DELIQUENTS, THUGS, AND ACNE DRUGS: USING LITERARY JOURNALISTIC TECHNIQUES TO DISCUSS THE PSYCHOLOGICAL EFFECTS OF ACCUTANE

A CREATIVE PROJECT

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MASTER OF ARTS

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Evaluation/ Review of Project by Stephan A. Hopkins
Evaluation/ Review of Project by Tim Cleland
I. INTRODUCTION

This creative project presented two narratives of two people who had taken the drug Accutane. It examined the lives of two teenagers and their families as the teens struggled through high school after taking the drug. Accutane was an acne drug that had been linked to the development of potentially serious physical and psychological problems marketed from the early 1980s until 2009. The drug had caused organ damage including the liver and intestines, as well as problems with the eyes, ears, and skeletal system. Less commonly discussed was Accutane’s link to psychiatric problems and disorders.

The project is comprised of three sections. The first examines the case of teenager Paul Wilkinson. The second section examines the case of John Pryor. The third section is an in-depth analysis of secondary research, documenting cases of teenagers who had struggled psychologically after taking Accutane.

The case of Paul Wilkinson’s story is told through the author’s first-hand accounts and via conversations with Paul and his family. Though many parents struggle with teenagers’ attitudes, Paul’s parents, Ron and Terri Wilkinson, several concerns. Life for their only son went from bad to worse as Paul quit sports and band, stopped hanging out with his old friends, skipped school and started to exhibit uncontrolled anger. As Paul seemingly lost control, Ron and Terri feared that his poor decisions and delusions of the real world were in fact more than just a teenage stage and instead a serious psychiatric
problem caused by Paul’s Accutane usage during a six-month period. The researcher interviewed a psychiatrist to find out how common these symptoms were among patients that had taken Accutane. A dermatologist was also questioned to see if his opinion on prescribing the drug had changed since Accutane’s serious physical side effects had been proven and psychological damage highly suspected.

The second case examines John Pryor’s struggle with Accutane and how the drug affected him and his family. Similar to the experience of Paul Wilkinson, John’s personality changed dramatically to the point where family and friends no longer recognized him. John’s case was also a situation where there were psychiatric concerns such as intense anger, depression, threatening behavior, lack of interest in school, and engagement in promiscuous activities.

The third section of the paper includes extensive secondary research on case studies where Accutane had serious side effects. The research documents the impact of the drug in the U.S. and overseas. As the researcher discovered, Accutane is still available in its generic form and continues to have significant support from many patients worldwide because of its documented success in eliminating acne.
II. REVIEW OF RELATED LITERATURE

The Drug: Accutane

According to *The American Journal of Therapeutics*, Accutane is a trade name for the drug isotretinoin. The U.S. Food and Drug Administration (FDA) approved Accutane in 1982, and since then, nearly five million people in the U.S. have been treated. Isotretinoin’s original purpose was to treat cancer patients, but it soon became a treatment for severe acne. According to Meadows in *FDA Consumer*, it remains the only drug that has the potential to clear severe acne permanently after one course of treatment (Meadows, 2001; O’Donnell, 2003).

The Food and Drug Administration (FDA) estimated that between the years 1982 and 1986, Accutane may have caused as many as 1,300 birth defects nationwide.' The agency also estimated that women who became pregnant while on the drug had spontaneous abortions at close to three times the rate in the general population. The birth defect syndrome most commonly associated with Accutane includes enlarged and misshapen head, cleft palate, tiny or unformed ears, facial paralysis, abnormally small jaw, and malformations of the heart and brain. The FDA approved Accutane in September 1982. The drug's teratogenic potential was fully recognized and acknowledged at that time. The FDA-approved labeling for Accutane specified prescribing restrictions, contraindications, and warnings. It was to be prescribed for only one indication—the
treatment of severe recalcitrant cystic acne—and only for those patients who were unresponsive to other forms of therapy (Shulman, 1989; Accutane and Birth Defects: More restrictions announced for acne drug, 2005).

One program aimed to help dissolve Accutane’s potential for birth defects is the iPLEDGE program, which requires Accutane prescribers, wholesalers, pharmacies and patients who are women of childbearing potential are required to register in the program. Under iPLEDGE, prescribing of Accutane or generic isotretinoin must occur on a strictly controlled schedule involving repeated pregnancy testing and contraception counseling. Once a woman whose doctor wants to prescribe her the drug meets several conditions and qualifies to receive the prescription, she has a window of seven days to obtain the prescription, after which the entire cycle of testing and counseling has to resume for her to be able to receive the drug. The FDA is overall impressed with iPledge, but feels that improvements could still be made in patient education about contraception choices during treatment (Stronger risk management program could slow prescribing of Accutane, 2006; Fields, 2006; Traynor, 2012).

J. Douglas Bremner, M.D., acknowledges one risk of Accutane is the development of potentially serious problems affecting a number of organs including the liver and intestines, as well as the eyes, ears, and skeletal system. There is a monthly blood test that needs to be done to make sure the drug is not causing any damage to the patient’s organs or having other adverse effects (Bremner, 2005; Wooltorton, 2003).

Bremner’s findings indicate that Accutane is associated with decreased brain metabolism in the orbitofrontal cortex, an area of the brain that is believed to mediate symptoms of depression. Based on the results of positron emission tomography (PET)
and magnetic resonance imaging (MRI), one can conclude that there may be a biological mechanism by which treatment with Accutane may lead to depression in a minority of vulnerable patients with acne (Bremner, 2005; Brain imaging studies suggest a link between Accutane and depression, 2005).

Bremner and Meadows both address Accutane’s third risk, which is the development of serious psychiatric problems and disorders. The FDA recommends that all patients treated with Accutane should be observed closely for symptoms of depression such as irritability, anger, loss of pleasure or interest in social or sports activities, sleeping too much or too little, changes in weight or appetite, decrease in school or work performance, or trouble concentrating. In rare instances, patients have developed suicidal behavior. From 1982 to May 2000, the FDA received reports of thirty-seven U.S. Accutane patients who committed suicide, twenty-four while on the drug, and thirteen after discontinuing it. In addition to suicides, the FDA received reports of hundreds of hospitalized and non-hospitalized accounts of depression, suicidal ideation, and suicide attempts. The drug label advises providers of Accutane that simply discontinuing the drug may not remedy any psychiatric problems (Meadows, 2001; Bremner, 2005; The acne drug isotretinoin, 1998; Clinical Consult: Accutane and Depression, 2002).

There is no consensus in the medical field on a causal relationship between Accutane and development of depression and suicide (Bremner, 2005), and the issue remains controversial, although the FDA issued an alert that patients on the medication should be monitored for these symptoms. In one epidemiological study, results showed no significantly increased risk for suicide in Accutane-treated patients. Another study of seventy-eight acne patients found significant improvements in quality of life, depression,
and anxiety in acne patients treated with isotretinoin. Still, Bremner suggests that due to the high incidence of depression in the general population, identifying small increases specifically related to one additional factor, such as Accutane treatment, is difficult (Bremner, 2005; Improved quality of life with isotretinoin, 2009).

The relationship between Accutane and depression remains unproven, but James O’Donnell from the Department of Pharmacology at Rush Medical College in Chicago found some patients have reported that their depression subsided when they stopped the medication and returned when they resumed taking it. And some who have reported problems with depression while taking Accutane had no previous psychiatric history. According to the American Journal of Therapeutics, even without a definitive link between depression and Accutane, there are many cases where patients’ lives have changed dramatically for the worse after taking the drug (O’Donnell, 2003).

**Literary Journalism**

“Literary Journalism” was used by Ronald Weber in his 1974 study of the New Journalism, The Literature of Fact. The historical term, “New Journalism” was a style of 1960s and 1970s newspaper and magazine writing that used in-depth reporting and literary techniques deemed unconventional at the time. Literary journalism has evolved greatly in the last few decades in terms of its definition and application.

In the late 1980s, Chris Anderson, author of Style as Argument: Contemporary American Nonfiction and Literary Nonfiction: Theory, criticism, pedagogy, divided literary journalism into two categories. The first category is essay, which is reflective and exploratory and essentially personal. The second is New Journalism, which is informative rather than reflective with its main purpose being to convey information. Though its
history dates back centuries, in the mid-1990s literary journalism expanded its boundaries. Norman Sims described it as a growing genre based on solid foundations of the form immersion reporting, narrative techniques, and high standards of accuracy. In 2000, John C. Hartsock distinguished between literary journalism and other nonfiction forms such as the discursive essay, muckraking, and sensational journalism. Unlike Anderson, Hartsock makes a distinction between fundamentally discursive and narrative forms. Other names for the genre include literary or creative nonfiction, art-journalism, nonfiction novel, essay-fiction, factual fiction, journalist, journalistic nonfiction, nonfiction reportage and New Journalism. (Anderson, 1989; Sims and Kramer, 1995).

Since the early 1990s, there has been a clear trend in the mainstream press away from the formulaic structures of the inverted pyramid. Some call the change literary journalism, narrative journalism or even creative nonfiction. Although some journalists avoid terms like “literary” because it seems self-congratulatory, they realize their work differs from standard journalism in approach and presentation. Defining literary journalism can present problems because of vague definitions (Sims, 1990).

Ron Rosenbaum, a contemporary practitioner, defines literary journalism as ‘journalism, [which] at its best asks the questions that literature asks (Abrahamson, 2006).” Literary influences have changed the construction of journalistic writing enabling words to visually present stories of the past (Abrahamson, 2006). However, Roy Peter Clark reminds his audience that there is a difference between reports and stories. One is used to render information, while the other is used to render experience (2006).

To produce successful literary journalism, the writer must achieve two goals: journalistic credibility and artistic merit. A fact-based narrative should both inform and
enlighten the reader. Although it must rely on verifiable material, such a story has the potential to transcend the conventions of traditional deadline-driven journalism by portraying characters with psychological depth; providing riveting details and descriptions; and employing literary point of view and dramatic scenes to engage reader emotions (Massé, 2002). It is also important for stories to be built around a key question. Stories need an engine, a question that the action answers for the reader (Clark, 2006).

Successful authors know that structure and organization are required to craft clear, coherent and compelling stories. Mark Massé shares a three-step approach to craft a story. In literary journalism it is important to take time early in the writing process to ask the tough questions, analyze the material, and select the appropriate story structure. Using the three-step approach will result in greater confidence for the writer (2006). Structure for contemporary American prose is about the rhetorical power of words at a time when language is constantly being threatened. Today’s American literary journalism is about expanding to accommodate new realms of experience. The modern narrator “leaves his characters to work out their own destinies and tell their own stories.” He gives “the illusion that he is sitting silently behind the scenes” of the story itself (Anderson, 1987, pp. 48-49).

Literary journalists often write narratives focused on everyday events that bring out hidden patterns of community life. The process of understanding people and their culture takes time. The clearest understanding of people comes from observing the routine, ordinary, everyday things they do (Kessler, 1998). Through dialogue, words, and the presentation of the scene, one can turn over the material to the reader. Literary journalism requires scene-by-scene construction, saturation reporting, third-person point
of view, a detailing of the status lives of the subjects, immersion reporting, accuracy, voice, structure, responsibility, and symbolic representation (Sims and Kramer, 1995).

Tom Wolfe made the argument in his seminal "The Feature Game" essay that one of the aspects of forms of journalism is their need to capture new realities of the moment. He argued that the New Journalism of the 1960s-1970s grew in popularity because of the social ferment of the 1960s — and that conventional journalism no longer was the best vehicle to capture the tumult of the era (Wolfe, 1973). Following that logic, one could certainly argue that the new realities of the last fifteen years are also uniquely fitting subject for literary journalism. Another factor leading to the popularity of literary journalism is the role of competition, particularly from other, often nontraditional media. Nontraditional media are successfully using more literary narrative forms (Abrahamson, 2006). Darrel Caulley raises another advantage of literary journalism. He discusses how creative nonfiction techniques can make qualitative research reports more appealing and easier to read (2008).

Walt Harrington, the former Washington Post Magazine reporter who is a strict ethicist, says his rule is that he will not write what someone is thinking "unless they tell you what they're thinking." According to Harrington, a writer can do certain things to improve his or her chances of getting dialogue and internal monologue right. For example, one should interview as soon as possible after the event, before memories degrade. One also can evaluate his or her source’s recollection for internal consistency and logical probability, what social scientists call "face validity." One can triangulate one account by interviewing multiple witnesses to an event or multiple participants in a conversation. Cross-check with documentary sources. If one is not absolutely sure about
what was said, paraphrase, rather than pretending to have the exact words by using quotation marks. One must limit his or her reconstruction to things that happen at dramatic highlights, the relatively rare points in a human life when the experience is so intense that memory kicks into high gear (Hart, 2011).

Voice, the quality that was arguably lost in the formulaic writing of early twentieth-century newspapers, is perhaps the distinguishing mark of literary journalism—the opportunity for the reader to connect with the writer on the page. Voice applies as much to most third-person writers, such as Tom Wolfe, Malcolm Ross, and John McPhee, as it does to Hunter Thompson, Norman Mailer or Joan Didion. All those literary journalists had readily identifiable voices on the page whether writing in first- or third-person (Sims, 2010).
III. METHODOLOGY

Literary journalistic techniques were utilized in the writing of the creative project. This method combined in-depth factual reporting with the use of narrative techniques. The end result was a narrative comprised of both primary and secondary research.

The researcher used in-depth, open-ended interviews that helped her gain understanding of the subjects and their actions. The researcher also used qualitative research including ethnography and oral history. She used a mixture of interviews and observed behavior through attending activities with the subjects, such as extra-curricular activities, doctor appointments, etc.

Much of the factual reporting was conducted via extended observation using ethnography. Ethnography is a qualitative research method designed at exploring cultural experiences. The resulting field study reflects the knowledge and the system of meanings in the lives of a group, in this case, Accutane patients and their families were the focus. Ethnography typically includes a brief history and an analysis of the environment being studied. Ethnography has an opportunity to make a substantial contribution toward the understanding of the social life of humans, have an aesthetic impact on the reader, and express a credible reality. The researcher observed her subjects and recorded all observed behavior to help with descriptions within the narrative.

The researcher also compiled narratives using oral history techniques. Oral history is the collection and study of historical information about individuals, families,
important events, or everyday life. The researcher collected oral histories by interviewing her subjects and the subjects’ friends, families and other people whose memories and observations were beneficial.

Secondary research was especially helpful in preparing the third section of the project containing case studies where Accutane has had serious side effects. The researcher used statistics on Accutane, published texts including academic journals and articles, media such as documentaries or stories from respected news channels, and personal documents including letters, diaries, and other correspondence.
IV. BODY OF PROJECT

Narrative One

Part 1: Coping With Crisis

Paul Wilkinson threw open the door and dumped his keys on the entry table next to a cluttered pile of magazines, bills, and junk mail. Hidden beneath was a small stack of school referrals addressed to the “Parents of Paul Wilkinson.” Below the referrals was the court subpoena.

Paul moved toward the living room couch where the family Yorkie, Hallie, slept. He patted Hallie on her head. Hallie pushed her head into the couch cushions as if trying to muffle out the noise that always followed Paul’s arrival. Paul’s Michael Jordan basketball shorts hung almost to his ankles, making him feel like he, the white middle-class suburban kid, fit in with his black friends of Whiteley, a predominantly black neighborhood on Muncie’s southeast side. Paul quickly moved to the stairs, hoping to go unnoticed by his parents.

“Paul?” his father, Ron Wilkinson, called from the family room.

Paul grimaced and spat out a lackadaisical greeting in a low voice that seemed forced and unnatural. He then carelessly thudded up the stairs. His mother, Terri Wilkinson, appeared from her bedroom and stood in front of him at the top of the banister. Halfway up the stairs, Paul ran his hand through his brown curls and rolled his eyes knowing he would have to speak to her.
Terri had received a call earlier in the day that Paul had been truant for the third time that week. She tried to confront Paul. He mumbled a response, brushing past her toward his room, his shoulders slouched.

Terri followed close behind. She glanced at the holes that lined the hallway near his room. She had been meaning to repair them for months now. Five holes, four the size of Paul’s fist, the biggest from his size eight shoe. She hoped there wouldn’t be another blowup, another ugly confrontation. Terri’s soft voice called out to Paul again. He looked back with an icy glare and then closed the door to his room.

Terri was a tiny woman standing barely five feet. She had a high voice like her daughter and brown curls just like Paul. Her now frequent frown didn’t fit her once bubbly personality. She retreated to her bedroom not bothering to continue the interrogation.

A few minutes later, Terri returned downstairs. She rejoined her husband and twenty-two year old daughter, Katie, in the family room. Terri had tears in her almond shaped brown eyes.

“Katie, you don’t understand. This could all be our fault,” Terri murmured, waving around a handful of articles she had just printed off concerning the acne drug Accutane. Ron’s eyes glanced to the shelf holding more than thirty dusty trophies Paul had received in past years for baseball, tennis, wrestling, and band.

Paul had taken Accutane for his severe acne two years earlier, his freshman year of high school, when he was fifteen years old. According to the *American Journal Of Therapeutics*, Accutane is a trade name for the drug isotretinoin. The U.S. Food and Drug Administration (FDA) approved Accutane in 1982, and since then, nearly five million
people in the U.S. have been treated with the drug. Isotretinoin’s original purpose was to treat cancer patients, but it soon became a treatment for severe acne. According to Dr. Matthew Meadows in *FDA Consumer*, it remains the only drug that has the potential to clear severe acne permanently after just one course of treatment. As powerful as Accutane can be in improving patients’ lives, its adverse effects can be just as powerful.

Katie sighed. She was tired of being told she didn’t understand. She was tired of her parents defending Paul. She was tired of Paul’s selfishness and the way he put himself above all else. Her seventeen-year-old brother was dividing her family, sucking the life out of them.

Katie, who had the same slight stature as her mother, stood up and pulled her long blond hair into a ponytail. She grabbed her red Adidas backpack and headed for the door. Her eyes were drawn to the family photographs of faded smiles and distant laughter that lined the entryway table. Her scowl subsided for a moment as her eyes met a photo of giggling, pudgy ten-year-old Paul holding up a rocket he had built with his father. Katie patted Hallie on the head. The dog hadn’t moved from her spot on the living room couch. Then Katie glanced upstairs at Paul’s door before leaving the house.

***

At fourteen, Paul thought acne was ruining his teenage life. He had started high school in the fall of 2009 with a face full of pimples. On this September afternoon, he leaned back in his dermatologist’s waiting room chair. He had just come from tennis practice with his mom, Terri, and was determined to get rid of his acne.

Many of Dr. Michael Crider’s patients boasted that he was the best dermatologist in Muncie. A certificate in his office confirmed he had finished first in his class at
dermatology school at Indiana University. Crider was a family friend. He greeted Paul
and Terri warmly as he led them back to an exam room.

Terri had been through the routine before with her older daughter, Katie. In high
school, Katie’s skin had been covered with pimples, and she was prescribed the drug
Accutane. After two months, her skin was completely clear.

Paul and Terri knew there were possible side effects, the most severe being birth
defects of mothers taking Accutane when pregnant. Each container of the drug carried a
picture of a pregnant mother in the middle of a circle with two dark red lines through it.
“DO NOT TAKE IF PREGNANT,” the package seemed to scream at its consumer.
Females on Accutane had to take a monthly pregnancy test regardless of their age.

Dr. Crider acknowledged another risk of Accutane was the development of
potentially serious problems affecting a number of organs including the liver and
intestines, as well as the eyes, ears, and skeletal system. There was a monthly blood test
that Paul needed to commit to in order to ensure the drug wasn’t causing any damage to
Paul’s organs or having other adverse effects.

Dr. Crider then addressed a third less-common risk of Accutane, which was the
development of serious psychiatric problems and disorders. He asked Terri to keep a
close eye on Paul for possible behavioral changes, but he was not too worried about the
risk. Terri wasn’t worried either. Paul’s sister, Katie, had taken the drug without having
any serious side effects, and she assumed Paul would have a similar experience.

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The changes in Paul were not abrupt after weeks of taking Accutane. He started
off being more irritable and argumentative than usual, but Ron and Terri thought that
would pass. They blamed it on teenage hormones. If it were the result of the drug Accutane, they thought the changes would only be temporary.

The FDA recommends that all patients treated with Accutane be observed closely for symptoms of depression such as irritability, anger, loss of pleasure or interest decreases in social or sports activities, sleeping too much or too little, changes in weight or appetite, school or work performance, or trouble concentrating. In rare instances, patients have developed suicidal behavior and killed themselves. From 1982 to May 2000, the FDA received reports of thirty-seven U.S. Accutane patients who committed suicide, twenty-four while on the drug, and thirteen after discontinuing it. In addition to suicides, the FDA received reports of hundreds of hospitalized and non-hospitalized accounts of depression, suicidal ideation, and suicide attempts. The drug label advises providers of Accutane that simply discontinuing the drug may not remedy any psychiatric problems. In other words, the effects may be long lasting.

After his freshman season of baseball, a sport Paul had loved since early boyhood, Paul abruptly told his dad he didn’t want to play anymore. Ron was disappointed. It was a sport they had shared together since he was able to hold a bat. Terri just figured Ron had put too much pressure on Paul, and he was burned out playing baseball. During that summer, Paul started making new neighborhood friends that Ron and Terri didn’t approve of. They were known around their Halteman Village neighborhood for vandalism and theft. Most came from broken homes. When Terri and Ron questioned his friendships, Paul challenged their intentions and judgment.
There seemingly was no getting through to Paul. Like many teens, he thought he knew more than his parents. Ron and Terri continued to worry about their son’s increasingly irrational behavior.

Paul’s sophomore year started off slightly better. In the fall, he managed to finish his tennis season at the one doubles position, earning state honors. He was hanging out with the tennis team during the season, and he seemed more like the “old” Paul.

After tennis season ended, though, he began to spend more time back with troubled kids. At age fifteen, he started drinking and smoking both cigarettes and marijuana. His grades started to fall, and he didn’t want to go out for wrestling as he had in his freshman year. As spring of 2011 drew near, the baseball coach asked Paul to consider rejoining the team. Ron was excited that this might be the confidence boost Paul needed, but Paul rejected the coach’s offer.

The summer after Paul’s sophomore year was when Ron and Terri started to fear that their son may have more emotional problems than they had realized. Paul’s drinking and marijuana use became more frequent. He smoked cigarettes daily and always reeked of smoke. At first he tried to hide his smoking, but then he stopped caring about what his family thought of him.

*I smoke and I’m not going to stop.* That is what Paul told Ron and Terri when they confronted him.

He also asked to be allowed to drink in the house. He suggested it would be safer for him and claimed many of his friends’ parents allowed it. Paul thought he had come up with a reasonable proposition for Ron and Terri. It was this kind of illogical thinking
from a sixteen-year-old that really prompted Terri to look into what could be wrong with her son.

She remembered a mother of girl who used to play tennis with Katie who had claimed her daughter’s psychiatric problems had emerged because of Accutane. At the time, Terri thought the woman may have been using the drug as an excuse, but now she wondered if there was actually some connection to Paul’s behavioral changes.

The relationship between Accutane and depression remains unproven, but some patients have reported that their depression subsided when they stopped the medication and returned when they resumed taking it. And some who have reported problems with depression while taking Accutane had no previous psychiatric history. According to the *American Journal Of Therapeutics*, even without a definitive link between depression and Accutane, there are many cases where patients’ lives have changed dramatically for the worse after taking the drug. Paul Wilkinson’s life became another of those disturbing statistics, quite likely the result of his taking Accutane.

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In the summer of 2011, Terri suspected Paul had marijuana in his room. When he had left earlier that day his eyes were bloodshot and his clothing smelled strange. Paul swore he hadn’t been smoking. He thought he was a good liar. He seemed so caught up in his lies that most of the time he seemed to believe them.

*Mom, I swear. Why don’t you ever just believe me?* Paul said with sad, sincere eyes.

Although Paul reeked of marijuana, Terri wanted to believe him. However, when he left the house, she sneaked into his room. It wasn’t like her to go through Paul’s
things, but she suspected beyond a reasonable doubt that he was lying. She opened up his
desk drawer and sifted through Paul’s things. She found empty cigarette boxes, tools,
screws and bolts left from when his hobby was building skate ramps in middle school,
lighters, bottle caps, old baseball cards, and gum. She shut the drawer and glanced on top
of the desk. Carved into the wood were two simple words, “Help me.” Terri felt her eyes
fill with tears. She opened the next drawer and pulled out a folded note addressed to Paul.
The note was written on his sixteenth birthday from a classmate Terri thought he used to
like.

Pauly,
First off Happy Birthday! I hope you like the cake I baked for you. I really miss
hanging out with you and being best friends. I just feel like I never see you
anymore. I miss when we used to watch the stars together, and us always
laughing. You are funny and always making me laugh. I miss our phone calls
where we would talk until 1 or 2 in the morning until one of us fell asleep next to
the phone (usually me!) I miss you in my life. You know I don’t approve of your
actions lately. I don’t like when you are drinking or smoking, but I still love you. I
wish you would stop. And I know you say everyone drinks and maybe you are
right, but I don’t want to date someone who does. No matter what, we will be
friends forever, but please try to stop getting in trouble. You worry me. Maybe
someday we can go back to how things were. I hope we can. I thought I would
write this to you just to say Happy Birthday and that I want you back in my life!

Love your best friend in the word,
Kat

p.s. You better come to 4th period tomorrow because class is sooo boring without
you there.

Terri refolded the note and set it back where it was in the drawer. She had always
encouraged Paul’s friendship with Kat. If this nice girl couldn’t get through to Paul, she
worried if anyone could. She closed the middle drawer and opened the bottom drawer.
The smell hit her right away, and she cursed herself for believing her son’s lie. In plain sight was a gallon-bag filled with marijuana. This wasn’t the first time they had found marijuana on Paul. It had been found in his coat pocket and jeans pockets and backpack. But the last time, he had sworn he would stop, and Ron and Terri had believed him. This time was different, though; there was enough marijuana to sell. Maybe Paul was dealing. Terri took the gallon-bag out of the drawer and walked back to her room where she grabbed the phone to call Ron.

Ron had never really enjoyed his high-stress job as an elementary school principal, but now he wished he could stay at work a little longer. The kids he dealt with at school were nothing compared to Paul’s problems. The phone call from Terri haunted him, another reminder of his failed parenting. He had no idea what to do. He had tried punishing Paul, taking away his phone, threatening to not allow him to get his license, not awarding him an allowance. He had tried reasoning with Paul, talking with him, giving him rewards to encourage good behavior.

Ron paid for expensive counseling and a tutor to help Paul improve his grades. He had also allowed Paul to have a part-time job even though Terri was against it. Ron felt as if he had nothing else to contribute. He felt helpless, unable to get through to Paul.

When Ron got home, he found Terri on the couch with the bag of marijuana. She had flushed some of the drug down the toilet to make sure Paul wouldn’t be subject to a felony. If there was any way to keep this incident from going on Paul’s permanent record, Terri was willing to do it. She knew she and Ron needed outside help to deal with their son, who was now home and hysterically yelling at Terri from the upstairs banister for going through his things. Tears ran down his cheeks as he screamed.
Dad, Terri called the f*%&%ing police on me, Paul shouted, glaring at his mom.

I know, I told her to. You need to have consequences for your actions, Ron said.

Are you serious? You are going to send your own son to jail because he had a bag of weed? It’s not a big deal! Paul screamed again.

He hauled off and punched the wall behind him leaving the fourth hole in the upstairs hallway. Paul thudded down the hall to his bedroom and slammed the door.

I went ahead and called the police, Terri said calmly to Ron as she stared blankly at the living room wall.

I can see that, Ron said. When are they coming?

There was a knock on the door. Ron opened the door for two uniformed police officers. He and Terri greeted them and handed them the confiscated bag of marijuana.

May we speak with your son? the taller officer asked.

Yes, I’ll go get him, Ron answered, as he made his way up the stairs.

He stopped for a few moments to examine the new hole in the wall. He would have to fix those holes at some point, he thought. He knocked on Paul’s door. His son opened his door and glared at Ron. He then pushed past him toward the stairs to go talk to the police officers.

You do know that possession of marijuana is illegal? the taller officer asked.

Yes, Paul said in an annoyed, impatient tone. He was acting nervous, angry and agitated.

Possession of marijuana is a class A misdemeanor and punishable by up to one year incarceration and up to a $5,000 fine, the taller officer said.
The shorter, younger officer scratched his shaven head and kept his eyes fixed on Paul while his partner talked. The taller officer continued questioning the Wilkinsons’ son.

_Do you know your parents are doing this because they care about you?_ the taller officer asked.

_Yes we do_, Terri chimed in, while Ron looked at her disapprovingly.

_I guess_, Paul answered, seemingly only to satisfy the officer.

The police finished up their questioning and headed for the door.

_We’ll be in touch_, the taller officer said to Ron at the door. After they left, Ron turned to face Paul.

_I hope you understand how serious this is now_, Ron said.

_I hope you understand I’m not living here anymore, Paul said. You guys are ruining my life and you’re the reason none of my friends will come over. They all hate you._

_What?_ Terri questioned.

_Don’t talk to me_, Paul said. He ran up the stairs and again slammed his door. A few minutes later, he came downstairs with a packed suitcase.

_Paul, are you really leaving?_ Terri asked.

Terri started to cry and pleaded with Paul to reconsider his decision. She knew nothing good would come from him taking off to live at one of his new friend’s houses.

Ron again wasn’t sure what to do, but he knew he had to try to get someone who Paul would listen to. He called his daughter, Katie.

***

“Dad?” Katie answered.
Katie’s voice was unsteady, and Ron could tell she had been asleep. He looked at the time and hadn’t realized it was already after ten. He knew Katie had early morning practices for her college tennis team, but he also knew he needed his daughter’s help.

“Hey, Kate, I hate to wake you up,” Ron said.

“What’s wrong?”

“Could you please come over? Paul’s running away, and he has his bags packed. He isn’t listening to your mother or me.”

“What happened? And why do you think he would listen to me?” Kate asked.

“It was another blowout. Your mom found marijuana in his room, and the police got involved… it’s a mess, and you are the only one he will talk to.”

“Not sure about that, but I’ll be right over.”

***

Katie arrived at her parents’ home a little before ten-thirty. She walked up the familiar driveway to the blue double doors that would lead her to complete turmoil. She opened the door. Paul’s suitcase was sitting next to the living room couch. Terri came up and hugged her.

“Thank you for coming. Paul wants to leave,” Terri said between sniffles.

Her eyes were red, and mascara had left trails down her cheeks. She looked tired with deep circles under her eyes.

“My aunt is coming over to get him,” Terri continued.

“Well that’s good. He has somewhere safe to go now,” Katie said.

Katie didn’t really approve of her great aunt taking in Paul. She was too elderly to be put in the situation of having to look after a troubled teen. However, she also doubted
it would last very long because she knew Paul would have much more freedom at home than he would living with his great aunt.

“And Paul will realize soon enough how good he has it here,” Katie said to Terri. She climbed the stairs to the bedrooms. She walked past her old bedroom door. The bottom of the door was still covered with streaks of dirt and candy, smudges from Paul’s youthful hands. She remembered locking her door to keep Paul out, but at the age of three he had learned how to pick the lock with a butter knife. He would unlock the door, push it open, and giggle. Katie used to get so annoyed at her younger brother, but she always was amazed at how smart he was.

Katie slowly opened Paul’s bedroom door.

“Paul?”

Her brother lay on his bed shaking his head in disapproval.

“They called the police on me.” Paul’s eyes were red from crying.

“Are you the one that put the hole in the wall?” Katie asked.

Paul ignored her and shoved his head back onto his pillow. Katie looked around his room. She missed his old bunk beds. They would sit on the top bunk playing video games and making forts on the bottom bunk. Paul used to love spending time with her. Now he would barely acknowledge his sister. They no longer shared any common interests. Paul didn’t really know what to say to her and vice versa. Katie sat on the edge of the bed.

“Remember when we used to make haunted houses out of our connecting bedrooms?”

“Ha, yeah,” Paul said with a chuckle.
In fall 2011, Paul had returned to school. He hadn’t had any problems with the law since the marijuana bust the previous summer. But he couldn’t play tennis because he was academically ineligible, due to his semester grades. He had moved back with his parents after only a couple of days at his great aunt’s house, and they were getting along for the most part. Ron had promised Paul a car if he didn’t get into any more problems, and now he had that car. Terri and Katie thought it was a dumb idea to get him a car, but Ron was sure that it would demonstrate to Paul that his parents trusted and loved him.

“Dad is really rewarding his awful behavior with a car?” Katie said to Terri.

“Not just any car. He got him a really nice Dodge Charger. The one Paul wanted,” Terri replied.

“WHY would he get him a nice car? Or any car for that matter?” Katie asked, annoyed.

“I guess he thinks it will change Paul. You know your dad. I just hope he doesn’t crash it,” Terri said.

***

It was nearly 1 a.m. on Wednesday as Paul Wilkinson’s 2010 silver Dodge Charger gleamed in the streetlights. Its shiny new rims spun like a shuriken just released from the hand of a ninja warrior. The subwoofer boomed Wiz Khalifa in a way that made seventeen-year-old Paul seem cool to his Southside black friends. In typical teenager fashion, the sound could be heard from blocks away. Paul was from the predominately white upper-middle class suburban north-Muncie neighborhood of Halteman Village.

His friend Kentrall was from Whiteley, the historically black section of Muncie. Neither teen seemingly gave a thought about school being only seven hours away. Paul’s
breath smelled of beer as he pushed harder on the gas pedal, wanting to impress Kentrall in the passenger seat.

The Charger cruised down Clara Lane nearing Wal-Mart, where the boys planned to pick up one of Kentrall’s friends. In the darkness, Paul spotted Wal-Mart coming up faster than he had expected. He jerked the wheel to the left sending the car up on an unnoticed embankment and finally into a light post, crushing the front end of the car. The airbags deployed as both drunken teenagers jolted forward. Smoke rose from the engine. The bass thumped on for a moment as Paul picked himself up off the airbag and fled the scene alongside his accomplice. His once beautiful Charger sat totaled and abandoned in the Wal-Mart parking lot.

A few hours later, Paul was lying on the couch in the garage of his parents’ house dozing in and out of sleep. His mind was fuzzy from the drinking and the accident, and his body was sore and covered with small bruises. He knew the knock on the door was coming. It was only a matter of time. So when the knock came around 3 a.m., he wasn’t surprised. The knock gained more force the second time. Paul heard his mom’s dog, little Hallie, bark in recognition that someone was at the front door. He finally heard footsteps as his dad, Ron, made his way down the stairs to the door.

Paul’s mom, Terri, stepped out of her bedroom and watched Ron open the door from the landing. No good news comes at three in the morning, she thought. She couldn’t block the first idea that popped into her head, “He’s dead.” Her heart seemed to stop as she saw a uniformed police officer enter their home. She instinctively walked down the hall and opened Paul’s bedroom door.
**Terri, Officer Brown needs to speak with Paul**, Ron called up the stairs calmly, though his face was anything but calm.

**He’s not in his room**, Terri said in a panicked voice. **Is he all right?** Neither Ron, nor the officer, answered Terri.

The middle-aged officer stood stiffly with a serious look on his face. He showed little emotion on his clean-shaven face as he watched Terri frantically hurry down the stairs. Officer Brown told Ron about the car they had found in the Wal-Mart parking lot. His brown eyes met Ron’s, and, for a moment, sympathy swept over the officer’s stone face.

**We thought he was in bed**, Ron stammered as he slowly shook his head in disapproval. He left Officer Brown at the front door as he went looking for his son.

Paul heard the voices. He couldn’t make out what was being said, but he knew they were looking for him. He closed his eyes tighter pretending to be asleep, hoping to prolong the inevitable. He hoped that maybe by this point his blood alcohol level would be normal. He thought of different stories he could make up in his defense, but there wasn’t enough time. This time he was in real trouble.

**Here he is**, Ron called as he opened the garage door.

Terri appeared next to her husband and breathed a sigh of relief. At least he was alive. Paul’s eyes fluttered open, and he sat up.

**An officer would like to speak with you, Paul**, Ron said weakly.

Paul said nothing. He knew he had really messed up this time. There was nothing to say. He walked to the entryway where the police officer stood. His parents hung back as the officer grilled Paul with questions. Paul’s answers were short, and his voice was
soft and meek. It seemed obvious to Officer Brown that alcohol played a part in the car crash. The officer nodded toward Paul and turned to address Ron and Terri.

*I’m gonna have to take him in,* he said.

Ron made no eye contact with the officer or with Paul. He looked concerned and confused as he took in Officer Brown’s words. He eventually nodded in acceptance of what was happening, though he still avoided eye contact. Tears filled Terri’s eyes as she caught Paul’s eyes. Paul immediately looked to the floor. Officer Brown lightly gripped his arm as he escorted Paul out the door.

***

Paul hated living at the juvenile detention center. Sleep was difficult even though he was exhausted. The stark rooms gave him an eerie feeling in the pit of his stomach. There were certain touches such as a poster of flowers that were meant to make the place seem less ominous, but Paul didn’t think it helped. A secure unit counselor called for Paul and the other residents to come for breakfast. The counselors kept a close eye on everyone as they ate. Paul wasn’t hungry. He looked around to see the other residents. Everyone had on the same orange jumpsuit, but they still managed to look poor. Maybe it was the way they shoveled each bite of egg into their mouths, or maybe it was how they wore their hair, or how they looked at him. They weren’t upper-middle class like he was.

Paul was in charge of wiping down all of the tables after breakfast. A few of the other delinquents used the towels to whip each other when their counselor wasn’t looking. The day’s schedule was monotonous, and Paul knew shortly after entering the facility that this place wasn’t for him. The classes were boring, and his fellow classmates
struggled worse than he did. After just one day there, he wanted to leave and never come back.

After a few minutes of waiting, Paul joined his family in the waiting room. He wore an orange jumpsuit and carried his old clothing in his arms.

At 5 p.m. that day Ron and Terri were allowed to pick Paul up. They arrived on time and were escorted to a waiting room where they were told their son would meet them shortly.

“I’m gonna go change real quick,” Paul said heading to the bathroom. He seemed happy to be out. Ron and Terri just hoped that this experience at the detention center would maybe be enough to set him straight.

***

Outside, black slush was melting in a shoveled heap near the back corner of the parking lot. It was an otherwise beautiful day on February 2012. The sun was shining. A large tan building located at 3700 West Kilgore Avenue gleamed in the sunlight. It was trimmed in red brick with two large columns placed in front of the glass double doors. The vast campus was comprised seventy-five acres, populated by several similar and adjacent buildings. The main building, larger than the rest, had a very ominous look, despite its ceiling to floor windows. In this building on this February day, Paul Wilkinson’s fate would be decided.

The Wilkinsons sat alone in a rectangular waiting room filled with blue connecting metal-framed chairs with black plastic seats. The black-rimmed clock read 12:55 p.m. The slight buzzing of the overhead lights was interrupted by a familiar voice. Paul glanced up to see a pair of shiny black loafers moving across the black and white
checkered tile. Ron stood to greet his son’s affable lawyer. The tall, trim man wore a stylish, pressed dark suit. He spoke calmly as he went through the court procedures, the charges against Paul, and how they would plea. Paul remained seated. His gaze fell on a lone chair in the corner reserved for juveniles on lock down in the facility. He hoped the next time he was in the building, he wouldn’t be seated in that chair.

The lawyer led the family out of the waiting room and into a plain looking hallway of black speckled, off-white travertine tile and creamy white painted cinderblock walls. Distant voices were barely audible from the surrounding rooms as they walked down the hallway to a long wooden bench. The bench was hard and uncomfortable. It was 1:10 p.m., and the Wilkinsons were getting anxious. The trial was running a bit behind schedule as it was supposed to have started at 1 p.m. Paul sat on the edge of the bench, his head turned toward the doors closest to him. He knew it was only a matter of time until he would walk through those dark oak double doors.

At 1:15 p.m. a woman probation officer, Ms. Ivy, pushed through the double doors and found the Wilkinsons quietly sitting on the bench. Ms. Ivy was an attractive tall, slender black woman in her early thirties. She was stern and serious as she spoke. Her job dealing with delinquents required her to be tough. She had a quick conversation with Paul and then led him through the heavy oak doors into the courtroom. Ron and Terri had to wait until Paul was seated before entering.

The juvenile courtroom consisted of rows of what looked like movie theater seats facing the judge’s bench, a raised desk in the front and center of the courtroom. The bench looked to be made of the same rich oak wood as the double doors. The walls were plain white with wooden paneling running through the middle. The U.S. and Indiana
flags were side by side next to the judge’s bench and above the judge, on the wall was a large circular metal that read ‘Seal of the State of Indiana, 1816’. Paul sat rigidly at a raised platform facing the judge’s bench in the center of the courtroom. A small wooden, square-shaped desk was in front of Paul. Ron and Terri sat at a table next to Paul’s lawyer on a raised platform. At an identical platform to the right of the courtroom sat Paul’s probation officer and the prosecutor.

The bailiff addressed the court in a formal voice, *All rise.*

The judge entered the courtroom followed by the court stenographer. Judge Speece wore a long black robe. He had salt and pepper-colored curly hair. He slipped on thin wire-rim glasses. After a few minutes of preliminary motions, the judge started to read the charges aloud, including the serious charge of driving while intoxicated.

The court stenographer’s muted typing was the only sound present between the brief exchanges of words in the courtroom. Paul’s lawyer stood and asked the judge for a continuance. The judge agreed, and the two parties decided upon a new date, April 13th. The probation officer stood and addressed the judge before the court adjourned. The serious charges against Paul led the probation officer to believe it would be to the benefit of the court to put him under house arrest with an ankle monitor. The judge agreed and dismissed the court in a serious tone. Quietly, Paul and his parents, their lawyer and the others walked out of the courtroom back into the bleak hallway.

The probation officer approached Paul and explained some of the rules of house arrest. From Paul’s facial expression, it was obvious he had missed these details in the courtroom. The probation officer then turned to address Ron and Terri and explained in detail where they needed to take Paul to get the ankle monitor. A few minutes later, Paul
lingered behind his parents as they exited the large brick building. He ran his hands through his hair and glanced down at his left ankle before entering his mom’s 2004 Honda SUV.

Part 3: Facing an Uncertain Future

From February until late April 2012, Paul was a prisoner in his own home. If it weren’t for work and school, he knew he would be going crazy. He doubled his hours as a bus boy for a local sandwich shop. Just getting out of the house, even for work, was the highlight of his day. He spent most of his time in the garage. He had taken over the garage the past summer. He moved all of the tools, boxes, paint, and other junk onto one side of the garage and pushed two old couches into a corner of the other side of the garage. He had a table set up in between the couches and an extra piece of leftover carpet spread out under his area. This was his hangout for him and his friends. The door on the side of the garage gave him easy access to sneaking in friends and taking smoke breaks. Most of the time he just sat and smoked in the garage. The smell of cigarettes was sometimes so strong that it would seep into the house.

Terri was obviously annoyed with Paul’s smoking, but too worried about starting a fight to reprimand her son. She knew bad things went on in that garage. Paul always had a group of his new black friends in the garage. Terri would smell the smoke in the house. She would hear the loud music blasting, but she didn’t want to try and break it up. She didn’t want to make things worse. Whenever they tried to stop Paul from making another mistake, it seemed things always got worse.

Ron smelled alcohol on Paul’s breath one night when he was coming in from the garage to use the bathroom.
What are you talking about? Paul asked. Dad, you don’t know anything.

Ron couldn’t take the lies. He marched out into the garage. Paul had his same
group of friends there: a black boy and a white boy around the same age as Paul, and two
black girls also about the same age as Paul.

You aren’t supposed to be having anyone over, Paul, Ron said. Your probation
officer made the rules clear.

Dad, chill out. It’s fine, Paul replied smugly.

It’s not fine, Paul, and everyone needs to go home

Paul’s friends got up and left through the side door without hesitation. Ron
walked over to couch and started looking around for beer cans.

Seriously? Paul questioned. Go ahead and look, then you can come apologize.

Paul watched Ron check the garage for beer cans and took satisfaction in his
dad’s failure to find anything. Ron pretended to give up and apologized to Paul, even
though he was sure the kids had been drinking.

The next morning Ron returned to the garage. A cooler that had not been there
last night was sitting beside one of the couches. Ron checked the cooler to find it full of
beer. He figured the kids must have actually come back after he left. He couldn’t believe
the nerve of Paul’s friends and the nerve of Paul to ask for an apology.

Ron stormed up to Paul’s room and told him about finding the beer. His son
continued to deny he was drinking.

I didn’t do it, and I don’t know how it got there.

Ron couldn’t believe how easy it was for Paul to lie directly to his face.

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“Paul Wilkinson for Dr. Mogerman,” he said to a receptionist hiding behind a glass window.

A door opened next to the window, and a young man with facial hair and long brown hair pulled back in ponytail popped his head out.

“Paul, come on in, buddy,” Dr. Mogerman said.

Katie followed Paul in to his psychologist’s office. Dr. Mogerman wasn’t exactly what she had expected. But she could see why Paul liked him.

“This is my sister, Katie. Is it alright if she comes with me?” Paul asked.

“Katie, yes, that would be great. I’d love to ask her some questions,” Dr. Mogerman said.

Dr. Mogerman shook Katie’s hand as she introduced herself, and then she followed Paul and Dr. Mogerman to his office. It was a relaxing room with two black leather couches set up perpendicular to one another. Paul and Katie sat on one couch, and Dr. Mogerman sat on the other.

“So how have you been holding up?” Dr. Mogerman asked Paul.

“Alright, I guess,” he responded.

“Alright, I guess,” he responded.

“... I have your mom telling me that you are downplaying the bad decisions you make and I have you telling me that she is always worrying and maybe making things into a bigger deal than they actually are. Do you think either of these may be true, Katie?”

“My mom now worries about every little thing that Paul does,” Katie said. “But at the same time, I think Paul downplays everything he does and at times doesn’t understand when he is doing something wrong.”

Katie had come in with the intent of revealing Paul for the lousy person he had become, but now she couldn’t bring herself to condemn him. She had planned to tell
Paul’s psychiatrist that her parents were the best of people, and Paul was an ungrateful son who was ruining everyone’s lives with his lies and his poor choices. But now as Katie sat in Dr. Mogerman’s office, she only felt pity for Paul. She could sense his sadness when Dr. Mogerman asked him what he would like to do with his future. She heard in his words that he didn’t like who he was. And from the tone of his answers, he didn’t really believe in himself.

“What do you think he is good at, Katie?” Dr. Mogerman asked.

“He’s great with animals. He’s the only one that our dogs will listen to. He even has them doing a bunch of tricks. And he is great with tools. He could take things apart and put them back together before he could walk.” Katie smiled thinking back to Paul as a baby. “What would you like to do after high school?” Katie asked Paul.

“I mean, go to college,” Paul answered a bit irritated.

“College isn’t right for everyone. It would be much better to wait and see if that is really what you want, than to pay a bunch of money to go party for a year or so,” Katie said.

Dr. Mogerman agreed with Katie, and Paul nodded sadly.

“Dr. Mogerman, have you seen any other patients who think Accutane might have had psychological effects on them?” Katie asked.

“Only one other patient in the ten years I’ve been here, but just because it’s rare doesn’t mean that it couldn’t have played a role. What do you think Paul?” Dr. Mogerman asked.

“I think it messed me up,” Paul said looking Katie in the eyes.

“Is there anything else you’d like to say to Paul?” Dr. Mogerman asked Katie.

“I just want you to know, it’s not too late to change. I think you can go to college if you want to. You can do anything you want to, but you just need to stop making bad choices and getting yourself into trouble. You have a lot of people that care about you and support you. And I am one of them,” Katie said.
Katie surprised herself with her encouraging response. She felt as if she were having an actual conversation with Paul for the first time in years.

***

In three weeks Paul was scheduled to go back to court. He sat at the dining room table with his algebra book out. He had been working hard in school to try to improve his grades. His lawyer had told him that improving his grades could help him get off of house arrest, and Paul was determined to regain his freedom.

He had a bad start to his house arrest. He had already racked up eight infractions, though about half of them were work related, where he would get out of his job a few minutes late and would miss his curfew. The other infractions were the ones that the court wouldn’t like. He had been spotted smoking right outside his house even though he wasn’t supposed to be outside. He had also been caught riding his moped to school when he was only supposed to be riding to school with his parents or on the bus. His third infraction that would get him into trouble was taking a friend home from school on his moped and stopping at a gas station on the way home for lunch. All three of these infractions would be seen as defiant disregard for his rules. If the court were to find he was not able to follow rules, he would go back to the detention center for three months before another trial.

Paul couldn’t stand the thought of the detention center, or, for that matter, more time in house arrest. He told his parents he wanted to start playing tennis again when he got off house arrest. They started to notice a change in Paul’s attitude toward them. He was finally acting like their son instead of their enemy. He stopped arguing and started
doing what he was supposed to do without an argument or even being told to do so. Like so many other times in the past, Terri and Ron’s hopes were up.

One afternoon, Terri received a call from Ms. Ivy after school praising Paul for his good behavior.

*We are going to give him from five o’clock until seven o’clock off house arrest this Saturday as a reward. This time is to be used for family activities,* Ms. Ivy explained.

Paul was excited to get out of the house. When Saturday came, he went out to eat with his family at a restaurant of his choice. Katie and her fiancé joined them for dinner. Paul seemed to be in good spirits. He was still pretty quiet around his family, but he was now talking more than usual.

*Where do you want me to take you now?* Ron asked Paul after dinner.

*I just want to go home,* Paul answered.

Ron was surprised Paul wanted to give up an hour of his reward, but he took his son home as requested. Paul grabbed his moped keys and headed for the door.

*Where are you going?* Ron asked, seeming a bit annoyed.

*I’m gonna go hang out with Terrence for a minute,* Paul said trying to brush his response off as not a big deal.

Terrence lived in Whiteley and was one of Paul’s old smoking buddies.

*Paul, I said I would take you wherever you want to go, why do you need to go there?*

*Because I want to see my friends,* Paul protested.

Terri intervened, telling Paul he was only allowed to spend the time with his family. Paul told her she was wrong and that Ms. Ivy had made that up. He then stormed up to his room and slammed the door.
If Paul regained his freedom in a couple of weeks, would he just go right back to where he was before? It didn’t seem to his parents like Paul had really understood his lesson. Ron and Terri worried what would become of their son.

***

In late April 2012, Paul walked through the door of the Youth Opportunity Center with some enthusiasm. He was nervous, but he was also excited that today he might be able to remove his ankle monitor. Katie and his mom were already seated in the waiting room with Ms. Ivy when Paul and his dad walked in. Katie was wearing a sweatshirt over a black dress top and skinny jeans. Terri had on black slacks and a suit jacket. Ron wore a suit and tie. Paul wore a light yellow long-sleeved dress shirt and blue jeans over his Michael Jordan basketball shorts. Ms. Ivy greeted Paul and asked him to sit. She was casually dressed in a blouse and blue jeans, but she reminded Katie of Dorothy from the Wizard of Oz book with her silver, glittery flats. They sparkled in the overhead fluorescent lighting as she moved her feet up and down while talking to Paul.

“Are you nervous?” Ms. Ivy asked.

“A little,” Paul replied.

“Well, I am giving my recommendation to the court that with all of these violations you stay on house arrest or spend some weekends in detention. But that is just going to be my recommendation, OK? I’m not the one that makes the final decision,” Ms. Ivy said.

“But they almost always go with your recommendations,” Paul said, looking like he might burst into tears.

“We went over this before last time we talked, Paul. I have had some teens that don’t have any violations and stay under house arrest.”
Paul nodded in understanding, but he now looked discouraged. Ms. Ivy walked out of the waiting room and Paul’s lawyer entered looking sharp in his navy blue suit. Paul wanted to explain each violation in his words to his lawyer. He handed him a notepad detailing each violation and his response to it. Paul also pulled out a document with his current grades, straight A’s. Paul’s lawyer looked shocked and then relieved. He had said Paul’s grades might be their only chance of getting him off house arrest. These grades could be Paul’s saving grace. Not only were they A’s, half of them were A+’s.

“I’m going to go make a copy of these, Paul. Wow,” the lawyer said.

He left the waiting room, while Terri and Ron sat across from Paul, prepping him for questions the judge might ask. Paul seemed annoyed but humored his parents a bit. Besides, he was too nervous now to get upset.

“All right, Paul, they’re ready for you,” Paul’s lawyer said as he popped his head into the waiting room.

Paul and his family followed their lawyer into the courtroom. Paul took his seat on the raised desk in the middle of the courtroom. Judge Speece, the stenographer, and the bailiff were already seated. The prosecutor and Paul’s parole officer sat at the same table as last time on the right side of the courtroom. Paul’s lawyer and parents sat at the table to the left of the courtroom. Katie was allowed to sit on the movie theater seats that faced the judge.

The judge started by asking Paul’s lawyer if they wanted to again ask for an extension. Paul’s lawyer declined and said they wished to proceed. Paul’s lawyer then told the judge that Paul was pleading guilty to operating a vehicle with a blood alcohol level over 0.08. The judge asked Paul if that was true.
“Yes, sir,” Paul answered.

“Has anyone promised you anything for your plea?”

“I’m sorry?”

“Paul, has your lawyer or the prosecution offered you anything for pleading guilty, like a shortened sentence?”

“No, sir,” Paul answered.

“And what is the prosecution requesting?” the judge asked, looking to the right of the courtroom.

“Your Honor, we request an extended house arrest for Paul or weekends in detention,” the woman prosecutor said.

“I get a choice?” Judge Speece joked.

“Yes, your Honor.”

“I do find…these infractions worrisome,” Judge Speece said, flipping through the papers on his desk.

“Your Honor, some of those infractions were work…,” Paul’s lawyer said, halting before finishing his sentence.

“…it’s the rest (of the infractions) that bother us,” Ms. Ivy said.

The lawyers went back and forth about the infractions. Paul’s lawyer read Paul’s explanation for each infraction, and the judge listened intently to both sides of the argument. Paul tried to speak, but Judge Speece told him to let his lawyer talk for him. Paul was visibly bothered by the prosecution’s argument. He felt as if each infraction was justified and didn’t seem as apologetic as he maybe should have.

“…you were spotted (outside your house) as the head probation officer was walking by? Sounds like a case of poor timing,” Judge Speece said with a smile.

Everyone started to laugh, and the mood lightened.
“Your Honor, Paul’s neighbor is the other juvenile court judge and his other neighbor is the head juvenile probation officer,” Paul’s lawyer explained.

“So you’re not getting away with anything,” Judge Speece joked, addressing Paul.

Everyone again started to laugh. Judge Speece asked Paul’s lawyer for his recommendation.

“I request that Paul has a ninety-day license suspension…, and for Paul to be removed from house arrest. Turn your attention to Paul’s current grades,” Paul’s lawyer said.

Judge Speece flipped through his papers to find the document Paul’s lawyer was referring to. His eyes ran down the page.

“Wow,” Judge Speece exclaimed. “That is very impressive.”

“Straight A’s. Paul is trying to prove that he can change…,” Paul’s lawyer said. “Also, your Honor, we are interested in the expungement statute. If Paul doesn’t get into anymore trouble, he is eligible for his record to be wiped clean, and tell him what you want to do, Paul,” Paul’s lawyer said.

“I want to someday be a State Police officer,” Paul said with a shrug.

The judge nodded and smiled. He asked Paul if he thought he could follow the rules from now on. Paul said he could. Judge Speece explained he was concerned about the violations but was impressed by Paul’s grades.

“Paul, I’m going to put you on probation…. For future minor violations I am allowing Ms. Ivy to put you in detention for one night. This will happen up to five times and then you will be sentenced to the full ninety-day detention. Is this clear?” Speece asked Paul.

“Yes,” Paul said, unable to hold back a slight smile.

“As long as you behave, you won’t have to ever go back to detention. And I hope to not see you again,” Judge Speece said with a smile.
Paul and his family left the courtroom with his lawyer. Paul practically ran out the door with his mom in a hurry to get his ankle monitor removed. He stuck his head back inside where Katie, Ron, and the lawyer were standing.

“Thank you,” he said to his lawyer before heading back outside.

***

Paul and Terri came home from court. Ron had gone back to work, and Katie had returned to college. Paul seemed to fly up the stairs to his bedroom.

What are you doing, Paul?

Mom, will you take me to Central? Some of the tennis guys are hitting and I want to play, Paul yelled down the stairs from his room.

Terri smiled.

Of course, I’ll take you, she shouted at Paul.

She climbed the stairs to change her clothes, filled with newfound hope. She paused as the multiple holes in the hallway caught her gaze.

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Narrative Two

Part 1: Happy Days

John Pryor ran toward his parents’ boat with a wide grin on his face. He had just come from Peggy’s house across the street, where he had to give the elderly neighbor women a hug. Since John was a small boy, he had always given Peggy a hug every time the family visited their lake house just outside of Fort Wayne, Ind.

Beth Pryor smiled as she watched her son John run toward the boat with his shirt slung across his pale shoulder. It was the first time he had felt confident enough to remove his shirt in a year. John had been plagued with systolic acne, which was not only painful but embarrassing. The acne had started when he was fourteen, and, by the time he was fifteen, his mother decided something needed to be done. He had systolic acne all over his back and could hardly move without bleeding. Now John’s skin was clear. There were still scars, but even the scars were beginning to fade. John had never complained about his acne, but his mom, Beth, could tell it bothered him. Now John was finally able to take off his shirt without having to feel self-conscious.

For a little over a year, John had tried many different medications for his acne. But the only drug that had really made a difference was Accutane. He was still taking the acne drug and was scheduled to be done just before his sixteenth birthday, which was coming up in three months. It was now late August, and the Pryors were trying to get as much lake time as they could before the season changed.

The Pryors owned a small lake house about thirty minutes from their home in Ossian, Ind. The entire family loved the lake house, but it had always seemed extra special for John. He loved to spend time there with his mom, Beth, and dad, Tim. His
older brother and sister used to come with them until they married and had kids. Now they weren’t able to come as much. John was still carefree. On this summer afternoon, Beth recalled playfully pretending to push Tim in the water as John and Tim continued to tease her about her oversized sun hat.

*John, you better get over here and work on that farmer’s tan before you bring any girls out on the boat with you,* She joked. Her voice had a rural country twang.

*You know you’re my only girl,* John said as he sat down next to his mother. Beth tilted her head back to her husband and rolled her eyes.

The three of them laughed. Tim took a swig of his beer. His smile was like his son’s. They both had prominent dimples when they smiled, which was often. Father and son had large frames. John was taller at six feet three inches tall and weighed 280 pounds. Like his father had been in high school, John was very active in all sports. And both had easygoing personalities and gentle dispositions. John was Tim’s pride and joy: the golden boy who could do no wrong.

The topic of the day was football, like usual. John’s first football game was in less than a week. Tim and John both had high hopes for the season. John had ended his freshman season as a starting linebacker and was expected to start this year, 2009, as well. Tim, Beth, and John’s older sister, Annie, attended every Norwell High School game. Annie was very close to John despite the eight-year age difference. She adored her baby brother.

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The first football game of the season couldn’t have gone better for John. After his first tackle of the season, John pulled off his helmet and looked immediately to where his
parents and sister were seated in the stands. John had a huge smile on his face. This was a Pryor tradition. Whenever John would make a tackle, he would gaze proudly to the stands, where his family cheered wildly.

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In November 2009, John had been on Accutane for four months. He only had one more month left on the acne medication. His skin had cleared up nicely, other than having chapped lips, he felt he had no problems with the medication.

But Annie was the first to notice his irritability just after his sixteenth birthday. As she visited her parents’ house she saw how John’s attitude towards things started to change. He was also different when they talked on the phone, which was quite often. He would always confide in her and tell her what was going on in his life. That hadn’t changed, but the things he was telling her were starting to worry Annie. John would tell her about his excessive drinking and partying. He even told her about jumping off the roof of a friend’s house because he was drunk and high.

Annie just chalked up the changes to teenage hormones. She knew what a handful she had been as a teenager. It was still hard, however, to watch her normally sweet brother be so rude to their parents and make such reckless decisions.

Beth didn’t notice much of a change in John, except for his weight slowly dropping. It was odd for John to be losing weight during football season. She hardly ever had leftovers from dinner, but lately she noticed John eating much less. John’s solid frame didn’t quickly show the weight loss, but Beth was growing more concerned about her son.
John opened his eyes to see the snowflakes float across the outside of his window. It was the first day of Christmas break, 2009. John had been off Accutane for a little over a month. Since October, his last month on the acne drug, he had been slowly pushing his family away.

John tried to fall back asleep, but it seemed to him like no matter how late he stayed out, he couldn’t ever sleep past ten. John looked around his room for something to wear. The piles of dirty clothes that had been present when he fell asleep were gone. His dresser sat across from him jumbled with clothes that no longer seemed to fit. He had lost almost thirty pounds in the past four months. He looked to the other side of his room. Cluttered trophies and participation ribbons for swimming, football, basketball, and track collected dust on a shelf.

John sluggishly got out of bed and opened his door to call for his mother. Beth appeared a few minutes later with a laundry basket filled with folded clothes.

*John, you need to start putting your clothes in the hamper. Then you wouldn’t run completely out. And it wouldn’t hurt you to clean up this mess, maybe run a vacuum in here or something,* Beth said while looking around the room.

*Of course you come in to nag,* John said retreating to his bed.

*And to bring you clean clothes? You’re welcome. And I looked up your final grades this morning. You are failing two classes. You have never failed a class!*

*Okay, Mom. Thanks for the laundry, now leave.*

*Excuse me?*

*It doesn’t matter. Grades don’t even mean anything.*

*Don’t you want to go to college?* Beth asked.
No, I just want to live in the woods and live off the land without any material goods, John paused, And without your nagging.

***

Annie’s worries about John increased when he called her late one Sunday night in January 2010. She answered her cell phone off the first ring to keep it from waking up her young son who was asleep in the next room.

What’s up? John asked in a paranoid voice.

Nothing, but what’s up with you? Annie asked suspiciously.

I’m on a really bad trip.

What?

Yeah. On shrooms.

John told Annie about how he had jumped out of his friends moving car. When Annie tried to voice her objection, John accused her of trying to be his mother and quickly hung up the phone. Annie sat down on the bed next to her husband and dialed her mother.

Annie wanted Beth to know what was happening to John. Beth had known John hadn’t quite been himself, but she had no idea how far off he was.

Mom, I saw something on TV the other day about the acne drug, Accutane. It said it caused depression or something. Do you think that could be happening to John? Annie asked.

Beth didn’t think an acne drug that her son had taken for only five months could be playing a significant role in his behavior change. She pushed the idea out of her head.

***
November 15, 2010, was John’s seventeenth birthday. The year had gone badly for the once upbeat teen. His grades kept sinking; he was still losing weight; he was ditching his old friends for others his parents didn’t approve of; and his relationship with his family was strained at best. No one knew what to say to John without making him angry.

John had agreed to a family dinner to celebrate his birthday, but on this evening he was running an hour late. A light blue cake with the words “Happy Birthday, John” sat on the kitchen counter. Beth pushed seventeen multiple colored candles into the cake and then carried the cake onto the kitchen counter where Tim, his mother, Mary, Annie, and John’s older brother, Matt, were seated. Beth wanted everyone to be present for John’s birthday so he could see how much he was loved.

It was now after six, and John was usually home from football practice shortly after five. Beth pulled her cell phone from her back pocket and again tried to call John, but the call went to voicemail. Eventually she decided she would drive to the high school and see if he was still there. She was worried something bad may have happened. She prayed he hadn’t had an accident. She reassured herself that he was probably just held up after practice. Just as Beth was unlocking her car, the assistant football coach, Tony, drove by. When he saw Beth, he backed up his car and rolled down the window.

*Beth Pryor! Where has John been?*

The question surprised her. The coach said he hadn’t seen John all season. Beth had no idea he wasn’t playing football and felt embarrassed by her ignorance. She just thought he hadn’t been in the games because of his grades. John had lied right to her face, saying that he was at practice everyday.
Beth went back inside and pulled Tim aside to tell him the news about John not playing football. She downplayed John’s lying to protect her husband’s feelings. She didn’t want him to feel the hurt that she felt.

When John finally got home, Beth confronted him about where he had been. He again lied about being held up at practice. Beth called his bluff and asked him why he had lied to everyone.

*Because I didn’t want to listen to your nagging,* John said.

Beth sent John to his room and told him he was not to leave the house until school the next morning. John said nothing and thumped up the stairs to his room.

John’s siblings said their goodbyes and left the house. Annie didn’t even want to speak to her brother, but because Beth insisted she quickly shouted out a “bye” from the bottom of the stairs. Tim helped Beth with the dishes, and the two went upstairs to sleep.

Beth tossed and turned in bed. She couldn’t seem to fall asleep. She got out of bed around midnight and decided to see how John was doing. She quietly opened his door to discover he wasn’t there.

Beth turned on the bedroom light and glanced around the cluttered room. She walked over to John’s desk and saw poem after poem. They were dark poems, many of them about death, which made her shudder. This wasn’t the John she knew. Her eyes moved on to the framed picture that lay flat against the desk. Beth wiped some of the dust away to reveal John sitting on the couch next to his Grandma Mary. He had a big smile, revealing his trademark dimples. There hadn’t been any smiles from her youngest son in too long. She put the framed picture back on John’s desk upright.
Beth then went to his closet and slid open the wooden door. On the floor she saw five half-gallons of cheap label spiced rum. She took the plastic half-gallon jugs and went to the bathroom where she dumped the rum in the sink.

Beth quickly returned to the bedroom. She looked at Tim, who was asleep. There was no reason to ruin both of their nights so she left him asleep as she grabbed her phone off the charger and tried again and again calling John. He didn’t answer. At 1:30 a.m. she finally got a text message: “Would you stop bothering me. I’m hanging out with a girl in her room.” Beth couldn’t believe he would send her such a disrespectful text. She started typing different texts to send back to John, but eventually just set the phone back on the bedside table and lay back down next to her husband. Though tired, she couldn’t fall asleep. Worrisome thoughts flooded her mind. Then she remembered back to the television commercials on Accutane that Annie had noticed last year.

Beth swung her legs out of bed and tiptoed downstairs. She grabbed her laptop off the charger on the kitchen desk and sat down at the dining room table. She typed in two simple words into the Google search bar. “Accutane + Depression.”

Part 3: Becoming a Delinquent

Norwell High School was located in Wells County, Ind. The school served the entire Northern Wells Community Schools district. The red brick building was attended by about 850 students. A rural school, it was surrounded by cornfields. John hated the feeling of isolation attending the high school.

He was a junior sitting in a classroom full of sophomores. He sat in the back of the classroom with white cinderblock walls and a bluish grey carpet covering the floor. There were a few motivational posters on the wall, but they hardly made up for the
classroom’s lack of character. It was hard for John to find a focal point. He had Attention Deficit Disorder (ADD) and couldn’t keep his focus on the instructor for too long. This was, however, one of his favorite teachers. Mrs. Lopez taught introductory Spanish. It wasn’t John’s favorite subject, but he liked Mrs. Lopez because she genuinely seemed to care about him.

John’s eyes wandered about the room until the girl sitting across from him caught his attention. She was one of his good friends and usually kept him informed about what was going on in class. She was slyly patting a small clear plastic bag that was hidden under her notebook. After a quiet conversation, John learned that the girl had found a small bag of marijuana in the locker bay area and wanted to know if the bag belonged to him. It wasn’t his, but John kept it anyways. He was running low on money.

Unfortunately for John, Mrs. Lopez saw the exchange and kept John after class. He explained that his classmate had found the bag in the locker bay area and wasn’t sure what was in it. She had given the bag to him to confirm her suspicions, but he promised he was going to turn it in to the office.

Mrs. Lopez believed John and let him go after confiscating the bag of marijuana. She promised that because the bag didn’t belong to him, she wouldn’t attach his name when she filled out a report in the office. John thanked Mrs. Lopez as he left the classroom.

***

By December, 2010, it had been a week since Mrs. Lopez had confiscated the marijuana from John. The teacher was true to her word, and John had almost forgotten about the drama all together. It was in his first period class that he heard the new gossip
that Mrs. Lopez had been fired. No one was quite sure why, but some students had heard it had something to do with drugs. John knew almost instantly that Mrs. Lopez was probably fired for trying to protecting him.

After what seemed like hours of algebra, the bell finally rang, and John headed out of the classroom and to his locker. He was met at his locker by the principal and a police officer who escorted him to the office.

Even though John had struggled in school the past year, he had never been in serious trouble. He had however made a few trips to the principal for attendance and tardy reasons. John never thought a police officer would show up at the school looking for him.

He followed the principal on the somewhat familiar path into the office. The police officer trailed behind. The two walked past the secretary without a word and straight into the principal’s office. The police officer waited outside.

The principal sat up straight in his large black office chair as John sat hunched over in a small seat across the desk. John had large circles under his eyes and now weighed two hundred pounds, thirty pounds less than he had a year ago.

The principal explained how Mrs. Lopez had turned in the marijuana, lying about not knowing who it belonged to. Unfortunately for John, a fellow student in the Spanish class went to the office and informed the principal about Mrs. Lopez and John. The principal told John his locker and car had already been searched and there was evidence in his car to suggest that John was linked to the marijuana. John recalled thinking, “How could they search my car without my permission.”
He stayed quiet through the entire confrontation. There was no reason to object at this point. He knew he was in trouble. The school had also contacted the local authorities because having drugs at school was a serious issue. The law required John to take a drug test. He was to be suspended immediately until he got his drug test back, at which time they would reconvene to talk about the next step. John would need to go with the police officer to take the drug test, and then have a parent pick him up at the police station.

The principal called Beth to let her know the situation. She was at the grocery store when he called. Beth kept a straight face throughout the conversation. Her voice stayed monotone. Because of recent events, she believed it was only a matter of time until her son got into serious trouble. She had also assumed he would fail the drug test because she was sure he was smoking pot regularly. His room had a peculiar pungent smell that she was told was the scent of marijuana. She knew it was John’s fault for making poor decisions, but she couldn’t help but make a sarcastic comment about the student who had turned her son in. Beth left her grocery cart in an aisle and left the store to talk privately to the principal. Minutes later, she drove home without the groceries.

***

January 2010, John sat in his house strumming his guitar. His guitar was the only thing he had really continued to be passionate about in the last year and a half. He had quit participating in everything else. He had once loved football, swimming, and basketball. John had failed the first drug test and was put on probation and house arrest. Then two weeks later he had failed the second drug test and the suspension from school turned into an expulsion. He would no longer attend Norwell High School, now he attended an alternative school at the Allen County Juvenile Center.
As he failed his drug tests, the courts kept extending his probation. He wasn’t to leave the house except to go to school. The next three months were going to be hard because John knew he couldn’t escape his mom. Her constant badgering annoyed him. She had already come up with chores he was to perform every day around the house, but he didn’t care. He wouldn’t do them.

John would defy her and play the guitar. When Beth would take the guitar away, he would just sit and write poems or drink different kinds of alcohol he had stashed under his bed. He would crack open his bedroom window and smoke more pot. At one point he took a pencil eraser to the back of his hand and kept rubbing it harder until there was a huge burn. He didn’t know why he did it. Maybe because he was drunk and bored. The burn eventually turned into a scar. He now had quite a few scars. Most of the scars came from the time that he and his friends got so drunk they decided to brand each other with cow prodders.

John had decided he needed to be drunk and/or high to deal with his parents. He wasn’t allowed to have people over, but his parents couldn’t watch him all day every day. When they weren’t home, John’s friends would come over and smoke pot or drink with him.

By the time John failed his third drug test, he was arrested and remanded to the Allen County Juvenile Center. He only stayed in the juvenile correction center for five days. After he was released he was told if he failed the test again, he would be sent back. At that point, John decided to give up smoking pot until he passed the test.
On an early Wednesday morning in March 2011, Beth was in the kitchen trying again to call John. But he wouldn’t pick up and hadn’t texted her back. It was after 1 a.m., and she was tired and her body ached. The worry that she was putting herself through had made her physically ill. She had a cold that she her body didn’t seem able to fight. Her blonde hair had grayed in the roots, and her weary eyes made her seem much older than her fifty-two years.

Beth’s cellphone lit up, and she quickly flipped it open to reveal a new voicemail. She must have been on the line trying to call John when the call came through. It was Peggy Wessle, her friend and neighbor from the lake.

Beth recognized Peggy’s voice and felt some relief.

*Listen, I am not calling to complain. I am just worried. John is here and... he doesn’t seem to be himself.*

Beth hung up the phone and dialed Peggy’s number.

Her friend explained that she had been up all night watching John and about three or four of his friends. She went through the details with Beth about how John had fell into the lake and then started the boat with its motor out of the water. When John finally had gotten the boat out into the water, Peggy said it wasn’t too long until he was swimming back to shore pulling the boat behind him. Peggy had seen John use the boat dozens of times and knew he was capable. She knew something was wrong with him

***

Weeks had passed since the lake incident. It was now April 2011, and seventeen-year old John sat in the security office of the Meijer store in Ossian, Ind. He brushed his long, dirty blond hair behind his ears, after a few minutes, he let it again fall in front of
his face as he slouched in the chair. He was wearing a Doors t-shirt with a pair of tight jeans. He now only weighed one hundred and eighty pounds, which was about one hundred pounds less than he had weighed just a year and a half earlier. Next to him sat a dark-haired boy with fair skin named Keenan. He was dressed similarly to John in tight jeans and a T-shirt, but his hair was much shorter. Both boys looked bored and unbothered.

John heard hurried footsteps approaching from outside. There was a soft knock on the door, and John watched a middle-aged security guard stand by his metal desk as Beth walked timidly into the security office. As she talked with the security guard, she made no attempt to look at either of the boys.

The security officer explained that her son had been caught stealing three five-dollar packs of Pokémon Cards. Beth’s blue eyes looked tired as she paid the fine. She recalled giving the security guard a defeated smile.

Beth was more ashamed of her son than angry. He stood up slowly from the chair towering over his five-foot-seven-inch mother. Beth thought her children were raised to respect the law. They understood right and wrong. What did I do wrong? she thought. She finally made eye contact with John. She stared into her son’s eyes and saw nothing. No regret, no guilt, no shame.

I swear you have no soul, Beth said softly to John.

You have no soul. She repeated. Where is your soul? What happened to you? 

***

It was July 2012, and John was now eighteen and a half. He should have graduated from high school with the rest of his classmates, but he was still one credit
hour short. He had planned to take a class online during the summer so he could get his diploma. But it was nearing the end of summer, and he still hadn’t registered for the course.

It was past midnight, and Beth was at her usual spot at the kitchen table cluttered with pages of information about Accutane. She was amazed at how many stories she had found that were similar to John’s. Most of the problem children had been athletes or honor students, happy kids with no history of depression and after taking Accutane they were dropping out of school or abusing alcohol or drugs. Some stories she read even ended with suicide. Beth was now very scared for her son’s future.

She was told that John was probably just being a normal rebellious teenager. The difference was that rebellious teenagers didn’t completely change their personality. Her daughter, Annie, had been rebellious. Annie would sneak out and even stole the car a few times, but she was still Annie. She had the same personality she always had, the same strengths and the same shortcomings. She would acknowledge wrongdoing or at least be upset when she got caught doing something wrong. But John was different, without remorse.

About twenty minutes later this evening, there was a knock on the door. Beth looked out the peephole to see John being held up by one of his friends. Beth opened the door just as he turned to slug his friend. The friend let go of John to block the punch, and John fell to the ground.

The friend explained to Beth that John had drunk an entire half-gallon of spiced rum by himself. This was an old friend of John’s who hadn’t hung out with him much lately because they just didn’t seem to have much in common. The boy told Beth that
John was taking all kinds of drugs and wouldn’t listen to anyone, including his old friends.

Beth had suspected what the boy now confirmed. Many times John would come home, so out of it, he would really scare her.

On this night, John looked awful. His eyes were bloodshot, and his skin was pale. Beth wanted to take him to the hospital right away, but John wouldn’t let anyone move him. Eventually he fell asleep on the couch.

Beth sat next to John all night keeping alert for any sign of labored breathing. Six hours passed, and John finally opened his eyes unaware of where he was or how he had got there.

*You need help,* she said,

*Yeah, I do,* John answered.

This was the first time that John had ever admitted he had a problem and the first time in a long time he showed any guilt or remorse. Beth pulled him into her arms and held him close.

***

On Wednesday morning, Beth pulled into the parking lot of St. Joseph’s Hospital in downtown Fort Wayne. St. Joseph’s was not the most charming hospital. Because of its downtown location, the hospital did not offer tranquil surroundings. There were a few trees planted around, but even the trees seemed a bit out of place. The hospital was very plain with red brick covering the sides and back of the hospital. The front of the hospital was comprised of gray concrete with a giant cross. Though renovations had been done to update the hospital, it still looked very much like the structure dating to 1869.
John sat in the passenger seat still looking pale and confused. Beth parked the car in the parking garage inside the hospital. She got out and walked around to the passenger side where she opened John’s door and escorted him inside. His legs were still shaky.

The interior of the hospital was plain with generic artwork on the walls and patterned chairs lining the walls for waiting patients. Beth made sure John was seated before she headed to the reception desk to explain the situation to the nurses.

Because it was early on a Wednesday morning, the emergency room was practically empty, John was taken right back to a bed where his blood alcohol level was tested immediately. The nurse then returned to check his vitals and talked with him about the dangers of alcohol. The nurse told Beth and John that the doctor would soon arrive.

A few minutes passed, and there was a knock on the door. A young male Asian doctor walked in and introduced himself as Dr. Chen. He shook both Beth and John’s hand and told John just how lucky he was to be alive. John’s blood alcohol level was 0.15, almost twelve hours since he had stopped drinking. Dr. Chen estimated that last night his blood alcohol level was probably around 0.4. This was a point where death was very possible.

Beth started to cry. John turned away from Beth and nodded at the doctor. Beth had never thought of alcohol as being John’s biggest problem, but here she was in the hospital being told that her son could have died from alcohol poisoning. The doctor wanted to keep John in the hospital for a little longer to watch for seizures or other complications. He also suggested that John be transferred to their rehabilitation facility.

Part 4: Finding John
That night John sat on the bed of his new room in the rehab facility. He thought rehab was a waste of time. He was angry that Beth had supported the doctor’s recommendations. John was determined to leave the facility and because he was eighteen, he should be able to sign himself out.

John told the nurse he wanted to leave. The nurse explained that their policy was that once he signed himself out, there was a twenty-four hour hold period. He would not be able to leave until the next night. The nurse came back with the release papers and John signed them. However, by the next night, he decided he would stay and give rehab a chance.

***

St. Joseph rehab center cared for some seriously ill patients. John met many of these people in rehab, including an elderly man named Joe. Every day John would visit Joe and play cards with the old man.

On Friday John asked Beth to come to a meeting with him. She was surprised by the request because John was normally so secretive, especially around her. He told the counselor that she could not tell Beth exactly what he had done, but she could tell her that he had tried different drugs. John talked openly about his experiences to Beth.

*I was very depressed, John said, I couldn’t deal with things anymore, and so I started drinking.*

This was the first time that John had really opened up in almost two years. Beth thought back to the research she had found on Accutane and the stories of suicide. She then thought about the stories of John jumping off of a roof and out of a moving car. She thought about when Annie told her John had taken Xanax, a depression medication, he
had bought from friends and then mixed it with alcohol, a potentially lethal combination. She wondered if his actions followed thoughts of suicide.

After the therapy session, Beth asked the counselor if John’s problems could be related to Accutane. The counselor had heard of Accutane and the potential psychological side effects, but he could not say for certain if the two were connected.

After four days, John was released from rehab. He started a three-day-a-week group therapy program that lasted three hours each day. Beth had tried counseling before for John, but he had dropped out. He had taken part in court-ordered counseling sessions, but Beth knew he hadn’t been truthful in the sessions and they hadn’t helped him. But John seemed to react differently to this therapy. He had joined Alcoholics Anonymous (AA) and was attending four meetings a week.

***

On Monday evening earlier in 2013, John watched the football game on the family television as he sat next to his dad, Tim, on the couch. He had a bowl of cereal on his lap. Tim was talking football with John, who was very quiet. John had started to put back on a little bit of weight, though he still hadn’t reached two hundred pounds. The family was happy to see him finally eating and sleeping more regularly again. They were also happy about his new attitude toward sobriety. He hadn’t had any alcohol for five months.

John was now nineteen years old. There wasn’t much for him to do in Fort Wayne anymore. All of John’s once close friends were off at college. His other friends came around less because he didn’t drink anymore. Beth had told John she had heard that his old friend, Keenan, had been kicked out of his house and was now homeless. Beth had
gone on and on about how that could have been John. He still was planning to go to college, but he still hadn’t graduated high school.

John stood up from the couch and grabbed his car keys to go to work. He had gotten a job at Office Depot, and for six months he had worked there without any problems. Most of John’s paycheck still went to buying marijuana, which Beth accepted as the lesser of two evils. She didn’t mind him smoking pot as long as he stayed away from alcohol.

John walked out the door just as Beth was walking in with groceries. He took the grocery bag from her hands and placed it on the kitchen counter. He then turned back toward the door.

Beth watched him past her. He was better, but he still wasn’t ‘her’ John. He had not apologized or shown any signs of regret for his past behavior, but he was still better than he had been. Beth was trying to hand things differently now. She still hoped for John to finish his high school degree, but she had stopped nagging him. Besides, it never did any good. She had reached the point where she realized that she needed to take care of herself, too. She could not control John, but she could control herself.

John pulled out his phone and went through his text messages. He got on his Facebook account. “Death is a release,” he typed. He entered the post and then signed out of his account. John threw his phone on the passenger seat and started his car to drive to work.

###
Narrative Three

Paul’s and John’s parents attributed much of their sons’ behavior changes to the drug Accutane. Supporters of the drug argue that Accutane has become the scapegoat for problems that teenagers develop. Perhaps parents like Ron, Terri, Beth and Tim needed something to blame, and because of Accutane’s potential depression risks, the drug became an easy target. Most patients who have taken Accutane have not developed any psychological problems. They support the drug because of its success in eliminating acne. The medical community typically sides with the supporters of Accutane in praising the drug. Paul’s dermatologist, Dr. Crider, even refers to Accutane as a “wonder drug.”

Dr. Crider owns a private dermatology practice in Muncie, Ind. For more than fifteen years he has prescribed Accutane to patients like Paul and Katie Wilkinson, who suffered from severe acne. Even though the brand-name drug is no longer produced, dermatologists and patients alike have continued to use the name Accutane when referring to the drug’s generic form, even though Hoffman-LaRoche, the manufacturer, took the original product off the market in 2009 for “business reasons.” These reasons included declining sales and loss of millions of dollars defending personal injury lawsuits. Dr. Crider still writes prescriptions for Accutane that may be substituted for its generic form. In fact, when brand name Accutane was still available, most patients actually were taking generic drug variations because of the expense of the brand name Accutane. In 2009, Accutane sales comprised only 5 percent of Isotretinoin sales when the drug was pulled.

Today generic Isotretinoin products are sold under the names Amnesteem, Claravis, and Sotret. From the beginning of the drug’s release, Hoffmann-LaRoche was
fully aware of the birth defects risk. It’s risk management program, IPledge, required by
the U.S Food and Drug Administration (FDA), IPledge makes the drug harder to
purchase for females. Women are subject to monthly blood tests to ensure they are not
pregnant. Because of the steps the company took in trying to prevent pregnant mothers
from taking the drug, very few of the personal injury lawsuits have been related to birth
defects. Instead, most of the litigation has focused on severe gastro-intestinal health
problems, such as Crohn’s disease and inflammatory bowel disease.

Dr. Crider currently has only two patients on the generic form of Accutane, which
he said is unusual. The low number, he thought, could be related to the fact that he has
gradually been transforming his practice’s focus to skin cancer. The other reason he
suspected was the possibility that the low number of generic Accutane users could be
because patients were fearful of the potential risks of the drug. In the past two years, Dr.
Crider has had about thirty patients on the drug for different periods of time. He has even
prescribed the drug four separate times for his own daughter, Kristin, who suffered from
acne. Katie Wilkinson and Dr. Crider’s daughter were good friends growing up. After
hearing about Kristin’s success story, Katie had decided to try Accutane.

Though Dr. Crider fully supports the drug, he did see a potential connection to
brief periods of depression.

“The studies are inconclusive,” he said when asked about Accutane’s possible
link to mental health problems.

He added that if a patient did have depression-related problems because of the
drug, it was rare and usually a male patient. He has had only two males who suffered
from depression and ten to twelve males who struggled with irritability. But after
discontinuing the drug, the teenagers’ symptoms disappeared within a week. According to Dr. Crider, the problems that arise typically occur toward the end of treatment.

Dr. Crider has had only one female treated with depression who continued to have problems even after stopping treatment. Dr. Crider believes the teenager girl was probably predisposed to depression and related emotional problems. “Accutane may have triggered something that was already there,” he said. “It would be a shame if the drug was pulled.”

Hoffmann-LaRoche has sold Accutane to thirteen million patients since 1982. In a news release, the company “stands behind the safety of Accutane and the rigorous risk management program, IPledge, it developed during decades of cooperation with the FDA and the American Academy of Dermatology.” Hoffmann-LaRoche has consistently downplayed the risks of suicide and depression for people taking the drug. Meanwhile, the dermatology community have long praised the merits of Accutane for the treatment of acne. Senior medical writer Daniel DeNoon describes the drug as the penicillin of dermatology.

Paul Wilkinson and John Pryor are certainly not the only two teenagers to have reported severe behavior and personality changes after taking Accutane for about six months each. Paul started taking the drug when he was fourteen until he was almost fifteen, and John started using Accutane when he was fifteen and a half until he was sixteen. Despite the praise that Accutane has received dermatologists and patients, the drug has opponents in the medical community. According to J. Douglas Bremner, M.D. in his 2005 article Is There a Link Between Accutane and Depression, there are more than 400 reported cases of depression and at least forty-four reported suicides of patients who
had taken Accutane as of 2005. Three of these cases include teenagers named Stefan Lay, Megan McKinley, and Clay Jackson.

Like Paul and John, Stefan, Megan, and Clay were all well liked and popular as children. All three were described as “happy kids.” Stefan enjoyed playing soccer, and Clay was a highly regarded baseball star with scholarship offers from colleges around the country. Megan was an aspiring actress who loved to participate in local theater. Both Megan and Clay were high school honor students. Stefan was not an honor student, but he did well in high school. The three teens were also outgoing individuals, active in extra-curricular activities.

According to Stefan’s autobiography, he started his Accutane treatment at age fifteen. Clay was sixteen and Megan nineteen when they began taking the acne drug. Megan was the only one of the three who developed a problem soon after starting treatment. She noticed that she was easily fatigued and had some memory loss, but her dermatologist assured her it had nothing to do with the drug. Stefan and Clay didn’t start developing any drug-related problems until the end of their treatments, which lasted about three to six months. Megan, like many other patients treated with Accutane, needed two treatments to clear her acne. Her symptoms of fatigue and memory loss cleared up after stopping her first treatment. It wasn’t until the end of her second treatment that she started to really struggle with depression.

Stefan, Megan, and Clay had problems relating to their longtime friends after taking Accutane. Megan, particularly, described feeling very uncomfortable around people. Clay began to distance himself from friends and family members. But he masked just how unhappy he was. The helpless feeling sent Clay over the edge, and he took his
own life in April of 1999 at the age of seventeen. His mother, Kathy, and his ten-year-old brother, Sloan, found him locked in his room with a bullet in his head. Clay had made plans to attend a livestock show the next day and had even seemed excited for his first baseball game of the season, which was less than a week away. Clay’s parents claimed they had no idea anything was wrong with their son.

Weight loss was another concern for Stefan. He lost a considerable amount of weight after taking Accutane and dropped below the appropriate weight for his height and build. Stefan complained of losing his appetite and having stomach problems when he ate certain foods. Megan suffered from similar stomach problems and admitted that it is just one more thing to add to the list of why she felt so self-conscious and awkward. Gastrointestinal problems and weight loss have also been attributed to Accutane’s side effects.

Because of the variety of her health problems, Megan struggled to be sociable after being prescribed Accutane. She stopped going to college classes and began solitary drug and alcohol use.

According to ABC-TV news writer, Robin Eisner, in her January, 2001 story *New Warnings with Accutane Use*, anecdotal reports linking psychiatric problems like Megan’s with Accutane use prompted the FDA in 2001 to pressure the drug’s manufacturer, Hoffmann-LaRoche Pharmaceuticals, to issue new warning labels about how the drug was prescribed. As a result, the drug is now supplied with a medication guide and an “informed consent” form, stating: “Some patients while taking Accutane or soon after stopping Accutane have become depressed or developed other serious mental problems.”
Despite the new warnings, the company maintains there is no scientific evidence of a link between Accutane and depression or suicide. According to Eisner, a spokesperson, says there is a “high incidence of depression and suicide among boys who may not go to a doctor.” These new consent forms are making “parents and physicians pay more attention to such problems.” According to Jackson in his 2000 article Hearing Accutane, more studies are necessary to show a link between depression and Accutane. The FDA, Hoffmann-LaRoche, and the National Institutes of Health have been in discussions to develop an appropriate scientific study to determine if there is a “relationship between the use of Accutane and any psychiatric issues,” according to a company spokesperson, who was interviewed in 2001 in an ABC news article.

Anti-social behavior, including aggressiveness, anger, and destructive actions have characterized some Accutane users. At times Stefan said he felt like he could literally kill someone. He got into fights with other boys in high school. He was kicked out of high school for fighting a number of times in his teenage years. In his 2011 book, Roaccutane: The Truth, Stefan discussed the case of Hans Peterson, who murdered his dermatologist, Dr. David Cornbleet. Roaccutane was the name Accutane went by in England when Stefan took the drug. Peterson attributed his mental problems and depression to the drug, Accutane, and blamed Cornbleet for prescribing it to him. Though Stefan wasn’t sure if Accutane was the reason Peterson reached his breaking point, he did think there was a connection between the drug and the homicide.

Stefan and Megan both had admitted that they had battled suicidal thoughts. They were prescribed antidepressants after taking Accutane. In fact, Megan had been prescribed fourteen different types of antidepressants since taking Accutane. None of
them seemed to help her. Stefan also took ADD medication to try to improve his schoolwork. His biggest problem at school was his anxiety. He would get physically ill when homework assignments were assigned and on test days. Megan had similar ongoing anxiety, and she had to drop out of college and take online classes.

One thing that continued to bother the victims of Accutane was the accusation that the problems these teenagers suffered were probably a mixture of teenage hormones and rebelliousness. Stefan talked in his book about how people would comment that he was just being dramatic and wanted attention. Other people would claim to have had many of the same problems that Stefan had without having ever taken Accutane. Stefan had trouble explaining the difference, but he maintained that he had no signs of depression before taking Accutane. He felt that randomly developing as many psychological problems as he did was unlikely.

Clay’s parents were taken by surprise and had no idea what had happened to their son until it was too late. They spent years searching for answers when, like Beth Pryor, they were alerted of the risks of Accutane by a television commercial. After further research, Clay’s parents, Kathy and Stoney, learned that their own Michigan congressman, Bart Stupak, had lost his seventeen year-old son to suicide four months after Clay took his life. On Stupak’s webpage there was an entire category labeled “Accutane.” Stupak was disseminating information he had discovered about Accutane and the Federal Drug Administration’s (FDA) 1998 warning to Hoffman-LaRoche. Stupak blamed Accutane for his son’s death and believed the death could have been prevented if there was more information about possible links to suicide on the drug’s warning label.
Stoney thought back to when he signed the permission forms for Clay to go on Accutane. He wished he had the information on depression and suicide that Stupak was calling for on the website. He was angry at the dermatologist for giving his son an outdated information packet, angry at the company for not sharing the risk of suicide, and mostly angry at himself for his son’s death. Stoney shared a poem Clay had written for his Advanced Placement English class in front of the House Reform Committee in an effort to change the way Accutane could be prescribed. Clay had written the poem just eleven days after he started his treatment of Accutane.

Life is short, pray hard.
When I think I’m alone
Is the time I’m really blessed.
Because that is the finest hour
When God and I get closer.
Even if I don’t see it right then,
God is my best friend, my closest friend.

Life is short, play hard.
I grew up being a Wildcat,
And I’ve never known how to dog it.
There has always been that fire inside
That burns rapidly out of control.
I might not be number one at the end,
But my reward is as precious as a diamond.

Life is short, and I’ve lived hard.
As I near my senior year of high school,
Many fond memories come back to me,
Loud and soft ones, pleasant and painful ones,
The memories are instilled in my heart forever.
But the real advantage I have over everybody else,
Is that I’m a Wildcat, I always have been and always will be.
My friends, teachers, coaches and memories
Will always be held close to my heart,
I may outgrow the letter jacket and even this school,
But I’ll never outgrow the memories and friendships.
There are many different Accutane support groups available online for parents and teenagers. These groups allow parents and teenagers affected by the drug to ask questions, share stories, and inform others of the potential risks associated with the drug.

One such site is AccutaneAction.com, which was established by individuals and families of individuals, who have suffered, and in many cases continue to suffer, serious side effects, including psychiatric disorders attributed and linked to the taking Accutane. The group’s objective is to gain enough attention to generate a federal investigation into Accutane’s effect
Although there is no definite link between Accutane and permanent depression or changes in personality, there are certainly strong implications based on case studies like the ones described in this project. Despite the lack of scientific proof, the Wilkinsons and the Pryors fully believe that Accutane was the cause of their sons’ dramatic and destructive changes. However, proving direct causes for psychological problems remains difficult without adequate scientific research and testing.

Literary journalism allowed the researcher to use in-depth reporting and narrative to present a realistic picture of the potential serious side effects of Accutane. The evaluators of the creative project both agreed that the literary techniques of portraying and reconstructing scenes, characterization, description, dialogue, and style made the accounts of Paul Wilkinson and John Pryor much more compelling.

This creative project had a number of strengths and weaknesses. The biggest strength of this project was the amount of time put into in-depth research and long-term interviews. The researcher had an enormous amount of information to work with that helped her develop her characters and write factually and descriptively. However, it is very difficult to write such a detailed piece under time constraints, which leads to the project’s major weaknesses. These include overly long expository passages especially in the third narrative section.

Future researchers interested in examining medical or psychological issues should keep in mind the emotional rollercoaster that they will encounter. Literary journalism not only tests one’s writing skills, but, more importantly, one’s interviewing skills and
research capabilities. Conducting in-depth interviews that explore psychological issues will involve gaining trust and developing long-term personal relationships with subjects. Such relationships can take a toll on the researcher. One must be prepared to stay as professional as possible and not be swayed by emotions.
VI. TWO OUTSIDE EVALUATORS/REVIEWS OF THE PROJECT

Mark Massé,

I have evaluated Hayley Hall’s creative project on Accutane and have the following comments.

I. Brief discussion of evaluator’s credentials (e.g., knowledge and experience of the subject area)
   - Stephen Hopkins
     - B.S. of Psychology & M.A. of Counseling from Ball State University (a CACREP-accredited university)

II. Relationship to the student and subject matter
   - Hayley and I were classmates at Ball State and co-workers at the YMCA
   - Thorough understanding of the biopsychosocial components of depression’s etiology and treatment
   - Took classes in journalism and creative writing
   - Had contact with two individuals who suffered adverse psychological side effects as a result of taking the prescription acne medication Accutane

III. Evaluation of the topic as appropriate for the creative endeavor

I deem this topic appropriate for several reasons:
   - Although there are articles in scientific journals discussing the psychological side effects of Accutane, there are not many that take a creative, narrative approach. This creative approach is easier to digest while maintaining its accuracy and informative qualities. The more captivating approach of literary journalism disseminates the information on a wider scale.
   - Pharmaceuticals are a hot topic in today’s culture. A growing percentage of people in the United States are beginning to question what affects may occur by taking the medications they are prescribed. People are hungry for the knowledge presented in this paper.
   - To effectively present the information, the author had to conduct a rigorous literature review and engage in lengthy interviews.
IV. Evaluation of the student's approach

- The narrative created by the author is compelling. The emotional struggle and pervasive complications of the medication use is clear.
- The author provides a thorough review of relevant research. It can be deduced that the author sees a link between depression/behavioral problems and Accutane. Despite this opinion being illustrated, the author provides evidence for both sides of the argument. The paper remains fair and balanced.
- The story flows well. It is easy to follow and relate to. The information is poignant and easily comprehended.

V. Evaluation of the body of the project
   a. Quality

- The stories painted by the author are vibrant and alive. The intense dialogue is a great literary touch.
- Each story has an identifiable beginning, middle, and end. The article as a whole follows this same outline.

   b. Depth of treatment

- There is an identifiable difference in knowledge of the separate accounts. This may be due to personal interactions or the depth of the interviews.
- The accounts show the effects on the family system as well as the individual who is taking the medication. I think the author does a good job of showing the connectedness of the individual to his or her environment. It is a mistake to address the issue as if it existed in a vacuum.

   c. Coverage

- The author exhausted her options regarding coverage. She utilizes interviews, lit reviews, research studies, etc. to address the topic from all angles.
- The empirical data and the personal accounts cover the scientific aspects and the more tangible, familiar human experience.

VI. Evaluation of the student's work as contributing to the field (e.g., body of knowledge)

- This paper brings a personal touch to the body of knowledge regarding Accutane and its psychological effects.
- It is a call for more research into the correlations of pharmaceuticals and their effects on the brain
- It is a plea for more trials and clinical studies to rid the marketplace of harmful drugs. It is an eye-opening account of how drugs can alter the chemistry of its users.
- Hopefully, this paper will influence parents and children alike to ask more questions and to carefully monitor behavior.

Stephen Hopkins

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Professor Mark Masse’,

I. Brief discussion of evaluator's credentials (e.g., knowledge and experience of the subject area)

I have spent more than 30 years involved in journalism as a student, a professional, and a teacher. As a high school student, I served as yearbook editor, co-founded my high school newspaper, and worked as a correspondent to my hometown newspaper, The Republic in Columbus, Ind. In college at Ball State University, I spent three years on the staff of The Ball State Daily News between 1982 and 1985 while earning an undergraduate degree in journalism. From 1983 to 1997, I worked as a part-time sports writer, then full-time general assignment reporter, then sports writer, and finally seven years as sports editor at The Muncie Evening Press and The (Muncie) Star Press. Since 1997, I have taught journalism at Delta High School north of Muncie, Ind. Among the classes I have taught are newspaper, yearbook, creative writing, telecommunications, website design, and U.S. History.

II. Relationship to the student and subject matter

I was Hayley Hall's journalism teacher at Delta High School between 2005 and 2007. She served as co-editor-in-chief of the 2007 Deltonian yearbook. I also coached Hayley in tennis at Delta between 2004 and 2007 and have employed her as a tennis instructor at my summer camps and as an assistant coach with my teams. We also have worked together as tennis instructors at the Muncie Family YMCA. Through my long friendship and association with Hayley, I am familiar with some of the characters and scenes involving the Wilkinson family in the thesis.

I have taken several graduate level courses at Ball State, including Literary Journalism taught by Dr. Mark Masse. In my journalism newspaper classes at Delta, I have occasionally taught mini-units on literary journalism, using Truman Capote's In Cold Blood as course material. As a sports writer in the mid-1990s, I once wrote a multi-part series on high school basketball referees in which I used...
literary journalism techniques, although at the time I did know it by that name.

Lastly, I am familiar with the subject matter because in 2005 I coached a top-tier tennis player whose career was derailed by severe psychological problems which her mother attributed at least in part to depression from the acne drug Accutane. I witnessed first-hand as this girl changed from a highly motivated, extremely coachable athlete into a moody, conniving, stubborn teen who sabotaged team goals and abandoned longstanding friendships as she turned to substance abuse and risky behavior. Although there is no conclusive proof that her behavior was connected to her Accutane use, the circumstantial evidence is strong. Her story is strikingly similar to the stories of the teens in Hayley's thesis. Although this student's direct experience was not included in the thesis, she may have contributed in smaller ways because she and Hayley were close teammates and this was Hayley's first exposure to the possible side effects of Accutane.

III. Evaluation of the topic as appropriate for the creative endeavor

I believe this topic is an excellent fit for literary journalism because it lends itself to anecdotal evidence more than 100 percent certainty though scientific research. Regurgitation of facts and opinions from research studies would be a cumbersome read, but the literary journalism format results in a series of dramatic scenes that ensure a compelling narrative. Her thesis is built around a key question: Did Accutane lead to a series of side effects that caused teens' lives to spiral out of control? Examination of this question is viewed through a literary lens. We sense the parents' frustration, anger, and guilt. From multiple points of view, we see how a teen's actions sometimes drive a wedge between parents and other family members who aren't always in agreement with how to handle their child's behavior. We cringe at the teenagers' lack of responsibility and destructive behavior, yet sympathize with them when we consider that they may be victims. Poignant dialogue inserts us into the kitchens and living rooms of the affected families; we almost become a character in the story who watches silently from a distance. Foreshadowing of an impending car accident, for example, delivers a blow to the pit of our stomach, but at the same time it forces us to keep turning pages in a way that a standard research paper could never accomplish.

IV. Evaluation of the student's approach

In Hayley's thesis, she refers to Roy Peter Clark's explanation that stories are used to render experience while reports are used to render information. I believe it is clear that the presented facts, opinions, and observations were obtained as a result of thorough research by Hayley. She then took the material she had cultivated from interviews and observations and carefully crafted a series of scenes that would help a complicated, controversial, and fuzzy topic come into a clearer focus for the readers. Hayley elected to present the scenes in mostly a chronological order so readers could experience the progression of the problems
in a manner similar to which the families experienced the problems. Not all scenes are chronological, however. Our first view of Paul Wilkinson and his family comes two years after his first exposure to Accutane. Through this scene, Hayley quickly illustrates how Paul's problems have affected the entire family -- even the dog, Hallie, who hides her head in the couch cushions to shield her from the dysfunction that is about to again puncture the family's peace. This foreshadowing sets the stage for a series of chronological scenes that will explain how the Wilkinson's got to this point. Movies and books frequently use this technique of "starting at the end" to whet our appetite for what is to come, and Hayley skillfully uses this format in her thesis.

A difficult challenge for Hayley is walking the fine line between letting the readers make their own judgments from the facts presented or inserting her own opinions into the story. For the most part, Hayley sticks to the facts and lets the readers reach their own conclusions. Occasionally, some weasel words creep into the thesis. An example is on page 21 when Hayley writes, "Paul Wilkinson's life became another of those disturbing cases as a result of his taking Accutane." This sentence seems to presume a definite connection between Paul's behavior and Accutane, which is a leap for the reader to accept. There are many other instances where Hayley avoids such leaps and lets the reader decide how to interpret the experience.

V. Evaluation of the body of the project

a. Quality

Each separate story has a clear development with a beginning, middle, and end. The pacing is neither hurried nor laborious, which aids in the smoothness of the writing. There are occasionally some unanswered questions, which I would like to see resolved. For example, on page 27 Paul Wilkinson is arrested on marijuana possession charges, but the resolution of the arrest is never explained. Was he fined? Sent to jail? Placed on probation? We do not find out. Instead, we are told that “he hadn’t had any problems with the law since the marijuana bust the past summer.” Perhaps more vital is this question: Did either boy’s condition improve after being removed from Accutane? Was this option explored by either family? Hayley does a superb job of utilizing literary techniques in her stories. One favorite of mine is this simile from page 28 as she describes Paul’s new Dodge Charger: “Its shiny new rims spun like a shuriken just released from the hand of a ninja warrior.” I also love the way in which Hayley vividly portrays Paul’s uncontrollable fits of anger on page 16: “Terri followed close behind. She glanced at the holes that lined the hallway near his room. She had been meaning to repair them for months now. Five holes, four the size of Paul’s fist, the biggest from his size eight shoe.” This is much more memorable for the reader as opposed to simply reporting that Paul had punched four holes in his wall and kicked another hole into it.

Attention to detail requires careful observation. During one passage when
Hayley was recounting what Terri Wilkinson found in a search of Paul’s desk drawers, Hayley relays a poignant detail: “She shut the drawer and glanced on top of the desk. Carved into the wood were two simple words: ‘Help me.’ “To me this is an example of what Roy Peter Clark calls a “gold coin” – a revealing nugget that rewards the reader and makes him eagerly continue in search of the next gold coin.

Another literary technique that Hayley uses is symbolism. On page 26, Hayley uses symbolism to show the sadness of Paul running away from home. His suitcase sits next to the couch. The sidewalk and double doors lead to complete turmoil. And continuing the “travel” symbolism, Terri’s tears resulted in this sad journey: “… mascara had left trails down her cheeks.”

b. Depth of treatment

One criticism is that the story of Paul Wilkinson is much richer in detail than the story of John Pryor. Much of this can be attributed to Hayley’s first-hand knowledge and observation of the Wilkinson case and her reliance on second-hand accounts for the Pryor story. Stronger interviews with the characters in the Pryor story were needed to bring out the same depth of feeling that the Wilkinson story attains. Nearly all of the scenes from the Wilkinson story are riveting. Some of the scenes from the Pryor story are powerful. For example, the scene on pages 52 and 53 where Beth Pryor finds out from the assistant football coach that John has been skipping practice and lying to his family is a well-developed scene. John is late for his own birthday party, forcing relatives to eat his favorite meal of chicken pot pie and birthday cake without the guest of honor. This scene helps us empathize with the parents as they desperately want to love their son even while he behaves in a manner that leaves them full of disappointment. The scene also testifies to the irrational behavior that could be a result of Accutane; John is inexplicably trying to lie about being at football practice when any logical thinker would quickly realize that he has a 100 percent chance of being caught in that lie within a couple of weeks when the first game of the season arrives and John’s family goes to the stadium to watch him as they always have in the past.

c. Coverage

Hayley’s thesis includes a significant amount of research into the links between Accutane and depression. I wanted to see a stronger explanation of “why” – why does Accutane result in depression for some users and not for most users? There may not be any easy answers for this. What does the most current research suggest? Hayley remains fair in her coverage by offsetting the claims of the Wilkinson and Pryor families with responses from Hoffman-LaRoche, the manufacturer of Accutane. She reports on page 72 that “most patients that have taken Accutane have not developed any psychological problems and thus have tremendous support for the drug because of its success in eliminating acne.” She notes that supporters of the drug see it as being a “scapegoat” for common teen
rebellion. On page 74, she even quotes Paul’s dermatologist as saying, “It would be a shame if the drug were pulled.” These excerpts are evidence that Hayley has shown balance toward all sides of the controversial issue, and for that she should be praised.

VI. Evaluation of the student’s work as contributing to the field (e.g., body of knowledge)

The literary techniques demonstrated in this paper along with the controversial topic covered contribute to the field of literary journalism. Indeed, I think this is an excellent example of a topic that is best covered in this manner. There are no clear answers, no definite conclusions. By using the non-fiction stories of Paul Wilkinson and John Pryor, Hayley enlightens the readers that this is an issue that is impacting real teenagers and real families. Those families could live on your block. This eye-opening account of Accutane’s potential link to depression contributes to the fields of dermatology and psychology by dramatically pointing out the need for more scientific research. Many of us fear that the “little guy” has no chance to win against “big money” pharmaceutical companies. A story like this with emotional appeal has the best chance of leading to more public attention that could someday result in more concrete answers.

Tim Cleland
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Prof. Mark Masse
Department of Journalism
Ball State University, Muncie, IN 47306

I have evaluated Hayley Hall’s creative project on Accutane and have the following comments.

I. Brief discussion of evaluator’s credentials (e.g., knowledge and experience of the subject area)
   - B.S. of Psychology & M.A. of Counseling from Ball State University (a CACREP-accredited university)

II. Relationship to the student and subject matter
   - Hayley and I were classmates at Ball State and co-workers at the YMCA
   - Thorough understanding of the biopsychosocial components of depression’s etiology and treatment
   - Took classes in journalism and creative writing
   - Had contact with two individuals who suffered adverse psychological side effects as a result of taking the prescription acne medication Accutane

III. Evaluation of the topic as appropriate for the creative endeavor
   - I deem this topic appropriate for several reasons:
     - Although there are articles in scientific journals discussing the psychological side effects of Accutane, there are not many that take a creative, narrative approach. This creative approach is easier to digest while maintaining its accuracy and informative qualities. The more captivating approach of literary journalism disseminates the information on a wider scale.
     - Pharmaceuticals are a hot topic in today’s culture. A growing percentage of people in the United States are beginning to question what affects may occur by taking the medications they are prescribed. People are hungry for the knowledge presented in this paper.
     - To effectively present the information, the author had to conduct a rigorous literature review and engage in lengthy interviews.

IV. Evaluation of the student’s approach
   - The narrative created by the author is compelling. The emotional struggle and pervasive complications of the medication use is clear.
   - The author provides a thorough review of relevant research. It can be deduced that the author sees a link between depression/behavioral problems and Accutane. Despite this opinion being illustrated, the author
- The story flows well. It is easy to follow and relate to. The information is poignant and easily comprehended.

V. Evaluation of the body of the project
   a. Quality
      - The stories painted by the author are vibrant and alive. The intense dialogue is a great literary touch.
      - Each story has an identifiable beginning, middle, and end. The article as a whole follows this same outline.
   
   b. Depth of treatment
      - There is an identifiable difference in knowledge of the separate accounts. This may be due to personal interactions or the depth of the interviews.
      - The accounts show the effects on the family system as well as the individual who is taking the medication. I think the author does a good job of showing the connectedness of the individual to his or her environment. It is a mistake to address the issue as if it existed in a vacuum.
   
   c. Coverage
      - The author exhausted her options regarding coverage. She utilized interviews, lit reviews, research studies, etc to address the topic from all angles.
      - The empirical data and the personal accounts cover the scientific aspects and the more tangible, familiar human experience.

VI. Evaluation of the student’s work as contributing to the field (e.g., body of knowledge)
   - This paper brings a personal touch to the body of knowledge regarding Accutane and its psychological effects.
   - It is a call for more research into the correlations of pharmaceuticals and their effects on the brain.
   - It is a plea for more trials and clinical studies to rid the marketplace of harmful drugs. It is an eye-opening account of how drugs can alter the chemistry of its users.
   - Hopefully, this paper will influence parents and children alike to ask more questions and to carefully monitor behavior.

Stephen Hopkins
Professor Mark Masse,

I. Brief discussion of evaluator's credentials (e.g., knowledge and experience of the subject area)

I have spent more than 30 years involved in journalism as a student, a professional, and a teacher. As a high school student, I served as yearbook editor, co-founded my high school newspaper, and worked as a correspondent to my hometown newspaper, The Republic in Columbus, Ind. In college at Ball State University, I spent three years on the staff of The Ball State Daily News between 1982 and 1985 while earning an undergraduate degree in journalism. From 1985 to 1997, I worked as a part-time sports writer, then full-time general assignment reporter, then sports writer, and finally seven years as sports editor at The Muncie Evening Press and The (Muncie) Star Press. Since 1997, I have taught journalism at Delta High School north of Muncie, Ind. Among the classes I have taught are newspaper, yearbook, creative writing, telecommunications, website design, and U.S. History.

II. Relationship to the student and subject matter

I was Hayley Hall's journalism teacher at Delta High School between 2005 and 2007. She served as co-editor-in-chief of the 2007 Deltonian yearbook. I also coached Hayley in tennis at Delta between 2004 and 2007 and have employed her as a tennis instructor at my summer camps and as an assistant coach with my teams. We also have worked together as tennis instructors at the Muncie Family YMCA. Through my long friendship and association with Hayley, I am familiar with some of the characters and scenes involving the Wilkinson family in the thesis.

I have taken several graduate level courses at Ball State, including Literary Journalism taught by Dr. Mark Masse. In my journalism newspaper classes at Delta, I have occasionally taught mini-units on literary journalism, using Truman Capote's In Cold Blood as course material. As a sports writer in the mid-1990s, I once wrote a multipart series on high school basketball referees in which I used literary journalism techniques, although at the time I did know it by that name.

Lastly, I am familiar with the subject matter because in 2005 I coached a top-tier tennis player whose career was derailed by severe psychological problems which her mother attributed at least in part to depression from the acne drug Accutane. I witnessed firsthand as this girl changed from a highly motivated, extremely coachable athlete into a moody, conniving, stubborn teen who sabotaged team goals and abandoned longstanding friendships as she turned to substance abuse and risky behavior. Although there is no conclusive proof that her behavior was connected to her Accutane use, the circumstantial evidence is strong. Her story is strikingly similar to the stories of the teens in Hayley's thesis. Although this student's direct experience was not included in the thesis, she may have contributed in smaller ways because she and Hayley were close teammates and this was Hayley's first exposure to the possible side effects of Accutane.

III. Evaluation of the topic as appropriate for the creative endeavor
I believe this topic is an excellent fit for literary journalism because it lends itself to anecdotal evidence more than 100 percent certainty though scientific research. Regurgitation of facts and opinions from research studies would be a cumbersome read, but the literary journalism format results in a series of dramatic scenes that ensure a compelling narrative. Her thesis is built around a key question: Did Accutane lead to a series of side effects that caused teens' lives to spiral out of control? Examination of this question is viewed through a literary lens. We sense the parents' frustration, anger, and guilt. From multiple points of view, we see how a teen's actions sometimes drive a wedge between parents and other family members who aren't always in agreement with how to handle their child's behavior. We cringe at the teenagers' lack of responsibility and destructive behavior, yet sympathize with them when we consider that they may be victims. Poignant dialogue inserts us into the kitchens and living rooms of the affected families; we almost become a character in the story who watches silently from a distance. Foreshadowing of an impending car accident, for example, delivers a blow to the pit of our stomach, but at the same time it forces us to keep turning pages in a way that a standard research paper could never accomplish.

IV. Evaluation of the student's approach

In Hayley's thesis, she refers to Roy Peter Clark's explanation that stories are used to render experience while reports are used to render information. I believe it is clear that the presented facts, opinions, and observations were obtained as a result of thorough research by Hayley. She then took the material she had cultivated from interviews and observations and carefully crafted a series of scenes that would help a complicated, controversial, and fuzzy topic come into a clearer focus for the readers. Hayley elected to present the scenes in mostly a chronological order so readers could experience the progression of the problems in a manner similar to which the families experienced the problems. Not all scenes are chronological, however. Our first view of Paul Wilkinson and his family comes two years after his first exposure to Accutane. Through this scene, Hayley quickly illustrates how Paul's problems have affected the entire family -- even the dog, Halle, who hides her head in the couch cushions to shield her from the dysfunction that is about to again puncture the family's peace. This foreshadowing sets the stage for a series of chronological scenes that will explain how the Wilkinsons got to this point. Movies and books frequently use this technique of "starting at the end" to whet our appetite for what is to come, and Hayley skillfully uses this format in her thesis.

A difficult challenge for Hayley is walking the fine line between letting the readers make their own judgments from the facts presented or inserting her own opinions into the story. For the most part, Hayley sticks to the facts and lets the readers reach their own conclusions. Occasionally, some veasel words creep into the thesis. An example is on page 21 when Hayley writes, "Paul Wilkinson's life became another of those disturbing cases as a result of his taking Accutane." This sentence seems to presume a definite connection between Paul's behavior and Accutane, which is a leap for the reader to accept. There are many other instances where Hayley avoids such leaps and lets the reader decide how to interpret the experience.

V. Evaluation of the body of the project
a. Quality

Each separate story has a clear development with a beginning, middle, and end. The pacing is neither hurried nor laborious, which aids in the smoothness of the writing. There are occasionally some unanswered questions, which I would like to see resolved. For example, on page 27 Paul Wilkinson is arrested on marijuana possession charges, but the resolution of the arrest is never explained. Was he fined? Sent to jail? Placed on probation? We do not find out. Instead, we are told that “he hadn’t had any problems with the law since the marijuana bust the past summer.” Perhaps more vital is this question. Did either boy’s condition improve after being removed from Accutane? Was this option explored by either family? Hayley does a superb job of utilizing literary techniques in her stories. One favorite of mine is this simile from page 28 as she describes Paul’s new Dodge Charger: “Its shinynew rims spun like a shuriken just released from the hand of a ninja warrior.” I also love the way in which Hayley vividly portrays Paul’s uncontrollable fits of anger on page 16: “Terri followed close behind. She glanced at the holes that lined the hallway near his room. She had been meaning to repair them for months now. Five holes, four the size of Paul’s fist, the biggest from his size eight shoe.” This is much more memorable for the reader as opposed to simply reporting that Paul had punched four holes in his wall and kicked another hole into it.

Attention to detail requires careful observation. During one passage when Hayley was recounting what Terri Wilkinson found in a search of Paul’s desk drawers, Hayley relays a poignant detail: “She shut the drawer and glanced on top of the desk. Carved into the wood were two simple words: ‘Help me.’ “ To me this is an example of what Roy Peter Clark calls a “gold coin” – a revealing nugget that rewards the reader and makes him eagerly continue in search of the next gold coin.

Another literary technique that Hayley uses is symbolism. On page 26, Hayley uses symbolism to show the sadness of Paul running away from home. His suitcase sits next to the couch. The sidewalk and double doors lead to complete turmoil. And continuing the “travel” symbolism, Terri’s tears resulted in this sad journey: “...mascara had left trails down her checks.”

b. Depth of treatment

One criticism is that the story of Paul Wilkinson is much richer in detail than the story of John Pryor. Much of this can be attributed to Hayley’s first-hand knowledge and observation of the Wilkinson case and her reliance on second-hand accounts for the Pryor story. Stronger interviews with the characters in the Pryor story were needed to bring out the same depth of feeling that the Wilkinson story attains. Nearly all of the scenes from the Wilkinson story are riveting. Some of the scenes from the Pryor story are powerful. For example, the scene on pages 52 and 53 where Beth Pryor finds out from the assistant football coach that John has been skipping practice and lying to his family is a well-developed scene. John is late for his own birthday party, forcing relatives to eat his favorite meal of chicken pot pie and birthday cake without the guest of honor. This scene helps us empathize with the parents as they desperately want to love their son even
while he behaves in a manner that leaves them full of disappointment. The scene also testifies to the irrational behavior that could be a result of Accutane; John is inexplicably trying to lie about being at football practice when any logical thinker would quickly realize that he has a 100 percent chance of being caught in that lie within a couple of weeks when the first game of the season arrives and John’s family goes to the stadium to watch him as they always have in the past.

e. Coverage

Hayley’s thesis includes a significant amount of research into the links between Accutane and depression. I wanted to see a stronger explanation of “why” – why does Accutane result in depression for some users and not for most users? There may not be any easy answers for this. What does the most current research suggest? Hayley remains fair in her coverage by offsetting the claims of the Wilkinson and Pryor families with responses from Hoffman-LaRoche, the manufacturer of Accutane. She reports on page 72 that “most patients that have taken Accutane have not developed any psychological problems and thus have tremendous support for the drug because of its success in eliminating acne.” She notes that supporters of the drug see it as being a “scapegoat” for common teen rebellion. On page 74, she even quotes Paul’s dermatologist as saying, “It would be a shame if the drug were pulled.” These excerpts are evidence that Hayley has shown balance toward all sides of the controversial issue, and for that she should be praised.

VI. Evaluation of the student’s work as contributing to the field (e.g., body of knowledge)

The literary techniques demonstrated in this paper along with the controversial topic covered contribute to the field of literary journalism. Indeed, I think this is an excellent example of a topic that is best covered in this manner. There are no clear answers, no definite conclusions. By using the non-fiction stories of Paul Wilkinson and John Pryor, Hayley enlightens the readers that this is an issue that is impacting real teenagers and real families. Those families could live on your block. This eye-opening account of Accutane’s potential link to depression contributes to the fields of dermatology and psychology by dramatically pointing out the need for more scientific research. Many of us fear that the “little guy” has no chance to win against “big money” pharmaceutical companies. A story like this with emotional appeal has the best chance of leading to more public attention that could someday result in more concrete answers.

Tim Cleland