



The Precursors of Adolescence

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The Precursors of Adolescence

This chapter and the six that follow will be devoted to the delineation of the transitional phenomena of late latency-early adolescence and the psychotherapeutic strategies involved in this period. All too often, child psychotherapists design their theories and organize their therapeutic work around latency and adolescence, each in isolation. As a result, the period of the transition between latency and adolescence tends to lose in importance. The developmental phenomena of the transition, which have marked implications for adolescent and adult functioning, are deemphasized in theory and clinical practice. The transitions of the adolescent brink are cognitive (e.g., evocative to communicative symbols and speech); physiological (e.g., the appearance of orgasmic potential), and psychological (e.g., ludic demise). They are subject to pathological turnings and influences. These phenomena are usually considered to be automatically resolved when maturation and social influence move the attention of all concerned to other problems. Untended and unchanged, the transitions, when they have taken a wayward turn, either fail to progress, succumb to inhibitions, or are mastered through harmful mythologies that set at ease minds deserving of better explanations and directions. This can result in symptoms and character traits in later life which, like fossil traces, carry over remnants of past problems.

Emotional maturity in adolescence is not turned on like a light bulb, but is the result of a long process of development with origins in late latency. For some of the time, it is accompanied by striking physical maturation. There is, of course, a tendency to link the two phenomena as though they were facets of a single phenomenon. This has led to the tendency to view adolescence—the transition phase between the stable ego structure of latency and the stable ego structure of adulthood—as a stable process comparable to latency and adulthood and limited in time to the period of physical growth and undifferentiated from it.

Actually, adolescence is neither. It is more a period of transiency than of stability. Beginning with the late-latency time period, a multitude of ego structures are tried, developed, and discarded. Physical and emotional maturation should be differentiated.

To effect this, physical maturation would best be called *youth*, that is, the period between the onset

of physical sexual maturation (ages 11 to 13) and the attainment of full adult growth (ages 17 to 19). As in the case of a number of other arbitrary clinical terms, the time period described would deal only with an easily observed superficial aspect of the growth phenomenon (i.e., the growth spurt and the development of primary and secondary sexual characteristics).

Emotional maturation would best be called *adolescence*. If we follow this categorization, we shall find that some of the phenomena usually considered to be part of adolescence begin before the time period during which physical growth occurs. A description of these follows.

The Shift from Latency to Adolescence

The first stages of emotional growth that mark the beginning of the move away from the ego organization of latency are manifested in a change of cognition. There is a shift from self-cathexes and intuition to an intensified cathexis of the object world and reality testing. Foremost among the mental elements involved is the shifting, into the service of object ties and reality testing, of certain symbolic forms. These include the shift of the waking arena for the expression of fantasy away from latency symbols and toward object ties patterned after the prelatency relationships with parents as objects of fantasy activity; the shift in emphasis from evocative to communicative symbols, and the appearance of communicative speech and of tertiary elaboration. The acquisition of these cognitive skills paves the way for the acquisition of the ability to fall in love. They make it possible to include the needs of the loved one in the future planning of the lover on the level of preconscious planning.

In addition to the development of the shifting symbolic forms of late latency-early adolescence, there are maturational and social pressures that give rise to the developmental state of adolescence. Of necessity, the occurrence of these factors is early (from age 8 to age 14). The three primary factors which initiate and shape the move from latency to adolescence are

1. Psychological/emotional, characterized by the return of overt prelatency fantasy activity; ludic demise; decline of the structure of latency, and the shift from dependence on the reality one can feel to dependence on the reality one can touch
2. Puberty, the physical changes of youth and the psychological impact of menarche or the first ejaculation.

3. Social and parental pressure toward social behavior with appropriate sexual partners, including dating; parental encouragement of sexually differentiated social behavior (e.g., “make-out” parties, training bras)

The Return of Prelatency Fantasy Activity

One of the major problems to be worked through in adolescence is the resolution of fixations to oedipal and preoedipal fantasy structures. These guide, even lock, the drives into patterns of discharge that become characteristic for a given individual. As a result of the persistence of these patterns, adults repeat painful relationships derived from these fantasies.

Children are thought to “enter latency” as a result of the repression of oedipal wishes. This repression is produced through involvement of the system consciousness with earlier (e.g., anal phase) drive manifestations which had been recathected through regression. In “entering adolescence,” the child must reconfront, with symbols drawn from reality, that which was only temporarily resolved through fantasy symbols during the latency years.

The nature of symbols available to the child changes during the transition from mid-latency to early adolescence. Psychoanalytic symbols (those with repression of the link between that which represents and that which is represented) dominate fantasy play and dreams in mid-latency. Small manipulatable replicas (called ludic symbols—see Piaget 1945), such as toys, dolls, and two-dimensional images, can be used as symbolic representations in latency play to manifest latent fantasy content. In the same context, verbal images are used in daydreams. During sleeping dreams, visual components dominate. In both nighttime dreams and daydreams, such symbolic representations continue to be used life-long. The use of ludic symbols in play wanes from middle to late latency. This is the ludic demise. As a result, fantasy becomes less effective as a latency defense, and play therapy begins to lose “play,” which is the very source of its name and perhaps its primary means of communication with the secret and unconscious world of the child. However, though play ends, fantasy continues. By early adolescence, reality objects are often recruited to serve as symbols. Through this step a door is opened, either to living a fantasy-dominated life or to establishing a bridge to the object world and perfecting future planning. In the transitional phase between mid-latency and early adolescence, attempts to resolve problems through autoplasmic fantasy activity continue even after ludic demise has begun. During this *phase* of transition,

fantasies are less masked and representations become more explicit. Masochism becomes represented by fighting or physically hurting oneself. Bisexual fantasies in boys are manifested, for example, by effeminacy or wearing items of the mother's clothes; or are defended against, for example, by lifting weights to ensure a manly physique. Scopophilic fantasies are lived out through illustrated sexual magazines and Peeping Tomism. Fixation at this level results in such characteristics as residual effeminacy, transvestitism, and scopophilia.

In early adolescence the search for symbols reaches into the object world. Thinly veiled expressions of oedipal wishes become scenarios for which there are recruited, from family members and close peers, the reality object symbols used to play out the fantasies. At this point, sustained fantasies involving the parents as objects appear. The boy fantasizes that his mother or an older woman will help him with his sexual urges. The girl feels warm with father, or manifests fears of burglars attacking her, from whom father will save her. Intense jealousy of father and fear of besting him, or concern that he will strike one or do injury, become directly manifest in boys; children of fathers who were excellent in school dare not exhibit academic proficiency. The core fantasies that lie in the unconscious of these individuals are the oedipal fantasies that dominated in the 4- and 5-year-old. If the child fails to resolve, deacthet, or modify these core fantasies, he may well react to new objects as though they were the old ones and thus replace reality with his own fantasies. These steps in the move toward restoring prelatency fantasy style begin at about age 8. It occurs before the vast increase in drive-mobilizing sexual hormones that occurs at puberty. Therefore, it cannot be attributed to hormonal changes alone.

Prelatency fantasy style is characterized by a relatively direct representation of the core fantasy. Sexual role-oriented wishes are expressed with direct representation of the parent as the object (e.g., "when I grow up I'll marry daddy"). During prelatency, ludic symbols which are close simulations of reality dominate. However, in dealing with stress, distorted representations are available for the formation of manifest symbols from as early as 26 months of age. The use of distorted representations takes the forefront during latency. The fantasy activity of latency is characterized by marked displacement and symbolization, so that vast distances exist between the latent and manifest contents (unconscious and conscious) of the fantasy. The parent becomes a king in a distant land or an amorphous monster. Sexuality is reversed and becomes hostility. The core fantasy is distorted by the structure of latency; the fantasy style of early adolescence expresses the fantasy more directly through the use of real

objects to live out the fantasy.

After the phase of transition described, early adolescent fantasy style develops to the point of more nearly resembling the fantasy style of prelatency than any other psychological process. The two fantasy styles can be differentiated on the basis of the presence or absence of narcissistic emphases in the child's conceptualization and use of symbols. For the most part, *prelatency fantasy style* emphasizes the use of symbols for the evocation of inner needs and feeling states. This use of the evocative polarity is continued in latency with its markedly distorted manifest symbols. *Adolescent fantasy style* and its mature cognate, future planning, shows a return to the reality representations of prelatency, with emphasis on the use of symbols in their communicative and adaptive polarity. Psychotherapy during adolescence requires the encouragement of the use of symbols in their communicative context. Ludic demise is accompanied by a shift in emphasis in the thought processes of the child from the intuitive, magical, symbolic mode of thinking to the more reality-oriented use of interpretations associated with abstract conceptual memory organization. In going from play therapy to insight therapy, the psychotherapeutically effective maneuver used goes from catharsis through play to insight through verbalization.

"Masters of the Universe" or "Superman" can serve to block insight and minimize discharge through catharsis in play therapy by providing ready-made fantasy figures and stories that shoulder away from center stage the private symbols that a child might have used for evocation and mastery. Such contaminations of play therapy are called *cultural capture*. The therapist should try to get the child to substitute his own symbols. Once the child has gained a firm footing on the far side of ludic demise, the same popular culture figures can serve as useful passive symbols, such as those found in mature sublimation through the enjoyment of the creations of others. These symbols and the tales in which they dwell may become the basis of discussions that reveal the child's interests and complexes.

Once children have changed their symbols from toys in the evocative mode to communicative reality symbols, one runs the risk of a reinforcement of intuitive and magical modes of thought if the use of psychoanalytic symbols in a play context is encouraged. Adolescents usually reject play as childish and resist such activities, thus minimizing the danger of a regression induced by the therapist. The most common situation in which there occurs this sort of regressing activity on the part of the child therapist can be seen at those times when a formerly excellent play-child who has found communicative speech

and self-reflective awareness is confronted by material that requires exclusion from consciousness. Under these circumstances, the child patient may become silent as a defense. The therapist, in an attempt to reinstate a therapeutic environment, encourages the child to play. This encourages regression and should be avoided.

During the transition from latency to adolescence, unprovoked swings between play and communicative speech may occur. These are accompanied by more magical and intuitive thinking when play symbols are dominant. At such times the therapist is forced to switch his cognitive orientation to coincide with the child's state of cognitive regression.

All symbols at all stages of development have the potential to serve in both evocative and communicative roles. In the analysis of any individual symbol, an estimate of the degree of emphasis on the evocative or communicative pole is appropriate. Such analysis can be applied to all symbols at all ages and stages. The development of ludic demise is supported by the maturational shift to communicative symbols.

In prelatency, the child is buoyed by a sense of omnipotence; there is a sense of being indestructible. No wonder the child may say *anything*, in spite of the capacity, available since 26 months of age, to use masking psychoanalytic symbols. Contrariwise, the age of latency is haunted by a sense of humiliated smallness. It is ushered in with the introduction of castration fear, fear of loss of love, and the incest barrier. Fantasies that involve objects (parents) in sexual and aggressive contexts become unbearable. The poor reality testing and cognitive function of the child permit the use of repression, fragmentation, displacement, symbol formation, and synthesis of symbols into story patterns. Through the use of these mechanisms, disguised fantasies replace real-life confrontations. The drives are discharged without danger to loved ones. Situations that relate to or stir up the core fantasies (pregenital, oedipal, and genital) are resolved by the formation of seemingly unrelated conscious fantasies. The configuration of ego functions that produces this activity is an important part of the ego structure of latency. The formation of benign fantasy in this context provides a buffer to permit the continuation of the total structure of latency.

Loss of latency-age fantasy defenses leaves the child exposed. Failure or default of these mechanisms

results in a breakdown of the structure of latency as a means of mastering current problems and forces direct confrontations with the parent and reality. This is the paradigm for the parent-child confrontations of adolescence, when maturational improvement in reality testing and cognition (improved reality testing, ludic demise, increased drive, social pressures, improved abstraction ability, and reinforcement of object influences through sexual maturation) permanently deprives the child of the use of fantasy as the sole means for solving problems.

Between ages 7½ and 8, there is a marked improvement in cognitive function, with operational use of the capacity to comprehend cause-and-effect relationships between objects that are concretely present. The magical power of words can no longer be used to cause changes in relationships between real things and between real people. Throwing water does not cause rain and the killing of a distant king wreaks no vengeance on a father in the here and now. The structure of latency fails in its function, and it crumbles. Reality becomes more and more the obligate outlet for the discharge of the drives—the stage is set for the turmoil of adolescence. Now the demands of the world and of the drives expressed in prelatency fantasies must be faced and resolved.

Puberty

Puberty begins between 11 and 14 years of age. With puberty, youth begins. *Puberty* is defined as the time of the onset of the external physical development of the adult biological sexual apparatus. Then there begin the development of secondary sexual characteristics, enlargement of the primary sexual apparatus, and the development of pubic, axillary, and body hair and, in boys, the beard. These and other bodily changes are the results of a marked increase in the amount of sexual hormone produced by endocrine glands. Such body changes accelerate and intensify the process of parental and social encouragement of dating and parties with emphasis on kissing and eroticism. In addition to producing the physical changes of puberty, the increased production of hormones stimulates the sexual drives. Stimulation of sexual or aggressive drive is one of the factors that can be implicated in breakdowns and the eventual destruction of the already crumbling structure of latency.

Puberty provides dramatic experiences for the child. The youngster is supplied with an internal mental awareness of bodily changes that organize the psychic elements of the long-developing adult

emotional sexual apparatus. Newly developed body organ functions guide the attention and the fantasy with planning of the child in an outward and object-oriented direction.

The opposite of self-serving omnipotence is the object-oriented altruism required to care for and raise a child. The opposite of narcissism is the ability to sacrifice one's energies and time in the service of reproducing and sustaining the human race. The child's harbinger of the taxes to be paid for the privilege of having and using life is contained in the experiential impact that accompanies the first menstrual period (menarche) or the first ejaculation.

Menarche. Three aspects are basic to the impact of menarche: (1) There is the period of expectation of menarche and its effect on the psychology of the late latency-early adolescent. (2) There is the effect of menarche itself, with its realistic statement of womanhood, which identifies the child with adult sexual potentials and which either squelches or intensifies conflict in relation to bisexual body image fantasies. (3) There is the influence of menarche on the reactions of others in the child's environment. They waken to her as a sexual object. She in turn acquires a cognate physical resource that makes adult sexuality and sexual communication possible on a nonsymbolic organ level. Object relations are thus reinforced.

During the period of expectation of menarche, which starts as soon as the girl first hears about and develops a concept of menstruation, there lies in wait in a corner of each girl's mind, ready to spring to the center of attention, a preoccupation with menstruation. There may be hidden fantasies that somewhere within oneself there is a bit of a boy, perhaps even a penis, ready to grow. These are bisexual fantasies left over from the confusions of the prelatency period. Boys have corresponding fantasies.

This upsurge of pregenital bisexual conflicts and fantasies produces periods of identity diffusion and emotional disequilibrium in the girl. This period of expectation has been extensively studied by Bios (1962), Deutsch (1944), Fenichel (1945), A. Freud (1936), Hart and Sarnoff (1971), and Kestenberg (1961, 1967). All consider the bisexual phase of late latency-early adolescence to be a normal reaction to the expectation of menarche. The illusory penis is seen as a psychic reality maintained in order to protect the little girl against narcissistic depletion. It is worthwhile for the therapist to be alert to such conflicts when working with premenarchical girls.

Menarche is anticipated by children in terms of fantasies experienced in earlier years. Thus, there is fear of oral deprivation derived from the thought that once one reaches womanhood, one is one step closer to being on one's own. There are feelings of revulsion at the thought of messiness, or even fear that the process cannot be controlled. This mobilizes defenses in the direction of controlling everyone in the immediate environment as a way of working through the passivity involved in the expectation of an uncontrolled flow of blood. Concern with bodily changes and catastrophic responses to slight bodily injury are a signal to the child therapist of a preoccupation in the patient with an event that in both fantasy and reality nullifies any thought of being a boy.

Almost universally puberty is a time of inner turmoil as a result of a combination of the psychological factors just described and internal sensations derived from the bodily changes of puberty. Kestenberg (1961) has described the ebb and flow of these sensations as a result of the increasing flow of hormones that initiates the bodily changes that presage the onset of menarche. Girls can become so preoccupied with the nipping-in of the waist, which is one of the first signs of puberty, that they develop obsessional symptoms and refuse to go to school. Confusion of body image occurring at this time can interfere with the child's capacity for abstract thinking, resulting in impaired progress in mathematics and difficulties in spatial relations and chart and map reading. Kestenberg (1961) recognized that confusion of body image and sexual identification produce vague and clouded thought processes in conflict areas and beyond. It is imperative that psychotherapists work through these areas with youngsters who present with this symptomatology. Social pressures may intensify the problems (Kestenberg 1967), sometimes evoking relatively dormant bisexual fantasies. Educational activities such as sex education movies may mobilize bisexual fantasies. For example, a child dreamed that she grew a faucet to control her menstruation, with the association that the faucet in the dream looked like a penis, after seeing a sex education film that in her case raised more questions than it answered.

Other factors involved in stirring up conflicts around pregenital bisexual fantasies in the premenarchic child are parental conversations and the maturation of friends. The influx of bisexual fantasies stirred by these inputs concentrates the fantasy life of the individual around sexuality. Kestenberg (1961) has viewed this circumstance from the potentially positive aspect that for some children, this organization of fantasy provides an opportunity to work through and even resolve earlier conflicts. These results might otherwise not have been reached.

With the first menstruation an unambiguous reality event intrudes on the confusion to define the sexual role and identity. Kestenberg (1961, 1967) and Bios (1962) describe the first menstruation as the necessary organizer which, for the young girl, serves to crystallize and define body boundaries. To the extent that there has been confusion about identity and body image, this clarification is paralleled by a consolidation of the feminine role and clearer thinking. Likewise, to the degree that the girl finds a feminine role unacceptable, the menarche, with its finality of meaning, intensifies and organizes fantasies related to feelings of castration and impaired self-esteem. These fantasy systems are in turn responded to by a panoply of defenses producing disparate symptomatology.

Deutsch (1944) described the first menstruation as traumatic, regardless of prior instruction. Kestenberg (1961) emphasized its positive aspects in contributing to the acceptance of femininity. P. Bios (1962), in contrasting the preadolescent and adolescent girl, sees vagueness and ambiguity giving way to clarity of perception following menarche. The complexities of the reproductive apparatus of the female, unlike those of the male, are hidden within the body. The prepubertal girl is told that there is something within her which is as "fancy" as that which is on the outside of the boy. The non-demonstrable nature of the female internal sexual apparatus permits the child much leeway in fantasy; the illusory penis fantasy is a case in point. Menstruation provides a concrete proof of the existence of a complex system of organs deep in the body. Hart and Sarnoff (1971) described children who bemoaned their inability to define their body image—to know what was inside. The first menstruation provided proof of femininity. It was most striking that following menarche, there was a change in their acceptance of themselves as feminine, and they emerged with a better-defined body image. Thinking was clearer; they dealt more directly with genital conflicts, oedipal strivings, and their own realistic future roles as wives and mothers.

Menarche does not always bring with it the resolution of conflicts. In those who cannot accept a setting aside of bisexual fantasies, the first menstruation intensifies the problem. This aspect of the impact of the menarche relates to childhood experiences, feminine identifications, and to the mother's acceptance of the girl's role as a woman. Kestenberg (1961) described a direct correlation between emotional disturbance and proneness to view menarche as a threat. The genital conflict and castration complex come to the fore and stir up intense emotions: anger, depression, feelings of inferiority, and guilt over increased masturbatory urges. If the cloacal theory is strongly cathected, then the child must deal

with feelings of shame and disgust (Deutsch 1944). She must, furthermore, resolve guilt mobilized by increased aggressive and sexual drives.

Kestenberg (1961) emphasized the role of menstruation in enabling the girl to differentiate fantasy from reality. Feminine tendencies will be mobilized and, it is hoped, will master the genital trauma. There is intensification of sexual excitement, with fantasies of defloration and rape. Wishes and fears related to pregnancy and childbirth appear. Many menstrual cycles occur before fuller "reintegration" (Kestenberg 1967) can be achieved as the young adolescent emerges from the disequilibrium and diffusion of prepuberty.

Menarche has clear impact on the people around the child, producing a gamut of reactions both personal and ritualized. Even before menstruation begins, attitudes of the parents shape the nature of what will be told to the child.

Deutsch (1944) reported frequent neglect on the part of mothers in giving instruction prior to menstruation, although other aspects of reproduction were dealt with. This is an additional indication of how emotionally charged the subject is. It is not unusual for fathers to feel estranged from their daughters during the time of menarche (or to show a desire, as one man described it, to "take her out for the evening on a date"). Often the reactions of people around the child add to her difficulties. People in the immediate surroundings respond with characteristic behavior which reflects not only their concern for the child, but for themselves. These self-oriented responses are not easily recognized.

Reports concerning the behavior of people in less sophisticated times, when magic predominated over intellect and logic as we know them, make unconscious motives for behavior in response to menarche clearly manifest (Frazer 1922). In general, in primitive cultures, menstruating women were treated as though they were dangerous. They were not permitted to touch growing things, and that which they had touched had to be discarded. They were secluded, and considered unclean. In addition to these responses to menses (fear, enforced seclusion, feeling of uncleanness), menarche was responded to at various times and places with a number of irrational demands upon the child, such as suspension aloft, exclusion from contact with sun, sky, and earth, and prohibition against scratching herself.

Frazer (1922) believed that “the object of secluding women at menstruation is to neutralize the dangerous influences which are supposed to emanate from them at such times. . . . The danger is believed to be especially great at the first menstruation. To repress this force within the limits necessary for the safety of all concerned is the object of the taboos in question” (p. 702). He noted a “deeply engrained dread which primitive man universally entertains of menstuous blood. He fears it at all times but especially on its first appearance; hence the restrictions under which women lie at their first menstruation are usually more stringent than those which they have to observe at any subsequent recurrence of the mysterious flow” (p. 698).

This is a useful but not necessarily sufficient explanation for the intense response to first menstruation among primitive peoples and their more culturally advanced counterparts. Ancient and modern myths, legends, and folk tales contain in transmuted form the customs of primitive man. From the contexts in which symbols of primitive menarche customs appear (Sarnoff 1976), we can conclude that fear of menarche derives from fear and uneasiness at the presence of attractiveness, sexuality, and reproductive potential in young girls, with their implications for incest. Isolating girls is like returning a cake to the oven or a negative to the developing tray until it is done. This is a forerunner in cultural evolution of the social attitudes that result in stilted sex education at puberty and a denial of the id and the unconscious, resulting in social planning and theories that disregard the drives. The message for the child therapist in this material lies in the warning to look to parental attitudes toward the sexuality of the child in situations of angry interchange and passivity problems between recently pubertal girls and their parents.

Menarche affects others in the child’s environment; they are alerted to her debut as a sexual object. Conversely, in acquiring the organ resource needed for adult sexuality, the girl gains the potential for communication on a nonsymbolic organ level. Object relations are reinforced by menarche. Long-developing changes in the symbolizing function are organized to create the communicative symbolic structure of the adult emotional sexual apparatus. As a result, drive discharge is offered release in a reality context that exceeds evocative symbols in efficiency and productivity. The way is open for the participation in sexual discharge with real objects.

In addition to the organizing impact of menarche, there is an aggressive response in the girl, who

may see the first menses as a manifestation of weakness, messiness, and loss of control. It is a phenomenon that stirs up castrated feelings (see S. Freud 1918). A part of adult reaction to menarche is in actuality a response to the confusion and anger that the child feels in approaching and experiencing menarche.

The First Ejaculation. For the boy, the first ejaculation is the herald of maturity comparable to menarche. Studies of primitive customs, the psychoanalytic literature, and books devoted to myths, symbols, and rituals reveal little in the way of interest in the topic. It appears that the only ones who care at all about it are pubescent boys. The phenomenon does not even have a name.

This state of affairs belies the true circumstance. Child therapists should be aware that the first ejaculation has an impact on the evolving personality. The end of a long developmental path is marked by the first ejaculation. The sexual drive no longer need seek symbolic expression. Erection, orgasm, and ejaculation provide the child with a means for articulating the drives with reality objects.

With the first ejaculation, the tendency to act on poorly displaced and symbolized fantasies diminishes. Exceptions to this are found in some highly narcissistic individuals, who develop perversions without partners; for example, transvestites and exhibitionists.

Erections have always been present, so they cannot be used by a pubescent youngster as a sign of sexual maturity and readiness for object-directed sexuality. The ability to ejaculate alone carries the import of a capacity to communicate, procreate, and involve oneself in reality. Of course, the ejaculation of which I speak cannot be silent or unrecognized for what it is. The influence of peers or parents must be felt in interpreting the potential in the issue to which reference is made.

The heightened narcissism of early male adolescence can in part be explained: it is the result of an inward turning of cathexes toward fantasy and symbols rooted in the pubertal increase in drive energies. Turning inward is forced by the absence of an available physical mechanism (ejaculation) for the outward expression of sexual drive towards objects. Latency-style fantasy play continues to be cathected and expressed through the primitive body-self symbols of late latency. With the onset of the first ejaculation, a discharge pathway involving reality becomes available. At that point, fantasy is opened to reality influences.

The actual act of the first ejaculation is not as important as the context in which it occurs. The context helps in organizing sexual identity more than does the phenomenon of ejaculation itself. Menarche comes as a surprise; its context is not the product of the action or the wish of the girl. Indeed, its onset cannot be blamed on her in any way. In contrast, the first ejaculation always occurs in a situation of sexual excitement and within a context that can become a source of pride or concern to the child involved. In a youngster whose prepubertal fantasy life was rich in bisexual and homosexual fantasy activity, the occurrence of the first ejaculation in a heterosexual context can be very supportive and positive. If the context of the first ejaculation was of a homosexual nature, the effect on the child can be devastating. His first contact with sexual reality confirms his fear that he is homosexual. This is made more meaningful if taken in the light of the observation of Coren (1967): "When a reality event occurs which mirrors the internal conflict of a child, specifically the repressed id impulse, the psychological trauma is very great, particularly to the reality testing apparatus, and necessitates a rapid shift in defense mechanisms which often fails" (p. 356). The fantasy at the time of the first ejaculation seems to be the clue to its impact. As Freud (1919) stated, ". . . in the main [guilt] is to be connected not with the act of masturbation but with the fantasy which . . . lies at its root" (p. 195). Jacobson (1964) has described this aspect of the first ejaculation: "The boy's first ejaculations commonly . . . evoke guilt conflicts of such intensity that frequently the pleasure of becoming a man is overshadowed or smothered by long-lasting fears of this step" (p. 102).

In summary, the first ejaculation, like the menarche, is an organizing experience that serves as an increased contact with reality and the object world. It is one of the maturational pressures that impels the individual toward a dissociation of masturbatory fantasy from masturbatory activities and an increased articulation of the drives with reality objects. Should the fantasies accompanying the first ejaculation be comfortable for the child—either because they themselves or sexuality is acceptable to him—the maturational step is taken in stride. In those with severe bisexual conflicts, a first ejaculation in a heterosexual context is a reassuring experience. As with the girl, it helps the boy to define his identity. If the child is anxious about bisexual fantasy, and the first ejaculation occurs in a homoerotic context, the child will experience an intensification of the disorganization and confusion that accompanied the bisexual conflicts of prepuberty. There is evidence that children who are conflicted about ejaculation, usually on the basis of severe castration anxiety, may fail to achieve a consistent shift from narcissistic,

poorly symbolized sexual fantasies, associated with latency-style acting out of the fantasies, to articulation of drives with reality objects. These individuals, when in the state of regression that is associated with this inhibition, manifest perversions without partners.

Social and Parental Pressures

With the onset of adolescence, sometimes before, and certainly hurried by the presence of secondary sexual development, society or parents take a keen interest in encouraging their children to develop an interest in the opposite sex. In effect, the threats and barriers that impeded the expression of sexuality and forced the child to take on latency defenses, are now replaced with encouragement. It is important to note that parental and societal dictates, by their intrinsic nature, make objects acceptable as compared with the sexual inhibitions associated with objects during latency. Sexual interests in people outside the home are encouraged. Incest is still forbidden. Reality testing is effective in extirpating fantasy figures that had represented parents as objects for drive discharge. Parents and society point toward new and approved objects to take the place of the fantasy objects—peers of opposite gender.

New objects are provided. Unfortunately, though, no direction is given that would help prevent the adolescent from relating to the new object using old fantasies as models; and this constitutes one of the major problems of the period of adolescence. “Removal” (q.v.) is left incomplete. This is one of the major deterrents in the move toward sexual maturity.

The Transition to Adolescence

In studying the shift from latency to adolescence, we have dealt so far with the three forces that press toward adolescent levels of emotional maturity. We now turn to the cognitive changes that support the transition to a goal which in name is late adolescence, but is essentially the functional ability to fall in love.

As the child passes into late latency, more and more potential activities are permitted him. Masturbatory prohibition is lessened. The child is permitted to cross the street by himself. He is given some control over his own money. The superego’s demands (ego ideal) begin to soften. The child turns toward real objects as the latency years draw to an end. The pressure of the sexual drives accompanying

the approaching puberty adds additional stress.

During a period concurrent with late latency (the time from 9 to 12 years of age) there commences a maturation whose product is the cognitive organization of early adolescence. This maturation completes the organization of fantasy representations in which fantastic objects are replaced by realistic objects during fantasy formation. This is followed by a modification of the organization of the drive discharge mechanisms of the ego from seeking realistic objects in fantasy to seeking objects accurately perceived in reality.

The cognitive maturation of early latency (the second cognitive organizing period—see Sarnoff 1976), which culminates in late latency, prepares for a heightened awareness and exploration of reality. The cognitive maturation of late latency (the third cognitive organizing period), which prepares for early adolescence, emphasizes the utilization of reality for drive discharge. Finally, the cognitive maturation of late latency-early adolescence (the fourth cognitive organizing period) prepares for the establishment of a lasting bond with the object *who* in reality will be used for drive discharge. This is effected through the development of the cognitive skills required to fall in love (i.e., the development of the capacity to place the partner in a unique relationship, in which narcissism is replaced with the ability to take the needs of the significant other into account prior to the organization of a fantasy or future planning from its component parts on a preconscious level). An understanding of the components of this maturation is necessary for the child therapist in establishing psychotherapeutic strategies for dealing with problems in narcissism, immaturity, and object relations of patients in late latency-early adolescence (see p. 62).

The Third Cognitive Organizing Period of Latency

Changes in Intensity and Direction of Object Relatedness. Before the portion of adolescence that coincides with youth, there is a noticeable increase in drive energies above the levels experienced during the latency period. In males, erections become more frequent. Minor bodily changes portend the beginnings of maturity. Sexual fantasies become more intense, and more overt. Fantasy contents begin to relate to planning around the search for objects in reality to be used for the discharge of drives. In content, the earliest of these fantasies entail looking, seeing, and fulfilling one's curiosity about the form and appearance of the mature male and female. This curiosity relates to the parents and the future self of

the child. Since parents are forbidden objects, the child must displace curiosity and, later, interest to photographs and peers. This results in an experience of separation from parental figures; it is an early form of removal.

In going from early to late latency, there was a shift from thoughts about fantasy objects to thoughts about reality objects. During late latency-early adolescence, the emphasis on reality objects becomes more intense. Eventually fantasy as object gives way to reality as object, a characteristic of adolescence.

De-affectivization of Words. In the child who is developing normally, improvement of the apprehension of reality is contingent upon a shift in the emphasis of the cognition used in memory from affectomotor hallucinatory memory to a memory organization based on verbal conceptual elements. Words eventually come to serve as cryptic traces of affects which have succumbed to the “infantile amnesia.” Early in this transition, words retain remnants of the affect they represent. This is a transitional step in the de-affectivization of words (Ferenczi 1911, pp. 139 and 145). When affect is removed from word representations of things which have been seen and remembered, greater neutrality and clarity can be brought to bear in solving problems related to the management of the things. Links to fantasy are lessened, and planning is carried out with a focus on the future and reality.

De-affectivization of words proceeds through the latency period. The fantastic objects that populate early latency have more in common with primitive emotionally charged words than with affectively neutral words. With the onset of late latency, words with a less charged tone representing a neutral reality objects are introduced as fantasy objects. Use of essentially de-affected reality-based objects, with implied double meanings, when used as symbols, makes acceptable the discharge and planning fantasies of this period. It is made possible by repression of the links of these symbols used as fantasy elements with incestuous objects. Essentially fantasy can still be used for discharge if neutral (de-affectivized) words are used as objects or as representations of them.

Children Who Write Novels. Since seemingly neutral words and situations can be used for discharge, it is possible for the psychotherapist of childhood and early adolescence to use associations to books, movies, television, and reports of events in the lives of peers as media for the working through of unconscious fantasies and complexes. Psychic determinism controls the selection of topics.

Interpretations, constructions, and reconstructions can be made from patients' associations, and these effectively lead to further associations if sufficient ego distance is maintained in framing the interpretation. Linked, but hidden, affects can be uncovered and used as a starting point for associations into the past ("When did you first feel this way?") and at times traced to their original causes.

A common clinical manifestation of the use of neutral (de-affected) words to represent highly charged complexes is the early adolescent writing of novels. Such topics as "the Girl who became a cowboy" and the spaceboy who overcame the forces of the overpowering and all-seeing "leader," which reflect adolescent concerns, are typical. The symbols and settings chosen are sufficiently removed that their valence for attracting affect is diminished while the armatural themes of the tales draw closer to latent fantasy content.

The child does not always tell the therapist of the work in progress. Usually, the information comes from a delighted mother who feels that "muse" is communicating with genius in her child's head. The child should be encouraged to remember the chapters in the session. Direct interpretation of the material is impossible; it can be treated as a dream or used as a source of data to sensitize the therapist to the complexes currently being dealt with by the child. Such novels are hardly ever finished. Parents should be forewarned of this possibility, lest they feel that this sign of progress be taken as a sign of regression in the therapy. The children leave their works when they have served their purpose, that is, when the door to reality opens permitting the discharge of drives through the recruitment of peers. These novels are a part of the contributions of imagination to life. Imagination based on latent fantasy with roots in early life experience forms a trial action containing the child's unique identity in confronting the object world. The use of the novel form is evidence of the child's awareness that, in the felicitous phrasing of Duncan (1968), "Art creates symbolic roles which we use as a dramatic rehearsal in the imagination of community roles we must play to sustain social order" (p. 222). One should not confuse the role of the novel in society with the role of the novel in the life of the early adolescent. Whereas art reflects the social order and guides group behavior, the child's novel is an experiment in the expression of personal fantasy. It is the task of the child and the therapist to replace the child's restructuring of the object world, carried out in the service of resolving old conflicts and immature wishes, with reality-oriented future planning.

Children Who Use Words as Objects de Novo. One of the problems with the use of words shorn of past associations by repression of affects is the child's expectation that words have an existence of their own. This is frequently seen at 7 years of age, but in some cases may be seen in late latency-early adolescence. These children lie about misdeeds. They feel that their words are as good as the words of a witness against them. In the absence of direct knowledge by an adult accuser they feel immune. This is a manifestation of an omnipotent overvaluation of one's own words, and is a poor prognostic sign.

There are two directions in which the process of maturation in relation to the use of words as objects may develop: normal and pathological.

Normal development is characterized by moving a step forward in finding objects in reality to use in place of neutrally toned words as fantasy objects. The objects in reality so recruited bring new experiences and potentials into the life of the child, and add to resources for future planning. In this way, for those with potential for health, there is produced a metamorphosis toward the object world of the roots of imagination of the child. This is only a step away from involvement with objects in reality.

Pathological development occurs if, instead of replacing fantasy objects with real objects, the process of de-affectivization of words is emphasized. Instead of reality being strengthened as a source of objects to be used for the discharge of drives, fantasies without affect may be cathected at the expense of reality. It is at this point in development that flattened affect, thinking disorders, and delusional thinking can be used consistently in diagnosing schizophrenia. At age 11, manifestations of schizophrenia indistinguishable from the adult form first appear.

The preference for words over people is a manifestation of ongoing poor relatedness; it is often detectable at a very early age. The use of fantasy as object in latency often creates differential diagnostic problems, which are reduced once the child enters adolescence. Its presence reflects ego pathology (hypochondria, schizophrenia, organic brain syndromes, and manic-depressive disorder) at the most severe extreme and narcissistic character traits in less severe cases.

The Preadolescent Vicissitudes of Projection. The mechanism of projection is a compound of simple component defenses. Sometimes it is possible to change a component defense without modifying the essential nature of the complex defense of which it is a part, as in the case of projection. Projection

consisting of repression associated with symbol formation gives way to projection consisting of denial associated with the attribution of motives to real figures. This occurs as a component of the third cognitive organizing period of latency. As a result, fantastic interpretations of reality are in a position to be checked against reality and the object world itself in place of autoplastically generated symbols. In addition, repression, displacement, and symbolizations of affects and motives become less involved in the discharge of drives and more with communicative modes. There is a shift from defensive to sublimative projection. Through the projection of the ego ideal, the superego is opened to influences from the peer group and the environment.

Changes in Body Image. The great changes in body conformation that occur during prepuberty produce states of doubt and confusion; children wonder what and who they are. Latent bisexual fantasies and fears are stirred when youngsters experience growth patterns which they consider to be aberrant. It is common for young boys to develop breast buds, which are a growth of tissue under the nipple, during prepuberty. This becomes a source of great concern, for the boy interprets it as a sign of femininity, whereas it is actually a part of male growth. The child's interpretation reflects his own doubts. Impairment of abstract thinking, which blocks an appreciation of the intrinsic meaning of puberty for sexual identification, may occur in prepubertal girls who have strong conflicts in regard to sexual identity.

The increasing changes in body configuration that mark this period produce a situation of self-awareness similar to that experienced during the first year of life. At that time, there was a cognitive inconsistency. Memory skills progressed and regressed under the influence of illness, parental rejection, and maturation. The infant finds a new discovery each morning in his body, since some of what had been known of it can be lost with regressions in memory skills. This is certainly the epitome of an uncertain sense of self, and doubtfulness, in relation to identity. A quite similar situation prevails in prepuberty. Changes in the sense of self and form occur. Whereas in early childhood fluidity of self-image was paralleled by fluidity in cognitive structures, in prepuberty fluidity of self-image is based on true fluidity of body form. The fluidity of self-image in prepuberty and early adolescence produces a distorted sense of self, coupling awkwardness and uncertainty. This provides a poor base from which to move into adolescent social competition. Often, doubt and self-rejection derived from this become the source of the rejecting thoughts that children in late latency-early adolescence project and attribute to peers. This

circumstance can produce behavior patterns of fear and withdrawal in social situations in otherwise well-functioning youngsters and trigger defensive narcissistic traits and behavior.

Intensification of Narcissistic Investment in Fantasy. The shift in objects used for drive discharge from those in fantasy to objects in reality characterizes a healthy development in object relations. It is slowed by a countering increase in narcissism during late latency. Improved cognitive apprehension of reality intensifies the latter reaction. The more one sees oneself realistically as a small piece of a big world instead of its center, the more will such narcissism be mobilized. As a result, the substance of the child, *including his fantasies*, is self-imbued with a quality of importance transcending the importance of reality. As mentioned above, the confusing changes in the body image that occur in prepuberty draw the child's attention to himself while they also heighten his need to see himself as important. The presence of heightened narcissism in early adolescence interferes with the finding of objects in reality for the discharge of drives. As we have seen, the step in moving from early latency to late latency is accomplished by the introduction of reality objects into fantasy thoughts. The step in moving from late latency to early adolescence should be the recruitment of reality objects, first to populate fantasy and then to join in reality as one moves into adolescent and adult life. The upsurge of narcissism interferes with this step.

Narcissistic cathexis of fantasy results in the intrusion of fantasy thoughts into the child's involvement with reality objects. Such intrusions on reality interfere with removal of object cathexes from parents to peers. At times the narcissism serves a useful purpose; often, fantasies and their affects are more familiar and comfortable than contact with new reality situations. Dreams of great achievement produce willingness to undertake truly difficult tasks. Fantasies provide an orientation through which to relate to reality objects during the time that the reality objects are becoming familiar. Thus, narcissistic invasion of reality situations with fantasies may serve a useful purpose, for the fantasies give reality a chance to impress and win the thoughts and schemes newly involved in future planning and setting up object ties.

In order for reality to gain a foothold, internal changes must take place. Adolescent narcissism must ebb. A set of cognitive skills that enable the personality to become attuned to and incorporate the needs of the world must be developed (the fourth cognitive organizing period). The achievement of these changes are the task of late latency- early adolescence. Sometimes, the child therapist must, in addition to

his role in uncovering the unconscious and strengthening the ego, shepherd, and point the way toward the completion of these tasks for his patients.