

## DOUBLE STANDARD FOR THE SEVERELY MENTALLY ILL

Imagine the unthinkable: your autistic child bangs his head to the point of brain damage, bites off his fingertips, pulls out his teeth, vomits food to the point of starvation, bites a hole through his cheek, bites off part of his tongue, scratches his heel to the point of blood and bone infection, cuts off his earlobe with a scissor, runs into moving traffic, punches his eyes causing detached retinas and blindness, or pulls out his hair to the point of baldness.

Suppose, too, your child has been to the best residential special education schools available. They tried drugs but these sedated him to the point where he slept all day, fell face first into his food and couldn't even recognize you. They restrained him, put him in a time-out room, subdued him by force and even placed him in psychiatric hospitals. Nothing worked.

Suppose he is now in his third special education school. The first two, unable to treat him, expelled him. Today his school calls to say that he has injured too many staff members. The school demands that you pick him up immediately or they will place him in a psychiatric hospital or state institution for the retarded.

At the last moment a friend tells you about a school that successfully treats children like yours. It takes them off drugs and tries a highly structured reward system at first. If rewards alone don't work, after they have been tried for an average of one year, the school supplements them, if parents give their prior approval and if a judge gives an individualized authorization, with a harmless two-second skin shock to the arm or leg in response to specific problem behaviors.

You visit the school and try the skin-shock. It feels like a hard pinch and has no negative side effects. It is used only once a week on average and for harmful behaviors such as self-mutilation and aggression. You find the children well protected by a highly trained staff and a 24/7 video monitoring system. You learn that many children improve so much with this therapy that they eventually no longer need it. You decide to ask your special education director to place your child in this school.

This conversation might then ensue:

*Special Ed Director: "It is inhumane to administer pain to a handicapped child!"*

You: "Something is not inhumane just because it involves pain. What about dentistry and surgery? My son endures far more pain, as result of his self-abuse and all the attempts to subdue him by force that he has been subjected to at other schools, than he will receive from a few mild, two-second skin shocks."

*Special Ed Director: "Why are there so many other autistic children that do not need skin-shock treatment?"*

You: "Every child is different. Many autistic children don't harm themselves or others. Mine is one of the unfortunate few who could maim or kill themselves through self-abuse."

In June 2006 and again in January 2007, the Board of Regents approved regulations that make it nearly impossible to provide this treatment and that forbid it entirely for new students as of 2009. The regulations were stimulated by a "controversy" that was manufactured by one student's mother and her lawyer, who made reckless, irresponsible and unsubstantiated allegations. Both the Regents and Education Commissioner Mills refused to meet with the parents and acted without ever listening to them.

Fifty-one parents have sued in federal court to block these regulations. On three separate occasions, the judge granted a temporary restraining order allowing the treatment to continue until a trial is held. Now, however, a new bill is pending in Albany that would completely ban the therapy.

Of 26,000 New York special education students, only fifty-five have been receiving mild skin shock as a court approved therapy for life-threatening and otherwise harmful behaviors that have resisted all other treatments. Fifty-five mentally ill people who have no political voice are the Regents' victims and fifty-five will suffer if the bill to ban aversives becomes law. For them, a future of padded rooms, life-shortening drugs, and straightjackets awaits.

To deny a sick child proven life-saving treatment is cruel and inhumane. If the child had cancer or AIDS, instead of potentially fatal

behavior problems, and a powerful regulatory body banned the only treatment that worked, the public and the press would clamor for their heads. This is a double standard for the mentally ill. They deserve better at the hands of the great state of New York.

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