



Family Concerns

"Bridging the Information Gap"

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IT TAKES A VILLAGE TO RAISE A CHILD

The "government village" in the mental health screening of our children

"Government sponsored and controlled universal mental health screening, no matter how sweetly wrapped in the fig leaf of parental consent, should never, never be implemented. It is never EVER, the proper role of government to set norms for, assess or intervene in the thoughts of free citizens, much less innocent, vulnerable, and still developing children. It is our thoughts and emotions that make each of us uniquely and individually human, and we use those thoughts and emotions to understand the world and maintain our inalienable right to liberty."

(Dr. Karen Effrem, pediatrician, researcher and expert on the government's movement toward universal mental health screening)

Dr. Effrem's words echo the feelings of many Americans who are worried about the ever-increasing incursion of the federal government into their lives and the lives of their children. The 9th U.S. Circuit Court of Appeals recently ruled that when parents leave their children at the schoolhouse door they forfeit their parental rights; the school has a right to subject the children to surveys, etc. with or without parental consent. That ruling was softened somewhat by a review panel; nevertheless does nothing to assuage parent's concerns about what is happening to their children while in the custody of government schools.

Feds and children

It appears that their fears are not all unfounded when one examines the newest initiatives of the government to target America's youngest citizens for mental health screening. In some cases this is immediately after birth. In fact the prescriptions for psychotropic drugs prescribed for toddlers ages two to four-years-old, increased 300 percent from 1995-1997.

Myths and Facts

According to a report by Dr. Effrem this month, she is concerned about several federal programs that are in place and are in line for funding renewals. She reviews some of these programs on EdWatch's Web site: www.edwatch.org, and claims that there are many myths concerning mental health screening of children and attempts to refute these on the site. Some of the "myths" and "facts" are below:

- "The President's New Freedom Commission on Mental Health is not advocating widespread mental health screening."
Fact: The report of this commission frequently recommended *universal* screening and treatment for children, claiming that "schools must be partners in the mental health care of our children."
- "Informed parental consent is an important component of programs recommended by the NFC (New Freedom Commission)"
Fact: The committee's own report never uses the word "voluntary" in the context of screening and treatment and only uses the words "parental consent" once in a program that uses "opt-out" parental consent. Opt-out parental consent is considered valid if an opt-out form is not supplied; in other words the school considers no note as consent. In fact, in Mishawaka, Indiana teen, Chelsea Rhodes' participation in TeenScreen, a questionnaire developed by Columbia University to help detect early warning signs of mental illness did not seem right to her so she told her mother about the test. The test, which has an 84 percent "false positive" result, had been given to her class with questions like how much of a problem the teen has with feeling "nervous" or "afraid." TeenScreen uses a computerized self-administered test that takes about ten minutes

to complete. A sample question: "In the last year, has there been a time: 1) when nothing was fun for you and you just weren't interested in anything? 2) When you couldn't think clearly or as fast as usual? 3) Have you often felt nervous or uncomfortable when you have been with a group of children or young people, say like in the lunchroom at school or a party?" According to TeenScreen News in the Fall of 2003, "If the screening will be given to all students, as opposed to some, it becomes part of the curriculum (Emphasis Added) and *no longer requires parental consent* (i.e. if all ninth graders will be screened as a matter of policy, it is considered part of the curriculum)."

- "Psychiatric diagnostic criteria are scientifically validated and non-controversial among experts in the field."
Fact: Mental health criteria are very vague and subjective; according to the Surgeon General Report on Mental Health in 1999, "... what it means to be mentally healthy is subject to many different interpretations that are rooted in value judgments that may vary across cultures."
- "It is possible to accurately diagnose mental illness in young children, even infants."
Fact: Because of rapid developmental changes, it is very difficult to accurately diagnose young children. According to the Surgeon General's report, it is very hard because "the normally developing child hardly stays the same long enough to make stable measurements."
- "Children would never be labeled potentially violent on their worldview or politics."
Fact: A school violence program funded by the federal government, Early Warning, Timely Response lists "intolerance for others and prejudicial attitudes" as an early warning sign for violence and mental instability "... intense prejudice toward others based on racist, ethnic, religious, language, gender sexual orientation, ability and physical appearance when coupled with other factors may lead to violent assaults against those who are perceived to be different." In fact, the National Institute of Mental Health and the National Science Foundation concluded that traditionalists are mentally disturbed and social conservatives in particular suffer from 'mental rigidity' 'dogmatism', and uncertainty avoidance', together with other indicators for mental illness."
- "The decision to treat a child with psychotropic medications is always between a parent and their physician."
Fact: Twenty states have been forced to enact legislation that prohibits coercion because of the threats to the parents of child abuse to either place their child in psychiatric care or to continue psychotropic medications.

Texas Medication Algorithm Project (TMAP)

In addition the compendium of drugs available for use in the treatment of mental illness, TMAP, is comprised of a group of drugs that are extremely dangerous, requiring a "Black Box Warning" or impending FDA requirements of a "black box warning" for those taking the drugs. **The British Medical Journal** published an article by Jeanne Lenzer in 2004 that quoted Dr. Peter J. Welden, a member of TMAP treatment recommendations who said that guidelines for these drugs are based on "opinions, not data" and that bias due to funding sources undermines the credibility of the guidelines since "most of the guideline's authors have received support from the pharmaceutical industry."

Next *Family Concerns* outlines several of the federally-funded programs.