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REFLECTIONS FROM DEATH ROW

Michael Ross

My name is Michael Ross. I am a condemned man on Connecticut's death row. When most people think of death row inmates, I'm the one they think of. I'm the worst of the worst, a serial killer who is responsible for the rape and murder of eight women in three different states, who has assaulted several other women, and who has stalked and frightened many more. I have never denied what I did and have fully confessed to my crimes. The only issue in my case was, and still is, my mental condition. For years I have been trying to prove that I am suffering from a mental illness that drove me to rape and kill and that this mental illness made me physically unable to control my actions. I have met with little success.

So here I sit on death row, waiting for the judicial system to complete the tedious process which will in all likelihood result in my eventual execution. And when I am finally executed, many people will celebrate my death. Sometimes, when I close my eyes, I can envision the hundreds of people who will likely gather outside the prison gates on the night of my execution. I can see them waving placards, drinking, and rejoicing, and I can hear their cheers as my death is officially announced.

Who is Michael Ross, and what could possibly motivate a clearly intelligent individual, a Cornell University graduate, to commit such horrendous crimes? As you might expect, I have been examined by a multitude of psychiatric experts over the past 13 years since my arrest in June of 1984. All of them, including the state's own expert psychiatric witness, diagnosed me as suffering from a paraphiliac mental disorder called "sexual sadism"—a mental illness that, in the experts' words, resulted in my compulsion "to perpetrate violent sexual activity in a repetitive way." These experts also agreed that my criminal conduct was the direct result of uncontrollable sexual impulses that were caused by my mental illness. The state's only hope of obtaining a conviction and death sentence was to muddy the waters and to

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inflame the jury's passions and emotions so that they would ignore any evidence of psychological impairment. In my particular case, that was quite easy to do, and the state succeeded in obtaining convictions and multiple death sentences.

What exactly is a paraphiliac mental disorder? It is something that is very difficult to explain and even more difficult to fully understand—especially for the layperson (which, unfortunately for me, includes most jury members). I'm not even sure that I fully understand this disease, and I have been trying to understand what has been going on in my head for a very long time now. Basically, I was plagued by repetitive thoughts, urges, and fantasies of the degradation, rape, and murder of women. I couldn't get it out of my mind. These unwanted thoughts and urges filled my mind when I was awake. They were in my dreams when I slept. And the urges were insatiable. Imagine trying to control such urges, day by day, hour by hour. And try to imagine the hatred, loathing, and abhorrence that I developed toward myself when I ultimately failed.

The best way for someone who is not plagued with this problem to understand the obsessive and repetitive nature of these thoughts, urges, and fantasies is to remember a time when you had a song or some catchy tune stuck in your mind, playing over and over and over again, driving you crazy. Even if you like the melody, its constant repetition becomes more than merely annoying. When this happens, the harder you try to push that melody out of your mind, the louder and more persistent it becomes, driving you almost to the point of madness. Now replace that sweet little melody with noxious thoughts of physically and mentally degrading a woman, of raping her, and of strangling her—now you can begin to understand what I had running wild in my head. And I think you can begin to understand me when I say that it is not something that I wanted in my head.

The urge to hurt women could come over me at any time and at any place—powerful and sometimes irresistible urges that well up for no apparent reason and with no warning. Even after my arrest—while I was facing capital charges—the urges continued. I remember one day being transported back to the county jail from a court appearance just before my trial. I was in the back of the sheriff's van in full restraints—handcuffs, leg irons, and a belly chain—when we passed a young woman walking along a wooded stretch of road. I cannot begin to adequately describe the intensity of the urges that enveloped me that day. I wanted . . . no, I *had* to get out of that van and go after her. The situation was ludicrous. There I was, in the back of the sheriff's van on my way back to jail, and all that I could think about was how badly I wanted to get ahold of her. Later, back in my cell, I masturbated to a fantasy of what would have happened had I gotten ahold of her.

Even after I was sentenced to death and living on death row, the urges persisted. One day I was being escorted from the mental health unit back to my cell after seeing my psychiatrist. There is a small secluded stairwell that leads from the unit back to the main corridor. I was being escorted, without restraints, by a petite young female correctional officer. When I got to the stairwell, I suddenly felt this overwhelming desire to hurt her. I knew that I had to get out of that stairwell, and I ran up the stairs and out into the hallway. I'll never forget how she shouted at me and threatened to write me a disciplinary report—she didn't have a clue as to what was going on. She never knew how badly I wanted to hurt her that day. She never knew how close I came to attacking her and possibly even killing her.

You would think that being sentenced to death and living in a maximum security prison would curb such thoughts and urges. But this illness defies rationality. I am fortunate to have eventually found some relief, however. Almost 3 years after I came to death row, I started to receive weekly injections of an antiandrogen medication called Depo-Provera. Three years later, after some trouble with elevated liver function levels, my treatment was switched to monthly Depo-Lupron injections—which I receive to this date. What these drugs did was significantly reduce my body's natural production of the male sex hormone—testosterone. For some reason, whether because of some abnormal biological hookup in my brain or some sort of chemical imbalance, testosterone affects my mind differently than it affects the average male's. A few months after I had started to receive treatment, my blood serum testosterone levels had dropped below prepubescent levels (this past March my blood serum testosterone was 18 ng/dl, with the normal range being 260–1,250 ng/dl). And as this happened, nothing less than a miracle occurred. My obsessive thoughts, urges, and fantasies began to diminish.

Having those thoughts, urges, and fantasies is a lot like living with an obnoxious roommate. You can't get away from him because he is always there. What the Depo-Lupron does for me is to move that roommate down the hall to his own apartment. The problem is still there, but it is easier to deal with because it isn't always in the foreground, intruding on my everyday life. The "monster within" is still present, but the medication has rendered him impotent and has banished him to the back of my mind. And while he can still mock me—he kicks me in the side of the head from time to time so that I don't forget him—he no longer controls me. I control him. I am human once again.

You cannot begin to imagine what a milestone this was in my life. A whole new world opened up to me. I had my mind back—a clear mind free of malevolent thoughts and urges. It gave me an incredible sense of freedom. It sounds strange for a condemned man to speak of being free on death row,

but that is the only word that I can think of that adequately describes the transformation that I have undergone. And there are no words to express the gratitude that I feel toward the man who made this all possible—Dr. Fred Berlin, founder of the Johns Hopkins Sexual Disorder Clinic and present director of the National Institute for the Study, Prevention, and Treatment of Sexual Trauma, both of which are located in Baltimore. He testified on my behalf at my capital trial, but, more important, *after* the trial was over and I was sentenced to death, he continued to help me and was essential in my fight to get the Department of Correction to acknowledge and treat my paraphiliac disorder. Without his letters and phone calls, I never would have received treatment for my disorder and to this day would still be captive to the monster that resides in my mind.

That's not to say that all is well now. One of the results of this was that I was forced to look at myself. I'm not talking about the cursory, superficial manner in which most people look at themselves, but rather a quite painful, unrelenting search into the depths of my very soul.

Many prison inmates are able to lie convincingly to themselves, to see themselves as basically good people who are the innocent victims of a corrupt judicial system or of an unfair and uncaring society. Sometimes it is very difficult to honestly see ourselves as we truly are and much easier to blame others as justification for our actions. I know this to be true because for years this is exactly what I did. During this period, I was angry—so very angry—at everyone and everything except for the one person that I should have been angry with: myself. It took a very long time—years, in fact—for that anger to subside and for me to begin to accept who I was and what I had become, and even longer before I was ready and willing to accept responsibility for my actions.

Now I had a whole new set of problems, for not only did the Depo-Lupron free my mind, it allowed my moral judgment to awaken, which gave me back something that I thought I had lost forever—my humanity. Now that my mind was clear, for the first time in years, I began to see, *really see*. It was like a spotlight shining down on me, burning away the fog, exposing every shadow of my being. I began to be aware of things as they really were, as opposed to seeing things through the colored glasses of my mental illness. I began to be aware of things that I didn't like about myself. And many of the things that I now understood brought me great anguish.

I realized how weak and afraid I really was. I had always thought that I was strong and confident. I now understood how I had allowed the monster in my mind to take control of me. I saw what I had become. And worst of all, for the first time, I became truly aware of the pain that I had brought to so many—such great and unceasing pain.

After my mind was finally clear and I saw the truth of what I had become and what I had done, I began to feel things—unpleasant, disturbing feelings. I began to feel the terrible agony and distress that I had brought to so many—my victims, the families and friends of my victims, my own family. And I also began to feel the awesome weight of my responsibility for my actions and of my responsibility to the people that I had harmed. Finally, I felt a profound sense of guilt—an intense, overwhelming, and pervasive guilt that surrounds my very soul with dark, tormented clouds filled with a mixture of self-hatred, remorse, regrets, and sorrow. All of this leaves me with a deep desire to make amends and achieve reconciliation—something that, under the present circumstances, seems all but impossible.

Yet it is this sense of reconciliation that I yearn for the most: reconciliation with the spirit of my victims, reconciliation with the families and friends of my victims, and finally reconciliation with myself and my God. If this happens, it will be the final part of my transformation and undoubtedly the most difficult part. If only science could create a drug to help me with this problem!

So what can be learned from this sad story? I'm not really sure because it seems pretty tragic all the way around. However, one thing that is surely true is that there are other Michael Rosses out there in various stages of development. They need places where they can go for help, and they need to know that it is OK for them to go for that help. One of the most difficult and painful things for me to deal with today is to know that had I begun receiving just a 1-cc injection of Depo-Lupron once a month 15 years ago, eight women would be alive today. That ignorance, and its resulting guilt, is a very heavy burden on my mind, and a burden that I will carry with me for what remains of my life.

Society needs to learn from this tragic affair and needs to act now to make the necessary changes to prevent a failure of diagnosis and lack of early treatments, such as mine, from recurring in the future. Learn from my case and others like mine. It's easy for society to point its finger at me, to call me "evil," and to condemn me to death. But if that is all that happens, it will be a terrible waste, for in a sense society will be condemning itself to future Michael Rosses. Future tragic murders such as those I committed can be avoided, but only if society stops turning its back, stops condemning, and begins to squarely acknowledge and treat the problem. Only then will something constructive come out of the events that took the lives of eight women, destroyed the quality of life of their families and friends, resulted in my incarceration and probable execution, and caused untold shame and anguish to my own family. The past has already happened. It's up to you to change the future.