A Telling Glimpse Into the Complex World of Young People Taking Psychotropic Medication

A review of

Dosed: The Medication Generation Grows Up
by Kaitlin Bell Barnett

Reviewed by
John Edward Ruark

There are several reasons why I was intrigued to review Dosed: The Medication Generation Grows Up. First, I am a psychiatrist who in the past 30 years has prescribed medication to well over 100 adolescents, always combined with individual psychotherapy delivered by me. Further, I have followed most of their courses well into their 20s and have received extensive follow-up reports on their lives from many of their families. This body of data experientially informs my sense of how such treatments play out over time, but I have never seen any detailed longitudinal studies of larger populations of medicated children.

Second, when my children were in elementary school I volunteered several hours a week in their classrooms. There I observed my daughter’s kindergarten and first-grade teachers becoming steadily more frustrated with her inattentiveness, as her peers reacted to her distraction by drawing away from her socially, to her great distress.
At last my wife and I reluctantly had her evaluated by a behavioral pediatrician, who diagnosed attention-deficit disorder without hyperactivity. After painstaking (and painful) trials of various medications, she took the psychostimulant Adderall for eight years, as well as a one-year course of an SSRI antidepressant at age 16. So a book examining the impact of psychotropic treatment on children’s developing sense of self is of great personal and professional interest because since I have agonized over just these issues for many years, both at work and at home.

The author of this excellent monograph, Kaitlin Bell Barnett, is a 29-year-old journalist who also had extensive experience as an adolescent and young adult with taking medicine to address mental health concerns. In her case, she was treated late in high school for depression and has continued to be prescribed various antidepressants through much of her 20s. Although she gives a comprehensive and coherent review of the professional literature about the prevalence and impact of psychotropic treatment of children since the introduction of such medications six decades ago, her main focus in this book is much more personal. As she puts it,

Far too rarely do we consult young people themselves. How do they feel about taking medication? How do they think it has shaped their attitudes, their sense of themselves, their academic and career paths, their lives? How do they envision medication affecting their futures? Focusing on people who needed therapeutic intervention early in life and who continued to use medication for an extended period of time can help us get past the are-they-or-aren’t-they nature of the “overmedicated kids” debate. By assessing what medication has actually meant for my peers, I hope to get at something more intimate and more complex than either the psychotropic true believers or the total skeptics allow themselves to consider. (p. xi)

Barnett’s method is to skillfully interweave careful surveys of the professional literature as well as the extensive world of both pro- and antipsychopharmacologic writings with her own experiences and those of the young people she has recruited to tell their stories. Several dozen individuals are quoted, including child psychiatrists, patients, social scientists, and vehement critics of the use of medications on children. But most importantly (and poignantly), five young people are interviewed in great detail, along with more partial contributions from many other recipients of pharmacologic treatment of childhood mental illnesses.

I was impressed at the sophistication of the author’s understanding of key studies in the field (cf. Moses & Kirk, 2005; Olfson, Marcus, Weissman, & Jensen, 2002; Zito et al., 2003), whose results, limitations, and implications she summarizes in a nuanced and evenhanded way. Clearly, this is not a book written to support a foreordained conclusion. Rather, it is an honest, thought-provoking attempt to present the complexity and depth of an extremely challenging and ambiguous area of modern life.
Two of the young patients followed in detail particularly stand out for me. One is Claire, a literal poster child for pharmacologic treatment of children (she was the subject of the nationally aired documentary Claire’s Story that pioneered the societal acceptance of such interventions). The other is Paul, a Black child in Florida who was a ward of the foster care system and underwent a far less ideal set of experiences with drug treatments for his unruly behavior.

In each of these cases, readers get a detailed and sometimes heartbreaking sense of both the risks and benefits of the medication of children. As well, Barnett’s descriptions of how it felt to be on the receiving end of well-meaning but too often clueless adult interventions were eye-opening to me even as someone who had been a provider for three decades. For example, her characterization of how intrusively normal psychotherapeutic technique is experienced by many children and teens was the first time I had seen in writing a reality I had long intuited with both my daughter and my patients.

In the end, the author leaves us with a much deeper understanding of the human realities behind the still-paltry statistics characterizing the recipients of childhood psychopharmacology. Dosed should be required reading for all clinicians working with mentally ill children, as well as for their parents and other concerned participants in their lives.

References

