



Palaestra, a surrealist oil painting from 1947 by the American artist Dorothea Tanning. The title is the Greek word used for wrestling arenas in Ancient Greece

INTRODUCTION

The article below is from Salon.com, an American online magazine, launched in 1995 and focusing on current affairs and the arts.

Before becoming a freelance writer, journalist Arthur Allen was a correspondent for the Associated Press, an American news agency.

Readin', Ritin' and Ritalin

ARTHUR ALLEN, 16 JULY 1997

Do psychoactive drugs really help children – or just make them fit in?

Larry snapped after a weekend with his father. It was a Tuesday morning, only days before the start of summer vacation, after a pretty successful school year. He dashed through the halls, throwing books and punching other kids and generally disrupting the small school for the learning disabled he attends in Silver Spring, Md. Larry got so wild, finally, that Principal William Patterson called his mother to take him home. It turned out that his father, an old-fashioned sort, had taken Larry off Ritalin, the medication the 15-year-old takes for hyperactivity. The mother was furious with her estranged husband, but for Patterson, who has been teaching dyslexics for 35 years, the episode was just a sad sign of the times. "This young man was so upset, so ashamed that he couldn't behave," Patterson says. "But he is dependent on the drug. He has no inner ability to control himself."

Patterson is an anomaly, and something of an embarrassment to his staff at the Chelsea School. He has the nerve, in this era of the biologization of everything, to think that giving children psychoactive pills is a bad idea. Patterson actually believes he can teach children to control their behavioral problems. At his previous job as headmaster of a boarding school for dyslexics in Massachusetts, he saw to it that Ritalin was banned from the premises. [...] 60-year-old Patterson has enough perspective to view

snap (her) det slår klik for

dash storme
punch give knytnæveslag
disrupt forstyrre
the learning disabled personer
med indlæringsvanskeligheder
Md. = Maryland delstat i det
østlige USA
'principal skoleinspektør

sort type

e'stranged fraskilt

dys'lexic ordbind

de'pendent afhængig

a'nomaly særsyn

staff personale
have the nerve have modet til

be'havioral adfærds-

'previous tidligere
boarding school kostskole
Massa'chusetts delstat i det
nordøstlige USA
ban forbyde, bandlyse
'premises område

relic fortidslevn
stem stundse
tide (her)strøm

pre'scription ordination
'threefold tredobbel
'decade årti

'lassitude energileshed, apati
sero'tonin re'uptake in'hibitor
medicin der hæmmer genop-
tagelsen af serotonin, som
er et signalstof i hjernen og
menes at have betydning for
humøret
'Prozac mærke af "lykkepiller"
minty med mynnesmag
'liquid væske, flydende form
tot rolling
'lithium stof der er stemnings-
stabiliserende, dvs. forebygger
depressive og maniske tilstande
'stimulant stimulerende middel
file (vb.) gå på række
'Just Say No' navnet på og
sloganet for en amerikansk
kampagne der i 1980'erne og
1990'erne advarede børn og
unge mod ulovlige rusmidler
'alter ændre, modificere
ADD opmærksomhedsfor-
styrrelse, kan være ledsaget
af hyperaktivitet (benævnes
da ofte - især i Danmark -
ADHD)
a'ttention opmærksomhed
'deficit mangel
pe'culiar særlig
'malady lidelse
'stateside i USA
tempt frise
hoax svindelnummer
pharma'ceutical medicinal-,
lægemiddel-
DSM-IV = Diagnostic and
Statistical Manual - of
Mental Disorders
de'clare erklære, (her også)
diagnost cere
consistently konstant,
gennemgående
display vise
in'attention uopmærksomhed
water supply vandforsyning
'fluoride fluor
follow through on fuldføre
chore /tjɔ:rt/ gøremål
be on the go have travlt, være
i aktivitet
ex'cessively overdrevent,
umådeholdent
dub kalde
'fidgety ureglig
plunk sride, lade faide
dunce dumrian
'menial ussel; simpel
skid row tilholdssted for
subsistensløse; slumkvarter
clout indflydelse

himself as a relic. "There's no way that I or anybody else can stem the tide of drugs," he says. But he can't help adding:

"What are we telling the kids? Take a pill and it will be all better? How about a little heroin?"

The prescription of psychoactive drugs for children has increased roughly threefold in the past decade [...] Nearly 3 million American schoolchildren get amphetamines to control their hyperactivity or cut through their lassitude; 600,000 get serotonin reuptake inhibitors like Prozac - now available in a minty liquid for tots - and thousands more get lithium, the anti-psychotic-turned-wonder drug. In some schools, a third of the boys are on Ritalin. There is something paradoxical about teenagers lining up for their noontime stimulant before filing into "Just Say No" lectures. But of course, Ritalin and Prozac aren't exactly the drugs of choice for getting you high. [...] They're intended to produce calm, well-adjusted citizens, their brains chemically altered to fit the marketplace that awaits them.

The key that opened the doors of prescription for most of these children is spelled A-D-D. That stands for Attention Deficit Disorder, a peculiarly American malady that is diagnosed roughly 10 times as often stateside as in Europe or Japan. If it weren't for the enormous dimensions of the ADD phenomenon, one might be tempted to suppose the syndrome was a huge hoax by the pharmaceutical companies. The definition of ADD is vague and complicated. In the DSM-IV, the most recent psychiatric diagnostic manual, an ADD patient is so declared when he or she consistently displays six or more symptoms of inattention or hyperactivity. But if these all too common symptoms are markers for ADD, maybe we ought to be putting Ritalin right into the water supply, like fluoride. An ADD child, according to DSM-IV, "often does not seem to listen ... does not follow through on chores ... has difficulty organizing tasks ... often loses things ... is easily distracted ... is often forgetful ... is often 'on the go' ... often talks excessively."

Still, add these symptoms together and you get a child who can't read or pay attention, and is likely to be suffering in class, and maybe at home. In therapeutic circles, the feeling is that the attention being paid to the attention disorder is society's way of showing it cares about children who once were dubbed Fidgety Phils and plunked down in the corner with a dunce cap until they dropped out of school and entered menial jobs, skid row or prison. [...] Today, particularly if you have enough clout or the cash to hire a private

consultant, your ADD kid will be placed in a special classroom, and eventually get non-timed college admission tests - about 40,000 SAT tests were administered this way last year.

[P]seudo-scientific piffle is ubiquitous in ADD circles - particularly, it seems, among medical doctors. Edward Hallowell and John Ratey, two Harvard Medical School psychiatrists who have done as much as anyone to raise ADD's profile, claim in their book *Answers to Distraction* that ADD diagnoses are prevalent in the United States for genetic reasons: "Our forebears were restless movers and shakers," they write. "This probably selected a gene pool of people who are chronically curious and willing to risk traveling down new pathways of exploration." And who, if they were alive today, would presumably meet the elastic DSM-IV definition of ADD. "Two thousand years ago my son would have been roaming the plains hunting," says Tony Meunier, an Arlington, Va., librarian.

"Twenty years ago he would have dropped out of high school. But kids can't afford to do that now."

Meunier invites me to a meeting of the local chapter of CHADD - Children and Adults with Attention Deficit Disorder - a 40,000-member national group created in 1987 with nearly \$1 million in backing from the makers of Ritalin, CHADD lobbies for ADD patients as a disability group and provides shoulders to cry on for ADD parents. The theme of the evening meeting, in the pastel conference room of an Arlington hospital, is "How to Survive the Summer with Your Teenager." [...]

Meunier has explained to me that CHADD is no advocate of blanket medication. "Most parents don't fool around with these drugs," she says. "That's a myth that's overstated." Her 12-year-old, who has learning difficulties, went through a brief trial of Ritalin but didn't improve; Meunier now spends hours each night helping him organize his homework and his life. But listening to the women at the CHADD meeting, I get the sense that parents too overworked to put in the hours with their difficult children tend to move toward the Ritalin solution.

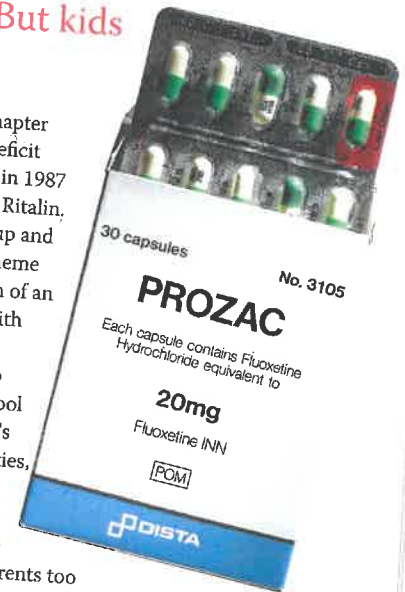
"I've got a husband and three kids who are ADD, but they refuse to take any medication," says an angry woman in a business suit. "Hell, I'm ready to take Prozac at this point."

'non-timed uden
tidsbegrænsning
ad'mission optagelse
SAT = Scholastic Aptitude Test
akademisk egnhedsprøve
piffle vās
u'biquitous
allemstedsnærværende

raise 'profile profilere, øge
synlighed
prevalent udbredt

'forebear forfader
movers and shakers
indflydelsesrige personer der
befinder sig hvor tingene sker
gene pool genpulje, genbank,
arvemasse

'pathway sti, (overført) vej
exploration udforskning,
opdagelse
pre'sumably formodentligt
roam strejfe omkring
plain (sb.) slette
Va. = Virginia delstat i det
sydøstlige USA



chapter afdeling
backing støtte
dis'ability handicap
pro'vide tilbyde, sørge for
'blanket (adj.) omfattende
over'state overdrive
trial afprøvnig
tend være tilbøjelig til

plaid /plæd/ skotskereire
 pant suit jakkesæt til kvinder
 (US)

"Listen, I am taking it," says a woman in a plaid pant suit.
 "How do you get your kid to do his homework?" the angry
 woman asks Tony.
 "We work with him till he's finished," Tony says. "It's been a lot
 of work."
 "Is he on medication?"
 "No."

"We give our daughter Ritalin to do her homework," interjects
 the woman in plaid, "but then she has trouble sleeping."
 [...] Children are younger, now, when they leave the home and
 enter the structured, less tolerant worlds of day care and school. As
 students, they are pressured to perform without as much support
 from their frequently absent parents.

"The human gene pool cannot change for cultural or economic
 reasons in 25 or 30 years," [paediatrician] Lawrence Diller writes in
 a recent Hastings Center Report. "Thus relatively greater numbers
 of children and adults may be found wanting in their abilities to
 concentrate given the current pressures of their academic and work
 environments."

One solution is a pharmaceutical assault on inefficient
 personality types – Ritalin for the hyperactive, Prozac for the
 introverts. Peter Kramer, author of *Listening to Prozac*, remarked in
 a recent interview about the "eerie confluence between what Prozac
 does and what society demands." Yassar psychology professor Ken
 Livingston describes the paradigm even more grimly in a recent
 issue of the *Public Interest*:

"In late twentieth-century America,
 when it is difficult or inconvenient
 to change the environment, we don't
 think twice about changing the brain
 of the person who has to live in it."

It's all very well and good to make high-minded pronouncements
 about the hypocrisy of American life. But if your kid is the one who's
 struggling in school or making life impossible at home, an inexpensive
 drug that doesn't seem to cause any long-term damage can seem very
 appealing. "I don't want to give her Ritalin if it's only because it would
 make everyone's life easier, including mine," says Lynne, a suburban
 parent whose 10-year-old daughter, Alissa, is ADD-diagnosed. But
 whatever the justification, she does plan to go to Ritalin. Alissa's grades
 are passable, but the girl is unhappy with her performance and can't
 seem to do anything about it. The public school she attends has budget
 problems and growing classrooms. "Life's going to be so tough for her,"
 Lynne says. "If Ritalin would truly help, we owe it to her to give it a
 shot. Figuratively" [...]

But guess what? A lot of kids don't want to take their medicine.
 For four juniors I found hanging out near Bethesda-Chevy Chase
 High School in an affluent suburb of Washington, refusal is rebellion.
 "People should talk to their kids, not just give them pills," says David,
 16, who says he was urged to take antidepressants because he was
 staying in his room all the time after his alcoholic mother left the
 family. "They thought I was depressed or gothic or something," he
 says. "I think I was just unhappy."

Mary – a thin, pale, heavily made-up girl with dark hair and
 plucked eyebrows – took Prozac and then Zoloft for depression but
 says neither worked. She understood the logic behind the drugs:
 "When something happens to me, I take it harder than other people
 because, like, they have more serotonin circulating in their brains."
 But "it was so annoying to take them every day. They made me feel
 shaky. Zoloft made my head twitch."

Jacqui Barron, student services administrator at the Chelsea
 School, finds herself fighting the resistance of children every day as
 she makes the rounds distributing the blue and yellow Ritalin pills.
 "Being hyper with your mind rolling around the room is kind of a
 high," says Barron. "The children feel the drug subduing their minds,
 and it's less fun." Still, "most of them accept it. They know they
 couldn't participate in class without their medicine."
 Patterson is forced to agree, sort of. "Ritalin improves the
 learning environment for other kids because the child is no longer

Inconvenient ubekvem,
 ubelejligh

high-minded egel, idealistisk
 pronouncement erklæring
 by poetry højder

suburban forstads-

justification retfærdiggørelse
 'passable acceptabel, okay

figuratively billedligt tal,
 overført betydning

affluent velstående
 rebellion oprør

urge opfordret kræftigt

'gothic' tilhørende gotisk-
 kulturer (bl.a. kendetegnet
 ved sort tøj og dyser musik)

Zoloft 'marke' af 'tryk-piller'

serotonin signalstof, der
 hjernerne har betydning for
 tryk-piller
 twitch have nervøse trækninger

resistance modstand
 distribute uddelle

subdue dæmpe, løje



tap banke med

funded finansieret

D.C. = Washington, D.C. (or District of Columbia) USA's hovedstad
clash tørne sammen, have konflikter

'student body elevmasse

re'liant afhængig

charge (sb.) person inen har ansvar for

quote (vb.) citere

me'nagerie /mæ'nædʒəri/
menageri, samling af vilde dyr der vises frem som underholdning
stutter stamme

'hummingbird kolibri

beet rødhed (US)
i'neane tåbelig
prank drengestreg
slug (vb.) slå
exaspe'ration irritation
nanny barnepige

choosy fordringsfuld, krævende
mourn sørge over (tabet af)
aggra'vation ærgelse

tapping a pencil or looking out the window or pulling the hair of the child in front of him. But I don't know of any studies that have shown a real improvement in performance. Do they act better? Yes, because they're drugged." At Chelsea, a publicly funded independent school for children from D.C. and suburban Maryland, Patterson can't control Ritalin intake – indeed, he has clashed with parents who told him to mind his own business. At his previous job at the Linden Hill School in Massachusetts, which he left after 11 years in 1993, Patterson took an incoming student body that was 90 percent amphetamine-reliant and banned the drugs altogether, engaging the children instead in a highly structured program of instruction and athletics. "As far as I know, only one of them went back on Ritalin after he left," Patterson says. At Chelsea, Patterson works around the drug, focusing on developing mental discipline in his charges. [...] As for his anti-drug message, it falls on deaf ears. "If you don't want to seem ridiculous," he says when we part, "I wouldn't quote me too much."

Of all the creatures in my childhood menagerie, the wildest was a skinny, stuttering kid named Billy. I don't doubt that today he would have been considered an ADD patient, though I think of him more as a hummingbird than a hunter. Billy's face, as I recall it, was always beet red; he was either laughing hysterically at one of his inane pranks or crying because one of us slugged him in exasperation. [...] If Billy were a kid today, both of his parents would probably be working full time, and his nanny would be feeding him Ritalin for an after-school snack. Picturing Billy's mother, a friendly, tired-looking lady with worried blue eyes, I understand why so many of today's choosy mothers choose mind control drugs. Still, I mourn the clown terror Billy, source of so much aggravation and fun. The playground is a poorer place without him.

Comprehension



1. What is Principal Patterson's attitude to psychoactive drugs for children?
2. Why does this make him "an anomaly" and "a relic", p. 233, l. 17 and p. 234, l. 1 in modern America?
3. What does it mean to suffer from ADD, and how might this diagnosis help children once "dubbed Fidgety Phils", p. 234, l. 39?
4. The journalist quotes a paediatrician, an author and a psychology professor. How do they explain the use of psychoactive drugs on children?
5. What do the parents, children and student service administrator in the article think of these drugs?

Analysis



1. The headline is a pun on "reading, writing and arithmetic", a phrase that lists the basic skills taught at school and is known as the *three Rs* because of the *r*-sounds at the beginning of the words. What is arithmetic? What is a pun? And what is the journalist saying with this headline?
2. Is the writer neutral elsewhere in the article, or do his opinions shine through? For instance, consider the people he chooses to quote/interview and whether he uses loaded words.
3. What point is the author trying to make with the story about Billy at the end of the article?
4. The illustration for the article is the original one from Salon.com. Describe it and consider how it portrays the use of drugs on children.
5. All in all, does Allen give any answer to the question in the subheading, or does he leave it open? Give reasons for your answer.

Discussion



1. Does anyone you know suffer from ADD? If so, what are their symptoms – and are these reduced by drugs?
2. Have you ever been in a class where anti-hyperactivity drugs might have improved the learning environment? How?
3. If your child suffered from ADD or depression, would you be in favour of Ritalin, Prozac or other drugs as part of their treatment? Why/why not? As part of your answer, consider the question Allen poses in his subheading.
4. Do you think that the relative prevalence of the ADD diagnosis in America is due to "a huge hoax by the pharmaceutical companies", p. 234, ll. 24-25, or a special American "gene pool", p. 235, l. 10? What other explanations might there be?
5. According to the Danish Health and Medicines Authority (Sundhedsstyrelsen), the number of children and adults being prescribed ADHD medication increased more than tenfold in Denmark in the 2000s. Try to explain this development.

Parallels



1. Do you think that medication, e.g. an antidepressant such as Prozac, would have been a good way to treat Esther's mental health problems in *The Bell Jar*, p. 223? Why/why not?
2. Compare Tony Soprano's attitude to medication, p. 229, with the various attitudes to drugs voiced in the above article. Do we see the medication help Tony?

Writing



1. Write an opinion piece for an international magazine in which you explain your views on the use of drugs to make children function and perform better in school.
2. Make sure your article is interesting to read, e.g. by using a catchy title; rhetorical devices such as puns, irony or figurative language; or, as in Allen's article, an introduction describing a specific situation.
3. Turn your article into word clouds (see the writing exercise on p. 40) and, using these as your only notes, give an oral summary of the article to a classmate.

Information search



1. How has American children's use of psychiatric medication developed since Arthur Allen's article was published in 1997? In pairs, find information online by
 - * reading Shirley Wang's 2011 article "Psychiatric Drug Use Spreads" from *The Wall Street Journal*
 - * or searching – by words such as *use, psychiatric, medications, children* and *USA* – for more recent, reliable material.For help, use "Analysis Angles: Websites".
2. Individually, find a classmate that has read other material than you have and tell each other what you have found out.

Observation



1. In English, when are you supposed to add an *-s* to a verb?
2. In the second to last paragraph in the article (p. 237, l. 41 - p. 238, l. 17), find all the verbs to which an *-s* has been added. NB: If the verb is irregular, the final *-s* might be accompanied by other changes to the basic form (infinitive) of the verb.
3. In each case, explain why the *-s* is there by looking at the subject and determining the tense.
4. As the second to last paragraph illustrates, *-s* is only added to one verb in the past tense – which one?