

ANTI-DEPRESSANTS
ADDERALL BI-POLAR
ADHD RITALIN
ANXIETY DISORDER



ARE YOU HERE?

**Psychiatric Drugs &
Your Child's Future**

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Let's suppose a school administrator has contacted you to discuss your child's "troublesome" behavior in the classroom.

YOU ARE ALARMED.

You want to do the right thing.



In follow-up meetings, your child is **labeled** with a formidable sounding name (*ADHD: Attention Deficit Hyperactivity Disorder, Pervasive Development Disorder, Bi-polar, etc*).

It feels like you've just been told...

**YOUR CHILD HAS COME DOWN
WITH AN INCURABLE DISEASE.**



Your first instinct may be to dismiss the finding. Then again, these professionals have big **CREDENTIALS** and years of experience... so you listen. They want to prescribe Ritalin or Prozac (or any of numerous drugs) to fix the “disturbing” behavior.

You ask yourself...

“WHO AM I TO IGNORE AN EXPERT?”



At the same time, you realize you should not be rushed into this decision. Your child may be started down a road of drug dependency.

So you say...

NOT SO FAST!

WE NEED TO KNOW MORE.



Now you are at a crossroads. It's easy to feel overwhelmed by "experts" and let them make the decision for you. But in the area of your child,

YOU are the real expert.

No one knows him/her better than you. No one has invested more *time, effort* and *love*.

It's time to step back and look at your options.



Now you are here

The field of mental health presents you with a jungle of conflicting ideas. You have been (or will be) briefed on pharmaceutical remedies by people associated with the medical and psychiatric professions.

But there is DIVIDED OPINION within these two communities.



“Chemical imbalance” is often the rationale behind the psychiatric community's emphasis on drugs. Many professionals disagree:

“We know that the chemical imbalance model for mental illness has never been scientifically proven.”

Ty C. Colbert, PhD, clinical psychologist

“There are no tests available for assessing the chemical status of a living person's brain.”

Dr. Elliot Valenstein, Professor Emeritus of Psychology, University of Michigan



It is important to distinguish between provable medical conditions and those that fall under the **murky classification** of a psychiatric "disorder."

"In medicine, strict criteria exist for calling a condition a disease...in psychiatry we do not yet have proof of the cause of the physiology for any psychiatric diagnosis."

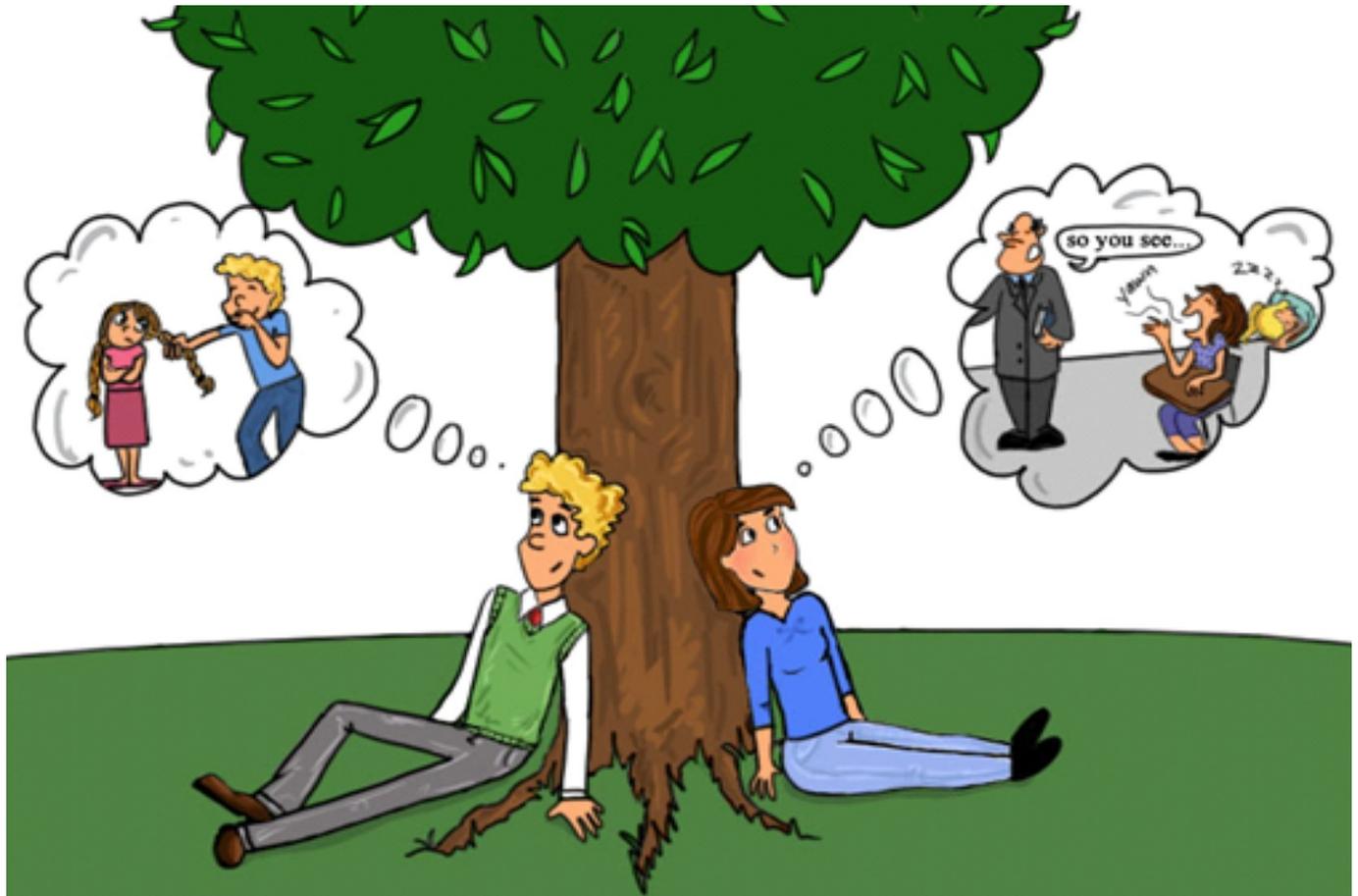
*Joseph Glenmullen
Harvard Medical School*



Drugging children in America has reached epidemic proportions. More than 8 million children and teenagers are prescribed psychiatric drugs: antidepressants, stimulants and antipsychotics. And the targets are getting younger. Children five years old and younger are the fastest growing segment of the non-adult population using antidepressants in the United States today. Many health professionals question this **rampant use** of pharmaceuticals on children.

“If there is no valid test for ADHD, no data proving ADHD is a brain dysfunction...why in the world are millions of children, teenagers and adults...being labeled with ADHD and prescribed drugs?”

Dr. Mary Ann Block, author of No More ADHD



Once you were a child. Take a moment to remember how bored and restless you felt in the classroom, how your youthful energy sometimes got you into trouble.

Did your parents put you on drugs to dull your aliveness? OF COURSE NOT!

The truth is, in MANY cases children acting disruptive is not a symptom of psychological or chemical disorder but...

A SYMPTOM OF CHILDHOOD!



According to Webster's *New World Dictionary*, the word pharmaceutical comes from the Greek word, pharmakeutikos, which means poisonous and, of all things, **"TO PRACTICE WITCHCRAFT."** Perhaps this should serve as a **"proceed with caution"** sign.

Knowledge of potential side effects of any drug **MUST** be a **KEY** issue and major concern. Go online to: www.nlm.nih.gov/medlineplus/druginformation.html or see a pharmacist to help you understand the insert for the medication that has been prescribed for your child.

SIDE EFFECTS listed can include **increased violence, suicidal tendencies, physical complications** and even **death**.

You must ask the question...

Do I really want to take the chance with my child?



“Okay,” you might say, “that's critical information but if we DON'T put our child on psychiatric ‘medications,’

“WHAT DO WE DO?”

Fair enough. We just want you to know,

THERE ARE OPTIONS.

If you're willing to do your homework, many answers to “troublesome” behavior can be found right in your own backyard.

THE SOLUTION MAY BE SURPRISINGLY PRACTICAL.



SCHOOL & SOCIAL ENVIRONMENT?

This may be where your child's trouble seems most pronounced so let's start there. Have you gone to **observe the classes, reviewed the curriculum?**

Go see the school administrator or the **teacher** who filed the initial report on your child. Ask the hard questions, but also **see for yourself.**

Are there children or adults outside the classroom, who invalidate your child?

TAKE THE TIME TO INVESTIGATE.



HOME?

This is a sensitive area but it is vital that you be honest with yourself about these questions. **Are there stressful elements within the family**—sibling rivalries, parental fighting, divorce, abuse, etc.? Does your child watch a lot of **violent TV** or **video games**? Have you worked on getting everyone to voice their issues, solve their differences through **communication**?



DIET & NUTRITION

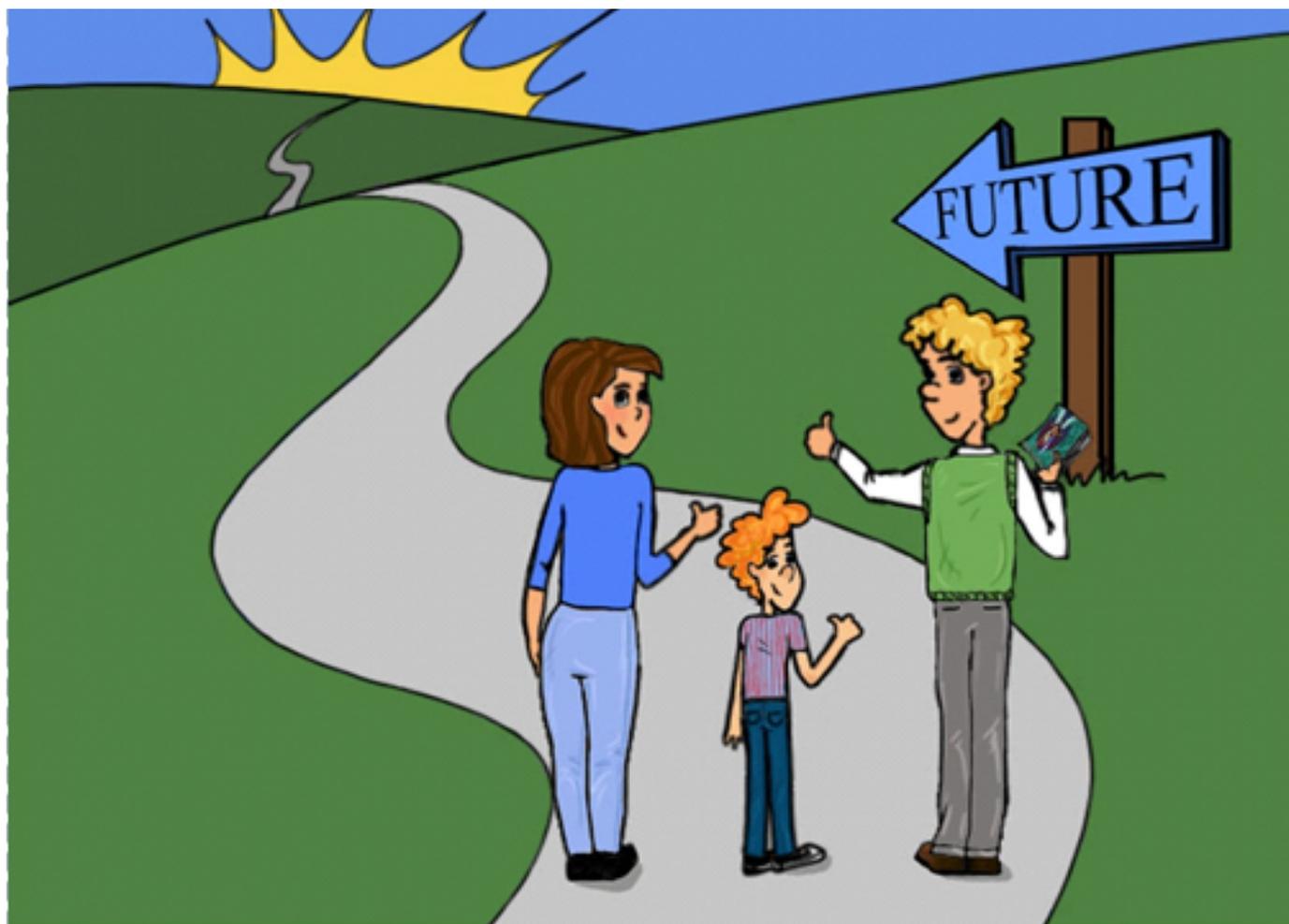
More and more evidence is leading professionals to see that **poor diet** and **lack of exercise** can have emotional and **behavioral consequences**. A diet loaded with **sugar**, for example, can make a child hyperactive and create “symptoms” normally associated with ADHD. So can lead poisoning. Likewise, **vitamin deficiencies** can cause a host of symptoms. Although there are different schools of thought, most health professionals will agree on the basics of a **healthy diet**.



MEDICAL & CHIROPRACTIC?

The possibility exists that your child has some form of **undiagnosed PHYSICAL problem** (such as allergies, parasites or even poor eyesight) that is influencing behavior. Ask your pediatrician to look for these things. A thorough medical check-up might expose some hidden causes that need attention. **Chiropractic physicians can also assist** in structural problems that may be causing unexpressed pain that may impact behavior.

IF YOU BEGIN WITH THIS CHECKLIST AND DO THE WORK DILIGENTLY, YOU WILL BE OFF TO A GREAT START.



Tough decisions lie ahead. The truth is, **the easy way is not always the best way**, especially where the fate of your child is concerned. Keeping your eye on his/her **LONG-TERM** physical, emotional and spiritual health should help you sort through the options and arrive at the best solution. We wish you all the success in the world.

When it comes to raising children,

Parents must always be the first defense and have the final word.

RECOMMENDED READING

Mental Health Care: What is the Alternative to Psychotropic Drugs, Citizens Commission on Human Rights (Los Angeles, CA), 2008, www.cchr.org.

The Side Effects of Common Psychiatric Drugs, Citizens Commission on Human Rights, 2006, www.cchr.org.

The ADHD Fraud: How Psychiatry Makes "Patients" Out of Normal Children, Fred A. Baughman Jr., MD with Craig Hovey, 2006, www.adhdfraud.org.

No More ADHD, Dr. Mary Ann Block (Block Books, Texas), 2001, www.blockcenter.com.

Is This Your Child?, Dr. Doris Rapp (Quill Publishing), 1991, www.drrapp.com.

CITIZENS COMMISSION ON HUMAN RIGHTS

The Citizens Commission on Human Rights (CCHR) was co-founded in 1969 by the Church of Scientology and Dr. Thomas Szasz, Professor of Psychiatry Emeritus, to investigate and expose psychiatric violations of human rights and to clean up the field of mental healing. Today, it has more than 250 chapters in 34 countries. Its board of advisors includes doctors, lawyers, educators, artists, business professionals and civil and human rights representatives.

CCHR has inspired and contributed to many hundreds of reforms by testifying before legislative hearings and conducting public hearings into psychiatric abuse, as well as by working with media, law enforcement and public officials the world over.

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