

## **SBS ADHD 18 September 2003**

Medicating troublesome children, are doctors too quick to prescribe drugs to youngsters with behavioural problems?

### **Dr. George Halasz**

One of the ways that children show their stress is through their behaviour. If that behaviour is misunderstood, so for example an over-active child is assessed as hyperactive and then given amphetamines rather than assessed as perhaps being anxious or worried where talking and relating is more appropriate than any medication then a quick fix drug is actually poor medicine, it may also be medical negligence.

### **Caroline Davey**

Our special report on attention deficit hyperactivity disorder is among our stories today on World View, Good Afternoon from Caroline Davey. Also this hour spinning the message how information is manipulated and controlled in times of crisis. But first SBS radio news.

On SBS radio across the country this is World View with Caroline Davey, it's eight past five. We begin today with an examination of a childhood disorder that seems to be becoming more prevalent in Australia. Attention Deficit Hyperactivity Disorder or ADHD has become controversial, largely because of concerns about how the condition is diagnosed. Some doctors and parents are worried that too many children with behavioural problems are too easily labelled as having ADHD. In an attempt to clarify some of the issues surrounding this disorder Natasha Cuculovski sought the views of medical professionals, teachers and parents.

### **Pam Ale**

He's been diagnosed three or four times. The first one who diagnosed him was a paediatrician, did a tick box and said let's try him on Ritalin. The Ritalin he had ticks with, I took him off it straight away and then they said we'll give him Dexamphetamine. So I went and got him diagnosed again at a Child and Mental Health Clinic, they also said he had ADHD, he was in trouble at school so I put him on the Dexamphetamine. He had violent rebounds when he was coming off it, he was putting chairs through windows, climbing up the frame of the doorways, the halls so they put him on Respiradone to stop the rebounds. Then I had him brain mapped and they actually said he didn't have ADHD, but I cannot get him off the Respiradone. He's hooked on it and it's a very serious drug.

### **Natasha Cuculovski**

For Pam Ale, her son's misdiagnosis crystallises the difficulty many parents and doctors face when trying to detect ADHD.

#### **Pam Ale**

The main problem was, the attitude of the school he was at and he could come off medication because of the second school, it was a different story. A programme was worked around him and it was actually shown he fitted in, he felt supported, he wasn't being suspended, he wasn't dragged up the office, he wasn't getting yelled at and as soon as he hit that school with the different attitude, he was a different child.

### **Natasha Cuculovski**

Unlike Pam, Adele Lovey has had a relatively positive experience with her two children who do have ADHD.

#### **Adele Lovey**

I suppose I should consider myself fortunate in a way. My children don't have a lot of behaviourable problems, it was predominantly concentration and inability to sit still, but it took me quite some time to get a diagnosis because I guess like a lot of people at the time I had the impression that ADHD and bad behaviour went hand in hand and that's not always the case. My first experience of diagnosis I guess wasn't satisfactory in that I felt it was very hasty, however, the results were very positive.

### **Natasha Cuculovski**

Like many parents Pam and Adele were confused about the causes and treatments for ADHD. Child Psychiatrist George Halasz explains the disorder.

#### **Dr. George Halasz**

ADHD stands for the words 'Attention, Deficit, Hyperactivity, Disorder' and they are descriptions of how children who obviously earn this label behave with problems with focusing attention and an over activity, so it's a descriptive set of terms. The question that arises is when Mums and Dads say to their children "it's pill time" is it really appropriate that that child be getting that pill or medication? So there's a divide in the way that our children are assessed really. No one would disagree, I think, that there are a group of children who definitely do need medication to control their attention problems and their behaviour problems. What is new is that in the last decade an increasing number of

children have earned this label and that's one of the major concerns really, do all of those children really deserve the label?

### **Natasha Cuculovski**

Dr. Halasz claims ADHD is becoming an epidemic among Australian children, but not all medical professionals agree. Paediatrician Daryl Efran says the problem has been exaggerated and at this stage there is no need for Australian parents to be alarmed.

### **Dr. Daryl Efran**

The danger here is that this sort of discussion can create alarm bells which I don't think are warranted in the Australian climate at the moment. There have been reports in the past from areas in the United States where there has been outrageously large numbers of children up to ten percent in some regions being on medication and I think that by anybody's estimate that's crazy. In Australia the best data that we have is from New South Wales where a couple of years ago just over one percent of primary school aged children were taking stimulant medication. Many of the experts would say that two to three percent of children satisfy the criteria and have ADHD and about one percent are on medication. So the message is that things are not out of control by any sense in Australia. However, I'm going to disappoint you because I agree with most of what George has said, children are complex individuals and to assess a child with learning and behavioural problems does take time and expertise, and can't be done very quickly.

### **Natasha Cuculovski**

How can you be sure that children aren't misdiagnosed or given drugs unnecessarily?

### **Dr. George Halasz**

Well, I think the message to parents is to go by their gut feeling and if that feeling is that their child has been properly assessed, then I think there is no reason to be concerned about that, but if parents feel that the assessment was rushed or incomplete, then they shouldn't accept the diagnosis or treatment and they should seek a better assessment.

### **Adele Lovey**

I don't take anything for granted anymore, I question everything. I realise that they really haven't got the answers for everything. There's a lot unexplored in the medical profession, they do not have answers and they put everything into a

big bucket. They sit there and they say, “any questions?”. Well, if you don’t know what you’re talking about, it’s hard to ask questions.

My biggest concern in this whole area is the diagnostic processes being gone through and the fact of the matter is there’s a huge shortage of professionals with training in this area. There’s a mass shortage of child psychiatrists in Australia.

**Dr. George Halasz**

I think that the idea of giving drugs as a quick fix is one of the major concerns because children as Daryl has said are complex people. One of the ways that children show their stress is through their behaviour. If that behaviour is misunderstood, so for example an overactive child is assessed as hyperactive and then given amphetamines rather than assessed as perhaps being anxious or worried where talking and relating is more appropriate than any medication then a quick fix drug is actually poor medicine, it may also be medical negligence.

**Natasha Cuculovski**

Can parents feel pressured to give drugs to their children?

**Dr. George Halasz**

I have a great deal of sympathy for parents because they’re not only pressured to medicate their children from some sections of the medical profession, but also pressure from school, that if a child is really behaving in a way that teachers can’t cope with, it’s not fair on the other students. So the natural thing for teachers would be to call the parents in for a meeting and say please do something or we might have to suspend your child.

**Pam Ale**

The pressure put on me from the school was enormous. This is the first school he was at, not his current school, because they were saying how out of control he was, he was climbing out windows, but his behaviour at home was hyperactive and concentration waned a bit, but there was no great behavioural problems. I was basically told they didn’t want him there if he wasn’t medicated because I had to do something, the child was out of control and it was disgusting.

**Natasha Cuculovski**

Was your child’s behaviour blamed on you, his parent?

**Pam Ale**

I was certainly asked what was happening at home. I would pick him up from school, he never wanted to go to school in the morning, I'd pick him up from school, he would be winging, he would be angry, he would be violent at me, I would say, "at school he's out of control and at home he's not that bad" and they'd say, "oh, yeh, but what's really happening at home?". "What is happening outside?" and I would say "nothing", but they never looked at themselves, never looked to direct the change in behaviour or anything, they just blamed outside and it was the child.

**Natasha Cuculovski**

What kind of strain did this put on the family?

**Pam Ale**

It had a huge strain on me, having him at that school, getting rung twice a week to come up about, for meetings, to get told that the problem was at home, it's how I'm parenting him, that he learnt nothing. Honestly, I was at breaking point, I mean there'd been medical issues with him prior to this and I just had three years of hell. If this second school hadn't worked I don't know what I would have done.

**Natasha Cuculovski**

Whether schools play a role in aggravating behavioural problems in children is a sensitive issue. Pam Davidson, a teacher from Birrilee Primary School, is concerned about such claims and says her colleagues need to adjust programmes to suit individual students and not encourage parents to medicate their children unnecessarily.

**Pam Davidson**

My opinion is that I would prefer to have a child unmedicated if possible. I think that we are teaching individual children who all have individual needs, abilities and I need to see them as they are and I think they need to develop behaviour patterns and structures need to be put into their lives so that they can cope and that they can develop peer group association and I just think that if they haven't got that, you know, that medication is being used regularly, I'm just not seeing that child and maybe what I'm doing and what I'm putting in place are not for that particular child who is really there underneath it. I think my major concern is the lack of time that we as professionals in education have to meet with and confer with doctors and psychologists who are working with these children.

**Natasha Cuculovski**

Stories like Pam and Adele's highlight the pain and confusion parents bear with an ill child. As Dr. Halasz explains this pressure may be amplified for parents from a non-English speaking background who may find it difficult to access information and come to terms with mental illness.

**Dr. George Halasz**

I think with a migrant family language is one issue, there's a whole value system that a child is a very precious part of the family and for a migrant family who hasn't a trust in the community system, perhaps just out of being unfamiliar or ignorant of what is going on to consult with a health professional is a major obstacle. When it comes to their child's health, where there's nothing objective, there's no blood test to show a disorder, there's no x-rays, there's no brain scans, nothing. You're going on a judgement of a doctor, you're asking for a family to have tremendous trust in that medical professional. Where the values of a migrant family might say that if your child sees a psychiatrist, perhaps more so than a paediatrician, they are damaged goods, they may have handicaps in seeking a marriage partner ten, fifteen years down the road. There are tremendous cultural sensitivities involved which may not be there for an Australian family.

**Natasha Cuculovski**

So mental illness can be a social or cultural taboo?

**Dr. George Halasz**

Well, I think even in our Australian culture it is a major taboo to be thought of as mentally unwell, in certain cultures it's actually shame and children are hidden from view as it were and there's a long history of the sense of mental illness being the absolute, almost like a curse on a family.

**Natasha Cuculovski**

In these cases what happens to the child?

**Dr. George Halasz**

It's one of the great tragedies in my profession where I see certain families where there has been through loving and caring parents unintentional neglect of very important developmental difficulties, psychiatric illnesses in early childhood and really the family comes to the mental health service at the time of absolute crisis. It is when they can no longer cope or there is such a danger to the child or siblings or family members or school and that really is a very painful experience

because one knows a child at an earlier stage had they received intervention much could have been prevented.

**Pam Ale**

In this first school one mother invited every child in the grade except mine for a birthday party and actually said to the child, "Jarrod's not coming because he might hurt someone". And that's just the point, it's got nothing to do about the medication, it's about the children and it breaks my heart and where's the compassion? I mean they're kids for heavens sakes, there's no such thing as a bad kid, let's get over this huge ridiculous debate about medication and get onto the debate about what are we going to do to help these kids. A lot of schools do appalling things to kids with ADHD and it's criminal, there's no support, there's no services, there's no educational information. The teachers aren't given the opportunity to learn about it, it's not always the teachers' fault, they have no education about it, they're under so much pressure.

**Adele Lovey**

I'd just like someone to walk a mile in their shoes.

**Pam Ale**

Oh Yes, I would too.

**Adele Lovey**

What it's like to have someone tell you all day that you're lazy, that you're stupid, that you're....

**Pam Ale**

Concentrate, do this, what happened to this, you're no good.

**Adele Lovey**

You know, and it doesn't matter how hard they try, it's never good enough so they stop trying. Why would you keep trying if what you're doing is never good enough? To put a project in and have the only comment come back, "Well, it's messy". Who cares, did you want to know about whales or did you want to see whales neatly?". What's important here, you know it's just destroying. We're very passionate aren't we? We love our kids.

**Caroline Davey**

That report prepared by Natasha Cuculovski.

