

Does Your Child have A.D.H.D.?

Children are largest population of involuntary mental patients. According to Lidia Wasowicz, a Senior Science Writer for United Press International:

"The National Center for Health Statistics reports some 3 million tykes and teens under 18 were taking **three or more prescription drugs** during the study month in 2002." (Wasowicz, 2007)

Just by making children into psychiatric patients, therapists can cause irreparable harm. Children are often devastated when they believe they are a misfit in their peer group.

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Note: All emphasis in quotes are mine.

What is ADHD

Could ADHD simply be a coping device for children in what they perceive is a detention camp?

John Holt, the late school critic, described passive-aggressive strategies employed by prisoners in concentration camps and slaves on plantations, as well as some children in classrooms. Holt pointed out that subjects may attempt to appease their rulers while still satisfying some part of their own desire for dignity "by putting on a mask, by acting much more stupid and incompetent than they really are, by denying their rulers the full use of their intelligence and ability, by declaring their minds and spirits free of their enslaved bodies." (Levine, 2008)

"The core clinical symptoms [of ADHD] are problems in attentional behavior, impulsivity and motor activity." (Cantwell, 1988) These are big words and simply mean that your six year old is acting like a six year old. However, we did not always think of a six year-olds behavior as symptoms of a mental illness. In the 1940s we looked at children quite differently, for instance, in the teacher's edition of *Happy Days with Our Friends* (Curriculum from the Dick and Jane series) we find:

"But though it is true that there is no typical child, **there are certain characteristics which do seem to be predominant in the six-year-old group** and which do give us an indication of what we can expect from many of these youngsters."

So while there was no *typical child*, what were the predominant characteristics that those developing curriculum for children expected from youngsters in the 1940s?

"Activity is an outstanding trait of the six-year-olds, Children at this age rush about in their play, jump up from the table at mealtimes, **wriggle in their seats at school**, gesture freely as they talk. Their whole bodies seem to be involved in everything they do. **When they read**, their lips move, **their feet shuffle**, and they twist their fingers in their hair. **When they write**, they may screw up their faces, bite their lips, and **pull themselves back and forth in their chairs**. **They may try hard to sit still, but they are not able to do so** long because **it is difficult for them to control their motions voluntarily**. **It is clearly unwise to put a strain on these youngsters by expecting them to sit still** for more than a short period of time. Restlessness at home and at school is often a sign that not enough opportunity for activity is being provided." (Elizabeth Montgomery, W. W. Bauer, M.D., and William S. Gray)

Today, our public schools medicate millions of children because they wriggling in their seats, shuffling their feet and pulling themselves back and forth in their chairs while futilely trying to sit still.

"Even in their thinking, six-year-olds seem to carry over this pattern of activity. **They learn much better through being active** than through sitting and listening. ..." (Ibid)

From the late forties to the late seventies there was a shift. Up until 1980, the doctor may have implied that your child had brain damage if he had a short attention span. According Dennis P. Cantwell, MD in the Journal of Chemical Dependency Treatment:

"Various terms have been used to describe this syndrome in the past. The term "Attention Deficit Disorder" was used for the first time officially in the *Diagnostic and Statistical Manual of Mental*

Disorders, Third Edition (DSM-III) in 1980 ... Earlier terms tended to be terms that emphasized possible etiologic [science of causes] factors rather than a behavioral picture. **The "brain damage behavior syndrome" was an early term used to describe this condition.** The implication was that brain damage of one type or another was the etiologic [causing] factor that led to this particular cluster of symptoms of attentional, impulsivity, and motor abnormalities.

As Cantwell will point out they called it "*brain damage behavior syndrome*" without any physical evidence of brain damage.

"While it is true that children with definite brain damage have high rates of psychiatric disorder compared to children in the general population, ... **Moreover, no particular behavioral picture, including the ADDH syndrome, can be used by itself to indicate that brain damage is indeed present.**

"As these facts became known with more systematic research, terms were softened. Brain damage behavior syndrome became '**minimal brain damage**,' which implied that brain damage must be the etiology [cause] of the disorder, **but since it could not be found by standard means, the brain damage must be minimal.** This term was later succeeded by minimal brain dysfunction (an even softer term). Here the implication was that there may not be actual central nervous system structural damage, but there was some type of dysfunction or dysfunctions of the central nervous system which were minimal. **Obviously, this is a rather grab bag term.** Central nervous system function is not a unitary phenomenon, and **we have no way of quantifying 'brain dysfunction'** so that putting a term such as 'minimal' in front of a term like 'brain dysfunction' really tells us nothing about the disorder." (Cantwell, 1988)

In simple words, up till the 1940, if your child could not sit still and pay attention he was normal, During the 1980s, if your child could not sit still, he was probably brain damaged. Since 1980, the experts admitting that they did not really know anything substantial about ADHD, backed off a little calling it "minimal brain damage". Since then the direction has been to toward a chemical imbalance. The one thing most of the psychiatric community seems to agree on is that the child needs medication.

ADHD is not a chemical imbalance

Continuing a few chapters later in the *Journal of Chemical Dependency Treatment*:

"The earliest etiologic views [earliest causes they thought] of this disorder were that it was a type of brain damage or brain dysfunction [as noted above]. It is clear now that only a minority of ADD children have hard signs of brain damage. The minimal brain dysfunction grab bag has given way to more detailed expositions such as involvement of central monoamines by the study of metabolites and studies of central nervous system arousal with neurophysiological studies." (Baughman, 2006)

All those big words aside, the doctor will diagnose your child with ADHD if he believes the child is too active, has a hard time paying attention or disrupts school. This is how doctors diagnose ADHD, in other words they do not use a brain scan or blood test or that mythological test looking for a chemical imbalance. If your doctor says your child had a chemical imbalance, ask to see the lab test. If he says your child has *Minimal Brain Dysfunction*, ask to see both a brain scan, and a double blind study that shows brain scans to be effective in diagnosing ADHD.

According to Fred Baughman, a retired child neurologist, and March of Dimes/National Foundation scholar, who testified in March 2006 at the US Food and Drug Administration:

"Nowhere in the brains or bodies of children said to have ADHD or any other psychiatric diagnosis has a disorder/disease been confirmed." (ibid)

In *Driven to Distraction*, the authors Drs. Edward M. Hallowell and John J. Ratey write:

"Attentional deficit disorder lives in the biology of the brain and the central nervous system. ... **The exact mechanism underlying ADD remains unknown.**" (Hallowell & Ratey, 1994)

Some psychiatrists would like us to think that chemical imbalances cause ADHD, like this quote from Dr. Edward Hallowell.

"[C. Kornetsky] in 1970 proposed the Catecholamine Hypothesis of Hyperactivity. Catecholamines are a class of compounds that includes the neurotransmitters norepinephrine and dopamine. Since the stimulants affect the norepinephrine and dopamine neurotransmitter systems by increasing the amount of these neurotransmitters, Kornetsky concluded that ADD possibly was caused by an underproduction or underutilization of these neurotransmitters. Although this hypothesis is still tenable, biochemical studies and clinical tests of neurotransmitter metabolites in urine **over the past two decades have not been able to document the specific role of the catecholamines in ADD.**" (Hallowell & Ratey, 1994)

When an intellect starts talking like this, one wonders if he understands what he is saying. Perhaps, he does not want you to understand what he is really saying. What did he say is the cause of ADHD was? He continues by saying that it is a chemical imbalance, though we cannot measure chemical imbalances.

"So can we say that ADD is a chemical imbalance? Like most questions in psychiatry, the answer is yes and then again no. No, we have not found a good way to measure the specific imbalances in the neurotransmitter systems that may be responsible for the ADD." (ibid)

He goes on to say he believes in the chemical imbalance theory anyway. If someone you know was told they have ADHD and that it is a chemical imbalance, ask how this imbalance was measured.

According to Jonathan Leo & Jeffrey R. Lacasse (in plain English) from [The Media and the Chemical Imbalance Theory of Depression](#),

"In spite of the enormous amount of money and time that has been spent in the quest to confirm the chemical imbalance theory, **direct proof has never materialized.**"

Leo and Lacasse searched weekly on the internet for "*chemical imbalances*". They looked up the references, or asked the authors for citations. At the end of their yearlong study, they state:

"There is not a single **peer-reviewed** article that can **accurately be cited** to directly support claims of serotonin deficiency [chemical imbalance] **in any mental disorder.**"

If this is so, why does *chemical imbalance* seem to be an established fact? Does this mantra sell the chemical cure? As Americans, do we want our cure in the shape of a pill? Does believing in chemical imbalances help parents to accept their child's behavior, without taking responsibility?

Brain scans do not diagnose ADHD

A Consensus Conference Panel for The National Institutes of Health concluded:

"We do not have a valid test for ADHD... there are **no data to indicate that ADHD is a brain malfunction.**" (Baughman, 2006)

After 30 years and new imaging studies published at a rate of more than 500 per year; with another image researcher announcing another finding every week, relating to depression, anxiety or ADHD it is time to look at the results. While brain scans are a useful to for finding medical problems like brain tumors, they do not find behavioral problems.

"**PROMISING, NOT YET PRACTICAL** Researchers have scanned the brains of patients with illnesses including depression, schizophrenia and attention deficit disorder, hoping to find patterns. But so far, **scanning has not yielded reliable ways to diagnose or treat disorders.** [...]"

"What looks like a "hot spot" of activity change in one person's brain may be a normal change in someone else's.

"The differences observed are not in and of themselves outside the range of variation seen in the normal population," said Dr. Jeffrey Lieberman, chairman of the psychiatry department at Columbia University Medical Center and director of the New York State Psychiatric Institute." (Carey B. , 2005)

While some doctors may claim that brain scans help them diagnose ADHD, the truth is that the three main reasons they are used is:

First, to eliminate medical conditions that may be causing the symptoms.

Second, brain scans at costs of more than one thousand dollars each are big money.

Third, charlatans use the images to convince the naive that their mental illness has a biological basis and will respond to medication or other therapies. "They increase compliance with treatment and decrease the shame and guilt" associated with the disorders. (Carey B., 2005) In 2004 there were over twenty-nine million prescriptions written in the United States for Ritalin and similar drugs to treat attention deficit disorder and hyperactivity, twenty-three million of them for children. (Lehrman, 2005)

Some possible causes of ADHD

There are many things to look at if you wish to improve your child's behavior, increase his learning abilities and attention span. First, let us look at the child's environment.

Diet

If you believe your child is hyperactive (or always tired), his diet should be looked at. If a murderer can use a Twinkie defense provided to him by his psychiatrist, they must know the importance of a good diet. Diet should be one of the first things the medical community should suggest, not just for ADHD, but also for all behavioral disorders.

For instance, if you [Google: Celiac disease and ADHD](#) you will find that many parents talked of behavioral symptoms disappearing from their children when they removed gluten from the child's diet. Gluten is found in wheat, rye, barley and other grains, it is an ingredient in many processed foods. My wife is a Celiac and her main symptom is heart arrhythmia.

One American, in a letter to the editor, describes the problem of our diet when he said:

"Not only is Big Pharma at it here, but so is that industry of corn syrup, sugar and white flour/processed foods, and the government does nothing about it. I was in the grocery store behind a couple with **a hyperactive three year old, their groceries consisted of 8-10 bottles of name brand soda and sugary cereals** of which they paid for with food stamps."

Another news story dated September 17, 2007 on NPR

'Your kids could become hyper because of the coloring in their food. That's the results of **a new study suggesting that reducing food additives could decrease hyperactive behavior** in children. Dr. Sydney Spiesel speaks with Madeleine Brand about the study's findings." (Spiesel, 2007)

Why spend money on new studies, when we do not apply what we have learned from the old ones. Researchers have implicated sugar, dyes and food additives in hyperactive behavior for over twenty years.

"Environmental influences such as lead at a subclinical level and various aspects of the diet (sugar, dyes, and food additives) have been implicated by some clinicians and researchers." (Cantwell, 1988)

Other child experts report the same thing. The question for school administrators is; do we serve raspberries or Ritalin?

"Sue Slaon, in the United Kingdom, says, "We don't sell candy and snacks anymore. Our teachers noticed that snacks, which were high in artificial flavoring and additives, were affecting the students' mood. After any break teachers had to spend a lot of energy in getting the children settled. Now, since we decided not to sell sweets and fizzy drinks in our tuck (snack) shop — since five years — they notice that it's much easier to keep the children concentrated. Teachers say it's less noisy, there's less aggression and learning performances appear to have gone up. In the shop it's much more quiet now." (Slaon, 2005)

Another educator noticed the same thing.

"In the Central Alternative High School [in Wisconsin]. The kids now behave. The hallways aren't frantic. Even the teachers are happy. The school used to be out of control. But in 1997 they removed the vending machines. Fast foods were replaced with fresh foods and a balanced diet. According to a newsletter called Pure Facts, 'Grades are up, truancy is no longer a problem, arguments are rare, and teachers are able to spend their time teaching.'"

"Principal Coenen sums it up: 'I can't buy the argument that it's too costly for schools to provide good nutrition for their students. I found that one cost will reduce another. I don't have the vandalism. I don't have the litter. I don't have the need for high security.' "

(Coenen, 2005)

What a strange idea, eating healthy food puts us in a better mood and helps our concentration.

Lack of sleep may cause hyperactive children

Ritalin, a *stimulant*, is the main medication used to treat the hyperactive symptoms of ADHD in children. Could some children be hyperactive because they are sleepy? Could their excessive activity be an unconscious way of trying to stay alert? This is the conclusion of Dr. Giora Pillar of the Technion Faculty of Medicine; he explains that this is why stimulants, which induce alertness, are effective for treating children with ADHD.

Pillar and his researchers found that children diagnosed with ADHD had significantly higher levels of sleepiness during the day than those in the control group. The study found that half of the children with ADHD had some type of sleep-disordered breathing, such as sleep apnea vs. 22% of the control group. He also said that treating these sleep disorders often leads to substantial improvements in behavior and cognitive achievements, and a significant reduction in irritability, bad moods, anger and fear. (Pillar, 2005)

If your children are hyperactive and have trouble paying attention, enforce good sleeping habits and remove caffeine from their diet. If you suspect your child has a sleeping disorder like [sleep apnea](#), a trip to a medical doctor may be in order.

Divorce puts children at risk

"University of Alberta sociologist Dr. Lisa Stroschein, in a study appearing in the *Canadian Medical Association Journal*, found that children with divorced parents are nearly twice as likely to be prescribed Ritalin compared to children whose parents remain together." (CTV.ca News Staff, 2008)

It is interesting that the article says that children were "twice as likely to be prescribed Ritalin", not "twice as likely to be diagnosed with ADHD". There are many reasons for this, one is, parents who are divorcing are not being good parents. If they lack the skill to be a good spouse they may for the same reason lack the skill or desire to be a good parent.

Living in a black neighborhood puts children at risk

According to ACCURACY in MEDIA:

"There is a disproportionate concentration of psychotropic drug use among African-American males, with a New York study reporting that **African-American boys are 11 times** more likely to be placed on mind-altering drugs." (Stotts, 2007)

We have two choices here. The first, African-American boys have 11 times more mental disorders than other racial groups in New York. The second possibility is that the psychiatric community is incapable of policing itself, has found an easy mark in the black community and is making big dollars at the children's expense.

It were better for him that a millstone were hanged about his neck, and he cast into the sea, than that he should offend one of these little ones. - Luke 17:2

The foster care system places children at risk

When you become a foster parent, you submit to strict state guidelines on raising and disciplining children. Often, these guidelines do not work. Then instead of taking responsibility and looking at parents who have raised healthy children, the state blames the foster child and medicates him. **Nearly two thirds of the foster children in some states are medicated.** Again according to ACCURACY in MEDIA:

"Texas Comptroller Carole Keeton Strayhorn found that **60% of Texas foster-care** participants were receiving antipsychotic drugs." (ibid)

AND

"According to the ICSP, nearly **2/3 of Massachusetts foster children and 55% of Florida foster** children take psychiatric drugs beginning as early as **3 years old.**" (ibid)

This is not just a different opinion on raising children; these drugs are dangerous. As a country we are reaping what we have sown.

The public school classroom itself causes ADHD

A specialist in education Dr. Samuel L. Blumenfeld has shown the main cause of ADHD. He explains the problem very clearly.

"Believe it or not, there was no such thing as ADD or ADHD when I was going to school back in the 1930s and '40s. In fact, you couldn't possibly have Attention Deficit Disorder in the kind of classrooms I was in. First of all, all of the desks and seats were bolted to the floor. You couldn't move them. Also, the walls were generally bare. Maybe a picture of George Washington, or a map. Otherwise there was nothing on the walls to distract anyone. The room was as clean and orderly as a pin.

"The room was also silent. You were not permitted to talk to your fellow classmates during class. The teacher was the focus of attention. She sat at her desk in front of the class and exercised a benign, no-nonsense discipline on all of us. She taught us all the same thing, from the blackboard or a textbook, and she used rational methods of teaching, methods that had been proven over the centuries to produce academic results. [...]

"Thus, there was no ADD. Any impulsive behavior would have landed you in the principal's office. But now, let's fast forward to 1999 and enter a typical first-grade classroom in today's public school. The kids are no longer seated in rows in desks bolted to the floor. **They are now seated around tables, interacting with each other, pestering each other, chatting, interrupting.** Each child is doing something different. One may be writing, another reading, another drawing. One child may be under a table reading a book; another may be sprawled on the floor drawing a large picture. Several children may be working on a project.

"The walls are now covered with every conceivable kind of distraction: dinosaurs, Mickey Mouse, bulletin boards, pictures of animals, travel posters, you name it. Then there are fish tanks, gerbils, and rabbits to grab one's attention. Mobiles hang from the ceiling, swaying in the breeze. Anything and everything that could possibly distract a child is there.

"The teacher, of course, is no longer the focus of attention. She is now a facilitator who wanders around the room, helping one child here, chatting with another there. She is also using the most irrational teaching methods ever devised by so-called educators: whole language, invented spelling, the new math, plus sensitivity training, values clarification, transcendental meditation, cooperative learning, death ed., sex ed., suicide ed. She's very much interested in your feelings, your sexuality, your family, your thoughts about death, suicide, abortion, feminism, homophobia, the environment, global warming, and world citizenship. **She is also practicing psychiatry without a license.**

"Is it any wonder that so many children suffer the equivalent of a cognitive breakdown in American schools? **The entire school configuration is designed to cause distraction, inattention, frustration, impulsiveness, hatred, anger, and violence. And the only way that many children can be forced to endure that atmosphere is by drugging them.**" (Blumenfeld, 2008)

It is no wonder that a survey in Japan reported in the 2006 that 61% of their teacher's sick leave was for mental illness, the main illness being depression. (Kyodo News, 2007)

At that time Jesus answered and said, I thank thee, O Father, Lord of heaven and earth, because thou hast hid these things from the wise and prudent, and hast revealed them unto babes. - Matthew 11:25

One thing Dr. Blumenfeld did not mention here was the money. Many if not all public schools earn big dollars in federal assistance for each child they place in *special education*. We will find out on the Judgment Day how many public school guardians misdiagnosed their children because they themselves suffered from the disease of greed.

Improper parental discipline causes ADHD

Dis-ci-pline: (dis'ə plin', -plən) *n.* [see DISCIPLE]

1. A branch of knowledge or learning
 - a. training that develops self-control, character, or orderliness and efficiency
 - b. strict control to enforce obedience
2. The result of such training or control; specif.,
 - a. self-control or orderly conduct
 - b. acceptance of or submission to authority and control
3. A system of rules, as for a church or monastic order
4. Treatment that corrects or punishes

Finally, one of the one of the major causes of ADHD are parents failing to discipline their children, or failing to discipline them properly. Discipline is both training and correction.

He that spareth his rod hateth his son: but he that loveth him chasteneth him quickly.
- Proverbs 13:24

AND

Foolishness is bound in the heart of a child; but the rod of correction shall drive it far from him. - Proverbs 22:15

AND

Withhold not correction from the child: for if thou beatest him with the rod, he shall not die. Thou shalt beat him with the rod, and shalt deliver his soul from hell.
- Proverbs 23:13-14

AND

The rod and reproof give wisdom: but a child left to himself bringeth his mother to shame.
- Proverbs 29:15

While the Bible admonishes us spank our children, most experts do not. To sum up the world's opinion, Lee Ann Slaton, leader of parenting classes at Parent's Place.

"It teaches a child, if you're bigger you can hit. Violence begets violence.. and they're not learning." (CBS Broadcasting Inc, 2007)

Mz. Slaton may be passionate in her beliefs, nevertheless she is ignorant or dishonest. As you study this topic, you will see outright dishonesty in many of these studies. One of the countless examples off the internet is PsychCentral's page on negative consequences of spanking.

"On February 27th, 2007 at 4:16 am, jennifer replied:

I am from china. I pay more attention to it, because I am a very girl who have grown up in a family full of violence. My father like drinking, he always beated me after he was drunken. Therefore, you can imagine it, now there are some serious problems with me. Now I am years old, but I have suicide two times. In addition, I have strong intendency to abuse myself to relieve tension, and I hate myself so much.

However, I am studying psychology now, I hope it can help me." (Meek, 2007)

To compare an example of child abuse, a father beating a child until she is physically injured, to parents using a rod of correction when training up children is plainly deceitful. A simple search of the internet will find many experts who cannot tell the difference between coming home angry-drunk and putting welts on a child, and a sober parent who in love corrects their children with a spanking.

Some child experts who do not believe in spanking suggest positive rewards. Positive rewards work fine in their place and as long as it is not in the form of a bribe. "Here I will give you a cookie if you will stop whining." In such a case, you are really teaching your child extortion and blackmail. If when he is older, he asks, "what will you give me?" every time you desire something from him, remember that is what you taught him.

To be fair, not every single psychologist opposes corporal punishment. Occasionally a few brave men stand up against the crowd. Consider the following post from PsychCentral's blog.

On February 27th, 2007 at 6:39 pm, SL-PH.D. replied:

The problem with a lot of the literature on spanking, and **I have looked at most of it**, is that it:

Assumes that all pain = EVIL This is a BIG presupposition!

All or most articles done in context of a parent experiencing a form of explosive anger.

All or most articles done in the context of parent either going "too far" or "too little" but ignoring fact that child was not "broken" in oppositional will challenging rules and parents.

Ignores all those parents that spank calmly, quickly, and consistently. Something most parents do not do and which the articles never report on.

Ignores that unless a child's willful rebellion is not broken, any spanking does not work but causes damage in creating a) a permissive child and/or b) a "monster-brat. Which instruction, at early ages does nothing to correct.

Ignores those many parents that once they get a child to breaking point, stop, and then comfort child, affirming that child with love until child feels secure, protected, and loved. (ibid)

While many doctors give some *wiggle room* allowing some physical contact, a post like this from the psychiatric community is rare. After all, why should they teach parents to correct their children when they can make more money by medicating them?

The real child abuse is unnecessarily giving children a medication that has dangerous side effects. For a complete list of side effects, cross-referenced to its medication, download [The side effects of ADHD medications](#) in PDF format. Some of these side effects listed in alphabetical order are,

- ☛ Acute liver failure,
- ☛ Aggressive behavior,
- ☛ Anxious,
- ☛ Behaving with excessive cheerfulness and activity,
- ☛ Blurred vision,
- ☛ Chronic muscle twitches or movements,
- ☛ Chronic trouble sleeping,
- ☛ Decreased white blood cells,
- ☛ Depression,
- ☛ Diarrhea,
- ☛ Disease of the muscle of the heart,
- ☛ Drowsiness,
- ☛ Easily angered or annoyed,
- ☛ Failure to grow,
- ☛ False sense of well-being,
- ☛ Feel like throwing up,
- ☛ Feeling restless,
- ☛ Fit,
- ☛ Giant hives,
- ☛ Hair loss,
- ☛ Hallucination,
- ☛ Having thoughts of suicide,
- ☛ Head pain,
- ☛ Heart attack,
- ☛ Hepatitis caused by drugs,
- ☛ Hives,

- * Inflammation of arteries that carry blood in the brain,
- * Involuntary muscle movements,
- * Mental disorder with loss of normal personality & reality,
- * Mental impairment,
- * Mood changes,
- * Neuroleptic Malignant Syndrome (a life threatening, neurological disorder),
- * Nightmares,
- * Numbness and tingling,
- * Over excitement,
- * Rash,
- * Reaction due to an allergy,
- * Seizures,
- * Stevens - Johnson Syndrome (a life threatening condition),
- * Stroke,
- * Throwing up,
- * Toxic Epidermal Necrolysis (a life threatening condition).

If the side effects for the medications that treat ADHD do not scare you, the connection between medications and school violence should. See the [drugs and school violence](#), downloadable in PDF format to see the connection between school shootings and the child being on doctor prescribed medication.

Compared to these side effects of medication, a child who needs a swat to sit still in his seat seems a *non-problem*. These *swats* should be applied by the parent at home not by a public educator.

Did your doctor mention any of the side effects mentioned above when he recommended you medicate your child? While being completely blind to the dangers of medicating our children, the psychiatric community will never end its crusade against corporal punishment.

"All parents have countless decisions to make about how to raise their children. One of the most important is how to discipline the child. **Psychologists and physicians have been pleading with parents for decades to use non-physical forms of discipline**, and avoid corporal punishment, because it can produce significant negative consequences for children. A recent story in the Chicago Tribune has a nice overview of some of the current research and opinion on the issue.

"What the research does show is that spanking is generally no more effective than nonphysical disciplinary techniques in instilling acceptable behavior, that its effects vary from culture to culture and that a greater frequency of spanking increases the risk of negative consequences."

"In general, **spanking can lead to emotional and behavioral problems**, increased aggression, and use of violence to solve problems. Although many adults were spanked as children and do not view any negative consequences in their own lives attributed to spanking, it may be different for their children. Non-physical punishments take more work from parents but are also **healthier** options for the children. (ibid)

This quote is from an ignorant or dishonest expert, as is commonly the case. I have met many experts that think like the person who wrote this opinion. In every case, my worst behaved child was better behaved than their best and my most discontent child was happier and more content than their most well adjusted child. Often the children of these experts fail scholastically as well.

Cures to avoid

We have already talked about medication, what are some of the other pitfalls to avoid when seeking a cure to ADHD.

Do not let your child be diagnosed ADHD

The best cure is prevention. Do not let a psychiatrist diagnose your child with ADHD. It may sound strange but when diagnosed, two things occur. First, the diagnosis removes responsibility for good behavior from the parent and their child and blame is placed on a chemical imbalance or brain disorder. Why correct him, when what he needs is medication?

Second, control of your child may be lost. There are parents who had to medicate their child or the Child Protective Services were going to pull him from their home. For example:

"The schools are now using to enforce their own desires and their own policies," said David Lansner, a New York City lawyer who has seen cases similar to the Carrolls'. "The parents' authority is being undermined when people have to do what some public official wants, Lansner added." ...

"Officials at the Millbrook school district called police and child protective services when she took her 9-year-old son, [name withheld], off medications earlier this year. She said a drug cocktail including Ritalin, the anti-depressant Paxil, and Dexedrine, a stimulant like Ritalin, **caused her boy to hallucinate.**" (Karlan, 2000)

Not only is curing children of an attention disorder is more difficult when they are hallucinating on other drugs. It is also more difficult to raise healthy children under the control of some social worker.

Avoid Creative Corrections if you are serious about curing ADHD

Child training is covered more thoroughly in my study on [parenting](#), yet some chapters like this one will be reused. When I wrote the rough draft to Curing ADHD I wrote the following paragraph.

"Avoid **creative alternatives** to spanking. Fifty timeouts will not accomplish the work of one spanking. If you give your child "timeouts", they will be counterproductive if he is sulking while he is sitting in the corner. Do not expect a child behavior specialist to be able to understand this. "

About two weeks after I wrote the above paragraph a book from *Focus on the Family* fell into my hands. The title? *Creative Correction: Extraordinary Ideas for Everyday Discipline*. The book is full of ideas on how to correct children. Unfortunately, many children will suffer needlessly when their parents apply the principles taught in this book. Therefore I will expound on my first paragraph on how not to correct children.

[Elders] that sin rebuke before all, that others also may fear. 1 Timothy 5:20

This is not a mean spirited attack on *Focus on the Family*; we are only interested in raising obedient happy children. The author of the book *Creative Correction*, by her own testimony is constantly creatively correcting her children, as they are always behaving very poorly. She should not be teaching child rearing she should be learning.

Her book opens with this disclaimer.

Before you begin reading this book, let's make a pact: If we ever run into each other's children on the streets even if that means literally "on the streets" let's not judge each other as bad parents.

Let's give one another the benefit of the doubt. After all, we're doing the best we can. You've probably seen the bumper sticker "Christians aren't perfect, just forgiven." Well, in light of this parenting pact, I propose a new one: "My children aren't perfect, but neither are yours."
(Whelchel, 2005)

It is true our children are not perfect, yet I am not willing to enter her pact. If I were, this study would not be worth reading. I have been parenting since 1983, the number of times my own children's behavior (even slightly) embarrassed me on the street is in the single digit figures.

The principle of child correction is to build character, not just control outward behavior. So with this in mind let us look at some ways not to train children.

- ☛ Many of her creative corrections were punishments like writing an essay, practice typing, practice playing the piano, or doing a few pages of math. Give out these punishments to your child if you are training him to hate writing, typing, piano and math.
- ☛ One punishment that the author recommended was to make her child listen to the New Testament on tape for twenty days instead of her usual Adventures in Odyssey. Even Tom Sawyer could have figured this out.
- ☛ Another punishment, one for stamping feet in anger (or throwing a fit) is to make the children continue to stamp feet (or throw a fit). Unlike homework, sin is addictive. Forcing children to 'vent steam' will not improve their character. Venting steam may be good for a teakettle however, the best we can hope for in forcing children to behave angrily, is that it will not become a habit.
- ☛ The book told of one grandmother who threatened kisses when her 10 year-old grandson threw a fit because she would not buy the more expensive shoes. I have no experience with one of my children over two years old (probably one year old) ever throwing a fit or even being ungrateful for a pair of shoes. However, I will venture to give my opinion, I do not think I would get upset, my child would simply be buying his own shoes from then on, if he was that selfish.
- ☛ Many of her creative suggestions were to hit her kids where it hurt, like the pocket book.
 - **If you confiscate your children's wealth for bad behavior**, it will discourage them from saving. Nor will it create good behavior from the heart. For example, many of us do not speed because we do not want to pay a fine; few do not speed because a previous fine made them actually enjoy driving slower.
 - **If you pay your children to stop misbehaving**, they will have a nice resume when they grow up, should they wish to sell insurance for the Mafia. At the very least, you are missing the opportunity to build your child's character.
 - **When you pay your children to behave kindly**, you are missing the opportunity to build their character. When you ask your young adults to do something, and they respond with, "How much will you pay me?" remember you taught them this.
- ☛ Avoid corrections that are never over. If you ground your child or remove his privileges for a week, this causes a cloud to hang over your once happy home for a whole week. Use the rod and it is over, he has received his wages for his sin, his slate is wiped clean.

☛ Another silly correction was for kids who were talking mean to each other. The punishment was to think of three nice things to say in order to build up the offended child's self-esteem. This does not build up anybody's self-esteem, as the flattered child knows that it was a punishment for the other child to complement him. Nor does it draw the offending ones heart closer to the sibling he must flatter. The best we can hope for with this punishment is that it does not encourage an offending child to get into a habit of making two-faced comments.

☛ In one piece of advice, the author states,

"You know how bickering can just wear you out. It's highly stressful to listen to fighting all day long. The next time your kids can't seem to get along and you're at your wit's end, call them over to do some damage control."

Again, I do not know if I am qualified to teach on this, I have never had children bickering all day long. While our children were allowed to disagree, a rare episode of bickering would have lasted less than an hour. I have never been stressed by "listen to fighting all day long". A spanking consistently applied on the first offence, will bring occasional bickering to an end before breakfast comes off the stove.

☛ For one correction, the child who behaved badly was not to leave her parent's side for a whole day. Actually, this creative correction has possibilities.

☛ Another creative idea the book suggested. When you are talking to an adult, have your child place his hand on your shoulder instead of interrupting you. Tell him you will answer him as soon as you can make a break in the conversation. This is good idea, but it is not a correction. Being a creative parent is fine; just avoid creative corrections.

So what does all this have to with ADHD? Everything, when the author of *Creative Correction* uses poor parenting techniques, her children misbehave. In such cases, it is not the child's fault. When her child misbehaves long enough she takes them to the child specialist and they encourage her by saying her child has ADHD. Yes, her son has been diagnosed with ADHD. The experts shift the blame from the poor parenting skills to a chemical imbalance.

*[The Lord our redeemer] turneth wise men backward, and maketh their knowledge foolish.
- Isaiah 44:25b-26a*

Until she takes the blame, she cannot repent. The author still believes she is doing a good job parenting in saying:

"I must confess that **if I'd been able** to force my children to **obey me out of fear** while they were young, I would have parented that way. It's so much easier-but it's the wrong approach. In hindsight, I'm glad I was unsuccessful at using fear tactics. It would have made life simpler while my kids were young, but **I'd rather see them obey me - and God - wholeheartedly, out of love.**" (Whelchel, 2005)

This looks good at first glance. Who can speak against children that obey wholeheartedly out of love? All the same, she needs to wake up; her children do not obey her at all, much less out of love (see pages 333-345). When children are not obedient out of love there are two choices. You can have disobedient, unloving children, or train them to be disobedient and loving.

Withhold not correction from the child: for if thou beatest him with the rod, he shall not die. Thou shalt beat him with the rod, and shalt deliver his soul from hell.

- Proverbs 23:13-14

When she says, "If she had been able to force my children to obey me out of fear while they were young" she is imply that she could not make her young children obey her. In such cases, they only get harder to control as they get older.

Another point she brings up and needs further clarification is fear. A common misconception about fear is that obedient children are always living in fear, like small children that cannot escape the neighborhood bully. With proper training, nothing could be further for the truth. This cowering fear is exactly proportional to the amount and length of anger you display toward your children.

When you are training a toddler, you never spank in anger (teach him to respond to a normal talking voice). As a result, he does not live in cowering fear; he has learned to submit his will to yours that is all.

No matter how you correct your children, when they are disobedient there will be a cloud hanging over them. Well-disciplined children seldom need correction and so seldom have that cloud. When good behavior is a way of life, your children are happy, thoughtful, content, helpful, considerate, forgetful, compassionate, loving, clumsy, sensitive, cheerful but never fearful. Well-disciplined children will truly love their parents, when they are taught to be grateful and not allowed to sulk or brood.

The cure to ADHD

After you have removed the problems mentioned earlier (diet to foster care) from the child's environment. The child is still hyperactive and inattentive, what do you do next?

Seek a qualified expert for help

The question is, who is qualified to teach child training? If not the social worker, where do you go to learn how to raise happy obedient children? Do you go to your doctor, psychiatrist or some other childcare professional?

Sarah, a waitress, told the story about a family she was serving the other day. There was the father, mother and four or five children. Their (approximate) ages ranged from one to eleven. They were all happy, she never heard the children whine beg or quarrel, including the baby. They all sat still in their seats being attentive to each other telling stories and having fun. They were content with their meal. By the end of the dinner, Sarah noticed that the children had not had any spills or made the usual mess. As they were leaving the restaurant, she commented to the father on what pleasant children they were. Then the seven year old said without pride, but very matter-of-factly, "Oh he knows that, he hears it all the time." The father laughed and nodded in agreement that what his child said was true. (Sarah related this story personally to the author)

This father's counsel on raising children would be worth gold, lots of it. The advice of a professional without happy obedient children is not worth the paper it is printed on. If someone does not have happy, obedient children, the reason is simple; he does not know how to raise them.

The Apostle Paul, in a letter to Timothy, on the subject of picking church leaders, said:

One that ruleth well his own house, having his children in subjection with all gravity [honesty & honor]; (For if a man know not how to rule his own house, how shall he take care of the church of God?) - 1 Timothy 3:4-5

Many experts on the family do not believe that raising happy obedient children is an important qualification to teach on the subject. If an expert is incapable or has no experience, raising happy obedient children, ignore his advice. This list includes child psychologists, social workers, family members and even the pastor.

Raising happy obedient children does not come naturally. If you are going to raise your children properly, you must be taught how! The Bible properly applied and those who understand it should be our instructors.

[The aged women should] teach the young women to be sober, to love their husbands, to love their children. - Titus 2:4

Look at what Paul is saying here. Older women are to teach the younger women to love. Let us compare two types of love, the first is affection for or to be fond of a person. The second type of love is sacrificial. Jesus said:

*Greater love hath no man than this, that a man lay down his life for his friends.
- John 5:13*

The Miracle Worker, starring Patty Duke, was 1960s movie based on the true story of Helen Keller and Anne Sullivan. Helen Keller was both blind and deaf, and Anne Sullivan was her teacher.

Helen's life starts with her parents, who though they loved (were fond of) her, avoided any uncomfortable situations because they had pity on her. The result of this type of love (affection) was to produce an animal. Helen was completely void of love, having violent outbursts daily, sometimes hourly. The prevailing belief was that the illness that blinded Helen also crippled her mind.

In comes Anne Sullivan, her new teacher. Helen slaps, pokes, spits, brakes teeth, in a war of wills that any good parent will sympathize with. If they had been there, most child psychologists and social workers would have condemned Anne's methods as child abuse. It would have been a lot more comfortable for everyone concerned if Helen was just medicated to control her violent outbursts. Even her parents were about to fire Anne, and yes put Helen in an asylum for mental defectives. Finally, Helen is conquered. Once her rebellion is conquered, her education can begin.

Though the movie ends here, the true story continues, they became best friends and lifelong companions. Anne's love (sacrificial) turned an animal into an honor roll student. Helen, who would have ended up in an asylum for mental defectives with Anne's love (sacrificial) ends up at Radcliffe, the sister school to Harvard.

Helen became a person the great men of the earth sought after. A partial list of her friends include President Woodrow Wilson, Mark Twain, John Rockefeller, Andrew Carnegie, Alexander Bell (the inventor of the telephone). (Waite, 1959)

Do not doubt all this was the result of Anne's love (self-sacrifice). Anne was willing for Helen to hate her. She was willing to have Helen's family despise her in order to save Helen: Later Helen would describe these blows as a "loving touch":

All the best of me belongs to her - there is not a talent, or an inspiration or a joy in me that has not awakened by her loving touch. (Keller, 1990)

I have heard parents try to help their children's self-esteem by telling their misbehaving children how valuable they were. Most children are not stupid; such words of praise are hollow. If you want to help your child's self-esteem, teach him to behave so that strangers come up to you and say what wonderful children you have. To your child such praise will not ring hollow.

Is ADHD really a mental disorder?

And Jesus answering said unto them, They that are whole need not a physician: but they that are sick. - Luke 5:31

There is no reason to push any Christian cure for ADHD, as **it is not an illness**. ADHD is a fabrication of the psychiatric community. However, when a teacher has a classroom with 25 students and five are out of control, when she is not allowed to discipline, any remedy that produces immediate results will likely be welcome. Here is Jeff's story:

In his first year of high school Jeff was placed in the special geometry class. It may have been a mistake, he was good in math and as his counselor said that *Geometry A* was the advanced class. Yet, by the time Jeff realized that he was in the special (read that slow) class, it was too late to get a transfer.

If Jeff has said that he was bored in that class, it would be a gross understatement. His symptoms of boredom included a complete lack of attention to the material being taught, and disrupting the class in general. Today he is ashamed of his behavior when he remembers spit wads and other acts of disobedience. He plagued his poor teacher the whole year and of course nearly flunked the class.

Today a teacher would send him to the school psychiatrist. The psychiatrist would label him ADHD and he would be medicated. At least the other students would not be disrupted.

When the next year finally rolled around Jeff's troubles were not over. He could not get into a normal math class much less the advanced algebra course because of his 1.0 grade point average in *Special Geometry*. The only way to get an exception to this rule would be if he could get a note of recommendation from his poor geometry teacher.

The first time Jeff regretted his *attention deficit hyperactive disorder* was when he had to ask his geometry teacher for the note to get him into a normal class. It took the whole year, but his teacher finally got his revenge and laughed in his face.

Yet he let Jeff explain how the boredom of a slow class caused him to go nuts. He explained that if he were in a faster, more challenging class, it would keep his attention. In a great act of forgiveness (not being a vengeful teacher after all), he wrote the note. The next year Jeff got As and Bs in an advanced algebra class. (True story of my freshman and sophomore years in High School)

If a normal child can be board to distraction in a slow class, how many bright children are showing the symptoms of ADHD in what is a normal public classroom? Many parents and some experts are starting

to see this. ADHD may be the symptoms of exceptionally bright children. Smart child + improper discipline + a poor learning environment = ADHD

Without realizing it the authors in their book *Driven to Distraction*, Hallowell & Ratey make this point perfectly. Their book uses four case studies. Describing their subjects:

- 📖 In the first case study, Jim has the highest IQ in the class.
- 📖 In case two, one of Carolyn's earliest memories is being so bored with Sunday school, she 'ran away'. While struggling with school she scored high on achievement tests and earned a scholarship to go to college where she earned a PhD.
- 📖 In case three, Maria said, "The public school where I grew up was OK, but not very challenging." She describes being more interested in other things, school was dull and she got bored easily. "But then, maybe I had dull teachers. I wasn't bored in college"
- 📖 In case four, Penny daydreamed a lot, however medicating her with Norpramin, a drug normally used to treat depression cured that. The psychiatrist claimed that the only side effect was a dry throat, (see [Side effects of Depression Medication](#) for the real side effects of Norpramin). Penny's teacher affirmed, "**she's really smart, you know.**" Another interesting point that Hallowell makes in his case study, is that the psychiatrist wished to see Penny in her school setting as "in the classroom you get a truer picture". Why would he believe that he will get a truer picture in a classroom than someplace else?

Bruce E. Levine has the answer:

"Going stupid -- or passive aggression -- is one of many nondisease explanations for attention deficit hyperactivity disorder (ADHD). Studies show that virtually all ADHD-diagnosed children will pay attention to activities that they enjoy or that they have chosen. In other words, when ADHD-labeled kids are having a good time and in control, the "disease" goes away." (Levine, 2008)

Has your gifted child been labeled with ADHD?

Look for physical causes first

Do you still believe your child has ADHD? First Look for physical causes. While attentional behavior, impulsivity and hyperactivity (an early definition of ADD), are normal in a child. If you believe your child really has a 'motor activity' problem, he should have a physical exam performed by a medical doctor. Not a doctor provided by the school, you want a doctor who is loyal to you.

If the doctor does not find anything physically wrong, there are other resources. The internet provides a vast resource for alternative treatments. Obviously, many websites sell snake oil and patent medicines. It is buyer beware, nevertheless there are people out there on your side.

Child correction cures ADHD

Michael Pearl describes how an Amish father cured ADHD in twelve-month-old:

As I sat talking with a local Amish fellow, a typical child training session developed. The **twelve-month-old boy**, sitting on his father's lap, suddenly developed a compulsion to slide to the floor. Due to the cold floor, the father directed the child to stay in his lap. The

child stiffened and threw his arms up to lessen the father's grip and facilitate his slide to the floor. The father spoke to him in the German language (which I did not understand) and firmly placed him back in the sitting position. The child made dissenting noises and continued his attempt to dismount his father's lap. The father then spanked the child and spoke what I assumed to be reproofing words. Seeing his mother across the room, the child began to cry and reach for her. This was understandable in any language. It was obvious that the child felt there would be more liberty with his mother.

At this point, I became highly interested in the proceedings. The child was attempting to go around the chain of command. Most fathers would have been glad to pass the troublesome child to his mother. If the child had been permitted to initiate the transfer, he would have been the one doing the training, not the parents. Mothers often run to their children in this situation, because they crave the gratification of being needed. But this mother was more concerned for her child's training than for her own sentiment. She appeared not to hear the child's plea.

The father then turned the child to face away from his mother. The determined fellow immediately understood that the battle lines had been drawn. He expressed his will to dominate by throwing his leg back over to the other side to face his mother. The father spanked the leg the child turned toward his mother and again spoke to him.

[...]

During the following forty-five minutes, the child shifted his legs fifteen times, and received a spanking each time. The father was as calm as a lazy porch swing on a Sunday afternoon. **There was no hastiness or anger** in his response. He did not take the disobedience personally. He had trained many horses and mules and knew the value of patient perseverance. In the end, the twelve-month-old submitted his will to his father, **sat as he was placed, and became content - even cheerful**. (Pearl & Pearl, 1994)

The older your children are before you teach them to sit still the harder it will be. If you do not teach your child to sit when told; the public school teacher will have no magic powers to make him obey. When the teacher's creative corrections fail to work, their only option remaining will be to medicate him.

My son, despise not the chastening of the LORD; neither be weary of his correction: For whom the LORD loveth he correcteth; even as a father the son in whom he delighteth.
- Proverbs 3:11-12

Yet, are there not two sides to the medication question? If we surfed the net, would not many experts praise the positive effects of medicating? Like this comment from one parent with firsthand experience:

"**My gifted child** has made a dramatic improvement on Ritalin[®]." However, we're concerned about long-term effects. Can you steer us to any studies? (Joslyn, 2008)

These two sentences raise five questions:

1. Why does this parent want a study? Didn't a patient handout sheet come with the medication? Did she read the patient handout sheet? Didn't the patient handout sheet clearly describe the adverse side effects in a language she could understand?

2. Why didn't the doctor discuss the long-term side effects, or at least the adverse ones when they first medicated the child? Did the Doctor discuss any of Ritalin's short-term side effects? **The worst side effects** include but are not limited to chronic trouble sleeping, seizures, hallucinations, heart attacks and strokes.
3. Does the dramatic improvement in her child outweigh these possible adverse side effects of his medication?
4. This parent has a gifted child, one born with great possibilities, not a child with a mental disorder. What are the long-term costs to our society for medicating its gifted children?
5. This parent saw dramatic improvement in the child when the child was medicated. Assuming that the parent meant an improvement in the child's behavior, how did the parents train the child before medicating him? Could proper training bring even more dramatic improvements in the child's behavior than medication did?

We talked about spankings earlier. It is irresponsible to encourage spanking without giving some tips on how to and how not to apply them constructively.

Be consistent: While spanking a rebellious child is essential to correcting him, this is not all there is to raising happy obedient children. It is insane to give in to a child's desires when he throws tantrum one day, then to punish him for throwing a tantrum the next. Inconsistency will not only reduce or remove the effectiveness of a spanking it may make the child bitter and confused.

If you are not convinced that consistency is important, make sure there is nobody from PETA around and try this experiment on a dog. Reward him for a certain behavior one day and then scold him for the same behavior on the next. Then see how long it takes him to learn whether he should or should not do the behavior.

When you apply correction consistently, the child will soon realize his behavior is unprofitable. To be the most effective, you should administer spankings early, do not let the child misbehave for any length of time before it is applied. If you let him escape punishment even occasionally, he will continue testing you hoping that this will such a time. If you are consistent, the spankings will be few. Four of my seven children do not remember me ever giving them a spanking.

Let the punishment fit the crime: When you are training a toddler not to touch something on an end table, a gentle swat with the command *Don't touch* will do. When the child is exercising open defiance, some sting will be necessary. **Sting** is the key word. A swat administered through a diaper will not sting. A slap on the hind end leaves a momentary sting. It does not leave bruises scars, concussions, broken bones or other internal injuries.

Never punish honesty: Do not ask your child if he broke the window, if you are going to punish him for breaking it. If your child tells you he broke it, before you knew it was broken, or when you asked him the direct question, then reward him for his honesty. In my conversations, I find that often I stand alone in this opinion; however, his honesty will keep him out of much worse trouble as a teenager when nothing else can. At our house, we can and do leave money and other valuables lying around our house with seven children, and there has never been a problem with anything being stolen.

Never spank when you are angry: Not unless you want to be the one the psychiatrists will use as a bad example. Many child abuse cases start out with the parent trying some ineffective alternative form of discipline, finally hitting Junior in frustration. Often a parent who does not believe in spanking (finally losing his temper) with the monster he has created, will inflict injuries because when he finally punished the child, he did it in a rage of anger.

If you discipline you child consistently and early and avoid creative alternatives to the rod, it is likely that you will never be tempted to spank your child in anger.

One last story and we will go on to the next subject.

My Daughter Bitsy was about six years old when our whole family started on a trip to the grandparents. From the moment we got into the car, she was whining. This was unusual behavior, so we tried to accommodate her asking her sisters not to touch her, trying different ideas to make her comfortable, etc.

After about forty minutes of appeasement, I finally pulled the car over and gave her a spanking. Predictably, her 35-decibel whining turned into 85 decibel screaming (my spankings hurt). I allowed this to go on for two minutes, and then I said, "*Stop crying now, or I will spank you again.*" This was all that Bitsy needed. She immediately made an effort to control herself. In less than two minutes, she had completely stopped crying.

In about two more minutes, she was being a pleasant happy child. Even I was astounded at how short a time it was from her earlier sulking to being a happy, pleasant companion for the rest of our trip. The spanking created a happy child in less than five minutes when all our earlier attempts to appease her bad behavior were completely ineffective.

My son, despise not the chastening of the LORD; neither be weary of his correction: For whom the LORD loveth he correcteth; even as a father the son in whom he delighteth.
- Proverbs 3:11-12

It is normal for a child to be happy and affectionate after a spanking (you read that right). Perhaps it is when they have paid the price and you have thereby removed the guilt. Maybe, when the trespass and punishment are over and they have a clear understanding of what we expect of them; in understanding these boundaries, they can be secure and happy.

For more ideas on raising happy obedient children from parents who have, please look at our study on [Raising Children to Stay in the Faith](#).

Conclusion

In concluding, we would not neglect a child with a real medical illness. Nor would we be content to just treat the symptoms. While some have claimed that drugs do work to treat ADHD, they only cover the symptoms. There are two worldviews, child discipline (spanking) is an act of love. or troubled child should be medicated.

Properly training your children will more than just prevent ADHD. By raising your children properly you will help them avoid other mental disorders including [depression](#). For those parents who are trying to get the attention of their active child, may God bless you as you seek his will.

Written by [Jeff Barnes](#)

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