

Book Proposal (Narrative Non-Fiction):

**FOUR SCREAMS AND A WHISPER
CULPABILITY AND MODERN PSYCHIATRY: MOVING THE BOUNDARIES**

by
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For Truman Capote. He stared , forgot and paid the price.

1. AUTHOR'S NOTE

The sweltering heat on this Saturday afternoon lay in shimmering layers over the buildings of the Stockton California Youth Authority campus, housing hundreds of incarcerated youths. It made time move slowly, and my mind sluggish. Working out of a non-airconditioned office in the com center, I slowly plowed through the list of requested psychiatric evaluations for this day. There were not too many, most of them the usual simple requests to assess the youth's treatment needs – which usually meant comments on the ability to participate in the core program, especially schooling without causing any disturbance; and requests to make recommendations to the parole board: did the youth meet the minimum standards for release, i.e. “did he assume full responsibility for his actions”; and “did he develop insight”. I should get through this in good time, get back home have dinner and maybe catch a movie.

Outside of the com center, in the boiling midday sun, stood a group of young men in the institutional garb, clustered around one of the counselors, Jack. These were in all likelihood were my prospective examinees. Jack was a tall, slender man, in his fifties, who still moved with the grace of a former athlete. His past as a professional football player was a source of endless stories, which he freely shared with the young men. His past prowess on the field earned him their deep respect and admiration, as did his easy going manner in which he got them to do all the things they needed to, as per program: line up for chow; go to school; put the dumbbells back

on the rack, get ready to go to sleep, say goodbye to their visitors on the weekend. He did not have a family, but referred to his charges as “ his boys”, relishing the fatherly role he was able to play with them. And the boys relished his ability to fill a void in most of their lives so effectively. Jack was easily the most popular staff member on campus. He was appreciated by almost all kids, black, white, latino, Asian, it did not matter in a place where race very often was a strongly defining and delineating characteristic.

I called to guards at the com center to bring up the first examinee, and I heard them barking over the loudspeaker: “Turner, get your ass in here, the doc is ready for you”. Turner was in the cluster around Jack. But instead of him coming up to the door to buzzed in, I saw him lean over something or somebody on the ground, with everybody in the cluster doing the same, pointing and yelling something which I could not understand. The youths turned to the guards and screamed for help. My first thought that this was “ a gang related incident”, as was so often the case on campus. The cluster contained a mixture of all races. Had somebody “dissed” somebody? Was there a fight? I went up to the guard’s command post to get a closer look to see if I could do anything, yelling to the guards: “Get the 911 team out here”.

There was Jack, on the ground surrounded by the boys in the cluster. He was very pale, blood gushing out of his mouth, his breath looked very shallow. By the time I got to him and the emergency medical team arrived, he stopped bleeding and breathing. All attempts at resuscitation failed. Jack was dead. The boys had backed off to let us work on Jack, looking terrified, some with tears rolling down their cheeks. Jack was dead. The guards called in reinforcements,

assuming somebody had shanked Jack. I must confess, I also thought that someone had taken revenge on him for something, in an act of senseless violence as was part of living on campus. A few months earlier, a female guard had been killed by one of the inmates. But what had happened with Jack?

As it turned out, Jack died from a hemorrhage caused by metastatic lung cancer. He had kept the diagnosis a secret. Violence had nothing to do with it.

What happened after his unexpected death impacted me profoundly. The rumor of his death spread throughout the campus like wildfire. All the wards on my examinee list reverberated with they had witness first hand. Wards were aggrieved and reported similar deaths by significant people in their lives: family, friends, “homeys”. But what also happened was that the event reactivated other and seemingly unrelated traumatic experiences, which they had kept a secret, for fear of being seen as “weak” or “unmanly”; or because they simply lacked awareness of psychiatric symptoms, or worse yet, they had no words and language to describe them. Sequelae of child abuse, sometimes life threatening, sexual exploitation at the hand of trusted figures, unspeakable atrocities committed or witnessed as a part of living with or in a gang come forth, a deluge of human misery. Most importantly, none of them had been identified, diagnosed, treated, followed up. This was all the more a tragedy, as I knew that psychiatry in the past 3 decades had progressed sufficiently to effectively treat and eradicate most of these problems. These boys could have lived very different lives, had the help they needed been brought to them. My head and my heart ached. And my vision of how we could change the trajectory of all these lives for

the better took a firm hold of my imagination. And they strengthened my resolve to tell these stories through research, teaching and clinical care for the following 3 decades. The current book delivers my knowledge and experience in a different way, one that I hope will reach a broad lay and political audience, persuading them to join me in my battle.

I will attempt to achieve this goal by telling stories. The events in this story are real. However, in order to protect the identity of the students, teachers, parents, school and the perpetrators, they had to be deeply disguised. I want to be certain that the reader gets a close up look at an otherwise very difficult to understand and tragic phenomenon. The stories to follow are patterned after a typology which we have shown to be helpful in assessing and treating the ven most severe delinquents, predicting their future and making available what modern medicine has to offer to a world of crime. To group the stories into types helps me disguise identities, while staying true to character. The product is hopefully the best that narrative medicine has to offer: showing the human side of youths which often seem devoid of conscience, regret and repentance.

2. WHAT IS THIS BOOK?

FOUR SCREAMS AND A WHISPER is a book about young people who commit murder and other violent crimes. It is also a book about the ways I've used as a psychiatrist to assess and treat incarcerated juveniles who have committed these crimes. At the same time, it summarizes my experience as the director of Stanford's Program in Psychiatry and The Law, where I serve as an expert to guide lawyers, judges and juries.

My task as a forensic expert and as a treating psychiatrist always begins after the fact. The crime has been committed. The young person is or is about to be incarcerated. Efforts at the prevention of crime have failed for these youths, and my task is to restore them to a state wherein they can be returned to the community. My involvement with these youths over thirty years has led me to discover ways of making sense of the atrocities they've committed by bringing the tools of modern psychiatric medicine and a good deal of common sense to bear on their cases. My job is to help them. Treatment, healing and restoration is their only hope.

It is this knowledge that *FOUR SCREAMS AND A WHISPER* will bring to a general reading audience.

This book is a summary of all that I have learned over the decades of my professional life as a clinician, teacher and researcher at the Stanford University school of Medicine. I have recently completed a standard textbook on this very same subject, entitled "Disruptive Behavior: Development, Psychopathology, Crime and Treatment", published by Oxford University Press in 2017. It is the academic counter piece to this collection of interlinked stories, summarizing progress in the domain of psychiatry dealing with Disruptive Behavior Disorders in the past 30 years. The textbook and this collection of stories complement each other, expanding the reader's knowledge in two different ways. This collection of stories is primarily aimed at the lay public. The stories told do not sacrifice complex facts, but portray them in such a manner that the lay person can appreciate them fully.

Compared to when I started out in this field in 1985, we have acquired a great deal of deeper understanding, enabling us to be effective in helping these youngsters escape from extreme adversity. It is also very gratifying to see that our research at Stanford has contributed significantly to this progress.

There is a further purpose to this book -- a very important purpose -- that is well beyond the simple the gathering of knowledge and imparting of information. My involvement with youth who have killed has brought about a watershed catharsis in my own thinking about the very nature of children as well as the very nature and meaning of murder. I feel that we need a truly compelling new attitude in our societal policy for such youth and -- most particularly -- in our treatment of them. As a society, we do not understand this phenomenon of youth who kill and, in our ignorance, we are stymied by it, seek to brush it under the rug, condemn it thoughtlessly as sheer moral evil, or attempt to treat these children as if they were adults. We ignore it, sensationalize it or just bemoan its existence.

A casual look at the headlines over the past few years is enough to shock anyone. The views from news helicopters of schoolyard murder victims lying dead by a cyclone fence, falling bleeding from school windows, carried out on gurneys . . . The continuing news stories of drive-by shootings . . . The revelations of arms caches gathered together by children with the purpose of attacking their schools or other institutions . . . The celebrity killings, in which famous people are murdered by their own children . . . The heartbreaking accounts of seemingly well-adjusted children who

suddenly, without warning, kill in cold blood . . . Clearly we are not doing well in preventing these most violent juvenile crimes.

At this writing, the level of such crime has dropped somewhat. But anyone such crime is too many, and still, a considerable portion of violent crime is being perpetrated by young people. Even if we try to prevent crime more effectively, there will still be those who will not respond to prevention or those who will somehow slip by without being successfully included in such efforts.

We've been thinking about this problem in the wrong way. Currently we believe that because young men and women commit severe crimes, they are somehow just explosively unusual, just unexplainable. We put them in jail and ponder the notion that perhaps the times themselves are therefore unexplainable.

We think that incarceration, "doing time" is a means to a cure. But the fact of the matter is that incarceration alone without treatment is unlikely to change much. Recidivism rates of incarcerated but psychiatrically untreated youth are extremely high. At best, incarceration without treatment is a lengthy time out, in which the young people *may* reflect on their lives and their futures. That's unlikely, though, if they don't have help.

They need much more from us. They need to learn and be able to think about their crimes, and they need qualified help to do this. They need new tools to navigate life's treacherous waters, and guidance on how to use those tools. They need to be taught, treated and made ready for return. Education, diagnosis, treatment and reintegration hold more promise to achieve better outcomes.

In the current political atmosphere, much stock is placed in dealing with youths who kill by trying them as adults and meting out severe punishments, even death sentences. This path is not likely to succeed either, not from a moral, ethical, legal or even fiscal standpoint. This is what data clearly show. Intended as a deterrent, the death penalty has never succeeded to diminish crime. We must approach the issue in a much more comprehensive way, one that is realistic and compassionate and is informed by the latest knowledge of 21st century medicine. Bringing medicine to crime is the best path.

This is not simply an altruistic suggestion on my part. There is a very important set of facts that accompany my reasoning. Ultimately, most of these youngsters *will* return to their communities – or other communities – an average of two and a half years after they have committed their crimes. They committed their crimes as juveniles and were sentenced as juveniles. So they will shortly be released.

A youth like this could be your neighbor, your daughter's boyfriend, your son's babysitter. Without treatment, he could be back in the community, next door to you, still ignorant, still angry and vindictive, still seeking, perhaps violently, to right all the wrongs that life has dealt him. On the other hand, if he is well-treated during those two and a half years, restored to mental health and put on a positive developmental trajectory, he'll have a much better chance of finding his way back to normal society.

Treatment , education and confinement is the formula I advocate. Many of these youngsters, while still on the streets, have failed previous efforts at treatment. The world has been too much for them. They've been bombarded by elements they cannot understand or control because of social, psychological and psychiatric limitations But now, their confinement -- still as youths -- offers a completely new opportunity to get them developing on a more healthy path before they turn too old to be influenced at all by interventions. So, interestingly, for these incarcerated kids there is a window of opportunity between mid-adolescence and young adulthood through which we can reach many before they embark on a lifetime career of violent crime. Many of them attempt to exit from their antisocial trajectories, realizing that those bring a dangerous and uncertain future. Many of those trying fail, because their adaptive repertoire in many domains of functioning – interpersonal, academic, vocational, basic medical health habits and avenues to re-create – is so limited for reasons to do with medical disorders or social disadvantage.

We need effective treatment, treatment that must be brought to the very places that handle these young killers and other delinquents, and we need to do it while they're there. Funding such efforts will be a case of money well spent. We will spare much suffering and grief.

Modern psychiatry and developmental science has much to offer to our efforts to treat these kinds of crimes more reasonably and effectively. And we should do this, if not for any other reason than that these murderers are not so different from you and me. As we study aggression in all its forms we have discovered that all of us -- every one of

us -- harbor vulnerabilities and capabilities that in the wrong climate could be activated and magnified, leading to disastrous outcomes. Aggression and anger are a normative part of our survival toolset – just like fear, sadness, ambition, etc. This interpretation is part of a body of developmental psychiatric knowledge that has developed over the past fifteen to twenty years that needs to be brought to the attention of the general public, to help them understand what’s going on with these youths and to advocate proper treatment for them.

Beginning My Own Journey

Before I began these studies many years ago, I believed that certain human actions were beyond understanding, and that killing other people was one of those acts. Indeed I felt that murder was the least understandable and least forgivable of crimes. Despite my generally liberal politics, I felt that society should insure that murderers be removed from all human inter-action. Murderers, I thought, were of a kind that should be put away forever. Killing is beyond humanity.

But then I began to meet young men and women who commit such crimes. And as I became more and more involved, I remembered a quote that has always been dear to me and which has a unique affinity to medical practice: “Nihil humanum mihi alienum est – nothing human is foreign to me”

As a young psychiatrist, I was called by a public defender I knew in California to help in the psychiatric assessment of a young adult murderer. I had had no direct experience with such people and found the prospect distasteful and very unsettling. But my wife and I were just establishing a new family and I knew I could use the money that would come from this project. So I agreed to it, and immediately upon entering the world of this particular young person, I began seeing a side of murder entirely unlike anything I had imagined.

I discovered that a systematic pattern of familial and institutional abuse, neglect, missed diagnoses and missed opportunities had made it impossible for the young man to receive appropriate intervention and treatment as a child. It was heartbreaking to hear about his repeated attempts to right his life, only to be thwarted by overwhelming odds and by wrongs committed against him by those to whom he was entrusted for care. To my great surprise, I found that instead of being repulsed by this person, I was drawn to him, not unlike Truman Capote experienced as he got to know the senseless murderers he described in his seminal book : *In Cold Blood* Indeed I began to feel deep personal disappointment and even rage that this human being had been so mishandled and mistreated that he had ended up in a horrible emotional state where killing someone seemed to him the only option.

I was taken aback by the ignorance regarding his care that pervaded the institutions and professionals he encountered. Many times these professionals were

people who wanted to do good deeds and were well-intended. But I was nonetheless shocked by how little was offered to him of what modern psychiatry had available for his care.

What would have happened if only someone had done what was necessary, or someone had guided others to do so? Had he had proper treatment, would the young man have ended up in the same desperate position? Would he have killed?

I thought that I could be the person who could do the necessary thing, who could intervene, who could treat. With considerable trepidation, I decided to become a consultant to the juvenile justice system, by working in juvenile detention centers. I entered into this role with fear, hesitancy and the very firm expectation of “being had” by the incarcerated kids, for many reasons: for personal gain, for a way out, for excuses or attempts to minimize their responsibility for the crimes they had committed. I still assumed that many or even most of these children had simply been psychopathic from an early age, marked as early perpetrators of unspeakable acts. I imagined I would hear descriptions of inhuman activities that were impossible to understand and to treat.

Initially, some of the cases -- a very small minority of them -- confirmed this picture. But in time, as I grew accustomed to working with them, I began seeing a much more fine-grained picture of the majority of these youngsters. I began to see shades of gray in their stories. Contradictions. Ambiguities. Subtleties. Nuance.

They were all murderers, to be sure. But few of them fit the rigid model that I had had in mind. Very often, I found myself driving home from the youth authority compound, going over in my mind a report I just had written and thinking: “There but for the grace of chance go I”.

Still, initially I couldn’t understand what exactly had made these kids capable of murder. It all seemed quite chaotic and random, the killings themselves and the events leading up to them. The old hands in the juvenile justice system kept telling me that these kids were just crazy and they lived in crazy times. But I was not ready to concede defeat to purely random events.

I became more determined to find out who the kids were and why they had done what they’d done. This was the first step in my effort to help them.

My research in combination with my clinical experience as their psychiatrist and doctor led me to appreciate how, for these kids, growing up is like navigating a sailing ship through a great storm filled with very bad emotional weather, conflict and danger. It becomes increasingly more difficult to weather that storm, and the sails begin to tear, the masts to fall, the ship to founder. Ultimately, the kids must do something to save themselves, and that something very often is a desperate, aggressive, violent act of unquestioning rage. Sadly -- very sadly -- murder appears to them to be the only alternative. Murder . . . an act that in the eyes of almost every society on earth is viewed as the most despicable of crimes.

Despite this, I was beginning to see that, if we had looked deeper, we could have found patterns in these kids that would have indicated the increasingly higher probability that they would perpetrate the crime of murder. We could have seen that their development was heading in a direction where murder sooner or later would become a possibility.

I determined to bring that deeper look to them now that they were in prison, while I and they had that most precious of all commodities: time.

The Development

After almost thirty years of working with kids who murder, I've defined four types, and in *FOUR SCREAMS AND A WHISPER* I tell the stories of individual kids who fit these models. This is a model of classification which I imported from the psychology of personality, which I and many others have studied in great detail across the entire life span. It has implications for current and future adjustment. These types describe a majority of people. The typology is of course not all encompassing – no typology can ever be – but it offers a chance to predict behavior and aid in selecting the treatments and interventions which have the greatest chance of leading to positive outcomes. And we have shown – most relevant for cases of delinquents – that the typology predicts reincarceration rates in delinquents over a 3-5 year span.

The types are created by the individuals' personality characteristics, and their habitual ways of regulating their emotions and impulses in particular. These characteristics in turn determine the most prevalent nature of their aggression. In

discussing the crimes which brought them into custody, I begin to formulate the string of events, motives and causes which ultimately explain why they did what they did and leads me to prescribe the interventions that will help them recover, restoring them to a path toward health and productivity.

A big issue in writing about these youths was the protection of their identity, as one can imagine. The types described in *FOUR SCREAMS AND A WHISPER* are composites of cases in each of these types I have gotten to know well, have treated and learned in great detail about their path after release from the youth authority. Although I have had many of these youths give me explicit consent to write about their specific case in an effort to help me help them and kids in similar positions (I must say I was surprised and moved by the spontaneous altruism that emerged in the course of our discussions) , the nature of my professional relationship and their status as an incarcerated dependent of the state makes it simply impossible from an ethical point of view to obtain truly informed consent. This means that I had to create composites of similar cases which protects all these individual's identity. Still, these composites are created true to type, and are invaluable in helping us understand the horribly difficult position these youngsters find themselves in as they grow up.

The types are as follows:

- The psychopathic cold-blooded killer.

This person fits many of the preconceived stereotypes we have about killers and criminals. I encounter him with some regularity, but fortunately rarely. My main goal is to help identify him and keep him from harming others as best I can. It is doubtful that

any method of current interventions available to us is effective with such a youngster. Identifying him, however, may ultimately lead us to new methods of intervention based on our knowledge of him.

For this individual, there is very little emotion: good, bad or otherwise. He makes little attempt to control himself. He does what he wants whenever he wishes. For him, murder is a calculated act of extreme aggression. Often it is a predatory act, committed for plain personal gain. Sometimes for him, murder serves as a weapon of intimidation and revenge and even a source of pleasure and sick satisfaction. This person usually knows that he is doing wrong by societal standards, but he's cynical about the relevance and applicability of those standards to him. He's cynical about the situation that leads him to kill. He feels entitled to do anything in the service of taking care of "number one", and there is no question as to who "number one" is.

To treat him is actually dangerous and usually not successful. One would have to start with the teaching of right and wrong, of membership in human societies and regard for others and their rights. In most cases of the psychopathic killer, this is an impossibility.

In my story of(possible names: RATKO; HAGEN; HAKON; SAMUEL GARTH; TRAVIS; CLINT; PORTER), a young man who as a youth was a gang contract murderer and a psychopathic cold-blooded killer, I fail to change the overall outcome. I am powerless to help him emotionally. He is too far removed from any ability to see the evil that he has done. Too much bad stuff has happened for too long,

Growing up in a world where anything could be done to him with impunity, he had become a person who perpetrated calculated murder for a living. Now, I've come in too late to treat him, way too late. Still, I do manage to help him by getting the court to change his sentence of death, only to see him condemned to living hell in a notorious maximum security facility in northern California.

In the last moments before he is confined, he thanks me for what I did for him. He reassures me he will be all right. This comes as a complete surprise to me, and represents a tiny sliver of humanity in someone who I thought was made of ice.

- The second type of murderer is the anxious and eager-to-please “wannabe”, as the prison guards call them. Frequently this person is on the fringe of gang activity and has been surviving the dangers of his neighborhood with the help of the gangs. (possible names HUBERT ARNO KIPP).

This type of murderer is in the wrong place at the wrong time. His greatest personal failing is that he does not have the capacity and moral fiber to refuse to do what he knows is wrong in a given situation.

At all times he knows that he is doing wrong. His emotions are active and diverse, but anxiously controlled and managed at all times. Indeed he is capable of controlling himself even to his detriment. If a gang member, he wants to appear tough and unemotional, and can do so. When with his family, he can be sweet and emotionally approachable.

The release of his emotion is dependent on the environment of the situation, not on personal internal decision. He's a bit of a chameleon. He at times appears dishonest and deceitful; other times, disarmingly kind and straightforward. In a normal social environment, he could do quite well. But when exposed to an environment that is criminal, he is very vulnerable to those influences.

And therein lies his tragedy. Because the environment in which he lives drives so much of who he is, he cannot resist larger forces that result in a criminal act. Those forces overwhelm his ability to deal with matters in a constructive way.

After the murder he knows he's done wrong. He's remorseful and contrite, but still at a loss to explain how he did what he did. He always puts other people's opinions and feelings first. He is at the mercy of the circumstances in which he lives. This is a dangerous position to be in when the world all around you is threatening and full of crime.

One example of this type from my own experience is ARNO, whose story appears as one of the four stories in this book. He is the son of Chilean immigrants. He is the youngest of 8 children, and is trying to make it in his bad neighborhood without wanting to trouble his parents. Both parents are working two jobs and are continuously strapped for time. This child's special vulnerability is his fearfulness and his eagerness to please. His crime? A gang rape gone wrong, and it is his assault of the victim that kills her.

- For the reactive, emotionally labile type, aggression is just a loose fragment among the many fragments of a scattered personality. There is plenty of emotion. A lot -- perhaps even most of it -- is negative, ruled by fear, anger, depression and rage. The control of these impulses is poor and gets worse when the person is upset. He lives with a very short fuse. Here, aggression and murder are impulsive events, triggered by emotional upset that flares up rapidly and overwhelms the individual's capacity to plan and think.

Sometimes rejection, disappointment and hurt drive his acts. They result in a rapid escalation to aggression and violence that is unopposed by rational understanding. After the murder, he may feel deep remorse and regret, often incriminating himself and turning his emotional aggression toward himself. Sometimes, he develops a fairly sophisticated system of rules and idiosyncratic laws that he employs to justify his deeds. His treatment is usually complicated and lengthy, involving medications, psychotherapy and education in fairly basic matters. Gradually, a new cohesion and a more successful self-regulation can emerge.

In *The FOUR SCREAMS AND A WHISPER*, we meet two such murderers:

- LAWANDA, an overweight girl whose mother's life is scattered and confused, whose father is in jail for dealing drugs. LAWANDA's own emotional state is one of constant confusion and bitterness. She becomes involved with a gang and, while being sexually abused by the gang leader, kills him with his own gun. (– she is the whisper)

- LOCO LEO CRAZY KILLA, a KRIPS gang member whose youth is a mess of bad grades, trouble at school, trouble at home. He is caught stealing a radio from a car by the car's owner. In a fit of panicked rage, CRAZY K LOCO LEO stabs the man and kills him. The peculiarity of how he stabs the man and the fact that in retrospect he felt he was in an automatic state of mind, gives away the origin of his deed: it is the almost exact replication of a murder he witnessed as a child.
- For the overly controlled and repressed individual, the murderous act appears explosively and seemingly out of nowhere. Anger and negative emotion are habitually ignored, neglected parts of himself. Which were never socialized, but for very different reasons than with the other types we have described so far. These individuals grow up in overly controlled families, that very often make extraordinarily high demands on children and will punish any transgression severely, often by physical punishment. Contrary to the chaotic and under-structured families which are normative in these impoverished circumstances, these are families which desperately are trying to have their children be prosocial, in leadership roles, but these families are surrounded by chaos and danger, from which they aim to isolate themselves. This succeeds up to a point. It can in fact lead to good adjustment, in the long run as long if there are no catastrophic events which trigger anger and aggressive responses. These families teach their children only to suppress, repress, control anger, which is useful, but has its limitations. Because anger and aggression have their place in our adaptive armamentarium, when we are threatened in our safety and possessions, when our loved

ones are being endangered, when we are being deprived of necessities and when carefully accumulated goods are being stolen from us. With children from these families, it is as if they only had binary responses to threat: either none, or explosive. Because they are not carefully taught, and or because they have a labile hot button switch (because they were traumatized at one point, but do not acknowledge that), and because they have incidental access to lethal weapons, their sometimes justified actions will have catastrophic effects. These are individuals who most definitely know right from wrong, but very often their moral code tends to be old testament biblical. Ultimately, their anger gains a subconscious life of its own, striking when it's least expected. This individual can control his impulses very successfully, for extremely long periods of time. He is well socialized and most definitely knows right from wrong. However, for complicated reasons, he ignores insult, trauma and danger for long periods of time until one day a situation triggers uncontrollable rage. The lethal attack is the result.

In a normal environment, he would be described as stoical and self-reliant. Needing to appear positive before himself and others, he is remarkably intolerant of his own weaknesses and problems. After he commits the murder, he confesses readily and assumes responsibility. But he is usually at a loss to explain what happened. Most interesting to me, he actively evades and resists others trying to help him do so. But once his initial resistance is dealt with successfully, he can trace the triggers that led to the outburst of his violence. His treatment requires that he learn about anger and

aggression, that he accept them and integrate them to his personality in a more useful fashion.

In this book, I describe the case of GORDON HUMBERT CYRIL WESLEY, a high school football star, an excellent student, a boy who appears destined for success. At dinner one night with his stepfather Bill, he pulls out a pistol and murders him. Leaving the gun on the dinner table, he walks to the phone and calls the police, to tell them what he's done.

These are examples of "the FOUR SCREAMS AND A WHISPER". In the book, each of these stories is told in great detail and is accompanied by the story of my own work with the individual in prison. We learn about the murders and what led to them, and we learn how -- or whether -- these killers are able to rehabilitate themselves with my help.

I did this computer analysis to check my voice:

I WRITE LIKE ANALYSIS: AGATHA CHRISTIE

3. CHAPTER OUTLINE:

Introduction: *ARE "THEY" "US"?*

My experiences as a young schoolboy in Vienna, Austria in the very early 1950's. A mandatory program in Austrian schools in "denazification" results in periodic classes intended to educate the children about the Nazis, who they were and how they came to be. The classes are based in part on propaganda films made by Nazi filmmakers with the ostensible purpose of glorifying Nazi policies and atrocities. Now that those policies have destroyed Europe and brought about the deaths of countless millions of people, these same films are used to show the children how bad the Nazis really were. The commentary that accompanies the movies emphasizes the notion that these Nazi murderers were simply not representative of the average German or Austrian people's points of view. The Nazis were just evil murderers. They were "not us".

In my later youth, however, I begin to understand how members of my own family and numerous family friends have been involved with the Nazis, either as soldiers or otherwise. These discoveries cause me to begin rethinking my very earliest attitudes toward murderers. Perhaps it is possible that some murderers are actually not just "they". Some of them might be "us."

As an adult in California many years later, now a psychiatrist on the faculty of the Stanford University School of Medicine, with a specialty in youth and crime, I reassess the attitude toward murderers that I've held since my youth. I realize that any lingering attitude that the murderers were "not us" no longer jibes with what I've found in the very troubling stories of many of my patients . . . youths who have committed

murder. I've now worked with so many youths that are murderers that I realize that one cannot simply put them in the single category of "murderer" and leave them in prison somewhere to rot.

I'd actually known this all along. As I'd grown up in Vienna, I'd begun to see that the "they" that murderers once represented to me could be "us." That understanding had begun as I had found out that some of our neighbors had in fact been part of the feared SS, the Hitlerian elite killer squads who were responsible for so many mass killings. It was striking to see these neighbors playing with their dogs or children, how gentle and careful they were with them. It was impossible to imagine that these were the people that perpetrated what I saw in these movies. They did not talk about it. Indeed they kept whatever had happened a secret. But there were whisperings in the halls of our apartment house, and sometimes you could hear men talking about the war in the *gasthauses*, but you never heard about the killings we saw in the movies. Those only happened on the screen. The scenes seemed to us unreal and even staged.

These insights begged some questions that i could no longer ignore: who are these people that kill? What leads them, drives them to committ this ultimate act of inhumanity? Could anyone of us be one of them? Why or why not? What would have to happen to turn me into one of "those" people?

Now, with my years of work with youth who kill, i can see that probably most of us people can kill, that killing is something that is part of us, disturbing as this may

be. Given the right mixture of social context and individual vulnerability, almost all of us can kill.

Chapter 1: *Who is the murderer?*

An introduction to the dilemma presented by youth who murder. I discuss the base of knowledge and current thinking about delinquency from the point of view of developmental psychopathology. I describe my understanding of individual child murderers I have known based on the assessment of strengths and weaknesses in their characters that could have helped predict the probability of their crimes. I outline the origin of these strengths and weaknesses, and how they formed under the influence of maturation and socialization to produce adverse outcomes for the children.

This chapter features numerous real-life vignettes that describe each one of what I view as the four major types of murderous delinquent. The reader is guided to other relevant literature -- expository and psychiatric -- to deepen his or her understanding of these types of individuals.

Much of this discussion is based on research from my laboratory at Stanford, which along with the work of many other colleagues in the field will help us understand the role of aggression and development, psychiatric disorders and environmental trauma in the genesis of delinquency

Chapter 2: *The psychopathic killer.*
A rare but dangerous case.

In this chapter, i discuss the case of GARTH HATFIELD, one of the relatively rare cases (twelve percent of youth who murder) whose psychosocial makeup is clearly psychopathic. As a youth in a working class white los angeles neighborhood, he was a gang contract killer who now, as a young adult, had been condemned to death. I interviewed Garth extensively and learned the full extent of his psychopathic personality. His descriptions of his life were offered without much emotional coloring, in a very matter of fact kind of fashion. There was much talk like “they say i did this and that”, without the assumption of responsibility. When challenged though, he quickly said that he *did* commit his crimes. But he did this with an almost disdainful look towards me.was clearly not someone to worry about.

Initially, he noticed my name and asked about its origin. I told him I was Austrian and he then proceeded to tell me about his love for Adolf Hitler, who he had read a great deal about. He showed me his copy of *Mein Kampf* which he kept carefully hidden from the guards’ view. He also knew that there was a General Steiner fighting to the bitter end in Berlin and he assumed that I was related to him, or at least sympathetic to the cause. Once I set him straight upon all these details, his attitude changed.

There was a coldness that pervaded Garths narration and a supercilious tone that made it very difficult for me to make contact with him in any meaningful way. He noticed the two

Mont Blanc pens in my shirt pocket and complimented me for having them. It felt to me that at any time he could take them from me, if he had any use for them.

Frankly, I was afraid of Garth. But in time I learned a good deal about him.

Growing up in an extremely chaotic and abusive environment, where he and his three siblings were routinely beaten by their drunken father and neglected by their drug-abusing mother, Garth learned that in order to survive, he had to be ruthless, cunning and predatory. The second of four children, he would bully his younger brothers, only to be exploited by his older brother and his parents. Often the parents would wager money on the fights between siblings. One way to get the parents on your side, he told me, was to bring them goods and money, and not many questions were asked about how you obtained the stuff.

Garth's mother eventually divorced her husband and found a new boyfriend who turned out to be dysfunctional as well, lost in drug and alcohol abuse. Garth's mother became a prostitute as a way of maintaining her own drug habit. This became a source of endless conflict between her and her boyfriend, not because of the infidelity involved, but about how the money was to be divided. In this ongoing war, Garth's mother used him to hide money for her, to bring in extra customers and, as he got older, to protect her from her boyfriend's drunken assaults.

One day, the boyfriend left and was not seen again. Garth's mother continued on her trajectory, until the boy returned home one day to find his mother dead from a drug overdose.

None of Garth's siblings was home, and he wrongly assumed that they had been taken away by police. Just eight years old, he left to live on the street, avoiding contact with all authorities. He was rapidly integrated into a local gang that offered protection in return for services. Initially, these included drug deliveries and thefts. He was apprehended for those crimes by the authorities at age nine and placed in a series of foster homes. He stayed in none of them for very long. Finally, at age eleven, he was adopted by a teacher.

In this home Garth encountered another boy, also adopted, slightly older, who very quickly introduced him to one of his major functions in this family: he was to be the second sex slave of the teacher. As he began protesting and acting up, little credence was given to his accounts of sexual abuse by an upstanding member of the community. Instead, he was diagnosed with ADHD and given stimulants.

He did not like the way these drugs made him feel, but quickly realized that they had street value. So he started a thriving business dealing his medications among the peers in the school he attended. This led to his confinement in the Youth Authority at age fourteen. While there, he avoided all meaningful contact with any of the health care personnel.

Garth remained in prison for two years. He renewed and firmed up contacts with members of his former gang in the same facility, who now firmly embedded him in their midst.

When Garth was released at age sixteen, he was ready to embark on a lifetime career of crime. However, his father reappeared briefly, offering a hopeful anchor. True

to character, though, he only stayed long enough to take all the money Garth had and then disappeared again.

Now Garth was ready to involve himself one hundred percent in gang activities. He took on jobs killing people because, he calculated, these were the highest paid and most respected. He was not remorseful about his killing, saying that people he killed deserved to die for one reason or another. In any case, he had no doubt that they would have been prepared to do unto him as he did to them, had they been in a position to do so. He was apprehended with two other youths after executing a man in an alley for not paying his drug debts.

My reaction to Garth was extremely mixed. As I listened to his story, I could empathize with him, his increasing mistrust of people as a child, his avoidance of human contact, and all the other elements that up to now have only brought him grief, rage and disappointment. But as I looked at him across the room, I felt chilled and threatened. The thought repeatedly occurred to me that he was making all this up. But when I noticed his frequent glances at my Mont Blanc pens, I suddenly wished I had not brought them, and that I was somewhere other than here.

Nonetheless, after much soul-searching, I came to the conclusion that the death penalty is cruel and unusual punishment, even for Garth.

I worried that I'd come on to the case too late, that too much had already happened in Garth's life for too long, and that my efforts to help Garth would be fruitless. I advocated nonetheless for Garth's sentence to be changed, from execution to life imprisonment. I ultimately succeeded in this, although Garth was condemned to life

in solitary at the Pelican Bay maximum security facility in northern California. This would be living hell. When Garth saw my horror after the prison expert had shown us where he was going to be for the rest of his life, Garth gave me a very rare warm, reassuring smile. "It'll be all right, Doc." I felt, for this one time only, that I'd somehow reached Garth's consciousness and his capacity for gratitude.

Chapter 3: *There but for the grace of chance go I:
The "wannabe" killer, anxious and willing to please.*

In this chapter, we meet Cyril, a black kid from San Jose whose parents were originally from Brazil. His father, a formal man, has degrees in Economics from a Brazilian university. His mother became a nurse there. None of their degrees matter at all in the United States, so both parents have been forced to take low-paying jobs in fields completely unrelated to their expertise.

Cyril is an intelligent, large and extremely cooperative boy of fifteen whose neighborhood is ruled by two warring teenage gangs. There is certain attraction for Cyril in the gang "look", even though he has been roughed up by both of them many times. He is finally recruited into one of them, feeling he must join in order to protect his own safety.

Cyril is the son of immigrants who are trying to make it in this indifferent urban society. Both parents are working two jobs and are continuously strapped for time. Cyril does not share with them or his two sisters the troubles he's been having on the street and his need to protect himself.

After some small-time, introductory crime (running small caches of drugs from one individual to another) Cyril finally commits a murder. It takes place during a gang rape gone wrong. It is his assault on the young girl --- he is one of many gang-members to attack her, and also the last one -- that kills her.

When I become involved, I learn from the now-imprisoned Cyril of the conditions of unintended neglect that resulted in his floating free on the street as a child without parental or other guidance. In a key scene, I arrange for the boy's parents (who, feeling disgraced by Cyril's actions, have essentially abandoned him) to visit the prison. It is a difficult, extremely conflicted and tearful reunion. There are several such meetings thereafter, arranged by me. With my help, the family discusses Cyril's crime - - and his upbringing -- in ways they never have before. These discussions set up a rapprochement between them and the possibility for Cyril's return to society.

Chapter 4: *All-consuming chaos: The world is spinning*
 The maelstrom of the reactive murderer

Reactive youth are on a "crazy" trajectory. The crime is a disaster just waiting to happen as a result of these youths' putting themselves into harm's way at such a high rate. The irony of these lives is that you could have seen the terrible outcome long before the kid actually committed the crime. Nonetheless no one was there to intervene with help that could have changed the outcome. It was only a question of time before something bad was to happen.

In this chapter, there are two stories that show the reactive child in two different scenarios.

LAWANDA

LAWANDA is the wild girl tomboy who steals from the rich to give to the poor, including her mother. A black girl, she taunts her mother by saying that all she wants to do in life is become a pole dancer in a nude club. Her father is in jail for selling drugs, even though he is an ordained minister. Turning into a woman is not easy for LAWANDA. She hates the loss of power that it seems to represent to her. She hates her menses as well as the sexual attention that she attracts. She feels a responsibility to take care of her family in her father's absence. Her mother is depressed, overweight and helpless. LAWANDA, overweight herself, tries weight loss for a while as a solution to her troubles, but finds this pathway passive and unsatisfying.

Unsuccessful at school, constantly earning reprimands and poor grades despite being fairly smart, she looks for excitement and power in different ways. She hooks up with a gang in her neighborhood, fascinated by the fast and easy lifestyle and the facile access to drugs and money. She rationalizes her membership by drawing parallels between working in a gang and working for a large corporation: after all, she thinks, do they not both just rip people off? In the case of the gang, at least the proceeds profit the locals. She makes it her goal to have a relationship with the gang leader, and succeeds at that at first. As she becomes more entangled, the relationship becomes more and more unsatisfactory and increasingly violent. She feels she is able to handle herself. She's too proud to abandon ship, and wants to prove that she can hang with the toughest

of the tough. One day, in the very act of being violated by this boy, she kills him with his own gun. In the aftermath, avoids gang reprisals by letting the police identify her and take her into custody.

I visit LAWANDA frequently in prison and am impressed by the deep cynicism that accompanies almost every observation she makes about her life. At all times, she feels compelled to exhibit a toughness that carefully conceals any soft spots, vulnerabilities or anxieties. Presenting her life as a never-ending array of picaresque scenes, she never establishes any logic of events and remains oblivious to the emotionally threatening implications that develop.

I make the persistent chaos of LAWANDA's life the starting point of her treatment. Whenever she mentions two events which contradict each other (in the morning she helps an elderly neighbor get his groceries; in the afternoon she steals money from another neighbor at a bus stop), I hold up the two scenes and ask her to help me tie them together, to develop a common thread. She reacts to this at first with cynicism, saying that that's just the way she is, or that that's the way things are. You're a psychiatrist, she tells me, and "a psychiatrist just don't know what life's really like in the 'hood." A psychiatrist like me is prejudiced and out to lunch. I pursue LAWANDA nonetheless, saying that most likely these fragments do tell a story, but one that may be more painful than she's able to tolerate.

These extremely difficult discussions result, eventually, after many tears and much talk, in a change in LAWANDA's attitude toward herself. With my help, she is

able to make sense of the chaotic conditions in her life that led her to the murder she committed.

LOCO LEO

Growing up in East Oakland and having endless problems with attention-deficit syndrome and resultant difficulties at school, the Latino boy LOCO LEO drifts further and further away from the mainstream. He ends up affiliated with a gang and performs petty crime for them. One day in a 7/11 market parking lot, he kills the owner of a car who has indignantly attacked LOCO LEO while in the act of stealing the car's radio.

In conversations with LOCO LEO, I discover that the surprise of the car owner's attack and the panic that ensued in LOCO LEO caused a dissociative episode in the boy, during which he re-enacted a killing that he had witnessed as a little boy. The killing involved LOCO LEO's sister's boyfriend, who made a living out of challenging customers in bars to fights. On one horrifying day, LOCO LEO was in his sister's care when two men took her boyfriend to an alley near a bar and killed him, while the terrified little boy was watching.

This revelatory memory, coming from LOCO LEO several years later while in prison for the murder he committed, leads to other extraordinary conversations in which the chaos of his childhood is revealed to him and me.

The meaning of this chaos, and LOCO LEO's coming to understand that there are ways in which he can make sense of it and control it, give him the first opportunity he's ever had to achieve some level of emotional stability.

Gradually, in the course of treatment, LOCO LEO begins to trust me enough to allow me to treat his ADHD and PTSD and dissociation with medication, which he at first deeply distrusts. His case illustrates the power of combined medical and psychotherapeutic treatment in someone whose aggressive acts are a function of his poor mental health.

Chapter 5: *Though this be method, there be madness in it:
The OVERCONTROLLED, repressed killer's explosion*

There are murderers whose crimes come as a complete surprise to everyone who knows them. They are the accomplished people of our society whom no one would ever suspect capable of committing such a crime. In the case of youth that kill, they are the honor roll student, the noted athlete, the church-youth community leader, the “A” student, the student body president.

Despite their much-applauded excellence, rage rivets their heart. It builds in them in secret, repressed, unseen and unsuspected by themselves or anyone else. It is a slow-growing unnoticed anger that, once it reaches some sort of critical mass, explodes in a maelstrom of murder.

Gordon is a high school football star who, at sixteen, has been recruited by the University of Michigan. He is a fine student who's had no trouble with the law. Indeed

his mother Mary is a police officer whose second husband, Gordon's stepfather Bill, was a prison guard. Bill was also a Protestant minister and a community activist. There are five children in the family, including four girls, all of whom are Gordon's sisters by his mother's first marriage.

Gordon and Bill have not gotten along at all since Bill's arrival in the family, especially after Bill's year of service as an army chaplain in the war in Afghanistan. Bill, suffering from post-traumatic stress disorder stress, has been increasingly abusive of Gordon since his return from the war, and has also taken to excessive drinking. One afternoon, Gordon returns from school and finds Bill in the act of raping Mary while holding a gun to her head.

The situation is defused for the moment, but the next evening, eating dinner alone with his step-father, Gordon takes his step-father's service revolver in hand and shoots him, execution-style.

I feel that the murder revolves superficially around the increasing threat the stepfather poses to the family, due to his post-combat mental health problems. On a more subtle level, this is a story about a classic oedipal triangle. The son carries out an unspoken wish of his mother, that the family once again be fatherless. In his secret heart, Gordon wants to be alone with his mother, the two of *them* in charge of him and his sisters.

Chapter 6: *Conclusion* – **NEED TO LOOK AT EVICTION AS A MODEL – HE DOES THIS INCREDIBLY WELL**

I know from follow-up studies that I've helped many of these youths. But there's got to be more that I can do. I'm developing systems to help more, but this is not an easy task. Helping these young men and women one at a time is very time-consuming and difficult. Maybe, I think, I can do more at other levels of intervention, such as working with prison administration people or as an academic consultant to state agencies and the political establishment. Maybe I can effect policy changes or influence the philosophy behind the incarceration of youths.

I encounter all manner of problems within the very framework of the day-to-day system itself: a lack of resources, misguided idealism on the part of some social and youth authority workers, a political lack of will to look clearly at the problems I see every day, real indifference on the part of youth authority notables and politicians, real fatigue on my part, continued horror at the crimes I'm continually encountering, disgust by them, even the boredom that accompanies what appears to be an unending queue of youth who kill. I'm still "being had" sometimes. I feel I still make occasional mistakes, misjudgments, bad calls.

But nonetheless the effort is one worth making because, in the end, the kids -- yes, kids who commit murder -- are worth it. Reading their crimes is to read them. To read them is to start building a bridge to a return to society. This chapter is also a treatise on the absolute need to begin building that bridge now, and how to go about

doing it. It re-iterates the societal gravity of the situation and offers several concrete and urgently felt recommendations that, if implemented, would jump-start a true recovery.

At the heart of the discussion is the proposal to integrate modern mental health services and juvenile justice programs. Such an integration will help future practitioners become well-versed in helping these youths. We can train researchers to tailor questions to the deep-seated problems these kids have and help develop efficient programs and services. We can find administrators who are willing to deal with the complexities of such collaboration across disciplines. These new programs will also influence judicial thinking about the difference between what mental health organizations do and what societal responsibility demands, and the boundaries that currently exist between the two sets of ideas. The programs would stimulate discussion about where we should re-draw the line between what should be the responsibility of the individual on one hand and of society on the other.

To provide these youngsters with state of the art services *after* they have transgressed the law would close the loop that begins with the failings of current preventive programs.

It is the humane, prudent and smart thing to do.

I WRITE LIKE ANALYSIS: AGATHA CHRISTIE

4. THE METHOD AND THE WRITING:

It is important to note that the tone of this book will be narrative, lively and personal. This is not an academic book. Rather it is one intended for a more general public who wish to have a personal and in-depth look at individual children. The facts in this book are supported by the latest research, as summarized in my parallel textbook: *Disruptive Behavior: Development, Psychopathology, Crime & Treatment*; Oxford University Press, 2017. The stories that illustrate the FOUR SCREAMS AND A WHISPER (that is, the four types of personalities I've defined in which the potential for murder can be found) will be very personal accounts of the lives of some youths that have committed murders. We will learn how it is that they've done what they've done. These are personal, vivid, heart-wrenching, heart-filled, difficult and compelling stories

The final story (enmeshed in the stories of these kids as well as detailed in the Introduction and in the last chapter) will be my own. What is the nature of my interest? What in my background brought me to be so fascinated by these young people? What repelled me? What helped me? What depths have I had to go to in order to understand what these children are? How has my own emotional make-up been challenged, wounded or helped by these children?

5. WRITING SAMPLES :

(From Chapter 3: *THERE BUT FOR THE GRACE OF CHANCE GO I: THE “WANNABE” KILLER, ANXIOUS AND WILLING TO PLEASE.*

Note: Each of the samples in this proposal begins with a summation (in parentheses and in third person) of a particular youth’s situation. These are intended to assist the reader of the proposal in knowing what is happening. The full chapters in the book itself will be written entirely in first person, from my point of view.

Each of the actual stories in the book will be preceded by a short “news clip” that details in newspaper-like language the actual crime committed. For example, the clip for Chapter 3 would be as follows:

News clip:

“The body of the 16 year old female was found on a beach near Malibu. The deceased was half clothed and showed marks of multiple sexual assaults. The assaults were committed with unusual violence. The cause of death was asphyxiation. The girl had been missing from home for about one week. The police say they have several very solid leads which should lead to an arrest shortly.”

(In this chapter, fifteen year-old Cyril Lines has been incarcerated in a youth detention center in northern California for participation in the gang rape and murder of a teenage girl. He is a tall, handsome, intelligent youngster with soulful eyes and an anxious smile. His sheer size makes him look intimidating and tough, although it takes very little time for me to determine that Cyril essentially is a “cream puff”. He rarely

speaks out of turn. Indeed he speaks very politely and quietly, and immediately stops to listen whenever I wish to speak. Cyril has to endure countless challenges while in detention from other prisoners, which he dreads and tries to avoid at all cost.

Despite his peaceful nature -- in fact, *because* of it -- Cyril had joined a neighborhood gang in Los Angeles out of fear for his own safety. The murder, as heinous as it surely was, was really the responsibility of all the rape participants, although Cyril became the fall-guy and took the entire rap himself. His father, deeply ashamed, has instructed his family to abandon him in prison. His parents are black Brazil/Braziln immigrants with university degrees from Brazil/Braziln schools that are not recognized in the United States. So they have both had to work extraordinarily long hours at low-paying jobs, to make ends meet for themselves and their three children.)

Text:

The worst of it for Cyril was that his parents had just left him there in prison, to rot. They hadn't visited him. They hadn't kept contact with him. Nothing.

He had described his father Hector to me. Usually wore a tie and a long sleeved dress shirt and slacks. A slim man with a formal demeanor. Black hair was always trimmed short, and an equally well-trimmed moustache. Hector was university-educated, and Cyril told me that it was the expectation of both his parents that all their children would go to college.

“My parents, they couldn’t get work the way he thought they should,” Cyril said. “I mean, they had to take bad jobs because their college degrees weren’t recognized in the U.S.”

He described how his parents had always been so hard-working, trying to make a go of it. But then came Cyril’s time in the gang, the girl Alma’s death and Cyril’s trial and sentencing. His father Hector had been mortally shamed by what Cyril had done and, despite the fact that Cyril was his own son, he had just let him go. It was as though he were saying, “Prison is where he deserves to be. He’s no son of mine.”

One day I was speaking with Cyril about what his plans would be once he got out of prison. He was scheduled to be released within the next several months, and I felt the need for him to plan for that. The first time I asked him the question, he leaned back on his metal chair and crossed his legs, Staring toward one of the walls.

“I’ll go home!” he said.

There was a pause as I waited for more.

“Cyril, how do you think that’s going to work?” I said. “They don’t even know you’re coming, right?”

“Yeah, but the social worker said she’s been talking to them and . . .”

“But *you* haven’t.”

Cyril winced and looked away.

“Those talks with the social worker are . . . well, that’s one thing,” I said. “But Cyril, you’ve got to talk with your parents yourself. They’ve got to come here!”

Cyril leaned forward, suddenly anguished, and placed his elbows on his knees. He gripped his hands together, shaking his head.

“No, I can’t let them see me here . . . not like this. I can’t do that.”

“Cyril . . .”

“My father’ll be so mad. He’s already so mad at me and it’ll be even worse.”

“But if they come here, you can talk to them,” I said.

I reached over to the phone on the desk, took the receiver off the hook and said “What’s their number?”

Cyril’s eyes widened fearfully. “You’re going to call them?”

“Yep.”

“No! No, Doc! I don’t want to.”

“I think it’s a good thing to do. And as far as I am concerned, now is as good a time as any. What’s the number?”

He stared at me for a brief second, a heart-felt wish in his eyes that I cease and desist, that I put the damned phone away, that I give up this mad insistent ploy. But he also clearly wanted to talk to his family. He was intrigued by the idea. I just sat there and waited.

Then I said gently, “What is it?”

“Well . . . you gotta do all the talking,” Cyril said.

“In the beginning, sure. What’s the number?”

He gave it to me, staring anxious and uncomfortable. I punched it into the phone.

Mrs. Lines -- Sonia -- answered the phone. I gathered from Cyril's descriptions of his parents that their English was quite good, and I found, as we spoke, that Sonia spoke well with a heavy Latin accent.

"Hello, Mrs. Lines. I'm Dr. Hans Steiner, and I work as a consultant to the California Youth Authority. I'm working with your son Cyril."

For a long while, there was no response at all. I could hear breathing on the other end, but no voice. The breathing told its own story, however. At first there were measured inhalations, followed by just as well-controlled exhalations. But soon, the regularity of this began breaking down. Liquid came into the breathing. The control that was being attempted was overcome, in a few seconds, by a kind of tearful hysteria. The harsh intake of a breath. The attempt to hold back tears.

"Mrs. Lines?"

"Please, Doctor...."

I could tell she was scared, fearful that something had gone wrong. Her breathing carried the sadness that accompanied all her thoughts of Cyril.

"Please . . ."

Tears . . . the first dark flow of them . . . ended the silence. She began weeping openly.

"The reason I'm calling," I said quickly, "is that Cyril's doing very well in the program here, and he's going to be released in a few months, and . . ."

I paused, because I could hear Sonia's continued crying. She was unable to speak.

“Forgive me, but I’m not sure why you’re crying, Mrs. Lines. I just want to be sure you understand that Cyril is doing well. He’s going to be ready to go soon, and we have to start making plans. That’s why I am calling . But I’m not sure whether you’re happy about this. Or scared or . . .”

“It’s my husband,” she muttered. “He doesn’t want Cyril to come home at all.”

There was a moment of stifled moans.

“He’s so ashamed of Cyril.”

I imagined the conflict raging about Sonia’s mind. Maybe she felt the same as her husband Hector. But there was something in her tears that told me she disagreed with him. Maybe she too was afraid of Hector’s response, the way Cyril was. There was a fair chance, I thought, that she very much wished to have Cyril back.

“Well,” I said, “it sounds like we have some work to do.”

I waited as Sonia calmed herself.

“I’d like to ask you and Mr. Lines and your two daughters to come here to the facility . . .”

I heard an intake of breath, of surprise from Sonia. I glanced at Cyril, who sat drearily in the metal chair staring at the floor. The plain cement wall behind him gave off little nuance, little warmth. He was a boy, almost a young man, filled with every anxiety such a moment could make possible, quietly seated in a room that was entirely antiseptic and anti-social. For me, it was as though the simplicity of the place and its lack of warmth made the emotions I was witnessing even more extreme. There was no

comfortable furniture, no tea setting, no art . . . there were no photos, no family knick-knacks, no curtains, no nothing to relieve the anguish he was feeling.

“I’ll have to speak with my husband,” Sonia said. “But I don’t know. I just don’t . . . I just don’t know if I can do this.”

“OK,” I replied. “I’ll call you next weekend, and hopefully we’ll be able to set a date. But just so you know . . . without such a meeting I do not think Cyril’s release will go well. I know it’s been a long time since you’ve seen him, but we really need to do this.”

“All right. I . . .”

I hurried ahead. There was something I wanted to have happen, right now, and I didn’t want to opportunity to pass.

“Uh, Mrs. Lines. Before we hang up . . . Cyril’s sitting right here next to me, and I think he’d very much like to hear from you.”

“Oh . . . oh, yes, all right.”

I handed the phone to Cyril, who took a moment to look at it. His dark eyes appeared to waver. He tightened his lips and put the phone to his ear.

- *Hola, mamá.*

They spoke in Spanish for a half hour, and I understood none of it. Cyril and his mother both wept, almost continuously, the entire time. He seemed to forget about my presence in this moment of very private intimacy with his mother. I could well imagine what they were saying to each other, and it appeared that I posed no threat to the moment. I was perhaps a welcome witness to it.

More probably, though, Cyril wasn't thinking about me at all. Finally he looked toward me and I nodded.

"*Mamá*, the doctor says I gotta go."

Sonia spoke to Cyril another moment, in words, I'm sure, of care, in words of endearment. Finally he said goodbye, and handed the phone back to me. I spoke a few moments with Sonia, reminding her that I'd call them back the following weekend, to set up a family appointment. She agreed, and we said goodbye.

Prior to this day, I had never spoken to either of Cyril's parents.

I called Sonia back several days later.

"My husband is thinking about it, Doctor Steiner. I can't say yet what he wants to do."

"It's important for everyone," I said. "Even for me, because I'm trying to help your son, and I need to know what's going on. And what went on before. It'll help me understand what Cyril's like and . . . what he did."

We talked for quite a while as I outlined my suggestions.

"I'd like to see a series of sessions here, with you and Mr. Lines and your daughters, Cyril and me. Five, six, ten sessions, something like that. I think we've got to start planning. I think you're very upset about what happened . . . about what he did. But I'm not sure any of us understands what really happened, and we need to talk about that. It is very important that you hear his side of the story. He's ready to tell you and, although I think it will be hard for you to hear, it will also help everybody. Cyril was

involved in what happened. No question. He was part of it. But I am convinced he's a good kid, worthy of your help. He's not going to be staying here after he gets out. He wants to go home, and we've got to start planning for that, start working towards that."

We finally were able to arrange for the first of the meetings. At that detention center, there is a quite horrible conference room where such meetings take place. There's nothing soft in the room. It's all metal, concrete and linoleum. A big, rectangular folding table with nothing on it is lined by ten metal folding chairs, without arms, covered with chipped or abraded paint. The windows are covered outside with cyclone fencing. The bare light bulbs give off a kind of lurid, chemical glare. You can have a closed-door meeting, but there's a loud-speaker right outside the door over which periodic announcements come, every few minutes. Announcements like, "Visiting hours are now over" and "Walters to the Comm. Center right now". They are cheerless and aggressive orders, delivered in a metallic bark that sounds like it should be in a very old railroad station in a seedy part of a large, run-down city.

Cyril's family was ushered into the room by a guard, and I was introduced to them for the first time. Hector was dressed, as I expected he would be, in a coat and tie, a very dark-skinned man. He was indeed rather formal and quiet. Sonia was a small woman, a little overweight, dressed neatly as though she were about to go to Mass. Her closely-cropped black hair had a small rose in it, and she wore large circular silver earrings. She also wore a gold crucifix on a chain around her neck. Cyril's two sisters, Liz and Dolores, were teenagers, dressed in high school hip garb from K-Mart: well-

hewn, pre-faded levis, T-shirts, athletic shoes. This was a middle-class family put in difficult circumstances because they were immigrants, but intent upon maintaining their middle-class values. It was obvious. Law-abiding Catholics, church-going citizens.

I had not asked Cyril to join us yet because I wanted to give the family an idea of whom I was and to make sure that we all understood why we were here. I explained myself, my background, and my connection to the juvenile justice system. But I wanted to get quickly to the real purpose of these meetings.

“I want to get Cyril home, Mr. Lines,” I said. “Because I think that’s where he belongs. And in order for that to happen, I really need to know more about where he will be going to. When I recommend that he go there, I want to be sure that he’s welcome, that he’ll be helped and that he has a chance to make it. I want to see how we can get that to happen.”

Everyone sat quietly, without a response. A ripple of resistance ran quickly across Hector’s face.

“I think one of the first things we need to talk about is why Cyril is here,” I said. “I mean, clearly what he did was not the right thing to do.”

Hector shook his head slowly, a mournful, angry and silent gesture.

“And I need to ask you to listen to him when he tells you why he did what he did.”

“We know what he did!” Dolores said. The older of the two girls, she sat forward in her chair. “He was hanging with those losers. We told him that wasn’t a good idea. , and . . .”

I shrugged.

“Yes, I know,” I replied. “That’s clearly true. But do you know any more details about *why* was he doing it?”

There was silence.

“I think that’s something you need to hear from him, because there’s a story there. It’s Cyril’s story, and I think, when you hear it, you might change your mind.”

Suddenly Sonia and her daughters began crying. The two girls sat glumly together, their shoulders hunched. Liz, the younger of the two, leaned against her mother, seeking support from her. Sonia herself appeared unable to offer that help, lost for the moment in her own grief.

“I don’t know if we can get to that today,” I continued. “But can I ask you to be civil to Cyril today? To be friendly? To be sweet?”

There was no overt response. Finally, after a moment, I stood and went to the door. Gesturing outside into the hallway, I stood back, and Cyril entered the room himself, anxious and uptight. He had cleaned himself up and carefully combed his hair to make a good impression. He looked like a school boy, not a prison inmate.

I had the impression that his family expected to see Cyril in some sort of prison garb, maybe the orange jump-suit so familiar to those who watch the local evening news and see some incarcerated criminal entering a courtroom. But Cyril was a “Level Four” prisoner; that is, one of the best-behaved prisoners. Because of this, he was allowed to wear street clothes, and on this occasion he was as neatly dressed as were his

sisters, in levis, a short-sleeved buttoned shirt hanging outside his belt, and new athletic shoes. His quite curly black hair was trimmed and neat.

For the moment, I had taken my eyes off his father Hector and, as Cyril embraced his mother, he avoided his father. He sat down on a stool next to me, perched on the edge. Hector sat very upright across the table with almost professorial aplomb, his tie straight, his jacket buttoned. He was staring directly at Cyril, the first time he had seen his son since the boy's imprisonment. He looked angry and very hurt.

“Why did you do this?” he whispered in English.

The “S” at the end of the question came out literally as a hiss. Then, more loudly, the question once more in a tone of anguished belligerence and anger.

“Why did you do this, Cyril?”

Immediately I extended a hand across the table, gesturing toward Hector.

“We'll get to that, Mr. Lines.”

Startled by my movement, Hector sat back in his chair.

“Don't worry, we'll get to that.”

He sat quietly, once again upright. I could now see something else in his eyes: his pain at losing his only son. His shoulders were a little bit less erect, his eyes less hard and angry. When I looked at his hands, I saw how they trembled just a bit. I could nonetheless feel the palpable hostility that he had brought with him to this first meeting, the accusatory questions that he wished to put to Cyril, the punishment he wished to mete out to the boy. But he gathered himself together and nodded my way, remaining silent.

“There’s a kind of gathering place down the hall,” I said. “You know, it’s pretty lame, but there are vending machines there and chairs. People wander through now and then. But at least it’s a place where you can talk to each other and relax. I’d like to suggest that all of you go there, without me, and visit for a while. Just visit.”

“For how long, Doctor?” Hector asked.

“Two hours?”

I stood up and walked to the door, opening it.

“I’ll be around if you need me,” I said. “But I’d just like you all to talk with each other for a while, as a family. Talk about what’s been happening at home. About what Cyril’s been doing here. And then we can get back together. OK?”

The family walked out of the room and headed up the hall. As I watched them go I was heartened by at least one thing. They walked together. Not as Hector, Sonia and the two girls in a group with the criminal Cyril trailing behind. Rather, Cyril walked with them. There were no arm in arm affections, no pats on the back, none of that. But they were walking together down the linoleum hallway, toward the only color within view, the garish red of the Coca Cola machine. Together.

That first session between them went pretty well. Hector was able to keep his anger with Cyril in check, and the family was able to re-establish some of their previous rapport with each other. When Hector, Sonia and the girls left, there was even something of affection between them. The girls let Cyril hug them, and he got a caress on the cheek from his mother. Hector remained stiff and distant. But he did give Cyril

a look that conveyed his anticipation of seeing his son again for the next session. We still had a quite long way to go, I thought. But I also sensed that we had a chance to make these sessions work, to re-integrate Cyril with his family. Time would tell.

After the family had left for home, Cyril and I sat down alone with the purpose of laying out how the next visit would go. It was scheduled to take place in two weeks. I had his file with me, and it was the usual assortment of forms, notes, papers gathered neatly in a manila folder. It was the emblem of officialdom, the plain-staring certainty of The State. It contained the juvenile system's description of the crime Cyril committed, and I was quite familiar with it.

Cyril and I had talked about the crime before, many times. But his shyness about it, and his shame for having committed it, had actually kept him from giving me a complete and coherent accounting of it in his own words. The information I had about his crime had come from the file and from bits and pieces, here and there, that I had been able to drag from him.

I felt that if I were to continue to be of any influence on what we'd started that day, I had to know what had really happened. If I expected Cyril's family to listen calmly to what he'd done, I too had to listen. So I asked him yet one more time about the murder itself.

And it was now, after so many sessions with him, but most specifically after the tearful meeting with his family, that I finally heard from Cyril's lips the whole truth, as he saw it, of what he had done.

When I had first asked him months previously about what brought him into the California Youth Authority, he had said very formally, “Murder, second degree, and sexual assault. Two counts of that: rape and forced oral copulation.” And that had been it.

Now, though, the truth came out. It was very difficult for Cyril to tell me the story. He needed repeated reassurances from me that none of the other kids in the facility would hear this account. Some of them were members of the gang he’d joined. He was afraid that they would then go after him because he had refused to remain the silent fall guy.

But it was obvious to me that the visit from his family somehow was now opening the gates. His reconnection with them was somehow legitimizing in his heart a real connection with me.

“I walked to school, you know, every day,” he told me. “And there were these two gangs, these guys that ruled the neighborhood. They were always giving us kids that didn’t belong a bad time. I mean, I’d get jumped by a couple guys . . . bandanas and stuff, gold chains, tattoos, bad-lookin’ jeans and stuff . . . and they’d be giving me a bad time. ‘Hey, Cyril, where you goin?’ ‘Cyril, how come you don’t like us, man?’ They always wanted me to fight. But I’d never been in a fight in my life. You know, my family, they’re kind of middle class. Also I think maybe I confused the gangsters, because I’m black, so they figured I came from another gang somewhere else or something. They were really surprised I could speak Spanish as well as I do.

“I wanted to tell my parents about the trouble I was having . . . you know, the gangsters bothering me and all that. But my parents . . . they were just working all the time. You know, my Mom’d come home and start cooking dinner and didn’t want to talk. And then my Dad would come home and he’s too tired. Neither of them was around all day long, and I was just on my own, I guess. Walked to school. Walked home. Didn’t know what to do.

“And then one day, guys from one of the gangs beat me up. You know, they hit me! Kicked me! They said, ‘We don’t like you, Cyril, ‘cause you don’t give us any respect. We don’t like that.’

“Then guys from the other gang started doing the same thing to me, and I got beat up by them, too! So I was scared, Doc. I mean, real scared. Day after day, I never could relax. So finally I agreed to join one of the gangs. I guess I kind of had to ‘cause I had to protect myself.”

“What did they have you do at first?” I asked.

“Little stuff. You know, run a couple of bags to somebody on the street they were selling to. Or take a bag of weed to somebody.”

“And how was it, going to school after you joined the gang?”

“Better! The other gang left me alone ‘cause they knew I had help. And of course the gang I was in, they were supposed to help me. So I walked back and forth with them, and there wasn’t any more trouble.”

“And what about Alma?” I asked.

With this question, Cyril's entire body language changed. Prior to it, he had been sitting at the table, his hands folded before him on the tabletop. Now he sat back in his chair and pursed his lips, staring down at his hands that were now on his lap. His eyes grew wooden, motionless.

"You know, we used to go around in Ricky Alonzo's car. A lot of those guys had cars and, you know, they had guns and stuff, too. They were bad. So I was riding in the back seat of Ricky's car one day . . . He was a tough guy. Hung with Tony, who was the leader. He was in the car, too, along with another guy. And we spotted Alma and her girlfriend walking up the street."

"You knew her?"

"All the guys knew her, yeah, 'cause she used to hang with them too, sometimes. And word had it she had run away from home and was looking to stay with someone. So we drove along the curb, talking to the girls, and we asked them if they'd like to party, and they said 'yeah' and they got in the car."

"What then?"

"We went and got some beer and stuff and we started drinking. We all drank, and so did the girls, and finally everybody got pretty drunk. So we went to that room there, you know, where she . . . she . . ."

"Died."

"Yeah. And the guys started playing with her. You know, molesting her, forcing her to have sex. And at first, she was going along with it, but then she started saying no. They were touching her and stuff. Being bad."

“What about the other girl?”

“She was drunk, too. But not like Alma. She left after a little while, and we didn’t know until later that she went to the police. But anyway we all started getting pretty bad with Alma, taking off her clothes and stuff. One of the guys had intercourse with her and she was screaming, so they held her mouth shut. . . you know . . .”

“Yes.”

“And she didn’t like it, but she was kind of too drunk to do anything about it. And guys were hittin’ her. There was blood and she was scared, and they were forcing her to give them oral sex and it was getting pretty bad.”

“But what about you?”

Cyril closed his eyes. I sensed that he was both trying to remember and at the same time to extinguish the memory. He scratched the side of his head.

“I was the last guy. I didn’t want to do anything and I hoped that they would forget about me. But Tony kept watching me. And just as the others were getting ready to leave, he said, “*Amigos*, we have to watch out for Cyril. He hasn’t had his yet.” As he said that I noticed he had his hand in his pocket. It was the pocket where he always kept his gun. And he turned to me and I could see how his gun made a bump in the pocket. It was as if he could read what I was thinking, that I wasn’t going to do this.

And then he said “Cyril, we been good to you, right? You’re in, aren’t you? One of us?”

All the others stared at me. I was never so scared in my life. I thought they were going to kill me. So I looked at the girl and she was passed out. I thought she would

never know. So I had sex with her too. And you know, she was hardly awake, I'm sure she didn't feel it. And then one of the guys told me to get her to go down on me. So I sat down and put her mouth over my . . . my . . .”

“Yes, I understand.”

“And she was doin' it and all that.”

“Yes?”

“And all of a sudden she began choking, and she couldn't breathe and I got away from her, and I was scared shitless and she kept on choking and then, you know, finally she was throwing up, sort of, and she dropped over, all blue in the face. She stopped breathing and I totally froze. I thought – please no – no no, let her breathe! But she choked to death.”

I looked down at the plain surface of the table, imagining Alma naked and beaten, bleeding, her hair clotted with blood, her legs bruised. Cyril sat before her in a state of complete panic, wishing against all hope that what he knew to be true was not true. It was a vision I could not bear, as horrible as one could imagine. I could still see Cyril, his pants undone, his face petrified with fear as he stared at the motionless body before him. He was as naked and vulnerable as his victim, deadly afraid he would be the next one to be killed. One wrong move and that was it. He knew all the others were packing guns.

“What'd the other guys do when they saw she was dead?”

“Nothing! They just told me I'd killed her.”

“ Did you believe that?”

“Yes, she stopped breathing when she was . . . doing me . . . and they told me that if I turned on any of them, they’d take care of me later. They said I was the guy that killed her, and that if I didn’t say I *was* the guy, they’d kill me!”

IWL AGATHA CHRISTIE

(From Chapter 5: *THOUGH THIS BE METHOD, THERE BE MADNESS IN IT: THE OVERCONTROLLED, -REPRESSED KILLER’S EXPLOSION.*)

News clip:

“Mr. Huckaby’s Huckaby body remained in the chair at the head of the table where he had been sitting in the dining room. He had been shot twice in the back of the head, execution-style. The murder weapon, a police service revolver, was found on the dining room table next to the victim’s head, which had plunged forward onto the plate of food he had been eating. Investigators stated that this was one of the most cold-blooded murders they had ever seen.”

(Gordon Huckaby is the quarterback of the high school football team and a fine student. Indeed he has been recruited on an athletic scholarship to the University of Michigan. He is the darling of his mother. Gordon’s stepfather Bill is a returned veteran from the Gulf War, where he served as a chaplain. Although a minister, Bill is employed as a prison guard, and Eileen is an officer with the San Francisco Police Department.

The only real darkness in the history of Gordon's family is the fact that his mother became pregnant with Gordon at the age of fourteen. Her father had been a high school principal and a preacher himself, so that the pregnancy of his daughter was something of a family scandal. The teenagers married, and Gordon's mother had the four girls, all by the time she was twenty-one. By then she and her husband were arguing a great deal, and they finally divorced. It was then that Gordon's mother was really able to get her own life going. She was accepted at the University of California at Berkeley and eventually received her bachelor's degree in criminology.

She worked for a time in Oakland and eventually got a job with the San Francisco Police. It was shortly thereafter that she met Bill, the man who was to become Gordon's stepfather. When Bill and Gordon met, it became evident that they weren't going to get along. Bill was strict. Gordon was resistant. There was an uneasy peace between them though when, suddenly, Bill was called up as a reserve officer to serve as a chaplain in the War in Afghanistan. By this time, Gordon was fifteen.

In Kabul during the war, an errant drone strike made a direct hit on the hospital tent in which Bill was sleeping with several other soldiers. It was a fearsome scene of the worst sort of carnage, and Bill was one of the few to survive. He was seriously traumatized by the event, and when he arrived back home, his behavior took a violent turn and he began terrorizing the children. Gordon particularly came in for vicious berating and evens beatings at the hands of his stepfather.

Noticing a black eye on Gordon one day at school, a teacher actually calls an agency of child protective services to report her suspicions that Gordon is being abused

at home. The agency investigates and does nothing, feeling that the boy's stepfather is a minister, and that such a man would not commit such violence.

All the while, Gordon is performing very well in school. He is extremely well liked. He is the star of the football team, the boy almost everyone thinks will make something very substantial of himself.

One day Gordon comes home from school and hears a serious scuffle from Bill's and Mary's bedroom.)

Text:

"I walked down the hallway, and all I could hear was my dad yelling at my mother. And she was yelling back. But she sounded afraid, like he was going to do bad things to her. You know, 'Bill, no! Don't!'

"So I opened the door to the bedroom and I saw my mother . . ."

Here Gordon sighed and paused a moment. I've had conversations like this before with numerous other patients, and at the utterance of such a word like "Mother" in what is obviously a highly charged emotional moment, the kid will break into tears and spill the story in a gush, in a self-punishing welter of weeping and words. Gordon sighed a second time and looked at his hands. He remained silent and, to my mind, extremely reserved and controlled.

"What happened?" I said finally. I was myself desperate to hear what he'd say, even though I knew from the file on Gordon what had actually happened.

"He was in bed with her."

“That’s all?”

“He was raping her.”

Gordon remained still. His face was impassive, as though he had just told me that today was Monday or that there was a bird outside the window. Again, he didn’t speak.

“Gordon, how did you know he was raping her?”

“She was crying.”

“That’s all?”

“He had a gun to her head.”

My own mind was a jumble of emotions and conflict. First, I could imagine what this scene must have been like for Gordon. The fear. The rage. And especially his indecision as he tried to figure out what he should do to help his mother. Whether he could do anything. Whether Bill was going to kill her right then and there.

But I could not square these thoughts of my own with how Gordon now appeared. His expression hadn’t changed. He remained almost . . . sweet looking, with almost a smile on his lips.

“What happened?” I asked.

Gordon did not want to continue. But I had the impression that his reticence had little to do with any inability to describe the scene. Rather, I felt like I was prying and that he really just didn’t want his family to look bad.

“What happened then, Gordon?”

“He looked over his shoulder at me and . . . he pointed the gun at me and . . .”

“And what?”

Gordon shrugged, keeping his eyes on the backs of his hands, on his junior high school graduation ring.

“He said, ‘You keep stickin’ your nose into an adult’s business like this, you’ll be next!’”

“So then what?”

“I left!”

“What did your mother do?”

“Nothing.”

This entire conversation was really an exercise in dragging the details out of Gordon. It took a couple of hours at least and had none of the smoothness, the give and take of this rendering of it. I felt my own emotions in a stew of rage and frustration, and I could not understand how Gordon could be so calm in his account of the scene. He resisted me as though I were the enemy, interrogating him in some sort of safe room in the basement of an empty building. He looked at me with his smile, yet there was a sense of hatred of me in the smile. The smile was deceptive, I thought. It was an off-putting gesture intended to lead me astray. It was so controlled, so dark and quiet that it unnerved me.

Our conversations went on, and it took me weeks more to find out what had happened after Gordon had broken into his parents’ room.

I asked him what the next morning was like.

“We had breakfast.”

I awaited more information, but there was none.

“What kind of breakfast?”

“Corn flakes, I think. Some toast.”

“Coffee?”

“Yeah, my dad did. I don’t drink coffee.”

“How were your parents dressed, Gordon?”

He leaned forward and looked to the side, trying to remember the details. His back pressed against the T-shirt, his athletic musculature causing it to rise and fall in valleys and hillocks.

“For work.”

He continued looking to the side. I waited, now feeling that, despite my own anxiety, I should try to outwait Gordon, to allow my own reticence to force him to speak. But he did not speak.

“Did you talk about what had happened the day before?” I asked.

“No.”

“What’d you do?”

“I ate my breakfast.”

What happened the following evening I reconstructed from several other conversations. During all of them, I continued having to re-assure Gordon that I had no intention of betraying him or telling this story to anyone else. He knew the details were in his file. But he was afraid that I would somehow blab this story to somebody who had no business knowing it. I kept on trying to draw him out, and although I succeeded,

it was as though each revelation were a small glimmer of light in a darkness that was intentional and protected. Gordon simply did not want to tell me what had happened and that was because, he felt, I had no business asking him the questions. What had happened was an intimate family occurrence, and it was none of my affair.

“I came home from football practice. You know, it was late . . . like 6:30 in the evening or something.”

“Your dad was there?”

“Yes, my mother had fixed our dinner and left it in the refrigerator.”

“She wasn’t there.”

“No, nobody was there. It was just him and me.”

I smiled and thought, *an intimate moment between father and son*. The thought was too ironic to be expressed, and I kept it to myself. I sensed how truly intimate this moment was to be.

“So did you sit down and have dinner with him?”

“No.”

“Did he know you were there?”

“Sure, he heard me come in the kitchen door.”

Gordon explained that his father merely grumbled something at him and continued eating his own dinner. Gordon didn’t want to sit with him because he knew his father would just give him trouble for something . . . for not cleaning up his room, for the “B” he got in English on his last report card, for coming home so late.

“Then what?” I asked.

“His service revolver was in his holster, hanging on a coat rack.”

“In the kitchen.”

“Yeah.”

“And?”

“I took it out and walked into the dining room, and I . . .”

At this moment, for my edification, Gordon took aim with his right index finger at something before him, below him. He was perhaps his calmest at this moment.

“I pointed it at his head and shot him.”

“Once?”

“No.”

I looked away toward a window.

“Twice.”

At this moment, I couldn't tell with whom I was identifying in this story: the boy as the gun burst into flame and the bullet took the back of his father's head off, or the father himself suddenly wrecked, suddenly destroyed.

“Jesus,” I whispered.

“Then I put the gun down on the table next to him.”

Gordon held his hands open before him, the imaginary pistol now having disappeared into the air.

“And I went and called the police.”

IWL AGATHA CHRISTIE

(From the *INTRODUCTION: THE MURDERERS AMONG US*)

Little Hans

Text:

When I was eight years old, I would walk to school every day alone along the streets of Vienna. In those years (the very early 1950's) a child could do that mostly without fear of danger. My family lived in a lower class neighborhood of immigrants from all over the former Austro-Hungarian Empire as well as many Catholic Viennese. We were one of the few Protestant families in the neighborhood.

Going to school was always an adventuresome undertaking and a great deal of fun. In winter I'd be dressed in wool knickerbocker pants and long socks, a sweater and a coat, while in warmer times of the year I'd be wearing the traditional schoolboy lederhosen.

The adventure of this daily trek was usually provided by two elements. To get to school I had to walk through a lower-class neighborhood of immigrants that was filled with a polyglot, multicultural mix of people from many places east and west. So there were Germans, Yugoslavs, a smattering of Russians, some Turks, some Italians, some Jews. All sorts of people. The streets were filled with languages that I did not understand, but which filled me with curiosity about where these people had come from. There was little of the Viennese reserve more common to the rest of the city. Rather these people were noisy, funny, combative and often very friendly.

There were shops in this neighborhood, too, that were made for a schoolboy's curiosity. Candy shops, pastry shops, shops where you could buy a freshly-baked roll that was stuffed with meat and very warm, a true treat in the winter. For me, walking through this neighborhood was an international tour, even though it was just several square blocks of the city in which I had been born.

At the far edge of that neighborhood, there was a remarkable building that I also passed by every day. The great architect Otto Wagner was the most famous of a school of Viennese art deco artists and architects who had turned their backs on the neo-classical rigidities of the nineteenth century. He had built apartment buildings, banks and office buildings in Vienna, all of them famous for his elegant adherence to the principles of French art deco. But he had added his own considerable creative genius to the design of these buildings, and many of them to this day are on anyone's list of "must-see" sites in the city of Vienna.

Wagner was the principal architect of many of the stations that had been built between 1893 and 1901 of the Stadtbahn system of urban Viennese railways. One of those stations -- a very large one -- was on my route to school, and I enjoyed stopping there to visit a pastry shop that was inside and also, more importantly, a magazine and newspaper shop that carried periodicals for children. The press of crowds coming from and going to work in the station, the noise of the trains themselves, and the high ceilings and curving, multi-colored, and elegant décor of everything in the station, from the windows to the doorways to the facades of the shops to even the lighting fixtures thrilled me.

In the newspaper shop, I especially liked buying the latest copy of a kind of storybook, printed on newsprint with an illustrated cover that showed some made-up war scene from World War II. The story inside would tell of an heroic airman or a platoon of riflemen or a tank driver whose valor had saved many lives, turned the tide of battle or held some line against the enemy, who were of course the Allied troops. These children's books displayed no pro-Nazi ideas that I can recall, although the soldiers portrayed so romantically were obviously members of the German or Austrian armed forces. Indeed, I can remember the occasional observation in the books that these acts of valor were performed despite the dunderhead policies of the Nazi military.

They were books that were simply thrilling to an eight year-old boy on his way to school, and I'd hand the vendor the few pennies that a single copy would cost and stuff it into my shoulder bag as I made my way back out into the grand hall of the railway station.

My teacher was Frau Riedel, a Sudeten German, the prettiest woman I had ever seen. She was very tall (especially to an eight year-old) with light skin, dark red-brown curly hair and striking green eyes. I was so in love with Frau Riedel that I believe I would have done anything to please her. I worked on my reading at home so that I would make no mistakes when we had to read out loud for her the next day. I struggled with my handwriting, which today I'm afraid is somewhat illegible, just so that she would be pleased with me. Frau Riedel liked classical Viennese music, and would sometimes play records for us by the great Viennese orchestras. Because she liked it, so did I.

There was an occasion every few weeks that would come unexpectedly, when we'd be finishing a lesson or closing our reading books. Frau Riedel would stand up before the class, smiling as she did so often, and announce in a very kindly way:

- *Jetzt is esZeit in den Turnsaal zu gehen!* ("It's time to go to the gym!")

This announcement would bring a mixed reaction from the pupils. No one was wildly enthusiastic about it. Some would even groan with distaste and a few (girls mostly) would react with a kind of unhappy fear.

We'd line up and walk down the hallways in order, with the children from the other classes, to the gymnasium. It was a large room, high-ceilinged, with a number of wooden benches stacked one on the other along one wall. Some of the boys would unstack these benches and line them up before a large movie screen that hung down from the wall at one end of the gym. The pupils and the teachers would then sit down, silence would come into the room, and we'd hear the motor of the sixteen millimeter projector starting up, the familiar click-click of the film moving through the projector. The screen would flicker, black, white, black. Then, suddenly, there would be a series of stark images and a dark-sounding male voice giving the narration.

This was our periodic viewing of the movies about the Nazis.

As young children in Vienna we were being "de-nazified" in a program of regular classes required in the schools. As a part of this process we had to watch movies about the German Nazi government's history and policies and, particularly, its treatment of the Jews. Interestingly, these were not only the films made by the Americans, Russians, French and so on, now so familiar to everyone in the western

world: the train transports, the views of death camps and ovens, the piles of bodies, the almost palpable stench of death and holocaust coming off the film.

Many of the films we saw were actually propaganda films made by the Nazis themselves during the war. But instead of being used for their original purpose of exciting the public to mindless support of the Nazi vision, the films now were being used as accusations, to show us schoolchildren what evil the Nazi regime represented. So, scenes showing the monolithic power of the Nazi regime were now not to be viewed as any sort of triumph, rather as instructive reminders of the totality of Nazi megalomania. Scenes in which Jewish prisoners were shown being shot by German guards while trying to escape a prison camp -- scenes that were originally intended to glorify the Nazi state's protection of Germany against some perceived Jewish menace -- were now presented as representations of Nazi murderousness. All the films were horrifying to us, nonetheless riveting, and filled unintentionally by the Nazi filmmakers with the worst degradation of the human condition yet known to man.

Yet once the films were over with, they were hardly discussed by the teachers, barely integrated into any relationship to the normal life that we children in the schools were leading. Frau Riedel would stand, clapping her hands to get our attention, and hurry us along out of the gym, back to class. Some of the children would be crying, but the teachers did little to help them. There was none of the grief intervention techniques now so common to schoolchildren who are suffering some form of stress syndrome. We were just hustled out of the gym and the kids who were crying were expected to be ready for the next lesson once we got back to the classroom.

The hard thing to swallow, even for this little boy of eight, was the bitter revelations so clear in the movies paired with the upbeat sweetness of Frau Riedel and the other teachers.

What little discussion there was during or after these movies emphasized the un-human nature of these events and the distant foreign-ness of the vanquished perpetrators. Nazis were portrayed as “not us”. They were someone else. They weren’t the average German. Adolph Hitler was not the average Austrian. The SS were monsters devoid of human feeling and certainly not like the run-of-the-mill man on the German or Austrian street.

It never occurred to me in those times that the people who had marched with such authority in those movies, who had founded and manned those camps and had killed the Jews could have been the people I knew in grocery stores or pastry shops or on the trolley car going to the museum with my mother. Nazis were inhuman killers. They were beyond understanding and redemption of any kind. For me in the de-nazification class, there was an invisible dividing line between “them” (the Nazis) and “us”. Those monsters couldn’t be my neighbors. Surely none of my relatives could have been a part of such a thing.

But a ghastly doubt remained in me as I was growing up, alive and festering like a creature in a dark cellar. I grew up with the uneasy feeling that the problem posed by the Nazi murderers was not resolved as easily as saying “well, they’re not us.” In some sense, it must be true that “they” were still among us. Worse, I discerned that one could

not tell very easily who “they” were. Clearly, the Nazis were not all dead, incarcerated or gone off to South America.

I regularly looked through boxes of family photos that, after the war, were kept in a closet in my parents’ bedroom. They were seldom brought out, and when they were, there was not the immediate air of familial celebration that one might expect with the prospect of looking at happy times in the past. Indeed, I very often viewed these photos alone, having sneaked them from my parents’ closet when they weren’t around.

Among the more usual pictures of family at a wedding or a summer picnic or at Christmas, I saw pictures of my father in a German army uniform, of an older cousin in a Hitler Youth uniform, of an uncle in the midst of some military action against the Allies. Others of my friends had similar pictures of their uncles or cousins or brothers. It began to seem very possible – very probable – that for me and my school mates the “they” that had been shown in the movies and described by the teachers were really someone like Klaus Jurgens, the motorcycle mechanic around the corner who took kids for rides now and then; Herr Ritter, a spindly man, a little ill-natured and overly neat, who taught languages at the secondary school; uncle Fritz who doted so over his little children; cousin Franz who was such a fine skier and a gentleman of the best sort; neighbor Karl, feared by all the kids if an errant ball were to bounce into his tulip garden. This became more clear as I began listening carefully to the accounts of certain family and friends, of where and how they had spent the war and how they felt about it. It became clear to me that those who had been Nazis could be anyone, perhaps even friends, perhaps even members of my family!

My original attitude toward murderers -- that they are unforgivable criminals of the worst sort -- came as a response to my personal experience of the de-nazification classes. Nazis were all murderers, and like them, all murderers for me as a young child were distant, evil and unrepentant monsters. As I grew up, however, and looked about myself at the citizens of my own country, at members of my own family, I began to suspect that “they” -- the Nazi murderers -- could also possibly be identified as “us”.

Later in life, I learned that murderers in general could also be so identified. In some way, it was an even more difficult discovery for me as a psychiatrist because I learned as well that murderers could be our children.

6. THE MARKET

Parents

Parents worry about their children. Because the book will be written to a general audience, parents will find *The FOUR SCREAMS AND A WHISPER* to be very accessible and informative. In these times when gang activity in urban schools is at such a high level, when because of the rash of shooting attacks on children by their peers the safety of schools is so much at the forefront of our thinking, this book will provide parents with appropriate insight to the nature of youth who kill. It will provide information that parents can use as early-warning to the possibility that either their own children or their children’s peers may be suffering in ways that could lead them to perform such terrible acts.

I also wrote a separate story about a school shooting that I actually was involved in as a researcher and clinician. This story is entitled “Taking aim”. It will be submitted and hopefully published soon. It will cross reference this book and will serve as a “tickler” to test the market for this type of writing.

The Political Establishment

Politicians are supposed to share the wishes and aspirations of their constituency. Faced with the phenomenon of youth who kill, politicians share the frustration, shock and anguish of the public. They know as little about what causes such murder as do the citizens who vote for them.

Yet our political representatives are the people who must frame and implement any policy that would truly begin the recuperation of our nation from the profound illness represented by such occurrences. If there is to be a true effort to treat these children and to change the elements in society that result in such actions, it must come, at least in part, from the political establishment. The will of the people is the one thing that will institute such change. The political establishment is the most important institution for implementing it.

Medical Professionals

My many years at Stanford University, my research and numerous publications, my consulting work and my many professional affiliations have brought me into the

company of the finest physicians and psychiatrists in the world. This book will be a distillation for the medical community of my years-long study of the phenomenon of youth who murder. It will be of considerable interest to the medical community, especially those physicians, psychiatrists, psychologists, masters level front line clinicians, teacher, school administrators and other professionals who work with children and their parents.

Mental Health Community

My prior research and writing has produced major contributions to the understanding of youth who kill and helped make mental health professionals much more cognizant of what to look for in children-at-risk. *The FOUR SCREAMS AND A WHISPER* will be a very instructive new primer for them on the subject.

Criminology Professionals

Professionals in criminology are well aware of the phenomenon of youth who kill. *The FOUR SCREAMS AND A WHISPER* will provide a welcome addition to their library, with salient, revealing and accurate portraits of the kinds of kids who kill. Criminologists try to understand the complexities of crime and offer counsel to those who have to deal with it on a day-to-day basis. This book will make that job much easier for them.

The Legal Profession

Attorneys have the task of representing the interests both of criminals and of victims and their families. In the cases of youth who kill, *The FOUR SCREAMS AND A WHISPER* will give attorneys deep insight to the elements that can drive a child to murder. The quality of their representation of individuals on both sides of the issue will be enhanced by what they will receive from this book.

The Justice System

The same can be said for the people involved in the courts, who adjudicate such crimes. Judges, arbitrators, paroles boards and any number of people from related organizations in the justice system will find insights in this book that will help guide the decisions they make in the cases of the youth involved.

Colleges and Universities

The FOUR SCREAMS AND A WHISPER will become an important -- sometimes a required -- text to be studied by students from all of the disciplines mentioned above.

Church Aid Organizations

Another front line in the efforts to rehabilitate youth who have committed crimes and to counsel the victims of crime and their families, church organizations will use this book to educate themselves to perhaps the most difficult tasks they may ever

encounter: how to deal with a child in their midst who has murdered, to console the family of the person who has died and to make sense of what has happened.

The competition

Besides the works mentioned above, the following are related books currently on the market.

- *The Scarred Heart: Understanding and Identifying Kids Who Kill*, by Dr. Helen Smith. Based on Dr. Smith's experiences interviewing violent children and teenagers in many settings, from the gang-ruled *barrios* of New York City to the schools of rural Tennessee. This book also presents the findings of a national survey of violent and nonviolent youths aged ten to nineteen. These are survey data from samples of convenience rather than of scientific rigor, and so are of questionable generalizability and depth.. The book contains suggestions for healing the "scarred hearts" that lead to juvenile violence.
- *Kids Who Kill*, by Charles Patrick Ewing. A well-researched and prophetic book. Writing in the late 1980's, Ewing categorizes juvenile offenders and makes a fairly exhaustive search for children who have murdered. He approaches the topic from an epidemiological/forensic/criminological perspective. He utilizes ideas from criminology to find commonalities, in which he clusters people by the crime they have committed (family killings, serial killings, crazy killings, gang killings, cult killings etc, etc.) I believe that this is not a useful mental health perspective. Moreover, Ewing does not advance a theory for why these kids lack moral restraint. The book offers little

theory about the motivation for or possible prevention of homicides by youth. It is voyeuristic and sensationalist, a catalogue of what horrible acts children can perform.

- *When Good Kids Kill* by Michael D. Kelleher. *Kirkus Reviews* describes this book in part as follows: “Mr. Kelleher sets out to examine the backgrounds of young people from stable and supportive families who, with no warning, put bullets through their parents' heads or slaughter a best friend. By knowing more about those savage acts, [Mr. Kelleher theorizes], we can head off increased violence from the baby boomlet now heading into its teens.” I believe it is a theoretical work that is overly voyeuristic.
- *Kids Who Kill: Confronting Our Culture Of Violence*, by Mike Huckabee. Mike Huckabee was governor of Arkansas when a schoolyard shooting took place in the Arkansas town of Joneboro. With fellow author Dr. George Grant, Huckabee explores what he sees as a culture of violence that has resulted in the breakdown of the family, the resorting by Hollywood and the media to celebrations of gratuitous violence, the growing perversity of violence in video games (now an industry with higher sales volumes than those of the entire film industry), etc. The book offers a mostly conservative and right-wing Christian political agenda for solving these problems, quoting frequently from such pundits as William Bennett, Alan Keyes and Michael Medved. There is very little in it that reveals why these crimes actually take place.
- *Kids Who Kill*, by Herma Silverstein. This is a book intended to be read by older children (Grade 7 and up). *American Library Journal* wrote of it: “A thoroughly researched, insightful look at the histories, motives, and tragic results of juvenile murders in our society. Well-known cases, such as those of the Menendez brothers, are

presented as well as numerous lesser-known cases of juveniles murdering strangers, acquaintances, or family members. These incidents are not merely chronicled as cold, isolated facts, but are examined in a thoughtful manner, as Silverstein delves into the situations, family histories, and conditions that motivated or compelled the crimes.” No particular suggestions are offered in this book for remediation or treatment.

- *American Youth Violence: Studies in Crime and Public Policy*, by Franklin Zimring.

The publisher’s description of this book contains the following: “The book covers the range of current youth violence issues, from crime statistics to demographic projections to new legislation.” It is intended for use by government policy-makers, think tanks, academics and the like. It sheds almost no light on the very personal issues of individual child criminals.

7. BRIEF BIO & PUBLISHING HISTORY:

The author

Curriculum vitae: Dr. Hans Steiner

Hans Steiner, M.D.(www.hanssteiner.com) was born in Vienna, Austria and received his Doctor medicinae universalis (Dr. med. univ.) from the Medical Faculty of the University of Vienna, Austria. He completed his residency in adult Psychiatry at SUNY Upstate Medical Center, his child and adolescent psychiatry residency at the University of Michigan in Ann Arbor. Currently, Dr. Steiner is Professor of Psychiatry and Behavioral Sciences, Child and Adolescent Psychiatry and Human Development in the Department of Psychiatry at Stanford University School of Medicine. He is the

Director of Stanford's Program in Psychiatry & The Law. He also founded and directs The Pegasus Physician Writers at Stanford , a group of some 80 physicians who are also creative writers (www.pegasusphysicians.com)

He gives frequent testimony to legislative and legal bodies regarding mental health issues.

Dr. Steiner is a Lifetime Distinguished Fellow of the American Psychiatric Association (APA), the American Academy of Child and Adolescent Psychiatry (AACAP), and the Academy of Psychosomatic Medicine (APM). He is an invited member of the Group for the Advancement of Psychiatry (GAP).

He has won numerous national awards for his research and mentorship of young physicians. In 1996, he received the Goldberger Award of the American Medical Association for his work in Eating Disorders. In 1990, 1992, 1993 , 1995 , 1996, 1998 and 1999 he was the recipient of the Outstanding Mentor Award of the American Academy of Child and Adolescent Psychiatry. In 1993 , he won the Dlin/Fisher Award of the Academy of Psychosomatic Medicine for achievements in clinical research.

Dr. Steiner has been cited in several publications for his achievements in medicine and research. In 1994, he was named as one of the 327 best mental health experts in the nation by *Good Housekeeping*. In 1995, he was included in the *International Edition of Who is Who in Medicine*. Since 1996, he is included in *Best Doctors in America*. In 2001, he was cited in Castle and Connolly's *America's Top Doctors*. Also in 2001, he was included in *Who is Who in America* (#14879) and received the International Biographical Centre's 21st Century Award for Achievement in

Medicine. Since 2002, he appears in the *National Registry of Who is Who* as a Lifetime Member, (#128962).

Dr. Steiner is considered an expert in two areas, the first one being most relevant to this proposed book:

1) Aggression and its relationship to psychopathology. He is generally regarded as a national and international expert on the overlap between psychopathology, aggression and antisocial behavior. Dr. Steiner has authored the National Practice Parameters for the Diagnosis and Treatment of Conduct Disorder and Oppositional Defiant Disorder of the American Academy of Child and Adolescent Psychiatry, as well as multiple research and clinical articles on these topics. He has consulted to systems of juvenile justice for many years in an effort to bring the insights of developmental psychopathology to bear on the care of incarcerated youths.

He is interested in the mental health dimensions of sports participation because of its connection to aggression and the opportunities it provides for the shaping and channeling of various forms of aggression.

2)Psychopathologies associated with trauma and victimization. Abuse and child victimization are important precursors of disorders related to aggression. Dr. Steiner has contributed significantly on PTSD, Dissociative Disorders and the Survivor (Meursault) syndrome.

Publication History:

I have authored over academic 500 articles, abstracts, book chapters and textbooks. I have edited three volumes on Treating Preschool Children, School Age Children, And Adolescents (the latter currently in its second edition with John Wiley & sons), respectively, all published by Jossey-Bass. I am the editor in chief of a Handbook on Mental Health Interventions in Children and Adolescents (Jossey-Bass/Wiley, 2003); one of four editors of a joint American-German Textbook on Child and Adolescent Psychiatry (Hogrefe, 2011), and a brief Handbook of the same text (2014). I am the editor of The Imperial Sciences Press' 2015 Handbook of Developmental Psychiatry. I am the lead author of 4 of the Oxford University Textbook : Disruptive Behavior: Development, Psychopathology, Crime ans Treatment , scheduled for 2017. I am the main author of a self-help book entitled Your Secret Mind: Getting to Know and Living With Your Unconscious, to be published 2017by Karnac Books, London.

As a creative writer, I have been transitionning into this type of writing in the last 4 years. I edited a volume of Poetry, Memoirs and Short Stories by The Pegasus Physicians, "On Becoming and Being A Doctor", a collection of the group's first public reading at the Cantor Arts Center ". (<http://www.pegasusphysicians.com/about/>. I published a psychiatric/narrative medicine essay on the psychology and psychopathology of Lisbeth Salander, "If Lisbeth Salander Were Real" in a 2011 volume on "The Psychology of the Girl with the Dragon Tattoo" (Robyn Rosenberg and Shannon O'Neill, editors; <http://www.hanssteiner.com/book-proposals/>). I published two short stories in the 2015 Spring Edition of THE INTIMA, a Journal of Narrative Medicine "The Cat Doctor" and "Talking in Toys". I am working on a collection of

interlocked short stories, “Stepping Into The River”, approaching the practice of developmental psychiatry across the age span from a literary perspective. A short piece of narrative medicine “Parte For A Mother” and a poem “Charon’s Ferry Building”, have been accepted by MD Magazine for publication in January 2017, starting a new column in this Journal on narrative medicine.

Further details of my efforts so far can be found on this tab on my website:

www.hanssteiner.com/creative-writing

My platform.

I continue to work as physician and Professor of Psychiatry and Human Development, Emeritus (Active) at Stanford University, School of Medicine, part time. I treat a range of psychiatric disorders across the entire life span with integrated treatment (psychotherapy, family therapy and medication). I am best known as a specialist in externalizing disorders (disruptive & antisocial behavior, e.g.). I have frequently received national recognition for my clinical work in the past 30 years from professional organizations and polls of esteemed colleagues (see Honors and Awards on my Stanford home page, <https://profiles.stanford.edu/hans-steiner>)

I have written extensively about the Developmental Psychiatry Model, which integrates the insights of Developmental Psychology, Psychopathology and Psychiatry, and I give professional talks regarding this approach in the US, Europe, Australia and Asia on an ongoing basis. My next series of talks is scheduled for June in Vienna and Innsbruck, Austria; September, 2016 at Stanford; and Prague, Czechia in July of 2017. At these talks, I usually draw between

100 and 2000 people, with an average of about 200 over the past 20 years. You can find much more detail about me and my academic career at my website, www.hanssteiner.com, or on Wikipedia https://en.wikipedia.org/wiki/Hans_Steiner; or on the Stanford website: <https://profiles.stanford.edu/hans-steiner>

I have a well-established track record as an academic writer (see above). My most successful volume, *Treating Adolescents* is currently in its second edition with John Wiley & Sons, is usually listed as a bestseller on Amazon. It recently reached # 33,000 among books in general; and usually is in the top 100-200 books in Mental Health, Child Psychology & Psychopathology. This is of special interest, because the style of its writing is closely related to narrative fiction and fiction, especially in its case vignettes. FOUR SCREAMS AND A WHISPER will be much more literary, as one can tell from the sample attached at the end of this book proposal. More on my books can be found on my author page at Amazon: http://www.amazon.com/HansSteiner/e/B0034NIQYW/ref=sr_tc_2_0?qid=1457989773&sr=1-2-ent.

I am also the director and one of the founding members of The Pegasus Physician Writers at Stanford, a group of some 80 doctors who also are creative writers. The group was founded together with Irvin Yalom, M.D. in 2008. We are an active group, publishing, writing and presenting to the public regularly. More detailed information about this group can be found on our website www.pegasusphysicians.com.

Two of my websites are most relevant :

www.hanssteiner.com.

This is intended for my private practice and my writing. The site receives about 500 visits per month, 3900 per year, with an audience size of 322 per month.

www.pegasusphysicians.com

Just was split off from my own website this spring and went live on 3/2/2016. Since then it has attracted the following 555 visits with 1279 page views and 355 audience size.

Both sites announce my books and provide links to Amazon. Both sites usually have their peak activity around the times I give presentations and we have Pegasus readings and bookstore readings scheduled on campus. These are readily visible on the Pegasus website:

<http://www.pegasusphysicians.com/events/>

And the Stanford calendar:

<https://med.stanford.edu/medicineandthemuse/pegasus-physician-writers-at-stanford.html>

In addition, I receive regular notifications from wiki https://en.wikipedia.org/wiki/Hans_Steiner and Academia.edu noreply@academia-mail.com that my work has been searched or cited. The latter sends me daily to weekly updates that someone has searched for me on the web. Countries of origin of the searchers are from all over the world, with the majority coming from the US and Europe.

Finally, I have been teaching at Stanford University to undergraduates, graduates and postgraduates, as well as the lay public on this and related topics for about 40 years. I currently have two undergraduate seminars and a class for Continuing Studies, which I have taught for some decades. The classes are always oversubscribed, full and receive very high marks for satisfaction and educational progress. Students are quite complementary of my teaching style.

About 70-80 students per year enroll, about two times as many are waitlisted. The classes are capped for attendance by me to preserve quality of teaching. More about them can be found on my website and the Stanford websites: <http://www.hanssteiner.com/courses-taught/>

There are many students over the years that have re-registered and taken the class to deepen their knowledge in developmental psychiatric topics, adding to my optimism that this proposed book will attract a broad, interested, and incremental readership. My latest book, “Your Secret Mind: Getting To Know and Living With Your Unconscious,” a self-help book which provides the syllabus for two of my classes, is scheduled to be published by Karnac Books in London in 2017. This proposed book, FOUR SCREAMS AND A WHISPER, will approach many similar topics, but from the perspective of narrative medicine, thus complementing the coursework, attracting additional readership.

8. COMPETING BOOKS:

There is a strong and unabated interest in doctors’ and other health practitioners’ writing about their craft. Amazon, Goodreads and similar listings provide literally hundreds of sources if one inquires regarding doctors' writing. The writing can be classified roughly into the following: biography and memoir (Abraham Verghese’s very successful novels “In My Own Country” and “Cutting For Stone” would be good examples here); self help books (Louise R Allen’s “Depression: How to cope with Depression” or Craig Donovans’s Obsessive –Compulsive Disorder : For beginners” are good examples); textbooks and handbooks (my own “Treating Adolescents” or Irvin Yalom’s “The Theory and Practice of Group Psychotherapy” are

examples); state of the craft accounts and analyses (e.g. Atul Gawande’s “Being Mortal” or ‘The Checklist Manifesto’ would be examples); and creative writing including narrative nonfiction.

This proposed book is part of the latter grouping. While it is based on research and medical practice and contains some memoir, it principally is a work of narrative nonfiction in the tradition of narrative medicine, an emerging powerful tool for teaching and creating broad-based understanding of what modern psychiatry has to offer. It contains examples from my life and practice, but is not a memoir. It may help patients and their families, but does so by telling stories, not giving checklists and instructions; it teaches by example, not by an academic review of the existing literature, and unlike a textbook; it passes along information of how 21st century psychiatry works, not in the form of a critical essay, but rather by modeling and storytelling.

This proposed book is perhaps closest in character to the work of Irvin Yalom, my friend and mentor. With his help, I have learned to weave data into narratives which show how psychiatric treatment proceeds while telling a compelling story. Following and expanding on Yalom’s seminal contributions to our field over the past 30 years, I wrote these stories while simultaneously giving the reader access to the complicated dilemmas practitioners face as they hope to cure and heal complex psychosocial problems. Compared to 30-40 years ago, psychiatry now possesses a wide array of interventions. While this is welcome, it also introduces a new set of difficulties to be navigated. This book shows how such problems arise and are dealt with successfully.

My stories approach psychiatric healing from a relatively new theoretical framework: They are based on the knowledge of 21st century psychiatry, which uses a combination of biological, psychological, and social interventions to restore health and developmental progress. This approach has grown tremendously under the impact of developmental, longitudinal studies, clinical trials and neuroscience. There is a strong reliance on empirical facts in writing these stories describing what is known as integrated treatment. Thus, the book puts psychiatry and its tools firmly in the middle of evidence-based medical practice.

Currently, there is no book on the market with this specific content and perspective, intended to address professionals, the lay public and the reader interested in narrative medicine. Judging from the response I have gotten so far from prominent colleagues and friends, patients, students, and trainees, I am hitting a nerve. Irvin Yalom, himself, said that he knows of no book with this precise perspective and structure. Alan Schatzberg, the former president of the American Psychiatric Association, said that he hoped this book would go forward, as it represented a very strong contribution to the field of mental health and psychiatry.

9. THE TARGETED MARKET

I am aiming at a broad audience:

The educated lay public who is interested in the inner workings of medicine and psychiatry. (Hard to estimate the size of this group, but our public readings of *The Pegasus Physician Writers* at Stanford are usually standing room only on the 5-6 occasions per year for

the past 8 years they occur. The sale of books written by doctors also seem a good indicator of a large market)

Patients in treatment who seek a deeper understanding of their disorders, as they appear in this book, the methods used to heal and help, and wanting a look into the future. (This should be about 10-20 % of the current population of the US and probably also Europe, given the numbers produced by large scale epidemiological studies on both continents over the past 20 years).

Students and medical trainees in the mental health sciences who are looking to decide whether to pursue mental health as a career or are struggling with integrating a diverse panoply of interventions as they approach the end of their training (about 20,000 graduates per year in the US and another 30.000 in Europe – plus 3 times as many underclassmen; twice as many psychologists and counselors, social workers, and marriage and family therapists; thus a cohort of about 600,000).

Allied health professionals, such as teachers, counselors, social workers, psychologists, community health workers, nurses, other medical specialists, especially those in primary care (family medicine, ObGyn; pediatrics; Internal medicine) would add up to another 500,000 cohort.

Adding all these categories, we anticipate a potential market of 2-5 million, which, if appropriately targeted could result in substantial book sales, not counting Australia, Asia, Russia and Africa.

TAKING AIM

By Hans Steiner, M.D.
Professor of Psychiatry & Director,
The Pegasus Physician Writers at Stanford



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THIS IS ANOTHER STORY THAT COULD BE INTEGRATED INTO THIS PROPOSED BOOK, OR CONVERSELY, PUBLISHED SEPARATELY IN A JOURNAL OF NARRATIVE MEDICINE, SUCH AS "THE INTIMA", WHICH HAS PUBLISHED TWO OF MY NARRATIVE MEDICINE PIECES IN 2015. IT WOULD SERVE AS A "TEASER" LEAD IN FOR THE BOOK: *DESCENDING INTO THE ABYSS*.

IT GIVES THE READER AN EXAMPLE OF THE COMPLEXITIES INVOLVED IN THE ROLE OF THE EXPERT FORENSIC PSYCHIATRIST, THE LEGAL SYSTEM'S COMPLICATED RELATIONSHIP TO MEDICINE.

They will take us to the classrooms where we will distribute the scales as the students come in. We did not randomize the sequence, as you suggested.”

“ Ok. Easier to avoid confusion. We will deal with order effects statistically.”

Renee was a gem, always, prepared and in control. Stephanie, Zakee, Traci, Niranjan, Belinda, Amy and Laura, all gems in their own right, dedicated, full of energy, still fun to be with. The doctor’s little United Nations, his wife called them. It made him proud.

Time to get ready himself. His plan was to come to the campus around ten, survey the scene, sample some collected data, make sure everyone proceeded calmly, efficiently and patiently. He looked forward to confirming the previous result. It was so much fun to be right. Starting to shave, he turned on the news. KTVU had some ads running, one for a Dodge dealer was particularly annoying. Why did this guy and his son think that anyone was interested in them singing at 8 am in the morning ?

In the middle of the ad, the announcer came on. Breaking news. Probably an accident on one of the bridges, slowing down traffic. Or BART broken down again.

“We just got news that there is a school shooting in progress on the peninsula. Police are advising students, parents and staff of Saint Matthew’s High School to take extreme caution. The police have cordoned off the school area. So far it is not clear how many victims there are nor are the police certain of the number of shooters.”

What? This had to be a mistake. This was the school where the data were being collected. The announcer said “St. Matthews” again and again. John Perceval’s first reaction was: “Damn”. Then he recovered: Was the team safe? Where were they? Judging

by the time they were already on campus. He dialed Renee's number, misdialing three times. No answer. Traci – no answer. He could just drive there. No, then he would miss the news. He kept the phone handy and turned the volume up. Another commercial. This time for a curtain cleaning special. Jeez. Finally Dwaine came back on.

“This morning at 8:45 am, an unidentified student at Saint Matthews high school drove up to the parking lot and stopped his car at the main school entrance. He then lowered his window and threw large denomination bank notes out the window. As students approached to pick up the money, the driver in the car started taking shots at them with a handgun. He hit several students and adults in the area. At this point it is not known how badly the victims are hurt. Some brave parents and teachers advanced and pulled some of the victims to safety. When the police arrived a few minutes later, the student in the car was seen to put the handgun into his mouth. He shot himself in plain sight of everyone, blood splattering onto the windshield. The police have cordoned off the school area. They are advising extreme caution for everyone, as they are not certain as to how many shooters there are and whether explosive devices have been planted in the school area. Our reporter, Ana Martinez, is on the scene. Ana, can you hear me?”

“Yes, Dwaine. I am standing on a side street close to the school entrance and I can see the car of the student that seemingly killed himself just now. Police have surrounded the school and are going through all the buildings to secure them. Students, teachers and families have gathered in a parking lot at a shopping center near us. Ambulances have arrived and are taking the injured students away. We are trying to speak with some of the witnesses who were standing at the entrance when the shots were fired. They are all badly

shaken and frightened. We are still uncertain as to whether the shooter was alone or not, or whether he has planted explosives on school ground. We understand that he had a website where he announced this event yesterday. We are working on getting the details of that situation as well. I am trying to find someone who is willing to talk to us. What a horrible event: Blood everywhere. The principal has agreed to talk to us in a little while, after he has settled the situation. Yet another one of these terrible events committed by some depraved lunatic.”

“Ok, Ana, we will stay in contact, let me know when we are ready to hear from some of the people on site. And any details about who the shooter was.”

Commercial break. Home loan specials. John Perceval dialed Renee’s number again. This time she answered.

“Oh, good, I was really worried.”

“We all got here as the police were swooping in. We are all ok. But everybody is very jumpy. Nobody wants to tell us anything. But we are ready to do whatever, whenever.”

He heard Renee’s voice shaking through all her reassuring talk. Typical jock that she was. Toughing it out, just like she used to do on her long distance runs. Getting the job done, no matter what.

“Well, Renee, no heroics, please. Huddle the team off campus in a safe location, but stay nearby. The school may need all of us to help them. I will try and call Donald and see what he wants us to do. Wait, the news is getting ready to give more details. Stay on the line and out of trouble. As soon as they clear the area, I will be over.”

“O.k.” Renee sounded relieved. “ We are over by the Goodwill Store in the shopping center. We will just go into the Starbucks there and wait for your call.”

“Dwaine, I have with me Alyssa, who apparently was a friend of the shooter. Alyssa, what can you tell us about the boy? ”

“ I wanna know if he is ok.”

“I am not sure about that. The ambulance took him over to Mills Hospital, along with the kids that he shot. I guess we will keep close track of them and let people know. Is there anything you can tell us about your friend though?”

“He wasn’t my friend. He was new, in our school about two months. We sort of knew him, but he kinda kept to himself. He was weird.”

“How was he weird?”

“Well he had no friends or anything. And then he said that Christine was his girl friend, but I knew she wasn’t because Christine is going out with my brother’s best friend. That’s been a little off and on, so at first I thought nothing of it when he said that. But then I asked Christine and she said no way, he was always texting her and stuff, but she’d never go out with him. And she finally told him straight to his face.”

“Oh, when was that?”

“I don’t think it had anything to do with this. It was last week or so. I don’t wanna talk any more.”

Alyssa started to cry, looking frightened. Tears rolling down her cheeks, she turned her head, walking away from Ana who followed her a couple steps, extending the microphone. Alyssa quickly disappeared into the crowd. A boy put his arm around her, but

she kept on walking. He let her go, and with a grim face walked up to the reporter. He also was visibly shaken, but offered to fill in the blanks.

“Yeah, it’s just like Alyssa said. He was new and nobody really knew him all that well. He called himself ‘Radical,’ ‘Rad’ for short, pretty lame. He’d drive his flashy car to school all the time. In the break he would try and sit with us. But then he’d always start talking about his dad’s weapon collection, and we thought he was just full of it, because why would he do that? And how his father had this software company and boatloads of money; and how they had a house at Tahoe, in Aspen, and apartments in New York and Tokyo and Paris; how he flew in the company jet all the time, how his dad was always on the road making money. He offered to give us some of the weapons, until I finally said: ‘Ok, you do that, bring me an AK 47 or a Russian Kalashnikov.....’ and he said ‘Fine’. The dude was completely cracked, cause the next day he brings a backpack full of random pistols and shows them to us during the break. I go ‘Dude, we are at school, are you insane, if they catch us our ass is fried. Put that shit away’. He just smiled said he knew where all the ammo was locked up, and some weren’t even locked up. When that didn’t work, he said he could get us any drugs or booze we wanted because he had checked out the best dealers in town and had a good supply. And it was no problem if we came by his house, because his mother was on a vintage car rally in Italy, so he had the house to himself.”

“Did you tell anybody about all this, as it was happening? Like your parents or the principal?”

“No, ‘cause all of us thought he was just full of it. He weirded us out, we just wanted him to leave us alone.”

“So you told no one about all this?”

The boy’s eyes turned to slits. His answers became increasingly monosyllabic and he finally just walked away. Dwaine and Ana speculated for another 2 minutes why all this had happened.

“This shooter is clearly a monster” Dwaine closed the discussion, having developed this deep insight into what happened in less than 30 minutes.

“Renee, you heard that, right?”

“Yes.”

“Does that mean we have this guy in the data base or not?” It just slipped out, and as soon as it did, he was sorry that it had. Not one iota better than the reporter. But, he thought quickly, all for a good cause. He still felt like a vulture.

“No, of course not. If it’s like she said, he has only been at this school for the past 2-3 months and our baseline collection was 6 months ago.”

“Right, right, right.” He tried to recover, sensing Renee’s disapproval. “So stay there where you are, keep everybody close, I will hop in the car and I should be there in 30 minutes.”

On his way to the car, he dialed the principal’s phone number. “Donald? Can you talk? Ok, fine. I will call you in 30 minutes or so. I am on my way up there and we will touch base then. You want me to talk to the media, are you sure? Ok, if you think it’s helpful. Do you know who the shooter is? Oh good. Can I see the file then before we both talk to the media. And we should touch base before either one of us does. Yeah, I know, but he wasn’t at the school when we did the first wave of data collection. Have you heard, is he

I will claim all the lives of those that have tortured me, thinking they had power over me. All I wanted was to give all of you my greatness, because I am the flame that ignites Armageddon, the final battle for supremacy where the Prince of Light will sweep away the whiney masses of fake Christians with all your phony love for your fellow man. All I wanted was this: to sit at your table in the breaks. But you turned away and mocked me behind my back. I saw it, how you pulled your nose down to your lips, how you used a dust mop to mock my hair.

I will enter your brains like purple poison and make you yearn for the covenant, but you will be denied because you are the ones that are not worthy. You will be frozen in the black light swimming on top of an eternal cauldron of darkness and icy stillness. I wanted to give you the instruments of power that my mother gave me to prepare for Doomsday, she the leading member of the Doomsday Preppers, a pathetic group who just whined about a disgustingly optimistic version of what was about to come. As if you could prepare. They also said they knew the date, the exact date! Well I am going to raise my own hell, turn my fear and loathing into terror and tribulation while you fly between matter and antimatter, lost never to be found, blown to smithereens.

I had all the crystal clear answers to any question you might ask. You're feeling crappy? Take this! Glass like, it would jolt your head back seconds after you sniffed it, none of that pathetic and expensive coke. This stuff makes you sit up!!!! But you turned it down.

I will get each and every one of you. I will throw my bolts of fire down on you, spewing from every gun my father owns. I will hammer you with bullets, they will make you shake and twist and turn and shout, spas out, you will howl and holler, dragging

yourself under the desks in the room, shitting your pants and whining for your lives. I will spray bullets underneath these desks, blow off your dicks, then roll a flaming Molotov cocktail your way so you can have a nice happy hour. It will burn your skin to a crisp, turn it into dust, which I will blow into nothingness with my breath of devastation. I will have FUUUUUUNNNN!

Allison, I tried. For one date I would have given you all I have. But you were “busy” with homework. I even believed it, until I saw you at the mall with Darrin. Are you still “too busy” now that you’re dead? What you were studying was not homework that I ever knew.

And as for you Tom, a great shot right to your head. Try and catch that one. All I wanted was your name on my photo in the yearbook so I could be sure you remembered my name. No, too busy too, out on the field, muscles ripped, arm cocked, ready to throw, ready to go, while all the little chicks with their little skirts were watching and cheering every time you made a move.

But then, what was I thinking? All this crap I tried because my shrink told me to do it. Nothing worked, so I quit him too. My parents never noticed, just kept paying the bills he sent. And I stopped the stupid meds too, they never did anything anyway. And nobody noticed that either. I thought of going over to his office and blowing him away before I did the school job. But the school was more important. Shrinks instead of parents is not a good recipe, it does not work. Father gone, 24/7, business this and business that. And mother, I saw your face when I would come towards you, you would back away, just a little, but enough so it made me stop in my tracks, and then you finished me off by saying: “Honey, don’t be afraid to show your feelings”. It reminded me of how much you did not want me in

“Thank you, doctor, for making the time to talk to us to help us understand what happened here. We still do not know how many students and maybe even parents and teachers are dead, but it could be dozens. We are all struggling . Why would someone do this?”

The reporter was trying to look grief stricken, but he constantly scanned the background to see if someone better would come into his field of vision to interview. The doctor began to wonder why he had agreed to this interview. The channel had (“for dramatic effect”) insisted on doing the interview on the site of the shooting. John Perceval had suggested the studio, but the producer had apparently nixed that. The reporter explained “We have an obligation to the public. We need breaking news.”

On his way to the school he had gotten the call from the hospital’s public relations manager: “Hey, doc, you are the perfect contact for this, given your background and research. This is the perfect chance to highlight your experience and give more exposure to your research results”. The doctor the word “exposure” almost as much as the word “provider”. But a soft spot was also hit: psychiatry has an extremely bad track record of relating to the public. This could be yet another chance to set that straight.

The reporter stuck the microphone in his face and looked expectant. “Are we dealing with a new syndrome here, doctor? Is this a result of violent video games?” Every fiber in John Perceval strained against this sensationalistic simplification. He forced himself to remain composed.

“No, this is nothing new, in the Darwinian sense. This is very old, is in all of us and can be misguided and misused at any moment. And it can be made extremely potent by adding firearms into the mix.”

The reporter frowned. “How do you mean?” “Well, to be aggressive after being hurt and tortured is nothing new, nor inhuman. Aggression is part of our survival system, we need it like food and water. As a tool for survival, it needs to be shaped and honed in the process of growing up and child rearing.”

He could feel how the reporter backed away from him and scanned the background more openly. This was not going well. Too many words, too much professorial teaching.

“ This young man has a long history of badly treated psychiatric problems. If you look carefully at the profile of all the other perpetrators of similar crimes, you will find many familiar factors in this case: social isolation, absence of parental guidance and involvement, and bullying in a new school. There is an unhappy, unilateral romantic relationship, and desperate attempts to win other kids’ respect and attention by offering them drugs and weapons.”

“I don’t want to oversimplify, but this sounds like an adolescence that many of us go through. What tipped the balance in this case in your opinion, doctor?”

“You are right of course, there are many themes here that are relevant for all of us as we grow up. But if you delve into his website, there are some elements that are not so common: his outward access to everything that money can buy, contrasted against a dearth of parental love, appreciation and involvement; his being repeatedly told he was an unwanted child.”

“Yes, true, that is what he wrote about on his website. Let’s assume it’s true – But are we not just saying his psychiatric diagnosis is an excuse for what he did? And he also was in treatment, was he not? On medication?”

“Yes, but looking deeper into his records as they are available to the school, he was not in treatment when he switched to Saint Matthews High. He stopped taking his medications; he had no psychotherapy sessions, he was just given medications and when he complained that he had trouble with concentration, school work, sleeping, eating, he was just simply switched to another medication or another one was added on. No family therapy, no communication with the school, nor were there requests from the school for more detailed guidance and expanded testing to help him with his academic problems. He also appears to have taken street drugs on a regular basis (crystal meth it looks like, among many others like ecstasy), some of which can cause extreme emotional swings and precipitate violence. None of this was identified, treated or monitored.”

“This is certainly important. But there must be many cases like this in any high school. What made his case so lethal?”

“One of the most important factors in the mix that, in my opinion, tips the balance into the highest risk category is the easy and completely unmonitored access to guns and ammunition. All of the factors I discussed, his mental health, his stresses and strains of being an adolescent are ubiquitous, but also load the case with more and more risk in the direction of dramatic action. But what makes the situation perilous is the easy access to guns, which give you the power of depersonalized, sanitized, almost video game like killing. It is like this: when you have this cauldron of many problems and you throw in firearms,

they react with the ingredients in the cauldron and make them crystallize into this lethal expression of disappointment and fury.”

“Both parents were NRA members. So he must have been taught about gun safety.”

“That means relatively little, as 30% of them still do not store and maintain arms and ammunition in ways recommended by the NRA. This young man had access to his father’s entire weapon collection and ammunition. Guns have an incredible appeal: What an easy and quick way to make yourself feel powerful. What he essentially did was a glorified suicide, meant to take his tormentors with him. This a form of aggression which is emotionally “hot,” not well thought out and planned.”

“So he was a psychopath.”

“No, he was an isolated, desperate kid who saw no way into a life worth living. And he took the life of those who he saw had it better than him. And don’t forget how he started the attack, there is a message in that as well for all of us.”

“You mean him dropping the money out of his car window, baiting people to come and then taking shots at them?”

“Right. As if he was saying something like: Look what you get when you just throw money at misery. What you get is death and destruction.”

“So what is the solution, doctor?”

“What we need is a sophisticated mental health system which interacts effectively with primary care in medicine, families and schools. Coordinated, integrated care, that is what we need.”

I have to keep my shit together . Nothing on the news yet about me, just hot air when I watched it a few minutes ago. They are all over Radical's website. Never made any sense to me, just ranting and raving. Thank god he just used our code names. Loser. Wants me to do the job, and then I have to arm wrestle him to get the Pi 38 from him. Need that to make it look as if he did it. He goes on how he needed the Pi38 because it was his father's special weapon, the one he used to teach him on the range. The lameass didn't get it: how sweet to off the old man with his own favorite weapon. I had to be quick, but they both were in bed when we got there. Just put the gun in his mouth – snoring fat ass, and bam. His brains all over the wall. The old lady woke up next door. Looked kinda nice in her nightie. Despite her age. For a moment I thought I would fuck her and blow her head off when she comes. But Radical was getting antsy. So I blew her brains out – after I let her whimper a little bit, long enough to make her think she could live. She even took off her nightie, but then I got disgusted thinking of fucking a fifty year old and finished her off. We needed to finish the job at school. Radical started crying. WTF: make up your mind, man. Which way is it? Glory or not?

I was careful though - no prints, no footsteps. Just his. They both were bleeding like pigs, so hada be careful. Left the pistol and lit two large candles. Showed some respect. More than they ever did.

That mess will keep them busy for a while. Long enough so I can do mine in. With them though, I am gonna do it slow. Need some fun. Need them to know what's up now. So here mom is your chance – my witness – Virgil shot first. You heard it. It was self defense.

And no waffling. None of that shit that you always used to do. “Oh, honey, he means well, he just wants your best. And he is so much better than your father. Really.” Asshole. You dragged this piece of shit home. Whatta creep. Marine, my ass. You watched when he made a man out of me. Me in the closet, him walking up and down with his Smith & Wesson, clicking the barrel.

“If you come out of this closet, Mr. Smith & Wesson will teach you what it means to obey.” So I pissed on the floor. When he saw it run out he ripped the door open, grabbed me, threw me to the floor and kicked my face with his army boots. Then when I bled enough, eyes swollen shut he dragged me to the garage and worked me over some more with the baseball bat. “Get up, get up, you little shit, get up and stand like a man.” She in the kitchen watching. “Virgil, honey, don’t hurt him. He forgot the trash because he had so much homework.”

She did all the crying for me. I just stared him down. Spat in his face. He knocked me out. When I came to, she blotted my face with a damp towel. “Honey, you should not have spat at him. He is a Marine, he is a proud man, fought for our country, deserves respect. He means well, wants you to be a man like him. I spat in her face. She wailed, then Virgil coward asshole came in and taught me some more lessons.

And this every day, every goddamfucking day. But I’d rather burn in hell than cry. And after a while I got off on how mad he got when he could not beat it out of me. I knew my day would come. And when he threw me to the ground in the garage, and then pissed all over me, and shoved his weapon up my ass, I knew exactly what I’d do to him. Just little reminders, I kept them all in my head.

After the doctor came through the security checkpoint for good, he sat down on the yellow plastic chairs, which, despite their sinuous molding, were extremely uncomfortable to sit in. Some of them were also covered with organic matter of different shading and dubious origin. The doctor had requested that the boy from Saint Matthews High be called up, and they sit in a private interview room so that the exam would have semblance of a usual psychiatric session. Knowing the system, the doctor anticipated that it would take a while to get the boy up and into the interview room, so he took out the paperwork the defense attorney had prepared for him. The questions to be answered were familiar: 1. Do you think the boy shot his stepfather? 2. Was this done with forethought and malice or in self defense? 3. At the time he shot and killed the stepfather, did he know the nature of his actions? 4. At the time of the shooting, did he know that his actions were illegal? 5. At the time of the shooting did he suffer from a psychiatric disorder which impaired his judgment or his impulse control? 6. Does he now assume responsibility for his actions? 7. Does he have insight into his condition? 8. What if any treatment should the boy receive? 9. What is his prognosis? With and without treatment? 10. Do you have any other opinions which might be relevant to the case?

Nature called. The doctor got up, making sure that the guard noticed his movement. As the man looked up from his logbook , the doctor pointed to the bathroom. The guard without any other acknowledgement buzzed the door to let him in, all the while talking on the phone.

The stench of urine immediately hit the doctor's nostrils. In the middle of the room stood a completely naked black man of extremely slender build. He swayed back and forth, as he attempted to wipe his rear. A trail of excrement led to one of the cubicles whose door stood open. "Hey, man, can you give me a hand?" He shuddered at the mere thought. The man's clothes lay

soiled in a corner of his cubicle. He took a step forward to help the man stabilize his posture, but then all the diseases in prison flashed through his mind: HIV, TB, Syphilis, Gonorrhea, Dysentery, giardiasis, herpes, and twenty more. The doctor retreated. “ Man I am sorry, I gotta go myself real bad.” As he unzipped his pants he noticed that the stench emanating from the man had made him nauseous to the point of throwing up. He rushed his pee, emptied a good portion into his pants and almost caught his penis in the zipper. The doctor felt the naked man come closer to his back which was defenseless as he peed, the stench got stronger still, but he managed to step sideways, just in time for the man to fall against the wall and slide down into the pissed on floor surrounding all the urinals. This was his chance for escape. “ Hey, I’ll make sure they come and get you and give you a hand.” “ Oh fuck off,” the man mumbled as he closed his eyes.

Outside, the doctor made sure the door was firmly closed behind him. He walked over to the guard, still on his phone, still staring at some screen. “Excuse me, but there is a gentleman in there, without clothes. He is asking for help. Can someone assist him?” “What is it?” “He says he needs help.” John Perceval hoped the guard did not know that he was a doctor.

He was glad to see the boy finally arrive in his orange jump suit, shackled up, both hands to both his feet, hobbling in short and insecure steps towards the interview room, a cubicle of security glass in the middle of the visitation hall. Two chairs and a metal desk with a hinge to chain the prisoner to. Walls soundproof and bare, but a camera and microphone in each of the four upper corners.

The boy was of much smaller stature than he remembered from the pictures taken at the time of his arrest. But it was clearly him, his shock of straight black hair a bit longer than a few

weeks ago, his pale blue eyes visible even from this distance. John Perceval walked up to the room.

“Doc, do you want him out of his shackles?”

“Of course, he will need to have his hands free to be able to write.”

“You sure?” The guard looked at him with a look that said ‘Another one of those do gooder fools.’

The guard’s question had instilled some doubt in the doctor. At least he should have asked if the boy was calm and cooperative. Too late now, the hands were free. But the doctor noticed with some relief that the legs were still chained to the table. The boy just stared at him.

“Hi. I hope they have told you who I am and why I am here today. “

“Yeah, my lawyer told me.”

“Would you mind telling me what he said?”

“You are the shrink that’s gonna get me off.”

“I see. Let me explain in more detail. I want to be sure there are no surprises here, for neither you nor me.” The boy’s face stayed frozen like a mask. The left side of his upper lip was a tiny bit pulled up.

“I am a psychiatrist, selected by your lawyer to help in your defense. Helping means I examine you and then report to your lawyer what I think is true, in your case psychiatrically. Have you ever been to a psychiatrist?”

He snorted disdainfully. “Nah.”

“I see. Well, ordinarily, when you go to see a doctor, whatever you say is confidential. In this situation, that is different, because we are in a legal setting. I have to report on what you say

and what I think about that. But it will become a public record, that the other lawyers and the prosecutor and all the people in the court room will hear about. It is only fair to tell you that, so that you are not disappointed or surprised when that happens.”

“ Can I see what you will say beforehand?”

“ That is up to your lawyer.”

“ What if I disagree with what you say?”

“ That is a discussion between you and your lawyer, who can decide not to use my report.”

“ So I can’t stop you?”

“Only through your lawyer”

“ That’s pretty fucked up.”

“Well I guess that is one way to look at it. But obviously you can discuss this with your lawyer. And you might trust him to act in your best interest. He chose me for a reason.”

“ I don’t trust nobody, man. Especially not a shrink.”

“I can understand your thinking that, given what you have been through. But you might give this a chance, because it really might help you.”

The boy yanked on his chains and sat up straight. For a minute Dr. Perceval thought the boy might hit him.

“Would you like to talk to your lawyer about this? Would that help?”

The boy hissed and glowered at him. “ I already did. Just do it, lets get it over with.”

“ How are they treating you in here?”

“What do you think? It’s a prison. Full of low lives that play with half a deck.”

“Is the food ok?”

“Shitty burgers almost every day”

“ Are you able to keep your weight up?”

“How should I know.”

The doctor persisted asking the usual warm up questions, remaining calm, respectful and interested. The responses remained hissing missiles. After one whole hour, no change in tone or content. To get to any honest account of the crimes in question seemed impossible. A guard entered without knocking.

“Hey, doc, he is up for chow. Can you take a break?”

“Yes, of course.” It would give him time to think and plan. Call the lawyer? No reason to think the boy trusted him any more than a psychiatrist. The guard took the boy down to the mess hall. Then he returned.

“The boy’s mother is downstairs and wants to talk to you.”

“I see. I was not planning on seeing her.....”

“Ok, I just tell her.....”

“No, hang on.” Here was a possible opening. “Where can I talk to her?”

“You can go in the visitor’s area and talk there.”

“Is there an interview room?”

“No, but there are chairs.”

Well this is crazy, John Perceval thought, talking to this woman in a visiting hall, surrounded by other visitors, within ear shot of all the guards. But perhaps better than nothing.

They wound their way through the corridors and locked gates, back to where he originally had started from.

The guard pointed at a woman who sat sideways to him. She wore a dark dress with little white flowers printed on it, covered by a white vest, open in the front. Around her neck, a thin necklace with a tiny hard to make out stone. She had long hair, dyed black with grey roots. The features of her face were a combination of wrinkles and saggy skin. She was overweight, her feet stuck in uncomfortably worn high heels. Her make up reached unevenly around her jaw, creating a strong contrast to her white skinned, baggy neck. Both hands were folded in her lap, looking lumpy and thick skinned, but there was an elaborate two tone fingernail job on her ten digits. As he moved closer, the woman turned toward him. It was hard to make out her eyes behind her large glasses, but the doctor noted that her eye lids drooped, and there was an uneven application of eye liner on them. She looked worn, he thought, remembering that by her birthdate she was in her late thirties. She looked more like 50. She got up and came over immediately, with a brisk step, ignoring his out stretched hand.

“You must be the doctor. I have to tell you that because of your talking to him, he now missed chow and has to eat cold food. They won’t heat it up for him. And the other day he said he had a real bad stomachache from eating cold food.”

“I am sorry, I was unaware of that. I think he is in the mess hall now, he getting his food and I hope it is still warm.”

After he got his introductory sentences in, cutting through the monotonous drone of her voice, oozing in a colorless stream out of her downturned mouth, he suggested moving over to a corner of the hall, out of the earshot of the other visitors. Keeping his voice low, he began asking

some questions about the events, which she answered in her monotonous drone at full volume, almost as if she wanted everybody in the hall to bear witness to her trials and tribulations. Her poor judgment made his questions shallow and not useful.

“ I am so sorry we do not have a more private setting, I asked for one, but there seems to be no room for us. Maybe if we keep our voices down, other people won’t hear?”

“ I have nothing to hide. My boy is innocent, you will see. He shot the dad in self defense, and I was hit by one of them strays, he wasn’t aiming at me. I will get him out of this mess, that is my job, and no lawyers and no doctors are gonna stop me.”

Her resolve rang thin. After about twenty minutes he realized that he would not get very far. Neither the woman nor the setting allowed for getting useful information. He thought ‘How sad. She thinks I am the enemy, along with his lawyer. All to show she is the mother that she has not been.’

“I have one last request: Could you please encourage the boy to speak with me, I probably can help him help himself.”

The mother looked disgusted. “ He is a stubborn mule. Very strong willed, impossible sometimes. But he has never needed no help, especially not from a psychiatrist, he is not crazy.”

Resuming his interview with the boy, the doctor mentioned the meeting with mother. “She was very concerned that you get warm food, and that I not interfere with that when I talk to you.”

Chow had not improved the boy’s mood. He hissed the way he had before. “ What’d I tell ya, she is not the brightest light out there.”

“But it sounds like she will testify on your behalf and say you shot your step-father in self defense, and she was hit by a stray bullet.”

The boy’s face closed again, his eyes turning to slits. “Well that’s the way it was, she ain’t lying. I knew she’d come through for me.”

John Perceval felt the bottomless rage in the boy’s icy voice. Was there any twinge of compassion for his mother? She had lost a husband, and was in danger of losing a son. Was there any way to get through this rage? Or would hell have to freeze over?

“In a few days, you will be in court. I am not sure what your lawyer has in mind, we are working on that. But let’s assume they will call you up onto the stand, and ask you what your punishment should be? What would you say?”

“Punishment for what?”

“You shot and killed a man, the husband of your mother.”

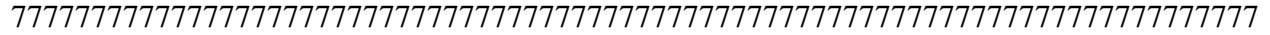
The boy lunged forward. “Why does everyone always keep talking about that? What about what he did to me? And she, the stupid ass, let it go on and on and on, did nothing. What about me?” He slumped back. For a moment John Perceval thought the boy might start crying. He did not. He just yanked his shackles so the table shook.

“I understand. But I am asking you to slip into your mom’s mind. She has lost a husband, she is in danger of losing you.....”

The boy turned bright red in rage. “Mr. Marine beat the crap outta her and me. So good riddance. That’s what I’ll say”.

“ I hope you won’t say just that. Say something about how you could be helped, what would you need people to do?”

“Leave us alone. We can take care of ourselves. Always have. ”



The defense rested. Now it was in the hands of the jury. It took them less than 4 hours to hand down the verdict.

When he had testified on the stand, John Perceval had looked over the members of the jury, one by one. More women than men, all ages. All ethnicities. All except one showed no signs of following his discussion of the case. As he explained that the type of abuse suffered at the hands of the stepfather would leave indelible traces on the brain, leading to rapid fire emotions, quickly spreading into parts of the brain which housed extreme defensive responses, such as hotly charged aggression, especially when overwhelmed by threat, he saw many of the eyes of the jurors glaze over. In the cross-examination, the prosecutor, a stout woman with a very aggressive manner, who had obviously studied his scientific writings, pressed him on the issue.

“ But doctor, how can you be so sure that this is what happened here? Yes, the defendant and his mother certainly portray it that way, but by your own admission, there are several details of the case that don’t quite fit – his resting heart rate being low, his callous-unemotional score being high, what do you make of that?”

“ You are correct, he had replied, “this is more indicative of the emotionally cold aggression, the planned instrumental type found in all of us.”

“ Yes doctor, but in some people it takes over, is it not true? Let me remind you that you reported on this yourself, repeatedly.”

She was of course right. He had found fewer indicators of hot emotional aggression in this boy, and many more of cold calculating aggression. His moniker of “Predator” was probably well chosen. It bothered him, but in the balance, he still believed that this boy had acted in hot, not cold blood. He should at least get irresistible impulse.

“ And,” the prosecutor continued, “by your own reports, it is much less clear that this form of aggression can be treated successfully, so would it not be much more prudent to keep this perpetrator behind lock and key, keep society safe from him and his cold rage, his lust for revenge? And I also want to remind the jury that the defense has failed to show that this boy was not involved in the shooting at Saint Mathew’s High School. He was after all, the best and maybe only friend of the first shooter, who called him “ brother” on his website. The accused’s whereabouts on that morning are unaccounted for. By his own report, and his mother’s testimony, he was sick at home, but alone. When the parents returned to the home, they found it ransacked like after a burglary, and when the step-father, an upstanding citizen and marine, someone who put his life on the line for God and Country, went upstairs to investigate, the shooting occurred in which stepfather was killed and the mother was injured. Now, mother says the shots came from stepdad’s gun, pistol whipping the boy, and she was hit by a stray. But could this not be a trap, the act of a cold calculating mind, a monster, seething with rage, who was going to take the law into his own hands and settle the account once and for all? A cold, calculating, callous mind who will not hesitate to do this again if you cross him in any way ?”

The woman made him angry. His anger at her lack of compassion and empathy for this boy made his answers dry up and become very short, stylized, ineffective. The jury looked at the prosecutor with fear and disgust, but that seemed directed at the accused, not her tirade. He was

John Perceval took a deep breath. Where did his own righteous posturing come from in this case? Was his own disgust perhaps rooted in some doubts, was he arguing so vociferously with NRA straw men because he was not entirely satisfied with how this case had gone? He could not completely disagree with the prosecutor, as annoying and hardened as she seemed? She had lost the case anyway, well mostly. The boy was tried as a juvenile, he received the maximum sentence in a juvenile facility in the state, 7 years, after which he would be released, his record expunged, making it possible for him to start an entirely new life. The juvenile facility he was being sent to was equipped to – at least in principle – handle his trauma related psychopathology. John Perceval had little confidence that they would be able to follow his recommendations.

What still upset him was that he was unable to elicit the core symptoms of psychiatric trauma in this boy. He had attributed this to the setting, which made a really good interview impossible. In retrospect, he began having a strange fantasy: this young man was sitting in an ice cave, deeply buried among freezing stalactites. As one approached him, the chill became overwhelming. He tried extending his hand into the cave toward the youth, but as he did, a stalactite broke off and sliced his arm right off. Yes, there were those low pulse rates, at rest and after challenge.

As he did often after a long case like this, he went to walk on the beach. He needed time to get the disturbing images and thoughts out of his head. Right after the interviews in jail, he had noticed nightmares. One night, he woke, drenched in sweat, after the stepfather had appeared and threatened to make the doctor pay for coming to the boy's defense.

Pescadero beach was almost deserted. Up at the North end there was man and a dog, barely visible, heading away from him. Soon they would disappear. Out at sea, some very dark clouds obscured the horizon. The waves were powerful, crashing into the sand and gurgling back over the mollusk encrusted rocks, covered with sharp ridges and barely clinging on algae. The sea was grey and white. The smell of iodine and decaying organic matter was pungent. The foam rising from the crashing waves sprayed moisture on his skin, warning him that he was too close. He, like so many others, could get knocked into the ice cold water, carried off by the ever present rip tides toward the open sea, into a deep wet grave.

John Perceval backed off and walked south, away from the only other person on the beach, towards the Pigeon Point light house. This case had been a struggle, more than many others. It made a difference if he was wrong. Predator - was he even capable of owning up to his role? Let alone develop insight into why he did what he did? Was not every ounce of empathy and capability for human kindness beaten out of him? Could he ever trust another human being, an authority figure? He would need to do that, if there was any hope for him. Only in the context of a long term relationship could he start exploring what had happened, his role in it. No medication could ever by itself fix the damage that had been done. And then of course all the institutional obstacles: the dehumanizing experiences at the hand of guards and other kids in the system; the lack of what was needed; the grim reality of a mother who almost never was able to deliver what was needed, except when it reinforced whatever sense of entitlement he had.

At age 25, this young man would be released into his community, with bad follow up, by a parole agent with 400 cases, most of them worse off than him. Maybe he would graduate from

high school, maybe even go to community college. The ultimate test: would John Perceval allow this boy to date his daughter? - It did not take long for him to answer.

As he turned the corner toward Pigeon Point, the sea's roar had gotten more silent. But fog was moving in. He looked in the direction of the lighthouse. In the fog, there was a faint golden glow, repeating itself in the rhythm of the turning light.

It was getting late. Time to go home.