

CRAZY UNTIL PROVEN SANE

**By
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PART I THE PSYCHOSIS August 2, 2003 – August 8, 2003

Background

I'm a 51-year-old married mother of four living in Houston Texas. For the last six years I have worked part-time as a substitute teacher, an educational consultant for a children's museum, an acting teacher, a tutor, a standardized test scorer, and a college psychology instructor. I've worked at many of these part-time jobs concurrently. I've been an active volunteer for decades. Most recently I've done publicity work, served on a board, and acted for local community theatres. I've also done a lot of volunteer church work. Last year I was elected vice president of the board of directors of my church, and it was expected that I would be elected president of the board this year. For most of my adult life the majority of my colleagues, friends, and family members have characterized me as an intelligent, creative, warm, well-balanced, and stable person. Prior to August 8, 2003, I had no psychiatric history.

Precipitating Events

We'd had a very disastrous financial period the year before. My husband hadn't had work that paid for that entire year and my numerous part-time jobs had only allowed us to squeak by. In March my husband had cancelled our COBRA health insurance because we couldn't afford the payments. In May he accepted a consulting job that paid quite well and things were beginning to look up. My work follows a school-year calendar. I had accepted a college teaching job that would begin in two weeks and had two other jobs lined up to begin in September.

It had been a busy summer vacation. During July I'd been really upset about a church-related problem. Some friends and fellow board members didn't agree with the way that I was handling the problem and this had caused me some anxiety and sleep problems. I didn't think that doing what people had suggested I do would be in the best interest of the church, so I was holding my own counsel and trying my best to act ethically. Although I was confident that the problem would be resolved over time, the fact that it was happening when the next set of events occurred probably made me more vulnerable to their effects.

Between July 28 and August 8, 2003, I dealt with a great deal of unusual and severe stress and sleep deprivation. During that 12-day period I experienced:

- Persistent phone harassment consisting of daily phone calls with from ten to thirty non-verbal messages left on my answering machine each day. (My phone answering system will only record a message if the caller stays on the line through the recorded message and waits until after the beep to hang up.)
- Computer hacking and hijacking including the uploading of my own personal computer files and downloading of unwanted files while I was working on the internet, and numerous other internet and system problems.
- A family medical emergency, when my daughter suffered a concussion. I stayed with her for hours in the emergency room and then stayed up all night to monitor her condition.
- Marital and family problems that included my husband's objecting to my having spent money for our daughter's medical care; his refusal to let me find someone qualified to diagnose,

identify, and securely delete computer hijacking files; his insistence on finding malware files himself and deleting them without saving a record or allowing me to write down the names and properties of the files; and his adamant intention to pay bills on line before the problem was solved. Both he and our older daughter also frequently erased the phone messages I was counting – he, because he said I was “obsessing,” and she, because the flashing numbers on the machine annoyed her.

- Severe sleep loss that started on July 31 when my daughter had her accident. After that, even though I was exhausted and knew I had to sleep, I was unable to get to sleep easily and unable to stay asleep if I did doze.

The Episode

On August 2, after several days of very little sleep and two days of no sleep at all, I began to exhibit symptoms of a thought disorder. My fears and worries about the phone and computer problems progressed to hyper-vigilance. I started to believe that whoever was harassing me might become a physical threat. I worried obsessively about my marriage, the security of my home, and about whether or not financial records stored in the computer and financial transactions executed on the computer could be read and used by a hacker.

I thought I might know the person who could have been responsible – someone who was known to have hacked into a secure computer database before. I was worried about myself and called a couple of friends to check on their impressions of my thinking and I sent an email to a minister telling her about my suspicions and asking her to let me know if she thought I was nuts. Immediately after I sent the email my computer crashed and I got three empty phone messages in succession. This didn't help my state of mind or my sleep. My primary symptoms at this time were extreme anxiety and fear and severe insomnia.

The next day I was to do the “ Welcoming and Announcements ” at church. Instead, I welcomed the congregation and then told them about what had been happening to me and excused myself from the service to go home and go to sleep. Unfortunately, I still couldn't sleep.

Over the course of the next few days, as I continued to be unable to sleep, I became increasingly confused and disoriented; my speech and behavior got progressively more disorganized; my emotions became very unstable; and I had paranoid delusions. I kept thinking and saying that if I could only sleep I might be okay. I begged my family to leave me alone to sleep and recuperate for a couple of days.

Because our 25-year-old son had a manic episode in 1997, my family members equated all psychotic symptoms with bipolar disorder and they decided that that was what was wrong with me. As a consequence, they ignored my pleas that I be left alone. Instead, they insisted on “helping” me. On August 6, they called Houston CIT to come to my home and evaluate me – I did not meet criteria for emergency protective custody.

On August 7, they had one of my friends come to the house to tell me that her computer had also been hijacked and that the FBI had called her and asked her to take me to Ben Taub Hospital in Houston for a psychiatric evaluation. She told me that the FBI wanted to see if I could be a credible witness when they prosecuted the hacker. I not only believed her; I was tremendously relieved and elated. Although my behavior at the hospital was decidedly weird, again I didn't meet any of the criteria for involuntary commitment.

When the person interviewing me at Ben Taub made it clear that my friend and family members had lied to me so that I would be evaluated for involuntary hospitalization, I was incensed. After

they let me go, my husband left me at the side of the hospital parking lot in the middle of the night in downtown Houston for 45 minutes while he looked for the car -- he'd forgotten where he'd parked it. When he did pull up I debated whether I should ride with him or call a cab to pick me up. I decided to ride in the car in the back seat and maybe lie down and try to get some sleep. He started yelling at me the moment I entered the car.

By this time, I was desperate for sleep. I begged him to be quiet and he refused. He told me that he was going to keep talking until I agreed with him that I was nuts and that I needed to appreciate what my family was trying to do for me. I told him that if he didn't think he could be quiet for the half-hour ride home, I would get out of the car and call a cab. He continued to shout. We were just leaving the hospital parking lot at this time and moving very slowly. I asked him to stop the car and he refused. I opened the back door of the car and he sped up. I gave up and closed the door. This incident was to constitute my "suicide attempt," and would be used the next day to provide clear and convincing evidence of my danger to myself.

When we arrived at home he continued to berate me. I told him, "If have to stay in this house and listen to you for one more minute, I don't know what I'm going to do." He said, "What do you think you'd do?" I said, "I'd probably feel like I wanted to kill you!" Then, since he was between me and my shoes and purse, I ran out the front door with neither and walked to a friend's house a mile away. These words were to constitute my "homicide" threat and would be used the next day to provide clear and convincing evidence of my danger to others.

I arrived at my friend's house between 1:00 and 2:00 a.m. on August 8 and she woke up, let me in, and went back to bed. I was able to doze for about an hour on her couch. The next morning when she woke up, I scared the heck out of her. I don't remember all I said and did, but it involved a lot of pacing in her back yard, crying, laughing, cussing, and talking. I think I accused my husband of trying to make me crazy, expounded on religion in bizarre ways, suggested that I'd been randomly selected to be a Unitarian Universalist saint, did some kind of a role play of a person with autism and someone overwhelming her (where I played both parts), and heaven knows what else.

My friend gave me coffee, shared her cigarettes with me, gave me a toothbrush, lent me \$5 and a pair of shoes, and gave me the address of her friend across the street, who I somehow "knew" was destined to save me. I'd met this neighbor years ago when her son and mine were school friends. Her husband, at that time, was an FBI agent. I was sure that she would help me spiritually and that he would deal with the bad-guy/hackers that were by then, I was certain, trying to kill me.

My friend then locked her house and left, but she gave me permission to stay in her back yard with her dog until I felt together enough to leave. I don't know how long I wandered around her small back yard alternately pacing, lying down on a sleeping bag that I'd brought out from the house, and then jumping up to act like I was "training" the dog in order to fool the bad guys who, by now, were flying airplanes and helicopters over the backyard with the intent of murdering me. I also talked to the good guys who were, I was sure, keeping me under surveillance and trying to figure out how to help me.

Suddenly, my friend the homeowner, two other friends from my church, and my husband showed up in the backyard. I remember telling them I was very busy and that I needed them to go away. I think I drew their attention to the planes and helicopters overhead. (We live close to Ellington Airforce Base, and I don't know if I hallucinated the flying machines or if that day was a particularly busy day for air traffic at Ellington.) I told them that we were obviously all in danger.

When they wouldn't leave I told them I would have to go. I walked across the street to the home of my "saviors."

Although my friend had refused to allow me to take her dog with me, the dog had other ideas and followed me across the street. I rang the doorbell of a home I'd never visited before and when no one answered I knocked. Somehow I "knew" that I needed to open the door. It wasn't locked and I walked in calling the homeowner's name, with my friend's dog following me. Two large dogs were lying on furniture next to the sliding glass doors to the backyard. They just looked at the other dog and me and stayed where they were. The dog and I went straight through the house and out into the backyard.

I wandered around the backyard talking to myself and to the dog for some time, occasionally diving into the bushes when I heard or saw a plane or helicopter overhead. At some point I went into the house, heated up some leftover pizza in the microwave, put a towel from the washer into the dryer in preparation for a shower, and found some clean clothes to "borrow" from the homeowner's bureau. (In fact, I didn't do a bad imitation of a nutty Goldilocks.) My friend from across the street came over while I was inside and I gave her back her dog. She wanted to talk to me but I desperately urged her to go back home where she might be "safe." Then I closed and locked the front door in her face.

Later, as I walked downstairs to get the towel, I noticed that the dogs were gone. I think I called out, "Dogs?" Then I said something like, "Oh-oh. Something's really wrong." The woman I'd come to visit answered me. She identified herself, told me my husband was in the backyard with a policeman, and offered me her downstairs bathroom. I went in there and locked the door and my husband came to the door and tried to get me to come out. I think I started quoting the Constitution and singing patriotic songs, but I'm not sure. Then the homeowner told me my "lawyer" was there. She gave me her husband's first name and said the man said he lived there and that he was my lawyer. I came out and my "lawyer" told me to go with my husband to Ben Taub Neuropsychiatric Center. I agreed to do that.

By the time my husband and I arrived at Ben Taub, I couldn't keep my mind focused on anything. I alternated between knowing I was at a hospital and believing that the hospital was a large movie set filled with actors. I was occasionally certain, when I knew I was in the hospital, that the staff would see how crazy my husband was and would keep him there. Sounds were very intense for me and bright light was painful. Several times in the waiting room, I crawled under a row of chairs to block out distressful stimuli.

The main thing I remember about the five- or ten- minute "examination" that followed is that there was a group of people who wouldn't leave me alone and who chased me from room to room in a brightly lit place until they finally knocked me down and injected me with something. My last memory is of saying (or thinking), "This really sucks, but if I get to sleep I'll probably want to kiss you when it's all over." I have no clear memory of anything else that happened for the next three days.

I regained full consciousness some time during the third day after I was transported from Ben Taub to the Harris County Psychiatric Center (HCPC). When I became aware, I had a fuzzy recollection of occasionally having accepted medications from a nurse at Ben Taub -- little pills that dissolved in my mouth and tasted slightly bitter and sweet. I also had vague memories from the day after I was admitted to HCPC of having talked to a psychiatrist and of having to sit down on the ground to keep from falling when I went outside for a cigarette.

On my first clear day, August 12, I was served court papers and talked to a psychiatrist and to my court-appointed lawyer. My delusions were gone but I had been diagnosed with “Bipolar Disorder – Manic with Psychotic Features” with no rule-outs. I knew I was in a very bad situation. After I’d talked briefly to one of the psychiatrists, I was pretty sure that if I shared the content of my delusions from the previous week with her, I’d probably just get my diagnosis upgraded to schizophrenia.

At that point I naively trusted that I would be out of there within 72 hours. I was not a danger to myself or others and I was capable of caring for myself. I thought the law was pretty clear and that it would work for me. I guess I did still have delusions. I figured I’d keep the content of meetings with psychiatrists focused on the here-and-now and deal later, with a practitioner I had chosen, with what had happened to me.

I used to tell my general psychology college students about David Rosenhan’s 1973 experiment (Rosenhan, D.L. 1973. On Being Sane In Insane Places. *Science*, 179, 250-258, p. 469). I spent six weeks living it. The next section covers “Insane Places.”

PART II
THE HOSPITALS AND THE COURT
August 12, 2003- September 22, 2003

BEN TAUB MHMRA NEUROPSYCHIATRIC CENTER

I remember almost nothing about the day-and-a-half at Ben Taub after my forced injection. I don't remember any meals, any conversations, or any medical examinations. I think there was a bare mattress on the floor of an otherwise empty room where I spent most of my time sleeping. I think I got cold and someone gave me a pair of paper pajamas. I think I wandered around several times where I wasn't supposed to go and was redirected to the room with the mattress. I believe that I was offered some pills that were supposed to help me sleep, and that I accepted them. That's all I can recall.

“Certificate of Medical Examination”

A Dr. *Nalini Kibbles** signed the “Certificate of Medical Examination.” It says that the doctor diagnosed me with “Bipolar D/O with psychotic features. “ It states that based on the doctor's opinion I was:

- likely to cause serious harm to myself;
- likely to cause serious harm to others;
- suffering severe and abnormal mental, emotional, or physical distress
- experiencing substantial mental or physical deterioration in the ability to function independently, to provide for basic needs; including food, clothing, health or safety; and
- not able to make a rational and informed decision as to whether to submit to treatment.

The factual basis of the doctor's opinion is based on this evidence: “Pt. Brought in by husband. Pt. With disorganized behavior agitated, not sleeping, threatening to kill people, tried to jump off moving car, delusional.”

The doctor's opinion that I presented a substantial risk of serious harm to self or others is explained in this statement: “Pt. With disorganized behavior agitated, not sleeping, increased speech, threatening to kill people, tried to jump off moving car, delusional, feels people spying on her.”

Finally, emergency detention is considered by the doctor as the least restrictive means of protecting me because: “Pt. With poor insight and poor judgement.”

He/she apparently spoke only with my husband, since no one could have gotten any meaningful information from me at that time. “Disorganized behavior and agitation” were the only two symptoms on this page that Dr. *Kibbles** could have personally observed. All of the other information on the certificate, including the diagnosis, came from my husband (an engineer).

I don't think my husband necessarily made a mistake in taking me to the hospital on that day. He thought he knew what was wrong with me and what needed to happen to fix it. He thought, as an engineer, that the experts would apply the proper chemicals and I would be fixed. It's also true that my behavior was entirely unpredictable and I would probably have continued to run away from all of my family and friends in search of elusive sleep, which I might finally have found in a dangerous place.

* *Italics** = Name Changed

I don't fault the doctor at all for concluding that I had "poor judgement" and "poor insight" at the time of the evaluation. In truth, I had none of either at that time. I believe that the emergency detention was probably justified, regardless of the accuracy of the diagnosis.

I also don't fault the doctor for his/her decision to medicate me. Whatever was in the injection did allow me to get the sleep I desperately needed. I do think the dosage was a bit excessive, though. I was unconscious or semi-conscious for three days!

FROM ADMISSION TO HCPC THROUGH THE PROBABLE CAUSE HEARING

Psychiatric Evaluation

The first meeting with a psychiatrist that I can remember happened on August 12 -- the second day after I arrived at HCPC -- when I met with Dr. *Tusti Ganesh** for an "Initial Psychiatric Examination." Apparently, I'd also talked with Dr. *Sophia Doe** sometime during the first two days after my admission. I recognized Dr. *Doe** as someone I'd encountered before, but couldn't remember anything I'd told her.

The examination with Dr. *Ganesh** was a very frustrating experience. It started calmly and I answered her questions as completely as I could. I told her that I had never considered suicide or homicide and that I wanted to go home. She told me that I'd tried to jump from a moving car, had threatened to kill people, and currently believed that the FBI had been trying to contact me for two weeks. When I told her that none of those things were true and tried to explain the supposed suicide attempt and homicidal threat, she became very condescending.

The following is a representational sample of our interchanges during that meeting:

- **Dr. G:** You've said that the FBI has been trying to contact you for the last two weeks.
- **Me:** I don't remember having said that, and I don't believe that.
- **Dr. G:** Why would you have said that?
- **Me:** I don't know. I don't believe that the FBI is trying to contact me.
- **Dr. G:** But you think you're being spied on.
- **Me:** Someone's been stalking me on my phone and computer. That's not quite being spied on, but that did happen.
- **Dr. G:** What do you mean by stalking?
- **Me:** Calling and leaving empty messages on my answering machine. Once there were 30 messages in one day. Hacking into my computer files, putting weird files on my hard drive, and messing with my connection with my server. That stuff happened for over a week.
- **Dr. G:** Your husband said that didn't happen.
- **Me:** Good grief! He took some of those bad files off the computer himself. He experienced some of the computer problems. He heard the phone. Never mind. This is too complicated, and it's not relevant to whether or not I'm a danger to myself or others.
- **Dr. G:** You are very ill.

I knew that I wasn't suicidal, homicidal, or delusional at that time. I also knew I hadn't convinced the doctor that I wasn't delusional. I was fairly certain that she intended to fit all of my responses to her into her template of a person with bipolar disorder -- If I was annoyed, I was "agitated" and "irritable;" if I disagreed with her, I was "grandiose;" if I spoke with intensity in trying to get something important across, my speech would be seen as "pressured" or "racing," etc. She'd also made it clear that she meant to try to keep me in the hospital until I was "stabilized" on the medications she'd prescribed for me, and then she had refused to tell me the symptoms I was exhibiting that the medications were expected to ameliorate.

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I thought that the 72-hour period between emergency detention and a probable cause hearing was to be used for ongoing evaluation of the patient's likelihood of causing serious harm to her/himself or others if released. I thought that I could only be detained in a hospital if there was an imminent danger of my causing harm to myself and others at the time of the decision. The "Patient's Rights" booklet that the hospital gave me supported my beliefs about this.

I figured that I could hold out for a day and that I'd have to be released at the probable cause hearing the next day. Simply "having" a bipolar disorder or delusions about the FBI, even if I actually did have either or both, couldn't be considered dangerous. I looked forward to meeting with my lawyer, getting the probable cause hearing over with, and going home.

Pre-hearing Conference With Lawyer

I met with my court-appointed lawyer, *Mary Smith*,* on August 12, after I had read the court paperwork and had spoken with Dr. *Ganesh*.* My probable cause hearing was scheduled for the next morning. One of the first things the lawyer told me was that, in her experience, almost no one was ever released from HCPC at a probable cause hearing. This was not encouraging information.

I told her the truth about my "suicide attempt" and "homicide threat." I also explained what had happened with my phone and computer, since Dr. *Ganesh** had seemed determined to frame my report about that as evidence of current delusional thinking. I responded to her questions about my past actual delusions by telling her honestly that I did not believe that people were spying on me or that the FBI was involved with me in any way.

She told me that I'd probably be released sooner if I just took the medications that were ordered for me. I gave her the following reasons for choosing not to do so:

- I was not convinced that I actually had the condition I was diagnosed with, and I didn't want to take unnecessary medication.
- The medications have side effects that I wasn't interested in experiencing needlessly.
- If I took the medications, I suspected that hospital staff would be inclined to attribute all normal behaviors to their effects. That I "responded" to the medications would then become *de facto* evidence that I actually had the condition for which they were prescribed.

Ms. *Smith** took very detailed notes on what I told her. She asked pertinent questions and she checked with me on her understanding of the information I gave her. She treated me with respect. I felt assured that she would represent me well at the hearing. I was still concerned, though, with what the psychiatrist might say.

Interactions With Staff and Letter of Protest

I had been trained in clinical psychology, had a son who'd been diagnosed with bipolar disorder seven years before, and had taught college psychology courses. I was reasonably familiar with the symptoms required by the DSM for a diagnosis of mania, but I couldn't quote them verbatim. I thought it might be helpful for my lawyer to have the specific wording of the criteria at the hearing the next day.

My reasoning was that dangerously psychotic persons are not supposed to be able to control their symptoms – that's presumably why the state feels a need to "protect" them. If I acted as I intended to and sat quietly and composedly through the hearing, answered questions calmly, and stayed focused on the issue of danger to self or others, my behavior itself should refute any assertions by the psychiatrists that I was so severely impaired that I couldn't take care of myself.

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I went to the nursing desk and asked to see a copy of the DSM. The nurse at the desk simply said, "No. You can't look at that. That's not for patients to see." This really surprised and dismayed me. I thought that patients had the right to be fully informed about their diagnoses. I wondered who was supposed to benefit from my not being allowed to look at this information.

I immediately wrote a letter of protest. Then I asked a staff member to witness it for me, make me a copy, and to place the original in my chart. A nurse did do these things for me. I had started to have some real trepidation about the next day's hearing. My trepidation turned out to be very justified, but not for any reasons that I could have imagined.

The Probable Cause Hearing

The probable cause hearing took place on the morning of August 13, 2003, with Justice of the Peace *Kara Kellman Kane** presiding. I was there with my lawyer, Ms. *Smith*.* Although neither my husband nor Dr. *Ganesh** were present, there were a number of other people in the courtroom.

I needn't have worried about any effects Dr. *Ganesh's** testimony might have had on the disposition of my case. The state had built its case entirely on the medical examination of Dr. *Nalini Kibbles** and on my husband's testimony. Dr. *Kibbles** had "evaluated" me on August 8 for five to ten minutes from behind a glass window in a nursing station and then had had me chemically restrained for three days. My husband, by my choice, also hadn't had any contact with me for the previous five days.

I listened quietly as the state presented "evidence" that I was mentally ill with "bipolar disorder – manic phase – with psychotic features;" that I had attempted to commit suicide by trying to jump out of a moving car; that I had threatened to kill people; that I was delusional; and that I was so incapacitated by my mental illness that I wouldn't have been able to take care of my basic needs if I were released.

Then it was my lawyer's turn to speak. As she began to present information on my behalf, a cell phone rang in the courtroom. I thought that the judge would probably respond negatively to this, so I turned my attention from my lawyer to Judge *Kellman Kane** to see what she was going to do. I watched her reach down next to her chair, take a cell phone from her purse, and begin to talk on it.

As the judge engaged in a private telephone conversation, my lawyer continued to read aloud from her papers, and everyone else in the courtroom continued to behave as though nothing unusual was happening. After about a minute, I tapped my still-talking lawyer on the shoulder, indicated Judge *Kellman Kane**, and whispered, "Isn't that the judge?" She nodded 'yes' and stopped reading aloud. Everyone in the courtroom waited silently until the judge finished her phone conversation.

Judge *Kellman Kane** put her phone away, smiled and shrugged, and then said something about "the office." My lawyer briefly recapped what she'd said earlier while Judge *Kellman Kane** appeared to be studying some papers in front of her.

After Ms. *Smith** finished talking, Judge *Kellman Kane** referred to the papers she'd been reading, looked at me, and stated that I had neglected my children. Apparently she'd been reading my husband's sworn affidavit requesting mental health service for me (Attachment A, p. iii). He'd written, "Wouldn't let her minor children into their (her) home for two days."

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I wanted to respond to this but I certainly didn't know the rules in this particular courtroom. I tentatively asked if I could say something. At this point in the "proceedings," I don't think I would have been too surprised if everyone in the room except my lawyer had said in chorus, "Of course you can't; you're looney tunes." That didn't happen, though. Instead, no one said anything. Finally, my lawyer nodded in the affirmative.

I said something like this, "Nothing is more important to me than my family. I would never have neglected my children. I had been under a lot of stress and I did ask my 13- and 16-year-old daughters to stay with their older brother and his wife for a couple of days so I could rest. Their brother, who is 32, lives a few blocks from us. I also told them that if they really needed me I would be there for them. In fact, my younger daughter did come home and stayed with me for most of one of those days. She even cooked her first omelet for me. I did not neglect my children."

Judge *Kellman Kane** then said something I didn't hear and everyone in the courtroom started gathering their belongings in preparation for leaving. I asked Ms. *Smith** if this meant that I would have to stay in the hospital and she said, "yes." I was escorted back to the locked unit. My hearing for "Court-Ordered Mental Health Services" was scheduled for August 22.

FROM ESTABLISHMENT OF PROBABLE CAUSE THROUGH THE HEARING DATE

Request for Re-Examination and Response of the Patient Relations Department

While I waited in captivity for what I hoped would be a real hearing and not the travesty I'd just endured, I pored over the "Patient's Rights" booklet the hospital had given me. I noted that involuntary patients had the right to request a psychiatric re-examination specifically to evaluate whether or not they continued to meet the criteria for involuntary hospitalization. From what I understood from the booklet, I needed to make this request in writing and I would have to be evaluated within 24 hours.

On the morning of August 15, I wrote a request for re-examination and asked that I be given a copy and that the original be placed in my chart. The unit copying machine stopped working after one page, so I only received a copy of the first page of my request. On the second page I asked for specific documentation with clear and convincing evidence based on my current functioning, of whether or not:

- 1) Because of mental illness there was a substantial imminent risk of my causing serious harm to myself or to others unless I was restrained; or
- 2) There was any current evidence of such severe emotional distress and deterioration in my mental condition to the extent that it would be dangerous for me to be at liberty.

When I next saw Dr *Ganesh** I told her about my request and that I understood that she was required to examine me and to respond in writing within 24 hours. (I may have been wrong about the response-time. I threw the booklet away.) Dr. *Ganesh** just smiled and said, "No." Then I called the hospital's Patient Relations Department and left a message that I needed to talk with someone.

I never had an official interview with a representative of the Patient Relations Department. No one ever contacted me, identified him/herself as being from that department and asked me if I wanted to file a formal complaint.

HCPC is both a teaching hospital and a research facility, so there were a lot of people carrying clipboards asking me intrusive, personal questions. One of them might have been from the

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Patient Relations Department. The day after I called the department, a man dressed in a very distinctive and unusual suit and bow tie came to talk with me. He may have told me his name, but he didn't tell me his function.

When I started to sit down at a table in the common room to find out who he was and what he wanted, he motioned for me to remain standing. He asked me what had been going on in the hospital. I told him that I wasn't suicidal or homicidal or so incapacitated that I was unable to care for myself, and that I wanted to go home. I told everyone that.

I told him about the "Cell Phone Judge" at the probable cause hearing and asked if I could expect better at the next hearing on August 22. He said I could. I also told him about the two things I had written and asked him if anyone at the hospital would address my concerns. I think he said, "Hmmm," but he didn't ask to see the papers.

Finally, I asked if the court would consider the staff's daily charting in my medical records, which would contain no evidence of either potential dangerousness or disorganized behavior. He said that the court would consider this material if I asked that it be considered. After my recent experiences with the court, I didn't believe him.

As I said, the man in the suit might or might not have been from the Patient Relations Department. If he was, he didn't do much for me. If he wasn't, the Patient Relations Department didn't respond to my phone call at all.

Waiting For a Hearing

Life on a locked psychiatric unit is both demeaning and boring. I spent my time on the unit meeting with Dr. *Ganesh*,* meeting with my lawyer, attending therapy groups, chatting with and playing board games with other patients, watching television, smoking cigarettes three times a day, and waiting to get out. I refused to accept phone calls and chose to accept only one visitor during this time -- a minister from my church.

The lack of privacy was excruciating. On August 18 my two girls started the new school year. For the 27 years that I had had children in school, I had always taken them on a shopping trip the week before school started and had snapped their pictures on the way out the door on their first day. This year I couldn't do that. That night I wakened at 3:00 a.m., went into a shower stall so I wouldn't disturb anyone, and cried. A staff member came to the door and told me to stop crying. I suppose I'm fortunate that she didn't just walk in. There are no locks on bathroom doors.

My physical health also suffered from this massive curtailment of liberty and privacy. I've had occasional cluster back spasms for the past 25 years. They occur once or twice a year and last for from 12 to 36 hours. I've always self-treated with meditation, gentle stretching, counter-pressure (often rolling on a hard floor), frequent hot showers, and sometimes with several capsules of the herb kava-kava.

These spasms usually occur when I'm under stress, so it's not too surprising that I experienced one during my involuntary hospital stay. A locked psychiatric unit was not conducive to my usual strategies for alleviating my pain. Dr. *Ganesh** was happy to prescribe a muscle relaxant for me. Even with the aid of modern medicine, this episode of back spasms was the longest one I'd ever experienced. It lasted for five full days.

* *Italics** = Name Changed

Daily weekday meetings with Dr. *Ganesh** didn't usually last long. I would tell her that I wasn't suicidal or homicidal or so incapacitated that I was unable to care for myself, and that I wanted to go home. She would tell me that I was very ill with bipolar disorder and that I needed to take my medication. I would tell her that we obviously didn't have much to say to one another and the meeting would be over.

One meeting lasted a little bit longer. I realized from something that the doctor said that she and my husband had been discussing strategies for coercing me into taking medication. I accused her of violating my right to privacy and she showed me a form I'd signed that gave my husband the right to be informed of and to participate in my treatment. Apparently I'd signed this form while still under the influence of the drugs I'd been given at Ben Taub. I wrote a retraction of that permission, had it witnessed, and had it placed in my chart.

Several days after the probable cause hearing, Ms. *Smith** met with me to tell me that Dr. *Ganesh** was filing a request for an Order to Administer Psychoactive Medication. In this meeting Ms. *Smith** recommended that I be examined by another psychiatrist. I didn't know any psychiatrists, so I accepted her suggestion that Dr. *Naomi Spitzer** be brought in to examine me. Ms. *Smith** said that she'd known Dr. *Spitzer** for years and that she often did this kind of work for HCPC. It didn't occur to me to ask whether or not she'd ever made a diagnosis that differed from the one that HCPC's doctors made or if she'd ever recommended the release of a patient. It didn't matter anyway. Dr. *Spitzer** did not come to examine me before August 22.

Three times a day patients were issued their own cigarettes, lined up, counted several times, and escorted to an enclosed and guarded outside area to smoke for 15- to 45-minute periods. During those periods I made a game of trying to give away as many as I could of the cigarettes my husband had deigned to provide for me. When he decided to try and coerce me into accepting medication by refusing to provide me with cigarettes, I'd built up enough good karma to be the recipient of other patients' generosity.

On one of these breaks, I mentioned the "Cell Phone Judge" to another patient. His response was "Oh, that one. She does that all the time to make us so mad that we'll act crazy." Another patient agreed with him. Apparently I was not the only person to have experienced this unique interpretation of due process.

Court Day

On the morning of August 22, I dressed in the best clothes I had with me and waited to be called to court. According to the paperwork I'd received on August 12, my "Hearing for Court-Ordered Mental Health Services" was scheduled for 8:30 a.m. I believe that earlier in the week, on my lawyer's recommendation, I'd signed a paper allowing the "Hearing for an Order to Administer Psychoactive Medication" to take place at the same time.

At around 9:00 a.m. that morning, I received a copy of court papers informing me of the hearing for an Order to Administer Psychoactive Medication, which had been scheduled for 8:30 a.m. that day. Part of that paperwork was Dr. *Ganesh*'s* "Petition for an Order to Administer Psychoactive Medication." She had signed, dated, and had it notarized on August 13. She was apparently confident that I would be court-ordered for inpatient mental health services on August 22, since in the document that she wrote on August 13, she stated that I was subject to an order dated August 22.

In her petition, Dr. *Ganesh*' had changed my diagnosis to "Bipolar Disorder – Mixed," and declared that I was incapable of making decisions about medication because I was "illogical,

* *Italics** = Name Changed

grandiose, paranoid, and delusional.” She also asserted that I would need to ingest “antidepressants, antipsychotics, anxiolytics/sedatives/hypnotics, and mood stabilizers” for a “fair” prognosis and that my prognosis without these drugs would be “further decompensation.” She further indicated that she had considered no alternative to psychoactive medication.

Late in the morning, Ms. *Smith** met with me and told me that the court was concerned that I had never been examined by Dr. *Spitzer*,* and that the judge was considering letting me out on furlough and postponing the hearing until after I had met with Dr. *Spitzer** outside of the hospital. After meeting with Ms. *Smith*,* I was summoned to meet with *Ganesh*.* She told me that she needed information from my husband about my functioning before she could make a recommendation to the court. I agreed to meet with my husband and I signed a document allowing the treatment team to talk with him about me.

The first thing my husband said to me when we met was that I needed to take medication. I told him I wouldn’t discuss that with him. Then he said that the hardest thing he’d ever done in his life was to put me in the hospital. I told him that I had a little difficulty in drumming up sympathy for his pain, and that the hardest thing I might have to do in my life would be to divorce him. He said he intended to ask the court for a continuance so that I’d be forced to take medication. I told him I certainly couldn’t stop him from asking the court for anything and I terminated our meeting.

After he left, there were a couple of hours of business as usual at the hospital. In the early afternoon, my lawyer returned to tell me that the court had decided to let me leave on furlough and had postponed both hearings until the next Friday morning at 8:30 a.m. Ms. *Smith** told me that she would arrange an appointment with Dr. *Spitzer** during the next week, and asked me to call her on Monday. I said I would do that. Then I told her that if my husband was verbally abusive to me when I got home I wanted to go to a motel to get away from him. I asked her if that would be all right and she told me that it would.

I waited another hour or so for paperwork to be completed. I fully expected that I would be served court papers with the specified conditions of the furlough and a notice of the hearing to take place on Friday, August 29. I received nothing from the court. The two documents I was discharged with were a “Social Service Aftercare” form and a “Discharge Instructions” form. According to the information on the Social Services form, the M.D. dismissed my commitment and aftercare was not applicable. The Discharge form stated that the court furloughed me. It recommended that I call a doctor or clinic if I had dangerous psychiatric symptoms and it did not specify any medical follow-up care.

Although I didn’t know it at the time, a “Discharge Summary” prepared by Dr. *Doe** and signed by both her and Dr. *Ganesh** documented that, upon my discharge on August 22, I demonstrated “an adequate sleep pattern and appetite, improved thought processing, less irritability, no threatening behaviors, no psychosis, and no suicidal or homicidal ideation.” Both doctors signed and dated this document on August 22, 2003.

After I’d signed the necessary hospital forms, the social worker told me that my husband and daughter-in-law were at a local restaurant and that they would be back soon to take me home. I said that I had no intention of riding anywhere with my husband. I cited a statement in the “Patients Rights” booklet that said that when I was released from involuntary detention I was entitled to transportation to my home. Surprisingly, the hospital agreed and I rode home in a cab.

* *Italics** = Name Changed

THE FURLOUGH

The First Weekend

All of my family members were convinced that I had bipolar disorder and needed medication. Doctors had confirmed their convictions. They had apparently decided to keep me under constant watch during my court-ordered furlough. I managed to get away for a short time on Saturday morning to buy school supplies with my younger daughter, since her father hadn't gotten them for her the previous week. I was also left alone in the bathroom for enough time to cut and color my hair. Other than for those two brief periods during my first weekend home, my privacy was as compromised as it had been in the hospital.

When, on Sunday evening, my husband started shouting at me about how crazy I was and about how desperately I needed medication, I told him that I was going to a motel where I intended to stay until I knew he'd gone to work on Monday. He said I wasn't allowed to do that because I was still committed and was just on furlough. I let him know that I'd talked to my court-appointed lawyer and had told her what I planned to do if he was verbally abusive, and that she had told me I had the right to do that.

Finally, he said that he wouldn't try to stop me from leaving, although he would only allow me to take the 16-year-old car that he usually preferred to drive. It had 170,000 miles on it and had no air conditioning. When I got in the car and opened my purse to get my keys, I noticed that my wallet was suspiciously thin. I opened it to find that my ATM card and my credit cards had been removed and that there was \$95 in the billfold section. I went back in the house and asked my husband if he knew what had happened to my cards. He said that of course he knew – he'd taken them so that I wouldn't spend all of our family's money.

I didn't think that his depriving me of access to our money was legal, so I called the local police station to ask. After the dispatcher had ascertained that there wasn't any physical abuse occurring or likely to occur, she said she'd send officers to the house to help resolve the situation. I waited outside next to the car for 45 minutes until two police officers arrived. One talked to me and one to my husband. They told me I could leave, but that, because Texas is a community property state, my property was also my husband's and he had the right to take it.

I left, stopped at a grocery store to buy dinner and milk, and found a hotel room for which I paid \$55 in cash. I decided to enjoy solitude and privacy that evening and decide what to do about my situation the next morning. I did appreciate my freedom that night. I slept for twelve straight hours. The next morning, I sat on the bed in the hotel room and looked at my options. Checkout time at the hotel was at 11:00 a.m. and I didn't have money for another night. My situation did not look good.

My husband is a brilliant scientist and engineer. I had been married to this man for almost 26 years – our wedding anniversary was in two days, August 27. Many times over those years, I'd observed his single-minded dedication and diligence in testing the hypotheses he espoused. I'd never been the focus of his experimental methods before; but this time I was. I had no doubt that he'd do whatever he felt he had to do to get medication into my body, toward the expected outcome of my becoming predictable to him again. I knew he'd be relentless in trying to control the experimental conditions. Until I was captured and under control, I didn't expect him to leave our house for any appreciable amount of time.

Providing for Basic Needs

* *Italics** = Name Changed

My first order of business that Monday morning was to inventory the resources I had. I carefully examined the contents of my purse and wallet to see what I was left with. I was in luck. Tucked behind my voter's registration in the back of my wallet was a Discover credit card I'd never used. I went to the hotel desk and used the credit card to book one more night at the hotel. The next thing on my agenda would be a visit to the bank.

At the bank I discovered that most of the money in our joint accounts had been removed. I asked for a new ATM card and was issued one, but I was also told that my husband could, at any time, call and report my card stolen and it would be immediately de-activated. So I took half of the money remaining in our joint accounts and opened a new account in my name. Then I withdrew cash from both accounts to insure I'd have some funds if my husband found a way to deprive me of access to those accounts and/or cancelled the credit card I was using. Then I went back to the hotel, asked to move to a suite, and extended my reservation through Thursday.

In the next couple of days I talked to a number of people and did some research at the library. I also slipped into my house a couple of times to quickly grab some essentials and to leave little presents and notes for my girls and my grandchildren. I missed them terribly. On Tuesday afternoon I left a note in my older daughter's bedroom asking her to call me and giving her the hotel phone number.

I met with a couple of friends on Monday and Tuesday. One was a retired psychiatrist and the other had used psychiatric services in the area. Both of them recommended different local psychiatrists that they believed were competent, conscientious, and thoughtful. Before I dealt with the psychiatric side of my problems, though, I wanted to find out where I stood legally.

Although I'd told Ms. *Smith** that I'd call her on Monday, I decided to explore some other legal options first. My court-appointed lawyer had obviously been doing her best for me but, judging from my one direct experience with her in the courtroom, she was apparently inured to the corruption in that system. She was too used to having her diligent work for her clients routinely ignored. I needed to find someone who would be as astounded as I was with what happened to people accused of mental illness in the Harris County Probate Court.

I called a lot of lawyers listed in the local phone book. After I'd briefly presented my situation, I was often told that the firm didn't handle that sort of case. A number of firms offered me appointments for initial consultations after a week or more. One woman I talked to had a very difficult time understanding how I could possibly have been let out of the hospital while still under an order for protected custody, and therefore, presumably, considered by the state to be an imminent danger to myself or others. She also couldn't understand how I could be required to present myself for a hearing on Friday when I hadn't been served notice. Those were some very good questions. I stopped calling lawyers and went to the library to research Texas law.

I'm no lawyer and legalese is not an easy language, but my research did provide me with some interesting information. It looked like Texas law required that the court present me with written notice of a hearing. They should have done so immediately upon setting the date for the hearing. They needed to try to deliver notice to me in person or by certified or registered mail or, if I couldn't be found, by leaving it with anyone over sixteen years of age at my home.

The law on furloughs from hospitals seemed a little vague to me. It looked like the hospital was allowed to permit a patient under an order for temporary or extended inpatient mental health services to leave under a furlough. It was the court, however, and not the hospital, that let me

* *Italics** = Name Changed

go. Also, I wasn't under any order for inpatient services; I was still under an order for protected custody. Apparently, a furlough could be granted with or without conditions. My lawyer had told me that my furlough was conditional – requiring me to meet with a psychiatrist and to return to the hospital for a hearing on August 29. Other than through my lawyer's oral report to me, the court had not communicated with me at all about conditions of the furlough. According to the paperwork I'd been given, the hospital had discharged me.

It also looked as if the court could issue a warrant to have me picked up and returned to the hospital if they considered me to be absent without authority or if they thought I'd violated the conditions of the furlough. If they did bring me back, though, they couldn't revoke the furlough until after I had had a hearing within 72 hours and the state had shown with clear and convincing evidence:

- that at the time of that hearing, I was mentally ill **and**
- as a result of that mental illness I was likely to cause serious harm to myself or to others;
or
- that I was suffering severe and abnormal mental, emotional, or physical distress; experiencing substantial mental or physical deterioration of my ability to function independently, which was evident in my inability to provide for my basic needs, including food, clothing, health, or safety; **and**
- that I was unable to make a rational and informed decision as to whether or not to submit to treatment.

I decided to wait and see what the court was going to do, and to attend to my basic needs. I bought an inexpensive toaster oven, a hot plate, and groceries enough for several days. I was determined to enjoy my own good cooking again in peace, liberty, and privacy for as long as I could. On Wednesday, thanks to the note I left for my daughter, my family found me.

Family Matters

From late Wednesday afternoon until late Wednesday night, relatives banged on my hotel room door begging me to come home and to take medication. My husband told me that there was a bench warrant out for my arrest, since I'd missed jury duty while I was locked up. He told me that only Dr. *Ganesh** could help me with that. He also told me that he was considering taking my car away. Finally, he told me that if I came home with him he'd get me out of the hospital and would take me to our family practitioners to get me "put on lithium." I told him to go away.

After I'd gone to bed that night my older son and daughter-in-law came to the door. I didn't respond to them and after a while they went away. They came back a short time later with someone else. I heard my daughter-in-law tell this person that I may have seen them through the window when they arrived and have taken off on foot, because I was "manic." They banged on the door again and told me they had a police officer with them. I didn't think it was against the law to ignore relatives while on furlough, so I still didn't answer. The next thing I heard was the sound of a key card being inserted in my door.

I walked to the door and said, "What the hell is going on?" The police officer answered, telling me that my family was worried about me and wanted to make sure I was safe. I told him I was perfectly fine and that I'd continue to be fine if my family would leave me alone. I asked him if he had a warrant. When he said no I told him through the door that I wanted to be left alone to sleep, since the reason I'd come to the hotel was to get away from my family. He said that was all right and they all left.

* *Italics** = Name Changed

On Thursday morning, I thought it very likely that my family would have wasted no time in apprising the court of my location. I expected to be served notice for the next day's hearing at any time, either through a knock on the door or by registered or certified mail to the hotel. If that didn't happen, I thought the court would at least deliver the papers to someone at my house. I knew that my family would let me know immediately if they received the paperwork. If I was served notice of the hearing sometime on Thursday, I hoped that with cash, credit card, and court paperwork in hand, I could find a private lawyer who would be willing to help me out in an emergency. I never did get any paperwork from the court.

Court Day To Capture

On Friday, August 29 – the alleged day of my hearing -- I decided that voluntarily turning myself into a kangaroo court so that I could be locked up again and probably be chemically raped was not a sane option for me. In the interest of protecting my health and safety (not to mention my freedom, privacy, and bodily integrity) for as long as possible, I chose not to return for a hearing without an official mandate to do so. I extended my hotel reservation through the Labor Day holiday weekend.

During the next few days I allowed a couple of my friends and my daughters and their friends to visit me in my hotel suite as long as they didn't bring my husband. One evening I cooked dinner for my girls. That's when they told me that my sister in Florida and my husband had agreed with my older daughter that living with a mentally ill mother was too stressful for her. It had been decided that she would be going to Florida to live with my sister for the rest of the school year. A decision hadn't been made yet about whether or not to send my younger daughter there too, but it was under consideration. My objections and assertion that this kind of decision belonged to both parents fell on deaf ears.

That night my daughter-in-law came to see me because she was upset about my husband's decision to send the children away. I let her in and we talked for a couple of hours. That night she told me that a warrant had been issued on Friday to take me back into custody and return me to the hospital because I didn't show up for my hearing. I wasn't surprised to hear this.

During the weekend I went to see a friend for a few hours, told her what had been happening to me, and had lunch with her and her husband. She had a hard time grasping the fact that I'd had psychotic symptoms three weeks before. She didn't see any evidence that I was behaving any differently from usual, other than that I expressed stress and worry about my situation. She told me that someone at church had told her I'd had a "nervous breakdown." I thought that was the most accurate diagnosis I'd heard so far. She was appalled at my husband's behavior and urged me to find a divorce lawyer as quickly as possible. I told her that I would probably have to do that eventually, but first I needed to resolve the situation I was in with the hospital and the court.

On Tuesday morning, the day after Labor Day, I decided to write an email to my sister in Florida to ask her to reconsider her decision to take my daughters away from me. I started driving to the library to use the internet access there and then made a spur-of-the-moment decision to visit my daughter-in-law instead, use her computer to send my email, and then take her out to lunch. I sent my email and waited on her back patio for her to come out of the house and join me. Instead she came out accompanied by two constables and my husband. I was allowed to use the toilet with the door open while the constables watched me and then I was transported back to HCPC.

HCPC AND THE COURT – ROUND TWO

The First Days Back Under “Precautions and Observations”

This time I was fully conscious for the processing-in and strip search. It was very unpleasant. I politely declined a nurse’s request to take my blood, and I answered most questions with, “I don’t think that’s any of your business,” if those questions were unrelated to whether or not I was a danger to myself or others. It didn’t look like I’d be either helped or harmed by honestly expressing my emotions, so I did tell anyone who asked how I felt that I was very, very angry.

That afternoon I had another Psychiatric Examination with a Dr. *Apara Adegbola*,* a psychiatric resident. I would meet with Dr. *Nolan Schultz*,* the unit psychiatrist, the next morning. Both doctors signed and dated the “Initial Psychiatric Examination” (Attachment I) – Dr. *Adegbola*,* at 3:20 p.m. on September 2, 2003 and Dr. *Schultz*,* at 10:00 a.m. on September 3, 2003. My experience with both of these doctors was quite different from my interactions with Dr. *Ganesh*.* They seemed to be accepting of what I had to say and they treated me respectfully.

On the day of my re- admission I joined the group of patients gathering to be issued their own cigarettes so that they could be herded outside to smoke them. I was told to step out of the group because I was on “precautions.” I asked why, and was told that the doctor had written that I was “combative.” I insisted on seeing where this was written and a nurse reluctantly allowed me to peek at my own medical chart. There it was – “... combative...on precautions.” Apparently, according to the hospital, “combative” meant orally expressing feelings of anger and politely refusing to answer intrusive personal questions.

I got on the patients’ phone and tried a few more lawyers from the Houston metropolitan phone book. They were no more helpful than the suburban lawyers I’d called the week before had been. I didn’t have access to my money or credit cards anyway. I left another message for the Patient Relations Department. Then Ms. *Smith** came to talk with me.

She was upset and frustrated by the fact that I hadn’t contacted her the week before. She told me that she could probably have gotten me out if I’d attended the hearing on Friday, but she was pessimistic about our chances now. I told her that I hadn’t received a notice of the hearing from the court and therefore I didn’t think that a hearing could legally be held, and that I’d spent most of my 10 days of freedom trying to keep myself safe from my verbally abusive and controlling husband. It was weak as far as excuses go, but there was more than one kernel of truth in it.

She said that, because the hearing was not a new one but had just been postponed, the court wasn’t obligated to serve me notice again. (I haven’t found anything about this in my research. She’s the lawyer; she was probably right.) She let go of her frustration with me and we discussed my objections to taking psychoactive chemicals for a condition I didn’t believe I had. She told me that Dr. *Spitzer** would be coming to the unit to examine me in the next day or two. The new hearing date was set for that Friday, September 5, at 8:30 a.m.

Dinnertime came and the patients not on “precautions” were lined up, counted several times, and escorted to the cafeteria. A box of food was presented to me so that I could eat on the unit under the watchful eyes of the staff, lest I become “combative” during my meal. I thanked the tech for the box and deposited it in the trashcan, stating that I wasn’t in the mood to accept hospitality from the state at that time. I was still uninterested in the state’s hospitality the next morning and sent my breakfast box into the trashcan, too.

* *Italics** = Name Changed

I spoke with Dr. *Schultz** that morning. I didn't know it at the time, but by 10:00 a.m. that day, both he and Dr. *Adegbola** had signed an "Initial Psychiatric Examination" with these observations:

- I was seen as "Well presented, calm and cooperative. Good rapport"
- My speech was "Spontaneous, coherent, relevant – Normal tone, rate, and volume"
- My thought content contained "No delusions. No grandiose ideas/delusions. No ideas of hopelessness/worthlessness/guilt. No suicidal ideation. No homicidal ideation"
- My mood/affect was described as "Euthymic" (translated from 'psychiatrese,' this means "tranquil."), and I had perceived my own mood as "angry but controlled"
- Although "Bipolar Disorder" remained my DSM Axis I diagnosis, "NOS" was added ("Not Otherwise Specified") and a note under "Problem Areas" was referenced
- Under "Problem Areas" was written, "Unclear whether an Axis I diagnosis exists or whether this is just a social issue"

Both of these doctors had documented the fact that when they examined me I did not meet a single one of the criteria for involuntary hospitalization and that I didn't demonstrate a single one of the symptoms of the disorder they had diagnosed me with.

"Second Opinion" Interview

Dr. *Spitzer** came to examine me later that day. It took me only a few minutes to realize that her purpose was to gather evidence to support a diagnosis she had embraced before she ever met with me. Dr. *Spitzer** was particularly interested in the fact that I had a son and a paternal uncle who had been diagnosed with bipolar disorder. She made much of hereditary vulnerability in mood disorders.

She did not find it at all relevant when I told her that, although my mother had had high blood pressure, diabetes, and congestive heart failure (all inheritable conditions), I would not follow a doctor's recommendation that I ingest blood thinners, insulin, and beta blockers, unless I had some definitive evidence that I actually had the conditions for which those prescriptions were appropriate.

She continued to want to draw parallels between my son's experience and mine. I told her that my son had shown specific symptoms of mania, which had increased in magnitude and intensity over the course of at least four weeks; I had not. He had demonstrated every one of the behaviors listed in the DSM IV as criteria for a diagnosis of "Bipolar Disorder – Manic – with Psychotic Features" for a significant period of time; I had not. He had voluntarily entered the hospital; I did not. A psychiatrist had spent over an hour interacting with him before documenting an initial tentative diagnosis; that hadn't happened for me. My son's symptoms gradually began to disappear only after three weeks of lithium therapy, and over the last seven years he'd reported racing thoughts, inability to sleep, and grandiose ideas when he'd neglected to take his lithium. I didn't accept the parallels. She was not impressed.

I suggested that if she were truly interested in deriving causation from correlation using hereditary data, she might want to consider the fact that three generations in a row of women married to men in my husband's family had been involuntarily hospitalized at around the age of fifty – my mother-in-law, her mother-in-law, and now me. Dr. *Spitzer** did not appear to find this information at all significant.

When she wanted to talk about the FBI, I'd had enough. I figured that the FBI had its hands full in the Middle East and that I had my hands full right where I was. I was not in the least bit interested in the FBI. I told her that I hadn't eaten in a day-and-a-half and that I was having a

* *Italics** = Name Changed

little trouble concentrating, and I asked her if our interview could end. She wanted to know why I hadn't eaten.

I told her that I was passively protesting my illegal incarceration. I said that passive protest was a traditional strategy of the oppressed, allowing them to register their grievances with their oppressors without risking retaliation. I told her that Mohandas Gandhi and the Reverend Dr. Martin Luther King, Jr. had effectively used this form of protest. She made some notes. I imagined that they said something like this: "Patient self-destructive – won't eat." and "Patient grandiose – thinks she's Gandhi and Martin Luther King."

I still didn't have any paperwork from the court. What that probably meant was that my "Hearing for an Order to Administer Psychoactive Medication" would be based on the petition that Dr. *Ganesh** had written 23 days before. The lady I'd just spoken with would provide "expert testimony." The judge might or might not carry a cell phone. I saw one of the hospital chaplains come on to the unit and I asked him to please pray for me.

The man in the suit and bow tie came in to see me again. He agreed with me that it was odd that I didn't have anything from the court, especially since I had been brought in by constables. He suggested that, at the upcoming hearing, I should keep the emphasis on danger to self and others. He didn't give me any advice about how I could do that. I took my "Patient's Rights" booklet and placed it on a shelf in the common room with a stack of other fiction.

That evening a patient asked his wife to bring extra food when she brought him his dinner. I had no problem accepting the hospitality of a fellow traveler. The three of us enjoyed a home-cooked pork chop dinner during visiting hours. The next morning I was taken off "Precautions and Observations" and I started eating the meals the hospital provided.

Court Day Again

I waited for a summons to court throughout the better part of Friday, September 5. I had dressed in my best and I was working hard at keeping my spirits up and maintaining a level of cautious optimism. In the mid-afternoon my lawyer came to talk with me. I thought that we were just going to review some things before the hearing started. After a while I asked her when we'd be going to court. She said that the judge was sick and the hearing had been postponed until Monday, September 8. I told her I couldn't talk to her anymore, because I needed to go in my room and do some deep breathing right away to get control over my emotions. That worked for a little while.

Early that evening a staff member leading a patient group said that we were all in the hospital because we needed help and that, if we were involuntary patients, we were there because we needed to be protected. I lost my temper. I jumped up and shouted, "That's bullshit!" As I left the group and headed toward my room I continued shouting that I'd never attempted to harm myself or anyone else; that I was perfectly capable of caring for myself; that I didn't have any of the symptoms of the disorder I'd been diagnosed with; and that the court had been jacking me around. I yelled that my rights as a citizen of the United States of America and the state of Texas had been violated; that I was supposed to be protected under the Constitution and federal and state laws; and that I didn't want to hear anymore crap! I got a smattering of applause from a few patients.

I ran into my room and a tech that was about twice my size started to follow me in. I had a Styrofoam cup of water in my hand and I held it up toward him and said, "Don't come in here or I'll throw this at you. I need to be alone." He said something about restraint and the absurdity of

* *Italics** = Name Changed

the situation hit me. I looked at my “weapon” and then I looked at him. Then I quietly said, “It’s *water* for heaven sakes. Please give me some time alone.” He must have realized how impotent and symbolic my gesture was because he walked away and left me to cry quietly in my room.

The next morning I woke up with back spasms again. They would continue, only minimally alleviated by prescription medication, for almost four weeks. While I was on a cigarette break in the afternoon the frustration and hopelessness of my situation hit me hard and I started to sob. I managed to get myself together well enough to ask a tech to take me back to my room. After I’d regained control I went to the nursing desk and tearfully asked, “What do you people want from me?” She said that they wanted me to take my medication. I told her that I didn’t have any medications but I’d take their damned pills if that meant I could go home on Monday. When she said that Monday was out of the question, I decided to wait for the hearing.

Another Court Day

I still don’t know if the hearing that finally was held on September 8 was just a “Hearing for an Order to Administer Psychoactive Medication” or whether the “Hearing for Court-Ordered Mental Health Services” was taking place simultaneously. It’s possible that I was court-ordered into mental health services at the hearing that I didn’t attend on August 29. In that case, psychiatric testimony would have had to have come from Dr. *Kibbles** “Certificate of Medical Examination” from August 8. Dr. *Ganesh** had signed a statement on August 22 stating that when she’d last seen me I’d demonstrated “an adequate sleep pattern and appetite, improved thought processing, less irritability, no threatening behaviors, no psychosis, and no suicidal or homicidal ideation.” I have never seen any court documentation about either the order for protected custody or the order for mental health services.

I talked briefly with Ms. *Smith** before the hearing started. My husband and Dr. *Spitzer** were in the courtroom before my lawyer and I came in. My husband was sitting next to the county attorney. There were a lot of spectators in the public section. The state presented essentially the same case that they had at the probable cause hearing on August 13 -- that I was mentally ill with “bipolar disorder – manic phase – with psychotic features;” that I had attempted to commit suicide by trying to jump out of a moving car; that I had threatened to kill people; that I was delusional; that I was so incapacitated by my mental illness that I wouldn’t be able to take care of my basic needs if I were released; and that I was unable to make a rational and informed decision as to whether or not to submit to treatment.

My husband said that I was manic and needed medication, and that he thought it should be lithium. Dr. *Spitzer** asserted that she was quite convinced that I had bipolar disorder and needed medication. She had made this judgement, she said, based on my irritability and agitation, my grandiosity, my family history, my hunger strike, and on my two emotional outbursts over the weekend. She actually said that anyone with this disorder was potentially dangerous unless they were hospitalized and medicated. She backed that up by telling the court that she would refuse to treat a private patient with bipolar disorder if that person refused to go into the hospital to be stabilized on medication. She told my husband that lithium would probably work for me, since our son had a good response to it.

My lawyer did a masterful job of representing my interests. She got my husband to admit that on the night of my “suicide attempt” he had yelled at me continually while I begged him to be quiet because, according to him, I was a “pain in the butt.” She got him to admit, also, that there were some odd things on the computer and blank messages on the phone answering machine

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although he minimized their number and significance. When she asked him if he truly believed that I intended to kill him, he said that he didn't know what I would do.

Ms. *Smith** also asked Dr. *Spitzer** if the incidents over the weekend couldn't be explained as normal, understandable responses to what I was going through. Although Dr. *Spitzer** denied that possibility, at least the judge was reminded of the fact that anger, frustration, and sadness were normal human emotions, and that expressions of them were normal human behaviors -- they didn't need diagnoses as explanations. Then Ms. *Smith** asked Dr. *Spitzer** if it wasn't unusual for a person over the age of fifty to have a first episode of bipolar disorder. Dr. *Spitzer** stated that it wasn't at all unusual. She said that the onset of bipolar disorder was equally likely to occur at any time in the lifespan.

Ms. *Smith** presented my reasons for not wanting to take medications:

- I was not convinced that I actually had the condition I was diagnosed with, and I didn't want to take unnecessary medication.
- The medications have side effects that I wasn't interested in experiencing needlessly.
- If I took the medications, I suspected that hospital staff would be inclined to attribute all normal behaviors to their effects. That I "responded" to the medications would then become *de facto* evidence that I actually had the condition for which they were prescribed.
- And finally, that if I were diagnosed and medicated for this condition I didn't believe I had, it would be almost impossible for me to get private health insurance.

She added that I was willing to see a private psychiatrist for an accurate diagnosis and treatment if necessary.

Then the FBI came up again. I deflected as much as I could of that. Anything I'd said, done, or believed regarding the FBI had taken place 31 days earlier and didn't have anything to do with whether or not I could be legally detained. I was able to say, without perjuring myself, that I did not believe that the FBI was watching me, trying to contact me, or involved with me in any way.

I was asked about what kind of psychiatric care I would seek if/when I was released. I told the court that I had every intention of looking for a competent private psychiatrist. I said that I expected to be a consumer of and a partner in my own health care, not a victim of it. There seemed to be a little discomfort with the idea that I would think myself capable of judging the competency of a psychiatrist.

A semi-retired visiting judge presided over this hearing. I never found out his name. He appeared to be listening closely and taking notes throughout the proceedings. He told us at the end of the hearing that he would need time to deliberate and would make a decision by the following day. Ms. *Smith** and I were encouraged by the fact that there was no immediate decision. It looked as if it was possible that I would be released. I was escorted back to the locked unit to await the verdict.

Awaiting Judgement Day and the Purloined Paper

I really was troubled by what had happened to me in early August. I actually had "lost my mind" for a few days, and it scared me. Doctors *Schultz** and *Adegbola** had seemed to be reasonable people. I was seriously considering telling them the truth to see if they could give me some insight into what caused that to happen. I went into our next meeting hoping that these doctors would be willing to stop trying to shove me into a box I didn't fit into and give me some real help. The first thing I asked Dr. *Schultz** was if he would please tell me what bipolar symptoms he'd observed in my behavior. When he said, "We're not looking at that;

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we're looking at the whole picture," I knew that he was aware that the diagnosis didn't fit, but he wasn't willing to change it. I decided to wait until I was able to find a good psychiatrist on my own.

It was Wednesday, August 10, when the "Order to Administer Psychoactive Medication" came through. I found out when Doctors *Schultz** and *Adegbola** came to my room to check on how my back spasms were. I said, "It's been over two days and I haven't heard anything from the court." Dr. *Schultz** told me that the order had just come in that morning and that I would be forced to take medication. I was shocked and devastated, although I know I shouldn't have been. I'd certainly never been given any reason for optimism since this whole ordeal had begun.

I went right to the nursing station and asked to see the order. A nurse said she'd make a copy for me and went back in the office to do that. I pondered on that a bit while she copied the order for me. A judge had just made a decision that would rob me of control over my own body, and I – the person most affected by that decision -- was considered so insignificant by the court that they didn't even think I deserved to be informed personally about it.

By the time the nurse got back with my copy I had decided that this was unacceptable. I asked to read the original and then took it and ran to my room. I stuffed it in my underwear right before a nurse and tech followed me into my room. The nurse demanded that I give her back the hospital's paper. I declined and they made a cursory search of my belongings and of my bedclothes. They stopped short of a body search. The nurse told me that they were going to call the Houston Police Department and have me arrested for stealing a hospital-owned document.

I figured I didn't have much to lose. What could the cops do to me? Arrest me? Incarcerate me? I had already been accused of, tried for, and found guilty of "mental illness." The punishment phase would begin that evening. The nurse and the tech left my room. I folded the paper neatly and placed it under the insole inside one of my shoes. It was just a copy anyway. The only difference between what I had stolen and what the nurse had copied for me was that the copy I had taken was punched with three holes. I waited for the armed peace officers to arrive and arrest me for being in possession of stolen punched paper. They never showed up and no one ever referred to this incident during the rest of my stay in the hospital.

Treatment

Every time I'd been offered medication in the past I had said that I would only take it if it were court-ordered. I'd never allowed myself to believe it that was possible for that to happen. As medication time neared I found that I was constitutionally incapable of joining the med line and obediently swallowing those pills. If these people were going to force medication on me, they needed to take responsibility for doing just that. I was told to come get my meds and I said, "No thank you." The nurse told me that if I didn't swallow the pills I'd have to have an injection, and I wouldn't like that. I said, "Fine. Inject me."

After all the other patients had taken their pills, everyone but my roommate was told to go into their rooms and to shut their doors. I lay on my back on my bed. A nurse and a large, muscular tech came into my room. The nurse gave me one more chance to swallow pills and I refused. She told me they would have to give me an injection. I said that I wouldn't fight them and I wouldn't help them. I lay there passively as my pants were unzipped and I was rolled over and a needle was inserted into my hip. As the hypodermic was emptied into my body, I said, "What

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you are doing to me is very, very wrong.” As they left I asked what was in the needle. She told me it was Thorazine.

I was so overwhelmed with the enormity of this violation of my person that I couldn't even cry. I curled on my bed in a fetal position and shook uncontrollably for almost an hour. Then I went to sleep. The next morning I was injected with Thorazine again, and again that night, and again the next morning. I was always offered the opportunity to orally ingest Depakote and Risperdal before I was unzipped, rolled over, and shot up. After the first time, other patients weren't sent to their rooms.

After my injection on Friday morning, I noticed that my arms and legs were twitching and cramping. It was uncomfortable and it became painful as the day went on. Around lunchtime I told a nurse about it and she gave me some Cogentin. That didn't seem to help much. I spent most of the afternoon in my bed trying to relax my muscles. The new interim minister from my church was coming to visit me that evening. I had never met her before.

Shortly before she arrived I realized that I didn't have control of the movements of my head and neck. My head kept turning to the left and moving upward on a random schedule. The only way I could stop myself from looking at the ceiling every few seconds was to hold my head steady with my hands. I talked with my new minister for a short time while I continually grabbed my head and turned it back toward her so I could look at her while we talked.

Right after she left I found a nurse and told her what was happening. She looked at my chart and said, “But we gave you Cogentin.” I trapped my maverick head with both hands, turned it in her direction, and said through clenched teeth, “It doesn't seem to be working.” After an hour or so she came back to me and said that the doctor had ordered more Cogentin for me and had decided not to have me injected that night. Presumably the injections would recommence in the morning. They had won.

The next day my head belonged to me again and my arms and legs had stopped twitching and cramping. When the call for medications came, I joined the line. I was congratulated for my “compliance.” For several days I had to drink foul-tasting liquids while the nurses watched me. After that I got pills like everyone else. This continued for ten more days.

I played a lot of checkers and spades and attended “Music Therapy Group” and “Spirituality Group” when they were offered, because I liked the music and I needed a little support from a higher power. The rest of the therapy groups didn't interest me and I chose to read or exercise in my room rather than attend them.

On Monday, September 22, I was considered drugged enough to be released and I was. My “Discharge Summary,” signed by Dr. *Schultz** and Dr. *Adegbola** on September 22, had this to say about my condition at discharge: “The patient was compliant with treatment and tolerated medications. Mood was euthymic with no agitation, suicidal or homicidal ideations. No overt psychosis or bizarre behaviors. The patient was not demonstrating dangerousness to self or others.” Apparently, what my involuntary hospital stay and forced medication had cured was my non-compliance. Everything else noted here was also documented as having been true on September 3 and, prior to that, on August 22.

My husband came to pick me up. He had put my older daughter on a plane to Florida the day before. This time the hospital refused to get me a cab. The social worker said it cost too much

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and the hospital couldn't afford to do that for me when I already had a ride home. It wasn't worth a fight. I wanted out of there as soon as possible, so I rode home with my spouse.

Consequences

- I lost custody of one of my dependent children for eight months. (She came home pregnant in May – one month short of completing her junior year in high school in Florida.)
- I lost three part-time jobs that were all to have started during the time I was hospitalized.
- I lost my volunteer position in my church. The board voted unanimously not to keep me as a church officer. They knew that I was, and would continue to be, so incapacitated by my mental illness that I wouldn't be able to fulfill my duties. None of them felt it necessary to even talk to me about that decision before it was made.
- A lot of former friends and acquaintances avoid me now. Many friends and family members have stopped sending me email. Only two friends and one of my sisters (not the one who took my kid) are comfortable allowing me to talk about what I went through.
- I have been haunted by recurrent painful memories and bad dreams from having experienced the loss my liberty and privacy, the violation of my body, and the denial my civil rights for six weeks of my life.
- I have lost faith in my country's and my state's commitment to constitutional and legal protection for all of its citizens.
- I'm still making payments to the hospital where I was incarcerated.
- I paid for competent psychiatric care to obtain an accurate diagnosis and to get help in safely discontinuing psychoactive chemicals. It took almost five months.
- I paid a counselor for psychotherapy to help me deal with the trauma of this experience.
- I am still uninsured.