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See inside for a special pull-out section on Mental Health

A Connecticut College Tradition since 1976

THE COLLEGE VOICE

Volume XIX, Number 11

Ad Fontes

November 21, 1995

A cycle of deterioration:

Speaker says black and Latino communities facing adversity should look within for solution

BY EDDIE PARK
The College Voice

Marta Moreno Vega gave Conn her take on the issues facing people of color today, saying, among other things, that they are not much different than they were 30 years ago.

Moreno Vega, executive director of the Caribbean Cultural Centre, began her keynote address to the Latino Intercollegiate Conference with an autobiographical vignette of her life in New York, where she grew up as the child of Puerto Rican immigrants. Her parents came to America in search of a life free from the racism they left behind in their homeland, but instead found that the land of opportunity had only disillusionment to offer.

When Moreno Vega completed her secondary education, she came to realize that the high school she had attended was severely inferior in the Art and Music departments. She realized then that America had two dis-

tinct educational systems; one for the black and Latino students, and the other for everyone else.

Eventually earning a scholarship to New York University, Moreno Vega was again disappointed. She was indignant that, in one course, instruction in African art and music occupied all of one day, whereas the European artists and musicians received more attention. "In fact," she said, "all the students were being miseducated," by receiving only "a skewed and limited history, a skewed and limited experience." Moreno Vega said she was angry about the propagation of "colonial thought," and added, "European dominance and hegemony continues in 1995," prompting nods and agreement from many members of the audience.

After sketching out her background, she went on to speak about American society, touching on the issues of multiculturalism and social disparity. One percent of the popu-

See Latino Awareness Speaker, p. 2



Pamela Robbins/The College Voice

Conn Review hopes to start in the spring

New student publication would provide course evaluations

BY JENNY BARRON
News Editor

According to its constitution, *The Conn Review* would provide course evaluations to "aid students in making well-informed curricular decisions." Pending the passage of the constitution by SGA, the student-run course guide will begin publication next semester for distribution in the

fall.

"This is something that will create cohesion between faculty and students," said senior Lou Carter, president and founder of *The Conn Review*.

The Conn Review will be published during the pre-registration period of each semester.

According to Lynn Brooks, vice president for finance, the administration will fund the organization in the form of a loan for the first two semesters of publication.

"Then we will evaluate it to see what it's like and what [the] faculty and student response is," said Brooks, explaining that they will use this response to decide whether or not to fund *The Conn Review* for two additional semesters. Carter stressed that funding from the administration is contingent upon the organization's participation in the finance process for student clubs and organizations. That process limits funding for first-year clubs to \$400, and second-year clubs to \$600; beyond the second year there is no cap for club funding.

"The goal is to see if this makes sense," said Brooks. Once *The Conn Review* is past its first two budget cycles, funding from the administration will cease. He added that this is similar to what

the administration has done in the past to help new clubs get on their feet before they can be sufficiently funded by the finance process.

The process of compiling the information to be included in the publication will begin with the *The Conn Review* staff's distribution of separate questionnaires to both students and professors. Professors will distribute student questionnaires in class at the end of the semester. The students' questionnaires will be completed in class and collected by the professors. Both questionnaires, plus course syllabi, reading lists, and all additional materials will be sent back to the staff via campus mail. Once the information has been gathered, questionnaires will be scanned, recorded, and transferred into a bar graph format.

At that point in the process, the writing staff will create summaries of both professors' and students' responses which will be edited and reviewed by copy editors, the co-editors-in-chief, and the entire Executive Board.

The organization will be broken down into three sections: the Executive Board, the Advisory Board, and the Editorial Board. The Executive Board will consist of the President, Vice

See Conn Review, p. 2

"Alienation"



Sharyn Miskovitz/The College Voice

Mental health disorders can leave us feeling lonely and overwhelmed. For more information, see the pull-out section.

Conn Review

Continued from page 1.

President, Editor(s)-in-Chief, two Copy Editors, two Production Editors, and an Advertising/Public Relations Manager.

The Advisory Board will be made up of two faculty members, two students and two alumni, all selected by the Executive Board. As of last Sunday, Jay Levin '73, a New London attorney, lobbyist, and former Mayor of the City of New London, had agreed to join the Advisory Board. Another is expected to be announced later this week.

The Editorial Board will be led by the Editor(s)-in-Chief and consist of the Copy Editors, Production Editors, writers, and staff of the publication.

Elections for all of the above positions

will take place in the last week of April for the following year. Membership on the staff will be open to all matriculated students, and non-voting membership will be open to all faculty, staff, administration, and their families.

In addition to the approximately 48 student members of the new organization, 890 students recently signed a petition supporting its establishment which was circulated for four days last week.

"I was proud to see that people are genuinely concerned about their academics by voting for this petition," said Carter. "The 890 signatures have spoken to the college, to the administration, and to the faculty."

Access phone receivers stolen

BY JENNY BARRON
News Editor

On Saturday morning, between the hours of 2:30 a.m. and 7:00 a.m., the receivers for the dorm access phones were stolen from approximately ten houses.

According to the bulletin broadcast message left by Mark Hoffman, director of student activities, the thefts rep-

resent a definite security problem for the campus; if students have any information regarding the incident, they are asked to contact either Campus Safety or the Office of Student Life.

In the meantime, the access phones may still be used. To gain access to a dorm, hold down the receiver for 5-10 seconds, then dial in the access codes as usual.

This Week In SGA...

Alex Cote, vice president of SGA, said that he attended the Plex renovation meeting where he discussed ideas with the project architects. He added that Lucas Held, associate director of college relations for media affairs, will post the plans in visible locations around campus once they are finalized.

Cote also said that the Finance Committee would begin work on revamping the finance process. They will be calling other schools to get ideas for the reworking. Cote added that the committee would soon be starting their annual process of auditing clubs.

Ted Svehlik, SAC chair, said the theme for this year's winter formal would be announced after Thanksgiving break.

Ryan Eschauzier, president of the junior class, reminded the Assembly that after eight parking tickets, students will face having their cars banned from campus.

Daniel Horwood, senator of Hamilton, announced that the Assembly would be discussing possible changes, brought by himself, KB Senator Damon Krieger, and Freeman Senator Maya Perry, to the college's racial harassment policy at the meeting following break.

Svehlik and other members of the Alcohol Policy Review Committee (APRC) presented last year's alcohol use study to the Assembly. (For an in-depth report on this study please see the article on page 1 of the September 26, 1995 issue of *The College Voice*.)

The committee made the following recommendations given the results of the survey: the establishment of more staple events on campus, an increase of new activities, increased community involvement including free non-alcoholic drinks for the designated driver

at local bars, improvements to the campus bar, more faculty, staff, alumni, administration, and trustee involvement in the issue, responsible advertising on campus, and making sure that food is available 24 hours a day so that people can sober up.

"I would be wrong if I told you Conn's [current] alcohol policy is perfect," said Svehlik. "I think there's always room for change."

John Biancur, class of 1997 and APRC chair, said that they are working to establish a designated driving program, possibly getting the Yellow Cab Company to take intoxicated students back to Conn free of charge, and getting a big-name speaker such as Betty Ford, Natalie Cole, or Kitty Dukakis to come and address the issue of responsible drinking.

A proposal was unanimously passed establishing a Physical Plant Committee of SGA. The committee will, among other things, serve as an outlet for currently misdirected action items, concerns about lighting, and dorm upkeep.

A senator, house governor, house fellow, environmental coordinator, and two students at large will serve on the new committee.

Ryan Eschauzier, junior class president and sponsor of the proposal, said he hopes to get the committee started as soon as possible.

On a separate note, Eschauzier added that the junior class would be having a Paul's Pasta dinner in Crow's Nest on November 30.

Craig McClure, senator of Earth House, announced that they are looking for co-sponsors for this year's Earth Day in April. McClure said that they have booked Ani DiFranco and are trying to get enough money together to pay for the event.

Latino Awareness Speaker

Continued from page 1.

lation owns 40 percent of the wealth, said Moreno Vega, and that mostly white segment is growing faster than ever, while minorities are being left behind due to federal and state budget and program cuts.

Moreover, she said, statistics show that the numbers of black and Latino men who go to jail are steadily increasing, while the number graduating from high school are decreasing. In fact, not only are there more black youths in prison than in college, but fewer black students are graduating from college today than did ten years ago, when the population was much smaller.

Correctional institutions take these criminals, and in Moreno Vega's opinion, put them into an increasingly privatized goal system where minorities work in what constitutes virtual slave labor. She noted that such treatment of people of color by the government is similar to the institution of slavery which ended over one hundred years ago.

With the establishment of the North American Free Trade Agreement (NAFTA), Mexicans are paid half as much as Americans for identical work, a fact that Moreno Vega sees as evidentiary of the continuing marginalization of Latinos in public policy. She believes that it is critical for minorities to "claim a space in history," and advocates the continuation

of federal affirmative action policies, which she sees as a "move to equalize the playing fields."

Moreno Vega then said that black and Latino communities are deteriorating by the minute and pointed out that a "healthy community can replicate itself." Thirty-year-old paradigms of the isolation of minority communities and discrimination against their members are now recurring in American society, she warned. The solution, she offered, is for individuals within these communities to try to bring about change.

In conclusion, Moreno Vega explored the development of the relationship between college students and their home communities once they leave for school. Should these students dis-

associate themselves and continue to seek success elsewhere? Or should they continue to be active (within the community) on a different level? The continuing connection between economically-disadvantaged youths who become successful is often viewed as critical, since those who go to college may be able to impact younger friends and relatives as role models.

But how can one have the largest impact?

Marta Moreno Vega believes that one's answers to these questions determines the amount of service one will do for the community.



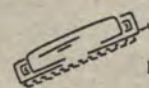
Evan Coppola/Photography Editor

Moreno Vega was the keynote speaker for the Latino Conference

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Health in the 90s:

First Response: Do we need it on our campus?

BY MICHELLE RONAYNE
Editor in Chief

Accidents can and do happen here on campus. The question is how safe are you and how easy would it be for you to receive care if an accident were to happen to you.

There is no trained first response unit on campus. At colleges, larger than ours, Emergency Medical Service (EMS) units are becoming more common. According to Brett Goldstein, trained MRT and student director of the L&M internship program, Villanova recently held its second annual collegiate EMS convention. "It is more common at big schools. MIT has their own ambulance unit," said Goldstein.

In the event of an emergency at Conn one is instructed to call 111. That would connect you to campus safety. Many times they are the most likely to be the first on a scene of an accident, managing the situation until help arrives. How much training does campus safety have? "They are trained in CPR and First Aid," said Jim Miner, director of campus safety. This requires six to eight hours of training.

According to Evan Coppola, an EMT in Massachusetts and a

member of the EMS internship program at Conn, the training that campus safety receives is far from adequate. "There may be exceptions but as far as I know the college requires campus safety to be trained in CPR and Red Cross First Aid," said Coppola.

Coppola believes that the training Campus Safety receives prepares them to deal with basic bleeding, put on splints and basically wait for further help to arrive. "This is inadequate for anyone with a serious injury," said Coppola.

"Campus safety's equipment is poor. They have a basic first aid kit with gauze pads and nothing for any major bleeding or trauma," said Coppola. "But in fairness to the officers they act well in accordance with their training."

In Connecticut R-1's must have MRT training or above. In order to be an MRT, one must have 60 hours of training and to be an EMT have 120 hours of training. The primary function of an R-1 is to assess the situation so when the ambulance or paramedics arrive they do not have to.

According to Goldstein, a paramedic that came to campus was surprised that we did not

have an R-1 unit on campus. Every town in Connecticut has an R-1 unit—first response, an R-2 unit—ambulance response and R-5 paramedic response.

In local towns trained R-1's carry around pagers and 911 dispatch will send out a tone and those who are trained can respond. "EMS is about time," said Goldstein.

According to Goldstein, in the case of cardiac arrest CPR must be administered within four minutes or brain damage could occur. The sooner CPR is administered the better.

The same is true for a trauma situations. According to Goldstein, when someone is losing a decent amount of blood, close to two liters, they could be dead unless someone can administer fluids quickly.

Sam Vineyard's accident was offered by Goldstein as an example of a case where a first response unit would have been helpful. Vineyard fell from his third story room and had serious injuries. "The most important issues in a situation like that are the ABC's: airway, breathing and circulation," said Goldstein. He added issues like a c-spine need to be accounted for and in the case of a c-spine injury his head would need to

be maintained. "Vineyard also had a fractured pelvis, which could have meant a ruptured artery that could bleed out in a matter of minutes. An R-1 one the scene could be calling the paramedics, taking precautions and assessing the situation for the paramedic," said Goldstein.

He added, "Trauma is a complex, tricky thing... it needs to be managed in an exact way."

Goldstein also emphasized that it could be important to have an R-1 unit on campus because when accidents happen on the weekends many people are intoxicated. "You can't have drunk people taking care of injured individuals," said Goldstein.

Goldstein stressed that a quick response is always essential. "One of these days we are going to have a cardiac arrest and when you are dealing with codes the key is speed," said Goldstein.

Goldstein believes that Vineyard's accident is sufficient to speak to the need for a first response unit on campus but there are other reasons as well. The primary reason is that he believes any R-1 unit should consist of those at the EMT level, though some could have MRT status. The trauma kit an R-1 would carry include various methods for controlling bleed-

ing, instant glucose and oxygen.

If someone who had diabetes were to need glucose that could quickly and easily be remedied by an R-1 with instant glucose, noted Goldstein. He also added that oxygen is important because anyone with angina or a stroke needs to get oxygen right away.

He added the need is evident on campus because many older staff members are prime candidates for heart attacks and receiving oxygen right away is essential.

Goldstein added that he always carries a bag in his car. "As an MRT it is my duty to act," stated Goldstein.

Do we need this on our campus? Clearly, Coppola and Goldstein see it as a necessity. Lynn Brooks, vice president for finance indicated that it was an issue that had not really been considered. "I don't think we've studied at all," said Brooks.

Brooks believed the concerns would be mostly related to insurance. "During the day we have a good response from the health center," said Brooks. "We'd have to study it to understand all the ramifications."

Miner did not have enough information to comment on the idea but did add that you can never have too much training.

We'll have fun, fun, fun... till our housefellow takes the hot tub away!

BY MORGAN HERTZAN
News Director

It's a bird, it's a plane... no it's a HOT TUB. If you didn't see the note on the door from KB's housefellow that said: "Come talk to me about the HOT TUB, PRONTO," you may at least have noticed this monstrosity lying beached, thirsting for water, in the hallway of KB.

This weekend, nine enterprising freshmen took on the task of getting a 5'5" by 7'3" hot tub into one of their rooms. The attempt failed, but they now know that a room in K.B. is 1 1/4 inches smaller than a hot tub.

At lunch on Tuesday the freshmen were kicking around ideas for

redecorating their room. Many of us might have thought a tapestry would do the trick, or maybe an easy chair. Not these freshmen. They decided on something big, something that would definitely make a statement. The decision was to buy a hot tub. By Thursday, they had found the right store, Treats Pool and Spa in Uncasville.

They chose a five-person model with a price tag of \$2800. (They did, however, get the salesman to throw in an in-



Evan Coppola/Photography Editor

flatable alligator for free.) What would they have done with the hot

tub if it had made it through the doorway? Would they make it a giant aquarium? Or maybe a place to relax? Nope... they planned on filling it with buckets and making a wet bar. "Everything would have been in reach from the tub... Sega, TV, VCR and Stereo," said one of the participants.

The tub was delivered around 8 p.m. on Friday.

They were able to push the empty 250-pound tub up the stairs with the help of small army of people from KB.

The tub weighs 1 and 1/4 quarter tons filled with water. Sadly, not only was the hot tub too big to fit in the room, it is also not legal... gasp!

As it turns out, the KB housefellow, Desiree Moodie, has decided that to have a large hot tub blocking a primary exit is a fire hazard and is therefore in violation of the C-Book... not to mention the fact that the weight of the hot tub could collapse the floor.

The beached hot tub is now home again at Treat's and the freshmen have received a full refund. If, however, the housefellow decides that it is within school policy to allow a hot tub in a dorm room, the freshmen have assured me, they will be picking it up once again. They claim to have no regrets about their attempt, and as a matter of fact, claim they're "still trying to do it."

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Special thanks this week goes to Evan for all his wonderful work. To Sharyn, Kristan, Pamela and Jessica for their creative ideas that helped to make the pull-out look great. Thanks to Cynthia, you stayed so late and worked so hard. Sorry, don't be too stressed. Alec and Denise... there are no words. April you were publisher extraordinaire. Dan and William, even though we like you, don't think just bringing coffee and doughnuts gets you a special thanks... but Drew it does when you bring them without being asked. Thanks for coming back to check on us. Damon. And thanks to the whole staff for the work you do each and every week. Have a great Thanksgiving.

THE EARTH HOUSE COLUMN

Please argue with me...

Erin Shafto

Having been on this campus for the past year and a half, I wonder what has happened to the act of open discussion. I have always looked forward to living in an intellectually stimulating environment where I could discuss my beliefs and opinions with others, even if those opinions differed. And because a great variety of people are cooped up in such a small area, theoretically college could provide such a place. However, as I try to discover my stance on issues that currently boggle my mind, I realize that, although I may engage in open discussion quite frequently, it is often with people I agree with for the most part: people of common interests. What is lost for me is the education that I could receive from a person with different opinions, different interests, different passions.

Many people I have talked with have observed that students and faculty of Connecticut College don't share their feelings on certain, need-to-be-discussed issues. Such issues include last year's racist graffiti, women's issues, the environment—an entire world of topics. Perhaps these discussions do take place and I am not aware of them, but I remember that when dorms called meetings to discuss the racial graffiti last year, only eight people showed up from my dorm of maybe sixty people. On a positive note, I found myself debating the issue of dissection with a zoology major yesterday; she and I were coming from completely opposite ends of the spectrum, but afterwards I felt as if we both gained a bit of insight into the other's point of view. I also realized that, although the outcome of the discussion may be frustrating for both parties, the two people or groups are at least communicating, and perhaps leave the conversation respecting the other person for his/her views. But shouldn't we also question the source of that frustration? What is it that makes us foam at the mouth when another person argues our opinion? To speak up for one's beliefs takes courage not to mention the willingness to embarrass oneself every once in a while.

Perhaps the main reason people hold in their beliefs is because they are afraid to disagree: the strong influence, almost a social requirement, of political correctness, have many people feeling that, if they don't carefully sensor their words, they may insult someone. Perhaps people are hesitant to get angry, feeling that they may seem irrational or offensive. But we need to get angry, we need to get fired up about what we believe in. Our generation has been called the apathetic, television generation, but by looking at many of the passionate people I have met, I know the assumption is a gross (and disgusting) generalization. Without saying—or screaming if need be—how else will others find out how we really feel? How else can we feel good that at least we have let others know where we stand in this democratic society of ours?

I want to discuss, argue, love, get angry, and let others know about the issues that fill my head with questions. I won't settle for the "What's up?" "Oh, nothing!" bullshit anymore, there's more to us than that.

Earth House welcomes all who want to learn about, debate, and/or question the role of the mass media for EH's next Rational Discourse Night Wednesday, Nov. 29, at 8p.m.. For any questions or criticisms please call me at x3991.

A survey that you won't mind doing

Here's your chance to be in schmoozing. Answer the following questions with honesty and creativity. Some questions are private, some are just stupid ways to test character. When all is said and done, we think you'll be a better person - and maybe you'll learn a little about yourself.

- Male/female

- Y.O.G. or faculty/staff

1. Have you ever tried on the opposite sex's underwear?
2. Lorenzo Lamas or Fabio?
3. Who are the two main characters on "Chips"?
4. Who ran against Kennedy in 1960?
5. Would you punch yourself for fifty bucks?
6. Would you rather talk like Ricardo "rich Corinthian leather" Montalban or James "I am your father, Luke" Earl Jones?
7. What is your idea of hell?
8. Which faculty member would you most want to see naked?
9. Who composed "The Four Seasons"?
10. Have you ever found any of the following in your Harris meal:
a) a hair b) a fly c) nutrition d) a small toy
11. If Erckel, Webster, and Arnold all got in the steel cage, in the end who would still be standing atop the blood-soaked canvas?
12. If you could assassinate somebody, who would it be and why?
13. What, in your opinion, is the greatest movie of all time?
14. Can you give us the lyrics to the theme song from "The Facts of Life"?
15. Was O.J. guilty? Yes or no.
16. What do you hate the most about this school? What do you like most?
17. If Dom Deluise's ass was ham, would you slice it?
18. Have you ever "sweat to the oldies"?
19. What were Romeo and Juliet's last names?
20. Do you think Michael Jackson touched that little boy's winkle?
21. Auto-eroticism: a) narcissistic b) just plain fun
22. What do you think the guys from "Men at Work" are doing right now?
23. What number is hydrogen on the periodic table?
24. Who is the next childhood star to get hooked on coke, pose for Penthouse, or rob a liquor store: is it a) Macauley Culkin b) Christina Ricci c) Elijah Wood d) Keisha Knight-Pulliam e) the brothers Lawrence
25. Corduroys in the spring - do they make your butt sting?
26. Will you be remembered?
27. Spell antiimmunoglobulin.

Old stigmas die hard

Mental illness is troubling enough to those who experience it—so why should we devote eight pages to a topic most hope never to experience and the rest would like to forget?

The answer lies in a closer examination of the question. It is precisely because mental illness, whether in the form of a severe disorder or temporary distress, is so troubling that it can literally bring the normalcy of one's life to a halt, (and send shock waves of fear and frustration through one's circle of loved ones,) that it is so important to understand.

From the debilitating, gray bog of depression, to the self-loathing accompanied by eating disorders, to the rent psyche and high anxiety produced by severe trauma and abuse, the mental and emotional state of those suffering from serious disorders is something that cannot be ignored—regardless of how much we, or they, wish it could be.

Much, much more than we'd like, or like to admit, emotional disturbances affect us and those we love. One third of all adults experience some form of depression in their lives; one in 100 suffer from schizophrenia; and eating disorders such as cycles of bingeing and purging and obesity plague college campuses and the nation as a whole.

The good news is that all of these disorders are treatable with therapy, medication, or some combination of both. The process of recovery often includes regular evaluations and work to be completed by patients. The faithful adherence to medication may be required, much as diabetics require the intake of insulin in order to maintain a stable condition. As with diabetics, the response and recovery rates for those treated for mental disorders is high.

Nevertheless, the two conditions, both produced by factors beyond an individual's control, are often met with very different responses from the outside world. Yes, the stigma continues, despite medical advances. Those who need help for mental disorders fear asking for it, or even admitting it to themselves, because it demands such a seemingly tremendous re-examination of one's identity. And those on the outside looking in, whether they are close to someone with these issues or merely acquainted, continue to feel wariness, dismay, and more often than not, hold those recovering from crisis at arms' length.

This presents the kind of dichotomy of thought that allows racism to continue: we know what the facts are, but we just don't buy them. Whether or not you agree, the argument merits some thought. Before you retreat into old ways of thinking, consider this: there were those who said that if man was meant to fly he'd have wings; there were those who thought modern technology had reached its zenith with calculators and mechanized writing; and there were those who believed that genetically dissimilar humans belonged in bondage.

The decision may not long be one of acceptance or tolerance; it may be one of catching up or being left behind.

28. Complete this phrase: "I'm going to kill you - you freakin' bastard! That's the last time you ever _____!"

29. If you had a nickel for every time you dreamt that you were in a gimp-style arrangement with the cast and crew of Baywatch would you be: a) a few nickels short of a slurpee, or b) able to buy the whole damn machine?

30. What scares whites the most: a) equality b) Willie Horton c) Larry Bird's retirement d) L.A.

31. Which of the following is a racist white conspiracy: a) O.J. Simpson b) the leaking of Bryant Gumbel's memo c) the game of pool d) Marion Barry's night of hookers and crack e) The White House

32. If Orville Redenbacher (we know he's dead - shut up) and Frank Perdue had a kid, would it pop or hatch?

33. What year did World War II end?

34. In his 1993 work entitled "Informer", Snow uses the phrase, "I'll lick your boom boom down". What the hell is he talking about? Is this shmuck for real?

35. What's the worst name you've ever heard? (Ex: Jay's Dad knew a girl named Nancy Ann Cincy. Beat that.)

36. Who of the following do you think is/are gay:

- a) Keanu Reeves
- b) Siskel & Ebert
- c) Sigfried and Roy
- d) Jay and Mailman

37. The Spanish-American war was spurred on by the sinking of what boat: a) The Titanic b) The Luisitania c) The Maine d) The S.S. Minnow

38. What is your favorite expletive?

39. Use the word "hiney" in a sentence.

40. What would kill you quickest: a) AIDS b) cancer c) riding a motorcycle with Gary Busey d) being locked in a room with Sinbad e) other, please specify

41. Was Con College your first choice?

42. Is Susan Powter a man?

43. What's the most bizarre thing you've ever done?

44. If you could sleep with anyone in the world, who would it be?

45. Schmoozing: a) quite refreshing b) quite offensive c) I cannot bear to watch, yet I cannot turn away - sort of like a car accident d) all of the above

Remember that you are all bound by the honor code. We think that means no cheating, but we're not sure. Complete the survey on a separate piece of paper, and don't forget to number your answers. Send them via campus mail to Jay at box 3839 or Mails at box 4046. The responses will appear sometime soon when we're hungover and can't think of anything to write about. Good luck and God bless.

Health in the '90's

A special section dedicated to the understanding of mental health issues

"My body aches intermittently, in waves, as if I had malaria. I eat with no appetite, simply because the taste of food is one of my dwindling number of pleasures. I am tired, so tired. Last night I lay like a pile of old clothes, and when David came to bed I did not stir. Sex is a foreign notion. At work today I am forgetful; I have trouble forming sentences, I lose track of them halfway through, and my words keep getting tangled... I don't even know when this current siege began- a week ago? A month ago? The onset is so gradual, and these things are hard to tell. All I know is, the Beast is back."

-*The Beast, A Reckoning with Depression* by Tracy Thompson



Depression and the college years ... when crises of identity and intimacy can overwhelm

BY APRIL ONDIS
Publisher

AND
MICHELLE RONAYNE
Editor in chief

Some call it "The Beast"

Even though the sun is shining and the sky is blue, the day looks gray to Jill. She lies in bed and pulls the covers over her head. The thought of getting up is overwhelming, and every task, no matter how trivial, seems daunting. She has missed class again, but the idea of actually calling her professor is more than she can bear. She has woken up in The Pit again. She is realizing that the hole gets bigger and bigger everyday, and she wonders, "Will I ever escape this pain?"

After some thought she climbs out of bed, but not out of the abyss she has fallen into. The day creeps by endlessly and with every passing moment Jill critically analyzes herself, believing she can do nothing right. "How did things get this bad?" she wonders. Later, she slowly trudges home, watching the autumn leaves as they fall, and notices she is falling in much the same manner. She feels numb and has lost hope that tomorrow will be a better day.

Journalist Tracy Thompson calls it "The Beast." Others have referred to it as a pit, a hole, or an abyss. Whatever you name it, the disease is depression, and it is the most commonly experienced psychological disorder. Studies show that close to a third of all people suffer some form of depression in their lives, with 10 percent of the population suffering severe episodes in any given year. Women are disproportionately affected and are twice as likely from men to suffer from some form of depression at one point in their life.

The college years

"I spent an increasing amount of time alone. If I was with people, I felt as though I was surrounded by strangers on a bus. The world seemed to be telescoping away; I saw everything through the wrong end of pair of binoculars, watching tiny, animated people at the other end engaged in activities I could not fathom. I spent hours walking around campus at all times of day, encased in loneliness as palpable as armor with an unreasoning hostility."

This was how Tracy Thompson described her depression during her junior year of college in her book, *The Beast, A Reckoning with Depression*. The college years are a time of many changes and can be very traumatic and overwhelming.

Dr. Singer, associate professor of psychology as well as a licensed clinical psychologist explained some of the reasons a college student might be faced with a depression

"Developmentally, young people are in a stage of life where they're trying to make sense of who they are and what their identity is. They're also trying to take the first steps in creating more long-term significant [romantic] relationships," said Dr. Singer, discussing the affect of the illness of depression on college students. "So both identity and intimacy are becoming pressing concerns."

Dr. Singer pointed out that although a person could experience an episode of depression at any time throughout the four years of college, there may be more of a tendency toward depression during the first and last years of college when students are faced with significant life transitions.

"You can think about periods within the four years when students might be more prone to feeling states of distress or unhappiness," Dr. Singer began. "For students arriving at the college, they have left home, have taken on a new level of responsibility and independence."

Intimacy and identity

All depressions are not created equal, according to Dr. Singer. Not only do individuals experience different levels of disturbance and interruption in their lives, but the sources of their depression can be various. However, Dr. Singer said that research has shown that two distinct patterns of depression have developed. The first, called anaclitic depression, is based on feelings about relationships and dependency on others.

"I began to obsess that he was secretly in love with another girl; I panicked if I did not know his exact whereabouts."

Those were Thompson's feelings regarding her relationship in the midst of her depression. One of the many problems faced by those who are depressed is the inability to be hopeful for the future and the need to have someone in their life. Thompson's sentiments can be typical of those in an anaclitic state of depression.

"For first-years," said Dr. Singer, "One of the critical issues may be the separation from family and forming of new relationships, [a situation] which may be difficult and challenging."

The second type of depression is known

the introjective depression.

Dr. Singer pointed out that, for people who have a "vulnerability" to depression, (family history is a primary factor in determining such a vulnerability), these periods of significant transition can precipitate an episode of depression.

What should you do?

"The first place to start would be talking with friends and family. If you're confused about what to accomplish in the world, or about your capacity for intimacy, talk to the people you care about," advised Dr. Singer. "Tell them you're lonely and that you feel like you're not connecting with people." He pointed out that if one values one's relationship with an individual, one might also value that person's feedback. He also recommended talking to coaches, professors, members of the clergy, or any trusted authority figure.

"If talking with them doesn't seem to make the situation any better, and you're not seeing any progress in your life, in your relationships, or in your work, and you are feeling your sense of depression increasing, it might be important to consult a professional," said Dr. Singer.

He added that depressed individuals should take seriously the recommendations of their friends to seek help.

How serious is it?

Dr. Singer recommends that the following issues be kept in mind in evaluating whether your condition is serious enough to warrant seeking counseling.

"First," he said, "No one should ever feel ashamed of speaking to a professional—we rely upon expert and professional advice in so many other realms of life, why shouldn't we take advantage of the knowledge and expertise that mental health professionals can provide to us?"

Dr. Singer added that one should not feel overly concerned that a problem causing disruption in one's life is not significant enough to justify seeking outside help.

"Mental health professionals are trained to evaluate the seriousness of the problems you bring to them," he said. "If your problem does not appear to require ongoing counseling, it is both their role and responsibility to give you that feedback."

Also, Dr. Singer said that awareness of some of the common symptoms of clinical depression can be helpful to one attempting to distinguish temporary distress from a severe disorder.

Common symptoms include sleeping too much or too little, though the majority sleep too little, loss of appetite and weight loss, loss of energy and loss of pleasure in activities that used to give one pleasure.

Most of all, Dr. Singer said that one should be concerned about feelings of pain and sadness that won't go away. "I'm talking about that wrenching sadness inside you," he stressed, "if you find yourself sitting at lunch and feeling a hole inside you."

According to Dr. Singer, one who feels that this profile of symptoms fits their situation is considered at high risk for clinical depression and is likely to respond effectively to medical treatment. Others who do not identify as closely

with this set of symptoms may be experiencing a more temporary struggle with life, a milder condition that can be treated without recourse to medication.

Thoughts of ending it

Many people suffering from depression entertain thought of suicide at some point. They are at a point in which they think and behave pessimistically. But that is not to say that everyone who is depressed attempts contemplates or attempts suicide.

Dr. Singer emphasized the psychologically classic distinction between passive suicidal ideation, in which one might have the desire to "go to sleep and never wake up," and active suicidal ideation, in which one has a plan or has gathered the means to commit suicide.

Active suicidal ideation does not always lead to suicide, or even genuine attempts to die, according to Laura Hesslein, director of Counseling Services. In fact, she estimates that over fifty percent of those visiting Counseling Services have thought about killing themselves at some point in their lives. She detailed the complex distinction between suicidal gestures, in which an individual might make a plan and gather equipment together to make an attempt on their life, perhaps even taking some action, from suicide attempts. In the first case, the individual does not truly wish to die, but wants to convey the seriousness of their feelings to others. People in this situation may be likely to harm themselves and then call a friend or emergency services for help. In the latter case, the individual may truly wish to die, but their actions are incomplete, perhaps because another person has intervened.

Bi-polar illness is not depression

Many confuse the conditions of clinical depression and bi-polar illness, formerly known as manic-depression. Bi-polar illness is a fluctuation between two states of mind. Those with bi-polar disorder will experience the symptoms of depression but they will also experience periods of mania. Persons in a state of mania may feel delusions of unusual power, creativity or brilliance. According to Dr. Singer, they may engage excessive activities such as writing non-stop for days, compulsive shopping, indiscriminate sexual activity, and other high-risk behaviors. The manic state could last for 30 minutes to three weeks, but will be followed by a crash resulting in a period of depression.

Recovery

"It is tempting to romanticize, to look back and say that dream presaged my triumph over the Beast. But there is no triumph here, only wiser ways of fighting. I suspect that the Beast and I are life partners. But it's okay. I have an ordinary life and though some might think it dull, I tell you it's sweet. Ordinary life is a miraculous thing."

Thompson believes she will face visits from the Beast throughout her life. For many therapy and medication mean a return to a healthy life and an escape from the Pit, the hole or the abyss.

Perhaps, there will be moments of pain and thoughts of depression that crop up. The introduction of the newer antidepressants has helped tremendously with recovery from depression and some remain symptom free forever.

Even if there are return visits none for most people none as ever as long and painful as the depression that eventually causes them to seek help. Eventually, ordinary life can, as Thompson put it, seem miraculous.



Jessica Rogers/The College Voice

The college years bring about periods of depression in many students.

as introjective. A person experiencing introjective depression is apt to have thoughts and feelings pertaining to their sense of competence, their ability to achieve, and their overall effectiveness.

"She thinks I'm an idiot, I thought. I did not blame her. Every time I read a paragraph and went on to the next, I forgot the one before."

Thompson believed, as do many in an introjective state of depression, that she was inadequate. She believed it was because of her stupidity that she could not do the job.

"In one case people are sad and unhappy because they feel lonely, abandoned, unloved—they feel they don't have anyone they can depend on," said Dr. Singer.

For people suffering from the introjective type of depression, the central issues manifest themselves in recurrent thoughts like, "I'm not good enough," "I'm going to fail," and "I can't do it."

It is this type of depression that seniors might be the most prone to since they are confronting questions of how they will earn a living and how they will define their roles in society. Issues of self-doubt and crises of self-confidence dominate

Suicide: when there's no turning back

BY CYNTHIA PIZZUTO
Copy Editor

"Got a ticket for a runaway train ... It's just easier than dealin' with the pain." — "Runaway Train," Soul Asylum

Suicide is the third most common cause of death in the 15- to 24-year-old age group. People in this segment of the population are especially at risk for several reasons. The frustrations of adolescence, academic pressures, transient relationships, and difficulties related to living away from home for the first time can all contribute to what someone might perceive as an impossible life.

For college students, these factors can be especially intense. This May, Harvard student Sinedu Tadesse provided a grim example. On the last day of finals, this junior first stabbed her roommate 45 times, then hanged herself in the shower. Tadesse had apparently had a disagreement with her roommate, Trang Phuong Ho, regarding rooming arrangements for the next year, and had recently

been told by an administrator that she was unlikely to be accepted into Harvard Medical School.

Her reaction was severe, gruesomely ending the lives of two exceptional students and coming as a surprise to their friends, their families, and the Harvard community.

At Connecticut College, there are a number of provisions for the prevention of suicide. According to Catherine WoodBrooks, dean of student life, the issue of suicide is addressed in the instruction of campus administrators, and some faculty and administrators have had formal training in suicide prevention. Housefellow also receive some instruction on suicide in their training before the school year begins.

WoodBrooks said that the function of the faculty and administrators who suspect a student is suicidal is to help connect him or her with Counseling Services. "What the faculty do is raise the red flag to the deans," said WoodBrooks.

The same is true for housefellow; they are advised to refer to deans, Counseling Services, and/or Campus Safety, depending on the situation. Dan Traum, housefellow of Branford, said that "the protocol for us [housefellow] is to get help."

Once informed about a situation, the deans can ensure that the student sees counselors. The official Connecticut College "Protocol to Address Suicide Concerns" stipulates that "The College Counseling Service will be responsible for the evaluation of suicidal risk and the need for follow-up treatment."

It is a frightening fact that the rate of suicide is on the rise. An October 1995 news release from the Center for Disease Control and Prevention says that over 32,400 people killed themselves in 1994, as compared to 31,230 in 1993. Moreover, the statement reveals that the rate of suicide for males age 15 to 24 has more than tripled since the middle of the century.

So what is it that can actually

push a person to ending his or her life? The most common cause is depression, whether brought about by loss, change, abuse, or any unfavorable situation. Depressed people may feel trapped and helpless, and see themselves as worthless and unloved. Suicide can appear to be a rational solution to someone who is unable to see other options.

Suicide usually does not come without warning. There are various "symptoms" suicidal people often display that, if recognized, can save their lives. Some are well-known, such as giving away one's prized possessions or suddenly withdrawing from

close friends, but others are not as self-explanatory. Difficulty concentrating or making decisions can mean someone is distracted by thoughts of suicide, and an abrupt positive change in mood can indicate that someone has actually made the commitment to kill him or herself and is happy that soon "it will all be over."

The best course of action to take if you suspect a friend at Conn of considering suicide is to go to Counseling Services or a dean to discuss the situation. There is nothing to lose if the person is not suicidal, but if so, counselors can deal with the problem.

Food is the enemy

BY MICHELLE RONAYNE
Editor in Chief

Sarah sits alone at a table in the dining hall. She has noticed that she gained a few pounds in the past month and feels disgusted with herself. She only ate some rice and had a little water but still it feels like too much. Her friends bothered her again, telling her she needs to eat more. But she can't. She can't allow herself to do that. She thinks to herself, "I am in control." She decided to stay behind because her friends always follow her to the bathroom when she is done eating, just in case...

Sarah weighs only 105 pounds, below average for her 5'6" frame. Still, whenever she walks by a mirror she sees herself as extremely overweight. It doesn't matter what her friends tell her, she sees herself only through her eyes and she believes only her eyes. She feels proud that she is not letting her hunger get the best of her. She has never once thought that she might have an eating disorder.

Americans have a love/hate relationship with food. Eating is often a social activity, something everyone can do together because we all need to eat. Yet, our society also fears becoming too heavy. For some people, food becomes an enemy and sometimes an emotional support.

When food becomes a tool to conquer emotional problems, or when one's view of one's body is distorted and not realistic, it is safe to say that that person has developed an eating disorder.

Far more women than men suffer from eating disorders. Many women experience societal pressure to stay thin. As adolescent girls and young women flip through the pages of an average fashion magazine, they are often confronted with images of waif-like models and many teens and young adults feel that they should look that way too.

Anorexia nervosa is defined as an overwhelming desire to remain thin, even to the point of starving oneself. The person suffering from anorexia refuses to acknowledge that he or she is underweight

because the perception of his or her body is distorted.

Those suffering from bulimia nervosa abuse purgatives such as laxatives, diuretics and diet pills. They also binge eat and then purge because of the tremendous feelings of guilt. When they binge they do so in secret. Both diseases can have serious health ramifications.

According to Laura Hesslein, director of counseling services, when one thinks of an eating disorder, one thinks of anorexia or bulimia, but obesity is the most common form of an eating disorder. "Bulimia and anorexia are diagnostic words," said Hesslein.

On most college campuses the most common forms of disorders are bingeing and purging and limiting food intake. According to Hesslein, those are symptoms of disorders. "People are quick to give a diagnostic label to somebody who is bingeing and purging, calling them bulimic and that's not always the case," said Hesslein.

According to Hesslein, there is a lot more bingeing and purging on this campus than people who fit the diagnosis of bulimia or anorexia. "It's an eating disorder of some kind. A lot of eating disorders don't fit all the criteria for anorexia or bulimia but they are clearly eating disorder," said Hesslein.

Many people dealing with eating disorders have a sense of loneliness or isolation from the outside world. They are very secretive about their eating habits. "These are the kinds of feelings that other substance abusers go through as well," said Hesslein.

Eating disorders are often a way of expressing emotions and a way for experiencing some control in their life. Often times they have had controlling individuals in their life and this gives them a sense of power. "They can think, 'At least I manage what I put in my mouth,'"

said Hesslein.

Often times those who have eating disorders also have issues with their self-esteem, body issues, issues about perfectionism and often times there are families histories of other substance abuse. Said Hesslein, in a family with alcoholism or drug abuse it is not unusual to find someone with a problem with food.

Hesslein offers a few suggestions to those who are trying to help a friend with an eating disorder. Some good ideas are to involve a friend in activities not related to food. Instead, take a friend for a walk or go to the movies. "You don't keep nagging at them. And as a friend you go and get some help as well because it can be very difficult, frustrating and painful to try and help someone who may not want your support right now. You don't enable your friend by keeping

Long-lasting and intense feelings of pain can lead to acts of desperation, including suicidal gestures and attempts to die.

the secret," said Hesslein.

It is scary to think that food can become a weapon, an enemy to project emotions that are too difficult to handle. It is difficult to ever find perfection with your body and you don't need to. Who hasn't had a moment when they hate their body, feel that they eat too much and wish that they could change their body? The problem is when it becomes an obsession, an outlet for one's emotions. There is a healthy future; admitting the problem can be the first step and help can lead back to a normal relationship with food.



Sharyn Miskovitz/The College Voice

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Understanding psychoactive drugs

It has been known since the 1950's that many psychiatric disorders are not strictly in the mind of the patient, but are in fact physical disorders which, through proper medication and therapy, can be treated with great success. Post World War II medical research into various diseases, such as Tuberculosis, lead to the discovery that some of the medications were having psychological effects such as mood elevation in the patients. This spawned a entirely new field of research and is one of the hottest fields in modern medicine. Many of these psychiatric diseases are caused, in some way or another, by malfunctions in the way nerves throughout the brain and body transmit messages to each other.

Nerves are not directly connected to each other. The entire nervous system may be thought of as a giant highway of electrical impulses, the nerves being disconnected sections of road. In order for the signals to travel from one section of the brain to another or from the brain to muscles and sense organs, known as effector organs, something must bridge the gap between the nerves. The signal cannot cross the gap until the pre synaptic cell (the sender of the signal) releases a chemical called a neurotransmitter. The strength of the signal is dependent upon the amount of the neurotransmitter in the synapse; more transmitter means a stronger signal. Once the signal has passed, the cell will either reabsorb the neurotransmitter or it will be broken down by enzymes. The neurotransmitters bind to molecules on the receiving nerve cell called receptor cites. When the neurotransmitter bonds to the recptor cites, it triggers the receiving cell to transmit the message impulse.

Most medications used to treat psychiatric disorders such as depression, dementia, or hypertension, in some way control the amount of these neurotransmitters in the synaptic space. These medications can be grouped into several general classes based on the disorders they treat and the way in which they work.



<p>ANTIPSYCHOTICS (also known as neuroleptics)</p>	<p>It is believed that many forms of psychotic illness are caused by overstimulation of the neurological system and one factor in that is an overabundance of the neurotransmitter Dopamine in the brain. Many antipsychotics compete with Dopamine for the receptor cites on the receiving cells. When the medication binds to the receptor cite, it does not help trigger the continuation of the signal and therefore fewer receptor cites are being stimulated and the signal strength is reduced.</p>	<p>Related Drugs: Acetophenazine, Butaperazine, Carphenazine, Chlorpromazine, Chlorprothixene, Droperidol, Fluphenazine, Haloperidol, Loxapinesuccinate, Mesoridazine Besylate, Molindone, Perphenazine, Piperacetazine, Prochlorperazine, Promazine, Thioridazine, Thiothixine, Trifluoperazine, Triflupromazine.</p>
<p>ANTIDEPRESSANTS (two catagories)</p> <p>Monoamine Oxidase Inhibitors</p>	<p>Monoamine Oxidase, known as MAO, is the enzyme responsible for the breakdown of some of the neurotransmitter after it has been released. If too much is broken down or it is done too soon or too quickly, the neurological system is not stimulated enough and a depressed state is experienced by the patient. This class of medication blocks the action of the enzyme and permits the neurotransmitter (usually dopamine, norepinephrine, or serotonin) to remaon in the synaptic space.</p>	<p>Related Drugs: Eutonyl, Isocarboxazid, Marplan, Nardil, Pargyline, Parnate, Phenelzine, Selegiline, Tranylcypromine.</p>
<p>Tricyclic and Tetracyclic Antidepressants</p>	<p>These medications are the most recent class of anti depressants. They are designed to block the reabsorption of neurotransmitters by the presynaptic neuron (cell). This causes the neurotransmitters to remain in the synaptic space longer and in higher concentrations which strengthens the signal. In the parts of the brain that control emotion, this increased signal strength leads to elevation in mood. The polycyclic class of antidepressants is beginning to phase out the MAO inhibitors which are not as effective and have many dangerous side effects. Well known examples of polycyclic antidepressants are Fluoxetine, better known as Prozac, and Sertraline, better known as Zoloft.</p>	<p>Related Drugs: Amitriptyline, Amoxapine, Clomipramine, Desipramine, Doxepin, Imipramine, Maprotiline, Nortriptyline, Lithium Salts.</p>
<p>TRANQUILIZERS</p>	<p>Tranquilizers can be categorized into major and minor with the major group acting as antipsychotics adn having similar properties and acting in similar ways to the antipsychotic medications mentioned above. The major tranquilizers block the neurotransmitter recptor cites and deminish neural stimulation which produces the desired antipsychotic effect. These drugs, due to the extent to which they block the recptor cites, can also cause some fairly severe side effects ranging from muscle spasms to decreased cardiac performance and in rare cases death.</p> <p>Minor tranquilizers are used mainly to treat anxiety and do not block the receptor cites, but rather increase the production of Gamma-Amino Butyric Acid (GABA) which causes the receptors to only fire when they are reacted with GABA. When the receptors are presented with another trasnmmitter, it is much more difficult for them to continue the signal. The largest and bestv known group of these minor tranquilizers are the Benzodiazapines. Due to the decreased risk of severe side effects, the Benzodiazapines have replaced Barbituates as the tranquilizer of choice.</p>	<p>Realted Drugs: Chlorpromazine, Fluphenazine, Perphenazine, Prochlorperazine, Thioridazine, Haloperidol, Lithium, Aprazolam, Chlordiazepoxide, Clonazepam, Diazepam, Lorazepam, Oxazepam.</p>

ADD and Ritalin; the truth behind the mystery

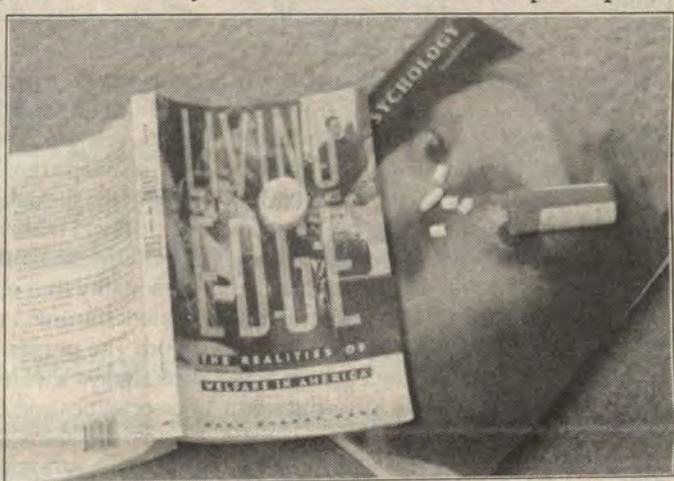
BY JASON SALTER
Associate Features Editor

Imagine a world filled with sounds and movements that will distract you even from the most interesting of tasks. Imagine your schoolwork taking distant second to an inanimate object or a simple movement. This is just a taste of the world of a person who suffers from what is today called Attention Deficit Disorder (ADD). ADD has become one of the most widely studied and diagnosed learning disorders facing pre-adolescents today. Recently, studies have also shown an increase in the number of adult cases as well.

ADD is a fairly recent discovery in the field of mental disorders. In the past, this disorder was passed off as mere hyperactivity and was assumed to pass with maturity. This has been disproven with recent studies and medication showing positive results for this still unfamiliar disease.

ADD is often coupled with hyperactivity (ADHD) and is still widely unknown

and misdiagnosed. It used to be called hyperkinesis or minimal brain dysfunction. The symptoms often displayed fall mainly into one of three different



Pamela Robbins/The College Voice

ADD and ADHD are still widely unknown and misdiagnosed

categories: inattention, hyperactivity and impulsiveness. Inattention usually is shown through boredom and short attention span, which often cause activities and interests to change every few minutes. Hyperactivity, also a symptom stemming from seizures and traumatic experiences, is seen in a child's constant fidgety motions. Often, patients will try to do more than one thing at a time to keep their constantly moving hands occupied. Symptoms that fall into the impulsiveness category deal with the children's inability to curb their immediate reactions to things. They will often blurt out whatever comes to mind without thinking about the consequences first. Patients, though not lacking intelligence, often do poorly academically due to lack of focus and attention.

The American Psychiatric Association now recognizes ADD as a mental disorder despite much controversy and criticism. Part of the controversy centers around the fact that there is no medical test for the disease. The diagnosis lies solely on observations of behavior and history.

Skeptics refuse to believe that this disease is valid and worth all of the hype. They say that these symptoms are observed in many young adults and that the drugs used to treat it are misused and abused by the patients. It remains to be settled whether ADD is a mental disorder, but currently it is the only explanation for the symptoms observed.

The most widely prescribed medication to treat ADD is also in the middle of the controversy. Ritalin, or generically, methylphenidate, has been shown to alleviate the symptoms in many patients.

In fact, 75 percent of ADD sufferers are helped by psycho-stimulant medication. Ritalin, however, is also a central nervous system stimulant similar to amphetamines in the nature and duration of its effects when injected or inhaled. This pushes up the street value of this otherwise useful drug. Prescriptions for Ritalin in the past five years have increased 600 percent according to the DEA. Because of its effects and potency, Ritalin is a Schedule II Controlled Substance by the federal government. Its production is under strict federal regulation in its manufacturing and distribution. For patients with ADD, Ritalin activates the brain stem arousal system and cortex allowing them to focus on their work. Other medicines include Dexatrine and Cylert.

These psycho-stimulant drugs are not without their side effects. Many children taking them suffer from weight loss, loss of appetite and, in rare cases, addiction to the medications. Doctors caution against the recreational use of these medications as they are meant only for the people who received the prescriptions. They also

reiterate that this is a mental disease and therefore has no cure. Ritalin and its sister medicines only treat the symptoms

and are by no means a cure-all.

Recent studies have shown that three to five percent of children under 18 have ADD in some form. There is at least one child with ADD in every classroom in America. There are varying degrees of the severity of ADD as with many mental diseases. Psychiatrists emphasize that this disease is in no way a fault of the parents. Many parents of children with ADD, as with many other diseases, tend to blame themselves for their children's differences. As many as three million children, mostly from white, middle class families, have been diagnosed with ADD or ADHD. The disease also appears almost two to three times more frequently in boys than in girls of the same age. This pattern of diagnosis is still unclear, but further studies are being conducted as to the social aspects of the disease.

A nation-wide organization called Children and Adults with ADD (CHADD) has been formed and is growing at an astounding rate. The organization gives information and support to families and children with the disease. There are chapters in almost every major city in America and the group is still growing.

Every generation faces its own disease and health problems. For our generation, it seems that AIDS and ADD seem to be the two most prevalent problems facing the youth of America. Much more study is needed to determine the cause and origin of this often incapacitating learning disability. The next time it takes someone a little longer than you to understand something, or they are easily distracted in the back of the classroom, be patient; he or she may be suffering from ADD and it is not that person's fault.

Depression is not merely a "blue mood." It is a prolonged period defined as a low, sad state in which life seems bleak and its challenges overwhelming.

Warning Signs: Someone suffering from the following profile of symptoms may be considered at high risk for clinical depression. If you or anyone you know has been experiencing these symptoms for more than a few days, it may be serious. Help is available.

- Anhedonia, or the lack of enjoyment in activities previously viewed as pleasurable
- Sleeping more than usual or difficulty in falling asleep
- Social isolation
- Difficulty concentrating, i.e., it is difficult to complete academic work
- Feelings of worthlessness
- Thoughts of harming oneself or others
- Loss of appetite and weight loss; variations include bingeing on junk food and eating irregularly
- Psychomotor retardation, the loss of energy, slowed movements, hesitant or slowed speech, slumped posture.
- Subjective feelings of pain and isolation that do not go away
- Thoughts of suicide and death, or the desire to die. There is a distinction between passive suicidal ideation, i.e., "I wish I could go to sleep and never wake up," and active suicidal ideation, in which there is a planned method of death.

Warning signs of Depression

College's network of responses seeks to get students evaluated

This college responds to emotionally disturbed students in several ways. The simplest is by offering counseling services to those who request them. The other avenues to treatment are less direct, but more often than not end in the Office of Counseling Services.

Students experiencing bouts of depression, or exhibiting disturbing behaviors such as excessive sleeping, unusually high levels of irritability, or social withdrawal rarely do so without attracting the notice of friends, roommates, and neighbors.

"One of the beauties of our little civil community is that it's hard to hide; there are a whole set of people who are looking to be supportive, and it's hard to avoid them," said Arthur Ferrari, dean of the college.

"Students themselves often play an important role in [identifying a need for intervention] as friends and corridor-mates," Ferrari added. He said that friends of students experiencing difficulties often inform their housefellow, who then contact the individuals and evaluate their situation.

According to Catherine WoodBrooks, dean of student life, all housefellow are trained in ways to approach students in various levels of crisis, and in making decisions about referring them to Counseling Services or another authority if need be. "We try to separate evaluation and referral," said WoodBrooks, "so that we don't have a situation where we have students treating students."

Thus, housefellow represent the first college authority contacted in a residence-based chain of reporting. Depending on the sorts of behaviors the students in question are involved in, a housefellow is likely to contact the Office of Student Life, Counseling Services, Campus Safety, or even the administrator on-call for the weekend.

In a classroom-based chain of reporting, the basic contact is from faculty member to academic dean. Professors who, Ferrari said, "might begin to question why a student is not coming to class,

or seems suddenly unwilling to participate in discussion" might call that student's class dean, or submit a mid-semester report to the dean detailing concerns. Ferrari explained that mid-semester reports are completed for hundreds of students whose GPA is at or below a C-minus, or who may have any other reason to find themselves in potential academic difficulty.

While Ferrari stressed that the academic deans would be likely to refer students to Counseling Services, he added that the advising deans are also able to use facilitate communication with faculty members, particularly in terms of explaining the situation (with the student's permission), and in helping to arrange extensions or special means of completing assignments in order to salvage the semester's work.

WoodBrooks emphasized that an administrative response, while it can be comforting, is very separate from a clinical response. Administrators and faculty, said WoodBrooks, have an informed understanding of what students may be experiencing, in many cases from personal experience with mental health issues, but in the end, they must weigh whether it is best for a student to remain in college. If the deans decide that it is not appropriate, students might be asked to take a medical withdrawal from the college.

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STRESS... a fact of college life

BY JENNY BARRON
News Editor

On a typical day, I get up at about 8:30 a.m. to the fuzzy sound of the morning news report. From the moment I leave my room an hour later until the moment I return around midnight, I am going full force. There is very little time budgeted for pausing, or even breathing. With this schedule, I find myself often fighting that familiar college demon—stress.

Stress is a fact of life in college. From the distance from home to looming exams and papers, it touches everyone. But as Catherine WoodBrooks, dean of student life, points out, it only becomes dangerous when it rules you.

"It becomes unhealthy if it is interfering with your academic life and your social life and your ability to maintain a healthy balance between the two," commented WoodBrooks. She noted that Conn provides help for those feeling overly stressed, including advice

from counseling services, various deans, and David Brailey, health educator as well as stress workshops set up by individual housefellowes.

WoodBrooks said that she tries to provide structure and guidance to those struggling

with seemingly overwhelming stress. Sometimes she also employs something known as a behavior contract. This involves a student signing a contract indicating that he or she will do certain things and not do others. She notes that even simple things like eating right and getting plenty of sleep are essential for dealing with stress.

WoodBrooks added that students seem to be very conscious

counseling services, said that her office does relaxation workshops on request to help students deal with stress. She added that one housefellow has already requested two for this semester.

During the workshop, participants discuss issues of stress and other concerns. Then Hesslein leads them through some muscle relaxation and a guided fantasy.

Hesslein has already facilitated workshops during freshmen orientation and leadership training earlier this year. But on a day-to-day basis, she suggests exercise, sleep, eating well, and confronting issues of concern.

"Students should be having a good time, but not overloading themselves," Hesslein explained.

Other suggestions from campus officials include breaking up a long day with a walk or some other form of relaxation. People often feel like they are trapped in a never-ending day; taking a half-hour break for time to yourself can help to relieve the pressure.

Stress is a part of life...but it need not rule your life. Letting stress have too much influence over you

can lead to more serious problems. There are people here on campus to help you deal with the trials and tribulations of college life; they can help you both recognize the causes of stress and help you find ways to keep it under control.



Stress, to a varying degree, is an everyday occurrence in college life
Kristan Lennon/The College Voice

this year about the influence of stress on their lives. For instance, during the Leadership Conference earlier this year, more students went to the stress workshop than any other event offered.

Laura Hesslein, director of

Schizophrenia is a common and commonly misunderstood disease

BY MICHELLE RONAYNE
Editor in Chief

One out of every hundred people suffer from it. Over two million in the U.S. will be or have been treated for it. The disease is schizophrenia and its effects can be quite debilitating.

Schizophrenia is a psychosis. It is a break from reality. The symptoms of schizophrenia typically develop in late adolescence or early adulthood. It is an impairment of the ability to deal with and function in the outside world. It is described, according to Ronald Comer's text *Abnormal Psychology*, as "a disorder in which personal, social, and occupational functioning that had previously been adaptive deteriorates into a welter of distorted perceptions, disturbed thought processes, deviant emotional states and motor abnormalities."

Those afflicted with the illness have various unusual experiences. These experiences vary depending on the type and extent of the illness and include auditory hallucinations and delusions. Delusions can mean that people believe others are persecuting them, attach hidden meanings to others' actions, believe they are famous historical figures, or believe that others are controlling their actions. Examples of people suffering from delusional symptoms are someone who believes that the FBI is following and documenting his or her every move or someone who believes that there are electrodes in his or her brain sending messages.

According to Comer, there are various theories as to the causes of the disease. The different schools of thought range from the sociocultural and psychodynamic views to the genetic and biological views. The most recent research has been in the last area. Genetic research indicates that there is a gene that can give one a predisposition to the disease. An individual with a predisposition to schizophrenia could develop the disorder when exposed to extreme stress.

There are many antipsychotic drugs that are helpful to those with schizophrenia, such that many can live and function normally. There are also various forms of therapy, and institutions that allow patients of schizophrenia to function.

The disease is more prevalent in people from lower socioeconomic classes. This is because those who are afflicted with the disease are less likely to succeed economically. There are an equal number of men and women who suffer from the disorder.

Comer's text explains, throughout history, schizophrenia has been most commonly associated with "madness." In the early years A.D., a Roman physician named Galen first coined the term "dementia" to describe the reduction in the number and size of a person's "animal spirits." In 1911, Eugene Bleuler applied the word schizophrenia to "disorders of serious intellectual and mental deterioration."

Confusion often arises as to the differences between schizophrenia and Multiple Personality Disorder (MPD). Some people believe that schizophrenia is a split in personality. The origin of the word comes from the Greek for "split mind." In fact, schizophrenia consists of a split in the thought process and withdrawal from reality.

MPD involves a break in one's personality that results from repeated trauma in early childhood. The person with MPD is not always aware of the other personalities and does not experience the same symptoms as one with schizophrenia. Each personality has its own distinct character, and when different personalities emerge, one can even view the difference in handwriting. Depending on the type of MPD, the personalities may or may not be aware of one another. Sometimes the personalities can hear the others' voices. Personalities will change, often in a dramatic manner, during stressful situations. These personalities emerge as a coping mechanism to deal with trauma too severe to be dealt with by a small child alone.

Both disorders, while not curable, are treatable. There are some people that cannot recover from these illnesses, but people with either disorder can go on to function normally in their lives. The important thing to remember for anyone with a mental health disorder is to receive help because there is hope for a healthy future.

Anorexia nervosa and bulimia nervosa are very common diseases among college-aged women. Those suffering from anorexia nervosa have a distorted body image and, believing they are not thin enough, starve themselves in an effort to lose weight. Those suffering from bulimia nervosa also have a distorted body image, but will binge and then purge in an effort to remain thin. Both are very serious diseases that can lead to death.

Warning: If you or someone you know exhibit these symptoms this may be an eating disorder. Remember help is a phone call away.

Anorexia nervosa

- Refusal to maintain the body weight required for healthy functioning
- Hunger and disorder denied; often proud of weight management and more satisfied with body
- Amenorrhea, missed menstrual periods and an abnormal cycle
- Intense fear of becoming overweight, leading to starving oneself to stay thin
- Distorted view of one's body, a belief that one is overweight and denial of the seriousness of one's current weight

Bulimia nervosa

- Abuse of purgatives such as laxatives, diuretics or diet pills
- An unusual amount of time spent thinking and talking about food, dieting and weight
- Hiding binges by eating in one's car, alone. Going to great lengths to keep frequent vomiting a secret.
- Changes in appearance including, skin rashes, dry skin, changes in texture and quality of fingernails and hair, swollen salivary glands.
- Frequent, obsessive exercise
- Depression
- Frequent weight fluctuation

Warning
signs of an
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Remember, help is right around the corner

MICHELLE RONAYNE
Editor in Chief

You aren't thinking about it right now, but you probably feel pretty good today—don't you? Maybe you have some difficulties with friends, family, or work, but you're not feeling as if the walls are closing in ... or are you?

For someone suffering from a mental illness, good days are few and far between. When one is coping with a personal problem, it can seem as if things will never get better—but they can. If someone you know has been having more bad days than good days, or if you're feeling as though the walls are closing in, you may need to get help.

The Counseling Services Office, (located in the infirmary), can help, according to Laura Hesslein, director of counseling services. The office is staffed by four part-time counselors and a part-time psychiatrist. They offer on-campus, short-term therapy to students.

Hesslein emphasized that students may want to seek counseling if they are concerned about one of their friends. It can be a terrible burden to be a friend to someone who is in trouble. "The other things that concern me is that out of respect for one each other, you are more often inclined to keep [a problem] a secret until your friend is ready to get help, and so you carry a very tremendous scary burden and feelings of responsibility... I

would encourage people not to keep that information a secret, for themselves and for their friend," said Hesslein.

Although the duration of treatment varies, most students who receive therapy from Counseling Services on a regular basis do so about once a week for the length of a semester, according to Hesslein. And many students do make use of Counseling Services; although Hesslein does not keep statistics, she estimates that about 25 percent of each class seeks counseling on-campus before graduation.

She attributes the high usage of the office to the transitions most college students face. "Anytime there is a life change, people who have a proneness to depression are going to be more challenged. All of their resources are getting pushed—going to college, a family move, a death in the family, divorce, or a birth in the family are life changes which can disrupt the status quo of living," said Hesslein.

Students are referred off-campus for help if the issues they are struggling with are more complex than can be dealt with by part-time staff, or if the students' and counselors' schedules do not connect.

"We don't have the resources to do long-term or more than once a week therapy, and we are also not a 24-hour a day, 7-day a week service. So we're limited in terms of being available for people who are in treatment and might have a tendency to run into distressing compli-

cations," said Hesslein.

Dr. Daniel Bendor is the part-time psychiatrist affiliated with Counseling Services. He evaluates and medicates students, but is only available two hours a week. According to Hesslein, most students in need of psychiatric treatment are referred to a professional off-campus, although some are seen by Bendor. Hesslein explained that he chooses the kinds of disorders he wishes to treat, and makes decisions about whether to give psychiatric treatment to a student based in part upon the type of psychotherapy that student receives.

Traditionally, people whose lives have been affected by emotional disturbances, or who have sought help for their disorders, have been socially stigmatized, a

fact which may have led some to be reluctant to seek counseling. Recently, however, there has been greater openness about mental health disorders across the U.S., as the best-selling status of *Prozac Nation* may demonstrate.

"It's not as stigmatized as it used to be, but it's still got a long way to go," said Hesslein. "Some people are still depriving themselves of the opportunity to get help out of fear of what other people might think or say," she added. But according to Hesslein, Counseling Services at Conn, like similar offices across the nation, is well-used, a fact that she attributes to the time of life as well as greater acceptance.

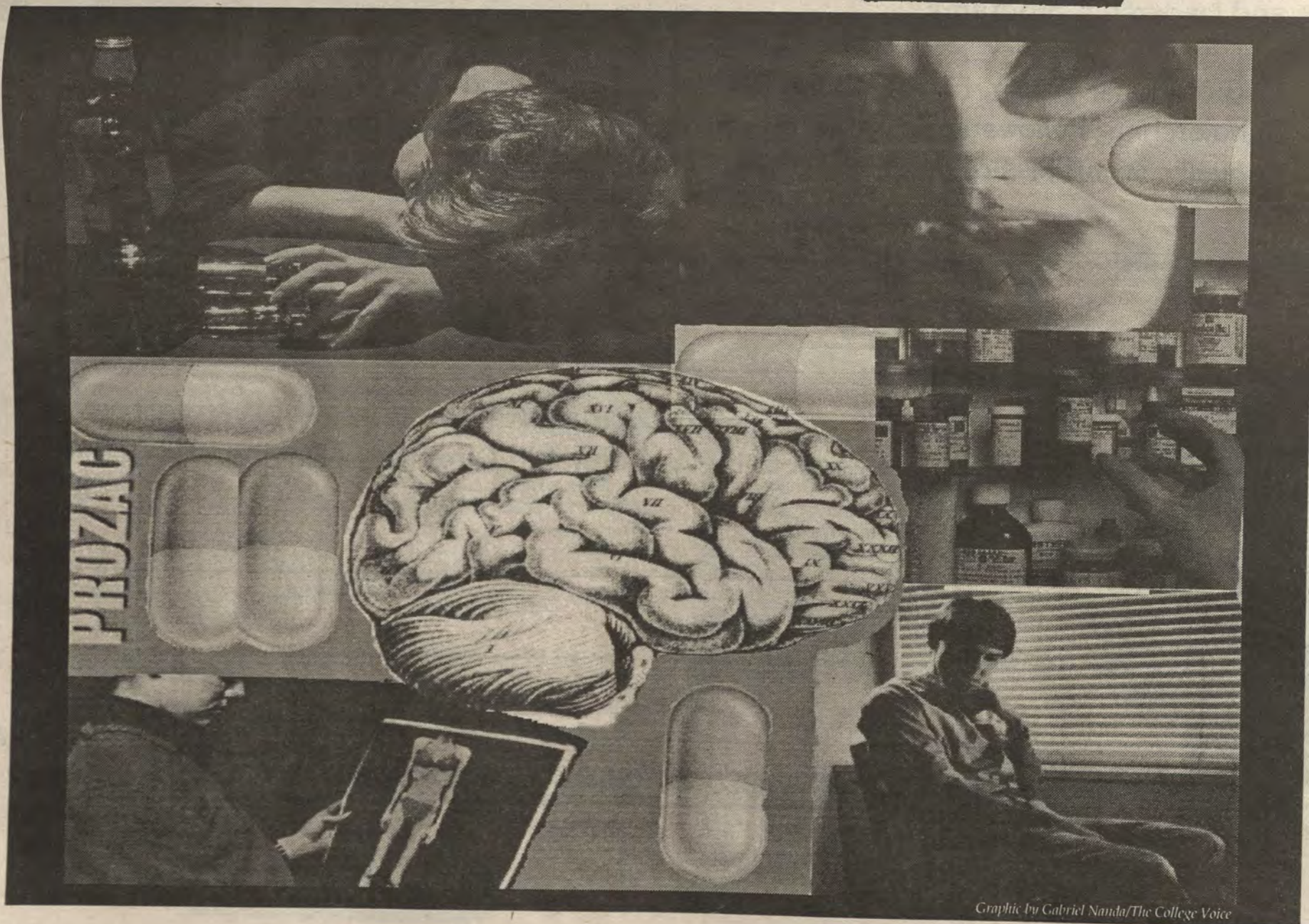
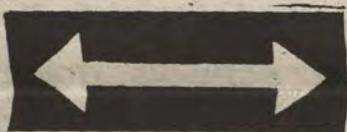
Counseling Services can be reached at extension 2692.

Never underestimate the person who tells you he/she wants to kill himself. It could be a cry for help and should not be ignored. There is a difference between passive suicidal ideation i.e. "I wish I could go to sleep and never wake up," and active suicidal ideation, which involves a planned method of death.

Warning: If you or anyone you know is feeling this way, the time to get help is now. If you are thinking about suicide, call for help immediately.

- Preoccupation with death
- Previous suicide attempts
- Withdrawal from friends and family
- Negative comments about oneself
- Neglect of one's personal appearance
- Difficulty concentrating
- Not tolerant of rewards and praise
- Comments like "I won't be a problem to you much longer."
- Irritability
- Eating or sleeping disturbances
- Difficulty remembering or making decisions
- Giving away personal possessions
- Sudden elevation of mood because a plan has been made and the end is near

Warning signs of Suicide



Graphic by Gabriel Nanda/The College Voice

ARTS & ENTERTAINMENT

The "Year of Discovery" begins

BY MIKE MCKINNEY
The College Voice

A "Year of Discovery" in the world of music began last Sunday evening with the debut performance of the Connecticut College Orchestra under the direction of Michael Adelson, conductor, and Damon Krieger, assistant conductor, in a packed Harkness Chapel. Adelson promised a "discovery" concerning "the connections between pieces of music which exist in vast spaces of time." Indeed, this mission of discovery, based on an equal partnership between the composer, the performers, and the audience, was two-fold; Adelson explained: "We will rediscover the classics, and we will be advocates for the new." Clearly, the repertoire upheld this promise. Compositions ranged from an anonymous work titled, *Vigiles et Sancti* (composed 1623), and Mozart's *Symphony #38 in D major "Prague"* (composed 1786), to Edward Diemente's piece titled, *Bravo-Encore*, (composed 1976) and *Fanfare for Conn*, a composition only two-weeks-old by Conn's own Michael Adelson.

Fanfare for Conn., the first "discovery" of the night, featured a sort of musical conversation between four trumpets. The orchestra, under Adelson's command, then segued nicely into the second piece, *Vigiles et Sancti*, a beautiful hymn-tune played on the organ by Rudolf Radna. The third piece, *Windows*

in the Sky (1975), which Adelson described as "a combination of the old and the new," was the creation of composer Richard Felciano; Felciano was "fascinated by the idea of ritual and ceremony in music." The performance of this piece was unusual because it called for a "conventional" choir, an orchestra, and a pre-recorded tape. The tape contained vocal parts that were electronically enhanced and colorized using various effects.

The initial contrast that the tape and live-performers sparked was a bit unsettling to some members of the audience; however, as they adapted to its "newness," the work successfully bridged two worlds of music centuries apart.

One of the most interesting performances that readily proved the commitment to "rediscovering the classics" was *Tambourins 1&2 from "La Guirlande"* by baroque-era composer Jean-Philippe Rameau. The piece originally written as an instrumental work, was rediscovered by a group of Conn singers introduced by Adelson as "The Conn Artists" (of which, it became apparent, Adelson was a guest member).

This particular performance reflected on something that Adelson had revealed to me before the concert: "The more I look at music, the more I realize that the performances that count are the ones that are revelatory, that reveal something about the music."

The orchestra skillfully presented J.S. Bach's *Concerto in A major* that featured Linda Skernick, harpsichordist. Adelson endeavored to show a link between Bach's harpsichord concerto and Felciano's *Windows in the Sky*: in short, that "like Felciano, Bach was a great composer of ceremonial music."

Following the intermission, the trumpets opened the second half of the concert with Benjamin Britten's *Fanfare for St. Edmundsbury*. The next work, *The Unanswered Question* (1906) by Charles Ives, was, as Adelson stated, "the centerpiece of the program." The audience had the privilege of hearing some insight on the piece by Noel Zahler, chair of the music department, who edited a published version of the piece. Adelson then explained that the piece required two conductors due to the placement of sections of the orchestra in different parts of the hall. He announced the debut of his student, Damon Krieger, as one of the conductors. Krieger conducted the string section while Adelson conducted the woodwinds and the solo trumpet. Krieger "thought the performance went extremely well." He described the process of conducting this piece: "It is difficult to conduct a very slow piece like this one where the stringed instruments are playing very softly (pianississimo) because the performers can't hear each other well. It's important to keep them alert and in character with the programmatic aspect of the



Evan Coppola/Photography Editor

Bert Ifill and Damon Krieger were two of the virtuoso clappers that took time from their busy world tour to perform for a Conn audience.

work. If you lose the calm, relaxed mood, everything will become disjunct and fall apart."

The final performance of the night was Mozart's stirring *Symphony #38*. Despite the fact that this was the last piece, the orchestra seemed to find some-

thing extra in their performance of it; many audience members felt that this was the highlight of the evening.

Look for more concerts from the Connecticut College Orchestra in the future as we all participate in this "Year of Discovery."



Evan Coppola/Photography Editor

Michael Adelson talks to the audience during the first of the "Discovery Concert Series" presented by the Conn College Orchestra.

Beatles Anthology traces the evolution of modern rock sound

BY RUDI RIET
Special to the College Voice

"The first new Beatles song in 25 years," proclaims a multi-million dollar advertising campaign. *The Beatles Anthology* is here, and the world is anxious to rejoin the waves of Beatlemania that peppered the 60s with both joy and sorrow, as people's lives and livelihood were often centered around the achievements of the famous quartet from Liverpool.

The television onslaught, interesting as it may be, pales in comparison to the real treasure of the "new Beatlemania"—the *Beatles Anthology* CD sets, which reveal the recording history of the band through outtakes, live performances, and unreleased songs.

Much like last year's masterful *Live At The BBC* set, the *Anthology* sets show the Beatles to be four musical innovators who, in a six year period, transformed rock-and-roll into a serious art form.

Anthology Volume 1 (available November 21) paints a portrait of the development of the Beatles' classic "Merseyside" sound. The journey starts in 1958, with the Quarrymen (an early "skiffle" group featuring John Lennon, Paul McCartney, and George Harrison) playing a competent (though amateur) cover of "That'll Be The Day," backed with the only known McCartney-Harrison composition, "In Spite Of All The Danger."

From there, the discs cover the development of the Beatles from their early days until the breakout of Beatlemania in 1964. Among the highlights of this material are:

- ten tracks featuring original Beatles drummer Pete Best, whose drumming left room for Ringo Starr to take over.

- live performances from the early stages of Beatlemania, including excerpts from the groundbreaking 1964 Royal Command Performance and their first appearance on the Ed

Sullivan show.

- alternate takes of many songs from the Beatles' first four albums, many including markedly different performances from their previously-released counterparts.

- the first new Beatles song in 25 years, "Free As A Bird," which features lead vocals and piano by John Lennon.

The most remarkable aspect of *Anthology* is the fact that many of the featured tracks were subject to heavy bootlegging. This may make many die-hard Beatlefans wonder whether it is worthwhile to spend another \$30 on songs they may already have. To these skeptics, I can only say: the *Anthology* sets are worth every penny. Of the 50 tracks peppering the two discs of *Anthology Volume 1*, over one-third have not been bootlegged in any form. *Anthology*, both as a television special and CD set, successfully rekindles the Beatles magic in a generation desperately in need of a musical icon they can trust.



Evan Coppola/Photography Editor

Greg Keller puts on makeup as he prepares for a performance of *Some Americans Abroad* that appeared on the Palmer stage last Thursday, Friday, and Saturday. The play, directed by Linda Herr, provided a unique look into the lives of educators and their students as characters struggled with charges of sexual harassment and other tough issues.

Christo and Jeanne-Claude share their remarkable talents and stories with the Connecticut College community

BY KELLY CLIFFORD
The College Voice

Until two years ago, Christo worked alone; that is, according to the art world he did. He still works without an assistant, but now the artist shares his pieces with his wife, Jeanne-Claude. When Christo and Jeanne-Claude emigrated to the United States in 1964, they both knew how hard it was going to be to gain acceptance in the New York art world. They decided that in order to make the transition smoother, they would both work under Christo's name; Christo would function as the artist and Jeanne-Claude as the manager. Two years ago, they decided to lift the facade and reveal the dynamic artistic relationship that they had all along; Connecticut College was able to revel in this long-time partnership last week when the two artists came to share their works and story with the college community.

Christo and Jeanne-Claude create art by temporarily transforming a natural or man-made landmark. On July 24, 1995, after twenty-four years of lobbying and planning, the wrapping of the Reichstag was finally completed. The original idea emerged in 1971; however, the actual "wrapping" encountered some opposition since Germany was split East-West, and both parts were needed for the project

to go ahead.

Throughout history, there has always been a fascination with the use of cloth in art. Fabric also possesses the unique quality of impermanence which Christo and Jeanne-Claude find essential to their work: "The temporary quality of our art adds a synthetic quality of love and tenderness to something that won't last because it's just that temporary." The artists see a human tendency to ignore the permanent and take for granted that which will always be there. For these reasons, the wrapping of the Reichstag remained for only two weeks; however, in that time, five million visitors visited the site.

The wrapping of the Reichstag involved the aid of 90 professional climbers and 120 installation workers to attach steel structures and hang the 60.5 tons of polypropylene fabric. The steel structures were placed on towers, roof statues and stone vases to allow the fabric to cascade creating a dynamic movement of the material in the wind. Christo and Jeanne-Claude hoped to "hide all the details and highlight the major proportions of the figure." The fabric cast a silvery sheen, reflecting the sun by day and lights by night. The Reichstag is to be renovated and transformed into the new German parliament. The building has been histori-



Kristan Lennon/The College Voice

Christo and Jeanne-Claude spoke at Conn about their recent work, *Wrapped Reichstag*.

cally seen as a symbol of German imperialism. As the fabric is taken down, "Nazi villainy and cold war confrontation is literally unwrapped as a symbol of a nation's reunification and rebirth." (Weisman, New York Times, July 3, 1995) Michael Cullen, a Berlin historian, suggested to Christo that the Reichstag, little used except as an exhibition hall, would be an ideal place for him to realize his dream of wrapping a national capital.

Christo and Jeanne-Claude refuse sponsorship of any kind and finance all their projects with the money they earn from sketches, models and other artwork they create. Their refusal of any type of sponsorship or donation is due in part to a desire to keep their projects under their own control and not commercialized in any way. They are not paid by governments or private organizations to develop

an idea; rather, they undertake these tasks for themselves from "whatever comes out of our heart and our head." The amount of money, however, spent on these projects is staggering. The Reichstag project cost approximately 11 million dollars; that is enough money to finance the matriculation of about 408 students at Connecticut College.

Christo and Jeanne-Claude's other projects include: surrounding 11 islands in Biscayne Bay, Florida with pink floating fabric in 1983 and placing 3,100 gigantic yellow and blue umbrellas in Japan and California in 1991. The umbrella project ended tragically, however, when a Californian woman was killed by one of the 500-pound umbrellas that had been uprooted in a storm.

Christo and Jeanne-Claude proclaim themselves, "the neatest and cleanest artists," due to the careful and thorough job they do cleaning a site up after a

project is taken down; they make sure that nothing is left behind. The artists recycle all their materials, and they always take into account potential threats to the environment when planning their projects.

Neither artist is quite sure what will next occupy their talents; however, Christo and Jeanne-Claude are currently trying to get a project underway entitled "The Gates." This project involves the placement of fabric banners from 15-foot-high gates along 27 miles of walkways in Central Park in New York City. Another possible project is "Over the River, Project for Western U.S.A.," which will involve suspending fabric panels along four to six miles of river in the Western Rockies. Regardless of what Christo and Jeanne-Claude's next creation will be, it is sure to be something original and exciting. Be on the lookout for it!

Smashing Pumpkins deliver an air of sadness

BY BRITT WOLFF
The College Voice

Over two hours of heavy guitar riffs and bitching about how love always fails sounds like a perfect album to intrigue the population referred to as Generation X. The double-album by Smashing Pumpkins, *Mellon Collie and the Infinite Sadness*, is the follow up from the triple-

platinum album, *Siamese Dream*.

The running theme throughout *Mellon Collie and the Infinite Sadness* is quite depressing. Billy Corgan, the group's lead singer, sings: "heartstrung is your heart frayed and empty," "emptiness is loneliness, and loneliness is cleanliness, cleanliness is godliness, and god is empty just like me," and "I'm in love with my sadness." These lyrics, among a

myriad of others, are just a sample of the literary content of *Mellon Collie*. These "depressing" and "morbid" sounding songs could turn away fans and potential listeners; however, that is not the case with this new release. In fact, this album delivers exactly what Pumpkin-adoring fans have grown to love. The Smashing Pumpkins never promised to be a happy-go-lucky band like the Sugar Cubes or the Happy Mondays; instead, they are a band striving to make listeners focus on the more negative aspects of their feelings. Hey, why not? They do a damn

good job of it, and triggering an emotional response is what music is all about.

The title track tends to stand out from the rest because of the 20-piece orchestra which accompanies the group. The orchestra, something new for the Pumpkins, actually fits nicely into the scheme of the double album. *Mellon Collie* does differ slightly from the other works produced by the Smashing Pumpkins. It contains a more diverse sound ranging from heavy based guitar chords to light lyrics with soft, complementing melodies.

Apparently, Corgan intended

to make the double-album, *Mellon Collie and the Infinite Sadness*, comparable to Pink Floyd's, *The Wall*. The similarities are all there; maybe Corgan hit the nail on the head when he stated this comparison. The song title, "1979," is actually the year that *The Wall* was released.

Regardless of whether or not the Smashing Pumpkins' new album is connected to Pink Floyd's *The Wall*, the album is very dreamy and almost numbing; the clever lyrics show that Corgan is a master at the art of a musical poetry.

The first song on the new album that has received a significant radio play is "Bullet with Butterfly Wings"; however, there are many other catchy tunes, such as "1979" and "Zero," that are sure to make the double-album a success.

As far as the Smashing Pumpkins' style, there are no real surprises on *Mellon Collie and the Infinite Sadness*; the title of the double-album speaks for itself. The songs are depressing, but the album is still filled with a collection of ear-pleasing tunes that are sure to pique your interest. If you've got an extra 20 George Washingtons lying around, it would be worth it to pick up a copy of *Mellon Collie and the Infinite Sadness* to add to your disk collection.

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THE VOICE SCORECARD

CONN SPORTS:



Men's Hockey

Middlebury 5 -

Conn 2

Conn 5 -

Norwich Academy 2

Men's Basketball

lost to Gettysburg

lost to Heidelberg

lost to Fordham

Women's Squash

Bowdoin 9 - Conn 0

Colby 8 - Conn 1

Men's Squash

Conn 7 - Haverford 2

Conn 9 - Ohio

Wesleyan 0

lost to Colombia, Colby

NFL

AMERICAN CONFERENCE

TEAM	W	L	T
Buffalo	7	3	0
Miami	6	4	0
Indianapolis	5	5	0
New England	4	6	0
N.Y. Jets	2	8	0

CENTRAL

Pittsburgh	6	4	0
Cleveland	4	6	0
Houston	4	6	0
Cincinnati	4	6	0
Jacksonville	3	7	0

WEST

Kansas City	9	1	0
Oakland	8	2	0
Denver	5	5	0
San Diego	4	6	0
Seattle	4	6	0

Sunday's Results

def. New England
lost to Indianapolis

defeated Cincinnati
lost to Green Bay

lost to Pittsburgh
lost to Tampa Bay

defeated Washington

NFL

NHL

EASTERN CONFERENCE

Northeastern Division

TEAM	W	L	T	Points
Pittsburgh	11	3	3	25
Montreal	11	7	0	22
Buffalo	8	9	1	17
Hartford	7	9	1	15
Boston	6	9	3	15
Ottawa	6	12	0	12

Atlantic Division

Florida	14	5	1	29
Philadelphia	11	6	4	26
NY Rangers	11	7	2	24
New Jersey	10	7	2	22
Washington	9	9	1	19
Tampa Bay	5	10	4	14
NY Islanders	3	13	2	8

NATIONAL CONFERENCE

TEAM	W	L	T
Dallas	8	2	0
Philadelphia	6	4	0
Giants	3	7	0
Arizona	3	7	0
Washington	3	7	0

CENTRAL

Chicago	6	4	0
Green Bay	6	4	0
Tampa Bay	5	5	0
Minnesota	5	5	0
Detroit	4	6	0

WEST

Atlanta	6	4	0
San Francisco	6	4	0
St. Louis	6	4	0
Carolina	4	6	0
New Orleans	4	6	0

Sunday's Results

defeated Giants
lost Philadelphia
lost to Carolina
lost to Washington

lost to Detroit
defeated Cleveland
defeated Jacksonville

defeated Chicago

defeated St. Louis
lost to Atlanta
defeated Arizona

WESTERN CONFERENCE

Central Division

TEAM	W	L	T	Points
Detroit	11	5	2	24
Toronto	10	6	3	23
Chicago	9	7	3	21
Winnipeg	9	8	2	20
St. Louis	8	9	2	18
Dallas	6	7	5	17

Pacific Division

Colorado	13	4	2	28
Los Angeles	10	5	5	25
Anaheim	10	10	0	20
Vancouver	5	8	6	16
Edmonton	5	10	4	14
Calgary	3	13	4	10
San Jose	1	14	4	6

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IM Update:

Ken's Chicks look to repeat as floor hockey champions

BY TOM RYAN
Assistant IM Director

Defending IM floor hockey champions Ken's Chicks are off to a tremendous start with a 3-0 record, defeating their opponents by the combined score of 35-4. With two out of three of the league's top scorers returning in Tara Sorensen (23, 14, 37) and Holly Doyle (20, 13, 33), their season looks promising. On Tuesday, they unleashed the dogs in a 11-0 trouncing of Jam. Doyle led all scorers with 5 goals. In addition to Ken's Chicks' strong returning core, they have also picked up some key rookies including Caroline Davis who tallied four assists in the contest.

Another team that looks to build on last years success is the Puss Maggots. They were undefeated in league play last year, but lost the big one to Ken's Chicks. Despite losing key senior leaders Sara Ciotti and Colby McDonagh, the team looks strong in early season play. Puss Maggots are currently 4-0 with their recent win over Your Mom With a Stick by the score of 15-1. Junior sensation Siobhan Doherty had an impressive 10 goals and 3 assists on the night. Kim-An Hernandez (2, 7), Sarah Dorian (1, 6), and Meg

Gaillard (1, 5) all contributed. Mary Gorman tallied the lone Your Mom With a Stick goal with the assist going to Holly Hawkins.

In other weekly action, Fido downed the Mighty Flucks 6-1. Erin Juhl (3, 0), Erin Shafro (2, 0), Dorothy Plechaty (0, 3), and Jillian Schroeder (1, 1) led Fido to victory. Ursula DeGersdorff and Tara Kern connected for the Flucks goal.

In the closest game of the week, Athletes Feet topped Hamilton 5-2. Dardy "the Scoring Machine" Muldaur had 4 goals and an assist in the win. Stephanie Chelminsky led Hamilton in scoring with a goal and an assist.

In Co-ed Volleyball, Really Lucky Guys are on a tear with an 8-0 record. In their last contest, they shut out Girls In the Bathroom 15-0, 15-0. Mike D'Amour and Amy Asbury were deemed the unsung heroes in the match.

The other league power-house appears to be Team Sexy at 10-0. Scott Devlin's amazing seven jump serve aces helped the Sexy ones defeat Smith 15-5, 15-1. Money has also exhibited some solid play as they downed I Love Sheep 15-10, 15-5. Finally, Smith lost a barn burner to the ones who know what time it is, Four-twenty, 15-6, 15-11.

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SPORTS



Men's Ice Hockey opened this season with a loss.

Kristan Lennon/The College Voice

Ice Hockey takes opening shot on season

BY DEREK CRUMP
The College Voice

The Men's hockey team kicked off their 1995-1996 season with high hopes and big sticks. The season opened on Friday night down at the recently converted soccer rink. Middlebury came to town fresh off of a national championship. However, this did not intimidate the mighty Camels. The Connecticut men finally succumbed 5-2 in a hard-fought game. But Saturday afternoon brought a different team and a different result. The Camels shut down the Cadets from Norwich in a 5-2 thrashing.

Opening night was full of excitement and fanfare. Connecticut is expecting big things this season with key players back and a plethora of freshman and transfers, not to mention a couple of great keepers. Senior tri-captain Ben Smith said, "With the new players, the team has a new attitude and the team is going to be resilient this year."

Connecticut went on top early with Mike Deplacido scoring early off a pass from Kyle Ries and Jamie May. The National Champions, while stunned, were able to come back—and quickly. The Camels were hit by

two fouls and had to face the Panthers with only three skaters. Middlebury capitalized on the power play and tied the game at one. Middlebury then scored two more, going up to 3-1. With courage in their eyes and mouth guards in their mouths, the pucksters fought back to 3-2 on a goal from David Kessler. That is as close as the Camels would get, finally losing 5-2.

The story of the game probably was the heroics of the senior keeper, Todd "the Shoe" Shestok. Shestok turned away 47 of 52 Middlebury shots, with reflexes that mirror his ability on the remote. Not to be outdone, the Middlebury tender was able to keep out five of 30 tennis balls that were thrown to the ice after Connecticut's second goal. Smith said, "I am proud of the guys because we never gave up,"—which would have been easy to do.

The shaved heads of the freshmen were quickly a majority when the Cadets of the Norwich Academy shot down Route 32. The Camels came out flying with three unanswered goals in the first period. Scoring in the first were freshman Dave Watson, junior Curt Wilcox and senior Skip Miller, respectively. Over-

confident, the Camels let in two goals in the second period.

Going into the third, the hockey guys were holding on to a 3-2 lead. It was time to bury them.

The Camels scored twice, with Chris Abplanalp and Jean Labbe putting the puck between the pipes, and bringing home the win at 5-2.

The weekend was a success for the Camels. Chris Ruggiero said, "The weekend was an extreme success, and we hope to use the momentum in the upcoming tournament." A hard-fought game with Middlebury and a win against Norwich show that the Camels will be a team to watch this season.

The leadership is strong with Smith, Ruggiero, and Ant Segala as captains, and it will need to be given the relative youth of the team and the length of the season.

The team is looking to continue its winning ways this weekend in Middletown at Wesleyan. The Camels are battling the Turkeys from Amherst on Saturday. Depending on the outcome, the Camels could wind up in a match-up with the Oberman-led Jerks from Wesleyan.

Men's squash starts off strong

BY VIN FARRELL
The College Voice

After ending last season on a resounding note, winning the Loomis Chaffee trophy at the National Tournament, our Camels are looking forward to what potentially could be the best season in our program's history.

Men's squash began the season this past weekend at the Williams College Tournament. This tournament has proven to be an accurate measure of how the team will perform throughout the season.

Senior captains Glen Brenner and Brigham Keehner were more than satisfied with the team's performance. When asked about the weekend Brenner replied, "Our rigorous pre-season proved to be beneficial in preparing us for this tournament. All ten players were excited and ready to rock this weekend." In addition to the intensive training, the team also has a new coach, Alex Feller. Coach Feller, a recent graduate of Yale University, has been instrumental in honing the skills of each individual player as well as fostering team unity.

The team played five matches, of which they won two. They defeated Haverford 7-2, and Ohio Wesleyan 9-0. In both matches everyone played well enough so that neither team was a threat. The losses were to Columbia, Colby, and Fordham. All of these schools are deep throughout the ladder and the Camels had trouble defeating

them. However, many players had tough matches and lost by the narrowest of margins. Against Colby, Brigham Keehner played his best match of the weekend, taking his opponent to four games. Likewise, senior John Hanes had a great match against Fordham which turned into a rough match. In fact, Hanes' opponent drew blood on him with the racquet. When Hanes was questioned about the incident his only reply was, "It's athletes like him that violate the code of ethics that NESCAC obliges by." The greatest surprise of the weekend though was rookie sophomore Craig Hirokawa. After only six weeks of ever playing the sport, Craig won all five matches. Both his opponents in the Columbia and Colby matches were accomplished players who have been playing for a few years now. But Craig simply would not allow a better player to defeat him. Coach Feller, commenting on Craig's performance said, "Craig went into each match and pushed himself to another level. He is an incredible athlete who will mature into a great player."

Overall the team had a successful weekend and they learned that they can defeat the best teams such as Colby and Bowdoin. Although they need to jump to the next level of competition, the entire team is excited and prepared for the challenge.

The team has high expectations for the remainder of the season.



Sharyn Miskovitz/The College Voice

Women's Squash looks to their enthusiasm and determination.

Women's squash team trains hard for challenging season

BY ROBYN MANCUSO
Sports Editor

The women's squash team began its season with some disappointing losses in its first two matches of the year. Coach Sheryl Yeary and her team players traveled a long distance to Maine to meet Colby and Bowdoin in an exciting yet frustrating initial confrontation. Unfortunately, the team lost 0-9 to Bowdoin and 1-8 against Colby.

Congratulations to sophomore Laurie DeCosta for winning the only match of the week-

end.

With only four senior squash members, the team is faced with many challenges and a potentially difficult season after losing several valuable players last year.

"We are a very inexperienced team and Bowdoin's probably the best team on our schedule this year," said Yeary. However, although the new squash team is composed of many rookie players, including five freshmen, they have been practicing vigorously since the beginning of October at their voluntary captain's practices, fervently led by seniors Eliza Alsop

and Andrea Fisher.

The team officially began the season on November 1. The members are determined to discipline themselves through tough drill sessions in order to prepare for the season. For the underclassmen in particular, these sessions will provide the necessary experience and stamina needed for upcoming seasons. Despite a tough weekend, the team is anything but intimidated. Their primary intentions are to form a strong, cohesive team and to improve greatly over the season, and they've got the enthusiasm and determination to accomplish it.

Athletes of the Week

Special recognition must be awarded to Craig Hirokawa on the men's squash team. Craig won all five of his matches in his first season on the team and after having learned the sport only six weeks ago!