

## Alienation

### Alienation in the Peer Group

Adolescence is a time when friendships develop and peer influence becomes increasingly important. The social context in which teens live is their prime area of concern. At the same time, they are developing the need for independence and are creating a new self image. This image has to fit into their particular peer culture if they want to feel they belong. Within the peer culture, those who are different are often stigmatized. This may explain why teens are sensitive to being different or feeling different. Many teens with diabetes do feel they are treated differently because of their diabetes and feel alienated or estranged from their peers. This makes it difficult for them to behave spontaneously and be socially acceptable.



When teens feel alienated, they tend to reject the values of family, of the health workers who should be helping them, of their peers, and at the most extreme, of their society. They tend to withdraw and isolate themselves from other people. When the teen is alienated and very angry with those who have given rise to the feelings of alienation, he or she may get involved in oppositional or illegal behaviour to show defiance to those people.

Being part of a peer group helps adolescents avoid feelings of alienation and isolation.

Loneliness strikes everyone from time to time, but especially adolescents. It is a painful awareness that they are not meaningfully connected to others. In a large-scale study, Ostrov and Offer (1990) found that 15–20% of all adolescents experience painful levels of loneliness.

One of the biggest drives in adolescence is to belong - in a peer group, in a family, in a community, but mostly in a peer group. Tony Campolo (Cited in Les Parrott's 'Helping the Struggling Adolescent 1993) paints a vivid scene of the adolescent in a new group: "At first he simply observes, attempting not to reveal any of his own thoughts or feelings. He plays it cool, tries to communicate an air of detachment. Because he is careful not to respond with either enthusiasm or contempt to what the other members of the group are doing, his face may appear almost motionless. He allows himself time to figure out what the members of the group expect him to be. Once he has the feel of the group he will gradually begin to behave in ways that he believes will earn him approval and acceptance

*If an adolescent doesn't earn approval and acceptance, the trap of alienation is sprung.*

The following is a true story.

Peter is 14, and is a bit overweight. He is very self-conscious and believes his looks in general are unacceptable, even though he is relatively good-looking. Both his parents work in a business, which they run from home. From the age of 5 years, Peter has been expected to stay out of sight and be quiet while his parents meet with clients. He wanted their approval so he achieved this by playing games on the computer.

Peter has had diabetes since he was 11 years old and has been left to manage it largely on his own. His control is not good. Whether he makes an effort or not, no one notices, so that when he sees the doctor he is encouraged to do a lot better.

By the time he turns 18 years, Peter feels very alienated. His only contact with other teens has been with those who spend most of their time playing computer games – he shares his gaming skills with them. He has tried relating to others in a social context, but he finds it too difficult to succeed. He feels too different from them and cannot figure out what the group expectations are. He doesn't know how to earn their approval. The fact that he has diabetes makes him feel even more different from his peers.

Peter has stopped trying. His family have moved to a new country and now he feels totally alienated. He states: "In general most people I meet at Uni I dislike straight away. I've made some friends but in general I dislike many people here, it's like they aren't real or I feel like there's no point talking to them.

Also I've not had a girlfriend yet. I feel ok with it though because I don't get jealous anymore if I see couples or I don't get nervous when talking to girls because I have no ambition that something will happen (which is probably the problem as well). I really think I could get a girlfriend if I put effort into it, but I really don't want to and couldn't be bothered".

Peter's alienation is destroying his personal and social life, and his lack of care of his diabetes is destroying his physical life.

### **Alienation in Diabetes Management**

All adolescents are taught to avoid smoking and not consume alcohol or drugs. Adolescents with diabetes are taught the same but they also have to resist social pressure to eat foods that will

have a negative impact on their diabetes, they have to keep a check on their blood glucose levels and they have to take insulin by injection even in the presence of their peers. So having diabetes presents the teen with a dilemma. They have to weigh up whether they want to be socially acceptable or to take proper care of the diabetes. To accept the restrictions and treatment associated with diabetes and be willing to do this in front of their peers will interfere with their self-image, and the image they are working so hard to develop in relation to their peers.

*The average teen is likely to put his or her social world before their diabetes management.*

Dunning (1995) found that 66% of teens report skipping insulin to fit in socially. 55% of newly diagnosed teens did not talk about their diabetes with their friends and 35% thought that their friends would like them better if they did not have diabetes. At parties or restaurants, they fear that taking insulin may result in others thinking they are drug addicts. They are afraid of being identified as freaks or of being weird by their peers.

*Peers and friends are an important source of emotional support for teens with diabetes.*

Teens want peer support. In adolescence, friendships are more sustained and personalised. They share forbidden and disturbed feelings with each other and create reality checks for each other. Being together ('hanging out') rather than just doing things together is how they like to be. Teens who have supportive friends appreciate it, and those who don't have support, want it. Supportive friends can and often do help with some aspects of the diabetes treatment, such as recognising when the teen with diabetes is hypoglycaemic and finding some glucose to treat it. Research has shown that peer support has been associated with better self-care of diabetes.

It is possible that peers can have a negative impact on the teen with diabetes. For example, some teens have friends who seem to dominate their lives, sometimes tempting them to break their treatment regimens. These friends make self-management difficult. But, overall, having friends is more positive than negative.

*The challenge for health workers and families is to work alongside teens to enable them to manage their diabetes but not at cost to their social life.*

### **Alienation in the family**

Adolescents need both supportive friends and a supportive family if they are to integrate diabetes into their daily lives. The relationship with the teen that has diabetes has to be revisited because his or her needs will change. Successful management of diabetes will depend

on how well all of them can deal with the emotional and social impact of the diabetes. When families are supportive and understand the management of the diabetes, the teen has a better chance of coping. Mengal and his partners (1992) found that anxious mothers, withdrawn fathers and parents who were not available to provide support to their teens with diabetes led to the teen feeling alienated, anxious and depressed. The parents who offered support reduced the amount of alienation the teen felt. Families who have flexible rules, realistic expectations and essential family routines help the teen to feel more accepted and less alienated

High conflict in the family, not being able to resolve conflict, families who are too rigid in their relationships, families with too little involvement with each other and a breakdown of the family (divorce) have all been shown to create alienation in it's members. Undercurrents of conflict in the home that are not expressed directly create tension and anxiety for the teen who may lose focus on the diabetes until the conflict is resolved. Or, they may avoid the family and feel a sense of alienation.

When parents are going through traumas, they may become less available to or less tolerant of their teen's behaviour. The teen then feels alienated from the family. Their alienation creates a sense of loss and deprivation. Parents and health workers need to be aware that family trauma can make the teen withdraw and feel alienated.

Teens who are struggling with eating sensibly may see their parent's limitations on food as an effort to control them, and resent them. They may regard the need to monitor diet or to be conscientious about their management as imposed from the outside – the health workers – and may direct their resentment at them. Often these restrictions, especially if the restrictions are beyond what is necessary, are viewed as adults treating them like a baby, and taking away from their move towards independence. Alternatively, if the family tries to convince the teens that they are normal when they feel so abnormal and alienated, it creates resentment and a feeling of not being understood in the teen.

Adolescents who are being physically / sexually abused are more likely to be alienated from the world around them. They will experience many more hospitalisations with ketoacidosis – because not only they are not focussed on their diabetes management, but also because it is a way to remove themselves from the place where the abuse is taking place.

If the struggling adolescent is to avoid alienation or resolve the alienation, he or she needs to

- feel they are with one who is trustworthy and real;
- feel they are understood;
- feel they are accepted.

When deciding if a teen is alienated or not, remember that all teens can be subtle, elusive, private, obstructive or intense, under normal circumstances.

The teen may be experiencing alienation when he or she

- is persistently resistant to any values, not only of adults but also of peer group;
- has increased feelings of loneliness;
- has a desire for intimacy but has difficulty in achieving it;
- has feelings of restlessness, irritability;
- has a decreased sense of purpose and direction in life;
- has more difficulty with identity formation.

### **When is professional help needed?**

Ask the following questions:

- Is your teen silent for long periods and often socially withdrawn, having few friends?
- Is your teen considering dropping out or in danger of not completing high school? Failing classes?
- Does your teen practice any form of self-mutilation? Clues may be in the form of teeth marks, cuts, or burns.
- Is your teen involved in any kind of illegal activity? Has he been arrested or in trouble with the law?
- Does your teen have long periods of feeling worthless, helpless, guilty or lethargic? Does he suffer from depression?
- Does your teen show an excessive fear of a particular family member, other relative or family friend? Could she have been sexually abused and fears to talk about it?
- Is your home life in chaos because of your teen? Is your well-being or performance at work suffering because of your teen's problems?
- Does your teen show strong interest in the occult? Does he read about black magic or is he involved with anti-religious activities?
- Does your teen blow up in anger and get into fights a great deal? Has he been involved in vandalism? Is he a threat to someone's physical well-being?
- Is your teen having serious problems with sleep (insomnia, repeated wakefulness, frequent nightmares, or sleeping too much)?
- Does your teen have morbid thoughts, talk about death a lot? Is she suicidal?
- Do you have reason to suspect that your teen is involved in illegal activities or destructive acts?
- Does your teen get drunk? Does he drive while drinking? Is he experimenting with drugs that can kill?

If any of these are true for the teen you are with, he or she needs extra support and guidance and the help of a professional. Without that help, the way forward is going to be troublesome at least, and fatal at worst. With that help, the teen will be able to move out of the alienation and into a more constructive future.

Lawrence Steinberg, Professor of Psychology in USA and author of many books on Adolescence said, "When parents back off, because they think the adolescent doesn't want or need their affection any more, teenagers feel abandoned. Trite as it may sound; love is the most important thing you can give your adolescent".