



Gap Academy

4 John Street, Weston, Ontario M9N 1J3 ☎ 416 249-1500 Fax 416-246-9155
www.gapacademy.com

The Ritalin Trap

by Paola Breda, Principal, Gap Academy

So much has been written about the use of medications in children with learning disabilities. If you can stand to read one more point of view, it might help you see things from yet another perspective - that of a teacher.

Every day, I step into a school full of pre-teens and teens with learning disabilities. Most, if not all of them have been, at some point, referred for medications like the almighty Ritalin and of course, a variety of other common medications prescribed for learning disabilities. At least once a week I get a call from a desperate parent looking for a school for their son or daughter - and in many cases, the children are medicated.

At least once a month, I hear about a teacher suggesting or requesting that a student in their class be medicated. And always, I hear about doctors who hand out these medications freely. These medications have been touted as 'saviours', especially it seems for kids with ADHD. I have even heard them suggested for kids without the hyperactivity, that is those who have been diagnosed with just ADD. Medication is supposed to fine-tune split attention, provide longer periods of attention span, and cope with huge behavioural problems. A prominent psychiatrist recently wrote in a Star article that "ADHD sufferers can't use treatments like counselling and therapy until they can focus their attention. The only known means of achieving that result in that population is medication, in particular, Ritalin and other psychostimulants." I beg to differ.

Although it can be argued that academic and visual hand-eye motor co-ordination tasks are different, there are many parents who can pledge that their 'ADHD' kids have no problem with attention focus - just watch them any night in front of the Nintendo screen - they are almost hyperfocused, that is, they have too much focus in their attention span. I have also seen some other things that do not quite add up.

The bottom line is that some ADHD 'sufferers' can actually focus their attention without psychostimulants! Of course, I do not have thousands of 'subjects' to call upon to prove my point. I do not have thousands of study dollars to fund a study into various other types of therapies. I do not even have the ability to canvas Torontonians on a grand-scale to see how many other parents and kids out there have beaten the Ritalin trap. All I have is some anecdotal evidence.

I have known a few children who previously were thought to require medication, and who have since proven this statement to be false. I am sure that there are some others out there. It does take an unbelievable amount of hard work, persistence, creative parenting, creative teaching, huge commitment, constant reinforcement, excellent teaching, student motivation, and a variety of other factors that because of their variability, cannot even be outlined. Since not many of us have all of these required pieces of the puzzle in place at the same time, Ritalin seems like a good option. I also know that in some circumstances, medications have proven to be life-savers.

However, since I have been hearing about the use of Ritalin more and more every day, I find the whole thing a bit concerning. It just seems to me like we are creating a whole generation of medicated kids. Just a short while ago, I remember the irony of hearing the uproar when some college kids were found to be taking Ritalin to stay up all night cramming for exams. Yet where's the uproar about all the medicated kids under twelve? Then there was another recent tragedy with a new medication being used for ADHD. Another thing that seems like it should be an issue is the long-term effects of Ritalin usage. The earliest users of Ritalin have probably not even middle aged. I just wish we would concentrate on other therapies or some party would fund a study into all possible alternatives: biofeedback, behavioural programmes, counselling, attentional expansion strategies, relaxation therapy, vitamin therapy, cranial therapy, and all the others now being successfully used. It is an oversimplification to explain how each of the kids I know about has beaten the Ritalin trap, because each one is so different; each one needed an individual solution, which was replete with complications and each had a long, hard, and complicated road, with a full team of people behind them working together for a common goal. Not all kids have the same combinations of individual factors, and not all kids have a team behind them. Many times, even those with a totally supportive team of people and loving parents behind them, still require Ritalin.

However, it's also an oversimplification to jump to the conclusion that all kids with ADHD and other types of learning disabilities, should be prescribed Ritalin. It is pleasing to see that there are many people now questioning this blanket answer to very complicated learning needs. Books like Ritalin-Free Kids are now surfacing; doctors like Dr. Peter Breggin of Baltimore, MD are now questioning the use of stimulant medications in kids with ADHD; articles are springing up in magazines outlining both sides of this very complicated issue. Let us keep open to all possible scenarios. Just like we encompassed the Ritalin revolution as a godsend, let us also envision the scenario of a drug free learning disabled child who can succeed.