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Nothing but the Truth: Forensic psychologist Ann LeBlanc manages cases where crime and mental illness overlap

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Nothing but the Truth

*Forensic psychologist Ann LeBlanc manages
cases where crime and mental illness overlap*

By Douglas Rooks '76

Photos by Bridget Besaw Gorman



Walter “Woody” Hanstein, a defense attorney practicing in central Maine, remembers very well how he first became aware of Ann LeBlanc ’74.

Hanstein had been called in to help with the defense of Mark Bechard, a mentally ill man who, over a long weekend in January 1996, broke into a convent in Waterville, fatally stabbed two elderly nuns and severely injured two others.

The State Forensic Service, the agency that examines defendants’ mental state and capacity, said Bechard, who had battled mental illness for years, was competent to stand trial. That outraged Hanstein, who

petent to stand trial. He was committed to the state hospital’s forensic unit, where he remains today. LeBlanc now heads the agency that she countered in court in one of the most scrutinized cases of its kind in Maine.

It’s a remarkable path for LeBlanc, who came to Colby as a working-class kid from Waterville and since then has taken on responsibility for some of the most thorny societal challenges associated with mental illness. For more than 20 years, her decisions have been life-changing for her patients, often difficult for LeBlanc herself.

It is not a profession for the faint-hearted,

“I’m often aware that this may be the last time for many years that they get to sit in an upholstered chair, have a mug of coffee and be called ‘Mister.’ But regardless of the allegations, they deserve to be treated respectfully. We owe them that much.”

had extensive experience with mentally ill defendants and little faith in Forensic Service evaluations. Though it was an agency designed to offer impartial advice to the courts, Hanstein believed it routinely sided with the prosecution.

Preparing for trial, Hanstein noticed the reports that LeBlanc, then a clinical psychologist at the Augusta Mental Health Institute (AMHI), had written about his client. “They were in-house evaluations, not written for the court, but they were striking in their ability to clearly and simply explain what was going on,” he said.

Hanstein believes LeBlanc’s subsequent testimony in court was pivotal in the trial judge’s decision to find Bechard not com-

as every day presents questions for which there are no simple answers. But LeBlanc wouldn’t have it any other way.

Painted on a wall in a tunnel beneath the old Augusta Mental Health Institute complex is a passage by a long-ago patient at the institution. It begins, “If my heart could speak, I’m sure it would say, I wish I were someplace else today.”

The professionals who worked in that difficult environment where the state’s most seriously mentally ill patients were treated could have said the same on occasion. But LeBlanc has never shied away.

She spent much of her career at AMHI, beginning as a clinical neuropsychologist in 1984 and rising to department director and

Thoughts painted by a patient on a wall in a tunnel beneath the old Augusta Mental Health Institute reflect the perspective of someone with mental illness. The complete passages reads: *Among these books, a great amount of knowledge there must be, but what good is knowledge where others carry the keys. Through the last ten years many improvements have been made, but the final words seem to say, don’t forget, my good man you’re still a patient here today. Intelligence, ability, and knowledge surely will never last. Why, all we want to look at my good man, is your past. I wish that some of these people, who write the books and make the rules, could spend just a few years walking in our shoes.*

then chief operating officer 10 years later; she briefly served as acting superintendent. But it’s her current job, as director of the State Forensic Service, that her colleagues and friends say is the one she was born to do.

LeBlanc doesn’t trace her latent interest that far back, but she does now realize that her parents sparked her interest in criminal justice. “My mother worked for District Court, and my father was a police officer who often photographed crime scenes. He had the pictures downstairs. I wasn’t supposed to look at them, but sometimes I did.” At the time, though, the court system—like most institutions—was overwhelmingly male and her childhood interest was not encouraged. It was only years later that doors



were opened to women in the criminal justice field; LeBlanc stepped through.

The first door to open was at Colby, which LeBlanc entered as the first person in her family to go to college: “It was such an honor to earn a scholarship to Colby. . . . But I didn’t have confidence in my own abilities,” she said. By her own account, LeBlanc was a late bloomer who truly found herself intellectually only in graduate school while earning a bachelor’s degree in health science at Johns Hopkins University. She later earned her M.A. and Ph.D. in psychology at Ohio State University and did her internship at the University of Tennessee Health Sciences Center.

LeBlanc soon returned to Maine and

AMHI, a forbidding complex of Gothic stone buildings on the Kennebec River. She did a stint for the state and then tried private consulting, spending five years doing assessments and consultations for the Bureau of Mental Retardation, the Forensic Service and the Maine State Prison. She found it very lonely and also objected to what she felt were the entrepreneurial demands of running a business and satisfying a particular client. “After a while, you begin to feel you’re tailoring your reports to say what the client wants to hear. In a subtle way, you’re no longer using your own best judgment,” she said.

After returning to AMHI, LeBlanc relished “the purity of working for the state.

I’m getting paid, but no one is telling me what to write, and the only concern is to get as close to the absolute truth of the situation as I can.”

She does that in a new environment; her small office is in the new Riverview Psychiatric Center, a \$33-million hospital that replaced the 160-year-old AMHI earlier this year. A striking improvement over its predecessor, the new hospital is still home to some of the least fortunate citizens in the state—a fact that is not lost on LeBlanc. “There are people who come to this office who’ve done horrible things,” she said. “I’m often aware that this may be the last time for many years that they get to sit in an upholstered chair, have a mug of coffee and



The Augusta Mental Health Institute, at left, which dates to the 1840s, housed as many as 1,700 patients with mental illness. It was replaced by the 88-bed Riverview Psychiatric Center, at right, as societal and medical views of mental illness changed over the past three decades. Treatment for mental illness in Maine, and elsewhere, has moved from confinement in a central institution to community-based facilities that allow most patients to remain in their community while coping with their illness. About 40 beds in the new facility are reserved for forensic patients committed to the hospital after being found incompetent or not criminally responsible for their actions.

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The days are long gone, however, when those committed to the state mental hospital could expect to stay there for decades or even an entire lifetime. At its peak in 1973, the nearly dozen buildings at AMHI housed 1,700 people; the new hospital has just 88 beds. The decline in numbers doesn't tell the whole story. Half of the beds in the new hospital are for intensive treatment of mental illness in patients whose stays for civil commitments are generally short-term, though some patients return repeatedly. The other beds are for the forensic unit, housing those who are alleged to have committed crimes but have been found not



competent to stand trial or who have been tried and found not criminally responsible for their actions.

LeBlanc says she feels fortunate both in where she works and what she does. Maine's new state hospital is a rarity—most states continue to use aging hulks like the old AMHI—and, though she is no longer connected to patient care, she seems pleased that her office is in the same building.

On a tour of both the old and new hospitals, she points out dozens of details, aspects of the environment that make a big difference to the troubled people who must live there for weeks or, in the case of the forensic unit, for years or even decades. Riverview, unlike AMHI, is built seamlessly, with few apparent distinctions between

wards and treatment centers. One enters the forensic unit almost without noticing the electronic high-security perimeter. It looks very much like every other part of the hospital. Many of the residents greet LeBlanc by name and stop to chat. A casual observer would never know that her reports are a reason why many of them are here today.

The Forensic Service itself is another rarity. Most states rely for even the most prominent cases on outside evaluators, consulting psychologists and psychiatrists who are specialists in private practices.

Along with her evaluations and reports, LeBlanc's work requires frequent appearances in court, which, if the schedule holds, may take several hours, even an entire day or more for the more complex legal proceedings.

In addition to evaluating those accused of crimes, she also reports and testifies about forensic patients who are petitioning for release, as they are permitted to do every six months. Such evaluations differ from pre-trial cases because LeBlanc knows the patients and there's a treatment plan to examine and learn from, she said.

Most forensic patients eventually earn some kind of release from custody, although it may be limited and monitored. Those who don't are usually so ill that they don't ever petition the court, LeBlanc said.

There is, in essence, no "typical" crime for which an insanity defense is raised, although many cases involve homicide or sexual assault. "An attorney would be unlikely to invoke the defense for shoplifting,



A Case That Shook the System

In Maine the notoriety of the Mark Bechard case rivaled that of the 1981 shooting of President Ronald Reagan by John Hinckley, and both raised questions about psychiatric care and the criminal justice system.

The Bechard case did not have the effect of limiting the rights of mentally ill defendants, as some believe the Hinckley case did. The modern plea of “not guilty by reason of insanity” began in Britain in the 19th century and by the time of Hinckley’s crime had been expanded from the so-called “cognitive” test—an inability to know right from wrong—to the so-called “volitional” test. The latter test attempted to determine whether, even if a defendant could appreciate the wrongfulness of his action, he was unable to control his impulses. It was the latter defense that Hinckley’s lawyers used successfully and that caused first the Congress and later most states, including Maine, to remove the volitional test as a defense.

It is difficult to gauge the effect of these changes on actual trials, in part because of the rarity of a successful defense. In Maine, Ann LeBlanc said, there is an average of only four verdicts a year with a “not criminally responsible” finding.

Several investigations followed the Bechard case, as authorities tried to determine whether the mentally ill man had been adequately monitored and whether the tragedy could have been averted by more vigilant community mental-health services. Subsequently, there was a shakeup of the community mental health system as mental health officials attempted to make the system more responsive to clients and their families and the community. The judge, Donald Alexander, now sits on the Maine Supreme Judicial Court. And LeBlanc evaluates for the court those accused of serious crimes who may be suffering from mental illness.

At right, the AMHI complex as seen from the nearby State House, where issues relating to the mentally ill have been debated for decades.

Ann LeBlanc, director of the Maine Forensic Service, confers with Hancock County District Attorney Michael Povich about a criminal case to be heard in the Ellsworth courtroom.



identity of the defendant confidential, “Both the prosecutor and I think he’s malingering. We’ll see if the judge agrees.”

Discussing her work, LeBlanc exhibits the same no-nonsense, plainspoken qualities noted in her courtroom testimony.

There is no false modesty. She says, “I’m

In the chapel, she had an epiphany: “I had an absolutely physical sensation of the presence of God. It was as if I were grabbed by the roots of my hair.” Soon she was regularly going to church again in Waterville, where she is active in her parish. “I can’t imagine how I’d do this job

“The emphasis should be on treatment, on helping a person who doesn’t have free will, as most of us would understand it.”

because the criminal penalty would be less than the period required for observation,” she said. “But it does happen. The emphasis should be on treatment, on helping a person who doesn’t have free will, as most of us would understand it.”

Because of the complexities and uncertainties involved in evaluating mental illness, LeBlanc is well aware of the difficulties of the job, but this seems not to daunt her. Her manner is direct but slightly enigmatic, as if acknowledging that complete knowledge or certainty is not possible. Heading off for a day in an upstate district court earlier this fall, she observed, while keeping the

good at my job. I take pride in it and there are days when I can’t imagine doing anything else.” She also has no doubt about the purpose of what she does. “Our job is to tell the truth and treat people respectfully. And that’s not easy to do. We all often find it easier to dodge the truth, to not own up to it.”

But LeBlanc is also candid about the stress and the tensions the job brings with it. Though raised as a Catholic, she had not been in church for 20 years when she attended a service to install a new Catholic priest at AMHI while she was assistant superintendent.

without the bulwark of my faith,” she said. “I just wouldn’t know where to turn at the end of the day.”

LeBlanc recently turned down a job change that would have made her the first statewide forensic director of both the state hospital and community programs. “The position is definitely needed,” she said. “I’m just not the right person for it.”

“Whatever she goes on to,” said defense attorney Hanstein, “she will be able to say that she made the criminal justice system fairer and better for the most damaged and disadvantaged of our fellow citizens.”