Mercy for Christa Pike

As to her history "of sexual assault and PTSD, the State does not dispute the terrible things that Ms. Pike suffered. I think everybody in this courtroom wishes that those things had never happened to Ms. Pike. I think we all wish that we were not here today and that she was not on death row."

Tennessee Attorney General's Office, August 13, 2026
Special Master Hearing

STATE OF TENNESSEE
OFFICE OF THE POST-CONVICTION DEFENDER
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September 2, 2026

Dear Governor Lee,

"Mercy is the willingness to enter into the chaos of others." James Keenan, S.J.

The materials that follow this letter are an invitation into the chaos that has surrounded Christa Pike since before she was born and continued through her childhood, adolescence, and the terrible crime she committed at age 18. I believe that if you are willing to step into Christa's life, you will come to believe that she is worthy of mercy.

There is a picture of Christa as a child that I often think about. She is outside, her curly red hair is slightly blown by the wind. She has big brown eyes, and her mouth is drawn tight in a straight line. I think about this picture for two reasons.

First, it is a beautiful picture not unlike the pictures I have of my own daughter at the same age. I am sure you have similar pictures of your daughters.

Second, I think of this picture because I know that it was taken about the time Christa was first sexually abused. Her grandmother's boyfriend had already begun orally raping her.

To me, this picture represents a devastatingly sad turning point, where the chaos that surrounded Christa began to leave marks on her that were too much to overcome. A point where the chaos that surrounded Christa started to lead to cycles of depression, mania, self-medication, and abuse. Cycles that were compounded by what one expert called an "almost unbearably abusive background."

In the materials that follow, I ask you to step into Christa's world. I hope you will read Dr. Brand's report. It is the most complete reflection on the effects of Christa's bipolar II diagnosis and the sexual and physical trauma she has suffered. I hope you will read Dr. Grassian's report about the grueling nature of Christa's decades-long solitary confinement, which sets her apart from the men on death row. I hope you will listen to the stories of Marcy Graves, Ashlee Sellars and Kasey Raines, who all, despite the severe limitations of Christa's solitary confinement, were cared for and supported by her during very dark times in their lives.

Tennesseans long ago stopped executing people like Christa. She was 18 when she committed her crime, and she was deeply mentally ill. Christa would also be the first woman executed by our state in over 200 years. She would not be sentenced to death if she were tried today instead of

during a time when her age was treated as an aggravator and her mental illness was misunderstood as a lack of remorse.

None of this is meant to justify the killing of Colleen Slemmer. Stepping into the chaos of Christa's life that led her to that moment will not justify her actions that night. But the chaos will show you that Christa was broken, not evil. She was broken by the people and places that were meant to be safe and supportive. She was broken by a mental health system, juvenile system, and a criminal justice system that ignored, misdiagnosed, and mistreated her at every turn.

Along with this introductory letter, we are providing you with the following information:

1. Clemency Petition
2. Executive Summary
3. Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood
4. Christa Suffered Horrific Sexual Violence that Began When She Was a Toddler
5. NC and WV Social Services and Juvenile Justice Systems Failed Christa
6. The Legal Profession Failed Christa
7. Christa's Death Sentence is Disproportionate When Compared to Her Co-Defendants and Other 18 Year Olds
8. Christa Endured Solitary Confinement for Nearly 3 Decades
9. Videos and Letters Supporting Mercy
10. Other Supporting Materials

Each of the above items is in its own folder and contains supporting documentation.[1] Each weighs heavily in favor of mercy.

After you have read this letter and all the materials we provide here, I invite you to meet Christa. I invite you to spend some time with her. I can tell you about the person that Christa has become, but I invite you to come and see. You will encounter a kind, empathetic, and engaging woman who wants to help others. A woman who feels deep remorse for the pain she has caused, understands the mistakes she has made, and knows that others can learn from them. A woman who understands that she will never leave prison but knows she can be useful where she is. You will encounter a woman who is deserving of mercy.

Sincerely,

Randall Spivey

Randall J. Spivey
Assistant Post-Conviction Defender

[1] This information is being provided both via a link to a private SharePoint drive, as well as on a flash drive.

EXECUTIVE SUMMARY

CLEMENCY PETITION

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Executive Summary: Mercy for Christa Pike

Christa Endured Rape and Sexual Assault as a Child and Adolescent.

- Christa was repeatedly raped as a toddler by Ernest Johnson, her grandmother's boyfriend, who forced his penis into her mouth.
- Upon entering school, Christa drew a man with a huge penis and demonic face to explain what happened in her home. Her parents were called, but no one investigated what happened to this child.
- Christa was raped as an 11-year-old child by Claude Davis, who pled guilty to a lesser offense.
- Christa was thrown to the ground, her body bruised, scraped, and raped at age 17, almost a year to the day before her crime.
- The State does not dispute Christa's history of sexual victimization.
- Child rape is a capital offense in Tennessee, which recognizes that the rape of a child permanently destroys innocent lives and leaves unimaginable scars. Tennessee now seeks to punish Christa in the same way it would punish her rapist.

Christa Endured Unimaginable Abuse, Neglect, and Violence as a Child and Adolescent.

- Dr. Jonathan Pincus testified to Christa's almost unbearably abusive background.
- Dr. Brand described Christa's history as extraordinarily severe extreme trauma. Christa experienced more severe adverse events than 99% of the US population.
- Christa grew up with constant abuse, violence, and abandonment, with no protection. Decades of being brutally raped, molested, beaten, humiliated, emotionally abused, ostracized and screamed at profoundly damaged her, leaving her with a multitude of untreated psychological disorders.

Christa Suffers from Post-Traumatic Stress Disorder and Bipolar Disorder that Deeply Affected Her at the Time of Her Crime and for Years After.

- While Christa was still in utero, Christa's mother drank so much alcohol that Christa suffered frontal lobe brain damage and heterotopia.
- Such brain damage highly correlates with the development of Bipolar Disorder, a Severe Mental Illness which would exclude her from a death sentence in Ohio and Kentucky.
- Mental health experts and TDOC have diagnosed Christa with Bipolar Disorder and Post-Traumatic Stress Disorder which resulted from her horrific childhood and rapes.
- Unmedicated and untreated, Christa's PTSD, Bipolar Disorder, and brain damage played a major role in Christa's crime. She was not able to "put the brakes on" when what was intended to be a beating of Colleen Slemmer spiraled out of control.

Christa Was 18 Years Old at the Time of Her Crime Far Younger Than Anyone Tennessee Has Executed in the Modern Era.

- The adolescent brain at age 18 is less mature, more impulsive and emotional, more susceptible to peer pressure, and less able to make rational decisions—all because the adolescent brain is still developing.

- There is no meaningful difference between the brain of a 17-year-old—like Christa's co-defendant Tadaryl Shipp—and an 18-year-old.

- Of the 200+ people sentenced to death in TN in the modern era, only eight were 18 years old at time of offense. All seven male offenders have had their death sentences vacated. No 18-year-old offender has been death-sentenced since Christa.

- The average age at time of offense of the 17 people executed in the modern era is 28.94. The youngest offenders who were executed were 23 years old at time of offense. This significant age gap mirrors what we now know about adolescent brain development and why many do not support execution of those younger than 21.

Christa's Trauma and Death Sentence Were the Product of Failed Systems.

- Christa was a bright child who, despite her damaging childhood and mental illness, had potential for a productive life helping others—with support.

- Christa's family failed her.

- The North Carolina and West Virginia juvenile justice system and social services failed her.

- Christa's trial attorneys failed her. The DA offered life and lead counsel Talman's biggest regret was not spending time with Christa to counsel her.

- The justice system failed her. The post-conviction court did not consider Christa's rapes/sexual abuse as mitigating because her family members didn't believe her. The jurors who sentenced Christa to death never learned of the sexual abuse and rapes and the post-conviction court found that did not matter.

Christa's Life Has Value and She Is Not the Same Person as She Was at 18.

- While incarcerated, Christa worked to heal the impact of childhood rapes, abuse, and neglect.

- After years of psychotherapy and medications to treat her mental illness, Christa is thoughtful, even-tempered, bright, funny, and hopeful.

- She exhibits deep remorse for her actions that resulted in Colleen Slemmer's death.

- Christa has become a comfort and support to newly incarcerated women on her unit, providing encouragement, supplies, and hope.

MERCY FOR CHRISTA: THE CASE FOR LIFE

Think back to the worst mistake you made as a reckless teenager. Well, mine happened to be huge, unforgettable and ruined countless lives. I was a mentally ill 18-year-old kid. It took me numerous years to even realize the gravity of what I'd done. Even more to accept how many lives I affected. I took the life of someone's child, sister, friend. It sickens me now to think I had the ability to commit such a crime.
Christa Pike

Christa Pike was just 18 years old when she and two others killed Colleen Slemmer. Long before that day, Christa was a child who had endured repeated rape, sexual abuse, abandonment, and profound trauma. By the time of the crime, she bore the scars of this violence, neglect, and untreated mental illness. These realities do not excuse what happened. But they are essential to understanding how such an unimaginable act became possible and how profoundly adults and institutions failed to support a child in desperate need.

Today, Christa is 50 years old. She doesn't expect to walk free. Yet after over 30 years in prison, with consistent treatment, medication, and decades of reflection, she accepts responsibility, expresses sincere, deep remorse, and continues to work toward becoming someone who can help others. Through this petition, Christa respectfully asks Governor Bill Lee to grant her clemency by commuting her sentence to life without the possibility of parole. Christa can still be useful. Her story of growth from a traumatized teenager to a generous, empathetic woman has the power to help others choose a different path. It already has.

Christa Today: A Remorseful Woman Who Stewards Other Inmates

Christa's world has been framed by the small, waist-high opening in the door of her 8' x 10' cell for more than twenty-nine years. From 1998 to 2024, Christa was held in

solitary confinement[1] and, with few exceptions, her interactions with the world came through the air conditioning vents in her cell or through that pie flap. Christa was only touched when she was being shackled, or on the rare occasions when she was allowed to hug her family. Since September 2024, Christa has been allowed to work within her pod and interact with other inmates. She has cherished this opportunity. Although Christa's surroundings have changed very little during her incarceration, Christa has changed significantly. Christa has become a lifeline for other inmates.

Marcy Graves' daughter, Teddy, became addicted to prescription drugs after being diagnosed with a serious heart condition. After Teddy was arrested, the Houston County jail transferred her to the women's prison as a safekeeper because it could not accommodate her health condition. Teddy was housed in Unit 3, just across from Christa. Marcy was terrified that her daughter was held next to Christa, whose case and crime details Marcy had followed. She thought Christa was evil. Marcy worried for her timid and small daughter—Teddy had never been in trouble before. Marcy warned Teddy to stay away from Christa.

As Teddy was escorted to the shower the first time, she heard Christa's voice coming through her pie flap, "You better not get in that shower with no shower shoes, girl!" A few minutes later, an officer handed Teddy a new pair of shower shoes. "Love, Christa Pike" was written in sharpie on the sole. Marcy was still frightened and worried. She wrote Christa a thank you note, hoping that her gratefulness would touch Christa in some way and make things easier for Teddy. Christa wrote back. As Teddy waited three months to

[1] Read more about Christa's solitary confinement and its repercussions in Christa Endured Solitary Confinement for Nearly 3 Decades.

receive a property package with clothing and other necessities, Christa helped Teddy obtain what she needed. She even gave the officers her own radio, headphones, pencils, and paper to bring to Teddy to help her pass the time. If Teddy was sick, Christa would advocate for her until the officers got a nurse to attend to Teddy.

Marcy had only seen how the media portrayed Christa. She learned Christa's true nature through the letters Marcy and Christa began to write regularly. Christa helped Teddy through her time on Unit 3 and has helped Marcy through her own difficulties, Teddy's release from prison, and Teddy's death. Marcy and Christa became friends and talked often. Christa named the chickens on Marcy's farm and painted pictures of mermaids for Marcy's home. This is how Marcy now describes Christa, the person she once feared:

> "This woman Christa gave all she had to give to a perfect stranger who was scared, sick and alone in a very scary place. Christa loved, befriended, fed, clothed, and cared for my child when I could not reach her. She eased my heart, the heart of a terrified, worried mother.
>
> Christa is a beautiful soul who did a really bad thing when she was very young…. She is not that person anymore."[2]

Teddy is not the only woman Christa has helped. Over and over, new, vulnerable women arrive on Unit 3 and Christa comforts them and meets their basic needs. She has provided toiletries, hygiene products, paper, and food to innumerable new arrivals. Ashlee Sellars was one of those women.[3] She was transferred into the adult system as a teenager in 1995 and received a letter from Christa. She had never met Christa and was unfamiliar

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[2] *See* Marcy Graves letter, p. 3, and Marcy Graves Video.

[3] *See* "*A Second Chance at LIFE: Ashlee Sellars; Former TPW resident uses education and experience to work in restorative justice with youth*." https://lipscomb.edu/news/second-chance-life-ashlee-sellars (May 14, 2019).

with her story. Christa's letter offered encouragement. She told her, "Don't be afraid, there are people who will look out for you." She and Christa were housed near each other for a time. They would kneel at their pie flaps and talk.

> Christa is at her core a lover of people. She hasn't always had that same love, that same model.[4]

Since 1995, public perception of Christa and her crime has been frozen in time. Local and national media covered Christa's trial in the midst of the "Satanic Panic" of the 1990s. The same fevered atmosphere that led to the wrongful convictions of the West Memphis 3 pervaded Christa's trial. In truth, it was Christa's abusive boyfriend and co-defendant, Tadaryl Shipp, who was fascinated by satanic imagery.[5] The press focused on the salacious parts of Christa's crime, disregarding the context of her youth, trauma, and mental illness.

Christa's own actions did not help. An immature teenager, described by her trial lawyer as less emotionally mature than his 10-year-old daughter,[6] Christa sometimes appeared to enjoy the notoriety she was experiencing. This inaccurate appearance, coupled with her misguided loyalty to Shipp, fed the perception that Christa lacked remorse and humanity; that she was evil.

A Child with Unimaginable Wounds

In advocating for enactment of the recent child rape capital punishment bill, House Majority Leader William Lamberth read a letter he received from a victim: "I am a victim

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[4] To hear more from Ashlee about her experience with Christa and why she believes Christa is deserving of mercy, watch the Ashlee Sellars video.

[5] Co-defendants Tadaryl Shipp and Shadolla Peterson, like Christa and Colleen Slemmer, were residents of the Knoxville Job Corps in January 1995. Peterson received a sentence of time served and probation and Shipp was sentenced to life with possibility of parole.

[6] *See* William Talman letter, p. 1.

of child sexual abuse. The wounds are unimaginable and the scars run deep. These are not crimes that victims are able to heal from or move on with their lives. These crimes change children forever. Some things can never be gained, once lost."

Christa's crime cannot be understood without understanding the extraordinary trauma she had suffered as a child and the untreated mental illness that dictated her behavior. As trauma expert Dr. Bethany Brand concluded when she met with Christa in 2023:

> Christa Pike's life demonstrates the tragic and life-long consequences of growing up with constant abuse, violence, and abandonment, with no protection. Decades of being brutally raped, molested, beaten, humiliated, emotionally abused, ostracized and screamed at profoundly damaged her, leaving her with a multitude of untreated psychological disorders.… At 18 years old, her immature, traumatized brain made her exceptionally vulnerable to impulses and extremely poor decisions. Unmedicated and untreated, she was not able to put the "brakes on" her bipolar- and trauma-triggered emotions.[7]

Dr. Brand's examination of Christa revealed that she experienced 9 out of 10 adverse childhood experiences, or "ACEs".[8] Each childhood adversity significantly

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[7] Dr. Bethany Brand Report, p. 39, in 10. Other Supporting Materials For a deeper discussion of Christa's history of mental illness and trauma, *see* Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood, and Christa Suffered Horrific Sexual Violence That Began When She Was a Toddler. Also, hear directly from Dr. Brand in the clemency video.

[8] Dr. Brand identified the following 9 ACEs that Christa experienced as a child:

(1) Verbal/Emotional Abuse. Two of Christa's mother's boyfriends (Danny Thompson, Steve Kyaw) verbally abused her, as did her maternal grandmother and father.
(2) Physical Abuse. Christa's mother sometimes physically abused her. However, her father often physically abused her, as well as did her maternal grandmother, her sister, Danny Thompson, and Steve Kyaw.
(3) Sexual Abuse. Steve Kyaw sexually abused her. Additionally, she was exposed to numerous severe sexual assaults from individuals who did not live in the home. One of the men who raped her as a youth lived within sight of her home and she had to often walk past his trailer; the possibility that he would attack her again utterly terrified her.
(4) Emotional Neglect. Christa was often overlooked, unprotected, and disbelieved about having been sexually assaulted and mistreated by a babysitter and various partners of her mother.

increases a person's risk for medical and mental disturbances decades later. Individuals with four or more ACEs show a notably higher risk for a range of medical and mental disorders.

It is highly unusual for a child to experience nine ACEs: ***Christa experienced more ACEs than 99.3% of the U.S. population***. Brand Report, p. 22. Many adults in Christa's life mistreated and abused her in a multitude of ways. *Id.* Her home was not a place of safety, protection, and belonging for Christa, it was the very source of her chaos and danger. This was an extremely heavy burden of adversity for Christa as a child. *Id.* High levels of ACEs are linked to memory difficulties (i.e., dissociation), depression, anxiety, panic, sleep disturbance, headaches, early sexual intercourse, many sexual partners, difficulty controlling anger, early smoking, heavy drinking, and drug use. *Id.* "*Christa suffers from every one of these outcomes.*" *Id.* Christa's psychological disorders, her past difficulty controlling her angry outbursts and behavior, and past drug use stemmed from the tragic level of sexual and physical abuse and family chaos she was exposed to as a child. *Id.*

(5) Physical Neglect. Christa often did not have enough to eat when she lived with her mother. She was often sent to school without breakfast or lunch money. She had to wear dirty clothes when at her mother's home. Furthermore, her mother was often too drunk to take care of her.
(6) Parental Separation or Divorce. Christa's parents married, then divorced, then remarried each other, and finally were divorced a second time.
(7) Household Member With Problem Drinking or Drug Use. Christa's mother, father, and maternal grandmother drank heavily and/or used drugs.
(8) Household Member With Mental Health Problems. Christa's mother became so depressed after Christa's birth that she attempted suicide.
(9) Witnessing violence between her parents.

Christa's mother Carissa[9] drank and got high while pregnant with Christa. Carissa worked the evening shift on a psychiatric unit. One evening a patient threw Carissa through some double swinging doors, and she landed on a supply cart. She began leaking amniotic fluid and Christa was born prematurely via emergency Caesarean section. Christa was born blue and was on a respirator for a week after birth, remaining at the hospital for two weeks. She was born with a hyaline membrane and hip dysplasia and required extended medical treatment for the first year of her life. Carissa became extremely depressed after giving birth to Christa and tried to kill herself. Carissa's own mental health struggles did not allow her to appropriately care for Christa or protect her from abuse.

Carissa worked obsessively, going back to work just three weeks after Christa's birth. She worked from 9 am to midnight Monday through Friday and took another 12-hour shift on weekends. Carissa believes she only took twelve (12) days off during Christa's first year. Christa's father, Glenn Pike, a Vietnam War Army veteran who had been exposed to Agent Orange, rarely worked and drank heavily.

Carrie Ross,[10] Christa's aunt, described coming to visit and finding toddler Christa crawling around on the floor among piles of dog stool all over the house. She described Carissa's home as filthy with dirty dishes piled everywhere. As Christa got older, Carrie would sometimes bring her and her older sister, Alicia, to her home so that they could have

[9] In the last year, Christa's mother Carissa and stepfather Gerard (who Christa referred to as her "real dad") have died, just months apart. Carissa succumbed to cancer in November 2025 and Gerard had a heart attack, fell, and incurred a brain bleed. Christa's biological father, Emil Glenn Pike, died in 2024. All three wrote letters to Governor Lee which can be found in Letter Supporting Mercy.

[10] *See* Carrie Ross Video.

a meal. She explained that Carissa was often neglectful of the girls, spending money on clothing for herself to go out partying, while the girls often did not have adequate clothing or food. When Christa was a toddler, Carrie and Carissa were at a bar one night while Zola,[11] Christa's grandmother, babysat Christa. Christa began having a seizure. Zola called the bar to tell them, but Carissa wanted to stay at the bar, saying Christa would be fine. Carrie insisted that they go home and take Christa to the hospital. Christa's EEG was abnormal, and she was diagnosed with a seizure disorder at age 14 months.[12]

Childhood Rapes and Sexual Abuse

Christa lived with Delfa, her paternal grandmother, for much of the time she was a toddler. Despite her daughter Pearl's warnings,[13] Delfa frequently left Christa alone with her boyfriend, Ernest Johnson, who began sexually abusing Christa before she could walk and talk up until kindergarten. He orally raped her. He ensured Christa's silence by threatening to kill Christa's beloved pets and her grandmother. Ernest intimidated and tortured Christa, locking her in a dark chicken coop where spiders crawled on her and bit her. Ernest was an alcoholic who drank all day and would send Delfa out of the home to buy his alcohol.

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[11] Zola was Christa's maternal grandmother. She verbally and physically abused Christa. She was also an alcoholic and died of cirrhosis of the liver.

[12] Neurologist Dr. Jonathan Pincus explained in post-conviction that the EEG results showed high voltage spikes coming from the right frontal temporal lobe and indicated damage there. *See* Testimony of Jonathan Pincus, p. 240. He explained that these results pointed to a heterotopia in that region of Christa's brain, which was corroborated with an MRI scan in which the brain damage was visible to the naked eye. *Id.*, p. 244–45. The visibility of the damage implies much more extensive and networked damage through Christa's brain that would not be visible on an MRI. *Id.* In addition, Dr. Pincus's physical examination revealed damage to the basal ganglia at the center of her brain. Dr. Pincus attributed the frontal lobe brain damage to Carissa's drinking while Christa was in utero. *Id.*, p. 242.

[13] *See* Pearl and Duane Poling video.

As Christa told Dr. Brand, "They figured out I was being abused because I was drawing pictures" at elementary school. The teacher asked the class to draw what they did at home. Christa drew a man with "a huge penis and demon face." Brand Report, p.10. Christa was taken to the principal and her parents were called, but no one investigated this red flag indicating ongoing sexual abuse. *Id.*[14]

Throughout her childhood, Christa was a victim of violent predators with no protection from her mother and absent, uninvolved father. Glenn had affairs with other women during his marriages to Carissa. At one point he stole the family dog from his daughters to give to one of his girlfriends, precipitating the final divorce from Christa's mother when Christa was six years old.

At age 11, Christa had a gap-toothed smile and an unruly mop of thick auburn hair. She was in fifth grade at a new elementary school, Carrboro Elementary. On November 3, 1987, the school bus dropped Christa off near her mother's home. When Christa arrived, her mother was at work and the house was empty. As she was walking to the mailbox, a 37-year-old neighbor named Claude Davis grabbed her, pushed her down, and raped her.[15] Davis was arrested, charged, and pled "no contest" to a reduced charge, and was shortly released, continuing to live near Christa. He would eventually be arrested numerous times, including for assaulting a woman.

> "It was horrible.... It made me feel worthless. I was terrified. He lived right up the street. I could get to his house in less than a minute. He was known as the town pervert. I had to walk by his house to get to the bus stop. The trailer

[14] For a detailed analysis of how the North Carolina and West Virginia state social services systems failed to protect Christa from abuse and neglect, *see* 5. NC and WV Social Services and Juvenile Justice Systems Failed Christa.

[15] Christa's history of sexual assaults is well documented. The documents related to Claude Davis can be found in 10. Other Supporting Materials.

> where I babysat two little girls was here, and here was his trailer (demonstrating it by drawing on paper).... I thought he'd get me again, so I was afraid and hyperaware. No one believed me. I was anxious, was tearful and crying constantly. People would walk up to me and I would be scared."[16]

Christa's life in the wake of the age 11 rape became more chaotic as she was exposed to danger in her own home. Carissa's boyfriends and husbands verbally, physically, and sexually abused Christa. The worst of them was Steve Kyaw, who groped Christa, twisted her nipples, and exposed her to graphic sexual material, keeping stacks of pornography all over the house. Christa took some of this pornography to school and once again her mother was called. Again, no one intervened on Christa's behalf to ask how such a young girl had access to such graphic content. Kyaw also punched Christa with a closed fist in her face in front of neighbors, leading to his arrest. He repeatedly called her a slut and a whore. Christa was briefly removed from the home, and a restraining order was issued against the boyfriend. The charges were dropped when he agreed to move out, after living with Carissa for almost two years, when Christa was 14 years old.

Tennessee legislators have acknowledged that child rape "has a permanent psychological, emotional, and sometimes physical impact on the child." *Kennedy v. Louisiana*, 554 U.S. 407, 435 (2008). Because of the devastating consequences of child sexual abuse, Tennessee has expanded its death penalty laws to target the perpetrators of such crimes. As Justice Alito has stated, "[t]he immaturity and vulnerability of a child, both physically and psychologically, adds a devastating dimension to rape that is not present when an adult is raped." *Id.* at 468 (Alito, J., dissenting).

[16] *See* Brand Report, p. 13.

These observations are borne out by research. "Long-term studies show that sexual abuse is 'grossly intrusive in the lives of children and is harmful to their normal psychological, emotional, and sexual development in ways which no just or humane society can tolerate.'" *Id.* The psychological problems caused by child rape can include "sudden school failure, unprovoked crying, dissociation, depression, insomnia, sleep disturbances, nightmares, feelings of guilt and inferiority, and self-destructive behavior, including an increased incidence of suicide." *Id.*[17]

The damage wrought by the sexual assaults on this child showed as Christa's life became even more chaotic. She moved from West Virginia to North Carolina and back again several times as her mother hopped from boyfriend to boyfriend and her father started a new family. Despite being a very intelligent girl, Christa's grades and behavior at school suffered as she repeatedly changed schools. Due to her parents' chaotic lives, Christa attended four elementary schools and three middle or junior high schools in those two states. Christa was retained in 3rd and 7th grade due to her poor grades and poor attendance.[18] When she struggled to complete her homework while staying with her father, he beat Christa so severely that the physical scars remain today. When with her mother, Christa often went hungry and lived in dirty, mildewed trailers.

Childhood Trauma and Mental Illness

During this time of extreme vulnerability and constant abuse, two additional things happened. The only adult Christa believed cared for her, her paternal grandmother Delfa,

[17] For additional information about Christa history of sexual violence and the lifelong consequences of that violence, please see Christa Suffered Horrific Sexual Violence That Began When She Was a Toddler.

[18] *See* Christa Pike's educational history chart from McCoy social history in 10. Other Supporting Materials.

succumbed to cancer. Christa had long had a special relationship with Delfa Pike. Despite being exposed to her grandmother's abusive boyfriend, Christa saw Delfa as her only reliable source of consistent love and kindness.[19] While Delfa was sick, Christa tried to care for her. She would bring her Ensure and sleep in her bed. Christa was devasted by her death.

Christa "gave up" after losing her grandmother. She attempted suicide for the first time by overdosing on pills. She was 12 years old—notably one year after her second rape by the neighbor Claude Davis. "I cared about nothing after that. I wanted to go with her. I didn't care about anything." Brand Report, p. 14. Her mother took her to a mental health professional, but the doctor did not hospitalize her after Christa vomited up the pills she had taken. Christa did not receive any follow-up psychiatric treatment.

Christa had ready access to marijuana and alcohol, which she began using at the age of nine with the knowledge of her parents and their friends, who constantly abused drugs and alcohol around Christa. As any child, she mirrored the behavior she saw.

But her use of drugs and alcohol was also her means to cope. Children who have been abused and assaulted often begin drinking alcohol, using drugs, and/or engaging in self-harm soon after having been abused to distract from their pain and to suppress the memories and emotions related to abuse. Christa developed all three of these problems. She began cutting herself as well as drinking alcohol and smoking marijuana soon after she was raped as a pre-teen.

[19] Brand Report, p. 5.

Christa turned to substances for comfort and relief from what we now know were symptoms of PTSD, Bipolar Disorder, and depression.[20] Christa was struggling with the impact of unrelenting, severe trauma without the benefit of psychiatric medication or psychotherapy, and without support from her family. As Dr. Brand explained in her report, drugs and alcohol are often used to the point of causing sedation, so the person cannot think about the humiliation and terror they have been subjected to. Drugs and alcohol can sometimes temporarily quiet the irritability, angry outbursts, terror, nightmares, and hyperarousal caused by untreated trauma and PTSD. As a result, chronic childhood trauma leaves survivors extremely vulnerable to drug and alcohol abuse, as these chemicals are a form of "self-medication" for trauma's myriad crippling symptoms. Brand Report, p. 15.

For Christa, the relief from substances quickly wore off, leaving her alone with her feelings of agitation, irritability, and restlessness. Christa described her marijuana use saying, "It made me calm down and be good." Her drug use also exposed her to people who were very troubled and who had a damaging influence on her. Brand Report, p. 15–16.

Substance abuse and PTSD were only two of the mental health problems that Christa was developing at a very young age. The average age of onset of Bipolar Disorder is approximately 13 years of age. Brand Report, p. 16. Christa began showing signs of mania or hypomania due to Bipolar Disorder by early adolescence. She suffered from insomnia as a result of her excessive energy. She would induce sleep by going to the beach, where the ocean waves would put her to sleep.

[20] For additional discussion of Christa history of severe mental illness, please see Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood.

It is not surprising that by late adolescence, Christa frequently ran away. She was sometimes homeless for periods of time. She survived by hanging out with carnival people. Christa recounted a story to Dr. Brand about a man in his 20s who pressured her to have sex when she was only 14. Because of her history of sexual abuse, she had normalized adults' demands for sex. The adult had taken advantage of her youth and naivete and pressured her to comply with his demands for "sex". *Id.*

Lack of Support System

Christa's parents and the other adults in her life again failed to protect her. She had no idea how to protect herself because she had never known or seen protection. She could not distinguish between people who would use and manipulate her from people who would care about her. *Id.*, p.16–17.

Christa spent time in two different juvenile facilities as a teenager, first Schaeffer House, then Swannanoa.[21] The records from those facilities show a child desperate for structure and help. Counselors and teachers had wildly varied experiences with Christa. Some described her as sweet, kind, and thoughtful, while others found her to be mischievous and "always in trouble." One teacher, Marshall Muse, selected her to be his teacher's aide and praised her work with other students.[22] Christa benefited from the structure of Swannanoa.[23] She was better able to manage her mental illness there than

[21] Christa was placed in Schaeffer House for truancy, running away, and marijuana use. She was later adjudicated delinquent on misdemeanor breaking, entering, or larceny and placed on probation. Christa was found to have violated probation and sent to Swannanoa.

[22] *See* Matthew Muse Video.

[23] *Id.*

she was in the chaos of her home life. Each time Christa came close to being discharged, she violated a rule that would extend her time at the facility. She should have gone home after three months but stayed fifteen and a half months.[24]

Attorney Matthew Martin, currently a judge, represented Christa in North Carolina juvenile proceedings that sent her to Swannanoa. He remembers Christa well, because he had never had a kid sent to training school before and "this kid, this child clearly didn't belong in training school." Martin describes Christa as a teenage kid who was clearly bright, charming, and with a sense of humor.[25] He went to visit her at the training school. He believes Christa should have been removed from her mother's home, because she was putting Christa in harm's way, and provided with trauma services.[26] Instead,

> We went off the rails in her case, we didn't consider her best interest, it wasn't in her best interest to go to training school… she should have had services wrapped around her... when she came to the attention of the Department of Social Services in Durham, she was a child who really should have been taken into [foster] care [and removed from the home] as a dependent child, and instead we adjudicated her as a delinquent. That was the wrong result… we failed her.[27]

Christa returned to her mother's house and to chaos and abuse. Christa befriended a mentally troubled homeless man and spent time living on the streets with him.

When Christa was 17 years old, she was raped again. While she was walking along a road at night, a man grabbed her and pulled her into the woods. Christa recalled, "I was fighting him so hard that he barely got started (raping her)." Christa managed to escape

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[24] *Id.*

[25] *See* Matthew Martin Video.

[26] *Id.*

[27] *Id.*

and ran as fast as she could to a friend's house, who then took her to a hospital. The staff collected a rape kit, but the man was never identified or caught.

With Visible and Invisible Scars, Christa Enters the Violence of Job Corps

Knowing she needed a new start, Christa turned to Job Corps, the Federal job training program for troubled youth. Christa had enjoyed going to work with her mother in nursing homes and tending to elderly patients and she wanted to become a nurse. In the Fall of 1994, Christa left North Carolina to enroll in Job Corps in Knoxville, Tennessee. Unbeknownst to Christa, Knoxville's Job Corps had a well-earned reputation for violence.[28] Participants were known to carry knives and razor blades. Carissa remembered seeing blood smeared on the dorm walls when she visited.

In the violent environment of Job Corps, Tadaryl Shipp was one of its most violent residents. Shipp came to Job Corps from Memphis in 1994, after exhibiting abusive and violent behavior. Tadaryl was widely known to be in possession of a firearm. *See* William Joesph Mode Post-Conviction Testimony, p. 770. Tadaryl walked around the Job Corps building carrying a razor blade in his mouth. McCoy Social History, p. 53. Other students were terrified of him. Andrew Dace recalled that Tadaryl "just liked to hurt anybody he could." *See* Andrew Scott Dace Post-Conviction Testimony, p. 683. Tadaryl attacked Dace

[28] In 1988, the Knoxville Job Corps had relocated to 621 Dale Avenue (formerly a Holiday Inn hotel) and by 1994, the percentage of police calls in that enforcement zone rose from 17.1% to 81.6%—an increase of 389.5%. Between April 2, 1994, and January 22, 1995, at least 15 assaults and five rapes involving Knoxville Job Corps students were reported—the number of assaults was 3.5 times higher than the national average at Job Corps centers. On October 4, 1992, Kiesha Nicole Small, age 18, was charged with attempted murder for attacking a female at the Knoxville Job Corps with a box cutter. In October 1993, two Knoxville Job Corps students were charged with kidnapping and raping a young woman and beating her boyfriend.

more than once, but the worst incident he recalls was when Tadaryl tried to throw him off a bridge near the Job Corps that was about 200 feet above railroad tracks. *Id.*, p. 683–84.

Christa fell into Tadaryl's orbit shortly after her arrival at Job Corps, following her mother's pattern of finding her value and worth in the attention of a volatile and violent men. The relationship was predictably abusive. As Dr. Brand describes,

> [H]e grabbed her by the throat and pinned her against the wall. She fought back in self-defense as best she could. There were other times he was physically aggressive as well as extremely threatening. One time after shoving Christa, he opened his mouth and showed her that he had a razor hidden in his mouth. He was demonstrating in a menacing way that he could do much worse to her if he decided to.

Brand Report, p. 23. As a teenager coming from a home with a great deal of neglect and abuse, Christa felt that Tadaryl's aggressiveness meant that she was safe. *Id.* "This type of extremely illogical thinking can result when a child is raised in a chaotic, violent world." *Id.* Christa believed that if she was the girlfriend of an aggressive male, she would be safe, that Tadaryl would protect her. *Id.*

A former girlfriend of Tadaryl Shipp testified in post-conviction that before he left for Job Corps, she was in an abusive relationship with him and that he hit, slapped, punched, and kicked her. Testimony of Deandrea Gates, p. 183. She described Shipp as a manipulative person who preyed on people weaker than him, especially women. *Id.*

Christa met Colleen Slemmer when she arrived at the Job Corps in late 1994. When Christa returned home for Christmas in 1994, she told her mother about Colleen entering her room with a box cutter and generally how stressed she was feeling. McCoy Social History, p. 52. She expressed to friends both her love of her new boyfriend, Tadaryl, and

her fear of him. Christa did not want to return to Job Corps, but her mother and her sister Alicia insisted she return to complete the program. *Id.*

At Job Corps, Christa could no longer self-medicate her bipolar symptoms. In the week leading up to the crime, Christa was not well. She was not sleeping, she was erratic, and she was exhausted. Christa described the days before the crime to Dr. Brand:

> When I stopped marijuana, I started staying up all the time, and I was irritated and angry again.… I felt like my skin was hurting, like I had the flu. I could feel my hair. I was angry, irritated. I didn't want anyone around me.… Any little thing was such an irritant.

Dr. Brand Report, p. 26. Christa believed that Colleen was threatening her, and that Colleen was trying to take Tadaryl from her.

Nearly one year to the day after Christa was violently raped for the last time, she, Tadaryl, and fellow Job Corps resident Shadolla Peterson asked Colleen to join them at a nearby park to smoke some marijuana. Christa intended to threaten and fight Colleen. She wanted to scare her away from Tadaryl. But in the throes of her mania Christa could not "put on the brakes." Brand Report, p. 24.[29] Dr. Brand concluded that Christa's aggression toward Colleen unconsciously repeated the brutality of her childhood and teenage trauma. *Id.*, p. 27. Moreover, the violence of Colleen's death closely mirrored the violence Christa suffered a year before when she was raped at seventeen. Christa's mother's boyfriends often called Christa a "whore" and a "slut"; the very same language that Christa remembers Colleen using. The recurring trauma of her youth and Christa's deep fear of abandonment heightened the threat Christa felt she faced. Dr. Brand says

[29] *See also* Dr. Jonathan Pincus's report, p. 4.

that Christa became "disorganized in her thinking. Under serious stress, she [was] unable to reign in control of her behavior, emotions and thinking." Brand Report, p. 27–28.

Court Proceedings and Lack of Adequate Counsel

Even though the crime was highly sensationalized in the Knoxville media market, Christa went on trial in Knox County just over a year after she was charged. The Knoxville District Attorney extended an offer to settle the case for life without parole on the eve of trial.[30] Lead counsel William Talman believes that if he had more time to discuss the offer with Christa, the case would have been settled rather than ending in a death sentence. It is his greatest regret. He describes Christa as "extremely emotionally immature" and out of touch with the realities of her trial. As an example, Mr. Talman describes Christa saying she was "happy" after the guilty verdicts "because it was the first time in her life that she could remember so many members of her family being there for her."[31]

Christa was ill-equipped to assist in her own defense, or to judge what factors from her background might help convince a jury to spare her life. Her court-appointed attorneys, William Talman and Julie Martin Rice, were also inexperienced, as neither had tried a death penalty case.[32] Mr. Talman acknowledged that the most important part of Christa's trial was the penalty phase. Despite this understanding, the presentation to persuade the jury to spare Christa's life lasted only an hour, according to the penalty closing argument, which is contained in just six transcript pages. *See* Defense Penalty Phase Closing

[30] Talman letter, p. 2–3.

[31] *Id.*, p. 2. Mr. Talman was profoundly affected by this statement which made him want to hug his own daughter, so that she "always knows she is loved."

[32] For more information on the failings of Christa's trial counsel, see The Legal Profession Failed Christa.

Argument March 30, 1986. Trial counsel failed to present compelling mitigating evidence, which was known to the trial team, to the jury that sentenced this girl to death.

In every death penalty case, a lawyer's most important duty is to give the jury a reason to spare their client's life. Christa's lawyers failed miserably at this essential task. Counsel did not tell the jury that Christa's youth was a statutory mitigating factor, or that the jury might spare her life based on her lack of significant criminal record. Counsel never told the jury about her history of sexual abuse and rapes as a child. Rather, counsel emphasized the prosecution argument that Christa enjoyed the attention this case brought. The jury responded by imposing the harshest punishment under the law and sentenced Christa to death. Had she been slightly younger at the time of the crime, like her codefendant Shipp, Christa would have been ineligible for the death penalty.

Video footage from Christa's trial and sentencing show a young girl crying to hug her mother.[33] She struggled in the following years in prison, and she struggled to express remorse. She cycled through her still undiagnosed Bipolar Disorder. Yet, she remained thoughtful and intensely loyal. She helped inmates who needed supplies, as she does to this day. She befriended a woman named Patricia Jones while still in Knox County Detention Center despite Ms. Jones' violent history and use of "buzzing noises" to taunt Christa about her sentence.

Christa's Incarceration

Christa experienced episodes of depression and hypomania that were increasingly aggravated by the prison's misguided attempt to medicate her myriad mental health

[33] *See* WBIR news, at https://www.wbir.com/video/news/local/march-30-1996-christa-pike-is-sentenced-to-death/51-bc611a44-2e79-4084-96a6-f1f11c9f9fc4

issues. She would go several nights in a row without sleep, experiencing irritability and depressive symptoms, followed by an inability to get out of bed. Not long after she arrived at the women's prison, Christa was placed in solitary confinement. This had a profound effect on Christa. Dr. Stuart Grassian Report, p. 9–10.[34]

In 2001, Christa's mental health reached a crisis point. While in solitary confinement 22–23 hours a day, the prison had diagnosed Christa with obsessive compulsive disorder and prescribed Prozac. Prozac can cause a "manic switch"—meaning that it can aggravate symptoms of hypomania, including impaired judgment, irritability, and sleep disruption. Dr. George Woods Report, p. 7. Thus, the Prozac, along with the solitary confinement, exacerbated Christa's still undiagnosed and untreated Bipolar Disorder. Christa became hopeless and despondent. She told her lawyers and the post-conviction court that she wanted to give up her appeals and volunteer to be executed.

Christa had been housed in the segregation unit at the women's prison for five years by that time and had been held almost exclusively in 23-hour lockup. People can suffer a wide range of responses to the neuropsychologic stress of such solitary confinement, and "preexisting psychological vulnerability is a critical factor in determining the severity of such response."[35] Dr. Grassian consulted with Dr. George Woods who indicated that Christa suffered from Bipolar mood disorder.[36] Dr. Grassian noted that "individuals with bipolar mood disorder are among the most vulnerable of all" to develop psychopathologic

[34] Dr. Stuart Grassian Report, p. 2. Dr. Grassian is an expert in the impacts of solitary confinement.

[35] *Id.*, p. 3.

[36] *Id.*, p. 10.

effects of solitary confinement. *Id.* Regarding Christa's other vulnerabilities, Dr. Grassian stated that she suffered a history of severe childhood sexual and physical abuse and her emotional development and experience had often been chaotic, explosive and volatile.[37] "Powerful emotion can overwhelm a vulnerable person's capacity to reason, reflect, and choose…." *Id.* Christa has particular difficulty tolerating feelings of attachment, dependency, and abandonment. For Christa, "such feelings are often terrifying and disorganizing; the feelings can become blinding, screaming all-consuming." *Id.*

While Christa was suffering from this upheaval, before she was diagnosed with Bipolar Disorder and began treatment, and against prison policy, in August 2001 Christa was placed in an outdoor recreation pen with two other women—Natasha Cornett, a friend of Christa's, and Patricia Jones, the woman Christa knew from the Knoxville jail who had been convicted of first degree murder for stabbing an elderly woman 199 times. *Pike v. State*, M2012-01640-CCA-R3-PC, 2013 WL 5459647, at *5 (Tenn. Crim. App., Sep. 30, 2013). Natasha and Ms. Jones began arguing and Natasha took a swing at Ms. Jones. Ms. Jones, who had previously threatened to kill Cornett, moved to fight her. Christa jumped on Ms. Jones's back and choked her with a shoelace until she was incapacitated.

Ms. Jones has testified that while incarcerated in prison since 1996, she had assaulted correctional officers approximately ten times. *Id.* She also had assaulted several inmates. *Id.* Jones admitted that she "always hit first." *Id.* Jones said she had threatened to kill other individuals at the prison, including Christa Pike and Natasha Cornett, prior to the 2001 incident. *Id.* Jones testified that while she and Christa were incarcerated at the Knox County Jail, Christa prevented her from killing an inmate whose head she was

[37] Grassian Report, p. 3.

holding down in a toilet. *Id.* Christa also pulled her off of another inmate whose head she had rammed against the cell bars. *Id.* Christa also prevented Jones from killing a third inmate who she was choking with a telephone cord. *Id.*

In the aftermath of this altercation, Christa continued to cycle through the manic and depressive states of her still undiagnosed Bipolar Disorder. The overwhelming and "all-consuming" emotions that Dr. Grassian described in his report surfaced as Christa manically told her mother that she had intended to kill Ms. Jones. This statement was used to convict Christa of attempted murder.

Ms. Jones would later admit that Christa did the right thing by pulling her away from her friend. Ms. Jones made it clear that she would have killed Natasha and still would if given the chance. She forgave Christa and understood why she intervened. See Patricia Jones Testimony Davidson PC, p. 59.

Days after the Patricia Jones incident, Christa wrote the judge to reiterate her desire to withdraw her post-conviction petition and schedule an execution date. The judge ordered an investigation into Christa's competency to make that decision. Accordingly, Christa received evaluations and mental health care that she had never received before but so desperately needed. During this time Christa was finally diagnosed with Bipolar Disorder. It took almost a year for doctors to find appropriate medication to help Christa. During that year, her symptoms worsened. She hallucinated, and believed worms were coming out of the walls after her. She described feeling as though her "skin [was] constantly crawling." Dr. William Kenner Report, p. 36. With the help of Dr. Kenner, who evaluated Christa pursuant to the post-conviction court's order after her request to drop

her appeals, Christa's Bipolar Disorder was properly medicated. She has not had a disciplinary charge for an act of violence since being properly medicated.

A Victim of Child Rape Finds Stability, Purpose in Prison

While incarcerated, Christa worked to heal the impact of childhood abuse and neglect. In addition to the mood-stabilizing medications that she is cooperatively taking, Christa reports having been helped a great deal by a therapist, Dr. Ali Winters, who provided her with treatment. Christa loves art and is an accomplished painter. She loves helping new women to the prison, like Kasey Raines who was sent to TPW as a pregnant young woman struggling with addiction. Christa supported and encouraged her; she made sure Kasey and her growing baby had proper nutrition.[38]

After years of psychotherapy and medications to treat her mental illness, Christa is thoughtful, even-tempered, bright, funny, and hopeful. She exhibits deep remorse for killing Colleen Slemmer and the impact of her actions on Colleen's family and friends.

Christa was an 18-year-old girl when she committed the crime for which she has been sentenced to death. If she is executed on September 30, she will be the first woman Tennessee executes in over 200 years. She would also be the first person Tennessee has executed in the modern era who was a teenager at the time of the offense. In fact, the average age at time of the offense for the seventeen people executed since 1961 is 28.94 years. The youngest person executed in the last 65 years was 23 years old at the time of the offense. Such death sentences for youthful offenders have now become exceedingly rare

[38] *See* Kasey Raines letter, urging mercy for Christa, who she knows to be "a kind person, a loving person." Kasey is now a Peer Recovery Specialist in East Tennessee. For more from Kasey, see Kasey Raines Video.

in this country in the years since her conviction.[39] Christa was the last person sentenced to death in Tennessee for an offense committed at age 18. The handful of males who were death-sentenced at that age all had their sentences set aside.

Christa chose to participate in the circumstances which spiraled out of control and led to Collen Slemmer's death. For that, she should be punished severely, consistent with other sentences for 18-year-old female offenders, and spend the rest of her life incarcerated.

But this story did not begin with Christa's crime.

Christa did not choose to be born with brain damage because her mother drank during pregnancy. She did not choose to be neglected, abused, abandoned, and beaten—which led to her Post-Traumatic Stress Disorder. She did not choose to have Bipolar Disorder which her in-utero brain damage increased the likelihood of occurring.

Most significantly, Christa did not choose to be repeatedly raped as a child, first as a toddler, then at 11, then at 17. The State of Tennessee recognizes the profound harm of such abuse, which follows an individual throughout their life. Respectfully, she shouldn't die the way her rapists would today.

With mercy, Christa will continue to help vulnerable, frightened young women like Teddy, Ashlee, and Kasey to make a difference in the world.

[39] For more information about how disproportionate Christa's death sentence is compared to those of a similar age who committed similar crimes, Christa's Death Sentence is Disproportionate When Compared to Her Co-Defendants and Other 18 Year Olds.

Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood

Christa Pike suffers from Bipolar Disorder—caused, in part, by neonatal brain damage—which went undiagnosed and untreated until years after her trial. She also has Post-Traumatic Stress Disorder after experiencing child sexual abuse and rape. Multiple mental health professionals have confirmed these diagnoses, including those working at the Tennessee Department of Correction. *See* TDOC medical records; Dr. Bethany Brand Report and Addenda;[1] Dr. William Kenner Post-Conviction Testimony, at pp. 39–40, 58–66, 72, 76, 80–81, 86–88, 137, 147, and 149–53; Dr. George Woods Report. At trial, Christa's lawyers failed to present this evidence, and the jury had no opportunity to consider how Christa's severe mental illness affected her actions on the day of the offense. The Governor now has the opportunity to give this evidence the weight it deserves, and commute Christa's sentence to life imprisonment without possibility of parole.

Christa Was Born with a Compromised Brain Which Increased Her Risk of Developing Severe Mental Illness.

While Christa was still in utero, her mother drank so much alcohol that Christa suffered frontal lobe brain damage. Dr. Jonathan Pincus Post-Conviction

[1] Dr. Brand, a psychologist specializing in clinical treatment of trauma, diagnosed Bipolar I Disorder, complex Post-Traumatic Stress Disorder, Dissociative Amnesia, Depersonalization/Derealization Disorder, Panic Disorder, Obsessive Compulsive Disorder, Hoarding Disorder (food), and Specific Phobia (Spiders). Brand Report, p. 27. Dr. Brand notes that "[h]aving eight co-occurring psychological disorders is extremely uncommon in the general population but it is not unusual among individuals who have been exposed to severe, chronic complex trauma that began in preschool like Christa endured." *Id.* We focus on the first two mental illness diagnoses as they clearly are among the most severe mental illnesses by any definition. *See, e.g.,* Veterans Affairs definition of Serious Mental Illness (SMI) at https://share.google/DcpKp6tFQXfDugImU.

Testimony, p. 24—45. This brain damage planted the seeds of Christa's nascent bipolar disorder, which would emerge when she was a teenager. Dr. William Kenner Testimiony, p. 49–50. This was not the only damage Christa suffered at birth. Her mother gave birth prematurely after a psychiatric patient assaulted her and she began leaking amniotic fluid. When Christa was born via emergency Caesarean section, doctors found that her APGAR score was alarmingly low.[2] Carrie Ross PC testimony; Brand Report, p. 32. Christa suffered respiratory arrests and was transferred by ambulance to a neonatal intensive care unit in Charleston, West Virginia, and placed on a ventilator. Carrie Ross PC testimony.

When Christa was 14 months old, she had a seizure and had an abnormal EEG. In post-conviction, neurologist Dr. Jonathan Pincus reviewed the EEG results and testified that high voltage spikes coming from the right frontotemporal lobe indicated damage there. *See* Testimony of Jonathan Pincus, p. 240. Dr. Pincus found that these results pointed to a heterotopia in that region of Christa's brain, which was corroborated with an MRI scan in which the brain damage was visible to the naked eye. *Id.*, p. 244–45. Heterotopia is a congenital anomaly, where cells do not migrate properly and is most commonly caused by maternal drinking. *Id.*, p. 242. Dr. Pincus explained that most heterotopias are invisible on an MRI. *Id.*, p. 242. Given its

[2] The Apgar score is a rapid, standardized assessment used by healthcare providers to evaluate a newborn's health and transition to life outside the womb. Administered at 1 and 5 minutes after birth, it measures five key factors—**A**ppearance, **P**ulse, **G**rimace, **A**ctivity, and **R**espiration—with a maximum total of 10 points. Each of the following categories is given a score of 0, 1, or 2: **Appearance** (Skin Color): 0 (Blue/pale) | 1 (Body pink, extremities blue) | 2 (Completely pink); **Pulse** (Heart Rate): 0 (Absent) | 1 (Under 100 bpm) | 2 (Over 100 bpm); **Grimace** (Reflex Irritability): 0 (No response) | 1 (Grimace/weak cry) | 2 (Sneeze, cough, vigorous cry); **Activity** (Muscle Tone): 0 (Limp/flaccid) | 1 (Some flexion) | 2 (Active motion); **Respiration** (Breathing Effort): 0 (Absent) | 1 (Slow, irregular) | 2 (Good, strong cry).

visibility, "you can be absolutely certain that there's plenty more heterotopic areas and nests that exist that you can't see on MRI." *Id.*, p. 244–45.

Court-appointed psychiatrist Dr. William Kenner explained that the heterotopia was very significant as there's a high correlation in the literature between that kind of abnormality and teenagers who develop Bipolar Disorder. Dr. William Kenner Post-Conviction Testimony, p. 49–50. He agreed that Christa's brain was not wired correctly and that the damage occurred in the frontotemporal area of the brain— which can lead to inability to control behavior. *Id.*, p. 50.

Christa Experienced Symptoms of Bipolar Disorder by Early Adolescence which Were Neglected and Untreated.

The average age of onset of bipolar disorder is approximately 13 years of age. Brand Report, p. 16. Around age 13, Christa displayed signs of mania and hypomania. She would stay awake for days and not understand why her friends needed to sleep. *Id.* She was insomniac and had excessive energy. Christa engaged in high-risk actions such as hitchhiking and sleeping on the beach so that ocean sounds could put her to sleep. *Id*. Dr. Brand noted that high-risk behaviors are classic symptoms of mania, as are excessive energy and insomnia. *Id.*[3] They are also symptoms that plague survivors of child sexual abuse, as we note elsewhere.

[3] Dr. Brand also noted that Christa shared with trial expert Dr. Eric Engum that she had racing thoughts and intense labile mood swings, yet he failed to diagnose bipolar disorder despite these classic symptoms. Brand Report, p. 30. Similarly, Dr. Engum labeled Christa as having borderline personality disorder instead of recognizing the lifelong impact of trauma. *Id.* Trauma experts have demonstrated that the symptoms of borderline personality disorder are, in fact, more accurately understood as stemming from the damaging impact of trauma, particularly when it occurs in childhood. *Id.*

Dr. Kenner similarly noted examples of mania from review of the record and interviews with family members. Christa's mother Carissa told Dr. Kenner that when Christa around 12–13 years old, she would stay up all night and miss sleep. She was on the go night and day and had a lot of energy. She would chatter on. Dr. William Kenner Post-Conviction Testimony, p. 36. Records from around age 15 indicate that Christa was a "bundle of energy, she talked all during quiet hour." *Id.*, p. 38. She was described as hyper and very talkative and at other times as too restless to stay on task. *Id.* She had an amazing amount of energy even when sick with strep throat. *Id.*, p. 38–39. Christa also had symptoms of depression as an adolescent, including suicide attempts during her childhood. *Id.*, p. 40. Christa did not receive follow-up psychiatric treatment after overdosing in her first suicide attempt when she was 12 years old. Brand Report, p. 14.

As discussed elsewhere, Christa suffered horrific childhood abuse and trauma, experiencing 9 out of 10 childhood adverse experiences. Childhood trauma exposure increases the risk for bipolar disorder, with emotional abuse being particularly strongly linked to its development. Brand Report, p. 26. Emotional abuse, which Christa experienced in childhood and adolescence, quadruples the risk for developing bipolar disorder. *Id.*, p. 27.

As a child and adolescent, Christa had no therapist or ongoing treatment for the symptoms of her mental illnesses. Christa was seen by several healthcare professionals as a young teen and adolescent but none of them saw her more than once or twice. *Id.*, p. 87. Her parents' failure to ensure she received appropriate

mental health treatment across multiple red flag incidents in her life, including suicide attempts, made it difficult for her bipolar disorder to be diagnosed and, therefore, treated. A person with bipolar disorder needs to be observed to discern the cyclical patterns associated with that illness because on any given day they may present as relatively normal. *Id.*

Christa's Bipolar Disorder Was Finally Diagnosed After She was Sentenced to Death.

Christa was sentenced to death on March 30, 1996. On June 13, 1997, a psychiatrist at the women's prison prescribed Prozac for Christa's obsessive compulsive disorder symptoms. By March 31, 2001, when Dr. Pincus issued a report after examining Christa a few days earlier, he noted that the dosage she was being given was fairly high and had been so for over a year. Dr. Pincus diagnosed Christa with Post-Traumatic Stress Disorder caused by her "almost unbearably abusive background" and a neurological disorder. Pincus Report, p. 1, 5. Prozac can cause a "manic switch"—meaning that it can aggravate symptoms of hypomania, including impaired judgment, irritability, and sleep disruption. Woods Report, p. 7.

Christa became hopeless and despondent while held in solitary confinement and medicated with Prozac. Christa was housed in the segregation unit at the women's prison for five years by that time and had been held almost exclusively in 23-hour lockup. Dr. Stuart Grassian Report, p. 2. Dr. Grassian noted that people can suffer a wide range of responses to the neuropsychologic stress of such solitary confinement, and "preexisting psychological vulnerability is a critical factor in determining the severity of such response." *Id.*, p. 3. Dr. Grassian noted that

"individuals with bipolar mood disorder are among the most vulnerable of all" to develop psychopathologic effects of solitary confinement. *Id.*

Regarding Christa's other vulnerabilities, Dr. Grassian stated that she suffered a history of severe childhood sexual and physical abuse, whose emotional development and experience has often been chaotic, explosive and volatile. Grassian Report, p. 3. "Powerful emotion can overwhelm a vulnerable person's capacity to reason, reflect, and choose…." *Id.* As is typical of individuals who have grown up with a profound experience of childhood abandonment, Christa has particular difficulty tolerating feelings of attachment, dependency, and abandonment. *Id.* For her, "such feelings are often terrifying and disorganizing; the feelings can become blinding, screaming all-consuming." *Id.*

Overcome with despair, in June 2001 Christa told the post-conviction judge that she wanted to withdraw her post-conviction petition and schedule an execution date. The judge told Christa to discuss this with counsel and file a written motion if she wanted to waive her post-conviction appeals. *Pike v. State*, 164 S.W.3d 257, 259–60 (Tenn. 2005).

On August 24, 2001, Christa attacked Patricia Jones while defending her friend from Patricia's threats.[4] Days later, on September 4, Christa wrote a letter to the post-conviction judge reiterating her desire to withdraw her post-conviction

[4] Christa was charged with attempted murder and was later convicted at a 2004 trial in which no evidence was presented regarding Christa's mental illnesses, their exacerbation by mismedication, or Jones's extensive history of violence against other prisoners and guards. Nor did the jury hear of Christa's intervention of Jones's attacks on women at the Knoxville jail when she attempted to drown a woman by holding her head into a toilet and thrust another woman's head through cell bars.

petition and have the judge set an execution date. *Pike*, 164 S.W.3d at 260. On October 6, 2001, Dr. George Woods issued his preliminary report diagnosing Christa with Post-Traumatic Stress Disorder and Bipolar Disorder. Woods Report. He recommended a change of medication. *Id.*, p. 7.

After counsel filed a motion for an evidentiary hearing on the withdrawal request, the post-conviction judge appointed Dr. William Kenner as the court's competency expert on November 7, 2001. On November 25, 2001, Christa was placed on suicide watch. Dr. Kenner began interviewing Christa in December and diagnosed Bipolar II Disorder Hypomanic recurrent. Kenner Report, p. 43. A few months later, in March 2002, Christa began treatment with lithium and responded well. She has been treated for Bipolar Disorder since then with various medications which have helped her to manage the symptoms. Since being correctly diagnosed and medicated, Christa has had no disciplinary charges involving violence.

Christa Suffers Post-Traumatic Stress Disorder from Her Almost Unbearably Abusive Background.

Christa Pike was exposed to severe, chronic complex trauma that began in preschool. Brand Report, p. 27. The jury never heard this trauma history and its lifelong impact upon Christa. As the number and type of childhood traumas increase, so does the severity and breadth of difficulties a traumatized person struggles with, often for the rest of their lives, unless they get trauma treatment. *Id.*, p. 35. When maltreatment is as severe as that Christa endured, it can cause enduring and complex changes in: (1) the person's brain structure and functioning; (2) their stress response system; (3) their beliefs about themselves and others; (4) relationship skills;

(5) the ability to regulate emotions and behavior; (6) the ability to attend, remember and learn from experience, and (7) the ability to think through and solve problems adaptively rather than impulsively or immaturely. *Id.*

Dr. Brand's examination of Christa revealed that she experienced 9 out of 10 adverse childhood experiences, or "ACEs":

(1) **Verbal/Emotional Abuse.** Two of Christa's mother's boyfriends (Danny Thompson, Steve Kyaw) verbally abused her, as did her maternal grandmother and father.

(2) **Physical Abuse.** Christa was physically abused by several family members, including her father (who often beat Christa with a belt while she was naked from the waist down), her maternal grandmother, her mother, sister, and stepfathers Danny Thompson and Steve Kyaw.

(3) **Sexual Abuse.** Christa's grandmother's partner sexually molested and raped her when she was a toddler. Steve Kyaw sexually abused Christa by twisting her nipples. A neighbor raped her when she was only 11 years old within sight of her home. After the rape, he was released and she had to walk past his trailer; the possibility that he would attack her again utterly terrified her.

(4) **Emotional Neglect.** Christa was often overlooked, unprotected, and disbelieved about having been sexually assaulted and mistreated by a babysitter and various partners of her mother.

(5) **Physical Neglect.** Christa often did not have enough to eat when she lived with her mother. She was often sent to school without breakfast or lunch money. She

had to wear dirty clothes when at her mother's home. Furthermore, her mother was often too drunk to take care of her.

(6) **Parental Separation or Divorce.** Christa's parents married, then divorced, then remarried each other, and finally were divorced a second time before Christa was eight years old.

(7) **Household Member with Problem Drinking or Drug Use.** Christa's mother, father, and maternal grandmother drank heavily and/or used drugs.

(8) **Household Member with Mental Health Problems.** Christa's mother became so depressed after Christa's birth that she attempted suicide.

(9) **Witnessing violence between her parents.**

The effect of adverse childhood experiences is cumulated with each adversity and significantly increases a person's risk for medical and mental disturbances decades later. Brand Report, p. 21. Individuals with four or more ACEs experience a notably higher risk for a range of medical and mental disorders. *Id.* "It is *highly* unusual for a child to experience nine ACEs: ***Christa experienced more ACEs than 99.3% of the U.S. population.*"** Brand Report, p. 22. Many adults in Christa's life mistreated and abused her in a multitude of ways. *Id.* Her home was not a place of safety, protection, and belonging for Christa, it was instead the source of her chaos and danger. This was an extremely heavy burden of adversity for Christa as a child. *Id.*

Traumatized girls often have difficulty focusing their attention and have poor concentration. A child raised amongst violent, abusive people has not been taught

how to set self-protective boundaries in relationships, or that they should end relationships that are exploitive, violent, and/or sexually abusive. *Id.*, p. 36. Such was the case with Christa and particularly with her relationship with Tadaryl Shipp that led to Christa's crime.

Christa's Severe Mental Illnesses Prevented Her from Putting the "Brakes On" During Her Crime.

Christa, at age 18, along with Tadaryl Shipp (age 17), and Shadolla Peterson (age 18), brutally attacked and killed Colleen Slemmer on January 12, 1985. At the time of her crime and trial, the jury did not consider Christa's Bipolar Disorder and Post-Traumatic Stress Disorder as she had not been appropriately diagnosed. Similarly, no one had made the connection that Christa had been attacked and raped by a stranger almost exactly a year to the day before and how the trauma of that attack affected her functioning at the time of the crime. Layered onto the effects of Christa's Bipolar Disorder and Post-Traumatic Stress Disorder was an anniversary reaction to the rape. Anniversary reactions to trauma "manifest as heightened emotional distress, intrusive re-experiencing, behavioral dysregulation," and at times, "unconscious reenactment of trauma-related behavior in the period surrounding the anniversary date." Brand Addendum, p. 4. The combination of Christa's bipolar emotionally reactive state and her heightened emotional distress severely compromised her capacity to control her behavior on January 12. *Id.*, p. 4–5.

Even without knowing of the rape at age 17, Dr. Pincus found that "Christa was not in charge of herself at [the time of her crime]. She could not apply brakes to

her activity." Pincus Report, p. 2. As he explained in post-conviction, Christa was under the influence of multiple factors. Christa had "a brain that isn't working properly, the brakes aren't working." Dr. Jonathan Pincus Post-Conviction Testimony, p. 271. Dr. Pincus testified "[t]hat's what the frontal lobe does. It's like the brakes." *Id.* In addition to her frontal lobe impairments, Christa also had bipolar mania at the same time "and lost control of herself…." *Id.*, p. 272. Although Christa "didn't start off by wanting to kill [Ms. Slemmer]…. [her] mental disease and defect [] prevented her from being able to consider what she was doing" and to prevent herself from following through once the assault had begun. *Id.*, p. 272.

Dr. Brand agreed with this analysis, adding that Christa's brain at age 18 was still undeveloped, as we know from the current state of adolescent brain science. "At 18 years old, her immature, traumatized brain made her exceptionally vulnerable to impulses and extremely poor decisions. Unmedicated and untreated, she was not able to put the 'brakes on' her bipolar- and trauma-triggered emotions." Brand Report, p. 39. The impact of trauma and untreated psychiatric disorders had tragic consequences. *Id.*

Christa's Life Should Be Spared Because Her Severe Mental Illnesses—Conditions Beyond Her Control Which Have Impacted the Course of Her Life—Are Reasons to Extend Mercy.

Christa did not choose to be born with brain damage because her mother drank during pregnancy. She did not choose to be neglected, abused, abandoned, beaten, and raped—which led to her Post-Traumatic Stress Disorder. She did not choose to have Bipolar Disorder which her in-utero brain damage increased the likelihood of

occurring. She did choose to participate in the circumstances which spiraled out of control and led to Collen Slemmer's death. For that, she should be punished severely, consistent with other sentences for 18-year-old female offenders, and spend the rest of her life incarcerated.

Christa has been treated with appropriate medications for over two decades and received therapy which has allowed her to manage her psychiatric symptoms, emotionally process the pain her actions have caused, and come to a place of deep remorse. Despite her mental illness, she has helped many other incarcerated women with both their practical needs (commissary items, shower shoes, meals) and also counseled them. As Dr. Brand found: "after years of psychotherapy and medications to treat her mental illness, Christa is thoughtful, even-tempered, bright, funny, and hopeful. She exhibits deep remorse for her actions…." Brand Report, p. 37. Christa has matured and learned to process her trauma, and she is truly a different person than she was at the time of the murder. *Id.*

The brain damage, PTSD, and Bipolar Disorder, all debilitating conditions, played a major role in Christa's crime. Yet, the jury which sentenced her was not aware of any of that. Instead, they were told that Christa had a personality disorder, suggesting she simply had a flawed character rather than medical illnesses.[5] The

[5] Juries which are informed of the defendant's severe mental illness frequently chose life. *See, e.g.*, *People v. Holmes*, No. 12CR1522 (Dist. Ct., Arapahoe Co., Colo., Aug. 28, 2015) (the Aurora theater shooting); *State v. Monfort,* No. 091071876 (King Co., Wash. Sup. Ct., July 23, 2015) (12-0 vote for life sentence due to mental health concerns); *State v. McEnroe*, No. 071087164 (King Co., Wash., Sup. Ct., May 13, 2015) (*See* Phil Helsel, *Man Convicted in Family Massacre Spared Death Penalty*, https://www.nbcnews.com/news/us-news/man-convicted-family-massacre-spared-death-penalty-n358616). *See* Stephen P. Garvey, Essay, *Aggravation and Mitigation in Capital Cases: What Do Jurors Think?*, 98 COLUM. L. REV. 1538, 1571 tbl.8 (1998) (finding mental illness, mental

unique frailties and strengths of any individual should be considered before they are executed by the State of Tennessee, and particularly severe mental illness.[6]

Christa's specific frailties, and particularly her Post-Traumatic Stress Disorder, would lead to an extraordinarily cruel death if she is executed. The State of Tennessee proposes to execute Christa Pike at 10:00 a.m. on September 30, 2026, under conditions which have never existed in 200 years and will never exist again.[7] The State plans to use a group of male correctional officers to lay hands on Christa to extract her from a death watch cell. The State then plans for a male execution team to hold Christa, a woman who was repeatedly raped as a child and then again

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impairment, and acceptance of responsibility highly mitigating, and suffering child abuse also carries weight).

[6] Ohio and Kentucky have both passed laws prohibiting the execution of individuals with severe mental illness. Ohio House Bill 136 (2021); Kentucky House Bill 269 (2022). Both bills include Bipolar Disorder among the qualifying diagnosis. Tennessee has not yet passed such a bill but the strong policy interests behind doing so were exemplified by SB1124, co-sponsored by Senator Richard Briggs and Rep. Bob Ramsey in 2019. *See* https://www.newschannel5.com/news/tennessee-bill-would-prohibit-death-penalty-for-people-suffering-from-severe-mental-illness (Sen. Briggs questioned "A medical illness caused them to kill someone, would we put someone to death that had diabetes, or someone who had a heart attack if they killed someone? Why are we putting people to death that have a disease to the brain?") Nearly every major mental health association in the United States has issued policy statements recommending the banning of the death penalty for severely mentally ill offenders. *See* Am. Psychiatric Ass'n, Position Statement on Diminished Responsibility in Capital Sentencing (approved Nov. 2004 and reaffirmed Nov. 2014); American Psychiatric Association, *Moratorium on Capital Punishment in the United States* (approved October 2000), APA Document Reference No. 200006; American Psychological Association, *Resolution on the Death Penalty in the United States*; National Mental Health Association, *Death Penalty and People with Mental Illness* (approved March 10, 2001).

[7] Of the 200-plus women convicted of first-degree murder in the modern era, only Christa Pike is subject to execution of a death sentence. *See State v. Pike*, No. M2020-01156-SC-DPE-DD, (Response, June 7, 2021), p. 23–26, and *Pike v. State*, No. E2023-01684-SC-R11-PD (Application, July 16, 2024), p. 11–12. Additionally, Ms. Pike would be the only person executed in the modern era for a crime committed at age 18, after seven male death sentences predating Ms. Pike's were all vacated. *Pike*, No. E2023-01684-SC-R11-PD (Application, July 16, 2024), p. 13. She was the last person sentenced to death for a crime at that age, in 1996, for a crime committed in 1995. *Id.* The average age at time of the offense of the sixteen men executed in the modern era is 29.25 with the youngest being 23. *See* chart labeled *Ages of TN men at time of offense*. This makes any execution of Ms. Pike an extreme outlier.

violently raped as a teenager, down on a gurney, and strap her to it. The State will cause her to relive her childhood sexual trauma while forcibly holding her helpless and attempting to place IV lines in her compromised, small, and hard-to-access veins. For Christa Pike, this would be torturous, since those actions will trigger physical and sensory experiences that mirror her rapes.

As Dr. Brand explains, when Christa was raped "[s]he was pinned. She was powerless. What the protocol describe as a routine restraint procedure will, for her, be experienced as a precise replication of the worst moments of her life." Brand Addendum, p. 5. Traumatic memory is not recalled, it is *relived*, triggered by sensory and physical experiences that mirror the original trauma. *Id.* Christa would be physically restrained by a group of men, immobilized and unable to move. *Id.* This will not simply frighten her, it "will return her, in full sensory and neurobiological force, to every violation she ever survived." *Id.* Christa would die in the grip of trauma and terror. *Id.*, p. 6.

Christa Suffered Horrific Sexual Violence that Began When She Was a Toddler

> *The wounds are unimaginable, and the scars run deep. These are not crimes that victims rapidly heal from or move on with their lives. These are crimes that change children forever.*
>
> - Statement by Representative William Lamberth in Support of Tennessee's Death Penalty Bill for Child Rape, Jan. 23, 2024

> *Child rape regardless of the method destroys the innocence of a child . . . They'll live with this the rest of their lives.*
>
> - Statement by Senator Janice Bowling in Support of Tennessee's Death Penalty Bill for Child Rape, April 9, 2024

Rape and sexual abuse defined Christa's childhood and adolescence. By the time she was seventeen, Christa had been raped by four different men and sexually abused by another. The predators who stalked her youth eroded her sense of safety, destroyed her self-esteem, and damaged her mental health beyond repair. With a strong support network, therapy, and family stability, she might have been able to cope with the devastating psychological consequences of the violence endured. Yet Christa had none of these things.

Christa's experiences of child sexual abuse and rape provide critical context for the crime she committed. As Tennessee legislators recognize, childhood sexual abuse has lifelong consequences. For girls, sexual abuse can lead to a cascade of violence, addiction, and even incarceration.[1] Girls are more vulnerable to sexual abuse than boys, and more vulnerable to repeated victimization over their childhood and

[1] Indeed, one study found that "the rate of sexual abuse for justice-involved girls was over four times higher than for boys." Human Rights Project for Girls, *The Sexual Abuse to Prison Pipeline for Girls: The Girls' Story,* p. 9 (2015), https://genderjusticeandopportunity.georgetown.edu/report/the-sexual-abuse-to-prison-pipeline-the-girls-story/.

adolescence.[2] Christa's history of sexual violence spanned most of her young life, beginning when she was barely able to walk, and continuing until she was brutally raped one year before the crime that led to her death sentence.

Christa was a chubby-cheeked toddler when her paternal grandmother's boyfriend, Ernest Johnson, sexually assaulted her for the first time. Christa spent much of her early years with her grandmother, giving Johnson ample time to groom her. His sexual abuse continued for years, escalating to rape when she was in preschool. He ensured Christa's silence by threatening to kill her beloved pets and her grandmother. He once thrust her into a chicken coop, locked the door, and left her huddled in the dark while spiders crawled over her skin and bit her.

To her child's eyes, Ernest's genitalia seemed monstruous. In elementary school, a teacher asked the children to draw what they did at home. Christa drew a man with "a huge penis and demon face." Alarmed, Christa's teachers took her to the principal and called her parents, but no one investigated further—even though Christa's drawing was a red flag signaling sexual abuse. Today, Tennessee trains

[2] Kevin Lalor and Rosaleen McElvaney, *Child Sexual Abuse, Links to Later Sexual Exploitation/High-Risk Sexual Behavior, and Prevention/Treatment Programs,* 11 Trauma, Violence, & Abuse 159, 163 (2010).

mandatory reporters—including teachers—that children who are preoccupied by sexually explicit images may be experiencing sexual abuse at home.[3]

At age 11, Christa had a gap-toothed smile and an unruly mop of thick auburn hair. She was in fifth grade at a new elementary school, Carrboro Elementary, where she hoped to make a new start. Her parents had bounced her from one school to another, sending her first to West Virginia, then to North Carolina, until she landed again with her mother in Orange County, North Carolina.

On November 3, 1987, the school bus dropped Christa off near her mother's home. When Christa arrived, her mother was at work and the house was empty. As she was walking to the mailbox, a 37-year-old neighbor named Claude Davis grabbed her, pushed her down, and raped her.

At school the next day, a teacher's aide noticed that Christa was crying and distraught. When she asked what was wrong, Christa told her about the rape. The school called Christa's mother Carissa and the Orange County Sheriff opened an investigation. Davis was arrested, but the court released him on bond. He was soon

[3] *See* Tenn. Dpt. of Children's Services, Mandated Reporter Training Video, at 4:57, https://www.tn.gov/dcs/program-areas/training/cw-resources/mandated-reporter-training.html.

back in Christa's neighborhood. Every day, she had to walk by his house to get to the bus stop. "I thought he'd get me again," she told Dr. Brand. She was afraid and hypervigilant. Eventually, Davis pleaded "no contest" to "assault on a child under twelve years of age" and received a suspended sentence of two years' imprisonment—a sentence that would prompt outrage today. No provisions were made for victim support or counseling. Davis would eventually be arrested for a series of additional offenses, including assault on a woman.

At the time Davis raped her, Christa was already struggling with the consequences of long-term sexual abuse. She had developed a series of behavioral issues that all experts today would recognize as symptomatic of such abuse. She wet the bed every night until she was in first grade. She had trouble concentrating in school and began acting out. This is commonplace in survivors of childhood sexual abuse, which—as Supreme Court Justice Samuel Alito recognized—is "grossly intrusive in the lives of children."

Research shows that survivors of child sexual abuse "whose experiences are validated, and who receive counseling after abuse, have better mental health outcomes."[4] Experts have also emphasized that "[c]aring role models can make a difference in a child's ability to overcome maltreatment."[5] Yet Christa's parents either dismissed or minimized her symptoms, assuming that Christa was merely "difficult" or "insubordinate." Their neglect of Christa's needs, and the failure of

[4] Deconstructing Stigma, *The Wounds We Can't See: The Mental Health Impact of Child Abuse*, https://deconstructingstigma.org/guides/effects-child-abuse.

[5] *Id.*

anyone else to intercede on Christa's behalf, left her to fend for herself as she navigated the physical and psychological aftermath of sexual abuse.

After she was raped by Davis, her symptoms worsened. Christa began to regularly use marijuana and alcohol to numb her feelings of despair. Dr. Bethany Brand explains that "Christa was struggling with the impact of unrelenting, severe trauma without the benefit of psychiatric medication or psychotherapy, and without support of her family." In this sense, alcohol and drugs were "a form of self-medication to numb the brutally painful memories of being abused." Christa also began cutting herself. She attempted suicide. These are all symptoms of trauma common to survivors of sexual abuse. As Justice Samuel Alito acknowledged in his dissent in *Kennedy v. Louisiana*, "long-term studies show that sexual abuse is 'grossly intrusive in the lives of children and is harmful to their normal psychological, emotional and sexual development in ways which no just or humane society can tolerate.'" 554 U.S. 407, 468 (2008) (Alito, J., dissenting) (citing C. Bagley & K. King, Child Sexual Abuse: The Search for Healing 2 (1990)).[6]

Meanwhile, Christa's parents failed to provide the support she needed. Her parents divorced twice between the time she was born and her seventh birthday. Both parents had a series of partners throughout Christa's childhood—most of whom lasted only a short time. Some of her mother's boyfriends were horribly abusive to

[6] One study—cited by Justice Samuel Alito in *Kennedy*—revealed that as many as 40% of 7- to 13-year-old sexual assault victims are considered "seriously disturbed." A. Lurigio, M. Jones, & B. Smith, *Child Sexual Abuse: Its Causes, Consequences, and Implications for Probation Practice*, 59 Fed. Probation 69, 70 (Sept. 1995).

Christa. Christa's parents lobbed her back and forth like a beach ball, each refusing to take responsibility for their child's needs.

School offered a respite from her abusive environment. Christa wanted to succeed. Her teachers described her as "intent on helping others" and said there was "something special about her, a spark." But Christa was given no chance to thrive, as her parents repeatedly compelled her to change schools mid-year to accommodate their lifestyles. By the seventh grade, she was facing new threats at home.

When Christa was going through puberty, her mother had moved in with a man named Steve Kyaw, whose physical and sexual abuse of Christa would lead to intervention by Child Protective Services. Kyaw was addicted to pornography and made no attempt to hide his stacks of magazines and X-rated videotapes from Christa. He liked to "wrestle" with Christa, when he could touch her breasts and body. He once twisted her nipples so hard that it caused excruciating pain. Kyaw called her a slut and a whore while grabbing his own genitals. He punched her in the face.

Christa reported Kyaw to the police, who arrested him. He was removed from the home, and a court issued a restraining order preventing him from returning. The charges were dropped when he agreed to move out. By that time, he had lived with Christa and her mother for nearly two years.

Christa was now a young teenager and still struggling. She skipped school and began to run away from home—common symptoms for girls coping with the aftermath of sexual violence. She lived on couches and once stayed with a mentally ill homeless man. The Tennessee Department of Children's Services warns that these

are common symptoms for children experiencing sexual exploitation.[7] Yet people who are unschooled in trauma responses are more likely to blame the victim for her perceived character flaws. The U.S. Department of Health and Human Services explains:

> Abused and neglected children sometimes get the reputation for being "bad kids" or extremely difficult to control or understand. Research suggests that challenging behavior is often a cry for help that concerned adults need to learn to decode.[8]

Experts also recognize that abused children engage in "risky behaviors." Paradoxically, these symptoms of abuse leave them vulnerable to repeated victimization. When Christa was fourteen, she capitulated to a much older man's demand for sex. Although this was statutory rape, Christa did not recognize it as either inappropriate or criminal.

Research shows that "sexual violence [is] a risk for girls throughout their lives, though particularly during adolescence."[9] This is precisely what happened to Christa only a year before she was arrested and charged with capital murder.

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[7] *See* Tenn. Dpt. of Children's Services, Mandated Reporter Training Video, at 5:40, https://www.tn.gov/dcs/program-areas/training/cw-resources/mandated-reporter-training.html.

[8] The Role of Educators in Preventing and Responding to Child Abuse and Neglect Report by the Child Welfare Information Gateway, https://www.icmec.org/wp-content/uploads/2015/10/Role-of-Educators-Prevention-Booklet-US.pdf.

[9] Human Rights Project for Girls, et al., *Sexual Abuse to Prison Pipeline: The Girls' Story*, p. 9 (2015).

Christa was walking to the store at night, alone, when she was grabbed by a stranger, thrown to the ground, and raped. She was 17 years old. Christa fought him as hard as she could. He tore her clothes off and forced himself on her so violently that he bruised and scraped her entire body. Christa struggled and managed to escape. She ran as fast as she could to a friend's house. Christa called the police and went to a hospital, where the staff collected a rape kit and documented bruising near her genitals and abrasions on her chest and knee. Weeping and hysterical, she told the nurse what happened. The nurse noted that her friend was instrumental in calming Christa down enough to complete a rape kit. The Carrboro Police opened an investigation but the perpetrator was never identified or caught.[10]

After the rape, Christa returned to the chaos of her mother's house. Knowing she needed a new start, Christa turned to Job Corps, the Federal job training program for troubled youth. She hoped to become a nurse and thought Job Corps could provide her with stability and training.

[10] *See* documentation from the Carrboro Police and University of North Carolina hospital records documenting the rape.

In the Fall of 1994, Christa left North Carolina to enroll in Job Corps in Knoxville, Tennessee. Unbeknownst to Christa, Knoxville's Job Corps had a well-earned reputation for violence. On October 4, 1992, Kiesha Nicole Small, age 18, was charged with attempted murder for attacking a female at the Knoxville Job Corps with a box cutter. In October 1993, two Knoxville Job Corps students were charged with kidnapping and raping a young woman and beating her boyfriend. Between April 2, 1994, and January 22, 1995, at least 15 assaults and five rapes involving Knoxville Job Corps students were reported. This is the precise time period when Christa entered Job Corps with high hopes of starting her new life.

In the violent environment of Job Corps, Tadaryl Shipp was one of its most violent residents. Shipp came to Job Corps from Memphis in 1994. A former girlfriend of Tadaryl Shipp later testified that before he left for Job Corps, she was in an abusive relationship with him and that he hit, slapped, punched, and kicked her. (Testimony of DG, p. 183.) Shipp, she said, was a manipulator who preyed on people weaker than him, especially women. *Id.*

At Job Corps, Tadaryl had a reputation for violence. Other students were terrified of him. Andrew Dace, a fellow resident, recalled that Tadaryl "just liked to hurt anybody he could." (PC XII: 683.) Tadaryl attacked Dace more than once, but the worst incident he recalls was when Tadaryl tried to throw him off a bridge near the Job Corps that was about 200 feet above railroad tracks. (*Id.* at 683–84).

Christa and Tadaryl met and began a relationship shortly after Christa arrived at Job Corps. The relationship was predictably abusive. Tadaryl once grabbed her by the throat and pinned her against the wall. Dr. Brand reports that once, he opened his mouth to show Christa the razor hidden inside.

Paradoxically, Christa felt that Tadaryl could protect her from others, even as he threatened her safety. As Dr. Brand observes, this sort of "extremely illogical thinking can result when a child is raised in a chaotic, violent world. Rather than being afraid of violent people, she (falsely) believed that if she was the girlfriend of an aggressive male, she would be safe. She felt that Tadaryl would protect her." Although it may be difficult for outside observers to understand why a young woman would stay with an abusive partner, this is commonplace for survivors of child abuse. As one organization notes, "[c]hildren who were abused may stay connected to abuse when they grow up."[11] Within the context of these relationships, survivors may simultaneously "experience or perpetrate abuse."[12]

On January 12, 1995, Christa participated in the violent assault that led to the death of Colleen Slemmer. It was nearly one year to the day from the violent rape she experienced on January 14, 1994. The timing is significant, as Dr. Bethany Brand—an expert on trauma and gender-based violence—explains:

> It is my opinion that Christa's violent behavior on January 12, 1995 was not only the product of the situational triggers present that night, but was also shaped by two converging vulnerabilities: the psychological weight of the approaching anniversary of her rape — a date her nervous system, if not her conscious mind, had reason to remember — and the

[11] Deconstructing Stigma, *supra* note 4.

[12] *Id.*

> irritable bipolar emotionally reactive state she was experiencing on that same day. The co-occurrence of these two factors, each capable of impairing judgment and behavioral control independently, substantially increases the likelihood that her capacity for self-regulation was severely compromised at the time of the offense.

Dr. Brand's conclusions make clear that Christa's actions at the time of the crime were inextricably linked to the damage wrought by the men who sexually exploited and abused her for years. Tadaryl Shipp, her abusive intimate partner, escaped capital punishment, even though he brutally beat Colleen Slemmer and carved a pentagram into her chest.

Ernest Johnson, Claude Davis, and John Doe (the third rapist) escaped accountability for the crimes they committed against Christa. In recognition of the devastating consequences of child rape, the Tennessee legislature recently expanded the death penalty to apply to people like Johnson and Davis. Yet Tennessee now plans to execute a woman who, at the time of her crime, was a profoundly damaged adolescent survivor of child rape. If Tennessee truly cares about the victims of child rape, the Governor must commute Christa's death sentence to life imprisonment.

North Carolina and West Virginia Social Services and Juvenile Justice Systems Failed Christa

[W] e went off the rails in her case, we didn't consider her best interest, it wasn't in her best interest to go to training school… She should have had services wrapped around her ... when she came to the attention of the Department of Social Services in Durham, she was a child who really should have been taken into [foster] care [and removed from the home] as a dependent child, and instead we adjudicated her as a delinquent. That was the wrong result… We failed her.

Judge Matthew Martin, Christa's juvenile attorney

The States of North Carolina and West Virginia Failed to Abide by Their Obligations to Report and Investigate Child Abuse Throughout Ms. Pike's Childhood.

Christa's childhood was characterized by pervasive and profound abuse, neglect, and violence that the states she grew up in, North Carolina and West Virginia, either knew about or should have known about. Despite mandatory reporting laws in both North Carolina and West Virgina that should have alerted authorities, those states left Christa unprotected. By the time she was eighteen, Christa had been raped four times, physically abused by at least seven different family members, and sexually abused by her mother's boyfriend. The failures of North Carolina and West Virginia sent a deeply traumatized, severely mentally ill 18-year-old girl to Tennessee, where she believed Knoxville's Job Corps represented her best chance at a new life.

Christa's parents failed to provide an environment suited to meet Christa's basic needs. Alcohol was pervasive in the house, but food was not. Christa's mother

Carissa spent her income on herself, her romantic partners, and going out. Christa only had access to new or clean clothes when her aunt Carrie noticed and brought over things for her, like a winter coat to keep her warm in the snowy West Virginia winters. Post-Conviction Testimony of Carrie Ross, p. 180;[1] Trial Testimony of Carrie Ross, p. 338–39. Christa was shuffled back and forth between her mother in North Carolina and her father in West Virginia whenever one parent would decide that their child was too much of a burden to care for. By the time she obtained her GED in 1993, Christa had changed schools twelve times and failed two grades despite her obvious intelligence and academic potential. Dr. McCoy Social History Synopsis, p. 37–38; McCoy Educational History Chart.

The neglect and abuse were apparent to North Carolina and West Virginia professionals with a duty to step in. Her parents failed to get Christa medical and psychological care. Christa never received the care and attention she needed for her increasingly manifest mental illnesses and instead was physically disciplined for "acting out" or being "out of control." Christa's father Glenn physically abused her for acting out, beating her with a belt and folding the belt in half to amplify the impact on Christa. Post-Conviction Testimony of Dr. Jonathan Pincus, p. 51–53. On the rare occasions where Christa was encouraged to seek psychological help by school officials, such as when she attempted suicide for the second time at age 12, her parents never brought her back for follow up or continuous mental health care.

[1] The page numbers referenced here are those superimposed at the top of the transcripts, which bear the original page number.

See Dr. McCoy's Social History Synopsis, p. 42. No state actors followed up with Carissa about why Christa had missed appointments and ultimately stopped attending sessions all together, despite documented concerns about her mental health. Instead of receiving care and attention, Christa spent her teenage years in and out of state institutions which punished her truancy and runaway behaviors—symptoms of the abuse she endured—rather than providing her treatment and care. *See* Post-Conviction Testimony of Kerry Sherrill.

State Actors Failed to Enforce Numerous State Laws That Should Have Provided Protection for Christa Throughout Her Childhood.

West Virginia, North Carolina, and the federal government promulgated mandatory child abuse and neglect reporting laws that were in effect for the entirety of Christa's childhood. All these laws acknowledge that children deserve to live free from violence and harm and the state has an obligation to intervene when there are signs that they might be harmed or are receiving an inadequate level of care. These laws mandate specific state actors to report signs that a child might be suffering abuse or neglect.

The laws further provide that once the report is made, a mandatory investigation must ensue, including appropriate follow up to protect the child from enduring further abuse and neglect. The professionals that are required to report under these laws are typically those with the greatest likelihood of observing children outside of the influence of their potential abusers or neglecters.[2] Typically,

[2] *See*, *e.g.*, W. Va. Code, § 49-6A-2 (1977) (establishing mandatory reporting for medical

these statutes impose reporting obligations on educators, care professionals, and other governmental employees such as law enforcement and social services employees.

In accordance with these laws, state actors must be educated to recognize signs of child abuse and neglect so that the reporting laws provide effective protection for this vulnerable population. *See* Child Abuse Prevention and Treatment Act, P.L. 93-247, §§ 2(b)(3), 4 (1974); https://www.govinfo.gov/content/pkg/STATUTE-88/pdf/STATUTE-88-Pg4.pdf. Failure to report suspected child abuse or neglect is generally defined as a misdemeanor offense, punishable by both jail time and monetary fines.[3] These federal and state level protections were in place prior to incidents of Christa's abuse and neglect which triggered the duty to report.

In 1974, the federal government passed the Child Abuse Prevention and Treatment Act ("CAPTA") to set national standards for the best practices to prevent child abuse and neglect. P.L. 93-247 (1974). CAPTA authorized allocations of funding and federal support to states to combat child abuse and neglect throughout the country. To access this funding, states must meet a number of requirements. First, states must establish mandatory child abuse reporting laws, including the

professionals, religious leaders, teachers, social workers and law enforcement personnel); N.C. Code, § 7A-518 (1979) ("Any person or institution who has cause to suspect that any juvenile is abused or neglected shall report the case of that juvenile to the Director of the Department of Social Services in the county where the juvenile resides or is found.").

[3] *See*, *e.g.*, W. Va. Code, § 49-6A-2 (1977); N.C. Code, § 14-316.1 (1979).

establishment of an investigative process to be followed for each documented report. Second, states must establish administrative procedures and agencies to effectively deal with and handle child abuse and neglect reports. Third, CAPTA establishes a framework for training and education of teachers and other professionals to assist them in identifying markers of abuse so they can fulfil their reporting obligations. States cannot access the funds provided under CAPTA unless they have educated and trained professionals to adequately respond to child abuse and neglect.

Pursuant to CAPTA, both West Virginia and North Carolina updated state legislation to require mandatory reporting of child abuse and neglect throughout Christa's childhood. These updated laws also set forth specific reporting and investigation requirements to prevent child abuse and neglect. Although legislation in West Virginia and North Carolina pre-dated CAPTA, both states updated their mandatory reporting laws within a few years of CAPTA's passage and ratification. *See* W. Va. Code § 49-6A-2 (1970), N.C. Code, § 110-118 (1971), W. Va. Code § 49-6A-2 (1977), N.C. Code, § 7A-518 (1979).

When Christa Was Six Years Old, State Actors Failed to Report a Well-Recognized Sign of Sexual Abuse.

West Virginia had an obligation to report suspected child abuse when Christa was in first grade and her public school teacher noticed her drawing a penis in class.[4] Post-Conviction Testimony of Carrie Ross, p. 193. Sexually inappropriate

[4] This was not the only time school officials were alerted that Christa had access to age-inappropriate sexual information and/or materials. In the 3rd grade, Christa brought pornography to school. Age-inappropriate engagement with sexually explicit materials is a known sign of potential child abuse.

artwork is a well-known indicator of sexual abuse in children.[5] Under applicable West Virginia law at the time of the incident, Christa's public school teacher had a legal obligation to report the noted signs to the head of the school, who then had a legal obligation to immediately report the suspected abuse to the local department of the state's child welfare system. *See* W. Va. Code §§ 49-6A-2,[6] 49-6A-5[7] (1977).

When this happened, like in the first grade, Christa's teachers called her parents but failed to report the instance to the appropriate child welfare agency as required by the state's mandatory child abuse reporting law. Dr. McCoy Social History Synopsis, p. 26.

[5] *See* Robert A. Hibbard et al., *Genitalia in Children's Drawings: An Association With Sexual Abuse*, 79 PEDIATRICS 129, 133 (1987) (finding that children who had suffered sexual abuse were 6.8 times more likely to draw genitalia in their artwork than children who had not endured abuse); Richard J. Riordan & Anne C. Verdel, *Evidence of Sexual Abuse in Children's Art Products*, 39 SCHOOL COUNS. 116, 120 (1991) (noting that sexually abused children often include genitalia or other sexually graphic imagery in their artwork which may be overemphasized, while non-abused children generally do not include these images); Patricia M. Sadowski & Larry C. Loesch, *Using Children's Drawings to Detect Potential Child Sexual Abuse*, 28 ELEMENTARY SCH. GUIDANCE & COUNSELING 115, 119–21 (1993) (showing focus on and inclusion of sexual body parts in children's drawings is an indicator of sexual abuse). In fact, it is common practice in many educational settings to use artwork as a screening tool for suspected abuse when someone suspects child abuse or neglect in homes as a practice to confirm an educator's suspicions that a child might have experienced child abuse before taking further action. *See* Riordan & Verdel at 117–20.

[6] This law establishes the following mandatory reporting duty: "When any medical, dental or mental health professional, christian science practitioner, religious healer, school-teacher or other school personnel, social service worker, child care or foster care worker, peace officer or law-enforcement official has reasonable cause to suspect that a child is neglected or abused or observes the child being subjected to conditions that are likely to result in abuse or neglect, such person shall immediately report the circumstances or cause a report to be made to the state department child protective service: Provided, That any person required to report under this article who is a member of the staff of a public or private institution, school, facility or agency shall immediately notify the person in charge of such institution, school, facility or agency or a designated agent thereof, who shall report or cause a report to be made. However, nothing in this article is intended to prevent individuals from reporting on their own behalf." W. Va. Code § 49-6A-2 (1977).

[7] "Reports of child neglect or abuse pursuant to this article shall be made immediately by telephone to the local state department child protective service agency and shall be followed by a written report within forty-eight hours if so requested by the receiving agency. The state department may establish and maintain a twenty-four hour, seven-day- a-week toll-free telephone number to receive such calls reporting suspected or known child abuse or neglect. A copy of any report of serious injury shall be made available immediately to the appropriate law-enforcement agency, the prosecuting attorney or the coroner or medical examiner's office. All reports under this article shall be confidential, and unless there are pending proceedings with regard thereto, shall be destroyed two years following their preparation. Reports of known or suspected institutional child abuse or neglect shall be made and

Instead of reporting, as mandated by law, the teachers called in Christa's mother, Carissa, to talk about what had happened. Post-Conviction Testimony of Carrie Ross, p. 193. There was no attempt to connect Christa to services or adequate care. *Id.* There was no investigation into what might have prompted the age-inappropriate sexual knowledge or behavior. *Id.* Had there been a report, it would have triggered a "thorough investigation" by child protective services within 24 hours. The investigation would have assessed Christa's living conditions and made recommendations about the need for protective services to ensure her safety. W. Va. Code, § 49-6A-9 (1977).[8] Investigators would have been required to do a home visit, where they would have discovered the neglectful conditions Christa grew up in and the physical abuse she endured from her father and maternal grandmother. Since no report was made, the investigation never happened. Instead of receiving counseling and support, Christa was left to endure more violence.

This failure on behalf of the State of West Virginia is the exact kind of failure that Judge Martin bemoans.

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received as all other reports made pursuant to this article." W. Va. Code § 49-6A-5 (1977).

[8] The law provides, in relevant part: "Except in cases involving institutional abuse or cases in which police investigation also appears appropriate, the child protective service shall be the sole public agency responsible for receiving, investigating or arranging for investigation and coordinating the investigation of all reports of child abuse or neglect. In accordance with the local plan for child protective services, it shall provide protective services to prevent further abuse or neglect of children and provide for or arrange for and coordinate and monitor the provision of those services necessary to ensure the safety of children.… Each local child protective service shall… [w]ithin twenty-four hours of notification of suspected child abuse or neglect, commence or cause to be commenced a thorough investigation of the report and the child's environment." W. Va. Code, § 49-6A-9 (1977).

After Eleven-Year-Old Christa Reported Her Rape to a School Official, State Actors Failed to Report the Incident to Social Services.

Both North Carolina and West Virginia authorities had a mandatory obligation to report suspected and known child abuse and neglect when Christa was in the third grade. *See* N.C. Code § 7A-518 (1979)[9]; W. Va. Code § 49-6A-2 (1977).[10] When she was eleven years old, Christa was raped outside of her home in North Carolina by Claude Davis, a man who lived in the same neighborhood as Christa. The following day, Christa told her teacher's aide what had happened. The teacher's aide, subject to the North Carolina mandatory reporting law, should have immediately reported the sexual abuse to the local Department of Social Services office, including details about Christa, her caregivers, where she lived, and the details about the incident she disclosed to them. *See* N.C. Code, § 7A-518 (1979). Instead, the aide took Christa to a counselor and the school called in Carissa and encouraged her to report the incident to the police. No further action was taken by

[9] N.C. Code § 7A-518 provides: "Any person or institution who has cause to suspect that any juvenile is abused or neglected shall report the case of that juvenile to the Director of the Department of Social Services in the county where the juvenile resides or is found. The report may be made orally, by telephone, or in writing. The report shall include information as is known to the person making it including the name and address of the juvenile; the name and address of the juvenile's parent, guardian, or caretaker; the age of the juvenile; the present whereabouts of the juvenile if not at the home address; the nature and extent of any injury or condition resulting from abuse or neglect and any other information which the person making the report believes might be helpful in establishing the need for protective services or court intervention. If the report is made orally or by telephone, the person making the report shall give his name, address, and telephone number. Refusal of the person making the report to give his name shall not preclude the Department's investigation of the alleged abuse or neglect."

[10] *See supra* n. 7.

the school to meet the obligations to report the sexual abuse Christa had endured. This failure to report was punishable as a misdemeanor offense. N.C. Code, § 14-316.1 (1979).[11] Had a report been made, a prompt and thorough Department of Social Services investigation would have followed. N.C. Code, § 7A-519 (1979).[12] This investigation would have explored the circumstances of her sexual assault and the conditions that allowed it to happen. The investigation could have connected Christa with counseling and other protective services tailored to ensure she was getting the quality of care and support she needed as a young child.[13] As Tennessee legislators have recognized, sexual abuse can have a profound and permanent impact on young children and—in the absence of adequate protection, care, and

[11] The law provides, in relevant part: "Any person over 16 years of age who knowingly or willfully causes, encourages, or aids any juvenile within the jurisdiction of the court to be in a place or condition, or to commit an act whereby the juvenile could be adjudicated delinquent, undisciplined, abused, or neglected as defined by G.S. 7A-507 shall be guilty of a misdemeanor."

[12] The law mandates, in relevant part: "When a report of abuse or neglect is received, the Director of the Department of Social Services shall make a prompt and thorough investigation in order to ascertain the facts of the case, the extent of the abuse or neglect, and the risk of harm to the juvenile, in order to determine whether protective services should be provided or the complaint filed as a petition. The investigation and evaluation shall include a visit to the place where the juvenile resides. All information received by the Department of Social Services shall be held in strictest confidence by the Department. If the investigation reveals abuse or neglect, the Director shall decide whether immediate removal of the juvenile or any other juveniles in the home is necessary for their protection. If immediate removal does not seem necessary, the Director shall immediately provide or arrange for protective services. If the parent or other caretaker refuses to accept the protective services provided or arranged by the Director, the Director shall sign a complaint seeking to invoke the jurisdiction of the court for the protection of the juvenile or juveniles…." N.C. Code, § 5A-519 (1979).

[13] *See* N.C. Code, § 7A-719 (1979) ("The Director of the Department of Social Services in each county of the State shall establish protective services for juveniles alleged to be abused, neglected, or dependent. Protective services shall include the investigation and screening of complaints, casework or other counseling services to parents or other caretakers as provided by the director to help the parents or other caretakers and the court to prevent abuse or neglect, to improve the quality of child care, to be more adequate parents or caretakers, and to preserve and stabilize family life.").

intervention—can have enduring consequences.[14]

Shortly after she was raped, Christa was sent back to live with her physically abusive father, Glenn Pike, in West Virginia.[15] Within six months of the move, she failed the third grade despite scoring in the top tenth percentile on nationwide scholastic achievement testing. Dr. McCoy Social History Synopsis, p. 37–38. School records indicate Christa was depressed and withdrawn from her education, a marked difference from her usual behavior in school and an indication that something was happening at home. *Id*. Poor academic performance, lack of interest, concentration problems, and mood changes indicating developing mood disorders are all well-documented indicia of child abuse, trauma, and neglect in girls.[16]

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[14] *See* C. BAGLEY & K. KING, CHILD SEXUAL ABUSE: THE SEARCH FOR HEALING 2–24, 111–112 (1990); FINKELHOR & BROWNE, ASSESSING THE LONG-TERM IMPACT OF CHILD SEXUAL ABUSE: A REVIEW AND CONCEPTUALIZATION IN HANDBOOK ON SEXUAL ABUSE OF CHILDREN 55–60 (L. Walker ed. 1988). As the U.S. Supreme Court has observed, "[w]e cannot dismiss the years of long anguish that must be endured by the victim of child rape." *Kennedy v. Louisiana*, 554 U.S. 407, 435 (2008) (acknowledging the harm of child rape but finding the death penalty to be disproportionate to the offense). *See also id*. at 435 (Alito, J., dissenting) (child rape is "grossly intrusive in the lives of children and is harmful to their normal psychological, emotional and sexual development in ways in which no just or humane society can tolerate.")

[15] Glenn Pike testified to routinely physically "disciplining" Christa with a belt when he perceived her as not following the rules or listening to him. These beatings could happen as many as five or six times in one day and could also break the skin. Christa still has scars on her back from a particularly brutal "discipline" session. *See* Post-Conviction Testimony of Dr. Jonathan Pincus, p. 50–53.

[16] *See e.g.*, Elizabeth T.C. Lippard & Charles B. Nemeroff, *The Devastating Clinical Consequences of Child Abuse and Neglect: Increased Disease Vulnerability and Poor Treatment Response in Mood Disorders*, 177 Am. J. Psychiatry 20, 20–30 (2020) (highlighting the ways in which mood disorders can develop in children with child abuse and neglect histories, including the ways in which pervasive and continuous abuse and neglect can increase the severity of the mood disorders,); Abdulaziz Al Odhayani et al., *Behavioural Consequences of Child Abuse*, 59 CAN FAM PHYSICIAN 831, 831–36 (2013) (discussing how child abuse and neglect can cause "poor academic performance, a lack of interest in school, poor concentration during classes, and limited friendships."); Adam Zolotor et al., *School Performance in a Longitudinal Cohort of Children at Risk of Maltreatment*, 3 Maternal & Child Health J. 19, 23–27 (1999) (documenting poor academic performance and adaptive functioning in a cohort of children who experienced maltreatment versus a cohort which did not).

Instead of reporting these signs of child abuse, Christa's teachers did nothing. Had they reported Christa's distress to child protective services, the agency would have commenced a thorough investigation into the suspected abuse and could have intervened to protect Christa from the continuing violence and neglect she endured. W. Va. Code § 49-6A-9 (1977). Instead, there was no investigation, protection, or follow-up. Christa was shuttled back to her mother's house in North Carolina, where she endured further physical and sexual abuse at the hands of her mother's boyfriends and other caregivers.

School Teachers Failed to Report Christa's Attempted Suicide and Poor School Performance.

In October 1988, Christa's beloved grandmother, Delfa Pike, died of cancer. Up until that point in Christa's life, Delfa was the only adult who had shown Christa consistent care or attention. Post-Conviction Testimony of Alicia Wills, p. 277. Christa cried for days and could not be comforted. McCoy Social History, p. 18. In the ensuing months was shuttled back and forth between her parents' houses, where she faced physical abuse from her father and her mother's most recent husband, Danny Thompson. *Id.*, p. 28. Within months of Delfa's death, Christa attempted suicide at school in North Carolina.[17] Clinical Interviews with Christa Pike, p. 7. School teachers called Christa's brother-in-law to come pick her up and encouraged

[17] This is not the only time Christa attempted suicide throughout her childhood. As a response to her rape at age eleven and the lack of familial support and care in the aftermath of the rape, Christa attempted to kill herself by overdosing on Tylenol. Post-Conviction Testimony of Carissa Hansen, p. 446. Christa attempted suicide again in the seventh grade with a friend Brandie while in the midst of the physical and sexual violence perpetrated by Steve Kyaw. Clinical Interviews with Christa Pike, p. 7–8, 17.

him to immediately take Christa to the hospital. *Id.* The school employees failed to recognize the suicide attempt as a clear indication of the trauma Christa was experiencing.[18] Suicidal ideation and attempted suicide are both strongly associated with child abuse.[19] Girls who experience abuse are three times more likely than girls who do not have abuse histories to have suicidal thoughts and plans.[20]

Later that year, Christa failed the seventh grade, despite high scores on standardized tests. This was a clear sign of trouble at home. Under North Carolina law, the school's employees had a mandatory obligation to report this incident under the mandatory child abuse and neglect reporting laws. N.C. Code, § 7A-518 (1979). Implicit in the duty to report suspected abuse and neglect is the ability to recognize the signs and symptoms of child abuse, including suicidality as a known sign. If the school employees had reported the sign of abuse, the Department of Social Services would have opened a "prompt and thorough investigation" including an assessment

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[18] It is around this time that Christa's truant and runaway behavior began. Dr. McCoy Social History Synopsis, p. 47. This was another known sign of child abuse that school officials should have recognized as warranting a report of suspected child abuse and neglect. *See* Richard Falmuro et al., *Child Maltreatment Histories Among Runaway and Delinquent Children*, 29 CLINICAL PEDIATRICS 713, 713–14 (1990).

[19] *See* Michael S. Martin et al., *Child abuse and the prevalence of suicide attempts among those reporting suicidal ideation*, 51 SOC. PSYCH. & PSYCH. EPIDEMIOLOGY 1477, 1477–84 (2016) (finding individuals with child abuse experiences are at higher risks of experiencing suicidal ideation and attempting suicide than individuals without abuse histories); Angela Plunkett et al., *Suicide Risk Following Child Sexual Abuse*, 1 Ambulatory Pediatrics 262, 262–66 (2001) (showing that experiencing child sexual abuse can increase the risk that a child will attempt or commit suicide during their childhood and adolescence). Child abuse experiences have been linked with a 177% increase in likelihood that an individual will act on suicidal ideation. Martin et al., at 1477.

[20] Graham Martin et al., *Sexual abuse and suicidality: gender differences in a large community sample of adolescents*, 28 CHILD ABUSE & NEGLECT 491, 499 (2004).

of the risk of future harm to the child, a home visit, and a connection to protective services if deemed necessary. N.C. Code, § 7A-519 (1979). An investigation would have exposed the lack of adequate caregivers in Christa's life at the time, made more notable by the death of Delfa Pike. It would have shown the physical abuse from Glenn Pike and Danny Thompson. It would also have shown Christa's need for mental health counseling and other protective services. Instead, no action was taken, and Christa was left in the same environment she had always known, where violence and lack of care were the norm.

State Actors Failed to Adequately Intervene or Follow Up on Information that Christa Was Consistently Neglected by Her Mother When She was Thirteen Years Old.

In 1991, Steve Kyaw, Christa's mother's boyfriend who lived in their home, physically and sexually abused Christa. During these beatings, Kyaw would hit Christa with a belt and spank her, sometimes sexually assaulting her as well. Clinical Interviews with Christa Pike, p. 6. On one occasion, Kyaw punched Christa in the face after an attempted sexual assault that led to child protective services involvement, including the only real documented investigation into any of the known abuse in Christa's life. Mediation Notes Relating to 1991 Incident Between Steve Kyaw and Christa Pike, p. 347–55; Post-Conviction Testimony of Carol Goehring, p. 269–71.

North Carolina's Department of Social Services opened an investigation into Kyaw's abuse and learned of her mother's complicity in her abuse. In response, the

state placed her in Sheaffer House, a short-term, emergency out-of-home placement in North Carolina. The treatment worker in charge of Christa's case, Kerry Sherrill, documented multiple concerns about Carissa's neglect, specifically noting Carissa's disengagement from the Department of Social Services' family counseling and parenting classes that were required as part of Christa's placement at Sheaffer House.[21] Despite knowing that Carissa "probably hadn't put the things in place she needed for [Christa's] home placement to be successful" after Christa's departure from Sheaffer House, Kerry Sherrill closed the case after Steve Kyaw moved out of the house. Post-Conviction Testimony of Kerry Sherrill, p. 293. Christa was sent home from Sheaffer House to the same neglect she had always experienced from her mother. Without any follow up from the state, Christa's mental illness began to spiral. The state was aware of Christa's ongoing need for protective services, as Carissa called Sherrill for help locating Christa when she ran away. *Id.*, p. 296–97. Yet, rather than providing her care and support, the state punished her. During one of her runaway attempts, Christa stole food and was adjudicated "delinquent." When she continued to run away, the state criminalized her by sending her to a home for "delinquents."

It was clear to Matthew Martin, her juvenile attorney, that this did not meet Christa's needs. Judge Martin would later say:

She should have had services wrapped around her ... when she came to

[21] Christa spent three months at Sheaffer House in 1991. Sheaffer House Records, p. 357–500. Christa was returned home when Steve moved out of the house. Post-Conviction Testimony of Kerry Sherrill, p. 293. She cried when she was required to leave the stability and structure of Sheaffer House. Clinical Interviews with Christa Pike, p. 28.

> the attention of the Department of Social Services in Durham, she was a child who really should have been taken into [foster] care [and removed from the home] as a dependent child, and instead we adjudicated her as a delinquent. That was the wrong result … we failed her.

Conclusion

North Carolina and West Virginia failed to protect Christa. As Judge Martin has put it, "North Carolina's failures became Tennessee's problem." Matthew Martin Clemency Letter. By failing to protect, prevent, investigate, and provide redress for the abuse, violence, and neglect Christa experienced throughout her childhood, North Carolina and West Virginia became complicit in the conditions of her childhood. Christa, a young girl, had no means or resources to extract herself and provide for her own well-being. Had these states met even the minimal requirements under their own laws, it is likely that Christa would have received the protection and care that she deserved—and Colleen Slemmer would still be alive today.

Christa Pike Was Represented by Unethical and Inexperienced Lawyers Who Failed to Defend Her

Just one week after her 20th birthday, Christa Gail Pike was put on trial for her life. One of her appointed lawyers was facing ethics charges, and the other had never defended a death penalty case. Their lack of preparation was apparent from the start. Although they knew she had been sexually abused and raped as a child, they failed to present this evidence—and the jury therefore had no opportunity to consider it. They hired an expert who misdiagnosed her with a personality disorder and overlooked her symptoms of bipolar disorder and Post-Traumatic Stress Disorder. They didn't present any positive information about her even though that information was readily available from multiple sources. They failed even to argue that Christa deserved leniency because of her youth. As a result, the jury reached its sentencing decision without the benefit of mitigating evidence that the Governor now has the opportunity to consider.

The Trial for Christa's Life

Christa's trial took place just fourteen months after she was charged with first-degree murder. She was tried in Knoxville, Tennessee, because the judge denied her Motion for Change of Venue. Even though the crime had been highly sensationalized in the local media. The attorneys who were appointed to represent Christa were poorly qualified and ill-prepared for a sensationalized trial that demanded the presentation of a compelling case in mitigation to undo the negative publicity that

featured out-of-control teenagers who had dabbled in devil worship, beat the victim to death, and took a piece of the victim's skull as a souvenir.[1]

William Talman and Julie Martin Rice were appointed to represent Christa even though neither had ever tried a death penalty case. Rice (only four years out of law school) was appointed less than two months before the beginning of the trial on condition that she would not request any continuances due to a lack of time for her to prepare. Prior to Christa's trial, Rice had never handled a murder case, much less one where the defendant's life was at stake. Despite this inexperience, Rice would be put in charge of presenting all the mitigation witnesses in the penalty phase, as well as the closing argument that could save Christa's life.

The appointment of William Talman as lead counsel was even more problematic. At the time, Talman was facing legal difficulties of his own. As Christa's trial judge later acknowledged, "we all knew Talman had his own problems." Talman was under investigation by several law enforcement agencies for overbilling the state's Indigent Defense Fund—a Class B felony. The investigation centered on the ethics and honesty of Talman's billing practices. Newspapers revealed that Talman repeatedly billed over 24 hours per day and apparently manipulated time entries to avoid detection. Talman eventually pleaded guilty to two professional ethics charges, and the Tennessee Supreme Court imposed a six-month suspended revocation of

[1] *See, e.g.,* January 20, 1995, Knoxville News-Sentinel headlined "Alleged killers held 'soul captive,'" describing "police sources" claiming that Ms. Pike and her codefendants took a skull fragment "to trap the victim's soul in her body...." The article refers to Satanist beliefs and devil worship, which were not motives in the offense, but nonetheless colored the media coverage and the prosecution's presentation at trial.

Talman's license. Although Talman later testified that he believed he would never be criminally prosecuted because of the settlement on professional sanctions, he was never officially released from criminal liability and could have faced charges for theft over $60,000, a Class B felony with a minimum sentencing range of eight to twelve years. And at the time of Christa's trial, these professional sanctions had not yet been formally imposed. A cloud hung over his head throughout his representation.

Just before the trial was to begin, Christa faced a decision that could have saved her life: The State had offered her the opportunity to plead guilty in exchange for a sentence of life without parole. According to Talman, the offer "came like a day or so before trial. It was for life without parole." Naturally, a young and immature girl was loathe to accept a deal that would mean she would spend the rest of her life in prison. Talman would later say that he regretted he did not push her more: "my greatest regret in this case, was my inability to convince Christa to accept a plea agreement of life without the possibility of parole. I continue to believe that had we had more time than just a couple of days, and perhaps an opportunity to meet with her together with her mother or other family members, all of whom lived out of State, may have had a different outcome had we been able to convince her that her failure to take the plea offer could actually result in her being killed by the State." (07.24.26 William Talman Clemency Letter). According to Christa, Talman had told her there was no way she would be sentenced to death. Instead of talking Christa into taking the deal, Talman proceeded to trial for which he was not prepared.

At the Guilt Phase, Christa's Lawyers Failed to Highlight Tadaryl Shipp's Prominent Role in the Crime and Presented Experts who Misdiagnosed Christa.

During the guilt-innocence phase of Christa's trial, the State's attorneys highlighted the sensational facts of the crime, including allegations of satanic involvement (a "Satanic Bible" found in co-defendant Tadaryl Shipp's room was admitted as an exhibit]). The State also orchestrated a dramatic moment where the medical examiner inserted the missing piece of Colleen's Slemmer's skull into its missing place, as if she were completing a jigsaw puzzle. Much of the evidence of Christa's involvement in the crime came in through her own taped confession, taken after her arrest, in which she tearfully attempted to take responsibility for all aspects of the crime and cover for her co-defendants. The State's argument that Christa was the ringleader went unchallenged by her defense attorneys. This fact surprised Chris Coffey, attorney for her co-defendant, Tadaryl Shipp: "I would have expected Christa's defense attorneys to emphasize Tadaryl's role in the crime and blame him, but they did not. When I represented Tadaryl in his 1997 trial, the defense I presented was to shift as much blame as possible to Christa." (07.15.24 Chris Coffey Clemency Letter).

In feeble rebuttal of the State's case, the defense tried to present a theory that Christa was guilty of reckless homicide, not first-degree murder. The defense offered the testimony of clinical psychologist, Dr. Eric Engum, to testify about Pike's mental state "along [the] line[s]" of diminished capacity. Dr. Engum told the jury Pike suffers from borderline personality disorder. He reached this diagnosis after cursory testing

and without any analysis of Christa's traumatic childhood. Postconviction experts and now, Dr. Bethany Brand, have raised serious questions about the validity of this diagnosis. Engum's misdiagnosis could well have been the result of gender bias because women with bipolar disorder are often misdiagnosed: https://stayhealthymed.com/blog/bipolar-disorder-signs-in-women/. Dr. Engum never discussed Christa's social history to explain the possible origins of any psychological disorder and relied almost exclusively on his impersonal testing. But he did tell her jury that she sought recognition and attention for what she had done, a misguided theme Talman and Rice repeated throughout her trial.

The defense also called William Bernet, Medical Director of the Psychiatric Hospital at Vanderbilt University, an expert in analyzing satanic rituals. Bernet's testimony served only to emphasize the State's case about a satanic link, even though he was ostensibly called to rebut it. Dr. Bernet testified that due to the "mutilation of [the] body," there are "satanic elements in this crime." But he did not think that the "whole picture fits the pattern of a satanic ceremony, or a satanic sacrifice, or a planned satanic sacrifice." Despite this opinion, he added to the jury's consideration of a possible satanic angle by discussing the same Satanic Bible (which had no connection to Christa, as it was owned by her codefendant) presented by the State. When defense counsel asked Dr. Bernet if he had an opinion as to whether the crime was premeditated, Dr. Bernet stated he had no such opinion because he never examined Christa.

In closing argument, defense counsel argued the testimony of Drs. Engum and Bernet established that Ms. Pike was guilty of reckless homicide. The jury disagreed and convicted Ms. Pike of first degree, premeditated murder.

Christa's Trial Lawyers Spent Little Time Arguing that Christa's Life Should be Spared and Failed to Present the Most Powerful Mitigating Evidence to the Jury.

As soon as the jury returned its guilty verdict, the trial court called counsel into chambers to ask if they were ready to present evidence in the penalty phase. At this point, Talman told the court and the prosecution that he intended to present evidence from his mitigation specialist, Dr. Diana McCoy, who was also a clinical psychologist. Under the relaxed rules of evidence for the penalty phase of a capital trial, such a presentation by a mitigation specialist was possible. Talman turned over several volumes containing Dr. McCoy's "Social History" of Christa's life thus far. These were binders Dr. McCoy had prepared that documented her interviews with Christa's family members, teachers, friends and other people who knew her. Although Dr. McCoy had recommended to Talman that many of these witnesses be called to testify in person, he had decided it would all come in through Dr. McCoy, who was ready to present that testimony.

The prosecution was angry about receiving so much information at the last minute. The prosecution also complained that everything Dr. McCoy was going to testify to was hearsay and inadmissible because she had no expert opinion to offer. Talman admitted he did not know what Dr. McCoy's opinion was. He was unprepared to offer any legal explanation for the admissibility of McCoy's testimony even though

experts like Dr. McCoy testify routinely in capital cases and he should have known the law that permitted such testimony. In the end, the defense failed to call Dr. McCoy to testify, undoing any legal rationale for the defense to turn over her extensive investigation materials. Nonetheless, the defense turned over all her background investigation for the prosecution to exploit.

Even though the penalty phase was where her case would be won or lost,[2] trial counsel's mitigation presentation was short, limited in scope, and disjointed. The defense presentation to persuade the jury to spare Christa's life lasted about an hour[3] and the totality of the defense testimony takes up less than sixty pages of transcript. The defense only called the family members who happened to be present in the courtroom that day: Christa's mother, her father, and her maternal aunt, Carrie Ross. Rice conducted the direct examination of all these witnesses and had to be helped by the judge who suggested she "needed to lay a foundation" on several occasions. The witnesses were not allowed to express opinions about the family's history of substance abuse and troubled mental health because the judge found they were "not qualified." On the other hand, the State was able to use these witnesses' interviews by Dr. McCoy (turned over the day before) to bring out negative information the witnesses had said about Christa. Rice would later agree that the prosecution "ripped up" her witnesses with this information.[4] This was summarized by the Tennessee Supreme Court:

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[2] Talman acknowledged this in post-conviction testimony: "I don't think there was any question it was a penalty phase case." Vol. 4, PC Hearing, p. 324 (April 8, 2008).

[3] *See* Defense Penalty Phase Closing Arguments (March 30, 1996), p. 2560 ("How do you convey a lifetime of rejection and abuse in an hour or so?").

[4] *See* Vol. 1., PC Hearing, p. 79–80 (April 7, 2008).

"Through cross-examination, the State elicited testimony from the defendant's witnesses that she had been difficult, manipulative, and dishonest from an early age, that she previously had threatened an individual with a butcher knife, and that she had been accused of sexually molesting her half-sister."[5] *State v. Pike*, 978 S.W.2d 904, 918 (Tenn. 1998). All of which is a gross distortion of the contents of Dr. McCoy's report which detailed Christa's abuse and neglect at the hands of her parents and her history of sexual assault, including sexual assaults by Steve Kyaw, the individual referenced.

Counsel's sentencing phase closing argument, presented by Rice, was also brief. The defense did not argue the jury should consider that Christa's youth was a statutory mitigating factor that should weigh heavily in their consideration, or that the jury might spare her life based on her lack of significant criminal record. In fact, her youth was never mentioned. Nor did counsel argue that mental illness played a role in this offense and should weigh against the death penalty. Christa's defense said nothing about her tragic history of sexual abuse and rape since they had presented no such evidence—even though they knew about the sexual violence she suffered. The defense did not try to get the jury to consider that neither of Christa's co-defendants were facing the death penalty despite their participation in the crime. Rather, counsel argued that Christa enjoyed the attention this case brought. The defense proposed a life sentence as a more severe punishment, reasoning to the jury that Christa would receive less attention than if the jury imposed death. Counsel was inexplicably

[5] The post-conviction court specifically found that Pike had never molested her half-sister. Order Denying Post-Conviction Relief, p. 27 n.7.

arguing that the jury should inflict the harshest punishment. The jury responded by imposing the harshest punishment under the law and sentenced Christa to death.[6]

Had Christa been slightly younger at the time of the crime, like her codefendant Shipp, she would have been ineligible for the death penalty. Even though he failed to argue this at trial, Talman has recently recognized:

> Christa was 18 at the time of the crime, and only a few months older than Tadaryl, who was only 17, and as such could not be sentenced to death. It is my understanding that Mr. Shipp has already been considered for parole, and Christa is facing execution in the next few weeks. I believe they were both equally responsible for Ms. Slemmer's unfortunate death, but the fact that Christa was a few months older resulted in a dramatic difference in their respective sentences.

William Talman Clemency Letter, p. 2 (July 24, 2026). In addition, her severe mental illness would have disqualified her from the death penalty if she had been convicted in Kentucky or Ohio. Finally, if her age had been considered in conjunction with evidence she suffered from a long history of brutal sexual abuse, severe mental illness and the full extent of her parents' neglect and abuse, it is very unlikely the jury would have sentenced her to death.

Defense Counsel Failed to Present Available Evidence About Christa's Tragic Childhood and Extensive History of Child Rape and Sexual Abuse.

This jury's death sentence was far from inevitable. Christa Pike's jury was deprived of considering a wealth of mitigating evidence that was readily available. If this evidence had been presented to the jury by competent counsel, there is a very

[6] *See* https://www.wbir.com/video/news/local/march-30-1996-christapike- is-sentenced-to-death/51-bc611a44-2e79-4084-96a6-f1f11c9f9fc4 (50 second video from Knoxville television station reporting the verdict). Christa was the last person sentenced to death in Tennessee for a crime committed at age 18.

good chance that at least one juror would have voted for a life sentence. In Talman's own assessment during his post-conviction testimony, "people don't know the whole side of Christa."[7] This was unfortunately very true for the members of her jury.

Although Christa's mother was called to testify, the jury never heard about the instability caused by the fact that she was married five times during Christa's childhood and that she had numerous affairs with other men as well as live-in boyfriends during that time. The jury also never heard that these boyfriends sexually and physically abused Christa.

While Christa's father testified at trial that he was a strict disciplinarian, the jury did not hear that her father used to beat her with a belt while Christa was bent over, naked from the waist down. This was later confirmed by Dr. Jonathan Pincus, who physically examined Christa during post-conviction proceedings. Dr. Pincus identified the physical scars left by the beatings that were still visible on the backside of her body.

The sentencing jury never knew that Christa was shuffled back and forth between her parents to such an extent that she failed school in the third and seventh grades despite the fact that Dr. Engum had testified that she was "very intelligent."[8] The number of schools she actually attended while moving back and forth is startling. *See* McCoy's Social History, "Educational Data."[9] She had to go to summer school to

[7] *See* Vol. 5, PC Hearing April 2008, p. 411.

[8] Early school records indicate that Christa did very well on standardized tests, scoring in the top 10% nationwide in academic achievement testing although her actual grades did not reflect her potential.

[9] This is available in the supporting documents in Failure of NC and WV Systems, document 3, p. 37–38.

avoid repeating the sixth grade. Dr. McCoy spoke with many professionals who recognized Christa's potential to do well in school and succeed. However, this was undermined by her parents' disinterest and lack of stability and consistency.

From the testimony elicited at trial, the jury would not have known that Christa's mother left West Virginia after Christa's parents divorced for the second time to live in North Carolina with a trucker she met on CB radio. After this, her parents shuffled Christa back and forth between West Virginia and North Carolina two to three times a year. At one point, her father dropped Christa and her suitcases off on her mother's doorstep and left her even though her mother was not home. Each parent would threaten the other by saying they would send Christa to live there. At this point, both parents were saying that they could not handle her. Although the jury repeatedly heard, on cross-examination by the State, that Christa was "out of control," no testimony was offered to show that Christa was a victim of child sexual abuse who was struggling to manage her trauma, depression, and emerging mental illness.

Although the jury heard that Christa had threatened one of her mother's live-in boyfriends with a butcher knife, it never knew that the boyfriend in question, Steve Kyaw, sexually assaulted Christa when she was about twelve years old. At one point, Kyaw hit her in the face with a belt and she grabbed a butcher knife to defend herself. Kyaw was arrested. This was the actual story behind the "butcher knife" incident elicited and distorted by the prosecution during the trial.[10] Christa's lawyers failed

[10] By exploiting information obtained through Dr. McCoy's background investigation, prosecutors got Christa's mother to admit that Christa had chased one of her boyfriends with a butcher knife without

to correct this false narrative because they were so unprepared. Furthermore, the jury never knew that social services became involved with Christa and her mother because of this incident. Far from viewing this incident as the child's fault, social services focused on the unsafe environment in which Christa was being raised and attempted to intervene. The jury had no way of knowing that her caseworker, Kerry Clement Sherrill, was willing to testify about her efforts to help Christa that were often hindered by Christa's mother.

The jury also never knew that Ms. Sherrill kept a picture of Christa because she kept pictures of the children who touched her the most.[11] Ms. Sherrill met Christa as a middle school student who was bright, respectful, warm, easy to get along with, and who enjoyed the attention of adults. Dr. McCoy had recommended that Ms. Sherrill be called as a witness. However, this potentially powerful mitigation evidence provided by a social worker was twisted by the State to prove Christa was prone to violence. Christa's attorneys did nothing to counteract that impression. They made no objection or attempt to call Ms. Sherrill who was not present at Christa's trial because Mr. Talman failed to subpoena her.

The jury that sentenced her to death never knew that Christa had at least three suicide attempts as a child. This was not a child who was simply out of control and blowing chances as the prosecution argued in cross-examination. This was a

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giving any context whatsoever for the incident. The defense did nothing to remedy the false narrative of an unprovoked attack the State conveyed to the jury. In post-conviction, Christa's mother testified that it was a butter knife, not a butcher knife.

[11] Kerry Sherill's post-conviction testimony s is available in the supporting documents in Failure of NC and WV Systems, document 6.

neglected child who was dealing with the ongoing consequences of child sexual abuse and rape—without the support she desperately needed. But the jury never learned that Christa had been the victim of repeated rape and sexual abuses during her childhood. These problems were compounded because her mother—who was herself involved in a series of failed intimate relationships during Christa's youth—often did not believe Christa and minimized the abuse.

This failure to recognize the severity of both the abuse and the impact of its minimization even affected review by the post-conviction judge. She did not consider "traumatic life events such as having been raped"[12] to be of mitigating value because Christa's mother and sister did not "believe[] her when she had told them about these events." "This lack of credibility with her family members about such serious matters could have been a very negative factor for the jury as it related to [Christa's] credibility to other information which she had told other witnesses and experts."[13] Put another way, the post-conviction court wrongly refused to consider powerful, documented mitigation—a child rape victim was not believed or supported[14] by family—and turned it into aggravation.

[12] Order Denying Post-Conviction Relief, p. 89–90

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[13] Order Denying Post-Conviction Relief, p. 90.

[14] Disbelief of child rape victims is horrific but very common. Indeed, during the 113th General Assembly's consideration of HB 1663 / SB 1834, House Leader William Lamberth read into the record a constituent letter from someone who had studied and had knowledge of child rape. He read: "Generally, when children come forward, they are often ignored or not believed." *See* Legislative History, SB 1834, https://tnga.granicus.com/player/clip/30310?view_id=703&redirect=true at 5:00:22–25.

Effective counsel could have presented documented proof of this abuse that would have shown that Christa's parents' choice to turn a blind eye to repeated incidents of sexual abuse was one of the reasons Christa was so damaged. Christa's jury never knew any of this and only heard evidence to indicate that Christa was promiscuous—an outrageous mischaracterization of the oversexualization of child victims of sexual abuse.

The jury was never told that Christa spent a good deal of time in a juvenile facility as a teenager, and for the first time found some stability there. Although she did not like being there, she inwardly recognized that the stability and structure she received there was good for her. Staff believed she sabotaged herself to avoid having to go home and face the back-and-forth with her parents. The jury also never heard that staff at the facility grew to like Christa and recognized that she got in trouble to avoid being sent home. This same staff noticed that her mother rarely visited. They also knew that her father never visited. Thus, Christa's mother and father could not have given any information to the jury about Christa's time in juvenile facilities since they were uninvolved in her life at that time.

Despite all of Christa's troubles, Dr. McCoy located a number of people who had been sufficiently impressed with Christa's positive attributes that they would have testified for her at her capital trial. Matthew Martin, a North Carolina attorney who represented her as a juvenile, remembered her as a sweet, bright, and inquisitive girl and was willing to testify at her capital trial. He was so struck by her that he went to visit her after she went to training school. Christa's jury never heard from

other witnesses, such as Matthew Martin, Peggy Hamlett, Rosemary Wilson, and Kerry Clement Sherrill who knew Christa during her later teens, through their work in juvenile services, and who had much favorable testimony to impart to the jury. There were also friends and teachers who liked Christa very much such as Orlando Powell and Marshall Muse who knew her and could have humanized her for the jury.

These witnesses could have described a troubled teenager who was starved for attention and who could be very loving, loyal and hardworking. This portrait of Christa was diametrically opposed to the one described by her abusive and neglectful parents. Mr. Talman conceded on post-conviction that he should have called the majority of these individuals. Yet, defense counsel had issued no subpoenas to any these potential witnesses so none of them were available to testify. These witnesses would have attested to Christa's redeeming qualities to show that her life was worth saving. In fact, Christa's jury heard almost nothing positive or redeeming about her.

The Governor Now Has the Opportunity to Review the Entirety of Mitigating Evidence that the Jury Never Saw.

When counsel's poorly-made plans for the penalty phase fell apart, her lawyers sought to justify and explain away their incompetence. But the unfortunate consequences of these failures fell onto young Christa Pike. With almost no mitigating evidence presented and the State furnished with abundant negative ammunition, the outcome of the trial was pre-ordained. Christa's jury would learn almost nothing about her history of physical and sexual abuse, mental illness and neglect. The jury reached their verdict to sentence her to death without argument about her age (a statutory mitigating circumstance), without evidence of her sexual

trauma, with misleading evidence about her behavior in response to abuse and neglect, and without any redeeming information that was available to make jurors conclude she was worth saving because she could be loving and engaging.

The jury did not hear from Glenda Blackwood, the 5th Grade teacher's assistant at Carrboro Elementary who Christa told about being raped by Claude Davis. Ms. Blackwood remembers Christa as a beautiful and sweet little girl. The jury did not hear from Marshall Muse, the educator at Swannanoa who made Christa his teaching assistant and trusted her with his class when he was away. The jury did not hear from Judge Matthew Martin, Christa's juvenile lawyer who saw her as a bright young girl full of potential who North Carolina failed to care for. The jury did not hear about the child sexual abuse and multiple rapes or the clear symptoms of Bipolar Disorder.

All that information is now available to Governor Lee, without limitation. Christa asks that he grant her the mercy that her circumstances warrant.

Christa's Death Sentence Is Disproportionate When Compared to Her Co-Defendants and Other 18 Year Olds.

Executing Christa Pike would be a disproportionate use of the State's ultimate punishment. Tennessee does not execute 18-year-old girls. Christa was sentenced to death in 1996 for the murder of Colleen Slemmer in January 1995, when Christa was 18 years old. If executed, Christa would be the only Tennessean in the modern era to be executed for actions committed at age 18. She would also be the first woman Tennessee has executed in over 200 years. Modern neuroscience has established that there is no difference between the brain of 18-year-old Christa and 17-year-old codefendant Tadaryl Shipp. Yet, Christa faces death by execution while Tadaryl faces the parole board.[1]

Tennessee Does Not Execute 18-Year-Old Offenders.

If Christa is executed, she would be the only person Tennessee has executed in the modern era (post-*Furman*, issued in 1972) who was 18 years old at the time of the offense. More than 3,100 people in Tennessee have been convicted of first-degree homicide.[2] Of those thousands, only *eight* were 18 years old at the time of

[1] Ms. Peterson received time served and six years' probation.

[2] The Office of the Post-Conviction Defender (OPCD) maintains a database of first-degree murder cases containing the Administrative Office of the Courts (AOC) Rule 12 and TDOC data, as well as data from criminal court files we have collected. The project manager responsible for overseeing the data collection and entry left the OPCD in December 2022; therefore, additional recent first-degree murder cases have yet to be entered, which will increase the actual number. *See* Affidavit of Alicia Gullo, at ¶5. The database does now include available information from a recent first degree murder disposition—that of Michael Cummins on August 16, 2023, who pled guilty to the murder of eight people—pending completion of a Rule 12 form and the addition of that data to the AOC online database. *Id.*, at ¶5.

offense and sentenced to death.[3] All seven male death sentences predated Christa's, and all have subsequently been vacated.[4]

Name	Age	Race	Gender	Offense Year
David Duncan	18	Black	Male	1981
Tony Bobo	18	Black	Male	1983
David Poe	18	White	Male	1986
Michael Dean Bush	18	White	Male	1988
Roosevelt Bigbee	18	Black	Male	1989
Derrick Johnson	18	Black	Male	1990
Frederick Sledge	18	Black	Male	1991
Christa Pike	18	White	Female	1995

Christa is the last 18-year-old offender to be sentenced to death in Tennessee.

In fact, the average age at time of offense of the sixteen offenders executed in Tennessee since 1961 is 29 years old:

Name	Date of Birth	Date of Offense	Date of Execution	Age
Robert Coe	04/15/1956	09/01/1979	04//19/2000	23
Sedley Alley	08/16/1955	07/12/1985	06/28/2006	29
Phillip Workman	06/01/1953	08/05/1981	05/09/1997	28
Daryl Holton	11/23/1961	11/30/1997	09/12/2007	36
Steve Henley	11/25/1953	07/24/1985	02/04/2009	31
Cecil Johnson	08/29/1956	07/05/1980	12/02/2009	23
Billy Irick	08/26/1958	04/15/1985	08/09/2018	26
Edmund Zagorski	12/27/1954	04/23/1983	11/1/2018	28

[3] In order of the year of offense, the eight include seven men—David Duncan (1981), Tony Bobo (1983), David Poe (1986), Michael Dean Bush (1988), Roosevelt Bigbee (1989), Derrick Johnson (1990), and Frederick Sledge (1991)—and one woman, Christa Pike (1995).

[4] *See* Affidavit of Alicia Gullo, at ¶¶15–17.

David Miller	07/16/1957	05/20/1981	12/06/2018	23
Donnie Johnson	01/15/1951	12/08/1984	05/16/2019	33
Stephen West	09/16/1962	03/17/1986	08/15/2019	23
Lee Hall	10/28/1966	04/17/1991	12/05/2019	24
Nicholas Sutton	07/15/1961	01/15/1985	02/20/2020	23
Oscar Smith	03/25/1950	10/01/1989	05/22/2025	39
Byron Black	03/23/1956	03/28/1998	08/05/2025	42
Harold Nichols	12/31/1960	09/30/1998	12/11/2025	37
Darrell Hines	04/20/1960	03/03/1985	08/13/2026	24

(Average age: 28.94). The youngest age at the time of the offense was 23 years old, a huge gap of *five years* from Christa's age when she committed her crime. Tennessee does not execute teenaged offenders, and for good reason. Adolescence is a distinct period of development that begins with the onset of puberty (which typically occurs between the ages of 10 and 12) and ends in the mid-20s. *See* Dr. Julie Gallagher Amicus Brief, at 15.[5] "Researchers have consistently identified changes in the structural and functional development of the brain in adolescence." *Id.* "There are just as many, if not more, differences between adolescents and adults as there are between adolescents and children, and the differences between adolescents and adults are often more striking than the differences between adolescents and children." *Id.*

The adolescent brain "is significantly less mature, both in its structure and in its ability to utilize that structure efficiently." *Id.* at 16. "This has a profound impact

[5] The brief was filed in *State v. Tyshon Booker*, No. E2018-01439-SC-R11-PD.

on learning and behavior during adolescence." *Id.* During adolescence, the brain systems in which structural and functional changes take place involved in "important cognitive, emotional, social and motivational processes." *Id.* "These changes result in significant deficits in important skills affecting legally relevant constructs such as planning, decision-making and impulse control." *Id.*

"The primary brain regions affected during adolescence are the limbic system, which regulates emotional arousal, and the prefrontal cortex, which regulates self-control and rational decision-making." *Id.* at 18.[6] There is a scientific consensus that the longer maturation time for the development of the prefrontal cortex creates an imbalance that "has a profound effect on thinking and behavior." *Id.* at 19. The changes follow an identifiable pattern consistent with adolescent behavioral changes. *Id.* Only when both the limbic system and prefrontal cortex have completed development and "become fully interconnected is development complete." *Id.* These changes are not complete until the early to mid-twenties. *Id.*

The adolescent brain is more easily emotionally aroused and sensitive to social rewards by peer approval. *Id.* at 21. It is also less sensitive to negative outcomes—leading to adolescents seeking intense and exciting experiences while discounting negative consequences. *Id.* at 21–22. Also, the amygdala in the adolescent brain is undergoing significant changes which lead to being more fearless and prone to impulsive responses to threats. *Id.*

[6] Christa was born with a compromised brain due to neonatal brain damage from her mother drinking alcohol. See Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood.

The "executive functions" in the brain, known as its "braking system," are not fully in place in the adolescent brain. *Id.* at 24. The prefrontal cortex can be easily derailed by emotional arousal or fatigue, which leads to difficulties with self-control when adolescents become upset, excited or tired. *Id.* "Under such circumstances, they are more likely to engage in risky behavior and make decisions without considering the consequences of their actions." *Id.* at 25.

In 2013, a panel organized by the National Research Council reviewed the science on adolescent development and came to three primary conclusions. *Id.* at 29. First, "in emotionally charged situations, adolescents do not have a mature capacity for self-regulation compared to adults." *Id.* at 29–30. "Self-regulation is the process by which individuals initiate, adjust, interrupt, stop, or otherwise change thoughts, feelings, or actions in order to achieve personal goals or plans." *Id.* at 30. "[S]elf-regulation requires the capacity to inhibit impulses." *Id.* Second, "adolescents are much more vulnerable to peer influence and immediate incentives" than adults. *Id.* Third, "adolescents lack time perspective, impairing their ability to make judgments and decisions that require future orientation." *Id.* at 32.

"In key ways, the brain doesn't look like that of an adult until the early 20s." *See* Declaration on Behalf of the American Academy of Pediatric Neuropsychology, at 5 (quoting a 2011 publication of the National Institute of Mental Health titled *The teen brain: Still under construction*). With regard to recent neuroscience findings, "the results push the timeline of brain maturation into

adolescence and young adulthood. In terms of the volume of gray matter seen in brain images, the brain does not begin to resemble that of an adult until the early 20s." *Id.*

"There is no clear way to differentiate the functioning of the brains of 17-year-olds from those aged 18, 19, and 20 in terms of risk taking behaviors, the ability to anticipate the consequences of their actions … to evaluate and avoid negative influences of others, and to demonstrate fully formed characterological traits not subject to substantive change…." *Id.*, at 3. "The key aspects of brain development governing these abilities and characteristics simply are not yet mature or fully functional until sometime after the age of 21." *Id.* Thus, there is no "scientific basis upon which to draw a significant distinction in the neuropsychological abilities of the 18-20 versus 17-year-olds that would make them more culpable in the face of such criminal charges that could lead to a sentence of death." *Id.*, at 13.

On January 12, 1995, Christa Pike, Tadaryl Shipp, and Shadolla Peterson attacked Colleen Slemmer, intending to scare her in an assault that escalated into murder. Christa was just 18 years old, with a brain that was not yet fully developed. *See* Report of Dr. Bethany Brand, at 34. Prior to the brain's full maturation, "youth do not have the ability to think through impulses, fully consider the consequences of their actions, nor 'put the brakes on' their intense behavioral impulses." *Id.*

In addition to sharing the characteristics of other adolescents with under-developed brains, "Christa was experiencing untreated intense bipolar emotional reactivity" and was "very likely" manic or hypomanic at the time. *Id.* She was also

"suffering from untreated trauma and PTSD." *Id.* "At 18 years old, her immature, traumatized brain made her exceptionally vulnerable to impulses and extremely poor decisions." *Id.* at 37. "Unmedicated and untreated, she was not able to put the 'brakes on' her bipolar- and trauma-triggered emotions." *Id.*

Tennessee does not and should not execute adolescent offenders whose crime was committed at 18 years old. Both the scientific community and the State have long recognized individuals like Christa were "exceptionally vulnerable to impulses and extremely poor decisions" at the time her crime was committed. *Id.* at 37. Executing Christa would create an exception to Tennessee's long-standing practice.

Tennessee Does Not Execute 18-Year-Old Girls.

Data collected by the Office of the Post-Conviction Defender identifies 200 women who have been convicted of, or pleaded guilty to, first-degree murder in Tennessee since 1976. *See* Affidavit of Alicia Gullo (August 23, 2023). Only Christa is currently under a death sentence. *See* 1-B. Exhibit B of Affidavit of Alicia Gullo (sorted to Code PHE1).

Of the 200 women who have been found guilty of first-degree degree murder during this time, the State sought the death penalty for only 19 women. *See* Affidavit of Alicia Gullo, at ¶6. Six of those death notices were subsequently withdrawn. *Id.*

Only two of those cases resulted in a death sentence—Christa Pike and Gaile Owens.[7] *Id.*; *See* 1-B. Exhibit B of Affidavit of Alicia Gullo (sorted to Code

[7] Ms. Owens' sentence was commuted to life in 2010, and she was later released on parole and died of natural causes in the free world after serving her community through Thistle Farms.

PHE1). There have been no other sustained death sentences for women in Tennessee since long before the end of slavery.[8]

Of the 200 women first degree murder offenders, the vast majority were sentenced to life with the possibility of parole. *See* 1-B. Exhibit B of Affidavit of Alicia Gullo (sorted to Code PHE3). Nineteen women were sentenced life without the possibility of parole. Once again, Christa's case is a statistical outlier:

Women convicted of murder in TN 1976–2022

Black: women sentenced to life imprisonment

Green: women sentenced to life without the possibility of parole

Red: women sentenced to death

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[8] *See* Executions in the U.S. 1608–2002, Espy File, available at https://deathpenaltyinfo.org/executions/executions-overview/executions-in-the-u-s-1608-2002-the-espy-file (last visited August 29, 2026). Historical research identifies only three women executed in the State of Tennessee, ever. All three were executed between 1807–1819. The Espy database identifies four executions of women: 1) March 20, 1807, hanging of Molly Holcomb, a Black female; 2) 1808 hanging of an unnamed Black female; 3) 1819 hanging of an unnamed Black female, and 4) 1820 hanging of Eve Martin, race unknown, for accessory to murder. However, Eve Martin was incorrectly included—she was the victim of a homicide, not an accessory. *See* David V. Baker, *Women and Capital Punishment in the United States: An Analytical History*, 132 (McFarland, 2015).

Many of the women convicted of first-degree murder committed highly aggravated homicides. For example, of the 200 women first degree murder offenders, there are 23 women in the database who were convicted of killing more than one victim. *See* 1-B. Exhibit B of Affidavit of Alicia Gullo (Codes CCA2 and CCA3). Seventeen of the women killed two victims and six killed at least three victims. *Id.* (Codes CCA2 and CCA3 respectively). None of these women received a death sentence. Of the 23 women who killed more than one victim, four are serving life without parole sentences and 19 are serving life sentences. *Id.* (Codes PHE2 and PHE3 respectively).

Christa's crime was terrible, but not more egregious than the cases of other women convicted of first-degree murder who received lesser sentences. Christa's crime involved a single victim, and a tragedy for her family, whereas at least ten of the other women convicted of first-degree murder had multiple victims.

- In *State v. Tallent*, No. M2005–00183–CCA–R3–CD, 2006 WL 47090 (Tenn. Crim. App. Jan. 10, 2006) the defendant, after a night of smoking crack cocaine, led police on a high-speed chase in a stolen car from Knoxville to Mt. Juliet, Tennessee, traveling 80 to 120 miles an hour when she struck and killed two police officers. She received two life sentences. The State did not seek the death penalty.

- In *State v. Dunavant*, No. W2018–00031–CCA–R3–CD, 2019 WL 1418184 (Tenn. Crim. App. March 28, 2019) the defendant was convicted of aggravated assault, two counts of felony murder, aggravated child neglect, and aggravated arson after setting fire to her home, killing her two infant grandchildren. She was sentenced to two life sentences. The State did not seek the death penalty.

- Melissa Ferris was sentenced to one sentence of life and one sentence of life without parole after torturing and killing a 22-year-old Memphis woman by

cutting her throat. Ferris then shot her boyfriend/accomplice in the head when the two were surrounded by police after fleeing the state.[9]

- In *State v. Myers*, No. E2012–01814–CCA–R3–CD, 2013 WL 5436955 (Tenn. Crim. App. September 27, 2013) the defendant was sentenced to life after she and her boyfriend broke into the victims' mobile home, shooting and killing one victim. A second victim was shot in the head but survived.

- In *State v. Pelley*, No. 253 CCA, 1989 WL 147522 (Tenn. Crim. App. Dec. 8, 1989), the defendant received a life sentence after she and a co-defendant killed a clerk and a security guard.

- In *State v. Taylor*, No. M2005–00272–CCA–R3–CD, 2006 WL 2563433 (Tenn. Crim. App. Aug. 25, 2006), Latonya Taylor killed three people during the robbery of a fast-food restaurant.

Christa received a much harsher sentence than women who have committed multiple murders.[10]

Historically, Tennessee does not execute women. That is not because women do not commit first-degree murder. Almost 200 women have committed first-degree murder since Tennessee reinstated the death penalty in 1997. Christa was not sentenced to death because her crime was more egregious than the many other first-degree murders and multiple murders committed in Tennessee. Her sentence is an outlier, an aberration, the result of her trial lawyer's complete failure to present

[9] Melissa Gale Ferris Report, *Rule 12 Database*, Administrative Office of the Courts (2021); *see also* https://www.kait8.com/story/4581902/memphis-topless-dancer-pleads-guilty-to-killing-fellow-dancer/.

[10] Christa also received a much harsher sentence than minors who committed first-degree murder. As discussed above, society's understanding of brain development places Christa's culpability much more in line with minors who have committed similar crimes. *See, e.g.*, *Alderson v. State*, No. M2010-00896-CCA-R3-PC, 2010 WL 488137 (Tenn. Crim. App. Nov. 30, 2010) (16-year-old defendant guilty of two counts of felony murder and one count of attempted first-degree murder and sentenced to life plus 15 years) and *Turnmire v. State*, 762 S.W.2d 893 (Tenn. Crim. App. 1988) (15-year-old defendant killed both of her parents and received concurrent life sentences).

adequate mitigation evidence at her sentencing hearing[11] and the sensationalized climate that surrounded her trial.[12] The jurors who sentenced Christa to die did not hear evidence of her history as the survivor of rapes and sexual abuse nor evidence of her resulting post-traumatic stress disorder. Nor were the jurors told of her brain damage caused by in utero exposure to alcohol and Bipolar Disorder.

Christa's Death Sentence is Not Consistent with the Sentences of Her Co-Defendants or Numerous More Egregious Killings, Many Involving Multiple Victims.

The testimony at the post-conviction hearings makes clear that Shipp was violent and abusive towards Christa and a leader in the killing of Ms. Slemmer. Christa was 18 years old at the time of the crime, only months removed from being categorically ineligible for the death penalty. Mr. Shipp, slightly younger than Christa, was not eligible to be sentenced to death. In the months leading up to

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[11] The Tennessee Supreme Court never reviewed the validity of Christa's sentence in light of the powerful mitigation developed in post-conviction, as the Court declined permission to appeal from the denial of post-conviction relief. The Court affirmed her convictions and death sentence in 1998. Since then, the Court established a bar for consideration of claims of ineffective assistance of counsel for failure to investigate, develop, and present mental health mitigation which was not met in Christa's sentencing trial. *See Davidson v. State,* 53 S.W.3d 386 (Tenn. 2014). The *Davidson* opinion exemplifies that merely retaining a mental health expert is insufficient to meet the prevailing professional norms in the 1990's. The *Davidson* Court found that "Counsel held in their hands compelling evidence that Mr. Davidson has a broken brain and a tragic past. Their failure to submit any of this neuropsychological evidence to the sentencing jury falls short of the professional norms that prevailed at the time of trial." 53 S.W.3d at 392. The Court further found prejudice—regardless of Mr. Davidson's multiple prior offenses, his significant history of "malignant misogyny and [a] propensity to commit sexual violence," and his convictions for premeditated first-degree murder and aggravated kidnapping of a woman whose decapitated body was found mutilated and partially buried in the woods. *Id.*, 389–90, 404–05.

[12] Headlines like "Alleged Killers Held "Soul Captive" and "Satanic Links Revealed" were consistently on the front page of the Knoxville News Sentinel. *See, e.g.,* January 20, 1995, Knoxville News-Sentinel headlined "Alleged killers held 'soul captive,'" document 5 in the supporting documents for Legal Profession Failures. In 1995, the nation was in the grips of an unfounded "Satanic Panic" marked by mass hysteria, false accusations, and ruined lives. *See, e.g.*, https://www.ebsco.com/research-starters/communication-and-mass-media/satanic-panic.

Christa's participation in Ms. Slemmer's killing, Christa was surrounded by pervasive violence at Job Corps, and subject to Shipp's controlling and abusive thrall over her.

William Joseph Mode was an instructor at Job Corps from 1992 through April 19, 1995. He testified that the Job Corps facility was dangerous for both students and faculty. *See* William Joesph Mode Post-Conviction Testimony, at 770. He knew that Mr. Shipp was both an uncooperative student and dangerous. *Id.* at 765–66. He had heard that Mr. Shipp "had beat up a girl that had gotten pregnant." *Id.* at 766. He was aware that many students were armed with either knives or guns, and that Shipp, in particular, was widely known to be in possession of a firearm. *Id.* at 767. Mr. Mode explained that, while the most dangerous students were readily identifiable, a private company held the contract to run the Job Corps center in Knoxville, and the company was paid based upon the number of students at the facility. Consequently, Job Corps was very reluctant to remove a student from the program. *Id.* at 769–71.

Andrew Scott Drace attended Job Corps at the same time as Christa. *See* Andrew Scott Drace Post-Conviction Testimony, at 676. He testified that Job Corps was a very violent place due to the presence of gangs and predatory students who picked on others. *Id.* at 677. He indicated that the gang members would come into his room and put a towel or sheet over him and beat him up. *Id.* at 679. Shipp was one of these gang members. *Id.* Mr. Drace "was in ear of [Shipp] on a daily basis." *Id.* at 681.

Shipp was the leader of his group and made it known that he was "a thug." *Id.* at 682–83.

Mr. Drace testified that Shipp once tried to pick him up and throw him off a bridge onto a railroad track some 200 feet below. *Id.* at 683. Mr. Drace managed to get away when several cars crossing over the bridge stopped. *Id.* at 684.

Shipp was violent, abusive, and controlling towards Christa and a leader in the killing of Ms. Slemmer. Fellow participants at Job Corps described Shipp as violent and threatening. These students also described Shipp's relationship with Christa as violent, abusive, and controlling. *Pike v. State*, No. E2009–00016–CCA–R3–PD, 2011 WL 1544207, at *28–29 (Tenn. Crim. App. April 25, 2011). There was no doubt that Shipp was in control of Christa and the relationship. One student detailed evidence that Shipp physically abused Christa and leaving a bruise under her right eye. *See* Tyrone Keith Comfort Post-Conviction Testimony, at 156–160. Shipp grabbed Christa by the throat and threw her against the wall. Brand Report, at 23. Shipp also carried a razor blade in his mouth which he would reveal to intimidate Christa. *Id.*

Shipp himself testified under oath that he, not Christa, brought the box cutter with him and carved the pentagram into Ms. Slemmer's chest. *Pike v. State*, 2011 WL 1544207, at *28. ("Shipp acknowledged that he was the one who carved the pentagram on the victim's chest and stated that he did so because he felt like it."). Notwithstanding the major role he played in the crime and the control he exercised over Christa, he was sentenced to life, instead of the life without parole sentence the

prosecutors sought, and is eligible for parole.[13] In post-conviction, Dr. William Kenner explained the psychological foundation of Christa's relationship with Shipp. Dr. Kenner testified that Christa was infatuated with Shipp and he exerted a strong influence on Christa, who was willing to adopt his interests in effort to please him and thereby bolster her low self-esteem. Dr. William Kenner Post-Conviction Testimony, at 168–170.

Mr. Shipp was not less culpable for Ms. Slemmer's death than Christa, yet he will have the opportunity to potentially be released from prison. Christa's death sentence cannot be reconciled with Mr. Shipp's life sentence. Shipp was 17 years old at the time of Ms. Slemmer's death. Christa was 18. That is the difference between a death sentence and parole eligibility. That difference cannot be equated with increased maturity or brain development. Christa was not more mature or more responsible than Shipp. In fact, Christa's trial attorney characterized her as less mature at 18 than his 10-year-old daughter. William Talman clemency letter, at 1.[14]

Further, Christa's sentence is wildly out of proportion with the sentences of defendants convicted of multiple counts of first-degree murder. There have been 339 defendants convicted of multiple counts of first-degree murder since 1977. Of those,

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[13] The Tennessee Supreme Court issued its order setting an execution date on September 30, 2025. On October 8, 2025, Tadaryl Shipp had a parole hearing at which the attending board member recommended denying parole and reviewing again in October of 2030. *See* https://www.wvlt.tv/2025/10/08/first-board-member-recommends-denying-paroling-man-convicted-job-corps-murder/ (last visited August 29, 2026). The board denied parole later that month and schedule another review in October 2031. *See* https://www.wate.com/news/knox-county-news/parole-denied-for-man-convicted-in-1995-knoxville-murder/ (last visited August 29, 2026).

[14] William Talman's clemency letter is available in supporting documents, document 1, in the Legal Profession Failures section.

only 33 (less than 10%) received sustained death sentences. The other 90% received sentences of life or life without the possibility of parole. Virtually all these defendants were found guilty of premeditated murder (as opposed to felony murder), thus drawing a sharp contrast to the majority of defendants with sustained death sentences (53 out of 86, or 62%) who committed single murders. A defendant who deliberately kills two or more victims is nine times more likely to be sentenced to life or life without the possibility of parole than death, and the sentence s/he receives is most likely dependent on extraneous factors like geography, the prosecutor, quality of the defense, and timing of the case. *See* Bradley A. MacLean & H.E. Miller, Jr. *Tennessee's Death Penalty Lottery*, 13 Tenn. J.L. & Pol'y 85, at p. 170–174 (2018); *see also* 1-A. Exhibit A of Affidavit of Alicia Gullo (Codes CCA2 for two victims and CCA3 for three or more victims respectively).[15]

In addition to the women who have committed multiple murders and received sentences less than death, there are many examples of men committing multiple murders and receiving sentences less than death.

- Henry Burrell and Zakkawanda Moss were convicted of six counts of first-degree premeditated murder. *State v. Moss*, No. M2014–00746–CCA–R3–CD, 2016 WL 5253209 (Tenn. Crim. App. September 21, 2016). The two, who had both previously served time in jail or prison, shot a man and a woman in the head, strangled two women to death, one of whom was pregnant, thus killing her unborn child, and stomped a 16-month-old child to death. The defendants received six life sentences.

[15] In the OPCD database, Exhibit A, a search for all defendants who were convicted or pleaded guilty to killing three or more people who received life imprisonment yields 41 results. A search for all defendants who were convicted or pleaded guilty to killing three or more people who received life imprisonment without possibility of parole yields 18 results.

- In *State v. Cobbins*, No. E2013–00476–CCA–R3–CD, 2014 WL 4536564 (Tenn. Crim. App. September 12, 2014) and *State v. Thomas*, No. E2013–01738–CCA–R3–CD, 2015 WL 513583 (Tenn. Crim. App. February 5, 2015), these co-defendants were a part of a group that kidnapped and murdered a young couple. The two were found guilty of more than thirty criminal charges. The male victim was killed and burned to dispose of the body. The female victim was bound, raped repeatedly, killed, stuffed in a plastic garbage can, and doused with bleach. The jury found three aggravating factors in the capital sentencing phase: (1) the murder was especially heinous, atrocious, and/or cruel in that it involved the torture or serious physical abuse beyond that necessary to produce death; (2) the murder was committed for the purpose of avoiding, interfering with, or preventing a lawful arrest or prosecution of the defendant or another; and (3) the murder was knowingly aided by the defendant, while the defendant had a substantial role in committing the rape, the kidnapping, and the robberies of the victims. The jury sentenced Defendant Cobbins to life without parole and Defendant Thomas to life for both of the murder convictions.

- Peter Billington received life without parole for a triple murder of his parents and sister in a plea agreement that spared his life. https://www.chattanoogan.com/2004/5/7/50273/Billington-Gets-Life-Without-Parole.aspx (last visited August 29, 2026). He shot his mother first, killed his sister execution style and then went upstairs to get more ammunition to finish off his father, who was screaming and crying. https://www.chattanoogan.com/2002/5/21/22144/Chilling-Testimony-On-Billington-Family.aspx (last visited August 29, 2026).

- Jacob Allen Bennett killed four people on Renegade Mountain in Cumberland County and received life without parole as the result of a guilty plea. https://www.knoxnews.com/story/news/crime/2016/06/29/man-pleads-guilty-to-killing-four-on-renegade-mountain/91015406/?gnt-cfr=1&gca-cat=p&gca-uir=true&gca-epti=z117762e009000v117762d--xx--b--xx--&gca-ft=201&gca-ds=sophi (last visited August 29, 2026). The State did not seek the death penalty. *Id.* The victims were seated inside a Dodge Neon parked on graveled Eagles Nest road off Renegade Mountain Parkway. All of them had been shot in their upper bodies, and all had been shot in the head or face as they sat in the car, authorities said. One victim, a young mother, was behind the wheel. *Id.*

- Michael Cummins was responsible for the mass killing of eight people, including a child. *See* DPIC, https://deathpenaltyinfo.org/news/brain-scans-of-tennessee-man-who-admits-to-killing-eight-convince-prosecutors-to-

drop-death-penalty (last visited August 29, 2026). The District Attorney for the 18th Judicial District of Tennessee chose to negotiate a life imprisonment without possibility of parole for Michael Cummins after brain scans demonstrated that he had significant mental problems. *Id.*[16]

The disproportionality of outcomes for these defendants and Christa is clear. Christa committed a single murder; she was 18 years old at the time of the crime; and she was suffering from severe mental illnesses, Bipolar Disorder and Post-Traumatic Stress Disorder.

The number of death sentences per year in Tennessee is dramatically decreasing.[17] In the last decade, only eight people have been death-sentenced and those men's ages at the time of offense range from 22 to 52 years old.[18]

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[16] Ms. Pike similarly suffered brain damage in utero which was visible in an MRI brain scan. *See* Christa Has Suffered from Bipolar Disorder and PTSD Since Childhood.

[17] There are currently 40 men and one woman on Tennessee's death row. *See* Tennessee Department of Correction's "Death Row Facts" https://www.tn.gov/correction/about-us/executions/death-row-facts.html (last visited August 29, 2026). The youngest, Nathaniel Pipkin, is 26 years old. *Id.*

[18] Rickey Bell was sentenced in 2012 for a crime committed when he was 30 years old. He is no longer on death row after a negotiated disposition for life in prison without possibility of parole between the Office of the Post-Conviction Defender and District Attorney General for the 25th Judicial District. *See Rickey Alvis Bell, Jr. v. State*, Tipton County Case No. 6664 (May 24, 2021); Appendix 4, at ¶18. Sedrick Clayton was sentenced in 2014 for homicides he committed at age 28. *State v. Clayton*, 535 S.W.3d 829 (Tenn. 2017); Appendix 4, at ¶19. Henry Lee Jones was sentenced to death in 2015 in a retrial after his first Tennessee death sentence was overturned. *State v. Jones*, 568 S.W.3d 101 (Tenn. 2019). He was 39 at the time of the crime and is also currently sentenced to death in Florida. Appendix 4, at ¶19. Michael Dale Rimmer was sentenced to death in 2016 in a retrial after his sentence was vacated by the post-conviction court. *State v. Rimmer*, 623 S.W.3d 235 (Tenn. 2021). He was 30 at the time of the crime. Appendix 4, at ¶19. Urshawn Miller was sentenced in 2018 for a crime committed when he was 26 years old. *State v. Miller*, 638 S.W.3d 136 (Tenn. 2021); Appendix 4, at¶19. Steven Wiggins was sentenced in 2021 for a crime committed when he was 31 years old. *See* https://www.newschannel5.com/news/steven-wiggins-taken-into-custody (last visited August 29, 2026); Appendix 4, at ¶19. Sean Finnegan was sentenced in August 2024 in https://www.wate.com/news/anderson-county-news/sean-finnegan-sentenced-to-death-in-oak-ridge-murder-case/ (last visited August 29, 2026) for a crime committed at age 52. https://oakridgetoday.com/2020/08/10/bond-for-finnegan-set-at-1-million-in-murder-rape-kidnapping-case/ (last visited August 29, 2026). Nathaniel Pipkin was recently sentenced in August 2026 for a triple homicide of his family after instructing his lawyers not to fight the death penalty. https://www.wsmv.com/2026/08/04/tennessee-man-showed-no-emotion-he-was-sentenced-death-

There is no scientific or factual justification for a drastic differentiation in punishment between a 17-year-old offender and an 18-year-old offender, as in the case of Tadaryl Shipp and Christa Pike. By any measure, Ms. Pike's death sentence is out of step with other first degree murder sentences. Not only the current scientific and societal consensus regarding the relative culpability of 18-year-olds, but also the reality of Tennessee capital sentencing in the last half century, reflects that executing Christa Pike would be counter to Tennessee's values and long-standing practice.

murdering-his-mother-siblings/ (last visited August 29, 2025). He was 22 years old at the time of the homicides. *See* https://www.columbiadailyherald.com/story/news/crime/2022/01/10/double-branch-killings-pipkin-indicted-maury-county-grand-jury/9159502002/ (last visited August 29, 2026).

Christa Endured Solitary Confinement for Nearly Three Decades

Christa Gail Pike's life on Tennessee's death row at the Debra K. Johnson Rehabilitation Center has been drastically different than the lives of men on death row just a few miles away at Riverbend Maximum Security Institution. Christa was sentenced to death on March 30, 1996, for a crime she committed when she was just eighteen years old. She began her sentence with pre-existing but undiagnosed Bipolar Disorder and Post-Traumatic Stress Disorder. The symptoms Christa was experiencing at the time were exacerbated as the result of the mandatory segregation required by TDOC policy for people under death sentence. Christa spent nearly three decades in solitary confinement. In September 2024, the Tennessee Department of Correction ("TDOC") agreed to a settlement under which Ms. Pike's conditions of confinement are slightly less onerous than the many years she served alone, housed in a cell about the size of a parking space and not allowed to eat, work, or recreate with other women. She is still effectively living an isolated life due to being the only woman subject to a death sentence, despite many years of counseling and treatment to manage her mental health symptoms.

Christa has suffered physically and mentally from this solitary confinement that the men on death row do not endure. That Christa has survived nearly 30 years of isolation and become the kind, empathetic, and remorseful person she is today, is remarkable. But those years have not been without tremendous cost.

Solitary Confinement Causes Severe Mental Trauma.

Prolonged incarceration and solitary confinement were introduced by the United States as a means of dealing with criminal behavior. Grassian Report, at p. 5 (Oct. 6, 2001). The original "penitentiary system" began in the United States in the early 19th century and embodied the "Philadelphia System," comprised of almost an exclusive reliance upon solitary confinement as a means of incarceration. The results were catastrophic; the United States Supreme Court explicitly recognized the massive psychiatric harm caused by solitary confinement:

> A considerable number of the prisoners fell, after even a short confinement, into a semi-fatuous condition, from which it was next to impossible to arouse them, and others became violently insane; others still, committed suicide; while those who stood the ordeal better were not generally reformed, and in most cases did not recover sufficient mental activity be of any subsequent service to the community.

In Re Medley, 134 U.S. 160, 168 (1890).

In general, solitary confinement cells are typically designed to isolate prisoners from virtually all human contact.[1] Prisoners are confined to their cells with almost nothing to occupy their time between twenty-two and twenty-four hours a day.[2] Cells range in size from sixty to eighty square feet, which is about equivalent to the size of a parking space.[3]

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[1] Rosalind Dillon, Note, *Banning Solitary for Prisoners with Mental Illness: The Blurred Line Between Physical and Psychological Harm*, 14 NW J. L. & Soc. Pol'y 265, 271 (2019).

[2] *Id.*

[3] *Id.*

People with mental illness are extremely overrepresented in the United States prison system.[4] Many of those individuals who live with mental illness find themselves in solitary confinement for non-disciplinary reasons.[5] Christa was placed in solitary confinement because of Tennessee's policy to segregate inmates sentenced to death. While men sentenced to death in Tennessee could still be housed together and build a community with the benefit of a behavioral incentive level program, Christa's status as the only woman on death row for many years isolated her.

Corrections officers, who subject inmates to the brutality of the solitary confinement conditions, have objected to the method themselves. In 2014, Rick Raemisch, Colorado's Chief of Corrections, spent a night in one of Colorado's solitary confinement cells.[6] Raemisch described his experience:

> First thing you notice is that it's anything but quiet. You're immersed in a drone of garbled noise—other inmates' blaring TVs, distant conversations, shouted arguments. I couldn't make sense of any of it and was left feeling twitchy and paranoid. I kept waiting for the lights to turn off, to signal the end of the day. But the lights did not shut off. I began to count the small holes carved in the walls. Tiny grooves made by inmates who'd chipped away at the cell as the cell chipped away at them. For a sound mind, those are daunting circumstances. But every prison in America has become a dumping ground for the mentally ill.[7]

The effects of solitary are now more scientifically understood than when the Supreme Court observed its psychiatric impacts, with isolation in solitary known to

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[4] *Id.* at 272.

[5] *Id.*

[6] *Id.* at 276.

[7] *Id.*

cause inmates to engage in awful, grotesque behaviors.[8] These behaviors include self-mutilation, suicide attempts, and other forms of bodily harm.[9]

Christa Suffered Extreme Mental Harm Because of the Psychiatric Effects of Solitary Confinement.

Christa was no exception to the horrific effects of solitary confinement having spent most of her life subjected to isolation. Declaration of Ali Winters, at ¶ 21 (Nov. 15, 2020). Solitary confinement physically transformed Christa. *Id*. She is now hypersensitive to sound and touch. *Id*. Christa was starved of physical contact with other human beings for nearly twenty-seven years while in solitary confinement, and experiences feelings of panic and irritation when new guards fumble with her restraints. *Id*.

Christa's pre-existing Bipolar Disorder I and Post-Traumatic Stress Disorder (PTSD) exacerbated the psychological effects of her time in solitary. Winters Declaration, at ¶ 23. With a pre-existing mental illness, people experience the side effects of solitary confinement earlier, more frequently, and more intensely. *Id*. After spending decades in her cell, Christa struggles to concentrate or stay focused on a task. Winters Declaration, at ¶ 26. Her inability to focus mirrors cycles of anxiety and irritation, where Christa will feel uncomfortable in her own skin, unable to find relief in her enclosed environment.

[8] *Id.* at 277.

[9] *Id.*

Christa suffered the effects of solitary confinement not as a disciplinary sanction, but because of her unique status as the only woman under a death sentence in Tennessee.

Christa Was Subjected to Extreme Forms of Isolation for Over Twenty-seven years, Based Solely on the Fact that She Was the Only Woman Sentenced to Death in the State of Tennessee.

Both TDOC and Debra K. Johnson Rehabilitation Center ("DJRC") hold policies requiring that Christa be subjected to mandatory segregation from other incarcerated individuals who have not received a sentence of death. Winters Declaration, at ¶ 7. Men who have been sentenced to death and are incarcerated in the Tennessee Department of Correction are housed together and can build comradery, find meaning of life through their employment positions, and enjoy socialization through education and religious programming. They are segregated from individuals under different sentences, but not from each other. *See Pike v. Helton*, Amended Complaint, at ¶2. (M.D. Tenn. 2022).

Christa is already a woman who suffers from an extreme history of mental illness, childhood sexual trauma, and abandonment, placing her in a position more vulnerable than other members of the population. *See* Grassian Report, at p. 3. "Powerful emotion can overwhelm a vulnerable person's capacity to reason, reflect, and choose; even without the added dimension of solitary confinement, such individuals generally have an enormously difficult time tolerating stress...." Grassian Report, at p. 3. As a result of Christa's pre-existing Bipolar Disorder I and Post-

Traumatic Stress Disorder, the effects of solitary diminished her mental and physical health further. *Id*.

While Christa remained in solitary, stripped from any meaningful human interaction, her co-defendant, Tadaryl Shipp, has lived a completely different life while incarcerated. Shipp has spent most of his time incarcerated in correctional facilities that have allowed him to thrive, grow passionate, and make a meaningful contribution to those around him. Shipp has been able to find employment as a barber after attending barber college while incarcerated. Shipp has had the opportunity to take classes in sewing, culinary arts, and found work in the library throughout his time at numerous facilities. He's been offered recreation at numerous facilities, including 6–8 hours of access to basketball, tennis, and weights depending on the job he had at the time. All these opportunities provide Shipp with an opportunity to reform; an opportunity to make his life one worth living.

Christa knows exactly what her passion is—helping others. One path for that which Christa hopes to implement is mentoring and supporting juveniles who come from backgrounds like hers that make it more likely they end up in the position she is now currently in. Christa's conditions of confinement have precluded her from opportunities to show who she is, and most importantly, who she can continue to become if the value of her life and her potential is seen through the granting of clemency in her case.

The Conditions of Christa's Isolation in Solitary Should Be Considered in Her Request for Clemency.

Christa's cell was just eight feet by ten feet in size, which measures just slightly smaller than a parking space. Winters Declaration, at ¶ 12. There was a constant bright fluorescent light that shined through the tiny front door window to her cell twenty-four hours a day. Christa's only visual of the outside world was provided by a small aperture, about three to four feet from the ground and three to four inches wide. Christa's only ability to experience fresh air was during the five times a week she was allotted for an hour of recreation, alone. *Id.*, at ¶ 12. "She was twenty years old when she was first incarcerated [at TPW] and had her first experience in solitary confinement. At the time, she had no idea that this was to become her existence; she could barely even contemplate the consequences of her own actions. Yet now, it is all she knows. She is barely able to remember what her life was like before she came to solitary. She says it feels like all this has happened to a different person. Tragically, being trapped in her cell is all she knows." Winters Declaration, at ¶ 31.

Christa's experience in solitary confinement is something that men sentenced to death in Tennessee do not endure. It is an added punishment unique to her status as the only woman under a death sentence in Tennessee. It is not a small difference or inconvenience. It has real physical and mental repercussions. In considering Christa's request for a commutation of her sentence to life without the possibility of parole, one must understand that Christa has endured a fundamentally different and substantially more severe incarceration than her male counterparts have endured.

September 1, 2026

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Governor Bill Lee
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Re: Clemency for Christa Pike

Dear Governor Lee:

I write to respectfully urge you to grant clemency for Christa Pike. Christa is a wonderful, caring person who is so much more than the crime she committed as a teenager. She deserves to live.

I first met Christa 20 years ago. I was a new lawyer, and she was my first client. My assignment was to draft the opening brief for her post-conviction appeal. By then, Christa had been on the row for over a decade. I remember many things about her case from those first few weeks. How a neuropsychologist found that when she held her arms outstretched in a T, her fingers naturally curled—a sign of frontal lobe damage. How that result was confirmed by imaging, which showed a hole in her brain big enough to be seen by the naked eye. How as a teenager, she nearly ran over her mother's abusive boyfriend with a car before a passenger depressed the brake pedal—such a literal metaphor: she had no impulse control, no brakes. How her trial counsel swindled the county out of hundreds of thousands of dollars yet was entrusted with her defense in his first case back from suspension. How that attorney scrapped a year's worth of mitigation investigation on the eve of trial to save his own hide. How that attorney was somehow found credible, and the mitigation investigator disregarded, on appeal. How through it all, the jury never learned who Christa was or how she came to participate in her crime.

When I first went to visit, I found that Christa was not what I expected. She did not present as damaged, and she was not dark. She did not distrust me, or lament that I was another assigned lawyer, and an inexperienced one. She was not sullen about her case or her circumstances. She did not think she deserved more or better. Rather, she was eager to know me. She hugged me hello and, longer, goodbye. When I talked about her case, she listened attentively and answered thoughtfully. But she lit up when I asked about her life or talked about mine. She wanted to connect.

During the years I worked for the Post-Conviction Defender, I visited Christa many times. Not because her case was particularly active—we wrote a few briefs, but mostly waited on decisions. I went to get her out of her cell and give her company. Christa and Gaile Owens were

the only women sentenced to death, and the Tennessee Prison for Women didn't have a formal death row like Riverbend. TPW made it up as it went along, and for Christa, that meant solitary confinement 23 hours a day. I knew what deprivation did for people with trauma and mental illness, and I was concerned it would unravel her.

I sent Christa books on yoga and meditation, and she would report back on her awkward attempts. She had a sharp, self-deprecating humor. I sent her novels and she told me which she devoured and, sheepishly, which she put down or never started. We talked about family, experiences, beliefs. She was a deep, textured, human being who wanted nothing so much as to love and be loved.

I watched the decisions trickle down over the years. The first one came while I was still in Tennessee. We'd asked the Court to hold it cruel and unusual to execute a person who was 18 at the time of the offense and afflicted with acute brain damage and serious mental illness. While "appreciat[ing] the unique circumstances of this Petitioner," the Court held "[s]uch factors [as Christa's organic frontal lobe damage, diagnosed mental illness, and young age] of the nature of those envisioned as mitigating circumstances" more properly left to the jury in the penalty phase of trial. Of course, the jury in Christa's case never heard any such evidence. Subsequent appeals were marked by the same logical fallacies. She lost based on legal presumptions, manipulated doctrines, and deference to comity and finality. But never on the facts, or a fair reading of the law. The inalterable truth remains, Christa's crime was highly mitigated by an abundance of proof that was alternative never developed or presented. No informed jury voted for her death, and none would.

Despite the unfairness she's suffered, first at the hands of her caretakers and others, then in the legal system, Christa does not see herself as a victim. She nearly gave up her appeals in the years before I met her because she didn't want to hurt the victim's mother, and she didn't dispute what she'd done. Christa doesn't complain. But she does not deserve this. You cannot undo the many harms she suffered early in life, the violations and betrayals that wounded and shaped her. You cannot undo her crime, or the decades she suffered in solitary confinement. You cannot untangle the legal system that offered no justice because she was poor. But you can stop this train before it kills her. You can, at last, spare her life. Please, please do this.

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Respectfully submitted,

Avram D. Frey

Pryor Priest Harber

Attorneys at Law
Est. 1980
PRYOR, PRIEST, HARBER, FLOYD & COFFEY

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*Tennessee Rule 31
Listed Mediator

July 15, 2024

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

RE: Christa Gail Pike

Dear Governor Lee,

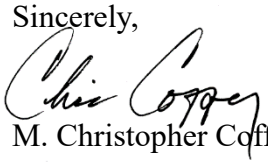
I am an attorney practicing law in Knoxville, Tennessee, since 1993. In 1995, I was appointed by the Knox County Criminal Court to represent Tadaryl Shipp on charges for the murder of Colleen Slemmer. I originally represented him in juvenile court at the request of his mother. The juvenile court judge transferred Tadaryl to the Criminal Court for trial as an adult. Tadaryl Shipp was 17 years old at the time of the crime which he committed with Christa Pike, who was 18 years old, and Shadolla Peterson, who was 18 years old. For the reasons set forth below, I write to request that you commute Christa Pike's death sentence to life imprisonment without possibility of parole.

I observed and interacted many times with Christa before and during her trial. She always seemed like a kid, even more so than Tadaryl. He seemed significantly more mature, even though he was younger. He was quiet, reserved, and thoughtful. During my numerous interactions with Christa, she was always cordial and respectful. I found her to be very likeable. She seemed like a sweet kid, although I also was aware that she could switch to a defiant attitude.

There was media attention around the supposed satanic aspects of the offense, but that was never the motivation behind what happened. Tadaryl and Christa were stupid kids, in love, and things got out of hand and resulted in tragedy. Christa was tried first, in 1996, and I attended the full trial. I would have expected Christa defense attorneys to emphasize Tadaryl's role in the crime and blame him, but they did not. When I represented Tadaryl in his 1997 trial, the defense I presented was to shift as much blame as possible to Christa.

Although the State sought a life without parole sentence for Tadaryl Shipp, the jury returned a life sentence, meaning that he is parole eligible. Given the disparities between his sentence and Christa's—resulting from their slight age difference, rather than their respective roles in this crime—I believe execution of her death sentence would be unjust. I request that you commute Christa's death sentence to life imprisonment without possibility of parole. Thank you.

Sincerely,



M. Christopher Coffey

MCC/ark

Dear Governor Bill Lee,

I hope this letter finds you well. I am writing to you today on behalf of Christa Gail Pike to respectfully ask that you consider granting her clemency.

First and foremost, I want to make clear that this letter is in no way intended to diminish the horrific crime that was committed or the unimaginable pain and sorrow that Colleen's family has endured over the years. I cannot begin to comprehend the depth of their loss. Colleen's life was tragically cut short by a brutal act, and I do not deny or minimize that reality.

I am asking you to consider, however, the person Christa Pike has become in the more than three decades since that crime.

My name is Danielle DiMartino, and I have come to know Christa over the past several months. I am a former correctional nurse in the state of Maine with more than 20 years of nursing experience. I correspond with Christa on a daily basis, and through that correspondence I have come to know a person who consistently demonstrates kindness, compassion, understanding, and trust. She has a tremendous heart and an extraordinary capacity for love and giving. Christa has seen me through one of the toughest times in my life while she is facing the end of hers. How a death row inmate has been more kind, understanding, and selfless to me than my closest friends speaks volumes to me.

Christa Pike is no longer the child she was when this crime was committed more than 30 years ago.

Part of my nursing career involved working on a solitary confinement unit. Through that experience, I witnessed firsthand that people can change, grow, flourish, and develop a deeper understanding of how childhood trauma and other circumstances can shape behavior and decision-making. Christa is no exception.

I understand that you are aware of Christa's extremely difficult upbringing, including neglect, numerous sexual assaults, and mental illness. I do not offer these circumstances as an excuse for what she did, nor do I believe that they erase the suffering caused by her actions. Rather, I ask that they be considered as part of the complete picture of who Christa was, who she is today, and the profound changes that have taken place over the course of her incarceration.

I also respectfully ask that you consider that Christa did not act alone in committing this crime. She has spent more than half of her life incarcerated, much of that time in solitary confinement on death row. Decades have passed since the person she was as a young woman committed this terrible act. During that time, she has had the opportunity to reflect deeply on her actions, and she carries remorse for the harm she caused.

Christa has used her time in prison to do good and to show compassion toward others. While nothing can take away the past or restore the life that was lost, I believe that genuine remorse, personal growth, accountability, and the ability to contribute positively to the lives of others are meaningful factors when considering whether someone should be given the opportunity to live rather than die.

Governor Lee, I am asking you to please reconsider taking Christa's life. I am not asking you to forget the crime or excuse it. I am asking you to recognize that a human being can change immensely over the course of 30 years and that mercy can coexist with accountability.

Please give Christa the opportunity to spend the remainder of her life in prison rather than be executed. Allow her to continue living with the consequences of her actions while also having the opportunity to demonstrate the person she has become.

I am asking you to show Christa mercy at a time when that mercy matters most.

Thank you for taking the time to read my letter and for giving my request your thoughtful consideration.

Respectfully,
Danielle DiMartino
Electronically signed on 08/29/2026 at 1355

DONALD E. DAWSON
1703 Cedar Lane
Nashville, Tennessee 37212

Email: don.dawson47@gmail.com Phone: (615) 943-8816

January 12, 2021

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

RE: Christa Gail Pike

Dear Governor Lee:

I am writing in support of clemency to Christa Pike. Christa has lived a life of neglect and severe abuse, and she deserves mercy. I have known Christa since approximately 1998. I served as the state Post-Conviction Defender from April 1996 to October 2012. After Christa's direct appeal ended, my office was appointed to represent Christa. Over the next several years I met with Christa many times at the Tennessee Prison for Women and during various court hearings on her post-conviction case. At one point in the case I met with her approximately weekly for several months. During these meetings I had the privilege of getting to know her well. She is a complicated human being who has survived a traumatic life.

Not only did I get to know her through personal contact, I also reviewed the facts of her case and her life in detail. As one of her post-conviction attorneys, thanks to the Tennessee Public Records Act, I reviewed the entire case file from the state and law enforcement. In addition, we prepared an extensive life history on Christa. We interviewed family members, North Carolina Children's services employees who had worked with Christa, teachers, etc. We also reviewed numerous records concerning Christa and worked with a psychiatrist, neurologist, psychologist and other expert witnesses who had examined Christa or assisted in the investigation of her life history. Most of this work was never done by Christa's trial counsel and the records and witnesses were not used at trial. Although evidence had been developed for trial by a mitigation specialist, the specialist was not called as a witness because she refused to lie in court to protect Christa's trial counsel from having embarrassing information about his preparedness divulged to the court. The mitigation specialist had been the only witness the defense intended to call at sentencing - a questionable choice at best. Instead, the

defense presented three witnesses who happened to be in the courtroom and were unprepared to testify.

From the extensive time I spent with Christa, the review of records, and interviews of witnesses who knew her well, I developed what I consider an accurate impression of her character. Fundamentally, Christa has had a lifetime search for meaning in her life and for someone who loves her. Her grandmother died when Christa was 12 years old. She was devastated. When her grandmother died, she felt that she lost the only person who had ever loved her. In her desperate search for someone to love her she unfortunately got involved with inappropriate people, one of whom was her co-defendant Tadaryl Shipp.

Christa was psychologically, physically, and sexually abused. One example of the level of her mother's abuse and lack of a love and support is her mother's reaction to Christa being raped by a stranger when she was 11. A social worker who worked with Christa when she was in juvenile custody in her early teens due to abuse and neglect testified at the post-conviction hearing. This witness, who worked closely with Christa, testified that when Christa was in juvenile custody at about age 15 she considered suicide and wrote a letter to her best friend. In the letter she listed as her reasons for suicide the death of her grandmother and that her mother didn't believe her when she was raped. The social worker testified that teenage girls don't lie when they are pouring out their hearts to a friend as they are contemplating suicide. What we knew of the rape was that Christa's mother and sister didn't believe her and laughed when she told her mother that she had been raped. We knew that Christa's teacher believed she had been raped but had great difficulty getting Christa's mother to even come to the school to help Christa.

I could go on and mention numerous other events that affected Christa's youth: her mother being assigned the best of the social workers because they viewed Christa's mother as one of the worst mothers in their program; Christa being sexually abused by many of her mother's boyfriends; her mother's continued drinking during pregnancy resulting in prenatal brain damage; being subjected to her grandfather's slaughter house as a toddler and playing in the "gut bucket" (the entrails from the slaughtering of animals she witnessed being slaughtered); being raped again when she was about 17; being subjected to family lore that praised a family member who killed a strike breaker (scab) during a coal mine strike; being only asked whether she won when she got into a fight at any time; and having a mother who both allowed and encouraged her to watch adults-only horror movies beginning when she was 5 or 6 years old. As I said, I could go on.

The depravity, abuse, and neglect in her childhood exacerbated the devastating effect of the death of her grandmother. Her grandmother was the only person who

protected her. During the time I represented Christa, she was fascinated by butterflies because as her grandmother's casket was being lowered into the ground she saw a butterfly fly off the casket. She believes it was her grandmother's soul. Her grandmother's death left her alone in the world.

As I mentioned earlier, Christa has spent her life searching for meaning. She was searching anywhere for anyone who would take the time to lead her. During the time I represented her she was meeting regularly with a Vanderbilt chaplain, Roman Catholic nuns, and others. At one point her legal team, me included, would recommend various religious books and she would read them and we would read them and then discuss them.

The other thing that stood out while I was representing Christa is just how immature she was. Christa was 18 years old at the time of the murder. She looked even younger. And even as young as she was, she was still very immature for her age. In fact, as I think about it, with the possible exception of the one juvenile I represented, Christa was probably the most immature person I represented in my 41 years as a criminal defense attorney. The abuse, neglect, and a myriad of traumatic events in her childhood, including the prenatal brain damage, stunted her ability to mature. Tadaryl Shipp, one of her co-defendants was just enough younger than Christa to protect him from the death penalty. He was seventeen. But her mental maturity was younger than that of her co-defendants both of whom played significant roles in what began as a fight becoming a killing. I think that when Christa actually killed Ms. Slemmer she was driven by her own trauma, brain damage and childhood sexual and physical abuse.

Christa deserves punishment, and she is being punished, in fact, more harshly than any other death row prisoner because she is so isolated. But so much of her personal history, her history of abuse, trauma, brain damage, and mental illness, was never presented to the jury.

I believe that Christa deserves mercy. I urge you to grant her clemency and commute her sentence.

Respectfully,

Donald E. Dawson

Donald E. Dawson

Dear Governor Lee,

I am writing this letter on behalf of Christa Pike, a woman facing execution in Tennessee. I also send this letter in hopes you are taking some time to contemplate the morality and ethics of the death penalty, and are open to hear from your constituent on the need for Christa Pike's clemency.

As Ms. Pike's former mental health provider, I would like to share a description of her mental illness and how that has driven her behavior since childhood. She was born with congenital neurological damage in the prefrontal cortex, a brain injury largely attributed to prenatal maternal alcohol use and characterized by barriers to executive functioning. This translates to neurological issues impacting her ability to properly evaluate and respond to situational stress. This was further compounded by a series of traumatic experiences in early to mid-childhood, resulting in severe, complex Post Traumatic Stress Disorder (PTSD). Her adolescence was characterized by significant behavioral problems, not atypical for children with this type of severe mental health history, with a subsequent litany of out-of-home placements due to aggression, substance use, and other impulsive behaviors. These are plainly documented as part of her mental health history and are clear indicators of stunted developmental milestones. By the time she reached the age of 18, she was not really functioning as an adult, rather a young child in a woman's body.

The crime for which Ms. Pike has been sentenced to death occurred when she was just 18 years old, calling into question whether or not she was developmentally capable of acting as an adult at that time. From a mental health perspective, I can unequivocally state "no". Ms. Pike was not capable of functioning as an adult at that age and should not be held culpable as an adult for her crime. Her responses to her arrest and the subsequent questioning and charges that followed reveal her inability to properly respond to situational stress and her tendency toward impulsive reactions. It has been a lifelong struggle for her.

I also wanted to speak to the strengths and level of resilience I see in Ms. Pike. Despite her mental health history, the brain damage, the trauma, her crime and incarceration, her sentence of death, and her placement in solitary confinement for over two decades, Ms. Pike has shown a level of progress you rarely see as a mental health provider. She has worked hard to overcome her impulsivity and better manage her mental health issues. She has been compliant with her mental health treatment, including medication management, and engaged in therapy with me for a period of 7 years. During that time, she demonstrated remarkable growth into what I would describe as a fully-functioning adult woman. She has developed a flare for advocacy, especially for those living in solitary confinement who are elderly, severely mentally ill, intellectually disabled, and/or have significant medical issues. This strength of empathy and compassion stands in stark contrast to how she is viewed by those who don't know her.

A sentence of death speaks to a view of someone's life as being worthless. Ms. Pike is NOT worthless. In fact, she is a vital, inherently valuable person to a great many people. To extinguish that life would be a tragic mistake, one I hope you choose not to make. I respectfully ask you to grant clemency to Christa Pike. Stop her execution and send a message that nobody's life is worthless.

Thank you for your time and consideration.

Sincerely,

Ali Winters, DSW, LCSW
MSW Coordinator & Associate Professor of Social Work
Tennessee State University

Dear Governor Lee,

I am Christa Pike's mom. I love Christa. Please spare her life. I wish I understood Christa as a child the way I understand her now. I wish I understood how to be a parent to her then. I wish that I knew about her brain damage and her bipolar disorder when I could have helped her.

Christa was born premature and diagnosed with Hyaline membrane syndrome. She couldn't breathe on her own so she was taken to a nearby hospital and placed in intensive care. I did not get to see her or hold her for two weeks. When she finally came home, she had hip dysplasia and had to wear two diapers to help develop her hip sockets. Christa is very bright, but was unable to focus or pay attention in school. I took her to a psychiatrist for the first time in 3rd grade. He told us to have teachers separate her from other students to prevent her from talking so much. Her problems continued into middle and high school when she started skipping school. I placed her in a juvenile facility hoping she'd receive some treatment.

I took Christa to see many psychiatrists and psychologists over the years. They all told us she was just lazy or depressed. It was not until Christa had already been convicted of murder and sentenced to death that we finally understood her lifelong struggle with post-traumatic stress and bipolar disorder. If we had known all this earlier, Christa would have never hurt anyone.

I understand things now that I didn't understand when Christa was a child. I understand the clear signs of sexual abuse that Christa began showing as a kindergartener, the dramatic mood swings throughout her childhood, and her inability to focus at school and home. I understand those things now, but I didn't understand then. I did not know how to help her then.

As her mother, it hurts me to know what Christa went through as a child that I didn't protect her from. I wish I believed her when she said she was raped. I wish I had known how to help her then.

Now, I can't help her, and that is very difficult for me as her mother. She has been in solitary confinement for more than 20 years. For more than half of that, I couldn't touch her, not even for a hug. I am not trying to minimize the pain Christa has caused. My heart is broken for Ms. Slemmer's mother and for years I tried to find ways to help ease Ms. Martinez's pain.

But I do want you to understand what I only understood about Christa when it was too late. I want you to understand the abuse and suffering that she endured, I want you to understand that she was undiagnosed and misdiagnosed her whole life. And I want you to understand the Christa that I know now and how much she has changed from the wounded 18 year old girl who committed this crime.

Christa has always been intensely loyal. As a child, that was sometimes misdirected, but now, things are different. Christa's loyalty pushes her to serve others. Over the years, she has helped countless women adjust to prison, she has talked women through the pain of addiction withdrawal, the pain of being separated from their children, and the loneliness of maximum security incarceration. Christa's loyalty means that the women on her pod who can't afford holiday packages or hygiene packages, will have them purchased for them by Christa. Christa has made the lives of the women who temporarily pass through her pod better, survivable, even as she remains isolated.

Christa is artistic. She has become a gifted artist as an adult. Her sketches and paintings are beautiful. They also help her focus and challenge herself in her isolation. She has always had the heart of an artist; she is kind and sensitive.

As her mother, the most important change in Christa's life has been the change in our relationship. I was distracted by work and men when Christa was a child. I did not know how to be a mother to such a difficult child. We are both different now. Christa is a loving daughter. She worries and cares for my husband and me. She has become a caring sister and aunt. My husband and I visit Christa every other week, and, despite the circumstances, those visits fill me with great joy.

Governor Lee, I know you care deeply about your family. I do too. I voted for you and have been proud of how you have served Tennessee. I pray that you will show mercy to my family and to Christa. I can't imagine losing my daughter, not now, when I finally know how to help her. Not now when I can see the good she does for others. Please have mercy on Christa.

Sincerely,

Larissa Hansen

Dear Governor Lee,

My name is Gerard Hansen and I am Christa Pike's dad. I am not her biological father, but I love her as any father would. I met Christa when she was a teenager and I started dating her mother, Carissa. I am now married to Carissa. Christa has been a part of my life for more than thirty years. Christa and I had an immediate connection. We were and are friends. I taught her how to drive a car and even tried to adopt her. She calls me her "Better Dad". I know how kind and caring she is. I have great memories of her and her mother cooking in the kitchen, both laughing and covered in flour.

Christa's teenage years were difficult. We did not know about her bipolar disorder or her post-traumatic stress back then. We did not know how to help her or how to respond when she acted out. I would take her to school, only to have her walk right out the back door. Her moods could change so fast and she could go from very angry to the sweetest, most thoughtful person in the blink of an eye. She slept so much, even more than a normal teenager would and when she was awake she would need to talk, talk, talk. Christa ran away a lot. There were times we drove all over town to find her, but most of the time we did not. We knew Christa was using drugs. We did not know what to do.

But even during these times, Christa could be so kind. She invited friends into our home who needed a place to stay, she tried to protect people who were vulnerable. When she was in school, she sat next to a student with cerebral palsy and helped him eat. She talked of wanting to be a nurse and loved helping Carissa care for elderly patients at her work.

During this time, Christa was raped and became pregnant. I went with her to file the police report. She wanted to keep the baby, but she was afraid that her drug use had harmed the baby. I took her to get an abortion. Christa was devastated.

I don't tell you this to excuse what Christa did. But I am a supporter of yours. I voted for you because you have always said that you are for families. This is my family. Christa is more than the terrible thing she did almost 30 years ago. She is taking the right medicine now and we understand how to help her now. And she has helped so many other inmates adjust to incarceration. She makes sure they have food and basic supplies. She helps them and listens to them. She has so much care to offer other incarcerated women.

I am asking for mercy and leniency for Christa. I am asking for mercy and leniency for my family.

Thank you for taking the time to read this letter.

Sincerely,

Gerard Hansen

Gerard Hansen

STATE OF TENNESSEE
OFFICE OF THE POST-CONVICTION DEFENDER
P.O. BOX 198068
NASHVILLE, TENNESSEE 37219-8068

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Office of the Post-Conviction Defender
P.O. Box 198068
Nashville, TN 37219-8068

37219-806868

Dear Governor Lee,

I am writing to you from Serres, Greece, to respectfully ask that you grant clemency to Christa Gail Pike by commuting her death sentence to life imprisonment without parole.

I do not write to minimize the murder of Colleen Slemmer. The crime was horrific, and nothing can restore Ms. Slemmer's life or erase the suffering inflicted upon her family and loved ones. Ms. Pike was convicted of an extremely serious crime, and I believe severe and permanent punishment is justified.

Nor do I regard mental illness as an excuse that removes criminal responsibility. Ms. Pike was 18 years old at the time of the offense, however, and substantial questions have long been raised concerning her mental health and psychological condition. Those circumstances do not erase responsibility, but they are relevant when the State considers the most final and irreversible punishment available to it.

The central question, in my view, is not whether Ms. Pike should be punished. She should. The question is whether Tennessee needs to take her life in order to achieve justice and protect society.

Life imprisonment without parole accomplishes both purposes. Ms. Pike can remain permanently removed from society and can continue to bear the consequences of her crime for the rest of her natural life. The State can punish her severely without carrying out an execution that can never be undone.

I also wish to make one point particularly clear. My opposition to Ms. Pike's execution should not be understood as admiration, glorification, or romanticization of her or of what she did. I do not consider her a heroine, and I do not believe her crime deserves sympathy.

Indeed, I fear that an execution may unintentionally shift public attention away from Colleen Slemmer and toward Ms. Pike herself, turning the execution into a new historical event centered on the offender. Life imprisonment without parole leaves the moral meaning of the case much clearer: Ms. Pike remains a convicted murderer, permanently removed from society and punished for the rest of her life, while Colleen Slemmer remains the person whose life was unjustly taken.

Governor Lee, I therefore ask you not to excuse Ms. Pike, not to erase her conviction, and not to release her. I ask only that you commute her death sentence to life imprisonment without parole.

After the fall of the military dictatorship in Greece, death sentences imposed upon its leaders were commuted to life imprisonment.

Konstantinos Karamanlis, the conservative statesman who restored Greek democracy, famously expressed the principle simply: when we say life imprisonment, we mean life imprisonment.

That principle captures my appeal to you.

Life can mean life. Justice can remain severe. Society can remain protected. Colleen Slemmer's murder can remain fully condemned.

But the State of Tennessee does not need to execute Christa Gail Pike in order to accomplish those things.

I respectfully ask you to exercise your clemency authority and commute her sentence to life imprisonment without parole.

Respectfully,

George Kokkotas
Geneticist, MSc
Serres, Central Macedonia, Greece

Dear Governor Lee,

I am writing to you again concerning Christa Gail Pike, because the more I think about this case, the more I find myself returning not only to the question of whether her execution is legally permissible, but to the much broader question of what purpose it is supposed to serve now, after more than three decades of imprisonment. I do not dispute the gravity of the crime, I do not dispute Mrs. Pike's responsibility for it, and I do not believe that youth, mental illness, difficult circumstances or the passage of time somehow erase what happened to Colleen Slemmer. She was brutally murdered, her suffering was real, and her family has lived with that loss ever since. Nothing in an appeal for clemency should obscure that.

What I question is what the State of Tennessee actually gains by executing Ms. Pike that cannot already be achieved by keeping her imprisoned for the remainder of her natural life. Life imprisonment without parole protects society, incapacitates the offender, preserves punishment and makes absolutely clear that the crime remains condemned. It requires no one to pretend that Ms. Pike is innocent, harmless, or entitled to return to society. Personally, I am not even convinced that she should ever be released. What I am asking is whether death is necessary when every legitimate concern for public safety can already be addressed without it.

There is also something else that troubles me about the meaning of punishment itself. If punishment has any purpose beyond retaliation, if part of its purpose is to make the offender understand what they have done, confront the consequences of it, develop remorse, change their behaviour or become a different person from the one who committed the crime, then execution seems to defeat that purpose at the exact moment it is carried out. A prisoner serving a life sentence continues to live under the consequences of the crime every day. They continue to remember it, to confront it, to understand it more deeply, perhaps to regret it more deeply, and perhaps to change. An executed person no longer has any opportunity to do any of those things. Death does not complete rehabilitation; it ends it. If punishment means, at least in part, living with what one has done, then I find it difficult to understand why the State, any state in the world, should remove the person who is supposed to continue living with those consequences.

I also believe that punishment cannot be considered only from the perspective of the offender and the victim's family. If somebody murdered a member of my own family in the manner in which Colleen Slemmer was murdered, I cannot honestly promise that I would ask for mercy. I might want revenge myself. I might want the person responsible to die. I would understand that reaction in any family placed in such an unbearable position. But I am one person, and even a grieving family remains one family. The responsibility of the State is broader. The State has to consider the needs of society as a whole, because criminal punishment is carried out in the name

of society as a whole. The understandable demand of an individual for retribution cannot by itself define what justice must mean for everyone.

An execution also does not affect only the condemned prisoner.
Correctional officers must prepare it and participate in it. Other state employees must carry out their assigned roles. Lawyers, clergy, relatives and journalists may witness it. Reporters are brought into a room to watch a human being die and are then expected to describe what they have seen to the public. Whatever method Tennessee uses, an execution necessarily becomes an organised event involving people who did not commit the original crime but who must nevertheless participate in the final act. I think the psychological and moral burden placed upon those people deserves consideration as well. A punishment carried out by the State is not an isolated transaction between the government and one prisoner. It becomes an act performed by society through its institutions.

I have also considered the argument that Ms. Pike's crime was planned, that Colleen Slemmer knew she was in danger, that she suffered for a prolonged period and that the deliberateness and cruelty of the crime justify the most severe possible punishment. I do not equate Colleen Slemmer's murder with a lawful execution, and I would not insult her memory by pretending that the two are morally identical. They are not. But I cannot ignore that an execution is itself deliberately planned, scheduled and ritualised. Ms. Pike knows the date on which the State intends to kill her. She knows that preparations will be made, that she will be restrained, that witnesses will be present, and that a specific procedure has been designed for the purpose of ending her life. The physical suffering may be different, and I sincerely hope that it is, but the anticipation, helplessness and knowledge of approaching death are still real. If those features contribute to our horror at the experience of a murder victim, I believe the State should at least ask itself what it means to deliberately reproduce some of those same psychological conditions as punishment.

I also find the deterrence argument increasingly difficult to accept.
Even among Americans who continue to support capital punishment, a majority now say that they do not believe it deters serious crime.
More importantly, the real comparison is not between execution and no punishment whatsoever. It is between execution and life imprisonment without parole. Ms. Pike can remain permanently removed from society without being killed. Whatever one believes about deterrence in the abstract, there is no additional protection from this particular offender that requires her death.

I have read your public statements concerning punishment, rehabilitation, redemption and the possibility of human transformation, and I do not see any contradiction between those principles and severe punishment. In fact, I believe those ideas have their greatest meaning in the hardest cases. It is easy to speak of rehabilitation when somebody has committed a minor offence. The principle

becomes meaningful when we ask whether someone who once did something terrible must necessarily remain forever identical to the person they were at that moment.

If Ms. Pike has genuinely changed during the last thirty years, then executing her eliminates a human being who has demonstrated that change is possible without erasing the crime that preceded it. If she has not changed, then life imprisonment still protects society completely. In either case, Tennessee does not need to take the risk of releasing her. It simply needs to decide whether protecting society and administering justice truly require her death.

For these reasons, I do not see clemency as forgiveness, weakness, or an attempt to diminish Colleen Slemmer's life. I see it as restraint.

The State can condemn the crime, punish Ms. Pike for the remainder of her life, protect society, recognise the possibility of human change, and avoid imposing another death as the final meaning of this case.

I respectfully ask you to commute Christa Gail Pike's death sentence to life imprisonment without parole.

Respectfully,

George Kokkotas
Serres, Central Macedonia, Greece

Governor Lee,

My name is Glenn Pike and my daughter, Christa, is the only woman on Tennessee's death row. Christa has been on death row for 25 years. She is now 45 years old. When Christa was 18, she and two others killed her classmate, Colleen Slemmer. I don't deny that, and neither does Christa. It was a terrible crime. As a father, I can't imagine the pain Christa's actions caused Colleen's family.

I'm sending this letter to you, father to father, to ask you to have mercy on Christa and spare her life. I know you would do the same if our positions were reversed. Christa's life has not been the life I would want for her, or any father would want for his daughter. But everyone deserves mercy. Most of Christa's time in prison has been in solitary confinement. She is locked in a cell 23 hours a day, sometimes 24 hours a day. She has not touched grass in 25 years. Christa is alone. Imagine this being your daughter's life. And then imagine that one day she'll be strapped down to a gurney or to the electric chair and killed. That is what will happen to my daughter if you don't show her mercy.

I am Christa's father, and I still love her. The past twenty-six years have been hard.

I was not always there for Christa. Her mother and I did not always know what to do for her. I know now that Christa's brain damage and mental illness needed more care and attention that we gave it. But I didn't know that then. I wish I had. I now know that Christa was raped twice as a child. I now know that Christa has bipolar disorder.

Christa isn't the same as when she went to prison. She was a child when she was sentenced to death. The other two who killed Colleen were not sentenced to death. Both will walk free one day, but Christa never will. Prison has changed Christa. For one thing, it took going to prison for her to be diagnosed and medicated correctly. That diagnosis has changed Christa for the good.

I am not asking that you free Christa. I am asking that you change her sentence from death, to life without parole. I know she has to be punished for what she did. She has been punished, and continues to be punished. But she was a child when all this happened. She was a child whose mental illness, undiagnosed and untreated, had control. A sentence of life without parole would be merciful, and more in line with the other people involved in Colleen's death.

I love my daughter. I hurt for the pain she caused. But we all deserve mercy. I was not always there for Christa, but I am trying to be now. I am asking you, father to father, to spare my daughter's life.

Glenn Pike

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee,

Hello my name is Kasey Raines , I am now a case manager for the 8th Judicial Recovery Court and also a Certified Peer Recovery Specialist in the state of TN. I have been in bad situations, worse situations and then good situations. Life shows us many different levels of emotions. When we're up, we're up and when we're down we are just waiting to be up again. With this being said, we are all human and we all fall short to the glory of God, every single second of each day.

Here is a little bit of my story and why Christa Pike is still a human loved by our God. I don't believe for a second she is the devil, paparazzi and news clips say a lot of things to persuade the publics opinion. That's why they get paid for the news, it's their story , and it works. It was October 2014 when I was sent to (TPFW). Not because I had committed a huge crime but in Fentress County Jail, if your pregnant the jail administrator Candy Norman find it fits best to send you to prison where you are locked down 23/1 with no contact with anyone else and you will stay in that spot as a (safe keeper) until you have your baby and get a new court date. (I was a previous drug addict and could not stay sober, today I have been sober around six years.)

There are no words to describe the depression I was in when they locked me in that room alone. I was three hours from my family, I was scared, I had nothing. Nothing to do besides cry and write on free paper they had given me. It was probably one of the most darkest times of my life honestly. Then I heard probably the sweetest little angel voice light up the room , and I know that sounds cheesy, but when you literally wish that you weren't there and that being dead would be better than that place at the time, and then some stranger who you have never met in your life, just like everyone in there, complete strangers. They threw me in suicide cell besides Christa for a bit and she was hollering to me because she was worried about me. I wasn't suicidal but it was the only open place at the time. Thankfully because I just cried and cried. I couldn't have a hair bow when I came in, Christa made sure I had one , not a big deal to some but little things like that matter a lot. Christa was very concerned about the baby I was pregnant with, she made sure that we didn't go hungry. She done several other mothers-to-be the same way. (My little girl is now 7.) My mother didn't have a lot of money to spare while I was in TPFW. I had no contact with my family for four months other than mail, but thanks to Christa , my mom knew that I was alive and well and that the baby was doing good. Christa let me read several of her book series, such as harry potter etc. Like I said before not a big to some people but if you were in the same room for that long a book to get lost in would be life changing. For a second I didn't have to be stuck there in that horrible place. Christa never caused any trouble, we had the poop throwers, the cell flooders and the fire starters. Christa never participated in those things and she also taught me not to join into that as well. You would have really had to have been there to know the

impact Christa has on new inmates who are scared and hopeless. She has encouraged women to stay clean for their children, "never come back here, you have a chance to live a good life outside of here." Christa only hoped and dreamed to get to walk somewhere freely, get to see the beauty of nature, yet she is trapped in a jar like a butterfly who has just been caught by a small child, not know the harm it does to the butterfly and letting it stay locked in there for so long. I am not saying Christa didn't do something heinous and criminal but I am saying she's not the only one and yet she is being punished with death. She loves each person she meets and child too and helps to care for people as they are her children, what kind of evil person would do that? She would go out of her way to make pizza on a lamp to feed me "so my baby I was carrying would not be hungry". People make mistakes, sometimes worse than other, but Christa has never seen the light of day since her mistake and I think she deserves a chance to. Killing someone else for revenge is not the answer. That's two lives lost. Christa is a very caring, kind person and I wish you could get to know her as much as I did in such crappy circumstances. She is really not a monster, she a human with a heart. She would give you anything she had if it made you feel better. To some people she is all these bad things, but the Christa I know is a kind person, a loving person. Thank You,

Kasey Raines
Case Manager
8th Judicial Recovery Court

December 12, 2024

Dear Governor Lee,

I, Kelli Allen, am a Recreation Therapist at Debra K. Johnson Center (DJRC), who worked with Christa Pike, April 2023-August 2024. I returned to DJRC in October 2024, resuming my position and working with her again. I am writing this letter to you as a clemency request to change her sentence from Death Row to Life Without Parole.

Working with Ms. Pike I spent many hours at cell side and in 1:1 recreation therapy sessions discussing various topics ranging from therapeutic, reminiscing of family/events, art ideas, joking, health and wellness, and more. We've played games, listened to music, and on occasion incorporated movement and relaxation. Nearly anything within my scope of practice as a Recreation Therapy professional, policy permitted material and time we explored to aid in supporting her sense of humanity.

Throughout Ms. Pike's incarceration she has encountered many challenges. One of the most important to mention is limited engagement with other offenders. I share this due to the importance of obtaining social engagement with others as a human need. There was even a period of time we were not permitted to meet for sessions in the multipurpose room together and were required to meet in the no contact VG (visitation gallery) on the unit. Due to this discrepancy she declined to meet outside of her cell considering she already had the privilege to meet in the same room with therapists. After changes occurred, we began meeting in person again verses through the door of her cell. Ms. Pike is a kind, thoughtful, and social individual who longs for engaging with others on the unit/compound, whether during outdoor recreation, lobby, or work. Though she is grateful for a select few offenders to engage with I advocate in hopes that Christa Pike will one day receive the same opportunities as other offenders including educational programming. She is intelligent and has a desire to learn and help others.

During the time I have spent working with her and engaging in conversation I learned who Christa Pike is, not defining her by her sentence or crime. Ms. Pike demonstrates encouragement, motivation, compassion, and hope to others in moments of despair/distress; expressing concern for those who are experiencing health issues, lack of support, and in emotional states. Considering her extensive time in restrictive housing she has compassion for others who have been limited and experience the emotional, physical, and dehumanizing impact of isolation and reduced human connection. She would be a great candidate to mentor, provide help in the assisted living pod since she is able bodied, and can provide aid with other unit tasks as well. This can be accomplished by reducing her sentence off of death row to life. She may be able to positively impact other individuals returning to the "free world." Let's grant her the chance to shine in such a dim place.

Christa Pike is not her crime. As a human, even being imprisoned, everyone deserves the opportunity to socialize and be in the presence of others. She is caring, spreads hope, displays resilience, is an excellent advocate and displays exceptional patience. Governor Lee, I ask you again to please consider her growth, her case, and her opportunity to be granted incarcerated freedom with life, not death row.

Thank you for your time to read my letter of recommendation and gracious consideration.

Kind regards, Kelli Allen, CTRS

Kelli Allen, CTRS (Recreation Therapist at DJRC)

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Governor Lee,

My name is Kristina Hargis and I was employed at the Swannanoa Juvenile Evaluation Center (JEC) for 23 years. Christa Pike was one of the girls I worked with at the Juvenile Evaluation Center.

I had been working at the JEC for a couple of years before I met Christa. At the JEC, I worked with groups of girls as a behavioral technician. I would interact with these girls for hours every day and meet with each of them one-on-one every week as their counselor.

As I got to know Christa as her counselor, I saw that she was a bubbly, kind girl. She was curious and engaging. Christa was a girl trying to find her place in the world. She and I would have discussions about spirituality and my Christian faith as Christa sought out answers for why things happened in her life. Christa was looking for support and stability in the world around her and when she did not have stability in her home or family life, she looked for answers as to why she did not have what she needed.

Christa was a child whose psychological needs were not addressed or helped in her home environment. Christa struggled with depression during her time at the JEC. She also seemed to show some bipolar disorder symptoms as she showed mood shifts not typical of a teenage girl. Christa would be euphoric and lively one day and somber and depressed another day.

When Christa was at the JEC, we employed a point system that awarded students for good behavior and took away points for poor behavior. Even though this was the general policy, I tried to take a more therapeutic, restorative approach with the children. I believed in the value of relationships with the residents, and I saw how the children showed more progress and had better behavior when they were treated with individual care instead of punitive measures.

Christa responded well to the therapeutic approach I could offer. When I had conversations with Christa, I grew to understand her. Christa was open and willing to grow and improve. Though she had psychological struggles and resulting behavioral difficulties, I could see that Christa was a good child who was trying to find her place in the world. I never saw Christa act aggressively or violently. She was trying to figure out how to heal from her traumas. She was trying to figure out how to cope with the difficulties of her life when she lacked a support system.

In the years after Christa's time at the JEC, we shifted to a more therapeutic approach. More counseling was available to the children, and they also spent more time meeting with a psychiatrist. Staff were provided with three weeks of training in providing a therapeutic approach to the children. I wish that this approach had been fully implemented when Christa was in our care.

When Christa left the JEC, I knew that she was returning to an unsupportive environment. JEC staff were not allowed to communicate with residents for one year after they left the facility. A year after Christa left, she wrote a letter to me. She shared that she

would be visiting Asheville soon and invited me to meet up with her. I wanted to meet up with Christa because I believed in her and I was concerned about the family environment she had returned to. I was excited to catch up with Christa and see how she was doing, but never had the opportunity because Christa was arrested. I was sad to know that Christa was still looking for support and connection right up until her crime occurred.

I wish that Christa could have received the care and support she needed as a child. I wish that her mental illnesses had been identified and better treated in her youth. I wish that Christa could have received restorative care throughout her life instead of abuse and punitive punishment.

I remember how well Christa responded to a therapeutic approach. I have no doubt that in prison, she will similarly thrive when shown grace instead of receiving punishment without being understood. I hope, Governor Lee, that you will see Christa as a woman with potential. I hope that you will seek to understand Christa, her background, and the factors that shaped her before you allow the most irreversible punishment against her. I hope that you will see that she is caring, she is complex, and that she has value. Governor Lee, I ask and I hope that you show Christa Pike grace and grant her clemency.

Respectfully,

Kristina Hargis

To The Honorable Governor Bill Lee, April 9, 2021

I am currently an inmate at Debra K. Johnson Rehabilitation Center (D.J.R.C.) in Nashville. I am writing this on behalf of Christa Gail Pike #261368 who is currently on death row. I'd like to ask that you look past the fact that I am incarcerated when reading this. I am an inmate; however, I am also a woman who understands the importance of seeing people as the human beings that we all are no matter our current label. Much like the way you have spoken of the incarcerated in the past. All I ask is that you hear me out as this is, literally, a matter of life and death. Christa Pike is Tennessee's only female inmate currently sitting on death row. I am asking that you look past her crime and her choices she made as a young adult. I would like to tell you about the *woman* she has become in spite of sitting on death row.

Christa is currently housed in the maximum security section of the prison. She spends 23 hours a day in her cell with only an hour out for recreation and the opportunity to shower three times a week. She is 44 years old and has been living this way for over 26 years. Most prisons have programs for death row inmates where they can work their way to earning time out of the cell on the maximum security unit. The men's prisons seem to understand the benefits of this process. They understand that the ability to earn time outside of the 4 walls that house them promotes good behavior. D.J.R.C. offers no such programming.

Christa's crime was picked up by the media where she was portrayed as a monster. Her charge partner, who was recently released from prison, has now recanted his initial statement and also admitted that he committed details of which he previously accused Christa. She was an 18-year-old girl who was thrown into prison with the notoriety of being "evil". She believed it, once again, proving that her mind was that of every other young girl, believing that you are the identity of the label given to you because of your choice. Christa did make bad choices, one of which was tragic and took another's life- yet of the hundreds of women who have made similar choices that are incarcerated she is the only one who is on death row. Similar again to these women who committed murder she has changed over the years. The Christa you will meet today is a far cry from the one who walked through the doors from the beginning. Christa is a source of light in a dark place. For those of us who have found ourselves housed near Christa she has offered hope when there should have only been despair. In a time of pain and struggle, Christa's small voice rings out to let you know that you are not alone. Ironic that a woman that the state has isolated for decades rushes to help others not feel by themselves. I think that it should be known that the only woman sentenced to death is who helps you to find strength to get through whatever the situation may be that you are facing so that you can live your best life.

Christa is respectful and well-mannered. She offers wisdom freely and serves as a light that won't go out no matter how bad or bleak things get. Christa offers this encouragement when her own situation looks hopeless. She does it even as Warden Gloria Fisher tells her that she would pull the switch herself if she could because Christa refuses to give up hope. She has worked to be the best version of herself that she can be even though she is sentenced to die. That is just who she is. She takes the bad and makes the best out of it. She helps others around her to see past their environment and situations. I believe that it takes a special person to be condemned to death yet help others around them see a light. Christa is that special kind of person.

My mind has the hardest time comprehending how the same state that calls for rehabilitation and recognizes that change is possible has decided that killing her is somehow going to make things better. The state has decided to just waste her life. Why can't we show her the same grace we show others who have committed the same act? Why can't we allow her live and continue to touch the lives of those around her making the world a better place? Governor Lee, you have the authority to stop this cycle of pain with her. Allow her to make beauty from the ashes. Christa has paid for her crime. There is no greater punishment than over 20 years of being confined to a box. Full body restraints whenever she goes outside of her 8x10 foot cage. Can you imagine that kind of life?

I am writing this to you because the woman who I have told you about who inspires others to have hope when they are struggling needs someone to have hope for her now. She has attempted suicide multiple times because the 26 year fight has taken its toll. She is exhausted. It has finally become hard for her to continue to shine her light when you're day to day life is just waiting to be told when they're finally going to kill you.

I am not asking that you pardon Christa for her crimes. I am asking that you would commute her sentence to one of life imprisonment where she could be allowed to make a difference. I am asking that before you make the decision allowing the state to follow through with killing her that you would meet her. Talk with her, ask her about her life. Find out what she's gained from the negative. Ask her why she made the choices she has made and what she would do different. I am asking that you meet the woman Christa is today as opposed to continuing to look at the adolescent's choices that sit on paper before you. We so often look at the crime itself without taking the time to find out the cause. We don't look at what they may have went through in their life to allow them to make the choices they made. And should a person have to die to be brought to justice? Why can't we choose life? I am asking that you let her amend her crime by helping

those around her. Let her amend her crimes by being the best that she can be and help those around her be the best they can be. She sees the best in people. The woman you'll find if you choose to look is worth saving. You don't find yourself in a position everyday where you can help fix a broken system and show someone the grace we all hope to be given at some point in our lives. None of us are without and choices we wish we could take back, things that we have done that have a consequence to face.

On a personal note, I know you don't remember me; however, I remember you. I went to your church as a kid. It was the one in the school. I can't remember the name of it. I remember when your first wife died in the horseback riding accident. I went to the funeral with my family. I remember when I saw you on the TV for the first time and recalled how I knew you. I remembered that you were kind even though you could have looked down on others because of how well of you were. You were just down to earth. I know in your position today you have to look at things from political perspective, things that the majority of the voters would look at in certain ways. I am asking the man that I remember when I was a kid to make this choice. If I could invite all of your voters to meet her, too, I would. Please take the opportunity to meet her before you choose to not intervene and allow the state to kill her. If after meeting Christa you decide that the good doesn't outweigh the bad then I can do nothing but respect that choice. It will hurt nothing to take the time to do this. Take time to ask some of the staff that have done all these 20+ years with her. Ask some of the women who have done time with her and have been impacted by her. You would be surprised as well as impressed.

Thank you for your time and attention to this urgent matter. I pray that you will take into consideration what I have said.

Respectfully,

_____

Lauren Delfino

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee:

I have known Christa Pike since we were both young girls. Since we first met, we have been close friends and were constantly together when we were teenagers. I gravitated towards Christa because she drew me out of my shell. Christa was goofy and kind, always bringing joy to groups. I was shy, but Christa made me feel included when we were with other kids. When we spent time one-on-one, Christa's caring demeanor helped me open up and feel comfortable sharing. Christa made relationships feel more welcoming to me and she made life fun.

Even though Christa brought light and joy to my life, I could tell that she faced very dark things in her own life. Christa was dealt bad cards and had to face messed up situations that no child should deal with. Christa's mother, Carissa, was a drunk. Since I first got to know her, I knew Carissa to constantly be drinking. She always had a beer with her and she would frequently be drunk around me and Christa.

Carissa was a sloppy drunk, losing control of herself and losing all sense of responsibility when she had too much. Carissa would become easily frustrated when she drank, coming after Christa to yell at and punish. Carissa also let Christa and her friends drink with her, even though we were all underage. She would offer alcohol and weed to me, Christa, and other children who were at her house.

Carissa always had different boyfriends around her house. One of her boyfriends, Steve, abused Christa. I saw Steve put his hands on Christa. Once, Christa came over to my house and showed me that she had bruises on her breasts in the shape of Steve's hands. Because Carissa did not take any action to protect Christa from her abusive boyfriend, my sister had to go over to her house and convince Carissa to leave Steve because of how badly he was abusing Christa.

Christa was clearly impacted by what happened at home. Christa missed school regularly and ran away from home when she was twelve or thirteen years old. Carissa wasn't looking out for Christa and didn't guide her to be more responsible. When we were teenagers, Christa was more promiscuous than most other girls.

The way she acted around men showed me that she didn't know how to respect herself and her body, something that her mother should have taught her. I'm not surprised that Christa struggled to have healthy relationships with men because I knew her mother. I remember visiting Christa's house and finding graphic pornography lying around the house. I can only imagine what happened to Christa behind closed doors in this home where pornography was not hidden and where men like Steve were given free rein to do what they wanted to a young girl.

When Christa went to Job Corps, she was trying to leave her abusive home and make something of herself by becoming a nurse. Christa was vulnerable to abusive men, so

it did not surprise me that Tadaryl found Christa. Tadaryl was physically and mentally abusive to Christa. He manipulated and controlled Christa by lying, threatening, and hurting her. Her personality was dampened when she began dating Tadaryl. One time when I called Christa at Job Corps, I tried to confront Tadaryl about his abuse towards Christa. He was said that he was holding a blade in his hand and told me that he could think of a thousand ways to kill me—I was terrified so I hung up the phone.

Nothing can excuse that Christa took someone's life. However, I believe that Christa's life story helps to explain why she has ended up where she is. Christa is a flawed person who has tried to make the best out of horrible circumstances. I know Christa and I believe her when she has told me how much she regrets her decisions. If her sentence is commuted to life without the possibility of parole, Christa will continue to make the best out of bleak circumstances. Like she brought light and joy into my life, I know she will do the same for the women in prison with her. Please spare Christa's life and grant clemency. Thank you.

Sincerely,

Mandy Staley

Mandy Staley

Dear Governor Lee,

I met Christa Pike in 2017. My daughter, Teddy, got in trouble and went to the county jail. This was a desperate and scary time for me. Christa Pike was an unexpected source of comfort and strength for myself and Teddy during this time.

The county jail couldn't house Teddy because of her rare heart condition. Teddy was sent to the maximum security unit of the Debra K. Johnson women's prison to receive better medical care. But the medical care was not better. I couldn't get them to understand that she was on medication that not just any doctor could get and she would die without it. I was terrified. My little girl had never even been to jail before. This was new territory for me and I had to figure out how to get her basic necessities because they wouldn't let her take anything with her from the local jail. She was sent to the prison with only the uniform on her back. They wouldn't even let her take her medication that the nurse at the county jail had been administrating daily.

I tried to place an order through the prison supply company to get her basic necessities such as underwear and socks, but something went wrong with the order. Teddy arrived at the prison without clean underwear, clothes, toiletries, or sanitary products.

As far as her life sustaining medication, it took me 3 months to finally get the prison staff to understand her medical issue and her medication. You could never reach anyone at the prison by phone. I didn't even know where in the prison she was housed and she couldn't call till almost 2 weeks later. After 3 letters from Vanderbilt Pulmonary Clinic to the Warden at the prison, her case worker called and asked me to send her medicine.

I knew that Christa was in that prison. I remembered when she went to prison and of course I'd seen all the media coverage about Christa and the murder of Colleen Slemmer. It had been big news in Tennessee.

When I finally got to visit my daughter, Teddy, she told me she had managed to get up high enough in her cell to look out her cell door window. When she did, Christa Pike, who's also really small, was looking at her through her own cell window.

I had told Teddy what I knew about Christa from the news when I found out they were transferring Teddy as a safe keeper. Safe keepers were housed in the maximum security unit.

Maximum security is on lock down in their cells 23 hours a day. Teddy had to be escorted to the shower and spent 1 hour a day outside in a dog rum where other inmates were also in separate runs/cages. During a visit, Teddy told me while she was waiting on the guards to come take her to the shower one day and Christa yelled "you

better not get in that shower with no shower shoes girl!" I was terrified for her. Teddy said a few minutes later her pie flap opened and a guard stuck a brand new pair of shower shoes in to her that Christa had sent over to her. On the bottom they were signed "Love Christa Pike". I was so scared of what she might do to Teddy who's very small and timid. I had only seen how the media portrayed Christa. Teddy was very appreciative for the shoes and said Christa seemed nice. I assumed that Teddy was naive to the ways of these type of hardened people and that she was confusing manipulation for kindness. Teddy had always just wanted a friend.

After our visit was over I cried so hard on the way home. It was hard to see how to drive. My child was there in that place with people I thought were evil. There was constant screaming and intimidation from other inmates. She didn't feel good. She was afraid, and I had to leave her there with a convicted murderer straight across the pod from her. I racked my brain trying to think of what to do while day after day making calls trying to figure how to get her meds to her. I worried about how to deal with this murderer who had made contact with my daughter.

The only thing I knew to do was appeal to her from the heart of a mother so I sent Christa a beautiful thank you card thanking her for extending such a kindness to my child. I told her that she had eased a worried mother's heart. I was hoping it would touch her in some way and she wouldn't terrorize my child. A week or so went by. I hadn't heard from my daughter. In the mail came the most beautiful letter back from Christa.

Now I know just how much Christa did to care for Teddy. Before Teddy got her package from me with underclothes and toiletries (which took 3 months), Christa had given her a bra, panties, socks, shampoo, and snacks and anything else she needed. Christa even had the guards take Teddy her radio and headphones and Christa's limited pencils and paper to help Teddy pass the time without a TV.

Anytime Teddy was sick Christa would pester the officers until they sent a nurse to see Teddy. She wouldn't allow anyone to mistreat Teddy. She was Teddy's constant advocate. Christa told Teddy she wanted to meet me so Teddy and I would plan visits at the same time as Christa and her family. We were in separate locked rooms around the corner and down the hall from each other but I could see Christa through a mirrored reflection around the corner and we could yell back and forth. When Christa cares for someone she wants that person to meet her family and be a part of her life as fully as they can. I did that. Christa's mother and I had lunch and remain friends to this day and I correspond with Christa's sister who lives in Hawaii.

Once Teddy's court case was done, she had to spend the rest of her sentence in general population of the prison. It was 2 or 3 months and I was scared to death all over again because she wouldn't be where Christa could help her or take care of her. Teddy

left there in 2019 and Christa has kept in touch all this time and never asked me for a thing. I try to send her books through Amazon as best I can.

Christa calls once a month on her own dime, sometimes more often. She's been there for me through so much. When she calls she never complains about her life. She's almost always in a good mood because she doesn't want to worry anyone or bother them with the gloom she lives with daily. She wants to hear about every single mundane detail of our lives. We've laughed together and cried together. She's always so happy for me no matter what her circumstances are. She loves animals and even has her own chickens here and I let her name them and I send her pictures of the chickens and other animals and the flower gardens. This is her only way to have a life outside prison. I was finally able to have an actual visit with her a couple months ago after all these years and we talked non-stop like I had known her my whole life.

I love Christa Gail Pike and a part of my heart will be lost if she were put to death. This woman, Christa, gave all she had to give to a perfect stranger, my Teddy, who was scared, sick and alone in a very scary place. Christa loved, befriended, fed, clothed and cared for my child when I could not reach her. She eased my heart, the heart of a terrified, worried mother.

Christa is a beautiful soul who did a really bad thing when she was very young. The legal age of a person should not be used to concretely define maturity. She was far too young and had been so gravely abused and misled by so many. It's just unfathomable to me that the person she is today could have or would have done this awful thing. She is not that person anymore. God is the only one who should be able to decide when she departs from this place.

Governor Lee, I pray you will commute Christa's sentence and spare her life. I pray that you will show her the compassion and mercy that she showed to my Teddy and to me.

God bless you.

Marcy Graves Wilson

Marcy Graves Wilson

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee:

I met Christa Pike when she was a child in my GED class at the Juvenile Evaluation Center in Swannanoa, North Carolina. Throughout my career, I taught hundreds of students. I am reaching out to you, Governor Lee, because Christa was a standout among my hundreds of students. I write to you to share my experience with Christa and ask that you grant her clemency.

When Christa first arrived in my class, she demonstrated some of the normal defiance that students showed. Since the students at Swannanoa had behavioral issues and came from difficult backgrounds, they were defiant when they first came to my class. They would push back against directions and try to figure out who was in charge. Unlike other students, Christa quickly learned to respect my authority. She began to work with me, rather than against me, which made her stand out from my other students.

Christa stood out to me because, even in difficult circumstances, she was able to set goals and meet them. While many students did not complete their GED, Christa set out to get her GED and succeeded at this goal. Christa was one of my most intelligent students and was assigned to be in my class based on her academic achievement test scores.

It was clear to me that Christa wanted to learn and grow. When she was given more responsibility, she rose to the challenge and looked for ways to help others. Christa showed honorable, respectable conduct. I recommended Christa for a teacher's aide position, something offered to a limited number of students, and Christa then worked as my teacher's aide. When I was focusing on other students in my classroom, Christa helped other students with questions. Christa was sensitive and caring towards her classmates, even if they were troublemakers.

Christa was responsible and never broke my trust. She was reliable and always finished the tasks I assigned her. I knew that I could trust Christa to be where she needed to be and do what she needed to do. It was clear to me that Christa thrived when she was given support and that she wanted to better herself and those around her. Christa was a good kid.

I do not know many specifics about Christa's family and home life, but most of the students at Swannanoa came from chaos and instability. All I understood from treatment team meetings about Christa is that her family didn't want her. I was impressed by Christa because I could imagine the sort of environment she came from.

I believed that Christa, more than most of my other students, would be a productive member of society after she left Swannanoa. Because I saw her thrive and grow when she had a consistent and supportive authority figure, I know that Christa should have had a stable and productive life. Christa was a wayward teenager, clearly coming from difficult

circumstances and she showed incredible potential. Christa cares about others and clearly wanted to improve herself and the environment she was in.

I never expected Christa to commit such an egregious crime. I am sad that she took someone's life and disappointed that she has spent her adult life in prison. I remember Christa because she transcended her circumstances and worked to become better, something that her past and her environment at Swannanoa made difficult. I have no doubt that Christa will continue to look for ways to grow and change for the better if she spends the rest of her life in prison. If you grant Christa clemency, others will reap the benefits of her perseverance and hope. Please commute Christa's death sentence to life imprisonment. Thank you.

Sincerely,

F. Marshall Muse

F. Marshall Muse

J. Matthew V. Martin

May 10, 2024

The Honorable William B. Lee
Governor
The State of Tennessee
600 Dr. Martin L. King, Jr. Boulevard
Nashville, TN 37243

Re: Christa Gail Pike

Dear Excellency:

The District Court of Orange County, North Carolina appointed me to represent Christa Gail Pike in her juvenile delinquency proceeding in the early 1990's. In my view, this proceeding was the most pivotal event of Christa's sad childhood: a North Carolina event which set in motion a chain of circumstances inexorably leading to a disturbing and terrible Tennessee murder. I regret to tell you, Governor, that we in North Carolina–myself included–failed Christa.

We missed so many off ramps which could have saved Christa as a child. What if we had removed her from her mother as a toddler and placed her in a loving, warm, and safe home? We now know that intervening in the lives of maltreated infants and toddlers prior to the age of three leads to significantly better outcomes later in life. Christa was surely maltreated as an infant and toddler, both by her mother and others.

What if the Orange County Juvenile Services Office had recognized that Christa was the adolescent survivor of childhood sexual violence and other abuse? She certainly suffered that trauma—the medical record of a sexually transmitted infection at age 13 remains a stark reminder of her childhood rape. What if these officers had given her protective services instead of pushing for punishment?

What if I had done a better job advocating for her before the District

Court to go to Camp Woodson, a more service oriented placement, and to have a full psychiatric work up? What if Judge Peel had not sentenced her to the custody of the Division of Youth Services? And finally, what if the Division of Youth Services had not encouraged her to fill out the paperwork for the Job Corps?

At every step of the way, at every juncture, the constitutional officers and agencies of the State of North Carolina responsible for serving Christa and helping her become a successful member of the community were at best ineffectual and at worst disastrous.

When Christa was charged with murder in Tennessee, I reached out to her lawyers and offered to help in any way I could. I did this not just because I felt a continuing duty towards her, but also because I knew then and still know today that Christa is worth saving. I wanted to share with them that I knew her to be a bright, charismatic teenager. As I put it to her lawyers at the time: I always found Christa to be a very pleasant and engaging girl. She is so much more than the darkness which has followed her from childhood into adulthood.

Governor, please extend clemency to Christa and take her off of death row. There are many scales of justice in this case, but I can tell you Governor, by this act of grace, this affirmation of life, of personhood, the State of Tennessee will right some scales that its sister state never could.

Sincerely,

J. Matthew V. Martin

/JMVM
cc: Ms. Anna Senft

March 20, 2025
Governor Bill Lee
State Capitol, 1st Floor, 600 Drive
Martin L. King Blvd.
RE: Death Row Inmate Christa Gail Pike

Dear Governor Bill Lee,
Hello. My name is Nancy Dahlhauser. I am writing on behalf of death row inmate Christa Gail Pike. I am respectfully asking you to consider granting Chirsta a pardon or commute her sentence to life with the possibility of parole. I firmly believe that Christa poses no threat to society and could also be a productive member of any community.
I first met Christa almost thirty years ago. I volunteered to visit Christa because she had no family members living in Tennessee. In time, Christa and I formed what I'd like to consider a strong friendship. Although Christa was reluctant to share any details of her childhood with me at first, she eventually confided in me. She told me that when her mom worked at a nursing home, she would go with her and spend time with the patients. She would read the Bible to them, help feed the more disabled patients, and visit with them. She said she wanted to become a nurse, to be a healer, and is still baffled as to how things took such a terrible turn. She talked about spending summers with her grandmother in West Virginia, helping care for the farm animals and learning to cook. She had hopes and dreams just like the rest of us.
The Christa I first visited was a confused and troubled young woman who seemed to be in denial about her crime and the pain it has caused others. The Christa I know now has matured into a compassionate individual who feels genuine remorse for her crime. She has told me repeatedly that she would trade places with Colleen Slemmer so that her mother May Martinez could have her daughter back.
Christa was barely an adult when she participated in the murder. She was suffering from undiagnosed mental illness that she and her family had been dealing with for years. Christa is also a survivor of childhood sexual abuse which I believe contributed to her mental and emotional decline. Although this does not excuse Christa's behavior, it does explain some of it. As a survivor myself, I can attest to the fact that untreated childhood abuse can lead to dire consequences. Unfortunately, the prison system is filled with survivors of child abuse and neglect who did not receive the help they so desperately needed.
Thank you for your time and consideration. If you would like to discuss this further, I can be reached at nancydahlhauser@gmail.com
Most sincerely,
Nancy Dahlhauser
Nancy Dahlhasuer
2534 Main Street
Greenbrier, TN 37073
(615)516-5824

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee:

Christa Pike was an energetic, fun teenage girl. I met Christa when we both worked at Pizza Hut. We had mutual friends and began hanging out all of the time. Christa was easy to spend time with. She was outgoing, funny, and kind towards me and our friends.

Christa and I became even closer over time, and we began dating. As I got to know her better, I saw a different side of her than I saw when we were first friends. Christa felt safe around me, so she could let down her guard. Christa was calm and peaceful when we were together. I learned that the talkative, extroverted side of Christa that I saw in public was one way that she tried to protect herself. She was always looking for security and safety in the people around her, and when she found it, she was mellow and sensitive.

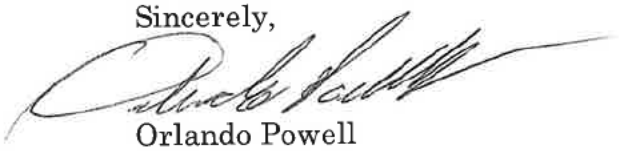
Christa shared with me about her family, specifically her mother. Christa never wanted to go home and didn't feel safe with her family. Christa's mother drank and didn't seem to care what Christa was up to. Christa had to find people who cared about her and looked out for her outside of her home. I met Christa's mother once when I brought Christa by her house to pick up clothes, since Christa had been staying out with me for days. Christa seemed ambivalent towards Christa, not caring that her daughter had been gone for days. After meeting Christa's mother, I understood why she spent so much time away and looked for safety in other people.

Christa decided to go to Job Corps to better herself. Christa is caring and wants to help other people. She hoped that going to Job Corps could help her get a job as a nurse or find another career that allowed her to give back to her community.

Christa left for Job Corps after I got another girl pregnant. Though I still wanted to continue our relationship, Christa wanted to distance herself so that she didn't get between me and the girl I had gotten pregnant. I beat myself up, wondering if there was something I could have done to convince her to stay. If she hadn't gone to Job Corps, I know that Christa would have made a fine life for herself. I was shocked when I heard what Christa had done. The Christa Pike I saw on the news was not the Christa I knew. It hurt me to know that Christa took someone's life and that she had strayed so far from the girl that I knew. I would have gone to her trial and told the court about her family and about her character but I was never given the opportunity.

Christa Pike means a lot to me and she means a lot to other people. I don't want to miss another opportunity to share about the Christa Pike that I knew. Governor Lee, I hope that you can get to know the caring, thoughtful side of Christa. I ask that you see Christa for everything that she is and commute her sentence to life in prison.

Sincerely,



Orlando Powell

Stephen A. Ferrell and Luke P. Ihnen
Federal Defender Services of Eastern Tennessee
800 S. Gay Street, Suite 2400
Knoxville, Tennessee 37929-9714

July 12, 2026

Re: Christa Gail Pike — Scheduled Execution September 30, 2026

Dear Mr. Ferrell and your colleagues,

I am writing to you as a Licensed Clinical Social Worker with thirty years of clinical practice, including extensive work with traumatized individuals, violent offenders, veterans, survivors of childhood abuse and neglect, and school-aged children presenting with early-stage conduct disorders. I hold a Master of Social Work degree and am a retired Licensed Clinical Social Worker who also served the Department of the Navy. I am currently completing a book on the developmental origins of human violence — a work that examines, through the lens of contemporary neuroscience, attachment theory, and the landmark ACE research of Felitti and colleagues, how the architecture of violence is built in developing nervous systems long before the acts that define an offender in the public record.

In the course of that research I have studied the case of Christa Gail Pike in depth — reviewing court records, appellate filings, documentary material, post-conviction evidence, and firsthand interview accounts including interviews conducted by Ms. Pike herself. I am writing because I believe her scheduled execution on September 30, 2026 represents a profound miscarriage of justice — not only in the legal sense your appeals have addressed with great skill, but in the clinical and neuroscientific sense that I am uniquely positioned to articulate. I offer this letter as a clinical perspective that may be useful to you in any remaining proceedings, and I am prepared to provide a formal written statement or expert declaration if that would be of assistance.

The neurological picture — damage before the first breath:

Christa Pike's damage began before she was born. Her mother's alcohol consumption during pregnancy produced organic brain damage confirmed in post-conviction neurological assessments by Dr. Jonathan Pincus. She was born prematurely — itself a risk factor for neurological vulnerability — developed hip dysplasia at birth, experienced chronic nosebleeds throughout childhood suggesting constitutional hematological vulnerability consistent with the thrombocytopenia her attorneys have cited in challenging the lethal injection protocol, and developed a seizure condition as a small child indicating neurological disruption at the most critical period of brain development. The architecture of Christa Pike's nervous system was compromised before she drew her first breath. This is not background detail. It is the foundation of everything that followed.

The developmental history — a catalogue of systematic failure:

Her mother married four times. The household Christa grew up in was one of chronic instability — her parents' marriage lasted approximately two years, and she was bounced repeatedly between her mother and father across her childhood, belonging fully to neither. Among the households she was placed in during those years of instability was that of her

maternal grandmother — a woman who was herself an alcoholic and who provided neither love nor protection. Unlike the paternal grandmother who genuinely loved Christa and who served as her sole consistent source of warmth and safety, the maternal grandmother offered only another environment of inadequate care. Christa did not find safety there. She found another adult whose own condition left her unavailable to the child she was supposed to be caring for.

Layered onto that prenatal and perinatal damage were the following documented adverse childhood experiences, each of which the landmark ACE research of Felitti and colleagues has demonstrated produces measurable dose-dependent damage to developing nervous systems.

Sexual abuse — beginning, by Christa's own account, before she could walk or talk, perpetrated by a trusted adult in her paternal grandmother's household. A guilty plea on record — Claude Davis — confirms at minimum one documented instance of child rape when Christa was eleven years old. Christa has also alleged that her biological father sexually molested her — an allegation unverified in the public record but consistent with the overall pattern of abuse documented across her developmental history.

Physical abuse — by her biological father, who beat her with a leather belt up to six times a day, with beatings that became increasingly severe as she grew older, confirmed by Dr. Pincus's post-conviction testimony. By her mother's fourth husband, who regularly whipped her with a leather strap attached to a wooden handle, confirmed in the post-conviction evidence. Her mother knew this man did not like children when she brought him into the household. The court's eventual response — after he was charged with punching Christa in the nose — was not to remove him but to require that another adult be present. That adult was her mother — the same mother who had stood by across years of the biological father's beatings without intervening. The court assigned as Christa's required witness the one person whose presence had already been proven to provide no protection at all.

Additional household dysfunction included a mother who married four times, who was a functional alcoholic, who introduced Christa to pornography and adult sexual concepts in kindergarten, and who allowed multiple men into the household some of whom touched Christa inappropriately. Her paternal grandmother — the one person she experienced as genuinely loving her — died of cancer when Christa was twelve. Christa attempted suicide by overdose within the same period.

The first disclosure and its consequences:

In kindergarten Christa's teacher asked the class to draw something they do at home. Christa drew her life with no awareness that what she was drawing would be recognized as evidence of abuse. Her teacher responded by grabbing her by the arm and dragging her to the principal's office with such force that by Christa's own account her feet did not touch the floor. The message that response delivered — that showing what happened to her brought punishment rather than protection — was confirmed before a single word of comfort was spoken. The psychiatrist subsequently called to evaluate her attempted hypnosis — a method the forensic literature has documented as producing significant risks of memory contamination in child sexual abuse cases and one whose use with a kindergarten-aged child

was clinically inappropriate by any standard of trauma-informed care.

What the jury never heard:

Christa Pike was an indigent defendant represented by court-appointed counsel. The trial attorney was presented with a diagnosis of borderline personality disorder from the defense expert and presented that diagnosis — and little else — to the jury. The post-conviction evaluation by Dr. Jonathan Pincus revealed three additional diagnoses the jury never heard: organic brain damage, bipolar disorder, and Post-Traumatic Stress Disorder. Defense mitigation expert Dr. Diana McCoy had documented Christa's history across three volumes that were never presented to the jury. A teacher named Marshall Muse who would have testified that he saw flashes of something special in Christa was never called. A forensic psychiatrist Dr. William Bernet who specializes in satanic rituals testified that the satanic elements of the crime represented adolescent dabbling and that the violence was consistent with collective aggression — testimony that directly undermined the prosecution's framing.

Most critically: Christa Pike's own attorneys failed to inform her that a plea offer existed that would have resulted in a life sentence without parole. She never knew. Had she been informed that offer existed she might have taken it. The question of her execution might never have arisen.

The jury that sentenced her to death believed she alone had carved the satanic pentagram on Colleen Slemmer's body. The court record shows that both Pike and Shipp carved it together — yet the prosecution's framing placed the full moral weight of that act on Pike alone, while Shipp, who participated equally in its carving, received a life sentence with parole eligibility. The jury sentenced Ms. Pike to death on the basis of an incomplete mitigation picture and a prosecutorial framing that assigned disproportionate responsibility for the crime's most disturbing elements to the only capitally charged defendant.

I also want to flag the following for your attention: the occasions in 2001 and 2002 when Ms. Pike asked the court to drop her appeals and schedule her execution occurred while she was in solitary confinement with undiagnosed and untreated bipolar disorder and PTSD. The decision of a person in psychiatric crisis in isolation without adequate treatment is not a fully competent and informed decision. It is the decision of a nervous system under existential threat with no resources available to it.

The fight-or-flight state and the question of premeditation:

Christa's long-term clinical therapist Dr. Ali Winters, who began treating her after her death sentence, described her as being in a near-constant fight-or-flight state — experiencing the world as a place of danger requiring constant vigilance. That description is the clinical signature of complex PTSD resulting from chronic early trauma, and it is directly relevant to the question of premeditation. A nervous system chronically operating in fight-or-flight does not assess threats accurately. The prefrontal cortex — already impaired in Christa's case by organic brain damage, bipolar dysregulation, and chronic traumatic stress — is precisely the region responsible for distinguishing real danger from perceived danger, for weighing consequences, and for inhibiting impulsive responses to threat. Premeditation in the legal sense requires a mind reliably capable of all three of those functions. The clinical record

raises serious and unanswered questions about whether Christa Pike's nervous system at eighteen met that standard.

Defense experts testified at her trial that her mental health and the pressures of a peer group situation caused her to escalate the attack when the teenagers initially intended only to frighten Colleen Slemmer. That testimony is clinically credible and consistent with what the neuroscience of severely traumatized adolescent brains predicts about behavior under conditions of extreme emotional arousal in a group context.

The sentencing disparity:

Tadaryl Shipp participated jointly with Pike in carving the pentagram on Colleen Slemmer's living body according to the court record. He had previously attempted to throw another Job Corps student off a bridge with a two hundred foot drop onto railroad tracks and was never charged with any crime for that attempt. He had expressed to a friend a desire to make a human sacrifice. He was denied parole in October 2025 but remains eligible. Christa Pike faces execution. Shadolla Peterson — also eighteen, an active participant — received six years of probation in exchange for her testimony.

The proportionality argument:

The sentencing disparity in this case extends beyond the co-defendants. Ms. Pike's death sentence for the killing of a single victim is disproportionate to the sentences imposed on women convicted of killing multiple victims in Tennessee. Data compiled by the Office of the Post-Conviction Defender identifies twenty-three women in the Tennessee first degree murder database convicted of killing more than one victim — none of whom received a death sentence. By any principled standard of proportionality this disparity cannot be justified.

The constitutional argument:

In 2005 the Supreme Court ruled in Roper v. Simmons that executing individuals for crimes committed before the age of eighteen constitutes cruel and unusual punishment citing neuroscientific evidence of adolescent brain immaturity. Christa Pike was eighteen. Tadaryl Shipp was seventeen. In a concurring opinion Sixth Circuit Judge Jane Stranch wrote that Ms. Pike's death sentence likely violates the Eighth Amendment and that had she been seventeen she would not be eligible for execution. The Supreme Court's reasoning addressed the average adolescent brain. Christa Pike's brain was not the average adolescent brain. The standard the Court applied in 2005 already pointed toward commutation. The full neuroscientific picture of her specific brain points even more compellingly in that direction.

The international human rights dimension:

The Organization of American States issued precautionary measures in Ms. Pike's case — Resolution 95/2020, Precautionary Measures No. 1080-20 — finding that her execution would violate international human rights standards. The United Nations Special Rapporteur on Torture has characterized indefinite solitary confinement as a form of torture. Ms. Pike spent approximately twenty-eight of her thirty years of incarceration in a cell the size of a parking space, twenty-three hours a day, with no therapeutic intervention and no rehabilitative

programming. Research by Dr. Stuart Grassian has documented that prolonged solitary confinement produces measurable psychological deterioration visible on brain scans. The neurological damage she arrived with was measurably worsened by the conditions of her confinement.

The practical argument:

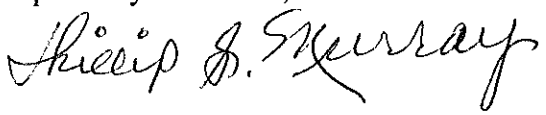
Tennessee's most recent execution, on May 21, 2026, was botched — the execution team could not establish an IV line after more than an hour of attempts. Ms. Pike's thrombocytopenia and small vein structure make the administration of pentobarbital medically dangerous — her attorneys have warned it could cause bloody froth in her lungs. The state's own recent track record, combined with her specific medical conditions, makes a tortured execution not merely possible but medically predictable.

My conclusion:

In my clinical judgment executing Christa Pike does not serve the interests of justice as those interests are understood through the lens of contemporary neuroscience and developmental psychology. It executes a person whose capacity for the kind of awareness and moral reasoning that the death penalty presupposes was compromised before she was born — and then systematically further compromised by every institution that subsequently failed her. It applies the ultimate punishment to a woman whose jury never heard the full clinical picture, who was convicted on the basis of a prosecutorial framing that placed disproportionate responsibility on the only capitally charged defendant, whose indigent appointed counsel failed to inform her of a plea deal that might have prevented this execution entirely, whose decision to abandon her appeals was made while suffering from undiagnosed psychiatric illness in solitary confinement, and who has spent nearly thirty years in conditions that international human rights bodies characterize as torture.

I am prepared to provide a formal affidavit, expert declaration, or written testimony in support of any remaining clemency or legal proceedings. I can be reached at the contact information below.

Respectfully submitted,



Phillip S. Murray, LCSW
Licensed Clinical Social Worker, Retired
Address: Tokyo Tachikawa Ichibancho
6-17-180
190-0033
Japan
Phone/Email: 858-740-3003; niteflighttrio@me.com

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee:

I am writing to ask you to extend mercy to Christa Pike and replace the death sentence with life imprisonment. I know Christa through growing up with her mother's relatives, the Fotos family. Her aunt, Carrie, was a close friend of mine and I grew up alongside Carrie and her sister Carissa, who is Christa's mother. Carrie and Carissa were raised in an unstable, unsafe family. In turn, Carissa failed to provide a stable and safe home for Christa.

Carrie and Carissa's parents, Zola and Chris Fotos made a living with their slaughterhouse and put a roof over their daughters' heads. Although they had more resources than others, Zola and Chris did not know how to raise their daughters right.

Zola was a cruel and vicious woman. She punished her daughters by beating them with a paddle. She doled out punishment inconsistently, punishing more harshly whichever daughter she liked less that day. Zola and Chris both showed clear favoritism between their daughters. Zola would berate and pit her daughters against each other and against their friends, like me.

Zola drank and took pills frequently. When I spent time at their home, Zola's pills were strewn about so we, Carrie, Carissa, and I, could try any pills without her noticing. Zola lost control of her drinking after her husband died. She drank all of the time and had affairs with numerous, younger men. Her drinking became increasingly severe, and she ended up dying of alcoholism.

Like her mother, Carissa drank a lot. She began drinking as a teenager and has maintained a fraught relationship with alcohol since then. I believe that she was drinking when pregnant with Christa. After Christa was born, Carissa partied and left her kids with family members when she went out to drink.

Carissa was always promiscuous and irresponsible. Carissa thought the best of people and did not know how to get away from somebody who was bad news. Carissa became interested in sex far too young. I remember her making out with boys when she was barely out of elementary school. She would take drinks from older boys and frequently got stuck in situations where boys and men pushed unwelcome advances on her. Carissa spoke crudely and openly about her sex life. She talked about sex and even had sex within earshot of her young children.

Carissa took after Zola with men: both of them neglected their children in favor of their relationships. Zola ran around on her husband and even had an affair with one of Carissa's many husbands. Carissa and Zola both had numerous men around the house who had access to the children. It only makes sense that some of these deadbeat men hurt Christa. I imagine that Christa was confused as a child with why her mother had so many men around. I imagine she was more confused why her mother didn't protect her from these men who abused her.

Zola, who sometimes looked after Christa when Carissa was occupied with men or alcohol, disliked Christa from birth because she had red hair. She beat Christa, her least favorite granddaughter, like she beat her own daughters.

Christa did not receive the basic attention or support that every child needs. Christa's father was not a consistent figure in her life. Carissa fell short as a mother and was not able to care for Christa. Especially since Christa has mental health issues, there is no way that Carissa could have been the mother Christa needed and get her the help that she required. Nobody in

Christa's life was equipped to raise her or guide her. Christa's family, the people who were supposed to love her and shield her from harm, left Christa alone in the world.

When I heard about her crime, I could only think of the quiet, beautiful, lonely little girl I knew. I thought of the ways I had seen Christa's family fail her repeatedly as she grew up. I wish somebody had intervened and spared Christa from harm and abuse from her family and community. Her childhood did irrevocable damage. While neither Christa's childhood nor her crime can be undone, the harm done to her contextualizes the harm she has done.

I ask you, Governor Lee, to stop this cycle of harm. See Christa for the woman she is now, for the child who endured immense hardship and trauma and still seeks to better herself and those incarcerated with her. I do not think that Christa's childhood excuses what she did, I don't think that Christa should be freed, but I implore you to spare Christa from the ultimate harm of execution.

Sincerely,

Rema J. McGuire

Rema McGuire
Daniels, WV

August 18, 2026

Rick Martin
503 Eastway Lane
Graham, NC 27253

The Honorable Bill Lee
Governor
State of Tennessee
600 Dr. M.L.K. Jr Blvd.
Nashville, TN 37243

Dear Governor Lee:

If I might take just a few moments of your time, I would like to discuss a matter of grave importance—the scheduled execution of Ms. Christa Gayle Pike, now housed at the Debra K. Johnson Rehabilitation Center for the murder of Colleen Slemmer. I don't know Ms. Pike, but as a staunch supporter of the death penalty, one might find it remarkable that I would write and request that you commute her sentence to life in prison without parole. Please give me a moment to explain why I have done so. I promise to be as brief as possible.

First, let me say that it does not matter to me that she received her death sentence at a young age, that she is a woman, or that she would be the first woman put to death in Tennessee in more than 200 years. Justice should be blind to each of those factors. What disturbs me are the facts I outline below. While I am not compelled by any one of these factors, alone, to feel she or any other inmate of similar experiences deserves clemency, the *totality* of her abuse and mental health issues is what I ask you to carefully consider.

I. Christa was born with organic brain damage and a brain malformation caused by her mother abusing alcohol during her pregnancy with Christa. I do not care that she was sentenced to death for a crime she committed at the age of 18. Governor, I care a great deal that she was sentenced to die for a crime she committed while having the *brain development level* of a juvenile. I believe we can agree that chronological age, alone, is not proof of maturity or accountability, as evidenced by people we have both known.

II. Rather than being treated, Christa's mental health deteriorated as she was subjected to extreme abuse and neglect during her childhood. She suffered physically and psychologically, without receiving the care and treatment she needed to recover from these deeply formative experiences. Christa was raped *twice* before the age of 18. Unlike many rape victims, there was no outreach, no care, and no counseling for Christa. She dealt with her rape trauma alone, while lacking the skills or treatment to do so effectively.

III. The jury did not hear evidence of Christa's childhood sexual abuse because her state-appointed counsel did not present it. Had they been aware of this highly relevant evidence, their sentence recommendation may have been different. As I understand, her attorneys at present have highlighted the legal significance of this omission.

Of the individual facts, the one which bothers me most is that Tennessee may take the life of a person whose grasp of their actions was that of a mentally ill, sexually abused child at the time they committed the crime. To execute Christa Pike is not to execute a 50-year-old woman for her actions as an adult, but to execute an adult for the actions of a person with the mentality of a sexually abused

juvenile. Hard as I try, I fail to see that as just or moral. Actually, it disgusts me to believe Tennessee would execute such a person.

I would like to address the issue of justice for Colleen Slemmer and closure for her mother, May Martinez. It seems apparent to me that Ms. Pike did not have the mental capacity to mitigate the trauma and anger she was experiencing at the time she killed Ms. Slemmer. To execute such a person, to me, isn't justice, but a blind and twisted version of it. Justice for Ms. Slemmer would be most fairly served by keeping Ms. Pike in prison for the rest of her life, as Tennessee is doing with nearly 800 incarcerated inmates currently serving life sentences for murder.

Regarding the victim's mother, Ms. Martinez made the statement in an interview, "They need to put Colleen to rest. Execute her [Pike] **or give her life** and give me the rest of Colleen back so I can live." The return of a bone fragment held as evidence, which can't happen till the case is disposed of one way or another, seems to be her mother's foremost desire, or was so at the time she made that statement.

On the matter of remorse, Ms. Pike initially had none. Again, as her attorneys have expressed, she did not have the mental capacity to fully grasp what she was doing, nor what she had done after the crime. More recently, however, Ms. Pike has commented, "There is no excuse for what I did.... I take full responsibility for my actions, and regret everything that happened". She further wrote, "It took me numerous years to even realize the gravity of what I'd done. Even more to accept how many lives I [affected]. I took the life of someone's child, sister, friend. It sickens me now to think that someone as loving and compassionate as myself had the ability to commit such a crime".

Governor Lee, I continue to support the use of death penalty when warranted. Before I took time to learn the details of her case, I supported it for Christa Pike. After years of studying the case, I am convinced that taking her life is both unjust and unfair (**approximately 385 people are serving life sentences in Tennessee for murders they committed as full adults, yet the state plans to kill Christa Pike for the actions of a mentally-ill youth**). If you agree that the state's hand of justice must be above all moral, I hope you will also agree that killing Christa Pike would leave a lasting stain on Tennessee's judicial conscience.

In closing, yes, the jury and appellate judges decided that Ms. Pike's life should be taken by the state. However, her life is now in *your* hands, and you alone must balance what others have decided against what your own conscience is willing to allow. Unfortunately for all governors in your position, to chose to do nothing to stop an unjust execution is the same as choosing to execute unjustly.

For the reasons stated, I earnestly and respectfully request that you commute Ms. Pike's death sentence to life in prison without parole. I deeply appreciate your time and careful consideration of this grave matter. May you be moved by the facts involved and make the courageous decision to spare Ms. Pike's life.

As a private person, I will keep the matter of this letter to myself. I ask you to do the same. Thank you for your time.

May God continue to bless you and the good people of the state of Tennessee.

Respectfully,

Rick Martin

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

Dear Governor Lee,

My name is Susan Jenkins and I write to you regarding Christa Pike. I have known Christa's family for most of my life. Christa's mother, Carissa, has been my best friend from childhood and remains so now. My knowledge of Christa's family and circumstances tells me that she deserves mercy. I respectfully ask that you grant Christa clemency and commute her sentence from death to life without parole.

I was introduced to Christa's maternal family as a young girl. In grade school, Carissa and I became best friends. We were constantly together, either at her home or mine, and I know Carissa and her family closely. Carissa's parents Zola and Chris were kind to me. They hosted get-togethers at their home and entertained me alongside Carissa's other friends. I enjoyed my time with Carissa and her family, but also saw the ways that this family was imperfect.

After Chris became terminally ill, Zola lost her grasp on reality. When I was younger, I remembered her drinking socially, but she became an alcoholic and continued in a downward spiral. Zola drank constantly, her words slurred and incoherent in the middle of the day. Once, Zola told me how she went to the dentist for a toothache, but the dentist wouldn't work on her because she'd been drinking that morning. I recall one night that I was woken up because Zola called me at 2am, drunk and rambling. Zola's drinking impacted her daughters and her grandchildren, including Christa. Carissa sometimes left Christa with Zola, despite Zola's alcoholism.

Carissa tried her best. Carissa is a kind but naive woman. I saw this most clearly in the decisions she has made with men. Carissa got married before graduating from high school to a man who physically abused her. Shortly after Carissa and her older daughter were able to escape from this abusive marriage, Carissa began dating another dead-end man, Christa's father. When Carissa got into relationships, she communicated less with me, losing sight for anything but her current man.

Carissa's daughters were sweet kids. Christa seemed to be a giggly little girl. When Christa got older, she seemed to be a bright girl though she didn't know how to handle interpersonal relationships and struggled in school. Carissa wasn't equipped to support her daughter and give her the skills she needed to succeed. Though Carissa made some attempts to get Christa professional help, the chaos in their home left Christa without the stability she needed to get better.

I love my friend Carissa, but I know that she was not the parent that Christa needed. I love Christa and wish she could have had her potential realized. I wish she had been given guidance, support, and love. Christa was tossed around so much as a child, passed off from adult to adult, never given a chance to thrive. She never had a place that she felt she belonged.

Since she has been incarcerated, I have seen Christa grow and mature. She finally has structure and stability in her life, things that were never afforded in her childhood. I

believe that Christa will continue to mature and contribute to the world around her. Christa has had the maturity to develop a caring relationship with Carissa, despite the abandonment that she faced. I know that Christa will continue to look for the good in others and move towards greater love and understanding. Please give Christa the chance she never got as a child: give her a chance to grow. Allow Christa to continue making the lives around her better. Show her mercy and show her that you believe in her potential, something even her parents denied her.

Sincerely,

Susan Jenkins

Susan Jenkins
Beckley, WV

TAMMY KENNEDY
111 Old Hickory Blvd., #234
Nashville, Tennessee 37221
615.419.4974

April 8, 2022

Governor Bill Lee
1st Floor, State Capitol
Nashville, TN 37243

RE: Christa Gail Pike

Dear Governor Lee:

I am writing you in regards to clemency for Christa Pike. I had the pleasure of meeting Christa in 1999 when I was an investigator at the Post-Conviction Defender's Office. She appeared younger than her 23 years, wearing no make-up and her long red hair up in a ponytail. I immediately noticed how immature her speech and mannerisms came across. She had been born with prenatal brain damage which further stunted her ability to mature at the same pace as other children her age. My first observation of Christa was that she was this tiny human who still needed molding into adulthood.

Over the next several years, I investigated Christa's life by meeting with her, regularly, as well as interviewing family, social workers, experts and friends who were, in part, responsible for molding Christa into the young woman she became. Throughout the investigation, it became clear that Christa had survived a life filled with abuse, neglect and very little guidance from the adults in her life, especially her parents.

She was born premature with hip dysplasia and prenatal brain damage because her mother was an alcoholic that drank during her pregnancy with Christa. It took Christa over 2 minutes before she took her first breath. She then spent the next couple of weeks in the NICU without the proper touch or feel of her parents.

For the first few years of her life, Christa lived in West Virginia at her maternal grandparents' home. Her grandfather was a butcher and had his own slaughter house on the premises. Christa grew up playing with many farm animals, even those that were to be slaughtered. She was even allowed to watch the slaughtering of animals by her grandfather. Her grandmother became Christa's main caregiver because her mother and father both drank and went out to clubs. She was only 12 years old when her grandmother died. This left Christa devastated. She lost the **only** person that she felt loved her in the world.

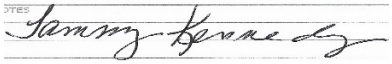
TAMMY KENNEDY
111 Old Hickory Blvd., #234
Nashville, Tennessee 37221
615.419.4974

At this point, Christa began her desperate search to be loved which led her to become involved with anyone who showed her attention. Unfortunately, Christa was drawn to the "wrong" crowd of people, the people that broke the rules. She began getting in trouble with her friends. A review of her records showed that Christa was always with other "friends" when she was caught doing something wrong such as missing school, drinking and other activities that got her into trouble. Each time, Christa took all the blame and never gave her friends up to authorities. This was her way of protecting the people she loved, even though she was denied that as a child.

Over time, I watched Christa grow into a young, mature woman who began speaking to groups of people that visited the prison. She always told them not to make the mistakes she made with her life. Every time a new inmate came to segregation, Christa made sure they had all the basic needs such as soap, etc. Christa made friends with everyone, inmates and guards alike. Even though she will never be free, Christa still makes a difference to many, many people. Her journey has led her to find meaning in caring for others.

The power to grant mercy is one of the main facets that distinguishes human beings from the other animals in this world. Yet, even in the animal kingdom, other animals have been known to take in babies from another species and raise them as their own. If Christa would have had only a fraction of this type of love and care from her mother, father or any adult in her life, I wouldn't be writing you this letter. I believe that Christa deserves mercy. My hope for her is that you grant her clemency and commute her sentence to life.

Sincerely,



Private Investigator

Dear Governor Lee,

My name is Veronica Welzel. I am writing to you about Christa Gail Pike. Her mother, Carissa, is my first cousin. My mother and Carissa's mother, Zola Fotos, were sisters. I grew up around my cousin Carissa, her sister Carrie, my Aunt Zola, and my uncle Chris Fotos. Because I know Christa and I know the family she was raised in, I ask you to give her clemency.

Growing up, I spent time around Carissa and her family. My uncle, Chris Fotos, ran a slaughterhouse and raised animals. He used to take me, Carrie, and Carissa to cattle bids. My Aunt Zola was a drinker. She drank too much and then she would go into a crying mood, complaining that nobody loved her. Aunt Zola died too young, the first of her siblings. Her death was caused by cirrhosis of the liver because of her heavy drinking. I am glad she was saved before she passed.

I did not care for the men that Carissa brought around. I limited my interactions with her ex-husbands, James and Glenn, because I saw the sort of men that they were.

Glenn Pike, Christa's father, was a harsh man with a bad attitude. He drank all the time, so I expect that he often drank around Christa. James, Carissa's other ex-husband, drank and smoked often. He wasn't good to Carissa and was abusive towards her.

Carissa was also a drinker. She drank beer and would get sloppy when she'd had too much. She began drinking as a teenager when she began dating.

Because I don't party or drink, I wasn't around too much when Carissa drank, so I don't know what happened with Christa when Carissa was drinking. However, I worried about Christa in a home with so much drunkenness around and with so many harsh and irresponsible men.

I spent time around Christa when she was growing up in West Virginia. I lived in West Virginia for some time before moving out of state. Christa was always a good kid around me. She was a tender and sweet girl.

Christa had cyclical moods when she was a child. This started when she was very young, around four or five years old. Her moods stood out to me because most kids didn't act this way when they were so young. While on first glance it seemed like Christa was being stubborn and struggled to follow directions, it was clear that she was having deeper challenges. Instead of responding to her with care and sensitivity, her parents would holler at her and whoop her when she didn't listen. My Aunt Zola also whooped Christa when she struggled to listen. Instead of helping Christa, it seemed like these punishments just contributed to Christa's cycling

moods and her difficulty responding to the adults in her life. When I learned that Christa was diagnosed with bipolar disorder, it made complete sense to me because of her out-of-character moods in childhood. As a nurse, I have had experience working with patients with mental illness, including bipolar disorder.

When Christa grew older, she went to Job Corps because she wanted to have a career. I remember how hopeful and excited she was to get the training she needed to have a successful career as a nurse. Carissa was proud of Christa and this positive step she was taking in her life.

I was happy for Christa as well. I visited Christa at the Job Corps in Knoxville. Christa loves drinking tea and told me that she didn't have any way to heat up water for tea. I bought her a gift, a little device that would help her heat water. Christa was so excited when she got this gift and kept thanking me.

I was completely shocked when I heard what happened. Nothing that I heard about the crime sounded anything like the Christa I knew. My visit with her was just a few days before the crime happened.

Over the years, I have thought about the sweet Christa that I knew and the bipolar illness I saw in her at a very young age. I wish that Christa had seen a doctor and received help for her bipolar disorder before something tragic like this happened.

I have always been troubled that the three teenagers who committed the crime received such different sentences. If one of them got life in prison, this should have been the case for all three of them. I don't understand why one was barely punished and the other will be eligible for parole while Christa faces execution.

Governor Lee, I pray that you extend mercy to Christa. I ask you to see Christa as more than what she did.

She was a mentally ill, untreated young girl who had so much more to offer the world than this violence. I ask that you commute her sentence of death to life in prison.

Respectfully,

Veronica Welzel

Veronica Welzel

LAW OFFICE OF
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7215 MIDDLEBROOK PIKE
KNOXVILLE, TN 37909

July 24, 2026

Honorable Bill Lee, Governor
State of Tennessee
1st Floor, State Capitol Building
Nashville, TN 37243

TO BE SUBMITTED WITH CLEMENCY APPLICATION

RE: Christa Gail Pike

Dear Governor Lee:

I am writing in support of Christa Gail Pike's application for clemency. I was the lead Attorney for Christa in her March, 1996 capital murder trial. I would like to preface my remarks by saying that nothing in this letter should be construed as trying to excuse or minimize the death of Colleen Slemmer. I would also like to say that my remarks are based on memories, recollections and impressions I formed during the course of my representation of Ms. Pike whose case I handled around 30 years ago. Therefore, in the unlikely event that anything in this letter should differ or conflict with anything I may have previously testified to, then I would defer to my previous testimony, and the official record of the proceedings.

When I first met Christa, I could not believe how young she seemed, both in appearance and in her demeanor. She was only 18 years old, and seemed like a sweet, young kid who was cute, friendly, and always took the time to thank me for visiting her. When I first met Christa I had trouble reconciling the crime she was charged with to the sweet, young girl sitting in front of me, who was always so friendly and cooperative.

While she was always cooperative, appreciative, and spoke with us candidly about her case, it always seemed to me like she did not take her charges, or ultimately, her trial, as seriously as she should have. She acted childish, and emotionally immature almost as if the entire matter was a game of playing make believe although she always indicated that she understood what she was charged with. She was technically an adult and may have been able to intellectually understand and communicate that she knew the State was seeking to execute her, but it is my opinion that her decision making process was controlled by her emotions and feelings, and on that level she was extremely emotionally immature. This often gave the impression that she lacked remorse or humanity, and I believe that impression was apparent to anyone following her court case. I often thought that my very young daughter (around 10) acted much more emotionally mature, and had a greater grasp of understanding about actions having consequences than Christa seemed to have.

During the course of representing Christa, it seemed to me that she was so starving for attention that she somehow enjoyed all of the media attention she was receiving, and the fact that there were always so many people present in the courtroom whenever she was scheduled to appear. It was as if she enjoyed having people there in court "for her" that she overlooked the fact that they were not actually there "for her",

but rather because of what she was charged with. I base this impression on something she said to me after she had been convicted of first degree murder, and was beginning the sentencing, or penalty phase, of the of the capital murder trial. She said that she was so "happy", which struck me as something totally bizarre and inappropriate to say considering that she had just been found guilty of first degree murder. I asked her why, and she responded that it was because it was the first time in her life that she could remember so many members of her family being there for her. I remember feeling so sad because that was such a heartbreaking thing to hear. This does not justify or excuse Christa's conduct, but I have never forgotten that statement, and have never been so profoundly affected by something a criminal client has told me as I was that. In fact, hearing that made me want to hug my own daughter, and make sure that she always knows that she is loved.

One more thought about her acting childish and immature. I remember Christa being excited about getting newer uniforms than other inmates when she was being transported for hearings after being convicted, and sentenced to death row. Usually being transported in a Sheriff's vehicle without any other prisoners, and even being allowed to fix her hair and put on some make up all because she was a death row inmate and would be on television. She felt that she was being treated better than other inmates and was receiving special treatment by being transported individually. Her being excited about those things when facing the prospect of being killed by the State seemed so inappropriately childish and emotionally immature.

There was so much media coverage of this case due to the allegations of Satanism being involved. While there were aspects of satanic worship involved, I always thought that Christa's interest in the satanic was only because of her interest in Tadaryl Shipp, her co-defendant with whom she was intimately involved with. I do not know whether he actually believed in satanism or whether it was just something he liked to talk about to get attention. I always thought that Tadaryl played a much larger role in the killing of Ms. Slemmer by instigating the killing by making Christa jealous, and then setting the events into motion that led up to the killing. These were three young people who did something extremely stupid that quickly escalated out of control resulting in Ms. Slemmer's death.

Christa's case was one of the first high profile cases after the Tennessee Supreme Court ruled that cameras should be allowed in the courtroom over objection of the parties. I believe that cameras being allowed in the courtroom, along with all of the other media coverage, likely impaired our ability to try to settle this case by plea agreement. Christa seemed so caught up in the moment of her fame, and not taking the possible consequences of being convicted of capital murder as seriously as she should have. That, coupled with the fact that we only received a plea offer a couple of days before the trial was scheduled to begin, I believe affected our ability to possibly settle this case. I think that Christa believed that the jury would never sentence her to death, and I believe that the possibility of having to live the rest of her life in prison was more frightening to her then, even though she had turned 20 years old a few days before the offer was received, than the idea of being executed was. Not having sufficient time to emphasize the realization that death was final where life in prison, even without the possibility of parole, was better than dying. While she said that she appreciated us conveying the offer of life without parole, she said that she could not imagine having to live the rest of her life in a cage. Had we had a couple of weeks or months to continue to talk about life without parole over death, I believe that we might have had a chance of getting her to accept a plea offer. But we did not have that much time, and had to accept the offer prior to the scheduled start of the trial because the State indicated that the offer would be withdrawn at that time.

There are two very specific things that have always bothered me about this case. The first is how different Tadaryl Shipp's sentence was compared to Christa's, and the only reason for the significant difference in their sentences was due to age. Christa was 18 at the time of the crime, and only a few months older than Tadaryl, who was only 17, and as such could not be sentenced to death. It is my understanding that Mr. Shipp has already been considered for parole, and Christa is facing execution in the next few weeks. I believe they were both equally responsible for Ms. Slemmer's unfortunate death, but the fact that Christa was a few months older resulted in a dramatic difference in their respective sentences. The second thing that continues to bother me, and is my greatest regret in this case, was my inability to convince Christa to accept a plea agreement of life without the possibility of parole. I continue to believe that had we had more time than

just a couple of days, and perhaps an opportunity to meet with her together with her mother or other family members, all of whom lived out of State, may have had a different outcome had we been able to convince her that her failure to take the plea offer could actually result in her being killed by the State.

I have not spoken with Christa since I was her Attorney so I do not have any first hand knowledge of what kind of person she is now, or has been during the last 30 years in prison, but I have been told by her current Attorneys that she has received treatment for bipolar disorder, and is a different person now.

I have had the privilege of meeting and speaking with you at several events since you have been Governor with one time being in the arboretum at your official residence during the Christmas holidays. Each time we have spoken, I always felt that you are a warm, caring and compassionate person. I also recognize and respect the fact that as Governor, you have a job and a duty to all the people of the State, and as such have to look at all sides and decide the issue of clemency as carefully and completely as you can. I am not asking you to release or forgive Christa, but I am respectfully asking you to favorably consider Christa's application for clemency and commute her sentence from death to life without the possibility of parole, which is what I believe should have always been her sentence in this case. Please don't kill her because she was too young, dumb, and immature to plead guilty when she should have. Thank you for your time, and for any consideration given this matter. With best wishes,

Very truly yours,

William C. Talman

cc: Hon. Stephen Ferrell, via email
Federal Public Defender's Office

Hon. Kelly Gleason, via email
Post Conviction Defender's Office

TN Department of Correction

Debra K. Johnson Rehabilitation Center
Chaplain Yolanda Walker, M.Div.
3881 Stewarts Lane
Nashville Tennessee 37218

April 7, 2022

Governor Bill Lee
Attn: Clemency Review Unit
500 James Robertson Parkway, 4th Floor
Nashville Tennessee 37243

Dear Governor Lee,

Re: Inmate Christa Pike, 261368

I respectfully offer this letter on behalf of Ms. Christa Pike, #261368, who is currently on death row. I would be in total support that Ms. Pike be granted a Commutation of her sentence to Life without Parole. Ms. Pike has been incarcerated and housed in solitary confinement for approximately 28 years. Ms. Pike was a juvenile when she chose to make the volatile decisions that would alter her life and so many others forever. I cannot explain her actions at the time of her alleged crimes, but do agree it was a very serious crime.

As a Chaplain of DJRC (formerly TPFW), for 17 years, I have had several discussions with Ms. Pike. Based on our discussions, I am convinced Ms. Pike has matured to a healthier, caring, and remorseful individual.

Even though Ms. Pike only has access to talk thru a locked door to the other inmates assigned to the same segregation housing for disciplinary punishment, she has helped countless inmates by sharing her own testimony and by speaking encouraging words not to give up, reassuring them things would get better. Her rehabilitation has been an ongoing process, but everyone's life is a journey

My faith requires me to believe in justice, and I am thankful for law enforcement and those who serve us. But my faith also requires me to believe in mercy and redemption. Therefore, I would greatly appreciate your favorable consideration for clemency review for Ms. Christa Pike and commutating her sentence.

Respectfully submitted,
Chaplain Yolanda Walker

Chaplain Yolanda Walker

MERCY FOR CHRISTA VIDEO

Available on the provided USB drive and at

https://tnopcd1.sharepoint.com/sites/External/SitePages/Christa-Pike.aspx

BETHANY BRAND, PH.D.
PSYCHOTHERAPY · ASSESSMENT · CONSULTATION

FORENSIC PSYCHOLOGICAL EVALUATION

CLIENT: Christa Gail Pike

DOB: 3/10/1976

DATE OF REPORT: July 29, 2023

I was asked to provide a psychological assessment of Christa Pike with the goal of determining if she suffers from any psychological disorder(s), and to assess her for exposure to trauma and/or neglect; furthermore, if I determined that Ms. Pike had a psychological disorder(s) and/or had experienced trauma or neglect, I was asked to opine whether either the disorder(s) and/or history of trauma or neglect contributed to her criminal behavior on January 12, 1995.

My Qualifications

I am a licensed clinical psychologist (Maryland license 3126) with expertise in the assessment, treatment, and research of trauma-related disorders. I am a Professor of Psychology at Towson University with over 30 years of clinical and research experience. As the Director of the Clinical Focus program at Towson University, I have taught courses about diagnosing and treating psychiatric disorders for 25 years. I earned my Ph.D. in clinical community psychology at the University of Maryland and completed training at Johns Hopkins Hospital, George Washington University Hospital, and the Trauma Disorders program at Sheppard Pratt Health System. I have received a variety of research, clinical, and teaching awards including the highest research award given within the state of Maryland's colleges, the Board of Regents Award. I am an Associate Editor for the *Journal of Trauma & Dissociation* and I am a reviewer for a number of professional journals. I have published over 100 peer-reviewed articles, book chapters, and other scientifically-based publications. I am a co-author of two books that describe the assessment and treatment of dissociation and other trauma-related symptoms published by Oxford University Press. I have written a book about the assessment of dissociation in press with the American Psychological Association (APA); I was invited to write this book due to my reputation as an international expert in dissociation. I have several research studies related to trauma underway, including one that clarifies how to distinguish genuine dissociative disorders from feigned dissociative disorders. I am a Fellow within professional organizations including the American Psychological Association. I have served as a co-author on several national and international task forces developing guidelines for the assessment and treatment of complex trauma. I provide psychotherapy to patients in my private practice, as well as conduct forensic assessments and consultations. I have served as a trauma expert for civil and criminal cases, including state, federal and capital cases, and a Supreme Court case in Australia. I have been qualified as a trauma expert in every case in which my testimony has been sought.

Sources of Information

This report reflects my professional opinion based on my clinical interviews, examination, and testing of Christa Pike on 1/5/2023 and 1/6/2023 for a total of approximately 12.5 hours. I have also reviewed collateral data and voluminous records provided to me. See Appendix A for a listing of this material.

Christa Pike's Life History Relevant to This Case

I refer to Ms. Pike as Christa throughout this report. Christa's life has been characterized by poverty, extreme and chronic sexual, physical, and emotional abuse as well as neglect in childhood. As a trauma expert, I routinely evaluate individuals who have endured severe childhood abuse and neglect. Compared to those I have encountered in over 30 years of practice, Christa's childhood abuse and neglect are truly extreme. The level of trauma she was subjected to as a preschooler though her 18th year, when she was arrested, is almost impossible to grasp because it is so severe. Exposure to such devastating trauma from caregivers as well as strangers is highly likely to create enduring psychological, emotional, and biologically based impairments that reverberate throughout a child's development, putting them at risk for psychological disorders, relationship difficulties, impulsive and high-risk behaviors, and substance abuse throughout their lives.

This report will recount Christa's development, history of neglect and trauma exposure, and psychiatric symptoms and disorders, and my professional opinion about the impact of these life experiences on her. I will conclude with my opinion about the likely impact of her psychological disorders and history of trauma and neglect on her criminal behavior.

Developmental and Trauma History

Christa Pike was born in Beckley, West Virginia into a family with a long history of extreme interpersonal violence, substance abuse, and child abuse, along with a great deal of chaos and frequent, highly disruptive moves from one home to another, often across state lines. Typically, the moves were prompted by her parents' and extended families' emotional chaos and turbulent relationships. Dr. Diana McCoy's social history and 2009 testimony described the following family history, which was corroborated by my interviews with Christa as well as other experts' reports.

Christa's maternal grandfather, Chris Fotos, was expelled from school in the eleventh grade after he and his brother beat up a teacher. After beating up his own father at age 16, he left home. He eventually started a meat butchering business. When Chris Fotos was 26, he married Zola Privett, who was 15 and had a 6th grade education. Zola's father, Henry Privett, was a violent alcoholic who reportedly sadistically physically abused all his eight children. The Ku Klux Klan reportedly tarred and feathered Zola's father due to his extreme abuse of his children and left him for dead. However, he survived. His children developed psychological problems, including Zola.

Zola was described by her daughter, Carrie Ross, Christa's maternal aunt, as a very troubled woman who was a pathological liar and sexually preoccupied. One of Zola's sisters, Dorothy, married a man, Bill Howell, who served time for raping a little girl. Bill Howell physically abused Dorothy so badly that she was hospitalized. Another sister, Christa's Aunt Norma, was physically violent and emotionally abusive when she babysat Christa's aunt Carrie, and Christa's mother, Carissa. Despite knowing that Norma was abusive to children, Carissa later had Norma babysit

Christa and her sister, Alicia; Norma abused them as well. As described below by Christa, Norma gave the girls Alka Seltzer to drink when they told her they were thirsty. Furthermore, she made Christa sit in a bathtub with cold water for hours at a time.

After having surgery, Chris Fotos became addicted to painkillers which he injected. He abused painkillers for over 20 years, according to his daughter Carrie (Penalty Trial Testimony). He was charged with income tax evasion and went to court with a concealed gun. After yelling at the judge, U.S. Marshalls restrained him. He was fined and put on probation. When Chris Fotos was interviewed by Christa's legal team at the time of trial, he said, "Any woman who screws around with a god damned nigger deserves to die". Further, he added that he would "throw the switch" to electrocute his own granddaughter.

As a preschooler, Christa went to her grandfather's slaughterhouse where she watched him slaughter animals. Christa's mother sent her there with her grandfather so he could babysit while her mother worked. Christa became attached to some of the animals, even putting a flower on one of the animal's heads, which was later brutally slaughtered and disemboweled in front of her, with the flower near the skull.

Christa's maternal grandmother Zola was an angry, mean alcoholic. She verbally abused Christa, telling her she would go to hell and that she was a liar. Zola's verbal abuse was confirmed by her daughter, Carrie (Penalty Trial Testimony). Christa and her older sister, Alicia, witnessed frequent physical violence between Zola, their Aunt Carrie, and their mother; this violence often occurred when Zola was drunk. Zola died at age fifty-five due to cirrhosis of the liver caused by alcoholism.

Carissa, Christa's mother, had a serious blood disorder (dyscrasia) that required many hospitalizations. Carissa failed the first grade due to being hospitalized so often. Nonetheless, Carissa graduated from high school and, at age 17, married James Ferguson. James was extremely physically abusive to Carissa. For example, he shot at Carissa when she was carrying their child, Alicia. They divorced in 1974 after being married for only a few years. Carissa later completed training as a nurse. Even though she was an alcoholic, Carissa managed to work as a nurse.

Carissa subsequently married Glenn Pike, who is Christa's father. Christa was born on March 10, 1976. She was born two months prematurely and was delivered by C-section. She weighed only five pounds, seven ounces. Although Carissa denies that she was smoking cigarettes or marijuana, or drinking alcohol during her pregnancy with Christa, her father, Glenn, reports that Carissa was drinking approximately once a week and getting high twice per month during her pregnancy.

Carissa went into labor after being assaulted by a patient at the psychiatric ward where she worked as a nurse. Christa was born with significant health problems. She was immediately moved from the local hospital where she was born to a hospital that offered more specialized care to sick newborns. This hospital was far from the family home, so Carissa was unable to visit or bond with the newborn, according to her Aunt Carrie (Penalty Trial Testimony). Christa was on a respirator for a week due to having serious respiratory problems. She was also born with a hyaline membrane and hip dysplasia. For the first year of her life, Carissa reported that Christa had to be put in three diapers so that her legs were forced apart and, over time, her leg bone pushed into her hip bone long enough to groove out a socket. Children who need extensive medical treatment, particularly

those who are hospitalized right after birth with serious health problems, are at greater risk for not developing attachment to their parents.

In addition to the lack of maternal bonding at the critical infant stage due to Christa's health condition, her mother was extremely fragile psychologically following the birth. Carissa suffered from untreated depression and attempted to kill herself after Christa's birth. Carissa's depression put Christa at genetic risk for developing a mood disorder.

Depressed mothers have difficulty developing attachment to their children. Healthy attachment is a critical, foundational requirement for children to develop emotionally healthy and flourish. Children who do not have secure attachment with their mothers, and who feel unloved and unprotected by them, are at considerable risk for being abused by others and for developing a wide range of psychological problems (Sroufe et al., 2005). Furthermore, depressed mothers often have impaired ability to show love in words or in behavior such as hugging their children; this often makes their children feel unloved, as was true for Christa (Goodman et al., 2011; Noll et al., 2009). Finally, Carissa was verbally abusive and critical of Christa, and did not protect her from abuse from many people. All of these variables contributed to Christa developing psychological problems and being at high risk for additional abuse by others.

Another factor seriously weakened the relationship between Carissa and Christa: Carissa was rarely at home due to working so much. Carissa returned to work three weeks after Christa was born. She worked two shifts each day; thus, she was gone from the home from 9 AM until midnight Monday through Friday working at a nursing home. Carissa also worked 12-hour shifts on the weekends. Carissa reported that during Christa's first year of life, she had only 12 days off work.

In contrast, Christa's father was typically not working at all. Carissa would come home from her exhausting shifts to find Glenn drinking beer and smoking. Glenn's mother moved in with the family and checked on Christa during the night, even during the first six months of her life when she slept in her parents' bedroom.

Christa's Aunt Carrie described coming to visit and finding Christa crawling around on the floor despite there being "piles of dog stool all over the house" (Penalty Trial Testimony). She described the home as always being filthy with dirty dishes piled everywhere. As Christa got older, Carrie would sometimes bring her and her older sister, Alicia, back to her home so that they could have a meal. She explained that Carissa was often neglectful of the girls, spending money on clothing for herself to go out partying, while the girls often did not have adequate clothing or food. When Christa was a toddler, Carrie and Carissa were at a bar one night while Zola babysat Christa. Christa began having a seizure. Zola called the bar to tell them Christa was having a seizure. Carissa wanted to stay at the bar, saying Christa would be fine. Carrie insisted that they go home and take Christa to the hospital (Penalty Trial Testimony).

Beginning at 8 months, Christa crawled out of her crib so she could sleep with her paternal grandmother, Delfa Pike. She continued to sleep with her grandmother during periods when they were in the same home until Delfa died when Christa was 12 years old. Carissa admitted that Grandmother Delfa was more of a mother to Christa than she was.

Grandmother Delfa was Christa's only reliable source of consistent love and kindness. Delfa cried when she witnessed Christa's parents "disciplining" Christa, but she could not or did not stop them from being verbally and physically abusive.

Delfa tried to make up for her son's deficits as a father by taking care of Christa. Unfortunately, Grandmother Delfa moved out of the family's home in 1978 when Christa was just two years old so that she could live with her boyfriend, Ernest Johnson. While Delfa lived with Ernest, traveling between Kentucky, West Virginia and Florida, Christa was sometimes able to visit Delfa. However, during the visits, Ernest sexually and emotionally abused Christa.

When Christa was not staying with Delfa and her abusive husband Ernest, her alcoholic Grandmother Zola babysat Christa while her mother worked. Christa's father refused to take care of her. Eventually Zola's drinking became so severe that Christa was put into daycare for six months prior to starting kindergarten.

Although Grandmother Delfa was Christa's most consistent loving family member, her son Glenn was an absentee father who could not hold a job or maintain a faithful relationship. Glenn Pike was born and raised in West Virginia and quit school in the 11th grade. Glenn's father, who was a coal miner, died of a heart attack when Glenn was 13. Glenn and his mother Delfa both worked jobs so they could keep making payments on the family farm. In 1966, Glenn was drafted and served in Vietnam. He contracted hepatitis and was shot in the neck. When he was discharged, he moved back home with his mother. After working odd jobs, he re-enlisted and was stationed at Fort Bragg, North Carolina until he was honorably discharged in 1976. He married a woman named Jo Anne Lilly in 1975 but they divorced within a few months. In that same year, he married Carissa.

Glenn was fired from a job at the post office because he would not get up early enough to get to work on time. He was fired from other jobs as well. Carissa worked two jobs to support the family which meant she was very rarely at home. Glenn reportedly did not want Alicia. Alicia was eventually sent away to her maternal grandparents to be raised by them and her Aunt Carrie.

A few years into the marriage, Carissa found Glenn in bed with another woman. Carissa divorced Glenn in 1977. Subsequently, he lost all his money gambling.

Carissa and Glenn remarried in 1979, just two years after their divorce. Apparently, this remarriage occurred because Glenn visited Carissa in the hospital after Carissa overdosed. She decided that him visiting her must mean he truly loved her. He was also working again and was engaged to another woman; this woman reportedly taunted Carissa about being engaged to Glenn. However, Glenn quit his job soon after he and Carissa were married again.

In 1982, Carissa found out that Glenn was having another affair. Glenn reportedly came into the house, and in front of guests, announced to Carissa that his girlfriend was pregnant with a son. The family dog had disappeared a couple of weeks earlier, which was heartbreaking for the girls. Carissa approached the trailer where she had been told Glenn was staying with his girlfriend. His truck was there, and Carissa could hear the family dog barking inside. No one answered the door when she knocked, so Carissa kicked a hole in the door. The woman came to the door and told her

Glenn was not there. Glenn finally came out and told Carissa to do what she needed to do. The next day Carissa filed for divorce. Glenn never returned to the family home. This time the divorce was final.

Eventually Glenn married Kathleen Allman in 1986. This was his fourth marriage. They had two children. He worked for the National Park Service until 1989, when he was laid off. He remained unemployed for the next 13 years. Kathleen divorced him and moved back to her home in Canada, taking the children with her.

In 1982, Carissa and Christa, who was five years old, moved in with Christa's maternal grandparents, where her sister Alicia and Aunt Carrie were also living. Carissa began dating. In 1983 or 1984 Carissa and Christa moved to North Carolina to live with Carissa's boyfriend Danny Thompson. Carissa left Alicia behind with Aunt Carrie and her mother. Christa was seven or eight when they moved. Christa's mother married her third husband, Mr. Thompson.

In 1984, Carissa, Christa, and Thompson moved back to West Virginia because Grandmother Zola was dying from cirrhosis. Zola died in 1985. Christa and her mother moved back to North Carolina in 1986. The constant moving was highly disruptive to Christa's academic learning and the development of a sense of stability. Eventually Thompson stole a farm tractor and riding lawn mower; both he and Carissa were indicted for this. Carissa was arrested but later released. The charges were dropped when Thompson got rid of the tractor and lawn mower.

Thompson had been married twice before marrying Carissa and had two daughters who came to live with them when they moved back to North Carolina. The girls complained to their mother about how strict Carissa was. Mr. Thompson made his daughters pack up immediately and he deposited them at their mother's doorstep. They never visited him again, nor did his two sons.

During this time, the family had been living in a trailer park that was infested with rats and snakes. Eventually Carissa broke up with Thompson and moved out of that trailer to her own trailer. Thompson later moved in and out at least once. The trailer was cold and mildewy. There was not enough food or money, although Christa noted that her mother always had enough money to buy herself alcohol. Christa recalls often being very hungry when she was living with her mother.

Thompson was physically violent and cruel to Christa. One time he refused to share two bags of fast food he brought home, even though the family was desperately hungry. This is described below in detail; it led to Carissa finally breaking up for good with Thompson.

In five years, Carissa and Thompson had broken up and gotten back together approximately 10 times. This level of food insecurity, constantly moving homes and changing schools, and chaos within the "family" home, was highly detrimental to young Christa. During these years, she was shuffled back and forth between her mother and Grandmother Delfa, (since her father would not care for her), and frequently changing school districts, often across state lines. This level of chaos prevented Christa from developing solid friendships with peers and prevented her from developing a sense of belonging at home, school, or in her neighborhoods. Chaos of this magnitude is highly damaging to children. Unfortunately, they learn the same unhealthy relationship patterns that they see their parents using with their ever- shifting partners. This had a strong, negative impact on

Christa's academic performance and her ability to have healthy relationships with peers and romantic partners.

Carissa started dating Steve Kyaw before her divorce from Thompson was finalized. Carissa moved herself and Christa to Hillsborough, North Carolina in 1989 to move in with Kyaw. Kyaw emotionally, physically and sexually abused Christa, as described below. One time after Kyaw abused Christa, the court got involved and mandated mediation. Carissa bailed Kyaw out of jail but they had to remain separated due to the court's stipulation. Carissa insisted that Kyaw had not abused Christa, despite Christa telling the juvenile court psychologist and several of her friends that he had abused her.

In 1991, Carissa moved herself and Christa into their own apartment and began dating another man, Gerard Hansen. Christa believes that her mother settled down considerably once she married Hansen. Christa feels close to Hansen, and refers to him as her step-father. Unfortunately, he came into the family too late to be of any help in getting Christa back on a healthy path. She had been neglected and abused for too long by too many people. Her troubles were pronounced and she was not receiving any treatment despite her parents having been told to get her treatment. Carissa moved into a small apartment with Hansen and they married a few months later in 1992; he was her fifth husband.

Christa was doing poorly in school, and often skipped school. She was often angry and refused to follow rules at home. Christa was sent to Swannanoa Youth Development Center, a training school, at about the time Hansen became involved with her mother.

When Christa returned from Swannanoa two years later, they all moved to a larger home outside Hillsborough. Carissa allowed Christa to have a live-in boyfriend, Brian, who slept in her bedroom with her when she was 17. Carissa allowed this unusual arrangement thinking that she might have more control and influence on Christa if she were living with them with her boyfriend. However, Carissa and Hansen disapproved of Brian because he was so lazy; they made him move out. Christa went with him, and for several months, she lived on the streets with Brian.

The police came to the house looking for Christa until she left to attend Job Corps in the fall of 1994. The police did not reveal why they were looking for Christa.

In general, Carissa's own troubles affected Christa negatively. Carissa had been arrested several times, for theft charges and for DUI. Christa reported her mother would come home from her various jobs and begin drinking. Carissa would drink right up until bedtime; Christa worried that her mother would die of cirrhosis just like her maternal grandmother. Carissa also smoked marijuana, including smoking it with Christa when she was only 17. Carissa also smoked marijuana with her daughter Alicia. Both girls and their maternal grandmother grew marijuana in the grandmother's greenhouse, although Zola herself did not smoke it. Rather, she gave away the plants.

Christa was exposed to marijuana and began smoking it at the remarkably young age of nine. She was regularly smoking it by age 12 or 13; her sister, Alicia, who was approximately 17 or 18,

would smoke marijuana in front of Christa. Alicia reported that she was frightened by how "wild" Christa became when she smoked marijuana, so she only smoked with Christa twice.

Christa acknowledges that she followed her mother's example of being too dependent on men for her sense of being loved and secure. Aunt Carrie, Carissa's younger sister, said that Carissa would go with any man who "pats her on the head". Thus, it seems the intergenerational pattern of not feeling sufficiently loved and protected due to a lack of attachment to one's parents resulted in both mother and daughter being *desperate* for acceptance and security from men.

After her relationship with Brian ended, Christa later became enamored with Tadaryl Shipp, her co-defendant, because he was the first boy who ever bought her flowers. Christa's equating flowers with love is reminiscent of her mother remarrying her father because he showed up at the hospital after she overdosed. It seems both women had very limited ability to accurately judge others' characters; they could not identify when a man was psychologically healthy and stable enough to be a good choice as a partner.

Christa has several half-siblings. As noted above, her half-sister, Alicia, is five years older. They share the same mother but different fathers. Although Christa reported they are close, they do not speak often. Alicia lives in Hawaii and is divorced with three adult children. Christa is the middle child. Christa has a younger half-sister, Lindsay, to whom she is not close. They share the same father but have different mothers. She had a half-brother named Max who died in 2015. They had the same father. Christa reported that Max owed someone money for drugs; the person gave him drugs allegedly laced with battery acid which killed him. Christa was close to Max and often spoke to him. She has a self-inked tattoo on her arm honoring Max; Christa still misses him. These are the individuals that Christa considers her siblings. She did not mention any of her step-siblings due to not feeling they are part of her family. Indeed, her step-siblings were rapidly in and then back out of Christa's life. Even their own fathers often had little to do with them, much like Christa's father had little contact and little involvement with raising her.

Glenn, Christa's father, acknowledges that he had little to do with raising Christa, especially after he and Carissa divorced for the second time, and Christa moved with her mother to North Carolina. He knew very little about Christa when her defense team interviewed him. For example, he did not know that Christa wet the bed until she was in the first grade. Bed wetting in an older child can be an indication of stress and/or abuse. He reported that he believes Christa's problems stem from him not having beat her enough, and from the way Carissa raised Christa.

Carissa stated that Glenn has been an alcoholic ever since she has known him. He never paid child support for Christa. Carissa reported Glenn would occasionally send Christa used clothing he bought at flea markets, although sometimes he would buy something such as a coat if Carissa insisted.

Christa lived with her father for a few weeks in sixth or seventh grade after the incident with Steve Kyaw (see below). She sometimes visited him, such as during summer breaks from school. School records show that Christa was often shuffled back and forth between West Virginia and North Carolina, requiring Christa to get accustomed to a new school, new routine, new teachers, and new peers.

Christa describes her father as "lazy" in contrast to her mother who worked all the time. Christa recalled that her father disciplined her one time for drawing on Alicia's doll's face. He told her to go get her favorite doll; when she brought it back, her father smashed the beloved doll to pieces in front of her. Even Alicia was crying over Glenn's harsh response and tried to help put the doll back together.

Alicia became pregnant at 14. Aunt Carrie had been raising her. Carissa moved back to West Virginia around the time Alicia discovered she was pregnant. The move was ostensibly planned because Carissa's mother was dying. Although Carrie thought Alicia was much too young to marry, Carissa gave Alicia permission to get married. Alicia married the baby's father, Brian Hammond, and eventually moved to North Carolina to live with Carissa and Christa for a short while when they moved back there.

Alicia credits the fact that she was raised by Carrie, rather than by her mother, with her doing so much better than Christa. Alicia made straight As in school and only once had a disciplinary problem at school, in contrast to Christa, who did very poorly and was frequently in serious trouble at school. Brian Hammond, Alicia's husband, was reportedly selling drugs and cheating on Alicia; she eventually divorced him. Just as her mother had relinquished care of Alicia to her family, Alicia relinquished her child, Keith, to his father who took Keith back to West Virginia after the couple divorced. Alicia began dating a man named Matt Wills before her divorce from Brian was finalized. She moved with Matt to Texas once they got married. Alicia eventually regained custody of Keith.

The Impact of Devastating Abuse and Loss on Christa

Additional information about the unrelenting abuse and neglect that Christa experienced is critical to understanding her development and eventual criminal behavior.

The first person to sexually abuse Christa was her paternal grandmother's boyfriend, Ernest Johnson. Ernest began sexually abusing Christa "before I could walk and talk until kindergarten". Sharing the story of this abuse was extremely distressing for Christa. She cried as she attempted to describe what he did to her. Christa reported that Ernest orally raped her when she was in preschool. Christa showed utter disgust on her face as she spoke of the smell of this man's genitals. Christa was still extremely revolted by him, despite more than 30 years having passed.

At one point while talking about Ernest's abuse of her, Christa stared off into space, disconnecting from the conversation for a few minutes. This appeared to be a manifestation of dissociation. Dissociation is a learned method of escaping when there is no possibility for escaping from the abuser. Dissociation entails disconnecting from one's surroundings, body, and/or emotions, in an attempt to decrease the emotional pain associated with trauma (Brand, 2023; Putnam, 1985).

Throughout her childhood, Christa was a victim of violent predators with no protection from her depressed mother and absent, uninvolved father. When children have no escape from such abuse, some use "dissociation"(Putnam, 1997). Dissociation is a biologically based survival mechanism that can partially blunt emotional and physical pain and allow the child to detach from ongoing trauma. Dissociation is "the escape when there is no escape" (Putnam, 1992). Dissociation is

particularly likely when a child has experienced betrayal by caregivers, when abuse starts very young, and when there is emotional abuse from and/or a lack of secure attachment to one's mother (Putnam, 1997). All three risk factors were present in Christa's life.

Children who are sexually abused do not understand that pedophiles are the ones to blame for the abuse, and in fact, they are committing felonies when they abuse children. Instead, victims of sexual abuse, including Christa, believe that the abuse happens because they are worthless and dirty. They believe that abuse is what they deserve. This self-blame increases their vulnerability to future victimization and depression (Briere et al., 2020; Classen et al., 2005). Consistent with the research about sexual abuse of girls, early childhood sexual abuse made Christa highly vulnerable to repeated sexual victimization (Briere et al., 2020).

Survivors of childhood sexual abuse typically feel utterly disgusted and revolted by the abuse, especially the associated smells. Preschoolers typically experience choking and difficulty breathing during oral rape(s). The smells, revulsion, and terror of not being able to breathe often haunts survivors of sexual abuse for the rest of their lives. Thus, Christa's difficulty talking about Ernest's horrific abuse supports the validity of her description of him orally raping her.

Ernest did more than rape Christa. He also ensured Christa's silence about him victimizing her by threatening to hurt Christa's beloved pets, her grandmother, and Christa herself if she told anyone about his attacks. Furthermore, Ernest locked Christa in a dark chicken coop where spiders crawled on her and bit her. To this day, Christa remains utterly terrified of spiders. Decades later, Christa still suffers from Specific Phobia of spiders due to Ernest's torture. Early sadistic childhood abuse causes tremendous psychological problems for decades, often throughout adulthood.

Children who have been coerced, manipulated, and threatened into silence and compliance with sexual predators feel terrified that they will get into trouble for the abuse. They cannot comprehend that the pedophile is to blame for the abuse, not them. Children cannot cognitively grasp that sexual abuse is a crime and that they are victims, rather than being at fault. Thus, they rarely tell anyone about the abuse, especially in cases like Christa's where they have been manipulated into silence by threats, violence, and by being held captive in locked spaces. Abuse that starts this early and is this severe is much more likely to cause a child to frequently dissociate. With repeated exposure to such early, vile abuse, the child is at risk for developing a dissociative disorder, which, as will be illustrated below, Christa developed and continues to suffer from.

Eventually Christa made a child-like cry for help. Christa stated, "They figured out I was being abused because I was drawing pictures" at elementary school. The teacher asked the class to draw what they did at home. Christa drew a man with "a huge penis and demon face". The teacher jerked her up by the arm when she saw the drawing. Christa was terrified as the teacher took her out of the classroom and dragged her to the principal's office. Christa does not recall what happened next. This is likely due to dissociation, as such an event would normally be so significant that it would be remembered. CPS did not become involved, despite Christa's drawing being a red flag that she was being abused. Christa began crying as she expressed that she desperately wished that "someone, anyone would have cared enough about me" to investigate and stop Ernest's sadistic abuse.

The next person to abuse Christa was Norma, who was her mother's aunt. Carissa reported that Norma abused her as a child when she babysat. Her Aunt Carrie reported that Norma dragged her, Carrie, around by the hair when she babysat when Carrie was a child. Despite knowing that Norma was deeply disturbed and abusive, Carissa asked Norma to babysit her children. Not surprisingly, Norma was cruel to Christa and Alicia. Norma would forbid Christa to go to the restroom when she needed to, resulting in Christa defecating on herself, which was utterly humiliating. Norma forced Christa to sit in ice cold water in the bathtub for hours at a time. Norma stole Alicia's doll clothes and then put the clothing on her dog. When the girls were thirsty, Norma made them drink Alka-Seltzer. It's not clear if mental illness, sadism, or both prompted Norma's abusive and bizarre behavior. Although Christa and Alicia told their mother about Norma's cruelty, Carissa continued to use Norma as a babysitter until Norma stole a ring from Carissa.

Carissa's pattern was to deny Christa's reality: Carissa simply refused to believe Christa was being abused even when Christa gathered up the courage to tell her mother about the abuse, assaults, and rapes. It is unusual for children to have the nerve to tell their parents that they are being abused. Tragically, Carissa rarely believed Christa, which essentially permitted violent people including pedophiles to victimize Christa; Christa was an easy target due to her mother's lack of protection and her father's lack of involvement.

Christa described Danny Thompson, her mother's third husband, as one of her mother's most abusive husbands. He was extremely verbally and physically abusive to Christa. He made a special whip that had a wooden handle and a long leather strap. Mr. Thompson hung this whip on the wall as a threatening reminder to Christa; he often beat Christa with it to the point of causing cuts and bruises.

Christa described a particularly sadistic experience with Thompson who knew she could not swim. "He threw me in the pool and left me to drown. He said he'd teach me to swim by doing a 'soldier's dive'. He had me do that at the deep end of the pool. I was probably 7. I swam with floaties but didn't have them on. He **shows** me how to do the dive. He tipped me into the pool, and he told me, this is how you learn to swim. You sink or you swim." [Note that Christa changed verb tense from past tense ("He **threw** me in the pool") to present tense: "He **shows** me how to dive". Switching from past tense to present tense verbs when describing trauma can indicate that the person has temporarily lost full awareness that this awful experience is over and occurred in the past.[1] Christa described what happened next, "We had a St. Bernard who jumped into the pool. I was drinking pool water and choking. I held onto her and she pulled me out. I don't remember what Mom said. I think he was being evil. If I had drowned, I think he would have said I fell in and drowned."

[1] This is one of the reasons trauma can be so disruptive to a person's thinking and behavior years, even decades, later. Specifically, trauma can cause the brain to function in such a way that a past event can feel like it is still threatening, or that it is even currently happening (as in a flashback). This is one of ways that traumas can still cause tremendous emotional and physiological upheaval until trauma is discussed and resolved through psychotherapy. The enduring impact of trauma is highly relevant for traumatized people with PTSD. One of the U.S.'s most respected epidemiologists, Dr. Ronald Kessler at Harvard, showed that the average person with PTSD suffers from symptoms of PTSD for over two decades (Kessler, 2000).

Christa was forced to endure Thompson's abuse from approximately the ages of 7 to 11 or 12. Her mother was aware that Thompson was verbally and physically abusive because Christa told her mother, yet again her mother did nothing to stop him or to protect Christa. To the contrary, Christa recalls her mother blaming her for Thompson's beatings. Christa's mother finally recognized Thompson's mistreatment of children when he brought home two full bags of fast food. The children were very hungry and one of them began to eat a French fry and Thompson yelled at Christa's mother, "Get that kid out of my food". The marriage ended after this incident even though it was minor compared to Thompson's severe beatings and throwing Christa into the deep end of a swimming pool.

Next, Christa was raped by a predatory neighbor named Claude Davis when she was between the ages of 9 and 11. Davis was known in the community as a "pervert"; despite being a known pedophile, no one stopped Davis preying on young girls including raping Christa. Once again, when Christa told her Mom, as well as Alicia, about Claude Davis raping her, they did not believe her. Christa developed an infection from the rape that made her very ill. Although apparently her own mother did not believe Christa, a teacher at school noticed that something was terribly wrong with the young girl. Christa was crying and the teacher asked her what was wrong; Christa told her she had been raped. The school called her mother and Child Protective Services. Davis was arrested and pled no contest. According to Christa, he received a short sentence. She had to continue walking around in the neighborhood with him living just a short distance away. She had to see his trailer every day. This kind of constant reminder of trauma is terribly unsettling to rape survivors, even adults. Yet Christa was just a young girl, and she had no support from her family. It was utterly terrifying to live in the same vicinity of the man who raped her and given her a painful infection which made her visibly ill. Christa recalled that neither her sister or mother ever apologized for not believing her. Christa does not recall the family ever talking about it.

Christa described the impact of this rape:

> It was horrible. It devastated me that my Mother and sister didn't believe me. My sister said I was lying… It made me feel worthless. I was terrified. He lived right up the street. I could get to his house in less than a minute. He was known as the town pervert. I had to walk by his house to get to the bus stop. The trailer where I babysat two little girls was here, and here was his trailer (demonstrating it by drawing on paper). I could see his house from my house…. And no one believed me so I thought he'd get me again, so I was afraid and hyperaware. No one believed me. I was anxious, was tearful and crying constantly. People would walk up to me and I would be scared.

Christa suffered from nightmares, flashbacks, hypervigilance, and easily being startled after that rape. These are classic symptoms of PTSD. Christa's sense of being totally vulnerable to attack was partially due to PTSD, and it was exacerbated by her family's lack of belief and support. As a result, she felt incredibly vulnerable, and she lived in terror that Mr. Davis or other people could attack her again. Clearly, she was showing signs of PTSD but, unfortunately, Christa's parents did not take her to get psychological treatment for Davis's rape or Ernest's sexual attacks. As a young girl, she was truly on her own, without loving support, treatment, or protection.

Unfortunately, the most terrifying abuse was yet to come. Christa reported that the man who was the "worst" of the perpetrators was her mother's boyfriend, Steve Kyaw. Christa described Steve Kyaw: "He was disgusting. We (the family) moved in together. He had boxes and boxes of porn." Apparently, her mother and Kyaw had no concern about having so much pornography around children. When asked to describe what happened with him, Christa stated, "He tried to play wrestle with me and cop feels and twist my nipples. I said, 'How do you like this?' and I grabbed and twisted his balls. He ran and told my Mom. He punched me in the face in front of my neighbors." Kyaw also verbally abused Christa by calling her a slut and a whore.

In addition to Kyaw's direct physical abuse, Christa was exposed to graphic sexual information and behavior at a young age. Not only did Kyaw keep a stockpile of pornography, Christa overheard and sometimes saw her mother having sex with him. This lack of boundaries in the home led to Christa becoming interested in sexuality much too early, thereby exposing her to opportunities for being around potentially dangerous people and getting into trouble.

Due to living in a home with so much pornography, Christa found a picture of a pierced penis and took it to school. She got in trouble for having a pornographic picture. It seems there was no investigation into how Christa came to have such a graphic image as a young girl. This kind of photo was highly unusual back in the early 1980s before the internet made it easy to find sexual images. Questions should have been raised about where Christa was being exposed to pornography.

In addition to being exposed to adult sexual activity, Christa was constantly exposed to substance abuse by all of her caretakers. Namely, her mother's alcoholism and her father's drug use; but also a number of her mother's husbands and extended family members. Parents with drug and alcohol abuse problems provide damaging role models to children, and often fail to protect their children. For example, Christa began to drink alcohol at her mother's parties. Furthermore, children whose parents struggle with substance abuse inherit a genetic risk for addiction. With this risk of addiction, along with the lack of attention and protection that results when parents have untreated addictions, it is not surprising that Christa began drinking alcohol at a very young age. She told me, "I could drink grown men under the table at age 12." She told me that she drank alcohol with her mother and one of her partners; at 16 she reportedly "drank them under the table". Christa reported that at her most severe level of drinking, she would, "Drink until I puked and then drink more. I never had a blackout... I could drink the whole bottle of hard liquor or almost all of it." Despite drinking so much, Christa denied having hangovers or withdrawal symptoms. She did not develop legal problems directly related to drinking.

It is very common for youngsters who have been abused and assaulted to begin drinking alcohol, using drugs, and/or engaging in self-harm soon after having been abused to distract from their pain and to suppress the memories and emotions related to abuse. Indeed, Christa developed all three of these problems. She began cutting herself as well as drinking alcohol and smoking marijuana soon after Claude Davis raped her. Before I met with Christa, she had not recognized the connection between being raped followed by beginning to heavily use substances and cutting herself to help manage the overwhelming emotions and memories of the attack. She made that connection when I asked her if she began cutting or using substances following any of the early traumas.

Tragically, Claude Davis's attack was soon followed by one of the most devastating events that occurred during Christa's childhood. Her beloved Grandmother Delfa's long struggle with cancer ended and she died when Christa was approximately 12 years old. Grandmother Delfa was the only person who consistently took notice of, and showed love to, Christa. Christa adored her. Unfortunately, her grandmother had been very ill with cancer for a long time. Even though she was only a young girl, Christa did her best to take care of her grandmother during her chemotherapy treatment. Christa recalls her grandmother being extremely ill with frequent vomiting. This was exquisitely painful to witness. Christa was not able to do anything to ease her grandmother's pain or nausea. Her grandmother had to drink Ensure to get some nutrition and calories, but she often vomited the Ensure. Losing the one trustworthy, consistent, loving adult in her life caused Christa to plummet into depression. "I can't look at Ensure without having to vomit." This loss was profoundly distressing for Christa.

Christa grew so depressed that she "gave up" after losing her grandmother. Following this devastating loss, Christa became so depressed she attempted suicide for the first time. She stated, "I cared about nothing after that. I wanted to go with her. I didn't care about anything. That was the first time I tried to kill myself. I OD'd. It was my stupidity that did it (meaning kept her from dying) – I took too many pills." She vomited the pills she had taken. She told the adults that she had merely been trying to get high so that they would not put her in a psychiatric hospital. Her parents took her to a mental health professional, but this doctor did not hospitalize her. Christa did not receive follow up psychiatric treatment despite having overdosed.

Academics

With the non-stop chaos, trauma, frequent moves, and lack of parental support, it would have been impossible for any child to do well in school. Due to her parents' chaotic lives, Christa attended four elementary schools and three middle or junior high schools; some were in West Virginia and others in North Carolina. Christa was retained in 3rd and 7th grade due to her poor grades and poor attendance. She was ordered to attend Swannanoa training school when she was in the 9th grade. She stayed there for about two years. This was the last grade she completed. She eventually earned her GED.

Christa told me she "hated school because I didn't learn like everyone else did." She described difficulty sitting still and concentrating, particularly with subjects that did not include hands-on activities. Symptoms of untreated PTSD and bipolar disorder likely caused or at least contributed to her agitation and poor concentration. She did not understand the lessons so doing the homework was not possible. Instead of supporting her in a helpful way, she was beaten and threatened. Christa reported, "Dad forced me to do homework. He'd beat me if I didn't get the homework done in 20 minutes. He'd beat me and say now you have 20 minutes to finish it."

As a result of her difficulties attending and learning, Christa avoided studying and she infrequently did homework. She earned many D's and F's although she also earned As and Bs in classes such as health or science.

In addition to disliking the academic aspect of school, Christa disliked the social aspects. She was often singled out in classes due to talking so much. She described the impact of this: "I was the 'plague kid'. They ostracized me by pulling my desk to the back of the class." Unfortunately, this is the pattern that is often seen with abused and neglected children. The damaging impact of trauma compounded by family and mental health problems show up in the classroom and the playground. Rather than school being a safe haven, teachers rarely understand that the troubled children in their classrooms are expressing the difficulties that stem from trauma and their chaotic families.

Children who have learning difficulties feel "stupid" and their lack of self-confidence and lack of understanding of the lessons exacerbates their difficulties with schoolwork. Teachers and peers begin to view them as unintelligent and or "lazy", and the student begins to put in less effort on schoolwork. Children like Christa end up in a vicious cycle of poor academic performance, then they put in even less effort, and do even worse at school. These kids tend to be shunned by their peers, except for troubled peers who also often have troubled families; these peers often find each other and encourage each other to skip school and engage in other high-risk behaviors.

Christa's father inadvertently compounded Christa's fear and loathing of school by beating her when she could not do her homework. Being yelled at, belittled, and beaten compounded the impact of trauma and Christa's burgeoning bipolar disorder. It is unsurprising that Christa began skipping school as she became increasingly plagued by mental health symptoms. Her disinterest in school grew, particularly after her grandmother's extended, grueling fight with cancer.

Later Adolescence: The Role of Trauma in Contributing to Substance Abuse

Christa did better when she first came back from Swannanoa training school, but she got back involved with her old friends, who were troubled teenagers. She began to have trouble once again.

Christa turned to substances for comfort and relief of symptoms of PTSD and depression. She engaged in "huffing" air freshener aerosols, and later tried cocaine and LSD a few times, although the loss of control from LSD scared her. She tried methamphetamine and enjoyed being able to produce a great deal of artwork while high on it.

Christa was struggling with the impact of unrelenting, severe trauma without the benefit of psychiatric medication or psychotherapy, and without support of her family. Many traumatized youth (and adults) turn to using alcohol and drugs as a form of self-medication to numb the brutally painful memories of being abused. Additionally, drugs and alcohol are often used to the point of causing sedation, so the person cannot think about the humiliation and terror they have been subjected to. Drugs and alcohol can sometimes temporarily quiet the irritability, angry outbursts, terror, nightmares, and hyperarousal caused by untreated trauma and PTSD. As a result, chronic childhood trauma leaves survivors *extremely* vulnerable to drug and alcohol abuse, as these chemicals are a form of "self-medication" for trauma's myriad crippling symptoms (Back et al., 2000; Najavits & Walsh, 2012).

Unfortunately, the relief from substances quickly wore off, leaving Christa feeling once again agitated, irritable, and restless, and increasingly desperate for relief. Heavy reliance on marijuana followed; from the first time she smoked marijuana, this became Christa's preferred drug because

it calmed her down. She explained, “It was euphoric to me. It made all my problems disappear. It made me calm down and be good.” Although Christa’s drug use served as an escape from emotional pain, a way to cope with childhood abuse, and a method for calming herself, it also exposed her to youth and adults who were very troubled and who had a damaging influence on her.

Substance abuse and PTSD were only two of the mental health problems that Christa was developing at a very young age. The average age of onset of bipolar disorder is approximately 13 years of age (Kovacs & Pollock, 1995). Consistent with this, Christa began showing early signs of mania or hypomania due to bipolar disorder by early adolescence. She stated, “I could stay up partying for days and couldn’t understand why they (her friends) were all falling asleep.” Being able to stay up for days in a row is a sign of mania. Christa was already suffering from insomnia and excessive energy due to bipolar disorder. She found a way to finally induce sleep despite excessive energy and sleeplessness, “I didn’t know I had bipolar then. I would hitch hike to the beach. I would finally sleep on the beach and the ocean sounds put me to sleep.” She was trying to manage the insomnia associated with bipolar disorder without benefit of psychiatric medications. Hitchhiking and sleeping on the beach as a solo female were very high-risk ways of overcoming severe insomnia. High risk behaviors are classic symptoms of mania, as are excessive energy and insomnia (American Psychiatric Association, 2022).

Each of the types of childhood adversity that Christa experienced are associated with significantly greater risk for developing psychiatric disorders, as well as a wide range of other negative outcomes (discussed later in this report) (Anda et al., 2006). Christa experienced an inordinate number of childhood adversities including physical, emotional, and sexual abuse, childhood neglect, as well as parental divorce, mental illness, and substance abuse. Each of these adversities contributed to her psychological and behavioral problems. These adversities put her on a path that exposed her to increasing risk for dropping out of school and developing friendships with troubled youth and opportunistic, abusive adults.

It is not surprising that by late adolescence, Christa was frequently running away; she was sometimes homeless for periods of time. She recalled how she survived being away from home, “I hung out with carnies. They could have taken advantage of me but they didn’t.”

After making that statement, Christa then recounted a story about a carnie man in his 20s who pressured her to have sex when she was only 14. Her facial expression changed as it dawned on her that this was rape. The adult had taken advantage of her youth and naivete and pressured her to comply with his demands for “sex”, which she was too young to consent to; thus, this was rape. She looked distressed as she said,

> “I was so oversexualized. It’s kind of sad.” She elaborated, “Just from the incident that happened when I was so young (Ernest’s abuse) and being around so much porn when I was young. My Dad had it everywhere. Just everything. Steve’s big stack of porn when I was 12.”

Christa’s parents and the other adults in her life failed to protect her, and they failed to model healthy sexuality, healthy methods to manage emotions and stress, and healthy relationships. She

had no idea how to protect herself because she had never known or seen protection. She could not distinguish people who would use and manipulate her from people who would care about her.

When she was 16, Christa became pregnant. She vomited so frequently due to being pregnant that she had to get IV hydration several times at a hospital. The doctor, "Dr. Danford", worked in the same clinic where her mother was employed as a nurse. Her mother and Dr. Danford told Christa that the fetus was deformed and going to have "handicaps". Her mother told her that the baby would have expensive medical costs and that Christa would be selfish to bring such a child into the world. Christa reported her mother said her "deformed" child would get abused and picked on. Her mother pressured Christa to have an abortion. Christa had ceased smoking marijuana and drinking when she found out she was pregnant, which according to Glenn Pike, her own mother had not done when she was pregnant with Christa. With all the warnings about her "deformed" baby, Christa eventually capitulated and agreed to get an abortion. However, during her incarceration, Christa had the opportunity to review her medical records including those from when she was pregnant; she learned that all tests indicated she and the fetus were "normal". None of the tests indicated the baby was "deformed". Christa was livid that her mother had lied to her and pressured her into having an abortion, which Christa considers "killing my kid for no reason".

When Christa was approximately 17 years old, she was assaulted again while walking to the store. A man grabbed her and pulled her into the woods. She fought him with all her strength. Christa recalled, "I was fighting him so hard that he barely got started (raping her)." She hit his head with a rock, which allowed her to get away. (It is notable that she hit this man's head on a rock, which is like what she did to the victim in the incident crime. This brings up the possibility that Christa was unconsciously triggered during the incident with Colleen Slemmer, and lost control of her behavior, in part because she was triggered by the victim, who she experienced as possibly causing her boyfriend to abandon her.) Christa escaped and ran as fast as she could to a friend's house, who then took her to a hospital. The staff collected a rape kit but there was no semen; she had apparently stopped his attack before he had an orgasm. This man was never identified or caught.

This was the last sexual assault Christa experienced. When asked how she felt sharing so much difficult information with me, she said, "I don't have feelings about it. I feel tense like I've been holding my breath." I encouraged her to get up and move around to release the tension, and to work to resume normal breathing. Feeling a lack of emotion while discussing so much trauma is a strong indication of dissociation.

Medical History

Christa experienced serious health issues from her premature birth onward. She had seizures when she was 18 months and two years old. Christa reported having severe headaches, which she called migraines, since she was a small child. One was so extreme that her father took her to the hospital as a child. The migraines worsened during her adolescence. Headaches are very common among those who dissociate and those who have experienced child abuse and neglect; headache severity and frequency are associated with childhood abuse among migraine sufferers (Kucukgoncu et al., 2014).

Christa reported having a very poor memory all her life. She is not sure if her memory problems worsened after an extremely severe car accident when her mother's boyfriend Danny was distracted while driving. He ran into another car, causing Christa's head to go through the windshield of the car. Christa was so severely hurt that she had to have two surgeries to repair the damage to her face and skull. She showed me the serious scar on her head from this terrible accident.

In addition to the psychological and emotional scars that Christa bears from so many years of abuse, she has physical scars as well. Dr. Pincus found scars on Christa's legs and back from physical abuse which could have been caused by Danny or her father.

Symptoms of Bipolar Disorder

Christa presents with many classic symptoms of Bipolar Disorder. It is notable that in a 1991 psychological evaluation conducted by Dr. Rosemary Wilson, Christa, who was approximately 15 years old, showed the type of emotional reactivity that characterizes bipolar disorder as well as trauma-related difficulties (Evans et al., in press). Specifically, she responded in an overly emotional, unmodulated manner on a colorful Rorschach inkblot whereas other responses were more controlled. Her Rorschach indicates that she has difficulty thinking when she is highly emotional. When highly emotional, Christa becomes "quite confused and disorganized" (027403). Someone with this tendency is at risk for emotional outbursts that are uncontrolled. This is informative because it shows that years prior to the incident crimes, Christa was showing serious difficulty modulating her intense emotionality.

Even more critically, Christa displayed behaviors which are highly suggestive of being in a manic or at least a hypomanic state around the time of the crimes. Specifically, she was observed to be excited and laughing when she returned to the scene of the crimes the day after they took place. A police officer, Harold Underwood, testified that he saw Christa at the scene with friends from Job Corps, and that she was excited and laughing. Christa asked Mr. Underwood why the area had been marked off and whether there were any suspects. Christa's laughing and appearing excited is bizarre behavior; it is not what would be expected from someone who was thinking in a logical way. If she had been thinking logically, and was in control of her emotions, she would have understood it was critically important to not draw attention to herself or else she might become a suspect. She acknowledged her thinking was not rational in the interview with Detective Randy York; she said, "I wasn't really thinking right" (p. 36).

Christa described the mood symptoms she experiences:

> When I'm manic, I get hyper focused if I can listen to the radio. I get more art work done during those times, unless it gets too far gone. Then I can't do art work. (Describe what happens if it gets too far gone) My hair and skin hurt, I'm rocking, my skin is crawling. I want to claw my face off. I have clawed and clawed and clawed the skin on my legs to the point of bleeding. It feels like bugs are crawling under my skin. (How often does it get this bad?) Once every 8 months or so. It lasts until I get something to knock me out and put me to sleep. I can go to sleep for an

> hour, or maybe 3 hours. Once recently I had 7 hours in 8 days. My psychiatrist here prescribed Ativan for 3 days in a row so I could sleep.

It is notable that even now, while Christa is taking powerful psychiatric medications, she continues to experience severe symptoms of bipolar disorder that are highly disruptive to her sleep, mood, thinking, and behavior. Even medicated, these severe symptoms are so disruptive to her mental status that she must have additional medications (i.e., Ativan) to interrupt her severe insomnia so she can finally sleep. Sleep is urgently needed when someone is manic; sleep allows their agitated brain to "reset" and begin to get back to a more functional level. However, once someone has become severely manic, it can take days or weeks, and sometimes longer, for them to get back to a level of thinking, mood, energy, behavior, and sleep that is closer to "normal". Furthermore, getting little or poor sleep can trigger a manic or hypomanic episode.

Christa described what she was like without psychiatric medication:

> "I was a complete wreck. I don't know. I didn't know something was wrong with me. I stayed drunk or smoked weed constantly. I was self-medicating. The weed helped me a lot. I smoked copious amounts – from morning all day long until night like regular cigarettes." When asked about whether she was aggressive when she was irritable, she stated, "I was so irritable so I was more aggressive. I would get into fights before and at Job Corp. I was in two other fights.

When asked if her engagement in criminal behavior was impacted by her mental state at the time of the crimes, Christa replied, "I think PMS (Premenstrual Syndrome) and mania both played a part. I'm so emotional with PMS it's unreal. The day after I was incarcerated, I started my period. I mostly felt irritability, not more depressed, with PMS."

Although Christa was not aware of this, irritability is a symptom of PTSD as well as of bipolar disorder. Thus, at the time of the crimes, Christa was dealing with <u>three</u> contributing factors that increased her irritability, and therefore, aggression: PTSD, bipolar disorder with manic or hypomanic episode, and PMS.

Experts in Bipolar disorder (Preskorn et al., 2022) warn that individuals with bipolar disorder are at risk for agitation turning into aggression if they are not treated:

> …episodes of agitation associated with bipolar disorder are common. Symptoms can range from mild (uneasiness, restlessness) to severe (aggression, violence) and escalation can occur quickly. Patients presenting with agitation require prompt medical attention to facilitate evaluation and to prevent escalation and injury to themselves and medical personnel. (Note: numerous citations have been removed to make reading easier.)

Assessment of Christa Pike

Behavioral Observations

I met with Christa at the Debra K. Johnson Rehabilitation Center where she has been on death row for years. We started by verbally discussing the nature of the assessment, and that the results would not be confidential because I would be conducting a forensic assessment. She gave her consent to proceed with the evaluation.

Christa appeared to have good hygiene. She was dressed in yellow inmate clothing. Her make up was neatly applied. She wore some jewelry and had several tattoos on her left arm, fingers of left hand and left ankle. Some of the tattoos were flowers, butterfly, and ice cream. Christa shared that she has learned to do tattoos while incarcerated, and that she designed and inked her own tattoos. Because she is right-handed, she creates tattoos on her left side. One of her tattoos honors her deceased brother. She was pleasant and solicitous of my well-being (e.g., asking if I needed a break). Christa was respectful and cooperative, despite the very difficult conversations we had to have. She worked to share stories and insights, even when they did not reflect well on her. She was thoughtful, articulate, and funny. At times, her affect was flat even when discussing something emotionally charged or painful. For example, some of the time she talked about experiences of horrific abuse, and she showed no emotion. Instead, she stared or had a blank look on her face. She was also moved to tears as she talked about painful topics. Her thoughts were logical and organized with no signs of psychosis or thought disorder. She completed the questionnaires slowly and carefully.

I did not see signs indicative of flashbacks or rapid mood cycling. However, on one occasion while filling out a questionnaire about trauma, Christa engaged in unusually prolonged staring accompanied by a flat affect. That behavior is indicative of dissociation. She dissociated another time while telling me about Ernest's abuse. At other times, she was able to remain engaged although she was "numb" after sharing her long history of abuse. Numbing is a type of dissociation.

During our meetings, Christa was able to gain insight into the origin of her symptoms and behaviors, such as her beginning to cut herself and use drugs and alcohol after being raped. This indicates that Christa has the capacity for insight and the ability to benefit from psychotherapy.

Psychological Testing Results

Tests and Interviews Administered

In my 12.5 hours of assessment interviews with Christa on two different days, I administered the following measures and interviews:

1. Semi-structured clinical history interview – I interviewed Christa about significant events in her life including her developmental, social, educational, and psychological history.
2. Miller Assessment of Forensic Symptoms Test (M-FAST) – This is a test designed to screen for possible exaggeration of psychological symptoms (i.e., malingering).
3. Life Events Checklist-5 (LEC-5) – This is a self-report measure of stressful or traumatic events that a person may have experienced. I followed up with questions about each event she endorsed.
4. Adverse Childhood Experiences (ACE) Questionnaire – This questionnaire assesses 10 ACEs that may have been experienced in their first 18 years.

5. Childhood Trauma Questionnaire (CTQ) – This is a validated screening questionnaire for child abuse and neglect.
6. Multiscale Dissociation Inventory (MDI) – This is a validated screening measure for dissociative symptoms.
7. Clinician Administered PTSD Scale for DSM-5 (CAPS-5) - This is a semi-structured interview to assess and diagnose possible PTSD.
8. Structured Interview for Dissociative Disorders-Revised (SCID-D-R) – This is a semi-structured interview used to diagnose possible dissociative disorders. It is also helpful in distinguishing dissociative disorders from malingering, psychotic disorders, and other psychiatric disorders.

Validity

There were no indications of unusual responding, symptom exaggeration, or malingering on the M-FAST or TSI-2. I consider this a valid assessment of Christa's psychological functioning.

Trauma Exposure

To provide information on Christa's history of trauma exposure using validated measures, I gave her the ACE Questionnaire, the CTQ, and the LEC.

Adverse Childhood Experiences (Ace) Questionnaire

Christa's childhood can be analyzed through the lens of the Adverse Childhood Experiences (ACE) model. The ACE study, which constitutes one of the most significant public health investigations on the impact of childhood adversity on adult health outcomes, uncovered a graded dose-response relationship between childhood adversities and the leading causes of death, disability, and psychiatric problems (Anda et al., 2006). That is, each childhood adversity significantly increased a person's risk for medical and mental disturbances decades later. Individuals with four ACES or more showed a notably higher risk for a range of medical and mental disorders.

According to my interview with Christa, her responses on the ACE Questionnaire, and my review of collateral sources, she experienced 9 out of 10 ACEs:

(1) Verbal/Emotional Abuse. Christa reported that two of her mother's boyfriends (Danny Thompson, Steve Kyaw) verbally abused her, as did her maternal grandmother and father.
(2) Physical Abuse. Christa reported that her mother sometimes physically abused her. However, her father often physically abused her, as well as did her maternal grandmother, her sister, Danny Thompson, and Steve Kyaw.
(3) Sexual Abuse. Christa reported that Steve sexually abused her. Additionally, she was exposed to numerous severe sexual assaults from individuals who did not live in the home. One of the men who raped her as a youth lived within sight of her home and she had to often walk past his trailer; the possibility that he would attack her again utterly terrified her.
(4) Emotional Neglect. Christa was often overlooked, unprotected, and disbelieved about having been sexually assaulted and mistreated by a babysitter and various partners of her mother.

(5) Physical Neglect. Christa reported that she often did not have enough to eat when she lived with her mother. She was often sent to school without breakfast or lunch money. She had to wear dirty clothes when at her mother's home. Furthermore, her mother was often too drunk to take care of her.
(6) Parental Separation or Divorce. Christa's parents married, then divorced, then remarried each other, and finally were divorced a second time.
(7) Household Member With Problem Drinking or Drug Use. Christa reported that her mother, father, and maternal grandmother drank heavily and/or used drugs.
(8) Household Member With Mental Health Problems. Christa's mother became so depressed after Christa's birth that she attempted suicide.
(9) Witnessing violence between her parents.

It is *highly* unusual for a child to experience nine ACEs: *Christa experienced more ACEs than 99.3% of the U.S. population* (Giano et al., 2020). Furthermore, as noted above, Christa did not experience a single perpetrator for each of the ACEs. Rather, *many* adults mistreated and abused her in a multitude of ways. I am unaware of any studies that investigated the severity of damage when a child is exposed to *multiple* adults in the household who expose the child to the ACEs; this lack of research about multiple perpetrators of ACEs is likely due to how rare this type of multi-perpetrator abuse is.

Rather than home being a place of safety, protection, and belonging for Christa, it was the source of chaos and being endangered when she was a little girl and through adolescence. This placed an extremely heavy burden of adversity on Christa as a child. High levels of ACEs are associated with a wide range of enduring and negative outcomes, including increasing the risk for difficulties in relationships, psychological disturbances, substance abuse, impulsive and high risk behaviors, and violent offending. For example, high ACE exposures are linked with memory difficulties for childhood (i.e., dissociation), depression, anxiety, panic, sleep disturbance, headaches, early sexual intercourse, many sexual partners, difficulty controlling anger, early smoking, heavy drinking, and drug use (Anda et al., 2006; Brown et al., 2007). *Christa suffers from every one of these outcomes.* This is strong evidence that Christa's psychological disorders, difficulty controlling her angry outbursts and behavior, and drug use stem from the tragic level of abuse and family chaos she was exposed to as a child.

Christa's CTQ scores are consistent with her ACE score. On the CTQ, Christa indicated that she experienced a "severe" level of childhood sexual abuse, physical abuse, emotional abuse and physical neglect within her family. The degree to which she suffered physical neglect was worse than the physical neglect experienced by 99% of the population. Christa indicated that it was "often true" that she did not have enough to eat. She "rarely" knew there was someone to take care of and protect her. Regarding physical abuse, she reported that it was "often true" that she was hit so hard by family members that she was left with bruises. Christa indicated that sometimes someone in the home threatened to "hurt me or tell lies about me unless I did something sexual with them". Christa reported emotional abuse within her family including feeling someone in her family hated her, and that people in her family called her names like "stupid, lazy, or ugly".

On the LEC, which assesses trauma exposure throughout the lifespan, Christa endorsed having a very high number of traumatic experiences. Furthermore, she gave compelling, detailed

descriptions of these traumas which made it clear she had experienced these damaging events. Consistent with the CTQ and ACE questionnaires, Christa acknowledged that she endured a truly horrendous level of frequent childhood sexual abuse by five different perpetrators (Ernest, Steve and rapists who attacked her at age 11, 14, and 17) as well as being physically assaulted by her mother's boyfriend (Danny), maternal grandmother, mother, and her father. In addition, she was exposed to severe human suffering when her beloved grandmother was dying from cancer and in chronic excruciating pain. Watching her grandmother's agony without being able to ease her pain or halt her vomiting left Christa feeling helpless and depressed. Her grandmother had been the only person who consistently loved and paid attention to Christa. Losing her grandmother was a devastating loss that altered the trajectory of her life.

On the LEC, Christa also indicated she was violently abused by her former boyfriend and co-defendant, Tadaryl Shipp. For example, he grabbed her by the throat and pinned her against the wall. She fought back in self-defense as best she could. There were other times he was physically aggressive as well as extremely threatening. One time after shoving Christa, he opened his mouth and showed her that he had a razor hidden in his mouth. He was demonstrating in a menacing way that he could do much worse to her if he decided to. He had a reputation for being extremely violent among their peers at Job Corps. He had threatened another teenager by holding the boy over a bridge, threatening to drop him. As a teenager coming from a home with a great deal of neglect and abuse, Christa felt that her boyfriend's aggressiveness meant that she was safe. This type of extremely illogical thinking can result when a child is raised in a chaotic, violent world. Rather than being afraid of violent people, she (falsely) believed that if she was the girlfriend of an aggressive male, she would be safe. She felt that Tadaryl would protect her. Unfortunately, it meant she was exposed to Tadaryl's violence. He also lied and cheated on her, including having a sexual relationship with the victim. This kind of incredibly troubled boyfriend increased the odds that she, too, would become involved in violence, which is exactly what happened. Ultimately Christa and Tadaryl become involved in the lethal attack on Colleen Slemmer, the girl with whom Tadaryl was having an affair.

In summary, this constant abuse, neglect, and chaos put Christa at very high risk for mental illness, substance abuse, and chaotic relationships, all of which heightened her risk for being aggressive (Anda et al., 2006).

Given the life-long, almost constant level of threat to her life, it is not surprising that Christa suffers from severe PTSD symptoms. On the gold-standard interview for PTSD, the CAPS-5, Christa meets the criteria for PTSD with severely disruptive symptoms. As noted above, many of these symptoms began in early childhood and adolescence and were problematic at the time of her crimes.

PTSD's symptoms are grouped into four categories. In the category of intrusive symptoms, Christa experiences:

1. Repeated disturbing memories of the traumatic experiences (especially being orally raped by Ernest as a preschooler).
2. Feeling very upset when something reminds her of the traumas.

3. Having strong physical reactions when something reminds her of the traumas (e.g., she gags a few times a month when brushing her teeth along with shuddering and having chills when she remembers being orally raped. One of the times Christa dissociated was while telling me how she gagged while attempting to engage in oral sex with Tadaryl; this shows that PTSD was active and disruptive at the time of the crimes).

In the category of avoidance of stimuli reminiscent of the traumas, Christa experiences:

1. Avoiding memories, thoughts, and feelings related to the traumas. Although Christa has some insight into avoiding traumatic reminders, she is fully aware of how often she avoids thinking about the many abuses she endured. It has become such an ingrained way of surviving that she is not even aware she is avoiding and minimizing being abused.

In the category of negative alterations in cognitions and mood associated with the traumas, Christa experiences:

1. Having difficulty remembering important parts of the abuse
2. Having strong negative beliefs about others ("No one can be trusted". Christa said that 80% of the time, she feels tremendous mistrust for others).
3. Blaming someone for the traumas ("I blame the ones who abused me 100%. My Mom didn't know how to be a Mom. My maternal grandmother hated me because I look like my Dad and she hated him.").
4. Having severe negative feelings ("I feel fear, guilt and shame." Christa is aware that shame and guilt underlie her fearfulness.)

In the category of marked alterations in arousal and reactivity related to the traumas, Christa experiences:

1. Being on hyper alert ("always").
2. Feeling jumpy, particularly in response to loud noises or someone walking by her.
3. Having difficulty concentrating to such an extent that reading, writing, and even participating in conversation can be difficult.
4. Having severe trouble falling as well as staying asleep. It can take as long as 3-4 hours to fall asleep at night, then she often repeatedly awakens at night; it can take an hour or more to fall back asleep each time.

On the self-report measures of PTSD, i.e., the TSI-2 and PCL-5, Christa did not report all of her symptoms of PTSD. She did not endorse some symptoms she told me on the CAPS. In my experience, the detailed questions on the CAPS-5 help most trauma survivors recall more examples of symptoms. This contributes to why this interview is considered the gold standard for diagnosing PTSD. Christa's tendency to not endorse symptoms on the self-report questionnaires indicates she is not attempting to exaggerate her symptoms. Rather, she has adapted to having severe PTSD by avoiding thinking about trauma and her PTSD symptoms, and by minimizing her symptoms. It is typical for individuals to become more avoidant over the years when they have experienced so much trauma and neglect during childhood and adolescence. However, even with minimizing,

Christa reported that a couple of times each year, she begins to feel very distressed and "helpless like a kid" when she recalls having been abused. She also acknowledged that she has dissociative amnesia: "The order (of experiences of abuse) is hard to keep straight. I can feel pieces are missing and my age feels wrong."

On the TSI-2, Christa scored in the clinical range for the Suicide scale and the Suicidal Ideation subscale. This indicates she has frequent, concerning thoughts about wanting to die. She was careful to say that she has not acted on these thoughts nor does she want to act on them. (Note: I include some of the TSI-2's questions in quotes to illuminate some of Christa's endorsements.) She endorsed a number of items that would be consistent with a mood disorder including often "feeling mad or angry inside", "feeling hopeless", "having angry thoughts" although she was quick to note that she is now able to prevent herself from acting on those thoughts due to mood stabilizing medications and having received some trauma treatment while incarcerated. She endorsed being "depressed" as well as sometimes "wanting to hit someone or something" and "getting angry when you didn't want to".

Feelings of irritability and anger are classic symptoms of both PTSD and bipolar disorder, both of which Christa suffers from. Christa also endorsed a number of symptoms of PTSD including often "trying to forget about a bad time in your life" and sometimes having "trouble getting to sleep or staying asleep because you were feeling tense", "stopping yourself from thinking about the past", feeling jumpy, and "trying to block out certain memories". Christa also endorsed some symptoms of dissociation including sometimes "spacing out".

To further assess Christa for dissociative symptoms, I gave her a self-report questionnaire (MDI) and the SCID-D-R, which is widely considered to be the "gold standard" interview for reliably diagnosing dissociation and dissociative disorders. On the MDI, Christa scored in the "clinically significant" range for Disengagement. This subscale measures the extent to which an individual emotionally and/or cognitively disengages from the world around them. Importantly, Christa's score on this subscale matched the average score of people who needed psychiatric treatment due to having experienced interpersonal violence. Her score was higher than approximately 99% of the people in the norming sample who had experienced trauma (Briere, 2002). On this subscale, Christa indicated that she very often experiences being "absent minded and forgetful", and that often finds herself "not paying attention because you're in your own world", "spacing out", and "staring into space without thinking."

Consistent with Christa's report of dissociative symptoms, I observed her dissociating when we talked about some of the most emotionally painful experiences she has endured. It was while relating some of the most awful trauma stories that she tended to show no feeling and/or stare off into space; this is consistent with what is expected in someone with a dissociative disorder.

Christa's responses were severe enough that she meets criteria for "severe" levels for **Dissociative Amnesia** due to gaps in her memory more than once per month as well as for lack of recall for daily activities such as whether she has eaten or not. I observed her having difficulty recalling some of the traumas she has endured. She stated, "It hurts my brain. I try so hard to remember." Her poor memory has caused her to have trouble functioning. For example, as a child her memory was so bad that she could not memorize multiplication tables, no matter how many times she

worked on them and despite desperately wanting to memorize them so her father would not get angry and beat her. At the beginning of our interview, without any prompting from me about memory issues, Christa stated, "My memory is a disaster so I'm not sure when I started it", referring to not recalling when she began to take the anti-psychotic medication Abilify.

On the SCID-D-R, Christa reported that she experienced depersonalization during the sexual attack when she was 11 years old as well as during the incident that resulted in her being sentenced to death. During both events, she experienced herself outside her body, looking down at herself.

She gave the following compelling description of being in a manic or hypomanic state during days before the incident, which occurred after she stopped self-medication with marijuana (these symptoms are identified in italics). Christa described experiencing an out-of-body experience of depersonalization (this symptom is identified in bold) during the criminal incident:

> When I stopped marijuana, *I started staying up all the time*, and I was *irritated and angry* again. I could not be at Job Corps and smoke (marijuana). I had to stop. *I had been up for almost three days when I caught my charge*. It had been over 30 days since I stopped smoking. I passed my drug test so I was clean. I felt like my skin was hurting, like I had the flu. I could feel my hair. *I was angry, irritated*. I didn't want anyone around me. *I was pissed with everyone and everything*. (How was your appetite?) I don't know (What were you thinking?) Just remember being what I know now as manic. *Everything was like, everything quickly, I want a response, I need you to do it now*. (She imitated *pressured speech* and *agitation* and fast hand gestures). *Any little thing was such an irritant*. (Were you fighting more?) Not with my boyfriend. I don't remember with anyone else. (Were you taking any risks?) I don't remember. (How was your libido?) *It was over the top! I was having sex 3 or 4 times a day, as often as he would let me. He'd say, leave me alone.*

Christa spontaneously described dissociation during the first day of interviewing, without realizing that is what she was describing: "It's so hard for me to tell my own stories of abuse, neglect, and self-harm, and lay myself bare. So I *disconnect myself from these stories like it happened to someone else*." She began to cry, and then went on describing depersonalization, "This is someone else's. Like a movie I watched one time."

Notably, Christa did not endorse all the symptoms of dissociation on the TSI-2, MDI, or SCID-D-R. This gives greater credibility to the dissociative symptoms she endorsed. She denied symptoms of identity confusion and alteration as well as derealization.

Childhood Maltreatment, Bipolar disorder, and Risk for Aggression

Individuals with bipolar disorder report more frequent childhood abuse than do individuals who do not have bipolar disorder, as well higher levels of insecurity about attachment relationships, greater dissociation, and higher anxiety, depression and stress (Kefeli et al., 2018). Childhood trauma exposure increases the risk for bipolar disorder, with emotional abuse being particularly strongly linked to its development (Kefeli et al., 2018). Individuals who experienced emotional

abuse were more than four times more likely to have bipolar disorder than those who were not emotionally abused.

Childhood maltreatment predicts much more severe outcomes for individuals with bipolar disorder. A meta-analysis of research studies found that those who experienced physical abuse in childhood were more likely to have an early onset of bipolar disorder, rapid-cycling moods, psychotic symptoms, more suicide attempts, and more severe manic symptoms, as well as greater risk for PTSD and substance abuse (Daruy-Filho et al., 2011). Those who experienced sexual abuse were also at much higher risk for PTSD and substance abuse. Particularly important in Christa's case, studies have also found that *individuals with childhood abuse and bipolar disorder are at heightened risk for impulsivity and aggression* (Daruy-Filho et al., 2011).

In summary, based on her self-report, testing results, my observations of Christa, and my review of her records, Christa suffers from *eight serious psychological disorders:* **Bipolar I Disorder,** complex **Posttraumatic Stress Disorder**, **Dissociative Amnesia, Depersonalization/Derealization Disorder, Panic Disorder**, **Obsessive Compulsive Disorder**, **Hoarding Disorder** (hoarding food), and **Specific Phobia** (Spiders). In her youth, she likely also suffered from even more disorders, specifically Trichotillomania, Bulimia Nervosa, and Marijuana Use Disorder. Having *eight* co-occurring psychological disorders is extremely uncommon in the general population but it is not unusual among individuals who have been exposed to severe, chronic complex trauma that began in preschool like Christa endured. Many trauma experts refer to this type of broad and severe symptomatology that develops following complex trauma as "Complex PTSD". Christa was clearly disabled by the impact of these serious, untreated psychological disorders throughout her life, including at the time of her crimes.

I believe elements of reenacted trauma showed up in Christa's behavior in her late teens. Christa was exposed to the brutal slaughtering and disemboweling of animals when her grandfather babysat her at a slaughterhouse as a preschooler. This exposure to animals being killed and decapitated brings up the possibility that Christa was unconsciously reenacting the bloody scenes she had been exposed to as a little girl during two bloody episodes in her teens. Specifically, Christa lost control of her behavior during the incident that led her to being on death row, as well as when she, in her own estimation, went "too far" in beating up a man who raped her when she was 17. The victim in the instant crimes was beaten and badly bloodied. Christa used rocks to hit the head of the victim in the instant crimes as well as the man who attacked when she was 17 years old. This may have been an unconscious attempt to be in control in both situations where she was threatened. In the episode with the man, he surprised her and began raping her. Only after she hit him in the head did he stop raping her and run away. Christa reported to the police that she had tried to get the victim in the instant murder to stop talking to her. Christa was trying to get her to stop calling her the same names one of Christa's abusers had called her. Christa perceived the victim as a threat to Christa in that she had been harassing her, cutting up photos that were precious to Christa, coming into her room at night while she slept, and threatening to steal Christa's boyfriend from her. Christa reported telling the victim repeatedly to stop talking, but the girl refused to stop talking. Christa was triggered by this girl's use of the same slurs as one of her previous abusers, and by the possibility that this girl might cause Tadaryl to abandon her. All of these situations (slaughterhouse, rape at 17, and instant crime) were bloody scenes in which animals and people were severely injured or killed. When triggered and threatened, Christa

becomes disorganized in her thinking. Under serious stress, she is unable to reign in control of her behavior, emotions and thinking, as noted in Dr. Wilson's and Dr. Engum's testing. This had tragic consequences.

Prior Experts' Opinions

Dr. Rosemary Wilson's 1991 Evaluation

In Dr. Rosemary Wilson's psychological evaluation of Christa at age 15, Christa showed several signs that are indicative of her having been seriously traumatized. On the Thematic Apperception Test, Christa's stories were notable for a child being killed in a bus accident, a woman who killed herself, a woman who was killed by someone hitting her with a frying pan, a child who was preoccupied with worry because her parents did not pick her up from the babysitter's home, and a girl who "beats the butt" of another girl who was "with her boyfriend". The latter story is strikingly like the incident that resulted in Christa being on death row. The lethal bus accident is reminiscent of Christa being in a very severe car accident that required her to have two surgeries. The characters in her stories did not seek help for their problems by talking to others, nor did they show any other healthy methods of coping. Instead, violence, murder, and suicide were what Christa's characters relied on; this shows this is what Christa expected. These bleak, violence-filled stories suggest this is what Christa had experienced and learned. These stories show that as a young teenager she was familiar and preoccupied with neglectful parents, forgotten children, suicide, murder, and physical violence. Although it is typical for one, two, or even three stories such as these to occur in the testing of youth who have experienced neglect and abuse, it is rare to see so many stories of trauma and neglect in one individual's testing. This strongly suggests that Christa's life was filled with extraordinary amounts of violence and hostility with no sense that anyone could be relied upon for safety or protection.

Similarly, Christa's Rorschach responses from this evaluation also showed signs suggestive of trauma and abuse as well as the emotional lability characteristic of bipolar disorder. For example, she indicated seeing a "mouth with a busted lip". This sounds autobiographical in that Christa told me she had been punched in the mouth by one of her mother's boyfriends, sustaining a "busted lip". Her perceptions were often distorted and disorganized, suggesting a vulnerability to misperceiving situations and possibly being vulnerable to experiencing psychosis when highly stressed. There was an image of smaller creatures being pulled down and sucked up, ostensibly being destroyed by a bigger creature, suggesting themes of annihilation and vulnerability. Again, this sounds metaphorically like Christa's lifelong experience of being repeatedly pulled down and violated by "big creatures", that is, adult men. In Christa's childhood, small creatures were destroyed by larger creatures; children were brutalized by adults. Images depicting violence, aggression, and vulnerability are commonly found in the Rorschach protocols of youth and adults who have experienced interpersonal violence (Brand et al., 2006).

At the time when Dr. Wilson evaluated Christa, little was known about the impact of trauma on psychological testing. Research had not yet been conducted that demonstrated that the traumatic intrusions Christa showed throughout her testing are emblematic of chronic abuse and neglect. Thus, these myriad signs of trauma were not understood to be indicators of trauma. Rather, it seems that Christa was seen as hostile and enraged, rather than traumatized and understandably angry and with trauma- and bipolar-based irritability.

Christa told Dr. Wilson that Alicia, her older sister, locked Christa in her bedroom and told Christa that she was leaving her there while she, herself, left. Christa reported that being locked up and abandoned by Alicia "scared her to death." On another occasion, Alicia tricked Christa into putting her fingers in a door which Alicia then slammed on her hand.

Eric Engum, Ph.D., J.D.'s 1995 Evaluation

Dr. Engum conducted neuropsychological testing with Christa when she was 19. His report does not include any review whatsoever of her psychosocial history or chronic exposure to profound abuse and neglect. It appears Dr. Engum conducted the testing and interpreted it without any information about Christa's background including her history of head trauma, premature birth, repeated seizures, and other risks for brain injury. He based his conclusions solely on the tests he administered. This lack of information about developmental history was unusual even back in 1995. Dr. Pincus testified that it was absurd for Dr. Engum to conclude, as he did in his report, that Christa had no brain damage based solely on his testing.

In my review of Dr. Engum's report and testing data, in addition to being surprised by the omission of Christa's psychosocial development, I was struck by Dr. Engum's failure to mention that Christa elevated on both MMPI-2's PTSD scales. These are notable findings, yet he completely missed them. The DSM included PTSD as a disorder beginning in 1980 so the symptoms of this disorder were well-known when Dr. Engum assessed Christa. Nonetheless, Dr. Engum did not include any tests that specifically focused on assessing trauma history or trauma-related symptoms; for example, there was no assessment for or mention of dissociation. (Another unusual aspect of Dr. Engum's report is that he copied whole sections of his report from the computerized reports generated by the companies that publish the psychological tests he used. This is generally not acceptable among psychologists.)

Dr. Engum's lack of consideration of trauma negatively impacted his understanding of Christa. For example, on the Wechsler Adult Intelligence Scale, he noted the considerable scatter and variability of Christa's responses. She did exceptionally well on some subtests and poorly on others, and she also missed easy items yet did well on much harder items on some subtests. He did not have an explanation for this. One possibility he failed to consider is the interference from trauma-related triggers. This has been noted to cause variability and scatter in the testing of traumatized, dissociative individuals (Brand et al., 2006). For example, Christa did very well on Comprehension; however, her first failed item was related to why we need child labor laws. She answered that children could get mistreated and physically abused (000056); she did not recognize that they also need to go to school and develop socially. This response is an example of how Christa's traumatic experiences sometimes were triggered, and intruded on and disrupted her thinking, making it difficult for her to fully understand situations due to the disorganizing influence of traumatic intrusions and triggers. Indeed, this tendency for Christa to get triggered by traumatic intrusions likely played a role in her losing control in the instant offense (see below).

Dr. Engum noted that Christa was elevated on many scales on the MMPI-2 including anxiety, paranoia, angry mistrust, and schizophrenia. He did not note that it is characteristic for chronically abused individuals to show elevations on numerous MMPI-2, MCMI, and Personality Assessment Inventory (PAI) scales including the ones Christa elevated on; this pattern of elevations is

particularly likely in those who have experienced childhood sexual abuse (Brand & Brown, in press; Brand et al., 2016). Relatively little was known about the impact of trauma at the time Dr. Engum conducted his testing, so it is not surprising that he was unaware of the devastating impact of trauma and the patterns with which this devastation shows up in psychological testing. However, that does not explain why he failed to consider PTSD given her elevation on both PTSD scales.

Furthermore, Dr. Engum's report indicated Christa suffered from insomnia and nightmares; these were well-known symptoms of PTSD at the time of his evaluation, yet he did not mention the possibility of Christa having PTSD. Christa endorsed all four items on the PAI that are considered possible evidence of trauma exposure, yet he failed to mention that. It is even more baffling that Dr. Engum did not consider trauma's role given that the computerized interpretation of the PAI suggested that trauma was likely: "The respondent has likely experienced a disturbing traumatic event in the past – an event which continues to distress her and produce recurrent episodes of anxiety" (000038).

Dr. Engum noted Christa suffered from racing thoughts and intense labile mood swings, yet he did not mention these are classic symptoms of bipolar disorder, nor did he mention considering that diagnosis in his report. These symptoms, especially when combined with insomnia, signal that bipolar disorder should have been seriously considered. Christa also endorsed items suggestive of depression including worthlessness, guilt, and low self-esteem; depressive symptoms can occur in bipolar disorder or major depressive disorder. The testing also revealed that Christa was prone to "unusual perceptual or sensory events and/or unusual ideas that may involve delusional beliefs" (000039). Thus, the testing indicates Christa is prone to psychotic level problems with thinking and perception.

Dr. Engum noted that Christa was somewhat elevated on the Negative Impression Management (NIM) scale of the PAI. One interpretation of elevation on the NIM scale is that the individual may be attempting to present themselves in a particularly negative light; that is how Dr. Engum interpreted this elevation. However, research shows that this scale includes items (e.g., having few positive memories for childhood) that are so commonly endorsed by traumatized individuals with dissociative symptoms that this scale has questionable validity in people with complex trauma histories, particularly those with dissociative symptoms (Stadnik et al., 2013).

Dr. Engum diagnosed Christa with depressive disorder not otherwise specified, cannibus (sic) dependence, and borderline personality disorder. Trauma experts have convincingly shown that the symptoms of borderline personality disorder are, in fact, more accurately understood as stemming from the damaging impact of trauma, particularly when it occurs in childhood (J.L. Herman, 1992; J. L. Herman, 1992; Herman et al., 1989). When treated for trauma, these individuals often no longer appear as labile, and may no longer meet criteria for borderline personality disorder. Dr. Engum was either not aware of, or failed to consider, the lifelong impact of trauma on Christa, including in making diagnostic conclusions about her.

<u>Stuart Grassian, M.D.'s 2001 Affidavit</u>

Dr. Grassian was involved in assessing whether Christa was able to rationally withdraw her post-conviction appeals, particularly considering her having been in solitary confinement for over five years, starting at the vulnerable age of 19. Dr. Grassian described Christa having "grown up with

a profound experience of childhood abandonment" He warned that Christa could become disorganized and terrified by threats of abandonment. (As noted below, I agree with his assessment and believe the threat of abandonment played a role in Christa losing control of herself in this incident.) He wrote that Christa's "feelings can become blinding, screaming all-consuming" (p. 3) when she feels she could be abandoned. Further, he opined that, "When individuals such as Ms. Pike are placed under great stress, their capacity for voluntary choice is of course not totally extinguished, but it is inevitably severely compromised" (p. 3). Dr. Grassian wrote that in response to the damaging impact of solitary confinement, individuals can begin to have psychotic, dissociative, and obsessive-compulsive symptoms.

Dr. Grassian mentioned understanding that Christa likely suffers from bipolar disorder. He raised serious questions about Christa's ability to rationally decide to withdraw her appeals.

George Woods, M.D.'s 2001 Evaluation

Dr. George Woods reviewed records from previous evaluations of Christa, and concluded that Christa showed signs of mania or hypomania. His report notes that Christa had a history of staying awake for two or three days, a pattern that he acknowledged met criteria for both bipolar I and bipolar II. He noted she was easily distracted and clearly showed an increase in goal-directed activity and psychomotor agitation. Further, he referenced Christa having a history of excessive involvement in pleasurable activities that have a high potential for painful consequences. He mentions her sexual behaviors as one example of this type of manic or hypomanic behavior. He refers to Dr. Engum's finding that Christa suffers from racing thoughts, noting that they are "a cardinal symptom of mania, as is insomnia" (p. 3). He diagnosed Christa with bipolar II disorder and PTSD.

Dr. Woods' report notes that children who have been subjected to overwhelming trauma often have themes of violence show up in their play. I agree with Dr. Woods; furthermore, trauma survivors often unconsciously reenact aspects of their trauma history even in adulthood. For example, some survivors of sexual abuse end up acting out their sexual abuse by having a great number of sexual partners; this is seen as an attempt to undo the helplessness they experienced in childhood, by being in control and triumphing over partner after partner in adulthood. This is likely true for Christa who reported having as many as 50 sexual partners prior to her arrest at 18. It is also likely that she engaged in excessive sexual activity during episodes of mania or hypomania. I think another form of reenactment took place during the crimes (see below).

Jonathan Pincus, M.D.'s 2001 Evaluation and Subsequent Testimony

Dr. Pincus noted throughout his report the devastating impact of the extreme, chronic level of trauma that Christa had endured. He stated, "She is the product of an almost unbearably abusive background." In addition to the many traumatic experiences recounted above, Dr. Pincus' report included a story about her sister Alicia purposefully burning her with a curling iron, resulting in a scar that was still visible to Dr. Pincus. He noted that Christa witnessed violence between her parents. He described Christa surviving her horrific childhood by retreating into dissociation; specifically, she escaped into a vivid fantasy world in her mind that was so real that she could speak with her deceased paternal grandmother (Grandmother Delfa). He commented that on the Millon Clinical Multiaxial Inventory, she showed an elevation on avoidance which is consistent with PTSD and trauma.

Dr. Pincus's neurological examination found evidence that Christa had abnormal neurological problems that he felt were probably related to her premature birth and neonatal events. She had an Apgar score that was very concerning (i.e., 3) and she had seizures at 18 months and again at two years. He described that Christa was "vaulted through the windshield of a car" when her mother's boyfriend was playing the radio too loud and distracted by drumming along with the music. Christa lost consciousness for several minutes. Dr. Pincus indicated all of these events put Christa at risk for brain damage.

Dr. Pincus insightfully recognized that Christa was triggered by the "code words" of "slut" and "whore" that Colleen Slemmer hurled at her during the incident that led to Christa being on death row. These were the precise humiliating words her mother's boyfriend Steve Kyaw used in his abuse of her. Being called those names by Slemmer triggered the intense shame, worthlessness, and rage that Christa had felt when she was degraded by the same words by Kyaw. Dr. Pincus indicated that Slemmer calling Christa these "code words" triggered such an overwhelming surge of rage that Christa utterly lost control of her behavior. I agree with Dr. Pincus and elaborate on this below.

Dr. Pincus concluded that Christa had "dissociative states". He diagnosed Christa with a severe dissociative disorder, PTSD, obsessive compulsive disorder, depression, and intermittent explosive disorder. It is crucial to note that he linked Christa's multiple neurological impairments, head trauma, and likely brain damage with her developing intermittent explosive disorder.

Dr. Pincus's report did not mention the many symptoms of mania that Christa experienced including irritability, agitation, and severe insomnia. It appears he was not aware of these symptoms. However, in his testimony at Christa's post-conviction trial, he noted that Christa had been diagnosed with bipolar disorder and that her symptoms of that disorder had drastically improved after she had been treated with Lithium, which is a first line medication for bipolar disorder. Thus, Dr. Pincus acknowledged that Christa had bipolar disorder when he testified on this later date.

<u>William Kenner, M.D.'s 2002 Evaluation</u>

Dr. Kenner evaluated Christa regarding her competency to make rational choices, specifically to waive her post-conviction appeals. Dr. Kenner acknowledged and considered Christa's exposure to sadistic adults, sexual and physical abuse, and neglect throughout her childhood. He also noted that she had been exposed to pornography beginning as early as four years old. His report notes that Christa has a "bad memory" which she attributed to smoking marijuana; however, trauma and dissociative amnesia can also contribute to poor memory for one's life experiences (Brown et al., 2007).

Dr. Kenner's report is the most thorough of any prior expert's in terms of reviewing records of Christa's symptoms and behavior while she was placed in a home for troubled adolescents in 1991. Notably, those records include the following observations of Christa: she was "a bundle of energy", repeatedly excessively talking, and repeated mentions of her being "hyper", "total change of attitude", "too restless", and "Christa has an amazing amount of energy, even when sick". Staff also noted that she had difficulty focusing on tasks and that she showed a highly variable mood.

These behaviors are strongly suggestive of symptoms of bipolar disorder. Dr. Kenner noted that Dr. Grassian and Dr. Woods had a conversation about Christa having bipolar disorder. He also noted that Dr. Engum's report mentioned insomnia and racing thoughts.

Dr. Kenner documented Christa's mental status "changed drastically" between his numerous visits which included observing her after she had not slept for up to 72 hours and after she had been treated with Lithium. She was suffering from visual hallucinations on March 13, 2002, which he attributed to her having an adverse reaction to the mood stabilizer Depakote. He noted that Christa's "mental status had changed dramatically for the better" following beginning treatment with Lithium. Prior to being treated with Lithium, Christa had presented at times with loud, pressured speech; "intense rage and irritability"; aggressive thoughts; and racing thoughts when she was not getting sleep. Critically important, Christa reported that she had been sleeping only one or two hours per night before the murder.

Christa reported a history of these types of manic symptoms, as well as not being able to speak her thoughts as rapidly as they were coming to her and engaging in high-risk behaviors when she had been awake for days. Christa reported having these classic symptoms of bipolar disorder, along with periods of depression, extending back into her early adolescence. Further evidence of mania included her report of having had as many as 50 sexual partners.

Christa expressed feeling much better, having control of her behavior, and sleeping well when treated with Lithium. She said that her moods made sense when they shifted when she was medicated, whereas prior to being treated for bipolar disorder, her mood changed erratically for no reason.

Dr. Kenner documented that Christa's symptoms changed when she was treated with mood stabilizers, according to testing completed by Dr. Pamela Auble. When untreated, she had referred to having racing thoughts on Incomplete Sentences and having a "defective" mind. Prior to treatment, she was highly elevated on scales measuring anxiety and depression, but after receiving treatment, both scales had dropped significantly, such that both anxiety and depression were in the normal range. Prior to treatment, mania scales were elevated on the PAI and MMPI-2, but after treatment with mood stabilizers, her mania scale on the PAI was in the average range and on the MMPI-2 it was still high but much closer to normal.

Christa reported to Dr. Kenner that she was afraid of how out of control she can become when she is agitated and manic. She did not want to hurt anyone.

Dr. Kenner's report documents that Christa was permitted to drink with her mother and her boyfriend when she was 16; she reported that she "drank both of them under the table".

Dr. Kenner assessed for dissociation. Christa told him about experiencing severe depersonalization, that is, seeing herself leaning over and holding her dead grandmother's body at her funeral. She also indicated that she had a similar experience of severe depersonalization during the incident that resulted her being on death row. "When the incident happened, I was looking down on myself and watching it", Christa reported.

Dr. Kenner diagnosed Christa with bipolar II disorder which he stated she had suffered from since her early teenage years. Although he did not specifically diagnose PTSD or a dissociative disorder, he clearly indicated throughout his report that Christa suffered damage from years of abuse and neglect and that she had symptoms consistent with PTSD including dissociation.

My Review of Other Experts' Reports and Testimony

No expert at the time of trial testified about the full impact of the extraordinary level of trauma Christa was exposed to, nor did the experts link her chronic trauma history to the development of her numerous psychiatric disorders and subsequent criminal behavior. Without evidence of Christa's history of complex trauma history and multiple mental health disorders that directly affect her ability to process and respond to stressful situations, and her inability to regulate her emotional lability due to the impact of trauma and her psychiatric disorders, the jury was left without the essential information it needed to understand Christa's actions.

I reviewed the psychological testing reports of the assessments performed by previous experts who presented some of Christa's psychosocial history. Unfortunately, none of these professionals used any research-based tests or interviews to assess the presence and/or severity of dissociation, PTSD, and childhood trauma. Furthermore, none of the prior mental health professionals fully assessed Christa's trauma history and the crucial link between complex, chronic trauma, emotional dyscontrol, bipolar disorder, and risk for aggression. Without understanding these aspects of Christa's personality and neurobiology, and her inability to regulate her emotions due to bipolar disorder and the impact of incessant trauma, it was not possible for her defense team to fully understand or explain Christa's actions in her trial.

Had a trauma expert conducted the full assessment I conducted, they could have provided a clinical explanation for Christa's extreme aggression towards the victim. In my professional opinion, Christa's rage and subsequent aggression occurred for several reasons:

1. Christa was experiencing untreated intense bipolar emotional reactivity. It is very likely she was at least hypomanic if not manic at the time of the crimes. Research clearly documents that individuals with bipolar disorder are at risk for irritability and aggression when untreated.
2. Christa was suffering from untreated trauma and PTSD. Irritability and hyper-reactivity to perceived threats are symptoms of PTSD.
3. Christa was deeply threatened by the fear of losing her boyfriend to the victim. While individuals without a history of trauma, PTSD, and bipolar disorder may not have been so threatened by the possibility of losing a boyfriend, Christa was saddled with all three of these psychological vulnerabilities. As noted by several experts, when Christa perceived she was possibly going to be abandoned, her thinking could become disorganized and illogical. As Dr. Grassian described it, "feelings (when abandonment was possible) can become blinding, screaming all-consuming" (p. 3).
4. Christa was just 18 years old, with a brain that was not yet fully developed. The human brain is not fully developed until the mid-20s. Prior to that, youth do not have the ability to think through impulses, fully consider the consequences of their actions, nor "put the brakes on" their intense behavioral impulses.

5. The victim, Colleen Slemmer, called Christa the exact derogatory sexual terms used by one of the sexual predators who abused Christa. Traumatized individuals respond to being triggered with an intense flood of emotion that impairs their ability to think logically and control their behavior, and to recognize consequences until it is too late. There was a tragic synergistic impact of these factors: Christa, who was already in a hypomanic or manic state, was severely triggered by these slurs. She was so stressed by her emotions and the possibility of losing Tadaryl, her boyfriend, that she dissociated, seeing herself high above the scene. This perceptual distortion is an indicator that Christa was extraordinarily overwhelmed by stress and emotion. She spontaneously dissociated to escape, at least perceptually, up into the tree above what was actually happening during the incident. Her tendency to dissociate had become a conditioned response to threat and danger due to her extremely abusive childhood. It is tragically predictable that in such an emotionally charged, high-stress situation, a youth with untreated bipolar I disorder and other untreated disorders would not be able to slow down and regulate their emotions and develop a more reasonable, mature, and non-violent way to deal with a peer's threats and verbal badgering.

I believe that it is likely that Christa's heavy abuse of, followed by attempting to quit using marijuana on her own without treatment, combined with bipolar disorder and the impact of trauma, likely impacted her brain functioning and behavior. I recommend that a medical doctor with expertise in these areas examine and opine whether Christa's judgement, behavior, and self-control were likely impacted by these factors.

The Cumulative Impact of Trauma

As the number and type of childhood traumas increase, so does the severity and breadth of difficulties a traumatized person struggles with, often for the rest of their lives, unless they get trauma treatment (Anda et al., 2006; Cloitre et al., 2009). When maltreatment is this severe, it can cause enduring and complex changes in the person's brain structure and functioning; stress response system; beliefs about themselves and others; relationship skills; ability to regulate emotions and behavior; ability to attend, remember, learn from experience, and ability to think through and solve problems adaptively rather than impulsively or immaturely. Children exposed to extreme childhood maltreatment are at very high risk for developing chronic psychological, academic, behavioral, social, and neurocognitive (including poor attention) difficulties (Cicchetti, 2016; Cowell et al., 2015; Flynn et al., 2014; International Society for the Study of Dissociation et al., 2011; Macfie et al., 2001; Teicher et al., 2003). They do not develop a sense of themselves as a good person, others being trustworthy, authorities being protective and ethical, or that the world is safe and can be enjoyed so that the child can relax and let down her guard (e.g., (Courtois & Ford, 2009)).

Traumatized girls often exhibit difficulty focusing their attention as well as difficulties with other types of executive functioning, such that their concentration is poor. Poor attention interferes with academic success and their ability to remember and learn. This in turn contributes to them feeling "stupid" and inferior to others, which further erodes their sense of self which is already damaged due to trauma. This may have contributed to Christa's lack of enjoyment of school, and her dropping out of school after the 9th grade.

Depressed and damaged, people like Christa, tend to either not see warning signs that others are potentially dangerous or untrustworthy, or if they do notice some warning signs, they tend to ignore them or simply endure the ongoing mistreatment because being mistreated is all they know. They do not expect to be treated fairly and respectfully. The degree to which they expect others to be violent sets the stage for traumatized individuals being extremely vulnerable to being continually abused and manipulated by others outside the home throughout their youth and into adulthood, exactly as occurred with Christa. A child raised amongst violent, abusive people has not been taught to resolve conflict in healthy ways, or how to set self-protective boundaries in relationships, or that they should end relationships that are exploitive, violent, and/or sexually abusive. They have not been taught how to manage their emotions, and they tend to feel either too much (e.g., rather than feel happy, they skyrocket into mania or hypomania) or too little (e.g. feeling numb due to dissociation). They have no healthy ways to manage all the symptoms caused by trauma, such as how to manage depression and shame. They are prone to using self-destructive methods like drug and alcohol use to disconnect from their overwhelming painful feelings, horrible memories of abuse, and out-of-control psychiatric symptoms. These difficulties contribute to many traumatized, dissociative children struggling and failing in school, in social relationships in childhood and adolescence (DePrince et al., 2009; International Society for the Study of Dissociation et al., 2011; Teicher et al., 2003; Teicher et al., 2010).

Several of the previous evaluators note in their reports that Christa is highly dependent on others for support and vulnerable to feeling terrified if she feels she may be abandoned. The early experiences of being locked up and left behind, combined with continual neglect and abuse by her parents coupled with abuse by many adult men, created a tremendous fear of being abandoned. Christa's mother prioritized her relationships with men, purchasing clothing for herself, and buying alcohol above her daughters, as evidenced by her sending Alicia away to be raised by her sister and by her years of neglect of Christa. Christa's father also refused to take proper care of her, and relied on beating her to assert control, rather than actually teaching and parenting her. These experiences contributed to Christa being desperate for what she perceived as love in later relationships, including the one with Tadaryl Shipp.

Current Psychiatric Treatment

Christa did not receive psychiatric medication before she was incarcerated. Christa's psychiatric medications as of June 13, 2023 were Bupropion (Wellbutrin) 200mg at noon and bedtime; Aripiprazole (Abilify) 10mg at noon; and Propranolol 20mg at noon and bedtime. Buproprion and Aripiprazole are medications that treat depression and psychosis and bipolar disorder, respectively. Propranolol was added to manage the side effect of hand tremors that Christa developed after taking Aripiprazole.

Christa has found medications to be remarkably helpful in decreasing her moods swings and reducing her profound depression, as well as being somewhat helpful with calming her life-long anxiety. She reported having tried other anti-depressants and Depakote in the past that were not helpful or caused intolerable side effects. Since starting her current medications, Christa feels she can function more normally despite the incredible stress of living on death row in a unit that is often highly chaotic.

While incarcerated, Christa has worked to heal the impact of childhood abuse and neglect. In addition to the mood stabilizing medications that she is cooperatively taking, Christa reports having been helped a great deal by a therapist, Dr. Ali Winters, who provided her with treatment. Dr. Winters no longer lives near the prison, so can no longer treat Christa, although she still visits Christa regularly. It has been powerful for Christa to gradually feel less like an unworthy, unlovable "plague kid". She has learned much from talking to Dr. Pincus and Dr. Winters about her trauma history, and learning how it has impacted her behavior, thinking, feelings, and relationships, as well as her criminal behavior. She now expresses regret and sorrow about her actions in this case, recognizing that all of the youth involved were "troubled kids." Christa is afraid of losing control of her behavior but feels this is unlikely now that she is being medicated for bipolar disorder. As noted by Dr. Kenner, Christa has clearly benefited tremendously by receiving medication for bipolar disorder and psychotherapy for her traumatic upbringing.

Conclusion

Christa Pike's life demonstrates the tragic and life-long consequences of growing up with constant abuse, violence, and abandonment, with no protection. Decades of being brutally raped, molested, beaten, humiliated, emotionally abused, ostracized and screamed at profoundly damaged her, leaving her with a multitude of untreated psychological disorders. Without protection from the adults who were supposed to have protected her, and without treatment for bipolar disorder and her other psychological disorders, Christa managed her volatile emotions and trauma-related problems as she had learned from her parents: through self-medication with marijuana and drinking. At 18 years old, her immature, traumatized brain made her exceptionally vulnerable to impulses and extremely poor decisions. Unmedicated and untreated, she was not able to put the "brakes on" her bipolar- and trauma-triggered emotions. Tragically, she was unable to manage the upsurge of extreme rage and fear she felt when triggered by taunts and threats to the source of love she believed she had found with her boyfriend. The impact of trauma and untreated psychiatric disorders had tragic consequences.

However, after years of psychotherapy and medications to treat her mental illness, Christa is thoughtful, even-tempered, bright, funny, and hopeful. She exhibits deep remorse for her actions that resulted in Colleen Slemmer's death. However, Christa has matured and learned to process her trauma, and she is truly a different person than she was at the time of the murder. Christa will always carry that history of trauma with her, but she now has the tools to control her emotions and deal with life's stressors.

Please do not hesitate to contact me if you have any questions.

Sincerely,

Bethany Brand, Ph.D.
Licensed Psychologist and Professor

References

American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders (5th Edition-Revised)*. American Psychiatric Association.

Anda, R. F., Felitti, V. J., Bremner, J. D., Walker, J. D., Whitfield, C., Perry, B. D., . . . Giles, W. H. (2006). The enduring effects of abuse and related adverse experiences in childhood: A convergence of evidence from neurobiology and epidemiology. *European Archives of Psychiatry and Clinical Neuroscience*, *256*(3), 174-186. https://doi.org/10.1007/s00406-005-0624-4

Back, S., Dansky, B. S., Coffey, S. F., Saladin, M. E., Sonne, S., Brady, K. T., . . . Brady, K. T. (2000). Cocaine dependence with and without post-traumatic stress disorder: a comparison of substance use, trauma history and psychiatric comorbidity [journal article]. *American Journal on Addictions*, *9*(1), 51-62. https://doi.org/10.1080/10550490050172227

Brand, B. L. (in press). *The Concise Guide to the Assessment and Treatment of Trauma-related Dissociation*. American Psychological Association Books.

Brand, B. L., Armstrong, J. G., & Loewenstein, R. J. (2006). Psychological assessment of patients with dissociative identity disorder. *The Psychiatric Clinics Of North America*, *29*(1), 145.

Brand, B. L., & Brown, L. (2023). True Drama or True Trauma? Forensic Trauma Assessment and the Challenge of Detecting Malingering. In M. J. Dorahy, S. Gold, & J. O'Neil (Eds.), *Dissociation and the Dissociative Disorders: Past, Present, Future*. Routledge Press.

Brand, B. L., Webermann, A. R., & Frankel, A. S. (2016). Assessment of complex dissociative disorder patients and simulated dissociation in forensic contexts. *International Journal of Law and Psychiatry*, *49*(Part B), 197-204. https://doi.org/10.1016/j.ijlp.2016.10.006

Briere, J. (2002). Multiscale Dissociation Inventory Professional Manual. In: Psychological Assessment Resources, Inc.

Briere, J., Runtz, M., Rassart, C. A., Rodd, K., & Godbout, N. (2020). Sexual assault trauma: Does prior childhood maltreatment increase the risk and exacerbate the outcome? *Child Abuse & Neglect*, *103*. https://doi.org/10.1016/j.chiabu.2020.104421

Brown, D. W., Anda, R. F., Edwards, V. J., Felitti, V. J., Dube, S. R., & Giles, W. H. (2007). Adverse childhood experiences and childhood autobiographical memory disturbance. *Child Abuse and Neglect*, *31*(9), 961-969. https://doi.org/10.1016/j.chiabu.2007.02.011

Cicchetti, D. (2016). Socioemotional, personality, and biological development: Illustrations from a multilevel developmental psychopathology perspective on child maltreatment. *Annual Review of Psychology*, *67*, 187-211. https://doi.org/10.1146/annurev-psych-122414-033259

Classen, C. C., Palesh, O. G., & Aggarwal, R. (2005). Sexual Revictimization: A Review of the Empirical Literature. *Trauma Violence Abuse*, *6*(2), 103-129. https://doi.org/10.1177/1524838005275087

Cloitre, M., Stolbach, B. C., Herman, J. L., van der Kolk, B., Pynoos, R., Wang, J., & Petkova, E. (2009). A developmental approach to complex PTSD: Childhood and

adult cumulative trauma as predictors of symptom complexity. *Journal of Traumatic Stress*, *22*(5), 399-408. https://doi.org/10.1002/jts.20444

Courtois, C. A., & Ford, J. D. (Eds.). (2009). *Treating complex traumatic stress disorders: An evidence-based guide*. Guilford Press.

Cowell, R. A., Cicchetti, D., Rogosch, F. A., & Toth, S. L. (2015). Childhood maltreatment and its effect on neurocognitive functioning: Timing and chronicity matter. *Development and Psychopathology*, *27*(2), 521-533. https://doi.org/10.1017/S0954579415000139

Daruy-Filho, L., Brietzke, E., Lafer, B., & Grassi-Oliveira, R. (2011). Childhood maltreatment and clinical outcomes of bipolar disorder. *Acta psychiatrica Scandinavica*, *124*(6), 427-434. https://doi.org/10.1111/j.1600-0447.2011.01756.x

DePrince, A. P., Weinzierl, K. M., & Combs, M. D. (2009). Executive function performance and trauma exposure in a community sample of children. *Child Abuse & Neglect*, *33*(6), 353-361. https://doi.org/10.1016/j.chiabu.2008.08.002

Evans, F. B., Brand, B. L., & Kaser-Boyd, N. (in press). Differentiating Bipolar Spectrum and Psychological Trauma Spectrum Disorders. In J. H. Kleiger & I. B. Weiner (Eds.), *Psychological Assessment of Bipolar Spectrum Disorders*.

Flynn, M., Cicchetti, D., & Rogosch, F. (2014). The prospective contribution of childhood maltreatment to low self-worth, low relationship quality, and symptomatology across adolescence: A developmental-organizational perspective. *Developmental Psychology*, *50*(9), 2165-2175. https://doi.org/10.1037/a0037162

Giano, Z., Wheeler, D. L., & Hubach, R. D. (2020). The frequencies and disparities of adverse childhood experiences in the U.S. *BMC Public Health*, *20*(1), 1327. https://doi.org/10.1186/s12889-020-09411-z

Goodman, S. H., Rouse, M. H., Connell, A. M., Broth, M. R., Hall, C. M., & Heyward, D. (2011). Maternal depression and child psychopathology: A meta-analytic review. *Clinical Child And Family Psychology Review*, *14*(1), 1-27. https://doi.org/10.1007/s10567-010-0080-1

Herman, J. L. (1992). Complex PTSD: A syndrome in survivors of prolonged and repeated trauma. *Journal of Traumatic Stress*, *5*(3), 377-391.

Herman, J. L. (1992). *Trauma and recovery*. Basic Books.

Herman, J. L., Perry, J. C., & van der Kolk, B. A. (1989). Childhood trauma in borderline personality disorder. *American Journal of Psychiatry*, *146*(4), 490-495.

International Society for the Study of Dissociation, (Chu, J. A., Dell, P. F., Somer, E., Van der Hart, O., Cardeña, E., . . . Twombly, J. (2011). Guidelines for treating dissociative identity disorder in adults, third revision: summary version. *Journal of trauma & dissociation : the official journal of the International Society for the Study of Dissociation*, *12*(2), 188-212. https://doi.org/10.1080/15299732.2011.537248

Kefeli, M. C., Turow, R. G., Yıldırım, A., & Boysan, M. (2018). Childhood maltreatment is associated with attachment insecurities, dissociation and alexithymia in bipolar disorder. *Psychiatry research*, *260*, 391-399. https://doi.org/10.1016/j.psychres.2017.12.026

Kessler, R. C. (2000). Posttraumatic stress disorder: The burden to the individual and to society. *Journal of Clinical Psychiatry*, *61(suppl 5)*, 4-14.

Kovacs, M., & Pollock, M. (1995). Bipolar disorder and comorbid conduct disorder in childhood and adolescence. *J Am Acad Child Adolesc Psychiatry*, *34*(6), 715-723. https://doi.org/10.1097/00004583-199506000-00011

Kucukgoncu, S., Yildirim Ornek, F., Cabalar, M., Bestepe, E., & Yayla, V. (2014). Childhood trauma and dissociation in tertiary care patients with migraine and tension type headache: A controlled study. *Journal of Psychosomatic Research*, *77*(1), 40-44. https://doi.org/10.1016/j.jpsychores.2014.04.007

Macfie, J., Cicchetti, D., & Toth, S. L. (2001). Dissciation in maltreated versus nonmaltreated preschool-aged children. *Child Abuse & Neglect*, *25*(9), 1253-1267. https://doi.org/10.1016/S0145-2134(01)00266-6

Najavits, L. M., & Walsh, M. (2012). Dissociation, PTSD, and substance abuse: An empirical study. *Journal of Trauma & Dissociation*, *13*(1), 115-126.

Noll, J. G., Trickett, P. K., Harris, W. W., & Putnam, F. W. (2009). The cumulative burden borne by offspring whose mothers were sexually abused as children: Descriptive results from a multigenerational study. *Journal Of Interpersonal Violence*, *24*(3), 424-449. https://doi.org/10.1177/0886260508317194 (Special section: Research methodology)

Preskorn, S. H., Zeller, S., Citrome, L., Finman, J., Goldberg, J. F., Fava, M., . . . Risinger, R. (2022). Effect of sublingual dexmedetomidine vs placebo on acute agitation associated with bipolar disorder: A randomized clinical trial. *JAMA: Journal of the American Medical Association*, *327*(8), 727-736.

Putnam, F. W. (1985). Dissociation as a response to extreme trauma. In R. P. Kluft (Ed.), *Childhood Antecedents of Multiple Personality* (pp. 65-97). American Psychiatric Press.

Putnam, F. W. (1992). Are alter personalities fragments or figments? *Psychoanalytic Inquiry*, *12*(1), 95-111. https://doi.org/10.1080/07351699209533884

Putnam, F. W. (1997). *Dissociation in children and adolescents: A developmental perspective*. Guilford Press.

Sroufe, L. A., Egeland, B., Carlson, E. A., & Collins, W. A. (2005). *The development of the person: The Minnesota study of risk and adaptation from birth to adulthood*. Guilford Publications.

Stadnik, R. D., Brand, B. L., & Savoca, A. (2013). Personality assessment inventory profile and predictors of elevations among dissociative disorder patients. *Journal of Trauma & Dissociation*, *14*(5), 546-561. https://doi.org/10.1080/15299732.2013.792310

Teicher, M. H., Andersen, S. L., Polcari, A., Anderson, C. M., Navalta, C. P., & Kim, D. M. (2003). The neurobiological consequences of early stress and childhood maltreatment. *Neuroscience and Biobehavioral Reviews*, *27*(1-2), 33-44. https://doi.org/10.1016/S0149-7634(03)00007-1 (Brain development, sex differences and stress: Implications for psychopathology)

Teicher, M. H., Samson, J. A., Sheu, Y.-S., Polcari, A., & McGreenery, C. E. (2010). Hurtful Words: Association of Exposure to Peer Verbal Abuse With Elevated Psychiatric Symptom Scores and Corpus Callosum Abnormalities. *American Journal of Psychiatry*, *167*(12), 1464-1471. https://doi.org/10.1176/appi.ajp.2010.10010030

APPENDIX A
REVIEWED MATERIALS

01. Social History by Dr. Diana McCoy, Ph.D
02. Christa Pike's Family Genogram
03. Testimony of Dr. Eric S. Engum
04. Psychiatric Affidavit by Dr. Stuart Grassian, M.D.
05. Psychiatric Evaluation by Dr. William Kenner, M.D.
06. Addendum to Psychiatric Report by Dr. William Kenner, M.D.
07. Testimony by Dr. William Kenner, M.D. (Doc. 10-4 and 10-5)
08. Report by Dr. Jonathan Pincus, M.D.
09. Testimony by Dr. Jonathan Pincus, M.D. (Doc. 9-8 and 9-9)
10. Report by Dr. George Woods, M.D.
11. Transcript of the Penalty Phase (Part 1 and 2)
12. List of Christa Pike's Medications and Diagnosis as of 11/18/2020

BETHANY BRAND, PH.D.
PSYCHOTHERAPY · ASSESSMENT · CONSULTATION

FORENSIC PSYCHOLOGICAL ADDENDUM

CLIENT: Christa Gail Pike

DOB: 3/10/1976

DATE OF ADDENDUM: June 1, 2026

I have been provided with additional records pertinent to my forensic psychological evaluation of Christa Pike dated July 29, 2023. I have summarized the material relevant to my updated conclusions which follow below.

Specifically, I was provided with the following additional records which informed my updated conclusions:

Carrboro NC Police Department Sexual Assault Incident Report Date 01/14/1994 Bates 000001 – 000022

University of NC Chapel Hill – Pike Medical Records from 1994 Rape Date 01/14/1994 Bates 000023 – 000034

Carrboro NC Police Dept Interview of Christa Pike Date 01/14/1994 Bates 000035 - 000035

Summary of Additional Records

I reviewed the written records from the Carrboro North Carolina Police Department and the University of North Carolina, Chapel Hill emergency department where Christa was taken for examination following being raped. Christa's report to the police and hospital staff was consistent in describing that a man caught her while she was walking to the store, threw her to the ground, and raped her. She reported that she screamed and hit him in the face. A car drove close by; he responded by running away. The hospital records show that Christa, who was only 17 years old, was crying throughout the exam. Hospital staff noted she was "tearful, very upset while telling the story" (Bates 000025) indicated that the young victim had abrasions on her breast and leg, and bruising on her inner thigh close to her genitals and her knee.

The police interview revealed that Christa was distraught and sobbing as she shared what the man had done to her. She was sobbing so hard that she could not be understood at times. This is the type of intense emotional reaction that is common among rape victims.

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Furthermore, the bruising and abrasions add detailed information about how rough the rapist was with the young girl.

In my report from 2023, I referred to this rape in three places, as noted below:

First reference:

> When Christa was approximately 17 years old, she was assaulted again while walking to the store. A man grabbed her and pulled her into the woods. She fought him with all her strength. Christa recalled, "I was fighting him so hard that he barely got started (raping her)." She hit his head with a rock, which allowed her to get away. (It is notable that she hit this man's head on a rock, which is like what she did to the victim in the incident crime. This brings up the possibility that Christa was unconsciously triggered during the incident with Colleen Slemmer, and lost control of her behavior, in part because she was triggered by the victim, who she experienced as possibly causing her boyfriend to abandon her.) Christa escaped and ran as fast as she could to a friend's house, who then took her to a hospital. The staff collected a rape kit but there was no semen; she had apparently stopped his attack before he had an orgasm. This man was never identified or caught. (p. 17, Brand Forensic Psychological Report)

Second reference:

> Consistent with the CTQ and ACE questionnaires, Christa acknowledged that she endured a truly horrendous level of frequent childhood sexual abuse by <u>five</u> different perpetrators (Ernest, Steve and *rapists who attacked her at age* 11, 14, and *17*) as well as being physically assaulted by her mother's boyfriend (Danny), maternal grandmother, mother, and her father. (Brand, P. 23 Forensic Psychological Report)

Third reference:

> I believe elements of reenacted trauma showed up in Christa's behavior in her late teens. Christa was exposed to the brutal slaughtering and disemboweling of animals when her grandfather babysat her at a slaughterhouse as a preschooler. This exposure to animals being killed and decapitated brings up the possibility that Christa was unconsciously reenacting the bloody scenes she had been exposed to as a little girl during two bloody episodes in her teens. Specifically, Christa lost control of her behavior during the incident that led her to being on death row, as well as when she, in her own estimation, went "too far" in beating up a man who raped her when she was 17. The victim in the instant crimes was beaten and badly bloodied. *Christa used rocks to hit the head of the victim in the instant crimes as well as the man who attacked when she was 17 years*

> *old. This may have been an unconscious attempt to be in control in both situations where she was threatened. In the episode with the man, he surprised her and began raping her. Only after she hit him in the head did he stop raping her and run away.* (Italics added here.) Christa reported to the police that she had tried to get the victim in the instant murder to stop talking to her. Christa was trying to get her to stop calling her the same names one of Christa's abusers had called her. Christa perceived the victim as a threat to Christa in that she had been harassing her, cutting up photos that were precious to Christa, coming into her room at night while she slept, and threatening to steal Christa's boyfriend from her. Christa reported telling the victim repeatedly to stop talking, but the girl refused to stop talking. Christa was triggered by this girl's use of the same slurs as one of her previous abusers, and by the possibility that this girl might cause Tadaryl to abandon her. *All of these situations (slaughterhouse, rape at 17, and instant crime) were bloody scenes in which animals and people were severely injured or killed.* (Italics added.) When triggered and threatened, Christa becomes disorganized in her thinking. Under serious stress, she is unable to reign in control of her behavior, emotions and thinking, as noted in Dr. Wilson's and Dr. Engum's testing. This had tragic consequences. (Brand, pp. 27-28 Forensic Psychological Report)

The Account of the Rock Involved in Christa's Rape at Age 17

In reviewing the additional records provided, I noted a discrepancy between two accounts Christa gave of the rape she suffered at age 17. In my 2023 evaluation, Christa reported that she struck her attacker in the head with a rock, which caused him to stop raping her and flee. However, a report by Dr. Diana McCoy, prepared approximately one year after the instant crimes, documents a somewhat different account: that the man threw Christa down and she hit her head on a rock, and that it was the approach of a car, not Christa's own action, that frightened him away.

This discrepancy does not indicate deception. It reflects something clinically fundamental about the nature of traumatic memory.

Traumatic memories are not stored or retrieved like ordinary recollections. They are encoded as fragmented sensory and movement memories, such as what the body felt, what the hands did, where the terror was felt, rather than as coherent verbal narratives. As Kearney and Lanius (2024) explain, traumatic memory is neurobiologically distinct from autobiographical memory: it is not deliberately retrieved but involuntarily relived, existing as "unintegrated vestiges of overwhelming events" that re-emerge as present-day sensory and movement fragments of memory rather than as a coherent story one can tell. Critically, these authors note that the legal system's assumption that traumatic memory can be interrogated by the same standards as ordinary autobiographical memory "is inappropriate at best", a caution directly relevant here (Kearney & Lanius, 2024).

The narrative a survivor constructs around a traumatic memory changes over time, shaped by psychological development, emotional needs, and the ongoing often unconscious work of survival from horrific events. Research has established that trauma memories are subject to change over time, with the stored memory tending to diverge from the original as a function of ongoing psychological processing (Dekel & Bonanno, 2013). Research on survivors of childhood sexual abuse further documents that, over time, survivors often unconsciously reshape their memories of victimization in ways that allow them to feel less helpless and more in control of what happened to them (Harvey, 2010). For someone who spent her childhood with no power over what was done to her body, this kind of psychological self-protection is not surprising — it is a survival mechanism.

In Christa's case, the clinical interpretation is straightforward. When she first described this assault to Dr. McCoy approximately one year after the instant crimes, she narrated herself as passive: she was the one struck, she was rescued by the arrival of a car. By the time of my evaluation decades later, her memory had reorganized around an image of herself as someone who fought back — who struck her attacker and forced him to stop. The rock was now in her hand. This is not fabrication. It is what the traumatized mind does across a lifetime of survival — it searches, however imperfectly, for a story that is tolerable.

This detail also deepens the clinical significance of the instant offense. The weapon Christa used in the crime for which she was sentenced to death was not incidental. The rock she used on the victim carries profound symbolic weight in her psychological history. Its use reflects what trauma clinicians recognize as traumatic reenactment — the unconscious repetition of elements from prior traumatic experiences in later behavior (Herman, 1992; Kearney & Lanius, 2024). This is consistent with what I described in my 2023 report. Understanding this does not excuse the offense. It reveals a psychological history of devastation — one that was never adequately presented at trial.

The Anniversary Date Connection Between Christa's Rape and the Instant Crimes

It is quite significant that Christa was violently raped on January 14, 1994, and that one year later, almost to the exact day, she committed the instant crimes on January 12, 1995. The trauma literature describes "anniversary reactions" to trauma which can manifest as heightened emotional distress, intrusive re-experiencing, behavioral dysregulation, and in some cases, unconscious reenactment of trauma-related behavior in the period surrounding the anniversary date (Bruce & Matsuo, 2022; Saltzman, 2019). The proximity of these two dates — separated by less than 48 hours across calendar years — is clinically significant and consistent with the broader pattern of traumatic reenactment described in my 2023 report. It is my opinion that Christa's violent behavior on January 12, 1995 was not only the product of the situational triggers present that night, but was also shaped by two converging vulnerabilities: the psychological weight of the approaching anniversary of her rape — a date her nervous system, if not her conscious mind, had reason to remember — and the irritable bipolar emotionally reactive state she was experiencing on that same day. The co-occurrence of these two factors, each capable

of impairing judgment and behavioral control independently, substantially increases the likelihood that her capacity for self-regulation was severely compromised at the time of the offense.

The Cruelty of the Execution Protocol as Applied to Christa Pike

Torn From Everything Familiar

Approximately 48 hours before her scheduled execution, Christa will be transferred from the women's facility where she has lived for years, her cell, her routines, the staff and peers who constitute her entire world, to Riverbend Maximum Security Institution, a men's prison, where she will be held in a death watch cell until she is killed (Tennessee Department of Correction, 2025). She will spend the final days of her life as a stranger in a strange place, surrounded by men, cut off from every source of human familiarity she has. For a woman with Christa's history, this is not administrative procedure. It is added and severe punishment, one nowhere reflected in her sentence.

Silenced in Her Final Hours

In the 12 hours before her execution, Christa will be prohibited from contact with family, friends, her spiritual minister, or anyone who might offer comfort, with the sole exception of her attorney (Tennessee Department of Correction, 2025). She will face her death alone. For a woman who was abandoned, repeatedly sexually and physically violated, and unprotected throughout her childhood, who spent years in a system that failed to recognize how broken she was when she arrived, the deliberate withdrawal of human connection in her final hours is not neutral. It replicates, with harsh precision, the abandonment she has known her entire life.

Held Down by Men

At 10:00 a.m. on the morning of her execution, a team of male corrections officers will enter Christa's cell, physically remove her, place her on a gurney, and strap her arms and legs down so she cannot move (Tennessee Department of Correction, 2025). Christa was repeatedly held down by men and raped throughout her childhood and adolescence. She was unable to move. She was pinned. She was powerless. What the protocol describes as a routine restraint procedure will, for her, be experienced as a precise replication of the worst moments of her life. The research on traumatic memory makes this unavoidable: traumatic memory is not recalled, it is *relived*, triggered by sensory and physical experiences that mirror the original trauma (Herman, 1992; Kearney & Lanius, 2024). Being physically restrained by a group of men, immobilized and unable to move, will not simply frighten her. It will return her, in full sensory and neurobiological force, to every violation she ever survived. She will die in the grip of her trauma, as she has lived.

Conclusion

Taken together, the records reviewed in this addendum and the three issues raised above tell a single coherent story. Christa Pike was born into a family with generations of severe emotional and psychiatric problems. Her childhood was filled with watching and experiencing bloody violence. She was sexually violated by five perpetrators throughout her childhood and adolescence. She struggled with unrecognized trauma-related psychiatric disorders. She was never accurately diagnosed, never adequately treated, and never fully understood, not by the people and the system that raised her, and not by the legal process that condemned her.

The discrepancy in her memory of the rape at age 17 is not evidence of dishonesty; it is evidence of how thoroughly that trauma lived in her, and how hard her mind worked across decades to survive it. The rock she used in the instant offense was not random; it was the instrument her memory had transformed into a symbol of survival and control. The execution that now awaits her, the transfer to a men's prison, the isolation, the physical restraint by male officers, will, for this woman with this particular history, constitute a form of suffering that goes far beyond what any sentence requires. She will not simply be put to death. Christa will be returned, in her final hours, to the terror that defined her life. What awaits her is not only death. It is, for Christa, a form of dying that is uniquely and needlessly cruel. And it is avoidable.

The conclusions stated in this report were reached within a reasonable degree of psychological certainty.

Sincerely,

Bethany Brand

Bethany Brand, Ph.D.
Licensed Psychologist and Professor Emerita

References

Bruce, M. J., & Matsuo, H. (2022). "Burned into my Brain:" Trauma Anniversary Reactions Examined from a Qualitative Perspective [Article]. *Journal of Loss & Trauma*, *27*(8), 717-730. https://doi.org/10.1080/15325024.2022.2079204

Dekel, S., & Bonanno, G. A. (2013). Changes in trauma memory and patterns of posttraumatic stress. *Psychological Trauma: Theory, Research, Practice, and Policy, 5*(1), 26–34. https://doi.org/10.1037/a0022750

Harvey, M. R. (2010). In the aftermath of sexual abuse: Making and remaking meaning in narratives of trauma and recovery. *Narrative Inquiry, 20*(1), 86–107. https://doi.org/10.1075/ni.20.1.06har

Herman, J. L. (1992). *Trauma and recovery*. Basic Books.

Kearney, B. E., & Lanius, R. A. (2024). Why reliving is not remembering and the unique neurobiological representation of traumatic memory. *Nature Mental Health, 2*, 1070–1079. https://doi.org/10.1038/s44220-024-00324-z

Saltzman, L. Y. (2019). It's about time: Reconceptualizing the role of time in loss and trauma. *Psychological Trauma: Theory, Research, Practice, and Policy*, *11*(6), 663-670. https://doi.org/10.1037/tra0000435

Tennessee Department of Correction. (2025). *Lethal injection execution protocol*. Tennessee Department of Correction. (Signed January 8, 2025)

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FORENSIC PSYCHOLOGICAL ADDENDUM

CLIENT: Christa Gail Pike

DOB: 3/10/1976

DATE OF ADDENDUM: August 4, 2026

In my Addendum dated 6/1, /2026, I was asked by counsel for Christa Pike to consider the impact on Christa of the procedure leading up to and including the execution which is planned for her. I described several factors that I opined would be tremendously distressing for Christa considering her history of severe abuse and repeated rapes by several men. I will summarize those opinions here.

In my prior addendum, I identified three factors that would cause Christa severe psychological harm during her execution: (1) moving her, in her final 48 hours, from the familiarity of the women's prison into an unknown Maximum Security men's prison surrounded by unfamiliar men; (2) barring her, in her final 12 hours, from contact with anyone but her attorney, replicating the abandonment she endured throughout a childhood marked by abuse and neglect; and (3) restraining her on the gurney, physically held down and pinned, reenacting the rapes in which she was restrained and rendered powerless.

Counsel for Christa Pike have subsequently asked me to consider the impact of three additional potential execution scenarios on Christa. I consider those scenarios below.

THE POSSIBILITY OF BEING CLOSELY MONITORED BY MALE GUARDS WHILE AT DJRC

Christa's attorneys have brought to my attention that it is possible she would be observed closely by guards during her isolation period at DJRC before being moved to Riverbend. This could include moments when using the restroom, bathing, or dressing. I believe this would be intolerable to most women. However, a woman with Christa's history of abuse would experience this as retraumatization. During the repeated sexual assaults she endured throughout her childhood, her body was subjected to nonconsensual observation, exposure, and violation. Being watched by staff during these private times, particularly in the final days of her life, would replicate the loss of bodily autonomy and privacy that characterized her original victimizations. The traumatic trigger here is the loss of privacy and control over her own body, not the gender of the observing staff. The experience of being watched without the ability to protect her own bodily privacy would be highly likely to evoke the

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same feelings of exposure, helplessness, and powerlessness she experienced during the rapes.

THE POSSIBILITY OF ATTEMPTED FEMORAL VENOUS ACCESS

If peripheral (arm/hand) venous access cannot be obtained, prison personnel may need to attempt central or femoral venous access, which involves exposure of, and needle insertion in, the groin region. For Christa, with a history of repeated rapes, procedures requiring genital or groin-area exposure, as well as being touched in those private areas by unfamiliar personnel, particularly male personnel, and particularly under conditions of physical restraint, would directly re-trigger the terror, as well as the sensory and situational memories, of being raped. Her terror in this scenario would be distinct from and in addition to the fear response due to the impending execution. Being uncovered and touched in the groin, with a painful insertion of a needle in this sensitive, private area would likely directly cause Christa to experience tremendous distress and quite likely a flashback to being raped. The professional literature describes trauma triggers, including bodily exposure, restraint, and anatomical proximity to prior assault as common and potent triggers for symptoms including severe panic, flashbacks, and dissociation in sexual trauma survivors.

THE POTENTIAL FOR A FAILED EXECUTION

Repeated attempts to execute a condemned prisoner result in exceptionally high levels of stress and symptoms of posttraumatic stress disorder (PTSD). Even a single, successfully completed execution is highly stressful, as the condemned prisoner arrives at the execution chamber already under the imminent threat of death. When an execution does not go smoothly, however, such as when executioners require an extended period to set IV lines, or when the lethal injection does not kill the inmate, the prisoner is highly likely to experience a near-death event of the type known to cause long-term and grave psychological consequences.

The experience of being repeatedly subjected to attempts at execution by the state is strikingly similar to what is documented in the peer-reviewed literature on mock executions, a recognized form of psychological torture (Defrin, Lahav, & Solomon, 2017). The comparison holds not because the state's intent is comparable to torture, but because the psychological mechanism is the same: the trauma associated with mock execution stems from the prisoner's subjective experience of imminent death, prolonged uncertainty, and helplessness, not from whether the threat of death is genuine. Those conditions are precisely what a repeated or extended execution attempt produces.

Trauma survivors subjected to invasive medical procedures, including repeated attempts at physical access, frequently experience re-traumatization marked by disempowerment, loss of control, and reactivation of the responses tied to their original victimization (Schippert, Grov, & Bjørnnes, 2021).

I know from assessing Christa that she suffers from PTSD, Bipolar Disorder, Dissociative Amnesia, and Depersonalization/Derealization Disorder. These diagnoses reflect

significant and longstanding psychological vulnerability rooted in her having been repeatedly raped during her development. If the first attempt to execute her fails, or requires repeated attempts to correctly set an IV, including femoral access (which would expose her groin), she will be highly likely to experience extreme distress, including terror, flashbacks, and dissociation.

When a traumatized person is in this extremely heightened state of terror, they may lose control of their bladder and/or bowels, or vomit, due to the extreme hyperarousal produced by facing death while highly triggered by trauma reminders.

The convergence of these triggering conditions, being closely monitored when her body is exposed, the imminent threat to life inherent in a botched execution, being held down by men, and her groin being exposed during attempts to establish IV or femoral access, together with her history of having been raped, would likely produce extreme psychological harm.

Any of these possibilities would constitute what is described in the literature as retraumatization. Retraumatization occurs when a current situation reactivates the physiological and psychological response associated with a prior trauma, in Christa's case, the multiple rapes she experienced.

Traumatic memories are not stored or retrieved like ordinary recollections. They are encoded as fragmented sensory and motor memories, what the body felt, what the hands did, where the terror was felt, rather than as coherent verbal narratives. As Kearney and Lanius (2024) explain, traumatic memory is neurobiologically distinct from autobiographical memory: it is not deliberately retrieved but involuntarily relived, existing as "unintegrated vestiges of overwhelming events" (p. 1142) that re-emerge as present-day sensory and motor fragments rather than as a story one can tell (see also Herman, 1992). Being physically restrained by a group of men, immobilized and unable to move, would not simply frighten Christa. It would return her, in full sensory and neurobiological force, to the violations she survived, dying in a state of traumatic reliving that is physiologically and psychologically indistinguishable from the rapes she endured.

PROFESSIONAL OPINION

It is my professional opinion that if Christa Pike’s execution required invasively close monitoring, extended efforts to obtain venous access including attempted femoral access, and/or if the execution failed, she would be at substantial risk of extreme psychological retraumatization, resulting in acute nervous system activation and exacerbation of her existing PTSD and dissociative symptoms, and the encoding of new traumatic material layered onto her existing trauma history. Pre-existing PTSD does not protect against further traumatic harm; it heightens vulnerability to it. A nervous system already sensitized by repeated trauma exposure requires less provocation to trigger a full physiological and psychological trauma response, and that response is typically more severe, more prolonged, and more difficult to regulate than it would be in someone without a trauma history. The

retraumatization described above would not simply add to symptoms she already has; it would constitute a distinct and acute worsening of her symptoms, with new intrusive material, increased symptom frequency and severity, and heightened risk of decompensation.

The conclusions stated in this addendum were reached within a reasonable degree of psychological certainty.

Sincerely,

Bethany Brand

Bethany Brand, Ph.D.
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REFERENCES

Defrin, R., Lahav, Y., & Solomon, Z. (2017). Dysfunctional pain modulation in torture survivors: The mediating effect of PTSD. *The Journal of Pain, 18*(1), 1–10. https://doi.org/10.1016/j.jpain.2016.09.005

Herman, J. L. (1992). *Trauma and recovery*. Basic Books.

Kearney, B. E., & Lanius, R. A. (2024). Why reliving is not remembering and the unique neurobiological representation of traumatic memory. *Nature Mental Health, 2*(10), 1142–1151. https://doi.org/10.1038/s44220-024-00324-z

Schippert, A. C. S. P., Grov, E. K., & Bjørnnes, A. K. (2021). Uncovering re-traumatization experiences of torture survivors in somatic health care: A qualitative systematic review. *PLOS ONE, 16*(2), e0246074. https://doi.org/10.1371/journal.pone.0246074

Mercy for Christa Pike

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