Mr Lamb:

Sorry is this is a duplicate. Lost some data in a power failure.

[redacted]

[redacted]
Pittsburgh, PA 15217
[redacted]

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Telephone: [redacted] Fax: [redacted]

August 7, 1993

Brian Lamb, Book Notes
C-Span
Suite 412, 444 North Capital Street NW
Washington, D.C. 20001

00594 AUG1193

Dear Brian Lamb:

I am writing to ask for your help. My new book, [redacted] was published by Henry Holt (NY) late in June, 1993, in conjunction with my appearance on ABC's "Good Morning America." The topic was considered so important and the book so powerful that we received an uninterrupted ten minutes on national TV.

Now, astonishingly, six weeks later, this book, which documents the stories of three children with serious mental health problems, has not yet been reviewed. This is distressing to me and to families about whom I have written who suffer the stigma against people with mental illness. The statistics documenting the lack of attention given to children with mental health problems in the U.S. is extraordinary and frightening:

Four-fifths of 14 million children with serious mental health problems receive no treatment or care. And four-fifths of the "lucky" fifth who are accepted into the system are treated in an inappropriate and overly severe manner. Illogically, financial benefits are provided for foster families--respite care, psychiatric treatment--but not the biological family. Exhausted and embittered parents are often forced to relinquish custody of their kids just to obtain health care and educational benefits for them.

I am not saying that all books should be reviewed, but as the healthcare debate moves into the congressional arena in early September, [redacted] and the injustice that it illuminates, deserves to be introduced to a wider audience.

Enclosed is the first chapter of [redacted] about Daniel, with whom I have become personally involved. If you find this chapter compelling, I am hoping that you will telephone me or [redacted] at Henry Holt [redacted] to ask for a review copy of [redacted] Or mail the enclosed form.

Incidentally, I am contacting you independent of any initiative from my publisher. I tell my students that a journalist with a good story should persist in the face of discouragement. I have written a compelling and tragically accurate story--and it deserves to be heard. Please help.

[redacted]

DANIEL

Autumn

WHEN I DROVE up to the house, Daniel was walking toward me. I got out of the car and waited for him to approach. Even though he waved and flashed a quick smile, he seemed grim and befuddled. "What's wrong, Dan?"

He shrugged and shook his head as we walked up the steps toward the porch. "Nothing's wrong," he said, but his eyes were darting erratically from side to side.

Daniel had been working periodically that summer at a rental property I owned, cleaning out the basement, a filthy job that he savored. Nothing made Daniel happier than getting dirty, especially with a bunch of junk. A pack rat, Daniel had always rummaged through trash, rescuing an array of worthless mechanical objects—manual typewriters, speedometers, radios, lamps, rusty tools, old motors. Keys of any size, type, or condition were his special passion, and locks, whether or not they corresponded to the keys. Sometimes he managed to clean or fix a derelict item of junk and sell it at a Sunday flea market, but usually Daniel was more interested in contemplating these items in the questionable safety of his room.

Daniel is short and broad, part muscle from his recent forays into weight lifting and part paunch from overeating. It was not unusual for

him to devour an entire large pizza with mushrooms, sausage, and pepperoni—our traditional Saturday-afternoon snack—followed by a few hot sausage hoagies for dinner. Over the past three years, he had changed a good deal physically; when he was twelve, he weighed ninety pounds, a frail and exceedingly delicate feather of a boy; now, still very short, he could be more aptly described as a fireplug.

We stopped at the top of the steps, and I put my hands on his shoulders. Ruffling his curly hair with my hand, I joked about how dirty he was and made a crack about his ears, which are unusually small. I could almost always get him to laugh by invoking his ears or by pointing out that he was most handsome on Halloween, when he wore a mask. But this time he did not laugh, or protest; he was so somber that I pulled him down on the stoop and looked him straight in the eye. "C'mon Dan. Something's wrong. What's going on?"

Although I could see it coming, I was surprised at the power of his emotions. A mask of fear suddenly exploded onto his face, and he began to whine, like a small, frightened child. "Oh, I'm so scared," he said. "He's going to kill me."

His eyes darted crazily, and he tried to stand up and run, but I held on to him. "I won't let anyone hurt you."

Tears were streaming down his face, which he buried in my chest. "A man molested me." He reached down and began squeezing his buttocks. "Oh, it hurts," he wailed. "It hurts so bad back there."

Daniel poured out his story in the midst of choking sobs. He had worked in the basement for half an hour or so, dragging out a mess of discarded timber, empty paint cans, and old furniture, and then decided to take a five-minute walk to the local convenience store for a soda. There's a bank of pay phones on the corner beside the store, and as he was passing, a phone was ringing. Daniel answered. A male voice at the other end said that he had been waiting for Daniel and would kill him if he didn't do what he was told. "Yeah, sure," Daniel had replied, hanging up the phone and going to the store.

But when Daniel walked past the telephones on his return, a car screeched to a halt at the curb. A man, unshaven, dressed in black trousers and shirt and black patent leather shoes and waving a knife, ordered Daniel inside. Instead of running, or screaming—or even laughing—Daniel complied. They drove around the corner, down a side

street, and into an alley, whereupon the man led Daniel through a clump of bushes behind an abandoned building. Following orders, Daniel kissed the man on the lips, then, under threat of the knife, sank to his knees and performed oral sex. Finally, Daniel lay facedown on the ground. The man entered him. Daniel felt a sharp and intrusive pain. Now, at the end of the story, Daniel was nearly hysterical. "Oh, it hurts so bad. He said he'd kill me if I told anyone. What am I going to do?"

I could not answer his question, for I felt dumbfounded and conflicted. This incident had occurred in my neighborhood, an area in which I lived with my wife and infant son, and one considered the most urbane in the city. Not that crime never occurred here, but child molestation (or kidnapping) in the middle of a bright and busy Saturday afternoon was unlikely, to say the least.

Besides, there was Daniel's history to consider, beginning with the abuse and neglect that had led authorities to permanently separate Daniel from his family when he was ten years old. The abuse during his early years had been documented, but recently, new and questionable incidents of violence and molestation had allegedly occurred. Only a couple of weeks ago, Daniel had come home with his face bruised and his books and wallet missing. He claimed to have been attacked by four black kids, wielding pipes, who stole his money and beat him up. Later, witnesses reported that he had actually gotten into a fight with a neighborhood kid, who was white—and lost.

Last year, Daniel had reported that a teenage female resident of his group home had accosted him in a darkened passageway and molested him. At about the same time, Daniel told a convoluted story about being followed by a mysterious bearded man who had forced him into his Cadillac and molested him. Daniel also claimed that a teacher at school was abusing him and encouraging him to run away and not attend classes.

Many of the past horrors in Daniel's life had been confirmed, but his recent credibility was partially suspect because of his own maliciousness. Hadn't he, one Saturday afternoon, removed all the manhole covers from the sewer system on the periphery of his group home and covered the holes with twigs, grass, and weeds as "booby traps"? Hadn't he promised, after I had explained the danger, to immediately replace the manhole covers, and hadn't he reneged on that promise? Didn't he

lie frequently about where he went and what he did, using his learning disabilities and the side effects from antidepressant medication as justifications for forgetting and making mistakes?

Some of his excuses were plausible, especially those attributed to his learning disabilities. The intent of messages directed toward him sometimes did not register, but because Daniel was intuitive and responsive, he skillfully maintained eye contact with the person to whom he was speaking, able to sense when to shake his head, shrug, or nod, indicating understanding while completely in the dark. But there was an unpredictable side to Daniel, as well; he was a kid who tottered on the precarious edge of ambiguity.

The "booby trap" incident had been especially disturbing because it made me realize that Daniel's defensiveness could distort his sense of right and wrong. The caseworker at his group home observed that Daniel had been so brutally battered by his family and by the child welfare system that "rescued" him that it was impossible for him to feel compassion. The fact that someone could have been hurt—or killed—by his "booby traps" meant little to Daniel, who frequently declared, "I don't care about anyone else."

I don't believe that Daniel wants to hurt anyone, but because of his history, he possesses an irrational and uncontrollable fear of being taken advantage of, especially by someone unknown. This helps to explain his penchant for locks, keys, and burglar alarms, and suspicions toward strangers. Daniel could have seen this unshaven man dressed in black sitting in his car or making a telephone call and his imagination might have done the rest.

Daniel continued to whimper as I tried to decide how to proceed. At the very least, I had to get him away from this house and the fear that the mysterious man, whether real or imagined, was going to come back for him. I remembered a story he'd told me of another unshaven man who lived in the woods across from his home who would periodically sneak into the room he occupied with his sister—and molest them both. The power of his emotions and the horror of what might have happened to him confused and frightened me. Hurriedly, we gathered his possessions and climbed into my car.

I drove in the general direction of the convenience store until Daniel pointed to the street to which the man had taken him. Instinctively, I

turned the corner, Daniel directing me into the alley he had described. For the first time, I began to believe that the incident could have happened. The alley was not dark or narrow, but it was clearly out of the way, as was the building to which he pointed, set off in a secluded corner of a vacant lot. The underbrush around the building was thick and concealing. If a molestation had occurred, it could have happened here.

I backed down the alley and once again headed for the store. A police van was sitting in the parking lot, its engines idling. Out of the corner of my eye, I could see two officers, both women, eating a take-out lunch and listening to their walkie-talkie. Daniel was staring straight ahead, whimpering and snuffling. He did not see the police van, but its presence provided a direction—right or wrong.

"Well, Dan, this is your chance," I said, pointing at the white van with its large blue-and-gold official seal. "We could approach those officers and tell them what happened."

Daniel did not hesitate. "Yes," he said, with conviction. Daniel has always possessed an irrepressible penchant for law enforcement officers, which is what he wanted to become. The order and control that police may establish appeals to kids who have lacked the order and control which might have made their lives happier and safer. As Daniel had grown older, the idea of being a policeman had faded, although their uniforms and authority were still quite seductive.

We got out of the car, walked across the parking lot, and knocked on the window of the van. "I was molested by a man dressed in black," Daniel said. He quickly highlighted the gruesome details.

Almost instantly, the officer on the driver's side activated her walkie-talkie. Announcing the specific location, I heard her summarize Daniel's story to her sergeant, using the word that both Daniel and I had studiously avoided: "A reported rape . . ."

Within five minutes, the entire parking lot was ringed with police vehicles. Daniel was asked to tell his story twice more, once by a sergeant and then by a medic, and with each telling Daniel became more distraught. He buried his face in my chest and began sobbing uncontrollably, especially when the medic attempted to take him in the ambulance to the hospital for the long and intense physical examination required.

"Lee, you have to come with me; I don't want to be alone."

"You go in the ambulance, Dan. I'll be along in my own car. Don't worry, I won't leave you."

When I arrived at the emergency room a few minutes later, the police would not permit me to join him in the examination room; Daniel remained alone with the doctors, nurses, and policemen for the next six hours. As directed, I went home and sat by the telephone, waiting for the police to contact me. I did not know what to believe—or even what I wanted to believe. Did I want the police to determine that Daniel was telling the truth—that he had really been raped? Or would it be preferable to learn that Daniel had been lying or hallucinating? Either way, Daniel was the ultimate victim—of society, his family, his biology, and of himself.

University of Pittsburgh
April 1, 1993
Vol. 25 No. 15
University Times

[redacted]

"My life was once motorcycles," says [redacted] professor of English. "I was on a motorcycle on a very loyal and regular basis from my late teens up until the time I wrote 'Many Sleepless Nights.'"

Researching that 1988 book — an award-winning look at organ transplantation from the perspective of the patients and their families — brought [redacted] into hospital intensive care units, where he made a sobering discovery.

"I noticed how many motorcycle accident victims were hauled into the intensive care units brain dead," he says. "I realized that I didn't want to be one of those people.

"It was always eerie to see what the nurses called 'donorcycles.' There was no blood. They were neurologically dead. They may have a scratch or a black eye, but there was no blood. Scared me to death."

Writing [redacted] took [redacted] away from the motorcycle subculture — which he wrote about in his 1973 book [redacted] — and immersed him in a very different but perhaps equally perilous world.

"I must say that I'm not an incredibly pro organ-transplant person," admits [redacted] "My interest was in telling the stories of the recipients and candidates: their bravery, how people in the absolute worst straits possible — facing death, suffering with great, tormenting illness — can keep themselves together, struggle and survive, go through the most horrendous surgery mankind has ever invented, and live, or die, with skill and grace. I was constantly moved and amazed by that."

[redacted] has shared his experiences in numerous public speaking engagements, addressing social workers, nurses, transplant candidates, church congregations and many other groups. He serves on a number of local and national transplantation-related committees and until recently was on the board of directors of the Transplant Recipients International Organization (TRIO) and the communications board of the United Network of Organ Sharing (UNOS).

As a faculty member [redacted] takes pride in being the only tenured professor in the Faculty of Arts and Sciences who does not hold an advanced degree. He earned his B.A. from Pitt by taking night classes while writing during the day.

He joined the Pitt faculty in the early 1970s, shortly before the publication of [redacted] At first he felt uncomfortable among his colleagues with doctorates. "I don't think they were particularly pleased with me being here," he says.

But in the years since he has more than made up for what some would consider a lack of credentials: he's published a half-dozen books, founded two literary journals (the "Pennsylvania Review" and "Creative Nonfiction which debuts this spring) and started the Pitt Writers Co- former.

[redacted]

"I'm a great believer in immersing myself completely in the things that I'm writing about," says [redacted] "My life is my book."

[redacted] long-time interest in issues of children and families led to the writing of his two most recent books: "One Children's Place," which looks at pediatric medicine as practiced at Children's Hospital, and the forthcoming "Stuck in Time," about child mental health care.

[redacted] twice served as friend and role model to disadvantaged children through the Big Brothers/Big Sisters program. For the past five years he has served as a mentor for a learning disabled youth named Daniel, whose experiences form a major part of [redacted]

"His life is hell," says [redacted] who has followed Daniel in his institutional odyssey through numerous hospitals, foster homes and group homes [redacted] acts as an advocate for Daniel, closely involved in guiding his education.

"The system I write about is horrific," he says. "The system of child mental health care in his country — and in this state, county and city — destroys the kids that the system has been designed to take care of.

"What we do," he continues, "is take our kids and put them in institutions. We don't give them people. We don't try to bring them back and realign them with the people who love them most — their mom, their dad, their uncle, their aunt. We continue to separate them from any aspect of love and isolate them in all sorts of different institutions."

Nancy Speed, director of the Greater Pittsburgh Mentoring Association (a coalition of mentoring agencies such as Big Brothers/Big Sisters), praises [redacted] as "an outstanding example of what a mentor can do to improve or assist a young person's life."

[redacted] work with Daniel, Speed added, has gone "above and beyond the call of duty." For example, she said, [redacted] campaigned vigorously to have Daniel placed in a more appropriate educational setting than the one he had been in.

For [redacted] mentoring is a means of providing children with the kind of support and attention that many psychiatrically impaired children sorely lack.

"I plan to spend a good deal of my energy for as long as I can," [redacted] says, "speaking out on behalf of children's rights and children's health and helping in any way I can."

—Curt Wohleber

Recognizing

5 faculty who are honored with the first Chancellor's Awards for

public service

The three stated missions of American research universities are research, teaching and...um...

Public service. If proponents of undergraduate education complain that teaching often takes a back seat to research at universities such as Pitt, public service has been lucky to sneak a ride in the trunk.

Research and teaching accomplishments earn professors pay raises, tenure and promotions. Faculty who knock themselves out serving the community tend to be rewarded with plaques on the wall and a warm feeling inside.

But Pitt took a step toward elevating the status of public service this year by instituting the Chancellor's Distinguished Public Service Awards to complement the existing Chancellor's Awards for teaching and research.

Chancellor J. Dennis O'Connor established the awards at the recommendation of the University Senate community relations committee, chaired by social work professor James Cunningham. The committee surveyed Pitt's fellow Association of American Universities (AAU) schools and found that a growing number of them are rewarding outstanding public service with promotions, cash awards and honorary titles such as "distinguished service professor."

Pitt's public service award recognizes outstanding achievement in the application of University and academic resources for addressing social problems and improving the general welfare of humankind. Award recipients get a $2,000 cash prize and a $3,000 grant to support public service activities. The inaugural recipients are Freddie H. Fu, medicine; [redacted] English; Lauren B. Resnick, psychology; Barbara K. Shore, social work, and Jerome Taylor, black studies.

One thing that all five winners have in common is that their public service work relates closely to their research and teaching. But their commitment goes beyond mere academic curiosity. It also has to do with values, as Barbara Shore pointed out. "That's what you're supposed to do in this world, help people," she said. Something else the award recipients have in common is that they're out of the "publish or perish" game. Fu, [redacted] Resnick and Shore are tenured full professors; Taylor was hired outside the tenure stream. That's not to say that junior faculty members don't serve their communities and volunteer for public service projects. But as Resnick put it, "A junior faculty member who hasn't earned tenure yet would be crazy to devote as much time to public service as I do." Cunningham said he has served on a number of promotion committees whose other members were very reluctant to grant tenure based on anything except publications in juried scholarly journals. "They didn't want to give faculty credit for publishing books, much less doing public service," Cunningham said.

In the April 15 and 29 issues, the University Times will profile the winners of the Chancellor's Distinguished Teaching and Research Awards. — *Bruce Steele*

NEWS FROM
HENRY HOLT

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FOR IMMEDIATE RELEASE

contact: [redacted]

"Other than George Orwell, Rod Serling, Charles Dickens, or of course, Kurt Vonnegut, who would have ever conceived of the notion that Americans in the 1990s, with the most advanced health-care system in the world, would have to relinquish custody of their own children with mental health problems in order to ensure their treatment? . . . The time has come to take a daring chance by plunging headfirst into a new order in child mental health care."*

[redacted]

"Speaking on behalf of mentally ill children and teenagers, many of whom are also learning-disabled, and only one-fifth of whom receive treatment or service, [redacted] accuses government, social service professionals and media of ignoring this 'national disgrace.' The author spent several years following three mentally handicapped adolescents from financially and emotionally ravaged families as they were shuttled among temporary shelters, group homes and a dozen psychiatric institutions where, he claims, they were 'systematically tantalized or tortured with promises of reward or punishment. . . . The author of this sympathetic, eye-opening study, urges a radical change from permanent institution-based care to a flexible system of highly individualized child and family therapy, detailed here."

--Publishers Weekly

"This book is a superbly accurate accounting of the 'real world' problems that mentally ill children and adolescents and their families experience in the chaotic and fragmented system that now exists in our larger cities."

--H. Paul Gabriel, M.D.,
Professor of Clinical Psychiatry
Dir., Liaison Svc to Pediatrics
New York Univ. Medical Center

[redacted] (Holt; June 24, 1993; $25.00) chronicles the years [redacted] an award-winning writer and journalist, spent with three mentally ill adolescents in Pittsburgh, PA. Through their stories [redacted] depicts the sad ineffectiveness of this country's system of care

*from [redacted]

for our mentally ill children, and advocates the need for alternate methods of treatment.

Between 7.5 and 9.5 million children in the United States suffer from serious mental health problems; nearly four-fifths of them receive no treatment. To try and fully understand the logic (and, as [redacted] found in many instances, absurdity) behind these statistics, [redacted] immersed himself in Meggan's, Daniel's, and Terri's lives. He monitored their various movements within the system, sat in on sessions with psychiatrists and family therapists, and interviewed dozens of health care workers. As he followed Daniel and Terri from Western Psychiatric Institute to Mayview State Hospital to group home to foster care and back again, and as he watched Meggan's parent's suffer her "oppositional" behavior, [redacted] became frustrated, exasperated, stonewalled, and defeated--and that was as an observer; it was far worse for the parents, psychiatrists, caseworkers, and others involved.

[redacted] explains that our health care system does not have the finances, focus of purpose, or man power to cope with the specific problems of mentally ill children. Hospital staffs are overworked and underpaid; there is little communication between caseworkers, youth services, group homes, hospitals, and schools. Mental hospitals are often forced to deal with cases that would be more appropriate for family court or regular hospitals. "The Children's Defense Fund estimates that 40 percent of emotionally disturbed children in the United States may be inappropriately hospitalized," [redacted] writes, "because there are no alternatives."

Often a child's mental illness is precipitated by socioecomic factors: he/she has been abused, lives in an impoverished home, and/or is neglected. But, as [redacted] points out, the case may be much more ambiguous: perhaps the family is "dysfunctional," a situation where boundaries are difficult to distinguish, yet the emotional damage to the child is clear. Our mental health care system, which ultimately functions around available insurance and state and federal funding, often sends a child back into the chaos that may have aggravated his or her fragile mental condition from the start. Meggan, for example, had constant emotional flare-ups while living with her parents, but her insurance covered her for no more than three thirty-five day stays at Western Psych each year. An arrangement like this is doubly counterproductive since what these adolescents need is supervised, structured routine when in fact they are shuffled constantly from one place to another. Meggan's story came to a frustrating end for [redacted] when her parents, Tom and Elizabeth Scanlon, were forced to give up custody in order to secure funding for her treatment. The final irony was Meggan's placement in a foster home around the corner from the Scanlon's.

[redacted] proposes a change from institutionalized care to a system of personalized treatment. He promotes programs like

Homebuilders and WrapAround, whereby the system reacts to the child rather than the other way around. These programs are custom tailored for each child--Homebuilders allows a mentally ill child to live at home by providing immediate support for the family during times of crisis; and WrapAround can help an adolescent become a more independent adult through a slow and methodical shift from institution to group home or apartment. These are viable and tested alternatives to blanket treatments, which have become little more than way stations for children on their way to permanent adult institutionalization.

In her 1982 book Unclaimed Children Jane Knitzer first uncovered the problems that mentally ill children face. Now with [redacted] further describes their plight, promoting awareness and radical reform.

ABOUT THE AUTHOR

[redacted] is an award-winning writer and professor of English at the [redacted]. He is the author of five nonfiction books: [redacted] (1988), the first book to chronicle the world of organ transplantation, and winner of the Howard W. Blakeslee Award by the American Heart Association as well as a Best Medical Book award from Library Journal; [redacted] (1990); [redacted] (1984), which focuses on the hardships and joys of backwoods America; [redacted] (1975); and [redacted] (1973). He also wrote a novel, [redacted] (1983) and edited an anthology of Pittsburgh writers, [redacted] (1985).

[redacted] has contributed to a variety of publications including The Philadelphia Inquirer, The Los Angeles Times, The New York Times Magazine, The Pittsburgh Post Gazette, Health Magazine, The Georgia Review, Sports Illustrated, and Scholastic Teacher. He has received numerous awards and citations for his writing, and is the founder and editor of two journals, Creative Nonfiction and The Pennsylvania Review. He is also a co-founder and program director for City of Pittsburgh/Three Rivers Arts Festival Summer Writers' Workshop. Among other organizations, [redacted] volunteers as a Big Brother, a Parental Surrogate (for education for youths without parents), and for the Adoption Family Fellowship. He lives in Pittsburgh with his family.

Title: [redacted]
Author: [redacted]
Publication date: June 24, 1993
Price: $25.00
ISBN 0-8050-1469-1

Dear [redacted]

Thanks for your letter and the accompanying materials.

(check one)

-----I have already received a copy of [redacted] and have scheduled it or intend to schedule it for review.

-----Please send a copy of [redacted]. I am very interested in examining it.

-----I would like to interview you. Please call me.

-----I am very sorry, but we won't be reviewing [redacted]

-----Why don't you review [redacted] for this newspaper? A writer's (semi) objective review of his own book would be interesting and unique.

Sincerely,

[redacted]

PITTSBURGH, PA 15217