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The Troubled Adolescent: Teaching Judith Guest's *Ordinary People*

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We see it in headlines: "Teen Suicides Rock Texas Town." We see it on television screens: "Hear Me Cry" and "Silence of the Heart." Teenage suicides have grown to frightening proportions. According to a recent study, the suicide rate of those fifteen to twenty-four years of age has tripled in the last thirty years; at least thirteen children take their own lives each day. If we, as teachers of literature, feel a responsibility to deal with relevant social issues, then we are obliged to address ourselves and our students to this one. Judith Guest has given us a fine novel which allows us to explore with students this grim problem of teen suicide and its searing effects on family and friends.

Ordinary People (N.Y., Ballantine Books, 1980) presents a protagonist, Conrad Jarrett, who has made an unsuccessful attempt on his own life. We meet him shortly after his return from an eight-month stay in a psychiatric hospital; he is trying to piece together the fragments of his life. In the novel he struggles to come to terms with himself, with his family, and with his peers. Returning to Lake Forest High School to repeat his junior year, he progresses, often stumbling, from a guilt-ridden, tormented boy to a young man who has gained considerable control of the directions of his life. We are aware that his struggle has not ended, but we also know that Conrad Jarrett is going to make it.

At the beginning Conrad needs "a reason to get up in the morning" (p. 1) but the details of the morning ritual overwhelm him and "the small seed of despair cracks open and sends experimental tendrils upward to the fragile skin of calm holding his together" (p. 2). When he left the hospital, he had felt that there were guiding principles for getting his life in order, but "the details have somehow been lost. If there ever were any" (p. 5). He tells himself that his "sense of identity seems to have been misplaced. No. Wrong. You don't lose what you never had" (p. 15). He tells Dr. Berger that he'd "like to be more control" (p. 39) and begins to

look forward to his visits with Berger because each one is "a chance to feel better twice a week" (p. 52) although he is not yet aware of any carryover. At night Conrad cannot sleep until "he has reviewed the day, counted up his losses. He must learn more control" (p. 69). But Conrad does make progress. Remembering a skiing incident with his brother Buck, now dead in an accident for which Conrad blames himself, he waits "for the familiar arrow of pain. Only there is none...it is a first" (p. 96). And so Conrad begins to move forward to recovery and acceptance of himself.

With his parents Conrad is cautious, tentative. His father Cal is a tender, sensitive man who feels responsible for his son's attempt at suicide and is overly solicitous of his son. He, too, is floundering: "I'm the kind of man who—hasn't the least idea what kind of man I am" (p. 47). But he desperately wants to believe that "Things do seem better, more relaxed, just since Thanksgiving" (p. 85). He grows more concerned, however, at his wife's and Conrad's inability to talk about what has happened and is happening in their lives; they are, after all, "ordinary people...for a time they had entered the world of the newspaper statistic...but that was over" (p. 87). At the same time, he feels a widening gulf between Beth and himself, and he is "obscurely frightened" (p. 132). He sees his wife and son as too much alike; for both "all healing is done from outside in" (p. 115). We see, however, that Beth is far more private than Conrad. Unable to accept Cal's concern for Conrad and refusing to respond to her son's need of her, she leaves them. Outside, Beth gives the appearance of control and order, but inside "is not order but chaos" (p. 235). Conrad tells Berger helplessly that "my mother and I do not connect" (p. 90). By the novel's conclusion, Cal and Conrad have established a sound relationship, and Conrad vows that, when his mother returns from abroad, he will "see her...nothing important...because she knows it all, knows just as he does that it is love ... that keeps them apart, even as it holds them somehow together" (p. 245).

Conrad's caution extends to his relationships with friends from "before." Lazenby, his

closest friend, is puzzled and then angered by Conrad's seeming aloofness. Conrad's attempt to re-establish contact with Karen, another patient at the hospital is rebuffed and he is set back considerably when he learns that she has killed herself. He is drawn to a new girl in school, Jeannine, but he realizes he has never really had a date. They begin a tentative relationship; he begins to feel "so strong, so needed" (p. 185) and, when their love is consummated, "he is in touch for good, with hope, with himself, no matter what" (p. 232). The novel ends with Lagenby and Conrad going off to play golf, their friendship renewed and strengthened.

Conrad Jarret is a protagonist with whom students can identify. His problems with school work, sports, sexuality, and priorities are the problems of all teens. His isolation, while stemming primarily from his attempted suicide, is treated in such a way that students understand him.

Teenage Suicide

I begin this work with a full period discussion of teenage suicide. I ask students about preconceived notions they have about the topic. Some of them may well have had experience, either through friends or hearsay, that they are eager to talk about. We discuss the myths:

People who talk about suicide don't commit suicide.

Suicide happens without warning.

Suicidal people are fully intent on dying.

Once a person is suicidal, s/he is suicidal forever.

Improvement following a suicidal crisis means the risk is over.

Suicide strikes much more often among the rich.

Suicide occurs almost exclusively among the poor.

Suicide is inherited or "runs in the family."

All suicidal individuals are mentally ill, and suicide always is the act of a psychotic person.

We then discuss the truths:

Of any ten people who kill themselves, eight have given definite warnings of their in-

tentions.

Studies reveal that the suicidal person gives many clues and warnings regarding the intention.

Most suicidal people are undecided about living or dying, and they "gamble with death," leaving it to others to save them.

Persons who wish to kill themselves are "suicidal" for only a limited period of time.

Most suicides occur within about three months following the beginning of "improvement," when the individual has the energy to put morbid thoughts and feelings into effect.

Suicide is neither the rich man's disease nor the poor man's curse. The act is represented proportionately among all levels of society. Suicide does not run in families. It is an individual pattern.

Studies of hundreds of genuine suicide notes indicate that, although the person is unhappy, s/he is not necessarily mentally ill.

This initial discussion serves as a good introduction to the study of **Ordinary People**. Students begin their reading reminded anew that forces both from within and without affect adolescent behavior, that parents and other adults are too frequently unaware of motivations for adolescent behavior, and that reaction to peer pressure can influence adolescent decisions.

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