Examples of Counterarguments and Rebuttals

\*In longer persuasive papers, they may be written in multiple paragraphs.

 Many students argue that gum aids them with concentration during quizzes and tests, as well as focusing on classroom activities. They add that chewing gum, when used for this purpose, has its benefits. However, Dr. Ashley Carlson, an expert in gum chewing, recently completed a study to determine whether or not students’ quiz scores improved if students were allowed to chew gum during class. She concluded that “‘out of the two comparable testing groups, the students who were allowed to chew gum did not perform better than the non-gum chewing group’” (Carlson). More research needs to be done, but Carlson believes that chewing gum does not help students perform better academically. In fact, she, along with other researchers, believes that gum is a distraction in the classroom. Another gum chewing expert, Dr. Aiden Buchert from Young Gum Chewing Research Center, found that in his observations, “‘students who were chewing gum during class were far more likely to be off task, socializing, and messing around’” (Buchert). Students are often too immature to be allowed the privilege to chew gum and are often too tempted to play with it during class, try to borrow some from classmates, or even put it underneath their desks. Therefore, gum chewing advocates may claim that there are benefits; however, research clearly shows otherwise.

Those who oppose marijuana legalization claim that marijuana is a gateway drug. They believe that once someone tries marijuana, he or she will then move on to harder, more dangerous drugs and become an addict. According to Stacey Sugar, the clinical director at the Towson-based Maryland Addiction Recovery Network, “‘marijuana could be a gateway drug for some, but not everyone, and that a lot depends on the user and whether they are predisposed to addiction…Marijuana is the easiest drug to get a hold of after alcohol and cigarettes, and some of those who like a marijuana high may be more interested in trying other highs’” (qtd. in Synder). In other words, critics of marijuana legalization believe that once a person feels the altered experience of marijuana, he or she will want to experience the increased sensations of dangerous, potentially life-destroying and addictive drugs such as cocaine or methamphetamines. While it may be true that some people use marijuana as a gateway drug to move on to harder, more dangerous drugs, the truth of the matter is that marijuana is not the first addictive substance that users initially try: “A study published in the peer-reviewed Journal of School Health has concluded that the theory of a gateway drug is not associated with marijuana, but rather one of the most damaging and socially accepted drugs in the world, alcohol” (Scharff). In other words, alcohol is the drug and high that influences people to try harder, more addictive substances. Furthermore, the gateway theory deteriorates when one considers that drug dealers do not work at 7-11. If a person purchases marijuana in a safe, structured location like a convenience store instead of a back alley, there is no drug dealer to influence the purchaser to try other more dangerous drugs like cocaine or heroin. In reality, alcohol should be the focus of reform and recovery programs, and making marijuana legal will eliminate the gateway theory entirely.