

## BLUE PUFFER

Paul was born in Detroit, but as an army-brat, he'd lived in 6 different states before he was 5. After his father was killed in Iraq, his mother moved Paul and his sister back to Detroit where she took up work as a Kindergarten teacher. His mother is a polite, overweight woman, obsessed with dieting and her two children. His sister, seven years his senior, was always socially awkward and extremely intelligent. She joined the army shortly after their father's death and moved out before she had any real relationship with Paul. She rejected all their mother's doting, so Paul received a much heavier dose of overbearing attention. Paul learned, at a young age, how the attention that stems from narcissism can feel much lonelier than being completely ignored.

According to his mother, Paul, too, was extremely intelligent, and it was the fault of the public school system that his natural gifts were wasted. Paul was diagnosed with ADHD when he was 9 and bipolar disorder when he was 13. He really didn't know anything about these "natural gifts" his mother was always talking about; he felt like he was average and that he would much rather be average and much rather be left alone than he would be prodded, diagnosed, and thrust in and out of "special" classes. He was constantly switching prescriptions and doctors. He knew his mother couldn't afford these doctors, and his sister would send extra money for appointments with therapists and specialists. He would hear the two of them arguing on the phone, and he began to convince himself that they were conspiring against him, using him like a throw-away weapon to take swings at each other. He grew paranoid and angry, which only increased the phone calls, the visits from his sister, the doctors, and the therapists. He was never violent — not once — but his words were angry. He could talk a mile a minute, he would ramble and rant and use words his mother had never even heard. He knew that confusing her with words was more harmful than cursing or yelling.

He was funny, so he had a couple of friends who overlooked his "specialized needs"; however, as he got older, his paranoia and his manic, loquacity worsened, so they put him on medication that dulled him. He was a complete stranger to himself during his high school years, but neither his mother nor his sister seemed to notice — he assumed they liked this stranger more. As his paranoia and anger subsided, he grew distant and quiet, afraid of himself more than anyone else at that point. The friends he had fell away, he had no interest in sex, and his grades plateaued, so he was put on more medication. It wasn't that he lacked confidence — he didn't necessarily lack the will to try, to put himself out there — he was afraid that if people began to accept this version of himself, they would forget about the old one. He loved the old version. It felt true and full, and it felt like it had always loved him back. Therefore, the idea of acquiescing, the idea of giving this new, medicated person a shot at life felt like a gross betrayal of an old lover.

During his junior year of high school, Paul sat next to a senior boy in computer science class. The boy was dumb, Paul realized, and needed help he refused to ask for. Paul hated watching him struggle through basic coding and waste the entire class, raising his hand then changing his mind and putting it down before the teacher could notice. One day, Paul waited for the boy to go to the bathroom, then he reached over and finished a couple of lines of coding for him. When the kid came back, he sat down looked at his computer screen, then smiled and looked around the room. Paul kept his head down but could barely suppress his own smile or the feeling of his heart thumping in his throat. Every day for the rest of the year, this secret help occurred between the

two of them: the boy would get up and go to the bathroom, and Paul would finish some of the assignment for him. The boy had to suspect it could be Paul, as he sat directly next to him, but since Paul never spoke or looked in his direction — not once — the boy assumed that he wanted to keep his anonymity. In reality, Paul wanted to wait and introduce his real self. He'd stopped taking his meds by the third week of the semester, and by March was feeling whole again. It took a while for his mother to notice, but he quickly grew taller, and the words began to pour from his mouth again and he laughed and was funny and carefree.

On an unusually warm day at the end of that month, he decided he was ready to approach the computer science boy. He leaned over in the middle of class and started explaining — rather eloquently in his opinion — the nature of the assignment they were doing. The boy's face fell quickly from the smile Paul liked to much and into a confused, increasingly frightened frown. Paul didn't understand what was happening, so he kept talking, the words pouring out of him. The boy's cheeks began to redden. The teacher tried to shush him, but Paul didn't understand what was wrong. He couldn't hear what the others were hearing; he was simply introducing himself to his secret friend, introducing his real self. He got louder, but the boy had completely turned away from him, trying to ignore him. Finally, the teacher came over to tell Paul to be quiet, and Paul stood up and struck the man in the face. IT was the first time he had ever been violent and the most confused he had ever been in his life. Paul was taken out of school and put into a ward for one week when they learned he wasn't taking his medication. He finished the rest of high school at home on new meds. He failed to apply to college, as he didn't see the point, but his mother didn't seem to care; she was happy to have her son home with her. He didn't take a job, but he began selling his meds to the shady, younger kids in his building. They took him in as they felt despite his aloofness, "he got it". He began doing their drugs with them, but that didn't last very long, as their street drugs made him feel as distant as his own prescribed ones.

He tried to kill himself, overdosing on medication, when he was 22. He spent two years in and out of psychiatric care after that. He found that not one of these doctors, nurses, no one in the wards, none of the other patients, his mother, his sister, none of them would listen to him. No one could hear him and, it seemed, the moment he tried to talk was the moment they began to panic. He moved back in with his mother when he was 24, started taking new meds, got a job as a doorman at one of the fancy apartment buildings in the city, stopped talking completely, and decided he would go off his meds again in exactly one year and kill himself.