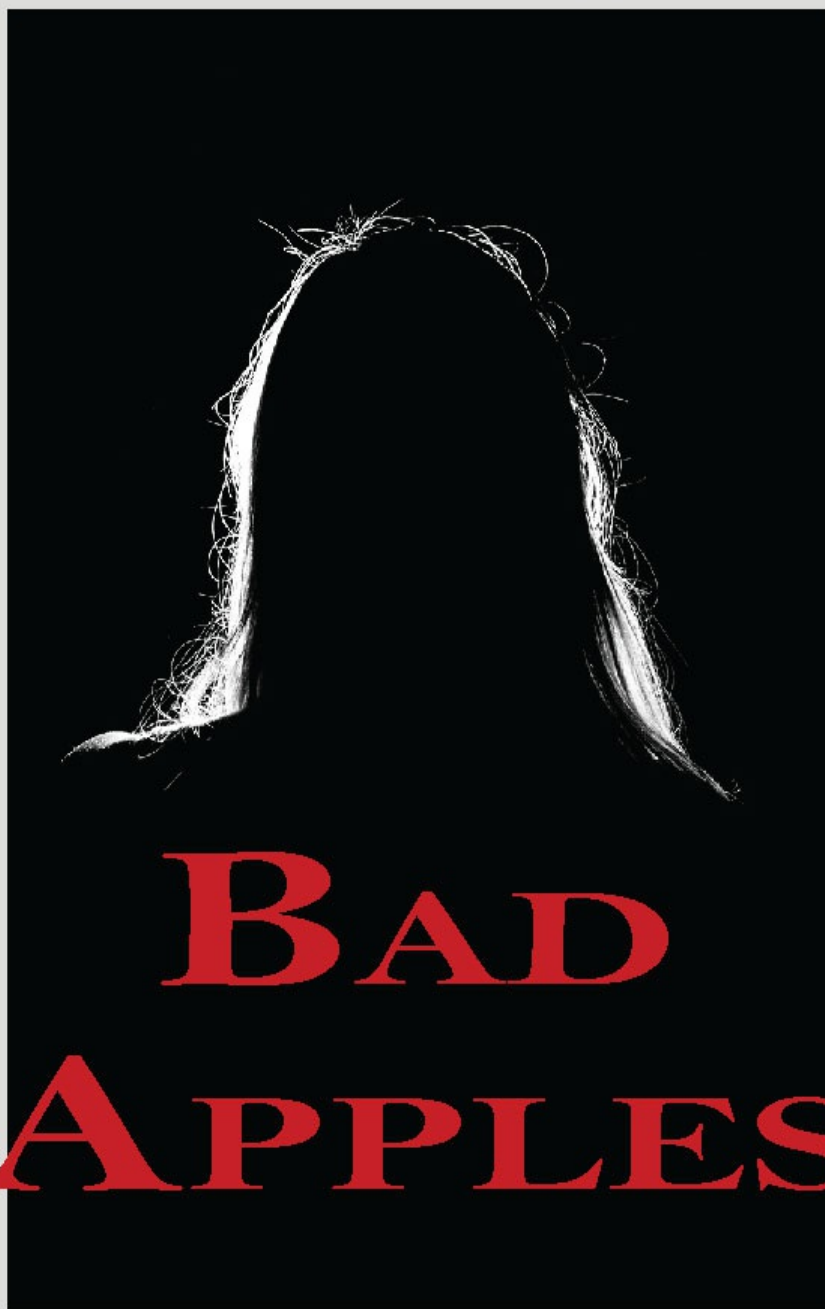


*The Children's Hour*



**BAD  
APPLES**

Kenneth S. Robson, M.D.

# **The Children's Hour:**

## **A Life in Child Psychiatry**

**Kenneth S. Robson, M.D.**

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*For the imagination of man's heart is evil from his youth.*

Genesis 8:21

Child and Adolescent Psychiatry has been furthered by the efforts of devoted, thoughtful juvenile court judges trying to deal effectively with canny, street-smart, wayward youth. As the psychoanalytic model took America by storm in the early Twentieth Century, there was hope that all the ills of mankind, including juvenile crime, might succumb to its curative powers. For good reason, Hope was the last to leave Pandora's Box, presumably because its blindness led to much evil in its own right. Delinquency and anti-social acts predictably defied the psychoanalytic laws of gravity and continued their crooked, maddening and expensive course. Disorders of conduct are, in fact, the most stable of all childhood disturbances over time. They are fiercely resistant to therapeutic intervention. But psychoanalytic students of the anti-social have at least been able to shed light upon the temperamental, developmental and family origins of these conditions.

The questions raised in working with delinquent, criminal children and youth lead one to the deepest ethical, religious and philosophical issues: the origin and nature of evil, social versus biological causes of crime, free will versus determinism, penal versus social/therapeutic programming, the age of criminal responsibility, and the malleability of human character. Debate over these questions resonates through and around our civic, religious and political institutions, opinions swaying to and fro with the passage of generations, historical events and the force of public outcry. For the clinician who enters this archive, the readings are often taken from St. Augustine's entry: "The innocence of children is the weakness of their limbs." With delinquent children the child psychiatrist must be simultaneously hopeful and pessimistic, being certain to differentiate harmless, transient anti-social acts from true criminal behavior and remembering that some delinquency is a symptom suggesting frustration or need rather than a sign of misshapen character.

A credible interpretation of delinquent acts is that they are thoughts or, especially, emotions converted to action. Hence, such acts are translatable if carefully observed. John, a handsome, blond, blue-eyed eight-year-old was referred by a colleague for assessment of his depression and school failure. This

bright, energetic child was appealing but not articulate. As with many children, words came to him with difficulty and feelings were inexpressible. He enjoyed chess and relished defeating me, often accurately predicting the number of moves he would need to bring me to my knees. Shortly after beginning therapy with John, I received an urgent call from his mother. He had been caught stealing in a local drugstore, much to her chagrin. I saw John later that day. He drew an odd picture of two mountain peaks between which perched a nest holding a bird with a wide, gaping beak. The mountains resembled breasts.

In taking a more careful history from John's mother, I discovered that his maternal grandmother had been in the terminal stages of cancer during the mother's pregnancy with John. She died when he was three months old. John's mother became clinically depressed before his birth and into the first six months of his life. John's stealing first appeared just prior to a parental vacation when he was six; it recurred a second time at age seven in similar circumstances when a two-week vacation without John was forthcoming. This pattern of minor theft clearly was kindled by the emotional loss of his mother that John experienced in infancy: his stealing reflected both a need for her and fury at the prospect of losing her again.

John's drawing portrayed, elegantly, a starving infant longing for a feeding that seemed unavailable. If it wasn't given it must be taken. The stolen objects were his just due, owed him by his negligent mother. "John," I said, "maybe we can figure out this stealing business together." As we both looked at his picture, I continued quietly, "When you were a baby your mom was very sad. Her mom died and she missed her; it was hard for your mom to take care of you so you thought she didn't want you, didn't love you." John listened but remained neutral. "And when she goes on vacation, goes away, those old baby feelings come back; you feel mad and don't want her to go. You need her and feel alone and scared when she is gone. That's when you steal." The light of revelation did not pass over my patient's visage. He heard but reserved judgment. But the pattern disappeared. John's basic character was not anti-social. His crimes signaled the breakthrough of feelings of loss and deprivation. The greater part of his development was sound, overshadowing, for the most part encapsulating, the scar tissue of a flawed beginning. With Danny the scar became a keloid.

Danny, a lanky fifteen-year-old boy, walked stoop-shouldered and had dark circles under his eyes. He rarely smiled. He chain-smoked Camels. His gray clothes matched the pallor of his skin, giving him the

older, somehow nautical look of a tired stoker from an O'Neil sea play. Danny had been arrested in the subway after breaking into the coin boxes of several candy machines. During his booking he had mentioned suicide often enough to be sent to my hospital. Wary and taciturn, he shared little that would open his life to me. He was an expert lock-picker and had cleaned out coin boxes for many months to generate cigarette money. Danny's family was poor, large and scattered. A wise teacher with whom I discussed Danny suggested that I ask him to teach me to pick locks. This sound counsel capitalized on the centrality of competence in any developing child or adolescent's life.

Pleased to have me as his student, Danny began to tell me of the depth, quality and longevity of his depression. Through most of his life, back to the earliest years, he'd had visions of his "insides" as an empty, pitch black hole, a hollow urn that carried death and despair. At its bleakest this mood was heralded by voices ominously calling out Danny's name in a threatening tone. It was at these moments that he experienced an almost irresistible urge to steal, the act itself partially relieving the bleak night within, turning black into battleship gray. Since theft was the cure, Danny had neither wish nor capacity to give it up and went on to bigger, better and more hazardous self-help. His habit had a life of its own and was a source of pride, not pain, as I learned from a master thief whose trade improved at the owner's peril.

Though Bonnie was as committed to crime as Clyde, until relatively recent times girls and women were in the criminal minority. The anti-social power of woman lay more often in promiscuity, pregnancy, shoplifting and the occasional, Medea-like act of passion. With many shifts in society, family life and equalization, sometimes fusion, of sex roles, more females entered the previously male-dominated, anti-social world. Greta, born in Germany during World War II, was a strikingly beautiful, tall, blonde adolescent who moved and spoke like a young Marlene Dietrich, scornful, seductive, hardened. Her father had served as an officer in the SS, absent, and almost unknown to his daughter. This association with Nazis and the Holocaust was discomfiting to me, stirring up my anxiety in her presence. Sexually precocious, Greta entered a torrid relationship at sixteen with a young Rabbi, a chapter in her life she committed to her diary that she left "forgetfully" in reading range upon the family kitchen table. What little remained of a tie to her father abruptly and violently ended. He arranged to send his daughter to America where more distant family members lived.

With family connections but no roots, Greta launched on a career of serious and dangerous acts including major theft, armed robbery and, finally, felony murder. In the company of a male companion, late at night, she attempted to rob a taxi driver at gunpoint. He resisted and Greta, urged on by her partner, shot him in the head. The death was ugly, the crime sufficiently clumsy that Greta was quickly apprehended. Defiant rather than remorseful, she seemed incapable of empathizing with the family of her victim or acknowledging the gravity of her crime. I saw her prior to sentencing. Entering my office she spied a Calla Lily, its green fronds wilting from lack of water. "I hope," she commented bitterly, "you care for people better than you care for plants." I guessed that her attention to the quality of parenting had been learned early and well. She shared little with me. Greta's lust for destruction ran deep, seemingly present since her beginnings.

Certain patients elicit fears in the examining clinician. One learns to take such visceral reactions seriously since they usually signal impulses that lie just short of action. Cory, a seventeen-year-old, exceptionally bright but failing high school senior, big as an NFL middle linebacker, wore black and well-worn, high-top work shoes, shorts and a dirty T-shirt. He was unshaven, sporting a buzz cut and chains: an American skinhead whose manner and appearance contrasted sharply with his verbal nimbleness. Silent and surly, he derided his school's concerns about his dangerousness in monosyllables. Cory scared his classmates and his helpless parents with his mutterings of murder, though he assured me that it was "all in fun." Gory drawings of knives dripping blood or guns pointed at victims had been found in his desk, leading to the referral. Of particular concern was my inability to connect with him and thereby effect any sort of restraint. He sympathized with the Columbine assailants whom he viewed as misunderstood outcasts crying out for help, trying to be "heard." Cory was dangerous. At some point this hulking, rageful, morally impoverished youth would snap, releasing into action the impulses just barely contained in his scribbles. I could only warn his school to watch closely and expel quickly with no margin for error—one strike and he'd be out. Cory planned to enlist in the military for a career that would, I supposed, legitimize his murderous impulses.

When I was in training, a young adolescent boy who had killed his mother was admitted to our hospital. Ordinarily he would have been a patient of mine or one of my fellow residents. But his crime was unnerving to us all, many still struggling with emancipation from ties to our own mothers, so a wise clinical director assigned an older, experienced clinician to his care. Years later I was asked to evaluate

Gill, fifteen when he shot and killed his mother. A pale, slight, bespectacled youth, he was soft-spoken and deferential. There had been no warning signs preceding the murder, which occurred during the evening of the day his father and older sister left to visit colleges. His mother had checked his homework with concerns about his failing grades just before the killing occurred. Interviews that detailed Gill's early years, family and school life, and mental state, both current and at the time of the crime, did not reveal any prior disturbance or obvious motive for such a grievous act.

Gill himself, almost apologetic, was at a loss to explain the matricide. Anger, much less homicidal fury, was foreign to his experience. "Tell me about your mom," I said. "She was a hard worker, a good mom." "Do you think she pushed you too hard at times?" "Oh no, I needed it to get my work done." "But you must have been very upset to kill your mom." "I guess so, I don't know." To his neighbors and schoolmates he was helpful, shy but not unpopular, quietly blending in. His father, when I spoke with him, was unable to provide clues to Gill's behavior, though he seemed to me remarkably lacking in grief over his wife's death. He was clear that violence and anger were unknown in his family. But my interview with Gill's older brother was theatrical, grim: after introducing himself to me, settling in his chair, he commented, with feeling, "I like guns, too, you know—they are so powerful. Their power makes them special, beautiful." He loved the touch of oiled, blue steel, but the source of this eerie attraction remained, despite many questions, out of reach.

Completing my contacts with Gill and his family, I could not enlighten his attorney regarding motive and future risk. Some weeks later Gill's father phoned me, in tears, to tell me that he could have shared more but was ashamed. In Gill's early years his mother had cruelly and repeatedly beaten her son for no reason his father knew; a passive man, he'd been unable to stop her. He wondered whether Gill might have harbored longstanding grudges that could explain this otherwise puzzling tragedy. He hoped I would understand his reluctance to share this crucial piece of family history. Clearly, it was enormously relevant. Yet myriads of children suffer extreme physical abuse and never kill anyone, much less their mothers. Our present explanatory models are flawed and incomplete in attempting to explain acts that are inexplicable.

Diego's public lawyer, in search of an expert to testify on his client's behalf, assured me that the boy was "nuts, a head case, certifiably crazy—you'll see." In the lock-up, where I talked with sixteen-year-old



Diego in a tiny office, the bright red flush of his cheeks, darting shiny blue eyes, and thick, tousled, blond-orange dyed hair lent him an imago somewhere between innocence and evil. All of his limbs, as well as his words, danced together in a state of agitation, never coming to rest. He fiddled with a glass paperweight on the desk between us, a missile waiting to be launched. I was careful to seat myself close to the office door. Diego's presence spilled noisily over into that of everyone he encountered, instantly provoking fear, anger and retreat. His loud, intense, unmodulated voice poured forth a rapid, steady stream of violent invective at his fellow inmates and the prison staff.

Diego's crime involved the sadistic murder of the grandmother with whom he was living. Prior to killing her, he had stolen silver, jewelry, cash and electronics, hoping to raise enough money to drive cross-country and rejoin his twenty-year-old girlfriend, who had parted with him in anger some days earlier. The theft of these items occurred while his grandmother was out shopping. She returned sooner than Diego expected, startling him and complicating his plans. Enraged by this turn of events, he waited at the top of the stairs, and as she opened the front door he emptied the clip of an assault weapon, some fifteen or more shots raking every part of her body. Taking her car, careening at top speeds, he headed west. He was stopped not far from the murder scene for reckless driving and, the murder weapon at his side, within hours was charged with his grandmother's murder, which he readily admitted.

Diego had been born into chaos. His mother, a drug abuser, left her husband and children without notice when Diego was three. His father, unable to care for his three children, placed them in foster care. In a series of foster homes over the next six years, Diego experienced repeated and severe sexual molestation, sodomy in particular, as well as brutal physical assaults from foster siblings. Already practiced in theft, fire-setting, and cruel treatment of animals, childhood markers of trouble to come, he now became a skilled, wily, sexual predator preying upon younger occupants of his foster homes. Pre-pubertal boys who have been sodomized inflict, with particular pleasure, the crudest acts upon others. Diego was no exception. He described, with obvious relish, his hateful, remorseless, childhood exploits. As for his grandmother, the meddlesome "bitch," she was too strict, too tight with money and, on the day of her death, a bothersome glitch in his plans. He had planned to kill her, just not at this time, but once started, he felt gleeful pleasure in watching his last blood relative, one who genuinely cared for him, writhe in agony, bleed profusely, and expire at his feet without a sound.

Diego met all the criteria of sanity in the formal psychiatric sense. His attorney was furious, certain that I, at least, was “off my rocker.” What I believed and told him was that his client enjoyed killing and that this pleasure was uninhibited by any signs of conscience or remorse, that he had virtually no control over his impulses. What he felt was what he did. Diego was, therefore, extremely dangerous to society and would remain so indefinitely. Since his prognosis was so poor, and since medication and other therapies were of such minimal use, I recommended that Diego remain in a locked facility for the foreseeable future. Medication and supportive counseling would comfort him but alter neither his character nor his dangerousness. While one could credibly account for Diego’s profile with a combination of biological and familial data, to me he was evil, a guiltless, sadistic killer who enjoyed taking lives, for whom the pleasure of destruction would always remain an inexorable force. Those who believe, as I do, that crimes of this nature and magnitude rely upon a free-standing capacity for evil may conclude that Eve’s apple, that bad apple, did not fall far from its tree.

It is, however, important to distinguish between basic evil and temporary error. Many years ago I served on the Admissions Screening Committee at Tufts University School of Medicine where I worked and taught for twenty years. The involvement of psychiatrists in the admission process was based on the presumption that our knowledge and skills would serve to identify and eliminate poor risks from the student body. One candidate for admission, a young man in his early twenties, deeply committed to a career in medicine, made a good contact with me and shared much that was personal. Like most of us, he was eager to talk if there was an ear to truly listen. His father had died when he was sixteen, a sorrow clearly still with him. He and his family had struggled to make ends meet and he had made it through college on scholarships and jobs on the side. Then, he said, he wanted to tell me something that might jeopardize his career. Would I inform the rest of the Committee or would this information remain confidential? I told him that I would have to use my discretion and reminded him that my mission was to serve the School, not him. Red-faced, squirming, he told me that he had stolen a motorcycle after his father’s death, an expensive Harley-Davidson that he claimed as his own. Our interview ended shortly thereafter. I thought about this young man’s life, past and present. I thought about the many candidates who had told me nothing of their misdemeanors, who had been alert to the politics of the process. I liked this man and knew fundamentally that he was not a criminal, that in fact he was of good character and long on determination. His theft seemed to me an act of restitution in the aftermath of his father’s death. I

recommended him for admission.

Fifteen years later, when we lived in the same community, he spied me on the street. He told me, with obvious pride, that he had become a surgeon and was now practicing locally. He thanked me for my confidence in him. I was not surprised, but I was deeply moved to think that his life had gone forward so well for him and for those whom he served and would continue to serve, making their care his life's work. It was a little thing; it was a big thing. A shot at life is a big thing.