

Demonstrative Displays

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DEFENDANT'S
EXHIBIT

144



EARLY PSYCHIATRIC TREATMENT

Hospitalizations

- McKeesport Hospital (9-23-85 to 10-9-85)
 - Described as initially fearful, withdrawn, and fearful.
 - He exhibited acting out behaviors necessitating seclusion and restraints.
 - Remained socially withdrawn.
 - Reported a possible suicide attempt at the age of 10
 - His discharge diagnosis was depression, chronic and adolescent adjustment reaction, and “homicide attempt.”

Hospitalizations

- Southwood Psychiatric Hospital, Adolescent Unit (10-10-85 to 11-21-85)
 - Transferred to the Children's Unit because of marked regression and extreme isolation
 - Acted antagonistically towards staff
 - Discharge diagnosis: Atypical depression; responded well to antidepressant medications

Hospitalizations

- Bradley Center (11-22-85 to 6-5-86)
 - Admitted for aggression (physical, verbal, and fire-setting)
 - Presented as quiet, withdrawn youth with fear and anxiety
 - Responded to treatment
 - No serious acting out (cried at destroying a history book; started a small fire with a transformer)
 - Appropriate responses to authority



FORENSIC EVALUATION

Setting and Context

- Butler County Prison
 - Private interview room, educational wing
 - Introduction: Judy Clarke on his legal team
 - Professional he trusted: David Freedman, Ph.D.
- Two evaluations
 1. Sept. 29 and 30
 2. Nov. 3 and 4



MALINGERING

Malingering vs. Feigning

- “Malingering” (American Psychiatric Association, 2022) is “the intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives” (page 835).
- “Feigning” is “fabrication or gross exaggeration of symptoms” but does not address various motivations.

Genuine responding #1

- Miller Forensic Assessment of Symptoms Test (M-FAST; Miller, 2001)
 - Score was “0” which is the lowest possible score (9-29-22 and 11-4-22)
 - Highly consistent with genuine responding

Genuine responding #2

- Structured Inventory of Malingered Symptomatology (SIMS; Widows & Smith, 2005)
 - Very low score of “4” “with symptoms described by individuals who have a genuine disorder” (page 15).
 - Same score, two administrations

Genuine responding #3

- The *Structured Interview of Reported Symptoms-2nd Edition* (SIRS-2; Rogers et al., 2010)
 - Its classifications are highly accurate for feigning and genuine responding.
 - SIRS-2 profile: five scales were scored as “0” and three scales as “1.”
 - These very low scores easily fall in the genuine range.

Genuine responding #4

- Personality Assessment Inventory (PAI; Morey, 2007)
 - Lowest possible scores (“0”) on the Negative Impression (NIM) scale and the Malingering (MAL) index
 - Very low score on Negative Distortion scale (NDS = 3)
 - In sum, very strong evidence of genuine responding



SCHIZOPHRENIA

Onset, course, severity

- Onset: Unclear, but clearly present in spring of 2018
- Course: continuous and unremitting
- Severity: highest category: “severe” (4) as “severe pressure to act upon delusional beliefs” (page 852)

Diagnosis of schizophrenia

- Persecutory and nihilistic delusions that Jews are responsible for invaders entering the United States and destroying white persons.
- Disorganized speech was exhibited with reference to delusional material.

Negative symptoms of schizophrenia

- Diminished emotional expression” (commonly “blunted affect”)
- Avolition (“decrease in motivated self-initiated activities;” APA, 2022, page 103)



POSITIVE AND NEGATIVE SYNDROME SCALE (PANSS)

PANSS Searches

- Computer searches on 1-3-23 for psychology (PsyInfo) and medicine (MEDLINE)
- Results: 21,496 peer-reviewed scholarly articles with duplicates removed.

7 Levels of severity

1. 1 = absent
2. 2 = minimal
3. 3 = mild
4. 4 = moderate
5. 5 = moderately severe
6. 6 = severe
7. 7 = extreme

7 Positive syndromes

P1 Delusions = 7 (Extreme)

P2 Conceptual Disorganization = 4 (Moderate)

P3 Hallucinatory Behavior = 0 (Absent)

P4 Excitement = 3 (Mild) to 4 (Moderate) overarousal

P5 Grandiosity = 3 (Mild)

P6 Suspiciousness/Persecution = 7 (Extreme)

P7 Hostility = 7 (Extreme)

7 Negative syndromes

- N1 Blunted Affect = 3 (Mild)
- N2 Emotional Withdrawal = 4 (Moderate)
- N3 Poor Rapport = 4 (Moderate)
- N4 Passive/Apathetic Social Withdrawal = 3 (Mild)
- N5 Difficulty in Abstract Thinking = 3 (Mild)
- N6 Lack of Spontaneity and Flow of Conversation = 3 (Mild)
- N7 Stereotyped Thinking = 4 (Moderate)

PANSS Modifications

- Only two changes after the 2nd evaluation:
 1. More pressured speech warranted a P4 rating of 4 (moderate)
 2. For N5, Difficulty with Abstract Thinking, problems with proverbs warranted an N5 rating of 4 (moderate)



ADDITIONAL CLINICAL FINDINGS

D-KEFS Proverb Test

Delis-Kaplan Executive Function System (D-KEFS)

- Proverb recognition: Able to recognize the correct alternative
- Reasoning
 - Correct with familiar proverbs (e.g., “Rome wasn’t built in a day”)
 - Markedly impaired with unfamiliar proverbs

Impaired proverbs

- Convoluted: “too many cooks spoil the soup”
 - Answer: “That doesn’t support diversity. Too many will screw it up. You have to be over-diversified. Nothing is good.”
- Potentially linked to delusions: “people in glass houses shouldn’t throw stones”
 - Answer: “Attacking people all the time might get attacked. Have vulnerabilities don’t attack others.”

Impaired proverb

- Illogical: “no bread is without a crust”
 - Answer: “true all has a crust.”
 - Queried: “eat around it if you do not like it.”
 - Comment: This statement made no rational sense, because the crust is around the bread.

PDSQ and trauma

- Psychiatric Diagnostic Screening Questionnaire (PDSQ)
- Very few symptoms each evaluation period.
- Trauma:
 - Both periods reported experiencing or witnessing a traumatic event (i.e., attack day).
- Persecutory delusions (2nd):
 - being watched, talked about, or spied on, and
 - being in danger because of a plot against him.

PAI Critical Item: Persecutory

- Delusions and hallucinations
 - Strongly true: #309 PAR-P: “I am the target of a conspiracy.”



DR. MARTELL'S REPORT

Past Evaluations (Defense Team)

- Independently reviewed feigning tests
- Conclusion: valid and reliable effort on all tests
- Tests: Reliable Digit Span, Dot Counting, Green's Word Memory Test, Rey's 15 Items, Test of Memory Malingering, and the forced-choice trial of the California Verbal Learning Test

Martell's evaluation: VIP

- Validity Indicator Profile (VIP):
 - Dr. Martell: “put forth a good effort and was not attempting to manipulate his test results”
 - VIP report: “the best conclusion is that he made a strong effort to answer the items correctly”

Martell's evaluation: CVLT-III

- Valid results: Forced-Choice trial of California Verbal Learning Test-III (CVLT-III).
- Expanded report:
 - Mr. Bowers scored perfectly (16 of 16 or 100%) on the Forced-Choice trial

Martell's evaluation: PAI

- “Mr. Bower’s PAI profile was valid, but he adopted a defensive response style, minimizing his problems to some extent and trying to make a good impression.”
- No evidence of feigning: scored “0” on both the NIM and the Malingering Index

PAI clinical findings

- Dr. Martell
 - Clinical elevation on Social Detachment (79T)
 - Subscale of schizophrenia
 - Conclusion: “associated with either a schizoid or schizotypal personality structure.”
- My conclusion: further evidence with extremely low score on the Warmth scale (WRM = 24T).

PAI conclusions

- Underreported psychological problems and potentially diagnoses
- As underscored in PAI Clinical Interpretive Report, “all available sources of information should be considered prior to establishing final diagnoses” (p. 8).



DR. DIETZ AND PSYCHOSIS

Schizoid Personality Disorder

- A2, Almost always chooses solitary activities;
A5, Lacks close friends or confidants other than first-degree relatives;
- A6, Appears indifferent to the praise or criticisms of others.
- A7, Shows emotional coldness, detachment, or flattened affectivity.

Likely underreporting

Appear likely:

- A1. Neither desires nor enjoys close relationships, including being part of a family
- A3. Has little, if any, interest in having sexual experiences with another person.
- Why not disclosed? Mr. Bowers, who “did not want to appear mentally abnormal” (p. 197).

Core issue

- *Mr. Bowers did not want to appear mentally abnormal* (emphasis added).
- This impression was “corroborated by his scores on the Personality Assessment Inventory administered by Dr. Martell” (p. 197).
- Example: salt deficiency

Golden ratio: Explore further?

- Numerology (p. 161): “Three and seven are definitely important to God. There’s something important about numbers. There’s something called the Golden Ratio, and it’s in all kinds of stuff. There’s definitely something to numbers.”

Think rationally?

- (p. 15 of Dr. Dietz's notes)
 - “Don't stop there. Find out what organizations are pushing this, climb the ladder, and find the Jew. 2.5% of the population is showing up like 80% of the time.” 8 of 10 people at the head of porn companies are Jewish. The word Israel means “conflict with God” or it means “argues, struggles, or conflicts with God.” The phrase, “Open borders' groups and their media allies” in the email is a “dog whistle” to him, and he hopes it was a covert reference to Jews.

Justifications for actions #1

- As he was crawling out with multiple gunshot wounds, when asked why he did this, Mr. Bowers offered the following:
 - “And he answered immediately that he had had enough, that they were killing our children and that all Jews had to die.” (Clint Thimons 6/2/2023 trial testimony)

Justifications for actions #2

- “He stated, good. These people are committing genocide on my people and I just want to kill Jews.” (David Blahut, 6/7/2023 Trial Testimony)
- “He said he had to do it, Jews are the children of Satan, and that they’re murdering our children” (Andrew Miller 6/7/2023 Trial Testimony)



QUESTIONS TO BE ADDRESSED

Question 1

At the time of the offenses on October 27, 2018, was Mr. Bowers suffering from a severe mental illness?

Yes he was suffering from a severe mental illness at the time of the offenses:
Schizophrenia, continuous, severe

Question 2

Did the severe mental illness he suffered at the time of the offenses impair his ability to conform his conduct to the requirements of law?

Yes his ability to conform his conduct to the requirements of law was significantly impaired at the time of the offenses