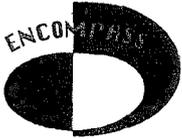


**ENCOMPASS AUSTRALASIA**

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August 27, 2002

**CONFIDENTIAL**

Br Alexis Turton  
Marist Brothers  
PO Box 82  
ASHGROVE QLD 4060

Dear Br Turton

**Re: Br Kostka Chute**  
**Encompass #: 022-10382**

Thank you for referring Br Chute for a comprehensive psychological evaluation with Encompass Australasia. Br Chute arrived at Encompass on Sunday 18 August 2002 and participated in the assessment process until Friday 23 August 2002.

When we evaluate an individual who has been having emotional and/or behavioural problems, we include an assessment of a wide variety of motivations, developmental experiences and physical factors. Our assessment protocol includes the following elements:

- Psychosocial interview
- Clinical interview
- Physical and neurological examination
- Electrocardiogram
- Chest x-ray
- Psychological testing including personality and projective tests
- Neuropsychological testing including intelligence tests, memory and concentration tests
- Spiritual assessment

The final step in the evaluation process is a discussion among the evaluation team members about the client. We then meet with the client to report our findings and recommendations. This report will outline the results of our interviews and testing and will detail our recommendations.

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**IDENTIFYING INFORMATION:** Br Chute presented as a friendly, slightly anxious, 70 year old retired Marist Brother, based at Mittagong. He was appropriate and cooperative during the interview, although sometimes a little vague about events from the past.

**REASON FOR REFERRAL:** Br Chute was referred for assessment by Br Alexis Turton from the Professional Standards office for the Marists. There have been a number of allegations over the years that Br Chute sexually abused boys he taught at school. One of these led to his being withdrawn from teaching in 1993. Three further allegations dating back many years have recently emerged and Br Chute agreed with Br Turton that he needed help to evaluate his personal situation.

Br Chute acknowledges the truth in the allegations although not the actual content of some of them. He admits to fondling young boys in his classroom but denies that this ever led to mutual masturbation or rape.

Br Chute hoped that the assessment would help him to find peace for himself and his victims.

Br Turton noted that some of the victims have asked for an explanation and/or an apology from Br Chute. He hoped that the assessment could also shed some light on whether this would be appropriate.

**BACKGROUND HISTORY:** We take a detailed background history from our clients in order to understand the impact of past events on current attitudes and behaviour. Although Br Chute gave us many details about his background history, we will include only the clinically relevant information in this report.

Br Chute came from a family of nine children. He, along with his twin sister, was the youngest born. He was born on 13 June 1932 following the death of his brother of 19 the month before. His brother died following a closed head injury (he had been in a boxing match and then slipped in the shower afterwards) and the twins were viewed by their mother as a gift from God – 'he took one but gave her two'.

His father, a saddler, died of cancer when Br Chute was only nine so he didn't know him very well. A good man and well respected, he was strict at home and practiced the faith. Br Chute doesn't remember him being openly affectionate but he does have a few tender memories of Dad – playing with the wooden aeroplane that Dad had made for him and his twin, and sitting on the hotel steps and being brought something to drink by Dad. However most of his memories are of Dad being ill and the children having to keep their distance. He has some memory of being brought to his father to say goodbye before he died but thinks it might have been a dream or fantasy as his siblings say it never happened. After

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Dad died he and his younger siblings were sent to stay with relatives until after the funeral and were never confronted directly with the reality of his death.

Br Chute describes his mother as being very loving and concerned although also not overtly affectionate. He believes his main source of affection was a family friend who came to help out when dad was ill. His mother was strict and would belt them when they stepped out of line. She was a convert to Catholicism and took her faith very seriously. He remembers her as a woman of integrity. One particularly fond memory he has of her is the Saturday 'cocoa baths' when she would bath him and his twin and then give them a mug of cocoa to drink afterwards.

Br Chute's parents reportedly had a good relationship although he has little memory of them together. He also has few memories of home life as he left home to join the Marists when he was eleven and a half. He has a sense that he and his twin were the apple of his parents' eyes but were never spoiled. He reports normal relationships with his older siblings although he had very little contact with them from the time he left home until later in life. He is now in regular contact with those of his siblings that are still alive.

Br Chute's mother developed Parkinson's Disease in her seventies and was admitted to the hospice in Lismore. Br Chute was living in Lismore at the time and would visit her regularly. Her health fluctuated and at one point he counted that he had said the prayers for the dying over her eleven times. She finally died and was buried beside her late husband.

Br Chute's earliest memory is of being wheeled in a pram. He remembers repeatedly dreaming of his father and wanting to know him better. Later in life he became aware of the anger and regret he felt over having never had the opportunity to get to know his father better. This loss of a primary male figure at an early age is likely to have had a profound psychological impact on Br Chute, particularly as he was never given the opportunity to process the loss.

**EDUCATIONAL HISTORY:** Br Chute began school in a rural primary convent but soon moved with the family to Lismore and settled in well at the convent there. He reports having good friends and remembers making his first communion at seven years along with another set of twins. He was average academically and was always better on the sports field than in the classroom. In his leisure time he enjoyed playing sport, going bird nesting and playing games with the other children outdoors. He reports that he was never in any serious trouble although he got up to the usual childhood mischief.

Br Chute moved to the Juniorate at Mittagong for his high school years. He made longlasting friendships here and was once again successful at sport but failed his

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leaving certificate. He remembers there being very harsh discipline in the Juniorate – 'quite rough at times'.

**VOCATIONAL HISTORY:** Br Chute was a child when he first thought of joining the Marists. He found a surrogate father figure in one of his Marist teachers and was greatly influenced by his admiration of this Brother. There was also active recruitment by the Marists and when he expressed interest they approached his mother. She agreed after consultation with others in the community.

Br Chute remembers being very homesick when he first got to Mittagong. He was told that he would get over it and that it was God's will that he be there.

After the Juniorate Br Chute entered the Novitiate. At the end of this he was told that he was a natural teacher and was sent out to teach in primary schools. He never obtained any formal teaching qualifications and feels some disappointment about this now.

Br Chute made some attempts during his life to obtain a qualification. He did a one-year TAFE course in woodwork but he had to join a union at the end of it to get the certificate, which wasn't possible, because he was a Brother.

He also embarked on a counselling course but never finally completed it. He was not sure why he didn't finish the course as he had done the bulk of it.

Br Chute reports that he enjoyed teaching and was always very involved in school sport. He believes that he would still choose the same vocation but that he would do it differently, referring to his early entry as 'cradle snatching'. He is currently very involved with establishing the new monastery at Mittagong and works hard at creating a homely atmosphere there as well as a beautiful garden. He appears to enjoy good relationships with his fellow Brothers.

**ALCOHOL AND DRUG HISTORY:** Br Chute has one brother who was an alcoholic. He himself reports no alcohol or drug problems. He is a social drinker and enjoys a few beers a week and a glass of red wine each evening. He believes he may have drunk more than this in the days when he was actively involved in sport but reports that he never drank excessively.

**PSYCHIATRIC HISTORY:** There is no known psychiatric history in family. Br Chute has had no psychiatric episodes. He is on Rivitrol at night for nervous leg syndrome, as advised by a sleep apnoea specialist.

**SEXUAL HISTORY:** Br Chute received almost no formal sex education. At home the message was given that anything to do with sex was bad and the meaning of the vow of chastity was barely discussed during his religious training. Sex was not even talked about amongst his peers. When he approached his Novice

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Master for information he was given a booklet to read but told to ignore the pictures. He was only allowed to keep the booklet for a day. His only knowledge about the mechanics of sex was from being around animals in farming country.

Br Chute was molested (genital fondling) by a Brother when he was 11. An older boy also repeatedly sexually abused him in the Juniorate, using bullying as a threat to make him submit. Later on another boy tried to touch him but he refused. He believed he had nowhere to turn except confession, where he was told that these things happen when you are growing up. He felt sinful and to blame for what had happened to him.

Sexual awareness in puberty was overlaid with a sense of sin for Br Chute. There was no real talk of masturbation but he had the idea that it was wrong and he tried to control it. Sometimes he would experience spontaneous emissions and would feel very guilty and go to confession.

Br Chute reports that he has never consciously masturbated although he might sometimes ejaculate spontaneously. This hasn't happened very often as he has got older.

Br Chute has a memory of walking across the athletics field holding hands with his pupils at the end of a meeting. He was told that evening that it was not appropriate and he had a sense of this being construed as sexually inappropriate behaviour.

Br Chute's only sexual experiences have been with males, and have involved him being either a victim or perpetrator of sexual abuse. However he believes that he is probably heterosexual but never had any opportunity to be sexual with women. When sexual images have come to mind they have been of women although he doesn't allow himself to indulge in what he sees as impure thoughts. He reports that he has never used pornography, or paid for sex.

Br Chute reports that all of his sexual abuse of boys happened while he was teaching primary school – 'people felt free to touch me and the boys would sit on my lap'. He claims that he abused about eight to ten boys of 12–13 years of age (although given the number of allegations that have already emerged this number may well be higher). He reports that he doesn't understand how or why it happened as he denies that he is sexually attracted to young boys, claiming that 'it was more situational'. He reports no previous intent in each case – 'it would just happen – it grew out of the fact that attention was shown to me'. He describes the abuse as genital fondling through the boys' clothes. However some of the victims have reported fondling inside of their pants, mutual masturbation, and in the one case rape. Br Chute claims that at the point that he became sexually aroused by the fondling he would stop.

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Br Chute's father died of cancer (probably of the stomach) when Br Chute was nine years old. His mother died of Parkinson's disease when she was in her seventies. Significant medical issues amongst his siblings include Parkinson's disease, ischaemic heart disease, elevated cholesterol and diabetes.

On physical examination it was noted that Br Chute's blood pressure was elevated and it fluctuated during the assessment week. There were also signs that his prostate might be very slightly enlarged. Some changes were noted in the thoracic spine on the X-Ray and the blood pathology results indicated slightly lowered platelets, elevated lipids (triglycerides), elevated blood sugar levels and no immunity to Hepatitis B.

A letter was written to Br Chute's GP so that these findings can be followed up.

**PSYCHIATRIC HISTORY:** As part of the assessment Br Chute underwent a psychiatric consultation with Dr Chris Canaris. He noted that Br Chute appeared anxious, sad and filled with shame and remorse. There was no evidence of psychosis or of an organic brain syndrome. Br Chute reported that he has never had any psychiatric treatment and is seen by his fellow brothers as 'a pretty buoyant sort of a guy'.

Although he displayed no biological signs of depression (he eats and sleeps well and has plenty of energy) Br Chute gave the impression of being depressed. This depression may have been triggered by the allegations that have emerged recently but seems to predate them to the time that the press began paying close attention to these issues. He described reading the papers knowing that they were referring to people such as himself.

Br Chute may well benefit from anti-depressant medication.

**LEGAL STATUS:** At the time of the assessment there are no legal proceedings involving Br Chute.

**NEUROPSYCHOLOGICAL EXAMINATION:** As part of our evaluation we examine the functioning of the brain, since the brain mediates all perception and experience. Our neuropsychologist, Mrs Jan Clarke, found that Br Chute impressed as functioning within the Average classification of intelligence. Memory and intellectual ability are consistent. Anxiety appears to affect his ability to complete mentally demanding and unfamiliar tasks when thinking becomes concrete and flexibility minimal. When provided with structure and clear instruction Br Chute performs to his ability in most areas. A strength was found in an area requiring non-verbal, serial reasoning. There is insufficient evidence in this profile of scores to suggest organicity.

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**SPIRITUAL ASSESSMENT:** As part of the evaluation process, Br Chute underwent a spiritual assessment interview with Sr Colleen Keeble, who noted that he was open, friendly and willing to contribute to the conversation.

Br Chute's early experience of God has come out of a strong Catholic family environment and was reinforced through his school years by the values and practices of Catholic education. God was never 'out there', was forgiving and became more personal as Br Chute came to a deeper understanding through study of the Psalms, Theology and Liturgy. Mary, has been, and continues to be a nurturing presence for him in his journey with God. His relationship with God has moved from a formal style of 'saying prayers' to imaginative prayer as experienced in the Ignatian Spiritual Exercises, and a contemplative 'being' in silence. Currently his relationship with God and his prayer is much freer.

Br Chute's vocational journey began as a boy of 11. He was strongly influenced by one of his teachers, who was his hero and became a surrogate father for him following the death of his own father. So when the question about joining the Brothers was asked of these young boys, he said yes, and supported by his mother and family, entered the Marist Brothers Juniorate. He grew into an appreciation of the life style, the security and community life. He also took on the image of the 'good brother' - working hard, achieving success and always being at community prayer and exercises, no matter how tired he was. Religious life has not always been easy, but since Vatican II, there have been opportunities for greater freedom in community and ministry. In spite of the ups and downs of Religious Life, Br Chute has never seriously considered another life commitment and is happy to live out his life as a Marist Brother.

Br Chute speaks of his search for God in the everyday events of the world, in people, art, nature, as well as within himself and within the formal structures of prayer, the Eucharist and the Prayer of the Church. The Scripture passages which are part of his journey are 1 Kings 19.9-19 [Elijah looking for God] and the Prodigal Son [forgiveness and acceptance of brokenness]. Br Chute lives in the reality of two worlds – that of the past strict, contained, work oriented Religious Life and the present open, freer, relational Religious Life. He is aware of the hurts that he has caused people in the past, knows God's forgiveness but continues to search for peace of mind. He wants to be able to bring closure to these circumstances of his life, to live his life within the balance of the past and present, at peace with himself, God and others, able to really like himself.

Spiritual Direction has had a place in Br Chute's life and it is recommended that he begin again on a regular basis. This will enable him to reflect more deeply on his experience of God in the vulnerability, pain and joy of his everyday life. He is encouraged to continue to pray contemplatively, using the Scriptures and also consider exploring his experience of God through art.

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**PSYCHOLOGICAL TESTING:** Psychological testing is an important part of our evaluation procedure. We use it to compare responses our clients make to objective norms and to validate our interview impressions through test data. Personality testing assesses a client's personality traits and the strengths and weaknesses that accompany those traits. These tests can also assess the level of psychological distress a client is currently experiencing.

On the Minnesota Multi-Phasic Personality Inventory 2 (MMPI-2), it appears that Br Chute has approached the test items in a significantly defensive manner, suggesting that he is concerned with making a good impression. It could also be that Br Chute tends to minimise problems somewhat, or overlooks personal faults. Generally speaking, though, individuals with this test profile may under-represent problems that may be present, but could be exposing themselves to the risk of stress-related illness when things become overwhelming. For Br Chute, his test results suggest a proneness towards anxiety and oversensitivity to somatic processes. This could reflect a tendency to develop physical symptoms under stressful conditions, and indeed, Br Chute seems more concerned about his physical health at present than his psychological adjustment.

Interpersonally, he is probably seen as outgoing and sociable. He has a strong need to be around others, is gregarious, and he also enjoys attention in social situations.

The test profile suggests that Br Chute has some personality characteristics that have been associated with addiction or substance abuse problems. While he does not indicate any problems with addiction at present, he may need to look more closely at some of his behaviours to keep himself safe.

His performance on the Millon Clinical Multiaxial Inventory-III (MCMI-III) confirms the suggestion on the previous measure that Br Chute makes an effort to present a socially acceptable appearance. This probably reflects some concern about being appraised unfavourably by others. Given his possible feeling of being evaluated here, this is understandable, but it would be important for him to work out how much of this represents an anxious conformity to the expectations of others, particularly those in authority. His test profile suggests that he tries to act in an accommodating or respectful way, and sees it as his duty to obey. It may be that these behaviours are motivated by his tendency to anticipate criticism or disapproval, or a fear of expressing emotion and losing control.

To defend against these vulnerabilities, he may sometimes try to behave in excessively conforming ways, inhibiting behaviour that he fears might evoke ridicule, contempt or punitive action. This suggests that he might have some feelings of self-doubt or anxiety, or be very uncomfortable in situations calling for open anger or conflict. Thus, he might try to gain security and certainty by

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**SUMMARY AND RECOMMENDATIONS:** At the conclusion of our assessment of Br Chute we make the following recommendations:

1. Br Chute has a history of repressed and unintegrated sexuality and a number of allegations against him of sexual abuse of minors. He has very little insight into what motivated his behaviour or any understanding of his sexuality. He is also currently unable to acknowledge the level of abuse that occurred, which is an obstacle to him feeling real empathy for his victims. He is distressed about what he has done in the past but has no means of making sense of it or of resolving his feelings about it. This is leading to anxiety and depression.

We therefore recommend strongly that Br Chute enter the Encompass program for men in order to work at integrating his sexuality and gaining greater insight into his abusive behaviour. He has expressed a desire for help with this in the past and it seems that this is an opportune time for him to work on these issues, especially in the light of the recent allegations that have emerged. His hope for the assessment was that it would bring peace for both himself and his victims, but in fact the assessment only identifies and names the problems. The program would be the ideal place for him to do the work involved to bring him closer to this goal. It would also provide him with the opportunity to work on other psychological issues highlighted in the report, such as assertiveness, self-esteem and the expression of feelings.

2. We understand that Br Chute was planning to go overseas in the near future to do a course on retirement. We would, however, recommend that he put this on hold until he has completed the Encompass program. It is our opinion that he will be troubled by thoughts of the allegations and their implications, as well as the depression and anxiety that these have evoked, and may well not get as much out of the retirement course because of this. It also seems safer and more appropriate for him to do the program sooner rather than later given the recent allegations and the questions that are being posed by victims. It seems that he could build on the good work he did during the assessment week by using the momentum it generated to enter the program and begin focussing on his psychological issues.
3. We do not believe that Br Chute is in any position to respond to the requests from victims that he apologise or give an explanation for his actions. He would need to have much greater insight into his behaviour, his sexuality and its impact on his victims before being able to consider doing this in any appropriate way. For him to respond at this point might do further harm to victims.
4. If Br Chute elects to do the program we would encourage him to see Dr Canaris to discuss the possibility of antidepressant medication.

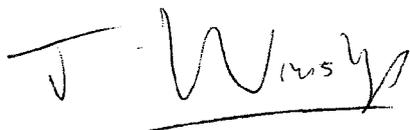
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5. Br Chute also needs to follow up his medical issues either with Dr Tanner or his GP. Dr Tanner recommends that he attempts to control his diabetes through diet and that he purchase a glucometer to track his blood sugar levels. She would review these with him and discuss treatment options.
6. We would recommend that Br Chute engage in Spiritual Direction to complement the work of self-exploration and discovery that we are suggesting for him.

We hope this report is of help to you and to Br Chute. If you have any questions or we can be of other assistance, please do not hesitate to contact us.

Sincerely



**Jacqui Winship**  
**Clinical Psychologist**



**Gerardine A Taylor, Ph.D.**  
**Clinical Director**

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