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## We've Got Issues: Children and Parents in the Age of Medication

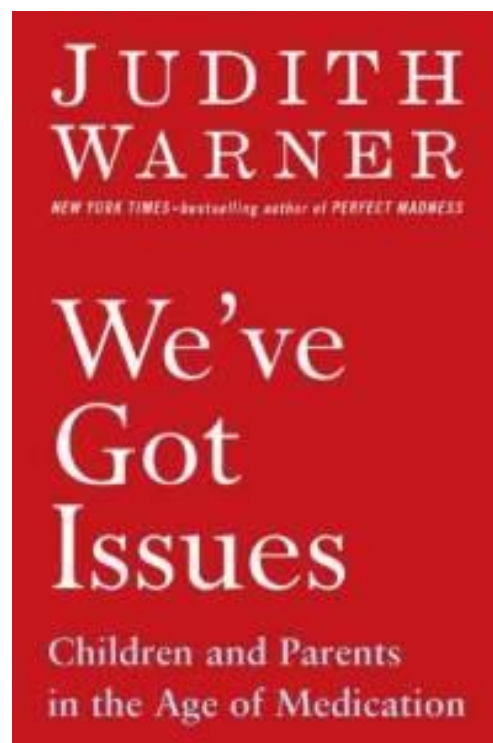
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Judith Warner's *We've Got Issues: Children and Parents in the Age of Medication* started out as a book aimed at criticizing the overmedication of children that did not really suffer from mental health issues but were instead more or less silenced by their parents into submission. After interviewing parents of children suffering from mental health problems, Warner completely changed her mind and wrote *We've Got Issues* which helps defend parent's choices of medicating their children. Warner states that the aim of *We've got Issues* is to set the record straight when it comes to what life is like for parents and children who are confronting mental health issues. Secondly, it aims to discuss current scientific understandings of mental disorders.

In short, Warner does what she aims to do. She represents these parents through her many interviews and discussions with them. She also incorporates information about mental health issues and treatments from leading and well known researchers. Warner states that most children on medication have severe mental health issues and therefore need to be on medication. She also states that parents are not looking for an easy way out or for perfection. Instead, they are concerned with the child's everyday basic functioning.

Warner is critical of media influences in regards to the discussions of 'overmedication' of children and the stigma that parents and children face. Instead, Warner argues that many children are not being diagnosed and that many children who should be on medication are not. The view that mental illness in children is not real and the fact that mental illness is often romanticized leads to bad health

service, Warner argues. Warner also claims that 'Freudian hegemony of American psychiatry' (p. 38) has led to beliefs that mental illness in children is not real. This hegemony has further led to diagnostic limitations in previous editions of the DSM.

Especially in regards to psychology, Warner discusses how genes and environment have come to impact mental health discussions concerning children and how these can bring about new evidence and lessen the stigma and belief in children's mental health as highly dependent on parenting skills. Warner also discusses the concept of assortative mating and its possible impact on the prevalence of mental health disorders in children. Warner argues that media is exaggerating the prevalence of children on medication. Warner also states that more children are being diagnosed due to higher visibility compared to earlier generations and due to greater emphasis on diagnosis and more attention being given to children's mental health issues.

Chapter one, *UNTITLED on Affluent Parents and Neurotic Kids*, of *We've got Issues* introduces the topic and Warner discusses how she came to write a book that was the complete opposite of what she set out to do. She expected overwhelming evidence and heartbreaking statistics showing how young children in America were being overmedicated by lazy parents who strove for perfection and success. Instead she discusses how participant interactions and interviews changed her attitude toward parents and psychiatrists treatment of children suffering from mental health issues.

Chapter two, titled *Seeing is Believing*, includes a discussion concerning the belief that more and more children are suffering from mental health disorders such as ADHD. Here Warner refutes that claim and presents both statistical and theoretical explanations to demonstrate how the increases of mental illness in children stem from a greater acceptance of mental health issues of children. Warner therefore claims that the acceptance of 'seeing' these children is behind the higher numbers of children that are on medication, in comparison to previous generations. Warner means that they were always there, they simply were not 'seen' before.

Chapter three, *An Epidemic of Supposition*, is a continuation of the topic discussed in chapter two and partially contains a historical account of psychiatry that discusses statistical evidence as well as theories concerning why mental illnesses in children are more noticeable now than in previous generations. In this chapter Warner mentions theories such as associative mating.

Chapter four is titled *Aren't They All on Medications?* and is again concerned with the notion of more and more children being put on medication. It also discusses the

public's concern that children are being 'overdiagnosed' and 'drugged'. In this chapter, however, Warner expands the topic by providing parents points of views on the emotional difficulties of making the choice to medicate a child. Warner also speaks of the stigma many parents that have children with mental health issues face as they make this decision.

Chapter five, *Who, Exactly, Is Having Issues?* brings a sociocultural aspect to the discussion. Warner includes arguments that encompass social class, and briefly, race. Warner argues that there is evidence showing that middle and upper class children are more likely to be diagnosed as mentally ill, and to receive medication. In this chapter Warner examines why that is.

Chapter six, *B-a-d Children, Worse Parents (and Even Worse Doctors)*, deals with perceptions (often stereotypical and exaggerated) of children, parents, and psychiatrists. In this chapter Warner asks: 'so why do so many people persist in believing the overdrugged and overdiagnosed child story line?' (p. 117). In answering that question, Warner discusses media headlines and perceptions of parents, children, and psychiatrists.

Chapter seven, *Stuck in the Cuckoo's Nest*, continues discussing stereotypical arguments of children, parents, and psychiatrists but focuses more heavily on perceptions of psychiatrists and the field of psychiatry. It speaks about views of parents as easily medicating children and as psychiatrists as being money hungry. Warner discusses a brief history of psychiatry and connects the unpopularity of psychiatrists (with among other things) to the belief that medication is preventing eccentric geniuses from fulfilling their potential.

Chapter eight, titled *Ritalin Nation?*, deals primarily with academic references and statistical findings that are ambiguous or have been used in non-professional ways. It also discusses societal demands and social insecurity, American culture, and parenting. These factors are presented as making children narcissistic, unhappy, immature, and anxious. Warner claims however that such traits are far from actual mental illness and cannot be compared to the severe traits in children who suffer from mental illness.

Chapter nine is titled *The Stories We Tell*, and is concerned with the stories we tell children about mental illness and the effects it can have on children. Small comments and jokes can have major impact on children with mental illness. Again, Warner speaks about stigma and how such stigma can prevent parents, most often fathers, from seeking professional help for their children.

Chapter ten, A “*Better Time Than Ever*”, refers to the progress that has been made in regards to children’s mental health issues, such as better treatment and more reliable diagnosis (usually for those who can afford to avail of it). Chapter ten also discusses progress in research and future possibilities for children that suffer from mental health issues.

The final chapter, chapter eleven, titled *Moving Forward*, discusses future possibilities in care and treatment of children. Warner is very critical of the American health system and discusses changes that could be made to the system in order to ensure that children with mental health problems receive better treatment and care by professionals. She also discusses the role of insurance companies in keeping children from receiving the best possible care.

Overall, *We’ve Got Issues*, is an interesting and thoughtful book that is very readable. Warner presents an informed discussion on children’s mental health issues and provides arguments from both sides. Warner discusses both bad practice and good practice in the book. She is also critical of psychiatrists that have received payments from pharmaceutical companies, but recognizes that this is not typical for all, or even most, psychiatrists. Warner also encompasses race and social status into her book and is critical of the financial costs of receiving treatment for a child that is suffering from mental health issues.

Warner impresses with her use of parents interviews and quotations and she appears to fairly represent the parent’s struggles and concerns. Her many interviews and discussions with neuropsychologists, psychiatrists, paediatricians, other journalists, professors, and anthropologists strongly contribute to the intelligent discussions she presents.

Ideally, what Warner could have extended upon is the discussion concerning race and stigma of treating or labelling a child as mentally ill. It would have been interesting to hear a few more parents speak about such issues. It would also be interesting to hear Warner’s view on how treatment between boys and girls potentially differ. Questions I asked myself while reading the book were: ‘Are boys more likely to be ‘overdiagnosed’ when it comes to illnesses such as ADHD?’, and ‘Is there any evidence to suggest that girls and boys are diagnosed according to gender role stereotypes?’, such as girls being introverted and more likely to be depressed, or boys being more unruly and more likely to suffer from inattention?

This book is not aimed as psychologists or psychiatrists as such but would be a valuable read for many within those fields. Warner provides a brief history of

psychiatry and how it has come to be perceived with such little faith. Her interviews with parents are eye opening and at times left me shaken and upset. This book would probably be a valuable read for students looking for real life examples of how mental illness in children can manifest. It would also be informative to read for psychiatrists and future psychiatrists who intend to work with children. The book provides a perspective of how parents perceive medication, treatment, and doctors that would be of interest to professionals in the field. It also discusses current trends within psychiatry and is a brief and easy update of the progress in the field of psychiatry.