



Doctor: No Such Thing as ADHD

The child would daydream in class, his elementary-school teachers said. He often just didn't pay attention the way they would have liked. This was before the age of prevalent ADHD diagnoses and Ritalin, so no remedy was at hand, either. If one had been, though, who knows what he might have been?

Perhaps not co-valedictorian of his school — which he was.

I was that child. And were I attending school today and especially if my behavior had been worse, it's likely I'd have received that fashionable diagnosis. And why not? It seems everyone now could have ADHD.

This point is made by Dr. Richard Saul, who has been practicing behavioral neurology for 50 years and is the author of the new book [ADHD Does Not Exist](#). In a March 14 *Time* piece he [writes](#):

The fifth edition of the DSM only requires one to exhibit five of 18 possible symptoms to qualify for an ADHD diagnosis. If you haven't seen the list, look it up. It will probably bother you. How many of us can claim that we have difficulty with organization or a tendency to lose things; that we are frequently forgetful or distracted or fail to pay close attention to details? Under these subjective criteria, the entire U.S. population could potentially qualify.

And more and more are qualifying. Dr. Saul also writes, "The *New York Times* reported that from 2008 to 2012 the number of adults taking medications for ADHD increased by 53% and that among young American adults, it nearly doubled." Not surprisingly, however, Saul tells us that the ADHD "diagnosis" only serves to camouflage other problems. As Kyle Smith at the *New York Post* [writes](#):

One girl he [Saul] treated, it turned out, was being disruptive in class because she couldn't see the blackboard. Correct diagnosis [sic]: myopia. She needed glasses, not drugs.

A 36-year-old man who complained about his addiction to online games and guessed he had ADHD, it turned out, was drinking too much coffee and sleeping only four to five hours a night. Correct diagnosis: sleep deprivation. He needed blackout shades, a white-noise machine and a program that shut all his devices off at midnight.

A young man who asked, "Can't you just ask me a few questions and write me a prescription?" simply left the office when Saul started probing too deeply into whatever was ailing him.

One by one, nearly all of Saul's patients turned out to have some disease other than ADHD, such as Tourette's, OCD, fragile X syndrome (a genetic mutation linked to mental retardation), autism, fetal



Written by [Selwyn Duke](#) on March 18, 2014

alcohol syndrome, learning disabilities or such familiar conditions as substance abuse, poor hearing or even giftedness.

Yet others say that Dr. Saul is also missing the boat. For example, Marilyn Wedge, Ph.D., a family therapist working on her own book on ADHD, [asks](#), “Is Boyhood Now a Psychosis?” (most children diagnosed with ADHD are boys). She criticizes Saul for trading one misdiagnosis for another — and then sometimes drugging children nonetheless on that basis.

Wedge’s message would certainly be echoed by psychologist John Rosemond, a syndicated parenting columnist and author of 14 parenting books. He might agree with Saul that the ADHD diagnosis is a “crutch.” But Rosemond would more likely say it’s an example of diagnosing childhood misbehavior — resulting from a lack of discipline — as a condition of the brain. He has said that while we used to view bad behavior in children as a moral problem, we now mistakenly view it as a psychological problem.

Providing more specificity in a BeliefNet interview, Rosemond [said](#):

There are three seasons to active parenting, and parents today get stuck in the first one, the “servant” phase. This season begins at birth and lasts for about two years. You serve a child who cannot serve himself. You put the child at the center of your attention, and you orbit around the child. The old-fashioned parent understood that while this was necessary, it had to come to an end, or else you were in danger of raising a child who would believe that the world revolved around him.

...The cultural messages to parents today freeze the development of the parent at season one, the servant phase. The new ideal in American parenting is the more you do for your child — regardless of your child’s age — the better a parent you are. In many ways it freezes the psychological, emotional development of the child at toddler hood. And so, you see [older kids] still exhibiting toddler behaviors. Tantrums, defiance, high level of distractibility. All of the symptoms that we associate with attention deficit disorder (ADD) are, in fact, behaviors that are typical of toddlers.

The other two parenting seasons are the discipline phase, starting at age two; and the mentoring phase, beginning at approximately 13. But because the dysfunctional, permissive modern parenting model omits effective discipline and “freezes” development, toddlerhood is extended into later childhood, childhood into adolescence, and adolescence into adulthood (which would explain 30-something men whiling away hours playing video games). The result is sometimes a 14-year-old with emotional control more suggestive of a two-year-old.

And Rosemond himself learned the hard way. Pointing out that modern psychology is the problem, he confessed in his interview that he once embraced its parenting model, resulting in his son being the worst behaved child in third grade. It was at this point, Rosemond reports, that his wife shocked him back into reality by [saying](#), “You know, you came home from graduate school bringing all these new ideas, and none of them were in keeping with the way that you and I had been raised.... Don’t you think the fact that we never saw children who behave as badly as our own son when we were growing up should tell us that these ideas you were bringing home — they’re worthless?”

I myself have some relevant anecdotes. I once worked with children for many years, coaching a sport and running a youth athletic program. One of the worst behaved boys I saw — a child involved in the theft of \$300 at the sports facility — was the son of a psychologist. Another boy, who was without a doubt the most ill-behaved child of the thousands I had contact with and who’d been diagnosed with ADD (ADHD’s former designation), once approached me for private coaching. Well, I read him the riot



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act, saying, “Jason (not his real name), if we’re going to do this, you’d better understand that there’s one boss out there, and that boss is me.” I had also previously told him that there was no such thing as ADD, that he just had to discipline himself. Jason agreed to my terms, and when he was with me for the hourly instruction was as well-behaved and focused as any student I’d ever had. Of course, one might ask here if someone with a condition of the brain could decide to not be sick one specific hour every week.

Then there was a friend of mine who, being the son of a NYC psychologist in the 1970s, was diagnosed with a learning disability and sent to a special school for such children. Here’s what he said to me as an adult about himself and the other students at the institution: “We knew it was all nonsense [the diagnoses]; to us, it was just a way to get out of doing work.”

The questions John Rosemond and others may now ask is: Will we do the work of restoring a valid parenting model? Or will we just try to get out of it by using “crutches,” drugs, and psychobabble?



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