

How Teenage Rebellion Has Become a Mental Illness

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For a generation now, disruptive young Americans who rebel against authority figures have been increasingly diagnosed with mental illnesses and medicated with psychiatric (psychotropic) drugs.

Disruptive young people who are medicated with Ritalin, Adderall and other amphetamines routinely report that these drugs make them "care less" about their boredom, resentments and other negative emotions, thus making them more compliant and manageable. And so-called atypical antipsychotics such as Risperdal and Zyprexa -- powerful tranquilizing drugs -- are increasingly prescribed to disruptive young Americans, even though in most cases they are not displaying any psychotic symptoms.

Many talk show hosts think I'm kidding when I mention oppositional defiant disorder (ODD). After I assure them that ODD is in fact an official mental illness -- an increasingly popular diagnosis for children and teenagers -- they often guess that ODD is simply a new term for juvenile delinquency. But that is not the case.

Young people diagnosed with ODD, by definition, are doing *nothing illegal* (illegal behaviors are a symptom of another mental illness called conduct disorder). In 1980, the American Psychiatric Association (APA) created oppositional defiant disorder, defining it as "a pattern of negativistic, hostile and defiant behavior." The official symptoms of ODD include "often actively defies or refuses to comply with adult requests or rules" and "often argues with adults." While ODD-diagnosed young people are obnoxious with adults they don't respect, these kids can be a delight with adults they do respect; yet many of them are medicated with psychotropic drugs.

An even more common reaction to oppressive authorities than overt defiance is some type of passive defiance.

John Holt, the late school critic, described passive-aggressive strategies employed by prisoners in concentration camps and slaves on plantations, as well as some children in classrooms. Holt pointed out that subjects may attempt to appease their rulers while still satisfying some part of their own desire for dignity "by putting on a mask, by acting much more stupid and incompetent than they really are, by denying their rulers the full use of their intelligence and ability, by declaring their minds and spirits free of their enslaved bodies."

Holt observed that by "going stupid" in a classroom, children frustrate authorities through withdrawing the most intelligent and creative parts of their minds from the scene, thus achieving some sense of potency.

Going stupid -- or passive aggression -- is one of many nondisease explanations for attention deficit hyperactivity disorder (ADHD). Studies show that virtually all ADHD-diagnosed children will pay attention to activities that they enjoy or that they have chosen. In other words, when ADHD-labeled kids are having a good time and in control, the "disease" goes away.

There are other passive rebellions against authority that have been medicalized by mental health authorities. I have talked to many people who earlier in their lives had been diagnosed with substance abuse, depression and even schizophrenia but believe that their "symptoms" had in fact been a kind of resistance to the demands of an oppressive environment. Some of these people now call themselves psychiatric survivors.

While there are several reasons for behavioral disruptiveness and emotional difficulties, rebellion against an oppressive environment is one common reason that is routinely not even considered by many mental health professionals. Why? It is my experience that many mental health professionals are unaware of how extremely obedient they are to authorities. Acceptance into medical school and graduate school and achieving a Ph.D. or M.D. means jumping through many meaningless hoops, all of which require much behavioral, attentional and emotional compliance to authorities -- even disrespected ones. When compliant M.D.s and Ph.D.s begin seeing noncompliant patients, many of these doctors become anxious, sometimes even ashamed of their own excessive compliance, and this anxiety and shame can be fuel for diseasing normal human reactions.

Two ways of subduing defiance are to criminalize it and to pathologize it, and U.S. history is replete with examples of both. In the same era that John Adams' Sedition Act criminalized criticism of U.S. governmental policy, Dr. Benjamin Rush, the father of American psychiatry (his image adorns the APA seal), pathologized anti-authoritarianism. Rush diagnosed those rebelling against a centralized federal authority as having an "excess of the passion for liberty" that "constituted a form of insanity." He labeled this illness "anarchia."

Throughout American history, both direct and indirect resistance to authority has been diseased. In an 1851 article in the *New Orleans Medical and Surgical Journal*, Louisiana physician Samuel Cartwright reported his discovery of "drapetomania," the disease that caused slaves to flee captivity. Cartwright also reported his discovery of "dysaesthesia aethiopis," the disease that caused slaves to pay insufficient attention to the master's needs. Early versions of ODD and ADHD?

In Rush's lifetime, few Americans took anarchia seriously, nor was drapetomania or dysaesthesia aethiopis taken seriously in Cartwright's lifetime. But these were eras before the diseasing of defiance had a powerful financial ally in Big Pharma.

In every generation there will be authoritarians. There will also be the "bohemian bourgeois" who may enjoy anti-authoritarian books, music, and movies but don't act on them. And there will be genuine anti-authoritarians, who are so pained by exploitive hierarchies that they take action. Only occasionally in American history do these genuine anti-authoritarians actually take effective direct action that inspires others to successfully revolt, but every once in a while a Tom Paine comes along. So

authoritarians take no chances, and the state-corporate partnership criminalizes antiauthoritarianism, pathologizes it, markets drugs to "cure" it and financially intimidates those who might buck the system.

It would certainly be a dream of Big Pharma and those who favor an authoritarian society if every would-be Tom Paine -- or Crazy Horse, Tecumseh, Emma Goldman or Malcolm X -- were diagnosed as a youngster with mental illness and quieted with a lifelong regimen of chill pills. The question is: Has this dream become reality?

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