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COPY

30 July 1999

**J.A SHERWOOD & CO
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655 SHERWOOD ROAD
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Our ref: Mathews7.rpb

Dear Sir,

Confidential Psychological Review of Russell Gordon Haig MATHEWS

Russell MATHEWS has been a client of mine since he was a Commerce student at the University of Queensland in 1976 - 1977. At that time, I was Senior University counsellor dealing with the personal emotional problems of staff and students at that University

At that time Mathews suffered from the residual effects of a brain stem injury as a result of a fall from a horse in 1968. Prior to that accident he had completed Senior with Sevens in all of his subjects except for English. He had an impressive Senior result. The resultant brain stem injury and treatment by ECT was associated with a variety of cognitive and personality problems. These Cognitive problems included poor concentration, poor memory, blurring of vision, dizziness, concrete thinking and obsessive behaviour. His personality problems included impaired ability to size up a situation, impulsiveness and a sense of alienation from others. He was depressed and had difficulty judging the impact of his behaviour on others.

Prior to my seeing Mathews, he had seen a neurologist by the name of Sutherland who said of Mathews (among other things) that he had a variety of symptoms that made it difficult or impossible for Mathews to function at his high ability level. These problems were

"a sequelae of brain stem damage which will gradually clear up and presumably disappear completely with the passage of time" (Sutherland 5 & 68)

In a subsequent report, Sutherland suggested,

"the passage of time", ... "may be measured as a period of ten years and during that period of readjustment he may find that he has jeopardized his future" (Sutherland, 21d 8 69).

With a long period of supportive psychological counselling, including cognitive restructuring and reality testing, Mathews after some early failures went on to graduate in Commerce. His cognitive problems did clear up.

Since graduation, Mathews went on to do very well in business and purchased several properties. He had a falling out with Telecom and became obsessed with the injustice of it all. He became depressed and locked into depressive ruminations. Many of his old personality symptoms returned and he showed poor judgement, including poor business judgement, impaired ability to assess a situation, poor social skills and was impulsive and unable to work through the social consequences of his behaviour. He went bankrupt.

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Mathews moved back to Brisbane from Townsville and made a new start with the help of his parents. His symptoms cleared up and his business began to pick up. He then had a falling out with the Human Rights Commission over alleged sexual harassment. This triggered a return of his symptomatology. His business faltered and he lost his Tax Agent license. He considered himself innocent of all the allegations and again become locked into the injustice of it all. His relatives helped him relocate his business as an accountant to St Lucia. Again, his business had begun to pick up. Again, it failed because of his pre-occupation with the way the University treated him. He was studying law 'to clear his name' and initiated several actions in various courts. However, he brought to the study of law a concrete, literal and black and white interpretation of the law.

About a week before an incident that led to his previous charges of assault, Mathews rang me and said that he was going to make a citizen's arrest of a member of the Human Rights Commission for being an accessory after the fact. I spent an hour on the phone indicating to him that whatever he believed to be the correct interpretation of the Law, that any such action would backfire on him and that in doing this his judgement was impaired. He seemed to have listened. However, he proceeded with that ill conceived, socially inappropriate behaviour and was arrested and charged.

With all his residual personality problems there is no aggression or violence in this man. To the contrary, he has a naïve, concrete view of the world that it will be just and fair in a black and white sense. He has a good grasp of the details of the law but misses the overall picture. He carries no intention to harm others physically. In many incidents in his life it is always Mathews that gets hurt. He is easily led by the non-dominant ideologies and acts to his own detriment.

The incidents of the 16 September 1993 with the Human Rights employee showed extremely poor judgement and very naïve interpretation of the Law but there was no intention to cause bodily harm to anyone. As usual that incident backfired on him.

Once again, Mathews was left with a brooding sense of injustice that delayed his recovery from those proceedings. Nevertheless, Mathews made steady progress with completing two degrees simultaneously in spite of some perceived (and real) discrimination against him by some members of the University faculty. This progress was in spite with some minor residual cognitive, memory and personality difficulties. These difficulties (and coping strategies) made it necessary for him to have a very rigid concrete structure to his life to cope with his thinking and his personality problems. His rigidity of thinking means that he could get sevens (the highest grade) in mathematics, science, and computer subjects but struggles in his arts/law subjects. This rigidity of thinking (as a result of his brain stem injury) has got him into some trouble with law subjects where his concrete black and white approach is too rigid to make the law work.

Then there appears to have been an attempt on his life on 14 January 1996. At least, he suffered a very significant blow to the frontal lobes and spent sixteen days in hospital. A CAT scan showed significant brain damage and some cerebral atrophy from his previous injury. Again Mathews appeared to have coped by setting up a very rigid adherence to his daily program. Any deviation from his program got him very agitated and he became anxious and depressed. When obsessed, he becomes dysfunctional to the point where he neglects himself, does not eat properly and there is a drop in his personal hygiene.

More recently (11/2/98), Mathews was knocked off his pushbike and suffered a further injury to his frontal lobes. Since then he has concentration and memory problems, and now worries about his condition. I have no doubt that the condition significantly impairs his social judgment. He sought special permission from the University and Austudy to do his Honours year in Mathematics with a reduced load. There have been elements in the University that he perceives as discriminating against him. An independent remark of his Mathematics' paper and various letters written lend support to his perceptions as having truth in them. He failed a subject in Law that he needs to repeat to get his law degree. He has been marked down in a Mathematics subject that he needs for his Honours degree. During the period leading up to these recent charges, Mathews has been acutely distressed about the way the University has been treating him. To help resolve his issues, Mathews and I had a meeting with the Registrar and the University legal officer some time before Mathews' ill conceived attempt

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to make a citizen's arrest for trespass. Mathews still believes he is right in law and the wrong one has been charged.

Mathews has had four formal psychiatric and neuropsychological assessments.

1. Louis Salzman (11/5/94) concluded,

"I am of the opinion that Mathews' behaviour has been significantly influenced by the head injury which occurred in 1967 and that since then his behaviour has included a number of characteristics which are consistent with his head injury. Included in these are a lack of awareness of the impact he makes on others, concrete thinking, an obsessive behaviour, poor decision making, deficient self-awareness which results in an inability to perceive the impact that he makes on others, impaired ability to size up a social situation, defective self-criticism which causes him to experience varying degrees of self-satisfaction, little or no anxiety, impulsivity and a lack of concern for social conventions."

2. Dr R.J MOYLE, forensic psychiatrist (2 March 1995) concluded,

"A series of events have happened over the last 9 years that has resulted in Mr. Mathews becoming increasingly preoccupied with his legal rights and profound sense of injustice. These events started with an error by a Government Office, was handled in a slow manner that was seen by Mr. Mathews to be unsympathetic to the effect it has on his business and his life. He has sought justice over the same issue continuously and in the process has devoted more and more of his time to pursuing issues of injustice and less of his time in client related activities. His assets have dwindled away to nothing in this process and he is steadily and increasingly come to believe that there is a system in existence such that all Government agencies support one another and persecute him in court."

In my opinion Mr. Mathews suffers a paranoid disorder or what is called a delusional disorder persecutory type in the DSM -IV classification systems. This is a chronic and circumscribed delusional system that shows up in the extreme and at times irrational, unacceptance that the Judge is the arbiter of what is legally correct albeit consequent upon appeal. He is running out of avenues of appeal."

As regards the specific offence of Assault Occasioning Bodily Harm, the facts of the matter are not in dispute only the interpretation of events. Mr. Mathews sees himself as performing a legally permitted duty of arrest and will quote Acts of Parliament and Criminal Codes to support his contentions. If the law does not support this then he is delusional but there is other evidence to support a delusional explanation. I have mentioned much of this evidence in my preamble."

In my opinion Mr. Mathews would have been deprived by the delusional disorder of the capacity to know he ought not to do the assault and the capacity to control his actions once started. However, I know of no mechanism under the current Mental Health Act 1974 that will allow this case to be referred to the Mental Health Tribunal for a determination of insanity. It does not appear on the information I have, to have to been raised at his Trial. He would if found of unsound mind, have been managed under the restrictions of the Mental Health Act which authorizes health professionals to provide involuntary treatment services. With respect to his Honour, the best I can advise at present is that he (Mathews) be given a non-custodial sentence with the condition that he receive psychiatric treatment" (p. 22).

3. I, (Hazell, 8/9/98) conducted a neuropsychological examination on Mathews after his most recent push bike accident (11/2/98). I concluded,

"Russell's previous brain stem injury created a mild neurocognitive disorder that impeded his concentration and ability to function at his normal high ability level"

The bicycle accident on 11 2 98 caused a further head injury which reactivated many of his former symptoms, and triggered a phobic reaction to bike riding. Previous to this injury he was performing

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well as a full time student. The accident of the 11 2 98 has impaired his ability to concentrate, study and sustain his attention and motivation.

Russell also suffers from a mild adjustment disorder with mixed features of anxiety and depression. The psychological tests performed were re-assuring and served to diminish his anxiety and depression.

The effects of the head injury consequent to the bicycle on the 11 2 98 are likely to settle down over the next twelve months. However, the short-term effects of the accident were de-stabilizing and are bound to delay his program for University. There is no evidence of medium to long term impairment of concentration. His impairment is at the lower end of the mildly impaired (10%). However for an Honours student, this is likely to be significant." (p.6).

I had written a report on Mathews some years ago that was based on the old DSM-III-R) and concluded that he had an Organic personality Syndrome, (DSM-R, p. 114). The main feature of which is

"a persistent personality disturbance, either lifelong or reflecting a change or accentuation of a previous personality trait that is due to a specific organic factor," ... "markedly impaired social judgment," ... "suspiciousness or paranoid ideation are common."

4. Jill Harding-Clark, Clinical Neuropsychologist, completed a more recent neuropsychological report at the Royal Brisbane Hospital on 23/3/99. She concluded,

"Mr. Mathews presents as a man of superior, "premorbid" intellectual ability. Against this background he demonstrated a number of problems including mildly impaired visual memory and executive functioning. Problems with executive functioning include poor planning and organisation, impaired self-monitoring ability and problems with focussed attention. These problems occur against background of paranoid ideation, tangentiality, pressured speech, immaturity within context, and egocentricity."

"the pattern of deficits elicited on testing is suggestive of right hemisphere executive dysfunction which often involves frontal systems. Executive systems are responsible among other abilities for the control and regulation of attention, and verification or ability to use feedback which explains Mr. Mathews tendency at interview to be garrulous and non responsive to conversational cues, and the content to some extent of his conversation. There does seem to be an organic base to his presentation.

"However, pre-existing psychogenic problems appear to be exacerbating neurogenic problems. Given the nature of Mr. Mathews delusional content of thought, neuropsychiatric may be in order." (p.3)

Summary & Conclusion

Russell Mathews fits the criteria for a mild neurocognitive disorder (DSM-IV, pp. 706-708) with associated personality changes. At best when things are going well he has an organic personality syndrome with associated social incompetence and paranoid ideation. This condition has been longstanding and dates from his fall from a horse in 1967. This is a man of very superior intelligence with a concrete literally minded view of data. Under stress he decompensates, can become delusional and has socially inappropriate responses to the perceived stresses based on his rigid interpretation of his studies in law. These offences were committed by Mathews acting in good faith in terms of his perception of the law.

To cope with his many disabilities, Russell MATHEWS has to set up very rigid structures for his reclusive lifestyle. I do not think Mathews would be much good to anyone in doing community service as he would require a lot of supervision in a new environment.

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I have seen Mathews over many years. He has decompensated from time to time under the stress of perceiving himself to be persecuted into a delusional state and has acted on socially inappropriate solutions to his detriment. Mathews has been suicidal from time to time but lacked the motivation to act on it. He is more likely to neglect himself. As a danger to others, I do not think Mathews has ever deliberately set out to injure anyone in his life. He is not capable of it. He gets into trouble with people because of his social incompetence and his concrete interpretation of the law.

Prior to the behaviour that led to these charges, he was under extreme pressure from what he perceived (with some justification) to being treated unfairly by the University. He decompensated, his behaviour became erratic and the fence sitting activity and his attempt to give a citizen's arrest is a measure of his social incompetence and his rigid view of the law rather than an intention to injure a third party. I agree with Moyle's opinion of Mathews in a previous case and am of the opinion that it applies here.

"In my opinion Mr. Mathews would have been deprived by the delusional disorder of the capacity to know he ought not to do the assault and the capacity to control his actions once started."

Nevertheless, he has served a period of probation without incident and brings to that activity the same black and white obsessional observance that he expects from the law.

I would support any special consideration and/or special arrangement that the court can make such that due consideration can be given to his vulnerable psychological condition.

Brian E. Hazell

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30/7/99

30 July 1999

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Brief Resume of Dr Brian E. HAZELL's qualifications and Experience

EDUCATIONAL QUALIFICATIONS

1954	High School	De La Salle College, Oak Hill, NSW
1956	Teacher Training	De la Salle Training College, Castle Hill, NSW
1959 NSW	Teacher's Certificate	Sydney Teacher's College & NSW Department of Education
1966	B.A. Psychology	Sydney University (1962-1966)
1967	Diploma in Counselling	NSW Department of Education
1968	Member Australian Psychological Society (M.A.Ps.S)	
1969	M.A. Clinical & Abnormal Psychology	Sydney University (1968-1969)
1974	Membership of Queensland Counsellor Association (QCA).	
1975	Membership of Australian & New Zealand Student Services Association (ANZSSA)	
1977	Registered Psychologist	Psychologists' Board of QLD
1980	Student-at-law	Barristers' Board of QLD
1981	M.App. Psych. UofQ converted to PhD	Oregon State University
1982	Membership Oregon Personnel & Guidance Association (OPGA)	
1983 Psych	Ph.D Student Counselling / Psychology	Oregon State University (OSU) Western Oregon State College (WOSC)
1984	Ph.D Candidate	Oregon State University (OSU) USA
1989	Ph.D Completed	Oregon State University USA
1989	Member American Psychological Society (M.Am. Ps. S).	

The PhD is in the Counsellor/Education, the Teaching, Training and Supervision of Counsellors and had four major strands to it.

- (1) Co-teaching and training Masters students at OSU & WOSC for Agency Counselling, School Counselling, Family Counselling and Counselling in clinical and institutional settings.
- (2) Supervision of these students with peer group and real life clients/patients in their various counselling, practicums in vivo and by video tapes both individually and in group settings.
- (3) Course work in Counselling/Clinical Psychology. Much of this was credited from my studies from Sydney/Queensland Universities.

I have a progressive scientific paradigm Eysenckian model of Counselling Psychology (the scientist/practitioner model).

- (4) Thesis Topic. "Characteristics of Trainee Counsellors in terms of Eysenck's progressive Scientific paradigms, Intelligence, Personality & Ideology and Success in Graduate Study"

Brief Resume of Dr Brian E. HAZELL's qualifications and Experience

PROFESSIONAL EXPERIENCE

1987(+)	Director	Toowong Psychology Centre Pty Ltd
1984-1987	Counselling psychologist	Counselling Services - U of Q
1982-1984	Graduate Teaching Assistant (GTA) and Adjunct Professor (Lecturer)	Department of Counselling, Oregon State University (OSU) & Western Oregon State College (WOSC)
1979-1982	Senior Counsellor	Counselling Services, U of Q. Saint Lucia. QLD. AUSTRALIA
1978	Exchange Counsellor	Student Counselling Centre, University of Waterloo, Ontario, Canada
1974-1977	Lecturer	Counselling Services, U of Q. Saint Lucia. QLD. AUSTRALIA
1973-1974	Director & Senior Lecturer	University Counselling Service, University of South Pacific (USP) Suva, FIJI.
1970-1972	Lecturer/Counsellor Psychologist	University of Newcastle, NSW Psychiatric Outpatients, Royal Prince Alfred Hospital, Sydney NSW.
1968-1970	Medical Psychologist & Tutor in Psychiatry	Royal Prince Alfred Hospital & Professorial Teaching Unit, Department of Psychiatry, Sydney University
1967-1968	School Counsellor	Moree High School, NSW. NSW Department of Education,
1965-1966	Guidance Officer	Division of Guidance & Adjustment, North Sydney,
1962-1963	District Sports Organiseer	Bankstown District, National Fitness Council
1964	Teachers Federation Representative	Western Suburbs District, Sydney, NSW Teachers' Federation
1959-1964	Primary School Teacher	NSW Department of Education, Sydney.
1957-1959	Swimming Teacher	National Fitness Council
	Play Centre Organizer	NSW Department of Education,
	Summer Camp Counsellor	National Fitness Council