

The changing space of childhood in the West and its relationship to narcissism and children's mental health

Sami Timimi

عالم الطفولة المتغير في الغرب وعلاقته بالترجسية والصحة النفسية للأطفال
سامي تميمي

Abstract

Rates of diagnosis of psychiatric disorders in children have increased dramatically in most Western countries in recent decades. This article explores some of the possible socio-cultural reasons for this. The impact of the growth of Narcissism (love or pre-occupation with the self) in Western culture on both children and their families is discussed. Implications for professionals working with children who are growing up in Western or non-Western societies are outlined.

Introduction

Firstly I need to ask the reader to keep in mind my own scepticism about what I have written, as I fear it is often in danger of slipping into a romanticised stereotyped view of childhood. This is an ever present danger in most discourses on childhood, as children are so often receptacles for projections of our own (particularly parental) unfulfilled wishes and thus these discourses can easily become conflated with sentiments about the general state of society. In addition, my arguments necessarily suffer with the over-generalisations needed in order to give my narrative a sense

of coherence. Real life is never as simplistic and all cultures contain diversity at every level. Nonetheless, these genuine concerns about the difficulty of reaching beyond shifting social constructions should not deflect from pointing out that something is going on for children in rich, industrialised free market based societies, and that this something is more than a little disturbing. What I shall limit myself to doing is to paint a bit of the background Context into which children in such societies are born without attempting the more complex task of translating this into its effects

at the 'micro' level of individual children and their families.

The case of bilingual support worker Aishah Azmi, who was suspended as classroom assistance by a school in West Yorkshire (UK) after she insisted on wearing a veil in certain lessons, is symbolic of the way priorities seem to have become distorted in countries such as the UK. The decision of the school was supported by most senior politicians in the UK. Aishah was suspended on the grounds that the veil impeded her communication with the children and therefore interfered with their education. Leaving aside whether this decision is right or wrong, writing as a psychiatrist who works in the UK, I find it ironic that we attack the symbols of a belief system and culture from which Western societies have much they could learn with regards raising and educating children and instead paint the traditions that Aishah symbolises as detrimental to children's well being. After all it is societies like the UK's that are struggling with increasing problems of alienation, anti-social behaviour, alcohol and drug misuse, bullying, violence, eating disorders, self harm, behaviour

disorders, and neglect in the young, to mention but a few. I do not wish to romanticise other cultures concepts of childhood and child rearing nor do I wish to minimise the enormity of the task of improving children's lives across the world, particularly in the context of an aggressive market led neo-liberal globalisation, destabilised communities, and regional conflicts with all the devastation to family life this brings and where some local cultural beliefs are clearly problematic (like female infanticide). However, I wish to state firmly and confidently that amongst those more stable and rooted cultures across the world, sophisticated discourses on childhood and child rearing spanning millennia, exist (including within Islam) with many anthropological and other studies confirming that such communities do not share the same magnitude of problems with anti-social behaviour, anxiety states and so on, amongst the young (see Timimi, 2005a). I am not saying that we can import sets of beliefs and practices from other cultures and simply transplant them in Britain or any other country and expect them to

work. However, some reflection on the nature of beliefs, values and practices in our own and other societies may help inform us about things that can be done in our bid to develop these in a way that can be applied to the unique context each culture has. After all cultures are never static, always transforming and, in particular in the era of globalisation, always open to influences from outside its immediate set of traditions.

I also want to acknowledge that our ideas about what an ideal childhood should look like, is culturally constructed. Thus whilst the immaturity of children is a biological fact, the ways in which this immaturity is understood and made meaningful is a fact of culture ⁽¹⁾. Members of any culture hold a working definition of childhood, its nature, limitations and duration based on a network of ideas that link children with other members and with the social ecology ⁽²⁾. While they may not explicitly discuss this definition, write about it, or even consciously conceive of it as an issue, they act upon these assumptions in all of their dealings with, fears for, and expectations of, their children ⁽³⁾.

This makes it difficult to pass a value or scientific judgment about whether children are better or worse off in any particular culture or society, as the idea that there are universal ideals or natural unfolding process that all children should be able to 'have', is suspect. Nonetheless, children are socialised by belonging to a particular culture at a certain stage in that culture's history, so certain differences in children's behaviour can be seen as a result of different child rearing philosophies and socialisation processes. We can, therefore, make some comparisons, whilst keeping in mind the above caveats and indeed using them to help us 'interrogate' any naïve or romanticised assumptions.

Changing childhoods in the West

There are however, some things that we can say with reasonable certainty. We know that the space of childhood has changed. Contemporary Western culture has witnessed rapid changes that effect children. Well documented changes include: children's diets (which have increased in sugar, saturated fats, salt, chemical additives and decreased in certain essential fatty acids and fresh

fruit and vegetables); family structure (which has seen the demise of the extended family, increase in separation and divorce, increase in working hours of parents, and a decrease in the amount of time parents spend with their children); family lifestyle (there has been an increase in mobility, decrease in 'rooted' communities, and an increasing pursuit of individual gratification); children's lifestyle (which has witnessed a decrease in the amount of exercise, the 'domestication' of childhood due to fears about the risks for children resulting in more indoor pursuits such as computers and TV); the commercialisation/commodification of childhood (increase in consumer goods targeted at children and the creation of new commercial opportunities in childhood, for example the 'parenting' industry and the pharmaceutical industry) and changes in the education system (modern teaching ideology is rooted in methods such as continuous assessment and socially orientated worksheets that favour the learning style of girls over boys). These changes are occurring at a time when standards in the West for what is

considered to be acceptable behaviour in the young and acceptable child rearing methods are both narrowing. It is now harder than ever to be a 'normal' child or parent ⁽⁴⁾.

Increase in psychiatric disorders in children

In parallel with this claims are being made that 'mental' disorders among the young in Western societies (such as emotional, anxiety, eating, and behavioural disorders) have been steadily increasing in the past few decades ⁽⁵⁾ despite the perception that recent generations have 'never had it so good'. Figures for prescriptions of psychotropic medication to children and adolescents both illustrate the depth of this problem and the peculiar cultural style of responding to it. For example, researchers analyzing prescribing trends in nine countries between 2000 and 2002, found significant rises in the number of prescriptions for psychotropic drugs in children, were evident in all countries- the lowest being in Germany where the increase was 13%, and the highest being in the UK where an increase of 68% was recorded ⁽⁶⁾. Of particular concern is the increase in rates of

stimulant prescription to children. By 1996 over 6% of school-aged boys in America were taking stimulant medications ⁽⁷⁾ with children as young as two being prescribed stimulants in increasing numbers ⁽⁸⁾. Surveys show that in some schools in the United States over 17% of boys are taking stimulant medication ⁽⁹⁾ and it was recently estimated that about 10% of school boys in the United States take, have taken or will take a stimulant ⁽¹⁰⁾. In the UK prescriptions for stimulants have increased from about 6,000 in 1994 to over 450,000 children by 2004 a staggering 7,000+% rise in one decade ⁽¹¹⁾.

Is this the canary in the mine? These rapid changes in practice in the area of children's mental health have not come about as a result of any major scientific discovery ^(12, 13, 14 and 15). There are two other possibilities that could explain these dramatic increases. The first is that there has been a real increase in emotional and behavioural disorders in children leading to greater public scrutiny and concern about such behaviours which, in turn, has resulted in a greater professional effort to understand and alleviate these behavioural and emotional

problems. The second possibility is that there has not been a real increase in emotional and behavioural disorders in the young but there has been a change in the way we think about, classify, and deal with children's behaviour – in other words our perception of and the meaning we ascribe to children's emotions and behaviour. Both possible causes for the rapid increase in our identification of and treatment for mental health disorders in the young require an examination of contexts. Indeed the third, and in my opinion, most likely possibility that explains the increase is an interaction between the aforementioned two possibilities. In other words, it could be that changes in our cultural-/environmental contexts are causing increases in certain emotional and behavioural problems and these, in turn, are changing our perception of and the meaning we give to childhood behaviour, and this in turn, is changing the way we deal with childhood behaviour and our common cultural practices around children (such as child rearing and education), which in turn is further increasing these behaviours and so on.

The impact of 'Narcissism'

In a short paper such as this I cannot possibly explore in any detail the impact of changes in the space of childhood in Western modernity that I listed above. Instead I will confine the rest of this article to the impact a particular aspect of its value system which has become embedded in daily discourse due, at least in part, to reliance on rather aggressive forms of neo-liberal free market principles and the growth of individualism. This is the problem of 'narcissism'. Narcissism describes the character trait of 'self love' or in the more everyday sense 'looking after number one'. The spread of narcissism has left many children in a psychological vacuum, pre-occupied with issues of psychological survival and lacking a sense of the emotional security that comes through feeling you are valued and thus have an enduring sense of belonging.

One of the dominant themes used by advocates of neo-liberal free market economy ideology is that of 'freedom'. At the economic level this is a core requirement of free market ideology. Companies must be as free from regulation as possible; to concentrate on com-

peting with others, with maximizing of profits the most visible sign of success. There is little to gain from social responsibility (only if it increases your 'market share'). At the emotional level the appeal to freedom can be understood as an appeal to rid us of the restrictions imposed by authority (such as parents, communities and governments)⁽¹⁶⁾. By implication this value system is built around the idea of looking after the wants of the individual – narcissism. Taking this a step further, once the individual is freed from the authority they are (in fantasy at least) free to pursue their own individual self-gratification desires, free from the impingements, infringements, and limitations that other people represent. The effect of this on society is to atomise the individual and insulate their private spaces to the degree where obligations to others and harmony with the wider community become obstacles rather than objectives. In this 'look after number one' value system, other individuals are there to be competed against as they too chase after their personal desires. This post second world

war shift to a more individualistic identity was recognized, as early as the mid-1950s, by commentators who first spoke about how the new 'fun based morality' ⁽¹⁷⁾ was privileging fun over responsibility – having fun was becoming obligatory (the cultural message that you should be ashamed if you weren't having fun). With the increase in new possibilities for excitement being presented, experiencing intense excitement was becoming more difficult, thus creating a constant pressure to push back the boundaries of acceptable and desirable experiences and lifestyles, opening the doors, amongst other things, to subcultures comfortable with drinking to excess, violence, sexual promiscuity, and drug taking. In this value system others become objects to be used and manipulated wherever possible for personal goals and social exchanges become difficult to trust as the better you are at manipulating others the more financial (and other narcissistic) rewards you will get. Such a value system, which ultimately seeks to eradicate or at least minimize social conscience as a regulator of behaviour, cannot

sustain itself without our moral conscience beginning to feel guilty ⁽¹⁶⁾. Thus it is no coincidence that those who are the most vociferous advocates of free market ideology tend also to advocate the most aggressive and punitive forms of social control. Whereas some of these guilt-induced policy proposals are aimed at putting some restraint on unfettered competitiveness, greed and self seeking; amongst those more fanatical believers in the ability of market ideology to solve its own problems (and thus best to leave the market to get on with it), the most common defence used to try and deal with the anxiety produced by this guilt is through finding target scapegoats for this anxiety. In other words, instead of facing up to the suffering the encouragement of narcissism brings to the world, our leaders need to convince us that our problems are due to other evils (like fundamentalist Islam, asylum seekers, homosexuals, single parents, bad genes etc.). As a result another hallmark of Western culture's increasing psychological reliance on developmentally immature impulses that encourages it to avoid taking responsibility for its

beliefs and practices, is the so called 'blame culture', which fills the media and contemporary discourse more generally.

In any culture, children and then adults come to acquire their subjective selves through incorporation of values beliefs and practices that sustain the desired social relationships of that culture⁽¹⁸⁾.

People, Althusser argues, can only know themselves through the mediation of ideological institutions. So how do the ideologies of modern Western capitalism influence the way children and their parents see themselves, their roles and subsequently the way they behave?

In this narcissistic value system others can easily become objects to be used and manipulated for personal goals, thus social exchanges become more difficult to trust as the better you are at manipulating others the more narcissistic rewards you can get. Dependence when it occurs is more likely to happen with professionals thereby reinforcing the idea and status of the expert. As Amin points out⁽¹⁹⁾ Western capitalist ideology has necessarily led to the domination of market values, which penetrates all aspects of social life and subjects

them to their logic. This philosophy pushes to the limit of absurdity an opposition between humankind and nature. The goal of finding an ecological harmony with nature disappears as nature comes to be viewed as a thing to be similarly manipulated for selfish ends.

With narcissistic goals of self-fulfilment, gratification and competitive manipulation of relationships so prominent, together with the discouragement of the development of deep interpersonal attachments, it is not difficult to see why so-called narcissistic disorders (such as anti-social behaviour, substance misuse, and eating disorders) are on the increase^(20, 21). A heightened concern for the self can be both 'liberating' and simultaneously oppressive. At the very least it makes the transition to taking on responsibility for others (as parents must) problematic.

A system of winners and losers

The attention given to individual cases of child abusers whom society can disown as not belonging to or being (at least in part) the product of its culture masks Western governments implementation of national and international policies that place

children at great risk and the extent to which it can support an 'abusive' culture. Monetarist policies of the 80's and 90's cut health, social, welfare and education programmes as well as enforcing similar austerity measures on developing countries, policies that had a particularly adverse effect on children and families ^(22, 23). This also has a class specific character with the plight of poor children being viewed as self-inflicted and the more insidious problem of neglect of their children by middle class parents often passing unnoticed. With the increase in the number of divorces and two working parents, fathers and mothers are around their children for less of the day. A generation of 'home aloners' are growing up. The amount of time children have with their parents has dropped dramatically in recent decades in the West, and the back up systems that extended families presented are dwindling ⁽²⁴⁾. As families get smaller and spend less time with each other, children lose the learning opportunities that come in social systems more geared to social responsibility/duty – instead of having to negotiate several relationships

within regular contacts with multiple kin, children increasing live in more emotionally charged small units (the nuclear family, single parent families etc.) trying to psychologically survive within a fiercely competitive and individualistic culture.

Children are cultured into this value system by virtue of living within its institutions and being exposed daily to its discourse. Ultimately this is a system of winners and losers, a kind of survival of the fittest where compassion and concern for social harmony contradicts the basic goal of the value system. As this system is showing itself to be bad for children's happiness a similar process as above works to try and distance awareness of the anxiety arising from the guilt thus produced. Instead of asking painful questions about the role parents/teachers/governments/etc. may be playing in producing this unhappiness, children's difficulties can be viewed as being the result of biological diseases that require medical treatment (we can blame their genes).

These social dynamics also get projected directly onto children. Children come to be viewed as both victims (through adults using

and manipulating them for their own gratification) and potentially 'evil' scapegoats (as if it is these nasty children's bad behaviour that is causing so many of our social problems)⁽²⁵⁾. This reflects a profound ambivalence that exists toward children in the West. With adults busily pursuing the goals of self-realization and self-expression (these being the polite middle class versions of self-gratification), having absorbed the free-market ethic, children when they come along, will, to some degree, 'get in the way'. A human being, who is so utterly dependent on others, will inevitably cause a rupture in the Western value system goals of narcissism that individuals who have grown up in these societies will have been influenced by to a greater or lesser degree. Children cannot be welcomed into the world in an ordinary and seamless way. They will make the dominant goals of modern life more difficult. They will, to some degree, be a burden.

More and more surveillance

Thus far I have suggested that a basic feature of modern Western free-market based culture is an increasingly narcissistic value system, which interrupts chil-

dren's and families' lives in a number of adverse ways. The complex dynamics of our concepts of self increasingly shaped along narcissistic notions, interacting with the collective guilt and fear of retribution, becoming a loser in the competition, or fear of pilfering of one's accumulated resources, means that governments feel the need to police these potentially dangerous selves in an increasing variety of ways. Thus, one feature that has changed dramatically over the past century of Western society is the amount of surveillance to which parents and their children are subjected. The state has all sorts of mechanisms of surveillance and an 'army' of professionals tasked with monitoring and regulating family life as if they are aware that children are struggling in this culture and deal with their guilt by individualising and 'scapegoating'. This is not to say that we do not need surveillance as the effects of child abuse are many and far reaching. But we must also ask the question of what the impact of this is on non-abusive families and on attitudes and practices of child rearing more generally. The increase in levels of anxiety

amongst parents who may fear the consequences of their action, has reached the point where the fear is that any influence that is discernible may be likely to be viewed as undue influence, making it more likely that parents will leave essential socialising and guidance to the expertise of professionals⁽¹⁵⁾.

Life has thus become difficult for parents who are caught in a double pressure when it comes to raising their children. On the one hand there are increased expectations for children to show restraint and self-control from an early age, on the other there is considerable social fear in parents generated by a culture of children's rights that often pathologizes normal, well-intentioned parents' attempts to discipline their children. Parents are left fearing a visit from Social Services and the whole area of discipline becomes loaded with anxiety. This argument holds equally true for schools. Parents often criticise schools for lack of discipline. Schools often criticise parents for lack of discipline. This double bind has resulted in more narcissistic power going to children. Parents are being given the message that their children

are more like adults and should always be talked to, reasoned with, allowed to make choices, to express themselves and so on⁽⁴⁾.

The atomization of society also means that there is a lack of common ownership of rules and values with regards to upbringing of children. Children may learn that only certain individuals have any right to make demands and have expectations with regards their behaviour and with the task of parenting coming to be viewed in Western culture, as one that needs childcare expert's advice in order to get it right, a form of 'cognitive parenting' has arisen whereby parents are encouraged to give explanation and avoid conflicts⁽²⁶⁾. This hands-off, particularly verbal model of parenting is both more taxing and less congruent with children's more action based view of the world.

Into this anxiety loaded, narcissistically pre-determined vision of childhood and practices of child rearing, new diagnoses (such as childhood depression, Attention Deficit Hyperactivity Disorder, Aspergers syndrome) appear to provide a temporary relief to the beleaguered, intensely monitored child carers.

By viewing children's poor behaviour and distressed emotional state as being caused by an 'illness', all are apparently spared from further scrutiny. The result however, fits into another aspect of Western 'fast culture'. With the widespread application of the techniques of medicine to manage children's behaviour and emotional state, particularly through use of drugs, the approach to children's mental health has achieved what I call the 'McDonaldisation' of children's mental health. Like fast food, recent medication centred practice came from the most aggressively consumerist society (USA), feeds on people's desire for instant satisfaction and a 'quick fix', fits into a busy life-style, requires little engagement with the product, requires only the most superficial training, knowledge and understanding to produce the product, de-skills people by providing an 'easy way out' thereby reducing resilience, creates potentially life long consumers for the product, and has the potential to produce immeasurable damage in the long term to both the individual who

Consume these products as well as public health more generally.

Conclusion

As a child and adolescent psychiatrist who has dual heritage (with an English mother and Iraqi father) and who has experienced growing up in both Arab and Western culture I am naturally interested in what each tradition can offer the other to enrich the experience and mental health of children. I have outlined how certain features of Western culture have rapidly changed the space of childhood in the West. I have suggested that modern Western culture is built on a particularly aggressive form of neo-liberal free market capitalism and that one of the consequences of this is an increasingly narcissistic culture. When narcissism is privileged over social responsibility one of the first groups to lose out is children. This has contributed to an increase in mental health problems amongst children in the West (such as emotional disorders, behavioural disorders, and substance misuse) as well as changing ideas about what constitutes 'normal' childhood and childrearing.

In the era of globalisation those with a more powerful economic influence have been exporting not only their goods but also their value system. Visions of child-hood and family life carved out within Western culture (including those developed by psycho-medical groups) may not be in the best interests of children around the world. Indeed, there is a good case for arguing the converse – that professionals working with children in the West may have much to gain by learning more

about how non-Western cultures understand both childhood and child rearing ⁽¹³⁾. In addition professionals working in non Western settings should think twice before uncritically accepting beliefs and practices about family life and childhood that were developed in the West and simply transplanting these into settings where such values and practices may be alien to the population and undermine approaches that may actually be more protective of children's mental health.

خلاصه

لقد طرأت في معظم البلدان الغربية في العقود الأخيرة زيادة هائلة في تشخيصات الإضطرابات النفسية عند الأطفال. ونستطلع في هذه المقالة بعضاً من الأسباب الاجتماعية-الثقافية المتعلقة بهذا الموضوع. كما نناقش وقع نمو النرجسية (حب الذات أو انشغال البال بالذات) في الثقافة الغربية على كل من الأطفال وعائلاتهم. ونتطرق كذلك إلى ما ينطوي عليه هذا الأمر من مضامين بالنسبة للمهنيين الذين يعملون مع الأطفال الذين ينشأون في محيط الحضارة الغربية أو غير الغربية.

References

1. Prout, A. and James, A. (1997) A new Paradigm for the sociology of childhood? Provenance, promise and problems. In A. James and A. Prout (eds.) Constructing and re-constructing childhood: Contemporary issues in the sociological study of childhood. London: Falmer Press.
2. Harkness, S. and Super, C. (eds.) (1996) Parents' Cultural Belief Systems: Their origins, expressions and consequences. London: Guilford Press.

3. Calvert, K. (1992) *Children in the House: The Material Culture of Early Childhood, 1600-1900*. Boston: Northeastern University Press.
4. Timimi, S. (2005a) *Naughty Boys: Anti-Social Behaviour, ADHD, and the Role of Culture*. Basingstoke: Palgrave MacMillan.
5. British Medical Association (2006) *Child and Adolescent Mental Health: A Guide for Professionals*. London: BMA.
6. Wong, I.C., Murray, M.L., Camilleri-Novak, D. and Stephens, P. (2004) Increased prescribing trends of paediatric psychotropic medications. *Archives of Disease in Childhood* 89, 1131-1132.
7. Olfson, M., Marcus, S.C., Weissman, M.M. and Jensen, P.S. (2002) National trends in the use of psychotropic medications by children. *Journal of the American Academy of Child and Adolescent Psychiatry* 41, 514-21.
8. Zito, J.M., Safer, D.J., Dosreis, S., Gardner, J.F., Boles, J. and Lynch, F. (2000) Trends in prescribing of psychotropic medication in pre-schoolers. *Journal of the American Medical Association* 283, 1025-30.
9. LeFever, G.B., Dawson, K.V., and Morrow, A.D. (1999) The extent of drug therapy for attention deficit hyperactivity disorder among children in public schools. *American Journal of Public Health* 89, 1359-1364.
10. Sharav, V. (2006) ADHD drug risks: Cardiovascular and cerebrovascular problems. Available at <http://www.ahrp.org/cms/content/view/76/28/>
11. Department of Health, NHSE (2005) *Prescription Cost Analysis England 2004*. Available at http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsStatistics/PublicationsStatisticsArticle/fs/en?CONTENT_ID=4107504&chk=nsvFE0
12. Timimi, S. (2002) *Pathological Child Psychiatry and the Medicalization of Childhood*. London: Brunner-Routledge.
13. Timimi, S. (2005b) Effect of globalisation on children's mental health. *British Medical Journal* 331, 37-39.
14. Timimi, S. and Maitra, B. (eds.) (2006) *Critical Voices in Child and Adolescent Mental Health*. London: Free Association Books.
15. Maitra, B. (2006) *Culture and the mental health of children*.

- The 'cutting edge' of expertise. In S. Timimi and B. Maitra (eds.) (2006) *Critical Voices in Child and Adolescent Mental Health*. London: Free Association Books.
16. Richards B. (1989) Visions of freedom. *Free association* 16, 31-42.
 17. Wolfenstein, M. (1955) Fun morality: An analysis of recent child-training literature. In M. Mead and M. Wolfenstein (eds.) *Childhood in Contemporary Cultures*. Chicago: The University of Chicago Press.
 18. Althusser, L. (1969) *For Marx*. Harmondsworth: Penguin.
 19. Amin, S. (1988) *Eurocentrism*. New York: Monthly Review Press.
 20. Lasch, C. (1980) *The Culture Of Narcissism*. London: Norton (Abacus).
 21. Dwivedi, K.N (1996) Culture and Personality. In K.N. Dwivedi and V.P. Varma (eds.) *Meeting the Needs of Ethnic Minority Children*. London: Jessica Kingsley.
 22. Scheper-Hughes, N. and Stein, H.F. (1987) Child abuse and the unconscious in American popular culture. In N. Scheper-Hughes (ed.) *Child Survival*. New York: D. Reidel Publishing.
 23. Kincheloe, J. (1998) The new childhood; Home alone as a way of life. In H. Jenkins (ed.) *Children's Culture Reader*. New York: New York University Press.
 24. Lipsky, D., Abrams, A. (1994) *Late Bloomers: Coming of Age in Today's America*. New York: Times Books.
 25. Stephens S. (1995) Children and the politics of culture in "Late Capitalism". In S. Stephens (ed.) *Children and the politics of culture*. Princeton: Princeton University Press, 1995.
 26. Diller, L.H. (2002) ADHD: real or an American myth. *Presented at the 14th Annual Conference of the Associazione Cultural Pediatri*. Rome: 10th of October 2002

Correspondence:

Professor Sami Timimi
 Consultant Child and Adolescent Psychiatrist and
 Director of Postgraduate Medical Education
 Lincolnshire Partnership Foundation NHS Trust
 Visiting Professor of Child and Adolescent Psychiatry
 University of Lincoln, UK
 E-mail: stimimi@talk21.com

