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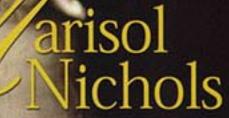
Adaptive Technology Conference

CONNIE STEVENS

Accesses Parks and Recreation to Draw Celebrities for CES Fundraiser

COMMUNICATION IN A TIME OF TRAGEDY

Verizon's Call to Action on September 11th



Actress Turned Activist Speaks Out Against the Psychiatric Drugging of School Children



US \$4.95 Canada \$5.95 Vol 2002 Marisol Nichols

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"I was one of those kids in class who was bored with the teaching. I didn't understand a lot. I missed some things early on. So, eventually, I started just not going. I needed some kind of creative outlet and I couldn't find one. So, I just left. So, I got labeled (through the school counselor) as having a behavior disorder because I didn't want to sit in class all day. Eventually, I was sent to a school for kids with cognitive disabilities. So, instead of being tutored or having one-on-one instruction, kids my age who were a little rebellious or didn't agree with everything were being bussed to schools where the education level was way too low. Nowadays, I would have just been given drugs and turned into a zombie."

here is a growing controversy surrounding the
"medicalizing" of childhood education. Schools
are increasingly viewing attention behavior and
academic performance challenges as symptoms of
underlying psychiatric diseases. Millions of school age
children are on psychiatric drugs. As drugs like Ritalin
become more and more prevalent, many feel that American education has gravitated away from finding educational solutions for educational problems. At a recent
legislative symposium held by the National Foundation
for Women Legislators, several speakers (including
keynote speaker Neil Bush) advocated non-drug alternatives to solving learning challenges.

Neil Bush is the founder, chairman, and CEO of Ignite! an education technology company that develops products to help educators teach standards-based material in ways that children learn best. Beyond being an entrepreneur, Neil describes himself as an "education evangelist." Neil's passion for education evolved out of his experiences both as a dyslexic student and a concerned parent of three children.

"Kids in my son's class are being drugged for a problem that they don't have," said Bush. "ADD and Ritalin have become this incredible epidemic, in my opinion. I understand that there have been two federal acts that have passed that have lead to the funding for the diagnosis for ADD. One in 1992, the Americans with Disabilities Act, was amended to include kids with ADD; and then there's the Individuals with Disabilities in Education Act, initiated by President Ford, that's coming up for reappropriation. There are these two piles of monies out there. Since 1992, there has been a grab-bag of attention to try to seek those funds, and kids that are diagnosed now with a learning disability category called ADD have the school rewarded with extra money!"

"I'd rather see that money used to figure out ways to engage kids. I'd rather see that money used to challenge great school principals and teachers and administrators all over the United States to find ways that take those special needs kids and give them the wings that they have that they were born with to fly as a learner."

"We have a lot of evidence from real scientists and real clinicians who can tell us what the impact is of these drugs on our kids. We know we can engage every single kid in the United States of America, if we engage the kids through a rigorous program that allows the kids to enjoy the many gifts they have for learning."

"In the real world, we don't hire people for their 'compliant factor', for their ability to memorize mindless stuff. We hire people who can be good citizens, can work with one another, can start a project, do independent research, get back together, collaborate and build stuff! We hire people that have a core competency, or we hire people who have a passion. And we're drugging that passion."



In March 2002, thanks to Rep. Katherine M. Bryson, Utah passed (House 66-4 and Senate 23-5) the strongest legislation in America putting restrictions on the recommendation of Ritalin for children by non-medical personnel. Her bill prohibits teachers from recommending or requiring psychotropic drugs for a child or recommending psychiatric treatment or evaluation for a child. Her bill further provides that the Division of Child and Family Services may not remove a child from his or her parents' custody because the parents refuse to drug their child.

"The first time that I realized there was any medication such as Ritalin was twenty years ago when I did longterm substitute teaching in the Bay Area," said Bryson. "I remember vividly my experiences with students who were being given Ritalin."

"These students would receive their doses during lunch, and come back to class in some sort of comatose state. In the morning they'd been enthused, and involved. Maybe someone might have viewed them as being a little over-enthusiastic, but from my perspective they were typical students."

"When I presented the bill in committee, I was a little uneducated and overwhelmed. I discovered there are a number of special interests that you are definitely affecting who will oppose you, such as the mental health industry. It's vital for legislators to educate themselves and realize that money is at the bottom of this opposition."

"We are labeling our children as disabled. This is the next generation of our country's leaders, and we are putting them in special education classes all because of funding. My feat is that, if we have grown to 8 million kids that are using these drugs, then what if that growth continued to happen? We must take action now. We must stand back, re-evaluate what's been done some 25 years ago with legislation on the federal level and ask, is this what we want? Is this what we intended? Or are we now eroding and doing things very damaging to the children of our country?"

John Breeding, Ph.D., an Austin, Texas-based psychologist, lectures and leads workshops for parents and educators on handling the challenge of a child who is labeled a "problem." His latest book is, "The Wildest Colts make the Best Horses" and he has published numerous newspaper and magazine articles on parents and children. Following are excerpts from his remarks.

"We are in the middle of an unprecedented event in the history of mankind. There's been an explosion in this country around the use of psychiatric drugs on children. In order to protect my own son and to defend and protect all of our children, I became active on this particular issue."

"Literally millions of our school age children are on psychiatric drugs today. I published an article estimating 8 million school age children are on psychiatric drugs."

"About two-thirds of them are on stimulant drugsthat's Ritalin, Halderol, the amphetamine-type drugs; many hundreds of thousands are now on adult antidepressants-the Prozacs, Paxils, Luvox. It's been demonstrated in simple research, and anecdotally we've seen over and over again, that one of the effects of these kinds of drugs is violence-either towards self or others-the school shooters that we see in Columbine, Colorado, or here in California-Stephen Ingrams; and in Oregon, Kip Kinkel. There is a consistent pattern of people on these drugs that affect seratonin and often induce psychotic behavior. This is serious business. Many of those children were on psychiatric drugs. If that estimate is even remotely accurate—that translates to 15 percent of our school age population on psychiatric drugs today. That's unbelievable."

"From a medical perspective, it's very simple. A physician, in order to make a differential diagnosis—you have to have some kind of objective criteria to distinguish between what is a disease and not a disease. With cancer, you have a cancer cell found in biopsy or not. You have cancer or you don't. With diabetes, you have blood-sugar abnormality or you don't."

"With Attention Deficit, or for that matter, with any of the psychiatric diagnoses of children, it's strictly based on subjective observation of a child, typically a behavior checklist. There is absolutely no scientific evidence that any of these so-called diseases that are forcing parents to give them drugs is based on scientific fact."

"It's presented in the media, it's presented to the public and accepted as if it is common knowledge and fact that these are legitimate illnesses. That's what justifies giving them medical treatment. So, I'm calling this fraud."

"Spirited children make for spirited adults; let's defend their spirits."



Interview

ABILITY's Chet Cooper had the chance to interview actress Marisol Nichols and Bruce Wiseman. They are both members of the Citizens' Commission on Human Rights (CCHR) which is an advocacy group that has taken up this controversial issue.

Chet Cooper: What attracted you to CCHR?

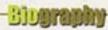
Marisol Nichols: I got involved with it because I have my own history of being mislabeled as someone with a behavior disorder, I didn't like that. I was told I had this problem and that problem and this problem—when none of it was true. I'm just an actor and I didn't know it. I was creative.

CC: A different drummer.

MN: Exactly. That's all. When I heard about CCHR, I was surprised to find that there's an organization that knows about this stuff. The main thing I was interested in was the fact that there are children even under the age of five being labeled with a mental disorder such as ADHD or ADD or chemical imbalance—yet with no blood work, no lab test, nothing. Students are merely observed and then put on these really powerful mindaltering drugs with side effects like violence, suicide, this, that, the other. And they're putting five-year-old kids on this? That does not seem right. My brother was put on a drug like that.

I don't understand why children aren't being taught to read. If a kid doesn't know the alphabet, damn right he's going to get fidgety in class. He's going to have trouble paying attention if he doesn't even know how to read. They took phonics out of the school. That's how I learned to read. You know...you sound out the word, you look it up in the dictionary to find out what the word means, and you put it together. And different









Born and raised in Chicago, Illinois, Marisol Nichols studied drama at the College of DuPage in Chicago. She was discovered by talent scouts in Chicago and moved to Los Angeles to star in the network series "My Guy."

On Wednesday nights, you can catch Nichols star as Victoria Santiago on Showtime's award-winning RESURRECTION BLVD, Nichols costained with Chevy Chase in the popular feature film "National Lampoon's Vegas Vacation" as his daughter Audrey Griswald. Her other feature film credits include "Scream 2,1" "Mafia," "Bowlinger," and "Can't Hardly Wait," with Jennifer Love Hewitt.

On television, she has guest-started on such series as "ER," "Diagnosis Murder," "Boy Meets World," "Malcolm and Eddie" and "Cybill."

Nichols costarred with Shannon Doherty in the television film "Friends "Till the End." Most recently, she completed a starring role apposite Edward James Olmos, Maria Conchita Alonsa and her RESURRECTION BUD: costar Nicholas Gonzolez in the Showtime Original Picture For All Ages "The Little Mermaid" directed by Tony Plana, who also stars in RESURREC-TION BUD.



letters of the alphabet make different sounds and that's how you know how it works. I don't understand why that isn't being used anymore. The kids are saying, "Oh, I have a disorder because the teacher said I do. I don't pay attention in class and I chew my pencil and my mind wanders." I mean, some of the characteristics of those being diagnosed are...

CC: ...I'm sorry. (staring out the window) Can you repeat that? (smile)

MN: Right! You have a disorder! (laughs) That's some of the criteria - mind wanders, fidgets in class, interrupts teacher. Anybody could be put under that. And then to be told they have a chemical imbalance? I mean, where's the lab test? Do they ever go to a doctor and get a physical examination for their chemical imbalance? No. It's a checklist that the teacher looks at. That makes no sense to me. That, to me, is totally wrong. Some parents are being told that if they don't put their child on it, their child is going to be taken away. That is wrong! There was a law that was passed in 1975 for disabled children in the schools. There was money given to help educate children who were blind, deaf, speech impediment, hearing impaired, etc. In the 90s, it included mental disabilities, such as ADHD. All this money is now being funneled towards that. It is no longer about disabled children that actually need the attention. It is more about having these kids getting their drugs every three hours.

The drugs are numbing the kids to where...these drugs are powerful, mind-altering drugs. So, if you have a kid that is bouncy and alive and wants to play, you've now subdued him. This is not an animal. This is a child. There are plenty of studies that interview parents that say, "Oh my god. My child is not the same. This is not my child." Half of these children were vibrant and alive. What did they eat before they came into class? You feed them Coca-Cola and donuts and then they go into the class and they're wild. Well, half of it is their diet. Do they have a food allergy? Get some kind of physical examination before you label a kid automatically disabled and give him drugs. Now, the kid will say, "Oh, well I can't learn because I have this problem." As opposed to, "Maybe I need a tutor."

CC: Tell me about your experience of being labeled with a behavioral disorder.

MN: I was one of those kids in class who was bored with the teaching. I didn't understand a lot. I missed some things early on. So, eventually, I started just not going. I needed some kind of creative outlet and I couldn't find one. So, I just left. So, I got labeled (through the school counselor) as having a behavior disorder because I didn't want to sit in class all day. Eventually, I was sent to a school for kids with cognitive disabilities. So, instead of being tutored or having one-on-one instruction, kids my age who were a little rebellious or didn't agree with everything were being bussed to schools where the education level was way too low. I

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was identified with all these labels. I didn't know I was aggressive. I didn't know I had low self-esteem. These are labels I carried around with me for ten years. I thought that that was me. What I really needed was some kind of tutor or somebody to explain to me why I can't figure out Algebra. I figured I was just dumb.

CC: How did you find your way out of that label?

MN: I found acting in junior college. I was still trying to figure out Algebra. (laughs) I tried out for a play and got the lead role. I was scared out of my mind and shocked. As soon as I started doing it, I thought, "Oh my God. This is fantastic! This is what I was looking for!" I changed all my classes to theater classes. I found what I was interested in and it just followed suit...that was it. It is interesting that I did this in college because in high school I would have never even tried because of the stigma I was carrying around with me. I thought I had some kind of disorder and that there was nothing I could do about it. Fortunately, drugs were not that prevalent. The kids on Ritalin were a little off and it seemed like the drug was making them like that. So, I never wanted to take it.

CC: What does the Citizens' Commission on Human Rights do?

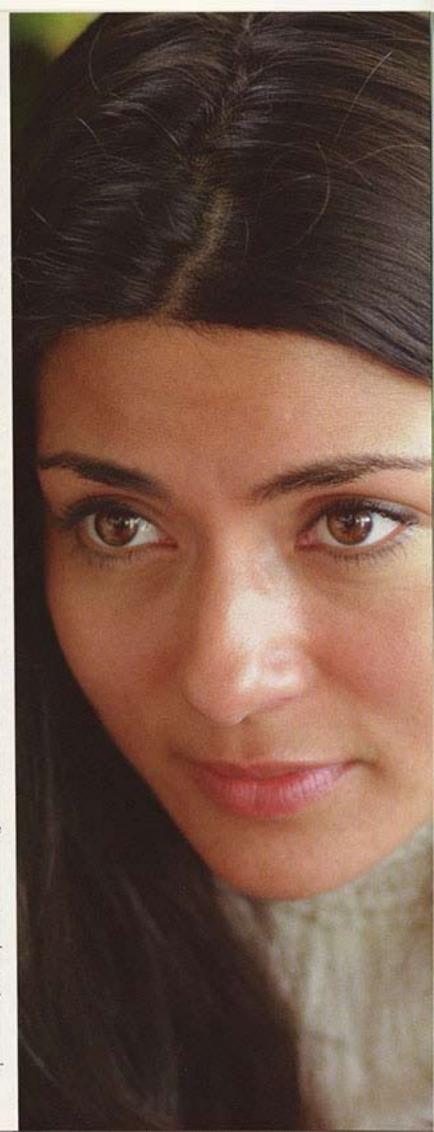
Bruce Wiseman: We are a psychiatric watchdog group. We investigate and expose psychiatric abuse and psychiatric violations of human rights. We work to clean up the field of mental health. We are an international group. We have 133 chapters in 30 countries around the world.

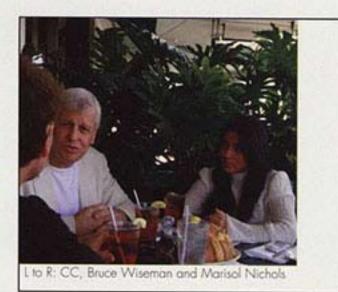
CC: Have you worked with the United Nations?

BW: Yes, We have worked with the UN in South Africa. We helped expose psychiatric slave camps. Under apartheid they were taking black South Africans, claiming that they were mentally ill and putting them in psychiatric hospitals and then turning them into slave labor. Our exposure of that brought the UN down there. We were commended by the UN.

CC: What does CCHR do to help the parents that come to you for support?

BW: There was one family that came to us after they refused to give their son, who was diagnosed with ADD, mind-altering drugs. The family was accused of child abuse for the refusal. Keep in mind that we have 8 million kids taking drugs that are classified as Schedule II narcotics. This is the same classification that opium, morphine and cocaine get. If the parent refuses to give the drug to their child, he or she may have their child taken away from them. The parents are accused of medical neglect, because they refuse to give their child these drugs. These stimulants are very close cousins to cocaine. When the child started taking a pre-





scription, the parents noticed an adverse reaction to the drug. Not a surprise—I think he was eight-years-old. So, the parents started to investigate. They took the child to a doctor and found that he was allergic. When he stopped taking the drug, the symptoms stopped. But, the school district continued to insist that the child was mentally ill and needed to be on drugs. In the end, the parents decided to home school their child.

CC: Did they want to home school or would the school not let him back?

BW: They wanted to home school. Eventually, the school came around and changed its stance. They didn't want the school labeling him. The boy is now a happy, precocious 12-year-old and he's doing great.

CC: How did you get involved with CCHR?

BW: Some friends of mine mentioned it. My wife and I saw first hand what was going on while investigating an adolescent psychiatric hospital in Nevada. There were a number of mothers who were complaining about their teenagers mouthing-off or whatever. The parents think they are going to get help by sending the kids to a psychiatric hospital. What they were doing to these kids in the hospital would make you weep. I mean it was just egregious. They would take a kid that would mouth-off or smart-off and inject him with an anti-psychotic. Antipsychotics are very debilitating, mind-altering drugs that affect the frontal lobes of the brain. The boy would be tied in hand and feet restraints and they would tickle him until he was hysterical. There were also cases of teenage girls being sexually abused. So, we got with mothers, got depositions, and turned them over to the district attorney's office. That was just the first investigation. I started doing a little more work with CCHR and I found that this was not unusual. If you were a fly on the wall of almost any psychiatric hospital in this country you'd find that kind of thing going on. I got more involved, became a spokesperson and in 1994 I became the national president. There's also an international president. I oversee from a public relations

standpoint. I speak before congress and various state legislatures.

MN: I was one of those children that was sent to a psychiatric hospital. My parents were told by my school that it would help.

BW: Marisol's case is not an atypical example.

MN: One of the things I wanted to do at CCHR was to be able to have the opportunity to go and talk to teenagers or parents of teenagers to tell them what I went through. Drugs are not necessarily the answer. Basically, if you are going to label someone with a chemical imbalance and say it is a physical disability—show me the lab tests. There needs to be proof that there is an imbalance—not just some teacher looking at you with a checklist. They call it a disease, without proof, and then give them a drug—as the only way to handle it. One of the things I want to do is to tell teenagers and parents my story.

Nancy Cartwright's [the voice of Bart Simpson] story is interesting. Her son's school told her that he had a mental disability and that he needed to be put on drugs. She said, "No," and she took him to an allergist. It turns out that he is allergic to wheat and sugar. She changed his diet and he was totally fine. It was that simple. This kid would have been on a powerful, mind-altering drug-Prozac, Zoloft, Ritalin-all because of allergies. A lot of the behaviors that the drugs are prescribed forobstinacy, argumentativeness, rebelliousness-are sometimes normal teenage stuff and it is wrong to label it as a disease. Also, many side effects from the drugs are the same symptoms that the drugs are prescribed for-violence, suicide. Plus, the drugs are addictive. The parents aren't told this when they are put on drugs. To take a kid off the drugs they have to be weaned off. That's pretty scary for an 8-year-old that maybe just needed a tutor.



BW: Before the Iron Curtain went down, if a person went into Red Square and said, "Communism Stinks," the person would be diagnosed with Vyalo Tekuschaya Shezophrenia. This was a Soviet psychiatric diagnosis. The symptoms of which were rebelliousness, desire to emigrate, negative opinions of communism, etc. The person would be put in a psychiatric institution and put on drugs. As, soon as the patient accepted that they were sick, they were free to go. Now, look at the symptoms of Vyalo Tekuschaya Shezophrenia and compare them to a couple of diagnoses in the Diagnostic Statistical Manual of Mental Disorders that is used in American psychiatry. Oppositional Defiance Disorder is a mental illness. Conduct Disorder is a mental illness. What is Conduct Disorder? The kid doesn't want to take out the garbage. He mouths-off to his parents. He swears. He doesn't want to do his work. Come on. These may be issues of discipline. They may be issues of ethics. They are not mental illnesses. But, you can find psychiatric hospitals across the country where kids are drugged and so forth because they have ADD. This is political. You have millions of kids in this country who fidget in class or whatever and they are given a label. The Education for All Handicapped Children Act which was passed in 1975 was designed for kids with physical disabilities - sight problems, hearing problems, mobility problems. Today, the law has been renamed and 70% of the kids in special education have a learning disorder. What does learning disorder mean? They are learning disabled. Really? What does learning disabled mean? What is the definition? It means the kid isn't reading at their grade level. He's not doing his math up to grade level. So, let's drug him and get him the hell out? No! Teach him to read. Those that have actual disabilities, by all means, are those that the money should be spent on. That was Congress' initial intent, 80% of the kids in special education have some kind of problem with reading. Don't drug them. Teach them to read.

MN: When I was in high school, 14-years-old, the school decided that since I was rebellious that I should be sent to a psychiatric hospital. The school told my parents that they needed to send me. The next thing I know, I'm in an orange jumpsuit in a hospital in Chicago with other kids my age. We had group therapy, oneon-one therapy and family counseling. Every single day they would go through same thing, "Why are you here?" Every day I would say the same thing, "I am here because I ran away from home. I didn't want to go to school. I yelled at my parents. Please send me home. I will never do it again." I was very sorry for my actions. Put a teenager in jail and they will get very sorry, quickly. Every time they would say, "No. You are not working on your problem." And they would go on to some other kid. I was labeled a "bad kid" because I kept telling them why I was there. So, I noticed that the other kids were saying, "Well, I'm here because my Dad abused me. My parents didn't love me." That sort of thing. After six weeks in the hospital, I saw that kids were rewarded by saying that they were victims of other



people's actions—that it is other people's fault, not yours. I observed that and thought, "Oh. That's the way it is." I started thinking that maybe my parents were bad parents. Maybe there are some things that happened to me that I don't know about. So, I started to tell them that my parents didn't love me. I was told that I was finally working on my problem. But, I had it right from the beginning. I was there because I blew off school, I just needed some kind of outlet. Give me a sport, give me theater, give me a book to read. Nowadays, I would have just been given drugs and turned into a zombie.

It is becoming normal to have a mental disorder! You've got to be kidding me! Why would you take a drug that physically alters your brain without a lab test to give proof of the disorder? To demonstrate that someone has diabetes, it takes tests that determine blood sugar levels and other tests. You don't just say, "You like sugar a lot. You must be diabetic. Here take this insulin." Are you kidding? That's the direction it is going.

BW: Is it going to reach the point where kids cannot get into school without being on a mind-altering drug? I mean, talk about Brave New World. Step back and take a look at this. It's a little bit scary. They are telling parents that their kids are not allowed in school without drugs. It has become so pervasive. That is why we are focused on this particular issue.



The National Council on Disability

The National Council on Disability (NCD) is an independent federal agency mandated to make recommendations to the President and Congress on disability issues. NCD endorses and supports the principles of independent living, which has achieved the success it has because it is rooted in two unwavering principles: selfdetermination and consumer direction.

NCD recognizes that people with psychiatric disabilities are routinely deprived of their rights in a way no other disability group has been. In order to learn more about the problems of psychiatric disability, NCD conducted a hearing specifically on this topic. At the hearing, held in Albany, New York, in November 1998, NCD heard testimony from mental health professionals, lawyers, advocates, and relatives of people with psychiatric disabilities. However, unlike most investigations on the topic of psychiatric disability, the primary participants in this hearing were people with psychiatric disabilities themselves, who testified passionately and eloquently both about the mistreatment they had experienced or witnessed, and their proposals for real and viable change. NCD heard testimony graphically describing how people with psychiatric disabilities have been beaten, shocked, isolated, incarcerated, restricted, raped, deprived of food and bathroom privileges, and physically

and psychologically abused in institutions and in their communities. The testimony pointed to the inescapable fact that people with psychiatric disabilities are systematically and routinely deprived of their rights, and treated as less than full citizens or full human beings.

NCD Core Recommendations

NCD has developed 10 core recommendations. These deeply held core beliefs form, however, a dynamic backdrop to highlight the human and civil rights of people who have experienced the mental health systempeople who should be viewed as the true experts.

- 1. Laws that allow the use of involuntary treatments such as forced drugging and inpatient and outpatient commitment should be viewed as inherently suspect.
- People labeled with psychiatric disabilities should have a major role in the direction and control of programs and services designed for their benefit.
- Mental health treatment should be about healing, not punishment. Accordingly, the use of aversive treatments, including physical and chemical restraints, seclusion, and similar techniques that restrict freedom of