

## Sniper on the Tower

Now the Tragic Drama Is Over:  
What Happened? Why?  
A Staff Report

By DERRO EVANS  
and SARA SPEIGHTS  
Staff Writers

In the horrible 90 minutes of an August noon, the cold-blooded efficiency of a sniper ended 13 lives. Many more were forever changed.

The lives were altered by disbelief, shock, terror, heroism, numbness — and, the sociologists say, by a host of other emotions bombarding the subconscious mind.

Just as the human mind could not be conditioned to prepare it for the grim events on Monday, there is no way to measure just how much of the truth it could actually absorb.

The basis for understanding how people reacted to the massacre, then, must come from the comparatively unemotional and level-headed approach of the scientist — specifically, the sociologist, who has devoted his life to observing humans.

Sadly, the man who could have offered the greatest insight into the reactions of people on that day died only last month. Dr. Harry E. Moore, the noted University of Texas sociologist, had delved deeply into the previously unexplored field of the behavior of human beings during times of tragedy and disaster.

A lifetime of Dr. Moore's fruitful research remains. In investigating many situations of crisis — ranging from the Waco and San Angelo tornadoes of 1953 and Hurricane Carla to the unexpected transfer of an entire command of Air Force families — Dr. Moore had arrived at a "theory of disaster." Many elements of it were match-

ed in turmoil of Aug. 1.

Only last month, Dr. Moore wrote: "The initial reaction in crisis... is one of stunned inability to act efficiently — dazed bewilderment, disbelief, or refusal to accept the fact as real."

Six people were together in the Classics Department office on the 26th floor of the tower when the first shots were fired.

Someone suggested that a tape recorder which had been making "weird sounds" might be acting up again.

Sister Miriam Garana of San Antonio's Incarnate Word High School feared that a workman's scaffold had fallen.

Mrs. Leoda Anderson, the departmental secretary, called the university's maintenance department to ask if there had been an elevator accident.

Along Guadalupe St., people in the stores heard the sounds and noticed that people walking outside were looking around in bewilderment.

Mrs. Margaret Allen of Sheffall's Jewelry: "I thought it was a cap pistol, maybe some sort of fraternity prank."

Mrs. Ferris Nassour of the Cadeau: "It sounded to me like a pop gun."

An 18-year-old girl from Oglesby, one of 600 high school graduates on the campus for freshman orientation: "I was sitting on the front porch of the Music Building, listening to a police radio through the whole thing. It could just as well have happened in another city or country. We were sort of light-hearted about the whole thing. We didn't know how to react."

### Reaction Under Stress

Diane Casey, 18, student from Anahuac: "Everybody's first impression was that it was a joke."

Jimmy Welder, 17, of Victoria: "I couldn't believe it. It was unreal."

The reality came with the sight of blood-streaked bodies dropping to the ground.

"Everything that moved out on the sidewalk seemed to get shot," said Joe Arthur, a 22-year-old sophomore from Austin who watched horror-stricken from a barber shop on the Drag while at least four people were shot down on the sidewalk outside.

Kenneth Schindewolf, 18, of Houston, who was attending orientation: "I got shot at, right close by. I flew behind a car. Finally I ran across the street and could hear the bullets hitting in the street."

Mrs. Leoda Anderson, watching from the 26th floor of the tower: "When we saw the bodies, we realized what was happening."

Dr. Moore's theory continues: "This first period of disbelief, inactivity and stunned response, is usually followed by intense activity, an effort to regain organization in one's life by sheer force of energy... This period is also marked by a distinct euphoria during which mutual aid... is freely given in an effort to alleviate suffering."

The instances of heroism and bravery can never be fully counted, for they happened again and again without premeditation.

Perhaps the courage began high above the earth, minutes before the reign of death began, when a woman, alone and unarmed, confronted the killer.

The description of Mrs. Edna Townsley by many of her friends as "one hell of a scrapper," plus the brutality of her wounds, indicate that the tower receptionist probably tried to stop the killer.

On the ground below — after the horror began — many risked their own lives to reach the dead and wounded and bring them to safety.

As Chancellor Harry Ransom said later: "Youngsters in white shirts (perfect targets) ran out from behind buildings and rescued or helped those who were hit."

Patrolman Billy Speed, 22, lay on the Inner Campus Drive, bleeding from wounds which would prove fatal. Police officer Jerry Culp and another policeman carried him to safety.

Dr. Charles Laughton watched from the 24th floor of the tower: "I saw a girl shot near Hogg Auditorium. Some people came around the corner, grabbed her by the feet and pulled her behind the building."

In front of Sheffall's Jewelry, Homer Kelley ignored the pleas

of other store employees and stayed near the body of a badly-injured boy. Twice, as bullets came crashing through the store window, Kelley was wounded in the leg.

Patrolman Ramiro Martinez crept along the outside of the tower, and with his pistol he ended the sniper's crazed slaughter of the innocent.

"I just had a job to do," Martinez said. "I had no thoughts. I just had a job to do and I blocked everything else out of my mind."

The killing was over and in its place was numbness and a feeble attempt to give some logical explanation to the abnormality of the act.

In such an event, Dr. Moore wrote: "Survivors are suddenly given a feeling of impotence."

One coed asked her companions, "Why them? Why not us?" "I was there, but I don't feel like I was a part of such an event," said a girl from Abilene who was attending freshman orientation. "I can't think of persons, individuals killed. I feel sort of bad about this."

The tower outside of Austin was moving swiftly to react to the tragedy. In Rio de Janeiro, Gov. John Connally cancelled his tour of South America, saying he was "shocked and grieved." President and Mrs. Johnson wired Dr. Ransom, "We are deeply grieved."

All across the city, telephones were ringing. There is no total on the tremendous number of

calls which came into Austin, but the largest number of long distance calls ever placed in a single day — 34,228 — were recorded by Southwestern Bell Telephone Company. The company was able to complete only about 20,500 calls.

"Parents called the dorm, crying and asking where their kids were," said Diane Casey, 18, freshman from Anahuac. "If the operators told them they didn't know, the callers begged them to find them (the kids). It was panicky, frantic."

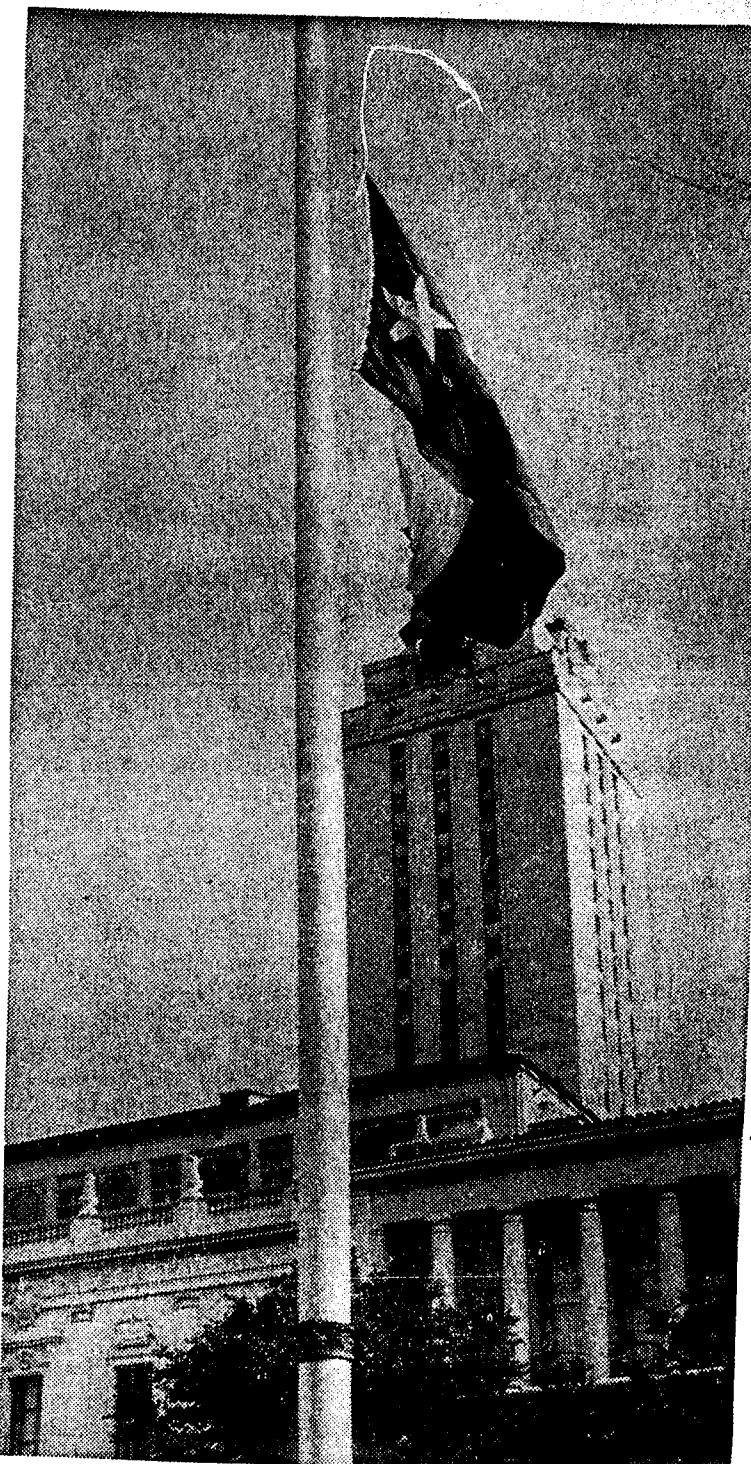
On Tuesday, a city still reeling with shock began trying to find some reassurance in returning to the routine patterns of living.

At the university, where the flags fluttered at half-mast, there were no classes, but many people wandered about the campus. The curious were arriving by the carload to view the tragic scene. Even those who had unwillingly been caught in the midst of the day of death found it impossible to walk by the tower without looking up.

On Tuesday afternoon the first body was lowered into the earth.

Dr. Moore wrote: "Losses become apparent, and persons begin to seek someone to blame for their losses. Search for a scapegoat on whom emotional tension may be released may begin."

In many minds and then on many lips it had begun, first as nagging doubts that people tried



to suppress and then as full-blown, often angry accusations. The people were asking, over and over again:

"Could this have been prevented?"

"Could the psychiatrist have done more than he did?"

"Why did it take 90 minutes for the police to reach the top of the tower?"

"What about the gun laws?" Even a sociologist fell into the pattern, telling a reporter that a neurologist would have said that the tumor did indeed influence the sniper's thinking, and that more knowledge about neurological disorders and better methods for diagnosing them might have made a difference.

Finally, the reactions of some went completely against the grain, defying any carefully-planned set of reactions or patterns. One of the most amazing came from a boy from Honduras, on the campus, for an orientation program with 65 other foreign students who will be studying in the U. S. "It was just like a coup in our country," he observed. "We have those every two or three years, you know."

"I stood on the front porch of the Commons through most of it... The reason all those people got shot is because they ran. I was in view of the tower but I stood very still. A moving target is more challenge to a hunter."

## The Psychiatrists: Right Before and After the Tragedy

By CHRIS WHITCRAFT  
Staff Writer

Insane slaughter on The University of Texas campus is a horrible thing to have happened, but it or some other unpredictable individual act of violence against innocent people could happen again tomorrow.

Psychiatrists will again fail to give at one moment in time the value to a patient's statement others will place on it later with hindsight.

Both sets of psychiatrists will be right.

All will be human beings doing their best.

This is the philosophy and considered professional opinion of a senior Austin psychiatrist, one of 10 in the city certified by the American Board of Psychiatry and Neurology. Four of these are at the Austin State Hospital.

The senior psychiatrist is Dr. Clarence R. Miller, superintendent of the 3,100-bed Austin State Hospital of the Texas State Department of Mental Health and Mental Retardation. Commissioner Shervert H. Frazier is another board-certified psychiatrist.

The human trigger of shocking and harrowing murders in Austin last Monday was Charles Joseph Whitman, 25.

He was a University engineering student, laboratory consultant, and one-visit psychiatric patient of U.T. part-time staff Psychiatrist Maurice Dean Healy, M.D., at the Student Health Center. Dr. Healy said his notes dictated immediately after Whitman's voluntary visit and his memory as refreshed by those notes reinforce his opinion that on Tuesday, March 29, 1966, Whitman had "no psychosis at all."

Healy himself withstood terrific pressures of nine microphones and six television cameras he knew were to carry his words to the nation. This was at the University-called press conference the day after Whitman's sudden violence left a toll of 16 persons dead, including himself, his young teacher wife, his mother, and 32 wounded.

Reporters did not then know Healy would read these words so appalling in their implications by hindsight:

"He (Whitman) readily admits having overwhelming periods of hostility with a very minimum of provocation."

"Repeated inquiries attempting to analyze his exact experiences were not too successful with the exception of his vivid reference to 'thinking about going up on the tower with a deer rifle and start shooting people.'"

Astonished reporters had Dr. Healy repeat the words.

Their questions hammered at the psychiatrist as U.T. regents Chairman W. W. Heath, Chancellor Harry H. Ransom, and Health Affairs Vice Chancellor Charles LeMaistre watched and listened to him. So did national television audiences themselves that night in their own safe homes.

Headlines and snap judgments were being made then and there. Later they were heard across the nation and around the civilized world where human safety is one of the great reasons for organized society.

It was quite possible Dr. Healy could find himself the scapegoat people always seek for blame after every disaster.

Board-Certified Psychiatrist John A. Boston Jr., is a private

practitioner, part-time assistant professor of Special Education at the University, and one of nine trustees of the Mental Health Mental Retardation Community Center being organized in Austin. He had little difficulty the night before Dr. Healy braved the hot television lights in speculatively labeling Whitman's actions as probably those of a paranoid schizophrenic.

People don't come much more psychotic than that.

Dr. Miller says both psychiatrists were right.

Dr. Healy was right on March 29.

Dr. Boston was right on August 1.

Dr. Healy, after years of successful private practice in San Marcos, had his own reasons for a radical change in specialty from surgery to psychiatry. He sold his San Marcos practice. He began his required three-year residency training in psychiatry at the Austin State Hospital in 1960. Part of the A.S.H. residency requirement to practice psychiatry is six months of experience at the University of Texas Student Health Center.

Two such A.S.H. residents are currently at the center under Board-Certified Psychiatrist-Director Paul L. White, M.D. He has been out of the country.

"We have known Healy for six years," A.S.H. Superintendent Miller said. "I was the one who first showed him the hospital and wards when he came to begin his residency. My predecessor approved his application. There is no adverse information in his record or to our knowledge."

Healy has done part-time work for the Health Center, the Texas Youth Council (Gates-

vile), and spends one afternoon a week working on the disposition committee at the State Hospital. He has done other consultation work and has a private practice. He continues to live in San Marcos.

Dr. Miller made some comments on Dr. Boston's speculative diagnosis of the tower sniper Monday night. That diagnosis was based on then available facts.

It was before the University called a press conference for Healy's review and public release of confidential medical records on Charles Joseph Whitman.

Dr. Miller also commented on Dr. Healy's notes dictated after the Whitman consultation on March 29, his conclusions Whitman had no psychosis at all, and was no danger to himself or the community that would justify his being separated from society or committed to a mental hospital.

Dr. Miller's comments were made at the request of The Austin American-Statesman. They are based on this newspaper's report of the Boston diagnosis and the Healy press conference in addition to Miller's observing part of Healy's performance for the television cameras.

Dr. Miller is quick to say he holds a good opinion of both psychiatrists and has closely observed Healy for six years.

Here is what Dr. Miller says about the Boston speculative diagnosis that Whitman's violently hostile random and dramatically sensational shooting of innocent and defenseless persons on the campus and nearby was that usually associated with a paranoid schizophrenic psychotic personality:

"I think Dr. Boston has summarized the probable dynamics in this case in a speculative way about as accurately as anyone could," Dr. Miller said. "I have thought much in the same vein as Dr. Boston expressed himself in the newspaper account."

Dr. Miller pointed out, however, that his and Dr. Boston's thinking had the immense benefit of hindsight.

Here is what he says of the Healy report on Whitman having no psychosis on March 29:

"In considering Dr. Healy's testimony," said Dr. Miller, "I don't consider that he made any particular mistake or that I would have done differently had I been in his shoes last March and having gained the impressions he did of Whitman."

Healy at the press conference referred early to Whitman as "looking every inch the role of a pro football player, an energetic active Marine he had once been, and having the features of the All-American boy with a flat-top or burr haircut."

Dr. Miller continued his comments.

"I think I likely would have gained the impressions Healy did and reacted to the situations just as he did."

"Try to put yourself in Healy's shoes as he was at the press conference Tuesday and as he was that other Tuesday in March when he listened to Whitman the Golden Boy. Try to think if you as a psychiatrist could have done any better."

"I don't think I could have done any better in handling the case or that horrible situation Tuesday at the press conference."

"I dare say it would have been humanly impossible for anyone to have had this man committed on March 29 to a hospital as mentally ill. As for the tumor found in autopsy it could not have affected his behavior directly and may or may not have caused headaches. He did not complain of headaches."

"It is customary practice not to follow up on broken appointments. The Health Center is entirely voluntary. There is the question of the man's personal and civil rights and a mental health code."

Vice Chancellor LeMaistre read this at the press conference:

"The University Health Center is a voluntary operation provided by the University for the benefit of students. Psychiatric, as well as medical, care is available. No student is required to take advantage of it."

"Each student has the right and privilege to select a physician and hospital of his choice."

"Unless a student demonstrates a behavior pattern which would legally justify involuntary commitment, the University has no alternative except to suggest that the student take advantage of its services, and it is up to the student to decide whether he wishes to do so."

"In this (Whitman) case, the attending physician saw no indication of any legal grounds for commitment. Although he suggested further consultations, the student did not take advantage of them."

"Dr. Healy's conclusion on March 29, 1966, that there was no indication at that time that Whitman was a danger to either

himself or the community was consistent with the impressions of his teachers, his employer, and his associates, none of whom observed anything during the intervening four months which reflected unusual behavior."

Dr. Miller had a final comment to make about psychiatrists as human beings too.

"None of us are gypsies," he said. "We can not prophesy the future."

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