

# commentary

from other pens...

## Are missile defenses today's Maginot line?

By George Gedda

Associated Press Writer

WASHINGTON — It's probably just as well that Paul Maginot, French war minister in the late 1920s, never lived to see the sad result of what he thought was a surefire plan to protect his country from a German invasion.

His Maginot Line, stretching the length of the French-German border, was regarded as the most technologically advanced homeland defense in history. In 1940, eight years after Maginot's death, the Germans indeed invaded France but drove around the line, using Belgium as the entry point. Maginot's creation was reduced to irrelevance.

Robert Sherman, an arms expert at the Federation of American Scientists, believes President Bush's proposed missile defense system is no less fanciful than was the Maginot Line.

He poses the not-so-illusory hypothesis of a nuclear-equipped foreign aggressor who wishes to kill a large number of innocent Americans. The despot has the option of using an ICBM or clandestine delivery.

As for the latter, the aggressor could put the bomb in the hold of a merchant ship and explode it in an American harbor. Or he could put it in an airliner destined for a large city, or have it driven there in a rental truck.

"The ICBM would be more expensive, less accurate and much less reliable than clandestine delivery," Sherman writes in the federation's journal, Public Interest Report. "Even more important, the ICBM would leave an unmistakable return address, while clandestine delivery offers at least the possibility of anonymity."

Sherman's message: The ICBM threat is overstated so why should the United States, by developing a national missile defense, encourage aggressive tyrants to seek the safer, more effective clandestine alternative for striking at U.S. population centers?

Ah, but suppose the objective of enemy countries is not to kill innocent Americans but to alter U.S. foreign policy? Given the choice, perhaps most hostile governments would prefer the latter.

John E. McLaughlin, deputy director of the CIA, said in a speech in Alabama last week that an aggressive despot doesn't actually have to use his ICBM in order to extract political gains from the United States.

He notes that Iran, Iraq and North Korea are developing such weapons and suggests that the mere possibility of their use would complicate American decision-making in a crisis. He says it could — as a form of blackmail — prevent the United States from coming to the aid of friends and allies in such a situation.

These ICBM countries, McLaughlin says, may not even have to test their missiles in order to have the desired political impact.

"For them, it may be enough to demonstrate their capabilities in the form of a space launch vehicle — a strategy that could achieve the twin goals of deterrence and prestige without the political and economic costs that a long-range ballistic missile test might bring."

McLaughlin predicts the U.S. has some breathing room, but not much. "The intelligence community continues to project that as we progress through the next 15 years, our country most likely will face ICBM threats from North Korea, probably from Iran and possibly from Iraq" — barring significant changes in their political orientations.

Of these three, North Korea is the most likely to renounce the ICBM option. Pyongyang indicated to the United States last fall a willingness to curb missile development in exchange for economic benefits. But now it seems hesitant.

It has yet to respond to an offer by Bush almost three months ago to resume the discussions. Secretary of State Colin Powell says the administration is ready to resume the talks any time, any place.

Whatever the North Korean decision, the United States faces a long, bitter debate over the pluses and minuses of missile defense.

EDITOR'S NOTE — George Gedda has covered foreign affairs for The Associated Press since 1968.



## Mixing business with pleasure

The sign said:

Welcome Colorado Pharmacists High on Cats



cynthia haynes

• open season

when I arrived at the Colorado Pharmacy Association convention over the weekend in Denver.

It is my yearly opportunity to get continuing education, see old friends and keep up with the latest trends in pharmacy.

In the past, the groups met at places like Breckenridge, Copper Mountain or Beaver Creek — ski resorts with cheap summer prices. This year, though, the meetings were at the Holiday Inn at Denver International Airport.

I have to say, the ambiance just wasn't there, but the hotel was clean and cheap and it had a cat show going on at the same time.

High on Cats is the name of a Denver cat club. The show was sanctioned by the International Cat Association. (I bet you didn't even know there was such a thing — I didn't either.)

Our convention ran from Thursday to Saturday. The cat show was Saturday and Sunday.

On Friday, I picked up a Rocky Mountain News and saw the notice of the show. I thought it would be neat to go see some of the cats, but I wasn't

willing to risk my neck in Denver traffic to go across town for cats or anything else. Then I saw where the show was. It was on my doorstep. It was here, at this hotel.

Even if I hadn't seen the item in the paper, by Friday night I would have known something was up. Cats started arriving.

Now, I don't mean that there were Siamese and Tabbies lined up at the checkout counter. But on the elevators and in the halls, people started dragging in animal carriers. And through the walls you could hear plaintive meows of tired felines.

I talked to one lady who was just moving her cats into a room down the hall. She said that she was from California.

It takes a really devoted or really crazy cat lover to drag three show cats all the way from California to Denver in a car, I thought.

On Saturday, the procession of cats to the con-

vention hall was almost constant as we pharmacists filed into our classrooms to learn about the latest in medications. I had a hard time keeping my mind on the drugs. I was high on cats.

By mid afternoon, I was able to sneak out of the business meeting to go meet the cats.

They were everywhere — Burmese, bengals, Himalayans, manx, Persian, ragdolls, Siamese, tonkinese and alley. The Maine coon cat seemed to be one of the most popular breeds, but there were lots of household pets (plain cats, in other words.)

I talked to one young man. His big mixed-breed was from the shelter and he had just won a blue ribbon. He called his cat Andres Galarraga after the former Rockies first baseman because it was one big cat.

I checked out the cats and bought a pair of catnip mice, a toy cat and a mat that said "Slow Please, Cat Crossing."

I almost adopted a beautiful three-year-old female but wasn't sure how to get her home or how she would get along with Miss Mollie, the queen of the house.

The cat people thought the sign was funny. I'm not sure any of the other pharmacists got it.

Maybe I was the only one sniffing the catnip.

## Separating slogans and science

Now that school is starting again, we are seeing the yearly rash of articles about Ritalin.

Let me clarify that statement: We are seeing the yearly rash of articles about the ease — and even eagerness — with which parents put their children on Ritalin.

One notoriously zealous pediatrician, writing recently in Salon.com, argued that parents use medication as a "substitute for discipline, rewards and spending enough time with their kids." He said he found a "disturbing trend on the part of caregivers to reflexively regard drugs as the remedy of first choice."

Remedy of first choice.

I'm not sure which parents he knows, but I have yet to find one that grabbed at drugs as a remedy of first choice. On the contrary. I have seen parents with armloads of books on attention deficit hyperactivity disorder and its treatments. I have attended lectures on ADHD packed with parents hungry for information. I have seen mothers fighting back tears as they hand the school nurse their children's first dosages of Ritalin, knowing their child is now officially "different."

By the time most parents decide on medication, they understand that their child has a medical disorder. Not a behavioral problem. Not an America-in-the-New-Millennium problem. He has a failure



joan ryan

• commentary

in a mental mechanism. All the discipline in the world cannot change the child's brain any more than discipline can change a diabetic child's pancreas. If we readily give a diabetic child insulin to compensate for his physical dysfunction, why should we be any less vigilant about giving an ADHD child medication to compensate for his?

Here's what else I have seen: Children who have blossomed on medication. Children who finally have social lives because they can control their impulses, stay focused in a game, and read social cues. Children who finally can listen to a teacher and take a test and read a chapter without a thousand distractions and mind vacations. Children who finally understand that they aren't stupid.

Yet, now the Ritalin Reactionaries, which include the Church of Scientology, have persuaded some legislators that schools should not be allowed to mention medication to parents whose children exhibit symptoms of ADHD. In the New York

Times last Sunday, a front-page article reported that this restriction will become law in Connecticut in October. Similar bills have been introduced in five other states.

Think about this. Teachers, special education coordinators and school psychologists, who work with thousands of children over the course of their careers, cannot even suggest to parents that medication might be an option in helping their struggling child.

Such a prohibition indicates that these state legislators believe one of two things: That educators are too inept to recognize a serious abnormality, or that ADHD isn't a real medical condition. If the legislators contend ADHD isn't a real medical condition helped enormously by medication, they are ignoring 200 studies and more than 6,000 scientific articles on the topic. And if they do understand that ADHD is a medical condition, they are guilty of withholding critical health information from parents.

As with any medical condition, there are those who advocate alternative remedies to treat ADHD. Great. But enough with the "Say NO to Ritalin" bumper stickers. Surely our children are better served by trading in slogans for science.

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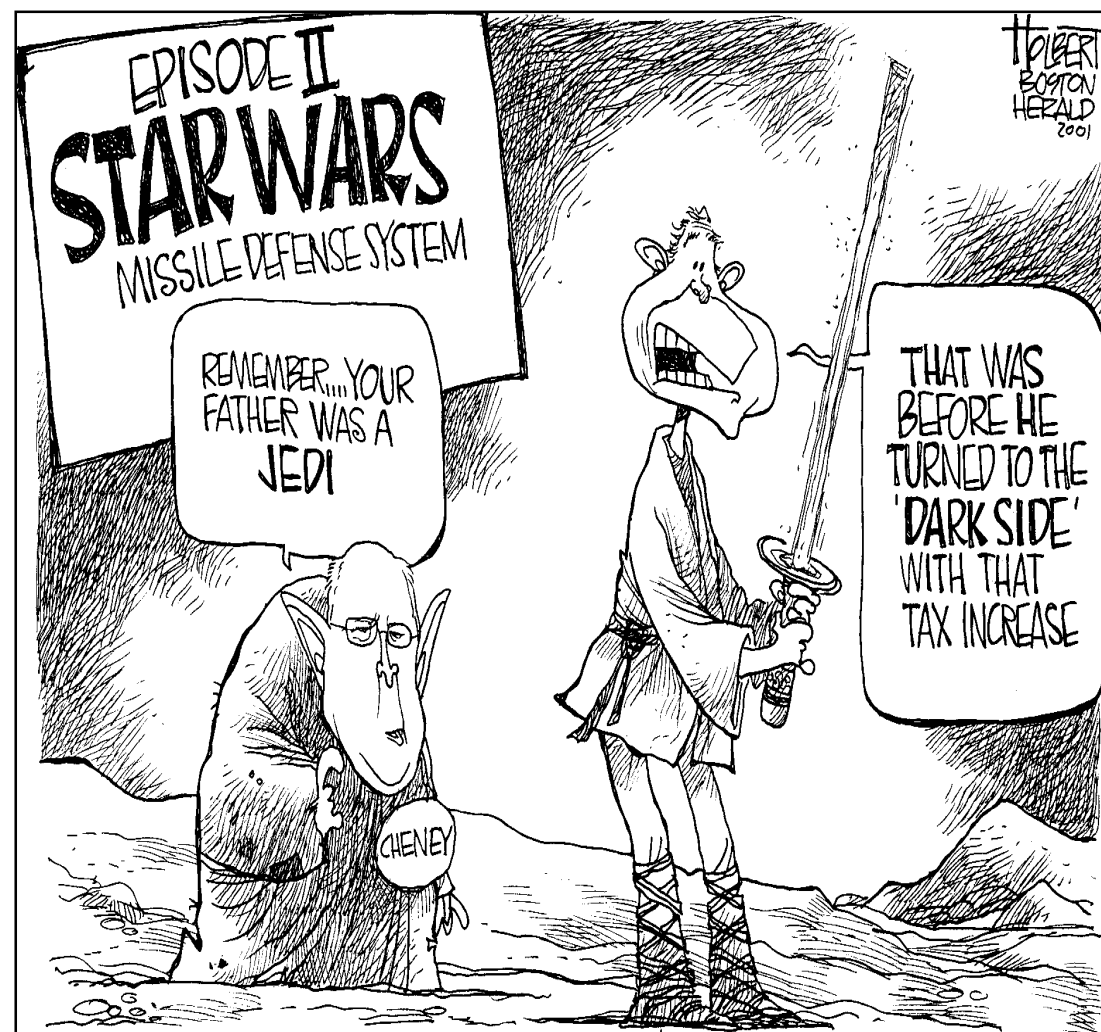
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