

BEDLAM
Final script
January 23, 2020

Verité of activity in ER

DR. MCGHEE: Psych ER, this is Dr. McGhee

NURSE: Did you promise to stop screaming and just relax? Thank you.

0:00:30

VOICES: ... call a code

NURSE: First med unit, 114...

DR. MCGHEE: Psych ER, can I help you?

VOICE: Lock me up, bitch.

0:01:00

DR. DIAS: You made a threat with a gun. You have a history of mental illness. You admittedly haven't taken your medication for a very long time. You haven't really been completely cooperative with the police. Sir, I'm going to need you to take some medication before I can...

VOICE: Oh, I don't need the medication.

DR. MCGHEE: He's a benzo-dependant, alcohol-dependent, he's gonna be a nasty withdrawer here.

DOCTOR: How many times have you been in psych hospitals?

00:01:30

DAVID: A bunch, like forty-something.

DOCTOR: Where do you normally go to try to get help?

DAVID: Just wherever, nobody knows where to go.

DR. SNOWDY: My name is Dr. Snowdy. I'm a psychiatrist here. Maybe you can tell me a little bit about how you came to be here today.

MARIANA: Well, I had suicide thoughts.

DR. SNOWDY: Oh my goodness. And you never told anybody about it before.

0:02:03

MARIANA: I just kept it to myself.

DR. SNOWDY: Goodness.

MARIANA: They just, I just everything just ended. Never wake up.

DR. SNOWDY: You wish your life would end and you'd never wake up? Have you been able to sleep? Do you dream?

MARIANA: I don't dream, I have nightmares.

DR. MIRKOVICH: Unfortunately, once patients leave our hospital there's really little we can do. You know, we can't keep people detained for long periods of time, months, years.

PATIENT'S WIFE: [inaudible] mental hospital.

0:02:30

DR. MIRKOVICH: Yeah, we'll send him to a mental hospital. I know. He's there for a few days, a week and they discharge him.

PATIENT'S WIFE: I don't want the same thing over again.

DR. MIRKOVICH: I'm afraid that's the system.

VOICES: Aaagh, aagh. Just relax.

MAIN TITLE:
BEDLAM

0:03:00

JFK (archival): Almost every family at some stage will experience, or has experienced, a case of mental affliction. And we have to offer something more than crowded custodial care in our state institutions. Our task is to prevent these conditions. Our next is to treat them more effectively and sympathetically in the patient's own community. I hope the Congress will act on this bill.

NEWS ANNOUNCER: (title 1978) It was called de-institutionalization and in the last decade, hospitals have been emptied of almost a quarter million patients.

0:03:34

NEWS ANNOUNCER: (title 1984) In theory, de-institutionalization was supposed to get the mentally ill out of the so-called human warehouses and back into the community, but in reality, the mentally ill were just turned loose.

NEWS ANNOUNCER: (title 1986) It's estimated that between 20 and 50% of the people living on the streets of America's cities are chronically mentally ill.

NEWS ANNOUNCER: (title 1999) De-institutionalization remains the rule, forcing thousands more mentally ill Americans out of treatment – and out on the streets.

0:04:03

INTERVIEWEE (archival): The people living on the street here, Anderson, over 40% of them have mental illness.

Title: Los Angeles

0:04:17

NARRATOR KEN ROSENBERG: Serious mental illness is America's great secret. I started my training as a psychiatrist in Los Angeles, twenty-five years ago, and I returned to LA, to one of the busiest and most highly regarded psychiatric emergency departments in the United States, to understand what it means to live with serious mental illness in America today. It's a story that I know from my profession. And a story that I know from my family.

0:04:50

Title:

I wish it were that simple

DR. LACSINA: So you don't want to take off the handcuffs.

JOHANNA: Nope. Not right now. The truth will set me free. Namaste. Someone told me that. Someone who was raped told me that. I love everybody. Who drives a van. I don't know. My truth will set me free, and my house's spirit, am I Sophie's Choice? Who will ever know.

DR. LACSINA: Okay.

DR. LACSINA: I need to set you free, so you need to leave.

VOICE: Johanna, focus on the doctor please.

DR. LACSINA: All right Johanna. Did you take any drugs today?

JOHANNA: No. I have too much energy.

DR. LACSINA: Okay.

JOHANNA: I saw Michael Jackson die. I am not who I am. Do you understand? Just because Michael Jackson is any color. Do I have to sit down? When you look at your shit you will know. Be on it, you are not the truth, and neither is Oprah for being owned.

DR. LACSINA: So Johanna, do you want me to give you medication?

JOHANNA: Nope. Get the fuck out of here, so I can be okay.

DR. LACSINA: Johanna, so I'm just going to give you...

0:06:00

JOHANNA: Do you understand? Who are you? I don't care. Reboot. Do you get it?

DR. LACSINA: Have you ever been on any medications before?

JOHANNA: Lots. Every single one prescribed by my doctor. The rapist. What does that stand for? Therapist. Spell that out.

DR. LACSINA: Hi Caitlin. My name's Dr. Lacsina and I'm calling from LAC USC. I was calling because we have a patient here. She's here in our psych ER. Can you tell me a little bit about

Covenant House? Is this like a homeless shelter, or like a halfway house? You're a homeless shelter. Okay, thank you so much. Have a good day. Bye bye.

0:06:36

Title, typing on:

Johanna, 23 years old

Bipolar disorder

Unable to finish college due to illness

JOHANNA: Do we understand? Team work.

FEMALE NURSE: Teamwork, okay.

JOHANNA: No, no, no. I don't trust. I refuse. Get the fuck off of me!

MALE NURSE: You need to relax okay.

JOHANNA: Fine.

VOICE: It's almost done. That's it. Almost done.

JOHANNA: Are you happy now? Is this your soul? We have a spirit. You are your soul. You are the life you live every goddamn day. ... Scientology. Please stop hurting me. When the spaceship lands we're not the only spaceship. NASA's not America. Enterprise is the answer. Who will you be today? Because you will die. You will find out the circle of life when it's ready. Do you fucking understand? Will you be ready? Will you make terms with your past, asshole? I will show you a rapist one by one, I will. I cannot afford USC, I cannot work hard... I work at the Science Center...

0:07:30

Graphic/text:

Bipolar Disorder: Euphoria or mania, alternating with periods of depression

Psychosis: Loss of connection with reality

DR. LACSINA: She's presenting with lack of sleep, distractibility, grandiosity, most recent episode manic.

DR. MCGHEE: With or without psychotic features?

DR. LACSINA: With psychotic features.

DR. MCGHEE: Okedoke.

DR. LACSINA: Rule out substance-induced psychotic disorder.

DR. MCGHEE: What do you want to start her on?

0:07:58

DR. LACSINA: I was thinking Seroquel, maybe.

DR. MCGHEE: Because ...

DR. LACSINA: Because at the APA conference that I went to they had a study they talked about which showed the Seroquel as a stand-alone medication seemed to work very well for the bipolar patients.

DR. MCGHEE: If you would like to start her on Seroquel that's fine. What would be the downside of starting her on Seroquel?

DR. LACSINA: It could cause hypotension.

DR. MCGHEE: It's going to be very sedating. Some people, boom, they're on the floor with it. And some people not. I don't know with her. It's going to be a guess.

0:08:32

DR. LACSINA: You want to know what I learned from the drug rep people?

DR. MCGHEE: Okay, yes.

DR. LACSINA: They said to start on, for people who are manic, start with like 200 on the first day, and then increase to, like. They said increase gradually so by the fourth day you're on 600.

DR. MCGHEE: Yeah, think about what their incentive is.

DR. LACSINA: Absolutely.

DR. MCGHEE: Versus what we need to do for the patient. What are the major side effects of Seroquel?

DR. LACSINA: Metabolic effects.

DR. MCGHEE: Yes, and Seroquel is super high on that.

DR. MCGHEE: She's a young lady. We don't necessarily want to fatten her up, but also we're not necessarily deciding on her long-term meds, but important to be aware. That's all I'm saying. Those are some of the conversations you can have in your head about why this one versus that one versus the other one.

0:09:15

Cut back to Johanna at ER

NURSE (off camera): Would you tell me your date of birth? Huh? What is that?

0:09:34

DR. MCGHEE: Mental illness is not something people want to hear. It's not something they want to talk about and it is a lifelong disease. That's really hard for people to hear. In some ways I think that's the hardest part of the job, feeling their pain. I understand how difficult it is. My brother got sick with bipolar disorder pretty much right after I graduated. Putting my brother in the hospital was by far the hardest thing I ever had to do, so I get it now from the other side what it's like when family members put whoever family member in the hospital, and you know, the feelings of guilt and, "Oh, is this the right thing?" That kind of, I totally get it.

0:10:45

Driving into Johanna's neighborhood

Title: One year later

JOHANNA: ... anxiety or PTSD or, you know, and they're training a lot of dogs for soldiers who are returning home.

DARYL (JOHANNA'S DAD): Yeah, they really seem to like it. I saw a couple of shows on that.

JOHANNA: One of the soldiers he named his dog, like, Prozac or something because he's like, "It works better than any pill I ever took."

KEN ROSENBERG: How do you go from that point to this point?

JOHANNA: It was a really long process. With that time in the hospital it wasn't my last. Since that time, I've been in and out of maybe about ten in the last year, so, but right now, and for the last three or four months I got off of medications.

0:11:46

Father takes out butterflies

JOHANNA: He's so big. Oh, it's scratchy. Look, it's all over my hands.

DARLY: Very nice.

0:12:02

JOHANNA: My dad will sell the monarchs and the painted ladies, and then sometimes he'll, he might be able to get other species from other butterfly people, but we usually tend to stick to just these guys.

DARYL: Jo, how long since you taking medication regularly, not counting the hospital.

JOHANNA: I haven't been taking any medications since October, November.

0:12:31

DARYL: I worry about you Jo. I just want to make sure that...

JOHANNA: I didn't say, like "I'm not going to take medication. I don't need it." It was, "Okay, the medications are making me worse, so let's try it without it." You know, if I take it and it helps, that's great. I wish it was that simple for me, like you know, I found this pill and it worked.

Archival images of historic mental institutions

0:13:03

NARRATOR KEN ROSENBERG: Before there were medicines, there were no reasonable treatments for those with severe mental illness:

Title: 1927: Insulin Coma Therapy

NARRATOR KEN ROSENBERG: We injected near-fatal doses of insulin to induce a coma and calm the worried mind.

Title: 1938: Electroconvulsive Therapy

NARRATOR KEN ROSENBERG: We used electrical currents to induce a grand mal seizure to somehow reset the mind.

Title: 1941: Lobotomy

0:13:28

NARRATOR KEN ROSENBERG: We hammered a pick through the eye socket to reach the brain and then blindly chiseled away at the frontal lobes that were said to house the emotions. Frontal Lobotomy won the 1949 Nobel prize in Medicine. It was performed on Rosemary Kennedy, sister of the future President of the United States. The procedure was a disaster -- Rosemary had to be institutionalized for the rest of her life.

0:14:00

It was a family secret that would shape the course of mental health care for a nation. Around 1950, by sheer serendipity, modern medicines like Lithium and Thorazine were discovered. Because the medications could stop the hallucinations and delusions, finally, patients could leave the asylums. That was our last revolutionary breakthrough in treating psychosis. For the past seventy years, we have relied on the same compounds, sometimes the same pills, which pharmaceutical companies have tweaked and re-patented under new names. In the past 15 years, major funding for new medication trials for schizophrenia has decreased by nearly 90%. Today's treatments save lives, but have serious side effects. Fifty percent of people stop taking their medications within one year.

0:15:04

DR. DIAS: Were you formally diagnosed with a psychiatric condition?

PATIENT: Yeah, schizophrenia.

DR. DIAS: I notice that you have some movements of the face. How long have you had these facial movements?

PATIENT: About eight years. I guess.

DR. DIAS: Ten years. It's basically a side effect of the anti-psychotics. Basically when you take anti-psychotics for many years, um. The nurses said you wanted to cut your neck. Is that correct?

0:15:36

PATIENT: Yeah, it's painful. (*Inaudible*) I can't hold my head straight.

DR. DIAS: I know it's uncomfortable. But the medication that we're going to give you is going to help.

DR. DIAS: The medications that we have today they're definitely more effective for depression. We understand know how to treat mania better. We understand a little bit about how to treat psychosis better, and how to mitigate the impact of the side effects of all the medications. But at the end of the day, the treatment really hasn't changed, and it's not that more efficacious than it was 50 years ago.

0:16:12

Cut to Johanna's home, film crew arrives

Title:

Johanna
one year later

JOHANNA: Hi everybody, come on in, it's a horrible mess. So yes, this is about to get bad, but that's how things get better, so... come on in. We're going to donate, sell most of this...

CREW MEMBER: What's going on here?

0:16:33

JOHANNA: We're trying to clean it and I made it worse, 'cause I was like, "Oh, you know what I'm going to do? Just take it all out and then we have to deal with it," and now I can't deal with it.

NARRATOR KEN ROSENBERG: The next time we saw Johanna, her dad had gotten sick, and for several months, he couldn't live at home.

0:16:53

JOHANNA: I got this at the Dollar Store right across the street. Music! So it's been bad but it's been good because you have to have the bad times to recognize the good times, the light to rise, wake up. The darkness to slow down, regrow, to up down. Die, live. Bipolar. I think we all are, and it's a blessing. It's a curse and a blessing. It's yin and yang. There's a Japanese art form where when something cracks you fill it in with gold and it becomes better, stronger, faster, Kanye West, the robots.

0:17:30

What we're doing, medications, water, then orange juice, melatonin, so not Xanax or anything like that. Can't do antidepressants. Depressants that are supposed to bring me down, they crack trigger the bipolar, which becomes amped up psycho and makes it worse. I need to sleep. I don't know the last time I've slept. Look at this nasty food. Look at this pizza from last night, which I still haven't eaten. I can't even feed myself. So that's that.

0:18:04

Joanna walks out the door, riding in car

JOHANNA (in car): I'm trying to like go to school, and shit fuckin' keeps knocking me back. Everything that's supposed to get me ahead is knocking me back. And my manager called me over and over, here's your schedule, hope to see you. Didn't return his calls. Couldn't pay my phone bill. Just stopped showing up. (laughs)

NARRATOR KEN ROSENBERG: Johanna asked to be taken to the only place where she felt she could get help, some fifty miles away from her home – at the LA County Psych ER.

0:18:36

JOHANNA: Motherfucking nappy time. Hello. No wonder he put in these earphones. Ha ha. Oh my gosh, this guy has his work cut out for him.

0:19:00

Title:

New York City

Ken opens boxes in his apartment:

Rosenberg family home videos, ca 1980s

KEN ROSENBERG: Ma, show me the pictures.

MOM: Wait a minute.

KEN ROSENBERG: Show me the pictures.

MOM: Show me the pictures.

KEN ROSENBERG: Turn around.

VOICE: He's making a documentary.

Ken's present-day apartment:

0:19:30

KEN ROSENBERG: Ah, this great picture. I think this was the happiest year of my family. And probably the last happy year of my family.

Title:
going home

Archival photo of Merle and Ken

NARRATOR KEN ROSENBERG: When I was 14, my beautiful and kind 20-year-old sister, Merle, suddenly became psychotic, roaming the streets of downtown Philadelphia. Merle found her way to the apartment of our sister Gail and her husband Bob.

0:20:05

Title: Philadelphia

Ken's brother in law Bob and Ken drive through Philadelphia

BOB ZITIN (in car): It seems so long ago.

KEN ROSENBERG: Yeah, it does seem long ago

BOB ZITIN: I can tell you, it was around 1971.

KEN ROSENBERG: 1971, so you were how old?

BOB ZITIN: We were only married three years, I guess I was 29 or so.

KEN ROSENBERG: Right, so I was just starting high school. She was, I guess she had to be 19, 20.

BOB ZITIN: She got married, and then the marriage broke up.

0:20:32

BOB ZITIN: That's when Merle had her break. When she was at the University of Maryland. She came over to sleep over one night. I went to bed early, and she and Gail were talking. Around two o'clock in the morning, Gail came in the room very hurried and a little panicky. "Bob, you gotta get up, you gotta get up, you gotta come out here. You gotta listen to this." I went out into the living room and Merle was totally hallucinating, and she didn't know who we were. Very paranoid, and it was very scary. I know I went to bed somehow and when we woke up, she wasn't there. She had disappeared. We got a call, in fact I believe from the manager of the apartment, and said she's in a phone booth and that's where we should get her. She was so frightened of us, we decided we had to call the police.

0:21:09

KEN ROSENBERG: My parents drove here, I guess the next day, and my mother was in the car crying, and wondering why the hell they had taken Merle to the hospital. And going back and forth. My father was fuming, he was not very happy that you had taken her to the hospital.

BOB ZITIN: No, not at all.

KEN ROSENBERG: And Gail and I were besides our ourselves – it was so clear that Merle was out of her mind.

0:21:31

Graphic/text:

Schizophrenia: Losing touch with reality, with symptoms such as auditory hallucinations and delusions

Usually begins in early adulthood

NARRATOR KEN ROSENBERG: The world's oldest mental hospital was built in London England, in 1403. Bethlem Royal Hospital would come to be known as Bedlam.

0:21:57

Six hundred years later Bedlam took on a new meaning -- a rallying cry for shutting down some of America's most disgraceful mental institutions. Mental hospitals, like the one my sister was taken to, were far from ideal, but they provided necessary care. In the 1950s, there were 558,000 patients in America's asylums. By the time I finished my training as a psychiatrist, 40 years later, over 90 percent of those beds were lost. Even the psychiatric hospital where I had just trained was demolished. Like most of my peers, I went into private practice. And like most of the graduating psychiatrists, I did not treat the seriously mentally ill.

0:23:06

Twenty years later, I wanted to understand why this happened in my profession. I spoke to eight past presidents of the American Psychiatric Association and asked them how our country, and our profession, came to neglect our neediest patients.

0:23:23

PAUL APPELBAUM, MD: The movement from state hospitals to community, to jails and prisons, is probably the saddest part of the story of 20th and early 21st century American psychiatry.

PAUL FINK, MD: That they threw everybody out of the hospitals in the '70s. You know, that was the mistake, for people who need custodial care their whole lives. And we didn't even think of that.

NARRATOR KEN ROSENBERG: I organized a conference at the association's annual meeting, about the role of psychiatry in this crisis.

0:24:00

DR. FULLER TORREY: And I have yet to find a single county in the United States where there as many seriously mentally ill people in the country mental health facility as there are in the country jail. If anyone knows...

NARRATOR KEN ROSENBERG: I invited Dr. Fuller Torrey, America's preeminent expert on serious mental illness.

E. FULLER TORREY: During my practicing lifetime, most psychiatrists have not spent very much time taking care of people with severe mental illness. And I will say that, quite frankly, I have not been proud of my own profession over the years.

0:24:33

I think, in order to understand the disaster that we're looking at today, you really have to start in the early 1800s, in the jails and what they call the poorhouses at that time, there was an increasing number of people who today we would say have serious mental illness, schizophrenia, bipolar disorder. And because they were increasing in numbers, people like Dorothea Dix and others said it's really inhumane to leave these people in jails, it's not where they belong.

0:24:58

So let's put them in mental hospitals. So then, over the next hundred years, the hospitals kept being built, and built and built. The states paid 96, 97% of all the costs of people who were severely mentally ill. The Federal Government had almost no money in the system at all. There was a huge incentive for the states to close down these hospitals because they're effectively shifting the cost of the care of these people from the state governments to the Federal government.

0:25:30

JOHN F. KENNEDY (archival): I, John Fitzgerald Kennedy, do solemnly swear,

DR. FULLER TORREY: As soon as Kennedy became president, he both speeded up the emptying of the hospitals and he created a system of 7 to 800 community mental health centers around the United States to try and prevent the development of future cases without paying any attention to the people who were already sick and who were coming out of the hospitals. Once the people were in the community, then they became the fiscal responsibility of the Federal Government.

0:25:58

E. FULLER TORREY: During the 1970s, both Nixon, and then Reagan, had no understanding of mental illness. When Reagan took office, he stopped the Federal funds that were going directly to the community mental health centers.

RONALD REAGAN (archival): The excessive growth, government bureaucracy, and government spending...

E. FULLER TORREY: So what Reagan was saying was that the Feds should not really be involved in this. Let's give it back to the states. The states, of course, they didn't want it back.

0:26:30

There's not any single Ronald Reagan to blame for it all. There's ten presidents since 1960 who are all responsible for it. State governors, state legislatures. Everyone's responsible for it. This is a hundred and fifty-year-old disaster that has ended up being really being really the largest social disaster of the 20th Century and now the 21st Century.

HOMELESS WOMAN: You love your mama?

0:27:00

HOMELESS MAN: We're the love and peace people in all the world.

E. FULLER TORREY: California has been the canary in the coal mine from day one because they were the forefront of emptying out their hospitals. So today we are seeing problems in the emergency rooms in California, as we're seeing them everywhere, but you see them worse in California where there are almost literally no state hospital beds left. The emergency rooms are overrun with the people with severe mental illness.

0:27:30

Title card:
Enemy combatants

MONTE: Yes ma'am.

ROBIN: So just 'cause I just got off the phone with Mark-Anthony, a couple of things. When they take you to this other place, one, just try to remember it's a hospital.

MONTE: If there's no red dragons there, if there's a red dragon there it's all bad because I don't get on with the red dragon.

0:28:00

ROBIN: Okay. I don't know if there are or not.

MONTE: Let's stop you right there. It really doesn't matter if there is, because if he's there I'll take his ass out anyway.

ROBIN: Okay.

MONTE: So it doesn't matter.

ROBIN: So they're going to take you from here to there in an ambulance.

MONTE: Okay, let me think about this for a second. Ambulance. Ambulance is going at it's right rate, it should get me there in a certain amount of time, but if somebody tries to intrude and crash over and kidnap me and hold me hostage then what are you going to do. See, you've got to be able to answer these questions before you go out the door.

ROBIN: Okay. They are going to restrain you when you go, so you can just get prepared. I know. It's a pain in the butt.

0:28:30

MONTE: Restrain. When you say the word restrain it's like a trigger. I'll explain something to you real quick, when they say the word restrain, okay, it goes like this. One, two, restrain!

ROBIN: Yeah, I know. That's why I'm kind of trying to give you a heads up.

0:28:55

PATRISSE: I had no idea about mental illness. My mother had no clue. If you've ever, you know, dealt with anyone who has some sort of psychosis there's lots of fear. S there was one moment where he was in prison where they had to do a cell extraction, which literally means take someone out of their cell, but how they do cell extraction is just horrendous. He was too scared, and so they started tear gassing him and mace-ing him and I just think that's what you do to enemy combatants, not people who are citizens of your country.

0:29:36

KEN ROSENBERG: And in jail how was he treated?

PATRISSE: Oh, terribly.

KEN ROSENBERG: For what kinds of crimes?

PATRISSE: They were all, like, non-violent, mostly crimes because he was in an episode.

MONTE (sheet over his head): Now you see me, now you don't. Ku klux klan!

0:30:02

Patrisse and Cherisse in car

Title:

one year later

CHERISSE: This is just like a diary that I keep every time he goes into the hospital. So this was back in 2013. Says in the late afternoon, from Justine, that Monte was breaking everything. Refuses to see psych doctor. He had pulled the back door off the hinges and broke the glass. Monte tells the doctor he wants to rip the doctor's eyes out. The doctor is very calm. Monte is growling at security. Okay, you know, it just goes on because this episode lasted last year for 27 days. This one, how long did this one last, like 19 days?

0:30:42

PATRISSE: I just love my brother so much, and he's perfect to me. He really is perfect to me.

0:31:04

So, um, I feel like when he was diagnosed and when our family sort of really had to come to terms with his diagnosis I just, I refused to allow it to tell a different story than I already had about my brother, and I refused to allow the stigma to sort of shape how I was going to relate to him, and if anything it just brought us closer.

0:31:32

And I made it a commitment to myself and for my brother that I was going to be with him no matter what, every downfall and every jail sentence and everything that was around his mental illness I was going to make sure that I was way more equipped to deal with it than I felt like really society was.

MONTE: Met a lot of good people in the hospital, the staff and the inmates, so to speak. Made a lot of new friends, even said I could come back to visit if I want.

0:32:05

PATRISSE: Want me to cut that?

MONTE: Yeah, I guess, get scissors real quick?

PATRISSE: You got it! (laughs)

MONTE: Yeah.

KEN ROSENBERG: Sounds like it was a positive experience, very much?

MONTE: It was rough at first, the first three days. I was in restraints and then after that it was positive all the way through.

PATRISSE: Yeah, one of the nurses said “Are you taking Monte home?” I said “yeah.” She goes oh, “He’s so sweet.” I said “yeah.”

0:32:35

KEN ROSENBERG: Are you taking medicine now?

MONTE: Yes, I'm taking my meds. I take Seroquel, Klonopin, lithium and Zyprexa.

KEN ROSENBERG: Does it make a difference?

MONTE: Yeah, I feel fine. I feel better than ever. I feel healthy. I feel good. I don't feel no side effects, like strange or anything, and it's okay.

0:33:08

PATRISSE: Do you want to let folks know actually that the food is done? Enough food is done with everybody.

RODNEY: I'm right here with Monte, Paul.

MONTE: Hello Paul.

RODNEY: I'm right here with your nephew Monte.

MONTE: I'm feeling good. How about yourself?

PAUL: (on phone) I'm feeling good man. What kind of party you having?

MONTE: It's a welcome home party.

PATRISSE: My mom didn't want to tell people about my brother's mental illness at first, she didn't. I think there's a lot of shame in black communities in particular around mental illness. Shame is dangerous, because shame makes you hide things. And when we hide things, we don't get the support we need. And when we hide things, we are not as honest and transparent about our needs. And I think that, um, shame literally kills people. Shame kills our possibilities of having something different.

0:34:07

Title:
two years later

0:34:37

NARRATOR KEN ROSENBERG: Monte had been off his meds, had a manic episode, and broke a window in a convenience store. With Patrisse's help, his case was heard in a specialized mental health court program.

Handcuffed, Monte walks into a courtroom, and takes a seat in front of the judge

JUDGE: Number ten on calendar is the matter of Monte. When we were here last, I said that you were going to be evaluated both by the deputy probation officer, as well as by the Department of Mental Health. I've got a report about whether you would be a good candidate for this program. If you were to be placed into this program it might do you some good. You're charged in count one with destruction of property with a value of more than \$400. It's a felony. Do you understand the charge against you?

0:35:15

MONTE: Yes sir.

JUDGE: The maximum sentence for this charge, if I were to strike the strikes, is three years in custody, so it would have to be served in state prison. That's not the sentence you're going to get right out the gate, but if you violate your probation, if you violate any of the terms of the treatment program you could be sentenced to the maximum and the prosecution will be asking for it. Do you understand that, sir?

0:35:39

MONTE: Yes sir.

JUDGE: You have to undergo mental health treatment at the direction of the probation department, in consultation with the Department of Mental Health, most likely for up to a year. It's going to be tighter supervision than ordinary, run of the mill probation. But if you're willing to do it we're willing to try and hook you up with the people who can give you help.

NARRATOR KEN ROSENBERG: Until the mental health court could find a treatment facility that would accept Monte, he waited in jail for four months.

Archival: Images of Rikers, Cook County Jail, and Twin Towers

Titles:

New York City's Riker's Island Jail

Chicago's Cook County Jail

LA County's Twin Towers

NARRATOR KEN ROSENBERG: Today, the three biggest jails in America are also our three largest psychiatric treatment facilities. Across the nation, jails are being built specifically to house the mentally ill.

0:36:40

SHERIFF DEPUTY 1: We have sixteen hundred fifty mentally ill in tower one right now.

SHERIFF DEPUTY 2: This is a high security jail that was built for high security inmates, and we're now housing mentally ill folks in here, patients, in here.

SHERIFF DEPUTY 1: These people are severely mentally ill. They need a lot more than we can give them here but we do the best we can.

0:37:03

GAVIN NEWSOM: The vast majority are homeless, presumably, right? So living out in the streets in sidewalks and shelters.

SHERIFF DEPUTY 2: There need to be funder resources so that when those folks get out and if they're taking their medication, they can make it to those facilities and those programs and get the treatment that they need.

GAVIN NEWSOM: The state of mental illness in this country is beyond the trite notion of crisis. It's at a point of comedic absurdity.

0:37:38

We built more prisons than universities. Our budgets for prisons are actually higher officially than our higher education budgets. In California, it's a remarkable fact, there are as many people in the prisons with mental illness, as there were people in 1960 in institutions of care for mental illness. About 37,000 people in 1960 were supported in alternatives to incarceration, and today they're being supported in a jail system, there's about one in every four inmates in California, exacerbated by a recidivism rate of about 70% which is even higher for people that are suffering from mental illness.

0:38:22

KEN ROSENBERG: What's the saddest thing you see here, if I may ask?

GAVIN NEWSOM: The number of people that we've just completely given up on, it's just staggering.

0:38:42

TV ANNOUNCER (archival): The controversial prison alignment bill. Is it doing more harm than good?

NARRATOR KEN ROSENBERG: During the years we were filming, the crisis in Los Angeles County went from bad to worse. To reduce prison overcrowding, California released 18,000 inmates into Los Angeles – over 8,000 of whom had a history of mental illness.

0:39:01

Around the same time, several Los Angeles hospitals and clinics closed down. Some psychiatric hospitals even dumped patients on to Skid Row.

ADVOCATE (archival): We allege that the patient was dressed in nothing more than hospital paper tops and bottoms, had no money, no identification...

NARRATOR KEN ROSENBERG: All this translated into an increase in admissions and an increase in violence in the ER.

0:39:35

Title:
fight or run

TODD: Shit!

POLICE: The doctor takes them off, right? Just help us out here.

DR. MCGHEE: What just happened.

ID: Todd

TODD: What just happened is these mother fuckers have been fucking with me for over fucking 20 years.

0:40:06

DR. MCGHEE: Okay. What I would like you to do is hang out in one of the seclusion rooms for awhile, okay. Without the handcuffs, but it'll be a locked room.

TODD: Yeah, so now you want to put me in another cell where I spent the last 20 fucking years of my... . Come on you fucking dick ass cops. Punk ass motherfuckers.

POLICE: Slow down. Slow down, dude. We ain't messing with you.

0:40:30

TODD: Yeah, you fuck are man. Fucking cops around me. Get the fuck out of here!

DR. MCGHEE: When somebody is a mixture of both depressive symptoms and manic symptoms, which is the opposite of depression, it's a real irritable angry kind of emotion. Lots of energy, no sleep, um for days, which is what he's in the middle of.

0:41:02

TODD: You come to a fucking hospital, man, and I fucking get treated like I'm back in fucking prison. All these fucking cops around me, get the fuck out of here.

POLICE: You want us to get out of here, we'll get out of here.

DR. MCGHEE: It's hard to remember sometimes to be compassionate, especially when, you know, they threaten to kill you and stuff like that, but he may have had abuse in jail. It's not uncommon.

0:41:28

DR. MCGHEE: All I want you to do is take the seroquel and the Klonopin, and hang out in here.

TODD: In a fucking cell.

DR. MCGHEE: I'm sorry that it feels like that to you. I'm not here to make you feel like you're in prison, but I gotta respect the safety of everybody here, including you.

Titles (handwritten):

47 y.o. with mood disorders

Self-medicates with street drugs

0:42:02

DR. MCGHEE: I thought we had it locked, what's the deal? I'm your doctor.

TODD: Whoa, whoa, whoa. I'm talking with the cop now. There's somebody who I know and respect who I've dealt with before.

DR. MCGHEE: I'm the one who ordered it though, not the police.

TODD: You guys are going to lock me in there.

POLICE: It's up to the doctor. She's in charge. It's her hospital.

TODD: You know what's going to happen when I come out of there. It's going to be a cell extraction. I'm going to come for her. I'm letting you know that right now. I'm coming for you.

0:42:37

VOICES: Call a code. Restraint. Code green. Code green. Code green.

0:43:15

TODD: Aaaaaa. Aaaaaa. Motherfucker. Aaaaaa.

VOICE: Just relax, just relax.

DR. MCGHEE: Did you look at his mouth or no?

DR. MIRKOVICH: No, he refused treatment.

DR. MCGHEE: Refused treatment. Hi. It's Dr. McGhee. I would really like to know if you have any injuries. I promise I'll leave you along, I just need to know if you have any injuries.

0:44:00

TODD: (subtitled) You did this to me. You're going to pay for it.

DR. MCGHEE: OK. I'm going to listen to your heart.

0:44:30

What I see, especially from the emergency room, is this ridiculous merry-go-round. People get sick because they don't take their medication, and how can you ask people to take medication when they're living on the streets? (to Todd) I'm going to straighten your leg, what do you need? Good night, Diana!

0:45:17

Dr. McGhee leaves ER

DR. MCGHEE: We are still enjoying the gift of Reagan policy back in the '80s. We chose to go from keeping patients institutionalized their whole life to having them live on the streets. From whatever reason, we've decided, as a nation, that that's acceptable.

0:45:45

Titles:

On any given night, 20,000 people with mentally illness sleep on the streets of Los Angeles.

On any given night, 350,000 people with mentally illness sleep on the streets of America.

0:46:30

Title:

Todd

one year later

TODD: This is the mail window. People can use this address as a mailbox. You get your mail right here. People don't have addresses, so. People only got so much fight in them. You know, it's either fight or run. I've been fighting for so long. I go back and forth from fighting to running, fighting to running, fighting to running. You know, it's like a big circle.

0:47:00

Right now, I'm fighting again, you know, because probably of my medical situation and I don't want to die on the streets. But a lot of people down here suffer from drug addiction or mental health issues, and that's why they're down here. It's sad. It's really sad. I suffer from it and these people suffer from it and there ain't no help nowhere. We just keep going around in circles and we get nothing. It's just sad.

0:47:37

Todd enters LAMP building

TODD: Whatever place is going put me in the quickest place, that's where I want to go." Whatever place comes available that says "yes, we'll move him in the next couple of weeks," that's where I wanna go.

STEPHEN MITCHELL: We've already contacted the managers, we're waiting for the manager to give the OK, in terms of their vacancies...

0:45:05

TODD: Why did I come down here today?

STEPHEN MITCHELL: You came down, remember we scheduled this meeting last week. I haven't been able to reach you all last week.

TODD: My phone's dead.

STEPHEN MITCHELL: We had Monday and Tuesday to work with you this week. We thought we would have the entire week, maybe 5 or 6 days.

TODD: So what are we going to do?

STEPHEN MITCHELL: We'll discuss your options and if this is something you want to do...

0:48:30

TODD: We discussed and discussed and discussed. Can't we just find an apartment?

Todd walks on the street

Title:

HIV Clinic

LA County Hospital

TODD: I got AIDS. I was shooting drugs behind somebody that had it. They never told me and I ended up catching it. Life has shit on me all my life.

0:49:03

DR. EPSTEIN: Well, how you doing?

TODD: I'm depressed a lot, about the housing thing. You know, and...

DR. EPSTEIN: A lot of people have told me how slow and frustrating it is. But what is the holdup now? What don't they have?

TODD: They want me to do a walkthrough. I thought I was going to do an application on Friday. And now they're telling me I have to do an application somewhere else.

0:49:31

Cause I don't have a rental history, I been homeless so many years. Because of my being, mental health.

DR. EPSTEIN: There's a lot of red tape in housing, but once you get it, you get it. It's kind of like a little obstacle course, but do it.

TODD: The whole trying to do things normal is frustrating the hell out of me, because I'm not normal.

DR. EPSTEIN: At the mercy of your moods?

TODD: I mean, how many years have I been with mental health? 43 years and they still haven't fixed me. I ain't saying it's you. But after 43 years, you figure somebody could get it right.

0:50:12

Title:

three months later

STEVE MITCHELL: (voice on speaker phone) Now we have the Alexander, we have the actual property. You have the unit.

0:50:30

TODD: So when am I moving in?

STEVE MITCHELL: (voice on speaker phone, subtitled) Because it's a new voucher, we're hoping they'll give notification that you can move in, in the next two days.

TODD: Hoping. It makes no sense to me. Got someone sleeping on the goddamned sidewalk's that's got a fucking apartment.

0:51:04

Todd loses his temper in parking lot

TODD: I've heard the same thing three fucking times. Fucking homeless on a fucking sidewalk and he's got a goddamn fucking roof. He's got a fucking roof, and he can't get in it. He fucking can't get in it. [inaudible] Motherfuckers.

0:51:35

Title:

the next day

Todd enters his new apartment

STEVE MITCHELL: Yeah, it's a big one.

TODD: Yay.

STEVE MITCHELL: Congratulations.

0:52:11

TODD: Thank you. Four years man. Four years. Thank you, Steve.

Fade to black

0:52:30

Title:

the earlier you intervene

DR. DIAS: So, let me ask you a question.

KEN ROSENBERG (subtitled): You can ask me anything but the mic's on you.

DR. DIAS: It's a hypothetical question. How many years did your sister suffer with the symptoms of schizophrenia?

KEN ROSENBERG (subtitled): Solidly 30.

DR. DIAS: So out of those thirty years, how many, what percentage of that time were your family persistent in supporting her and helping deal her with the symptoms?

0:53:06

KEN ROSENBERG (subtitled): A fraction of the time.

DR. DIAS: So this is society's response. When society feels like no matter what effort is put forward, what resources are put forward, this problem doesn't go away, or it only has a very minor, small impact, people get frustrated. People give up on their own family members. So if people give up on their own family members, if people ultimately give up on themselves through suicide, what makes you think that society as a whole isn't going to give up?

0:53:37

Ken and Bob arrive at Pennsylvania Hospital

KEN ROSENBERG: We were in a consultation room like this. There was the psychiatrist. My mother, my father, I think he sat over there, my sister Gail probably sat right next to me. And Merle was there. And she was so angry about being there. And she was still psychotic, and she would pace the room, remember that? She would pace, pace, pace. Get anxious and pace, and rant and say crazy things.

0:54:32

At one point Gail and I said “you belong here, you should be here.” And she, you know, snapped at us and said “You belong here! You’re the crazy ones!” And my mother cried a lot. And my father kept it cool, and he said “This is, we had enough. We’re taking her out of here.”

BOB ZITIN: I do remember him saying: “Never, never do that ever again, never. It’s my daughter, and you’re not to do anything like that ever again.” With him it was shame, I think there’s a lot of shame regarding mental illness with him.

0:55:10

KEN ROSENBERG: I think he thought he was doing the right thing. I don’t think anyone really, you know, thought they were destroying her life.

NARRATOR KEN ROSENBERG: It was at that moment, at 14-years-old, when my parents took my sister out of the hospital against medical advice, that I decided to become a psychiatrist.

0:55:34

NARRATOR KEN ROSENBERG: Merle was my first best friend, took me to my first scary movie, sung me to sleep. As a child, Merle also had signs of mental illness. She had periods of disabling anxiety and depression and it might have changed everything if Merle had gotten professional help early on.

0:56:14

DR. DIAS: I’m gonna ask you what might seem like a strange question. Do you ever have an experience of hearing voices in your head? Do you ever hear people talking to you who aren’t really there?

SERGIO (CHILD): My head tells me to run away.

DR. DIAS: Your head tells you to run away? Is it a voice or you just think that in your head?

SERGIO (CHILD): Yeah, a voice.

DR. DIAS: A voice?

0:56:55

Every study shows that the earlier you intervene with a kid and a family, the better the outcome.

COLIN DIAS (to patient): The voice told you to go in the kitchen and cut yourself. Was it a weekend or a weekday, do you remember?

PATIENT (child): A weekend, it couldn't have been a weekday.

DR. DIAS: There are a total of ten county inpatient adolescent psychiatric beds available in Los Angeles County at any given time.

0:57:29

Parents are stuck with this very difficult decision: do I want to take my suicidal kid back home and watch him for 24/7. Or do I want to leave my kid in an ER for 3 or 4 or 5 days while they're looking for a bed?

Dr. Dias walks through ER hallway, cut to mother and 11-year-old daughter meeting with Dr. Dias, who reads aloud the girl's words from a sheet of paper:

DR. DIAS: (reading from paper) She stated, "All day I have been feeling sad and thinking of suicide and running away from home. I would choke myself, drown myself, or use drugs to hurt myself." Did you really try to drown yourself, before?

0:58:04

DELILAH (CHILD): Yeah, but I couldn't 'cause I, like, well ... and I was kind of scared.

DR. DIAS: Were you aware that she had tried to drown herself then?

GLORIA (Delilah's Mother): No. I heard it the first time today.

DR. DIAS: Do you get bullied at school? You feel like it's difficult for you to sometimes ignore your anger? Okay. And so, when you get angry, you feel like killing yourself?

0:58:30

GLORIA: You did mention a couple of times that some kids told you some stuff, but I told you just ignore it, you know? But I didn't know it was that serious for you.

DR. DIAS: I mean, anytime an 11-year-old says that they want to kill themselves and has multiple plans in which to do so and has tried to kill themselves in the past, it's very serious. Suicide is the number three cause of death in adolescents and early adolescents her age.

0:59:00

GLORIA: You know I love you. You may think sometimes that I don't love you, but I do. You always question that, I don't know why.

DR. DIAS: She's going home. I'm going to discontinue her, Delilah. So Alvarez is going to Bakersfield.

0:59:34

And then why don't we put on this one "home with Mom," yeah, Delilah home with mom.

Title:

Two years later

Delilah and Gloria in car

DELILAH: After the first time, it didn't solve anything. I was still emotionally unstable.

1:00:01

So, it kind of got worse. Because at school the problems continued and I didn't know how to cope with them. I tried committing an overdose and thank god nothing happened. That's when they sent me to a hospital. They sent me to therapy and everything. Everything's better now. I have two medications. One is for my anxiety, I take that one daily.

01:00:34

And the other one is for depression. So it's whenever I'm, it's to, like, control my feelings and, yeah, emotions.

GLORIA: It's been very hard. I try to be strong, but there were points that I'd be driving back from work and I'll just start crying, because I mean it's like, you know sometimes you feel like you don't have the strength.

01:01:04

But I'd just ask God to give me the strength to keep going and how best I can help her. You know, you think you have the normal child. And then you know, something like this happens, like what happened? What did I miss, what did I do wrong? You know. But other kids just don't get it in time, and they're gone.

ANNOUNCER: Delilah!

01:01:33

Title:
lofty dreams

Patrisse and Monte walking down sidewalk

KEN ROSENBERG: Monte, when did you realize that you had a mental illness.

MONTE: Well, I was twenty years old and I started seeing people whose ears were getting pointy. I felt like everybody was after me. I felt like people were talking about me, something's not right here.

01:02:08

I was thinking "why is my mind thinking like this, this is abstract, this isn't normal." Then I recognized within myself it's not normal, cause I know myself well. Doing a lot of time in solitary, you all by yourself, so you ask yourself questions. You get to know your mannerisms. You see what you do day by day, and you really get to know who you are.

MX: "Black Life it Matters Here"

NARRATOR KEN ROSENBERG: Soon after I got to know Patrisse, she took Monte and me to a vigil on behalf of a young man who had been fatally shot by the police.

01:02:33

TV NEWS REPORT (archival): An LAPD officer they say shot and killed their mentally challenged son, twenty-five year old Ezell Ford, Jr.

MR. FORD (on TV): They laid him out, and for whatever reason, they shot him in the back.

PATRISSE: More than half of the folks who are being shot and killed by police have some kind of mental health issues. We know that Ezell Ford in Los Angeles, who the cops knew had psychiatric issues -- shot and gunned down in his own neighborhood.

01:03:07

My brother Monte, who's had run-ins with law enforcement for a very long time, he's a part of a pattern of harming, abusing and often killing black people with severe mental illness.

MONTE: A lot of bad things have happened. You know, he's a big, a big black guy and he looks dangerous so we'll treat him that way. But that's the opposite, I'm, I've been in very few fights in my life, that's cause, I chose, I chose that.

01:03:37

PATRISSE: My hope is that we're going to intervene in the way Los Angeles treats the mentally ill, specifically the sort of cross section between mental health and incarceration. You have to have lofty ideas and lofty dreams.

PROTESTERS: No justice, no peace!

01:04:00

PATRISSE (with bull horn): There are currently 3,300 beds right now for the mentally right now inside of these jails, that's a problem.

Marchers chant with Black Lives Matter banners

NARRATOR KEN ROSENBERG: During the second year of filming, Patrisse co-founded a new civil rights organization that would become a national movement.

Black Lives Matter protests

PATRISSE (archival, at rally): ... for every single black life in this room, and every single black life on this planet, how are we going to save black lives?

01:04:38

PATRISSE: Pretty much all my activism, especially around police violence, especially around mass incarceration, is for my brother.

Title:
Washington, D.C.

Title:
National Conference
National Alliance on Mental Illness (NAMI)

01:05:00

PATRICK KENNEDY (speaking at conference): If this were cancer, there'd be a revolution in this country. This is an issue that is a civil rights issue. It's about the discrimination against our brothers and sisters, simply because of the immutable fact, their illness is an illness of the brain as opposed to an illness of any other organ in the body. This is not complicated. Treat mental illness the same as every other illness and we will make enormous differences in tackling the challenges that face us.

01:05:37

And there should be a Democrat or a Republic out there who says no to the agenda that you take up to Capitol Hill today.

Patrisse across from Capitol in DC

Title:
Congressional meeting with the
National Alliance on Mental Illness

MEETING PARTICIPANT 1: And she had schizophrenia. She thought bugs were crawling under her skin, and we ran to the ER and they basically, we ran to and they said, "Well, we have no beds and she's not a danger." We ran to Gracie Square Hospital. We have no beds, she's not dangerous. We ran to Beth Israel Hospital. "We have no beds, she's not dangerous." She wasn't sick enough for them to admit her.

01:06:14

MEETING PARTICIPANT 2: I got a nuisance ordinance from the City of Bedford police. They were out at the house before we came home and on the first call they laughed at my son. They thought it was funny, his mental illness. And they had been at our house 50 something times. This was nothing new to them. My son was now considered a nuisance. A few days later, five days later, they came out and they killed him.

MEETING PARTICIPANT 3: They murdered him.

MEETING PARTICIPANT 2: They over-tased him so many times. They changed their taser reports. There's no accountability for these guys at all. He always looked at me to help him. That day I just couldn't save him because they got in the way.

01:06:51

Rosenberg family home videos

VOICE: This is a very precious moment in the Rosenberg family. Mama, what you going to do for the camera?

VOICE: Hello, hello there

NARRATOR KEN ROSENBERG: My loving family was as close and open as can be – but there was one secret that could not be shared.

VOICE: Smile for the camera.

MERLE (archival): How you doing?

VOICE: Wonderful.

01:07:34

NARRATOR KEN ROSENBERG: A few years after she was diagnosed with schizophrenia, my sister heard voices in her head and jumped out of her bedroom window. Merle was found by the neighbors. She had broken nearly every bone in her body.

01:08:01

My mom and dad told everyone that an intruder had entered the house, and Merle went out the window to escape. My heartbroken parents dedicated their lives to getting Merle to walk again. But her mental illness was never to be discussed. And when my parents and my other sister, Gail, died, I was in left charge of Merle.

01:08:32

I hired doctors and social workers; she fired them. My family's house, now Merle's house, was falling apart and becoming unlivable. Whenever I came to the house, she locked me out. In

December 2005, I told her “you must move out, I need to get you help.” After two weeks of her not answering the phone, I finally called the police. They found her dead, in her bed, at the age of 56-years old.

01:09:12

Ken and Bob walk up to the house

NARRATOR KEN ROSENBERG: I never intended to share my family’s story. I never intended to go back home. But I now realize that we can’t fix something that we can’t face.

01:09:30

KEN ROSENBERG: I wish I knew what really happened. I really don’t know how to make sense of it, honestly.

BOB ZITIN: There may be things you never figure out now. You might never know.

KEN ROSENBERG: She would sit on this bed and write reams and reams of paper and, you know, write to the devil, and write to Rufus, who was the spirit who possessed her.

01:10:08

And you know, I’m sure that’s what happened when she jumped out the window. She was just so deluged by voices and ideas that were so scary. When she died, I didn’t feel a whole lot of anything. And it very much bothers me. I wish I could have made it better for my sister. I really do.

BOB ZITIN: You did everything you could, I know you did.

KEN ROSENBERG: I don’t know. I just wish there were a happier ending to her life, and to my entire family’s life.

01:10:53

Title:
you’re not alone

Johanna’s house, with Christmas decorations

JOHANNA: Just be careful not to let the cat out. I call her mellow yellow, cause her eyes. When I get too manic I say OK, I gotta mellow yellow. So, yeah, I went in the hospital and then feeling better and that's what hard is it's like you can feel pretty normal for a while, but then you just relapse.

01:11:39

But I always thought it was just the medication, but it's actually the illness, I guess, so that's when I'm finally after like five or six years of this is finally coming around to. I would like to get my degree. I would love to further down the line have a family, but I would like to have my degree, to have a job, to be able to support myself. That would just be so amazing, but it feels out of reach, but um, I, you know, I would like to get to that.

01:12:12

I just remember when this first happened to me, how alone and scared I was, and it was just the loneliest feeling. You just felt like this freak and you didn't know anything about and it was just – it would have been nice to have known that other people are like this. You know. And now I know, if you have this you're not alone.

01:12:36

Monte at Christmas tree stand

MONTE: Push it a little forward a little bit please. Push it a little forward a little. Should I cut it open?

VOICE: Please.

NARRATOR KEN ROSENBERG: Monte finished a year of treatment ordered by the court. He was taking medication, in therapy, and had a job for the first time in years.

MONTE: (to customer/friend) What's up boss?

FRIEND: Haven't seen you in almost over twenty years, man.

01:12:59

MONTE: Your little boy?

MONTE: Not everyone who has a mental illness is a monster.

KEN ROSENBERG: Have people treated you like a monster?

MONTE: Yeah, basically yes. Like “oh there’s that guy, he’s a bad guy, he did that because he had a mental illness.” That’s what my life story is. Just mind my business. Just want to just live, you know what I mean, be happy, just be left alone, you know.

01:13:30

Criminal courthouse lobby

VOICE: All rise, face the flag of our country. Department 126 of the Superior Court of the County of Los Angeles is now in session. Please be seated and come to order. Good morning, your honor.

NARRATOR KEN ROSENBERG: Todd was arrested. Unlike Monte, his case was heard in a criminal court.

01:14:03

JUDGE: The court has had an *in camera* review. The proceedings are sealed and discovery will be turned over in, I think it was, by 4/25.

TIMOTHY McDERMOTT (LAWYER): Your honor, I would also like to ask for an OR release on compassionate grounds. Has AIDS. His T cell count has plummeted to the double digits during his time in incarceration. This is a non-violent offense. His strikes are over. Bail is set at \$10,000; he lacks the 10% premium to get himself out of jail.

01:14:35

JUDGE: I'm sorry. You've got a strike on your history. I'm not inclined to release you at this point.

TODD: How many years do I have to pay for that? How many times do I have to pay for that?

JUDGE: You'll have to talk to your attorney about that. Okay, the request is denied. Matter is continued to May 4th, 2016.

TIMOTHY McDERMOTT (LAWYER): I don't think any police officer or DA can explain to me why a guy who's supposedly doing hand to hand drug sales in an amount less than \$10 is a

menace to the public safety, why he needs to spend over three months in jail while he awaits his trial. His health has plummeted since he's been inside.

01:15:07

His T cell count is now in the double digits. Basically, the system provides him just enough so that he won't die on their watch. But that's about it

NARRATOR KEN ROSENBERG: After three months in jail, Todd lost his apartment.

01:15:30

Protest on Downtown LA street

NEWS ANNOUNCER: This is Eyewitness News!

REPORTER: Hundreds of protesters shut down a busy downtown Los Angeles street -- why they put homemade jail cots in front of the Supervisors' office.

01:15:57

PATRISSE (at rally, making speech): The one hundred replica jail beds we've created are far cry from the upwards of six thousand the county is trying to build.

CHANTERS: We can't get well in a cell...

PATRISSE (at rally, to reporter into phone): People with severe mental illness deserve care. Holding people and warehousing them in jail cells is not going to be the way.

PATRISSE: We have historically not fought for people with mental illness. When people are rising up and saying we are sick and tired of our families being thrown away, being disposable. We have to be a part of a growing movement that[s] trying to change the course of history.

01:16:38

Title: Two years later

Patrisse and fellow activists greet one another outside LAC Board of Supervisors building

VOICE: ... where custody and criminalization...

Titles:

L.A. COUNTY BOARD OF SUPERVISORS

Vote on cancelling construction of a “mental health jail”

VOICE: ... medical conditions. They're not well served in custody settings. So community based care is really what we do to heal them.

01:17:01

SUPERVISOR HAHN: Uh, no clapping from the auditorium. If you agree with what they're saying, you can always put your hands in the air, raise the roof. Next speaker please.

PATRISSE (testifying): As you know, my brother Monte Cullors suffers from serious mental illness. There has been no adequate treatment for him or people like him in Los Angeles. It's been criminalization and incarceration. We need a radical shift in the mental health care in Los Angeles. No dollars should be spent on a facility that locks away human beings who are suffering, who are sick. Do this right, do not compromise. Support the Montes of Los Angeles now.

01:17:34

VOICE: Next speaker please.

DR. DIAS: My name is Colin Dias. I served for ten years as the chief of the department of psychiatry at LAC-USC Medical Center and seven years as the chief of emergency psychiatric services there. We are at an inflection point in the treatment of the mentally ill. You must change the paradigm.

WOMAN 1: There are people like me who sit here as proof that treatment and care instead of jail work. There are stories and stories and stories of thousands of people.

01:18:06

MAN 1: Last year, I lost a family member to the effects of mental illness.

MAN 2: Every time that my brother's been taken away, he's been given back to us in pieces.

PASTOR CUE: We been coming here for seven years saying “no more jail”, one year ago we came here saying “no more jail,” and today we come here saying, “no more jails, facilities of compassion for our people.”

VOICE: Thank you, next speaker please.

WOMAN 2: Imagine a place of care, imagine a place of well-being, when you’ve needed that.

01:18:32

DR. DIAS: And I beg you to consider expanding other community services, looking at intensive community-based models that are recuperative in nature, enhancing those...

MAN’S VOICE: I believe that this county has an opportunity to be the model for the country to put people first.

MARK-ANTHONY JOHNSON: I’m going to thank everyone in the audience who’s been fighting for almost a decade to get us to this point.

OFFICIAL: Supervisor Barger? Supervisor Barger no. Supervisor Hahn? Supervisor Hahn aye ... motion carries four to one.

01:19:01

applause

NEWS ANNOUNCER: Today on Eyewitness Newsmakers: a major turning point. The LA County Board of Supervisors will not build a new jail. Mental health treatment will replace it. A landmark change.

PATRISSE: We won. Monte, we won. (Laughs)

01:19:32

We get to dream big now. Monte, we’re gonna save a lot of lives, a lot of lives.

01:20:00

Titles:

One month later, Monte stopped his meds and became psychotic.

Patrisse brought him to a private hospital, where he was quickly discharged.

Without treatment, Monte became psychotic again, and homeless.

Monte's family and doctors are desperately seeking to find him sustained long-term treatment.

Busy LAC-USC Emergency Department

01:20:30

DR. MIRKOVICH: OK, it's very busy day today. Today's July 4th. All the beds in the community for inpatient psych are all filled, so we're going to get everything under the sun this afternoon, this evening.

DR. DIAS: So, I'm going to help you guys for a few hours. Let me knock some of these notes out. Is there anybody in particular that's more complicated that I can help with.

DR. MCGHEE: No, I think I signed up for those. (to Dr. Mirkovich) Are you DCing him or keeping him.

DR. MIRKOVICH: No, no, his history of agitation, family brought him in.

DR. MCGHEE: Okay.

DR. MIRKOVICH: So your last day in the ER is August 1st. Is that going to be a day of joy, or a day of sadness.

DR. MCGHEE: Fuck yeah.

01:21:30

DR. MIRKOVICH: So has your experience here in the ER left you a little drained?

DR. MCGHEE: Yes.

DR. MIRKOVICH: So you wonder how anyone could do this on a continuous basis, correct?

DR. MCGHEE: I don't wonder. I know people do it. I just have my limits. I'm quitting because it's a workload that's not manageable. My responsibility has to be to being the best doctor I can be, so I sort of developed a way to cope.

01:22:04

It's just gone on too long. As long as doctors tolerate these working conditions, and the outside world won't know what's going on, or understand what's going on, then nothing will ever get better.

01:22:30

The definition of insanity is repeating the same thing over and over and expecting different results. The way we treat mentally ill in this country is insane. To not have access to regular food, housing, medication, medical care, it doesn't make for a good American story.

01:23:08

Fireworks, fade to black

Titles:

For Merle, my family,

And the over 15 million American families

living with serious mental illness

Credits

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