

Psychological suffering, adolescence, and pandemic effects: Analysis of psychotherapeutic care in a teaching clinic

Sufrimento psíquico, adolescência e efeitos pandêmicos: Análise de atendimentos psicoterapêuticos em clínica-escola

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Souffrance psychique, adolescence et effets de la pandémie: Analyse des soins psychothérapeutiques au sein d'une clinique universitaire

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Abstract

This work is the result of an extensive institutional research on the impact of the COVID-19 pandemic on the mental health of Rio de Janeiro residents. We aim to reflect on the different expressions of psychological suffering experienced by adolescents, before and during the COVID-19 pandemic, who were in psychotherapy at the Applied Psychology Service (SPA) of the Pontifical Catholic University of Rio de Janeiro. Therefore, a documentary research was carried out, collecting data from reports made every semester of psychoanalytic psychotherapeutic care carried out at the university X SPA, in the years 2018, 2019, 2020 and 2021 (the last two representing the pandemic period). Reports of 23 adolescents aged between 15 and 18 years old were analyzed. Among these participants, 14 were women (61%) and nine were men (39%). Most participants were 18 years old (35%), followed by participants aged 17 (26%) and 16 (26%) years old. For document analysis, the content analysis method was used in its categorial aspect. To enhance the debate, we present the category psychological suffering in adolescence and construction of meaning. We approach themes such as the experience of the death of relatives, the need for new affective relationships, anxieties linked to the value of one's own existence and strangeness of the body. We observed that psychic suffering was less likely to be narrated during the pandemic period. Young people expressed feelings through self-mutilation and psychosomatic manifestations. We consider it important to improve psychotherapeutic interventions that help adolescents, in a context of multiple vulnerabilities, to give meaning to suffering, so that they can express themselves. Family members must direct their care to young people and be present in the immense loneliness of this phase.

Keywords: *adolescence, pandemic, psychological distress, psychotherapy.*

Resumo

Este trabalho é fruto de uma ampla pesquisa institucional sobre o impacto da pandemia de COVID-19 na saúde mental dos fluminenses. Temos como objetivo refletir sobre as diferentes expressões do sofrimento psíquico de adolescentes, vivenciadas antes e durante a pandemia de COVID-19, que fizeram psicoterapia no Serviço de Psicologia Aplicada (SPA) da Pontifícia Universidade Católica do

Rio de Janeiro (PUC-RJ). Para isso, realizou-se uma pesquisa documental, coletando dados de relatórios semestrais de atendimentos psicoterapêuticos psicanalíticos, realizados no SPA da PUC-RJ, nos anos de 2018, 2019, 2020 e 2021 (os dois últimos representando o período pandêmico). Analisaram-se relatórios de 23 adolescentes atendidos, na faixa etária dos 15 aos 18 anos de idade. Entre esses participantes, 14 eram mulheres (61%) e nove homens (39%). A maioria dos participantes tinha 18 anos completos (35%), seguido de participantes com 17 (26%) e 16 (26%) anos. Para análise dos documentos, utilizou-se o método de análise de conteúdo em sua vertente categorial. A fim de aprofundar a discussão dos dados, apresentamos a categoria sofrimento psíquico na adolescência e construção de sentido. Abordamos temas como experiência de morte de parentes, necessidade de novos relacionamentos afetivos, ansiedades ligadas ao valor da própria existência e estranhamento do corpo. Observamos também que o sofrimento psíquico foi menos possível de ser narrado durante o período pandêmico e que os jovens expressaram o sofrimento por meio da automutilação e de manifestações psicossomáticas. Dessa forma, compreende-se a importância do trabalho psicoterapêutico no auxílio dos adolescentes inseridos em contexto de múltiplas vulnerabilidades, possibilitando a expressão de seus sofrimentos e medos. Ademais, enfatiza-se a importância de direcionamento, atenção e cuidado, por parte dos familiares, aos jovens, oferecendo suporte diante dessa solidão, típica dessa fase.

Palavras-chave: adolescência, pandemia, sofrimento psíquico, psicoterapia.

Resumen

Este trabajo es fruto de una amplia investigación institucional sobre el impacto de la pandemia de COVID-19 en la salud mental de los fluminenses. Tenemos como objetivo reflexionar sobre las diferentes expresiones del sufrimiento psíquico de adolescentes, experimentadas antes y durante la pandemia de COVID-19, que hicieron psicoterapia en el Servicio de Psicología Aplicada (SPA) de la universidad X. Para esto, se realizó una investigación documental, recogiendo datos de informes semestrales de atendimientos psicoterapêuticos psicoanalíticos, realizados en el SPA de la universidad X, en los años de 2018, 2019, 2020 y 2021 (los dos últimos representando el período pandêmico). Fueron analizados informes de 23 adolescentes atendidos, con edades entre 15 y 18 años. Entre estos participantes, 14 eran mujeres (61%) y 9 eran hombres (39%). La mayoría de los participantes tenía 18 años cumplidos (35%), seguido de participantes con 17 (26%) y 16 (26%) años. Para análisis de los documentos, se utilizó el método de análisis de contenido en su vertiente categorial. Para profundizar la discusión de los datos, presentamos la categoría sufrimiento psíquico en la adolescencia y construcción de sentido. Enfocamos temas como experiencia de muerte de parientes, necesidad de nuevos relacionamientos afectivos, ansiedades relacionadas al valor de la propia existencia y extrañamiento del cuerpo. Observamos también que el sufrimiento psíquico fue menos posible de ser narrado durante el período pandêmico y que los jóvenes expresaron el sufrimiento por medio de automutilación y de manifestaciones psicossomáticas. De esta forma, se comprende la importancia del trabajo psicoterapêutico en el auxilio de los adolescentes inseridos en el contexto de múltiples vulnerabilidades, possibilitando la expresión de sus sufrimientos y miedos. Además, se enfatiza la importancia de direccionamiento, atención y cuidado, por parte de los familiares, a los jóvenes, ofreciendo soporte ante esta soledad, típica de esta fase.

Palabras-clave: adolescencia, pandemia, sufrimiento psíquico, psicoterapia.

Résumé

Ce travail est le résultat d'une vaste recherche institutionnelle sur l'impact de la pandémie de COVID-19 sur la santé mentale des habitants de Rio de Janeiro. Notre objectif est de réfléchir sur les différentes expressions de souffrance psychologique vécues par les adolescents, avant et pendant la pandémie de COVID-19, en psychothérapie au Servicio de Psicología Aplicada (SPA) de l'Université Pontificale Catholique de Rio de Janeiro. Ainsi, une analyse documentaire a été réalisée, recueillant des données à partir de rapports semestriels de soins psychothérapeutiques psychanalytiques, réalisés à la université X SPA, dans les années 2018, 2019, 2020 et 2021 (les dernières représentant la période pandémique). Les témoignages de 23 adolescents, âgés de 15 à 18 ans, ont été analysés. Parmi ces participants, 14 étaient des femmes (61%) et neuf étaient des hommes (39%). La majorité des participants avaient 18 ans (35%), suivis des participants âgés de 17 (26%) et de 16 (26%) ans. Pour l'analyse documentaire, la méthode d'analyse de contenu a été utilisée dans son aspect catégoriel. Pour approfondir la discussion, nous présentons la catégorie de la souffrance psychologique à l'adolescence et la construction du sens. Nous abordons des sujets tels que l'expérience de la mort de membres de la famille, le besoin de nouvelles relations affectives, l'angoisse liée à la valeur de sa propre existence et la haine destructrice du corps. Nous avons observé que la souffrance psychique était moins rapportée pendant la période pandémique. Les jeunes exprimaient leurs sentiments par le biais de mécanismes de défense, tels que l'automutilation et les manifestations psychosomatiques. Nous considérons qu'il est important de pratiquer des interventions psychothérapeutiques qui aident les adolescents, dans un contexte de vulnérabilités multiples, à donner un sens à la souffrance afin qu'ils puissent s'exprimer. Les membres de la famille doivent porter leur attention sur les jeunes et être présents dans l'immense solitude de cette étape.

Mots-clés : adolescence, pandémie, souffrance psychique, psychothérapie.

At the end of 2019, scientists identified the emergence of a new disease called COVID-19 (or new coronavirus) in the population of the city of Wuhan, China. Until then, apart from Asia, the other continents did not believe in the intensity of this virus and a large part of the Brazilian population was unaware of the danger related to the event. In March 2020, the first cases began to appear in Brazil, and the disease was classified by the World Health Organization (WHO) as a pandemic (Birman, 2020).

The beginning of the pandemic in Brazil was a time of extreme sensitivity, involving the need to use drastic measures, such as imposing social isolation in order to prevent further transmission of the virus, as well as closing schools and other public places. This period became known as “quarantine” and it was during it that the population began to face feelings of fear, especially in relation to infection, death, helplessness in the face of the political, economic, social and health situation, as well as deprivation of countless conditions linked to the previous routine (Birman, 2020; Ornell et al., 2020).

Now, we are more than two and a half years into the pandemic. After a few doses of vaccine offered to the population and the release of various restrictions, by the end of November 2022, more than 643 million cases of the disease had been confirmed, resulting in more than six million deaths worldwide (World Health Organization, 2022). These figures are rapidly becoming outdated, given the numerous waves of infection, such as the one that broke out in the state of Rio de Janeiro in November 2022. It is therefore remarkable that the disease still drastically affects the health of thousands of people, in the political, social, family and health dimensions. Considering the dynamic nature of the COVID-19 pandemic, we intend to understand the impact on the mental health of adolescents, looking beyond the statistics.

The COVID-19 pandemic has further enhanced the indisputable relevance of mental health to public health, gaining greater prominence in 2018, a year in which the WHO had declared depression to be the disease with the highest incidence and prevalence rate in the world population. As a result, in May and June 2020, according to Birman (2020), the WHO pronounced itself on the importance of the issue of mental health and drew attention to the psychological effects of the pandemic situation on individuals.

As mentioned earlier, the terror of death was one of the first psychological effects of the pandemic, since the invisibility of the virus and the lack of safe therapeutic protocols turned the new coronavirus into an unpalatable enemy (Bezerra et al., 2020; Birman, 2020; Brooks et al., 2020; Melo et al., 2020; Salari et al., 2020). Feelings of fear of contamination, as well as fear of the unknown and uncertainty, can have a significant impact on mental health, causing depression, stress and anxiety (Ozamiz-Etxeberria et al., 2020).

Adolescents are among the groups that suffer most from this experience. According to Malavé (2020), in an article for Portal Fiocruz, the mental health of children and adolescents deserves more attention, especially during the pandemic. This group has had to face a series of adversities, such as family changes and school demands in a virtual setting.

In slightly more recent research, Wünsch et al. (2021) observed fear of infection, uncertainty about the disease and feelings of frustration and boredom in adolescents. The authors identified inadequate information, family financial loss, family bereavement and physical and social isolation as factors affecting young people’s mental health. Furthermore, the mental health of young people continues to be a concern, according to a project developed by the United Nations Children’s Fund (UNICEF), in partnership with the civil society organization *Viração Educomunicação*. This scenario is taking place at a time when the pandemic situation is currently improving, making it possible to return to routine. In a survey of 7,700 adolescents aged between 15 and 19, half felt the need to ask for help with their mental health during the COVID-19 pandemic (UNICEF, 2022).

Marty (2010) states that the adolescent needs to be seen by the psychotherapist as a “wounded soldier” who has suffered an unexpected attack. This metaphor was conceived by the author due to the series of new emotions resulting from bodily and psychological transformations, something inherent to this period of life and which generates a self-destructive feeling for young people, who feel unable to understand them. In this work, it seems appropriate to return to the idea of the adolescent as a “wounded soldier”, since, in addition to the emotions they are already naturally facing in the context of the pandemic, they are faced with something even more unexpected: a catastrophic event that causes other changes in their daily lives.

It is understood, then, that there is no shortage of evidence showing the great impact of this event on the mental health of adolescents (Campana & Casella, 2021; Imran et al., 2020; Liang et al., 2020; Oliveira et al., 2020; Oosterhoff et al., 2020; Wünsch et al., 2021; Zhou et al., 2020). Although the pandemic situation is characterized as an event that is still ongoing, and it is not possible to broadly measure the repercussions of this experience in the long term, we believe that it is extremely important to begin an in-depth mapping of personal experiences and family exchanges in the face of this period. For this reason, this paper aims to discuss the different expressions of psychological suffering experienced by adolescents before and during the COVID-19 pandemic, identified during psychotherapy carried out at the Applied Psychology Service (SPA) of the Pontifical Catholic University of Rio de Janeiro.

Method

A qualitative documentary investigation was carried out. Bardin's (2010) categorical content analysis method was used to analyze the data, complemented by the clinical-qualitative method (Turato, 2000). The latter enables a better understanding of the data found in the clinical environment, based on a set of appropriate methods and techniques to reflect on and interpret the meanings and significance of the phenomenon studied here. This is an investigative study using retrospective data collected from psychological reports of consultations at a school clinic. Based on the nomenclature of Fortes and Macedo (2018), the work is characterized as empirical-clinical, as it analyzes clinical material resulting from psychoanalytic psychotherapeutic care for adolescents, carried out by trainee students on the psychology degree course.

Participants, instruments and procedures

Data was collected from the biannual psychological reports of the SPA of the Pontifical Catholic University of Rio de Janeiro, referring to adolescents who demanded psychotherapy before (in 2018 and 2019) and during the COVID-19 pandemic (in 2020 and 2021). These reports have an institutional structure, so they include information delimited into four sections: *description of the demand*, *procedure*, *progress of the work* and *conclusion*. The reports are written by undergraduate psychology trainees at the university and are reviewed and assessed by the supervisor in charge of each team.

Some exclusion criteria were used to select the reports. Only documents from care provided to adolescents between the ages of 15 and 18 were used. The age profile of adolescents was chosen according to the guidelines determined by the WHO and adopted by the Ministry of Health, which defines adolescence as the period between 10 and 19 years of age and youth as the period between 15 and 24 years of age. Based on Law No. 8,069 of July 13, 1990, the Statute of the Child and Adolescent, which defines adolescence as the period between 12 and 18 years of age, we decided that the participants would be between 15 and 18 years of age for inclusion in the study. In addition, even though the clinic-school is made up of a variety of care teams, guided by supervisors with multiple approaches, a cut-off was made for the research. Therefore, we only analyzed the reports of teams that worked with the psychoanalytic clinical method.

In total, 30 reports from 23 different adolescents were analyzed. It should be noted, however, that some of them had been in care for more than a semester and therefore had two reports on the evolution of the psychotherapeutic process. The young people ranged in age from 15 to 18 years old, apart from a single subject who turned 15 during the psychotherapy process, so started it at the age of 14. Among the subjects, 14 were women (61%) and 9 men (39%). Most of the young people were 18 years old (35%) at the time of the sessions, followed by adolescents aged 16 (26%) and 17 (26%). Those aged 15 represented the minority (9%).

To carry out an analysis of divergences and convergences between the manifestations of suffering present in the years before and during the pandemic period, we compared the sex and ages of the participants according to this division. Both before and during the pandemic, we analyzed more reports from women than men. Regarding age, before the pandemic we found that the majority of participants were 18 years old, while during the pandemic the majority of participants were 16 or 17 years old.

Data analysis

After reading the reports, an Excel table was created containing information considered relevant for analyzing the data contained in these documents, excluding data that could reveal the patient's identity. The table was divided into: the number created to identify the report; the six-month period in which the subject was in care; the pseudonym given to the patient, in order to protect their identity (Subject 1 , Subject 2, Subject 3 etc.); the patient's gender; the patient's age; who they lived with; the initial complaint made by the patient; the demand for a mandate; and the name given to the supervisory team responsible for the case. This information was important for creating a database and facilitating analysis.

As mentioned, the content analysis method (Bardin, 2010) was used to analyze the data obtained from the half-yearly reports, plus the clinical-qualitative analysis method (Turato, 2000). The thematic categorical analysis technique was carried out based on the literature review and a floating reading to decode the data present in the documents. The data was then organized into thematic categories that emerged from the documents.

The results emerging from the analysis of the material collected from the reports were discussed based on a literature review. Therefore, we used psychoanalysis as a theoretical reference, based on plural perspectives in this field, above all, articulating authors who developed conceptions aimed at the development of the psyche and the study of adolescence (Campos, 1975/2011; Cidade & Zornig, 2021; Marty, 2010; Outeiral, 2008; Winnicott, 1990, 2011). Studies on the experience of the COVID-19 pandemic and the psychic suffering present at this time of catastrophe were also addressed (Bahn, 2020; Birman, 2020; Campana & Casella, 2021; Nestrovski & Seligmann-Silva, 2000; Penna, 2015; Puget, 2015).

Ethical considerations

The research project described here was submitted to the Research Ethics Chamber of the Pontifical Catholic University of Rio de Janeiro, receiving an approval opinion (03-2022). It was also submitted to Plataforma Brasil and approved by CEP/SMS-RJ. To collect the data, the researcher signed a Data Use Commitment Form (TCUD), stating her commitment and responsibility for the data. A request for exemption from the Free and Informed Consent Form (TCLE) and the Free and Informed Assent Form (TALE) was also made to the Ethics Committee. It is important to point out that, at the beginning of the psychotherapeutic sessions, all users of the SPA sign an ICF from the institution, which allows the data contained in the half-yearly reports to be used for research, teaching and publication. In addition, a declaration of consent from the institution was also requested.

Results and Discussion

To achieve the objectives and keep the COVID-19 pandemic period as the focus of our work, we carried out a comparative and contrastive analysis of the pre-pandemic years with the years of the event. To do this, we looked at the initial complaints presented most frequently over the years. Next, it was possible to analyze the psychological suffering associated with adolescence and, at the same time, the experiences of unpredictable crises during this phase of life, such as deaths, parental separations and the pandemic. Finally, we noticed that the reports described the experiences of these adolescents in relation to parental figures and their caring roles. We then sought to understand the importance of this care for young people. From this, and because of the content analysis of the reports, three categories emerged: *Initial complaint: from symptom to contact with suffering; Family conflicts and frustrations in the face of parental care; Psychic suffering in adolescence and the construction of meaning.* In this paper, we will present the analysis and discussion of the third category.

Psychic suffering in adolescence and the construction of meaning

To analyze the psychological suffering of adolescents, we need to see it in two different contexts. Firstly, there are external events, the so-called unpredictable crises, which can shake up previously established family dynamics. These are catastrophic events that can become traumatic experiences depending on how the individual experiences the situation (Falcke & Wagner, 2005; Nestrovski & Seligmann-Silva, 2000). The pandemic, as well as experiences of bereavement, fit into this context. Secondly, it is necessary to relate psychological suffering to the experiences of mourning in this phase of life, inherent in the movement from childhood to adolescence (Campos, 1975/2011; Cidade & Zornig, 2021; Outeiral, 2008).

Thus, the natural experiences of loss and bereavement during adolescence are associated with the bodily and psychological changes that adolescents undergo during the maturing process. In addition to these changes, there are also experiences of the pandemic, which also cause anguish. Therefore, the external events that occur during this period serve as a backdrop for suffering, along with the changes resulting from adolescence, which can turn into extremely painful experiences.

In the analysis of the reports, four significant sources of psychological suffering were identified as being the most worked on during the psychotherapeutic process: the experience of the death of relatives, the need for new emotional relationships, anxieties linked to the value of one's own existence and the strangeness of the body. The experience of the death of relatives in the family can be considered an unpredictable crisis, as it takes on the character of something unexpected and changes the family relationship, which becomes permeated by the experience of mourning. In the reports, we found two narratives that mention mourning the loss of a parent, one in the pre-pandemic period and the other because of the COVID-19 pandemic. We believe it is important to describe the narratives of these two cases.

In 2018, a 17-year-old girl (Subject 5) had to face a grieving process due to the sudden death of her mother in an accident. Although mother and daughter argued about some issues, they maintained a relationship of companionship and friendship. The trainee in charge of the case pointed out that the issues related to mourning were mentioned little by little and worked through with some resistance. However, the teenager managed to talk about how much she missed her mother and her feelings of guilt (she felt, in a way, responsible for the event).

On the other hand, in 2021, an 18-year-old adolescent (Subject 23) arrived at the SPA due to the experience of three significant bereavements, including his father, who died of complications from COVID-19. During treatment, the young man addressed issues related to the father figure in a superficial way, showing resistance to working on deeper or more serious issues, sticking to everyday events in his speeches. The trainee identified that the adolescent's experience of mourning seemed to be something unspeakable.

Freud, in *Mourning and Melancholia* (1915/2010, p. 128), defines mourning as "the reaction to the loss of a loved one or of an abstraction that takes their place, such as homeland, freedom, an ideal, etc.". The author calls the state of mind in mourning "painful", including the loss of the capacity to love and interest in the outside world as characteristics of the process. In it, the reality check shows that the lost beloved object cannot be recovered and the libido must be

transferred. Thus, within this contextualization of the Freudian notion of mourning, in the illustration shown above, Subject 5 demonstrates that he is going through mourning in a healthy way. In this way, by talking about the mourning process during the psychotherapeutic work, he allows a process of elaboration to take place.

However, the difference between the two clinical descriptions presented is in the way these adolescents face and express their psychological suffering related to this experience of loss. While in the first case, the grieving process is possible to work through, in the second, it is difficult to express. In this sense, according to Penna (2015), mourning, when it presents itself as something of the unspeakable order, is even more complex and can be passed down between generations as an experience that has not been elaborated.

During the pandemic, people experienced a process of collective mourning, which is characterized as unthinkable and unsymbolizable (Penna, 2015). When experiences of mourning are invalidated, as happened in Brazil due to the failure of the country's rulers to recognize the seriousness of the deaths and losses, there is a greater chance that they will continue as a process that is impossible to elaborate. In this context, Birman (2020) considers the impossibility of mourning as a symptomatic formation that emerged in the pandemic period. The characteristics identified in the bereavement process experienced by Subject 23 strengthen these points.

Regarding the suffering associated with the changes inherent in adolescence, we noticed that changes in emotional relationships are often painful experiences. Of the 23 young people treated, five mentioned issues related to difficulties in emotional relationships. Before the pandemic, an 18-year-old girl, who started treatment in 2018 (Subject 6), expressed suffering because she wanted to be emotionally and financially independent from her mother, claiming to move from a childish to an adult position. In this sense, according to Winnicott (1990, 2011), moving from dependence to independence is a healthy movement, but reaching this transitional place is not an easy achievement. Therefore, moving from an infantile to an adult position does not exclude the existence of dependent patterns the part of the adolescent.

What we see from Winnicott is that the difficulty and, at the same time, the need to separate from parents are healthy reactions during adolescence. To get through this time without experiencing loneliness, it is important for young people to maintain proximity to a social circle far removed from their family group. This is evident in the suffering of a 16-year-old boy, also undergoing treatment in 2018 (Subject 3), who feels sad when he moves away from his friends due to changing schools.

However, in the pandemic, changes and deprivations in the social cycle have happened in other ways. Due to the physical and social isolation imposed by the restrictive measures needed to contain the transmission of the virus, children and adolescents no longer attend school in person and their relationships are now mediated by the screen of an electronic device. A 16-year-old boy, who started his treatment in 2021 (Subject 22), mentioned several changes in his social life, which included distancing himself from his family and old friends, giving preference to virtual friendships.

Vitale (2019) had already mentioned that isolating oneself in the online world is a way for teenagers to distance themselves from their families, even if all the members are still living in the same space. In this situation, parents worry about their teenagers' loneliness while they are immersed in their virtual networks. In view of this, some authors have identified that this dive into a virtual world has become more frequent during the pandemic (Birman 2020; Imran et al., 2020; Manuel et al., 2022; Oliveira et al., 2020), serving as an escape and possibility of separation from the confined family. According to Birman (2020), the pandemic experience started a frantic search for virtual space, where the subject looks for interactions that they can no longer find in the real world. Thus, it was through the use of digital technology that young people's proximity to their peers was maintained in the context of the pandemic (Campana & Casella, 2021). We understand that Subject 22's preference for virtual friendships, to the detriment of his other relationships, also seemed to assuage the suffering of the loss of face-to-face activities.

In another case, Subject 23 showed resistance to maintaining romantic-affective ties and made little mention of his relationship with his mother and sister, with whom he lived, and may have sought refuge in his playful inner world. In this case, we noticed that contact with a group of equals, something extremely important during adolescence, was replaced by other activities that functioned as an escape valve from reality and the condition of relative dependence on relationships (Campos, 1975/2011).

Another source of psychological distress we identified is related to anxieties about the value of one's own existence, which may even be one of the causes of the difficulties in relationships discussed above. Before the pandemic, in 2018, a 14-year-old boy (Subject 7) mentioned feeling helpless and devalued, having difficulty recognizing affective attitudes, always distrusting actions of affection and care. In 2019, the same boy, now 15, showed a need to be cared for, often leading him to question the importance he had in the lives of friends and family. During the pandemic, in 2020, a 17-year-old teenager (Subject 20) demanded constant attention, both from her family and from her psychotherapist. This constant need for care caused her so much suffering that it led to an episode of attempted suicide, in which she ingested 80 pills.

We hypothesize that the incessant search for care seems to be related to a difficulty in being alone. According to Winnicott (1990), children need moments of solitude to create their own personal life, being able to internalize care figures and thus reach emotional and relational maturity. However, we noticed that, in the previous illustrations, teenagers seem to have developed an anxiety about the experience of "being alone", fitting into Winnicott's pathological alternative, in which

life is based on reactions to external stimuli. The inability to be alone means that these young people are often pressing for attention, as they constantly need an external presence for their own development. In the case of Subject 20, perhaps due to the context of the pandemic, this experience seems to have been aggravated.

Regarding this experience during the pandemic, a report developed by an Irish study, entitled *A new and better normal*, identified that a large proportion of adolescents felt that they received insufficient attention in relation to the changes that occurred in their lives during the pandemic (Meredith, 2021). We think that confinement at home with the family may have once again required the development of the ability to be alone, insofar as parents and other family members were occupying the same space, but were simultaneously lonely and overwhelmed with their personal activities. The intensification of this suffering during the pandemic may therefore be associated with the mentally absent presence of parental figures who, even though physically close, were unable to help young people make sense of their internal experiences.

Finally, the adolescents expressed suffering linked to experiences of mourning for body changes. Thus, from the analysis of the data in the reports, we identified that some subjects mentioned issues related to the body, two of them being adolescents who were undergoing treatment during the pandemic, in 2021. Before the pandemic, a 16-year-old boy who remained in treatment in 2018 (Subject 3), after injuring his knee and being prevented from playing sports, became afraid of being injured. The fear of hurting his body may reflect the grief he has experienced over the loss of his childhood body. It is possible that this fear is an attempt to deny bodily changes, as the experience of transforming this bodily strangeness into something familiar can be painful for adolescents (Cidade & Zornig, 2021).

On the other hand, during the pandemic, Subject 21 resorted to self-mutilation to relieve the anguish she felt in relation to a sense of guilt and fear of abandonment. This young woman's experience seems to be in line with what Cidade and Zornig (2021) point out about this behavior. The authors state that self-injury denounces something of an unrepresentable nature, content and experiences coated with an excess of drive that has exceeded the limits of the adolescent. In this case, self-mutilation seems to have worked as a way of releasing tension, which Pommereau (2006) identifies as one of the ways in which adolescents view these acts. Having said that, the trainee in charge of the sessions mentioned the need to elaborate on the conflicts experienced by the teenager, so that their only option was not to move on to the painful bodily experience in its concrete form. However, with this illustration, we cannot relate the young woman's self-mutilation to the impact of the COVID-19 pandemic, since we have no information about when this practice began. Therefore, it is not possible to state that this activity originated because of the pandemic experience, but it is important to note that it remained constant during this period.

In another case, Subject 22 presented a bodily manifestation that emerged as the main obstacle to going out and moving around: an itch, which started at the beginning of 2020, when the young man tried to leave his room. This manifestation prevented him from doing activities outside the home. The trainee in charge of the case described that, throughout the psychotherapeutic process, issues relating to the transition from childhood to adolescence were worked on, as the fear of moving, moving around, leaving his protected world, seemed to be linked to the fear of growing up, in the unconscious fantasy. In this way, we observed how the body functions as a means of communication, an attempt on the part of the adolescent to be understood and to make sense of their suffering (Cidade & Zornig, 2021).

In this case, the young man presented itching as a psychosomatic manifestation at the beginning of the pandemic period, when restrictive measures were put in place, including social isolation. According to Birman (2020), in conditions of helplessness and psychic discouragement produced by the fear of death, the subject can pay excessive attention to the body, which can result in an experience of intense body fragmentation. The itch that prevented the young man from experiencing his adolescent body in a pleasurable way, at the same time put him "in constant contact" with that body, exposed to a viral reality, which at any moment could cause the transition from a healthy body to one with an enigmatic illness.

Final considerations

Considering the discussion based on the data analyzed and presented, we observed that, in general, suffering was less possible to narrate during the pandemic, with difficulties in finding meaning for the psychic pain of adolescence and the experience of growing up during the pandemic. Patients undergoing psychotherapy during the pandemic period found it difficult to verbalize their suffering. The psychotherapeutic work was significant in allowing the adolescents to confront manifestations of suffering that were in the order of the unspeakable. In this sense, according to Nestrovski and Seligmann-Silva (2000), violent and destructive events often take the place of what is impossible to represent. We can think that, in a way, for some of these young patients, psychic suffering took on violent proportions in the psyche, represented in psychosomatic manifestations or self-destructive actions.

Regarding adolescents, it was possible to see that, due to social isolation, parents began to condense all sources of relationships and attention for young people, complicating the individuation process. According to Oosterhoff et al. (2020), young people who adhered to the measure for personal reasons, such as fear of becoming ill or to avoid judgment, felt more anxious. For Campana and Casella (2021), in some cases anxiety increased with the extension of the isolation period and the implementation of remote learning.

It's possible that this anxiety in the face of social distancing has something to do with a greater demand for attention and parental care on the part of young people. According to Winnicott (1990, 2011), the family environment must provide the necessary conditions for the subject to develop. However, in the context of the pandemic, adults were overwhelmed, which meant that they were extremely focused on their own problems, making it difficult to offer support to the child or adolescent (Campana & Casella, 2021; Imran et al., 2020).

Therefore, the closure of schools led not only to losses in the learning process, but also to a deprivation of the necessary socialization among peers, which is important for adolescents' emotional development (Campana & Casella, 2021). In this sense, there was a precariousness in making it possible to belong to new groups, which led young people to prioritize friendships from virtual media when building a social circle outside the family group. However, it should be emphasized that the restrictive measures were extremely important in reducing the transmission of the virus and, consequently, the contamination of the population with the disease.

Finally, we would like to point out that the impact of the experience of the pandemic catastrophe has been magnified in some sources of suffering inherent to adolescence. The process of "growing up" is related to the experience of mourning and conflicts between the need to still be dependent and the need to separate from parents. According to Campos (1975/2011), mourning accompanies the identificatory process of adolescence. Adolescents take refuge in themselves, seeking to compensate for and elaborate on their childhood losses, based on a need to intellectualize and fantasize. It is in this context that intense emotional conflicts can arise, in the search for adaptation to this "new body" and in the elaboration of these griefs (Castanho, 2019; Outeiral, 2008). In addition to the grief inherent in going through their children's adolescence, families have experienced a series of losses during the COVID-19 pandemic.

In this sense, Fernandes et al. (2021) point out the importance and urgency of creating and using care strategies that support families in their particularities, in the face of the current catastrophic moment and the emergence of new waves of illnesses and post-illness complications. According to Wünsch et al. (2021), mental health services need to plan and implement different collaborative psychosocial care strategies for young people and their families, maintaining a support network for people in psychological distress. These interventions need to be designed according to the context and living conditions of the individual.

According to Wünsch et al. (2021), mental health care should be taken early, as it is likely that many of the psychological impacts related to the COVID-19 pandemic will manifest themselves in the future, even after it has ended. Zhou et al. (2020) point out that, even with the stabilization of the pandemic situation, the psychological issues of young people should not be ignored. We believe, therefore, that this work is yet another source of reflection to be attentive to the current psychological effects of adolescents, especially those who are in a context of multiple vulnerabilities, such as those who are treated at the SPA of the Pontifical Catholic University of Rio de Janeiro. Finally, it is necessary to make sense of adolescents' suffering so that, instead of hurting and attacking themselves, they can gain ways of expressing their fears and difficulties.

Along the way to constructing and finalizing the research described here, we came across some surprising issues, some of which have been mentioned in this paper. The experience of a catastrophic event, such as the pandemic, is accompanied by pain and suffering that is expressed in different ways. We observed that the extremely painful experience was displaced onto the body, accompanied by a period of denial and escape from reality. Conveying all this in words is a difficult task. We are therefore thinking about the importance of really living and feeling periods of pain and of looking for spaces that legitimize these experiences. In this sense, we agree with Fortes (2012, p. 176) when she says:

You can't experience joy in an intense way without also experiencing pain in an intense way. Suffering isn't just about darkness, it's also about finding light, a certain wisdom, an understanding of one's own humanity and the humanity of others, a glimpse of some dimensions of existence that can only show their preciousness in pain.

Finally, we believe it is necessary to continue studies that assess the impact of the COVID-19 pandemic on children and young people, groups who have suffered an accumulation of changes, significant deprivations of important experiences for development (such as living in extra-family spaces and diverse social groups), as well as losses in different dimensions. In this way, by contributing to the dissemination of the importance of mental health care for adolescents and their families, we understand how much psychotherapy still needs to be widely disseminated as a resource for help. In the future, we believe it will also be possible to investigate the psychic effects of the pandemic experience over the generations, which is important for understanding how this experience will be passed on. As we mentioned, this event will leave its mark on the population, and we will need to deal with this situation in the future. The clinic will be a rich space for listening and understanding the consequences, especially the school clinics, which offer care to populations that experience multiple vulnerabilities and are invisibilized by society.

References

- Bahn, G. H. (2020). Coronavirus disease 2019, school closures, and children's mental health. *Journal of the Korean Academy of Child and Adolescent Psychiatry, 31*(2), 74–79. <https://doi.org/10.5765/jkacap.200010>
- Bardin, L. (2010). *Análise de Conteúdo*. Edições 70.
- Bezerra, C. B., Saintrain, M. V. L., Braga, D. R. A., Santos, F. S., Lima, A., Brito, E., & Pontes, C. (2020). Psychosocial impact of COVID-19 self-isolation on the Brazilian population: A preliminary cross-sectional analysis. *Saúde e Sociedade, 29*(4), 1–10. <https://doi.org/10.1590/S0104-1290202000412>
- Birman, J. (2020). *O trauma na pandemia do coronavírus: Suas dimensões políticas, sociais, econômicas, ecológicas, culturais, éticas e científicas*. Civilização Brasileira.
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. *The Lancet, 395*(10227), 912–920. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Campana, N. T. C., & Casella, C. B. (2021). Experiência com crianças e adolescentes na pandemia: Alcances e limites da família, escola e clínica. *Estilos da Clínica, 26*(2), 204–218. <https://doi.org/10.11606/issn.1981-1624.v26i2p204-218>
- Campos, D. (2011). *Psicologia da adolescência: Normalidade e psicopatologia* (24a ed.). Editora Vozes Ltda. (Trabalho original publicado em 1975).
- Castanho, G. (2019). Terapia de família com filhos adolescentes e pais na meia idade. In G. Castanho, & M. Dias (Eds.), *Terapia de família com adolescentes* (2ª ed., pp. 11-33). Ágora.
- Cidade, N. O. P., & Zornig, S. M. A.-J. (2021). Automutilações na adolescência: Reflexões sobre o corpo e o tempo. *Estilos da Clínica, 26*(1), 129–144. <https://doi.org/10.11606/issn.1981-1624.v26i1p129-144>
- Falcke, D., & Wagner, A. (2005). A dinâmica familiar e o fenômeno da transgeracionalidade: Definição de conceitos. In A. Wagner (Eds.), *Como se perpetua a família? A transmissão dos modelos familiares* (pp. 25-46). EDIPUCRS.
- Fernandes, A. D. S. A., Speranza, M., Mazak, M. S. R., Gasparini, D. A., & Cid, M. F. B. (2021). Desafios cotidianos e possibilidades de cuidado com crianças e adolescentes com Transtorno do Espectro Autista (TEA) frente à COVID-19. *Cadernos Brasileiros de Terapia Ocupacional, 29*, 1–12. <https://doi.org/10.1590/2526-8910.ctoar2121>
- Freud, S. (2010). *Luto e melancolia* (Vol. 12, pp. 127-144). Companhia das Letras. (Trabalho original publicado em 1915).
- Fortes, I. (2012). *A dor psíquica*. Cia de Freud.
- Fortes, I., & Macedo, M. (2018). Quem é o psicanalista pesquisador? Questões cruciais sobre o método psicanalítico de pesquisa. In L. Fulgencio, J. Birman, D. Kupermann & E. Cunha (Eds.), *Modalidades de pesquisa em psicanálise: Métodos e Objetivos*. (pp. 106-122). Zagodoni.
- Fundação das Nações Unidas para a Infância [UNICEF]. (2022, 30 de maio). Metade dos adolescentes e jovens sentiu necessidade de pedir ajuda em relação à saúde mental recentemente, mostra enquête da UNICEF com a Viração. *UNICEF*. <https://www.unicef.org/brazil/comunicados-de-imprensa/metade-dos-adolescentes-e-jovens-sentiu-necessidade-de-pedir-ajuda-em-relacao-a-saude-mental-recentemente>
- Imran, N., Zeshan, M., & Pervaiz, Z. (2020). Mental health considerations for children & adolescents in COVID-19 pandemic. *Pakistan Journal of Medical Sciences, 36*, 67–72. <https://doi.org/10.12669/pjms.36.COVID19-S4.2759>
- Lei nº 8.069, de 13 de julho de 1990. Dispõe sobre o Estatuto da Criança e do Adolescente e dá outras providências. Presidência da República. https://www.planalto.gov.br/ccivil_03/leis/18069.htm

- Liang, L., Ren, H., Cao, R., Hu, Y., Qin, Z., Li, C., & Mei, S. (2020). The Effect of COVID-19 on Youth Mental Health. *Psychiatric Quarterly*, 91, 841-852. <https://doi.org/10.1007/s11126-020-09744-3>
- Malavé, M. (2020, 16 de outubro). Saúde mental dos adolescentes no contexto digital da pandemia. *Portal Fiocruz*. <https://portal.fiocruz.br/noticia/saude-mental-dos-adolescentes-no-contexto-digital-da-pandemia>
- Manuel, C., Figueiredo, I., Prioste, A., Duque, T., & Pereira, C. (2022). Impacto da Pandemia COVID-19 na Saúde Mental de Crianças e Adolescentes com Perturbação de Hiperatividade e Défice de Atenção: Um Estudo Transversal. *Revista Portuguesa de Psiquiatria e Saúde Mental*, 8(2), 37–48. <https://doi.org/10.51338/rppsm.313>
- Marty, F. (2010). Adolescence et émotion, une affaire de corps. *Enfances & Psy*, 4(49), 40–52. <https://doi.org/10.3917/ep.049.0040>
- Melo, B. D., Pereira, D. R., Serpeloni, F., Kabad, J. F., Souza, M. S., Rabelo, I. V. M., ... & Freitas, C. M. D. (2020). *Saúde mental e atenção psicossocial na pandemia COVID-19: Recomendações para gestores*. Fundação Oswaldo Cruz. <https://www.arca.fiocruz.br/handle/icict/41121>
- Meredith, R. (2021, 26 de agosto). Covid-19: O impacto subestimado da pandemia na saúde mental de jovens e crianças. *BBC NEWS*. <https://www.bbc.com/portuguese/geral-58331221>
- Nestrovski, A., & Seligmann-Silva, M. (2000). *Catástrofe e representa-ção: Ensaio*. Escuta.
- Oliveira, W. A. de, Silva, J. L., Andrade, A. L. M., Micheli, D., Carlos, D. M., & Silva, M. A. I. (2020). A saúde do adolescente em tempos da COVID-19: Scoping review. *Cadernos de Saúde Pública*, 36(8), 2-14. <https://doi.org/10.1590/0102-311X00150020>
- Oosterhoff, B., Palmer, C. A., Wilson, J., & Shook, N., (2020). Adolescents’ motivations to engage in social distancing during the COVID-19 Pandemic: Associations with mental and social health. *Journal of Adolescent Health*, 67(2), 179–185. <https://doi.org/10.1016/j.jadohealth.2020.05.004>
- Ornell, F., Schuch, J. B., Sordi, A. O., & Kessler, F. H. P. (2020). “Pandemic fear” and COVID-19: Mental health burden and strategies. *Brazilian Journal of Psychiatry*, 42(3), 232–235. <https://doi.org/10.1590/1516-4446-2020-0008>
- Outeiral, J. (2008). *Adolescer* (3a ed). Revinter.
- Ozamiz-Etxebarria, N., Dosil-Santamaria, M., Picaza-Gorrochategui, M., & Idoiaga-Mondragon, N. (2020). Stress, anxiety, and depression levels in the initial stage of the COVID-19 outbreak in a population sample in the northern Spain. *Cadernos de Saúde Pública*, 36(4), 1–9. <https://doi.org/10.1590/0102-311X00054020>
- Penna, C. (2015). Investigações psicanalíticas sobre o luto coletivo. *Cadernos de Psicanálise*, 37(33), 9–30. https://pepsic.bvsalud.org/scielo.php?pid=S1413-62952015000200001&script=sci_abstract
- Pommereau, X. (2006). Les violences cutanées auto-infligées à l’adolescence. *Enfances & Psy*, 3(32), 58–71. <https://doi.org/10.3917/ep.032.0058>
- Puget, J. (2015). *Subjetivación discontinua y psicoanálisis: Incertidumbre y certezas* (pp. 63–79). L. Editorial.
- Salari, N., Hosseinian-Far, A., Jalali, R., Vaisi-Raygani, A., Rasoulpoor, S., Mohammadi, M., Rasoulpoor, S., & Khaledi-Paveh, B. (2020). Prevalence of stress, anxiety, depression among the general population during the COVID-19 pandemic: A systematic review and meta-analysis. *Globalization and Health*, 16(57), 1-11. <https://doi.org/10.1186/s12992-020-00589-w>
- Turato, E. R. (2000). Introdução à metodologia de pesquisa clínico-qualitativa – Definição e principais características. *Revista Portuguesa de Psicossomática*, 2(1), 93-108. <https://www.redalyc.org/comocitar.ou?id=28720111>

- Vitale, M. (2019). Famílias com filhos adolescentes: Inquietações terapêuticas. In G. Castanho, & M. L. Dias (Eds.), *Terapia de família com adolescentes* (2a ed., pp. 44-52). Agora.
- Winnicott, D. (1990). *O ambiente e os processos de maturação*. Martins Fontes.
- Winnicott, D. (2011). *A família e o desenvolvimento individual* (4a ed.). Martins Fontes. (Trabalho original publicado em 1993).
- World Health Organization. (2022, 3 de novembro). WHO Coronavirus (COVID-19) Dashboard. *WHO Health Emergencies Programme*. <https://covid19.who.int/>
- Wünsch, C. G., Freitas, B. H. B. M., Gaíva, M. A. M., & Kantorski, L. P. (2021). O cuidado ao jovem em sofrimento mental na pandemia de COVID-19: Uma reflexão teórica. *Ciência, Cuidado e Saúde*, 20, 1–8. <https://doi.org/10.4025/ccs.v20i0.58805>
- Zhou, S.-J., Zhang, L.-G., Wang, L.-L., Guo, Z.-C., Wang, J.-Q., Chen, J.-C., Liu, M., Chen, X., & Chen, J.-X. (2020). Prevalence and socio-demographic correlates of psychological health problems in Chinese adolescents during the outbreak of COVID-19. *European Child and Adolescent Psychiatry*, 29(6), 749–758. <https://doi.org/10.1007/s00787-020-01541-4>

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