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Research Paper

Autonomy issues for young adults dealing with psychic disorders*



Les enjeux de l'autonomisation de jeunes adultes confrontés à des troubles psychiques

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ABSTRACT

This paper describes and analyses the social uses of the notion of autonomy in the life courses of young adults confronting psychic disorders. It is based on a three-year longitudinal study, conducted under the auspices of doctoral research in sociology, with 21 young adults receiving treatment in psychiatric and medico-social institutions. We describe how the shared and divergent meanings attributed to autonomy lead to issues relating to young clients' engagement in the work to support them.

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RÉSUMÉ

Nous proposons dans cet article de décrire et d'analyser les usages sociaux de la notion d'autonomie dans les parcours de jeunes adultes confrontés à des troubles psychiques. En nous appuyant sur une enquête longitudinale de trois ans, menée dans le cadre d'une thèse de sociologie auprès de 21 jeunes adultes pris en charge dans des institutions psychiatriques et médico-sociales, nous décrivons comment derrière des représentations différenciées ou partagées

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de l'autonomie, émergent des enjeux relatifs à l'engagement des jeunes usagers dans le travail d'accompagnement mené autour d'eux.

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This article examines representations of autonomy in the discourse of young adults confronting psychic disorders (which in some cases may be recognized as "psychic disability"), as well as family members and the professionals involved in their care and support. Through analysis of the discourse of people engaged in this work in different capacities, I aim to describe and understand the social uses of the notion of autonomy in such situations. I am not trying to define autonomy in any real sense, or to evaluate people according to a pre-defined norm of what an autonomous individual might be; I simply wonder what the people involved in the support relationship make of the notion. This question emerged over the course of my doctoral research with young adults supported by programmes devoted to mental health and psychic disability who shared a common issue: a permanent tension between the adult norm of independence and the reality of relationships of support and dependency.

The transitional process into adulthood is commonly defined by the steps of moving out of the family home and entering employment. These steps are rarely simultaneous (Galland, 1996). For F. de Singly, "young people are in social and psychological conditions that allow them to achieve a certain independence, but without disposing of sufficient resources, especially economic, to be truly independent from their parents" (de Singly, 2000, p. 12). This literature distinguishes between financial independence, characterized by professional activity (among other things), and autonomy, defined as a process of self-construction. Along these lines, V. Cicchelli uses the concept of autonomisation to describe the permanent tension between autonomy and dependency in the passage to adulthood. In relations with their parents, then, young people oscillate between child and adult status, and are "simultaneously dependent and independent" (Cicchelli, 2001, p. 144). In this case, autonomy, the "incessant movement between relationship forms and others" (Ennuyer, 2002, p. 289), is not so much an individual characteristic as it is a relation of interdependency between parents and children or between professionals and clients.

In a situation of mental illness, this autonomising process is often thought to be disrupted by both the disorders themselves and the difficulty young people have in breaking away from parental support (Bungener, 2001). Although a lack of autonomy in the passage into adulthood is a commonly acknowledged challenge, our study of young adults supported by mental health and psychic disability programmes provides a novel standpoint for identifying the various representations guiding this transition. It emerges that autonomy is a word serving largely as a screen: despite the fact everyone seems to agree on using the term (families, all sorts of professional, young people), one might wonder just how far this agreement goes, and if the word covers the same representations and practices for all.

Consulting 126 application files for disability recognition¹ allowed me to take account of the great diversity of applicants' trajectories. The sample for semi-structured interviews was selected to represent the diversity of forms of institutional support offered to young people said to be suffering from mental disorders: medico-social services (two ITEP, two ESAT²), child, adolescent, and adult psychiatric sectors (two day clinics and a hospital), a drug addiction care centre, and three non-profit networks (of professionals, families, and clients). I moreover chose to observe mental health situations both within the psychiatric sector (where they are commonly described in the terms of psychic disorders and mental health) and inside the medico-social field (supporting issues particular to disability),

¹ The files had been previously selected by a doctor-coordinator of the Midi-Pyrénées COTOREP (formerly the MDPH of the Haute-Garonne); this public organization is charged with evaluating and deciding on work abilities, requests handicapped worker status, disability ratings, and benefits. They were selected from 7388 requests filed over a six-month period in 2004–5. I examined requests concerning psychological and behavioural problems and those coming from people aged 18 to 24.

² ITEP: Instituts Thérapeutiques, Éducatifs et Pédagogiques (facilities for the therapy, education, and life-skill training of children and adolescents); ESAT: Établissement et Service d'Aide par le Travail (facility providing support and productive activities for adults with lowered abilities to work).

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