

JUDY ANN PARKER AND EUGENE'S MISSING MENTALLY ILL

by Brenton Gicker
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Judy Ann Parker was born on December 3, 1944, in San Francisco, California. She was the oldest of two daughters born to the late Leslie Parker and Bette Bruntsch. Her younger sister, Susan, passed away when Judy was in her 50's.

Judy grew up comfortably middle class. Her mother worked as a nurse and her father worked as a truck driver. Judy followed in her mother's footsteps and pursued a career in nursing; a profession that she worked in for more than 30 years, caring for patients at hospitals in California and Washington.

Judy had three children with her first husband (a retired Sacramento County Sheriff): two sons and a daughter, Kamara Houston, the youngest of the three. Kamara was the only family member interviewed for this story and most details about Judy's life and disappearance were provided by her.

Prior to relocating to Oregon in April of 2014, Judy lived in Tacoma, Washington for many years. According to Kamara, Judy lived a relatively normal existence and never exhibited symptoms of mental illness until October of 2012, after she received an emergency bowel resection surgery. During her stay in the hospital, Judy was given the benzodiazepine lorazepam (also known as Ativan), a sedative-hypnotic drug commonly given to patients to ease anxiety. Kamara believes Judy's mental illness problems were triggered by this experience and an adverse reaction to lorazepam (Kamara claims that Judy, who was

medically fragile and hypersensitive to drugs in general, previously had an adverse reaction to benzodiazepines and had a documented allergy to lorazepam).

However, while benzodiazepine abuse and withdrawal are known to cause transient delirium, it is unlikely that short-term, appropriate use would cause serious complications. Regardless, Kamara believes her mother was permanently altered by her exposure to the drug as well as the electrolyte imbalances and vitamin deficiencies caused by her gastrointestinal problems.

Regardless of the cause, Judy descended into full-blown mental illness in 2012. At that time, she was retired, twice divorced, single, and living alone. Her house became dilapidated and was eventually condemned and Judy became homeless on the streets of Tacoma.

Judy came to Oregon to live with her daughter in Cottage Grove after being discharged from a hospital in Washington, where she had been admitted for psychosis (initially it was thought that she had dementia but that diagnosis was ruled out).

Unfortunately, after relocating to Oregon, Judy's symptoms continued and she was repeatedly hospitalized for psychiatric reasons, including spending time at the Oregon State Psychiatric Hospital in Salem.

Living with her daughter proved untenable because of the severity of Judy's mental illness problems as well

as Kamara's marital problems at the time, and Judy was placed in an adult foster home in March of 2016, following one of her hospitalizations. Kamara maintained regular contact with Judy up until she vanished.

Judy was reported as a missing person — by staff from the (now defunct) adult foster home where she lived at 1129 R Street in Springfield, Oregon — on December 31, 2016. Judy's last known sighting was on December 30, 2016, at approx. 9:30am, when a surveillance camera from a business, located near her home, captured her walking along the street.

Judy was 72-years old when she went missing. If she is still alive today, she would be 75 years old.

Judy's disappearance has been agonizing for her daughter and others who know and care about her, and perplexing to the police investigating her disappearance as well as the mental health professionals who have been involved with her care.

Judy's case, in many ways, highlights the complexities and shortcomings of our mental health system.

Our broken mental health system

“Persons with active mental illness and addiction are some of the most discriminated against persons in society. Today, public services for these individuals in our city, county, state, nation and world, are terrible — when they're available at all.”

— **Jason Renaud, Mental Health Association of Portland, 2018**

Initially diagnosed with psychosis NOS (meaning psychosis *not otherwise specified* or nonspecific psychosis, a label applied to those who exhibit symptoms of a psychotic disorder without having been diagnosed with a specific illness, such as schizophrenia) and later schizoaffective disorder, Judy is a severely and persistently mentally ill person.

One of the biggest challenges facing the loved ones of those experiencing a major mental illness (such as schizophrenia or bipolar disorder), as well as mental health service providers and law enforcement, is having to respect the rights of mentally ill people even when it is obvious that they have mentally deteriorated to such an extent that they are largely incapable of making good decisions.

A common scenario is for a mentally ill person — who perhaps has been relatively stable for a period

of time — to become highly symptomatic when their support system is disrupted or their medication is no longer working effectively or because they quit taking their medication altogether (perhaps because of undesirable side-effects from the medication or because they believe they no longer need it).

Perhaps this person then begins having auditory or visual hallucinations; perhaps they become manic and reckless (spending all of their money, having sex with strangers, failing to show up for work or school, giving away belongings, etc); perhaps they begin isolating and neglecting themselves, etc.

For the loved ones of this person, it would seem obvious that they need care and that intervention is urgently needed to prevent them from completely self-destructing.

However, if the person refuses care, loved ones may have no option but to continue to offer support until the person has declined to such an extent that care can be forced on them; a far from ideal yet tragically common scenario.

In Oregon, in order for a person to be involuntarily hospitalized for psychiatric reasons, they need to display behavior that indicates they are an imminent danger to themselves or others, such as deliberately harming themselves (by cutting or burning themselves, poisoning themselves, etc), walking in traffic, neglecting themselves to the point that their health is seriously jeopardized, etc.

Behavior such as talking to yourself, saying odd things or posting bizarre comments on the internet, staring into space for prolonged periods, wandering aimlessly, hoarding, etc might be concerning but such behavior by itself is — thankfully — unlikely to result in forced hospitalization: someone should not have their rights taken away just because they are strange.

But, further complicating matters, there is no consensus about when exactly someone's behavior has become imminently dangerous, and one physician or police officer may believe someone meets criteria for involuntary treatment while others may not share that opinion (police can take someone to the hospital involuntarily on a “POH” — police officer hold, also known as a noncriminal hold — if they believe the person needs immediate psychiatric treatment; physicians can keep people in the hospital for a period of time if they are determined to be a danger to themselves or others).

Getting mental health treatment can be an extremely frustrating process, both because of the lack of accessible and effective mental health services, and because of the legal complexities involved in deciding when someone is

Nowadays mentally ill people are largely unable to get assistance until their situation becomes so dire that the system is forced to treat them.



Judy Ann Parker.

dangerous and/or unable to care for themselves due to mental illness.

Many would say that the pendulum has swung too far in one direction: whereas, in the past, mentally ill people were more likely to be sent off to (often inhumane) facilities merely for being mentally ill, nowadays mentally ill people are largely unable to get assistance until their situation becomes so dire that the system is forced to treat them.

In Judy's case, it seems — retrospectively at least — very obvious that something bad was going to happen, and one cannot help but feel as if the ball was dropped by many different agencies.

In the weeks leading up to her disappearance, Judy had been wandering away from home with increasing frequency (the foster home she lived at was not a lockdown facility and residents could come and go

as they pleased), and her psychosis was getting worse. Judy's wandering and odd behavior resulted in several contacts with law enforcement, mental health personnel, and emergency department staff during the month of December of 2016.

Judy was taken to the hospital by a local mental health agency on December 23, 2016 (a week before she went missing), after she showed up at the bus station in downtown Eugene in a state of psychosis. Judy told first responders that her name was "Camy Phraph" and that she was trying to get home to Washington (Judy was actually able to check into the hospital under the name "Camy Phraph").

According to Kamara, despite being in the throes of a major psychotic episode, Judy was discharged from the hospital back to her foster home, where she had limited supervision and was certain to wander away again.



Above: Judy Ann Parker. **Far Left:** Judy recovering in the hospital.

Judy left home on December 30, 2016 and has been missing ever since. While she was officially reported as a missing person on December 31, 2016, Kamara was not informed that her mother was missing until January 6, 2017 — a week later — when Springfield police notified her. Various agencies were already aware that Judy was missing but did not notify Kamara because of patient privacy rules.

Kamara immediately rallied to draw attention to her mother's disappearance; creating a Facebook profile ("Finding Judy Ann Parker"); doing interviews with the media, and circulating fliers locally and up and down the west coast.

The Springfield Police Department (SPD) put out a press release about Judy's disappearance on January 7, 2017. SPD and the Lane County Sheriff's Office carried out search efforts around the same time but, for Kamara, it was too little too late: a critical week had passed with little or no effort being made to find her mother.

More than three years later, Judy remains missing and — according to Kamara — there is not "one single shred of anything or any hope of finding her or what has happened to her. I cannot put into words the agony I feel."

What happened to Judy Ann Parker?

"An elderly woman with severe psychosis and a multitude of health issues just takes a walk one day and never returns. And everyone in charge just goes on as if it was okay."

— Kamara Houston, 2019

Judy had no history of suicidal ideation and there is no evidence to suggest she was suicidal at the time she disappeared. There is also no evidence of foul play: Judy had no known enemies, she owned very little, and there was very little to gain from taking advantage of her. It is not impossible that she was the victim of violence but there is no evidence for it.

What the evidence suggests is that Judy, in a psychotic state, left her home voluntarily; perhaps to return to Washington or another area familiar to her or to go somewhere that voices in her head commanded her to go. "She had created a world inside her mind that made sense to her," says Kamara.

Judy had lost a significant amount of weight in the weeks leading up to her disappearance and her frail state made her particularly vulnerable to the winter cold. It is highly unlikely that Judy was prepared to survive sleeping outside and she likely would have quickly succumbed to the elements. But, if so, where did she die, where is her body, and why has she not been found by now?

Another possibility is that Judy is living in another town — how she made it there, who knows — and that she is somehow surviving on the streets as an elderly, mentally ill person. That scenario seems unlikely but such mysterious people can be found anywhere and everywhere.

Perhaps Judy made it to another town where she died a "nobody", to borrow the words of Eduardo Galeano; an unfortunate, unidentified person whose death was seemingly nothing more than a mere blurb "in the crime reports of the local paper."

Or perhaps Judy has been institutionalized somewhere. It seems unlikely that she could be hospitalized or locked up in a facility somewhere without the authorities or family members being notified but, having been deprived of pertinent information by agencies before, Kamara is not so sure.

Maybe “Camy Phraph” is alive in a psych ward somewhere right now.

Regardless, Kamara blames the system for Judy’s disappearance, and she is not optimistic about her mother’s fate. “The people responsible for my mom’s safety failed,” she says. “In an epic way. And it’s cost my mother her life.”

Other Cases

“Almost 2,000 people are reported missing every day in America.... The majority are eventually found, either dead or alive — teen runaways, down-on-their-lucks hoping to make a clean start somewhere else, the mentally ill who stray out of their neighborhoods and onto the evening news. But tens of thousands more remain missing, often for decades.”

— **Jeremy Lybarger**, *The Encyclopedia of The Missing*, 2018



Kevin Daniel Elkins (DOB 12/6/1961) has been missing since September 14, 2005. I encountered him personally several times in the early 2000’s; both as a waiter and as a mental health worker in Eugene. Kevin was disabled, homeless, and mentally ill. He was often loud and his behavior

was frequently erratic but he was generally a friendly and pleasant person (I recall him telling me — in his gravelly voice — that he was expecting a huge inheritance that he intended to donate to White Bird Clinic).

According to Oregon Crime Stoppers, “Elkins was homeless and lived on the streets of Eugene. He often tied things to his clothes such as ribbons, trinkets and feathers. He spoke slowly with a raspy voice. He was 43 at the time of his disappearance.” He would be 59 years old today.

According to The Charley Project, “Elkins was last seen at approximately 11:00 a.m. on September 14, 2005, picking up his weekly money at the bank in the vicinity of 10th and Oak Street in Eugene, Oregon. He has never been heard from again. Few details are available in his case.”

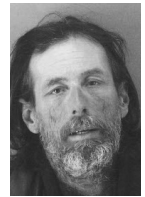
Jeremy Adam Hayward (DOB 6/8/76) has been missing since April 16, 1998. Jeremy was approximately 22



years old when he disappeared. Today he would be 43 years old. Jeremy suffered from mental illness. According to The Charley Project, “Hayward was last seen at a hospital in the vicinity of 13th Avenue and Hilyard Street in Eugene, Oregon on April 16, 1998. He has never been heard from again. Few details are available in his case.”

Laura Lucille Hitson has been missing from Eugene since September 25, 1994. She was 34-years old when she disappeared. Today she would be approximately 60 years old. According to the National Missing and Unidentified Persons System (NamUs), “Laura was being transported to Sacred Heart ER when she bolted. Please note, she can be violent/aggressive without her medications.”

Merle LeRoy Ryan (DOB 11/04/1958) has been missing from Eugene since October 17, 2012. He was 53 years old when he disappeared. If alive today, he would be 61 years old. Merle has been known to go by aliases including Moses Enoch, Dimitri Andropv, and John F. Kennedy. According to The Charley Project, “Ryan suffers from schizophrenia and has a history of wandering across the country from state to state. He is often homeless. He was arrested at a park near Cesar Chavez Street in San Francisco, California on October 17, 2012; this is the last indication of his whereabouts. He has never been heard from again.”



Merle LeRoy Ryan has been missing since 2012.

Scott Matthew Sells (DOB 4/12/84) has been missing since September 12, 2003. He was 19 years old when he disappeared. If alive today, he would be 35 years old. According to The Charley Project, “Sells was last seen in the early morning hours of September 12, 2003, at a family member’s residence in the vicinity of Adams Street and West 4th Avenue in Eugene, Oregon. He was initially believed to have gotten on a bus to Arcata, California, but he never arrived there and it is unclear whether or not he boarded the bus.”

Additionally, The Charley Project claims that “Sells may have been seen in the area of Lane Community College near Eugene in early 2004, but this has not been confirmed. His case remains unsolved.”



Scott Matthew Sells.

As far as I know, I never met Scott personally, but he and I shared a mutual friend, Alex Castle. In the late 90's and early 2000's, all three of us were members of the local punk rock and heavy metal music scenes.

According to Alex, "My friend Scott Matthew Sells dropped off the face of the earth in 2003 and not one trace of him was ever found. We learned how to ride freight together, and had traveled together off and on for a little bit. His mental health had started slipping a bit before that but he was mostly together."

Alex claims that, prior to his disappearance, Scott had traveled to California's Bay Area, where he began using heroin and meth. At a certain point, he had a positive HIV test, which had a sobering effect on him. However, a followup HIV test was negative, and Scott resumed his dangerous lifestyle.

Alex says that Scott "Ended up getting arrested bathing naked in a fountain on the Berkeley campus. They were going to keep him committed but I believe his father came and got him against his mom's wishes. He came back up to Eugene and came in and out of town a bit. He was still doing some meth and it was apparent that he was suffering from schizophrenia."

Alex believes Scott was planning to go back to California to see a girl he had met at a "Rainbow Gathering." "He was supposed to get on a bus to Arcata", according to Alex, "but no one knows if he did or not."

Scott's parents are now deceased and his case remains a total mystery. "It's just crazy," says Alex, "it's been 16 years and no body has been found."



For more information:



The Charley Project
<http://charleyproject.org>

The Encyclopedia of the Missing
<https://longreads.com/2018/01/11/the-encyclopedia-of-the-missing>

Finding Judy Ann Parker
<https://www.facebook.com/Bringjudyhome>

National Missing and Unidentified Persons System (NamUs)
<https://www.namus.gov>

Someday Known
www.somedayknown.org

The Unidentified
www.theunidentified.org

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