

ADMISSIONS

Saint Luke Institute at Marsalin can accept admissions anytime of the day or night. However, it is preferred that a telephone contact be made with us prior to any decision in order to plan properly and to give you advice to help in a successful intervention process.

If it is your desire that a staff member come to you to aid in the intervention process, it is necessary for the Superior to telephone and discuss the plans in detail.

All priests and women and men religious of the Roman Catholic faith are welcome as guests at the Saint Luke Institute. We also extend our care to Protestant and Jewish clergypersons. We are unable, unfortunately, to accept at the Holliston facility any persons who require continuous skilled nursing care because of physical disabilities.

If acute detoxification is required, we will proceed with admission to our nearby detoxification unit. However, if detoxification is anticipated from past experience or current medical evaluation, please call us ahead so that we may arrange for immediate hospitalization.

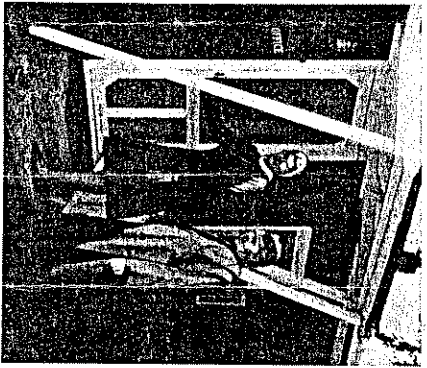
RATES

The daily all-inclusive rate is established by the Commonwealth of Massachusetts Rate Setting Commission. Therefore, we cannot quote accurately a daily rate. It is necessary to charge for additional services such as transportation, hospitalization, special medicine or testing.

A minimum deposit for two weeks is required on the day of admission. The anticipated length of residential treatment is 90-120 days.

INSURANCE COVERAGE

Every attempt will be made to aid the Diocese or religious community to recover third-party payments while in treatment at this facility. We are in the process of applying for accreditation from the Joint Commission on Accreditation of Hospitals.



INFORMATION

For further information and planning instructions, please call or write to Fr. Michael R. Peterson, M.D., or Sr. Cordis Burns, R.N.

SAINT LUKE'S PROFESSIONAL STAFF

Physician/Psychiatrist-Priest
Ph.D. Clinical Psychologist
Psychiatric Social Worker-Priest
Alcoholism Counselor-Registered Nurse
Alcoholism Counselor-Practical Nurse
Alcoholism Counselor-A.A. Coordinator
Alcoholism Counselor-A.A. Coordinator
Spiritual Director
Art Therapist
Recreational Therapist
Dietician
Theology Faculty Consultants

SAINT LUKE'S BOARD OF DIRECTORS

Rev. Michael R. Peterson, M.D.,
Director, Saint Luke Institute
Rev. Harry J. Flynn
Rector, Mount St. Mary's Seminary
Sister Carla Przybylla, O.S.F.
Executive Director, National Religious
Formation Conference
Most Rev. Thomas W. Lyons
Auxiliary Bishop of Washington, D.C.
Rev. Alouin Coyne, O.F.M.
President, Chicago Theological Union
Sister Anna Polanco, M.D., S.C.M.M.
Medical Director, House of Affirmation
Sister Alice Anita, S.S.J.
Superior General, Sisters of St. Joseph
of Chestnut Hill
Sister Helen Marie, C.S.C.
Administrator, Holy Cross Hospital
of Silver Spring, Md.

MARSALIN-SAINT LUKE
120 GOULDING STREET
HOLLISTON, MASSACHUSETTS 01746
(617) 429-4307

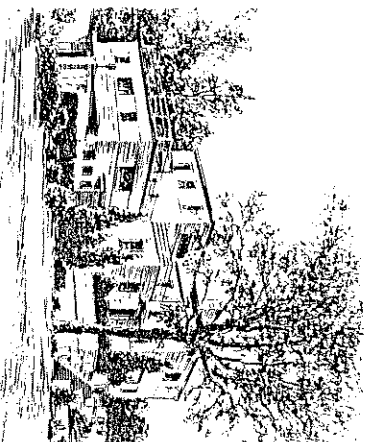
ORGANIZATION

The Saint Luke Institute and the Marsalin Institute are non-profit corporations which operate the Saint Luke Institute at Marsalin. The Institutes are not endowed, but receive support through client fees and from contributions. All gifts are tax deductible.

THE
Saint
Luke

Institute

AT MARSALIN



A MATURE CHRISTIAN EXPERIENCE IN
SOBERIETY FOR PRIESTS AND RELIGIOUS
WOMEN AND MEN.

50600016

"I was a stranger and you welcomed me... I was ill and you comforted me." (Matt. 25:35)

SAINT LUKES

A loving, home environment for the therapeutic and spiritual community of priests and religious women and men. Professionally staffed by a group of dedicated men and women — clergy, religious, and lay persons — some of whom are themselves in recovery from chemical dependency.

At the center of this community will be the Holy Eucharist from which both staff and guests will draw strength and inspiration in their efforts to help one another.

OUR PHILOSOPHY

The Saint Luke Institute at Marslin offers a special kind of rehabilitation to answer the unique problems that alcohol abuse/chemical dependency pose for men and women in the active ministry of the Church. Research suggests that this population, along with physicians and nurses, have particular areas of difficulties associated with chemical abuse. The guests of the Saint Luke Institute will be received as persons who have special dignity and value as ministers of God. When physiological healing has begun, special attention will be paid to the educational, psychological and spiritual aspects of the complete healing process in those dedicated people. Throughout the six major stages of this process, the Twelve Steps of Alcoholics Anonymous serve as the foundation and structure of the program.

A most difficult part of the healing process for the alcoholic religious and his/her community is the acceptance of the drinking/drug problem. A professional staff member will go to the Diocese or religious community to help in the confrontation of the reality of the problem. At the end of the stay at the Saint Luke Institute, a professional staff member will return with the guest to his or her local community to assist in the vitally important reintegration process. During the period of rehabilitation at Saint Luke's, it is expected that a member of the community or Diocese will visit at the Institute to initiate the community involvement with the reintegration and to assist them with community healing.

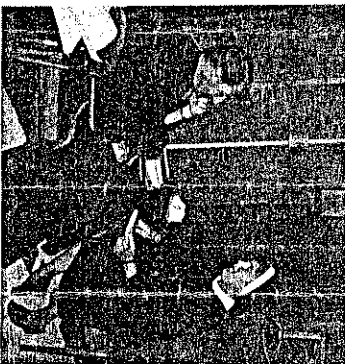
STEPS TOWARD HEALING

1. Individual self-recognition of the problem
2. Physiological renewal
3. Psychological focusing
4. Educational focusing
5. Active apostolic work
6. Reintegration program

OUR PROGRAM

Each guest will be evaluated medically and neurologically immediately upon entry into the facility. Some few persons may require intensive medical supervision in a specialized detoxification unit. We have a close relationship with two such facilities when this service is needed.

We shall help each individual to begin recovery in areas of alcohol/drug education, theological/spiritual education, spiritual formation, and reintegration into his or her new role in the Church, all within the context of a religious, therapeutic community. Because of our proximity to Boston, we shall be able to provide a period of trial apostolic work while the guest still resides within the therapeutic community. Some of the Church's great scholars will be available for lecture series and workshops experiences. We shall be able to offer almost any experience that would be helpful to the guest for his or her future apostolic work.



A UNIQUE INSTITUTE

Our Program Helps Chemically Dependent Persons

- to recognize the problem chemicals pose in their lives
- to choose to live freely without the harmful drugs

to understand the physiological aspects of their illness.

to grow in both the psychological and sociological aspects of their lives through involvement in the therapeutic community.

to gain confidence through the educational, apostolic and vocational aspects of the program.

to be an effective minister within the Church.

to reintegrate as fully functioning, whole persons into their communities or dioceses.

to participate responsibly in a structured aftercare program and the Fellowship of A.A.

to participate in the education of their communities and peers.

to move toward complete healing and spiritual freedom with its dynamic growth.

to discern how the Holy Spirit is at work in their lives.

OUR WAYS OF HELPING

The Twelve Steps of Alcoholics Anonymous Specialized medical and neurological evaluation and treatment

Psychological evaluation and individualized treatment plan

Daily group therapy

Individual counseling

Chemical dependency education

Theological and liturgical workshops

Psychodrama

Art therapy

Bibliotherapy

Recreational therapy

AFTERCARE PLANNING

A continuing program of follow-up, evaluation and supportive contact with each guest will be maintained by the Institute. An essential aspect of the Aftercare program designed for each guest will be continual involvement with Alcoholics Anonymous. During the stay at the Institute, every effort will be made to introduce guests to the principles of the Fellowship and to experience every type of A.A. meeting, both on the premises and within the local area. Once the guest has begun to work within the A.A. program, it will be an easy transition to his or her local A.A. groups when he or she returns home.

Phone contact will always be available after discharge and workshops will be provided at six-month intervals for guests who have returned home.



IN SUMMARY

Studies of treatment programs suggest a relationship between the quality of the initial program and the rate of success in recovery. Saint Luke's Institute envisages an individualized, comprehensive treatment plan as the key to that quality. Therefore, our program allows time for physiological and psychological healing, as well as renewal and updating of apostolic commitment in the context of each individual plan. This special plan, tried and worked out in a spiritual therapeutic family and coupled with a structured followup (Aftercare) program, will allow the religious woman or man a fulfilled and active life within her/his religious community or Diocese.

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CONFRONTATION

Confrontation to most people is an ugly word. It implies for the most part feelings of anger, hostility, aggression and to a certain extent some kind of violence.

However, the true meaning of confrontation in the context of intervention in reference to alcoholism and drug dependency is that it is an "invitation to self-examination with a view toward having the person make some kind of decisions in reference to his/her own life which would eliminate many self-defeating, self-destructive or self-punishing behaviors."

MOTIVATION

The motive in legitimate confrontation is a genuine concern for the physical, mental, emotional, spiritual welfare of the person who is being confronted.

There are bound to be occasions when the confronter does have feelings of anger, disappointment, disgust, frustration, etc. However, if these feelings are the motivation, then the confrontation will be nothing more than a cruel judgment and condemnation of the person being confronted and no good results can be expected.

CULPABILITY

Consequently, it is important to remember that in confronting an alcoholic or drug dependent person, the behaviors with which you are confronting this individual are behaviors that are tied into an addictive, obsessive, compulsive disease process, and although the actions are attributable to that person, he/she is truly not culpable, the feelings of anger, frustration, etc. must be submerged in concern for his/her welfare.

It is absolutely essential in the act of confrontation that genuine concern for the person being confronted be adequately transmitted to him/her.

OBJECT OF CONFRONTATION

The final message that you are trying to get across is that this person is suffering from a permanent, incurable, but arrestable disease, that some kind of action must be taken by him/her and that the confronter is willing to go to any lengths to be of assistance in bringing about a new way of life.

FOCUS ON BEHAVIORS

In confrontation in reference to alcoholics and drug dependent persons, the most effective course to follow is to focus attention primarily on behaviors which are self-destructive, self-defeating and self-punishing.

These behaviors must be identified with the person's drinking or use of drugs, but the behaviors themselves are the most important thing.

DON'T FOCUS ON DRINKING

To emphasize in the beginning the fact of drinking or drug use will lead only to fruitless discussion of the drinking or drug taking habits. Practically any alcoholic or drug dependent person can justify his/her drinking or drug use on

the grounds that they use alcohol in the same way that other people do, that they only drink certain kinds of alcohol, that they only drink certain quantities, or that their use of drugs is something recommended by physicians and other medical practitioners for specific health problems. It goes without saying that an alcoholic or drug dependent person will tell enough truth about these things to convince you of his/her own sincerity, but beyond that will lie convincingly in order to protect the habit which has grown to an uncontrollable dependency.

It is important to remember that most alcoholics and drug dependent persons take ten times as much alcohol or drugs as they can be observed taking.

RELATE TO ALCOHOL OR DRUGS

It is essential, however, to identify their irresponsible behaviors as springing from their drinking or drug taking habits; otherwise, it is impossible to identify that person as an alcoholic or drug dependent person.

The concern for the individual's personal welfare can be well demonstrated by indicating that many of their behaviors are in direct conflict with their normal value system. It might be well to remember that alcoholics generally have a tendency towards idealism, perfectionism and are clearly people who would like to be considered "good" people and productive members of society.

It is good to remember that one of the greatest sufferings of alcoholics and drug dependent persons is a constant sense of guilt growing out of the conflict between their behavior and their values. IF THIS CONFLICT CAN BE DEMONSTRATED TO THEM, THEN, THE FIRST PART OF CONFRONTATION IS EFFECTIVE.

VERIFIABLE FACTS

In the confrontation with irresponsible behaviors it is important to present facts which can be easily verified by your own personal observation or by other persons who are equally concerned for this individual's welfare. If the facts are not easily verifiable, then the confronting person will be led into useless haggling over details, motivations, explanations, etc.

In many instances it is probably better that confrontation be done not by one person alone, but by two or three or more who have a genuine concern for the victim and a knowledge of the critical behaviors.

If possible, the confrontation should be made in the presence of a person for whom the victim has a high degree of respect and whose advice he would generally follow.

WHAT AM I TO DO? ? ?

The second aspect of confrontation is one which every alcoholic or drug dependent person is looking for desperately. Practically all alcoholics and drug dependent persons have experienced confrontation in which their irresponsible behaviors have been emphasized.

The state of mind which was theirs at the time of most of these confrontations has usually been, "I am more acutely aware of these facts and their implications than you are — NOW — will you tell me "WHAT AM I TO DO?"

POSITIVE PROGRAM

The second part of confrontation then, consists in the presentation of a positive program that will give some kind of hope to the sick person. To have, in your mind, a clear, workable program to recommend at the time of confrontation.

To understand that any program that you recommend is bound to meet with resistance is important also. The resistance will be based on a fear bordering on panic. The fear itself (not the panic) has a good foundation because any practical program of recovery will demand a total upheaval in the person's life and in their present weakened condition they are absolutely convinced that they will be unable to carry out the demands which they are recommending.

Going back to the idea of confrontation, it is an invitation to self-examination; it is an attempt to demonstrate that the victim is suffering and that his friends are concerned, and that there is hope for him/her to change his/her way of living to his/her own advantage, and that they will receive all the help, encouragement, support, respect, and love that the confronters can give.

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[REDACTED]
November 11, 1979

Most Reverend William R. Johnson
Bishop of Orange
440 South Batavia Street
Orange, California, 92668
Your Excellency.

There is a very grave school
matter which we would like to
discuss with you. May we have
an appointment to discuss the situation?

I maybe reached by telephone at
my home after 4:15. [REDACTED] or
at Immaculate Heart of Mary School
after school hours between 2:30-3:15.
545-8185

Thank you
Sincerely,

Mrs. [REDACTED]
Teacher at Immaculate
Heart of Mary School.

Boys taken to rectory -

Some dunking -

Boys to movie not approved for children - children tasked.

50600021

[REDACTED]
November 15, [REDACTED]

Reverend Monsignor Michael Driscoll
440 South Batavia Street
Orange, California, 92668

Reverend Monsignor Driscoll,

Thank you for your kind consideration
to our problem. I am very grateful.

I know [REDACTED] load will
be so much lighter if we give her
our full support at this time.

Thank you for your
kindness.
[REDACTED]

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SAINT LUKE INSTITUTE

Founding Principles

The Problem

The disease of alcoholism is one of the major medical and social problems confronting us today. It is an illness in which psychological, sociological, and biological factors all intermingle in combination with a simple drug—alcohol—to produce uniquely debilitating effects in the human person. The illness is insidious in its onset, it has its devastating effects on the total personality of the individual, and it is a destroyer of families, human friendships, and vocations. Because of the devastating effects the illness has on the whole personality—body, soul, and spirit—it necessarily must be a major concern of Christ's Church in its healing ministry to all mankind. The disease alcoholism is no respecter of persons or of classes. All groups of men and women can be and are affected by it from all walks of life and every profession. Men and women engaged in the active ministry of the Church and its various forms of apostolate are as likely to be affected as any other group of human beings influenced by modern society and life. For many complicated reasons, such men and women within the Church have in the past found it difficult even to admit the existence of the problem in their own lives, and they have not sought the necessary supportive medical, psychiatric, and spiritual help to cope with and hopefully overcome the problem.

The extent of the problem of alcohol abuse in the United States is difficult to estimate. According to the National Institute of Alcohol Abuse and Alcoholism, 7 percent of the adult population (some 9 million persons) suffer from symptoms of excess alcohol consumption. The National Institute of Health has labeled alcohol "the nation's number one drug abuse problem". Alcohol abuse is now identified as the third major health problem in the United States. Although there are no good statistical data concerning the extent of the problem in the U. S. Church, the National Clergy Conference on Alcoholism quoted figures in their publication, *The Blue Book* (1974). They estimate approximately 6,000 priests, 1,000 Brothers, and 8,000 Sisters are victims of the disease alcoholism. They further estimate that fewer than 900 priests, 100 Brothers, and 800 Sisters are known to be in some stage of "recovery". Estimates concerning our Protestant brothers are currently unknown or unpublished.

Towards A Solution

By now there is universal official recognition that alcoholism is a treatable disease from which more than two-thirds of its victims can be helped to recover. Because this illness is a chronic disorder with tendency toward relapses, many different types of programs have been established in the U. S. to treat the varying patterns of alcohol abuse and the varying socio-economic and occupational statuses of the alcohol abusers.

Almost all programs have sobriety as a primary objective. However, it is becoming more clear that other considerations, such as improved social or occupational adjustments, may be far better guides in evaluating the success or failure of a treatment effort in a single individual.

The goal of every program should be to help the alcohol-dependent person learn to deal effectively with his or her life problems without using the drug and to adapt to his or her environment in a reasonably mature manner. Programs should ideally include some attention to improvement of psychological health, improvement in social and communication skills, educational aspects of alcohol itself, and areas specific to his or her occupational life. There should be further some kind of continued, follow-up focus in the acute rehabilitation program because the ultimate aim of treatment is longterm *control* of the illness and not *cure*.

For many professionals who have dealt with alcohol abuse among men and women engaged in the active ministry of the Church, it has become clear that a special kind of program of rehabilitation is needed to answer some of the unique problems that alcohol abuse poses for these persons. Such a rehabilitation program should include elements that help such persons recognize the problem in themselves, deal in a highly professional manner with the medical complications of drug abuse, help the individual grow psychologically and socially, and provide some educational aspects that will make the person a more effective minister in the modern Church.

A Healing Center

Saint Luke was referred to by Saint Paul (Col 4:14) as "our beloved physician". He was a man who embodied the true ideal of a physician: a healer of the whole person. This concept of healing sees man as a unity of body and soul, and that for a person with a physical problem such as alcohol abuse, there must be attention lavished on both of these areas in order for this person to be in control and to show human growth. The Saint Luke Institute is envisioned as a center where all aspects of the human person will be addressed in the attempts to aid each individual person move toward a complete healing and away from the slavish dependence on alcohol as a drug.

The Saint Luke Institute is envisioned as having the highest quality professional staff who will be able to call upon the most modern medical, psychological, and educational skills to assist each person towards a more integrated and sober human person. Despite the diversity in approaches of the professional staff members, we will all be united in our central concern and focus: Jesus Christ, the Divine Physician and Healer. The Saint Luke Institute will be a home for men and women where they can begin again their new lives in Jesus Christ. At the center of this home will be the celebration of God's concern and love for man: the Eucharist.

The guests at Saint Luke Institute will be received with the love, warmth, and true concern that is due any human person. This is perhaps best described in the monastic Rule of Saint Benedict:

All guests to the monastery should be welcomed as Christ, because He will say, 'I was a stranger, and you took me in' (Matt 25:35). Show them every courtesy, especially servants of God and pilgrims. . . . The greeting and farewell should be offered with great humility for with bowed head and a prostrate body all shall honor in the guests the person of Christ. For it is Christ who is really being received.

But they will also be received as guests who have a special dignity and importance as ministers of Christ. We will recognize in them the special needs that must be addressed in their rehabilitation program. When physiological healing has begun, special attention will be paid to the educational, psychological and spiritual aspects of the whole healing process in these most important people.

Steps Toward Healing

The healing process for the rehabilitation of ministers is seen to be a gradual one that includes six major stages:

- Stage 1: Individual self-recognition of the problem
- Stage 2: Physiological renewal
- Stage 3: Psychological focusing
- Stage 4: Educational focusing
- Stage 5: Active apostolic work
- Stage 6: Reintegration program

Each of these different stages will be considered briefly.

Stage 1: Individual Self-recognition

The first step toward recovery is the individual's recognition that he or she is an alcoholic. This is a most critical and sensitive moment in the life of each person, and it is different for each person. For some, it may be precipitated by a personal crisis related to the drinking behavior. For others, the Religious Superior or Ordinary may have to confront the individual with the drinking behavior.

If one must confront a person with his or her alcoholism, it must be done in an open, honest, loving and firm manner. The person must always be given the clear understanding that he or she can be helped, that it is not hopeless.

For many of the guests who come to the Saint Luke Institute, this moment of decision may have already been reached with the help of his or her community. For others, the superiors may have difficulty at first learning how to help the individual through this most difficult moment. For such situations, the Saint Luke Institute will offer a rather unique service both to the individual alcoholic and to his or her superior. We would consider offering our professional expertise in this critical area by going to the diocese and helping facilitate this important moment. Many of the guests may then accompany the staff member back to Washington, D.C., to begin the other stages of the healing process. We feel that this might be a most important service to offer because of the powerful psychological process of denial and social stigma which fight within the alcoholic drinker to keep him or her in the grips of the drug's influence.

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Stage 2: Physiological Renewal

After the guest has been received into the facility, our first concern must be for the immediate medical and neurological complications that are always present in the chronic alcohol abuser. A four-bed acute detoxification medical unit is included in the Saint Luke Institute, therefore making it unnecessary for the guest to be evaluated and treated at a separate medical facility.

The four-bed unit will meet all of the medical and professional standards of a licensed detoxification facility, and has all of the standard equipment which is necessary in case of life-threatening medical complications which may arise. Following this acute detoxification period, the guest will be observed medically and closely supervised for a two-week period in the transitional detoxification area. A physician and registered nurse will be available at all times for the medical care of the guests. A specially designed dietary program will be a part of the life of the guest as long as he or she remains at the Institute.

All attempts will be made to improve the physical health of the guest from the moment of arrival at the Institute. This is most critical, for none of the other aspects of the program can be realized without a beginning of recovery from the prolonged period of physiological assault on the brain and other organs by alcohol.

Stage 3: Psychological Focusing

Following the physiological recovery period, the guest will be immediately involved in a two-faceted psychological renewal program. First, there will be an attempt to stimulate the guest to take advantage of the excellent programs of Alcoholics Anonymous (A.A.) in the Washington, D.C. area. An alcoholism counselor will be part of the Institute's staff and will be responsible for helping each guest integrate into some aspect of the A.A. program. Priests, Brothers, and Sisters who are already a part of the A.A. program in the local area will be available to help each guest make the transition into active A.A. participation.

Second, through the professional staff at the Institute, the guests will all be actively involved in individual psychotherapy programs and group therapy programs. This is a most critical aspect of the rehabilitation process, for in all individuals who have abused alcohol for a long time period, they have many conflicts and psychological difficulties that they must deal with in a straightforward and realistic manner before they will be able to return to an effectively functioning ministry within the Church.

Stage 4: Educational Focusing

As the guest begins to reintegrate to some degree into his or her new sobriety, we feel that an intensive period of education is most important at this juncture. This educational process would focus in three areas:

(a) *Alcohol and alcohol abuse.* Each guest should be an authority in this area. By expelling ignorance on this subject and gaining valuable knowledge, we feel that each individual then also gains more control.

(b) *Theological issues.* With the renewed emphasis among clergy and religious on continuing education, we feel that many issues could be discussed and presented to the guest that will be immediately relevant to his or her apostolic work. Because of our proximity to Catholic University, we will be able to call upon some of the Church's greatest scholars to provide an active, stimulating lecture series and workshops in many different areas throughout the year.

(c) *Pastoral ministry.* With the continued need for more expertise in different areas of the active ministry, we will provide the guest with an educational program designed to help update and renew in many different and important areas of current pastoral concern.

Because we view this area so important in the overall rehabilitation of the individual guests, we will have a full-time education co-ordinator who will be a professional teacher in this area and who has extensive experience and training in psychological rehabilitation. Programs involving physical education and relaxation are seen by us as very important and will be included also in this area of educational concern.

Stage 5: Active Apostolic Work

As the end of the rehabilitation period is seen with each guest, the guest will be asked to leave the Institute during the week and take active part in some area of ministry in the Washington, D.C. area. Because of the vast number of opportunities in the cosmopolitan Washington area, we will be able to offer just about any experience that would be useful to the guest in his or her future work with the community or diocese. Such things as hospital ministry, campus ministry, teaching, religious education, parish work, marriage work are but a few of the areas which will be envisioned as a short term commitment for the guest. This allows apostolic work, and yet it allows a continued healing atmosphere at the Institute where they can return each day to discuss the inevitable difficulties that will arise in the new work. We see this aspect of the rehabilitation process again as very critical, for it should better prepare the guest for his or her immediate reintegration into the active ministry of the community or diocese.

Stage 6: Reintegration Program

The final stage of the rehabilitation process involves the reintegration of the guest into his or her religious community or diocese. This must involve careful planning and communication with the Religious Superiors and Ordinaries of the various dioceses.

During the stay of the guest at the Saint Luke Institute, active communication will be maintained with the superiors and openly discussed with the guest. Other facilities have found it useful if the superior has the time to visit on at least one occasion the guest during the stay at the Institute. This is a very direct way of showing concern for this individual and the desire that the guest return to full functioning within the community or diocese. On occasions, it may be possible for the guest and staff member to visit the community or diocese prior to the guest's ultimate leaving the Institute. This facilitates more open communication and better planning for future functioning.

Another most important aspect of future planning for the guest will be the continued contact with A.A. During the stay at the Institute, every effort will be made to help the guest see the value of A.A.'s goals for them. Once the guest has begun to work within the A.A. program, it will be an easy transition to another A.A. group in the area where the community or diocese is located.

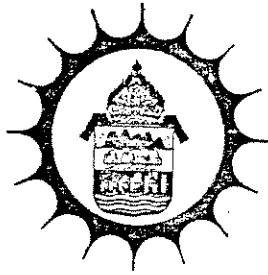
Finally, a continued program of follow-up evaluation and contact with the guest will be maintained by the Institute. We value each individual guest so much that we are actively and anxiously concerned about the guest's continued growth and health.

Summary

We see the rehabilitation program for alcohol abusers at the Saint Luke Institute as a comprehensive medical, psychological, educational, and spiritual renewal. We see the great need and advantage for such a comprehensive program to take place in the context of a balanced and realistic christian community, with the Eucharist at its center continuing as the nourishing and healing central focus of each guest's life.

We believe that alcoholism is a treatable illness in the man or woman who is actively engaged in the ministry of the Church if all aspects of the person's life are taken into account during the rehabilitative process.

We see the process as both time consuming and expensive from a practical financial viewpoint. However, the results cannot be measured in anything less than the most spectacular terms: the complete renewal and healing of a human person, a person whose own life and dedication will touch so many others when they return to active ministry and a more fulfilled religious life.



DIOCESE OF ORANGE

440 SOUTH BATAVIA ST.
ORANGE, CALIFORNIA 92668
714 - 639-8010 - 639-8011

December 7, 1979

[REDACTED]

Dear [REDACTED]

This will acknowledge receipt of your letter of November 29, 1979 and the very favorable comments which you made upon the work of Fr. Al Ramos who serves as an Associate Pastor at Immaculate Heart of Mary Parish. I am sure that he will be happy to know of the appreciation so many people have of the work which he has done.

Thank you very much for writing to me. With good wishes, I am

Sincerely yours in Christ,

Most Reverend William R. Johnson
Bishop of Orange

WRJ:tk

50600038

[REDACTED]
November 29, 1979

Most Reverend William R. Johnson
200 West La Vista Avenue
Orange, California 92666

Dear Bishop Johnson,

I have just heard of the negative reports that you have recently received about Father Ramos. It is true that he has made mistakes. Who of us has not? But for every person who has been so critical of him there are many who see and appreciate how good he is and how much he does.

He has excellent rapport with people of all ages both of the Spanish and the English speaking. The Spanish especially have needed his caring and are responding beautifully. His zeal, availability, visits to the religion classes, ideas and organizational abilities are outstanding: also his fine sermons and liturgies as well as many other things. He has been a real blessing to the parish.

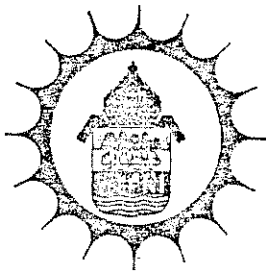
We pray and trust that he will receive and cooperate with good counsel and help. May the Lord bless him and keep him.

May the Holy Spirit continue to guide and support you in your efforts not only to be a Pastor to all but especially in your concern to be a Father to each individual of your flock.

Sincerely yours, in Christ.

[REDACTED]
[REDACTED]
[REDACTED]
Parish Visitor at I.H.M.

50600039



DIOCESE OF ORANGE

440 SOUTH BATAVIA ST.
ORANGE, CALIFORNIA 92668
714 - 639-8010 - 639-8011

December 14, 1979

Reverend George Breslin
Pastor, St. Joseph Church
717 North Bradford Avenue
Placentia, California 92670

CONFIDENTIAL

Dear Father Breslin:

Father Al Ramos will be entering St. Luke's Institute at Marsalin in Holliston, Massachusetts in the near future. The Director of the Institute has asked that the enclosed questionnaire be completed by some of those persons who served with Father Ramos in the immediate past. Please complete the form and return it in the enclosed envelope to St. Luke's Institute as soon as possible.

Thank you for your cooperation.

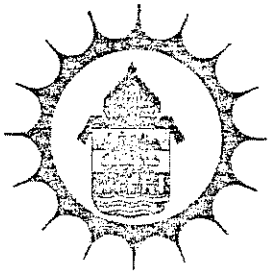
Fraternally in Christ,

Most Reverend William R. Johnson
Bishop of Orange

WRJ:tk

Enclosure

50600040



DIOCESE OF ORANGE

440 SOUTH BATAVIA ST.
ORANGE, CALIFORNIA 92668
714 - 639-8010 - 639-8011

December 14, 1979

Rev. Msgr. John J. Wehmhoefer
Pastor Emeritus, Immaculate Heart of Mary
1100 South Center Street
Santa Ana, California 92704 CONFIDENTIAL

Dear Monsignor Wehmhoefer:

Father Al Ramos will be entering St. Luke's Institute at Marsalin in Holliston, Massachusetts in the near future. The Director of the Institute has asked that the enclosed questionnaire be completed by some of those persons who served with Father Ramos in the immediate past. Please complete the form and return it in the enclosed envelope to St. Luke's Institute as soon as possible.

Thank you for your cooperation.

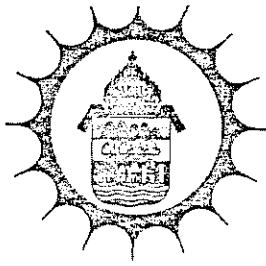
Faternally in Christ,

Most Reverend William R. Johnson
Bishop of Orange

WRJ:tk

Enclosure

50600041



DIOCESE OF ORANGE

440 SOUTH BATAVIA ST.
ORANGE, CALIFORNIA 92668
714 - 639-8010 - 639-8011

December 14, 1979

Reverend Francis Moran
Pastor, Immaculate Heart of Mary
1100 South Center
Santa Ana, California 92704

CONFIDENTIAL

Dear Father Moran:

Father Al Ramos will be entering St. Luke's Institute at Marsalin in Holliston, Massachusetts in the near future. The Director of the Institute has asked that the enclosed questionnaire be completed by some of those persons who served with Father Ramos in the immediate past. Please complete the form and return it in the enclosed envelope to St. Luke's Institute as soon as possible. Thank you for your cooperation.

Fraternally in Christ,

Most Reverend William R. Johnson
Bishop of Orange

WRJ:tk

Enclosure

50600042