

Adolescent Crisis: Between Normal and Pathological Indicators

أزمة المراهقة: بين المؤشرات السوية والمؤشرات المرضية

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Abstract

This paper examines the complexities of adolescence as a developmental stage situated between childhood and adulthood, with a particular focus on the distinction between normal and pathological indicators. Drawing upon psychoanalytic, clinical, and developmental perspectives, the study explores the psychological, physiological, and social transformations that characterise adolescence, highlighting the interplay between identity formation, emotional regulation, and the role of defence mechanisms. The discussion further addresses the impact of puberty, the variability of adolescent crises, and the potential emergence of clinical symptoms, considering both individual and environmental factors. The paper concludes by emphasising the necessity for nuanced assessment and early intervention to foster healthy psychological adjustment and to differentiate normative developmental crises from psychopathological conditions.

Keywords: adolescence; crisis; puberty; psychopathology; identity formation.

ملخص:

يُقَدِّم هذا البحثُ مسألهً تركيبيةً لتعقيدات المراهقة بوصفها مرحلةً نمائيةً تتوسط الطفولة والرشد، مع تركيزٍ مخصصٍ على التمييز بين المؤشرات السوية والمؤشرات المرضية. ويستند التحليل إلى مقاربات تحليلية نفسية، وسريية، ونمائية، بغية استكشاف التحولات النفسية والفيزيولوجية والاجتماعية التي تسم هذه المرحلة الوجودية، مبرزًا جدليةً تشكل الهوية، وتنظيم الانفعال، ووظيفة آليات الدفاع في حفظ التوازن النفسي. ويتناول النقاش أثر البلوغ، وتعدّد أشكال أزمات المراهقة، وإمكان انبثاق أعراض سريرية، وذلك في ضوء تداخل العوامل الفردية والسياقية. ويخلص البحث إلى تأكيد ضرورة اعتماد تقويم دقيق ومتعدّد الأبعاد، والتدخل المبكر، قصد دعم التكيف النفسي السليم، والتمييز بين الأزمات النمائية المعيارية والحالات السيكيوباتولوجية.

الكلمات المفتاحية: المراهقة؛ الأزمة؛ البلوغ؛ الاعتلال النفسي؛ تشكل الهوية.

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1- Introduction

Many researchers and specialists have contributed to the study of adolescence as a stage distinct from other phases of development. In clinical and abnormal psychology, the focus has been directed towards the issue of clinical diagnosis of the various behaviours exhibited by adolescents, particularly in terms of their transience, persistence, clarity, or classification as either normal or pathological.

Furthermore, understanding the psychological process of adolescence facilitates the possibility of establishing clinical diagnoses, as well as comprehending and interpreting adolescent behaviours without a complete bias towards the pathological aspect (psychiatry), or conversely. For this reason, adolescent psychopathology holds paramount importance, considering the diverse psychological and mental disorders, their diagnostic criteria and interpretations, and the potential for therapeutic intervention. Accordingly, this research paper seeks to shed light on the theoretical aspects of adolescence and the accompanying psychological difficulties and disorders that may ultimately lead to the emergence of mental illnesses in later stages.

2. The Concept of Adolescence

Adolescence is a period of transformation, as implied by its terminological meaning in the Latin language, *adolexere* = to grow. It is regarded as a transitional stage between childhood and adulthood. Some researchers, such as E. Kestenberg, assert that the adolescent is sometimes a child, and at other times an adult, but in reality, is neither. The search for an identity, caught between relinquishing childhood and seeking a stable status as an adult, constitutes what is referred to as a crisis, a psychological process traversed by every adolescent. This process results in a disturbance of their psychological equilibrium.

Normal puberty involves the rapid maturation of bodily and physiological functions, leading to the full development of final sexual and physical characteristics. Adolescence is thus associated with profound psychological and emotional changes (Marcelli & Brannier, 2013, p. 5).

Additionally, this stage, accompanied by physical, emotional, social, and other changes, entails specific demands and needs that the adolescent aspires to fulfil and satisfy. However, society, with its traditions and customs, may impede the realisation of these aspirations, thereby confronting the adolescent with a conflict between the desire for fulfilment and the constraints of society. Consequently, this stage becomes complex and fraught with numerous problems (Hamoud, 1981, p. 17).

3. The Fundamental Dynamic Dimensions of Adolescence

Sexual Arousal:

Puberty is characterised by reproductive capability, leading to a libidinal surge or explosion, and a regressive movement of pre-genital drives. The adolescent's internal conflict is not merely a revival of the Oedipal conflict but results from the libidinal eruption in its energetic and dynamic dimensions, which weakens the ego. Puberty thus represents a period of libidinal growth. According to A. Freud,

"Any strengthening of instinctual demands increases the ego's resistance to the instinct."

Therefore, puberty is manifested through physiological transformations that have significant repercussions on the psychological aspects appearing in reality, as well as on the imaginary and symbolic levels. All of these factors impact the process of adolescence. Sigmund Freud, in his work *Three Essays on the Theory of Sexuality*, indicated that at the onset of puberty, changes arise that transform infantile sexuality into its final and normative form. During this stage, the drive seeks the sexual object in the other, and the various partial pleasure zones are unified within the genital area. Several researchers (A. Freud, Melanie Klein, Winnicott) have highlighted that these physiological transformations are sources of disturbances in the adolescent's psychological equilibrium.

Edith Jacobson noted that these changes play an active role in reactivating castration anxiety in both males and females, as the adolescent faces a range of rapid bodily changes that are difficult to assimilate.

4. The Difference Between Adolescence and Puberty

According to Abdallah bin Mahmoud, adolescence refers to the gradual progression of boys and girls towards physical growth, sexual maturity, and intellectual and cognitive development. Puberty, on the other hand, denotes the full maturation of the gonads, signalling the acquisition of sexual characteristics. Accordingly, puberty constitutes one aspect of adolescence and represents the initial indicator of readiness for moral accountability and the assumption of responsibility (Abdallah bin Mahmoud, 2014, p. 8).

Adolescence and Mourning:

During adolescence, there are internal psychological movements (changes) associated with separation from significant individuals of childhood, as well as alterations in relational models. This process can be likened to the work of mourning. A. Freud described several defence mechanisms to cope with object loss during this stage, the loss of the childhood object and the loss of the Oedipal object, as the adolescent seeks to relinquish the Oedipal situation, that is, to free themselves from parental authority and childhood objects. The normal adolescent consequently experiences moments of depression, which are essential for the developmental process.

Furthermore, adolescence is characterised by the resumption of biological growth for sexual maturation. Puberty corresponds to the revival of instinctual drives, marking the end of the latency period, during which the activation of libidinal drives and Oedipal conflicts re-emerge. The manifestations of these conflicts depend, to some extent, on how earlier resolutions were achieved during the latency stage.

The adolescent thus endures a state of disequilibrium, whereby they must relinquish parental objects, resulting in conflicts with parental authority and its invested symbols. The reactivation of the phallic stage under the influence of instinctual movements leads to new manifestations of castration anxiety. Adolescent boys and girls defend themselves against this through regressive behaviours: boys may revert to the sadistic-anal stage, exhibit aggressive agitation, voracious eating, or reject cleanliness, while adolescent girls may adopt oppositional masculine behaviours (such as engaging in games or violent sports) in order to deny their lack of a penis, or conversely, demonstrate behaviours indicative of acceptance of their gendered nature.

The personality of the adolescent differs from that of the child in the phallic stage, as the ego becomes stronger during the latency stage, and the superego is formed through sufficient internalisation of rules. In addition, several differences arise at the physical and cognitive levels (Coslin Pierre, 2002, p. 30).

Blos (1962) regarded adolescence as a second process of individuation, while Coslin posited that this process could be divided into five stages as follows: preadolescence; early adolescence, characterised by the genital phase and the relinquishment of internalised parental objects; middle adolescence, marked by the re-emergence of Oedipal conflicts and the withdrawal of investment from previous (old) objects; late adolescence, defined as a period of structural

reorganisation of personality; and post-adolescence, which corresponds to the onset of adulthood.

Accordingly, adolescence represents a dialectical process between regression and progression, both of which are necessary for individuation. Moreover, adolescence leads to the abandonment of childhood parental images, prompting the adolescent to enter into conflict with their parents. This loss triggers a mourning reaction through the phantasmatic death of these objects, a separation considered essential for the pursuit of autonomy and a defence against Oedipal objects, occurring under the influence of the conflict between dependence and independence, as previously mentioned (Coslin Pierre, 2002, p. 31).

With regard to the mechanism of rationalisation, its aim is adaptation to reality, and it closely resembles the mechanism of asceticism, often accompanying it. However, rationalisation does not marginalise the drives; instead, it channels them towards an abstract dimension, whereby all feelings are transformed into a purely cognitive (intellectual) form on various subjects, while maintaining their instinctual nature, which may be overt or latent, or even disguised (Coslin Pierre, 2002, pp. 34–35).

5. The Psychological Process During Adolescence

The loss of childhood objects, a process analogous to mourning, characterises the psychological work during adolescence. This loss occurs on two levels:

- The loss of the primary (primal) object, or maternal shelter. In this context, the second phase of the separation–individuation process is noteworthy, as it is essential for the adolescent’s psychological development.
- The loss of the Oedipal object, imbued with ambivalent emotions of love and hate, wherein the adolescent seeks autonomy and liberation from parental authority and the Oedipal situation. Thus, during this period, the adolescent endeavours to transcend the parental idealised images, striving for independence, the discovery of new ideal models, and an appropriate perception of reality. About defence mechanisms, adolescents utilise a variety of them, some bearing distinctive characteristics, while others are considered classical. It can be posited that there is a multiplicity of mechanisms employed, some directed against childhood objects and others against the drives.

The defensive system may be elucidated as follows: rationalisation, splitting and related mechanisms, as well as acting out.

- **Rationalisation:** According to Freud, ego defence mechanisms serve to control the drives at the level of thought. Some adolescents spend significant time in discussion and adopt philosophical or political perspectives, which exemplify this mechanism. A. Freud draws a parallel between rationalisation and asceticism, defining the latter as an ego defence mechanism aimed at monitoring the drives at the bodily level.

This is observed among certain adolescents who engage in specific activities related to the body, such as walking long distances, abstaining from particular foods, refraining from wearing warm clothing, and rejecting any form of bodily satisfaction or pleasure. In this context, these mechanisms reflect attempts to control sexual desires.

- **Splitting and Its Accompanying Mechanisms:**
 - Splitting is regarded as one of the primitive defence mechanisms, utilised by the adolescent to protect the self from the conflicting ambivalence associated with attachments to parental images. Adolescents often experience highly contradictory situations in their relationships with parents, resulting from identity confusion manifested by the re-emergence of the splitting mechanism of the self. In addition to this mechanism, other defence mechanisms may be employed, such as persecutory projection onto the external world, which is translated into feelings of hostility and perceived threat. Thus, the activation of these primitive defence mechanisms is related to the nature or specificity of object relations between the adolescent and their environment.
 - **Acting Out:**
 - Acting out may dominate the behavioural domain of the adolescent, serving as a means of protection from psychological distress and internal conflicts. However, when these mechanisms represent the sole solution, they may impede the gradual process of maturation (D. Marcelli & Alain, 2013, pp. 19–20).

E. Kestenberg notes that adolescence is a stage of psychological reorganisation, taking into account childhood, infantile sexuality, and all complex patterns of investment during childhood as well as the latency stage; the latter is particularly significant in shaping the models of adolescence.

Puberty may be experienced in either an organised or disorganised manner, as this period leads to reorganisation and conflicts around identity, whether these arise suddenly or gradually, and involves a disturbance of prior identifications (E. Kestenberg et al., 2001, pp. 105–106).

During these disturbances, the accompanying symptoms and their manifestations may take several forms, yet they do not necessarily acquire a psychopathological meaning, which complicates their understanding. Troublesome manifestations should not be regarded as the most significant indicators; instead, they represent the adolescent's capacity for psychological organisation. In this sense, crisis is considered essential.

What is considered of particular importance during adolescence and puberty is finding time for waiting and fantasy, as well as developing the capacity to tolerate and control arousals without allowing them to assume a destructive role. In other words, the significance of this period lies in the transition from disappointment to the search for meaning (E. Kestenberg et al., 2001, p. 110).

6. The Impact of Pubertal Processes on the Adolescent

The issue of identity during adolescence is of central importance; it cannot be addressed without reference to the body. However, identity is not reducible to the physical dimension alone. During the morphological changes affecting the child's body, as it transforms from that of a child to that of an adult, the adolescent must assimilate these changes and integrate the new body image and gender identity whether female or male along with the continued sexual and reproductive development characteristic of adulthood (Jean & Christoph Tamisier, 1999, p. 124). This may lead to psychological disturbances and anxiety as the adolescent seeks to navigate this period.

According to E. Kestenberg, childhood in general, and the latency period in particular, are crucial in establishing the foundations for future narcissistic structures in adulthood, and also shape adolescent models (E. Kestenberg et al., 2001, pp. 110–111).

About certain psychopathological disturbances, these may be attributed to the traumatic nature of adolescence and puberty. This trauma may result in ego inhibition or disturbance, rendering the adolescent incapable of utilising previous defence mechanisms in the face of this novel developmental situation. In this context, time may serve as a crucial factor in integrating this experience, whereas, for others, an inability to overcome such circumstances may lead to the emergence of a severe psychotic reorganisation (E. Kestenberg et al., 2001, p. 113).

7. Normality and Pathology in Adolescence

Adolescence is a stage marked by numerous changes, wherein the term "adolescence" refers to growth between childhood and adulthood. Adolescence is a transitional period, and as E. Kestenberg indicated, the adolescent is neither a child nor an adult. This dual movement

between childhood and adulthood, in itself, constitutes a crisis that characterises the psychological process traversed by every adolescent. In contrast, puberty refers to rapid maturation at the physical (physiological) level, culminating in the complete development of sexual characteristics, which occurs concurrently with psychological and emotional changes (D. Marcelli, 2009, pp. 3–5).

The central notion is that the crisis of adolescence is rooted in the concept of developmental conflict, a conflict experienced by most adolescents. Adolescence represents a moment of psychological reorganisation that commences with puberty, which exerts profound effects on the psychological domain. During this period, the adolescent undergoes an intense process of reorganisation, experiencing various changes and contradictions (A. Braconnier, 1988, pp. 48–49; D. Marcelli).

Confronting and accepting instinctual drives, as well as the contradictions and emotions directed towards parents (love, hate), opposing them while simultaneously remaining dependent upon them, constitute situations that are relatively unusual during other life stages. However, during adolescence, these situations serve as indicators of the formation or construction of the structure necessary for adulthood.

According to Widlocher, the distinction between normality and pathology in adolescence is best understood through a nuanced comprehension of adolescent behaviours. He rejects the notion of a continuum between behaviours considered as indicators of pathology and those signifying normal psychological experience. Instead, every behaviour must be evaluated in terms of the extent to which it displays coherence and flexibility (fluidity) with other behaviours, or conversely, rigidity.

It is possible to observe a particular symptom within a rigid behavioural system that is pathological. In contrast, the same symptom may appear within a flexible behavioural system and be regarded as usual. The utilisation of specific terms from psychopathology to understand the normative process of adolescence exacerbates the ambiguity between normality and pathology at this stage. For instance, Winnicott draws parallels between psychotic individuals, particularly delinquents, and some aspects of the adolescent process. Similarly, A. Freud compares psychotic manifestations and puberty through the use of primitive defence mechanisms. At the same time, Haim refers to the work of mourning accomplished during adolescence and its associated depressive movements.

The structural similarity between the normal adolescent (experiencing the crisis of adolescence with all its normative manifestations) and the pathological adolescent

(experiencing a psychotic crisis, clinical depression, or psychopathic behaviours) does not merely indicate a resemblance in symptoms; instead, there must exist common threads between the normative adolescent crisis, which organises growth and maturity, and the persistent pathological organisation identified by some researchers (Marcelli & Braconnier, 1988, pp. 54–55).

According to J. Bergeret, a well-adjusted individual is one who, like those with mental disorders, experiences conflicts but has not encountered internal or external difficulties exceeding their inherited and acquired emotional resources and personal defensive capacities. Such an individual possesses the flexibility to manage their instinctual needs, as well as their primary and secondary processes at both the personal and social levels, all while taking reality into account (Bergeret, p. 150). According to D. Windlocher, adolescents may express themselves through exhibitionistic behaviours and deviant situations during moments of development in this stage.

M. Laufer notes that some disturbances observed during adolescence reflect temporary developmental difficulties, which do not permit a single diagnosis of a persistent and severe imbalance. Nevertheless, this does not imply that such difficulties should be neglected or that help should not be sought. The dynamic nature of development clarifies or confirms the adolescent's capacity for change; thus, it is essential to identify risk indicators that may suggest a problematic developmental trajectory, rather than relying solely on specific pathological cases (Moses Laufer, 1979, pp. 8–12). For this reason, it is important to recognise the principal indicators of adolescent vulnerability to psychological disturbances or mental illness.

The physical and physiological changes that occur during adolescence have an impact on adolescents' behaviours. Normal psychological development in adolescence exposes the individual to pressure and specific difficulties, which are associated with these changes or with sexual maturation (Moses Laufer, 1979, pp. 13–19).

7. The Crisis of Adolescence

7.1. The Terminological Meaning of the Concept:

The term "crisis" is derived from legal terminology and denotes a moment of rupture. Within the context of adolescence, this stage of development is characterised by negative phenomena indicative of crisis. These negative phenomena refer to the pathological process in its development. For researchers in the field of developmental psychology, the individual passes through several crises throughout the life course, such as the eighth-month anxiety crisis, the

Oedipal crisis, and the crisis of puberty. These crises contribute to the process of maturation and are not regarded as pathological in the individual (A. Braconnier & D. Marcelli, 1988, pp. 37–38).

Other researchers, however, consider the concept of crisis as referring to a temporary disturbance of the individual's mechanisms, which either internal or external factors may cause.

In psychopathology, the concept of crisis may be defined as a temporary moment of disequilibrium and rapid transformations (substitutions) that affect either the regular or pathological balance of the individual. Its development is variable and open-ended, linked to both external and internal factors (Marcelli & Braconnier, 1988, pp. 37–38).

The notion of crisis in psychopathology is somewhat complex and ambiguous. According to Marcelli and Braconnier (1999), a crisis is defined as a moment of temporary disequilibrium or rapid transformation that impacts the individual's regular or pathological balance. The evolution of this crisis is open-ended and variable, and it is connected to both external and internal factors. Thus, the concept of crisis differs from that of conflict, as conflict refers to two opposing situations without a limited time frame. It also diverges from the concepts of tension and catastrophe, although these concepts are, to some extent, encompassed within the broader notion of crisis (Coslin Pierre, 2002, p. 104).

7.2. The Concept of Adolescent Crises According to Psychoanalysis

Psychoanalytic concepts of adolescence focus on characterising this stage by the presence of disturbances and temporary maladaptation, which are deemed necessary for development and the successful progression through this stage. Puberty leads to psychological reconstruction, resulting in internal disequilibrium for the adolescent in terms of instinctual direction, the work of mourning (defensive adjustment), and the search for identity. These constitute the adolescent's fundamental tasks, with particular emphasis on bodily transformations, which disrupt body image and produce physical pressure, typically expressed by the adolescent through anger, tension, or motor discharge (acting out) and similar behaviours as attempts to manage this pressure.

Among the psychoanalysts who describe this stage as a crisis are Evelyne Kestemberg, Laufer, and Anna Freud, who consider the adolescent crisis to be a developmental conflict. Adolescence is a period of psychological reorganisation initiated by puberty, characterised by latent depression and the search for identity. Distinct manifestations of this crisis include acting out and oppositional behaviours. For Kestemberg, the crisis is associated with the abruptness of puberty, which induces in the adolescent a momentary sense of pride followed by anxiety. For A.

Freud, this crisis is linked to contradictory situations involving love or hate towards the parents and the tension between dependence and the search for autonomy.

Anorexia nervosa, addiction, intellectual inhibition, or the onset of schizophrenia are among the clinical manifestations observed (Coslin Pierre, 2002, pp. 109–110). Priority has been given to puberty due to its contribution to the structural organisation of adolescence (Kestemberg, 1967), particularly regarding changes in the adolescent's phantasmatic body image, whether exaggerated, rejected, or denied. Freud also notes the unification or convergence of partial drives within the sexual drive and the potential for reproduction (A. Braussel, A. Gibeault et al., 2001, p. 17).

According to E. Kestemberg, this situation involves a conflation of object-libido and narcissistic libido, wherein the conflict associated with parental images affects narcissistic libido.

E. Kestemberg also considers the crisis of puberty to function as a new organiser, akin to the organisers described by R. Spitz. Through instinctual movements and the specific bodily changes of adolescence, a new relational model emerges.

Thus, the adolescent crisis is both necessary and important, provided it does not persist beyond the usual duration (A. Braussel, A. Gibeault et al., 2001, pp. 18–19). Adolescence is the period during which the psychic apparatus is consolidated, and secure, stable ideals are formed (A. Braussel, A. Gibeault et al., 2001, p. 22).

8. Conclusion:

The issue of normality and pathology assumes a particular significance during adolescence, owing to the unique nature of this stage and the psychological process experienced by each adolescent, as well as its concurrence with puberty. This developmental period differs from previous stages of growth, and the behaviours exhibited by adolescents at this time may take various clinical forms; some are temporary, while others persist into post-adolescence and adulthood. Such behaviours serve as mechanisms or strategies for seeking emotional and psychological equilibrium and achieving adaptation. Not all adolescents can regulate and manage the drives and the anxiety arising from puberty, due to the rigidity of psychological functioning and defence mechanisms that result from the interaction between individual (internal psychological) factors and the adolescent's environmental influences.

It is important to note, in this context, that the concept of crisis does not inherently denote pathology. Rather, any factor that impairs the adolescent's capacities, potential, or emotional and

psychological investments warrants intervention and psychological treatment in order to restore emotional and psychological balance and stability.

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