

SPIEGEL Interview with Jerome Kagan

'What About Tutoring Instead of Pills?'

Harvard psychologist Jerome Kagan is one of the world's leading experts in child development. In a SPIEGEL interview, he offers a scathing critique of the mental-health establishment and pharmaceutical companies, accusing them of incorrectly classifying millions as mentally ill out of self-interest and greed.



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August 02, 2012 01:18 PM

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Jerome Kagan can look back on a brilliant career as a researcher in psychology. Still, when he contemplates his field today, he is overcome with melancholy and unease. He compares it with a wonderful antique wooden chest: Once, as a student, he had taken it upon himself to restore the chest with his colleagues.

He took one of its drawers home himself and spent his entire professional life whittling, shaping and sanding it. Finally, he wanted to return the drawer to the chest, only to realize that the piece of furniture had rotted in the meantime.

If anyone has the professional expertise and moral authority to compare psychology to a rotten piece of furniture, it is Kagan. A ranking of the 100 most eminent psychologists of the 20th century published by a group of US academics in 2002 put Kagan in 22nd place, even above Carl Jung (23rd), the founder of analytical psychology, and Ivan Pavlov (24th), who discovered the

reflex bearing his name.

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Kagan has been studying developmental psychology at Harvard University for his entire professional career. He has spent decades observing how babies and small children grow, measuring them, testing their reactions and, later, once they've learned to speak, questioning them over and over again. For him, the major questions are: How does personality emerge? What traits are we born with, and which ones develop over time? What determines whether someone will be happy or mentally ill over the course of his or her life?

In his research, Kagan has determined that how we are shaped in our early childhood is not as irreversible as has long been assumed. He says that even children who suffer from massive privations in the first months of life can develop normally as long as they are later raised in a more favorable environment. Likewise, he has studied how people become human in a certain programmatic way in the second year of life: Their vocabulary suddenly grows in leaps and bounds, and they develop a sense of empathy, a moral sensibility and an awareness of the self.

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But Kagan's most significant contribution to developmental research has come through his examination of innate temperaments. As early as four months old, he has found, some 20 percent of all babies already have skittish reactions to new situations, objects and individuals. He calls these babies "high reactives" and says they tend to develop into anxious children and adults. Forty percent of babies, or what he calls the "low reactives," behave in the opposite manner: They are relaxed, easy to care for and curious. In later life, they are also not so easily ruffled.

Kagan could have reacted to his finding in a "low-reactive" way by kicking back and letting subsequent generations of researchers marvel at his findings. Instead, he has attacked his own profession in his recently published book "Psychology's Ghost: The Crisis in the Profession and the Way Back." In it, he warns that this crisis has had disastrous consequences for millions of people who have been incorrectly diagnosed as suffering from mental illness.

SPIEGEL: Professor Kagan, you've been studying the development of children for more than 50 years. During this period, has their mental health gotten better or worse?

Kagan: Let's say it has changed. Particularly in poorer families, among immigrants and minorities, mental health issues have increased. Objectively speaking, adolescents in these groups have more opportunities today than they did 50 years ago, but they are still anxious and frustrated because inequality in society has increased. The number of diagnosed cases of attention-deficit disorders and depression has increased among the poor...

SPIEGEL: ... you could also say skyrocketed. In the 1960s, mental disorders were virtually unknown among children. Today, official sources claim that one child in eight in the United States is mentally ill.

Kagan: That's true, but it is primarily due to fuzzy diagnostic practices. Let's go

back 50 years. We have a 7-year-old child who is bored in school and disrupts classes. Back then, he was called lazy. Today, he is said to suffer from ADHD (Attention Deficit Hyperactivity Disorder). That's why the numbers have soared.

SPIEGEL: Experts speak of 5.4 million American children who display the symptoms typical of ADHD. Are you saying that this mental disorder is just an invention?

Kagan: That's correct; it is an invention. Every child who's not doing well in school is sent to see a pediatrician, and the pediatrician says: "It's ADHD; here's Ritalin." In fact, 90 percent of these 5.4 million kids don't have an abnormal dopamine metabolism. The problem is, if a drug is available to doctors, they'll make the corresponding diagnosis.

SPIEGEL: So the alleged health crisis among children is actually nothing but a bugaboo?

Kagan: We could get philosophical and ask ourselves: "What does mental illness mean?" If you do interviews with children and adolescents aged 12 to 19, then 40 percent can be categorized as anxious or depressed. But if you take a closer look and ask how many of them are seriously impaired by this, the number shrinks to 8 percent. Describing every child who is depressed or anxious as being mentally ill is ridiculous. Adolescents are anxious, that's normal. They don't know what college to go to. Their boyfriend or girlfriend just stood them up. Being sad or anxious is just as much a part of life as anger or sexual frustration.

SPIEGEL: What does it mean if millions of American children are wrongly being declared mentally ill?

Kagan: Well, most of all, it means more money for the pharmaceutical industry and more money for psychiatrists and people doing research.

SPIEGEL: And what does it mean for the children concerned?

Kagan: For them, it is a sign that something is wrong with them – and that can be debilitating. I'm not the only psychologist to say this. But we're up against an enormously powerful alliance: pharmaceutical companies that are making billions, and a profession that is self-interested.

SPIEGEL: You once wrote that you yourself often suffered from inner restlessness as a child. If you were born again in the present era, would you belong to the 13 percent of all children who are said to be mentally ill?

Kagan: Probably. When I was five, I started stuttering. But my mother said: "There's nothing wrong with you. Your mind is working faster than your tongue." And I thought: "Gee, that's great, I'm only stuttering because I'm so smart."

SPIEGEL: In addition to ADHD, a second epidemic is rampant among children: depression. In 1987, one in 400 American adolescents was treated with anti-depressants; by 2002, it was already one on 40. Starting at what age is it possible to speak of depression in children?

Kagan: That's not an easy question to answer. In adults, depression either implies a serious loss, a sense of guilt or a feeling that you are unable to achieve a goal that you really wanted to reach. Infants are obviously not yet capable of these emotions. But, after the age of three or four, a child can develop something like a feeling of guilt, and if it loses its mother at that age, it will be sad for a while. So, from then on, mild depression can occur. But the feeling of not being able to achieve a vital goal in life and seeing no alternative only starts becoming important from puberty on. And that is also the age at which the incidence of depression increases dramatically.

SPIEGEL: The fact is that younger children are also increasingly being treated with antidepressants.

Kagan: Yes, simply because the pills are available.

SPIEGEL: So would you completely abolish the diagnosis of depression among children?

Kagan: No, I wouldn't go as far as that. But if a mother sees a doctor with her young daughter and says the girl used to be much more cheerful, the doctor should first of all find out what the problem is. He should see the girl on her own, perhaps carry out a few tests before prescribing drugs (and) certainly order an EEG. From studies, we know that people with greater activity in the right frontal lobe respond poorly to antidepressants.

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Part 2: 'Psychiatrists Should Ask What the Causes Are'

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2. Confused - but agree!

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3. Adhd

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