
EDITORIAL

The White House Conference on Mental Health

The White House Conference on Mental Health held June 7, 1999 was a major political event. Keynote speakers included President Bill Clinton, First Lady Hillary Clinton, Vice President Al Gore, and his wife Tipper who, as the President's Adviser on Mental Health, was the driving force (White House Conference on Mental Health, 1999; also see Breggin, 2000).

The impact of the conference continues to reverberate through the mental health system. It influenced the subsequent Surgeon General's report on mental health (U.S. Department of Health and Human Services, 1999) and will lead to a new "educational" campaign directed at the public schools of the nation in the year 2000.

The conference was billed as an attempt to overcome stigma attached to "mental illnesses" and purported to address the causes of the tragic school shootings. However, The White House Conference on Mental Health was, in fact, a showcase for biological psychiatry and included:

- Misidentifying emotional distress and misbehavior as genetically and biologically based.
- Mistakenly equating "treatment" with psychiatric drugs.
- Dismissing neglect, trauma, abuse and other extreme stressors as having no significant effect upon the emotional well-being of children.
- Falsely linking violence to "biologically based mental illness."
- Ignoring psychiatric drugs as a cause of violence.
- Planning a nationwide video-satellite "educational program" to train teachers to identify even more millions of children for referral to health professionals for psychiatric drugs.

Children received special focus during this event. Hillary Clinton opened the discussion about children and advocated forced treatment: ". . . I think that part of what we've got to do, though, is reflect how we can both identify and get help to children who need it, whether or not they want it or are willing to accept it. I think all of us have the tragedy at Littleton in mind . . ."

Referring to the mass school shooting in Colorado, keynote speaker child psychiatrist Harold Koplewicz, declared:

The real tragedy of Littleton is that—and in these other recent incidents of school violence—is that they're most probably preventable. Normal children just don't snap and go out on a shooting spree. Children who commit violent crimes almost always have histories of violence, depression or other mental health problems. And, unfortunately, schools and parents ignore psychiatric illness. . . . The problem is that we have never really looked at the underlying cause of all this violence, which is childhood psychiatric illness, which is a tremendous problem—12% of the population under the age of 18—that's about 8 million children, teenagers, in the United States today—have a diagnosable psychiatric illness. And that means that about 2 million children have depression, teenagers have depression. (White House Conference on Mental Health, 2000)

Koplewicz, a professor at New York University, failed to acknowledge that several million children are already being psychiatrically treated with stimulant drugs such as Ritalin®, Dexedrine® and Adderall® and that another million or so are being treated with Prozac® and Prozac-like drugs (Zoloft®, Paxil®, Celexa®) for everything from depression to shyness. Koplewicz revealed himself to be a dogmatic biological psychiatrist when he stated:

It's hard to believe that until 20 years ago we still believed that inadequate parenting and bad childhood traumas were the cause of psychiatric illness in children. And in fact, even though we know better today, that antiquated way of thinking is still out there, so that people who wouldn't dream of blaming parents for other types of disease, like their child's diabetes or asthma, still embrace the notion that somehow absent fathers, working mothers, overpermissive parents are the cause of psychiatric illness in children. . . . And the only way we can change that is through more public awareness. I mean, essentially, these are no-fault brain disorders. These diseases are physiological, they respond to medicine.

To dismiss “bad childhood traumas” as a cause of mental disturbance requires ignoring vast scientific literature documenting the effects of abuse, neglect, disaster and other stressors on the emotional well-being of children (for example, Bloom & Reichert, 1998; Herman, 1992; van der Kolk, McFarlane, & Weisaeth, 1996). To so thoroughly reject the impact of childhood emotional, physical, and sexual trauma is scientifically insupportable.

Never has the White House so directly and publicly embraced and promoted the genetic and biological theory of human distress and advocated psychiatric drug treatment.

Koplewicz described three actions needed to fight “brain diseases”: Identify the cost of non-treatment, educate children in middle school about mental illness, and launch a national public awareness campaign so that mental illnesses are understood as well as heart disease. These three steps are actually marketing actions that modern corporations take to sell a product. The products being sold are psychiatric drugs as “treatments” for “mental illness as brain disease.”

Meanwhile, every speaker present at the White House Conference ignored the fact that a number of the boys responsible for the school shootings were already receiving psychiatric treatment and several had been treated with drugs. For example, Eric Harris of Littleton, Colorado, was taking the Prozac-like drug Luvox[®] for depression. T. J. Solomon, who fired on his fellow students at Heritage High School in Conyers, Georgia, was taking the stimulant drug Ritalin[®]. Kip Kinkel, the boy who killed his parents and opened fire at his Oregon school on May 21, 1998, was probably taking Prozac[®] sometime before and Ritalin[®] at the time of the shootings (reviewed in Breggin, 2000).

In children and adolescents stimulants and antidepressants can produce a dangerous psychosis called mania, as well as lesser degrees of euphoria, agitation, and anger (American Psychiatric Association, 1994, pp. 329, 331, and 371). Mania is often accompanied by God-like feelings of power, insensitivity to others, paranoia, and aggression. Those experiencing mania can make grandiose plans and become "physically assaultive or suicidal" (American Psychiatric Association, 1994, pp. 329-30). Fluoxetine (Prozac[®]) has been the most thoroughly studied as a cause of aggression, violence, and mania in children (for example, Jain, Birmaher, Garcia, Al-Shabbout, & Ryan, 1992; King et al., 1991; Riddle et al., 1990-1991; reviewed in Breggin, 2000). Despite many psychiatric drug-related episodes of teen violence there was no discussion at the White House Conference about any possible relationship between the drugs and the violence.

President Bill Clinton spoke at the conference and announced plans for a massive new federal mental health program to be implemented through the schools. The President stated:

The tragedy at Columbine High School, as Hillary said, was for all of us a wake-up call. We simply can't afford to wait until tragedy strikes to reach out to troubled young people. Today, I'm pleased to announce a new national school safety training program for teachers, schools and communities, to help us identify troubled children, and provide them better school mental health services. . . . This new program is the result of a remarkable partnership by the National Education Association, EchoStar, and members of the Learning First Alliance, joined by the Departments of Education, Justice, and Health and Human Services. This fall, the Vice President and Tipper will kick off the first training session, which will be transmitted via satellite to more than 1,000 communities around our nation. (White House Conference on Mental Health, 1999).

Although the President identified this initiative as a "school safety program," its clear purpose is to bring America's children further under the umbrella of biological psychiatry. Informed sources have told me that the administration now plans the implementation of the program within the first few months of 2000.

As a nation, we are being misled by the simple-minded hypothesis that complex human suffering is the result of faulty brain chemistry or genetics. Indeed, as the new century begins, there is still no convincing evidence that links any so-called 'mental illness' to a biological or genetic defect (e.g., Joseph, 1999; Siebert, 1999).

The brain scan studies presented at the White House Conference that purported to show 'abnormal' brains have no scientific basis. Patients in these or similar studies have often been exposed to psychiatric drugs. What has been scientifically proven at this time is that many psychiatric drugs cause brain changes including, in some cases, brain cell death (Breggin, 1997, 1999).

Whether the White House embraced biological psychiatry out of naiveté or out of self-interested accommodation to the powerful psychiatric and drug company lobby, it is leading our country into a dangerous era of social control of our children through chemistry. More harm than good will come to the children of America if the White House program succeeds in helping teachers and counselors to identify even greater numbers of children for psychiatric treatment.

Psychiatric drugs did not help or stop those boys who shot their classmates and teachers and probably contributed to their actions. Establishing federal programs that will result in additional diagnosis and drugging of America's children will not heal the other troubled youngsters in our midst.

America needs to open its arms and embrace all our children through authentic relationship and human services that meet their genuine needs for meaningful relationships with adults, safe homes and schools, inspiring education, and happiness. We also need to address larger societal issues such as poverty, inadequate health care, sexism, and racism.

REFERENCES

- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders, fourth edition (DSM-IV)*. Washington, DC: American Psychiatric Association.
- Bloom, S. L., & Reichert, M. (1998). *Bearing witness: Violence and collective responsibility*. New York: Haworth Press.
- Breggin, P. R. (1997). *Brain-disabling treatments in psychiatry: Drugs, electroshock, and the role of the FDA*. New York: Springer Publishing.
- Breggin, P. R. (1998). *Talking back to Ritalin*. Monroe, ME: Common Courage Press.
- Breggin, P. R. (1999). Psychostimulants in the treatment of children diagnosed with ADHD: Risks and mechanism of action. *International Journal of Risk and Safety in Medicine*, 12(1), 3-35.
- Breggin, P. R. (2000). *Reclaiming our children: A healing solution for a nation in crisis*. Cambridge, MA: Perseus Books.
- Herman, J. L. (1992). *Trauma and recovery*. New York: Basic Books.
- Jain, U., Birmaher, B., Garcia, M., Al-Shabbout, M., & Ryan, N. (1992). Fluoxetine in children and adolescents with mood disorders: A chart review of efficacy and adverse effects. *Journal of Child and Adolescent Psychopharmacology*, 2, 259-265.
- Joseph, J. (1999). The genetic theory of schizophrenia: A critical overview. *Ethical Human Sciences and Services*, 1, 119-145.
- King, R. A., Riddle, M. A., Chappell, P. B., Hardin, M. T., Anderson, G. M., Lombroso, P., & Scahill, L. (1991). Emergence of self-destructive phenomena in children and adolescents during fluoxetine treatment. *Journal of the American Academy of Child and Adolescent Psychiatry*, 30, 179-186.

- Riddle, M. A., King, R. A., Hardin, M. T., Scahill, L., Ort, S., Chappell, P., Rasmusson, A., & Leckman, J. F. (1990-1991). Behavioral side effects of fluoxetine in children and adolescents. *Journal of Child and Adolescent Psychopharmacology*, *1*, 193-198.
- Siebert, A. (1999) Brain disease hypothesis for schizophrenia disconfirmed by all evidence. *Ethical Human Sciences and Services*, *1*, 179-189
- U.S. Department of Health and Human Services. (1999). *Mental health: A report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health Institute of Mental Health.
- van der Kolk, B. A., McFarlane, A. C., & Weisaeth, L. (Eds.). (1996). *Traumatic stress: The effects of overwhelming experience on mind, body and society*. New York: Guilford.
- White House Conference on mental Health. (1999, June 7). Press release from the White House. Remarks by the President, First Lady, the Vice President and Mrs. Gore. Washington, DC: Author

PETER R. BREGGIN, MD
Editor-in-Chief
Bethesda, MD, USA