

The Little Boy With The Pretty Blue Eyes

By Michael Groetsch

As the little boy walked into the office with a clumsy and stilted gait, he made an attempt to avoid eye contact. Looking to the side, he said nothing. Both arms were held in a rigid manner as if he was prepared to ward off an attack. His upper forehead was bruised and I could see two linear shaped scars near the base of his neck. The scars appeared to be old wounds. Although quite thin, his protruding abdomen suggested the onset of malnutrition.

I reached out to him in an affectionate manner, but he quickly retreated to the corner of the small room. The little boy with blue eyes seemed confused and terrified by my presence. Although I offered him a toy truck and a fuzzy, brown, teddy bear, he maintained his distance. When I held out a chocolate chip cookie, he responded with a guarded smile. As he hesitantly approached my open arms, I gave him a gentle hug. His little body became rigid and he began to whimper for his mother.

It was the summer of 1980 that the two-year-old boy was taken into state custody. Witnesses saw him being attacked by his mother in the lobby of the welfare office. They immediately called the police. He was temporarily housed in a shelter for abused children. He was to remain at the shelter until a foster home could be located.

A visit to the single bedroom apartment that the child shared with his mom, grandfather, and eight-month-old sister revealed that it was uninhabitable. The police report stated that piles of garbage and stacks of newspapers were strewn everywhere. Even his baby bed and the bathtub were used as trash receptacles. With the exception of a six-pack of beer, the refrigerator was empty. The small food pantry to the right of the kitchen stove contained a single box of cereal.

The absence of food explained the little boy's malnourished appearance. It was reported that the stench of animal waste and urine made it difficult to do the investigation.

Within two months of being brought into custody, the little boy with blue eyes was placed into a foster home with a young couple. The couple had two small sons and was expecting a third. While adoption was a distant possibility, the child's foster parents offered to provide him a safe haven until the parental rights of his teenage mother and father were determined. His father had abandoned him at birth. His 16-year-old mother was the abuser.

The child's early adjustment to his foster home was extremely difficult. As numerous symptoms related to his early trauma surfaced, the couple began to question their ability to address his emotional scars. While they felt competent to nurture, the little boy's needs seemed beyond their capabilities. On at least two occasions when he threw uncontrollable tantrums, they considered "throwing in the towel." They contacted social services and suggested that they were reconsidering their role as foster parents. They apologized and told the social worker that they feared his behavior might affect their other sons. The couple agreed to give it another month. If things didn't change, they were prepared to return him to the shelter after another placement was found.

During his early transition, the little boy began to display a frightening sleep disturbance. Prior to falling asleep, he would methodically twirl his thick brown hair with his right index finger while staring blankly at the ceiling of his bedroom. After falling into a deep sleep, he cried hysterically. Attempts to wake him from his nightmarish states were often unsuccessful. On some nights, he would yell in his sleep until he became exhausted. Only then, would the screaming stop. Bedwetting during these episodes was very common. A plastic sheet was wrapped around his bed's mattress to protect it from being ruined.

Initially, his foster parents feared the worst. They wondered if the little boy could be suffering from autism or some form of psychosis. He seldom smiled and his blue eyes reflected a deep rage. After meeting with a psychiatrist, however, it was suggested that the child was severely depressed. Although the doctor did not recommend medication to address the issues of concern, he did feel that the best prescription for the child's pain was a loving home.

The little boy's inability to respond appropriately to physical discomfort or pain also became a primary concern. On frigid winter days, he would leave the house without a coat, but did not react to the cold. On Thanksgiving morning in 1983, he cut his arm on a piece of glass. Although he was bleeding profusely, he didn't cry nor let his foster parents know what had happened. They became aware of the accident when they saw a trail of blood on the kitchen floor. He was rushed to the hospital but said nothing. The doctor sutured his gapping wound as the child quietly stared at the wall in the emergency room.

As the years passed, he acquired an asthmatic condition. In the middle of the night, he suffered attacks in which he could not breathe. His parents would close the door to the bathroom and turn on a hot shower. The steam from the shower often opened his lungs. If not, he was rushed to the emergency room. When he was eight-years-old, the young boy began to develop motor tics related to Tourette Syndrome. The jerking motions of his shoulders and head, the twitching of his eyes and involuntary grunting, seemed more apparent during periods of stress.

His foster parents also noticed that the child never asked for or played with toys. If a toy was given to him as a gift, it was placed unopened in the corner of his bedroom closet. It seemed that his early abuse and neglect had robbed him of an ability to fantasize. In the summer of 1985, he was diagnosed with a severe learning disability. His intellectual and cognitive abilities were

found to be limited. The early blows to his head, reflected by scars on his scalp, resulted in brain damage. He was placed in educational programs designed for such children.

Although the child had not grown in his foster mother's womb, he had grown in her heart. When he was five, his foster parents petitioned the court for adoption. They knew in doing so, there were great risks. They were painfully aware that a court hearing would be held and that a judge could order the child returned to his natural parents. A hearing date was set and both birth parents were notified. His natural mother stated she would not attend and immediately surrendered all parental rights. His natural father, however, the same father who had abandoned him at birth, notified the authorities that he would be present. He also told his attorney that he wanted to be reunited with his son. He stated that he was the real father and that his parental rights had been violated.

On the morning of the long anticipated hearing, the little boy's natural father strolled into the crowded lobby of the sprawling courthouse. He was dressed in a white pinstriped suit and cowboy boots. He wore a red flower in the left lapel of his tight fitting coat. The man had not seen his son in nearly five years.

While avoiding eye contact with the boy's father, the foster parents scanned the lobby looking for a young woman who may be the boy's mother. While sitting and meeting with the state's social worker, however, they were reassured that the child's mother would not attend the hearing. They were shown the papers she had signed surrendering her parental rights.

Within an hour of their arrival, a hearing convened that would decide the future of the little boy with the blue eyes. The state's attorney argued that the child's best interest was to remain in the home of his foster parents until he was adopted. The attorney for his natural father asserted that the man had legal rights to his son and that the child must be returned. The foster

parents testified and cried. The man who had not visited his son in five years testified and lost. As if he had squandered a bet at the racetrack, emotionless, the man in the pinstriped suit left the witness stand and walked out the courtroom.

Twenty-eight years have passed since the little boy was taken into state custody. With the exception of the court hearing, neither of his birth parents has attempted to make contact with him. At age six the child was adopted by his foster parents. He was provided with special education programs staffed with wonderful teachers and school counselors. He was placed in a vocational program with mentors who taught him life skills. He was sent to a therapist who helped him address the wounds of his early childhood. Most importantly, he was loved.

The little boy is now a young man. He no longer throws temper tantrums associated with rage. He no longer twirls his hair at night while staring at the bedroom ceiling. The nightmares have ceased and so has the bedwetting. The motor tics associated with Tourette Syndrome and his asthma have disappeared as well. Although he will always suffer with a learning disability, he has become someone who has recaptured much of the innocence lost as a child.

As a 33- year- old man, he no longer responds in an emotionally detached manner. Once devoid of feeling, he has acquired the ability to love and express himself to others. In 1996, when graduating from high school, he cried while hugging his teacher and told her how much she would be missed. Recently, when I was preparing to leave for a business trip to Dallas, he came into my room, made eye contact, embraced me, and said, "I love you, Dad."

The little boy with the pretty blue eyes, the one who initially seemed so fearful and shy, would later become my loving adult son.