



Pure Facts

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School Violence Report Notes Need for More Discipline

A report received by President Reagan last month suggests that violence in public schools has reached such a magnitude that it should be considered "among the most significant, and perhaps the most overlooked, civil rights issues of the 1980's."

The report, written by officials at the Departments of Justice, Education, and the Office of Management and Budget, examines the extent to which discipline and order has deteriorated in too many public schools.

According to the authors, the recognition of the importance of good discipline to a secure learning environment may not seem particularly insightful. What is important, however, and must be understood is the extent and the severity of the issue.

There is evidence that "parents, and Americans in general, are concerned about school discipline and the effects of its absence."

In fact, the lack of discipline has been the public's major concern over public schools for the last ten years, according to the Gallup polls.

And we should be concerned.

For a 1978 study by the National Institute for Education reported that:

- Each month, 282,000 students were physically attacked in America's secondary schools.
- Each month, 112,000 students were robbed through force, weapons, or threat in America's secondary schools.

- Each month, 2,400,000 students had their personal property stolen in America's secondary schools.

This adds up to 3 million secondary school children as victims of in-school crime each month. And almost 8 percent of urban junior and senior high school students missed at least one day of school a month because they were afraid to go to school.

The discipline problem has decreased the amount of time that can be dedicated to teaching.

A junior high school teacher from the Bronx, New York, was quoted in the *New York Times*, "You don't have time to help the best kids because you spend 25 minutes in every class dealing with the troublemakers, and you can't really deal with them . . . and the kids know this. It's tough being 37 years old and dealing with

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Dr. Feingold Traces Juvenile Delinquency and Diet

The discovery that certain food additives can cause behavioral problems, learning disabilities, and delinquency in some individuals was not an accident.

Rather, it was the result of many years of Dr. Feingold's research and clinical observation as a pediatric allergist.

While studying the allergic reaction to flea bites, researchers

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The Feingold Association of the United States is pleased to see the attention given to this critical problem, and would like to emphasize the importance of a healthy diet as a factor in controlling behavioral problems.

"Disorder in our schools often begins in the school cafeteria," charges FAUS president Jane Hersey. "Ample research exists to demonstrate that what a child eats for breakfast and lunch has a direct effect upon his behavior in the classroom and his ability to learn."

In his testimony before the New York State Assembly in 1981, Dr. Ben Feingold pointed out the failure of current techniques for dealing with juvenile offenders:

"Every procedure for correction of behavior has not been successful, while every modality for rehabilitation of delinquency . . . has failed. Since all these procedures have been structured on psychological factors, we must look elsewhere for the answers, and that answer is to be found in the biosciences . . . with a focus upon nutrition.

found that the immune response was due to a low molecular weight chemical present in flea saliva.

The low molecular weight compounds (called haptens) that play a role in the immune response are also present in food additives and medications.

Medications, of course, undergo careful testing for their effects and side effects. However, thousands of

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13-year-old kids who are laughing in your face."

The National PTA noted that the annual cost of vandalism—probably more than \$600 million a year—exceeds the nation's total spending for textbooks.

The Department of Education is planning to focus research and public attention to this major problem in our schools. Some schools are already showing improvement and will be used as examples for other schools.

In an effort to help prevent school discipline and violence problems, FAUS will send the National Institute for Education literature about its program and the help it can provide.

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food additives have never undergone such pharmacological testing.

Dr. Feingold did study the effects of various food additives and found that many people who were disruptive, aggressive, restless, and learning disabled improved with dietary management.

Dr. Feingold published his paper, "Dietary Management of Juvenile Delinquency" in a 1979 volume of the *International Journal of Offender Therapy*.

This paper traces the development of Feingold's hypothesis and includes the early case histories which led him to conclude that: 1) A history of behavioral disturbances dating to infancy or early childhood usually precedes delinquency. The cause of the behavioral disturbances may often be the cause of the delinquency. 2) Nutrition plays an important role in delinquency. Dietary intervention can frequently be successful in controlling the behavioral pattern.

To obtain a copy of "Dietary Management of Juvenile Delinquency" by Ben F. Feingold, M.D., send your name, address and zip code, plus one dollar, to: FAUS Reprints/JD, P.O. Box 6550, Alex., VA 22306.

Behavioral Toxicity of Food Additives Current Evidence on the Feingold Hypothesis

by Bernard Weiss, Ph.D.

Feingold's assertions stirred enormous interest in parents whose children had navigated endless diagnostic and treatment procedures without success. It was surely to be expected that parents who had abandoned hope after disappointing experiences with standard practices should have turned with enthusiasm to a program as clear and appealing as Feingold's. Many successes were reported, mainly in the form of testimonials and clinical reports. Feingold, of course, was criticized for not having submitted his hypothesis to a rigorous experimental test, namely, controlled trials in which both the patient and the evaluators are unaware of the timing and nature of the patient's particular treatment. Such an experimental design aims to eliminate the bias kindled by the enthusiastic adoption of a new therapy.

taken at the University of Wisconsin by Harley et al. These investigators provided all of the food for the participating families. In the first phase, 36 school-age hyperactive boys spent several weeks on the control diet and several weeks on the elimination diet. Half followed the sequence experimental-control, half the reverse sequence. Thirteen boys improved on the Feingold diet according to mothers' ratings on the Conners Scale. Most of these were in the sequence control experimental, a finding that led Harley et al. to reject the Feingold hypothesis. I view that rejection as premature, unwarranted, and based on a faulty analysis of the data. A second experiment tested preschool boys under the age of 6. All 10 of these subjects, irrespective of sequence, improved on the diet, by 10% or more, according to mothers'

Many successes were reported, mainly in the form of testimonials and clinical reports.

Enough controlled studies have now been conducted, however, to allow at least a provisional evaluation of the Feingold hypothesis.

Two investigations examined the Feingold Elimination Diet as a total therapy. Conners et al. studied 15 boys who had been diagnosed as hyperactive. The parents were given diet lists from which they were required to select food items. One list contained foods with additives; the other excluded such items as well as salicylate-containing fruits and vegetables. Basing his data on a widely used rating scale of his own design, Conners reported improvement on the diet according to parent and teacher scores on the hyperactivity assessment scale. This was mainly the contribution of four or five subjects. Each phase of the diet (experimental and control) lasted several weeks, with some subjects following one sequence and the others the opposing sequence. Most of the positive responders were in the sequence control-experimental.

A more extensive test was under-

ratings on the Conners Scale. Such a finding cannot simply be attributed to chance or to dietary sequence. The Wisconsin investigators rejected the implications of these findings as well, partly because of the younger ages of the subjects. They failed to grasp the toxicologic implications of the enhanced sensitivity of the younger subjects.

Since total dietary control by the experimenter is expensive and difficult, other investigators have challenged children already maintained on the diet with one or a blend of food dyes. Food color challenges are simplified because so few are approved for use in food (the current dyes are restricted to eight). Selecting an appropriate blend from 1500 synthetic flavors would stagger even the food industry.

Excerpted from NUTRITION UPDATE, VOLUME 1, a new series on current developments in nutrition edited by Jean Weininger and George M. Briggs. Published 1983 by John Wiley and Sons, Inc., 605 Third Avenue, New York, NY 10158.

Real Food for Real People

Courts Overturn Ban on School Junk Food

The link between a poor diet and delinquency in school has been clearly demonstrated. Yet, as the following article shows, the food industry's concern may not be in the children's best interest.

School children may soon have a larger variety of foods for lunch—including soft drinks, popsicles, chewing gum, and candy.

A ban on the sale of these products on school grounds before and during lunchtime has been partially overturned in a case brought by the National Soft Drink Association.

The ban, which was issued during the Carter administration, was meant

to encourage the consumption of more nutritious meals.

Yet the new ruling may allow junk food to be sold everywhere except in the food service areas during meal periods. It will now be up to the district court to determine in what areas of a school junk food may be sold.

Bruce Silverglade, the legal director for the Center for Science in the Public Interest, states, "The thing that bothers me is that, under the court's holding, soda pop can't be sold in school cafeterias, but it might be allowed all morning long in vending machines right down the hall from the cafeteria."



Ad Hoc

Advertising is the chief source of nutritional information for most Americans, yet such advertising is not designed to provide nutritional information. As a leading advertising executive once said when talking about food products, "The job of product advertising is to persuade and sell, not to educate."

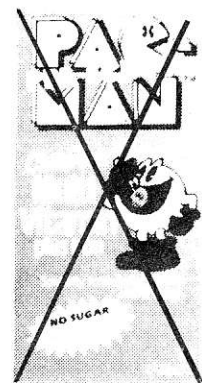
In 1981, McDonald's, largest of the fast food mammoths, spent \$3.22 million—over \$1 for every man, woman and child in the nation—to sell us on Ronald and his products.

from *Restaurants & Institutions*, July 15, 1982, quoted by *Nutrition Action*

Pac-Man Vitamins

It has recently been determined that the Pac-Man Vitamins distributed by the Rexall Drug Company do contain vanillin (synthetic vanilla) and are no longer Feingold approved.

According to the F.A. of Philadelphia and Barbara Ballmer of the Product Information Committee, both the national and local groups sent information requests to Rexall and received conflicting reports (apparently from the same man!).



The Choice Is Yours

"Made in America's Dairyland" is what the box says, but "Made in America's Chemistry Laboratory" is more appropriate, noted one Feingold member as she dumped the rest of her Swiss Miss Hot Cocoa Mix into the trash can.

It seems that the previously approved Swiss Miss mix has a "new improved flavor" and at least six new ingredients.

These changes often go unnoticed until we have bought the product or, worse yet, until we have consumed it.

So keep reading those labels! Even the ol' stand-bys change.

Old Ingredients: Sugar, nonfat dry milk, cocoa, corn syrup, whey, partially hydrogenated soybean and/or coconut oil, salt.



New Ingredients: Sugar, corn syrup solids, cocoa (processed with alkali), partially hydrogenated coconut and/or soybean oil, nonfat dry milk, whey, salt, mono and diglycerides, cellulose gum, sodium citrate, dipotassium phosphate, artificial flavor, carrageenan.

Make Ahead Hot Chocolate Mix

4 cups instant nonfat dry milk
3/4 cup Hershey's Cocoa
1 cup sugar
1/8 teaspoon salt

Combine ingredients, stirring well. Store in a tightly covered container in a cool, dry place. Stir well each time before using.

Hot Chocolate

Place 3-1/2 tablespoons of chocolate mix in 1 cup boiling water. Stir and serve.

F.A. of the Washington Area

Our Readers Write

I have seven children, five are now married and the two left at home are teenagers. Wayne, age seventeen, is one of them. I believe it was when Wayne was seven years old that I really noticed he was hyperactive. In school the teachers said he couldn't sit still to learn and was disruptive to the others. So I took Wayne to our family physician and he gave Wayne a prescription and said it would slow him down. It did just that and more. It made him like a zombie. So I took him off the medication myself and learned to live with him, and of course it didn't get any better.

Do you know what it is like to live with someone who can't sit still to eat a meal, has nightmares every night, or has to be touching someone all the time? When Wayne was about nine years old we discovered he was totally deaf in his left ear. This only made things worse.

My stomach was constantly in knots, trying to keep peace between Wayne and the other children. You see, they thought Wayne was just spoiled and I wasn't being fair. I knew that something was wrong and kept taking him to doctors for check-ups, hoping and praying they would find something wrong and we could make him better, but nothing was found. One doctor did suggest about two years ago that Wayne see a psychiatrist. Somehow I knew that wouldn't help.

This past June I was reading a Readers Digest and came across a story a mother had written and it was like she was writing about Wayne. She told the story of how she went from one doctor to another looking for an answer. Her child's problem was allergies. Well, I didn't waste any time making an appointment with an allergist. The allergist told me to get in touch with the Feingold Association.

Well, so much has happened in the last four months since we started this diet. Wayne doesn't have nightmares, can sit through a meal, doesn't have to attack the furniture before sitting down, doesn't have to be touching someone all the time, and can sit and listen in class. Wayne couldn't control his temper in school and was constantly in fights. He hasn't had one

fight this year, he says what the other kids say to him in school doesn't bother him now, he can walk away, thank God. He's gone from class clown and failing grades to a calmer teenager and is passing all his classes with B's and C's. Wayne tells me he feels like a new person and wouldn't change his diet for anything. Neither would I; it's a pleasure to come home now.



Hell-o,

First of all we would like to thank you. Thank you, thank you, very much.

Six months ago our son was diagnosed as having a salicylate allergy. We have been truly shocked and appalled at the total lack of information publicly available concerning this. We finally found out about Dr. Feingold's book and your association from author-editor Ruth Adams. We read "Why Your Child Is Hyperactive" and it was very helpful.

Our son suffers severe reactions. One minute he's fine and then the next moment you'd swear he had pneumonia. His eyes run, his nose runs, he cries (a drastic behavioral change) that his throat hurts and you can hear the congestion. He'll have coughing fits in the middle of the night and occasionally diarrhea accompanied by an inability to control his bowels. Our allergist told us this was because his body was literally rejecting the bad food.

Our son has had excellent results with the K-P diet. Our problem is relatives and the parent we share custody with. They can't understand how a little candy (etc.) could hurt anyone.

Note in letter: "Thank you for your existence!"

What is FAUS?

The Feingold Association, founded in 1976, is a volunteer, non-profit organization comprised of parents and interested professionals dedicated to improving the health and behavior of hyperactive/learning disabled children, and similarly affected

Conference News

It is time to start planning to attend the 9th Annual FAUS Conference. This year it will be held on the lovely campus of Gordon College in Beverly, Mass.

The conference will be held June 21-23, 1984, and the theme will be "Growth through Involvement."

The FAUS Conference is a time for sharing, renewing, building, and involving.

You will be able to attend workshops, visit exhibits, and listen to guest lecturers.

To receive more information, write to:

Feingold Conference
c/o Marilyn Baker
Box 34, Main Street
Fremont, N.H. 03044

PureFacts

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To find the location of the nearest Feingold Chapter to obtain general information about FAUS, write to: Feingold Association of the United States, Inc., P.O. Box 6550, Alexandria, VA 22306.

adults, through the Feingold Program. This program is based on the elimination of synthetic colors, synthetic flavors and the preservatives BHA, BHT, and TBHQ from our diet.