

1. **Please indicate the dates and length of time in which Gordon MacRae was in the residential treatment program at Villa Louis Martin:**

From March 13, 1989 to April 25, 1990. The length of time was about 13 months.

2. **Please list the professional staff members who were involved with his therapy program and their credentials:**

Jack Ellis, M.D., Psychiatrist: Individual Therapist.  
Robert Goodkind, Ph.D., Psychologist: Group Therapist.  
Cynthia Corbett, Ph.D., Psychodramatist: Group Therapist.  
Nancy Rosborough, M.A., A.T.R.: Art Therapist;  
Marty Green, R.N., Group Therapist.  
Bridget Cannon, O.P.: Spiritual Director  
Richard Drabik, M.I.C.: Spiritual Director  
Corinne Taylor, M.A.: Cognitive Therapist.  
Hemming Atterbom, Ph.D., Physiologist  
Richard Pappenfuss, Ph.D., Physiologist  
Peter Lechner, s.P., Ph.D.: Program Director

3. **Please present a brief description of the Villa Louis Martin program:**

The Villa Louis Martin program was a holistic care program for priests and brothers suffering from psychological, behavioral, or vocational issues. The program employed individual psychotherapy, various forms of group therapy, didactic seminars, and a disciplined spiritual life in order to assist those participating in the program. The process typically followed by program participants was one of greater awareness and insight into one's patterns of behavior, working through core issues underlying behavior, development of sustained appropriate coping mechanisms and behaviors versus formerly disruptive, self-defeating or inappropriate behaviors. The ultimate purpose was a life style consistent with values appropriate for priests and religious brothers.

4. **Please describe how Gordon MacRae came to be referred to the Villa Louis Martin program:**

Referral came from the Department of Probation and the Stafford Guidance Clinic.

5. **A Treatment Summary was prepared by you on December 26, 1989, and sent to the Cheshire County Department of Probation. Who was this report sent to?**

Karen Grovier, Probation Officer  
Henry Guertin-Ouellette, Ph.D., Psychologist  
David Forrest, Attorney

6. Does the report, and any other reports prepared by you, generally reflect a collaborative effort by the treatment staff listed above?

Yes, at weekly staff meetings the treatment and progress of priests and brothers in treatment was discussed by all the therapists and spiritual directors participating in each individual's program. Reports were based on the collective contribution of staff members.

7. In this report cited above, you make reference to three other reports or evaluations. On page one of your report you quoted the House of Affirmation evaluation as indicating that "Father MacRae is a sexual offender who currently is not able to curtail such behavior without professional support." Was this the view of you and the Villa Louis Martin staff or were you only quoting the House of Affirmation report?

This was not the view of myself and the staff. I was only quoting the House of Affirmation report.

8. How long was Gordon MacRae at the House of Affirmation?

Five days.

9. What is the current status of the House of Affirmation and how can they be contacted?

The House of Affirmation is no longer in existence.

10. Do you and the staff of Villa Louis Martin agree that Gordon MacRae is a "sexual offender" and was not able to curtail such behavior without professional support?

Gordon was referred to us as a "sexual offender" who needed professional treatment. During the course of treatment it became evident that his sexual offenses consisted in limited sexual activity with adults before ordination, some sexual activity with adult prostitutes after ordination (for the Villa Louis Martin program this was regarded as a moral offense and unacceptable behavior for a priest), as well as having a young man sit on his lap, hugging him and attempting to kiss him (Gordon had been drinking alcohol at the time), and in imprudent conversation with a young man who said he would do anything for money. We were aware of no other sexual offenses.

If by "sexual offender" the above question is indicating that Gordon admitted, in a court of law, to solicitation of a minor, then, in that sense we accepted that Gordon was a "sexual offender". We understand that what happened is that the youth in question had a conversation with Gordon in which the youth said he would do anything for money. Gordon asked if he meant "anything" and when the youth indicated he meant "anything" Gordon responded that that type of talk could get him into trouble. When charged, Gordon pleaded guilty in order to avoid adverse publicity for the Church. If by "sexual offender" the above question is indicating someone who repeatedly sexual abused others in an illegal fashion and was likely to continue doing so without professional help, I believe we did not consider Gordon to be a sexual offender.

11. Also in the Villa Louis Martin report you cited the Strafford Guidance Center report as indicating that "Mr. MacRae appears to fit the description of a fixated sexual offender, a man who has a primary sexual interest in children, usually males." Was this the view of you and the Villa Louis Martin staff or were you only quoting the Strafford Guidance Center report?

This was not the view of the Villa Louis Martin Staff; I was only quoting what had been said by the Strafford Guidance Center report. In the report to Probation Department I had said that although other reports have indicated a compulsive quality to his sexual acting out, he did not present as someone obsessed by sexual fantasies or driven to sexual acting out.

12. Was the Strafford Guidance Center evaluation an inpatient or outpatient process? If inpatient, how long was it? If outpatient, how many sessions did Gordon MacRae have there?

Outpatient; the report indicates that 2 hours were billed for the evaluation.

13. Can you provide the name and academic degree of the person who conducted the evaluation and prepared the Strafford Guidance Center report?

Adam Stern, M.A.

14. Do you and the staff of Villa Louis Martin agree with the Strafford Report that "Mr. MacRae appears to fit the description of a fixated sexual offender, a man who has a primary sexual interest in children, usually males" ?

No, Mr. MacRae does not fit this description.

15. Are you aware that the comments cited in the above two reports from House of Affirmation and Strafford Guidance Center have been repeatedly attributed to you and the Villa Louis Martin program in New Hampshire press reports?

Yes.

16. Can you comment on whether the press reports attributed to you have been accurate?

The reports are inaccurate in saying that the Villa Louis Martin Program diagnosed Gordon MacRae as a fixated sex offender.

The media report that Gordon was making slow progress was also misleading. In a report to the Probation Department (Report to Mr. Thomas Tewhey, Dept. of Corrections: August 4, 1989) I had said that: "In the judgment of the staff, he (MacRae) is dealing effectively with the primary issue that brought him here, his sexual behavior, and evidences a genuine sense of repentance for past misbehavior. As is typical in the treatment of sexual difficulties, other issues have also surfaced in the course of therapy and are likewise being dealt with. His therapy here is, in a sense, still in "midstream." In the only other report I believe I sent to the probation department I had said "my impression is that in his nine months at VLM Gordon had made significant progress."

17. What is the average length of stay in the Villa Louis Martin program? Is it somewhat unusual for an individual to spend a year in this particular residential treatment program?

The average length of stay is a few weeks over 6 months. Staying for a year is not unusual in the sense that "unusual" might imply resistance to treatment, poor progress or poor prognosis. Individuals who stay for a year typically experience a more profound process of recovery.

18. Why was Gordon MacRae in the Villa Louis Martin program for one year?

Gordon MacRae was in the Villa Louis Martin program for one year because of the depth of issues related to abuse he received as a child. Temporal lobe epilepsy was also involved. Gordon himself requested that he stay for a year because he had fairly good insight into his issues and recognized that six months were not sufficient to deal adequately with them.

19. Please describe the diagnoses and prognoses of the treatment staff of Villa Louis Martin regarding Gordon MacRae.

Gordon was charged and admitted to solicitation of a minor, as indicated in number 10 above. This was the immediate reason for his being referred to Villa Louis Martin. Two other incidents of sexual impropriety with youth were brought forward against Gordon, one which he admitted to and the other he consistently claimed never happened. A previous evaluation referred to Gordon as "a sexual offender who currently is not able to curtail such behavior without professional support" and another report said that he "fitted the description of a fixated sexual offender, a man who has a primary sexual interest in children, usually males." These reports drew conclusions on the basis of a few hours or few days of observation. The Villa Louis Martin accepted these diagnoses as working hypotheses, but, in time, came to see that Gordon was not fixated, definitely had control over his sexual behavior, but had, however, paid adults for sexual favors. In time it became evident that Gordon's behavior was affected by factors other than sexual drive. Dr. Guertin-Ouelette earlier had observed, after extensive psychotherapy with Gordon that, sexuality was not the primary issue for Gordon<sup>1</sup>. These factors are:

Alcoholism: By his own admission Gordon was an alcoholic, with this disease being in remission for approximately six years before entering the program at Jemez Springs. There have been no indications of a return to alcoholic behavior from the time he entered the Jemez Program until the present.

Depression, suicidal ideation and suicide attempt: Gordon had attempted suicide shortly before entering the VLM program. (There is a history of suicide in Gordon's family.) He was depressed when he entered Villa Louis Martin. The depression was related to accusations made in his regard, as well as to a compulsive style of work and assumption of responsibility for others. Childhood events had probably disposed him toward depression. Rather than experiencing clearly defined depressive feelings, however, Gordon suffered from a lack of awareness of his feelings, albeit feelings were present. His being "out of touch" with his feelings seems to have been related to the abuse he suffered when he was a child, and to temporal lobe epilepsy.

---

<sup>1</sup>. While the two reports mentioned earlier, one from House of Affirmation where Gordon was for only five days and the other from Strafford Guidance Clinic where Gordon was evaluated, according to the report, for two hours, arrived at far-reaching, all-embracing and definitive conclusions in regards to Gordon, the staff at VLM believes that such time periods would be inadequate to properly understand the complex problems which Gordon had. The conclusions arrived at with regards to Gordon at VLM came after many months and were similar to those arrived at by Dr. Guertin Ouelette after four years of psychotherapy with Gordon.

In October of 1989 an EEG was administered to Gordon and indicated that he was suffering from temporal lobe epilepsy. He was prescribed trilaon. He responded well to drug therapy for a representable period of time. His psychological/emotional functioning was quite different since beginning anticonvulsant medication, most noticeably in his greater awareness and expression of feelings.

Psychological consequences of physical, emotional, and sexual abuse. One of the apparent effects of the serious abuse Gordon suffered during his childhood was his penchant for taking on responsibility and caring for the needs of others -- more than for himself. This went to the extent of his assuming responsibility for the misdeeds of others. He also suffered from a feeling that he had hurt or exploited others and was not able to forgive himself for that<sup>2</sup>.

In time this became the major therapeutic issue in Gordon's therapy. In therapy with Dr. Ellis Gordon came to realize that, as a child, he always believed that he had the problems and was at fault rather than his father. In therapy Gordon came to realize how disturbed his father was. This observation came after exploration of terrifying events he experienced as a child, e.g., his father wrapping him in a blanket or rug and then beating him while he was immobilized. On another occasion Gordon was tied to a tree while his father held a gun to his head, deciding whether or not to shoot him.

Gordon's progress in the program was excellent. He took personal responsibility for past and future behavior. He demonstrated an appreciation of and fidelity to ethical standards, and had an empathy and respect for others. He demonstrated god insight into past attitudes, behavior, feelings and thoughts, and was highly motivated to avoid past behavior.

The staff did not consider Gordon to be at risk for acting out behavior.

20. Please summarize the December 1988 report prepared by Dr. Guertin-Ouellette, Ph.D. which you refer to in your December, 1989 report.

Summary of December 1988 report by Dr. Guertin-Ouelette, Ph.D.:

Gordon came to Consultation Service for Clergy and Religious 4 years previous, suffering from alcoholism, regarded as self destructive behavior. After some time an allegation of improper behavior with a young boy was reported to Dept. of

---

<sup>2</sup> Dr. Guertin-Ouelette in his brief summary points out certain consequences that Gordon suffered from being abused: self destructive behavior, feeling responsible for everyone and taking on responsibility for anything that happens around him, being undeserving of anything, poor self-esteem.

Social Services but was dropped as being questionable. Gordon had a tendency to initiate close relationships with younger boys. These proved to be very straight forward and altruistic types of relationships, chosen in order to be kind in order (Dr. Guertin-Ouelette's assumption) to treat himself the way he wished his parents had treated him.

Gordon was emotionally and physically abused by his father. This had led to feelings of abandonment, of being responsible for everyone, and of being undeserving of anything -- traits typical of the abused child. As a result he suffered from poor self esteem and self destructive tendencies. One of Gordon's strongest traits is his self destructive tendency.

Another aspect of the abused child that Gordon took on was a sense of responsibility for anything that happened around him. This might explain his eagerness in pleading guilty to the charge of endangerment. He was never been able to place blame on others. In the face of any apparent injustice Gordon finds reasons why this was due to him.

Some progress has been made in therapy, but Gordon was still in denial (regarding the above mentioned personality dynamics). Dr. Ouelette recommended that future therapy address obsessive compulsive behavior, particularly in regards to alcoholism, and make him aware of self-destructive tendencies. Dr. Ouelette felt that Gordon needed to work on self-concept and self esteem. Twelve step groups were recommended, and it was recommended that he go to a residential treatment center.

21. How long was Gordon MacRae in weekly outpatient therapy with Dr. Guertin-Ouellette, according to this report?

Four years.

22. Of the three reports cited above, from the House of Affirmation, the Strafford Guidance Center, and Dr. Guertin-Ouellette, and after one year of residential treatment of Gordon MacRae, did the Villa Louis Martin staff have a sense that any one of these reports more accurately reflected Mr. MacRae's diagnostic issues than the others?

My impression is that the staff's sense of Mr. MacRae's diagnosis was that Dr. Guertin-Ouellette's report, which was written after four years of psychotherapy, reflected his diagnostic issues more accurately than the reports from the House of Affirmation, where Gordon was for only five days, and the Strafford Guidance Center, where Gordon was tested for approximately two hours, according to the report itself.

Did the professional staff of Villa Louis Martin feel that Gordon MacRae was honest and successful in treatment?

Yes.

24. In his one year of treatment at Villa Louis Martin, did Gordon MacRae ever make reference to having been sexually involved or inappropriate in any way with [REDACTED] [REDACTED] from Keene, New Hampshire? If so, which one, in what way, and how often?

Gordon MacRae never made reference to having been sexually involved or inappropriate in any way with [REDACTED] or [REDACTED] from Keene, New Hampshire.

25. In his one year of treatment at Villa Louis Martin, did Gordon MacRae ever make reference to having been sexually involved or inappropriate in any way with [REDACTED] from Hampton, New Hampshire, other than the incident of hugging which he has acknowledged as having happened in 1983? If so, in what way, and how often?

Gordon MacRae never made reference to having been sexually involved, etc., with [REDACTED] other than the incident mentioned.

26. In his one year of treatment at Villa Louis Martin, did Gordon MacRae ever make reference to having been sexually involved or inappropriate in any way with [REDACTED] from Keene, New Hampshire, other than the incident of inappropriate and solicitous comments which he pleaded guilty to in 1988? If so, in what way, and how often?

In his year of treatment at Villa Louis Martin Gordon only made reference to a remark he made to [REDACTED] when [REDACTED] said he needed money and would do anything for money. I believe that Gordon asked if he meant "anything" and added that [REDACTED] needed to be careful because that could get him into trouble.

27. Did Gordon MacRae discuss with the therapists at Villa Louis Martin the allegation later brought by [REDACTED] that Gordon MacRae took lewd photographs of him? What was Gordon MacRae's and the staffs' disposition regarding this allegation?

Gordon did discuss with the staff the accusation that he made lewd photographs of a youth -- at least with Dr. Ellis. Gordon maintained that he had never done this.



Dr. Ellis checked into this and felt that Gordon was not withholding. Gordon also spoke with me about this.

28. Do you wish to add any further information?

When Gordon first came to us, his presence was preceded by reports from House of Affirmation and Strafford Guidance Clinic. The House of Affirmation report was written after Gordon was there for five days and the Strafford Guidance Clinic report was written, according to their report, after two hours of interviewing -- lengths of time that would not seem adequate to accurately evaluate the complex problems Gordon suffered from. These reports were very condemnatory of Gordon and pictured him as a child offender with little conscience. It was only after time that it became clear that Gordon did not fit the description of the House of Affirmation and Strafford Guidance Clinic. He had a depth of conscientiousness and sensitivity to others, and a very high degree of ethical concern that did not fit with what the reports said of him. These conclusions were more consonant with the conclusions of Dr. Guertin-Ouelette who had seen Gordon in psychotherapy for a period of four years.

In a report to the Department of Probation I mentioned the accusations that had been made in the above mentioned reports by way of background information regarding what had been said about him. I indicated that Gordon did not present as someone obsessed by sexual fantasies or driven to sexual acting out. I then went on to speak about Gordon's progress as well as the issues he was currently working on in therapy. I feel I tried to be very honest. I was later dismayed to find out how my reports were misinterpreted, and positive statements that were essential to understanding Gordon and his therapy were left out. This I feel was a serious injustice.

From the vantage point of time, having come to understand Gordon better and having given careful consideration to all that has happened, I now feel that a dominant influence in Gordon's life has been his tendency to take responsibility for others, even to the point of taking blame on himself for the misdeeds of others. This appears to stem from the tragic events of his childhood, which I believe Dr. Guertin-Ouelette correctly understood, and were worked on successfully in Gordon's treatment here.

An incident from Gordon's time here has always remained deeply impressed on my consciousness and illustrates the personality dynamics just referred to. At one time, while directing the Villa Louis Martin Program, I found it necessary to dismiss a particular priest for not complying with program expectations. This individual belonged to a small therapy group which consisted of about seven members, one of whom was Gordon. The group became very angry toward me for dismissing their fellow group member. In one of their group sessions, under the direction of

the art therapist, the group vented their anger in regards to me until Gordon took the stance that it was really his and the group's fault that their fellow group member had been dismissed. Gordon lead the group to believe that it was his and their fault because they had not dealt with his resistance. In reality the "resistance" of that individual was related to personal decisions he made and was not the responsibility of his group.

Note this report is being sent directly to Mr. Ron Koch, without Gordon seeing its contents.

COPY

signed: \_\_\_\_\_  
Peter Lechner, Ph.D.

*original signed and  
notarized*

Date: \_\_\_\_\_

Notarization of Signature:

\_\_\_\_\_  
Notary Public / Justice of the Peace