



C R A Z Y

**A Father's Search Through
America's Mental Health Madness**

P E T E E A R L E Y

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PREFACE

I had no idea.

I've been a journalist for more than thirty years, a reporter for the *Washington Post*, the author of several nonfiction books about crime and punishment and society, some of them award-winning, even best-selling. I've interviewed murderers and spies, judges and prosecutors, always seeking the truth and attempting to convey it so that readers can see the people and the events for themselves—can understand not only what happened, but also why.

But I was always on the outside looking in. I had no idea what it was like to be on the inside looking out. Until my son, Mike, was declared mentally ill.

If my son had broken his leg, most doctors would have agreed on the diagnosis and treatment. “Sir, your son’s leg is broken into two pieces. The bone needs to be reattached, the wound closed, and the body allowed to heal.” But that wasn’t what happened with Mike. One psychiatrist said he had bipolar disorder, another said he showed early stages of schizophrenia, a third said he had schizoaffective disorder. They prescribed a dizzying range of different drugs and different therapies, and even worse, because he was an adult, I couldn’t simply swoop in and make medical decisions for him. An array of incompatible laws about patient rights stood in my way, like a line of trees.

But even that was nothing compared with what happened when Mike, suffering delusions, committed a crime and was arrested. Suddenly, the line of trees became a forest. The contradictions, the disparities, the Catch-22s multiplied, until I began to despair.

“I just feel so damn helpless,” I told my wife, Patti, one night. “I want to do something, but I don’t know how to help him.”

“Then do what you do best,” she said. “You’re a journalist. You make your living investigating stories. So investigate this. Pete Earley, the journalist, can dig out information that Pete Earley, the father, would never be able to get. If you want to help Mike, and others like him, then write about what he is going through, and find out why the mental health system in this country seems to be in such a mess.”

I hesitated. I didn’t know how Mike would feel about it, and I didn’t want to risk writing something that might anger the people who’d be dealing with his case. I was also scared about what I might find. In the past, it wouldn’t have

bothered me if I'd discovered alarming conditions in the mental health system. Now this disease wore a recognizable face.

I decided to do some preliminary digging, and the more I dug, the clearer it became: What was happening to Mike was not an oddity. It was a tiny piece in a bigger story. A major shift had occurred in our country. The mentally ill, who used to be treated in state mental hospitals, were now being arrested. Our nation's jails and prisons were our new asylums.

In 1955, some 560,000 Americans were being treated for mental problems in state hospitals. Between 1955 and 2000, our nation's population increased from 166 million to 276 million. If you took the patient-percapita ratio that existed in 1955 and extrapolated it on the basis of the new population, you'd expect to find 930,000 patients in state mental hospitals.

But there are fewer than 55,000 in them today. Where are the others? Nearly 300,000 are in jails and prisons. Another half million are on court-ordered probation. The largest public mental health facility in America is not a hospital. It's the Los Angeles County jail. On any given day, it houses 3,000 mentally disturbed inmates.

These statistics gave me an idea, but before I pursued it, I wanted to talk with Mike.

"I'm thinking about writing a book about the criminalization of the mentally ill," I told him.

"Okay," he replied.

"Mike, I want to make certain you understand what I'm going to do. I want to write about you and how you got into trouble with the law."

"Do you think people will want to read that?" He sounded surprised.

"It would be more than just your story."

I outlined my plan. I would write about his mental breakdown and how it had led to his being arrested, but I'd fold his personal story into a much larger one—an examination of the mental health system in America today. In order to do this, I'd find a jail in a major city far away from where Mike had been arrested, and I'd spend time inside its cell blocks, observing mentally ill prisoners. I'd select individual inmates to shadow, monitor their criminal cases through the courts, and follow them into the community. I'd interview correctional officers, public defenders, prosecutors, judges, mental health care professionals, and the police. I'd talk to parents, siblings, and spouses. I'd consult historians about how the mentally ill have been treated over the decades and centuries, and I'd question the civil rights lawyers who fought to pass laws to protect them. I'd meet with

legislators and state hospital administrators. But my main focus would always be on the jail and the prisoners there. I'd use it as a microcosm. It would serve as my hub, much like the center of an old western wagon wheel. The inmates whose lives I would chronicle would be the spokes jutting out from it.

Could I be objective? Probably not. I'm a father first, a journalist second. But I could be honest and thorough and relentless.

Mike was still taking strong doses of antipsychotic medication when I first mentioned my idea to him, and I could tell by his reaction that he was having trouble focusing on what I'd just said.

"You're more important than any book," I explained. "I don't want to write anything that might harm you or limit your future. I'll forget about doing this if you want me to."

He didn't seem to understand how a book might hurt him, so I explained that writing about his illness could stigmatize him. "I'm not interested in making you a poster child for mental illness."

He was quiet for several moments, and then said, "If a book will help other people understand what it's like to get sick and be arrested, then do it."

"Are you sure?"

"If it helps someone else, yes."

We talked about using his name. To my surprise, he wanted me to print it. "You've got to be honest," he said. But I was still hesitant. We compromised by agreeing to use his middle name. It would be a thin veil.

I was still nervous that Mike might not really understand the impact of what I was proposing. I couldn't predict what might happen in the future—five, ten years from now—after I outed him in this book.

"Dad," he said, "tell my story."

"I'll let you read it. You can go over the parts about you."

"No! I don't want to do that," he replied firmly. "I trust you to tell the truth."

This book tells two stories. The first is Mike's. The second describes what I learned during a yearlong investigation inside the Miami-Dade County jail in Miami, Florida, a city that's home to a larger percentage of mentally ill residents than any other major metropolitan area in America. I was given the complete run of the jail, its inmates and employees, with no restrictions. Although the portrait that follows was taken from a single jail, it could just as easily have been a snapshot of any community in America.

For privacy reasons, I have used pseudonyms to identify most of the inmates. The exceptions are my son and prisoners whose cases have already been heavily publicized. All the characters in this book are real, and I have not changed any other facts about them. Their voices, and those of all the other people in this book—lawyers, law-enforcement officials, doctors, social workers, family—who are attempting to thread their way through the mental health maze in America, are reported accurately.

There have been many books by professionals and journalists writing from the outside looking in. There have been many books by patients and inmates writing from the inside looking out. This book attempts to do both.

If you belong to any of the groups mentioned above, I hope the book provides some extra light and clarity to the situations you face every day. If you do not, I hope it will inspire you to action, for the stories told here, in this day and age, are extraordinary, and worthy of your attention.

If it could happen to my family, it could happen to yours.

Mike's Story: 1

How would you feel, Dad," Mike asked, "if someone you loved killed himself?"

It was not a threat, delivered in anger. Rather, my son's voice was tired. I was speeding south along Interstate 95, driving from New York City to Virginia. We were a couple of miles north of Baltimore. For the past few hours, I had been begging Mike to take Zyprexa, a medicine prescribed for mental disorders.

"Pills are poison," Mike snapped. "Doctors don't know what they're talking about. I just think differently."

I had first learned that he was slipping earlier that morning. "Something's wrong," his older brother had telephoned from Manhattan to tell me. Since that call, I'd discovered Mike's dementia actually had become obvious several weeks before, when he'd found a videocassette on the sidewalk while walking to a subway near Times Square. It was Oliver Stone's movie Heaven and Earth, a gut-wrenching account by a Vietnamese woman about the fighting there and its aftermath. Mike had watched it three times, and he had become convinced it contained a secret message aimed at him.

"As soon as you see it, everything will make sense," he told me. "You'll see."

I pressed harder on the gas pedal and again suggested he take a Zyprexa tablet.

"Okay," he finally declared. "I'll take your damn pill." But he paused just before he slipped the tablet into his mouth.

Please, God! I silently prayed. Swallow it!

As I watched, he took a gulp of water from a plastic bottle that I'd given him, but when he wiped his lips dry with his sleeve, I noticed his hand drop down next to the car seat, and he shook it.

Was that the pill?

"No one dies unless God wants him dead," he announced.

"Did Patti's first husband choose to die?" I asked.

Patti was my wife, his stepmother. Her first husband had died from cancer, making her a widow with four children. My question annoyed him. So he ignored me. For several moments, neither of us spoke, and then, suddenly, his thoughts came in rapid fire, bouncing from topic to topic without any apparent connection.

God. Capitalism. Satan. Comic books. Sex. Spontaneous laughter.

Mike saw an encrypted message in a bumper sticker on the blue sedan ahead of us: "Believe in Him!" It was a signal from God, he told me. They were

everywhere. But only he could interpret them.

Just as quickly, Mike began to cry. Tears flowed from his eyes and he moaned as if he were an injured animal that had been struck by a car and knocked sprawling into a roadside ditch. The last time I'd seen him in such agony was when he was five years old and he got smacked in the head with a stick while playing with friends. A one-inch gash in his scalp had turned his silky blond hair crimson and sent him screaming to find me.

Now he was twenty-three.

"Why are you crying?"

"I can't tell you."

"Why can't you tell me?"

"Because you'll hate me forever."

Patti had already alerted the emergency room at Inova Fairfax Hospital, near where we lived. It was where we'd gone when he'd suffered his first psychotic episode. That was when I first heard the words bipolar disorder. It was a mood disorder that caused its victims to switch in seconds from feeling euphoric to feeling suicidal. Hospital security guards had to wrestle him down the first time we took him there. But I shoved that memory aside and drove. My speedometer registered 95 mph. I wanted to stop and use a bathroom, but I was afraid.

What if Mike took off? He had run from me before when he had been delusional.

I couldn't risk it. My needs would have to wait.

Mike began laughing.

"Dog God!" Ha ha ha. "God Dog! Get it?"

Hang on, son! I thought. The doctors will know what to do.

It was 8 P.M. by the time we reached the emergency entrance. An intake nurse rolled her eyes when Mike tried to convince her that he was perfectly sane. She snapped a white plastic ID around his wrist and led us down a hallway into a room, where another nurse soon appeared and questioned him again. She asked me about Mike's psychiatric history. While I gave her the abbreviated version, he sat unconcerned on an examination table, ignoring our conversation and glancing through an old copy of the New Yorker.

Mike's first psychotic breakdown occurred during his senior year at a university in Brooklyn. I have since learned this is not an uncommon time for mental illness to strike young men and women, because of stress. He had been about to graduate and was having a difficult time finding a job. I had never suspected

that he might have a mental illness. There was no family history of it, at least that I'd been told of. The first hint that something was wrong came one weekend during a phone call. We spoke every Sunday, and he mentioned that he'd taken five homeless men to McDonald's that morning for breakfast.

"Why'd you do that?" I asked.

"They were hungry and I wanted to talk to them."

I didn't understand, but then fathers often don't understand why their sons and daughters do certain things in college.

Later that night, Mike called me again. He wanted to clarify his story. Now he wasn't certain if he had actually taken them to breakfast or if he had just dreamt that he had. He said he was having difficulty eating. Everything tasted bad. He'd been vomiting a lot. He started to cry, and I told him that I'd come up to New York in the morning.

"Everything will be okay," I assured him.

Before hanging up, he added that he'd gone to a party in the dormitory the night before, and it occurred to me that he might have been given or taken some hallucinatory drug. The next morning while I drove to Brooklyn, Patti telephoned several Manhattan psychiatrists and found one who was willing to see Mike immediately. I found my son waiting for me in his room. He didn't want to talk to a shrink, but after an hour I persuaded him.

"Let's hope it's drugs," the psychiatrist said after interviewing Mike.

"What!" I replied, clearly shocked.

"It's better than the alternative," he explained. "Your son might be mentally ill."

Mike and I spent that day talking in his dorm room. I told him that we'd find a way to make everything okay. We hugged. I drove home on autopilot. He went to see the psychiatrist two more times, but then he stopped. There was simply too much schoolwork. Besides, he said, he felt fine. "I'm not crazy!" he told me. "I just need to eat better."

And he had seemed okay when we talked on the following Sundays. Now, looking back, I should have known better. How could I have been so stupid? There'd been lots of clues. But I'd wanted to believe the psychiatrist had overreacted. I'd wanted to believe Mike was just nervous about graduating. Besides, I had my own daily problems to juggle. Life had gone on, and the few times that I'd reminded him of the McDonald's incident, he complained, "Stop asking me about that! It was no big deal! Everything is under control."

And then his mind broke.

Five months after Mike had taken the homeless men to breakfast, one of his college friends had driven him home to me.

“He’s not right,” his buddy said.

Mike hadn’t slept for five nights. He’d spent most of his days wandering aimlessly through Manhattan. He’d walked twenty miles one day going nowhere. He’d also become fixated on a friend named Jen, only she didn’t know it. He was convinced they’d soon be married. He told me his plans shortly after his friend dropped him off.

“I’ve got to save her,” Mike said. “I’ve got to save Jen.”

“From what?”

“Evil.”

Because he hadn’t eaten, we drove to an International House of Pancakes, his favorite place for morning food. Mike looked exhausted, but when he talked, he seemed rational about everything—except for Jen. Whenever I asked about her, he’d become giddy and tell me how much he was in love and how he and Jen would be married soon. When we got back home after eating, I persuaded him to go to bed and left him in his bedroom. I slipped into my study and called the psychiatrist in Manhattan for advice. Before the doctor came on the line, I heard the front door open and slam shut. I looked out the window. Mike was walking away. I hung up the receiver and ran after him.

“Where are you going?”

“To save Jen. She’s in danger.”

“This is nuts,” I said. “Come home.”

He started walking faster.

“You’re acting weird. Do I have to call the cops?”

Mike shot me a glaring look and started running. I tried to keep up, but couldn’t. I turned back toward the house, jumped into my car, and began searching for him. An hour later, he came home. He couldn’t find Jen, he said.

“We need to go to the hospital,” I told him. “You need to see a doctor.”

“I’m not going to see a doctor.”

“Jen wants you to go,” I tried.

“She’s there?” he asked, his face suddenly brightening.

“Yes,” I replied.

“Hurry!” he demanded. “Take me.”

Patti called the hospital while Mike and I were en route. Two security guards met us at the door. A doctor gave him an injection of Haldol, a powerful antipsychotic. Incredibly, within an hour, he was calm.

“I’m sorry,” he said. At that point, Mike agreed to enter Dominion Hospital, a private mental institution. He recognized something was wrong. Four days later, his psychiatrist told us that our insurance company was pressuring him to discharge Mike. Although confused, Mike seemed to be thinking rationally. We brought him home. Two days after that, he got up early before everyone, slipped outside, and decided to go for a drive. About a mile from the house, he let go of the steering wheel and shut his eyes. He told me later that he’d not been sure if he was awake or dreaming. He figured the quickest way to find out was to turn loose the wheel.

The car crashed into a parked sedan. Hearing the noise, its owners called the police. A sympathetic officer telephoned us.

“Your son is crazy,” he simply said.

I’ll never forget those words.

Crazy.

But Mike wasn’t arrested.

Instead, I was allowed to take him back to Dominion. This time around, our insurance company let him stay an entire week. When he was discharged, I asked him what he’d remembered about the past several days.

“There were two of me: one sane, one insane,” he explained, “but the sane one couldn’t do anything but watch the insane one.”

We decided Mike needed to stay home for a while and not return to New York until he was better. He hadn’t wanted to see a psychiatrist or a therapist, but we forced him to go. His doctor had prescribed Zyprexa and Depakote. Mike didn’t like the pills. I couldn’t blame him. He put on thirty pounds. The medication turned his mouth dry, made him sluggish, and killed his sex drive. One afternoon while he was out, I sneaked into his bedroom and counted the tablets. There were too many in the bottle. He hadn’t been taking them. I confronted him as soon as he returned.

“There’s nothing wrong with me,” he insisted. “I don’t need pills. I stayed up for five days in New York. That’s what caused this. I just freaked out. Stop making such a big deal out of it. I’m not sick!”

I reacted exactly the way his therapist had told me to: with tough love. I drew a line. “Take your medicine or you can’t live here.”

Mike stormed out and moved in with his mother, my ex-wife. For the next four months, Mike, indeed, seemed fine. When he announced that he was going back to New York, even I thought maybe we’d overreacted. Maybe his breakdown was a onetime event. Maybe it had been brought on by exhaustion. Maybe the

doctors were wrong and Mike wasn't really mentally ill.

As we'd always done, Mike and I spoke every Sunday on the telephone after he returned to Brooklyn. But Mike always kept our talks brief. He realized I was upset because he still wasn't taking his antipsychotic pills. Even so, he had done well. He'd finished school and found a job.

And then his brother called me. Mike had started acting odd again.

The nurse who listened to me describe Mike's psychiatric history said a doctor would be in shortly to examine him.

At least this time I've gotten him to a hospital before he was too far gone! I thought. At least this time, he won't be driving down a road and closing his eyes to see if he is awake or asleep. He'll get help.

I looked at Mike, who was still thumbing through the well-used New Yorker, and I wondered if he knew what was happening.

For the next two hours, we waited. No one came to help us. No one poked a head in to ask if we were okay. Mike was still reading the same magazine. He was starting to discern secret messages in the text. I was beginning to seethe.

"This is incredible," he said. He giggled.

Another hour passed and then, unbelievably, another. I'd always prided myself on being polite, patient. But four hours! It was midnight now. I couldn't believe we were still waiting. What was the holdup?

"I'm leaving," Mike announced.

"Just a minute," I said. I rushed into the hall and waved down a nurse. A few minutes later, a doctor entered the room. He was in his thirties, clean-cut, and all business. As he came in, he raised both hands as if he were surrendering to enemy troops.

"Sorry you've had to wait, but we're busy, and there's not going to be much I can do for you," he said.

I thought: You haven't even examined my son! But the doctor explained that the intake nurse had already warned him that my son believed all medicines were poison.

The doctor asked Mike, "Do you know who I am?"

"You're the witch doctor. Ow-ee-ow-ah-ah."

The doctor grinned. This isn't funny, I thought. I blurted out, "He's been diagnosed as having bipolar disorder." I began to explain how Mike had been hospitalized at Dominion Hospital twice and how he had not been taking his antipsychotic medicine for at least five months.

But the doctor cut me short. "What's happened before this moment doesn't really matter," he declared.

I was stunned. "It doesn't matter?" Would he say this to a patient complaining of any other illness?

"On the drive here from New York, Mike asked me how I'd feel if someone I loved killed himself," I said. I wanted this doctor to understand how serious this was.

He turned to face Mike and asked, "Are you going to hurt yourself or anyone else?"

"No!"

The doctor glanced back at me and shrugged.

I couldn't believe this was happening.

"He's delusional!" I exclaimed. "For godsakes, he's been reading the same magazine page for four hours."

With an irritated look, the doctor asked Mike, "Who's the president of the United States?"

"That idiot George Bush."

"What day is it today?"

Other questions followed: "Can you count backwards by sevens from a hundred? What does the phrase 'Don't cry over spilled milk' mean? How about the words 'a heavy heart'?"

Mike answered each question easily. Then he explained that he was God's personal messenger and that he was indestructible.

The doctor said, "Virginia law is very specific. Unless a patient is in imminent danger to himself or others, I cannot treat him unless he voluntarily agrees to be treated." Before I could reply, he asked Mike, "Will you take medicines if I offer them to you?"

"No, I don't believe in your poisons," Mike said. "Can I leave now?"

"Yes," the doctor answered without consulting me. Mike jumped off the patient's table and hurried out the door. I started after him, but stopped and decided to try one last time to reason with the doctor.

"My son's bipolar, he's off his meds, he has a history of psychotic behavior. You've got to do something! He's sick! Help him, please!"

He said, "Your son is an adult, and while he is clearly acting odd, he has a right under the law to refuse treatment."

"Then you take him home with you tonight!" I exclaimed.

Before the doctor could respond, we both heard a commotion in the hallway.

Mike was screaming at his mother because she had told him that he needed to take his medicine. "You drink beer, why not take your medicine?" she'd asked. "Alcohol is a drug."

My son was so out of control that a nurse called hospital security. I was glad. Maybe now they will medicate him, I thought. But before the security guard arrived, Mike dashed outside, cursing loudly. I went after him. Meanwhile, the doctor told my ex-wife that it was not illegal for someone to be mentally ill in Virginia. But it was illegal for him to treat them unless they consented. There was nothing he could do.

"Even if he's psychotic?" she asked.

"Yes."

Mike couldn't forcibly be treated, the doctor elaborated, until he hurt himself or someone else.

Afraid to take him home where Patti and my other children were waiting, I drove to my office, which was in a ranch-style house where I'd lived briefly after my divorce. I bolt-locked the doors and hid the keys. While Mike was taking a shower, I found his old medication, crushed a Zyprexa tablet, and spiked the milk shake that I made him. He drank it and went to bed. But I was too worried to sleep. I didn't want him slipping out, so I placed a chair in his doorway and spent the night sitting in it.

The next morning, he insisted I watch Heaven and Earth. "You'll understand then," he said. Patti arrived and tried to reason with him, but he wouldn't listen to logic. Without warning, he'd burst into tears. "There's so much pain. I just want the pain to go away."

Patti had already called the therapist and the psychiatrist who had treated him after his first breakdown, but neither had seen him in months. Unless Mike wanted to talk to them voluntarily, they both said, there was nothing they could do to help. "Try taking him to a different emergency room," the psychiatrist suggested.

I couldn't believe this was happening. My son was crazy and getting worse with each passing moment! Yet I couldn't get anyone to help him.

I asked Mike, "Will you go see your former psychiatrist?"

"No. You took me to the hospital and the doctor there let me go, didn't he? That means I'm fine."

Unsure what to do next, I slipped into my office and called the Fairfax County police.

"Until he breaks the law, we can't get involved," a dispatcher told me.

Patti telephoned a friend whose daughter has bipolar disorder. The friend told her, "I had the same problem when we took our daughter to the hospital. I yelled at her doctor, 'Do I have to wait for my daughter to hang herself before you'll treat her?' And he said, 'Yes. If she attempts suicide, then we can do something. Sorry, but it's the law.'"

It was 2 P.M. now, and during the past twenty-four hours I'd watched Mike slip deeper and deeper into his own delusional world. Because it was his mind that was sick, I was being told that I had to back off and leave him to face his madness alone. I had to watch as he gradually continued to lose all touch with reality.

This can't get any worse, I thought.

But I soon discovered it could.