

Stranger Truth: A Case Study

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Abstract

This case study chronicles the details of one particular doctoral candidate and the trials and tribulations faced during the course of his degree attainment. Elton was a very bright young man. However, many demons haunted him. He battled dyslexia, Attention Deficit Hyperactivity Disorder, Bipolar I Disorder with psychotic features, Generalized Anxiety Disorder, and Obsessive Compulsive Disorder. As if this was not enough, he found himself in an abusive relationship with a significant other. His circumstances and challenges were never presented to faculty until Elton's world came crumbling down around him one summer. All at once he faced exposing his deepest, darkest secrets and the possibility of being permanently removed from his doctoral program.

Keywords: higher education, mental illness, policy, student services

"Truth is stranger than fiction, but it is because Fiction is obliged to stick to possibilities; Truth isn't." – Mark Twain (n.d.)

Elton Thomas was a forty-two year old African-American doctoral student in a Texas university doctoral program in Educational Leadership. He was also the Director of Global Education at a Texas community college. The doctoral program was situated in the town where Elton worked. He was new to the area. He moved to Texas from Los Angeles a year prior in order to be with his partner with whom he had been in a long distance relationship for the past year. He began his job at the community college the same time he began the doctoral program. He knew doing the two would be a challenge – the college's global education department and the university's doctoral degree were brand new programs that would require a lot of his time and attention.

In the past, Elton had a hard time focusing due to multiple psychological disorders and learning disabilities. He had Bipolar I Disorder with psychotic features, placing him closer to Schizophrenia on the bipolar-schizophrenia continuum. He was also diagnosed with Generalized Anxiety Disorder and Obsessive Compulsive Disorder (OCD). He was diagnosed with two learning disabilities as well: dyslexia and Attention Deficit Hyperactivity Disorder (ADHD). He came from a family with a long history of mental illness on both sides of his family including his mother who was clinically depressed and his father who was schizophrenic. Despite his multiple diagnoses, Elton considered himself lucky. He had not burned down his home, shot his mother, hung himself, walked the streets naked or spent the better part of his life in a straight jacket as did some of his relatives. He had, however, dropped out of two masters degree programs before he decided to enroll in Bay Area University's online program in Masters of Science in Distance Education, which he successfully completed two years before entering the doctoral program, hence his passion for online learning.

Elton was confident he could complete the doctoral program, but he was not 100% sure. He believed in self-fulfilling prophecies to the extent that one could control his or her own thoughts, which, without medication he could not do. The last time he tried to control his own thoughts, he was involuntarily confined to a mental institution. According to the Lanterman-Pertis-Short (LPS) Act of 1967, codified in California Welfare and Institutions Code, Section 5150, a peace officer or health professional can involuntarily confine to a mental institution any person who, as a result of mental disorder, poses a danger to himself or others (California Hospital Association, 2013). Without medication Elton posed a danger to himself, with it no one could tell.

His mental collapse came during the last semester of his second attempt at graduate school. No one knew this, and no one knew of his whereabouts. He was administratively withdrawn - dropped - from his masters program for not showing up to class, and the school did little to investigate his disappearance. After he was released from the hospital, he emailed the program's director (because he was too terrified to call) to explain where he had been. Although she was sympathetic to his situation, she denied his petition back into the masters program. Maybe she knew he would relapse, which he did six months later. This time, instead of being committed to a hospital, he was homeless.

That was five years ago. If he said he did not worry that it would happen again, he would be lying, but he did not disclose his mental health issues when he applied to the doctoral program because for him they were no longer issues, at least not pressing ones. For the past five years, he had taken his medications religiously, believing it was only through God's grace that he was still alive after buying medications on the black market when he was unemployed and uninsured after getting off the streets of Hollywood.

With medication, Elton could control his thoughts, but not all of them all of the time. The average person has 70,000 thoughts per day of which it is estimated at least half of them are negative (UCLA Laboratory of Neuro Imaging, 2008). Exactly how many of his thoughts he actually controlled, Elton did not know; but he knew that some of them were definitely not his own. Around age thirteen Elton began having auditory hallucinations. In other words, he heard voices. *Hears voices* would be more accurate, since they never went away. At best, he could quiet them down. With 150 milligrams of lamotrigine a day, he could control, mostly, how loud and how long they stayed.

Despite the voices competing for his attention (or perhaps because of them) by the time he reached high school, Elton considered his hearing a gift. Dyslexia, ADHD and now the voices made reading difficult. He learned best by listening to people talk - to his teacher, his classmates and even himself. Except, at that age, reading aloud was not allowed and silent reading was beyond complicated. Unable to read for more than a few seconds at a time, he listened for the text embedded in classroom discussions and the side conversations going on inside his head and around him. In four years, he heard just enough to make valedictorian.

After four more years, he had heard enough of the voices. In high school the voices kept him company, in college they demanded and competed for more and more of his attention. Shushing them all day while he tried to do his homework wore him out, and he was grateful for the reprieve not being able to pay attention to anything for very long afforded him. They - he had still not yet figured out who "they" were - criticized him a lot, especially when he had to write a paper, which is something he had not had to do much of in high school. When he did, he memorized the text he heard in his head and merely repeated the conversation on paper. At the Ivy League school he attended, there was more than one text in each class, none of them related, all of them long, and keeping track of all their conversations plus holding 10-20 page papers in his head all at once was all he could handle. He managed, barely, to graduate from college in four years with over a 3.5 grade point average. However, his greatest feat was not maintaining his GPA, but keeping secret his secret - that he never read a book the whole time and that he was slowly losing his mind. By the time he entered his doctoral program, his mental struggles and learning disabilities were no longer secret, but, as with his sexuality, they were not obvious either. And, as with his sexuality he only told people if they asked, and nobody ever asked about those kinds of things in this part of the "Bible belt", least of all the program's admissions committee.

He tried to clue in the admissions committee by alluding to his family's mental health history in his personal statement and interview without speaking directly of his own. He half hoped they would figure it out. Perhaps they did and needing more time to make up their mind explained why he was one of the last candidates offered admission. Less than a year after he was admitted, Elton found himself reapplying to the doctoral program. In fact, he was petitioning for reinstatement, in other words, pleading his case. This time he left nothing out.

He had been kicked out of the program for failing one of his summer courses. According to the program's written policy, academic dismissal occurs:

1. When a student at the graduate level earns a grade point average of less than 2.0 in any term.
2. When a student at the graduate level earns a grade of "F" in any course.
3. When a student at the graduate level is admitted on probation with conditions and fails to meet a condition.
4. When a student at the graduate level who is on academic probation during a term would again be placed on academic probation under the provisions of academic probation set forth above. If, however, the student's grade point average for the term is at least 3.0, he or she will continue on academic probation.

He escaped dismissal by the first clause because he received an *A* in the second class he took during the accelerated term, giving him a GPA of 2.0, not *less*, but that fact made his case

even more confusing. Why, and better yet, how did he perform so well in one class and completely fail the other?

The question of “How?” was an easy one. Elton completed all his work for his “Organizational Theory” class, the one he passed; and according to the instructor, Dr. William Ball, it was some of the best reflective written work he had seen that semester. That was not the case in his “School Reform” class. According to that instructor, Dr. Francine McClain, Mr. Thomas earned an *F* because he failed to turn in his final paper on time. In fact, he turned in it two weeks after the specified due date, even though the syllabus clearly stated that no late work was accepted. And he failed, in fact, to arrange a conference with the professor prior to the start of the course to discuss approved accommodations, all of which is clearly spelled out in the course syllabus. Elton did not argue the facts. He confirmed everything Dr. McClain said. So the question of “Why?” was left up to him to explain and for a reinstatement committee to decide if he were telling the truth (which, consciously or unconsciously, is the first decision such committees make) and, assuming they believed him, if his circumstances were compelling enough (for which there were no objective measures) to warrant letting him back into the program. Elton told them, first in writing, as was required (which, given his psychological and learning disabilities, posed a hardship), and again at the mandatory hearing. Luckily, he did not have to make the 350-mile trip (one-way) from one school to the other to be heard which the school’s normal policy

Quiet as it’s kept, Elton’s story was not normal, although “normal” was not a call he felt qualified to make. He had this to say for himself:

I have dyslexia, Bipolar Disorder Type I with psychotic features, ADHD, OCD and Generalized Anxiety Disorder. All of these conditions impact my learning, particularly my ability to read and write. I was diagnosed many years ago, and I am currently under a local psychiatrist’s care. The impact of these conditions on learning is well documented in research; and I display most of the known symptoms including tremendous difficulty sustaining attention, comprehending written text, writing, following instructions and completing tasks that require even moderate mental effort.

Fortunately, I take several medications to treat these conditions. Unfortunately, I have competing disorders, and I can never be medicated properly for one condition without great risk of adversely affecting the other. Thus, all of my medications must remain below what is normally prescribed. And, unfortunately, I did not apply for accommodations because I was ashamed and afraid that, if obtained, my degree would mean less. It was not until I was in the accelerated courses, which I had never been in before, did I realize that I needed the accommodations.

That realization itself, and the timing of that realization, late, towards the end of the course, triggered a severe anxiety attack and obsessive-compulsive episode, which, you may or may not know, drives one to run and hide, fearing physical harm and retribution for doing something wrong (in this case not turning in my work on time) in order to save oneself. The danger, unseen by others, is real and palpable. It was not until I finished my paper that I felt safe enough to come back.

Fearing that was not compelling enough, Elton then told them what he thought no man his size, his age, or his color should ever have to admit. That same summer and for six months

before that, he was being beat by his partner, terrorized daily in fact, until he was forced to go literally, beyond his own psychologically-induced escape, into hiding. It would have been a fact worth debating among the reinstatement committee, if were not supported by evidence from the police and the psychiatrists who attended to him during that time.

There it was, a truth stranger than fiction, but the truth nonetheless. The question then became, not was it enough, but was it *too* much for an institution to bear?

Questions

1. Should Elton have fully disclosed his psychological disorders in his application to the doctoral program? What are the implications for doing so or not doing so?
2. To what extent should colleges or universities go to find out what happened to students who fails to show up for class, disappears and apparently drops out?
3. When are administrative withdrawals ethical or unethical?
4. Doctoral programs base their decision to admit or reject an applicant based on their perceived ability to contribute the field's research literature. Should a student's known psychological issues be part of the formula?
5. Should a student with psychological disorders be admitted under the school's diversity policy? In other words, should universities consider psychological disorders a diversity category like race and gender?
6. Ironically, the course Elton failed was "School Reform". Is this case cause for consideration for an institution about how it handles students with psychological disorders, and if so, what?
7. Reinstatement committees' decisions are typically more subjective than the admissions committees' decision to admit the student. Should reinstatement committees be comprised of the same members who made up the admissions committee?
8. Some institutions and states view the syllabus as a written contract. Do you think there should be room for negotiation after the contract is published, and if so, when and where should those negotiations take place?

Mental Illness

The term "mental illness" makes reference to the collective body of all diagnosable mental disorders. The Centers for Disease Control and Prevention reports (2011) that the economic burden of mental illness in America was around \$300 billion in 2002, and about 25% of U.S. adults have a mental illness. Additionally, 50% of the general population will experience mental illness at some point over the course of their lifetime. The National Alliance on Mental Health published a study in 2012 specifically focused on the needs of college students living with mental health issues.

These issues are vitally important because colleges across the country are reporting large increases in the prevalence and severity of mental health conditions experienced by

students attending their schools. This is good news for those living with these conditions since higher education is the foundation for securing stable employment and achieving financial independence. At the same time, it places pressure on schools to provide the services and supports that are necessary for these students to stay in school and to achieve academic success. (Gruttadaro & Crudo, 2012, p. 4)

Concluding Remarks

Graduation rates are a key piece in the ranking of universities around the country. It makes sense that colleges and universities would want to have mental health services readily available to help assist and retain students with mental illnesses, since they are so widespread. It appears, however, that many students perceive there to be a stigma attached to being identified as one with a mental illness. The truth is students cannot receive accommodations without disclosure, and the fear of this disclosure is simply too great for many students. Kadison and DeGeronimo (2004) implied that in addition to the typical developmental worries of college students (identity concerns, changes in lifestyle and living arrangements, and relationship issues), today's students are forced to make good grades, keep jobs, and be involved in college life. On top of that, the financial realities of a college education can be extremely stressful. These issues are compounded when college students are minority, international, first-generation, or immigrants. The college experience for these students may mean handling new forms of discrimination, an absence of role models, and high expectations of their family, or for many no family support at all. There is no doubt that in order to retain those students with mental illness, colleges and universities are going to have to find ways to assist these students.

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