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Five Points



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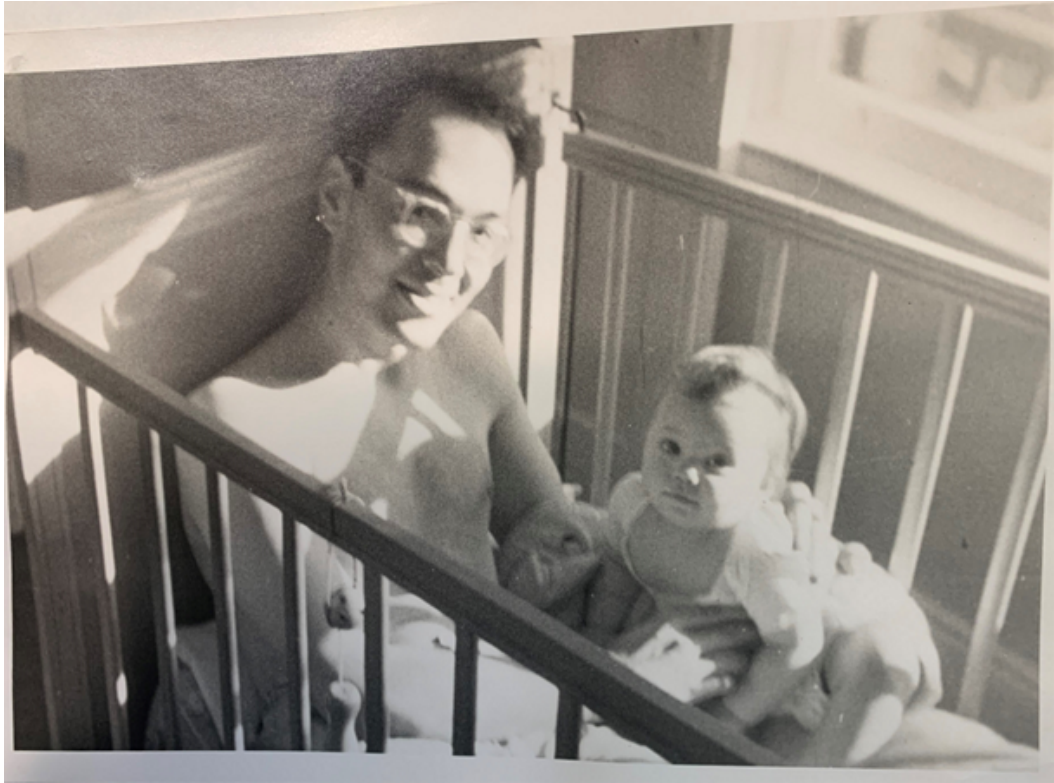


Photo courtesy of the author.

Martha Grace Duncan

Ward Eleven

PROLOGUE

New York City, 2015

It is now a broom closet, this place where I stand, so cramped that I press my arms tightly to my chest to avoid soiling my new silk blouse on the grimy walls. Entering the closet a few seconds ago, I stumbled on the vacuum cleaner, bruising my ankle, and now my feet squeeze themselves into a small spot between the vacuum and a dust mop whose cotton strands sprawl, unraveling, on the gray linoleum floor.

The last time I stood here, many years ago, this closet was a telephone booth where student residents of the International House in New York received their outside calls, often from a parent, as I did on that April morning in 1968. Scampering down the corridor on the fourth floor, I had no way of knowing that the news I was about to receive would profoundly alter my life, although not immediately—not that day or even that month but only over the course of decades.

It was my mother on the phone. She was calling from north of Santa Barbara, on the road to Morro Bay, with my brother and sisters. “Daddy’s dead, Martha,” she said without preamble. “He killed himself.” While she was talking, a loud noise erupted behind me. It grew louder and louder, becoming a cacophony, until I couldn’t ignore it. Turning to face the corridor, I saw a fellow resident of the International House banging his fists on the glass. The ferocious noise made it impossible to hear my mother, so I said good-bye to her and exited the booth, leaving the impatient resident to make his call.

Back in my room, I lay face down on the thin, brown and beige-striped bedspread. There was no question of my going to the memorial service, which was already planned for that afternoon. My family lacked the money for such a trip and, anyway, I wouldn’t have been able to get there in time. After a while, I decided that I might as well walk up to Columbia and go to my class—a seminar required for first year Ph.D. students in the political science department.

The weather must have been warm for April, because I remember wearing summery clothes: a hot-pink sleeveless blouse and a pink and white floral skirt—an outfit I would later condemn as a sign of my cold indifference or obliviousness to my father’s death.

It would be a year before I cried about his suicide, four years before I began, in therapy, to talk to someone about it. When I did begin to cry, I could not stop. It was as if I were fulfilling a prophecy quoted in Martha Wolfenstein’s *Death of a Parent* and *Death of a President*. Describing what might happen if someone could not bear a loss, a nine-year-old boy forecast:

They would cry and cry. They would cry for a month and not forget it. They could cry every night and dream about it, and the tears would roll down their eyes and they wouldn’t know it. And they would be thinking about it and tears just running down their eyes at night while they were dreaming.

So it was with me, both alone and in psychotherapy. I engaged in long bouts of paroxysmal sobbing that would not be comforted. At last, my therapist was prompted to say, “The solution is not in crying; you could cry forever.”

THROUGH THREE GATES

Seventeen years after my therapist spoke those words, I embarked on a journey to find out what happened to my father. By “what happened,” I mean not only his suicide but also why he declined so dramatically over the preceding decades. Seventeen years is a long time, but I couldn’t have done it sooner, and I’m glad I didn’t try. One reason is that, for many of those years, I didn’t have a job. Rather than working, I stayed in school—always my refuge—and I lacked the time and money for such a project. It was only after I finished my Ph.D., earned a law degree, and became a tenured professor of law that I felt safe enough to look back. I began my search for clues in the place

that represented the nadir of his life: Atascadero, a state hospital for the criminally insane.

*

Atascadero: A muddy place or a location where
carriages, cavalry, or people become mired.

Diccionario de la Lengua Española

Real Academia Española, Madrid (translation by author)

As my mother turned off San Rafael Road and pulled into the driveway at Atascadero State Hospital, a wave of disappointment swept over me. I had imagined that my father's hospital would resemble the asylums I'd seen on T.V. and in the movies—a romantic, palatial building like storied Bedlam, in England, or a Georgian structure with crumbling roofs and drooping balustrades, like Arkham, in the *Batman* series.

Atascadero, in contrast, was nondescript and official looking; its grounds were brittle and brown, its L-shaped structure long, low, and salmon-colored. The only features that jolted me, signifying a punitive instead of a therapeutic purpose, were the ominous guard towers overlooking the yard and the fences surrounding the hospital: cyclone fences, three times my height, edged with barbed wire.

My mother and I had driven one hundred and twenty miles north on Route 101 so I could see the place where my father had been confined in 1964 and '65. It was rare to be allowed to tour a psychiatric hospital, especially one like Atascadero, which was exclusively for people charged with crimes. But after numerous phone calls and letters, I had obtained permission, and my mother and I had an appointment to meet with a psychiatric technician named Karen Swangler to talk about my father and tour the facility.

Karen met us in the lobby with a friendly smile. A slender, attractive woman with brown hair and eyes, she was casually dressed in beige slacks and a cream-colored turtleneck. After shaking hands, she gestured toward a plastic-covered bench near the front door, suggesting we talk for a few minutes before beginning the tour.

"I've been reading your father's records," she said. "We had to order them from Sacramento. And I had to laugh, because I've read so many files that weren't very interesting to me, and this one was." Smiling, she twirled her brown hair around her finger.

"I've been looking forward to meeting you," she went on. "I told my

mom your father's story. 'We've got this interesting case at work,' I said. 'There's this man who was confined back in the sixties, and he really wasn't that mentally ill.'

She looked at me appraisingly. "I'm not sure how to tell you this," she said. "Your father wasn't really very crazy. I don't see your father as a typical crazy person." A strand of her hair fell over her cheek, and she pushed it behind her ear.

"Really?" One might think that a patient's daughter would have been pleased to hear this, but her statement diminished my trust in her expertise. After all, I knew that he *had* been seriously mentally ill, and I appreciated people who grasped the complexity of my father—the whole truth.

"Compared to the people I deal with," she explained, "he was high-functioning, intelligent, and amusing. We almost never see anyone who has managed to stay married for twenty years. He would have been a pleasure to come across in the course of my working day."

Turning to my mother, Karen said, "Your letters were outstanding! They were so detailed and interesting. They made a big difference in how the staff treated him."

"Oh, that means so much to me." My mother looked like she might cry. "You see, I called here once to ask if someone could let me know when Dick was getting out, because I was afraid of him. And the psychiatrist I talked to said, 'Leave him alone, won't you? You've done enough!'"

I patted my mother's arm through her black-and-white checked jacket. The sting of those words had stayed with her for thirty-five years.

Standing up, Karen showed us a small device she would be carrying on the tour. "This is our security," she said, laughing. It was the size and shape of a ballpoint pen.

"What does that do?" I asked.

"Well, it's not a weapon, but if I point it up there"—she gestured toward a corner of the ceiling—"someone will immediately come to our defense." The high-tech gadget hardly inspired confidence, and I couldn't help wishing Karen herself were bigger, like the muscular guards who had escorted me through a penitentiary, in connection with my job as a law professor, just a couple of years before.

Karen led us to a series of heavy gates with horizontal black bars. We went through the three gates together, waiting for each gate to lock behind us before the next one opened. We then walked down a long, wide hallway on a floor composed of linoleum squares in alternating gray and white. A

few patients walked past us, dressed in khaki coveralls with nametags. They moved strangely—as if they weren't in control of their bodies.

“Can I help you, dear?” said one of the men.

Put off by his familiar tone and leering gaze, I avoided eye contact while shaking my head and mumbling, “No.”

Karen had been walking in front of us, but now she stopped and looked back, scanning the hallway. “Where's your mother?” she asked sharply. Until then, Karen had exuded confidence, and I was surprised to see how quickly panic replaced her poise.

We found my mother around a corner, not far away. Later, she told me she had hidden on purpose. “I didn't like the way those men were looking at us.”

Karen's panic reminded me that Atascadero was not an ordinary hospital. My family members all called it a prison, despite my repeated reminders that it was, technically, a psychiatric hospital. Once, when they were visiting, my father had whispered to my sister Laurie, “In Atascadero, if the man two seats down gets knifed, you can't flinch, or you'll be next.”

“Could we see Ward Eleven, where my father's room was?” I asked.

Looking surprised, Karen hesitated but then nodded and led us upstairs. Like the floor below, this floor, too, featured long corridors where a few patients shuffled aimlessly, dazed looks on their faces. At an empty room, Karen stopped for us to peer in. The space was about 11 by 7 feet, smaller than some prison cells I'd seen. The furnishings were basic and functional: a bed, a sink, a toilet, and a short cabinet.

“Don't they have T.V.?” I asked. My father had loved watching *Gunsmoke* and *Have Gun will Travel* on Saturday nights.

“No.”

“Radio?” While working in his workshop, my father had kept the radio on for company, listening to music, news, or Sunday morning sermons.

Karen shook her head.

As we continued down the wide corridor, Karen showed us the rooms designed for music therapy, arts and crafts, and graphic arts. All were empty. “A year and a half ago, a patient killed a staff member here,” she explained, “so they've cut back on patient activities.”

I would have liked to see the cafeteria, which Karen said was a dangerous place at mealtime, and the movie room, where the patients had the option of watching films two nights a week. However, Karen said, “I'm not authorized to show you more.” She led us back to the first floor, where

we proceeded through the same barred gates we had entered about fifteen minutes earlier and returned to the bench in the lobby.

Turning to me, Karen asked a question she had obviously been saving, “How did you know your father was in Ward Eleven?”

I checked the knot in my navy-and-white polka dot scarf. It was my mother’s, actually; she had let me borrow it to wear with the navy suit and white blouse I had chosen for the trip. “I have the records,” I said.

“You have the records?” Karen repeated. “That’s amazing! How did you get them?”

“Well, the medical-records officer declined my request,” I said. “But then I called a different person, and he promised to release them if I provided certain documents: my father’s death certificate, my own birth certificate, a letter from my mom, and a letter from my psychoanalyst. And you know what is strange?” I smiled. “After initially rejecting my request, in the end, they sent the originals!”

It was true. I remembered the moment I got them, early on a raw, rainy morning in November. I had walked into the office of my analyst, Dr. Mickey Nardo, and he handed me a large manila envelope. Normally, I would have lain down immediately on the chocolate-colored leather couch and started to free-associate. But on that day, my excitement about the records overwhelmed my usual willingness to follow the rules.

Instead of lying down, I remained seated on the edge of the couch, pulling a sheaf of papers from the envelope. There were about twenty pages in all. They were fragile, in different colors of onionskin: white, yellow, and pale blue—depending, I guessed, on the type of report on the page. Thickly cluttered with single-spaced typing, each page had two holes punched in the top margin. Some of the holes were torn, and it gave me an odd sense of pleasure that some responsible person had taken the trouble to affix small white donuts—the self-adhesive kind I remembered from junior high—to repair a few of the fraying holes.

Dr. Nardo told me he had already skimmed the records. He felt it was only honest to do so because, after all, he had used his status as an M.D. and a psychiatrist to help me get them.

“What did you think?” I asked.

“Frankly,” he said, “I was amazed. They had ... how many people interview him? A Stanford psychiatry professor...?” Pausing to take a sip of coffee, he went on, “They didn’t simply say, ‘This is a forty-four-year-old man with delusions of persecution.’ I mean these were long reports for a

state hospital; there were a lot of *words*.” Dr. Nardo, I knew, had run the psychiatric emergency room at Grady Hospital, in Atlanta, so he had read hundreds of such reports.

I lay down on the couch but kept clutching the records, holding them awkwardly over my eyes and continuing to read. On a page with a long report, I glimpsed the sentence, “Whatever elements of truth there are in his story (and there may be several)....”

“Wow!” I burst out. “Did you see this?” I turned my head toward my analyst, but since he sat behind me, I could only see one of his feet, clad in a sock and moccasin, swaying in the air. “They even seem to think there might be some truth in his claims about Dr. Scull,” I said. Dr. Scull was the Santa Barbara physician whom my father had accused of molesting children. Seeking proof of his accusations, he burglarized Scull’s office—a crime that led to his own confinement in the high-security mental hospital.

But Dr. Nardo didn’t find the psychiatrist’s statement remarkable. “It’s well-known that there’s a kernel of truth in every paranoid delusion,” he said. “Informed people know that a paranoid person does not invent things out of whole cloth. The paranoid is noticing real things; it’s the *meaning* he gives to them that’s distorted.”

After a minute, he modified his statement. “I do think the psychiatrists at Atascadero were really looking into this. They were having some trouble; there’s drama there.”

...

Later that day, reading the records alone in my quiet office, I grew increasingly elated over what I found. That so many people had assessed my father, that they were highly qualified, and that their evaluations were not boilerplate or scanty, but rich and nuanced—all this made me glad I had persevered. Besides the bureaucratic obstacles, I had also needed to conquer my own reservations, which, in retrospect, seemed absurd. *How could I not want this?* I asked myself.

Of course, before receiving them, I had no way of knowing what the records would contain. If anything, movies and books about mental hospitals would have led me to expect the worst. For instance, in graduate school, we had studied Michel Foucault’s *Madness and Civilization*, which describes the transformation that occurred at the end of the eighteenth century, when “lunatics” and “madmen”—no longer considered fully human—were confined in asylums, subject to what Foucault calls the

“merciless language of non-madness.”

Another book we’d studied was Erving Goffman’s classic *Asylums*, which is based on extensive field research in St. Elizabeth’s Hospital, in Washington, D.C. Goffman specifically criticizes the psychiatric records for omitting “occasions when the patient showed the capacity to cope honorably and effectively with difficult life situations.” Also, he says, the records do not present a “rough average or sampling of his past conduct.” Rather, they pull from the patient’s life course incidents that have “symptomatic significance”—where he has “shown bad judgment or emotional disturbance,” which “show the ways in which the patient is sick and the reasons why it was right to commit him and is right currently to keep him committed.”

Perhaps this is true of most psychiatric hospitals. If so, then my father received the “Cadillac treatment.” For his records show that the psychiatrists at Atascadero acknowledged his “honorable and effective” comportment and appreciated him for it. Thus, in an early progress note, one of the psychiatrists, Dr. Reimringer, writes, “This patient is very helpful to the other patients. He is polite, pleasant, and cooperative, and whatever he does, he does well.”

Whatever he does, he does well. Notwithstanding the setting, the note made me smile with pride, bringing my father back to me.

There were other affirmative comments in the progress notes. Two months into my father’s confinement, Dr. Reimringer observes, “This patient has adjusted well to the hospital routine.” Later, near the end of his five and a half months’ stay, he writes that my father “continues to be friendly, cooperative, and pleasant.”

In addition to his purely positive qualities, another psychiatrist highlights a more ambiguous trait. “He is a lawyer,” this doctor writes, “and likes to explain things fully.”

I laughed out loud. As a child and teenager, I had often been the captive audience for such “full” explanations. Sometimes, knowing that he was going on too long, my father would interrupt his discourse to say in a wry tone, “You may take notes.” I knew exactly what the doctor meant.

Besides the assessments of various psychiatrists, the records contain the report of a psychologist who interviewed my father and gave him tests, including the California Test of Mental Maturity. After reporting my father’s I.Q. to be 147, he goes on to say, “The general impression is that of an extremely brilliant but highly eccentric individual.” This note, too, made

me glad. Despite my father's low status as a mental patient, an authoritative figure had recognized his superior intelligence. So far, none of the file was written in that "merciless language of non-madness."

While they appreciated my father's brilliance, friendliness, and concern for other patients, the psychiatrists and psychologist focused primarily on his mental illness. One psychiatrist makes note of his suspect language, such as the "forces in the community," the "plot" against him, and the efforts to "railroad" him and get him out of town. Describing in detail my father's persecutory delusions, they reach a degree of consensus about his diagnosis. For instance, one psychiatrist lists his illness as "paranoid reaction; paranoid state," while another says that he is "either a pure paranoid or, more likely, a well systematized paranoid patient . . . or a paranoid schizophrenic—more paranoid than schizophrenic."

The only point on which the psychiatrists disagree—it is a big one, to be sure—is whether my father retains a potential for violence. This disagreement—between Dr. Wagner and Dr. Reimringer—is the reason they call in Dr. Rosenbaum, the psychiatry professor from Stanford, for his opinion. After meeting with my father for thirty minutes, Dr. Rosenbaum writes that he cannot give a definitive answer. The patient, he says, has allegedly made threats, and if the allegations are true, then "the possibility of violence would remain."

The psychiatrists had not resolved their disparate views of his dangerousness when my father—taking advantage of the Community Mental Health Act, passed in 1963 as part of President Kennedy's New Frontier—obtained his release. As it turned out, the doctors who thought he might still be violent were right. Less than three years after getting out of Atascadero, my father killed himself.

...

By the time my mother and I said goodbye to Karen and left the hospital, the sun had fallen below the horizon. Fog had rolled in, shrouding the building, the cyclone fences, and the two watchtowers. All the lights had lost their precision, spreading out into fuzzy halos. The facility that had appeared utilitarian and official when we arrived now seemed ghostly and mysterious.

My mother and I got in the car. We drove in silence for a while, allowing my mother to concentrate on finding the way back to Route 101.

After we turned onto the highway, I asked, “Well, what did you think, Mom?”

When she didn’t answer, I thought she must be feeling sad, so I joked: “Well, it wasn’t *The Snake Pit* or *One Flew over the Cuckoo’s Nest!*”

“No,” she said. “It seems a little better now. When I brought the three kids here, it was horrible, *horrible*. Just seeing Daddy in this place that was like a jail....”

“I should have been with you,” I said. “I wonder why I wasn’t.”

“Well, you were away at school, and I wanted to protect you; I certainly didn’t want you to get another bleeding ulcer.”

I’d forgotten about that. In August of the year my mother calls “terrible”—when my father was showing up at the house, threatening suicide—I had a bleeding ulcer. Throughout the preceding spring, while in college, I had suffered from acute pangs of hunger about an hour after every meal. Studying in the library, I would nibble on a muffin and press my tummy against the table, trying to lessen my pain. After the academic year ended, while home on summer vacation, I started fainting, which my mother took to be a sign of the flu. Then, when I was sleeping in her room one night, I woke up vomiting. She noticed blood and called the doctor.

He came—reluctantly—to our house. It was the middle of the night, and he was covering for our regular physician. But after taking my pulse, he immediately telephoned the hospital, lifted me up in his arms, and carried me to the car. My sister Laurie says she remembers that night—how flat my fingers were and how the doctor carried me. She remembers thinking, *Martha wasn’t even here, and it still affected her.*

By the time we reached the emergency room, I had lost three liters of blood. The doctors gave me transfusions right away and kept me in the hospital for a week, treating me with pills to reduce the physical manifestations of stress. For the next six months, following the doctors’ orders, I drank Maalox three times a day and restricted my consumption to a bland diet. This treatment succeeded in curing my ulcer; still, it was close: my doctors have told me that I was lucky; I could have died.

...

My mother and I continued driving in silence. We had passed Pismo Beach and veered away from the ocean before I spoke again. “Mom,” I said, “Laurie thinks they broke Daddy’s spirit at Atascadero. You don’t think so, do you?” Those words, “broke Daddy’s spirit,” always made me cringe.

It was unbearable to think of anyone crushing my father's optimism and playfulness.

"I don't know," my mother said, sighing again. She didn't want to talk about it, but selfishly, I persevered: "Laurie thinks he wasn't the same after getting out," I said, "that he was too passive." My mother, not answering, stared at the road.

My father moved to Morro Bay after his release, so I didn't see him often. But I'd noticed that in his last letter to me, he didn't sound like himself. Usually, he was exuberant, confident, and full of projects, and in that letter, he seemed too normal and resigned.

I shifted my gaze from my mother to the view outside. The fog had lifted, and although it was twilight, I could see the pasture and dimly make out the cows grazing or lying in the grass. Most of the herd was far in the distance, but on my side of the car, quite near the highway, one spotted cow and her calf traversed the field, the calf trotting alongside its mother, trying to keep up.