



The Real Root of School Violence

In the brave new world of the very near future, children will enter their public schools passing police checkpoints, surveillance cameras, metal detectors, X-ray scanners and warrantless physical searches. Parents will relax, knowing their child is now "SAFE." No violent evildoers will be able to get past that wall of security.

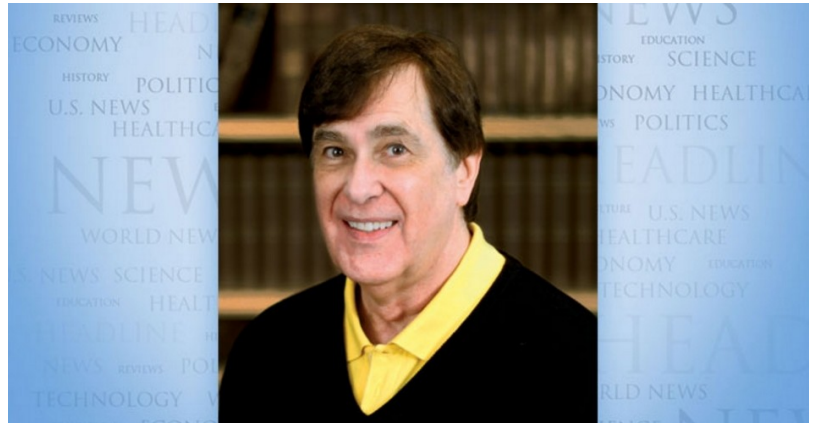
But what none of the checkpoints, scanners and cameras will detect is the child who walks right past, armed to the teeth with a hidden weapon actually enforced on him by the school itself. The weapon comes in many names and varieties: Ritalin, Luvox, Prozac, Zoloft, Cymbalta, Paxil, and more. Each weapon lovingly loaded into their child by concerned parents before they send them off to their "safe" school. And while the child's backpack and pockets are checked by the armed force on the way in, the pharmaceutical poison is building up in his blood system, racing to the brain like a lit dynamite fuse.

As communities reel from one massive act of student violence after another, most recently in Newtown, Connecticut, the nation looks for answers. How many are looking at the schools themselves as the conduit through which millions of students are drugged with mind-altering drugs?

Some history. In 1965, the passage of the Elementary and Secondary Education Act (ESEA) changed education forever as the seeds for today's massive restructuring — away from academics to behavior modification — began. It was psychology's crowning moment. The ESEA allocated massive federal funds and opened school doors to a flood of psychiatrists, psychologists, social workers and the psychiatric programs and testing needed to validate them. The number of educational psychologists in the U.S. increased from 455 in 1969 to 16,146 in 1992. As of 1994, child psychologists, psychiatrists, counselors and special educators in and around U.S. public schools nearly out-number teachers.

To date, there has never been issued a single peer-reviewed scientific paper officially claiming to prove ADD/ADHD exists. Nor has there ever been a single bit of physical evidence to confirm the disease exists. So-called experts on the subject have refused to answer the simple question, "is ADD/ADHD a real disease?" Medical researchers charge that ADHD does not meet the medical definition of a disease or syndrome or anything organic or biologic.

Yet, in 1991, eligibility rules for federal education grants were changed to provide schools with \$400 in annual grant money for each child diagnosed with ADHD. That same year the Department of Education formally recognized ADHD as a handicap and directed all state education officers to establish





Written by [Tom DeWeese](#) on January 14, 2013

procedures to screen and identify ADHD children and provide them with special education and psychological services. As a result, the number of ADD/ADHD cases soared again.

Today more than 7,000,000 children have been labeled, tamped and registered as permanent patients of the school system. Ten to twelve percent of all boys between the ages of 6 and 14 in the United States have been diagnosed as having ADD. One in every 30 Americans between the ages of 5 and 19 years old has a prescription for Ritalin. And the fuse burns as the “patients” sit in the classroom.

AS THE USE OF PSYCHIATRIC DRUGS RISE — SO TOO DO CHILD SUICIDES

Children are dying. Not just in shootings, but in rising incidents of suicide. Here are some details:

[A November 1997 medical report found](#): “The association between benzodiazepine use and attempted suicide is especially high for ... the young, and for males...” In the [April 1996 Australian and New Zealand Journal of Psychiatry](#), a study found that “the older tricyclic antidepressants are a significant cause of suicide” and accounted for the majority of antidepressant deaths studied between 1986 and 1990.

[A December 1996 French study](#) entitled, “Suicide and psychotropic drugs,” established that “suicide attempts are more frequent among patients taking antidepressants....”

In Denmark, with a huge usage of psychotropic drugs, the suicide rate is twice the rate of that in the United States....

In the U.S., teen suicides have tripled since 1960; today, suicide is the second leading cause of death....

In Israel, between 1981 and 1994, the estimated suicide rate for 15- to 19-year-old Jewish boys increased by about 183 percent. (Tellingly, the suicide rate dropped 10 percent during a 1997 period when Israel’s psychologists went on strike.)

Australia’s suicide rate increased between 1960 and 1967 when legislation was passed to enable a person to obtain multiple prescriptions for sedatives. When the law was modified in 1967 to restrict the practice, there was a decrease in per capita sedative usage and a decline in suicide rates.

Are we hearing an outcry from that tragedy? Are there calls for stopping, banning, regulating the use of these mind-altering drugs? Is the pharmaceutical industry being called on the carpet? Are there emergency congressional hearings being held to showcase the heads of big pharma as murdering criminals? Not on your life.

As the nation is outraged over the school shootings, demanding that something be done, guns become the target, not the drugs that filled the child’s mind with delusions to take such horrific action. Meanwhile the gun sits innocently in the corner, unmoving, unable to cause damage — until the real loaded weapon — the drugged student — picks it up.

[Click here to view the full list with detailed information on the connection between drugs and school shootings.](#)

Tom DeWeese is one of the nation’s leading advocates of individual liberty, free enterprise, private property rights, personal privacy, back-to-basics education and American sovereignty and independence. Go to americanpolicy.org for more information.



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