
Book Review

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The Myth of Laziness

By Mel Levine, MD
Simon & Schuster

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Dr. Mel Levine condenses more than thirty years of experience in the learning disabilities field to produce this profound book of wisdom. The central theme, reflected in the title, is that every human, child or adult, has an innate desire to be productive, to generate output that merits praise. "Therefore, when someone's output is too low, we shouldn't accuse or blame that individual. Instead, we should wonder what could be thwarting that person's output, obstructing his or her natural inborn inclination to produce."

In the effort to uncover those interfering factors, the author reflects upon his extensive experience in research, in the neurosciences, in private practice, in schools, and in other fields related to differences in learning. From the outset, he states that this is not a review of scientific literature, but rather an "examination and interpretation" of what he has learned, primarily from working with children and their parents.

To make his points, Dr. Levine employs dramatic narratives of distressed people who have been called lazy because they cannot produce the results expected of them at school or at work. Although these stories are based upon composite clients to provide anonymity, they all bear the stamp of truth. The perspective is always positive: people want to succeed. We are invited by the author to follow the step-by-step procedures that ultimately reveal the devastating flaws that interfere with productive output. Dr. Levine acts much like a detective, examining every available bit of evidence from school, medical records, and parental and client interviews before reaching a conclusion.

As an example of his careful task-analysis, Levine describes a case in which the need to use motor-memory interferes with academic work: "Writing inflicts one of school's heaviest drains on memory resources, and some kids lack the memory capacity to support writing. ...He could deploy sophisticated sentence structure when he spoke in class, but his language on paper was too simplistic, more like that of a much younger child. He displayed great pencil control in a maze, but he couldn't form letters legibly. Why? Drawing a line through a maze takes no memory, while letter formation requires you to rapidly recall the motor steps needed to form the letters."

He stresses that writing is a very important assessment tool, not only as a guide to imperfections of the motor system, but as an indicator of problems in the visual/auditory systems. Written output that is considerably less complex than verbal output may indicate severe problems requiring thorough examination.

Levine asks the following questions to help the reader in the search for possible limiting factors: “1. Could there be a motor breakdown? 2. Could there be a memory shortfall? 3. Could there be a verbal production problem? 4. Could there be an impairment in the generation of ideas? 5. Could there be poor regulation of mental energy and therefore low working capacity? 6. Could there be a weakness in the regulation of output (production control)? 7. Could there be instability and/or social distractibility deterring output? 8. Could there be a deficit in one or more forms of organization? And could there be a combination of several of the preceding phenomena?”

He does not overlook the importance of external factors in their influence on output. “It would be overly simplistic to assume that neurodevelopmental functions such as language, motor function, and memory make up our only output engines. These essential systems are perpetually interacting with a host of outside influences in daily life and in our immediate environment, as well as with our personal traits, feelings, and insights (or lack thereof) to determine the quality and amount of our output.”

Following a penetrating analysis of the expected tasks and the client’s abilities, Dr. Levine uncovers the client’s strengths and weaknesses. (How often have we seen evaluations that are little more than a list of standardized test scores?) In remediation, he always emphasizes the client’s strengths while trying to provide means of dealing with the weaknesses. Sometimes avoidance is the best answer.

Levine’s ideas on medication (sometimes useful, but never a substitute for accurate assessment and appropriate remediation) and the ideal school placement (impossible to achieve, but worth striving for) are both controversial and thought provoking.

This book clearly reminds us that Dr. Levine is one of America’s leading learning experts and it deserves an audience far beyond the boundaries of education and academia. Anyone who has experienced unexpected failure and wondered why will gain valuable insights into the causes of failure. He concludes: “Laziness is in the mind of the accuser; hopefully the target of an accusation of laziness will not respond by resigning himself to a low-output existence, thus fulfilling this accusation. . . . *The Myth of Laziness* is intended to offer help and hope to those with output failure and to provide some practical ways to immunize all individuals against it.” Dr. Levine has achieved his goal to a remarkable degree, producing a well-written book that is fascinating in its details, invaluable in its broader applications, and a pleasure to read. Having read it, educational therapists will want to have copies of *The Myth of Laziness* in their offices to lend to parents of their clients, or to their adult clients.

Owinda M. Thompson, MS, is an educational therapist in San Francisco who provides in-depth assessment and remediation to all age groups. Her background in speech and language, experience in both public school and hospital settings, and training in learning disabilities provides the basis for an eclectic approach to the remediation of learning problems. She has been a professional member of AET since 1985.