

FACTS ABOUT THE DANGERS OF MENTAL HEALTH SCREENING IN SCHOOLS



CITIZENS COMMISSION ON HUMAN RIGHTS

6616 Sunset Blvd, Los Angeles, CA. USA 90028

Telephone: (323) 467-4242

Fax: (323) 467-3720

E-mail: contact@cchr.org

FACTS ABOUT THE DANGERS OF MENTAL HEALTH SCREENING IN SCHOOLS

Mental health screening asks young students embarrassing, personal and potentially upsetting questions that psychiatrists have worded in such a way that no student could escape being labeled mentally ill at some point during their education. These questionnaires can result in psychological or psychiatric intervention in the lives of a child and his or her family—often against their will or under threat. Psychiatrists and psychologists have also pressured teachers to conduct these screenings on students.

Mental Health Screening is based on the subjective and unscientific diagnostic system developed by psychiatrists predominantly with financial ties to the pharmaceutical industry. Today, such screening has become so much a part of many school systems that few people question the Brave New World ramifications it represents.

- In 2003, the U.S. Freedom Commission on Mental Health Report recommended that all 52 million American schoolchildren be “screened” for “mental illness,” claiming—without proof—that “early detection, assessment, and links with treatment” could “prevent mental health problems from worsening.” Treatment ultimately means drugs that can create lifetime “psychiatric” patients.
- In February 2009, the European Parliament passed a resolution endorsing 50 points to increase mental health awareness and services in Europe, including “screening for mental health problems in general health services” and “early detection [screening] and treatment of mental health problems in vulnerable groups, with particular reference to minors.”
- In Australia, the psychiatric front group, Beyond Blue, mailed a “depression screening” card to every household in the country, based on subjective questions that could identify half the population as needing antidepressants.
- “Depression Screening Days” have been implemented in many countries. More than a quarter of those screened at thousands of sites later start taking antidepressants. Pharmaceutical companies fund the organizers of these screening days. One group, Screening for Mental Health in the United States, took in almost \$5 million from at least seven different drug companies—all makers of psychotropic drugs given to children.
- In the UK, there were recommendations to screen for antisocial behavior pre-birth and to prevent babies being born into “high risk” families. Home visits to new mothers would also include psychiatric screening. “Anti-Social Behavior Orders” target teens for behavioral issues and if they fail to comply with these court orders, they face jail.
- Studies now show that once referred to and in front of a psychiatrist, nine out of ten children are prescribed a psychotropic drug.

This is the Brave New World of mental health screening.

- Dr. Julian Whitaker, M.D., founder of the Whitaker Wellness Institute in California says the mental health industry uses student mental health screening results to get access to millions more new patients—students. “It’s business, not child ‘care,’” he said.
- Dr. David Shaffer of Columbia University, the psychiatrist who invented one screening program, “TeenScreen,” admits it has a potential 84 percent chance of wrongly identifying teens to be at risk of suicide. He has long-term ties to drug companies and is a consultant for Hoffman La Roche, Wyeth and GlaxoSmithKline.
- Psychiatrists redefine childhood behavior and educational problems as “disorders” in order to claim insurance reimbursements. Literally by a vote, they decide which disorder should be included in their Diagnostic and Statistical Manual for Mental Disorders (DSM). As a result, 20 million children worldwide are now prescribed psychotropic drugs that are known to cause hallucinations, psychosis, aggression, hostility, anxiety, depression, life-threatening diabetes, heart irregularities and suicide.

Parents should know that if psychiatrists or psychologists are using schools to test or assess their child, they have the right to say no and to refuse to have their child tested or drugged. The only groups to benefit from such screenings and coercive drug treatments are psychiatry and the pharmaceutical industry. Parents should unite to get psychiatric screening expelled from schools. They can start by signing a Parent’s Exemption Form Prior to Mental Health and Psychological Screening or Counseling that prevents their child from undergoing mental health screening that could lead to pharmaceutical intervention.

“Achieving the Promise: Transforming Mental Health Care in America,” The President’s New Freedom Commission on Mental Health Report, 22 July 2003.
 European Parliament resolution of 19 February 2009 on Mental Health (2008/2209(INI)).
 Melody Petersen, Our Daily Meds, (Farrer, Straus and Giroux, 2008), pp 56; Screening for Mental Health – Home Page, web URL <http://www.mentalhealthscreening.org/>, accessed Oct 2009;
 John Carey, “Do Legalized Drug Pushers Influence TeenScreen?” American Chronicle, Jan 08, 2007; Evelyn Pringle, “The Mothers Act Disease Mongering Campaign - Part IV,” Natural News, August 27 2009.
 “Anti-Social Act,” www.advicenow.org.uk; Robert Stevens, “Council of Europe Condemns British Government on Human Rights,” 1 Aug. 1005, www.worldproutassembly.org/archives/2005; “Blair ‘to tackle jobs before they’re born,’” Daily Express, 1 Sept. 2006.
 LAWRENCE DILLER, M.D., “Antidepressants and Children’s Depression,” American Psychiatric Association, Vol. 162, June 2005, Citing: Stubbe DE, Thomas WJ: A survey of early-career child and adolescent psychiatrists: professional activities and perceptions. J Am Acad Child Adolescent Psychiatry 2002; 41:123–130;
 Video Interview with Citizens Commission on Human Rights International, 2004.
 Vera Sharav, “TeenScreen - ‘Under Intense Criticism Nationally,’” Alliance for Human Research Protection, 11 March 2006.