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**Psychiatric Drugs
For Troubled Children
Versus Commonsense Solutions**

www.peter-lehmann.de/inter

1) Psychiatric interventions

More and more psychiatric diagnoses and drugs for children

Example Switzerland, Canton Neuenburg 1996-2000:

- Amount of methylphenidate administration 690 % ↑
- Number of patients (between 5 and 14) 470 % ↑
- Dose per patient 41 % ↑

1) Psychiatric interventions

Methylphenidate (abusive) use:

- Dizziness, toxic psychosis, psychotic episodes
- Headache, drowsiness
- Tachycardia, anorexia, loss of appetite
- Dyskinesia
- Tolerance / Psychic dependence

Marc Rufer in “Alternatives beyond psychiatry”:

“Increasingly younger children are becoming the focus of ‘psychosis hunters’: for example, children who get noticed in school due to their social withdrawal, lack of concentration and performance difficulties, are scheduled for blood tests to identify susceptibility genes; i.e., gene combinations that are being correlated with a ‘risk for the disease.’ If there are any risk indicators, the children are prescribed neuroleptics to prevent a supposedly threatening psychosis.”

2) Commonsense solutions

Bruce Levine: Not metabolic imbalances,
but life problems:

Powerlessness

boredom

attention starvation

emotional pain

revenge for injustice

lack of life skills

loss of respect

parental emotional difficulties

physical deprivations

lack of community

Bruce Levine:

- need for power and dignity
- how to achieve power in constructive ways
- help in discovering, what is interesting and nourishing
- gain awareness of experience of injustice
- recognize the children's talents
- nutrition, physical activity, fresh air, sleep
- strengthen the parent-child bond
- regain the respect of the children
- acceptance of all emotions / setting limits
- at least one adult with respect and affection

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3) In case of support, conflicts are programmed

Not new techniques, new paradigms or new models.

But foreground issues to do with power and relationships, with contexts and meanings, with values and priorities.

*Pat Bracken in “Beyond models, beyond paradigms—
The radical interpretation of recovery”*

3) In case of support, conflicts are programmed

Seth Farber in

“When the children’s psychiatrist comes”:

Lock the door. Hide. Run away. Resist.

Don’t get crazy. Speak.

Believe your own perceptions.

Don’t get impressed by diploma, titles and white coats.

Seek allies. Don’t let your child go alone.

Reject recorded talks and information.

Get legal information.

Information about risks, damages and alternatives.

The right to say no.

1660, James Nayler:

“There is a spirit which I feel that delights to do no evil, nor to revenge any wrong ...”

2008:

“Somewhere there is a spirit which I feel that delights to do a lot of evil. Let us be aware of this harassment and plead for commonsense solutions without psychotropic drugs and manipulations, but with an humanistic approach.”

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