

E. RUSSELL LYNN B.D., M.S.W.
225 E. BROAD ST.
FALLS CHURCH, VIRGINIA 22046

April 14, 1993

Mr. Larry Hardoun, Esq.
Market Place Center
200 State Street
Boston, MA 02109

Dear Mr. Hardoun:

I am writing to you regarding [REDACTED] who has been a client in my pastoral counseling practice since April 27, 1990. First let me tell you about myself. I am a Licensed Clinical Social Worker in the state of Maryland, and an ordained Presbyterian Minister. I have a B.A. degree from Macalester College (1963), a B.D. degree from McCormick Theological Seminary (1969), and an M.S.W. degree from The Catholic University of America (1980). I have been in private practice since 1985 with offices in Falls Church, VA and Bethesda, MD. I am affiliated with the Falls Church Presbyterian Church as a Parish Associate. In the last few years in my practice I have seen a dramatic increase in the number of clients who come in to therapy and discover either that they were abused, physically, sexually, and/or emotionally, or that the abuse they do remember is dynamically linked to the problems they are having in their daily living. I have attended numerous training sessions and read many books on the subject of sexual abuse, its traumatic effects, and how to help persons heal from its effects.

As you know, [REDACTED] is a survivor of sexual abuse and has sought therapy to deal with the impact of this in his life. Over the period since April, 1990 I have provided him with approximately 136 hours of therapy (not including numerous phone sessions) for which [REDACTED] has been able to pay only \$1,195.00. If he had been able to pay at my highest rate, I would have been paid \$11,810.00. He has consistently been underemployed throughout his adult life and is still unable to earn enough money to cover his living expenses. This is only one of the devastating results of the sexual abuse and trauma he experienced as a child and as an adolescent. In this letter I shall elaborate on other results of this abuse.

[REDACTED] was abused by Father John Cotter, who was a parish priest at St. Theresa's of Avila Catholic Church in West Roxbury, MA, which was [REDACTED] family church. To the best of [REDACTED] ability to remember the details and information regarding the incidents, the abuse took place from 1968 or '69 until sometime in 1975. There were many incidents of abuse, and [REDACTED] was told many times not to tell anyone about the nature of the relationship which Fr. Cotter had with him. This led [REDACTED] to believe that he was somehow singled out from the other boys for special treatment, that he must keep this dark secret, and at the time Fr. Cotter stopped abusing him, that he was very sinful for having disappointed and made a priest angry. In order to survive the abusive experiences, he learned to dissociate from the experience his body was having and disconnect from his real feelings and thoughts. Eventually, in his teen years, he found alcohol as a way of numbing the pain and self-revulsion he experienced every day.

The treatment has focused on the following issues: 1) an inability to express anger and other "negative" feelings; 2) low self esteem; 3) depression; 4) alcoholism; 5) self destructive and co-dependent relationships; 6) anxiety over social situations; 7) being periodically flooded by and re-traumatized by memory flashbacks of the

abuse, 8) an inability to trust people, and 9) a complete loss of faith in God and feeling of connection to organized religion of any kind. I would like to be able to outline an orderly progression of how these issues were addressed, but they are so intertwined that it was necessary to be working on several of them at a time.

It was essential in the beginning of treatment to establish a firm relationship with him, as well as to provide a structure in which he could unload and begin to work through the details of his abuse. The course of [REDACTED]'s treatment was first to bring up all of the details of the abuse he could remember at that time. These details were primarily of the most physically painful experiences. As his therapy progressed, he was able to remember more of the details. It was 3 or 4 months into therapy before he began to understand that the problems he was dealing with in his life were resultant from the abuse he had experienced from Father Cotter and from the other leader of the Boy Scout Troop, Mr. Reynolds. Because he did not have medical insurance at the time he began therapy, I was unable to hospitalize him which would have provided him with a safe place to begin to work through the tremendous burden of pain, depression, and anger with which he was living. He was finally able to get inpatient treatment in the first two months of this year, 1993. In the past several years in addition to the problems listed above, he has also had problems with employment and problems with housing.

His low self esteem has caused him to not progress in work situations and to allow other people to use him. He has been working in the field of cosmetology, working mostly in beauty salons. Most of his positions have been as assistant manager. He has consistently felt used by people and has had trouble feeling good about his contribution to the smooth running of the establishment. He has spent many hours doing special favors for his bosses and co-workers, and has not been able to demand equal treatment from them. This has led to increased anxiety and hurt feelings.

His inability to deal with and express his anger has been so severe that he could not even experience angry feelings when he began to deal with his abuse memories. This has probably been the most damaging of the effects of the abuse. Anger is seen by many people as a negative emotion, but anger is also seen by many people as a source of energy for solving life's challenges. It is not unusual for persons who have been abused to not be able to express anger, and many, as did [REDACTED], have used alcohol as a way of escaping their anger and "medicating" the additional pain they experience when taken advantage of by others. He is a sensitive and very caring individual who is always ready to help, but who does not know how to establish boundaries and set limits with people. These patterns have plagued him for most of his life and caused many of his relationships to be dysfunctional. The anger he does feel has been turned in on himself and has resulted in physical symptoms such as headaches, low back pain, and skin irritations. As we began to uncover more of the memories of abuse during the first year of therapy, he began to be able to say he was angry, and gradually to feel the anger, but has only recently, since his inpatient treatment, been able to openly express his anger at Fr. Cotter. This has also been a factor in his inability to seek effective legal help. The first attorney he met with was unable to provide adequate counsel and it took [REDACTED] many months to be able to disconnect from him. When he was abused he learned to dissociate from his feelings, so it was necessary for him to learn how to recognize when he was dissociating in order to discover what he was feeling. This has also been a factor in his learning to feel and express his anger.

Although he had been in an outpatient alcohol treatment program prior to his entering treatment with me, and although he was sober for the first several months of therapy, he has had numerous slips and relapses in the last several years. He tried

to make use of AA and the 12 Step Program, but his inability to trust people and the constant emotional pain which he experienced worked against his really succeeding in AA and remaining sober. He now has over three months of sobriety and is attending the outpatient treatment program at the Whitman-Walker Clinic in Washington, D.C. This problem with alcohol is also related to his low self esteem and his being underemployed, thus making it impossible for him to get adequate medical treatment and antidepressant medication. It seems that he was using alcohol to medicate the pain and depression he was experiencing. In September of last year he was arrested on a D.W.I. charge in the District of Columbia, thus adding more stress to his already overloaded life. This however was the catalyst for his getting into the alcoholism program at W.W.C.

██████ has been severely depressed probably for most of his adult life, and possibly for most of the years since he was abused. He has had periods of very blue moods, periods of sleepless nights, periods of feeling quite hopeless and suicidal. Although his suicidality has been expressed passively in such statements as, "I wish I just would never wake up sometime." There were several times when I encouraged him to see a doctor and get an evaluation for depression and for anti-depressant medication, but unfortunately he was never able to find medication which was effective and would end up using alcohol again to "medicate" his depression. He also experienced periods when he could not concentrate on his work or whatever project he was working on.

Over the past 3 years of my relationship with ██████, I have worked with him on his involvement with inappropriate people and on relationships he was in which were not healthy. He has had several short-term relationships and one which has been a major focus for him. He has not been able to establish relationships in which his needs were respected, and in which he was valued for himself, but only for the things he could do for the other. Several of these have been with persons who have problems with substance abuse, thus increasing his propensity for relapse.

His anxiety over social situations is directly related to his low self esteem and his inability to express his feelings when the other might find them problematic. It is also related to his history of being used by people and his inability to trust others when trust would have been appropriate. He has withdrawn from relationships which could have been beneficial to him when the interaction with the other person was difficult, or when harsh feelings arose in him or in the other. This has often caused the trauma of his abuse to become reenacted, thus causing him to feel again the helplessness and shame he experienced when he was abused.

The experience of being flooded with memory flashbacks is quite common in persons who have been traumatized by abuse. ██████ began having flashbacks which he was conscious of soon after he began to work with the memories in therapy. These took the form of partial memories, such as a pain in a part of his body or a vision of the face of Fr. Cotter. Some of them were full blown memories of entire experiences where it felt to him just like being abused all over again. These usually took place at night, but there were also times when they took place in the day time while he was at work. These were quite debilitating making it impossible for him to concentrate on his work, thus effecting his performance at work. It seems also that these flashbacks were cause for some of his drinking over the past several years.

The final impact of the I abuse I want to describe here is his inability to believe in God, his loss of trust in organized religion, and his loss of hope in his future being better than his past. Since he was abused by a priest and in the setting of programs which were connected to the church, such as the Boy Scout program, he came to feel that he could not trust anything about religion. As he describes it, he

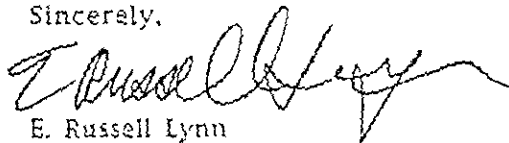
was taught to believe that priests were representatives here on Earth of Jesus and God. [REDACTED] was left with very painful questions. If a priest could use him as he did and then suddenly reject him, how could he trust that all priests would not do the same? What could be meant by the love of God if this was what God's representatives did? [REDACTED] had been very involved in the life of his church, had been an altar boy, and had been involved in the Catholic Youth Organization. But the memory of the abuse would not let him alone and he finally renounced his connection to the church. This has contributed to his feelings of helplessness. The trauma of his abuse has resulted in him believing that he was not any good, and that he was only fit for shameful acts. This situation was made even worse by his being robbed of his belief in God and of the possibility that life is meaningful. His spiritual life completely shattered, he has lived with years of pain and depression and very little hope.

At present [REDACTED] is doing quite a bit better. As I stated he was able to attend on scholarship a very excellent treatment program for survivors of sexual abuse and trauma in California during the first two months of this year. The program is operated by the Bellwood Health Center in Bellflower, California. While there, he was able to work through much more of the pain and anger with which he had been living. The extent of damage and the multiplicity of issues had made it nearly impossible for him to get to the work he needed to do in therapy by only attending weekly or even twice weekly therapy in an outpatient setting. He was also able to attain sobriety and begin again to get a healing connection with the AA Program. He is dealing now with the legal issues relating to his DWI and fulfilling the requirements for community service. He is employed and has been able to assert more of his feelings and needs in the salon where he is the assistant manager. He does have some good friends who are supportive. His family are being as supportive as they can be and express a great deal of concern for his welfare.

In the future his work in therapy will include continuing to integrate the insights he achieved in the inpatient setting, and of learning to make use of the group and of other helpful relationships in his substance abuse program. There is much work ahead of him in remaining sober. There is also much work he still needs to do in learning to express his feelings and needs effectively, especially his anger. He hopes to be able to establish an intimate and satisfying relationship with an appropriate person in the near future, and when he does he will need to learn how to have a healthy relationship.

When you asked me to prepare this letter for you, I had no idea it would be this long, and this involved, but the nature of [REDACTED] condition has been such that there have been all these issues to address. I hope this is clear and helpful. I will be glad to answer any questions you may have regarding what I have written here. Thank you for your help to [REDACTED]

Sincerely,



E. Russell Lynn
703) 532-8723