. Second, illegal drugs are precisely that, illegal. So to use them means you are engaging in an illegal activity. It should also be recognised that in Australian society taking illegal drugs is not very illegal. So Parents need to understand where they stand on these questions because these will dictate how you respond to your teenager who is using drugs. There are two main approaches the abstinence approach and the harm minimisation approach.

If you think drug taking is immoral and not the right way to live life or it is

wrong because it is illegal then you will be taking the abstinence approach. You will be suggesting and requiring your teenager to simply abstain from illegal drug use. That is, they use no illegal drugs. The other approach is to accept that the teenager may use drugs and then you 'work' with them so that they are less likely to be harmed by it.

The key to this is how will the teenager react to your values and ideas about drug use. If the teenager is also of the view that drug taking is wrong and bad for you then the abstinence approach is likely to 'work'. The main problem with this approach is when it does not stop the teenager using drugs. That means the drug use simply goes underground. They continue to use drugs and hide it from you and because you say no drug use is OK then you won't be providing them with information about drug use. So in that way they are more in danger. The other problem is that it damages the overall relationship between you and the teenager. The lines of communication between you and the teenager are reduced and they feel more alienated from you.

If you take the harm minimisation approach you are saying to your teenager, at least in part, that an illegal act is OK. Also by informing the teenager about drugs and how to use them to reduce the harm then that act gives at least some permission to use drugs. So the teenager who is sitting on the fence about using drugs is in one way encouraged to use them by the harm minimisation approach of the parents.

If the teenager is going to use drugs whether you want them to or not then the harm minimisation approach is going to keep the lines of communication with the teenager more open. For instance if a teenage girl gets pregnant she is more likely to tell her parents if she already knows she can talk to them about other 'bad' things like drugs. Also as the title suggests, if the teenager is informed about drugs then they are less likely to be harmed by them.

The next step is to find out what is the type of drug use by the teenager. This can be hard to do and you may need to consult someone who has experience in working with drug users.

Is the drug use:

Group 1. Experimental use, rebellious use, risk use, recreational use & circumstantial use.

or

Group 2. Symptomatic use & dependent use

Group 1 type use is the less 'serious' type of use. Parents have many options with this group to assist the teenager to get through this period. For instance you

avoid making statements that are going to heighten the rebellion (Rebellious use), discuss other ways the teenager can calm self before exams (circumstantial use), provide them with other options for risk taking and recreation such as jet skis, surfing, hang gliding, speedway and so on (risk & recreational use). With the group 1 type drug use the risk to the person is less than group 2. However the ingestion of any drug, like alcohol and cigarettes is dangerous to some degree. With careful management and good information the dangers of this type of drug use can be greatly reduced

With group 2 type use some form of professional help is recommended. The teenager needs to have a look inside themselves and find out what is going on. What the emotional problems are there and then get help to change or manage them to reduce the impact on the teenager.

GETTING OFF DRUGS

'Getting off drugs' mainly relates to the group 2 type user - symptomatic and dependent use. These people will tend to use drugs in a harmful and dangerous way over an extended period of time, They tend to be the regular users either on a daily basis or at least a number of times per week. This is the type of person who is generally seen as the 'drug addict'.

With this group getting off drugs is not hard. Getting off drugs is the easy part, the hard part is staying off the drugs. In the history of a regular heroin user there are many occasions when they got off drugs. The problem is that they could not stay off drugs. They started using again.

This is no different than a person who is very over weight for a long period of time. In their history there would be many times when they have lost weight, the problem is that they have then later put the weight back on.

So in this sense the symptomatic and dependent users do not have a drug problem in stead they have a lifestyle problem. The drug just happens to be the thing that shows up in the lifestyle problem. That is why these people find it so hard to stay off drugs. To do so they have to change their lifestyle and that is a difficult thing to do. They need to change the basic view of themselves and others, change their recreational life, their social world and family world, their work habits, how they deal with stress and so on endlessly. As this begins to be achieved then the person slowly becomes less interested in drugs. It ceases to be a thing that they need or want in their life. In this case the drug use tends to decrease over time and then finally the person will make the break and not use again or use infrequently.

The person who has been a dependent user and suddenly makes a decision to stop using is in a more precarious position. The reason being that if someone stops using drugs suddenly then they can start re-using drugs suddenly. The person who has slowly stopped using drugs over a period of time, then any reuse is likely to

slowly reoccur over a period of time. Then the person is more able to stop using again before the drug use gets to be too much again.

CONCLUSION

I have endeavoured to provide here a introductory look at the adolescent mind. What is the stage of adolescence and how it has changed, features of adolescence and one aspect of adolescence - drug use. I will provide more in subsequent editions of the TA Times.

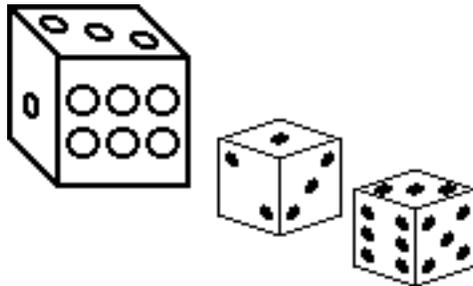
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Life can be a gamble
