

RESEARCH
ARTICLE

The quality of identifications in the adolescent drug addict at the rehabilitation and re-education center.

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Abstract

The current study aims to uncover the types of identifications made by adolescent drug addicts residing in rehabilitation and vocational centers, relying on the case study method and employing clinical interviews and the Thematic Apperception Test (TAT). The study's findings reveal that the identifications of adolescent drug addicts in rehabilitation centers are characterized by a certain rigidity, evident in the dominance of conflict scenarios that affect their ability to partially extricate themselves from the conflict stirred by issues related to father-son relationships and the Oedipal triangle.

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Study Problem:

Adolescence is considered a critical stage in an individual's life as it marks the transitional phase from childhood to adulthood, accompanied by significant changes in various aspects of life, sequentially affecting biological, psychological, and social dimensions. Anna Freud views adolescence as a stage in human development that repeats previous sexual stages but in different forms (Ya'qub, n.d., p. 37). It represents a disruption in the individual's secure growth and balance, engaging sexual drives and threatening equilibrium among the psychic systems (id, ego, and superego). The adolescent, on one hand, focuses on themselves as if they are the new subject deserving attention and the center of this world, and on the other hand, they are capable of self-sacrifice and dedication to

developing emotional relationships. They sometimes desire social integration and peer group participation, while at other times, they tend toward isolation and individuality, fluctuating between obedience and rebellion against authority.

Kestenberg emphasizes that in adolescence, the Oedipal conflict is revived and intensified. In her article "Identity and Identifications in Adolescents" (1962), she demonstrates that the relational difficulties adolescents experience with others, especially adults, are linked to the desire to distance parental perceptions and withdraw libidinal investments from parental identifications, aiming to form new identifications. This leads to relational difficulties with themselves, manifesting in constant questions about their identity and personality, known as the identity crisis, as they attempt to define the personality they experience during adolescence (Kestenberg E., 1962, p. 454). Adolescence is also considered a psychic organizer (*Organisateur psychique*) arising from the necessity to reorganize the ego affected by pubertal changes, requiring the adolescent to integrate this physiological growth into their relational and libidinal system. Due to the physical changes resulting from this, adolescence carries the risk of breaking the balance between object and narcissistic investments, leading to the emergence of various symptoms and behaviors. Strange or deviant behaviors at this stage are merely temporary solutions to alleviate the anxiety resulting from these changes.

Adolescents turn to drugs in search of balance between themselves and their reality. The substance here serves as a self-treatment method to satisfy unconscious needs and escape psychological conflicts characteristic of this stage, which their ego cannot confront, including violence or primitive aggression that may lead to delinquent acts for which the adolescent is punished in rehabilitation centers.

When the addict uses the drug in their initial experiences, they do not seek to fulfill a desire for its use. Rather, this first experience is triggered by the urgent need to express surrounding aggression or violence, and satisfying this urge grants the adolescent a narcissistic success previously unattainable. This experience becomes ingrained in the addict's imagination, making them happy and aspiring to renew it, marking the onset of dependency and reliance (Bergeret et al., 1984). Undoubtedly, an individual's behavior and attitude toward a particular substance and their desire for it are closely related to the psychological conflicts within their psyche, including psychological events and the impressions left on their psyche (Fattayer, 2002).

Addiction can also be considered a regressive process to the oral stage, where the addict turns to drugs due to psychological conflicts expressing the feeling of losing the object. With the drug substance, they attempt to revive the primary relationship with the mother (Bergeret, 1990). This may influence and be influenced by the types of identifications made by the adolescent who has become addicted to drug use and addiction, in addition to engaging in deviant behaviors that lead to punishment by state institutions, considering them delinquents serving their sentence in rehabilitation and vocational centers. This leads us to pose the following question:

How are identifications characterized in adolescent drug addicts residing in rehabilitation and vocational centers?

General Hypothesis: Adolescent drug addicts in rehabilitation and vocational centers exhibit rigidity in their identifications, evident through conflict scenarios and avoidance of conflicts triggered by the TAT.

Study Concepts:

1. **Identification Context:** It is a psychological context through which an individual identifies with an aspect or characteristic of another, transforming wholly or partially into that other's pattern. This context is linked to the Oedipus complex and its structural effects through resolving the resulting psychological conflict. Personality is formed based on a fundamental mechanism—identification or introjection—by internalizing primary objects and adopting them as models in choosing the object of desire (Bergeret, 1995). It is a "psychological process in personality development that begins with unconscious imitation, followed by representation, then introjection (internalization) of the model" (Al-Zubaidi M., 2008, p. 36).

2. **Adolescence:** Stanley Hall defines it as a stage characterized by pressures and conflicts that cannot be avoided, or even disorders or maladaptation, considered necessary for internal balance. During this stage, an individual's behavior is marked by intense emotions and reactions, as well as violent tensions (Al-Zughbi A.M., 2001, p. 318). This means that the adolescent must go through all these psychological conflicts to transition from childhood to adulthood.

3. **Addiction:**

is a psychological and sometimes physical condition resulting from the interaction of a living organism with a drug. It is characterized by various responses and behavioral patterns that consistently involve a strong urge to consume the substance either continuously or periodically in order to experience its psychological effects or to avoid the unpleasant symptoms that occur in its absence. The user may become addicted to more than one substance (Al-Darmaradsh, A., 1982, p. 20). Two related concepts stem from this:

- **Psychological dependence**, which is a state of mental reliance resulting from the feeling of comfort brought by a specific substance;
- **Physical dependence**, which arises from the body's adaptation to the substance.

2. Study Procedures:

2.1. Methodology:

The current study follows the steps of the **clinical method**.

2.2. Sample:

The study was conducted on a group of adolescent drug addicts at a rehabilitation and reintegration center, from which **one case** was selected for presentation in this research paper.

2.3. Study Tools:

The study relied on a **semi-structured clinical interview** and the **projective test TAT (Thematic Apperception Test)**.

2.3.1. Clinical Interview:

A semi-structured clinical interview was used, consisting of five key areas:

- General personal data about the interviewee's life
- Relationship with the mother
- Relationship with the father
- Social relationships
- Drug addiction

2.3.2. Thematic Apperception Test (TAT):

This is a **projective test** that helps uncover different aspects of personality, including desires, conflicts, and defense mechanisms. It aids in diagnosing and understanding the psychological functioning of the individual and thereby identifying their issues.

"The original form of the test was published by Morgan, C.D., and Murray, H.A. in 1935. Since its appearance, it has undergone several modifications and theoretical changes, as well as alterations in its administration methods."

The test consists of **31 plates** that depict ambiguous scenes and images of people in various situations and natural settings, including one blank plate. Each plate has a number on the back indicating its sequence in the series, along with letters in English referring to the category for which the image is designed (Si Moussi & Ben Khalifa, 2008, pp. 165-168).

TAT Test Conditions:

There are three elements in the TAT setting:

- The instructions
- The material
- The examiner

Instruction for the test:

As per Shentoub, the instruction is:

"Imagine a story based on the image."

3. Presentation and Discussion of Results:

3.1. Analysis of Clinical Interview Results for the Case:

a. Case Presentation:

The adolescent is **16 years old**, with a **4th-year middle school** education, having repeated the year twice. He sometimes helps his father in his shop. He became acquainted with some individuals and began assisting them in

selling drugs. Eventually, he was arrested and sentenced to **one and a half years**, which is why he is now in the rehabilitation and reintegration center.

During the clinical interview, he showed **calmness, short periods of silence**, and visible signs of sadness during the conversation, with noticeable **trembling in his voice and hands**.

Section 1: General Personal Data About the Interviewee's Life:

He is the **youngest child** among his siblings, being **10 years younger than his older brother** and **6 years younger than his sister**. He lives with his **mother, father, and brother** in an apartment. He shows **narcissistic investment** through his interest in building a new body image, focusing on his appearance and muscles—he enjoys sports.

He described his **childhood as normal and happy**, characterized by **great love for his parents** and feelings of happiness with them. This indicates that **primary identifications** were formed naturally. There was **intense investment** in the **mother-child** and **father-son** relationships and in primary love objects, evident through his narcissistic investments and expressions of internal feelings in his mental representations.

This is affirmed by **François Marty**, who states that “a child's primary identifications stem from maternal care and parental nurturing, which enable the child to internalize many qualities of the parental ego and unconsciously identify with them” (Marty, F., 2008, p. 80).

However, with the **onset of adolescence**, psychological conflicts began to intensify, heightening the **adolescent crisis**, which **Stanley Hall** considered essential for passing through this stage, stating: “Adolescence is characterized by pressures and unavoidable conflicts, and maladjustment disorders are necessary for internal balance” (Al-Zughbi, A.M., 2001, p. 318).

This was compounded by a **negative perception** of certain subjects and excessive **investment in his inner world**, marked by numerous internal conflicts, **distorted perception**, and **poor judgment** of matters, especially after discovering his father's secret marriage. This increased the tension between them, led to **conflicting and intense emotions**, and use of **rationalization** as a defense mechanism to reduce internal conflict.

This aligns with **Kestenberg's** explanation of the **relational difficulties adolescents face with others**, especially adults, and the **oscillation between submission and rebellion against authority** (Kestenberg, E., 1962).

Section 2: Interviewee's Relationship with His Mother (Mother-Child Relationship):

The adolescent's relationship with his mother is **very strong**, as seen in his **intense emotional investment** in the mother-child relationship, as well as the emotional expressions of **deep love and attachment**. He shows signs of joy when speaking about her.

François Marty confirmed that the **strength of the mother-child relationship** allows the child to internalize the mother's ego through **flexible primary identifications**, which help shape the child's identity (Marty F., 2008, p. 82).

The **mother plays a pivotal role** in his life. His strong attachment to her is reflected in his **strong will to recover from addiction for her sake**. He even considered his **silence about his father's secret marriage a sacrifice** for her, perceiving it as a betrayal and deception toward his mother—this misperception pushed him toward drug use. **Anna Freud** explained this by stating that adolescents are **capable of self-sacrifice and dedication in developing emotional relationships**.

Section 3: Interviewee's Relationship with His Father (Father-Son Relationship):

In childhood, the adolescent had a **strong bond with his father**, marked by **great love, attachment**, and **investment** in the father-son relationship. This is evident from his clear expression of affection and focus on **daily life experiences**—for instance, waiting every day for his father to return from work, which signals **a healthy development of secondary Oedipal identification**.

Freud considered **identification with the father** as the only proper resolution for boys exiting the Oedipal stage (Hoballah, A., 2004).

However, this **idealized image of the father** collapsed during adolescence when he discovered his father's **secret marriage to another woman**, which led him to **reject the paternal image** he had identified with and to **withdraw investment from parental identifications**, replacing them with new ones. **Raymond Marty** described adolescence as a process involving **de-investment and re-identification**, moving from parents to someone else (Marty F., Chagnon, 2006). In this case, the **older brother** became the new identification figure due to the **traumatic shock** caused by discovering the father's secret marriage, which triggered **conflicts** between father and son.

Section 4: Social Relationships:

The interviewee **lacks social relationships and friends**, which is due to his **inability to trust others** and general **suspicion**, a result of the **loss of trust in his father**, who betrayed both his and his mother's trust. Furthermore, his father was **absent when he needed support**, particularly before dropping out of middle school, after a **conflict with the school principal**, where his father neither defended nor supported him. Instead, his father preferred that he leave school and **work with him in the store**, whereas the adolescent wanted to **continue his studies**.

By the end of the conversation about friends, he admitted that he **used drugs with someone he considered a friend**. That friend introduced him to **another person who supplied them with drugs to sell in secret**.

Section 05: Addiction:

Despite the relatively short duration of addiction experienced by the case, the psychological experience over the past years was extremely difficult, filled with psychological conflicts and crises. When asked about the main reason that drove him to addiction, he answered that his father was the cause, and what he came to know left him confused and extremely fearful of any reaction his father might have, which led him to turn to drugs. However, his turn to drug use was not arbitrary; rather, there was a psychological predisposition he acquired during stages of psychological growth and the identifications he unconsciously made throughout this period. He observed his older brother during childhood engaging in addictive behaviors, which "Jawad Fatair" considered unconscious messages stored by the child to identify with and resort to in order to resolve crises and avoid psychological conflicts he might face later (Fatair, 2001).

B. Summary of the Case Interview:

The results of the interview revealed the subject's adherence to external reality and his description of details without justifying interpretations, with an excessive investment in reality as a way to alleviate the intensity of psychological conflicts and tension he experiences. We also noticed his narcissistic investment, evident through his great interest in his appearance and general looks, and his efforts to improve his body image by practicing sports, indicating his consolidation of a new body image resulting from puberty. He frequently used the word "I," expressing what is subjectively felt, accompanied by an abundance of intense emotions throughout the conversation. He emphasized daily and practical life to avoid discussing the inner reality filled with conflicts and psychological stimulations, alongside an excessive investment in relationships and maintaining boundaries by expressing emotions indirectly through hints and suggestions.

He suffers from a lack of dialogue and exchange of ideas among family members during adolescence, which negatively affected him, leading him to seek a solution to these psychological conflicts stemming from adolescent crises and excessive stimuli that he experienced without causing harm to his family due to his deficiency, which he found in drugs. His excessive investment in parental relationships and early love themes contributed to primary identifications that helped shape his identity. He described his childhood as natural and happy during the interview, in addition to secondary identifications with family members and the surrounding environment.

With the onset of the Oedipal phase and the emergence of the Oedipal conflict typical of the phallic stage, we noticed his strong attachment to his father and his desire to emulate him. This led him to resolve the conflict through secondary Oedipal identification, determining his male sexual identity, which was differentiated through a series of other identifications he made during his growth, with an excessive investment in the father-son relationship. However, this great love and the idealized image he formed of his father in childhood were shattered during adolescence when he discovered his father's secret marriage to another woman. This caused him to reject the paternal images he had identified with and to withdraw his investment from parental identifications, replacing them with new ones relatively linked to his older brother, who was involved with alcohol and smoking.

In addition, his ego fragility and inability to contain all the psychological conflicts characteristic of adolescence, alongside the reemergence of the Oedipal conflict, were evident. It was also noted that he could not contain or resolve these psychological conflicts again through identification, hindered by the superficiality of family relationships during this sensitive stage, which relatively determines the ego's maturation and strength. This superficiality in relationships served to break bonds and withdraw investment from parental identifications and primary themes, facilitating the subject's new identifications away from his family. These took the form of bisexual identification, observable whenever the adolescent shares traits with a group or other individuals. This explains his identification with a group of drug-addicted peers, about whom he avoided speaking to prevent reactivating the internal psychological conflicts related to them, limiting himself to only hinting at these matters using suppression and control mechanisms.

Moreover, the conflicts between him and his father during adolescence explain the psychological conflicts related to the father figure and his inability to identify with him in adolescence, which prevented him from resolving the Oedipal conflict again through identification and solving the psychological conflicts properly, leading instead to

deviation and falling into the trap of drugs and addiction. This can be explained by the rigidity of the identifications he made.

3.2. Presentation and Analysis of the TAT Protocol of the Case

Table 1 represents the T.A.T contexts for the case:

Control Contexts (A)	Flexibility Contexts (B)	Conflict Avoidance Contexts (C)	Primary Processes Contexts (E)
A1.1=21	B1.1=14	CF1=3	E1.1=0
A2.1=1	B1.2=6	CF2=1	E1.2=5
A2.2=5	B2.1=17	CI1=39	E2.1=2
A2.3=1	B2.2=2	CI2=10	E2.2=8
A2.4=10	B2.3=2	CI3=1	E2.3=1
A3.1=27	B2.4=7	CN1=25	E2.4=1
A3.3=2	B3.2=5	CN2=2	E3.1=1
	B3.3=2	CN4=2	E4.3=1
		CM1=13	
		CM2=1	
		CM3=9	

Table 2 summarizes the T.A.T contexts for the case:

Control Contexts A	Flexibility Contexts B	Conflict Avoidance Contexts C	Primary Processes Contexts E
- Returning to external reality A1=21	- Relational investment B1=20	- Investment in external reality CF=4	- Perceptual distortion E1=5
- Investment of internal reality A2=17	- Dramatization and exaggeration B2=28	- Suppression (Kaf) CI=50	- Projection intensity E2=12
- Contexts of a hostile pattern A3=29	- Contexts of hysterical pattern B3=7	- Narcissistic investment CN=29	- Identity feature disturbance E3=1
		- Anti-depressive contexts CM=23	- Speech distortion E4=1

Sums:

A = 67 | B = 55 | C = 106 | E = 19

The contexts used in the subject's protocol varied across all series, primarily featuring conflict avoidance contexts and suppression (C), especially those related to silence before and during the story, with a tendency for brevity and posing questions (CI1). Following that were control contexts (A), dominated by hostile patterns (A3), followed by flexibility contexts (B), marked by dramatization and exaggeration (B2), while primary processes (E) also made an appearance, especially through projection intensity (E2).

The case protocol was characterized by:

- The conflict avoidance and suppression series (C) totaling 106, dominated by suppression contexts primarily reflecting latency periods and moments of silence before and during the story, accompanied by necessary questioning and a general tendency toward brevity, estimated at (CI1=50). This was followed by narcissistic investment contexts (CN=29), mostly expressing what was subjectively felt (CN1=25). We also note the presence of anti-depressive contexts (CM=23), demonstrated by calls directed at the examiner emphasizing the existence of

support (CM1=13), using sarcasm and mockery (CM3=9), with a slight appearance of instability in identifications (CM2=1). There was also the appearance of external reality investment contexts (CF=4), emphasizing daily life (CF1=2) and returning to external standards (CF2=1).

- Next came the control contexts series, totaling 67, dominated by hostile patterns (A3=29), mostly expressed through repetition, excessive interpretations, suspicion, and reserve (A3.1=27), along with external reality investment contexts (A1=21), mainly characterized by detailed description and adherence to details (A1.1=21). Internal reality investment contexts (A2=17) appeared as affirmations of internal conflicts with instinctual expression (A2.4=10), rationalizing story elements (A2.2=5), and denial (A2.3=1).

And in third place came the flexibility contexts (B) totaling (55), headed by the dramatization and exaggeration contexts (B2=28) manifested through frequent gestures, comments, and expressions of amazement (B2.1=17), along with the presence of action-related perceptions linked to the emotional state (B2.4=7). Following these were the relationship investment contexts (B1=20), which appeared as affirmations of the relationship between a character (B1.1=14) and the introduction of persons not present in the story (B1.2=6). We also note the appearance of hysterical pattern contexts (B3=7), characterized by the gendering of relationships (B3.2=5) with flexibility in identifications (B3.3=2).

Lastly, we find the primary process contexts with a total (E=19), mainly represented by the intensity of projection (E2=12) in mentioning negative topics (E2.2=8), accompanied by perceptual distortion (E1=5), dominated by perception of rare parts (E1.2=5), followed equally by identity disturbances (E3=1), especially in the mixing of identities and roles (E3.1=1), and speech distortion (E4=1), characterized by brief associations (E4.3=1).

b. Overall Readability:

From the TAT protocol of the subject, characterized by the dominance of inhibition and conflict avoidance contexts evidenced by long and numerous latency periods, alongside the prominence of narcissistic investment contexts, followed by control contexts to a lesser degree through verbal suspicion, reservation, and adherence to apparent content, with a notable presence of flexibility and primary process contexts marked by hallucinatory resonance in most cards. We observe the subject's ability to blend his internal conflict with the external content of the cards, resulting in mostly moderate readability of the cards, hence the overall moderate readability of protocol S. This explains the ego's partial emergence from conflict in some cards, with the identification types in the protocol ranging between flexibility and rigidity.

c. General Issue:

In the TAT protocol, the subject formed a dynamic, personal relationship by projecting his internal life without being able to contain it, while being aware of the latent content enlivened by the cards (12BG, 8BM) and holding on to the apparent content with flexibility in story construction, especially in cards showing short discourse tendencies toward brevity (0, 13B, 7BM, 5,1)1), and a failure to confront the problematic cards (19,11, 13MF), which include disturbing images and positions evoking strong conflicts. This is evident through frequent inhibition and rejection to avoid internal conflict, many pauses, and latency periods (CI1) in most cards. The subject also relied on depressive-defensive contexts in cards (3, 8, 5, 4, 10), showing the ability to contain conflict, approach the card's issue, and identify with it. Islam seems able to identify in cards (13B, 5, 7BM, 8BM, 10), with some partial relief from conflict relying on daily life and projecting his psychological experience in card (16), indicating his investment in the Oedipal relationship (father-mother-son).

3.3 Summary of the TAT for the Case:

Based on the analysis of the subject's protocol, results showed a dominance of defensive contexts, especially inhibition and conflict avoidance (C=106), representing the largest proportion compared to other contexts, evident in long latency periods and disturbing elements preceded by speech interruptions and the need for question-asking, indicating an inability to confront conflicts in some cards. There was marked control, especially in contexts involving external investment through description and attention to detail, followed by contexts of the aggressive pattern with verbal reservations, various interpretations, and excessive repetition. The use of primary processes gave a hallucinatory echo to the stories in the protocol, particularly through dense projection, plus frequent repetitions and interpretations, making the subject unable to contain the cards' problematic issues despite perceiving them. This prevented conflict resolution, indicating that the subject's projective output is characterized by inhibition and strong control, as seen in his ability to build stories alternating between adherence to apparent content and projection of internal conflicts with hallucinatory elements. This reflects the ego's partial emergence from conflict but inability to contain it, alongside difficulty in identifying with many card themes—more precisely described as fragility in identifications.

3.4 General Summary of the Case:

From the clinical interview analysis and results from the protocol analysis, it became clear that the type of identifications the subject made were moderate tending toward rigidity. This was clearly confirmed by the dominance of inhibition contexts through long silences and numerous verbal reservations, which affect his ability to partially emerge from the conflict evoked by the father-son relationship and the Oedipal triangle issues in the cards.

Hence, the hypothesis stating that the adolescent drug addict in the rehabilitation center is characterized by rigidity in identifications manifested by inhibition and conflict avoidance contexts, raised by the TAT theme understanding scale, is confirmed based on the results of the semi-structured clinical interview.

Conclusion:

Based on the study's results obtained through applying the semi-structured interview and the theme understanding scale, we can summarize the identifications the addicted adolescent made during his development stages. Immediately after birth, through maternal care and general parental attention, the child performs primary identifications representing the first form of emotional attachment, playing a major role in shaping the ego and identity formation with the start of the oral phase. During this phase, the infant resonates with his mother when she resonates with him and laughs with others, influenced by his environment through lateral identifications with siblings and family members, which many researchers emphasized. The ego becomes capable of internalizing others' traits and differentiating itself from them, shown by imitation, role-playing, acting like adults, and trying to resemble them.

This is particularly evident in the Oedipal phase, marked by the Oedipal conflict, where the child competes with the father for the mother's love and attention, trying to win her affection and remove the father from his Oedipal function, known as the Oedipus complex. Meanwhile, the child fears being castrated by the father, known as the castration complex, which compels him to give up competing with the father and engage in secondary Oedipal identification by identifying with the father, showing great interest and unconsciously imitating him to acquire his traits, thus obtaining what the father owns later when grown. Identification with the father is the only healthy outlet for the male child to resolve this conflict, enabling him to choose another love object later.

At the same time, the adolescent shows intense interest in peer groups during later developmental stages, especially adolescence, which is characterized by many pressures and psychological conflicts necessary for internal balance, strengthening the ego, and enabling it to face external stimulations and psychological conflicts and fully overcome them through containment. This happens via identification, where the adolescent seeks independence and individuation by withdrawing investment and identification from the parents as Oedipal objects and forming new identifications with them in their parental gendered functions, reducing friction and achieving self-sufficiency through work. This explains why most adolescents tend toward work and interacting with others, alongside forming new identifications with peer groups known as bisexual identifications, allowing integration and bonding with the group and acquiring some of its traits. Thus, identification is one of the main pillars of psychological construction and a foundation for identity formation in adolescence.

Many researchers focused on relational difficulties adolescents face linked to the desire to distance parental images and withdraw libidinal investments due to numerous psychological conflicts and problems with the parent of the same sex (especially the father for the adolescent). This is because the Oedipal conflict is reactivated, and identification with the father becomes difficult, increasing the adolescent crisis marked by many psychological conflicts and the ego's inability to contain and resolve them. This leads the adolescent to seek behaviors for discharge and balance with reality, which opens many negative options that may push him toward delinquency later, chiefly drug addiction, frequently observed among the study group.

Drug addiction acts as unconscious messages stored by the child to be used later in life to escape pressures and problems and feel comfort. The adolescent thus turns to drugs and uses them, though continuation into addiction only occurs if contributing factors are present, including environmental violence and aggression, difficulty identifying with the father in adolescence, and rigidity of identifications formed in earlier developmental stages. This leads the adolescent to over-invest in the relationship with drugs, making it the optimal solution to escape the adolescent phase's situation and compensate for internal relational voids after withdrawing investments, alongside lack of family understanding, the need for containment and support that the adolescent often does not find during adolescence and its challenges, particularly frequent conflicts with the father, negatively affecting the quality of identifications made in this stage and, in turn, adolescent development. This negative influence causes the adolescent to over-invest in drugs, leading to psychological dependence, i.e., addiction.

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