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Section: PERSPECTIVE

The terrible dilemma of parents of mentally ill teens: THE MORALIST

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What are parents and teachers supposed to do when children are dangerously out of control? Virtually all social workers and psychiatrists tell parents whose aggression-prone adolescents threaten imminent violence the same thing: call 911. But calling 911 could get your sick teen killed.

A few months ago a Willingboro police officer shot a 15-year-old boy who was threatening staff and fellow students with scissors at school, never mind that it was at a special school attended by children with emotional difficulties. Witnesses say the boy ignored numerous requests to put down the scissors; police fired in response to his aggressive gestures.

On Oct. 29, a mentally troubled youth was shot and killed by a Philadelphia police officer. This time it was a 16-year-old wielding a clothes iron. The officer was responding to a 911 call placed by Ronald Timbers' frightened mother. On one account, police arrived on the scene as Timbers, armed with a knife, struggled with his mother. Timbers put down the knife but picked up the steam iron. What effort was made to subdue Timbers, a ninth-grader who attended an alternative special needs school, with non-deadly force? What happened to pepper spray and stun guns? Tasers can kill, but bullets to the chest and abdomen more surely will. Even precious wild animals get the benefit of a net.

The Philadelphia scenario was repeated in New York City on Nov. 12, when a police officer shot and killed an 18-year-old resident of Bedford-Stuyvesant armed with a hairbrush. Khiel Coppin, who held a knife in plain view and who misled police into thinking he concealed a gun under his shirt, had a long history of mental illness. Police responded to an urgent 911 call from the boy's mother. She had been seeking medical help for her sick son all day on the day of the shooting. She said Khiel had not taken his prescribed antidepressant and antipsychotic medications. Reports suggest Khiel may have deliberately misled and taunted police because he wanted to die.

It's a myth that everyone diagnosed with bipolar disorder or schizophrenia is seriously suicidal or violent. Yet common disorders of mood, thought and emotion may be accompanied by irrational acts of violence and self-injury. The Diagnostic and Statistical Manual (IV) used by behavioral health specialists to classify mental disorders recognizes a number of disorders associated with other-directed aggression in adolescents, including intermittent explosive disorder, oppositional defiant disorder and conduct disorder.

Sick kids get shot during acute episodes of mental illness because police respond to them much as they respond to routine evil-doers. Shooting a teenager is always a tragedy: young life lost and unredeemed. But shooting teenagers whose antisocial acts stem from sick minds is doubly tragic.

Consider the problem from parents' perspectives. When aggressive bipolar children are 8 or 9, their parents may feel they don't need the police. They are stronger than their children. They can outrun them, disarm them. Average-sized parents can place their explosive children in safe therapeutic holds, for an hour or two if necessary, until a storm of violence subsides. Parents can also compel young children to take medications that reduce the frequency and severity of loss of self-control. Parents can strap a feisty little kid in the back seat of the family car and hold him still all the way to the hospital.

Parents of mentally ill children dread the teenage years. Parents become powerless. They can no longer

handle their aggressive mentally ill charges. They cannot force medication down their throats or decide on their own that it is time for a trip to the mental hospital. (The age of consent for voluntary mental health hospitalization and medication in Pennsylvania is a surprisingly young 14; in New Jersey it's 18.)

Teens with mental illness should not be permitted to maim or kill their families, classmates or police officers. Their social workers, therapists and physicians deserve safety, too (I once observed a county psychiatrist, paid to evaluate mentally ill children, run out of a room to seek safety when a tall teenager shouted at her using a curse word.)

But surely law enforcement and mental health specialists could put their heads together to come up with a protocol for subduing out-of-control teens and getting them to a hospital. Mental illness-specific techniques of conflict de-escalation should be in every law enforcer's tool box, along with techniques for disarming a person in possession of non-deadly weapons, like clothes irons. Non-lethal weapons should be preferred when responding to mental health emergencies. Safe transport of an out-of-control teen may require handcuffs or other physical restraints, to be sure. Officers will need patience to deal with teens who insult and curse; and physical protection against those who intentionally spit or urinate.

Families who hear about the recent spate of police shootings involving youth with mental disorders will avoid calling police. Risking trauma and injury, families may live with extremes of violence, out of fear that calling 911 could spell death for a loved one.

I have witnessed police in my community display compassionate firmness in responding to 911 calls reporting a mentally ill child. The child in question was hurling furniture at his parents (in one case) and holding a butcher's knife to his own throat (in another). The police cleared the area; listened to the parents describe the child's history of mental illness; coaxed the knife-wielding boy out of his hiding place in his home; questioned him about the knife; talked him into sitting on the ground; hand-cuffed him; let him have a drink of water; placed him in a police car, and took him to the hospital. The parents followed the patrol car to the hospital in their own car, and took charge of the medical intervention.

Strong-armed but humane treatment of a sick child is painful for parents. But this is about as good as it gets. And this is how it is supposed to work - parents and police cooperating in the best interest of the teen and public safety.

Virginia Tech and Columbine scenarios aside, killing a mentally ill teen has got to be overkill in just about every case. Shooting, which police say always means shooting to kill, is avoidable with adequate information, training and tools.

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