

Health

Drug makers to profit from Bush scheme to label kids mentally ill

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March 15, 2005—Citing recommendations by the New Freedom Commission on Mental Health (NFC), George W. Bush wants to launch a nationwide mental illness screening program in government institutions, including the public school system, for all students from kindergarten up to the 12th grade.

The New Freedom Commission was established by an executive order Bush issued on April 29, 2002. According to a July 22, 2003, press release, the commission recommends transforming America's mental health care system.

"Achieving this goal will require greater engagement and education of first line health care providers—primary care practitioners—and a greater focus on mental health care in institutions such as schools, child welfare programs, and the criminal and juvenile justice systems. The goal is integrated care that can screen, identify, and respond to problems early," the commission's press release stated.

According to the NFC, its recommendations are being already being promoted in Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, South Carolina, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, and Wyoming.

The truth is, this is nothing but another Bush profiteering scheme to implement a drug treatment program for use in the public institutions that will generate high volume sales of the relatively new, but inadequately tested, high-priced psychiatric drugs. If all goes as planned, the scheme will generate millions of new customers for the drug companies.

Original Scheme Hatched In Texas

The commission's final report identifies what it claims are several model programs as examples of how aspects of mental health care have been transformed in selected communities.

One program is the Texas Medication Algorithm Project (TMAP), a medication treatment program that screens people for mental illness and then prescribes highly profitably psychiatric drugs.

However, the plan came under intense scrutiny when it was implemented in the state of Pennsylvania. A whistle-blower by the name of Allen Jones*, who was an employee of the Pennsylvania office of Inspector General, published a report that described how medical leaders in Pennsylvania, who controlled the medication plan, received payments from the drug companies who were going to benefit from the plan.

Through the Texas scheme, drug companies were able to gain unlimited access to the Texas prison system, juvenile justice system, foster care program, and state mental health hospitals, to recruit new customers.

In Texas, the list of medications to be prescribed was established by what was termed, an “expert consensus” and drugs recommended for first line treatment, included high-priced drugs such as Paxil, Zyprexa, Adderall, Zoloft, Risperdal, Seroqual, Depakote, Prozac, Wellbutron, Zyban, Remeron, Serzone, and Effexor.

After securing access to the public systems, the next step in the Texas scheme was to get lawmakers to pass legislation to increase Medicaid coverage to persons who ordinarily would not qualify, in order to provide funding by way of tax dollars to pay for the drugs prescribed to customers within these systems.

The fact is our children are already being overmedicated. According to a May 2003 report by The New York Times, "National sales of anti-psychotics reached \$6.4 billion in 2002, making them the fourth highest-selling class of drugs, behind cholesterol-lowering drugs, ulcer drugs and antidepressants."

The number of children on antidepressant medication increased by over 500 percent between 1999 and 2003. Antidepressants and anti-psychotics now constitute two of the four top classes of drug sales.

For example, Zyprexa is manufactured by Eli Lilly and is one of the drugs on the list in Texas. In 2002, according to the watchdog group, NDC Health, "more than 7.4 million prescriptions were written for Zyprexa."

In 2003, it became Eli Lilly's top seller with worldwide sales of over \$4 billion. According to The New York Times, 70 percent of the Zyprexa purchased in the US that year was paid for by government programs like Medicare and Medicaid.

Eli Lilly has well known ties to the Bush administration. After he left the CIA in 1977, Bush Senior became a member of Lilly's board of directors. When he left the company to become vice president under Reagan in 1980, he forgot to mention that he owned stock in the company at the same time that he was lobbying for tax breaks for the company, even though it manufactured drugs in Puerto Rico, where continental US-based companies pay no federal income taxes. Bush Junior made Eli Lilly CEO Sidney Taurel a member of the Homeland Security Council.

During the 2000 presidential election year, Lilly gave over \$1.5 million to political candidates and over 80 percent of that \$1.5 million went to Bush and other Republican candidates.

Many members of the New Freedom Commission also have ties to the pharmaceutical industry and have served on drug company advisory boards.

What's In Store For Us

The NFC appointed 15 subcommittees to review the mental health service delivery system and appointed a chairman for each one. Several other commissioners served on each subcommittee and chose experts to provide advice and support. The experts prepared discussion papers that outlined key issues and presented policy options for consideration by the full subcommittee. The subcommittee reported to the full commission only in summary form, on which the full commission reached a consensus on the policy options that would be included in its final report entitled, "Achieving the Promise: Transforming Mental Health Care in America."

A February 5, 2003, summary report by the Policy Options Subcommittee on Medicaid began by stating, "An effective and comprehensive mental health system must rely on many sources of financing. Many States have made significant use of flexibility in the Medicaid program to support their systems of care. This has resulted in Medicaid being the largest payer of public mental health services in the country."

The report outlined the following recommendations:

Enhance Service Delivery

1. Public financing should support evidenced-based practices that are necessary and effective for successful community living.
2. Medicaid financial incentives and opportunities for the most appropriate community-based care should be increased.

Enhance Service Planning and Coordination

1. Federal leadership should guide and facilitate improved planning among state agencies that fund and implement services for persons with mental illness.
2. The federal government should assure proper data collection and reporting to facilitate and support mental health planning and quality management at all levels of the public mental health system.

One February 5, 2003, report by a subcommittee titled, Promoting, Preserving and Restoring Children's Mental Health, began in part, by saying, "Mental health problems among children and adolescents constitute a public health crisis for our nation . . . The extent, severity, and far-reaching consequences of mental health problems in children and adolescents make it imperative that our nation adopt a comprehensive, systematic, public health approach to improving the mental health status of children."

The approach, the report advised, should focus on "both strengthening services and supports for children with serious emotional disorders and their families, and on prevention and early intervention strategies for all children."

The subcommittee wanted the federal and state governments to formulate a plan to (1) implement a cross-agency, comprehensive, public health approach for children's mental health at federal and state levels; (2) strengthen children's mental health focus in state governments; and (3) establish a federal interagency entity for children's mental health.

As for funding, the subcommittee said: "Federal and state agencies and commercial insurers should realign funding policies related to children's mental health to support a comprehensive array of services and supports, including home and community based services and supports that are individualized, family focused, coordinated, and culturally competent."

The subcommittee specified that a plan should be developed for Medicaid to support home and community-based services and support and individualized care, and maximize strategies to provide coverage and mental health care to uninsured children.

In addition, the subcommittee wanted the government to provide technical assistance related to more efficient and effective implementation of early and periodic screening, diagnosis, and treatment.

Here's a good one. The subcommittee said we should strengthen federal and state requirements for family participation. "Federal and state governments should promote a broader concept of 'mental health' services for children and adolescents with emotional disorders and their families," it advised.

"Recognizing that children receive more services through schools than any other public system," the report recommended that "federal, state, and local agencies should more fully recognize and address the mental health needs of youth in the education system." It advised, "Likewise, these agencies should work collaboratively with families and develop, evaluate, and disseminate effective approaches for providing mental health services and supports to youth in schools."

The subcommittee recommended training teachers and school personnel to recognize signs of emotional problems in children and to make appropriate referrals for assessment and services. "Systematic screening procedures to identify . . . problems and treatment needs should be implemented in specific settings in which youngsters are at high risk for emotional disorders or where there is known to be a high

prevalence of these or co-occurring mental health and substance abuse disorders," according to the report.

And get this! Anyone involved in the juvenile justice system or welfare system is really in for trouble. "Screening should be implemented upon entry into, and periodically thereafter in, the juvenile justice and child welfare systems, as well as in other settings and populations with known high risk, such as the Medicaid population. When mental health problems are identified, youth[s] should be linked with appropriate services and supports," the report advised.

This gang of thugs is even coming up with ways to make money off infants shortly after they enter the world. This particular report recommends screening for all children ages 0 to 5 for social and emotional development as part of primary health care visits.

Mega-Bucks For Shrinks

Dr Jane Orient, the executive director of the Association of American Physicians and Surgeons (AAPS) has a few things to say about this latest profiteering scheme. "Teams of experts are awaiting an infusion of cash," she says, "They'll be ensconced in your child's school before you even know it."

Orient says an added "bonus is that your little darlings will probably give them quite a bit of information about you also, and then you can receive therapy you didn't know you needed."

According to Orient, kids will be asked invasive personal questions like whether their parents raise their voice, or "ever spank them? Have politically incorrect attitudes? Use forbidden words? Own a gun? Smoke cigarettes, especially indoors? Read extremist literature? Refuse to recycle? Prepare for a knock at the door."

The answers to these questions could lead to a home visit with parents, and accusations of "poor parenting skills, inadequate housekeeping, harmful literature, or a baby who is crying. . . .," Orient warns.

She lists the many tools at the disposal of what she calls "the mental health squad," including, "Counseling sessions. Drugs. Group therapy. Removing the child from the home." Although removing a child from the home is listed as a last resort, the mere threat of it "can accomplish wonders," Orient noted.

According to the University of Wisconsin-Whitewater Student Health Center, privacy rights are essentially being ignored. The center is telling patients that if government agencies want to see their medical records, they get to review them without a patient's knowledge or consent. "By law we cannot reveal when we have disclosed such information to the government," the center advised.

Screen Those In Dire Need First

If you want to see mental illness, just go knock on the door of the White House, or the Bush's home in Crawford, Texas. I recommend that we start this mandatory screening program with the Bush family.

Lets find some treatment for their deep-seated mental health problems. For instance, what rotten things happened in the Bush home that drove the twins to start drinking excessively while under age. And what emotional problems caused them to intentionally embarrass their father in a matter of months after he took office.

Then lets screen the president's nieces and nephews to see why Jeb's kids find it appropriate to forge prescriptions for drugs, and why his son would engage in underage sex in a car in a public shopping center parking lot. Or why Jeb's wife would try to smuggle in goods from other countries without paying the duty fees.

Then lets move on to brother Neil and have him screened to find out what compelled him to have sex with strange women who showed up at his hotel room doors in foreign countries, which resulted in a case of

incurable venereal disease. And let's find out what possessed him to have an affair with his mother's secretary while both parties were still very married.

Next, let's line up members of the Bush administration and find out what compulsions need eradicating. Then let's continue on to the officials at the FDA and figure out what happened to their consciences, which allow them to promote medicating kids for profits.

Freedom My Butt

Granted, the "New Freedom commission" is a catchy title. However, words can be very deceptive. I fail to see how forcing people to undergo mental health testing can possibly represent freedom, or how drugging people for profit can be viewed as a form of freedom.

I agree with an article I read on NewsTarget.com that said, "these people have lost their minds in a mad attempt to generate obscene profits regardless of the cost to human life, individual privacy, and human rights."

* To the millions of doctors, parents and patients who will be affected, Allen Jones says educate yourselves. The Internet has many sites that will help you. The [Alliance for Human Research Protection](#), would be a good place to start.

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