

Resource Materials for Bishops

T RESTORING **T** **TRUST**

A Pastoral Response to Sexual Abuse

Volume II

Bishops' Ad Hoc Committee on Sexual Abuse

November 1995



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November 13, 1995

National Conference of Catholic Bishops
Annual General Meeting
Omni Shoreham Hotel
2500 Calvert Street, N.W.
Washington, D.C. 20008

Dear Brother Bishops:

In November of 1994 the Bishops' Ad Hoc Committee on Sexual Abuse gave you volume I of Restoring Trust.

Volume I contained a number of resources and articles written to help you deal with cases of pedophilia/ephebophilia among the clergy. This current binder contains volume II of Restoring Trust.

- Included are:
1. a. Information on additional Evaluation/Treatment Centers
 - b. The summarized results of a survey on the use of these centers by twenty Arch/dioceses.
 2. Material on the care of victims
 3. An article written by a priest offender
 4. An article written by a diocesan Vicar for priests
 5. An article written by a psychiatrist on the effectiveness of the treatment of the offending priest
 6. An article written from an insurer's perspective
 7. An extensive bibliography of various books and articles on the subject compiled by a researcher in the field

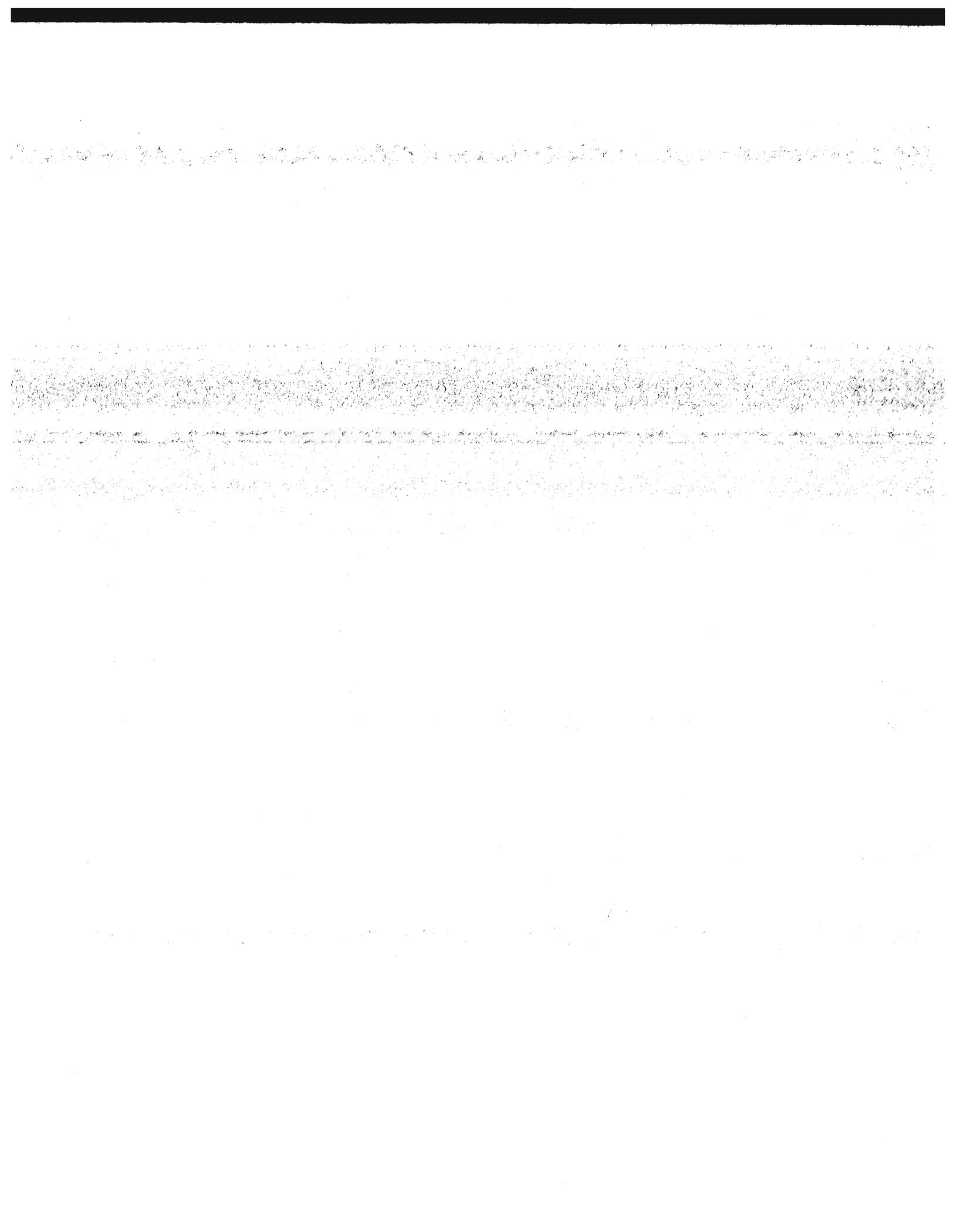
These two volumes have been prepared by the Committee in the hope that they may prove helpful to you and your staff in your efforts to deal pastorally with this issue. I hope that you will be able to place this volume in the hands of those for whom it will do the most good. Please make as many copies of this material as you need.

As I stated last year, if there are any additional areas you would like to see covered in future materials or articles, please contact a member of the Committee or staff.

With kind personal regards, I remain,

Sincerely yours in Christ,

Most Reverend John F. Kinney
Chairman, Bishops' Ad Hoc Committee
on Sexual Abuse



AD HOC COMMITTEE ON SEXUAL ABUSE

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PRESENTATION

In its report Restoring Trust (November 1994) the Ad Hoc Committee on Sexual Abuse reported on ten evaluation/treatment centers. The report consisted of self-descriptions of these centers, some key questions for the centers and for the bishops to consider asking on the occasion of a referral, suggested criteria for assessing centers, and some general comments. In 1995 ten other centers were invited to supply similar information to the ad hoc committee and eight have responded.

Part One of the report which follows is similar in form to the November 1994 report on centers. This means, therefore, that NCCB members now have a description of 18 centers, plus comments and suggestions their leadership wanted to share with the bishops.

Part Two of this report consists of the results of a survey of all the dioceses regarding the centers they are currently using for evaluation/assessment, treatment, and long term care of priests alleged or acknowledged to have been involved in sexual abuse. The ad hoc committee was gratified with the participation of so many dioceses (145) in this survey and is grateful for this collaboration in such an important area.

REPORT ON ASSESSMENT/TREATMENT/LONG TERM CARE CENTERS

PART ONE: EIGHT CENTERS

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INTRODUCTION

One of the objectives for the Bishops' Ad Hoc Committee on Sexual Abuse relative to the use of evaluation and treatment centers. The objective reads:

To compile descriptions of sexual abuse evaluation and treatment centers, church-related and others - for priests and lay employees - including their specialties, style of contact with referring bishops, and type of client information shared; to collate a series of key questions their professional staff expect to be asked by bishops on the occasion of a referral, along with a list of questions the bishops themselves may be asked; and to provide bishops with suggested criteria for looking at evaluation and treatment centers.

In **Restoring Trust** ten centers were described as outlined in the above objective. AHCSA decided to do a follow up report on additional centers being used by dioceses across the country. As a result of a survey to determine what centers were actually being used by the bishops, ten other centers (which have served at least three dioceses) were invited to respond in a manner similar to those reported in **Restoring Trust**. Eight responses are covered in this report.

These centers were requested to supply information in four areas:

- a self-description of their center
- key questions they would propose
- suggested criteria for assessing centers
- general comments

The bishops on the ad hoc committee are grateful for the response by these centers and for the insights offered for consideration by the bishops.

Supplying this material for review by NCCB members does not imply endorsement by the ad hoc committee of any or all of the facilities described. Their self-descriptions really do speak for themselves. The criteria for assessing a possible center for use by a bishop are also in the words of the respondents themselves.

SECTION ONE: DESCRIPTION OF EIGHT CENTERS

All respondents were requested to describe their facility under four headings: general description, specialties, style of contact with referring bishop, and the type of client information that is shared with the bishop.

BEHAVIORAL MEDICINE INSTITUTE OF ATLANTA

Suite T-30, West Wing
3280 Howell Mill Road, N.W.
Atlanta, GA 30327-4101
Phone: 404 351 0116
Contact Person: Gene G. Abel, M.D.

1. DESCRIPTION

1.1 In General

This is a free standing private facility adjacent to a medical center. The programs in place have been developed over the last 27 years by the Medical Director, Gene G. Abel, M.D. Ninety percent of evaluation and treatment is in the sexual area dealing with inappropriate sexual behaviors (such as child molestation and other paraphilias), professional sexual misconduct (non-deviant sexual behaviors that do not involve sexual deviations, but inappropriate sexual contact or unethical sexual contact between professionals and others) and sexual harassment, as well as sexual dysfunctions. ... 99% of all clients are evaluated and/or treated on an outpatient basis. Clients come from throughout the United States for 1-3 day evaluations or 4 to 6 weeks of treatment (called fast track treatments). They are then referred to members of the National Network (individuals knowledgeable and trained in the application of cognitive-behavioral treatments used at the facility) or to other therapists in the client's hometown for continued treatment and relapse prevention.

1.2 Specialities

1.2a Evaluation for the usual member of the clergy includes:

- ◆ Review of records accompanying the client
- ◆ Psychiatric assessment
- ◆ Social history, medical history, physical examination with laboratory measures conducted by specialists
- ◆ Neuropsychological and psychological assessment
- ◆ Psychophysiologic assessment including the Abel Assessment, the Abel Screen II, penile plethysmography and polygraph assessment

1.2b Treatment: The Institute generally has 260 individuals in treatment at any one time. Nearly all clients receive cognitive-behavioral treatment with a strong relapse prevention arm. In brief, treatment focuses on:

- ◆ identifying the antecedents to inappropriate sexual behavior
- ◆ teaching the client methods to disrupt the sequence, behavioral therapies to dampen or eliminate deviant sexual interests, and empathy in order to develop greater appreciation of the negative repercussions of the behavior on the victim
- ◆ normalization of the client's social and assertive skills
- ◆ and, most important, developing a relapse prevention program with an extensive surveillance system that extends out into the client's hometown (see National Network reference above)

The intense phase of individual treatment is given at the Institute. Therapy is generally done in group format and is completed in four to six weeks of six days per week treatment. Long-term follow-up and relapse prevention are conducted by a National Network therapist near the client's hometown.

For more problematic behaviors in the sexual area, the psychiatrist on staff treats the client with appropriate antidepressants for the reduction of compulsive sexual

behaviors,... For drug and alcohol issues prominent in the client's case, treatment is conducted along the 12-step model... and the Options 12-Step treatment program in the adjoining facility.

1.2c Long-term care is conducted predominantly for individuals from the neighboring states.

1.3 Style of contact with referring bishop

The Institute prefers to have written information regarding the client prior to arrival. Generally, the director speaks by phone with the bishop (or his designee) to delineate exactly what the issues are that are problematic for the bishop. On completion of the assessment it is the practice of the Institute to contact the bishop that day and explain the findings and recommendations.

1.4 Type of client information shared with the bishop

Interaction with the referring bishop regarding treatment is generally not implemented until the last third of treatment. The Institute, in general, has a better understanding of local facilities and the treatment needs of the patient. Unless provided by the bishop, the client's aftercare is coordinated with the client's previous therapist and a cognitive behavioral therapist in the client's local community. A report is always advanced to the bishop regarding the treatment plan and who would be carrying it out locally.

Regarding long-term care, the Institute generally provides four to six weeks of treatment in a concentrated form for individuals referred from out of state. This is done so that the client's time in Atlanta is minimized, while the amount of treatment received is maximized. Treatment is conducted on an outpatient basis and clients live in hotels, seminaries, and church facilities while in Atlanta. It is exceedingly rare that a member of the clergy would need hospitalization during treatment (this last occurred approximately four years ago) and the Institute does not provide residential treatment because it is generally not needed. In the cases where halfway houses are needed for drug using-abusing clients, housing is handled through the Options 12-Step program referred to above.

ISAAC RAY CENTER

1720 West Polk Street
Room 107
Chicago, IL 60612
Phone: 312-942-4462
Contact Person: Jonathan Kelly, M.D.

1. DESCRIPTION

1.1 In general

Outpatient evaluation and treatment center, affiliated with academic university/medical center with educational and research components, dealing with civil and criminal issues in psychiatry and the law. Sexual behaviors section (SBC) specialties in comprehensive evaluation, brief consultations, and treatment of sexual disorders (esp. pedophilia and other deviant sexual behaviors).

1.2 Specialities

Psychiatric interviews (with emphasis on sexual history)

Psychological testing

Sexual questionnaires

Penile plethysmography

Medical tests, if indicated (e.g., CT scan/MRI brain scan, blood/urine drug or alcohol screens, etc.)

Treatment includes group therapy, individual therapy, behavioral therapy, medications.

Short-term inpatient hospitalization is available, if needed for crisis intervention.

TREATMENT CENTERS (11/95)

1.3 Style of contact with referring bishop

Referring bishop (or designee chancellor/vicar/ provincial) contacts evaluation center by phone (312-942-4462) and/or mail or fax (312-942-2224), and physician case manager discusses clinical needs, concerns and costs with referring person on phone. Issues to be addressed by evaluation and/or treatment are clarified.

1.4 Type of client information shared with bishop

With consent of person being evaluated, issues to be shared with bishop could include diagnosis, prognosis, recurrent potential, risk management, limits/boundaries of contacts with faithful in ministry activities, treatment needs, parameters of treatment, specific/unique concerns raised by bishop.

OUR LADY OF GUADALUPE RETREAT CENTER

39100 Orchard Street
Cherry Valley, CA 92223-3797
Phone 909 845 7777

Contact Person: Salvatore L. Busca, s.P., Director

General Description:

Our Lady of Guadalupe Retreat Center is located in the Diocese of San Bernadino, CA. It is situated in a small town that is about midway between the cities of San Bernadino and Palm Springs.

The actual property consists of six houses for staff and residents plus a larger house where we have our chapel, dining area, large living room and kitchen. One of the houses is used for the Servants of the Paraclete (three members); the other five are for residents. Each house has three bedrooms, two bathrooms, living room, and three have kitchenettes. The grounds are well maintained and filled with flowers. The area off the large house has a walled-in swimming pool area.

TREATMENT CENTERS (11/95)

Guadalupe Center is different from many other long term centers in that there is no on-going therapy. It is actually, if you will, a "retirement center". Priests and brothers living here normally remain for the rest of their lives. They are people who will no longer benefit from therapy. In fact, many are "therapied out". There is a psychiatrist who visits some residents once a month; and a religious (degreed) who visits some for counseling sessions weekly. A staff priest is a registered nurse in the State of California.

The purpose of Guadalupe Center is to provide a place where these priests and brothers can live out their priestly and religious lives in a religious atmosphere. The daily schedule consists of a holy hour each morning at 7:30, with Morning Office included at 8:15. This is followed by a concelebrated eucharist (each priest resident wishing to do so takes his turn as principal celebrant and delivers the homily). Evening Office is held in common at 5:00 p.m.

The main meal is at noon each day - the residents make their own breakfasts and have a pick-up supper each evening.

There is not much for the residents to do. Some of them volunteer with the outside work - tending flowers, lawns, etc. Depending on their reason for being here, certain residents are now allowed to have cars or to leave the property unaccompanied. In fact, some bishops/superiors demand that their men do not leave the property unless they are accompanied by a Servant of the Paraclete. The Center does its best to accommodate the men in this area. One of the Paracletes is almost available to take the men shopping, to the movies, to dinners, to ball games, concerts, etc.

Guadalupe Center does not do evaluations or assessments. The Center's contacts with bishops/superiors are minimal. They want to know that their men are here and are appropriately following the established routine.

When a bishop/superior calls with a potential referral, the Center wants a general idea of the problem area in the life of the client. The Center asks the bishop/superior what their wishes are in regard to leaving the property, etc. They are informed that there is no therapy at the Center, and they are asked whether they wish the services of the psychiatrist or the counselor.

If bishops/superiors are looking for a long term center that provides therapy, job training, etc. there are other places available, some operated by the Servants of the Paraclete.

PROGRESSIVE CLINICAL SERVICES
(also known as: PSYCH SYSTEMS of Greater Cincinnati)

4243 Hunt Road
Cincinnati, Ohio 45242
Phone: 513-891-9114
Contact Person: Al Ebert, MA, EdS

1. **DESCRIPTION**

1.1 In general

The **Bridge Program** is an intensive individual therapy program aimed at breaking through the denial of clinical issues that frequently accompany addictive and emotional problems. Most graduates of the **Bridge Program** will go on further treatment once they are clinically appropriate, although this by no means is a requirement.

The **Bridge Program** consists of between 1-10 hours of structured individual therapy which may include:

- psychotherapy with psychiatrist, psychologist or addictions counselor
- education on addictive disorders
- sexual abuse and what constitutes abuse
- preliminary treatment of an addictive disorder
- life-style evaluation counseling
- crisis counseling
- spiritual counseling
- expressive therapy
- psychodrama
- any other clinically indicated therapies

This program is tailored to the individual clinical needs of each client. There is no minimum or maximum length of stay, and the level of intensity is solely dependent on the needs of the client at that time.

The Bridge Program is particularly effective with clients preparing for treatment or clients unsure as to whether they are in need of treatment. Some typical diagnoses for the **Bridge Program** are as follows:

- any sort of addictive disorder, particularly sexual abuse and sexual addiction
- uncontrollable anger
- pedophilia
- acute or chronic depression

This is by no means a comprehensive list, but is meant to serve merely as an outline for some of the clinical benefits and treatment goals of the **Bridge Program**.

1.2 Specialities

A full multi-disciplinary assessment always includes:

- a. a psychiatric evaluation by a Board-Certified Psychiatrist;
- b. comprehensive psychological evaluation which includes MMPI, Weschler, Rorschach, Thematic Apperception Test and extensive clinical interviews;
- c. medical assessment
- d. psychosocial interview and history;
- e. comprehensive addictions assessment;
- f. sexual abuse assessment

When clinically indicated, the assessment process may also include neuropsychological testing; laboratory screening, including blood work and urinalysis; emotional and physical stress test; depression screenings and other services. Through treatment team meetings, the assessment data is compiled into a user-friendly report complete with all recommendations for treatment or follow up.

Progressive Clinical Services is committed to absolute confidentiality in the handling of these sensitive assessments.

1.3 Style of contact with referring bishop

Normally, referrals to our facility come from the bishop through the Priest Personnel Director, both in writing and by telephone call.

1.4. Type of client information shared with bishop

We strongly suggest the bishop require each priest to release all information from our facility to the bishop and Priest Personnel Director. Information that should be shared with the bishop would include: psychiatric evaluation, psychological assessment, medical issues, substance abuse issues and other specialized tests.

SHALOM CENTER, INC.

13516 Morgan Drive
Splendora, Texas 77372-3121
Phone: 713-399-0520

Contact Person: Sr. Gina Marie Iadanza, M.S.C.

1. **DESCRIPTION**

1.1. In general

Shalom Center, Inc. is a treatment and renewal Center founded in 1980 for clergy and men and women religious, who are in need of a holistic program integrating the emotional, psychosexual, physical and spiritual dimensions of a person's life.

Shalom Center consists of a residential program which is facilitated by an interdisciplinary team of licensed professionals. This includes clinical psychologists, forensic psychologist, chemical dependency specialists, spiritual directors, registered nurses eating disorder specialists and various speciality therapists.

TREATMENT CENTERS (11/95)

The center is a 16-bed, non-hospital, facility. Typically, clergy and religious who come are experiencing a variety of issues.

- Sexual Addictions (Behaviors related to pornography, sexual exploitation, exhibitionism, voyeurism, prostitution)
- Psychosexual Development (Inappropriate relationships, heterosexual, homosexual affairs, intimacy issues)
- Accusations of present or past alleged inappropriate sexual behaviors
- Sexual Abuse/Assault
- Alcoholics in Recovery
- Depression
- Anxiety and Phobias
- Stress and Burnout in Ministry
- Difficult transitions due to changes in assignments, Life Stages, or Vocational Discernment
- Authority Problems (Conflict with hierarchy/leadership, persons in ministry)
- Codependency
- Grief and Loss
- Vocational Crisis (Discerning to leave or remain in ministry)
- Reentry for Returned Overseas Missioners
- Renewal and Sabbatical

** In the area of pedophilia and ephebophilia, the center is prepared to do initial assessments and make appropriate referrals, if necessary.

1.2. Specialities

The center offers a two-week evaluation program that consists of the following:

1. Complete psychological assessment (MMPI, MCMI 16 PF, Multiphase Sex Inventory, Rorschach, Mooney Problem Checklist, FIRO-B, and various psychological tests specific to presenting issue.)
2. Clinical interviews by psychologist, psychiatrist (as needed), chemical dependency specialists and various clinicians.
3. Comprehensive physical examination including cardiovascular and neurological.
4. Spirituality Assessment/Spiritual Direction

5. Individual/Group Psychotherapy

6. Self Reports:

Personal Autobiography
Sexual Autobiography
Personal History Survey
Spirituality Journey

7. Education Groups: Includes areas of sexuality, celibacy, human relationships, sexual ethics, boundaries, family of origin issues, addictions.

8. A communal living situation that accentuates wellness, healing and the opportunity for sharing and debriefing.

Many dioceses and religious communities participate in this evaluative process especially when assessments are needed for their clergy and religious who are confronted with sexual allegations.

The center assesses and treats persons with compulsive sexual behavior and various sexual addictions and also utilizes 12-step groups (SA, SAA, SLAS) for residents.

In cases of pedophilia, generally clients are referred to other institutions.

1.3 Style of contact with referring bishop

The center requests all information regarding the evaluatee to be accessible. This includes past episodes or accusations of sexual abuse as well as current documentation of the presenting issue.

The center encourages participation of the bishop (with the consent of the resident) in the evaluation as well as treatment.

A complete report of the assessment and progress reports are sent to the Local Ordinary with the consent of the resident.

1.4 Type of client information shared with bishop

The center shares the information gathered with the bishop as fully as possible. This depends strictly on the written consent of the resident.

Note: All services are available in English and in Spanish.

SAINT LOUIS CONSULTATION CENTER

1100 Bellevue Avenue

St. Louis, MO 63117

Phone 314 647 0070

Contact Person: Paul M. Midden, Ph.D.

1. DESCRIPTION

1.1 In General

The Intensive Outpatient Program of the St. Louis Consultation Center was established to provide a cost-effective outpatient alternative to residential care for clergy and religious experiencing emotional, psychological, and/or behavior difficulties. Our goal is to provide intensive, professional, and wholistic care for clearly defined problems while respecting the personal integrity of clients. It is also our goal to maximize the responsibility of individual clients for their own well-being and to assist them in acquiring skills necessary to engage in productive and personally satisfying ministry. We accomplish this by providing a personal and challenging clinical environment on an outpatient basis within which clients can face the exact nature of their distress and explore alternative ways of dealing with the sources of their difficulties.

The population consists of clergy and male and female vowed religious.

As an outpatient program, the center's practice is subsumed under the appropriate licenses to practice psychology and other healthcare disciplines in the State of Missouri. It is also affiliated with the Program for Psychology and Religion of the Division of Behavioral Medicine of St. Louis University Health Sciences Center.

1.2 Specialities

The intensive Outpatient Program is a four to six month holistic treatment program. It consists of a core program which includes intensive group work, individual psychotherapy, individual spiritual direction, and the participation in a series of intensive psychoeducational workshops. Specific programming is available as needed for particular concerns, including twelve step involvement for addictive behavior, behavioral programs for specific anxiety conditions; and medical referral for various needs, including psychotropic medication.

- Specialization: in affective disturbances, anxiety disorders, behavioral problems, personality conflicts, and interpersonal problems.
- Ancillary Services: available, particularly through the Division of Behavioral Medicine of St. Louis University Health Sciences Center.
- Success Rates: Since admission criteria are selective, success rates in all areas are high. Since the program has a strong interpersonal focus, the most dramatic progress is seen with those individuals who are isolative and socially deficient.
- Clients Returning to Active Ministry: Over ninety-five percent of clients return to active ministry.
- Length of Stay: Since the program is holistic in approach, the average length of stay is five to six months.
- Use of Residential Care: Since the goal of the program is outpatient care, residential treatment is used sparingly. When needed, this includes a one to four week primary care program either at a local hospital or at a facility specializing in primary care for a specific disorder.
- Non-Program Time: Since it is policy to provide an outpatient treatment experience, clients have considerable free time during the week. They are encouraged to take responsibility for structuring this time.

1.3 Style of contact with referring bishop

Collaborative Mechanisms: Feedback mechanisms consist of an initial contact with the referring superior, an interim report describing the client's progress in the program, a discharge conference at the end of treatment, and a final report, which includes a discussion of the client's progress and a list of recommendations for ongoing care.

1.4 Type of client information shared with bishop

Collaboration: Each client in the program has a designated contact person from his/her community. Generally this is the referring superior. Any major or unusual decision about a client is made with the client, the treatment team, and the contact person. These people are also in attendance at the discharge conference. High value is placed on collaboration among the client, the treatment team, and the superior. All are involved in decisions regarding disposition.

Prognosis: A detailed prognosis is provided upon completion of the program and specific recommendations are made if necessary.

THE MENNINGER CLINIC

P.O. Box 829
Topeka, Kansas 66601-8000
Phone: 800-351-9058
Contact Person: Richard Porter, MSW

1. **DESCRIPTION**

1.1 In general

The Menninger Clinic is a private, not-for-profit psychiatric hospital located in Topeka, Kansas, approximately one hour west of Kansas City. The Menninger Clinic has been providing clinical services for over 70 years and has treated over 170,000 patients. The clinic offers comprehensive inpatient, day hospital, partial hospitalization, outpatient and consultation services for individuals, communities, dioceses and organizations.

The Menninger Clinic has several especially strong features. These include a comprehensive diagnostic approach; the development of individualized treatment plans based on this comprehensive diagnostic assessment; the utilization of a multi-disciplinary team of highly skilled professionals; a high ratio of treaters to patients; concern and help for family members, community members, and significant others who need to be involved in the treatment process; consultation services provided by Menninger's multi-disciplinary staff; a strong atmosphere of competent, caring treatment and hope.

Although not affiliated with any particular religious denomination, since its inception the Menninger Clinic has had a strong interest in and respect for the spiritual dimension of the lives of those who come here for treatment. Since its beginning, the Clinic has been involved in the diagnostic assessment and treatment of clergy, religious professionals and ministers. Menninger remains committed to providing the highest in diagnostic and treatment services for this particular group and in providing consultation to Bishops and religious superiors. Our 70 years of experience is brought to bear on the special needs of this unique population.

The Menninger Clinic has for many years been concerned both educationally and clinically with the area of Religion and Psychiatry. The Division of Religion and Psychiatry at Menninger, an active part of both the clinical and educational services, provides consultation, clinical intervention and educational programs for religious communities, dioceses, individuals and those in treatment at the Clinic. The Director of the Division is a non-ordained Benedictine Monk who is a licensed Clinical Psychologist.

1.2 Specialities

Two areas of Menninger's comprehensive diagnostic and treatment programs are of special note for clergy and religious. These are the Outpatient Evaluation Program (OPE) and the Professionals in Crisis Program (PIC). This evaluation service has been in place at the Menninger Clinic for over 40 years. The evaluation program typically lasts for five days, Monday through Friday. Prior to the individual's coming for the evaluation process, information is gathered through questionnaires, letters and telephone contact from the patient, the patient's superior and all significant others who might have information related to the evaluation process. This material is then reviewed by a multi-disciplinary diagnostic team which will be responsible for the evaluation. This includes an interviewing clinician, a psychologist for psychological assessment, a social worker to provide an understanding of family and group

TREATMENT CENTERS (11/95)

dynamics, as well as other additional consultants, including those from Menninger's Division of Religion and Psychiatry. Comprehensive physical examinations, if indicated, are also a part of the evaluation process. The diagnostic process yields a comprehensive understanding of the patient's situation and the dynamics that led him or her to the problem they face. From this evaluation comes suggested outlines for intervention and treatment. In probably over 90% of our clergy cases the treatment recommendation is for some combination of outpatient treatments. Every effort is made to provide this in a geographic area convenient for the patient.

The Menninger Clinic works to have clear understandings regarding confidentiality of the results of these evaluations. We believe that these issues are best addressed prior to the beginning of the evaluation process so that all parties concerned have a clear understanding of what information will be shared. We recognize the need to provide detailed clinical information to mental health professionals and more focused information regarding diagnosis, prognosis and limitations regarding work to religious superiors.

Professionals in Crisis Program:

For those patients requiring either inpatient evaluation or inpatient treatment the Menninger Clinic offers the Professionals in Crisis Program, geared specifically for those professionals including business executives, physicians, clergy, attorneys, religious professionals and other high functioning individuals. It is an intensive and comprehensive program that focuses on the strengths of the individual while simultaneously working on problem areas needing treatment. Comprehensive inpatient treatment includes frequent individual therapy sessions, frequent group psychotherapy sessions, psycho educational discussions, psychodrama, activity and leisure skills development. Availability of consultation with clinicians from the Division of Religion and Psychiatry and with the hospital based chaplain are always available.

1.3 Style of contact with referring bishop

The bishop would initially be in contact with the Director of Clinical Resources who would facilitate the choice of evaluation or treatment, whether that be inpatient or outpatient. Following the evaluation or treatment arrangements, a member of the multi-disciplinary clinical team would have primary responsibility for maintaining frequent and direct contact with the bishop regarding the patient's overall progress and treatment. Conference calls are frequently part of the treatment as are visits by the bishop or other religious superior. Every effort is made to include the superior in the overall treatment program in order to provide the best possible continuity of care and to communicate as necessary the appropriate treatment needs of the patient to the bishop.

1.4 Type of client information shared with bishop

We realize that the bishop has very specific information needs regarding those priests that he sends for evaluation. Typically, this is not detailed clinical information about the day-to-day treatment process but rather information regarding larger issues.

The following information would be typically shared with the patient's bishop:

1. Diagnosis
2. General Treatment Plan
3. Prognosis
4. Specific recommendations for follow-up treatment upon discharge from Menninger or upon completion of the evaluation.
5. Recommendations regarding possible work limitations.
6. Other information as agreed upon at the initiation of the evaluation or treatment process.

**WOUNDED BROTHERS PROJECT
(Recon, Inc.)**

P.O. Box 220
Dittmer, Missouri 63023
Phone: 314-274-1736
Contact Person: Bertin Miller, OFM

1. DESCRIPTION

1.1 In General

The Wounded Brothers Project provides long-term residential opportunity for clergy and religious in recovery from ministry limiting circumstances.

1.2 Specialties

The project has contracted the professional services of St. Louis University Health Sciences Center to deliver the therapeutic dimension of our program. Each client accepted into the Project is required to undergo a brief evaluation at Wohl Institute to determine the stage of problem identification and protocols consistent with the recovery expectations of the client, the diocese and the therapy providers. Such an evaluation assists us in determining the type and frequency of ongoing therapies to assure all that the client is working his recovery program. The therapies have included individual and group work with the professional staff at Wohl.

In addition to the therapeutic dimension of the Project, the client is expected to submit to vocational evaluation and skills training where appropriate so as to become employable. He is then expected to get a job and begin to contribute some portion to his room and board if the salary will permit. The employment must be consistent with the recovery protocols and caveats so that no one is at risk.

1.3 Style of contact with referring bishop

The client comes to the Project with a recommendation from his Ordinary and a recommendation from the primary treatment provider. In addition, the client comes to the project willing to work the **Project Expectations** outlined in the client packet.

The Project staff makes a monthly report to the Ordinary describing the client's progress in the Project. The Professional Staff at Wohl also make reports on the therapeutic progress of the client.

A scheduled progress meeting with the Ordinary, the therapists, and the residential staff is required every six months to assess the client's current situation and to help him plan for his future.

1.4 Type of client information shared with bishop

The client is required to sign appropriate "release of information" forms before he enters the Project allowing reports to be made to all parties involved in his placement in the Project. Thus, information on his progress in the residential, therapeutic and occupational components of his placement can be candidly shared with the Ordinary or his alternate. This information is vital in determining whether he remains in the active priesthood or whether he is offered a separation package.

SECTION TWO: KEY QUESTIONS

2.1 Questions That May Be Asked of the Facility by Bishops.

The following is a synthesis of the sort of questions institutions/ centers would expect to be asked when a bishop contacts them regarding a possible referral.

- What is our experience in working with Catholic clergy?
in working with clergy who have sexual boundary violations? in providing diagnostic appraisal? in providing treatment?
- What sorts of consultation services might we have available to parishes and congregations?
- What are the reasonable treatment costs?
- To what degree are religious and spiritual issues addressed during the treatment process?
- To what degree can and should the priest continue to function as a priest during the evaluation and treatment process?
- What is the extent of evaluation process?
- Extent of clinical experience in evaluation and treatment of ministers/clergy?
- Record of recidivism for clergy in treatment at your center?
- Response time after evaluation process
- Institutions to which you have referred clergy at your center?
- Type of assessment and whether the information will be accessible to the bishop?
- Length of time out of ministry and recommendations for placement in ministry?
- Is a forensic psychologist available?
- Will the assessment be valid if litigation ensues?

- What is our policy on confidentiality?
- Have our files ever been subpoenaed?
- How long can the client remain in the center?
- What resources are in place to protect the client and his recovery?
- Examine if the facility has professional, licensed staff, who are experienced in working with clergy and religious as well as trained in dealing with sexual abuse.
- Assess if program is integrated in its treatment modalities addressing psycho-sexual, emotional and relational as well as spiritual dimensions of the person.
- Consider if the facility is inclusive in sharing pertinent information with bishop, respecting federal/state laws regarding confidentiality.
- One center suggested: Network with the local bishop in the area of the facility and inquire whether the bishop supports the facility and endorses its credibility and performance.

2.2 Questions That May Be Asked of the Bishop by the Facility

The institutions/centers consulted had suggestions on certain points bishops might be asked on the occasion of exploring a referral to a facility.

- Are there legal issues pending?
- What history does the Bishop have on this patient?
- Is there significant information that the bishop is aware of regarding the case that the priest is not aware of?
- To what degree does the bishop wish to be involved?
- Has the bishop already decided on administrative action prior to the evaluation process?
- To what degree will the results of the evaluation or treatment process influence the administrative actions?

- History of sexual misconduct, allegations?
- Other past allegations, lawsuits, questionable behavior?
- Treatment history, prior evaluations?
- Significant contacts of persons who can provide history
- Medical, psychiatric records available?
- Admission of or denial of allegations?
- Risk factors identified for this person
- Legal complications (criminal or civil)?
- What can the client expect after participating in the center?
- It is crucial that a facility receive in writing all documentation regarding the reason for a priest being referred so that all assessments can be absolutely accurate.

SECTION THREE: CRITERIA FOR BISHOPS LOOKING FOR A FACILITY

The institutions/centers described above were invited to suggest criteria bishops should look for when seeking a facility for personnel of their dioceses. What follows is a summary - for the most part in their own words - of what they would suggest to the bishops. There is much complementarity in these replies, along with nuanced differences on certain points.

- The length of time the facility has been in existence.
- The length of time the facility has treated clergy and religious professionals.
- The commitment the facility has to ongoing education of staff members and clergy and religious regarding issues around clergy mental health.
- The facility's experience in providing consultation and liaison services in addition to providing direct clinical services.
- The ability to provide comprehensive, sound psychiatric assessment and treatment that also includes a respect for and understanding of the important religious and spiritual issues in the patient's life.
- Affiliation with credible institutions of learning; other bishops' experiences with facility; reputation in community and among peer professionals (e.g. other reputable treatment centers); compare costs/quality of assessments elsewhere and what issues are addressed in evaluation and in treatment.
- We feel the most important criteria to look for is past success in treating priests with the problems necessitating the referral. The population of the clergy we serve does not naturally lend itself to effective outcome studies. Instead, we would suggest consultation among bishops as to which facility they have found to be most effective for their needs.
- In the way of minimum criteria for any healthcare facility, we recommend Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and State licensing.
- The major problem in the evaluation in cases of accusations of sexual abuse is the potential denial on the part of clients. In the experience of the center the pivotal issue in determining the likely success of an evaluation/treatment facility should be the facility's ability promptly and cost-effectively to break through the potential denial regarding the allegations. Cases where clients are forthcoming are not an issue.

TREATMENT CENTERS (11/95)

- This center recommends that referrals only be made to programs that deal with a large number of individuals accused of the variants of sexual abuse. The reason is that the evaluation of such individuals is somewhat of a sub-speciality that requires a more confrontive approach than the usual evaluation center is accustomed to. (Check listing of programs by the Association for the Treatment of Sexual Abusers (503 643 1023) in Beaverton, Oregon, or the Safer Society Program and Press Listings (802 247 3142) in Brandon, Vermont.)
- Regarding treatment, this center strongly endorses programs whose primary focus is cognitive-behavioral treatment with a strong relapse prevention arm. This form of treatment is considered the "industry standard" for treating the various categories of sexual abuse. This approach is outlined in the excellent book entitled Sexual Assault edited by W. L. Marshall et al (1990).
- Regarding long-term care, this can best be done close to the client's residence. Long-term residential treatment in a facility is rarely necessary. The important therapeutic ingredient for long-term care is the surveillance system ..., the presence of a local therapist familiar with the treatment, and the religious support for the client.

SECTION FOUR: OTHER COMMENTS

The institutions/centers contacted were invited to offer other comments they might want to share with the bishops. Here is a sample of what was received:

- It is extremely important that the primary treatment evaluation address the possibility of multiple addictions or personality disorder issues contributing to the behaviors. Too often the client is evaluated only on the issue of sexual transgressions and boundary violations. Many times chemical addictions are associated with the behaviors and must also be treated.
- A factor that is becoming increasingly more obvious in boundary transgressions is the issue of POWER and ROLE. We find that these factors if not appropriately addressed become a very strong conflictive problem in the recovery process.
- Many programs provide treatment for sexual disorders and boundary violations. Often we find that the providers are strongly aligned with a specific school of psychology such as the Behaviorists, the Developmentalists or the Addictionologists. Many are not including the **spiritual** aspects of treatment and recovery. The program's approach to treatment has a significant impact on the success of the client's identification of the problem, the internalization of his responsibilities, and the acceptance of support resources needed to maintain his recovery process. Whatever the treatment provider's approach, it is our experience that a **successful treatment** must help the client identify the problem or problems, internalize responsibilities and accept the support resources needed to maintain the recovery process.
- As we face the uncertainty about future disclosures and the cautions that inevitably will accompany these events, we must consider that there is a diminishing possibility of perpetrators returning to active ministry in the traditional sense. Insurers and legal advisors have tightened the latitude within which Ordinaries can offer options to the recovering cleric. It is our position that we are thus urged to prepare these men for alternative occupations.

At the same time we are bound to assure all that we as a Church have made every effort to rehabilitate these men. We believe that the managed recovery program is a good approach to accomplishing what is humanly possible in preparing these men to assume personal responsibility for their recovery and independent survival. The rest is up to God and the good will of the man himself.

- It is our experience that long term care is essential in cases of true pedophilia, or where there are many victims and a long history of violations. This is in contradistinction to the single victim, or single offense perpetrator who may have fallen into the victimization inadvertently.

In view of the public attitude and the media focus on the perpetrator, it seems that post treatment managed care serves the perpetrator as well as the larger community and the Church. It takes more than a few months to substantiate the success of a treatment experience and the assurance that the perpetrator is truly in recovery. Our experience convinces us that the client needs to be placed in a managed program for a lengthened period of time so that spiritual renewal becomes an integral component of recovery, professional monitoring is reduced only gradually and the client is guided into healthy controls and resource reliance. Only then can all parties involved be confident that the perpetrator will not violate again.

- The Church has done an excellent job of beginning to remove itself from the evaluation and treatment process, so that the evaluation and treatment of the client is independent.
- The next problematic area is reentry or possible reentry of individuals who have been treated and rehabilitated. This is not simply a risk management issue, but includes issues regarding priest recruitment and the dwindling supply of priests and its impact on the Church providing guidance. In the past the Church may have approached denying priests as untrustworthy, and therefore untrustworthy forever. The use of psychophysiologic assessment in follow-up post-treatment, should the priest return to the religious life, is a valuable tool that in the estimation of the center can be most helpful to a bishop. At the same time, the combination of a tighter surveillance system that protects the parishioners, the community and the priest along with psychophysiologic assessment may provide the priest the opportunity to remain in the religious life. In other words, there is a possibility here for a win-win situation.

REPORT ON ASSESSMENT/TREATMENT/LONG TERM CARE CENTERS

PART TWO: RESULTS OF SURVEY ON USE OF CENTERS

INTRODUCTION

Early in 1995 the Ad Hoc Committee on Sexual Abuse completed a survey of 188 dioceses regarding their use of centers for assessment, treatment, and long term care of priests involved with sexual abuse of minors. A total of 145 dioceses replied to this survey. Of these, 127 dioceses indicated that they have used such centers, and 18 replied that they had no need of them.

In the survey questionnaire the bishops were asked 1) to give the names of institutions or centers being used, 2) to indicate their level of satisfaction with the services received - on a scale of 1 (low) to 5 (high) - and 3) to offer whatever comments seemed indicated.

The overall results indicate that the bishops have used 40 centers for assessment services, 27 for treatment, and 12 for long term care. There was considerable overlap within all three categories. In several instances the center consisted of a designated professional in a diocese, or a diocesan institution. For some respondents a six or seven month session for an offender in an institution was considered long term care.

Only centers used by at least **three** dioceses are covered in this report. For all centers listed, statistics are given on the number of dioceses using them specifically for assessment, for treatment, or for long term care.

The mean level of satisfaction (maximum is five) is also indicated for each center in each category. **One factor not controlled in this reading of the level of satisfaction with a facility is the time period (three, five, or ten years ago) when it was used by a reporting diocese.** New programs and approaches are evolving almost on a yearly basis. The experience of the past decade has influenced very much the style of caregiving for many centers.

Following this information there is a sampling of typical comments offered by the respondents regarding the service received from each center.

SECTION ONE - ASSESSMENT SERVICES

According to the survey 15 centers have been used by at least three dioceses for assessment services.

Note: These 15 institutions are presented in alphabetical order.

**1. Behavioral Medicine Institute of Atlanta
3280 Howell Road NW, Suite T30
Atlanta, GA 30327**

Used by 5 dioceses for assessment services. The mean level of satisfaction is 4.8 out of 5 as indicated by 5 respondents.

COMMENTS:

Comprehensive evaluation with well validated tests. Very good reports with recommendations, usually sent to us within 4-5 days.

There may be some controversy over the therapy(ies) employed, but this was the only center out of about 10 we contacted who would accept a priest before the court case was settled.

Have developed their own screen for testing. May be somewhat invasive physically in order to secure results.

**2. Isaac Ray Center
1720 West Polk Street
Room 107
Chicago, IL 60612**

Used by 5 dioceses for assessment services. The mean level of satisfaction is 4.3 out of 5 as indicated by 4 respondents.

COMMENTS:

Issac Ray is a very professional institution. It has a large staff of experts who do an extremely detailed assessment. It usually only takes two to three weeks to get a priest in for evaluation. There is no feedback session for diocesan officials. One problem has been the length of time it takes to get a written report. The fact that it is not a Catholic institution can add credibility

to the testing.

Very good assessments, no in-hospital or day care facilities. Good individual and group work. Good after care/monitoring program. No religious affiliation - but they understand the issues.

3. Johns Hopkins Medical Institutions
Department of Psychiatry and Behavioral Sciences
600 N. Wolfe Street/Meyer 4-113
Baltimore, MD 21287-3130

Used by 3 dioceses for assessment services. The mean level of satisfaction is 4 out of 5 as indicated by 3 respondents.

COMMENTS:

Used both for evaluation and treatment.

4. Progressive Clinical Services
4243 Hunt Road
Cincinnati, OH 45242

Used by 3 dioceses for assessment services. The mean level of satisfaction is 2.7 out of 5 as indicated by 3 respondents.

COMMENTS:

Limited use. A little slow in getting evaluation back.

5. Saint Luke Institute
2420 Brooks Drive
Suitland, MD 20746-5294

Used by 81 dioceses for assessment services. The mean level of satisfaction is 4.4 out of 5 as indicated by 75 respondents.

COMMENTS:

Assessments are extremely thorough, perceptive and conducted with dignity. The summary session with a diocesan representative is well conducted and provides good direction. Highly professional.

Environment very institutional, and the "downtown" environment less than happy, but the program is holistically sound.

The staff have shown great professional care and compassion and have been cooperative with the diocesan bishop and vicar for clergy.

The program at St. Luke's has been the most intense, satisfactory program we have experienced. The follow-up is exceptional as well.

Very intense; some question as to whether they work out of the addiction mode too much.

P.R. Problem: because of its association with sexual abuse issues, priests may refuse to go there.

Good but very expensive.

While we have had good experience with their assessments, we seldom use them for initial assessment any longer, preferring to hold them for treatment (we separate the two).

A comprehensive, careful, forthright effort that is confronting, when needed.

While the entire program is very professional and tough, the leaders seem to project a slightly unrealistic expectation of success for perpetrators.

It is comprehensive, decisive, and gives clear direction. St. Luke Institute makes a great effort to understand how important the role of the diocese is as both the final supervisor as well as a caregiver for the priest. Provides an extensive, comprehensive, and clinically sound aftercare.

The demands placed on patient are appropriate.

They have done thorough evaluations. The only difficulty has been the length of time it sometimes takes to schedule an evaluation.

6. Servants of the Paraclete

P. O. Box 10

Jemez Springs, NM

Used by 35 dioceses for assessment services. The mean level of satisfaction is 3.6 out of 5 as indicated by 31 respondents.

COMMENTS:

Compassionate. Forthright. Willingness to diversify according to particular case.

The staff is professionally very competent. The environment is comfortable and home-like, and the program holistically very good. The integration of spirituality seems to be particularly good.

While we have sent several priests there for treatment in the past, we have not found the facility that satisfactory in providing us with information which was adequate for follow-up, and little or no aftercare.

They have some personnel problems - seem to be getting squared away.

Not real happy with them. Reporting to me was deficient. Poorly prepared for reporting sessions. Their objectives were not in concert with this diocese. We have not used this facility for a number of years.

They have served our needs for 15 years, with NO recidivism.

The main purpose seems to be to get the priests back into active ministry, regardless of results. Tends to be an advocate for the patient.

Very good - thorough - adequate reporting. Tendency to put all through their extended program without offering other options.

Very cooperative with the diocese while assisting the priest client.

**7. Servants of the Paraclete
St. Michael's Community
13270 Maple Drive
St. Louis, MO 63127-1999**

Used by 23 dioceses for assessment services. The mean level of satisfaction is 3.7 out of 5 as indicated by 21 respondents.

COMMENTS:

Compassionate. Forthright. Willingness to diversify according to particular case.

The evaluation seemed to be thorough and insightful.

They did not seem to challenge the priest enough. They were not consistent in their contacts with the diocese. They are not too expensive.

We utilized this facility twice. The first assessment recommended in-patient treatment, which was done. The second assessment recommended follow-up psychiatric care, not in-patient treatment. Both assessments were clinically sound, perhaps less directive, particularly regarding communication to the priests. Relationship with the diocese, satisfactory; could be more comprehensive. Aftercare satisfactory.

The testing seems to correspond with that which is done by other facilities. The feedback and recommendations are helpful, but give the client more responsibility for choosing treatment rather than recommending a specific course of action.

We have utilized this facility for seven years. Contact persons have changed over that time frame. We have found also that the quality of the assessment has varied quite a bit.

**8. Servants of the Paraclete
The Albuquerque Villa
2348 Pajarito Road, S.W.
Albuquerque, NM 87105**

Used by 7 dioceses for assessment services. The mean level of satisfaction is 3.8 out of 5 as indicated by 5 respondents.

COMMENTS:

The Albuquerque Villa has been very accommodating getting our priest in right away. The evaluation is good but not as clinical and detailed as the other two we use. There is a very welcoming spirit and there is a strong emphasis on priestly spirituality.

I do not intend to use the Paracletes in future.

**9. Shalom Center, Inc.
Rt. 2, Box 2285
Splendora, TX 77372**

Used by 5 dioceses for assessment services. The mean level of satisfaction is 3.8 out of 5 as indicated by 4 respondents.

COMMENTS:

A small low key facility. Competent in its professional outreach. Good relation with local bishop. Good reporting back. Difficulty in continuity of administration. Recommend highly.

Pastoral setting, in suburbs of Houston. Two-week evaluation period. Spiritual dimension. Holistic approach. Undergoing change in administration. Perhaps not best for severe cases.

Sometimes too eager to "excuse" priest offender.

10. Southdown

**1335 St. John's Sideroad East
Aurora, ON L4G 3G8
Canada**

Used by 21 U.S. dioceses for assessment services. The mean level of satisfaction is 3.8 out of 5 as indicated by 17 respondents.

COMMENTS:

Staff is very hospitable and accommodating. Evaluations are comprehensive and directive.

I have been very pleased with their treatment, their accountability to the bishop, and especially now their newly developed after care program.

We found them too optimistic in their reports thereby instilling false hope in the client.

I find Southdown less thorough in their reporting to bishops, both in assessment and in treatment.

A comprehensive, clear and helpful effort for persons who are well-motivated.

We have used them three times recently. I have been pleased with their feedback and holistic approach.

First case at Southdown. Thus far we are very satisfied. Reports from others are very favorable.

11. St. Louis Consultation Service

**1100 Bellevue Avenue
St. Louis, MO 63117**

Used by 4 dioceses for assessment services. The mean level of satisfaction is 5 out of 5 as indicated by 3 respondents.

COMMENTS:

I am extremely satisfied with the work that they have accomplished.

They have dealt with many priests and have a good grasp of our particular vocation. Their assessments are realistic and recommendations have been helpful.

**12. The Institute of Living
400 Washington Street
Hartford, CT 06106**

Used by 23 dioceses for assessment services. The mean level of satisfaction is 3.4 out of 5 as indicated by 22 respondents.

COMMENTS:

Wonderful program, great reception and communication. Very thorough and good follow-up.

Experience has been extremely mixed.

Slow in forwarding results of evaluation. Lack of good progress reports. Did not foster sense of responsibility or realistic sense of need (for client) to contribute to cost of care or even work for continued salary upon return.

This facility is very accommodating in accepting priests on short-notice. The assessment is broad and employs many professionals. A major drawback is expense.

A comprehensive and supportive effort which oversteps boundaries in becoming an advocate for priests in terms of their future ministry.

Good and balanced evaluation.

13. The Menninger Clinic
Box 829
Topeka, KS 66601 0829

Used by 3 dioceses for assessment services. The mean level of satisfaction is 3.7 out of 5 as indicated by 3 respondents.

COMMENTS:

Have used for evaluation only.

14. The New Life Center
P.O. Box 1876
Middleburg, VA 22117

Used by 7 dioceses. For assessment services, the mean level of satisfaction is 4.4 out of 5 as indicated by 7 respondents.

COMMENTS:

Personalized treatment for client and relationships with bishop's office.

The evaluation is very insightful and most helpful. The limitation would be that it is done by only one psychologist and a religious sister who deals with the spiritual side of the person's life.

Some clergy have difficulty with not wearing clerical garb or functioning as clerics while there.

Evaluations were on target. However, we have a question about the facilities.

15. Villa St. John Vianney Hospital
Lincoln Highway at Woodbine Road
P. O. Box 219
Downingtown, PA 19335

Used by 20 dioceses for assessment services. The mean level of satisfaction is 4.5 out of 5 as indicated by 17 respondents.

COMMENTS:

Excellent out-patient evaluation and assessment; staff is able to get to the heart of the matter.

The experience was positive although the priests found it rather institution-like.

The process seems professional, thorough, and helpful. Some of those evaluated claim the outcome is always the same: inpatient treatment is necessary.

Very conscious of good communication with the diocese.

They are often booked up.

SECTION TWO - TREATMENT SERVICES

According to the responses received from the bishops, 10 centers have been used by three or more dioceses for treatment purposes, and all 10 are included in the assessment category described above. As will be apparent in Section Three, some of these 10 also give treatment in a long term care context.

Note: The institutions are presented in alphabetical order.

**1. Behavioral Medicine Institute of Atlanta
3280 Howell Road N.W., Suite T30
Atlanta, GA 30327**

Used by 4 dioceses for treatment services. The mean level of satisfaction is 4.5 out of 5 as indicated by 4 respondents.

COMMENTS:

At the time of our need for this treatment, this was the best (and only?) treatment available. It seemed to work well for our patient.

Excellent short term intensive therapy with good follow-up referral.

Director is involved with the treatment of a number of professionals involved in child abuse and uses intense cognitive and behavioral modification therapy -it is not residential care but out patient.

**2. Saint Luke Institute
2420 Brooks Drive
Suitland, MD 20746-5294**

Used by 61 dioceses for treatment services. The mean level of satisfaction is 4.2 out of 5 as indicated by 54 respondents.

COMMENTS:

St Luke's is a top-flight center, treating the whole person. Our priests have been treated with respect as they are challenged. The staff have been very helpful and supportive to us on the diocesan level and keep us informed periodically during the priest's treatment. The continuing care program is

An excellent follow-up to the intensive treatment and enables the priests to establish at home the necessary supports and groups that will challenge him and call him to accountability. The staff is very personable and returns phone calls promptly. They are most cooperative with us on the diocesan level.

Therapy generally lasts 6 to 9 months. All candidates have benefited significantly. They also provide an after care plan and periodic renewals at the Institute.

We have been very pleased with St. Luke's especially the regular contact and progress reports and the follow up program which is excellent. One priest complained that the spirituality is weak.

Direct Feedback: Less than desired. Progress reports tend to be vague and imprecise.

The morality of one of the therapies used is questionable; some of the staff do not seem to understand the nature and theology of priesthood; professionalism of some of the staff is questionable. This is recent experience.

Good communication with the diocese; helpful aftercare program; we especially like SLI because its treatment is eclectic and multidimensional.

Success was achieved in addressing the alcoholic addiction but other problems were not addressed very effectively.

Most often successful in breaking through denial and helping a man understand the progress he has made in addressing the allegations. Fair living environment.

Also used for other than clients involved in sexual abuse of minors.

3. Servants of the Paraclete
P.O. Box 10
Jemez Springs, NM

Used by 36 dioceses for treatment services. The mean level of satisfaction is 3.0 out of 5 as indicated by 28 respondents.

COMMENTS:

Most of the men we have sent for treatment have returned with the ability to function in restricted ministries.

The staff is very accommodating and most communicative in sharing information. Recently there has been some major staff turnover.

Their spiritual dimension is very important.

We sent them two priests, who had been arrested, for treatment until they were remanded to jail.

Feedback sporadic. Ability to process/integrate diocesan concerns is lacking. After care sporadic.

Good availability, wide range of programs and placement. Good reporting and involvement with sponsoring bishop. Low rate of rehabilitation success.

I would rate the treatment process as average. We were involved with the Servants at a time their administration was in a state of disarray, and I believe their internal problems had an effect on the quality of care they were offering.

Too much unsupervised leave in first six months. Better for treating clients with sexual problems with adults than pedophiles.

They have served our needs for 15 years, with NO recidivism. Good after care program.

**4. Servants of the Paraclete
St. Michael's Community
13270 Maple Drive
St. Louis, MO 63127-1999**

Used by 21 dioceses for treatment services. The mean level of satisfaction is 3.6 out of 5 as indicated by 17 respondents.

COMMENTS:

Well rounded approach to therapy to blend science and spirituality. Willingness to work with, not for diocese.

These people have done some very good work with us.

The treatment seemed to be effective, but one case relapsed.

We have utilized this facility for seven years. Contact persons have changed over that time frame. We have found also that the quality of the assessment has varied quite a bit.

They have been consistently very good.

This program perhaps could be more aggressive. There are also some concerns about the advice which is given to the client regarding the sharing of information with superiors.

While priests who have been for treatment at St. Michael's are satisfied, we have a concern over the thoroughness of the periodic reports we received from St. Michael's.

Overall good program.

**5. Servants of the Paraclete
The Albuquerque Villa
2348 Pajarito Road, S.W.
Albuquerque, NM 87105**

Used by 7 dioceses for treatment services. The mean level of satisfaction is 4.3 out of 5 as indicated by 6 respondents.

COMMENTS:

We like the focus on priestly spirituality that is offered. The environment appeals to the priests and they find the atmosphere less threatening than other places. We would use the Villa for less serious cases and for vocation discernment. They have a very good follow up program and involve the diocese throughout the process of treatment and follow up.

**6. Southdown
1335 St. John's Sideroad East
Aurora, ON L4G 3G8**

Used by 15 dioceses for treatment services. The mean level of satisfaction is 3.5 out of 5 as indicated by 11 respondents.

COMMENTS:

Effective with people who are motivated to address their problems. Their summaries are sometimes vague and can be evasive in defining the progress a person has made regarding the allegations. Good living environment. Unmotivated persons have returned with no greater insight into their difficulties.

Too early to measure new therapeutic plan for clients/patients.

I have had two priests there for treatment. I do not believe they confront the issues strongly. Reports to the bishop are not thorough or timely.

Holistic, great emphasis on physical well-being. Seems to be weak regarding more comprehensive psycho/social integration. More integration as regards both male and female religious clients.

7. St. Louis Consultation Service
1100 Bellevue Avenue
St. Louis, MO 63117

Used by 4 dioceses for treatment services. The mean level of satisfaction is 5 out of 5 as indicated by 3 respondents.

COMMENTS:

Six month program; out patient program available where appropriate. We have been pleased with the treatment received by priests for a number of issues, including sexual abuse issues.

Follow up to St. Louis Medical Center treatment, 4-6 months, wholistic, effective, sensitive, day hospital with residence at Wounded Brothers Project (see below) - Reasonable cost.

8. The Institute for Living
400 Washington Street
Hartford, CT 06106

Used by 15 dioceses for treatment services. The mean level of satisfaction is 3.9 out of 5 as indicated by 12 respondents.

COMMENTS:

Generally, we have been satisfied.

Long term, balanced program with more developed spiritual dimension.

Long term in-patient coupled with on-going out-patient therapy with a willing participant can produce results. Cost is exorbitant.

The treatment never seems to end, with little progress toward return to normal activity.

This institution deals with professionals in all walks of life (clergy, religious and lay) and yet shows a deep respect for those who have committed themselves to a religious vocation.

9. The New Life Center
P. O. Box 1876
Middleburg, VA 22117

Used by 3 dioceses for treatment services. The mean level of satisfaction is 4.7 out of 5 as indicated by 3 respondents.

COMMENTS:

Timely progress reports. Good communication of concerns. Good follow-up in after care.

10. Villa St. John Vianney
P. O. Box 219
Downingtown, PA 19335

Used by 17 dioceses for treatment services. The mean level of satisfaction is 4.2 out of 5 as indicated by 17 respondents.

COMMENTS:

This is a psychiatric hospital, more restrictive than (other) facilities. We have been very pleased with the quality of their care.

Staff and therapists have understanding of nature and theology of priesthood. Vocation of priest is respected; good communication with diocese; in some cases, I find final recommendations need to be more realistic, but staff is open to discussion on this point.

The staff is helpful and communicative. A concern about the average length of stay being overly lengthy has been addressed. Present average: six months.

They have a monthly conference call with staff and bishop and client. These discussions are very direct and positively aggressive. I find this program excellent.

Used also for other than clients involving sexual abuse of minors.

This facility is specifically directed to caring for men and women committed to religious vocations. The treatment is compassionate and yet methodical and focused on dealing with the person's issues. There is a good respect for the person as one who committed himself/herself to a religious vocation.

SECTION THREE - LONG TERM CARE

Of the 145 dioceses reporting in this survey 61 had a response in this category. Of this number, 28 indicated that they had no need for this type of care for priests involved in sexual abuse. Of the remaining 33 dioceses, 11 reported that the care is provided within their own institutions and resources.

As noted in the introduction to this report, some dioceses consider a six or seven month stay as long term care. Six institutions described in the first report on centers in Restoring Trust (November 1994) were mentioned in this survey as supplying some form of long term care:

- St. Luke Institute
- University of Minnesota Program
- Southdown
- The Albuquerque Villa
- St. Michael's Community
- Villa St. John Vianney

The results of the survey show that there are four other providers that have been used by at least three dioceses for long term care:

1. Different centers directed by the Servants of the Paraclete were mentioned by 19 of the 61 respondents in this long term care category. In addition to the Paraclete centers commented on in sections one and two of this report, another one was mentioned seven times in this section on long term care:

**Our Lady of Guadalupe Retreat Center
39100 Orchard Avenue
Cherry Valley, CA 92223-3750**

This institution is described in Part One of this report.

One survey respondent commented:

We have only one person in custodial care and that is of very recent origin. We have placed him with the Servants of the Paraclete at their facility in Cherry Valley, CA. To this point the placement seems to be working well.

2. Four dioceses made reference to the Wounded Brothers Project, Evergreen Hills Homes residential program at Cedar Hill, MO. It is now known as:

**RECON
P.O. Box 220
Dittmer, MO 63023**

This center is described in Part One of this report.

Comments:

At present we believe this to be both a spiritually and clinically sound environment for the priest who is no longer able to function publicly, but desires some continued fraternity in a setting that maintains one's priestly identity.

A new program. Too early to evaluate.

3. Another center for long term care identified in the survey and used by three dioceses is the

**Vianney Renewal Center
6476 Eime Road
P.O. Box 130
Dittmer, MO 63023**

One respondent commented:

Custodial care is good. However, therapeutic care is minimal. There is openness to addressing issues which may arise.

4. Shalom Center, described in Part One of this report, was also listed in the survey as being used for long term care.

CONCLUSION

In the survey on the use of centers the bishops were invited to offer "Other Comments for the Committee". Here are some typical samples of some of the comments offered by thirty-seven respondents:

Diocesan decisions regarding prognosis and future ministry are critical and difficult. This needs further discussion.

Big issue: no center is able to offer much help in determining the truth about allegations.

It is sad when someone is healed but cannot be returned to ministry because of scandal or risk.

Results vary by individuals and the level of integration or non-integration into the program.

I believe that it is important to match the individual to the facility because each has its own strengths and weaknesses.

Most vexing issues are around those who cannot be returned to ministry. Also, justice regarding how the diocese can be responsible but share responsibility with the priest, i.e. counseling costs for the victim, expenses for the priest's therapy, ...

It would be good if the bishops could work together in developing a strategy on a regional basis, regarding the care, development and future provision for priests who will no longer serve in pastoral ministry as a result of their misconduct.

It is often extremely difficult, if not impossible, to find a facility that will take a priest immediately for evaluation. Yet, in some cases this is essential.

It is our experience that not even the best treatment can reshape the personality and psychological make-up of an individual who is not personally motivated to change. In this instance, the best we can hope for is an arrest of the behavior in question.

I would judge it a true gift to the Church if a monastic community could be found that would have and care for alleged offenders needing extended therapy.

VICTIMS-SURVIVORS (11-95)

AD HOC COMMITTEE ON SEXUAL ABUSE

RESPONDING

TO

VICTIMS-SURVIVORS

NOVEMBER 1995

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INTRODUCTION

The Ad Hoc Committee on Sexual Abuse (AHCSA) is keenly aware that many aspects of its mandate either directly or indirectly pertain to appropriate concern and care for the victim-survivor of sexual abuse. Some of its work has consisted of meetings with individual victims-survivors and with organizations representing a number of them. In its report Restoring Trust (November 1994) the section on diocesan policies is replete with references to the primary importance to be given to care for direct and indirect victims-survivors of clergy sexual abuse. In that same report were two articles relating to the care of victims-survivors which were especially commissioned by the committee for sharing with the bishops.

To carry out its mandate more fully as regards victims-survivors' concerns, this year the ad hoc committee decided to have an objective specifically focussed on this topic. Accordingly, a sub-committee was formed to develop some reflections for consideration by AHCSA. The individuals who made up this sub-committee were very much on the front line dealing with victims-survivors, and all had diocesan responsibilities in this regard. They contributed to the writing of various sections of the reflections which follow and for which the ad hoc committee is most grateful.

It is important to note that these reflections are not only or simply the product of the work of the subcommittee or of discussions within the ad hoc committee. Three other wonderful and very important people made an essential contribution: three individual victims-survivors of clergy sexual abuse generously agreed to write their respective stories and to respond to five important questions. All of sections one and six are what these three persons want to share with the bishops of the country. They were the first three victims-survivors approached by the subcommittee, and very openly - in the hope it would do some good for others - they agreed to make this contribution. The bishops on AHCSA express appreciation and gratitude for their generosity in sharing their stories.

AHCSA is aware that some dioceses in the country have rather elaborate resources in place for responding to the needs of victims-survivors. These will not likely find anything radically new in this report. However, it is hoped that these reflections will be of some assistance to the majority of dioceses in this area of pastoral concern.

SECTION ONE: TWO STORIES

One Victim-Survivor Story

One Saturday morning in the summer of 1961, after I served as his altar boy at early morning mass, the priest invited me into the rectory kitchen for milk and cookies . When I finished my snack, he asked me to join him in his office. I was a quiet, pious boy from a strict Catholic home. Vatican II was not yet on the horizon, so I felt honored, nervous, almost awed. Then the man who had taught me my prayers in Latin and heard my confession pulled me toward him and pushed me down onto the oriental carpet. As my face pressed against the floor, I felt the full force and weight of a man twice my size straddling my 70 pound frame.

Nothing in my experience or training had prepared me for such a moment. I had neither the psychological equipment nor the emotional maturity. At the age of ten, all I had to help me cope with crisis was a finely honed spiritual orthodoxy which had taught me right from wrong, black from white. As he pressed against me, I was guided by those strictures onto a merry-go-round of whirling thoughts: Father is good, Father is good, but this is wrong. He must good. He's a priest. My parents kneel before him. My teachers, the nuns, revere him. The people who sit next to us in the pews love him. This is wrong, but he is good. This is wrong, but he is good, so I must be bad. I must be evil.

It was a cataclysmic moment. From the time that Father zipped up his pants and ushered me out of the rectory door into my dad's black Oldsmobile until I groped my way back to personal redemption twenty years later, I lived in a black pit convinced of my own innate evil.

I could tell no one about that moment for to confess what had occurred would have been to confess my own wickedness. All I could do was to seek redemption. I prayed, confessed imaginary sins, made sacrifices and finally joined the Carmelites at the age 13. It didn't work. No matter how often I prayed to the Virgin for redemption, I still felt dirty, shameful and worthless.

I finally left home, going to college across the country - hoping that I could escape my soiled past. For a time, the structure of college helped me hold my life together. But once I graduated, unmoored both from my spiritual roots and from an external structure, I sank into a pattern of behavior that would reinforce all my feelings of worthlessness. I was tortured by depressions of utter darkness. I fell into sexual debauchery in search of someone, anyone, who would love an evil human being. I turned to drugs, liquor - anything that would wipe out the demons in my mind. I only wanted to feel numb. And I was. For the next eight

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years. I went from job to job, city to city, relationship to relationship in search of escape. Nothing enabled me to be someone else. I was jailed in my own skin by my own sense of wickedness.

I wound up homeless, alone, estranged from everyone, my family included. I had no idea what I was fleeing, but I knew I had only two choices - to end it all and die or to face the unknown with what tiny sliver of hope, of inner goodness I could conjure up inside me. Life had become as brittle as a dry brown paper bag. A speck of light shone through. That was enough. I hung on for dear life.

Sobriety was the first step. In October 1982, I entered an inpatient drug rehabilitation program. When I left, I embraced AA as my lifeline. I moved into a one-room basement apartment. I was terrified. I still didn't know why. I draped what few windows I had with blankets. For the next four years I lived huddled in that second womb.

Gradually, as I remade my life on the outside - to stay sober, to find a job, to rebuild a relationship with my family I began the long process of remaking myself on the inside. I found a therapist and started my search for the key to all I had been through. Why did I make such destructive choices? I couldn't figure it out. My twin brother lived a normal existence. He was happily married, had a productive career and a house in the suburbs. What the hell had happened to me? I searched.

Early in AA I had begun going to church. Each time I left in ever greater discomfort, with an unbridled, unfocused anger. One day I vaguely remembered what had happened in the priest's office that Saturday morning but I rationalized that such an insignificant event could not possibly have anything to do with how my life had turned out. The connection was a long time in coming. Gradually, freed of alcohol and drugs and empowered by the wisdom of my therapist, I looked back at that moment of terror and began to understand the thread: that the rape itself was not my undoing but the conclusion I drew from the priest's act, the conclusion that I was evil.

What I had brought to that horrific moment was careful training - the type of training strict Catholic parents gave to their children - in harsh judgements. That training brought to bear on a moment of enormous moral turbulence for a child had forced me into harsh self-judgment. It was by refocusing myself away from that training - away from harsh self-judgement - that I began the first in a long series of steps back to health and happiness. The key was not to redirect my judgements away from myself and onto the priest or the Church. That would have been easy, but it would not have been very effective. The priest wasn't the problem, nor was the Church. The problem was falling into easy judgements, the type of judgements I had been taught to make as a child. By suspending that tendency, I could

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begin to think of myself as worthy - and if I was worthy, it didn't follow that I would want to do anything self-destructive.

I admit that I had to rage, to grieve for the child who was destroyed that summer Saturday, to feel all that I had numbed for those twenty years. For awhile I was not any fun to be around! But after four years of building a firm base and reconstructing a self-shattered life, I could begin to take risks. I have never been one to be happy with the status quo. I moved from that one room into a row house. I shifted from a safe and unchallenging job into a career.

By January, 1990 I had all the accouterments of a successful businessman - an office, a car, a house. But there was a bitterness that seeped into my days. I knew it was time to forgive the priest. I could no longer empower him with my bitterness. I went to a local Catholic Church and sat with a priest and forgave the one who assaulted me. I freed myself once again from yet another link in an old, old chain.

During this entire experience, I never focused on the Church as my problem because I had no reason to believe that the Church even knew about my problems. Thus when my sister called one evening the following May to tell me that eight other survivors of that same priest had gone public, the dimensions of my abuse shifted dramatically. I discovered that half the kids I knew in grade school had also been abused. More importantly, I discovered the Church had known all along. That horrendous realization impelled me in a quest for justice along with more than 130 other of his survivors and then into a national leadership role in prodding the Church to begin its long journey to healing.

Today, I find myself in the post-trauma phase. I am a fully, functioning, healthy, happy human being. The scars are healed. But one legacy lingers. The spiritual realm is a significant and important part of my life, but it has no relationship to the Catholic Church. The hierarchy, for the most part, is still taking its first tentative steps on a long road through self-honesty and the assumption of responsibility. Until the Church demonstrates that it can be as honest as I can, it can claim no moral authority. For me, then, the Catholic Church that was such a central part of my youth is no longer a spiritual entity. It is a simple organization that has a long road to travel.

Another Victim-Survivor Story

This is my story as told at a public meeting in my parish.

I have been an active person in this parish from its beginning. Some of you people here know me, and of course for others this is a first encounter. But tonight I am going to share a part of my life that few people know. This is a dark, dry side of my life experience.

A year ago, I could not have stood up here like the woman at the well who returned to her people and told her experience of faith. But because I am beginning to find people, places and things that quench my thirst as Jesus did for the Samaritan woman, I am able to relate my story to all of you.

When I was a sophomore in high school, I was sexually abused by a priest who was my Latin teacher, basketball and volleyball coach, and parish priest. I was told by my predator not to tell anyone -- or else. So I remained silent and felt guilty during those three years of abuse. I suppressed this for many years until one evening at my nephew's wedding I found out that my sister had been abused by the same person. She asked me why I did not tell her, and I looked at her and asked, "Why me? Why didn't you tell me?"

Later, a friend told me about Link-Up, which is a Chicago-based support group for people who were sexually abused by clergy. This support group was holding a conference in the Chicago area, and she thought this would be good for me.

I attended the conference, and met a woman whom I had not seen since I had graduated from high school. She was also abused by the same person. We talked for a long time. Breaking the silence was starting.

Another high school classmate who was also abused by this priest decided to go with me to meet with the bishop from our hometown. After all these years, we told our stories. We requested two things:

1. That this priest be laicized so that no other person could be harmed by him...
2. ...and that he get psychological help so he could make peace with his God.

The bishop listened to us, thanked us, but said he could not promise anything, but would try and get him help.

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Time went on, but my life hit a deep low. I was extremely upset and didn't know what to do. I told my husband I was going to make an appointment with our parish priest. I went over to the parish house, and told my story to him. I cried for first time in my life about this. I thought I would never stop. The parish priest gave me some Kleenex and held my hand. Then he asked how he could help me. I finally admitted I needed professional help. I could not do this myself. He reached in his desk and gave me a card with a therapist's name who works with abused people. I thanked him and got into my car, and cried again. Someone who represents the church cares!!

After two years of therapy for which that other diocese is paying, I am on the road to healing and recovery.

Last year, the parish sponsored an evening of information on sexual and physical abuse. Several people came, and many questions were presented from "How do you find the right therapist?" to "How can I trust again?" One of the attendees, who was abused by a relative, just called me a couple of months ago, and revealed to me that she is now getting professional help, and thanked me. She is on the road to healing.

Our parish will again offer another evening for information concerning abuse this April.

One Tuesday, I didn't go skiing because the weather did not cooperate. I was disappointed, and showed it -- my poor husband! But something happened later that morning. I got a phone call from a mutual friend of ours of many years. She is worried about her 40 year old daughter who is so depressed she cries all the time; she can't even decide what to wear each morning. She even quit her job. Classic signs of depression. I asked my friend to listen to my story; then I questioned her if her daughter was ever sexually abused years ago. A long pause . . . yes, and so was she. I asked if it would be OK if I wrote to her daughter and sent her some articles that might help to encourage her to seek professional help. A big yes. A few weeks ago, she called my husband and told him after going to several different therapists, her daughter now has a professional that she is comfortable with. Another person is on that recovering and healing road.

I receive articles, book lists, and newsletters from other survivors of sexual abuse. Now I know this sounds crazy, but it seems people know when to call, because when I get these phone calls, it just happens I can use these articles or newsletters to help another victim/survivor.

The network of support reaches out to the five or six surrounding states.

If it wasn't for my husband, my understanding parish priest, and another priest friend, and my therapist, other survivors of sexual abuse, the organization called Link-Up, and a newsletter called "The Healing Woman", my faith in God would have run dry. They are the Jesus giving me a drink . God is touching and healing us.

When life and my faith get hard and dry for me and for others who are victim/survivors, I know a sign from God -- either by a phone call, a letter, or a hug -- will come. The well is not dry.

Note: Sections two to six deal with some practical reflections on how to provide appropriate care for victims. In Section Seven three victims respond to five key questions. Two of the victims responding to these questions have just presented their stories in Section One above.

SECTION TWO: A COORDINATED AND SENSITIVE RESPONSE

Whenever an allegation of clergy sexual misconduct is brought forward, the Church is called to respond in a pastoral and timely fashion: to the victim-survivor, to the family, and to others who have been affected by the allegation. Ideally such a pastoral response would involve 1) a person or team with clear and definite responsibilities, 2) effective internal coordination of diocesan resources, and 3) smooth external relationships.

1. A Delegate or Team for Responding to Victims-Survivors

Since matters involving sexual misconduct are often overwhelming for the victim-survivor, the pastoral response can be complex, usually unfolding in a climate of urgency and public scrutiny. Therefore, it is important that the bishop have a permanent arrangement in place - an authorized delegate or team - capable of rapid initiation and coordination of the outreach efforts appropriate to the situation.

Having such a delegate or team in place enables the bishop himself to be available to all persons involved and to all aspects of the situation. It allows him to be the overseer and monitor of the diocesan response to the needs. Having named such a delegate/team in no way implies that the bishop would not be available for direct pastoral contact with the victims-survivors, their families, and others as circumstances might warrant.

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The delegate and staff serving a victim-survivor need to be well informed regarding diocesan structures, policies and protocols. This background assures that they will be in position to guide and assist effectively those who come forward to disclose their abuse and victimization.

It is important to note that the delegate/team serving the victim-survivor does not focus on the question of innocence or guilt but rather concentrates on the hurt and pain experienced by the person naming the abuse. The delegate/team assists persons coming forward to obtain information so that they can make responsible and informed decisions regarding their care and healing. Pastoral outreach to a victim-survivor often implies a long-term relationship.

2. Internal Coordination

Coordination of effort is an indispensable element in a diocesan pastoral plan for responding to an allegation of sexual misconduct. Internal coordination aims at timely and appropriate decisions made in the best interest of all. It also assures well-timed implementation and efficient use of diocesan resources. The pastoral response does not operate in a vacuum: it often interacts, for instance, with those responsible for finances, for insurance, for the canon and civil law aspects of the process, and for public and media relations. In these relationships there may well be tensions. Coordination, however, implies that timely advice and consultation are available to responsible diocesan persons as they react to the many demands that arise throughout the processing of an allegation and beyond.

The following are examples of diocesan offices or agencies that are to be coordinated in responding to an allegation.

(Titles may vary from diocese to diocese but the positions indicate the responsibilities that have to be met.)

- . Bishop or Delegate
- . Delegated person receiving and investigating the allegation
- . Delegate for pastoral outreach to victim-survivor, the family, the parish community
- . Parish Intervention Representative
- . Vicar for Priests
- . Director of Diocesan Personnel
- . Legal Counsel
- . Insurance Carrier
- . Communications Office (Public Relations)

Wherever and whenever possible it is important that the victim-survivor access to the delegate/team be at a site separate from a diocesan administration center. The site should be such that a victim-survivor would not likely encounter other Church personnel. Incidentally, this same sensitivity applies to the use of therapists. It has happened that the victim-survivor and the accused have met in the same therapist's waiting room.

Another delicate point that could be important: attention should be given to the decor of the office of the delegate. Religious symbols, pictures of church personnel, could be a source of upset for victims-survivors in their very early stages of disclosure. The overall atmosphere of the delegate's office should express a sense of privacy and of welcome.

It is widely acknowledged that a response plan should be in place well in advance of an allegation being brought forward. To attempt to organize "coordinating systems" once the crisis is upon a diocese demands a herculean effort and drains energy and resources away from the immediate matters that require focused attention.

3. External Relationships

The primary mission of pastoral outreach is to promote the wholeness and healing of the victim-survivor and of the family. The need for timely, appropriate, compassionate, and consistent interaction with the abused cannot be overstated. A secondary mission is to identify quality resources available to the abused persons, and, as indicated, to coordinate and monitor the services they receive.

Depending on the needs and requests of each victim-survivor, the delegate responsible for pastoral outreach interacts with a broad spectrum of people. The primary contacts include counselors, therapists, and spiritual directors. In addition, the delegate maintains communication with other support persons and organizations serving victims-survivors, including advocacy groups.

While respecting the abused person's right to privacy, balanced with the right to be kept informed, the delegate maintains communication with the victim-survivor and the family

Finally, the delegate may be in communication with diocesan social service agencies and as well as with a parish when crisis interventions are called for. (See the sections in this report on "The Therapeutic Community: Networking" and on "Extended Victim-Survivor Communities".)

Conclusion

The coordinating role of the delegate/team responsible for pastoral outreach to a victim-survivor calls for prudence, sensitivity, and courage. It is a developing role very dependent on the lived experiences and the resources of a given diocese. The observations offered in this section are based on reflections by and discussions with people who are on the front line of this ministry. No sample job descriptions are offered. Hopefully elements in such a job description may be seen in the comments offered in this paper.

An appropriate conclusion might be the following quotation from a diocesan policy concerning victims-survivors; it too has ingredients for a description of the role of a delegate/team for pastoral outreach to these wounded persons:

We are open and respect your complaint.
We will provide an advisor/advocate, if you so choose.
We will help you obtain counseling support.
We will provide information about support groups.
We will help you obtain spiritual direction.
We will help you bring your concern to the proper church officials
outside our diocese.

SECTION THREE: THE THERAPEUTIC COMMUNITY: NETWORKING

Introduction

Church officials have ample opportunity to work with and refer to an often broad network of psychotherapists in a given locale. These trained individuals are really co-laborers with Church professionals in the ministry of healing. They provide a depth of help to people, who are sometimes deeply wounded, that is beyond what Church professionals can do. At the same time, psychotherapists are limited in the art and science which underpins what they can do. Collaboration, then, is an optimum condition where professionals in both groups can combine talents and skills for better service to those in need. What follows are reflections on how to identify resources and maintain connections between the care giving professionals and the Church officials.

When sexual misconduct involves priests, or deacons or Church workers and those to whom they minister, be it by harassment, exploitation or abuse, the victims of this behavior suffer a profound dislocation of a basic condition of life best expressed by the cry: Who on earth can I trust! This can have a ripple effect and lead to a lack of confidence in other conditions of life required for most people to function well. When such a breach of trust has been made by a minister of the Gospel, the victims of that breach in all probability will need the help of a psychotherapist in healing. And their families, too.

The Church has a pastoral mission: to accompany people on their journey of faith, to be present to their life experiences, and to show believers how to turn their lives over to God's saving work in them and in the community of faith which is the Church. When Church officials refer victims of sexual misconduct to psychotherapists, a good rule of thumb is that this is not the same as disposing of a problem for else to work on. The Church's ministry to the victim-survivor remains. Psychotherapists are additional resource persons who, in attaining their objectives, will at the same time be helping the Church achieve its mission. Our primary outreach however is to the victim-survivor, not to the therapist. Therefore in these situations Church officials need to keep doing what the Church does best: being pastoral. No one else can take its place.

An important feature to bear in mind is that there is a difference between being therapist and being advocate. A good therapist knows this and makes quite an effort to avoid becoming an advocate for the client. Once a therapist takes on the role of advocate, pushing for the position of the client in external matters, the therapist has lost his/her perspective and is siding with the client. Maintaining perspective is essential for the therapeutic process and is one of the chief contributions to the therapy made by the professional. Its loss can turn therapy into co-miseration.

Various Credentials of Psychotherapists

Like people in general, psychotherapists come in various sizes, shapes, kinds, backgrounds, schools of thought, and levels of training. Like other groups, some are terrific, many are ordinary, some are not very good. So how does one pick a therapist? Some people, it is said, use the Yellow Pages. Hard to imagine selecting a surgeon that way. The therapeutic relationship is one of healing, but at its roots it still is a relationship. When one is part of the selection process of a potential therapist or number of therapists for a specific victim-survivor, people's needs and characteristics have to be taken into account. The client has to get a sense of the relationship with a particular therapist and to feel that it would "click" between them.

Some relevant factors concerning psychotherapists in general:

1. Disciplines: There are currently five mental health disciplines recognized by the federal government and many states: Marriage and Family Therapy, Psychiatric Nursing, Psychiatry, Psychology, and Social Work. Each of these disciplines has a history, a culture, a characteristic way of viewing people and problems, a code of ethics, a body of knowledge and research. To be sure they borrow heavily from one another, and even more importantly are often members of the same team. They complement each other. But some generalizations can be made. For example, psychiatrists are trained first as physicians, with a traditional emphasis on understanding the biological basis of behavior. They treat people in hospitals and clinics and use medication in the treatment of many psychiatric disorders. Some also do psychotherapy. We recognize that there are individual variations among members of any group. The point is that one has to ask individual practitioners just what their areas of expertise and/or practice are and then look for matching credentials.

2. Levels of Education: All members of the above disciplines are trained at the graduate level, that is, formally educated beyond college or university bachelor's degree, some with a master's and many with doctorates. As a general rule those who have earned master's degrees have training which has focused on psychotherapy. Those with doctoral level training not only have further academic qualifications but also additional supervised clinical experience in areas such as formal assessment and diagnosis of psychiatric disorders.

3. Sites of Education and/or Training: Usually graduate schools approved by regional accrediting agencies are the ones deemed acceptable both by the professional community and the state licensing boards. Independent training facilities likewise need accreditation and often obtain it from the respective professional associations, such as an American Psychological Association (APA) approved internship program for doctoral level trainees.

4. State Regulation: States regulate the practice of all psychotherapists. Some states loosely regulate by way of restricting who can use a certain title, such as Certified Social Worker, or Certified Psychologist. Only those in a discipline who meet specified minimum requirements of education and supervised clinical training and who pass written and oral examinations under state auspices can use the title. Other states regulate by use of licensure which usually defines an area of practice. Only those who possess the minimum requirements of education and supervised clinical training and who pass written and oral examinations under state auspices can perform the activities in the defined area.

States have regulatory boards governing the professionals and the information they have is open to the public. One can call these boards to find out whether a given individual possesses a state credential, which one, and other types of information. In some states the regulatory boards are located in the Commerce Department, in others the Health Department, or elsewhere. But it is on the state level that one must seek the information.

5. Specialization: This is a more difficult area to describe because the definitions of specialties and the manner by which one qualifies to be considered a "specialist" in the mental health field are not at all clear or agreed upon. At present, there is no universal and certain way to tell. One might be left with simply asking the professional, especially by inquiring as to just what basis has been used to determine specialization. If a doubt arises, one can check with the state board or the state professional association involved.

6. Professional Associations: Each of the five disciplines (see list above) has a corresponding professional association, membership in which can be gained only if basic requirements have been fulfilled. These requirements include minimum graduate accredited education and approved supervised clinical training. The association may have graded levels of membership, each higher one requiring even higher levels of training and education. These memberships are another way of credentialing a professional. These associations also hold their members to a strict code of ethics, as do the state regulatory boards.

Professional Assistance for Victims-Survivors

Healing is often a life-long process. An individual's needs can and do change over time. Within the healing process, psychotherapy will have objectives and goals which may be more time limited, and in that sense can and will come to an end. As regards victims-survivors it is possible that when the therapeutic work around the abuse is completed, the individual may want to pursue other areas that have been identified for resolution. The Church may then no longer be involved in any financial support for this extended care, but the therapeutic relationship may well continue, since it is something now primarily between the therapist and the client.

What does the diocese have a right to know when it refers a victim to a therapist? Some very basic things like, whether or not the person shows up for appointments; what is the initial assessment and evaluation; what is the therapist's plan for addressing the particulars of the assessment; what are the diagnosis and prognosis (prospect for recovery); and as the client moves along in the process, whether there is a periodic re-assessment and update of the treatment plan. Even armed with this information, a diocese may be puzzled as to what to make of it. In those situations, one could ask a body like a diocesan review board or its equivalent, with mental health professionals members, to render an opinion as to the appropriateness of the assessment and plan. Or one could also ask the victim-survivor to agree to have an independent assessment by another professional, whose opinion about the initial assessment, treatment goals and plan could then be sought.

Some Practical Applications

In the light of the above observations, what is the first step in selecting a psychotherapist or a number of psychotherapists to work with?

1. It is best to have a number of suggestions to make to the victim-survivor, the people we serve, and let them make the final choice of therapist. Giving a victim-survivor this decision is itself therapeutic, especially since the abuse may well have involved choice on the part of the perpetrator, but the experience of coercion on the part of the victim-survivor. One can try to match therapists and clients, but that is essentially a guessing game. Our best resource is common sense. A cold, analytical, very intellectualized therapist may not work well with someone who needs nurturing, but one can be surprised.

2. Ask the victims whether they have a preference for a male or female therapist. If someone finds it easier to talk with one or the other, particularly given the content of sexual behavior, providing the option can be important.

3. The really best way to know which therapists are effective is by experience, your own and others. A master's level licensed clinical social worker may well be a terrific therapist. Experience is a great indicator. One can ask around, develop a list, and acquire some experience by trial and error.

4. Therapists in the region may be asked whether they are interested in working with victims-survivors of clergy sexual misconduct and/or their families. They can be asked to tell you something about their background, their methods, their approach to this problem, their experience in dealing with it, and the number of clients cared for.

Those who respond to this inquiry will be far fewer than those who express a general interest in referrals. Following this survey the number of therapists will likely be more manageable and further background may then be developed on them. Where possible, one should avoid over-reliance on too narrow a number of professionals in order to prevent the appearance of a conflict of interest, their too close identification with the diocese. It is in the victim-survivor's best interest for the therapist to remain independent, including some distance from even other diocesan responsibilities.

5. Since referral by the diocese does not mean the Church's losing touch with the victim-survivor, it is important to know whether a therapist is willing to work with the diocese and does not insist on no contact or relationship with Church officials. Victims-survivors who have been referred for help need to know that the Church is continuing to be interested in their welfare. This attention, for instance, may take the form of meeting with the therapist and client together in the therapist's office to learn how things are progressing. This does not mean of course needing to know details of the person's life or intruding on the therapeutic process. But the diocese needs to be sure the therapy is on target and to know when it may be reasonably finished.

Progress in therapy could be indicated by the victim seeing that the sexual abuse is not the cause for every impairment felt in the person's life. The individual's taking responsibility for other matters to be resolved might go hand in hand with the person assuming more of the cost of the therapy. But this is a very particular question and is best resolved by all three parties together: client, therapist, and diocese. After all is said and done, when all the professionals (including attorneys and courts) have stepped away, the people involved - victim-survivor (and family), perpetrator (and family), parish community, officials - are still Church together.

Additional Considerations

1. In some situations fees for therapy for a victim-survivor and the family are seen as "advances", to be repaid from any settlements agreed on, especially if this is understood ahead of time.
2. Therapy with a victim-survivor of sexual abuse can take a long time. Two years is not unusual for some. Much depends on the nature and duration of the abuse and, particularly, its meaning and impact on the individual, the presence of other problems, immunizing experiences, and the resiliency of the personality.

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3. One way for the diocese to maintain a presence in the therapeutic process is to agree to a series of a specific number of sessions to be funded. At the end the client, the therapist, and the diocese then plan the next stage, which might be another series of an agreed upon length. It is most important that clear-cut, possibly measurable goals are in place so that progress towards them can be seen. This is considered sound therapeutic practice.
4. The confidentiality of the therapeutic process is acknowledged. However, it is important to identify for clients the type, scope, and purpose of the communication which might be needed between the diocese and the therapist, and to obtain written consent.
5. It is helpful to have on hand a list of other types of resources for use by victims. Such resources would include information about support groups in their area, opportunities for spiritual direction, and advocacy groups, complete with names, addresses, telephone numbers and contact persons.

Conclusion

The therapeutic community for the care of victims-survivors of sexual abuse in the Church involves interaction between competent professionals and Church officials on behalf of those who have been so abused. Reflections in this section have concentrated on some facets of this interaction. Many other aspects of Church ministry also respond to events surrounding the disclosure of sexual misconduct. Few of these aspects can be as critically important for the healing of abused, however, as the professional care they receive on the road to recovery. Collaboration therefore between these professionals and Church officials is not only not an option, it is a common mission on behalf of very vulnerable persons placed in the care of the Church in a special way.

SECTION FOUR: INTERVENTION WITH EXTENDED VICTIM AUDIENCES

Introduction

The impact of sexual abuse within the Church is felt not only by the direct victims of the abuse but also by "extended victims." These extended victims include parish communities, family of direct victims, family of the alleged/actual perpetrator, the larger social community. The Church's response to allegations or incidents of sexual abuse involves pastoral outreach and compassionate care for these extended victims as well as for the direct victims. While the Church will utilize a variety a means in responding to and caring for victims-survivors, all that we do will be marked by a spirit of care and an attitude of prayerful trust in the presence of God even in the midst of pain and suffering. Care and attention to victims is a long-term commitment on the part of Church leadership

and community. Circumstances will vary and responses may need to be tailored to address individual situations. In most cases a one-time response will not be sufficient; the Church will need to provide opportunities for a long-term and varied presence in addressing the needs of the extended victim community.

Reaction to allegations or incidents of sexual abuse include a wide range of emotions from shock, denial and disbelief to anxiety, guilt and embarrassment. Blame and anger can be directed both outwardly toward perpetrators, victims, and Church authorities as well as inwardly toward oneself. These emotional reactions not only arise from individuals but also are expressed communally. Issues can surface as personal, relational, or religious crises.

In providing care for its people, the Church attends to these diverse needs. Because the needs vary and the audiences differ, certain principles for response will precede any concrete decision regarding intervention. Issues taken into account will include concern for appropriate levels of confidentiality regarding the identity of the victim or victims, balance between right to access to information and danger of "prejudging" cases, protection of victims (direct and extended) from further victimization by community or unwanted media exposure. Special attention will also need to be given to the selection of pastoral personnel who will serve in a parish where an incident of sexual abuse has occurred in the past.

Process for Intervention and Response

While the responses to individual situations will vary, the following steps will help define and target appropriate intervention approaches:

- ° Identify target populations
 - Parish in which incident occurred
 - Parish school children
 - Religious education participants
 - Youth
 - Parish(es) where perpetrator previously served
 - Parish staff
 - Family of current and past victim(s)
 - Family of perpetrator
 - Local community
- ° Assess needs of each target population
- ° Determine response strategies and interventions
 - Dissemination of information
 - Consultations
 - > diocesan resource personnel
 - > local social service agencies
 - > local ecumenical leadership
 - Group meetings
 - > parish staff
 - > parish leadership
 - > parish community
 - > surrounding social community

- > children / youth
- Appropriate and effective use of media
- ° Identify roles and timetables

Utilizing Networks for Intervention

Diocesan leadership does well to utilize the existing leadership persons and groups at the parish level to assess needs and provide effective intervention. Professionals can be used for consultation, education, guidance and support both with and for parish leadership. These professionals can be drawn from diocesan personnel as well as from the larger community. Since the local parish does not exist in isolation from its surrounding social community, the Church can enlist the help of community social service agencies and mental health professionals as partners in its response. Because the effects of allegations or incidents of sexual abuse extend beyond the Catholic parish community, interaction through ecumenical contacts can also help serve the needs of the larger community.

While making effective use of local parish staff and leadership systems, diocesan personnel will also be aware that these people are part of the extended victim group, even as they function as resources to the parish community and/or to family members of both victim and perpetrator. Parish leadership and staff experience the mixed roles of being needed and needy, healer and wounded, comforting and broken.

An allegation or incident of sexual abuse can often elicit strong responses from members of the community who are themselves victims of abuse. By promoting an atmosphere and attitude that is accepting, empathic, and non-judgmental the Church can encourage such "hidden victims" to come forward and access avenues of pastoral care that exist for their benefit. Because the relationship of the victim with the Church may be wounded, thus impeding direct contact with Church personnel, referrals to county or community services may also be beneficial.

When media coverage or other public exposure highlights an incident of sexual abuse within the Church, parish communities or other extended victims from a previous such incident may experience a new set of emotions or a recurrence of their previous reactions. Attention to their needs in the current situation may be warranted. Likewise, even though a current incident may focus attention in a particular parish or community, the possibility exists that direct or extended victims may surface from sites of previous assignments of the perpetrator.

Interventions and responses will vary based on individual circumstances and resources available. What will remain constant is the Church's mission to those who are in need.

Allegations or incidents of sexual abuse often challenge, at very deep levels, trust in God, in the Church, in those who minister. Provided promptly, honestly, compassionately, and openly, the Church's response to extended victims can be a first step in rebuilding systems of trust.

(The following five appendices are practical aids relating to this section on extended victim audiences.)

APPENDIX #1

Principles and Approaches for Interaction between Diocesan Resource Personnel and Parish Staff/Leadership

These principles and approaches for interaction are grounded in a spirit of care and an attitude of prayerful trust in the presence of God even in the midst of pain and suffering.

I. Diocesan personnel serve primarily a support and resource function in relation to parish staff and leadership.

- a) Education and formation in issues relating to sexual abuse and its aftermath are part of ongoing programs for parish personnel and leadership, that is, prior to any definite incident or event at a specific parish.
- b) Already existing systems for communication and ministry within a parish serve as natural vehicles for attending to specific needs related to an incident of sexual abuse with diocesan resources serving in supplemental or adjunct capacities.
- c) Diocesan resource personnel assist parish staff and leadership in deciding on approaches rather than making all decisions for them

II. In the aftermath of an incident of sexual abuse at a parish, diocesan personnel and resources provide ministry to the ministers.

- a) Opportunities for parish staff and leadership to assess and respond to their own reactions will help prepare them for attending to the needs of the parish at large
- b) Diocesan resource personnel are trained to respond to and address the range of emotional reactions present among parish staff and leadership.
- c) The ability of parish leaders to respond to local crisis is enhanced when diocesan leaders, not excluding episcopal leadership, are available and responsive to their needs.

III. Advance planning and assignment of specific functions among diocesan personnel facilitates intervention with parish leadership.

- a) Clear delineation of areas of responsibility (e.g. interim personnel assignments, media relations) among members of a diocesan intervention team helps to focus the response being provided at the parish and to minimize additional stress.

- b) A "checklist" of possible interventions and decisions ensures that potentially important areas of response are not overlooked in the crisis of the moment (Appendix # 5).
- c) Contact between designated diocesan personnel and parish leadership can minimize the possibility of mixed/contradictory messages as well as maximize the (re)building of trust.

APPENDIX # 2

Developing an Action Plan at the Local Level

Step 1: Identify target populations.

- What groups / individuals in this community have specific or generalized needs in the aftermath of this incident?

- Known victims and families
- Yet-to-be known victims and families
- Members of the victim group (e.g. grade school age children, teens)
- School/religious ed staff/participants
- General parish community
- Civic community
- Accused/perpetrator and family
- Other(s) - identify:

Step 2: Identify needs of each target group.

- ° Information
- ° Forum for reaction
- ° Opportunity for prayer/ritual
- ° Direct intervention/referral

Step 3: Plan appropriate interventions for each group and its need(s).

- Examples:
- direct contact with victim(s)/family members
 - classroom discussions(parish/public school/CCD)
 - parish-wide communication and updates
 - open forum for parish members / civic community
 - small group sessions
 - prayer opportunities / liturgical sensitivity

Step 4: Assign roles and responsibilities.

Step 5: Assess ongoing needs as they develop and plan for long-range and follow-up support.

APPENDIX # 3

Tools for Effective Use of Media in a Crisis

Effective use of media in a crisis situation demands that certain approaches and procedures be developed in advance.

The size of the diocese, the scope of media presence in the area, and the nature of the incident will affect media policy. Certain key questions will need to be addressed in almost all situations:

- 1) What information do we need to get into the hands of the public via the media? e.g., What factual information regarding the incident can be disclosed at this time? What plans are underway to address needs and concerns of the parish/community? How do other victims make contact with the Church or other social agencies?
- 2) Who shall serve as spokesperson(s) with the media on behalf of the diocese? parish? How will information be provided to the spokesperson(s)?
- 3) How shall parish personnel and leadership be prepared for the impact of media involvement?

The diocese and parish needs to be aware of the impact of media reports on direct and extended victims especially when their reports precede intervention efforts. Media needs to be used effectively and not regarded automatically as the opposition. If media becomes obstructive to the healing processes, alternative approaches may be needed.

NOTE: See article on a media plan in Restoring Trust (November 1994), a report from the Ad Hoc Committee on Sexual Abuse given to all NCCB members.

APPENDIX # 4

Fostering Community and Ecumenical Networks for Response

The effects and aftermath of an incident of sexual abuse within the Church are not limited to the Church. The surrounding civic and ecumenical community will also be affected. Outreach to leadership in these communities can extend the circle of healing and provide valuable resources for use by the Church.

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Decisions about contacts to be made will depend on the unique circumstances of the incident, e.g., an allegation of current abuse as opposed to one far in the past. Those who could be contacted and the purpose for the contact or role to be played could include the following:

Contact	Purpose	Role to be played
Social service agency	Provide information about the incident; professional interaction; referrals to and from diocese	Resource persons to assist in local responses
Ministerial network	Prepare for possible impact on their religious community.	Support
Public school officials	Prepare for possible "acting out" on part of students due to stress, anger, fear; explain approaches being taken	Appropriate to educational and counseling professionals; conduit of information/referrals

APPENDIX # 5

Sample Checklist for Emergency Action/Intervention

I. Convening of Emergency Team

Upon notification that an incident of clergy sexual abuse has been alleged or occurred the Chancellor will convene a team to respond to the emergency. The bishop will be notified about the meeting.

Those to be convened:

Vicar for Clergy _____
Priests Personnel Director _____
Media Relation Director _____
Coordinator of response _____

Depending on the nature of the case other persons may also be convened in this initial meeting (e.g., parish consultant for affected area, office director, etc.)

Other persons contacted: _____

Date, place, and time of meeting communicated to each of the above at time of contact.

II. Development of Approaches

A. Designate contact person(s) for additional incoming calls on same case and determine appropriate response at time of initial call.

Contact person: _____ Phone: _____

Response: _____

B. Decide if parish/institution intervention is needed.

Contact pastor/pastoral staff of affected parish with advance notice.

_____ Yes _____ No

Who is contacted? _____

By whom? _____

What is to be said? _____

Send diocesan representative/team to parish for coordination of on site response.

----- Yes ----- No

Who is sent? _____

Role: _____

Prepare announcement for communication with parish leadership/full parish.

_____ Yes _____ No

Who prepares? _____

Summary of content: _____

Provide intervention team for parishioners.

----- Yes ----- No

Team members:

Role:

Provide intervention team in parish school.

_____ Yes _____ No

Team members:

Role:

C. Determine public response(s).

Who will act as diocesan spokesperson with media? _____

Will a formal statement from the diocese/bishop be prepared?

_____ Yes _____ No

When? -----

By whom? _____

Need to be checked with legal counsel?

Yes ----- No

When? _____

By whom? _____

Contact with sheriff/district attorney needed?

_____ Yes _____ No

By whom? _____

Contact with social services of the area needed?

_____ Yes _____ No

By whom? _____

Contact with other public agencies needed?

_____ Yes _____ No

By whom? _____

Contact with ecumenical leaders in the area?

_____ Yes _____ No

Who? _____

By whom? _____

II. Other Interventions

What:

By whom:

When:

SECTION FIVE: ADVOCACY GROUPS

A primary goal within the Church is to be attentive to the needs of victims-survivors of clergy sexual abuse as they seek to achieve personal healing. As part of that healing a number of victims-survivors have formed support or advocacy groups of various kinds at the local, regional, and national levels.

On several occasions over the past two years, the NCCB Ad Hoc Committee has met with two of these groups operating at the national level. The committee has reflected on this experience and concluded that for these meetings to have their optimum effect for all participants it would be useful to have certain guidelines. One of the main purposes of the guidelines would be to help promote an atmosphere characterized by active listening, compassion, integrity, humility, and frankness.

For meetings with victims-survivors organizations that are national in character the Ad Hoc Committee has developed its own guidelines. The committee will attempt to follow these in future meetings that may take place. In outline they are:

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1. With the purpose clearly specified, a request for a meeting originates either with the president of the victims-survivors organization or with the chairperson of AHCSA.
2. At a reasonable time prior to the formal meeting, one or two representatives from the advocacy organization and from AHCSA staff hold a preparatory session. Some of the points covered in this session could include:
 - 2.1 Date, agenda and schedule
 - 2.2 Spokespersons/bishops/consultants/staff attending
 - 2.3 Review of accountability of spokespersons and of AHCSA
 - 2.4 Expectations
 - 2.5 Role and choice of possible facilitator
 - 2.6 Media plans
 - 2.7 Expense arrangements
- 3 Following the meeting AHCSA evaluates the session and draws whatever conclusions for follow up that may be indicated.

SECTION SIX: DIOCESAN POLICIES

Note

One of the objectives of the Ad Hoc Committee on Sexual Abuse is to provide some resource material relating to care for victims. One resource, among many, is the Committee's report on the diocesan policies, specifically what that report says about the care and concerns of the victim-survivor. The team assisting the Ad Hoc Committee on the "Victims' Objective" felt that providing a selection of material from the report on policies in **Restoring Trust** would be one way to emphasize the caring tone of much of this material without alluding to the procedural complexities necessary in the full text of the report.

Introduction

In 1994 the National Conference of Catholic Bishops' (NCCB) Ad Hoc Committee on Sexual Abuse studied 157 diocesan policies on sexual misconduct that are in place across the country. Many of the recommendations in the Committee's report on these policies to all of the bishops dealt in some way with the victim of sexual abuse.

The highlights given below, focused on victims-survivors, are drawn from the Ad Hoc Committee's November 1994 Report on Diocesan Policies in **Restoring Trust**.

NCCB Principles

Throughout much of the report on diocesan policies the Ad Hoc Committee made direct reference to principles contained in specific policies on a variety of topics. However, there is a collective position taken by NCCB members that obviously has had great influence in the evolution of the policies, namely, the five principles that came out of the June 1992 NCCB General Meeting.

Three of these five principles relate directly to victims:

- * Respond promptly to all allegations of abuse where there is reasonable belief that abuse has occurred.**
- * Reach out to the victims and their families and communicate sincere commitment to their spiritual and emotional well-being.**
- * Within the confines of respect for privacy of the individuals involved, deal as openly as possible with the members of the community.**

General Guidelines

Here is a sample of some general guidelines usually found in the introduction of selected policies, or in the presentation of the policy by the bishop.

Every society esteems its children. In their innocence a society recognizes its own innate goodness and its calling to build a better world. In their incompleteness a society understands that hope for a fuller life and second chances is never extinguished. This is no less true for the Church.

The common mission of all of us is to be holy. A holy people will not allow one of its members to be a victim of sexual misconduct.

All human suffering as well as the weaknesses and imperfections of human beings deserve a response rooted in love, compassion, and concern.

All disciples of Jesus Christ, all persons directly or indirectly involved with incidents of child abuse are to act with honesty, charity and confidence in the Lord's power to forgive and to heal. There is a need for the entire church to create an atmosphere where silence, ignorance and minimization are overcome by understanding, Christian love, and mutual respect.

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Since the principal attitudes that shine through many of the policies are compassion and accountability, diocesan policies can be a practical public means to approach the matter of sexual abuse within the Church. The very tone of the document can be an effective instrument to convey these attitudes.

Before dealing with detailed procedural points, policies generally have introductory comments to put into context what follows. Many of these comments have a direct bearing on caring for the victim. Here are some examples.

The intent of all that follows is to promote a ministerial environment in which those who minister in the church and those who receive the church's services can expect to do so in safety.

The primary purpose of the policy is the safety of children, the well-being of the community, and the integrity of the Church.

All involved are to be treated with candor, fairness, and dignity.

These policies and procedures are to be implemented with justice and equity: they shall also be fair and responsive to the pastoral needs of the victim, the victim's family, the parish community and diocesan community and to all other persons.

Retaliation and/or discrimination against any person who complains of or who reports sexual misconduct is strictly prohibited and will not be tolerated.

The general tenor of these comments implies that the response of the diocese to any allegation of sexual misconduct must be based in the gospel values of dignity, compassion, and understanding. Justice and charity call the Church to respond with compassion and fairness to the persons involved and to uphold the integrity of the Church's witness and ministry.

From general information available, the NCCB Ad Hoc Committee is aware that a fair number of allegations are raised regarding acts that supposedly happened in the distant past. Obviously the needs in different dioceses are quite varied, but there seems to be a growing need to differentiate between current and past allegations and the manner in which they are handled. Accordingly, the committee proposed that each diocese examine its history in this regard and, based on the risk to the innocent and the vulnerable, consider having a risk track and a non-risk track approach to implementing the procedures.

The complexity of dealing with an incident of sexual abuse is acknowledged by everyone who has had any direct experience with the matter. All the more reason therefore that the whole problem be dealt with from the multidisciplinary perspective. In so approaching the issue, there is a greater prospect that all the individuals and groups involved - victim, family, parish community, diocesan church, the accused, and society at large - will be appropriately cared for and dealt with. Therefore, the Ad Hoc Committee proposed that there be identified in each diocese experts from many disciplines involved in the serious study of issues connected with sexual abuse in order to approach the problem in its legal, psychological, sociological, spiritual, medical, and educational dimensions.

Victims

One section of the Ad Hoc Committee report deals specifically with victims.

Though many of the (diocesan) principles/guidelines quoted above are pastoral in nature, the following references from some policies seem to be in a category by themselves.

In the Scriptures, Benjamin was the youngest of the children of Jacob and Rachel, profoundly vulnerable and even uncertain of his own name and identity (Genesis 35: 16-20). Born into a family troubled by rivalry and jealousy, and exploited by his siblings at times, Benjamin is a symbol for all whose early years are troubled. ...Thus, Benjamin is a symbol for the victim, the perpetrator, and the larger fabric of society which abandons its apathy and comes to an understanding of the evil of abuse, working for a new sense of justice and rehabilitation for all.

We are open and respect your complaint.

We will provide an advisor/advocate, if you so choose.

We will help you obtain counseling support.

We will provide information about support groups.

We will help you obtain spiritual direction.

We will help you bring your concern to the proper church officials outside our diocese.

While we are all in need of redemption and forgiveness for our failings, there is a special harm and injury given to those who are victim-survivors. We use that term because we want to underscore the fact that people are not simply victims as though what happened to them stops there. People are also resilient and however difficult the path to wholeness may be, they are survivors. By using the joint term, we

acknowledge their being wounded. At the same time we mean to urge on their healing and recovery and aim to help it when we can.

Compassion requires that primary attention be given to the person alleged to have been offended.

In principle, nothing about what the pastoral team members say or do should leave room for inference that their purpose is to investigate the validity of the allegation.

Pastoral support is offered to the victim if the parents are consenting and if such is allowed by the appropriate public authority.

No matter their age or experience, minors are not blamed for causing or encouraging the actions of the offender, even if at times the child appears somewhat responsible.

Families often require the same compassion and sensitivity as that of the victims and are not to be forgotten in the healing process.

Several policies encourage the use of a person of support or good counsel - a friend, family member, colleague, or anyone else of the person's choosing - to accompany the one making the complaint.

References are also made to reconciliation between offender and victim-survivor. The general tenor of these remarks is that, while reconciliation remains desirable, the diocese in no sense requires participation as a condition for further involvement in the Church community. Reconciliation is more of a process than an event. Neither the offender nor the victim is to be pressured or rushed to take part in the process of reconciliation.

Only a minority of policies has elaborate guidelines for dealing with the affected parish community. For those that do, the underlying principle is well stated in this reference:

In responding to affected parish communities the diocese is guided by these three principles:

- these parishes undergo a complex process of grieving when they learn a trusted and respected leader has been accused;**

- a most important element in healing is receiving accurate information of what happened; the healing of the community is a multi disciplinary challenge.

The principles quoted above illustrate the compassion that informs many of the policies. It is important for victims to know early in the process of healing what the diocese can do for them and what it cannot do and why. Providing information to the victim concerning the perpetrator can be an important aspect in the healing process but it is best read on a case by case basis by the professional providing the care.

The NCCB Ad Hoc Committee had several specific proposals concerning victims, namely:

That every policy recognize that primary attention be given to the person alleged to have been offended, to the family, and to the parish community.

That the diocese seek ways to involve the people in general in the whole process of healing the sometimes serious and long-lasting aftereffects of child sexual abuse.

That the diocese promote sessions to affirm and encourage the body of priests whose morale can be adversely affected by the actions of relatively few of their colleagues.

That the policy indicate there is some kind of multi disciplinary body available to provide concrete, direct, and individualized assistance to victims, their families, and the affected parish community.

An important medium for conveying the position of the diocese is the policy itself. The words used in the policies may convey the meaning, but often the very tone of a document can convey a different message. Therefore the Ad Hoc Committee was so mindful of the importance of the tone used in the policy that it made two specific proposals in this regard:

That the tone of the diocesan policy, particularly in its introduction, be clearly pastoral, while appropriately dealing with the legal (civil and canonical) and financial obligations of the diocese.

That any qualifying statements required in a policy be appropriately presented so that the pastoral tone not be diminished.

Education/Prevention

Many victims-survivors worry about the offender's possibility to continue hurting others. This concern in a victim-for the prevention of further abuse is often quite striking. The full text of the Ad Hoc Committee report does indeed deal with certain restrictions placed on the accused. However, this overview of how the Committee dealt with victims in its report restricts itself to several relevant quotations from diocesan policies regarding the "Education/ Prevention" dimension that the Committee chose to highlight.

Persons working with minors must always avoid the kind of contact that could cause comment on the part of reasonable people.

The diocese recognizes that in order to more fully address the problem of sexual misconduct by church personnel, it must embark on a comprehensive program of education to create an atmosphere of understanding to help maintain the integrity of the ministerial relationship and prevent the misuse of power and authority.

All who minister to children in the church are to be aware of the causes and signs of child abuse, the steps to take to protect children, and the procedures to follow if abuse is suspected or observed.

Through its diocesan policy the local church is in a position to have some influence on how society at large copes with sexual abuse. The policy has potential to be an instrument for raising awareness, for education, and for prevention. The Ad Hoc Committee therefore proposed that policies make special reference to prevention and education measures in place in the diocese.

Conclusion

The purpose of this overview is to give victims-survivors and those who care for them an idea of how the NCCB Ad Hoc Committee on Sexual Abuse dealt with victims-survivors in its report to all of the bishops regarding diocesan policies. Much of the report came from the very words of individual bishops in their own policies. Because rights and responsibilities of people are involved, such policies are very difficult documents to craft. Balancing the pastoral care aspect with what has to be effective technically and legally is a challenge. Readers of this overview will have noted how mindful the Ad Hoc Committee was of this point. In such documents vulnerable persons, such as victims-survivors of sexual abuse, need to hear the receptive tone even more than the actual words. The reader may conclude from this overview that diocesan policies on sexual abuse are taking this point into consideration more and more.

SECTION SEVEN: THE FIVE QUESTIONS

The three victims-survivors who were invited to share their stories (two of which form Section One of this report) were also asked to respond to five questions, which they all generously agreed to do. The questions were:

- What helped on my road to healing?
- What inhibited my healing?
- How did the Church help?
- How did the Church inhibit?
- What should the Church have done?

The third victim-survivor's story is told through the responses to these questions, which forms the first part of this section. Then follows the replies from the authors of the first two stories found in Section One.

Part One: A Third Victim-Survivor's Story

I am the mother of a sexually abused child and the sister of the abuser who is a priest. The perpetrator also sexually molested my nephew, another brother's son. This abuse took place sixteen years ago. I have had knowledge of the abuse for three years. My son and I live in the east, my brother and his son in the south, and my brother, the priest, in the west.

1. What helped on my road to healing?

- My road to healing has been painful, complex and continuous.
- I am nourished by my faith including prayer and the liturgies and am supported by my family and ongoing therapy. My husband and I have been in family systems focused therapy for three years.
- I continue to educate myself about pedophilia, about its effect on the victim and families, about the abuser and about the involvement and response of the Church.
- I became an active participant in the problem solving process and was privileged to become a consultant on a Church committee on sexual abuse.

2. What inhibited my healing?

- Barriers that have stalled the healing process include the geographic distance separating family, the distant locale of the diocese where my brother had been assigned, communication with family and the Church, general attitudes and expectations of all those involved. Our family moves through the healing process separately and differently. My son and I have been involved with separate therapists with different styles of healing.

There has not been the opportunity for me to participate with my son in his therapy although he has joined my husband and me in our therapy over the past year. This has been difficult as my healing has been directly related to my son's well-being.

- My brother in the south is emotionally at a different place which inhibits open and honest communication between us and increases tension.

- There has been a minimal exchange of letters with my brother, the abuser, and little movement toward reconciliation. Our family genuinely cares about my brother and many attempts have been made by them to reach out in a supportive way. Writing has been the only vehicle of communication as he has been unwilling to provide his address, other than a P.O. box, or phone number to family members. His response to family letters has been superficial and sometimes bitter, and that's if he responds at all.

- For me, a major problem has its source in years of religious education, homilies during Mass and much literature that I have read on living the Gospel. There are hang-ups and baggage I've been carrying related to what I've been taught about faith. The theology of forgiveness has been almost glib in its presentation. I have been impressed that forgiveness solves problems when in fact I have learned, through my personal faith, that I have to get beyond the emotion of forgiveness to heal. I cannot allow the feeling "to forgive" to dominate my thought process, and I have to be sensible and focused in the reality of what's presented. I can "will" to forgive and do not wish evil on another and that's the best I can do. Although I have made progress, I'm still dealing with this ambiguity as a result of my religious teachings.

3. How did the Church help?

- Any help that I have received from the Church has been in my seeking and at my invitation. Through the media, I became aware of a certain priest clinician. As a result of my one visit with him and at my request to become involved, he recommended that I get in touch with a bishop who was helping the Church respond creatively to the sexual abuse question. I did, and I was subsequently invited to participate in work with him and his collaborators. This has been an enormous help and a great opportunity to access professionals who are working to develop programs to be implemented within the local Church. The dedication and difficult decision-making I have been privileged to observe has been inspirational.

4. How did the Church inhibit my healing?

- I wrote to the community in the mid-west where my brother was residing to seek educational information and to ask general questions about my brother's problems which were not in violation of his confidentiality. And most important, I requested help in communicating with my brother. The director's response was condescending and of no assistance. Furthermore, the tone of the letter enraged me. Here was a unique situation involving a priest who had abused the children of his brother and sister. What an opportunity this presented for the Church, specifically this community I had written, to deal with the plight of victims and their families without concern for potential law suits.

As you are aware, we are all connected in the healing process. What a loss!

- My brother's bishop, although a kind and compassionate man, was ill informed on the subject of pedophilia. Therefore, his response to the questions I asked were unanswered or inadequate. This was extremely frustrating as I have genuine concerns regarding my brother's prognosis, general well-being and accountability/responsibility to the Church and vice-versa as well as to his victims, and family. My brother's apparent lack of supervision causes concern that he might abuse again. The reluctance of the bishop to inform his priests, the parish and a particular family, having a number of children, with whom my brother was close leads me to believe that the bishop is protecting my brother without appropriate concern for the community.

- I am aware of a person's right to confidentiality regarding the dissemination of information. However, there is a need for the Church to be more open and honest with the victim(s) and their families as they progress through healing. The issue of confidentiality should be reevaluated and explored to its fullest as it pertains to the rights of both the perpetrator and the victims.

5. What should the Church have done?

- Because the abuse in this case was my brother and a priest, I needed and sought solace from the Church.

- The bishop should have been more open and honest about my concerns for my brother and should have become more informed about pedophilia and all its ramifications.

- When possible, particularly if the abuser is a family member, the family of the abuser should be strongly encouraged to participate in treatment with the abuser as their involvement is necessary for forgiveness and family healing.

- The bishop should have been more attentive and demonstrated more concern to the victims and their families by initiating ongoing communication.

- Compensation for incurred therapeutic expenses should have been offered by the Church.

I believe that there is a tremendous need for a national communication network among all the involved dioceses to assist and guide victims and families.

Part Two: One Victim-Survivor Responds to the "Five Questions"

1. What helped on my road of healing?

- Watching on television Anita Hill being questioned by the panel of senators who were **not knowledgeable** on the issues of sexual abuse. I felt they were trying to belittle her and no matter what or how they questioned her she stood firm. Her **courage helped me**. I felt that if she could take all of that in front of thousands of people I could start my journey of healing.

- Many books and articles on the subject of abuse. Also, some of the national programs and local programs on television that addressed this problem of abuse.

- Going to the V.O.C.A.L. conference *Breaking the Silence* that was offered in the area. The name is now changed to LINKUP.

- Sharing my feelings with others who have been victims/survivors.

- Friends who support me. They are like a network of support.

- My therapist -- especially when I was treated by a process called E.M.D.R. (rapid eye movement). I was stuck and these sessions were very powerful and I was able to get in touch with my feelings of abuse.

- This Lent our parish sponsored **Bread, Brother and Bible** evenings. I was one of the speakers on "faith experiences". When I told of my abuse and explained how and where I see Jesus in people and places, I felt like a heavy weight was lifted off of me. Several people came up to me and thanked me; some told me they either had been abused or they knew of someone. Some asked if I could give them some help by naming some books or where they could get a copy of The Healing Woman. Others just hugged me.

- When you are able to help another victim this gives me more strength to go on.

- **Without my husband's support I don't know how I could have healed.** Sometimes he doesn't understand but just gives me a hug. I know he is behind me.

- My daughter and my three sons who are proud of me for standing up to be counted. Each one gives me support in different ways. I know I will never give up.

- My sister who is also a victim/survivor from the same priest. She kept encouraging me to get professional help until, finally, I did. Her phone calls helped me.

2. What inhibited my healing?

- Thinking I could heal myself. Or that it happened many years ago and I kept suppressing it, "It might go away."

- I felt I did something wrong. What would people say or think about me?

- Who would have believed me when I was a teenager? My mother, grandmother, uncle, wouldn't understand. (My father was dead, that's why I didn't list him.)

- The strict Catholic school -- what nun could I tell?

- Years ago no one talk about sex, let alone sexual abuse.

- Now as an adult -- some friends and relatives tell me "It happened so long just don't think about it and it will go away."

- When some men give me a certain look - I feel abuse again or when one tells a joke or makes a sexual remark -- I feel abused again.

- When a person talks about something concerning sexual abuse that they read in the newspaper or saw on television and they make light of it or say ~"She asked for it." I can't understand this and want to correct them no matter where I am.

3. How has the Church helped?

- Pastor listened to me; gave me time - until I was finished.

- Pastor allowed me to cry; held my hand.

- Pastor asked me how he could help. Gave me a card with a therapist who deals with incest and told me he had sent other people there and that they were helped.

- Pastor told me he was sorry.

- Pastor told me if I wanted to talk again he would be there for me at any time.

- Pastor hugged me after asking if it was OK to do so.

- Pastor helped interpret bishop's letter - looked up certain words in the Canon Law book.

- Pastor assisted me in answering "a threat letter".

- Pastor went out of his way to greet me and ask me how I was doing.

VICTIMS-SURVIVORS (11-95)

- Pastor listened to my husband and helped him understand where I stood, etc., and how he could be helpful to both of us.

- Pastor was active in having an information evening concerning sexual and physical abuse at our parish. Our parish sponsored the evening and also offered and supported another evening the following year.

- Bishop listened to my story in a pastoral way.

- The Church as a whole needs to recognize that sexual abuse exists and offer help spiritually, financially, and provide loving care to the victim.

- The diocese pays for my professional therapy and also my husband's therapy.

- My friend who happens to be a bishop called me when he found out I was a victim and told me how sorry he was for me and wanted to apologize for his 'fellow priest'.

4. How has the Church prevented healing?

- When a victim reveals her/his abuse and the bishop listens but does not offer any help for the victim. In one case he told the victim the priest was not enjoying good health - had a heart condition. Also was retired, therefore, didn't have much power over him, and does not want to upset him.

- Did not prosecute the predator - allowed the predator to say masses in different parishes - funerals - etc.

- When victim told a friend who happens to be a bishop in another state, the bishop who is representing the priest/predator became angry and threatened to stop paying for the victim's therapy unless the victim apologized.

- "Gag" orders on the victim.

- Ask victim questions like - How depressed are you? Are you a practicing Catholic?

- The bishops (some of them) do not understand how sensitive the victim is. They are not educated on this issue of sexual abuse.

- The Church is listening to and getting advice from lawyers first.

- Too worried about 'scandal' and money.

- Bishops continue to use their power over the victim which is again a form of abuse.

- Keeping the abuse issue a secret, not informing the public who these men are by name so others are not victims.

- Puts either a time frame or limit on moneys for therapy. How does a bishop know?

- Tries to minimize the abuse - "You will outgrow this with the help of God". "I will pray for you". Many victims have a difficult time with that - they have been abused by someone who is/was representing Christ.

(Note: This victim-survivor did not respond to question five.)

Part Three: Another Victim-Survivor Responds to the "Five Questions"

1. What helped on my road to healing?

- The realization that I had the power to heal. That sounds pretty obvious, but it is an extremely hard battle for people who have-grown up thinking of themselves as powerless. For me, the key was the realization that my problems flowed from the decisions I made about myself after the rape. If I had seen the problem as the rape itself, I would have been powerless since I had no way to change what had occurred. That is why playing the blame game is counterproductive; it leaves you with no power whatsoever. So my healing was based heavily on changing the decisions I had made about myself when I was 10 years old - looking at every behavior in which I engaged to judge whether I flowed out of those original decisions.

- Rigorous self-honesty. It isn't any fun to look at your own life with brutal candor and accept responsibility for every stupid, counterproductive or self-destructive thing you've ever done. But that's what it takes. But the key here is self-honesty not self-judgement. Beating myself up what I had done would have only made me feel more helpless.

- Telling. This is taking rigorous self-honesty to the next level. Abuse thrives in an atmosphere of secrecy; so does self-abuse. Truth is an incredibly powerful weapon, personally as well as socially. Telling is terrifying for most survivors: "What will my family think? What will the neighbors say? Everyone will know that I was powerless." But telling is ultimately incredibly liberating. The innocent, after all, don't need secrecy.

- A good therapist. Hand holding and comfort of either the pastoral or secular variety don't change anything, at least for adult survivors. People need practical, no-nonsense therapists who will encourage them to think of themselves as adults with freedom of choice rather than as powerless children. Mediocre therapists are worse than useless.

- Demanding justice. I want to distinguish here between vengeance and justice. Seeking revenge is the act of a child. Seeking justice is the act of an adult. Demanding justice is a clear way of saying: Something awful happened to me that should not have occurred and I have the right to redress.

- Knowing that I was not alone. Since most of us assumed we were alone, and that the abuse was somehow our fault, meeting other survivors is tremendously important because it helps you to fully accept innocence. Clearly, telling is an essential prerequisite to this step.

2. What inhibited my healing?

- Fear of health. If you haven't been through it, you might have a hard time understanding how deep this fear is. The known is always more comfortable than the unknown and for the unhealed, health is the unknown.

- The absence of a roadmap. Because I did my inner work in isolation without knowing that anyone else had been abused - I had no one to guide me or accompany me. This has changed, of course. Today there are therapists expert in the problems of adult survivors of child sexual abuse, self-help books and support groups. They were not when I was struggling out of my pit.

- The lessons I had learned from the Church. Because I was raised in a pre-Vatican II environment, I received a hefty dose of training in what an innately sinful and wicked person I was. After the abuse, things got only worse. That message of sinfulness and the harsh self-judgement which accompanied it - was counterproductive. If you are inherently sinful, then why struggle to be good?

3. How did the Church help my healing?

This question is unclear and the lack of clarity points to a significant problem in the hierarchy's handling of the problem of child sexual abuse. What/who do you mean by "the Church"? I assume you mean the hierarchy, but I think it is dangerous to paint the hierarchy as "the Church." So let me divide my answer.

The hierarchy did nothing to help me and, frankly, I didn't ask for any help. By the time the priest's case went public, I had worked through most of my healing. The Church was irrelevant. And that was good. I feel fortunate that the fight with the Church for information and justice postdated my healing since it might well have distracted me from the work I needed to do.

Individuals were helpful. At the moment that I needed to rid myself of my anger at the priest, it was important for me to know that another priest was there to whom I could go to formally forgive the perpetrator. The priest, fortunately, said absolutely nothing. He kept his mouth shut and listened, which was precisely what I needed him to do. Too many clergy say all the wrong things at critical moments. Let me share a quick example. Two years ago, several of us went to visit one of the nuns who had taught us at our parish school. In the course of our conversation, she told us that the sexual assault thing (because of the numbers it was notorious in the parish) was "all part of God's plan." That's hardly what a survivor needs to hear: that God selected him or her for rape at the age of ten.

4. How did the Church inhibit my healing?

The Church created an environment which guaranteed that I would not tell anyone about my abuse for decades. Priests were held up on tall pedestals. Children were to be seen and not heard. The Church was a perfect institution. I knew, intuitively, that preventing scandal was imperative. That climate was precisely what created the major damage since it was what fostered my sense that the rape was my fault and kept me from telling adults who might have helped disabuse me of that conclusion.

5. What should the Church have done?

- The Church should have taught me about good touching and bad touching and that even people I am taught to respect might do bad things like touching me in the wrong way. This is probably the most important thing Church leaders can do today. If I had been taught those lessons - and I mean taught them as strict lessons - I would have told.

- The Church should have called the police the first time that priest was reported to members of the hierarchy as a potential abuser. The Church should never - ever - have put itself in the role of deciding what action to take with a priest accused of molesting children. That is a criminal matter that was to be left to the police. Failing to do so sent a clear message to people like me that the Church wasn't interested either in the truth or in protecting children.

- The Church should have been my ally in my quest for justice. When I first began looking for that priest, Church officials in that diocese refused to help me. When I hired a private investigator, they wouldn't help him either. When we many victims finally went public, Church officials put up every possible roadblock against our attainment of justice by hiding information and by lying. The Church is supposed to be a force for justice; refusing to offer help freely and openly to survivors seeking justice is a sin.

I want to add one more paragraph, which is a suggestion, really, that you turn the first two questions around and ask: What would help the Church heal itself from this problem? What inhibits the Church in its healing? The answers to both those questions are identical to the answers for individuals. The Church needs religious self-honesty in order to heal - and is inhibited from healing by self-delusion and fear of change. We travel, then, the same path.

CONCLUSION

As indicated in the Introduction to these reflections, AHCSA set out to fulfill an objective arising from its mandate and relating to victims-survivors. The ad hoc committee trusts that the foregoing will make a contribution to this area of pastoral care.

In handing on its work for consideration by AHCSA, the subcommittee helping the bishops - a group of Church professionals working closely with victims-survivors - spontaneously offered some final points for consideration. We recognize that it is an important principle in writing that nothing appear in the conclusion that was not somehow in the body of a report. We think, however, that you will agree that what follows is somehow contained in the reflections above. By way of conclusion therefore here are some final wishes of the subcommittee for victims-survivors' concerns as expressed to the ad hoc committee:

1. That we assure qualified assistance for the victim-survivor.
2. That we not underestimate the faith and understanding of our people.
3. That we be as open as circumstances allow, even to including the victims-survivors as part of the solution.
4. That with sound policies in place we make every effort to convey the message that it is not necessary for a victim to initiate legal proceedings in order to have access to the full response of the Church to the allegation.
5. That while exercising the sound stewardship and prudence required we avoid being unduly affected in decision-making by the fear of being sued.
6. That we reflect on the two questions as turned around by one of the victim-storytellers participating in our report: What would help the Church heal itself from this problem? What inhibits the Church in its healing?
7. Recognizing experience as the great teacher, that we consider what we have learned the last five to ten years: what would we have done differently?

REFLECTIONS OF A RECOVERING PRIEST

INTRODUCTION This article is a very personal document. I am speaking from my own experience. I am not an expert who distills scientific conclusions from the study of groups of sex offender/clergy. I am a priest and a sex offender. This article derives from what I have learned through reflection on my life. I do not claim that my assertions would necessarily be held by other sex offender/clergy. I speak from the perspective of 12+ years of recovery and I speak out of a great love for the Church.

I have organized this material around six headings that provide me the opportunity to tell you some of my story and offer thoughts and reflections on what I consider to be critical areas which you must consider in dealing with priests who are sex offenders. I hope that these reflections on my life story will be of some assistance to you in addressing the issue of sexual abuse by priests.

WHO AM I? I am the youngest of four children in my family. I suspect that my family was not particularly different from any other. I had a very highly idealized image of my family, thinking that in a way we were just like Ozzie and Harriet Nelson and the boys. It is only subsequently, after a great deal of counseling and reflection, that I have been able to identify the dysfunctions that existed in my family, namely in the areas of communication, the identification and expression of feelings, and in particular around some very secretive attitudes toward sexuality. I would suggest that my family background is not extraordinary. Rather, it fits the profile of moderately, and perhaps typically, dysfunctional family.

I entered the seminary at age 14. In many ways the seminary picked up where my family left off. The subject of sexuality remained largely unaddressed. When I was about 20 years old I realized that I was attracted to young adolescent males. Up to this time I had been able to characterize my attraction as some form of latent homosexuality. By age 20 it was clear that I kept getting older but the persons I found attractive remained 12-15 year old males. I was afraid to mention the nature of my sexual attraction to anyone in authority at the seminary because I feared that it would result in my not being ordained. There was no mechanism in place that would have invited me to reveal my personal struggle. I denied the fact of my desire for boys to reduce the internal dissonance I felt. I wanted very badly to be a priest. I also was very ashamed and frightened by my sexual orientation.

I was ordained in the mid 1970's and received an assignment to a suburban parish. Shortly after I arrived in the parish the pastor was incapacitated by a heart attack. It was during my five years in that parish that most of my acting-out behavior took place. I had engaged in some sexual misconduct prior to ordination, but it was of a less severe variety and very sporadic.

When I was in the parish, my sexual behavior ranged from inappropriate touch up to and including oral sex with one of my victims. My victims were boys, typically between the ages of twelve and fifteen. In the majority of cases, my behavior was masked by the pretense of wrestling.

During these wrestling matches, I would arrange to either rub my genital area against the boys, or be able to in some seemingly casual fashion, brush against their genital area. At that time I didn't believe that the boys would be aware that there was a sexual overtone to the wrestling. I suspect now, that in any number of cases they were aware to some degree or another that there was something wrong about the touch, even if they could not identify it as sexual. After my story became public, I presume that they were far more able to identify occasions on which sexualized touching took place. In the case of one of my boy victims, this inappropriate touch escalated to more conscious and overt sexual behavior. It was with this boy that I engaged in oral sex.

After my behavior became known to my diocese's officials, my bishop, who had known me for over ten years as a seminarian and as a priest, called me in for a private conference. He asked me the question, "Who are you?" It's an apt question, because my profile as a sex offender would be difficult to identify easily. I had a sort of "Golden Boy" image. When I was getting ready to leave my first assignment I was asked of my interest to be trained as a hospital chaplain or to teach at a local college, as well as at the local seminary. A chancery official asked if I would give any consideration to pursuing a canon law degree. People were unlikely to suspect that I was engaged in sexual misconduct because I seemed so very well put together. My highly developed professional skills blinded people to my acting-out behaviors and acted as a sort of cover.

I have been able to identify a number of elements that contributed to my sexual acting-out. The first of these was overwork. After my pastor had his heart attack, I began working extremely long days, usually starting at 8:00 in the morning and concluding about 10 or 11:00 at night. This compulsive drive to work was very destructive to me, and led to a great depletion of my energies. The depletion made me vulnerable to replacing those energies in inappropriate ways. My typical inappropriate way was acting-out sexually with adolescent males.

A second factor was my inability to identify and "feel" my feelings. I experienced feelings and emotions by associating with people who are involved in highly-charged emotional moments, such as birth, death, weddings, etc. When I was with people in very intense situations I felt emotions, but that is not the same as having one's own feelings. My own emotions were hidden from me. It wasn't until I entered therapy that I was able to identify and experience feelings such as anger, fear, loneliness, and anxiety.

A third element that led to my acting out was poor intimacy skills. I had many friends, but I never felt capable of revealing to them my struggle with my sexual attraction. I never felt that I would be accepted if I shared this aspect of my life. My congregation became my circle of friends and my source of intimacy. Although I thought of many parishioners as friends I always remained their parish priest which was the core of our relationship. As a result I was never sure when I was "on duty" and when I was socializing. There was an intrinsic inequality to these relationships which militated against true intimacy. As social events with parishioners piled up my social life developed into a whirlwind, a further source of depletion. Much of this activity took place in family settings that gave me access to boys. I turned my congregation into my whole world, and in the process let go of people who were my peers, old friends, college friends, etc., who would have been more

appropriate candidates for intimate friendship.

These elements led me to cross my boundaries, my natural sense of appropriateness. I never wanted to hurt any of those boys. But I was depleted; I overworked; my feelings were not adequately expressed and were running rampant within me; I distanced myself from friends to whom I might have expressed these feelings or dealt with the depletion; my intimacy skills were limited. I could not maintain my boundaries and sought something that would make me feel whole. I sought to have my depletion filled up via the sexual activity with the boys.

I would like to be clear that my sexual orientation toward children pre-dated my ordination and is a deep-seated psychological reality of my life. But it was the elements listed above which threw that orientation into high gear and weakened the boundaries that might have kept it from being acted out.

INTERVENTION My diocese became aware of my behavior when my primary victim wrote a letter that was addressed to me but was intercepted by his parents who shared it with the diocese. This letter detailed some of the abuse that had taken place. I was confronted with this letter by diocesan officials and asked about its truth. By the grace of God -- and it was truly a moment of grace -- I admitted that indeed what was alleged was true. I was not in parish assignment at the time that the allegation came to light because I was scheduled to go away for further education. My diocese decided to continue with the plan to send me off for this education, but also made sure that I would be able to get therapy. Because this took place in the early '80's, when the treatment of sexual compulsivity was still in its infancy, my first treatment was not particularly effective.

A year later I was able to get involved in a therapy which was much more effective. There are other papers being written by persons far more competent than I to describe what makes for good treatment. I would simply mention that my therapist combined psychological insight with spiritual sensitivity and a demand that I accept responsibility for my behavior. These three factors have been key to my recovery.

Approximately six months after the diocese confronted me about my inappropriate behavior, the family of my primary victim informed the civil authorities of the abuse. Today, my diocese would alert authorities and initiate civil intervention.

After the civil intervention I withdrew from school and was assigned to an institutional, administrative job. Some very clear and specific limitations were placed on me: I was to have no pastoral contact with minors; I could not be physically present in the locale in which the abuse took place without prior permission from my diocese; I would meet with a member of the diocesan staff approximately once a month; I would have no parochial assignment or primarily pastoral assignment (such as hospital ministry), and I would continue in psychiatric therapy and spiritual direction. I would be able to serve as a chaplain to a community of religious women. In addition, I would disclose the history of my sexual activity to one or more of the persons I was living with, so that there would be accountability for my behavior in that locale.

The intervention is the first step in helping a sex offender recover. It is difficult to do, but it begins to set him free from the unbearable burden of keeping his behavior secret. A successful intervention requires complete honesty and compassion on the part of those who are confronting the alleged offender. A straightforward presentation of the allegation is best. While it was painful to have my sordid behavior brought into the light, it was not deadly. The kind concern of the officials who confronted me kept me from slipping into despair while letting me know that I could not continue as I had before.

It has been asserted, and I would fully agree, that victims have the right to expect a good response from a bishop when they make an allegation; they have a right to have their story believed, they have the right to an apology for harm done; restitution ought to be made, and there should be an assurance made that there would be prevention of any further misconduct by the offending individual.

By the same token the offender has a right to a good response from the bishop. He has a right to have his story believed until it is disproved and a right to a careful and fair investigation of any allegations made against him. He has a right to an exoneration if an allegation proves false, and he has a right to treatment.

A good intervention serves justice by making the perpetrator of abuse/exploitation accountable for his behavior and assuring the victim(s) that there will be no further misconduct.

THE PROCESS OF RECOVERY Recovery is a life long process and effective therapy is the crucial first step. I believe that there are a number of elements that are key for a good recovery after the completion of treatment. The first element is brutal honesty on the part of the recovering cleric. He must be willing to admit to himself and others exactly what is going on inside him in terms of fantasy, sexual attraction, etc. even if such an admission is painful or embarrassing. Only by being completely honest can he know any serenity. Secondly, he needs to have professional counseling and spiritual direction available to assist him in intervening early and effectively on the forces which would attempt to erode his recovery.

A third element is support from fellow clergy or other persons who would have a relationship with him of equal power. This support could come from structured groups as well as from authentic, close friendships. I am a member of three support groups and find them invaluable tools for my recovery. They are places where I can say exactly what is going on in my life with the assurance that I may be gently challenged but I will not be judged. The other members of the group know what I am struggling with because they have had to deal with their compulsivities. I have also developed intimate friendships with men and women which have helped me in many ways to maintain my recovery.

Fourthly, I believe that a consistent eucharistic community is critical for the recovery of a sex offender/priest. It is very difficult to retain one's identity as a priest if one has no community with which to celebrate. The opportunity to preside at the liturgies of a small community of religious

women has helped me to appreciate what a great gift ordination is. I am motivated to work hard at my recovery in order to avoid jeopardizing this gift.

The final element in recovery is meaningful work related to the mission of the Church. Like the opportunity to preside at Eucharist, an appropriate apostolic assignment is critical to the retention of priestly identity. I have known a number of priests who have returned from treatment with a professional evaluation indicating that they could return to a limited and safely-boundaried ministry, but who have found there is no work available for them. I have watched them lose touch with priesthood and become disillusioned. This is a great loss to the Church and a danger to all concerned. I believe that they are more at risk to reengage in inappropriate behaviors because they feel they have little to lose.

Diocesan Officials have a crucial role to play in recovery. They have the right and responsibility to demand an accounting of how the recovering priest is working his program. I check in regularly with an official of my diocese. It is a time when I reflect on various aspects of my life and submit the progress of my recovery to the judgment of an authority above me. This experience was humbling but also important for recovery. The delusion of being able to completely control my life was part of what got me in trouble. Having to submit my life to the judgment of another helps me to avoid an imbalance.

ATTITUDE TOWARD PASTORAL ASSIGNMENT I believe that the Church should make a reasonable attempt to find a suitable and safe ministry for an offender who is successfully recovering. When I first completed treatment, I was very anxious to return to parish ministry. I loved parish ministry, was good at it, and felt that any ministry but parish ministry was inadequate. In some ways I believed that if I could not be returned to parish ministry I would never fully be a priest again. It was as if parish ministry was the source of my happiness and well being, and if I couldn't be a parish priest I could never be completely happy.

About six years after my treatment began. I came to realize that my well being wasn't dependent on my assignment. Rather it was dependent on how I was doing in maintaining a good relationship with myself, with God, and with other significant human beings in my life. If those relationships are in good shape, I am a happy man; if those relationships are in some way impaired or in bad shape, then I am not happy, and no assignment, including whatever a "perfect" assignment might be, could make me happy. This was a significant shift in my own recovery process. I believe this could serve as a good indicator of a person's stage of recovery: if a person is looking for something outside of himself to make him happy, he is not doing very well in his recovery. Happiness comes from within.

It is easy for me to get far too involved in the work I do. This is true of the administrative work I currently do, and a parish assignment might make me even more vulnerable to getting over-identified with my work, crossing the boundaries of good self-care and depleting myself, which would in turn make me vulnerable to compulsive behavior. Even if this behavior did not lead to sexual acting-out, it would be unhealthy.

I am quite clear, now, that no assignment is more important to me than my recovery. Being a parish priest is no longer of paramount importance; having a ministry in which I can live safely and maintain my recovery is.

I feel that the criteria for a proper assignment are as follows: First, the assignment must be safe. For instance a pedophile should not be given an assignment intrinsically oriented to children. The assignment needs to be different from the offender's original setting. If a person was in a parish setting, that's not the first place to put the person back, because the elements that led to the acting-out, such as I described earlier, might well re-form and overwhelm the fledgling recovery of the offender. Secondly, for an offender to be ready for some kind of reassignment, he should have demonstrated that he knows how to maintain good boundaries in relationships. Thirdly, a proper reassignment requires good disclosure, and this should be as public as possible. If the person is going to be working with a staff, that staff should have some sense of his background, so that they can be part of the system that helps him maintain his boundaries. The offender is responsible for maintaining his own boundaries, but alerting others to help him maintain them is a good external support for his recovery.

If you as a bishop are not comfortable in reassigning one of your priests, you should let him know that. An honest, straightforward explanation of your reasons is all you need give. It would be better for you to tell him up front that there is no hope for any assignment, or for the kind of assignment he may be requesting, rather than to string him along and be vague. It does no one any good to be vague. In my opinion, a choice never to reassign someone because they engaged in some kind of sexual misconduct is far too drastic. I believe there must be room for some kind of reassignment, but those reassignments have to be carefully made so that they can be safe and appropriate.

CONSEQUENCES When I was acting out sexually, I can remember having a number of fears about what would happen if my actions ever became known. I was afraid that if my friends knew that I was sexually abusing boys, they would reject me, and that my family would as well. I feared that the diocese would throw me out of priesthood. I feared that if the police got involved it could lead to court action and to jail. And my greatest fear was of public disclosure of my behavior.

Each and every one of these consequences happened to me, and each and everyone had a value. I discovered that good friends and family could still accept me, even though they knew of this horrible behavior that I had been involved in. I learned that my friends and family love me for whom I am even if I did bad things.

My diocese did not reject me or kick me out of priesthood, but rather helped me to get treatment and to live within more appropriate boundaries. I learned that my diocese valued and cared about me, even though I wasn't perfect.

The police and the courts got involved in my case and I was sentenced to a period of time in jail as well as to lengthy probation. During my time in jail I learned the meaning of unconditional love for the first time in my life, when many, many people from all parts of my life wrote to me and told me that even though they couldn't imagine why I did what I did, and did not approve of it, they still loved me. The words of God's love and forgiveness that I had been able to proclaim to many penitents and others seeking solace, I now heard for the first time for myself. The jail sentence was also very liberating because it was a concrete and definite punishment for my misconduct. I am able to say to the world, "Society set a price for what I did and I have paid that price."

Finally, the press became aware of my misconduct and made it widely known through newspapers, radio and TV. The public disclosure of my behavior was difficult, but it also set me free, because now I had no secrets.

I believe that there is a tendency to want to shield offenders from such consequences, but I would recommend that you shield them from none of these, because each consequence in their lives will have a value. I would also suggest that you avoid secrets. Don't help an offender to hide, and don't hold back information from affected parties. By putting information in the public sphere, by making the truth known, all parties -- particularly the offender --are helped to recover. If we keep secrets because we want to protect someone or spare someone, it leads to more pain.

REFLECTIONS My first reflection is a theological and spiritual one. It is this: that our belief in the resurrection of Jesus should lead us to believe that recovery is possible. The gospel is full of Jesus' proclamation that he has come to save sinners. The process of recovery is a testament to the healing power of God's love. To deny the possibility of recovery is to deny our belief in God's power to make all things new and whole. If we believe that recovery is possible, than we should not be afraid to restore recovering priests to appropriate ministries.

Secondly, I believe that the ultimate healing of the issue of sexual abuse in the Church will require just and appropriate treatment for the offender as well as the victim. The Church needs to deal with all parts of the system in order for true healing to take place. It is a temptation to make a scapegoat out of the offenders and to throw them away. But this doesn't heal the wound. It may appease certain angers; but it doesn't model what we believe about ourselves as the Church and as the People of God.

During the course of my recovery, I have had the opportunity to help a great many people by telling my story in person to various professional groups of various Church denominations, and to write my story in articles. I have joined with victims, and persons who have not experienced either victimization or offender status, in educating persons in authority in denominations as well as professionals who work with victims and offenders. I have found that many persons have been drawn to me because of my brokenness. My public sinfulness has made me more approachable, even for some who have experienced abuse at the hands of others.

Because I was not thrown away, I have been able to take what I have learned from my own recovery and make it a tool for healing. Recovering offenders can be a great resource for the healing of our Church and our society. We must not throw this resource away.

I would like to conclude my reflections by telling the story of an amazing reconciliation I was able to have with one of my victim who is now an adult. This young man was 16 years old when I engaged in sexually inappropriate touch with him. It happened over a very brief period of time and I masked the behavior by making it seem like it was part of wrestling. While I did not maintain a very close relationship with this young man, I knew his family and so remained in some contact with him over the intervening years. A couple of years ago, he asked me if I would be willing to baptize his child. I knew that I could not do that until I had the chance to discuss explicitly with him what I now knew to be my sexually inappropriate behavior.

I arranged an opportunity to talk with him, and with great nervousness, reminded him of the situation in which the abuse had taken place. I told him that from my point of view that behavior had been abusive, whether he had been aware of it or not, and that I wanted to apologize for it. I also suggested that if there was any healing work that he needed to do, I would be happy to direct him toward those resources. Finally, I told him that if he did not want me to be involved in any way with the baptism of his child, I would fully understand, and would accept whatever other consequences might result from my acknowledgment of my past inappropriate behavior.

After I had hesitatingly choked all this out, he looked at me, smiled and said, "I was wondering when you would get around to talking about this." He went on to explain that when my case became public, he realized that the behavior with him had been sexual. He had uneasy feelings about it, but he could never decide why it seemed odd to him. The public disclosure of my sexual offense made it clear. The consequences of my jail time, and his knowledge that I had worked very hard at my recovery, alleviated the anger that he first felt about the abuse. He saw my readiness to admit to him that I had abused him, as a sign of my further recovery. He reiterated his desire to have me baptize his child.

This is an extraordinary story of reconciliation. Most offenders would like the opportunity to be reconciled with their victims. The initiative for reconciliation, however, must generally come from the victim(s). The timing of reconciliation is difficult to judge. Victims involved need to be ready to express and release the feelings of hurt and betrayal. Offenders need to be ready to admit their guilt, seek forgiveness, and make amends. To attempt reconciliation without the above conditions in place is to court disaster, but to refuse to consider reconciliation is a denial of spiritual life.

The wounds' of sexual misconduct are painful and destructive but they are not perpetual or intractable. Let us maintain a spirit of hope that by proper and fair treatment of offenders and victims, the wounds of sexual misconduct can be healed.

REFLECTIONS ON WORKING WITH PROBLEMS OF SEXUAL ABUSE

Before assuming the role of Vicar for Priests in the Archdiocese of Chicago in October of 1991, I had spent most of the previous 34 years of my priestly service as a parish priest. Coming from that world, I was ill prepared emotionally and spiritually to deal with cases in which my fellow priests were alleged to have sexually abused minors. In a vague way, I knew the issue existed. But I had kept the problem at a distance, hoping vainly that it was not true and, if true, that it was under control and would quickly go away.

From experience, of course, I was aware that all priests have to struggle to integrate celibacy into their lives. I recognized that, in the process, priests make mistakes and may even harm others in they're all too human efforts to come to terms with their own sexuality. I presumed naively that the search for sexual wholeness took place within adult relationships. Shortly after I took over as Vicar of Priests, the scandal of clergy sexual abuse of minors became public here in Chicago. Initially I had difficulty dealing with the fact that some of my brother priests could have engaged in sexually harmful acts with minors. How could these decent men, many of whom I knew well, do such tragic things?

As I met and listened to the victims of the sexual misbehavior, I was touched by their terrible pain, pain which I was to discover would not go away. I was angry and my anger grew as I saw the rippling effects of the abuse on the victims and their world, on parishioners, on the Church and priesthood itself, and on my own consciousness.

Early on, it was difficult to be very understanding with the priest perpetrators. When I encountered minimization and denial on their part, I was dismayed. And yet the Cardinal had named me to serve as Vicar for Priests, the "pastor for the priests" themselves. I was supposed to walk with priests in a non-judgmental way through the difficulties they were facing.

The task was formidable. At one and the same time, I found myself working with victims and their families, with the perpetrators and their friends, families and parishioners, with insurance people, attorneys, therapists, public relations people, with the supervisory and monitoring people for the priests - and trying to be sensitive and understanding through it all. My loyalties were torn and it showed.

Support Blossomed

Fortunately I had a lot of personal support. From the parish where I had pastored for then years, there came promises of prayers. At the parish in which I had taken up residence, I found encouragement and positive support, especially from the priests with whom I lived. They must have made me and my morale their special project. In typical priestly fashion, they were not slow to point out my foibles and make fun of my sometime pessimistic outlook. My personal friends, priests and laity alike, and my family rallied around. They didn't always understand the nature of my work, but they understood me.

The other officials of the archdiocese, including the Cardinal himself, were most cooperative and reinforcing. The Archdiocese and its personnel were sincerely trying to face up to the evil and the terrible scandal that had descended on us all.

I must put in a special word of commendation to the archdiocesan attorneys and legal consultants. In our efforts to deal with the crisis, they consistently reminded us of the need to be pastoral and not to allow the legal and insurance ramifications, as importantly as they were, to drive our response. Unfortunately when our efforts to face the problems of sexual abuse drew criticism, the attorneys unjustly came in for the brunt of the attacks.

Growing Distrust

One additional negative aspect of the Vicar for Priests' involvement in the sexual abuse cases was that the Vicar, originally appointed to help priests, was more and more being seen as the "judge, jury, and jailer" in these highly publicized situations. I sensed a noticeable decline of trust among priests for the Vicar's office itself, and, in a way, for me personally. It was understandable. The abuse was claiming another victim.

Creative Solutions

Two events helped to turn that deteriorating situation around. The Cardinal appointed a co-Vicar in June of 1992. The newly named Vicar was a man of great sensitivity and was deeply trusted by his fellow clergy. We agreed that he would concentrate more on pro-active work with priests and I would hang in with the misconduct issues. Having another priest in the office was a blessing. I could talk to someone, face the bad news, critiques my judgments, and share my sadness. Nevertheless, I must say that it still didn't take long before the new man was also drawn into dealing with the misconduct.

Then in September of 1992, the Cardinal published policies and procedures for a new approach to the problem of child sexual abuse by clergy. A Victim Assistance Ministry office was established. The Cardinal also named an independent Professional Fitness Review Board which proceeded to hire an administrator. All this was in place by February of 1993. The presence of those policies and procedures as well as the establishment of the new structures changed my role considerably.

The most disheartening aspects of my work were shifted. The Fitness Review Administrator received and processed the allegations, and the Victim Assistance Minister worked directly with the victims of the abuse. I was still involved with the priests, but my more defined role was to accompany them through the whole process.

As I walked with my brother priests in facing their difficulties, I found myself being more sympathetic, not to the misconduct itself, but to the human beings behind those actions. As a result I think I understand the nature of their misbehavior and the men a bit better now.

Lingering Fears

Sometimes it disturbs me to think that, with all the publicity that has accompanied clergy sexual abuse of minors, similar actions may possibly be going on at this very moment. We may not know about them for years to come. Nevertheless I do believe that one of the positive aspects of the public airing of the scandal in the media has been an increased awareness among priests about observing professional boundaries in their own contacts with youth.

Over and over again, priests tell me they are really more conscious about their relationships with young people than they ever were before - even, they sadly admit, to the point of mild paranoia. The prudent caution is good. The paranoia is not. I hope we will soon strike a good balance again, for the sake of the people, for the sake of the young people themselves.

Recently I returned to my former parish for a funeral. After the funeral Mass, there was a reception for everyone in the gym and I had the opportunity to renew many old friendships. At one point, the mother of a second grader came up to re-introduce her son to me. We had a delightful few moments together. She came back a short time later - without the lad - to tell me in a most sincere manner that I had no idea what an impression I had made on her son. She described how he wanted to come to the funeral service just to see me. And this after almost four years of my absence from the parish. I tell the story as a slight indication of how important we priests may be for the young, even when we are unaware of that influence.

Looking Back

Over the past four years, I have come to a better understanding of the extent of the evil of clergy sexual abuse. I recognize also the almost irreparable hurt and pain inflicted on victims. At times, I hear good people unwittingly downplaying the effects of clerical sexual abuse on victims, wanting victims to "forgive and forget" and get on with their lives. They point to the good things the priest has done as mitigating the evil of the abuse. But it doesn't work that way.

I have also learned humility in the face of the vulnerable, human, sinful side of all of us priests. I see a reflection of my own weakness and humanity in them. Though I deplore what they have done, my heart goes out to them in their now almost shattered dream of priesthood. A few men have been able to return to limited types of ministry where there is no danger to children. As I look into the future, I know that some kind of monitoring will have to be in place perhaps for the rest of their lives. That saddens me, yet I recognize its necessity.

An Encouraging Word

Over the past three years, many of the men and women who do my type of work in dioceses throughout the country have kept in contact. We have formed an unofficial network that has been very beneficial. We have even met informally at Mundelein, Illinois for three summers now. These annual August overnights are stimulating, and provide opportunities for the exchange of information,

insight and wisdom. We share the downside of our work, but also laugh a lot; we ultimately reassure ourselves that we're not alone in all this.

The Whole Church Benefits

Our work is good for the Church, I think. Priests have been the cause of much pain and suffering. By our labored patience and non-judgmental understanding and our willingness to keep at it, we can atone in some small way for that evil

In my experience, most victims do not want their situations aired in front of the world. They routinely want the problem to be handled by the Church in a pastoral, confidential, yet honest way. They seek healing and the chance to go on with their private lives. Having shown great courage in coming forward in the first place, they have every right to expect that courage to be respected and acknowledged.

I believe that victims of sexual abuse have been helped, far more often than most people know. I am proud of the way the Church is continuing to assist the victims and the priests who have been the victimizers. We Vicars, personnel people, and administrators have had some small part in the Church's response. That has made it all worthwhile.

Patrick O'Malley, Vicar for Priests
Archdiocese of Chicago

Will Priests Sexually Abuse After Treatment?

James J. Gill, S.J., M.D.

Every bishop who has sent one of his priests to a hospital or clinic for psychiatric treatment related to sexual abuse faces a moment of crucial decision making when the patient is discharged. The simple but difficult question he must ask himself is "What do I do with him now?" The professionals who provided the institutional care can assist the bishop by reassuring him that the priest, having complied well with the treatment program and demonstrated that he has benefited from the services rendered, is now ready to return to the diocese. They can advise the bishop about what he can do to contribute to the success of their patient's "aftercare" program, and they can recommend that the bishop not reassign the priest to ministry that will place him in contact with children or adolescents if his diagnosis was either pedophilia or ephebophilia.

What the bishop will never hear from the treatment team is that the priest in their care has been "cured". Most often, what will be reported to him is that the patient is "in recovery", and that he will stay so (just as a successfully treated alcoholic is considered to remain) for the rest of his life. One of the implications of this message is that there will always be some chance that the sexual offender will revert to his former misbehavior, since the possibility of recidivism can never be completely ruled out. This absence of a guarantee inevitably leaves the bishop in a state of uncertainty as he contemplates the risk he faces in considering what assignment, if any, to give the priest whose therapy-supported self-confidence is likely to exceed the bishop's

degree of certitude that reassignment is a good idea at the present time.

The question bishops are certain to ask at such a moment is "What are the chances of this priest repeating his abusive behavior?" A statistical probability is what they are seeking; only this can logically determine their degree of confidence in the choice they make. But statistics related to the recidivism rate of priests treated professionally as sexual abusers are not readily available. This fact was discovered with some surprise and disappointment when the bishops' Ad Hoc Committee on Sexual Abuse began its fact-finding work this past year. Published scientific literature deals with recidivism among the general population of sexual offenders, but not specifically among priests. Moreover, the reports available usually fail to distinguish between the relapse rate among pedophiles and that among ephebophiles, a deficiency that is regrettable in view of the fact that the majority of priest-offenders are currently being diagnosed as ephebophiles.

Search for Useful Information

Aware of the fact that in some dioceses bishops who are reluctant to gamble on assigning post-treatment priests have provoked resentment among the unassigned as well as their colleagues and friends (who regard them as "warehoused"), the Ad Hoc Committee sought a way to provide decision-making bishops more help than they can get from published scientific literature. The Committee believed that this could be accomplished by turning to the institutions that offer treatment for priests, and asking for information about recidivism among their satisfactorily treated and discharged patients. A consultant to the Committee was assigned to obtain this

information from a representative sample of treatment centers. His plan was to contact by phone the director, researcher or clinician who could report whether follow-up studies have been done at that center to determine the recidivism rate among Catholic clergy. Eighteen hospitals, clinics and other treatment centers were selected, with the intention of arranging on-site visits for in-depth conversation about their clinical experience with priests, if such visits seemed warranted.

The phone conversations took place during February and March of the present year. Unfortunately, these yielded the generally disappointing information that very little record keeping and research is currently being done on priest-recidivists. Spokespersons for several of the centers contacted gave helpful replies, and a few sent by mail some statistical data that supported what they reported by phone. The harvest of available information, however, was so sparse that no on-site visits appeared warranted. But it should be noted that those who shared with the inquirer the limited data they possessed were uniformly generous with their time, observations, clinical expertise and ideas about the projects the Ad Hoc Committee is undertaking.

Ultimately, most respondents agreed that it would be useful for treatment centers along with bishops to know more than is currently understood about recidivism among priests treated for sexual problems. The research that would provide this data, many said, would be time-consuming and rather expensive. Moreover, they suggested, it would be best accomplished through collaboration among the largest and most experienced treatment centers, which could pool their data bases and then make widely available a body of potentially very useful information about relapse rates among priests diagnosed as either pedophiles or ephebophiles.

Some Available Data

Several of the institutions contacted have already begun to research the issues inquired about by phone, and several others are hoping to share their own clinical data with these centers. Published already (in 1991) by psychiatrist-researcher Fred Berlin, M.D., and discussed with him by phone recently, is a report presenting data about recidivism among pedophiles treated at the Johns Hopkins University Clinic. Among a group of 173 patients who had molested minors, undergone three years of treatment, and were then discharged from the Clinic as "treatment compliant", and after an average period of 3.19 years post-discharge, only 1.2 percent had become recidivists, that is, had become involved in criminal sexual behavior again. In a related article (also published in 1991) on "Media Distortion of the Public's Perception of Recidivism and Psychiatric Rehabilitation", Berlin reported that "criminal sexual recidivism for treatment-compliant pedophiles has been less than 3 percent."

For the sake of comparison, it should be noted that another study, reported by Marshall and Barber (1990), found recidivism to occur at a rate of 17.9 percent and 13.3 percent at four year follow-up for treated heterosexual and homosexual pedophiles respectively. These researchers also used "official plus unofficial sources" to establish the relapse rate among untreated sexual abusers of minors at a significantly higher 42.9 percent.

None of the studies just mentioned made any distinction between offenders who were pedophiles (their sexual arousal is to prepubescent children) and those who

were ephobophiles (their sexual arousal is to postpubescent teenagers). All the patients in each study were labeled as "pedophiles" and given similar treatment. Members of the clergy who might have been among those patients were not studied or reported as a separate sub-group.

A small number of treatment centers contacted by phone reported keeping track of priests treated and recidivism rates among them when the condition for which they were institutionalized was either pedophilia or ephobophilia. One of these, a hospital, quoted a recidivism rate of only 1 percent after discharge that had occurred one to four years before the study. Another hospital reported success in its treatment of priests by keeping the recidivism rate down to less than 3 percent, measuring back as far as eight years from the time of collecting its data. (They had treated about the same number of pedophiles as ephobophiles during the years studied). Other centers said they had been treating at least four times as many ephobophiles as pedophiles in recent years.

Additional Information Obtained

Among the interesting pieces of information collected by phone from the treatment centers contacted were the following

- clinicians believe that both self-reports by patients and clinical opinions of therapists will underestimate the incidence rate of recidivism
- some clinicians believe there is no great risk in assigning to ministry most treated priests who are compliant with their treatment and aftercare programs, as long as they are not assigned to work near teenagers or children

- priests who are "warehoused" after discharge from a treatment center are likely to experience isolation, depression and anger which can precipitate regression into sexual misbehavior
- some priests who have been treated for abuse of minors are active sexually after discharge, but only with adults
- several clinicians say that in their experience the vast majority of recidivists are pedophiles, not ephebophiles
- in some centers where priests are treated, the diagnosis (sexual abuser) has been disguised; as a result, accurate statistics are impossible to obtain there
- many of the centers contacted by phone have treated too few priest-molesters to develop significant statistics
- in some centers, the sexual abusers of minors are not separated out statistically from other types of sexual offenders, such as exhibitionists
- no center has at the present time adequate data to determine which type of treatment is most effective with which type of sexual abuser
- a number of the centers contacted by phone do not treat priests who have sexually abused minors (they refer them to other centers)
- most of the centers contacted have simply not collected data on recidivism, research not being an active element within their institutional program
- a very high rate of treatment success is found where the priest is an ephebophile, has molested only once or twice, and acknowledges his sexual misbehavior
- the most successful centers are those with comprehensive programs and the best trained and experienced staffs in treating sexual offenders
- some of the centers contacted have not been treating priests long enough to

- many centers keep track of their priest-patients and others patients only while the patients are in treatment there; after discharge, they refer their patients back to the care of the therapists who treated them before admission, and there is no further contact with them
- it is a clinical impression, not convincingly established by research, that the longer the period post-discharge the more likely is recidivism to occur
- several clinicians pointed out that the relapse rate would be expected to be different for discharged priests who live in a highly structured and supervised setting (such as a monastery) as compared with that of priests who live alone, in an apartment in a large city, and with no assigned or regular occupation
- the several studies reported by phone were not the type in which matched control groups (untreated) are used for comparison; neither were groups treated in different ways (modalities) compared for recidivism in any one treatment center
- most of the spokespersons for the centers agreed that follow-up studies which have lasted only a few years may be of very limited value

Possible Steps For Bishops

- (1) Bishops could be informed that a number of treatment centers have a remarkably low rate of recidivism, especially among epebophiles. This might result in increased hopefulness about the prospect of giving ministerial assignments to priests who have completed treatment in these centers.
- (2) Bishops could encourage and support on-going collaboration in doing research

and sharing data bases among centers where priests are treated for sexual problems.

(3) Bishops could promote and attend meetings in which clinicians and researchers from the leading centers where priests are treated would design research projects that would identify (a) which priests are the best candidates for successful treatment, (b) which treatment modalities are likely to be most successful with which patients, and (c) which aftercare programs are most likely to prevent recidivism.

(4) Encouragement and support could be given by bishops to the establishment and maintenance of an adequate number of long-term residential centers where post-treatment priests who cannot yet be assigned within the diocese can be given a home, spiritual care, psychological support, educational opportunities, fraternal support, etc., in order to prevent frustration, depression and recidivism. A healthy, balanced style of life would be cultivated, and results could be measured in terms of relapse rate over a long period of time.

(5) Bishops could help prevent anger and resentment on the part of unassigned priests, their colleagues, and friends by making it clear that in seeking help in their decision making about post-treatment reassignments, they are not just listening to lawyers and insurance companies. Bishops could make it known that they are consulting the professionals who have treated their priests and are giving consideration to each case uniquely, rather than simply applying general policies. Furthermore, bishops could make public their recognition of the fact that statistics are not nearly as important to consider as the prognosis professionally determined in light

of the individual priest's frequency and manner of sexually abusing, response to treatment, risk factors, strength of motivation, etc.

(6) Bishops could help to inform the laity that many professionals in the field of mental health care are agreed that the majority of priests who have abused minors sexually are able to be treated successfully, and that most are able to be assigned to some form of ministry again -- as long as there is close supervision, together with provisions that will keep them apart from children and teenagers.

(7) Bishops could be informed that many clinicians believe there is a significant difference between pedophiles and ephebophiles, with implications for success in treatment, rate of recidivism, and feasibility of post-treatment assignment. Current clinical experience would seem to indicate that arrested social and psychosexual development that is manifested by most ephebophiles is far more likely to be treated effectively than the severe psychopathology motivating predatory pedophiles.

(8) If bishops or others in their care ask the question, "Does treatment help our priests?" or "Is it worth the cost?" , it may help to remember that it has been reported in the Harvard Mental Health Letter (March 1994): "The recidivism rate for untreated pedophiles is about 50 percent in homosexuals and 35 percent to 40 percent in heterosexuals". By contrast, as mentioned earlier, several centers where priests are treated for sexual misbehavior, including pedophilia, report that they have a lower than 3 percent recidivism rate after treating both homosexual and heterosexual priests.

(9) Bishops could encourage not just treatment centers but government research agencies, such as the National Institute of Mental Health, to use all possible resources to gain a more complete understanding of child sex abuse, its treatment and prevention, and to teach professionals (including priests and seminarians) to recognize and respect sexual boundaries, for their own well-being as well as that of those whom they serve.

(10) Bishops could be told that many of the professionals contacted by phone in the preparation of this paper expressed their appreciation and gratitude for what the Ad Hoc Committee on Sexual Abuse and the N.C.C.B. are doing in order to help solve the problem of sexual abuse, not just as it relates to priests, but to the Church and the American public at large.

**SEXUAL ABUSE AND THE CATHOLIC CHURCH:
AN INSURANCE VIEWPOINT**

by Michael A. Intrieri
Catholic Mutual Group

Background

The purpose of this paper is to provide some insight into the problems experienced by the Catholic Church regarding sexual abuse, from an insurance perspective.

Priests/ministers, doctors, policemen, firemen traditionally have been examples of positions considered to deserve unquestioning respect. In the Catholic Church, the priest has always been considered someone who was called by God to do God's work, possessing special qualities to do that work.

Society has changed greatly over the last thirty years. There is less respect for authority figures. Sexual matters, formerly deemed taboo, are now spoken of freely.

Sexual abuse cases against priests are somewhat analogous to medical malpractice cases against doctors. Medical malpractice was virtually nonexistent until our social attitudes changed. Like priests, doctors were usually revered, looked up to by people who would not dare question their judgement. However, doctors too are now seen as fallible people capable of mistakes. The Catholic Church is in a similar situation today with sexual abuse and, in particular, with child sexual abuse.

In addition to the vanished social attitudes that prevented people from seeking to make a claim against a religious organization, historically the Church also enjoyed protection against lawsuits through what is termed the charitable and religious immunity doctrine. Now, however, not only are individuals allowed to sue and are not reluctant to do so, but the Church is actually becoming a very large and visible target for plaintiffs and plaintiffs' attorneys.

Legal arguments have been made against the Church in essentially three ways. First, the legal doctrine of respondeat superior has been argued in a number of jurisdictions. Essentially, this term means that the master (employer) is responsible for the actions of the servant (employee). Fortunately, in cases involving the Church the courts that have heard this argument have ruled against its applicability.

The second and third theories of liability advanced are that the Church is liable due to negligent hiring and/or negligent supervision of an employee or agent: that the individual's superior either failed to ascertain the background of the individual at the time of hiring or became aware of some possible problems while in their employment, thereby giving cause to allege that the perpetrator was being improperly supervised. The real issue here is foreseeability. Did the employer know of,

or should the employer have known of, the alleged perpetrator's propensity to commit such acts?

In the commercial or non-church world, most employers would not be held responsible for employees' actions that are clearly outside the scope of their duties. However, this too is changing with the advent of sexual harassment claims. Also, sexual abuse claims are not limited to the Catholic Church. There are probably as many, if not more, claims being experienced by other denominations.

The Church is also vulnerable due to the previous ways of dealing with the abusers, based on the medical and psychological knowledge of the past. Modern medicine, especially in the area of mental health, has improved immensely. Prior to this modernization, it was believed that through prayer and counseling, the individual could be cured. Those recoveries were often not as complete as was thought to be possible, and this led to more problems. What we know today about the nature of pedophilia and its treatment is different and vastly improved from what was known even a decade ago, and vastly more than two or three decades ago.

The pedophile is also perceived now as a very successful manipulator, capable of duping individuals into believing that there has been a cure and that there can be a return to active ministry. What we have found is a history of repeated offenses. Unfortunately, many cases being reported today are from acts committed 20 to 30 years ago. Therefore, the Church is at the substantial disadvantage of being judged for action or lack of action long ago, while it is expected to have performed as if it had the knowledge of today. This expectation is the basis for much unjust criticism of the present day Catholic Church.

In any event these are the circumstances and legal obstacles which must be faced. However, the outlook is not totally bleak. The remainder of this paper will deal with issues surrounding proper claims handling, preventative measures, and risk management of this exposure.

Claims

When an incident is reported, the action taken within the first 72 hours is probably the most critical. Not all cases will be reported directly to the bishop or chancellor. Some cases will become known through the authorities after an arrest or when a lawsuit is filed. Whatever the situation, the reaction and procedures followed should be basically the same.

All cases should be handled at the chancery level. If a committee is in place (committees will be discussed in the Risk Management section), then this group should go into immediate action. Its actions should always be cooperative and never interfering with the investigation by authorities. The Church should begin its own internal investigation which should be held in extreme confidence. Immediate notification to the insurance carrier should be made and assistance and guidance from the carrier sought. Working as a team will result in the best possible outcome of a claim.

If media contact is necessary, then an individual who has experience in this area should be designated as the only person authorized to talk to the media ¹. Plaintiff's attorney will often appeal to the court of public opinion in a client's favor. Appropriate contact with the media can see to it that the media is not used solely to the Church's disadvantage.

Each case must be judged on its own merits. Parties involved should not jump to conclusions or attack or defend the alleged perpetrator until all of the facts have been obtained and reviewed. The sooner the claim is evaluated from a liability and value standpoint, the better the chances will be to resolve or defend it appropriately.

Whether a complainant is represented or not, it is advisable never to judge or question whether what is being reported is true or false. Rather, as much factual information as possible should be obtained, including possible witnesses (those who may be aware of the incident or have knowledge of the alleged perpetrator's problems). Complainants should be listened to intently and assured that a thorough investigation will be conducted and that they will be contacted at the conclusion of the investigation. Coordination with the carrier is most important. Whatever spiritual assistance a complainant will accept should be offered, as well help with the payment of reasonable counseling services with no strings attached. However, caution should be exercised so as not to give the appearance that unlimited help is available.

When the first reports of sex abuse came to the Church, the victims seemed to be looking for two things to happen: validation and prevention. First, the victims wanted to be validated by the Church's acknowledgment that what happened to them was terrible and was not the victim's fault. Second, they wanted to make sure that these same terrible things did not happen to others, and they usually asked for the removal of the perpetrator. This validation-prevention attitude did not change until the mid 80's. At that point, the victims began no longer to accept the then current methods for handling these cases. They began to seek, through legal means, to punish the perpetrator and the Church for seeming to allow the acts to occur. At the same time, they also sought monetary compensation for the damage they felt was caused by these acts of abuse.

Until recently, the majority of the claims reported were valid ones. However, from an insurance perspective the last several years have seen more cases being reported that are of a questionable nature. The repressed memory syndrome adds to these complications and makes it even more difficult to evaluate the merits of a case.

When evaluating sexual abuse claims, a distinction should be made between two types:

1) Those involving adult relationships: In insurance terms, claims involving relationships between consenting adults are defensible. Where the adult relationships do not involve any issues

¹ See "The Media and Sexual Abuse Cases: Elements of a Media Plan" by Msgr. Francis Maniscalco, Media Relations, NCCB

of counseling, there has been success in defending these cases in the courts or by not having them pursued. Evaluating cases can be very difficult. Therefore, all factors should be reviewed carefully before a formal position on liability is stated and/or settlement negotiations are begun.

2) Child sexual abuse: Defenses available to these cases are limited, but can be asserted, if the Church can demonstrate an active participation through the hiring and supervision process. An affirmative defense can be made if favorable documentation of background and reference checks can be produced and it can be demonstrated that proper supervision was carried out through evaluations and proper handling of problems when identified. Also, a statute of limitations defense should be researched and argued where applicable. Given the state of the question today, repressed memory claims must be resolutely defended.

Risk Management

Ideally, the objectives from the risk management standpoint should be to try to prevent these types of losses, to mitigate the damages from losses that do occur, and to ensure that the religious organization remain financially solvent even in the event of catastrophic or worst case scenarios. The following discussion will deal with each of these areas, some of which are intermingled or overlap.

First and foremost, each diocese and religious order should have a sexual misconduct policy that is written, distributed, and followed. Essential elements of this policy should include the following items:

- * a letter from the bishop or religious superior
- * policy statement²
- * distribution and acknowledgment of receipt
- * procedures for investigation of alleged cases
- * procedures for reporting of alleged cases including a copy of the state statutory reporting requirements
- * background and reference checks
- * education
- * employment application

² See Report on Diocesan Policies by the NCCB Ad Hoc Committee on Sexual Abuse 1994

Most dioceses do have a written and implemented sexual misconduct policy.³ These types of policies pose inherent challenges from an administrative standpoint. They need good administration and professional human resources to make the policy a viable and functioning document. Limited resources in these areas will prevent the maximum achievement of this goal.

Second, the formation of a committee to deal with issues of a sensitive nature is strongly recommended. Although this committee is advisory in nature, and not a decision-making body, it is a valuable resource to the bishop for investigating and handling matters in a professional and confidential manner.

Third, anyone working closely with a vulnerable population should undergo psychological assessment if there is any reason to believe that they are experiencing "problems" which may result in abuse of minors. This approach would be very proactive and would benefit an employer faced with potential claims.

Fourth, recent federal legislation (i.e. child protection act) may result in providing the Church with a valuable resource. As it is a difficult problem to conduct background and criminal record checks on individuals nationally, the child protection act might provide the vehicle to obtain the needed information. Being able to access this information could result in effectively preventing a perpetrator from moving from diocese to diocese without being discovered.

Insuring the morality exposure is no longer an easy or inexpensive method. Prior to the mid 80's commercial carriers did not exclude claims involving morality issues. However, the landmark case probably most responsible for a change in underwriting policy was the McMartin Day Care case in California. This case, more than any other, brought these issues to national prominence. On top of that, the cases in the Diocese of Lafayette, Louisiana, brought specific adverse attention to the Catholic Church. As a result there was a period of time when many dioceses were uninsured for the morality exposure. Catholic Mutual Relief Society of America stood alone in providing first dollar coverage to its membership. Also, through its pooling efforts, additional coverages were afforded to the members of the Catholic Umbrella Pool (an excess liability pool which is administered by Catholic Mutual).

Since that time when, other than what was described above, morality coverage was essentially unavailable in the traditional insurance marketplace, now, through efforts of the various dioceses to formulate and implement sexual misconduct policies, the marketplace has opened up again in providing coverage, but on a limited basis. For example, members of Catholic Mutual can purchase up to two million dollars in coverage. This coverage is written on a claims-made basis with an annual aggregate. The aggregate includes all settlements, judgements, verdicts and defense costs. Other groups have been successful in providing coverage through each diocese self-insuring the lower limits of liability with a large deductible and then pooling the excess coverage.

³ Attached to this article is a list of sample material (policy, employment forms, suggested cover letter) available on request from Catholic Mutual Group.

But there is no cause for complacency, for several reasons. First, this coverage continues to be costly. Second, the threat of the reinsurance market withdrawing coverage is always present. The incidents involving several high ranking officials of the Church added to this risk. Third, effective risk management is a must if continuing progress is to be made in minimizing and adequately financing this exposure.

The future of the insurance market for this type of coverage is tenuous at best. Commercial carriers do not hesitate to change underwriting standards as a result of poor experience, or of legal proceedings, or when adverse reaction is perceived to exist in the public sector. Therefore, it is of the utmost importance that the Church look at alternative ways of dealing with this risk.

Conclusion

The solution to these problems is rooted in a consistent approach by the Church. Where possible these issues and problems should be addressed in a collaborative fashion. There are resources available for this approach locally, regionally, and nationally. The NCCB Ad Hoc Committee that has been formed is a positive step in this direction. The time has come for the whole Church to work on this problem together and develop models and programs that will produce the most successful results.

###

Sample Material Available

- Sample policy relating to sexual misconduct
- Sample forms for implementing the sample policy
- Sample employment questionnaire
- Incident report form for report of suspected sexual misconduct
- Suggested cover letter for policy regarding conduct for personnel serving in the (arch)diocese

Address

Catholic Mutual Group
Attn: Michael A Intrieri
4223 Center Street
Omaha, Nebraska 68105

NOTE

This bibliography was published in the Fall & Winter 1994 *Theology Digest* by Mrs. Ann Wolf, a Ph.D. student in the Department of Theological Studies at St. Louis University. It is reprinted with permission from the Author and Theology Digest. This material is presented here as published. The committee presents it to you as a resource which may at least in part be helpful to you.

Sexual abuse issues: an annotated bibliography

The repulsive reality of sexual misconduct has touched, damaged, or destroyed the lives of countless victims as well as the lives and ministry of clergy, religious and the hierarchy. If in the past we knew next to nothing about pedophilia and the prevalence of other forms of sexual abuse, we spoke even less about them. Victims kept silent for personal shame or because they were paralyzed by fears instigated by the perpetrator. As a last resort many victims simply tried to forget, repressing any memory of events too horrible to recall.

The unwritten rule of silence stretched far beyond the victims. Perpetrators seldom sought help. When cases were discovered, family members of victims as well as church authorities were perplexed. A stern talk and a hasty change of assignment (for all its good intentions) did little in most situations other than to add another scene to the crime and expose other innocent people to the danger of abuse. Some individuals who had knowledge of a specific case hoped (or prayed) the abuse would stop; others actively tried to cover cases up.

Sexual abuse in any form can no longer be covered up. Allegations and accusations are costly, not only in financial settlements and treatment costs, but also in damage to the reputation of good clergy, religious and laity who must labor in the climate of such suspicions. And for victims who have carried on apparently normal lives for years memories are returning in torrents.

Originally a trickle, the materials available have become a flood. Beyond preliminary media reports, more serious articles, books, and audio-visual materials have been produced. Studies are being launched. Seminars, workshops and treatment programs are being developed, and dioceses and religious communities are formulating policies and procedures for dealing with victims and perpetrators.

What must never get lost in statistics and studies is the fact that both the victims and the perpetrators are human beings. Their experiences are devastating, their lives hellish. Great sensitivity, much time and hard work by professionals (sometimes working near the outer limits of their competencies) are required to bring some sense of healing to victim and perpetrator alike.

No one can consider himself or herself exempt from learning about such a far-reaching problem. Mrs. Ann Wolf's two-part bibliography on the issues of sexual abuse offers a starting point. Her annotated list of newspaper and journal articles is presented here. A list of books, videos and other resources will follow in the winter issue. —Michael Harter, S.J.

(Michael Harter, S.J., is director of novices at the Jesuit Novitiate in St. Paul, Minnesota.)

A Lutheran pastor. *Pastoral Psychology* 39:4 (1991) 259-264.

A minister who sexually abused adolescent girls describes his 12-step intensive treatment plan and the consequences of his behavior upon his ministry and his family.

“A victim writes of boundary violation in spiritual direction.”

Connections: Spiritual Directors International Newsletter 3:1 (Fall, 1993) 4-5.

A professional spiritual director tells her own story of abuse by her former spiritual director. She urges accountability and adoption of a code of ethics for spiritual directors.

Aitken, Robert. “Interpreting the precepts,” *Buddhist Peace Fellowship* (Spring, 1991) 23-24.

One of the key dynamics of the Buddha Tao is a “childlike trust of the teacher as a parent.” Because sexual relations between master and student are perceived and felt as incest, such conduct clearly violates the Buddha Tao.

Alcorn, Randy C. “Strategies to keep from falling,” *Leadership* 9:1 (Winter, 1988) 42-47.

A Protestant pastor offers suggestions to help ministers avoid sexual misconduct. These include paying attention to prayer and self-examination; being attentive to improving and safeguarding one’s marriage; holding oneself accountable for one’s behavior; and dealing honestly with sexual attractions.

America 170:2 (15-22 Jan. 15-22, 1994) 4-8. “One pastoral response to abuse: Interview with Joseph P. Chinnici.”

Discussion centered around the investigation of allegations of sexual abuse at St. Anthony’s Catholic Seminary in Santa Barbara, CA prior to the closing of the school in 1987. A board composed of lay professionals and a friar from another province conducted the inquiry beginning in Dec. 1992. Results were released in Nov. 1993.

Appendix A: recent General Assembly policy statements and related papers on sexuality Church and Society (Nov.-Dec. 1989) 109-112.

A bibliography of policies and statements which have been released by the Presbyterian Church concerning sexuality.

Babych, Art. “Price of Canada scandals hits \$23 million,” *National Catholic Reporter* 29:33 (July 2, 1993) 6.

There have been approximately 700 victims of alleged sexual abuse at St. Joseph’s training School for Boys and St. John’s Training School for Boys both run by a Catholic lay order, the Christian Brothers. The complaints involved incidents which occurred during the 1950s and 60s. A \$23 million package has been agreed to by the Toronto and Ottawa archdiocese, the brothers of the Christian Schools of Ottawa and the Ontario government. Several former brothers of St. Joseph’s in Ottawa have been convicted. The Christian Schools of Toronto have refused to take part in

the compensation package. Though there have been six trials, only one former brother of St. John's in Toronto has been convicted, and that conviction is under appeal. Supposedly \$550,000 has been spent on the initial trials with additional money spent for appeals.

Balswick, Jack and John Thoburn. "How ministers deal with sexual temptation," *Pastoral Psychology* 39:5 (1991) 277-286.

Results of a 90-item questionnaire given to 109 male Protestant ministers. The authors discuss issues of power, self-esteem, marriage, prayer and accountability. They offer safeguards for ministers at risk for sexual exploitation of their congregants and counselees.

Batz, Jeannette. *The Riverfront Times*. St. Louis, MO (June 8-14, 1994) 22-27.

On Dec. 21, 1993, Lynn Allen of St. Louis filed a sexual harassment suit against the Franciscan Sisters of Mary. Charges filed under the Missouri Human Rights Act were dropped because religious organizations are exempt from the act. Charges filed under Title VII of the Civil Rights Act of 1964 are pending. Allen alleges that when she served as director of public relations for the order, she was sexually harassed by her supervisor, Sister Jacinta Elmendorf. After she filed complaints with her employer her employment was terminated. The Catholic religious order of women has denied all charges.

Beal, John P. "Doing what one can: Canon law and clerical sexual misconduct," *The Jurist* 52 (1992) 642-683.

A comprehensive and easily read article describes the process open to bishops for dealing ecclesiastically with charges of clergy sexual misconduct. Stresses immediate and careful investigation of all complaints with pastoral concern for victims and offenders. An excellent resource for investigative teams.

Benson, Gordon L. "Sexual behavior by male clergy with adult female counselees: Systemic and situational themes," *Sexual Addiction & Compulsivity* 1:2 (1994) 103-88

A summary of Benson's unpublished dissertation summarized in the "books" section of this bibliography [will appear in *Theology Digest*, Winter 94].

Bernardin, Joseph.

"Cardinal Bernardin's defense," *National Catholic Reporter* 30:6 (Dec. 3, 1993) 7-8.

Excerpts from the Chicago Cardinal's news conference in which he denied charges of sexual abuse brought against him by Steven J. Cook of Cincinnati.

"Address to priests: Niles College Seminary," *Origins* 23:27 (Dec. 16, 1993), 475-477.

Bernardin addresses three points: his personal experience of being accused of sexual abuse; the Church's response to both victims and accused priests; and priests' support and affirmation of one another.

"Charges against Chicago Archbishop dropped," *Origins* 23:38 (Mar. 10, 1994) 661-663.]

Includes a letter sent to all parishes in the Chicago Archdiocese. Bernardin thanks those who supported him following accusations of sexual abuse brought by Steven Cook of Cincinnati. Bernardin voices his concern regarding "instantaneous judgment" especially on the part of the media.

"Bernardin ordeal ends with 'Deo gratias,'" *National Catholic Reporter* 30:19 (Mar. 11, 1994) 3.

Edited report of news conference on Feb. 28, 1994. Cardinal Joseph Bernardin of Chicago summarizes the experience of being falsely accused of sexual abuse by Steven J. Cook.

"Bernardin gives thanks and appeals for healing," *National Catholic Reporter* 30:20 (Mar. 18, 1994) 7.

Cardinal Joseph Bernardin calls for increased communication and collaboration to ensure justice for those who have been abused as well as those falsely accused. He states that his experience of being falsely accused gives him a deeper understanding of issues of sexual abuse.

Berry, Jason. "Listening to the survivors: Voices of People of God," *America* 169:15 (Nov. 13, 1993) 4-9.

Berry chronicles the formation of support groups for victims of clergy sexual abuse and describes efforts they have made to meet together with bishops, theologians and therapists. He discusses the manner in which the Chicago Archdiocese has responded to some accusations, and comments on the role the media has played in bringing the issue of sexual abuse before the American Catholic Church.

Bishops' Ad Hoc Committee on Sexual Abuse, National Conference of Catholic Bishops. "Brief history: Handling child sex abuse claims," *Origins* 23:38 (Mar. 10, 1994) 666-670.

Historical overview of the role of the United States Catholic Conference and the National Conference of Catholic Bishops with regard to the issue of priests and the sexual abuse of minor children.

Blanchard, Gerald T. "Sexually abusive clergymen: A conceptual framework for intervention and recovery," *Pastoral Psychology* 39:4 (Mar. 1991) 237-246.

The author draws a comparison between incest and sexual abuse by a clergyman stating that trust is intrinsic to both relationships. He suggests strategies for intervention and implications of treatment for clergy who offend.

Blouin, Barbara. "What price harmony?" *Turning Wheel* (Summer, 1991) 25-26.

A student of Chogyam Trungpa Rinpoche describes the painful effects of sexual abuse and alcoholism upon a Vajradhatu Buddhist community. She cites the misconduct itself as well as leadership's denial and concealment of the behavior as root causes for the departure of many members.

Boston Archdiocese. "Pastoral policy: Allegations of clergy sexual misconduct with minors," *Origins* 22:34 (Feb. 4, 1993) 580-582.

If a Catholic cleric in the Archdiocese of Boston has been involved in sexual abuse of minor children restrictions on ministry and residence will be imposed such that other children are not at risk. Assessment, treatment and follow-up care of clerics is determined on an individual basis. Resources will be made available to begin the healing process within the parish or institution involved. A review board will hear each complaint and submit its recommendations to the archbishop.

Boucher, Sandy. "First step, important opening," *Buddhist Peace Fellowship* (Spring, 1991) 16-18.

Reflections on the 1990 Town Hall Meeting convened to discuss sexual misconduct of Buddhist teachers against students. The author suggests that follow-up include formation of an ethics committee as well as a statement that teachers will be held accountable for their actions, and that silence around sexual misconduct will no longer be tolerated.

Braucher, Karen. "A whistle blower's story," *The World* 7:1 (Jan. - Feb. 1993) 11-13.

A former church board member recounts the pain and trauma experienced by a Unitarian Universalist congregation after their minister is accused of sexually abusing Tibetan minors. The minister was tried and convicted, and subsequently removed from ministerial fellowship.

Bridburg, Richard M. "Clergy and religious health committees," *Human Development* 14:1 (Spring, 1993) 16-17.

Advocates the formation of health committees to deal with impaired function among Catholic clergy and religious. The committee would monitor treatment and supervise aftercare. In addition these committees would provide a centralized system of recording complaints brought against clergy. The author suggests that these committees could form an important function in addressing the issue of clergy sexual misconduct.

Broadus, Loren. "Sex and violence in the family and church," *Lexington Theological Quarterly* 26 (Jan. 1991) 13-23.

The main focus of this article is domestic violence. However the author addresses the issue of sexual exploitation of counselees by ministers. He urges that judicatories develop policies which protect women and hold ministers accountable.

Brock, Raymond T. and Horace C. Lukens Jr. "Affair prevention in the ministry." *Journal of Psychology and Christianity* 8: 4 (Winter, 1989) 44-55.

Discusses the nature and incidence of extra-marital sexual activity among ministers, and urges accountability and effective ministerial training as means of preventing inappropriate sexual behavior by ministers. Describes personalities of ministers at risk for sexual misconduct as well as female personality types which attract the attention of ministers.

Bryce, Heather. "After the affair: A wife's story," *Leadership* 9:1 (Winter, 1988) 58-65.

A pastor's wife tells the story of her struggle following disclosure of her husband's sexual involvement with a number of his congregants over a period of several years and within the context of several ministry assignments. A bit dated in that the author blames the victim(s) rather than holding the perpetrator accountable. Nevertheless, a moving account of the pain experienced by "secondary victims," the family of the offending minister.

Burbank, James

"New disclosures rock Santa Fe," *National Catholic Reporter* 29:21 (Mar. 26, 1991) 3.

Judy Maloof, a professor of Spanish and Portuguese at Ohio State University, discloses a sexual relationship with Archbishop Robert Sanchez. Five women have accused the Archbishop of having sexual liaisons with them. In related litigation, the Servants of the Paraclete have been named in lawsuits claiming that they negligently and recklessly released pedophile priests into New Mexico communities. The archdiocese has accused attorneys of using the media as leverage in forcing settlements in a number of cases of alleged sexual abuse by priests.

"New Mexico reels in wake of sex allegations against Santa Fe prelate," *National Catholic Reporter* 29:20 (Mar. 19, 1993) 5-6.

Archbishop Robert F. Sanchez, the first U.S.-born Hispanic archbishop and secretary of the U.S. Bishops' Conference, admits sexual involvement with three women. Some New Mexico Catholics voice their continued support of the Archbishop while others call for his resignation.

Bustanoby, Andre

"The pastor and the other woman," *Christianity Today* 18:23 (Aug. 30, 1974) 7-10. A description is presented of three maladaptive personalities that may be attracted to ministry: the narcissist, the autocrat and the overgenerous person. The author describes the interpersonal dynamic between these men and types of women who may be attracted to them, or who may be sought out by the minister in order to meet his own emotional needs.

"Counseling the seductive female: Can we offer help and yet remain safe?" *Leadership* 9:1 (Winter, 1988) 48-54.

The author presents a case study in which he examines the issues of transference and countertransference (sexual-physical-emotional attraction between counselor and client). He examines the pitfalls and describes how to handle the situation in a professional manner.

Canadian bishops' committee. "Fifty recommendations: The Church and child sexual abuse," *Origins* 22:7 (June 25, 1992) 97-107.

Extracted from the Canadian Catholic Bishops' report "From Pain to Hope" released June 11, 1992. After two years of study, the committee proposes 50 points

that address the issue of child sexual abuse. The points cover handling allegations, ministry to victims and perpetrators, rehabilitation and return to ministry, and priestly formation.

Capps, Donald. "Sex in the parish: Social-scientific explanations for why it occurs," *Journal of Pastoral Care* 47:4 (Winter, 1993) 350-61.

Suggests a social-scientific theory to address clergy sexual misconduct. Capps argues that pastors who attempt to equalize the power differential between themselves and their congregants actually increase their own power. He also suggests that the pastor who is guilty of inappropriate sexual behavior may become the "scapegoat" for a dysfunctional congregation. This theory does not excuse or justify the pastor's behavior, but only attempts to explain it.

Carlson, Robert J. "Battling sexual indiscretion," *Ministry* (Jan. 1987) 4-6.

Author considers self-awareness as a major key to resisting the temptation to cross boundaries in the ministerial relationship. He lists 10 situations which place the minister at risk for sexual misconduct including the privacy of counseling relationships, the intimate access into people's lives, and issues of transference and countertransference.

Castelli, Jim.

"The case of Father X," *U.S. Catholic* (Sept. 1993) 12-13.

A priest describes the link between alcoholism and his sexual abuse of adolescent boys.

"Abuse of faith: How to understand the crime of priest pedophilia," *U.S. Catholic* (Sept. 1993) 6-15.

A readable and comprehensive article which distinguishes between those who abuse prepubescent children and those who abuse adolescents. Castelli interviews leading therapists, a sociologist and a victim of clergy sexual abuse. Excellent article for the laity.

Chambers, Francis E. "A priest reflects: Walking with the downtrodden," *America* 168:12 (Apr. 10, 1993) 6.

A priest suggests that the sexual abuse crisis may have provided an opportunity for priests to walk, "perhaps for the first time, . . . with the downtrodden, the despised, the alienated, the hurt." This embarrassment for the priesthood may provide a graced moment for those used to a position of respect and privilege.

Chittister, Joan. "Priest offenders and the saga of the Paracletes," *National Catholic Reporter* 29:35 (July 30, 1993) 20.

Chittister defends the Servants of the Paracletes for admitting the problem of sexual abuse and addiction, identifying it and setting about to deal with it professionally and responsibly. Originally designed to give spiritual treatment to alcoholic priests, the center in New Mexico found itself, by 1980, with three-quarters of its referrals being admitted for sexual issues. They had one of the first programs of its nature in

the country with little data on which to build. When priests were discharged, it was with the understanding that if they were reassigned, they should not be alone; they should have ongoing therapy and spiritual direction; the issue should be known by the director of the house in which they lived; they would do nonpastoral work; and they would return preferably twice, but not less than once, per year for continuing care for five years. Because of the high risk, "it was the duty of the Servants to recommend nonreturn to ministry," stated Father Liam Hoare, superior general.

Christian Century

104 (Nov. 4, 1987) 961-962. "Clergy troubles Greek Orthodox." Report of a case of sexual misconduct against a Greek Orthodox bishop brought by the daughter of an Orthodox priest.

107 (Nov. 21-28, 1990) 1089. "Presbyterians on sex abuse." Report of the Rocky Mountain Synod of the Presbyterian Church concerning their sexual misconduct policy which governs clergy, church employees and volunteers.

107 (Dec. 12, 1990) 1160. "UMC sexual harassment." Report of a survey of 1,578 males and females, laity, college and seminary students, and nonclergy church employees conducted by the United Methodist Church in 1990. Of clergywomen surveyed 77% reported that they had experienced sexual harassment in the course of their ministry while 41% said they had been harassed by colleagues or other pastors.

108 (Jan. 16, 1991) 42. "Sexual abuse by a priest ." A jury awards \$2 million in punitive damages against the Archdiocese of St. Paul, Minneapolis and \$700,000 against the Diocese of Winona. This was the first time punitive damages were assessed against the Catholic Church and the second time a jury awarded compensatory damages in a sexual abuse case involving a priest.

Cimbolic, Peter. "The identification and treatment of sexual disorders and the priesthood," *The Jurist* 52 (1992) 598-614.

Written by a clinical psychologist who specializes in treatment of clergy, this article describes the clinical similarities and differences between those who abuse prepubescent children and those who abuse adolescents. Gives an overview of treatment modalities and discusses the relapse rate.

Clark, Donald C. Jr. "Sexual abuse in the church: The law steps in," *Christian Century* 110 (Apr. 14, 1993) 396-398.

A Chicago attorney who advises both judicatories and victims of clergy sexual abuse, Clark explains how federal and civil laws have been applied to cases of sexual exploitation by clergy. He notes that courts can intervene only after exploitation has occurred, that they cannot prevent abusive behavior, and that they can only award the victim monetary compensation. The law cannot restore the breach of faith experienced by victims. The church must strive for justice. The only article found that addresses civil and criminal law.

Connors, Canice

"Priests and pedophilia: A silence that needs breaking," *America* 166:16 (May 9, 1992) 400-401.

Draws a distinction between pedophiles (those who abuse prepubescent children) and ephobophiles (those who abuse adolescents). Urges Catholic church leaders to bring the pain of abuse from behind closed doors and into the community where it may be embraced and where the gospel may lend another perspective to the human suffering experienced both by the victims and the offenders.

"Rebuilding trust: Clergy sexual abuse," *Church* 9:2 (Summer, 1993) 5-10.

Connors stresses the need for the Catholic Church to overcome denial and to minister compassionately to both victim-survivors and perpetrators. Differentiates between "cure" and "recovery" by using the model of recovering alcoholics. Indicates that little attention has been given to the possibility that some abusers can be returned to active ministry.

"Subcommittee head introduces think tank recommendations," *Origins* 23:7 (July 1, 1993) 105-107.

Connors calls upon Catholic bishops to be pro-victim, proactive, pastoral and positive in their handling of the issue of sexual abuse by priests. In addition, he asks that clear minimum standards for seminary entrance be defined and implemented by all dioceses and religious orders, and that stories of successful recovery by priests be promoted.

"The search for answers," *U.S. Catholic* (Sept. 1993) 8-10.

In an address to the U.S. bishops, Connors urges that diocesan policies be pro-victim, proactive, pastoral and positive.

Cooper-White, Pamela. "Soul stealing: Power relations in pastoral sexual abuse," *Christian Century* (Feb. 20, 1991) 196-199.

Author states that romantic involvement between pastor and congregant is not an issue of sexuality but of power and control. She notes that it is always the pastor's responsibility to maintain ethical boundaries. Poignant description of the consequences of pastoral sexual abuse for the adult female victim.

Corrigan, Don

"Clergy sexual misconduct stories hidden for decades, say survivors," *The St. Louis Journalism Review* 23:167 (June, 1994) 1, 6.

Summary of recent cases in the Catholic Diocese of Belleville, IL where five priests have been removed permanently from ministry while four additional cases are still under investigation. Includes an interview with officials of the Archdiocese of St. Louis.

"Dioceses are free to handle situations independently; Belleville follows 'a policy of openness' - Rev. Margason," *The St. Louis Journalism Review* 23:167 (June, 1994) 1, 7.

Interview with Rev. James Margason, vicar general of the Catholic Diocese of Belleville, IL regarding their handling of allegations of sexual abuse by priests against minor children.

Court Papers: U.S. District Court; Cincinnati, Ohio. "Cook's claims against Cardinal dismissed," *Origins* 23:38 (Mar. 10, 1994) 663-664.

Stating that memories recovered through hypnosis were "unreliable," Steven Cook filed a "motion for voluntary dismissal" of his charges of sexual abuse against Chicago Cardinal Joseph Bernardin. U.S. District Judge S. Arthur Spiegel dismissed all claims against Bernardin in a ruling which precluded further action against the Catholic archbishop in the matter.

Cowan, Jennifer R. "Survey finds 70% of women rabbis sexually harassed," *Moment* (Oct. 1993) 34-37.

In a response from 140 female rabbis (43%) in 29 states and four countries including Israel, 70% reported sexual harassment within the context of their work. Of those reporting harassment, 60% reported laymen as offenders; 25% reported other rabbis as offenders; and 25% experienced sexual harassment at least once per month. Only 10% reported that their workplace had a sexual harassment policy.

Cutts, Linda. "Zen Center guidelines," *Buddhist Peace Fellowship* (Spring, 1991) 18.

Draft of a statement prohibiting sexual relations between teacher and student in the San Francisco Zen Center.

DeVogel, Susan Harrington. "Sexual harassment in the church," *Christian Ministry* 19 (July - Aug. 1988) 12-14.

Author states that "sexual harassment occurs in the church with some frequency and in many forms." It may be much more prevalent than overt sexual abuse due to the fact that it is harder to spot, to diagnose and to correct. Analyzes Methodist Church workplace scenarios according to the Equal Employment Opportunity Commission guidelines.

Devries, Jim. "A restorer's reflections," *Leadership* 13:1 (Winter, 1992) 118-119.

Reflections of the chairman of a lay board appointed to oversee the healing and restoration process of a Baptist pastor removed from ministry because of sexual misconduct.

Dobson, Edward G. "Restoring a fallen colleague," *Leadership* 13:1 (Winter, 1992) 106-121.

Documents the process of resignation and journey to healing of a pastor following charges of sexual misconduct. A sensitive portrayal of the impact upon the congregation, the minister and his family, and the board who oversaw the "formal process" of restoration.

Dollar, Truman. "Painful but necessary," *Leadership* 13:1 (Winter, 1992) 109.

Reflections by a Baptist minister who resigned his pastorate because of sexual misconduct.

Dreese, John J. "The other victims of priest pedophilia: An inheritance squandered," *Commonweal* 121:8 (Apr. 20, 1994) 11-14.

A passionate reflection written by a Catholic priest who feels shame, embarrassment and anger because the sexual activities of a few have caused pain for all priests.

Duckro, Paul N.; Christina Busch; Lynn J. McLaughlin and James Schroeder. "Psychotherapy with religious professionals: An aspect of the interface of psychology and religion," *Psychological Reports* 79:1 (Feb. 1992) 304-306.

States that psychological health cannot be separated from religious beliefs. Histories of abuse are not uncommon among religious professionals, but religious formation may inhibit the resolution of sexual conflicts and compulsions. Both religious and psychological issues can be dealt with during therapy with no dilution of identity on either side.

Duckro, Paul N. "Sexual abuse: A clinical perspective," *UpDate: Program for Psychology & Religion* (Apr. 1993) 1-6.

Differentiates between pedophiles (those who abuse prepubescent children) and ephebophiles (those who abuse adolescents). Discusses fixated and regressive types as they respond to various treatment modalities. Encourages a broad-based cognitive-behavioral approach in conjunction with intensive group therapies. Annotated references.

Dyrud, Jarl. "On screening seminarians," *Origins* 23:5 (June 17, 1993) 79-80.

Author advocates that Catholic clergy formation with regard to celibacy go beyond the "denial of one's sexual nature" recognizing that sexual nature is part of one's humanity. Screening should include an assessment of the candidate's ability to control his sexual impulses.

Edwards, Robin T.

"Bishops advised on sexual abuse," *National Catholic Reporter* 29:18 (Mar. 5, 1993) 5.

Thirty recommendations are sent to the National Conference of Catholic Bishops following a two-day meeting of church leaders, researchers, victims, and priests being treated for abuse problems. The number one priority noted by participants was that the first concern of the church should be the victim and the victim's family.

"Sanchez not first U.S. prelate whose reported liaison became public," *National Catholic Reporter* 29:20 (Mar. 19, 1993) 7.

Focus of the article is Catholic Archbishop Eugene Marino, the first African-American archbishop, formerly of Atlanta. He is alleged to have been romantically involved with Vicki Long, a single mother

Exley, Richard. "Getting to the deeper issues," *Leadership* 13:1 (Winter, 1992) 127.

The pastor of an Assembly of God Church tells of his intervention in a case of clergy sexual abuse in which the sexual acting out was a sign of additional psychological disturbances.

Feister, John Bookser

"Legal dispute waged over priest's files," *National Catholic Reporter* 29 :15 (Feb. 12, 1993) 8.

Citing Canon Law 489 Bishop William Hughes of Covington, KY refused to hand over to a grand jury the entire personnel file of retired Catholic priest Earl Bierman. The diocese stated they are trying to protect the confidentiality of the victims who came forward.

"Accusers say indicted pedophile priest broke seal of confession," *National Catholic Reporter* 29: 28 (May 14, 1993) 11.

In the first pedophile case to involve accusations of breaking the seal of confession, former Catholic priest Jerry Junker said he reported the violation to Bishop William Hughes of Covington KY in 1991. Fr. Earl Bierman, who is under indictment in three Kentucky counties on 21 charges of abusing six boys in the 1970s and 80s, has been accused by three victims of seducing them by revealing detailed confessions of the sexual behaviors of Parish members.

"How the church is confronting clergy sexual abuse," *St. Anthony Messenger* 101:9 (Feb. 1994) 28-35.

Gives an overview of the treatment program sponsored by the Servants of the Paraclete in Jemez Springs, NM. Interviews Bishop John F. Kinney, chairman of the Catholic bishops' Ad Hoc Committee on Sexual Abuse and relates the goals the committee has set.

"'Please don't hate me': The story of Father John Doe," *St. Anthony Messenger* 101:9 (Feb. 1994) 31-35.

Interview with a Catholic priest who describes his recovery from sexual addiction.

Fischer, Norman. "On teachers and students," *Buddhist Peace Fellowship* (Spring, 1991) 21.

Author notes that the real element of seduction in the relationship between Zen teacher and student is the possibility that the student can become overly dependent on the teacher while the teacher enjoys the adulation of the student.

Fishburn, Janet F.

"Male clergy adultery as vocational confusion," *Christian Century* 99 (Sept. 15-22, 1982) 922-25.

In one of the first articles to address clergy sexual misconduct, Fishburn speaks of a sexual relationship between "two consenting adults," labeling it "adultery." Fishburn rightly linked the pastor's "adulterous" behavior to his "high need to display

signs of masculine power, authority and success." Many of her observations remain valid today.

"The sexuality of pastors: What is the issue?" *Church and Society* 80 (Nov.-Dec., 1989) 69-77.

Lists the findings and recommendations of a 1984 study conducted by the Washington Association of Churches. States that the problem may be in the fact that ministers are uneducated about their own sexuality. Advocates education regarding sexuality and training for pastoral counseling in seminaries as well as continuing formation for those already ordained.

Flatt, Bill. "The misuse of power and sex in helping relationships," *Restoration Quarterly* 36:2 (Second Quarter, 1994) 101-110.

A review of the literature sets the stage for a discussion of sexual abuse by ministers against vulnerable adults. Suggests ways in which ministers may guard against crossing sexual boundaries. Frequent appeals to scripture support the author's statements.

Fortune, Marie M. "Is nothing sacred? The betrayal of the ministerial or teaching relationship," *Journal of Feminist Studies in Religion* 10:1 (Spring, 1994) 17-26.

Describes the issues of trust and power differential operant in the ministerial relationship and draws a parallel to the teacher - student relationship in which sexual boundaries may also be violated. Written by the leading expert in the field of clergy sexual abuse.

Forum: Louis McBurney, Archibald Hart, Burdette Palmberg and David Seamands. "Private sins of public ministry," *Leadership* 9:1 (Winter, 1988) 14-23.

A panel of church leaders discusses the issue of sexual misconduct in a ministerial relationship in which the minister engages in sexualized behavior with a congregant or counselee.

Forum: Jim Devries, Richard Exley, William Frey and Louis McBurney. "Creating a restoration process," *Leadership* 13:1 (Winter, 1992) 122-134.

A panel of church leaders discusses the issue of returning clergy to a ministerial position after they have been charged with immoral conduct. How does one determine whether the minister is ready to be restored to pastoral ministry? How does one determine which behavior warrants permanent removal?

Fox, Thomas C. and Jason Berry. "As nation discusses pedophilia, even pope admits it's a problem," *National Catholic Reporter* 29:33 (July 2, 1993) 2.

Although the National Conference of Catholic Bishops had previously addressed the issue of sexual abuse of children by priests and brothers at four executive sessions, the June meeting in New Orleans was the first public discussion of the issue. A U. S. - Vatican committee will investigate how canon law can be used to discipline offenders. In addition, Archbishop William H. Keeler of Baltimore, president of the N.C.C.B. has appointed Bishop John F. Kinney of Bismarck, ND to chair a

special ad hoc committee to study the issue of child sexual abuse by clergy. The committee received the recommendations of a "think tank" which convened last February in St. Louis. Kinney noted that Catholics have come to terms with the fact that ministers of the church often have clay feet. "It is not the sexuality at all. It is rather the dynamic of the misuse of power, domination and the violation of trust between pastor and parishioner, priest and child, teacher and student, counselor and counselee," said Kinney.

Fox, Thomas C.

"Bernardin: 'I have never abused anyone,'" *National Catholic Reporter* 30:6 (Dec. 3, 1993) 3.

Cardinal Joseph Bernardin of Chicago replies to sexual abuse charges brought by Steven J. Cook in Cincinnati. The National Conference of Catholic Bishops stands in firm support of Bernardin.

"Accuser's counsel a critic of Bernardin," *National Catholic Reporter* 30:6 (Dec. 3, 1993) 6.

Fox questions the role of Fr. Charles Fiore in the sexual abuse suit against Cardinal Joseph Bernardin. Fiore, a conservative Catholic priest who was suspended in 1984 and asked to leave the Dominican order in 1985, previously has been an outspoken critic of Bernardin.

Fraze, Barb. "Canadian bishops move vigorously on sex abuse problems," *National Catholic Reporter* 29:33 (July 2, 1993) 3.

A year after the Canadian Catholic bishops issued a report and recommendations covering issues of child sexual abuse by clergy, about 50 of 73 dioceses reported that they had taken measures to address the issue. Seventy-five percent of these dioceses had appointed a special bishop's delegate to hear complaints; 80 percent had formed an advisory committee; and more than half had developed a "protocol" for action to be taken in cases of child abuse. The Canadian Bishops produced two booklets, "Breach of trust, Breach of Faith" and "From Pain to Hope." The first is designed for use in small group discussions in parishes. Dennis Gruending, director of information noted that by June, 1993, 6,000 copies had been sold. [Information regarding these booklets can be found in the resource section of this bibliography.] Among 50 recommendations the Canadian Bishops have made are that Canadian Catholics "support people struggling to reveal abuse that occurred years ago; . . . become informed about the laws on reporting child sexual abuse; and . . . support the thousands of Canadian priests who 'are unjustly smeared by the misconduct of a small minority of their colleagues.'"

Frey, William. "A legal affair," *Leadership* 13:1 (Winter, 1992) 124-125.

An Episcopal bishop chronicles his handling of a case of clergy sexual abuse by a pastor against an adult woman in his congregation.

Gardner, Richard A. "Psychiatrist: How possible is celibacy today?" *National Catholic Reporter* 29:20 (Mar. 19, 1993) 9.

Gardner presents clerical formation as attempting to create asexual beings rather than dealing honestly with sexuality.

Gelineau, Louis E. "Letter after charges involving local priest," *Origins* 23:7 (July 1, 1993) 111-112.

A pastoral letter written to the diocesan paper by Bishop Louis Gelineau of Providence, RI following litigation by Father Gary Hayes and two others which invokes the Racketeer, Influenced and Corrupt Organizations [RICO] act against the Catholic Church.

Giallanza, Joel. "A code of ethics for spiritual directors," *Human Development* 15:2 (Summer, 1994) 34-37.

Urges that a code of ethics be developed by those engaged in the profession of spiritual direction. Author notes that because spiritual directors are placed in a unique position of power over directees, there is the potential for unethical conduct.

Gibeau, Dawn

"When the father is also a priest," *National Catholic Reporter* 30:10 (Jan. 7, 1994) 3-4.

Originally founded ten years ago as a support to women who were romantically involved with active Catholic priests, Good Tidings has now begun another support group for women who have become pregnant with the child of a priest. Catherine Finnegan-Grenier initially thought that she would be contacted by men and women in love, but she has found that the women who have contacted her are usually involved in a sexually abusive relationship with a priest. The priest tells the woman he loves her, said Finnegan-Grenier, "but not enough to marry her." She noted that often the women do not consider themselves to be in an abusive relationship even though they have been "kept on a string for years." The situation becomes even more difficult for the woman who becomes pregnant only to find that the child's "father is missing in action." Many dioceses encourage the woman to give the child for adoption or that "she find a way to get rid of the child to save the father's reputation." In conjunction with CORPUS, an organization of married priests, Good Tidings tries to offer emotional support, financial aid, respite care, foster care and adoptive services for the mothers. In addition, they offer support for the children of priests who need to be in touch with other children whose fathers are priests "so they know they aren't the only one."

"Need for Good Tidings expands worldwide," *National Catholic Reporter* 30:10 (Jan. 7 1994) 3.

"Be honest" is the motto for Good Tidings, a support group founded ten years ago by Catherine Finnegan-Grenier and her husband, former priest, Joseph Grenier. They urge priests who are involved in a romantic relationship with women to "be honest with themselves, with each other, 'with the people of God and with superiors.'" The goal of the support group is to find psychological counseling and spiritu-

al direction for priests who are discerning their future. In some cases when these men turn to their bishops for help, the bishops look the other way and ignore the relationship. Priests who do not come to a decision regarding their desire and ability to live a celibate life often live a double life, and many develop patterns of repeated sexual liaisons with women. Married priests who are members of CORPUS and who are now psychotherapists often offer their counseling services because they have faced a similar discernment process themselves.

Gill, James J.

“Better formation for celibacy needed,” *Human Development* 14:1 (Spring, 1993) 3-4.

Gill announces the establishment of The Christian Institute for the Study of Human Sexuality. The program will offer training in the essential elements of biology, psychology, spirituality, psychopathology and counseling related to sex and sexuality. Designed for seminary and religious congregation formation personnel.

“Sexuality institute opening in Boston,” *Human Development* 15:2 (Summer, 1994) 3-4.

The Jesuit Educational Center for Human Development announces the opening of The Christian Institute for the Study of Human Sexuality at Saint John’s Archdiocesan Seminary, 127 Lake Street, Brighton, MA 02135-3898, (617) 562-0766. The program is open to clergy, religious and laity working in formation or as spiritual directors in seminaries or houses of religious formation.

Gordon, Donna. “When the sacred becomes profane,” *The World* 7:1 (Jan. - Feb. 1993) 20-24.

An interview with Marie Fortune in which she notes the need for clear policies that apply to a minister’s professional relationship in which it is stated that it is not “okay to be sexual with congregants, clients, students, staff, etc.” Fortune notes that because of the inherent imbalance of power between a minister and a congregant or counselee or an employee there can be no consensual sexual relationship. It is always the minister’s responsibility to act professionally.

Grabowski, Stanley. “Pastoral problem of pedophilic priests,” *Pastoral Life* 42:3 (Mar., 1993) 12-16.

A cursory summary of the problem of “pedophilic” priests and the response given by the church as reported by the *Boston Globe* on May 11, July 26 and Aug. 18, 1992.

Greeley, Andrew. “How serious is the problem of clergy sexual abuse?” *America* 168:10 (Mar. 20-27, 1993) 6-10.

Greeley estimates that 2,000 to 4,000 priests may be guilty of sexually abusing more than 100,000 persons and costing the church more than \$50 million a year for settlements, legal costs and medical care. Greeley examines the psycho-social issues surrounding the matter of sexual abuse by clergy and makes suggestions for definitive action by the Catholic Church.

Grenier, Catherine P. "With clerical abandon. Broken lives: The fruit of patriarchy," *Miriam's Song V: Priests for Equality* 15-17.

Grenier tells the story of women who have been sexual partners to active Catholic priests and in which the relationship has produced a child. Author notes the reaction of the priest-fathers as well as the response of the institutional church to mothers and children.

Grenier, Joseph. "With clerical abandon. The tree and its fruit," *Miriam's Song V: Priests for Equality* 17.

Lists some of the consequences of imposed celibacy and links mandatory celibacy with the sexual abuse of women.

Griffin, Susan; Peter Rutter; Yvonne Rand. "Sex, power, and Buddha nature," *Buddhist Peace Fellowship* (Spring, 1991) 14-16.

Statements from a 1990 Town Hall Meeting which addressed the issue of Buddhism and sexual misconduct. Includes discussion of perpetuating gender hierarchy, misuse of power, and breaking the silence.

Hamilton-Pennell, Christine. "Pastoral sexual abuse: One congregation's ordeal," *Daughters of Sarah* (July - Aug. 1987) 20-24.

Author defines pastoral sexual abuse in terms of an abuse of power by the minister against a counselee. Describes the impact upon the congregation where a pastor was sexually abusing female congregants.

Hardman-Cromwell, Youtha C. "Power and sexual abuse in ministry," *Journal of Religious Thought* 48:1 (Sum - Fall, 1991) 65-72.

Overview of sexual abuse in the ministerial relationship as a misuse of power and a violation of trust. Describes the effects of abuse upon the victim and the needs of the congregation. Comments on legal implications and describes the needs of the clergy offender.

Harrington, Timothy. "Time of heroism, atmosphere of suspicion," *Origins* 22:36 (Feb. 18, 1993) 609-610.

The Catholic bishop of Worcester, MA formally recognizes the priests of his diocese who have faithfully observed the tradition of celibacy and whose ministry has been overshadowed by the misdeeds of a small number of priests.

Hart, Archibald D.

"Transference: Loosening the tie that binds," *Leadership* 3:4 (Fall, 1982) 110-117.

Hart explains the dynamics of transference and countertransference in counseling relationships. Lists the warning signs that can precede a pastor's sexual involvement with a counselee.

"Being moral isn't always enough," *Leadership* 9:1 (Winter, 1988) 24-29.

The author illustrates the relationship between unethical behavior and moral culpability. While some actions may not be "sinful," they are considered unethical by the

helping professions. Hart urges clergy to be aware of professional codes of ethics, and to develop their own personal code of ethics.

Hayes, Gary. "Priest and two laymen charge abuse as teens," *Origins* 23:6 (June 24, 1993) 87-90.

In the first civil lawsuit brought against the Catholic Church by a priest, Father Gary Hayes, a priest of the Diocese of Owensboro, KY has also charged the National Conference of Catholic Bishops and the U.S. Catholic Conference with federal racketeering. Hayes, Terrence M. Smith and Steven M. Stolar, along with three parents, have filed a class action lawsuit claiming sexual abuse by religious employed by the Camden, NJ and Providence, RI dioceses. The suit alleges that the bishops' conferences encouraged dioceses to destroy evidence and to obstruct justice in cases of child molestation. In a statement following, Bishop James McHugh of Camden denies prior knowledge regarding sexual abuse against minors by Father Joseph F. McGarvey.

Hebblethwaite, Peter. "Eamonn Casey: He's in Cuernavaca; no, Ecuador," *National Catholic Reporter* 29:26 (Apr. 30, 1993) 9.

The former Catholic bishop of Galway, Ireland, who resigned in 1992 following disclosure of a sexual relationship with Annie Murphy is reported to be living in Ecuador. Murphy also claims her son, Peter, was fathered by Casey.

Hopkins, Nancy M. "Congregational intervention when the pastor has committed sexual misconduct," *Pastoral Psychology* 39:4 (Mar. 1991) 247-255.

Describes issues of denial and anger which are experienced corporately by a congregation whose pastor has engaged in sexualized behavior with congregants. Suggests 12 points for a congregational intervention strategy.

Hunt, George

"When the 'unspeakable' must be spoken," *America* 167:11 (Oct. 17, 1992) 267-268.

Editorial which summarizes policies for handling cases of sexual misconduct by Catholic priests in the Archdiocese of Chicago. Also includes comments about Jason Berry's book *Lead Us Not Into Temptation*.

Editorial: "Sins of a father," *America* 168:21 (June 19, 1993) 3.

The editor of *America* makes three points about the Catholic Church's response to allegations of sexual abuse by Catholic clergy and religious against minor children: 1) the church has responded by instituting diocesan policies; 2) other helping professions also face charges of abuse; in addition, psychologists themselves have only recently become aware of the dynamics of sexual abuse of children; 3) the church has a moral obligation to aid victims, but also a moral obligation to be a good steward of its financial resources.

Isely, Paul J. and Peter Isely. "The sexual abuse of male children by church personnel: Intervention and prevention," *Pastoral Psychology* 39:2 (Nov. 1990) 85-99.

A good overview of the issue of sexual abuse of children. Includes demographic data and a review of literature concerning the victim and the perpetrator. Presents a good discussion on intervention and prevention, specifically as it would apply to those in pastoral positions. Urges pastoral professionals to make use of the legal system instead of turning to the church which is "often more concerned with protecting the institution's reputation than 'helping' the victim or even the offenders."

John Paul II.

"Seminarians' healthy psychosexual development," *Origins* 23:5 (June 17, 1993) 77-78.

In a statement addressing the sacraments of marriage and holy orders, the Pope states that in a culture dominated by self-centeredness and self-indulgence the virtues of asceticism, interior discipline along with a spirit of sacrifice and self-denial are of great importance in priestly formation. In addition, healthy psychosexual development, sound human formation and growth in grace and virtue will enable seminarians to "accept joyfully and live serenely" the tradition of priestly celibacy.

"Vatican-U.S. Bishops' Committee to study applying canonical norms," *Origins* 23:7 (July 1, 1993) 102-103.

Responding to the U.S. Bishops' request for ways of facilitating the suspension or dismissal of priests in cases of sexual abuse, the Pope states that "canonical penalties which are provided for certain offenses and which give a social expression of disapproval for the evil are fully justified." A committee representing the Vatican and the U.S. Bishops has been established to study the application of these norms in specific cases.

Johnston, Rosemary

"Santa Barbara Franciscans report decades of sex abuse," *National Catholic Reporter* 30:7 (Dec. 10, 1993) 4.

Board of review examines allegations of sexual abuse at Franciscan Catholic seminary high school in California. Disposition of accused friars was given; the board will continue to hear any additional cases and to assist victims. To date \$90,000 has been spent for victims' counseling.

"Pedophilia board focused on victims first: Franciscan inquiry advocates changes," *National Catholic Reporter* 30:8 (Dec. 17, 1993) 5 - 6.

Johnston suggests that the independent board of inquiry set up to investigate sexual abuse at a Franciscan Catholic school in Santa Barbara, CA could serve as a model for the nation. The committee set four goals: 1) to locate and help victims; 2) to identify perpetrators and make recommendations for their evaluation, treatment, monitoring and disposition; 3) to make policies aimed at prevention; 4) to recommend the formation of a permanent board to assist victims and ensure implementation of the present board's recommendations.

"Pedophilia board focused on victims first: Suggested changes for priestly train-

ing," *National Catholic Reporter* 30:8 (Dec. 17, 1993) 5 - 6.

Board discusses pro-active methods of identifying and offering assistance to victims of sexual abuse by Franciscans in Santa Barbara. The inquiry board issues seven recommendations for priestly formation including intense and continual training for clerics on boundaries and power issues, as well as empathetic and comprehensive assistance for victims.

"Parents of molested sons tell of alienation from the church," *National Catholic Reporter* 30:8 (Dec. 17, 1993) 6.

Parents describe alienation which stems in part from a perceived lack of response on the part of Cardinal Roger Mahony. Prior to their son's revelations of the abuse, the families had been "mainline," active, committed Catholics. "It's horrible to have your religious identity taken away from you," stated one mother.

"Hearing set for jailed Franciscan in abuse case," *National Catholic Reporter* 30:26 (Apr. 29, 1994) 6.

The Independent Response Team continues to hear allegations of sex abuse against friars of Saint Anthony's Seminary High School and the Santa Barbara Boys Choir. The inquiry board determined that during a 23-year period (1964-1987) 11 friars had sexually abused at least 34 boys. For most cases the statute of limitations had expired. Fr. Robert Van Handel was arrested in March, 1994 after an 18-year-old boy accused him of sexual abuse between March, 1983 and September, 1989.

Jones, Arthur. "Ecumenism, sex abuse top CTSA agenda," *National Catholic Reporter* 29:33 (July 2, 1993) 4.

At the June 10-13 gathering of the Catholic Theological Society of America, moral theologian Father André Guindon criticized the institutional church for its refusal to investigate the role that its own sexual attitudes and clericalism have had in helping "to create and exacerbate the clerical sexual abuse of minors' crisis." By focusing on the behavior of single clerics, Guindon said the Catholic church avoids institutional issues. By blaming the sexual abuse on mental illness and by dealing with it in the legal arena rather than as a moral issue, the church refuses to uncover any evidence of institutional dysfunctionality. He stated that sexual abuse is not a result of priests struggling with celibacy. In addition, the vast majority of cases are not pedophilia, but the sexual abuse of adolescents, called "ephebophilia." Noting that seminarians are cautioned against affective relationships with women, and that society frowns upon intimate friendships between males, the young priest has been left only with the option of companionship with adolescents who themselves need affective bonding.

Keeler, William.

"Statement supporting Cardinal Bernardin," *Origins* 23:24 (Nov. 25, 1993) 421-422.

As president of the National Conference of Catholic Bishops, Archbishop William Keeler issues a statement of support from the Conference for Cardinal Joseph Bernardin of Chicago who was named in a sex abuse suit filed by Steven Cook of Phil-

adelphia.

“Reckless charges against innocent people,” *Origins* 23:38 (Mar. 10, 1994) 665.

President of the National Conference of Catholic Bishops, Archbishop William Keeler of Baltimore calls upon the media, the medical and the legal professions to police themselves in order to avoid “reckless charges against innocent people.” Keeler refers to allegations of sexual abuse made, and later dismissed, against Cardinal Joseph Bernardin of Chicago.

Kellogg, Miriam E. and William F. Hunter. “Sexual immorality in the missions community: Overtones of incest?” *Journal of Psychology and Theology* 21:1 (1993) 45-53.

Authors liken the missionary community to the family in terms of child sexual abuse and sexual harassment / abuse of single adult women. Authors propose five conditions necessary for a positive, healthy sexual contact [CERTS] (1) consent, (2) equality, (3) respect, (4) trust, and (5) safety. It is not possible for a child or any person in a subordinate position, with regard to the power structure, to give consent.

Kennedy, Eugene. “The see-no-problem, hear-no-problem, speak-no-problem problem: Sex abuse and Catholic clerical culture,” *National Catholic Reporter* 29:20 (Mar. 19, 1993) 5,8.

Kennedy criticizes Catholic church officials for responding to victims of sexual abuse by clergy in a pastoral manner that is “framed by lawyers and loss-prevention experts.” He challenges the bishops to move from “damage control” toward a thorough investigation of the root causes of sexual deviation exhibited by some priests. Only after the issue of sexual abuse by priests has been closely examined can the church come to terms with the problem and seek a solution.

Kinney, John. “NCCB establishes committee on sexual abuse,” *Origins* 23:7 (July 1, 1993) 104-105.

Bishop John Kinney of Bismarck, ND, chairman of the Ad Hoc Committee on Sexual Abuse states that it is the goal of the committee “to make sure that all of us bishops understand the depth and the seriousness, the pain and the agony of this problem and why it strikes at the very heart of the Catholic church’s trust level and credibility level.”

Kirkley, Charles F. “Fidelity in marriage . . . Celibacy in singleness: A standard for ministry,” *Christianity and Crisis* 44:7 (May 14, 1984) 186-188.

A discussion of the standards for ordination in the United Methodist Church. Author believes that ordination is not a “right,” and that those called to ministry may properly be held to a higher standard than might apply in the culture at large. In this case the term “celibacy” is applied to the single, male homosexual.

Kjølhed, Bodhin. “Zen teachers and sex: A call for enlightened standards,” *Buddhist Peace Fellowship* (Spring, 1991) 19-20.

The author notes the fact that students hold Zen teachers in high esteem and that

students expect teachers to adhere to standards that surpass those of others in society. A teacher who engages in sexual relations with a student not only causes psychological and spiritual damage, but corrupts the teaching. "This contamination of the purity of transmission is the most tragic loss of all." Teachers are challenged to become aware of their own psychological processes through meditation or therapy so that they do not project their needs into the relationship with their students.

Kornfield, Jack. "Vipassana teachers adopt code of ethics," *Turning Wheel* (Summer, 1991) 27-28.

For the first time in the history of Buddhism a large Buddhist community is led by lay teachers in America and Europe. Because the vows and Asian customs which apply to the Theravadin lineage of monks and nuns do not seem appropriate for Western lay teachers, Vipassana teachers have adopted a code of ethics. This code prohibits killing, stealing, sexual misconduct, false speech and use of intoxicants. An ethics committee is established to hear complaints and recommend action.

Laaser, Mark R. "Sexual addiction and clergy," *Pastoral Psychology* 39: 4 (Mar. 1991) 257.

Laaser asks whether the model of sexual addiction can be applied to subsets of clergy who have been guilty of sexual misconduct. He suggests that sexual addiction can be "intertwined with the role of pastor to form the identity of the sexually addicted clergy." In some cases the pastoral role might be viewed as a means of managing sexual compulsion.

Law, Bernard. "Statement on Boston's clergy sexual misconduct policy," *Origins* 22:34 (Feb. 4, 1993) 582-583.

The Boston archdiocesan policy seeks to "respect both the nature of the church and the legal requirements of society." In addition to issuing the policy, the archdiocese is attempting to raise the awareness of all Catholic clergy and personnel with regard to any sexual misconduct.

Leadership

3:4 (Fall, 1982) 30-48. "The war within: An anatomy of lust." Very graphic description of a clergyman's struggle to overcome an addiction to pornography.

9:1 (Winter, 1988) 12-13. "How common is pastoral indiscretion?" Report of a survey conducted by *Christianity Today* among pastors and non-pastor subscribers. Of pastors 23% had engaged in behavior called "sexually inappropriate"; 12% reported sexual intercourse with someone other than a spouse; and 18% reported "other forms of sexual contact" with someone other than a spouse. Among laity 45% reported "sexually inappropriate behavior"; 23% reported extramarital intercourse; and 28% reported other forms of extramarital sexual contact.

9:1 (Winter, 1988) 24-34. "The war within continues." Five years after his earlier article (*Leadership*, Fall, 1982, above), a minister speaks of his struggle to integrate sexual desire within his spirituality of marriage. Recommended readings on the is-

sue of clergy and sexuality.

Lebacqz, Karen. "Pastor-parishioner sexuality: and ethical analysis," *Explor* 9 (Spring, 1988) 67-81.

Lebacqz asks whether sexual contact between pastor and parishioner can ever be ethical. She analyzes the issues of hierarchical power, professional ethics, gender inequality and sexual vulnerability. Because the pastor is a professional minister, because he may represent both God and church, and because the pastor is usually a male in a sexist culture, there must be a basic presumption against sexual contact. If a pastor considers such contact, he must "be reflective about [his] actions and . . . be ready to expose [his] reasons to public view."

Lefevere, Patricia

"\$50 million suit filed against NY archdiocese," *National Catholic Reporter* 29:18 (Mar. 5, 1993) 5.

Attorneys for a 16-year-old boy file a \$50 million law suit after Daniel A. Calabrese, a 32-year-old priest who had served in Poughkeepsie, pleaded guilty to sodomizing the teenager in the rectory after getting him drunk. The Catholic priest was sentenced to a 90-day jail term with five years probation and at least a year at a rehabilitation center for sex offenders. He also was told to perform 1,000 hours of community service with AIDS patients and the elderly; and he was ordered to write an apology to the victim. The priest had been reported previously for showing pornographic films and drinking with teenagers at his first parish assignment in 1989, two years after his ordination. New York Supreme Court papers revealed that the archdiocese denied knowing of Calabrese's past conduct and claimed the youth "willingly consented to and participated in the [sex] act."

"Joliet Bishop Imesch addresses pedophilia by taped message," *National Catholic Reporter* 29:18 (Mar. 5, 1993) 5.

In February the 128 Catholic parishes in the Joliet diocese heard an audiotaped message from Bishop Joseph Imesch speaking about pedophilia. During 1992 four priests were removed from ministry pending investigation of sexual abuse charges against them. Two other priests pleaded guilty to sexual abuse; one is on indefinite leave and the other resigned from the priesthood. Imesch offered professional counseling to victims and members of their families as well as to any others affected by the situation.

"Sexual-abuse cases adding up in New York archdiocese," *National Catholic Reporter* 29:19 (March 12, 1993) 11.

On Feb. 23 Juan Bazalar was convicted of sexually assaulting and sodomizing a teenage altar server on four occasions at St. Peter's Catholic Church in Monticello, NY. Sentencing was set for May 3. Also in Feb. Father Daniel Calabrese was convicted and sentenced to a 90-day jail term and five months of probation. Calabrese and the archdiocese are named in a \$25 million lawsuit filed by a mother and her 16-year-old son.

"Racketeering statutes cited in sex lawsuit," *National Catholic Reporter* 29:33 (July 2, 1993) 4.

"I am seeking justice in the courts because I received no justice in the church," stated Father Gary Hayes, the first Catholic priest to bring a lawsuit against the Catholic Church for sexual abuse by a priest. Joining the class action suit are two other men and their families. All were members of St. Mary Magdalen Parish in Millville, NJ in the 1960s when the men said they were "plied with liquor, fondled and sexually abused" by two priests in their rectories and on summer vacations. Charged with abuse are Father Joseph F. McGarvey, former pastor, of Audubon, NJ and Father William C. O'Connell of Providence, RI, a seminary classmate of McGarvey. Charging that the priests conspired to create "a sex ring of children," the plaintiffs maintained that the priests transported male adolescents across state lines for this purpose. Also named in the suit are the dioceses, the bishops and the National Conference of Catholic Bishops. This is the first time church figures have been sued under Racketeering Influenced and Corrupt Organizations (RICO) statutes. In addition, Hayes was denied ordination in the Camden, NJ diocese and was ordained instead by the diocese of Owensboro, KY. A Camden document states that the Vocation Board found Hayes' "growth and development to have been 'negatively' influenced by 'priests who are still functioning' in the diocese." Camden Bishop James McHugh stated that Hayes was rejected for ordination because of his "academic record."

"Clergy anger up, morale down because of sex abuser smears," *National Catholic Reporter* 30:17 (Feb. 25, 1994) 10.

Fr. Richard Thomson, a psychologist who counsels Catholic priests involved in sex abuse, calls abuse a "cry for affection [and] for power" rather than a result of celibacy. He urges priests to "learn appropriate behavior with children, women, single men and adults."

Loftus, John Allan

"Victims of abuse as candidates," *Review for Religious* (Sept.-Oct. 1986) 725-738.

Loftus begins with a demographic overview of child sexual abuse followed by a description of the psychological implications with special emphasis on adult development. Finally the incidence of abuse victims within religious life cannot be determined because empirical data is lacking; however anecdotal evidence suggests that an increasing number of clergy and religious are "admitting" that they have been victims of child sexual abuse.

"A question of disillusionment: Sexual abuse among the clergy," *America* 163:17 (Dec. 1, 1990) 426-429.

Loftus stresses that no one has clear empirical and systematic data for analysis of the issue of sexual abuse by clergy. Because anecdotal evidence and treatment protocols are not sufficient, the church is severely limited in its ability to respond.

Los Angeles Archdiocese. "Policy on sexual abuse by priests," *Origins* 24:5 (June 16, 1994) 70-74.

The Catholic Archdiocese of Los Angeles presents guidelines for clerical interaction with adults, adolescents and minor children. In cases of sexual abuse, it is the offending priest's responsibility to provide adequate therapy for the victim(s). If the priest is unable to meet this financial obligation, the archdiocese will assist. In the case of criminal action, the priest is responsible for obtaining his own legal counsel. In addition, any priest engaged in sexual abuse will not be covered by the archdiocese's liability insurance for a period of at least five years following the report to the insurance carrier.

Lothstein, L. M. "Can a sexually addicted priest return to ministry after treatment? Psychological issues and possible forensic solutions," *Catholic Lawyer* 34:1 (1991) 89-113.

A comprehensive and clearly written description of the demographic characteristics and the behavioral patterns of pedophiles and ephebophiles. Lothstein analyzes specific issues that bear upon the lives of priests and religious who have been diagnosed as pedophiles or ephebophiles. Finally, he discusses the risk factors that enter into the decision-making process when consideration is given to returning an offender to active ministry.

Lovell, John. "Crossing sexual boundaries: It happened here," *The World* 7:1 (Jan. - Feb. 1993) 16-19.

The story of 24 women of a Unitarian Universalist congregation and the pastor who sexually abused them. A good description from the victims' point of view.

Luther, James B. "Clergy-child sexual abuse: What about the children?" *Today's Parish* 24 :7 (Nov. - Dec. 1992) 5-9.

A school psychologist describes some of the implications of sexual abuse upon children who experience it and upon adults who were victims of abuse as children. Written specifically for those engaged in school and parish ministry. Includes a poignant poem "Believe" written by Margeaux, a victim of child sexual abuse by a Catholic priest.

MacLoughlin, James. "Just following orders: the politics of pedophilia," *National Catholic Reporter* 29:24 (April 16, 1993) 15.

MacLoughlin traces the history of separation between ecclesiastical courts and civil courts which paved the way for a monarchical or totalitarian system which could shield pedophiles from civil penalties. He states that when a Catholic bishop is faced with a conflict between the pastoral needs of the people and obedience to Rome, "the bishop is environmentally conditioned to obey Rome." Morality yields to expediency. The author calls the "autocratic character of Roman Catholicism hostile to pastoral well being." Bishops are not given the freedom to administer their dioceses "as the justice of the gospel demands." In addition, the "totalitarian structure makes the system immune to reform from within. The people have no means of calling their leaders to account." Finally, MacLoughlin notes that often secular powers, schisms or revolutions have had to impose beneficial reforms upon the church. The U.S. courts have held human and civil rights in such high regard

that they have been the first to challenge “the mightiest church on earth.”

Martinez, Demetria

“Priests’ treatment facility rocked by suits,” *National Catholic Reporter* 29:17 (Feb. 26, 1993) 5.

Bruce Pasternack, attorney for 44 victims of sexual abuse by Catholic clergy, has called for the Servants of the Paraclete to close their Jemez Springs facility. Pasternack cites a 1967 warning from Dr. John Salazar, an Albuquerque psychologist, to the religious order and to then Santa Fe Archbishop James P. Davis that priests in treatment at the facility should not be released for parish work. Pasternack has charged the religious order with negligence, especially in releasing James Porter without warning to police or nearby parishes. Porter had been accused of molesting children in Massachusetts, Minnesota and New Mexico. A brief history of the Servants of the Paraclete order is also included in this article.

“‘60 Minutes’ sex-abuse investigation raises speculation in Albuquerque,” *National Catholic Reporter* 29:19 (March 12, 1993) 5.

The archdiocese of Santa Fe, NM asks for a restraining order to silence attorney Bruce Pasternack who represents persons involved in 29 cases of sexual abuse by Catholic priests. The archdiocese stated that media interference and disclosure of “inflammatory and prejudicial information” could hamper its preparation of the cases.

“To Hispanics, Sanchez is ‘pastoral giant’” *National Catholic Reporter* 29:20 (March 19, 1993) 7.

Martinez documents the “pastoral” episcopacy of New Mexico’s Catholic Archbishop Robert F. Sanchez, named the nation’s first Hispanic archbishop at age 40.

“Santa Fe archdiocese faces possible bankruptcy,” *National Catholic Reporter* 30:10 (Jan. 7, 1994) 9.

Assuring parishioners of the 91 Catholic parishes of the Santa Fe Archdiocese that “victims are receiving counseling, that guilty priests have been removed from office and that ‘steps have been taken to see that no child is ever again knowingly placed in harm’s way,’” Archbishop Michael Sheehan has asked for financial help in raising money for out of court settlements that are estimated to be in excess of \$5 million. The archdiocese is now defending itself in more than 35 cases. The archdiocese reportedly has \$70 million in business liability coverage, stated attorney Bruce Pasternack; however more than 10 insurance companies have paid out less than \$250,000 while spending more than \$15 million in attorneys’ fees to avoid honoring their contracts. The archdiocese has appealed to other dioceses to help bear the financial burden created by priests sent to New Mexico for treatment of sexual disorders, and who subsequently abused more children in New Mexico.

“Santa Fe sends out SOS to other dioceses,” *National Catholic Reporter* 30:13 (Jan. 29, 1994) 5.

The Archdiocese of Santa Fe, NM has contacted those dioceses which have sent

priests for treatment of sexual disorders to the Servants of the Paraclete Center near Jemez Springs. Chancellor Father Ron Wolf said contents of the letters are confidential, but he noted that the archdiocese was seeking financial aid to help cover a settlement of more than \$5.6 million with 25 men who say they have been sexually exploited by former Catholic priest James Porter. The diocese of Fall River, MA had sent Porter to the center for treatment twice. In addition, Father Arthur Perrault of the Hartford Archdiocese has been sued by 7 people in two separate actions. Wolf said the letters sent to various dioceses identified the perpetrators, gave an idea of the abuse, listed the number of victims and what had happened to them. In addition the archdiocese gave an estimate of the amount of money needed to settle the cases and to provide counseling for the victims. Church officials have estimated that approximately 200 people were abused by 40 priests over a 30-year period.

“Parish wants a town meeting before bailing out Santa Fe See,” *National Catholic Reporter* 30:14 (Feb. 4, 1994) 5.

Parishioners, angered by a church “covering up” and using New Mexico as a “dumping ground” for sexual abusers, call for the entire American Catholic church to bear the costs of litigation. In Dec. 1993, the parish gave \$10,000 to the archdiocese earmarked for victims’ counseling costs.

McBurney, Louis. “A pornographic habit,” *Leadership* 13:1 (Winter, 1992) 129.

A psychiatrist tells of a pastor’s struggle to overcome an addiction to pornography and his subsequent restoration to pastoral ministry.

McClory, Robert. “Sex abuse policies flawed, says lawyer,” *National Catholic Reporter* 28:39 (Sept. 11, 1992) 4.

Cook County state’s attorney, Jack O’Malley, challenges the Catholic Archdiocese of Chicago’s sexual abuse policy stating that officials are “neither legally nor morally obligated” to report sex abuse accusations to the state.

McLaughlin, Barbara. “Devastated spirituality: The impact of clergy sexual abuse on the survivor’s relationship with God and the church,” *Sexual Addiction and Compulsivity* 1:2 (1994).

In a social survey of 200 persons attending a conference on the issue of clergy sexual abuse, 43 usable questionnaires (17%) formed the basis of this study. Twenty-six Catholic survivors and nine parents, siblings or friends of Catholic survivors responded. Eight Protestants responded. Among the Catholics 17 were victimized as children and four as adults. Five respondents were abused both as children and adults. All eight of the Protestants had been abused as adults. This study indicated that victims do not usually attend church, and that the abuse caused them to remain in the developmental stage in which the abuse was experienced.

McLeod, Annmarie. “Nun child abuser hid behind veil of service,” *National Catholic Reporter* 29:25 (April 23, 1993) 18-19.

Author tells of her experience of being sexually abused by a Catholic nun who was a family friend and summer guest in her home. McLeod challenges the church to

look not only on "religious males' sexual deviance with boys, [but also] on religious women's deviance with girls."

Miller, Dee Ann

"How little we knew," *In Search of Healing* No. 2-3 (1994) 59-64.

An excerpt from a book by the same name. The author tells of a meeting with her husband's immediate supervisor after she had filed charges of sexual misconduct against a colleague in the missionary field.

"In the spirit of Queen Esther," *In Search of Healing* No. 2-3 (1994) 55-58.

Author summarizes the struggles her missionary family faced after she reported a colleague for sexual misconduct against her.

Morales, Cecilio. "Sanchez's star rose over heads of silent bystanders," *National Catholic Reporter* 29:27 (May 7, 1993) 22.

Morales alleges that Catholic church officials knew about Archbishop Robert Sanchez's sexual abuse of women but chose not to disclose the information.

Morey, Ann-Janine. "Blaming women for the sexually abusive male pastor," *Christian Century* (Oct. 5, 1988) 866-869.

Morey examines the role of woman as seductress in literary portrayals of the "fallen" cleric. Citing the clear imbalance of power, between a minister and a congregant, Morey challenges the church to view the woman as the vulnerable rather than offending party in cases of sexualized behavior between pastoral counselor and counselee.

Muse, J. Steven. "Faith, hope, and the "urge to merge" in pastoral ministry: Some countertransference-related distortions of relationship between male pastors and their female parishioners," *Journal of Pastoral Care* 46: 3 (Fall, 1992) 299-308.

Since there have been no empirical studies to determine the incidence of sexual abuse by pastoral counselors, Muse first makes use of studies regarding sexual abuse of clients by psychologists, psychotherapists and physicians. He then describes both pastors vulnerable to becoming abusers and women who are at risk of being victimized. He ends with signs which can warn the clergyman that care must be taken in the counseling relationship; and he recommends ways in which clergy can develop intimate relationships without sexualizing them. He urges clergy to seek regular spiritual direction for themselves, recommends that they make use of clinical supervision opportunities, and that they "treat themselves" to weekly psychotherapy.

Muse, Stephen and Edwin Chase. "Healing the wounded healers: "Soul" food for the clergy," *Journal of Psychology and Christianity* 12:2 (1993) 141-150.

In an article written for therapists whose practice includes clergy, Muse looks at both the intrapsychic and circumstantial factors that can contribute to a clergyman "acting out" sexually. Among these factors are ambivalence around sexuality and the body in general, as well as the tendency toward depression and isolation in min-

istry. He notes that therapists can be agents for encouraging clergy to seek regular spiritual direction and psychotherapy before they engage in patterns of abuse.

National Catholic Reporter

28:40 (Sept. 18, 1992) 4. "Notre Dame professor gets disciplined." John Howard Yoder, a Christian ethics professor at the University of Notre Dame, has had his ministerial credentials lifted by the Mennonites after admitting to charges of sexual misconduct. An 11-month investigation heard allegations brought by eight women who have national leadership roles in the denomination. The incidents took place in the 1970s and mid-1980s. Yoder's teaching status remains unchanged because the alleged incidents occurred before he came to Notre Dame, and because he has submitted to the discipline of the church.

28:40 (Sept. 18, 1992) 5. "Survey finds clergy-child sex abuse takes toll on Catholics." A summary of the findings of Stephen Rossetti's survey of active Catholics in which he found that Catholics trust and support the church less in the wake of sexual abuse scandals.

29:16 (Feb. 19, 1993) 10. "Bishops to discuss sexual-abuse problem." A two-day meeting between church leaders, researchers, victims, priests being treated for abuse and a variety of experts is sponsored by the National Conference of Catholic Bishops' Committee on Priestly Life and Ministry. The meeting will convene Feb. 22-23 in St. Louis to discuss prevention of sexual abuse through better selection and training of candidates to the priesthood; professional and pastoral help for victims; treatment of offenders; and conditions for returning offenders to active ministry.

29:21 (March 26, 1993) 3. "Pope has kind words for Sanchez, while warning of scandal." Addressing a group of U.S. bishops the Pope asked for prayers for Archbishop Robert Sanchez who has been accused of sexual involvement with five women. As the television media air reports on celibacy and sexuality, several dioceses have announced policies dealing with allegations of sexual abuse by priests. In addition, several dioceses are adopting the model of independent investigative boards to hear cases involving sexual abuse by priests.

29:21 (March 26, 1993) 10. "Canadian orphans suing Catholic institutions." Four thousand members of the Orphans of Duplessis have filed lawsuits in Quebec asking a total of \$1.2 billion in damages from seven Catholic religious institutions. Plaintiffs described both physical and sexual abuse by nuns. A spokeswoman for the religious institutions, Giselle Fortier, stated that "methods of discipline used were common for that day."

29:22 (April 2, 1993) 7. "Church rejects bishop's ban on priest accused of sexual molestation." On March 9 the Vatican-based high court, the Signatura, overturned a 1988 decision by Pittsburgh Bishop Donald W. Wuerl which barred Father Anthony J. Cipolla from all public ministry following accusations of sexual abuse. On

March 24, at the request of the bishop, the Apostolic Signature agreed to rehear the case. Praising Cipolla's ministry, the court stated that Wuerl lacked evidence and did not follow requisite procedures in removing Cipolla from ministry. The decision said that Wuerl "acted 'intemperately at times' and criticized his 'rigid way of acting' in the disposition of Cipolla's case."

29:22 (April 2, 1993) 6. The Joliet, IL diocese has published a special section on sexual abuse by clergy for distribution to its 128 Catholic parishes and missions. The supplement for the diocesan paper includes information from clinical psychologists and attorneys. Since Jan. 1991 two priests have been removed from their ministries after allegations of sexual abuse.

29:25 (April 23, 1993) 4. (Providence, RI) Four persons have filed civil lawsuits against Catholic priest James Silva alleging sexual abuse more than 20 years ago. In January Silva was given medical leave and banned from functioning as a priest. A diocesan task force is developing guidelines pertaining to sexual abuse by priests.

29:25 (April 23, 1993) 24. "Among priest child-abuse victims, healthy clergy." This editorial notes the lack of being trusted that now plagues all Catholic priests as a result of allegations of sexual abuse by a few. Trust can only be reestablished through conversation among priests and parishioners, counselors and bishops, women and men. "Reestablishing trust, like dealing with the pain, is a lifelong challenge."

29:26 (April 30, 1993) 6. Catholic Bishop Elden F. Curtiss (Helena, MT) has issued a new diocesan sexual misconduct and child-abuse policy. He will appoint members of a response team to investigate alleged violations of the policy.

29:27 (May 7, 1993) 10. Sex abuse by Catholic priests will be treated as a legal and moral wrong, stated Bishop Bernard W. Schmitt of Wheeling-Charleston, WV. The bishop spoke on the issue of sexual abuse via church bulletins and audio and videotapes on April 24.

29:28 (May 14, 1993) 11. "Report urges new response to clergy misconduct in Santa Fe." A four-member commission released a 28-page report which urged the Santa Fe, NM archdiocese to reject "denial and defensiveness" in responding to charges of sexual misconduct by Catholic clergy. The commission rejected the closing of the Paraclete facility in Jemez Springs, NM which has treated priest pedophiles. Instead, they recommended that the archdiocese closely monitor the number of "drop-out" priests who remain near the facility after being released from the program. The commission was appointed in October, 1992 by Archbishop Robert F. Sanchez of Santa Fe who resigned in April after allegations of sexual abuse were made about him by five women.

29:31 (June 4, 1993) 7. A former Roman Catholic priest, Gordon Macrae, was hos-

pitalized May 17 in Albuquerque, NM following an apparent suicide attempt. He had formerly worked for the Servants of the Paraclete facility in Jemez Springs and had recently been indicted on multiple counts of sexual abuse of teenagers.

29:32 (June 18, 1993) 7. A retired Massachusetts Catholic priest, 65-year-old Father David Holly, was sentenced to 275 years for molesting eight boys in Alamogordo, NM 20 years ago. He pleaded guilty to eight counts of sexual abuse and will not be eligible for parole until 2048.

29:32 (June 18, 1993) 8. "Bishops take steps to curtail incidents of clergy sex abuse." Cardinal John J. O'Connor of New York summoned the 2,300 priests of his archdiocese to a conference on clergy sex abuse. In San Jose, CA. Bishop R. Pierre DuMaine has begun diocesan awareness training sessions on sexual harassment, exploitation and abuse. The Washington archdiocese also conducted similar sessions.

29:32 (June 18, 1993) 8. "U.S. bishops named in class-action suit involving sex abuse." Father Gary Hayes of Henderson, KY and two others have filed a class-action suit against the U.S. bishops charging them with racketeering and obstructing justice in cases of sexual abuse which took place between 1965 and 1973. Plaintiffs charge that Fathers Joseph F. McGarvey of Audubon, NJ and William C. O'Connell of Providence conspired to form a sex ring of children. The suit calls for the creation of a national registry of priest child molesters that would be made public to parishioners. Father Hayes is the first Catholic priest known to file a case of this kind against the Catholic church.

29:33 (July 2, 1993) 10. "Apology issued for TV station's untelevised story." Francis Patrick Brady who heads Viacom, a multimedia firm that owns CBS affiliate KMOV-TV in St. Louis has apologized for "errors in judgment" in producing a story depicting a hotel room meeting between a Catholic priest of the Belleville, IL diocese and a male prostitute. In an attempt to gain information about sexual misconduct involving area priests, the television station had paid for the prostitute's air fare, rental car and hotel room that had been wired for cameras and sound. The priest has not been identified, and the story was not aired; however a grand jury is investigating whether the station engaged in behavior "designed to facilitate" prostitution.

29:33 (July 2, 1993) 24. "Moving beyond denial, sex abuse examination begins." The editorial notes that phase one in the clergy child abuse saga involved forcing the bishops to move beyond denial and getting them to develop structures to handle complaints. Phase two involves forcing the bishops to examine the root causes of sexual abuse by clergy. "The laity are asking if Catholic church structures and its clerical state, its isolation of priests and its sexuality teachings are major contributory factors." Moral theologian Susan Secker notes the "muted, if not silent, voices of our national Catholic organizations, canon lawyers, clergy and religious, lay ministers and religious educators, women's groups and lay groups." Scholarly investigation and reflection is also "remarkable in its absence."

29:34 (July 16, 1993) 6. "Sex charges against Davenport bishop are dropped." Two Minnesota women have dropped charges of sexual abuse against Catholic Bishop Gerald F. O'Keefe of Davenport. The women alleged that the abuse took place 30 years ago. O'Keefe criticized attorney Jeffrey R. Anderson for not being more critical of the charges since both women had been hospitalized many times for mental illness and were known to have "long histories of dishonest and criminal behavior."

29:34 (July 16, 1993) 8. "O'Connor issues new statement on clerical misconduct." As the archdiocese defends itself against several multimillion-dollar suits stemming from accusations of sexual abuse by two priests, Cardinal John J. O'Connor issued new policies and procedures for handling allegations of sexual abuse by Catholic priests in the Archdiocese of New York.

29:35 (July 30, 1993) 8. Catholic priest Edward Pipala pleaded guilty to sexually abusing boys from parishes in Goshen and Monroe, NY for more than a decade. He was to be sentenced Nov. 5 and could serve up to eight years in a federal prison. The victims have brought four suits against the New York archdiocese and the priest seeking \$520 million in damages.

29:36 (Aug. 13, 1993) 8. Former students at several Christian Brothers Catholic schools in western Australia say a public apology by the brothers in a newspaper advertisement is not sufficient in making amends for alleged sexual abuse. The victims, now in their 50s, have formed a group called Victims of Institutionalized Cruelty, Exploitation and Supporters, (VOICES), and have asked for a government inquiry and belated damages.

29:37 (Aug. 27, 1993) 11. "Sheehan named to replace Sanchez." Bishop Michael Sheehan of Lubbock, Texas has been named the new archbishop of Santa Fe, NM replacing Archbishop Robert Sanchez who resigned following allegations of his sexual involvement with five women. Sheehan has implemented a new policy to deal with allegations of sexual misconduct by Catholic priests. The policy was recommended by Sanchez before his resignation.

29:37 (Aug. 27, 1993) 11. "Bishops outline sex abuse response." The ad hoc committee of the National Conference of Catholic Bishops will focus on the following issues: Church response to offenders and victims; better screening of seminary candidates; reassignment of priests who have been involved in sexual abuse; and education about abuse. The first organizational meeting was Aug. 3 in Chicago.

29:37 (Aug. 27, 1993) 12. A Fulton County Superior Court judge has dismissed a lawsuit filed by Vicki Long against former Atlanta Catholic Archbishop Eugene Marino who resigned in 1990 after disclosure of a sexual relationship with Long. She sought damages for personal injury.

29:38 (Sept. 3, 1993) 6. "Priests' 'companions' write letter to pope." Seven French women, members of "Claire-Voie," said they represented thousands of women who

were forced to “live clandestinely, for a lifetime, the love they share with a priest.” When they arrived in Italy, Vatican officials referred the women to a French missionary priest who refused to convey their concerns to the Vatican and who called the police to remove the women from his residence. In their unsigned letter they asked the pope to form a commission to look into the reality faced by “thousands of priest’s [sic] companions who live in the shadows, often with the approval of church superiors and by the children who do not know their fathers and are raised by their mothers alone or are abandoned.”

29:39 (Sept. 10, 1993) 7. A paternity test has been requested by Father Michael Woods of Georgia in order to determine if he fathered a child by Vicki Long. Woods no longer functions as a Catholic priest and is willing to accept responsibility for the child. Long’s sexual relationship with Archbishop Eugene Marino led to his resignation in 1990.

29:39 (Sept. 10, 1993) 8. “Disclosure of Sanchez whereabouts sought.” Attorney Stephen Tinkler has petitioned the court in order to learn the whereabouts of Archbishop Robert Sanchez. Tinkler represents a John Doe plaintiff and six others who allege sexual abuse by Sanchez and by former priest Jayson Sigler. Eleven other plaintiffs are represented by other attorneys.

29:41 (Sept. 24, 1993) 6. Corrine Clark has formed a group “Men of God . . . And the Women Who Love Them” to act as a support group to Catholic priests and women involved in relationships with them. They meet monthly in Branford, CT. This group is an offshoot of Good Tidings based in Canadensis, PA and similar to Promises, based in Alexandria, VA.

29:42 (Oct. 1, 1993) 6. “Sex abuse charges prompt formation of ‘healing team.’” Pueblo, CO Bishop Arthur Tafoya will lead a “healing team” on a tour of Catholic parishes of southern Colorado which had been served by Father Delbert Blong during his 41 years as a priest. The team will include a licensed social worker, mental health professionals and a priest. Thomas Perea of Boulder has accused the priest of infecting him with HIV during 19 years of sexual abuse. The retired priest has been suspended from his sacramental duties and the diocese has offered counseling to Perea.

29:44 (Oct. 15, 1993) 9. Former Catholic priest James A. Porter pleaded guilty to more than 40 counts of sodomy, indecent assault and child molestation against more than 30 children in the early 1960s in three Massachusetts parishes.

29:44 (Oct. 15, 1993) 9. A Catholic priest in Augsburg, Germany, has been sentenced to four years in jail for raping a 12-year-old girl at least 45 times in 1982-83. The judge said that church authorities ignored the original accusations of rape made in 1984.

30:2 (Oct. 29, 1993) 7. “Pope promises prayers for sex-abuse committee.” Bishop

John Kinney, chairman of the U.S. bishops' Ad Hoc Committee on Sexual Abuse, asked for the pope's prayers during a private meeting with him in Rome on Oct. 12. The committee has met three times and plans to meet every two months. A priority will be to meet with victims of sexual abuse to help them begin "whatever opens them to healing."

30:3 (Nov. 5, 1993) 12. "Changes in canon law sought to deal with priest sex-abuse cases." Archbishop William H. Keeler of Baltimore, president of the National Conference of Catholic Bishops, said that the Committee on Canonical Affairs had been considering recommendations from the Vatican-U.S. commission. Appointed by the pope, the commission considered the differing statutes of limitations between church law and civil law; and the differing definitions of a minor. In most states a minor is a person under 18 year of age; the church considers a minor a person under 16 years of age.

30:5 (Nov, 19, 1993) 6. The New Mexico treatment center run by the Servants of the Paraclete agreed to a multimillion dollar settlement with 25 men who alleged sexual abuse by former Catholic priest James Porter. Porter recently pleaded guilty to 41 counts of sex abuse. Plaintiffs will receive a total of \$525,000 in cash with an additional \$5.6 million in damages.

30: 6 (Dec. 3, 1993) 6. "British Benedictine Abbot resigns after male visitor alleges sexual assault." Abbot Mark Hargreaves of Prinknash Abbey in Gloucestershire resigned after having been accused of sexual assault by Gary Marsh, a young man who had been interested in joining the Catholic religious order.

30:7 (Dec 10, 1993) 4. "Bernardin denies abuse charges under oath." Cardinal Joseph Bernardin of Chicago denies sex-abuse accusations and requests an "expedited handling of the case."

30:7 (Dec. 10, 1993) 7. Catholic Bishop Louis E. Gelineau of Providence requests dismissal of a suit against him which contended that he was aware of sexual misconduct by Father William O'Connell who once served in the Providence diocese.

30:7 (Dec. 10, 1993) 8. "Woman settles with Santa Fe Archdiocese in sex abuse case." Elaine Montoya accepted a \$600,000 settlement in a case against Catholic priest Arthur Perrault. The Santa Fe archdiocese has offered settlements in 11 other cases without resolution.

30:8 (Dec. 17, 1993) 8. "Policy moves announced on child sexual abuse." Catholic archdioceses of Baltimore and Milwaukee announce criminal background checks for all involved in ministry primarily with children as well as all applicants for diaconate or seminary studies. Milwaukee will check all priests transferring from other dioceses. Baltimore establishes a review board for sexual abuse cases, and Kansas City, MO announces "zero tolerance" for sexual abuse of children.

30:8 (Dec. 17, 1993) 8. "Porter accuser discloses diocese's secret agreement." Deal allegedly made between Fall River, MA diocese and 31 male and female victims of former Catholic priest James Porter to insure victims' silence in discussing the case. From each settlement \$5,000 was reportedly held in escrow to insure silence for 12 to 15 months following the agreement.

30:10 (Jan. 7, 1994) 3. "Bernardin trial date set for May." The case of Cardinal Joseph Bernardin and Father Ellis Harsham, accused of sexual abuse by Steven J. Cook, will be heard on May 9. U.S. District Judge S. Arthur Spiegel of Cincinnati refused to grant a separate trial for Bernardin. Both have denied the charges. A Dayton newspaper has reported that another former student of Harsham's has come forward with an additional charge of sexual abuse.

30:13 (Jan. 28, 1994) 7. "Documents claim Cincinnati archdiocese offered to assist Cook." Court documents have shown that the Archdiocese of Chicago had offered three months ago to pay for some of Steven Cook's therapy even though Cardinal Joseph Bernardin has denied Cook's allegations of sexual abuse. Cook also charged Father Ellis N. Harsham with sexual abuse at the same high school seminary. The Archdiocese of Cincinnati had removed Harsham from the school in the 1970s "because of an incident of sexual behavior with an adult seminarian"; but Catholic officials determined that Cook's allegations were unsubstantiated.

30:15 (Feb. 11, 1994) 3. "Man says diocese paid hush money." Fr. John R. Tulipana resigned from the Kansas City- St. Joseph, MO diocese as a result of allegations of sexual abuse brought by Richard Durocher "some years ago." Durocher claims to have received \$150,000 in a confidential settlement with the Catholic diocese.

30:16 (Feb. 18, 1994) 9. "Santa Fe settles more lawsuits." Forty-five cases of sexual abuse by Catholic priests have been resolved with at least 13 cases still pending in the Archdiocese of Santa Fe. On Feb. 7 Archbishop Michael Sheehan announced the settlement of 16 sexual abuse lawsuits against former priest Jason Sigler.

30:18 (March 4, 1994) 7. "Appeals court rejects clergy abuse suit." After a county court dismissed Vicki Long's lawsuit because the statute of limitations had run out, the Georgia Court of Appeals also dismissed her lawsuit against the Catholic Church for alleged clergy sexual abuse by former Atlanta Archbishop Eugene Marino. She claims she and Marino were married in 1988 and that another priest fathered her daughter.

30:21 (March 25, 1994) 7. "Malone asks diocesan workers to sign sex abuse affidavits." Bishop James W. Malone of Youngstown, OH released a new policy to deal with the issue of child sexual abuse. All 1,600 employees of the Catholic diocese (clergy, religious and lay) will be covered by the policy. If a complaint is substantiated by the chancellor's office, it must be reported to civil authorities as required by Ohio law. A review board will be established to handle complaints, and a de-

tailed investigation of complaints will be made by the diocese following civil actions.

30:21 (March 25, 1994) 12. In the March issue of the Santa Fe archdiocesan Catholic newspaper, Archbishop Sheehan said former Archbishop Robert F. Sanchez is living at "a religious house in this country where he helps as a chaplain for the sisters." Sanchez resigned in March, 1993, following allegations of sexual abuse against several young women.

30:24 (April 15, 1994) 12. "Canadian bishop to be retried." Bishop Hubert O'Connor, the highest ranking Canadian figure to be charged with sexual abuse, will be retried on four charges dating back to the 1960s. O'Connor pleaded innocent to two rape and two indecent assault charges. He admitted having consensual sex with one complainant who became pregnant.

30:26 (April 29, 1994) 6. "Cook, diocese settle in sex abuse lawsuit." The Cincinnati archdiocese reached a confidential out-of-court settlement involving allegations made by Steven J. Cook against Fr. Ellis N. Harsham. Harsham retains his campus ministry post at Wright State University while the archdiocese investigates other charges of sexual abuse against him.

30:29 (May 20, 1994) 6. Father Robert Van Handel, the second Catholic priest to be convicted of child abuse at St. Anthony's Seminary in Santa Barbara, CA, pleaded guilty to molesting a boy under 14 and faces a maximum of eight years in prison. Van Handel is a former boys choir director.

30:30 (May 27, 1994) 5. "Archdiocese says no to request for money." Attorney Bruce Pasternack of Albuquerque charged that Archbishop Michael Sheehan and vice chancellor Sister Nancy Kazik "will be held personally responsible if anything happens to Susan Sandoval." The archdiocese had spent more than \$5,000 and sent another \$1,000 for treatment. Sandoval filed a lawsuit for alleged sexual abuse by Father Robert Kirsch which began in 1973 when she was 15 years old. She is appealing dismissal of the lawsuit in 1993 because the statute of limitations had run out. Sandoval "has made several attempts to harm herself as a result of the emotional consequences" stemming from the alleged sexual abuse.

30:31 (June 3, 1994) 7. "Santa Fe Catholics donate \$1.6 million to help archdiocese." Catholics donated \$1.6 million in response to litigations demanding \$50 million as a result of clerical sex abuse. Archbishop Robert Sheehan invites all sexual-abuse victims to a Mass of healing on June 5, 1994, the feast of Corpus Christi.

30:34 (July 15, 1994) 7. "Priest, principal cleared of charges." A Chicago jury cleared Catholic priest Robert Lutz and former principal Alice Halpin of sexual abuse charges filed against them by the parents of a 7-year-old boy from St. Norbert's School. The Chicago Archdiocese paid the legal fees of the defendants. A countersuit charging the parents of slander is still pending. Lutz faces another civil

trial in a similar case, but the Archdiocese maintains his innocence in this case also.

30:36 (Aug. 12, 1994) 7. Bishop James T. McHugh of Camden announced he will go into court rather than settle five or six cases of alleged sexual abuse by Catholic priests.

National Conference of Catholic Bishops. "Child sexual abuse: Think tank recommendations," *Origins* 23:7 (July 1, 1993) 108-111.

The committee recommends that priority be given to pastoral care of victims of sexual abuse by Catholic clergy; that accusations be dealt with openly and truthfully; and that educational programs be designed for hierarchy, clergy, and laity. Prevention should include standardized screening of candidates for priesthood; promotion of the health and vitality of the priesthood; and use of scientific investigation to aid both treatment for and recognition of abusive behaviors. The committee recommends that re-assignment to ministry should protect others from being victimized and that offenders be closely supervised if they are returned to ministry.

News from the hierarchy worldwide: From awful to awesome Churchwatch (Oct. - Nov. 1993) 6.

Call to Action reports that 240 writs were filed with the Supreme Court of Australia concerning alleged sexual and physical abuse by Catholic Christian Brothers against child migrants, orphans and state wards.

Origins

22:10 (Aug. 6, 1992) 178-179. (Sioux City, Iowa) "Diocesan policy: When a cleric is accused of sexually exploiting a minor." Catholic Bishop Lawrence Soens of Sioux City, IA releases the diocesan policy regarding allegations of sexual abuse against minor children. A review board is established to investigate allegations and make recommendations to the bishop regarding the disposition of accused clergy. A delegate is appointed by the bishop to work together with the review board, the accused cleric, the victim and victim's family, and civil authorities where applicable.

24:6 (Dec. 8, 1994) 441-442. "Homily for mass of understanding and healing." Bishop J. Kendrick Williams of Lexington, Ky celebrated a Mass of understanding and healing on Nov. 27, 1994 at Mary Queen of the Holy Rosary Church in Lexington following the conviction of the founding pastor, Msgr. Leonard Nienaber. The 87-year-old Catholic priest was sentenced on Sept. 30 to 10 years' probation following a guilty plea to ten counts of sexual abuse of children. "For those of you abused by any minister of the church, I apologize. I cannot go back in time and eliminate that action. I cannot know your hurt, I cannot know your anger, your pain or feel your sense of betrayal. Sometimes I don't know what to do to help you. Sometimes I stand afraid to act because I am afraid that I might deepen your hurt. What I can do is promise that I will walk with you as a brother in Christ."

24:6 (Dec. 8, 1994) 443-444. "Twenty-Eight Suggestions on Sexual Abuse Policies." At the Nov. 14-17 National Conference of Catholic Bishops meeting, the Ad

Hoc Committee on Sexual Abuse presented bishops with a binder of resource materials intended to help them respond to the "extremely sensitive and challenging area of sexual abuse by members of the church and in society at large." Topics include general guidelines, prevention-education, administrative guidelines (civil law and insurance), victims, the accused, and media.

Parker, Rebecca. "Ordination: A sacred trust," *The World* 7:1 (Jan. - Feb. 1993) 26-27.

Through ordination a minister is given access to human life in its most vulnerable moments. The congregation expects the minister to reverence that life and especially to honor the sacredness of human sexuality. When a clergyman sexually abuses another human person, he not only violates the meaning of ordination, but he abuses the trust that has been placed in him in order to pursue his own need to overpower or control another human person.

Pastoral Psychology

39:4 (1991) 265-268. "Sexual addiction." The story of a clergywoman's journey through sexual addiction and into the recovery process. "This is not about moral breakdown. I never once approved of my behavior. This is about life and death. The only way I could live another day was to be in an inappropriate sexual relationship."

39:4 (1991) 269-273. "One priest's reflections on recovery." The story of a Catholic priest convicted of sexual abuse of adolescent boys. He urges the Church to hold offenders accountable for their behavior and to support both the victim and the victimizer with therapy. In addition, he challenges the church to try to develop a ministry for those in recovery through which they can become "wounded healers" for others facing similar difficulties in their lives.

Pellauer, Mary. "Sex, power, and the family of God: Clergy and sexual abuse in counseling," *Christianity and Crisis* (Feb. 16, 1987) 47-50.

Beginning first with empirical data from studies of psychologists and psychiatrists, Pellauer urges pastoral counselors to hold themselves accountable to "secular" codes of ethics and the "client bill of rights" which specifically exclude sexualized behavior between counselor and counselee.

Phillips, Michael E. "Appropriate affection," *Leadership* 9:1 (Winter, 1988) 108-112.

A pastor's reflections regarding "a time for embracing and a time to refrain from embracing." Discussion of the healing power of touch along with instances in which touching is inappropriate.

Pilarczyk, Daniel. "Painful pastoral question: Sexual abuse of minors," *Origins* 22:10 (Aug. 6, 1992) 177-178.

Following a closed discussion of the church's response to the issue of sexual abuse of minor children, president of the National Conference of Catholic Bishops, Arch-

bishop Daniel Pilarczyk, renews the bishops' commitment to reach out to the victims and their families while continuing to develop guidelines which can assist each diocese in the formulation of its own specific policies and practices with regard to the sexual abuse of minor children.

Pohl, David C. "Taking Measures," *The World* 7 :1 (Jan.-Feb. 1993) 28.

Historical review of the manner in which the Unitarian Universalists addressed sexual ethics both before and after their merger. The Unitarian Ministers Association adopted a professional code of ethics in 1951 which was revised in 1961 when they merged with the Universalists. In the mid- 1980s sexual ethics was explicitly addressed in the code. From 1961 to 1984, one complaint of sexual misconduct was brought to the Ministerial Fellowship Committee. Since 1984 twelve complaints have been received.

Porter, Richard. "Piecing together a shattered church," *Leadership* 9:2 (Spring, 1988) 82-89.

The story of a congregation's struggle to survive following removal of its pastor for sexual misconduct. New pastor gives hints about development of leadership in the congregation as well as some lifegiving activities that aided him personally in the rebuilding process.

Provost, James H. "Some canonical considerations relative to clerical sexual misconduct," *The Jurist* 52 (1992) 615-641.

Practical application of Catholic canon law to the issue of clergy sexual misconduct. Cites limitations placed on bishops but also illustrates how canon law can be invoked in order to initiate investigations and punitive steps against clergy. In addition, shows how canon law applies to the bishops' responsibilities toward victims and their families. Interesting and easily read.

Quinn, John R. "Scandals in the Church: Reflections at Paschaltide," *America* 168:12 (April 10, 1993) 4-6.

Quinn suggests that seminary formation should foster healthy human development among candidates for the Catholic priesthood so that a balanced human and spiritual life may be achieved by priests. He urges careful screening of candidates and warns against accepting marginal candidates as a remedy for fewer priestly vocations.

Rambo, Lewis. "Interview with Reverend Marie Fortune, August 8, 1990," *Pastoral Psychology* 39:5 (1991) 305-319.

A discussion of sexual abuse in the ministerial relationship by clergy against a vulnerable adult. Explores the issue of unequal balance of power and the violation of trust.

Rand, Yvonne. "On corruptibility," *Buddhist Peace Fellowship* (Spring, 1991) 25-26.

In a review of Peter Rutter's book, *Sex in the Forbidden Zone*, the author challeng-

es Buddhist institutions to develop and publish a standard of behavior for teachers, to designate persons to hear complaints of sexual misconduct, and to develop a process of inquiry.

Reese, Thomas J. "Bishops meet at Notre Dame," *America* 167:1 (July 11, 1992) 4-6.

Report includes a five-step program for dealing with sexual abuse by Catholic clergy which was recommended by the bishops' conference in 1987. Dioceses were urged to respond promptly; relieve the accused of ministerial duties; comply with state laws governing the reporting of child abuse; and deal openly with allegations.

Rickter, Phyllis. "Women speak out," *The World* 7:1 (Jan. - Feb. 1993) 27.

Author notes that while "clergy sexual abuse has been going on for years" the victim is still discounted while attention is placed on saving the minister's career. She urges an open dialogue which can both heal and prevent.

Rigali, Norbert J. "Church responses to pedophilia," *Theological Studies* 55:1 (Mar. 1994) 124-139.

A critical analysis of both the Canadian and United States Bishops' response to the issue of sexual abuse of children by Catholic clergy and religious. Rigali urges an open conversation in which there are precise definitions for the language used (i.e., pedophile, ephebophile, child, minor), and in which a priori declarations concerning the nature of the problem are discarded.

Roberts, Tom.

"Bernardin sex abuse charges dropped," *National Catholic Reporter* 30:19 (Mar. 11, 1994) 3.

Lawsuit against Catholic Cardinal Joseph Bernardin of Chicago is dropped due to insufficient and unreliable evidence, some of which was gained during hypnosis by an unlicensed hypnotist. In dropping the case, attorneys avoid federal rules prohibiting frivolous suits. Question is raised as to the role of media in sensationalizing the case.

"Lawyer in Bernardin case: 'I was troubled,'" *National Catholic Reporter* 30:20 (Mar. 18, 1994) 6.

Attorney Andrew Lipton recounts the lack of solid evidence in the sex-abuse charges filed against Catholic Cardinal Joseph Bernardin of Chicago. Lack of evidence lead to dismissal of the charges.

Rodriguez, Richard. "Priests more like us than we want to admit," *National Catholic Reporter* 30:13 (Jan. 28, 1994) 2.

Rodriguez notes that society holds clergy to different standards than those lived by the laity. Brides and grooms promise lifelong fidelity, and then get divorced. Catholics, nevertheless, were shocked when Santa Fe, NM Archbishop Robert Sanchez was accused of sexual involvement with five women. The failures of priests "tell us more about ourselves than we want to know."

Roehlkepartain, Eugene C. "Sex, power and ministry," *Christian Ministry* (May - June, 1991) 7.

Brief overview of the estimated prevalence of sexual misconduct by clergy and the empirical study on sexual harassment conducted by the United Methodist Church in 1990. Urges congregations to talk about the issue of clergy sexual abuse and to listen to victims with compassion.

Rohde, Marie. "Seminary the eye of new sex scandal storm," *National Catholic Reporter* 29:22 (April 9, 1993) 3.

At least five former and current students of Sacred Heart Catholic School of Theology in Hales Corner, WI have charged the former rector, Father Jerome Clifford, of taking punitive action against students who rebuffed his sexual advances. Clifford resigned Nov. 1. The seminary also dismissed Father Gale Leifeld, the school's academic dean after a number of teenage boys reported him for sexual misconduct while he was rector of the St. Lawrence Seminary High School in Fond du Lac County. No civil or criminal action was taken, and students had been offered counseling.

Rossetti, Stephen J.

"Broken symbols: Child sexual abuse and the priesthood," *Today's Parish* 24:5 (Sept. 1992) 9-13.

In a subset of the survey listed below the responses of 1,013 active Catholic laity in the United States and Canada were analyzed. Rossetti reports that among those who knew of a priest charged with child sexual abuse, there was a marked decrease in confidence in priests, in their trust in the priesthood, in their support for priestly vocations, and in their satisfaction with priests in the church today.

"A wounded Church: Child sexual abuse and the Catholic Church," *Today's Parish* 24:6 (Oct. 1992) 9-13.

A survey was conducted in the United States and Canada in which 1,013 laity, 391 sisters, 46 deacons, 10 brothers, 314 priests and 36 others replied. Of these respondents, those who knew of a Catholic priest charged with child sexual abuse were less likely to trust the church with their children, were less likely to have confidence in the church to take care of problems with the clergy, were less supportive of celibacy, and were less likely to look to the church for guidance on sexual issues. Based on this survey Rossetti recommends that the church respond openly and aggressively to complaints and that educational sessions and discussion groups be held in all parishes to address the issue of clergy sexual abuse.

"Parishes as victims of abuse," *Human Development* 14:4 (Winter, 1993) 15-20.

A survey of 1,810 active Catholics in the United States and Canada revealed that the majority do not feel that the church has kept them informed on the issue of sexual abuse by clergy against minor children. Lack of information has caused an erosion of trust. Rossetti notes the need for healing of the victims, their families, the parish and the offender. He suggests an action plan for parishes which includes a "parish assistance team."

“Statistical reflections on priestly celibacy,” *America* 170:21 (June 18, 1994) 22-24. Results of a survey of 1,810 Catholics in the United States and Canada reveal that there is a perceived link between the tradition of celibacy and the sexual abuse of minor children. Secondly, the survey indicates that the majority of respondents do not favor mandatory celibacy. With little outside support for celibacy, Rossetti argues that a priest can become a faithful celibate only after he has made an “internalized” celibate commitment.

Rouse, Warren J. “Letters to the editor,” *Human Development* 14:2 (Summer, 1993) 5-6.

Rouse raises the question of the cleric falsely accused of sexual misconduct. He argues for confidentiality in hearing reported cases in order to protect the reputation of both the victim and those clergy who may be innocent.

Rowan, Diana N. “An open letter to the American Buddhist community,” *Turning Wheel* (Summer, 1991) 22-23.

Rowan draws a parallel between Chinese silence in relation to human rights issues in Tibet and the “conspiracy of silence” around issues of sexual abuse. She notes that the abuse of power manifested in sexual relations between teacher and student is destructive to the community. She warns that failure to adopt clear codes of ethics can cause loss of financial support for Zen centers.

Sanchez, Robert. “Archbishop Sanchez submits resignation,” *Origins* 22:42 (April 1, 1993) 722-724.

Following allegations of sexual abuse made against him by three women, Catholic Archbishop Robert Sanchez notifies members of the Santa Fe, NM Archdiocese that he has submitted his resignation as archbishop.

Schneider, Tensho David. “Abuse is a slippery concept,” *Buddhist Peace Fellowship* (Spring, 1991) 24.

Schneider links the basic human energy of sexuality to spiritual growth and notes that transmitting teachings through sexual relations between teacher and student has not always been culturally taboo. He does caution that acting on sexual impulses sometimes can be dangerous to the teacher-student relationship.

Schreffler, Rebekah

“Sex-abuse trial of Pittsburgh priest delayed until fall,” *National Catholic Reporter* 29:29 (May 21, 1993) 4.

Anthony Cipolla, formerly a Catholic priest of the Pittsburgh diocese, has been named in a civil suit along with Bishop Donald Wuerl and two of his predecessors, a nun and three priests. Kenneth Bendig charges that those named knew of sexual abuse which began when he was 13 years old, but that they did nothing to stop the abuse. He seeks \$20,000 in compensatory and punitive damages. Bishop Wuerl placed Cipolla on administrative leave forbidding him to preach, wear clerical garb, celebrate Mass, or present himself as a priest. Cipolla appealed to the Vatican, and the Supreme Tribunal of the Apostolic Signatura, the church’s highest court, said

that Wuerl's interpretation of canon law was faulty. The diocese has filed for a re-hearing. Meanwhile the priest lives in an Ohio monastery and continues to minister at prayer groups and churches in dioceses outside Pittsburgh. The diocese has refused to pay Cipolla's legal fees, and attorney John Conte took the case on a pro bono basis.

"Man settles out of court with diocese, accused priest," *National Catholic Reporter* 29:44 (Oct. 15, 1993) 4.

Timothy Bendig, 24, of Pittsburgh reached an agreement with the Pittsburgh diocese and Father Anthony Cipolla. The original suit sought \$25,000 in damages. Bendig filed the suit in 1988 alleging sexual abuse beginning when he was 13 years old and continuing until he was 18. Bishop Donald Wuerl suspended Cipolla from active priesthood, but the suspension was overturned by a Vatican court in March. Wuerl filed an appeal, so Cipolla's suspension stands. Cipolla is seeking reassignment to another Catholic diocese or religious order. Diocesan officials say prospective employers of Cipolla will be informed of the allegations filed against him.

Seat, Jeff T.; James T. Trent and Jwa K. Kim. "The prevalence and contributing factors of sexual misconduct among Southern Baptist pastors in six southern states," *Journal of Pastoral Care* 47:4 (Winter, 1993) 363-70.

Of those surveyed 10.1% reported sexual contact with present or former congregants. Authors link stress and poor seminary training with the prevalence of sexual misconduct among those surveyed.

Secker, Susan L. "The pedophilia crisis," *Conscience* 14:4 (Winter, 1993-94) 22-25.

Author urges that a comprehensive scientific investigation be conducted by sources outside the Catholic church in order to gather data around the issue of sexual abuse of minor children by Catholic priests. In addition, treatment modalities should be evaluated for their effectiveness. Finally, the narratives of the victims and their families must be heard, and the welfare of the victims must be the focus of the church's efforts to address the issue. Secker also examines the church's hierarchical structure and its tradition of celibacy. She asks what role these may play in perpetuating sexual abuse against children.

Second Generation Zen Teachers. "Second generation Zen teachers' statement," *Turning Wheel* (Summer, 1991) 29.

A statement prohibiting sexual relations between Zen teachers and students is issued by teachers attending the June, 1991 meeting.

Sheehan, Michael

"An archdiocese's healing process: Santa Fe, NM," *Origins* 23:17 (Oct. 7, 1993) 285-287.

Michael Sheehan is installed as Catholic archbishop of Santa Fe, NM after the resignation of Archbishop Robert Sanchez whom three women accused of sexual abuse against them. Sheehan asks for the support of the priests and the faithful of

the archdiocese as they struggle together to heal the pain caused by the "misconduct of a few."

"Santa Fe / Clergy sex abuse: Archbishop's letter explains bankruptcy risk," *Origins* 23:30 (Jan. 13, 1994) 529-530.

In a letter to all Catholic parishes and mission churches, Archbishop Michael Sheehan outlines the actions that have been taken to address allegations of sexual abuse by clergy against minor children. He asks each parish and mission to contribute to a fund that has been established to aid the archdiocese in meeting financial settlements with victims.

Sipe, A. W. Richard

"To enable healing: Professionals make recommendations to lift church out of sexual-trauma mire," *National Catholic Reporter* 29:40 (Sept. 17, 1993) 6-7.

Sipe offers twelve points of consideration following a gathering of church leaders, professionals, victims and perpetrators convened to examine the issue of sexual abuse within the Catholic Church. He estimates that "at any one time 6% of Catholic priests will have been involved sexually with minors." In addition, "four times as many priests involve themselves sexually with adult women and twice the number of priests involve themselves with adult men as those involved with children." Sipe challenges the people who are the church to responsibly seek the truth and truthfully address the issue of sexual abuse in the church.

"A step toward prevention of sexual abuse," *Human Development* 14:4 (Winter, 1993) 27-28.

Reflections following a meeting hosted by Saint John's Abbey in Collegeville, MN in August, 1993, to address the issue of clergy sexual abuse in the Catholic Church. Participants included seventeen men and six women: Protestants, Catholics and Jews, psychiatrists, psychologists, counselors, priests, ministers, victim advocates, mediators, clergy victimizers in recovery, and victims of clergy sexual abuse. Recommendations at the close of the gathering included sponsorship of a national meeting of victims of clergy abuse, establishment of a center to study the causes of abuse and the means of healing transgressions, a clearinghouse for the handling of allegations, and prevention through the training of clergy.

Steinfels, Peter. "Needed: A firm purpose of amendment," *Commonweal* 120:5 (Mar. 12, 1993) 16-18.

A review of *Lead Us Not Into Temptation* by Jason Berry. After reviewing the content of the book, Steinfels comments on two subthemes which he has identified: the role of the media in exposing sexual abuse in the Catholic Church, and the "author's own struggle as a committed Catholic to maintain some religious equanimity in the face of the ugly deeds he repeatedly confronted.

Steinke, Peter L. "Clergy affairs," *Journal of Psychology and Christianity* 8:4 (Winter, 1989) 56-62.

Steinke lists common characteristics of 65 male clergy he has treated who have

been involved in sexual misconduct. He then explains four dynamics which are contributing factors: (1) projective identification, (2) sex for non-sex purposes, (3) need love, and (4) unhealthy narcissism. He urges that more accountability be required of ministers as a preventive action.

Stopa, Spencer. "May Sanchez become the man he wants to be," *National Catholic Reporter* 29:24 (April 16, 1993) 16.

A former Catholic priest reflects upon his relationship with Archbishop Robert Sanchez.

Thistlethwaite, Susan Brooks. "Sexual harassment: to protect, empower," *Christianity and Crisis* (Oct. 21, 1991) 328-330.

A discussion of sexual harassment as it exists in seminaries where an imbalance of power between male ministers and female students sets the stage for the abuse of power by men threatened by the entrance of women into seminaries.

Unsworth, Tim

"Church, state wrangle over pedophilia cases," *National Catholic Reporter* 28:41 (Sept. 25, 1992) 14.

Father Thomas O'Gorman, pastor of St. Malachy's Catholic Church in the inner city of Chicago, becomes the 21st priest of the archdiocese to be investigated for sexual abuse. There has been one indictment but no convictions. The Department of Children and Family Services investigated the complaints brought by students attending an elite private school in the suburbs but called the charges unfounded or insufficient. In an effort to prove that there has been no cover-up, state's attorney Jack O'Malley has subpoenaed all of Cardinal Joseph Bernardin's files on priests accused of sexually abusing minor children. Bernardin has submitted the files after expurgating information that is protected by attorney/client, mental health practitioner-patient and pastoral privileges.

"How one diocese responds," *U. S. Catholic* 58:9 (Sept. 1993) 14-15.

Unsworth details the policy and procedure for handling accusations of sexual abuse of minor children by Catholic priests in the Chicago Archdiocese.

"In Chicago, Catholics react with relief, lingering anger," *National Catholic Reporter* 30:19 (Mar. 11, 1994) 5.

Catholics show support for Cardinal Joseph Bernardin during his experience of being falsely accused of sexual abuse. Bernardin's willingness to communicate with the press is cited.

Vinicky, Janicemarie K. "A code of ethics for spiritual directors," *Human Development* 14:3 (Fall, 1993) 20-24.

Vinicky argues that because spiritual direction has emerged as a profession, it is now time to develop a code of professional ethics in order to define what the conduct of spiritual directors ought to be, and to protect vulnerable persons from negligent professionals or unqualified practitioners. She urges that specialized training

be required in order to practice spiritual direction, and this training should include education around the issues of transference / countertransference.

Vogelsang, John D. "From denial to hope: A systemic response to clergy sexual abuse." *Journal of Religion and Health* 32:3 (Fall, 1993) 197-208.

Vogelsang defines sexual abuse within the ministerial relationship and describes the effects upon both victim and congregation. Author analyzes the congregational response when charges are brought against its pastor and offers ways to address each stage of the healing process.

Wallis, Jim.

"Grace Under Pressure," *Sojourners* 23:4 (May, 1994) 4-5.

Wallis praises Cardinal Joseph Bernardin for the manner in which he handled both the filing and the dismissal of civil charges which accused him of sexual abuse against former Catholic high school seminary student Steven Cook of Cincinnati.

Wooden, Cindy. "O'Connor says sex scandals put everyone 'under suspicion.'" *National Catholic Reporter* 29:20 (Mar. 19, 1993) 6.

Cardinal John O'Connor of New York blames allegations of sexual misconduct by Catholic priests and the resulting media coverage for a decline in the morale of priests as well as a decline in the number of priestly vocations.

The World 7 :1 (Jan. - Feb. 1993) 29. "Resources and training."

Lists the process for reporting clergy sexual misconduct along with resources and training available for clergy and laity from the Unitarian Universalists.

(Ann Wolf, a Ph.D. student, can be contacted at the Department of Theological Studies, Saint Louis University, St. Louis, MO 63108.)

Sexual abuse issues: an annotated bibliography

What must never get lost in statistics and studies is the fact that both the victims and perpetrators [in sexual abuse] are human beings. Their experiences are devastating, their lives hellish. Great sensitivity, much time and hard work by professionals (sometimes working near the outer limits of their competencies) are required to bring some sense of healing to victim and perpetrator alike. No one can consider himself or herself exempt from learning about such a far-reaching problem.—
Michael Harter, S. J. (From introduction to Part 1 of this bibliography in TD 41:3 (Fall, 1994).

Ann Wolf, a Ph.D. student in the Department of Theological Studies at Saint Louis University, can be contacted at P.O. Box 63113, St. Louis, MO 63163.

BOOKLETS

Canadian Conference of Catholic Bishops. *Breach of Trust Breach of Faith: Child Sexual Abuse in the Church and Society.* (Materials for discussion groups, 1992). Publications Service (address in previous entry). An excellent resource for adult education using a small group approach. Clear and comprehensive, the material considers both societal and religious contexts. Appropriate for proactive education as well as for congregations where abuse has occurred. 61 pages.

Canadian Conference of Catholic Bishops. *From Pain to Hope: Report from the Ad Hoc Committee on Child Sexual Abuse* (June, 1992). Publications Service, Canadian Conference of Catholic Bishops, 90 Parent Avenue, Ottawa, Ontario, K1N 7B1. The complete report of the Canadian committee which includes the pastoral care both of victims and priest offenders, guidelines for screening of seminary candidates, and recommendations to the Canadian Catholic Church. 91 pages.

Church Renewal Center *Notes on Boundaries.* Good Shepherd Rehabilitation

Hospital, 543 St. John Street, Allentown, PA 18103-3295. An overview of professional ethics which includes sexual misconduct. Appropriate for clergy education. 8 pages.

Clergy Abuse Survivors Alliance. *Spread the Word: Resources Addressing Abuse in Religious Communities.* Very good annotated list of resources compiled and updated periodically by Diana and Mollie McLeod. Pamphlets for survivors and for religious professionals also available. 5490 Judith St. #3, San Jose, CA 95123. 20 pages.

Cooper-White, Pamela, ed. *A Clergy Abuse Survivors' Resource Packet* (1992). Center for Women and Religion, Graduate Theological Union, 2400 Ridge Road, Berkeley, CA 94709. A collection of article reprints that describe the dynamics of clergy sexual abuse. Provides a clear interpretation of sexual abuse as an issue of power. Includes guidelines for reporting abusive behavior. 32 pages.

Council on Women and the Church. *Naming the unnamed: Sexual harassment in the Church.* United Presbyterian Church in the USA (1982, 1987). Available from COWAC, 475 Riverside Drive, Room 1151, New York City, N.Y. 10115. Contains the findings of a 1981 survey of church leaders, the stories of sexual harassment of five women in the church, guidelines and grievance procedure, and outline for a workshop "Sexual harassment in the church." 22 pages.

Fortune, Marie M.; Frances E. Wood; Elizabeth A. Stellas; Deborah Woolley Lindsay and Rebecca Voelkel. *Clergy Misconduct: Sexual Abuse in the Ministerial Relationship.* Trainers' Manual. Keeping the Faith Series (1992). Center for the Prevention of Sexual and Domestic Violence, 1914 North 34th Street, Suite 105, Seattle, WA 98103-9058: (206) 634-1903. A comprehensive curriculum designed for a two-day workshop on the issue of sexual abuse by clergy against adult women. Topics included: characteristics of abusers, sexualized behavior, dual relationships, power and vulnerability, ethical analysis, prevention and intervention. Appendices of articles on sexual abuse of children, celibacy, and healing the congregation. Sample policy from New York Conference of the United Church of Christ. Workshop manual for participants also available. Curriculum can be used and adapted to educate judicatory leaders, to provide continuing education for clergy, to train investigative boards, and to educate congregational members. Designed for use in Protestant settings, the materials address the issue of sexual abuse of adult women. Supplemental resources are available to adapt the curriculum for the Jewish community. In Catholic communities the curriculum could be complemented by two videotapes produced by the Center on the issue of child sexual abuse: *Hear their Cries* and *Bless Our Children* (listed with videotapes).

Gilmartin, Richard D. *Living Celibacy with Integrity: Issues of Loneliness and Sexuality* (1991). Southdown, 1335 St. John's Sdrd E, RR #2, Aurora, Ontario, L4G 3G8. Discussion of celibacy in terms of intimacy, integrity, wholeness and sexuality-genitality. 24 pages.

Hammar, Richard; Steven Klipowicz and James Cobble, Jr. *Reducing the Risk of Child Sexual Abuse in Your Church* (Matthews, NC: Church Law and Tax Report, 1993). Available from Christian Ministry Resources, P.O. Box 1098, Matthews, NC 28106: (800) 222-1840. Resource book contains background information, policy formulation, training procedures, bulletin inserts, press releases, index and glossary. 96 pages. Additional resources may be purchased separately: a training video, leader's guide and audio cassette tape (not available for review).

Hopkins, Nancy Myer. *The Congregation Is Also a Victim: Sexual Abuse and the Violation of Pastoral Trust* (1993). The Alban Institute, Inc., 4125 Nebraska Avenue, N.W., Washington, DC 20016. A discussion of the dynamics operative in congregations which have been violated by the sexual misconduct of their pastor. Based on research conducted in the congregations and among "after pastors" who were called following the removal of the offending pastor. Compares the congregation to family systems models. 38 pages.

Hopkins, Nancy Myer, ed. *Clergy Sexual Misconduct: A Systems Perspective* (The Alban Institute, 1993). A collection of articles that cover issues of sexual desire and longing, shame and guilt, vulnerability of ministers, boundaries, and "aftercare" for congregations which have been violated by their pastors. Personal stories, information for a victim's advocate, and a piece on reconciliation add an effective element to this document. 78 pages.

Loftus, John Allan. *Sexual Abuse in the Church: A Quest for Understanding* (1989). Emmanuel Convalescent Foundation, St. John's Sideroad, RR #2, Aurora, Ontario, L4G 3G8. Available from Southdown (address listed under treatment centers). The author writes from his experience as director of a treatment center whose clients include those referred as perpetrators of sexual abuse. Covers topics of definition, diagnosis, treatment, homosexuality and celibacy. Despite the early copyright, the information contained continues to be valid. Easily read by any adult audience. 26 pages.

Loftus, John Allan. *Understanding Sexual Misconduct by Clergy: A Handbook for Ministers*. Washington, D.C.: The Pastoral Press, 1994. Excellent resource not only for clergy, but for all concerned with this issue. Defines sexual misconduct, raises issues of sexual boundaries in professional relationships, cites the need for continuing education for clergy concerning issues of sexuality, intimacy and boundaries. Gives examples of boundary violations which further help to define and understand the issue of clergy sexual misconduct. 66 pages.

Mennonite Central Committee. *Crossing the Boundary: Sexual Abuse by Professionals*. 21 South 12th Street, Akron, PA 17501. Includes information on sexual abuse by clergy. A good collection of original articles, resource lists and guidelines for congregations. Personal stories included. 31 documents.

Mennonite Central Committee. *Broken Boundaries: Child Sexual Abuse.* (Address in previous entry.) Includes information on pastoral sexual abuse. Personal stories of victims and perpetrators. Worship materials. 24 documents.

Moore, Mary. *Finding Our Way: Responding to Clergy Sexual Misconduct* (1992). Unitarian Universalist Women's Federation, 25 Beacon Street, Boston, MA 02108. Contains background information about clergy sexual abuse described as adultery, professional misconduct, misuse of power, boundary violation and organizational incest. Lists a summary of the policy for most denominational organizations. 44 pages.

National Conference of Catholic Bishops. *Canonical Delicts Involving Sexual Misconduct and Dismissal from the Clerical State* (1995). Office for Publishing and Promotion Services, United States Catholic Conference, Washington, D.C. (Publication No. 030-3). Offers practical guidelines on the application of the process of dismissal from the clerical state of a cleric who has sexually abused a minor. 47 pages.

BOOKS

Benson, Gordon L. *Sexual Misconduct by Male Clergy with Adult Female Counseles: Systemic and Situational Themes.* Unpublished dissertation: Boston University, 1992, 306 pages. Available from UMI Dissertation Services, P.O. Box 1764, Ann Arbor, MI 48106-1764. Order # AAD93-09747.

A study of five Protestant and three Roman Catholic clergy ranging in age from 38 to 64, all of whom had been in treatment for sexual misconduct. Study revealed that subjects lacked emotionally intimate relationships, were abused or emotionally abandoned by parent figures, and judged their sexual exploitation as salvific for counseles. In addition, subjects had poor sexual impulse control, had suffered a perceived narcissistic injury, and felt chronic, pervasive feelings of shame.

Berry, Jason. *Lead Us Not Into Temptation: Catholic Priests and the Sexual Abuse of Children.* New York: Doubleday, 1992. Hardcover 407 pages (now available in soft cover).

Focuses on the cases brought forth in the Diocese of Lafayette, LA. Berry has documented his information well and demonstrates good knowledge of the historical developments within the church. Well balanced, informative and interesting reading. Written by a free-lance journalist.

Brown, Joanne Carlson and Carole R. Bohn. *Christianity, Patriarchy, and Abuse: A Feminist Critique.* Cleveland: The Pilgrim Press, 1989. Softcover 173 pages.

While this collection of essays does not deal directly with clergy sexual misconduct, it is essential reading for those seeking to find a link between patriarchal structures of churches and sexual exploitation by clergy. Cited often in the literature.

Bullis, Ronald K. and Cynthia S. Mazur. *Legal Issues and Religious Counseling.* Louisville: Westminster / John Knox Press, 1993. Softcover 127 pages.

A handbook for clergy of all denominations. Covers clergy malpractice, sexual misconduct, state regulation of religious counselors, and privileged communication for pastoral counselors.

Burkett, Elinor and Frank Bruni. *A Gospel of Shame: Children, Sexual Abuse, and the Catholic Church.* New York: Viking (Penguin Books) 1993. Hardcover 292 pages.

Another book written by journalists, this text focuses on the case of James Porter in the Commonwealth of Massachusetts. Balanced, documented and informative.

Fiorenza, Elisabeth Schüssler and Mary Shawn Copeland, eds. *Violence Against Women.* Concilium:1 (1994). London: SCM Press and Maryknoll, NY: Orbis Press. Softcover 132 pages.

Includes "Clergy Misconduct: Sexual Abuse in the Ministerial Relationship" by Marie Fortune. Also contains a chapter on ecclesiastical violence as well as rape and martyrdom. This issue "documents and explores the death-dealing powers at the heart of patriarchal and kyriarchal relations of oppression."

Fortune, Marie M.

Is Nothing Sacred? When Sex Invades the Pastoral Relationship. San Francisco: Harper Collins, 1992. Softcover 167 pages.

The story of a congregation whose pastor abused more than 44 women within a four year time span. Documents disclosure by the victims and the struggle of the congregation to remain intact. Written by the leading expert in the field of clergy misconduct, sexual abuse in the ministerial relationship.

"Betrayal of the Pastoral Relationship," in Schoener, Gary Richard, et al. *Psychotherapists' Sexual Involvement with Clients: Intervention & Prevention.* Minneapolis: Walk-In Counseling Center, 1990. Hardcover 838 pages.

Covers definition of the problem, an ethical analysis, psychological and spiritual impact and prevention. The larger volume contains information about treatment of victims and offenders and the legal ramifications of sexual exploitation including the abuse of children.

Heggen, Carolyn Holderread. *Sexual Abuse in Christian Homes and Churches.* Scottsdale, Pennsylvania: Herald Press, 1993. Softcover 208 pages.

Chapter 6: "Pastoral Abuse" begins with the story of a victim and moves into a discussion of the spiritual and emotional damage followed by a section on imbalance of power. Presents the emotional factors which can lead ministers into an arena of risk and lists guidelines for pastors.

Horton, Anne L. and Judith A. Williamson, eds. *Abuse and Religion: When Praying Isn't Enough.* New York: Lexington Books [a division of Macmillan, Inc.] 1988 [by D.C. Heath and Company]. Hardcover 299 pages.

While this book does not deal specifically with sexual abuse by clergy, it is a standard reference for those working with all forms of sexual violence. A good integration of psychological and theological issues.

Lebacqz, Karen and Ronald G. Barton. *Sex in the Parish*. Louisville: Westminster / John Knox Press, 1991. Softcover 279 pages.

Examines sexuality within the context of pastoral ministry. Discussion of the issue of power imbalance, the dynamics of desire and an ethical framework. Tackles issues of the single minister, the clergywoman, as well as gay and lesbian pastors. Includes personal stories.

Miller, Dee Ann. *How Little We Knew: Collusion and Confusion with Sexual Misconduct*. Lafayette, LA: Prescott Press, 1993. Softcover 223 pages.

The story of a minister's wife who was sexually abused by another minister as they both served in the mission field. Chronicles the effects of disclosure upon the family and the organization.

Murphy, Sheila A. *A Delicate Dance: Sexuality, Celibacy and Relationships Among Catholic Clergy and Religious*. New York: Crossroad Publishers, 1992. Hardcover 143 pages.

A combination of empirical study and true life stories which illustrate the daily struggle between the desire for intimacy and the practice of celibacy.

Pellauer, Mary D.; Barbara Chester and Jane Boyajian, eds. *Sexual Assault and Abuse: A Handbook for Clergy and Religious Professionals*. San Francisco: Harper Collins Publishers, 1991. Hardcover 279 pages (available in softcover).

Chapter 18, "Responding to Clients Who Have Been Sexually Exploited by Counselors, Therapists, and Clergy" by Jeanette Hofstee Milgrom and Gary R. Schoener. Also discusses sexual violence as a violation of relationship and an issue of power. Includes information about child sexual abuse and mandatory reporting. An indispensable "Handbook."

Poling, James Newton. *The Abuse of Power: A Theological Problem*. Nashville: Abingdon Press, 1991, 1993. Softcover 224 pages.

A theological analysis of sexual violence as an abuse of power. Includes personal stories of perpetrators and victims followed by chapters covering the search for self, the search for community, and the search for God. Well documented, extensive bibliography and indexed.

Rediger, G. Lloyd. *Ministry & Sexuality: Cases, Counseling, Care*. Minneapolis: Fortress Press, 1990. Softcover 156 pages.

Covers many issues of sexuality which impact upon the minister's life. Includes a chapter on "clergy malfeasance" which describes various paraphilias; looks at the vulnerability of victims; discusses issues of sexual orientation; and concludes with chapters on sexual ethics and intimacy.

Rossetti, Stephen J., ed. *Slayer of the Soul: Child Sexual Abuse and the Catholic Church*. Mystic, Connecticut: Twenty-Third Publications, 1991. Softcover 208 pages.

A collection of essays which look from many perspectives at the issue of sexual abuse of minor children by clergy. Includes sections on canon law and civil law, treatment of victims and offenders, psychological impact upon the victim as well as the congregation. Includes the personal story of an adult sexually abused as a child by a priest and of a priest who has sexually abused children. Good overview of the problem from a Catholic perspective.

Rutter, Peter. *Sex in the Forbidden Zone: When Men in Power—Therapists, Doctors, Clergy, Teachers, and Others—Betray Women's Trust*. New York: Fawcett Crest, 1991. Softcover 288 pages.

The standard text which describes sexual abuse as a power-related dynamic. Required reading for anyone dealing with sexual abuse of adults by authority figures.

Sipe, A.W. Richard.

A Secret World: Sexuality and the Search for Celibacy. New York: Brunner/Mazel, 1990. Hardcover 324 pages.

An analysis of celibacy as it is lived in the Catholic Church based on Sipe's twenty years of clinical practice which has included treatment of clergy and religious. He looks at the history of celibacy, the practice of celibacy versus the profession of celibacy, and, finally, the attainment of celibacy. Sometimes controversial, this book should be read by anyone interested in the topic of celibacy or sexual misconduct within the Catholic Church. Indexed and includes a comprehensive reference list.

Sex, Priests, and Power. Anatomy of a Crisis. New York: Brunner/Mazel, 1995. Hardcover 224 pages. Available March, 1995.

Stiles, Hilary. *Assault on Innocence*. B&K Publishers, Inc., 1987.

Written by a mother whose son was sexually abused by a Catholic priest.

AUDIOTAPES

Abuse by Priests: Why? Sipe, A. W. Richard. Available from Credence Cassettes, P.O. Box 419491, Kansas City, MO 64141: (800) 333-7373. A presentation to a conference sponsored by Victims of Clergy Abuse Link-up. Notes some of the origins of the tendency to abuse and explores reasons why the system supports and conceals abuse. Recommendations for addressing the issue. 80 minutes.

And Turn It Into a Song. Available from Bette J. Rod, 836 Keswick Drive, Iowa City, IA 52246. Songs appropriate for use by victims of clergy sexual abuse. Can be used for private listening, prayer services or retreats. Words available with tape.

Breaking the Cycle of Silence (1992). *Healing Toward Prevention* (1994). National Conferences sponsored by Victims of Clergy Abuse Link-up. Contact: Repeat Per-

formances, 2911 Crabapple Lane, Hobart, IN 46342: (219) 465-1234.

VIDEOTAPES

After Sexual Abuse. Mennonite Media Ministries, Harrisonburg, VA 22801-2497: (800) 999-3534. A storyteller's rendition of the diaries kept by a victim of incest. Deals with issues of forgiveness and images of God. Especially helpful for victims of clergy sexual abuse. Two stories, each approximately 25 minutes in length. Discussion guide.

Beyond the News: Sexual Abuse. Mennonite Media Ministries (address in previous entry). Also distributed by Credence Cassettes, P.O. Box 419491, Kansas City, MO 64141: (800) 333-7373 and Provident Bookstore: (800) 759-4447. Total length 21 minutes. Segment three illustrates sexual abuse by a male pastor against a male congregant during a counseling session. This segment also addresses the issues of power and gender inequality perpetuated by Christian theologies. Discussion guide.

Bless Our Children: Preventing Sexual Abuse. Center for the Prevention of Sexual and Domestic Violence, 1914 North 34th Street, Suite 105, Seattle, WA 98103-9058: (206)-634-1903. The story of a congregation's efforts to include a sexual abuse prevention program in its Sunday school curriculum. Helpful for parent education and teacher in-service. Especially recommended for day schools sponsored by religious institutions. 40-minute video and 24-page study guide.

The Boys of St. Vincent. For non-theatrical information contact New Yorker Film: (212) 247-6110. 180 minutes in two 90-minute segments. Originally made for Canadian television. Fictionalized docudrama situated in a Canadian orphanage sponsored by a religious order of men. The first segment depicts the living conditions of the children in which sexual abuse occurs. The second segment visits the lives of the perpetrator and the victims 15 years later. This is an excellent, well-balanced and extremely accurate overview of the effects of child sexual abuse by clergy seen from the perspective of both victim and offender. An emotionally powerful film, but free of sensationalism. Appropriate for use in educational settings and treatment facilities. Can be used with victims, perpetrators and adults in general. Not appropriate for viewing by children and should be previewed in its entirety before use.

Choosing the Light. Greater Milwaukee Synod, 1212 South Layton Blvd., Milwaukee, WI 53215. A 28-minute discussion of sexual exploitation during pastoral counseling. Female victims of a Protestant youth minister and a Catholic priest tell their stories.

Hear Their Cries: Religious Responses to Child Abuse. Center for the Prevention of Sexual and Domestic Violence, 1914 North 34th Street, Suite 105, Seattle, WA 98103-9058: (206)-634-1903. A documentary on the role of clergy, lay leaders and religious educators in preventing child abuse. Includes signs of how to recognize

possible child abuse and how to respond to a victim's disclosure of abuse. Especially recommended for day schools sponsored by religious institutions. 48-minute video and 24-page study guide.

Not in My Church. Center for the Prevention of Sexual and Domestic Violence (address in previous entry). A 45-minute docudrama to help people deal with the problem of clergy misconduct involving sexual abuse in the ministerial relationship. Intended for a Protestant audience, the storyline depicts the abuse of adult women by their pastor. This tape can be adapted for use with a Catholic audience, and could also be used for training of investigative committees. Excellent for seminary training and continuing education of clergy.

Not in My Congregation (address in *Hear Their Cries* entry). Intended for Jewish audiences. The same docudrama as *Not In My Church* with an introduction by a rabbi. Approximately 45 minutes.

Once You Cross the Line. Excellent 50-minute training videotape which depicts inappropriate conduct followed by appropriate conduct in the same context. Good for use in training investigative committees, for seminary and continuing education of clergy. Available only to those who complete a training workshop provided by the Center for the Prevention of Sexual and Domestic Violence. Contact the Center listed above for dates and locations for training (address in *Hear Their Cries* entry).

Sexual Ethics for Church Professionals. General Conference of Seventh-day Adventists, 12501 Old Columbia Pike, Silver Spring, MD 20904. Includes a copy of *Ministry and Sexuality* by G. Lloyd Rediger (Minneapolis: Fortress Press, 1990). A 90-minute panel response to nine vignettes illustrating situations which can lead to sexual abuse. Tends to portray woman as seductress and minister as "at risk" rather than addressing sexual abuse as a misuse of power.

Sexual Ethics in Ministry. University of Wisconsin-Madison, 610 Langdon Street, Room 315, Madison, WI 53703-1195. A study manual provides directives for planning a workshop and nine documents that may be used as handouts. Bibliography, Wisconsin and Minnesota statutes on sexual exploitation and child abuse, and educational and treatment resources included. Videotape contains 11 vignettes which depict both male and female perpetrators, male and female victims, adolescent victims, homosexual encounters, and sexual harassment. Published in 1989, the material is a bit dated in that it refers to sexual abuse in the ministerial relationship as an "affair"; however, adolescent sexual abuse is appropriately termed "ephebophilia."

Understanding the Sexual Boundaries of the Pastoral Relationship. Communications Office, Archdiocese of St. Paul and Minneapolis, 226 Summit Avenue, St. Paul, MN 55102-2197. A 35-minute presentation geared to the Catholic audience which covers sexual harassment in the workplace, sexual exploitation in pastoral counseling, and sexual abuse of children. The only videotape specifically for use in a Catholic context. Excellent for seminary training and continuing education of priests. Discussion questions and archdiocesan policy included.

EDUCATIONAL SERVICES

Center for the Prevention of Sexual and Domestic Violence, 1914 North 34th Street, Suite 105, Seattle, WA 98103-9058: (206) 634-9058. Workshops for clergy and laity concerning Clergy Misconduct: Sexual Abuse in the Ministerial Relationship. Training for judicatory leaders, investigative teams, interim clergy. Emphasis on sexual abuse of adult women within the Protestant/Jewish communities, but also helpful for those of other faith traditions. Retreats for women sexually abused (as adults or as children) by clergy.

The Christian Institute for the Study of Human Sexuality. Saint John's Archdiocesan Seminary, 127 Lake Street, Brighton, MA 02135-3898: (617) 562-0766. Training focused on sexuality designed for those engaged in seminary training and religious formation. Seminars of varying length geared to the needs of the individual participant. Ongoing program may be joined at any time.

The Program for Psychology and Religion, Saint Louis University Health Sciences Center, 1221 South Grand Blvd., St. Louis, MO 63104. Educational programs focusing on healthy human development: care of self and the development of self in relationship with God and with others. Workshops also include issues of sexuality, intimacy, stress management and addictive behaviors. Seminars, spiritual direction and retreats specially designed for women in ministry who have experienced sexual abuse.

TREATMENT CENTERS

These centers offer clinical services for clergy and religious (assessment, primary care, tertiary care, aftercare, inpatient/outpatient facilities). Many also offer clinical services for victims of clergy sexual abuse. Most are able to accommodate persons of any faith tradition. Contact them for details regarding their programs.

The Institute of Living, 400 Washington St., Hartford, CT 06106: (203) 241-8000. Contact: Heidi Williams McCloskey, RN, MSN, CS.

Johns Hopkins Medical Institutions, Department of Psychiatry and Behavioral Sciences, 600 N. Wolfe Street/Meyer 4-113, Baltimore, MD 21287-7413. Contact: Paul R. McHugh, M.D.

The New Life Center, P.O. Box 1876, Middleburg, VA 22117: (703) 754-2771. Contact: Thomas Drummond.

Our Lady of Peace Hospital, Peace Ministry Centre, 2020 Newburg Road, Louisville, KY 40232: (502) 451-3330. Contact: Michael Coppel.

Program in Human Sexuality, Department of Family Practice & Community

Health, Medical School, University of Minnesota, 1300 South Second Street, Minneapolis, MN. 55454: (612) 625-1500. Contact: S. Margretta Dwyer, M.A., L.P.

Program for Psychology and Religion, Saint Louis University Health Sciences Center, 1221 South Grand Blvd., St. Louis, MO 63104: (314) 577-8703. Contact: Paul N. Duckro, Ph.D.

River Oaks Psychiatric Hospital, 1525 River Oaks Road West, New Orleans, LA 70123: (504) 734-1740. Contact: Mark Schwartz, Sc.D.

Saint Luke Institute, 2420 Brooks Drive, Suitland, MD 20746-5294: (301) 967-3700. Contact: Canice Conners, OFM, Conv. Ph.D.

Servants of the Paraclete, St. Michael's Community, 13270 Maple Drive, St. Louis, MO 63127-1999: (314) 965-0860. Contact Joan C. Thom.

Servants of the Paraclete, The Albuquerque Villa, 2348 Pajarito Road, S.W., Albuquerque, New Mexico 87105: (505) 873-0647. Contact: Sarah Brennan, Ph.D.

Villa St. John Vianney Hospital, Lincoln Highway at Woodbine Road, P.O. Box 219, Downingtown, PA 19335: (215) 269-2600. Contact: Martin C. Helldorfer, Ph.D.

The Wounded Brothers Project, Evergreen Hills Homes, P.O. Box 102, Cedar Hill, MO 63016: (314) 274-1736. Contact: Bertin Miller, OFM.

VICTIM-SURVIVOR SERVICES

The following offer support groups and victim's advocacy for those sexually abused by clergy and religious. Theology Digest does not endorse or recommend any of these organizations or groups. This information was gathered from mailing lists, newsletters, conferences and retreats, and was presented as public, not confidential, information. Contact names have been deleted to protect the privacy of victim-survivors. Many treatment centers listed above also offer clinical services for those sexually abused by clergy.

Anonymous Victims of Clergy Sexual Abuse, Box 115, Zekendoff Towers, 111 East Fourteenth Street, New York, NY 10003.

Clergy Abuse Survivors Supporting, Advocating, Networking, Daring to Recover Association [CASSANDRA], c/o Rape Crisis Center, 128 East Olin Avenue, Madison, WI 53713: (608) 251-5126.

Core Group of Concerned Laity, Box 219, 1128 Pleasant Valley Road, Parma, OH 44134.

Good Tidings (for women romantically involved with Roman Catholic priests) P.O.

Box 283, Canadensis, PA 18235: (717) 595-2705.

Jordan's Crossing (*for priests and male religious survivors of sexual abuse*) 1256 St. Anthony Church Road, Clarkson, KY 42726.

MKs In Recovery (*for "missionary kids" who have been sexually abused*) P.O. Box 531, Reynoldsburg, OH 43068-0531.

PAM (*for survivors of sexual abuse by nuns*) HCR 66, Box 302, Newport, NH 03773.

Pastoral Center for Abuse Prevention, 225 Tilton Avenue, San Mateo, CA 94401: (415) 343-3387.

Project Eden, Inc., California: (510) 887-0566

Promises (*for women romantically involved with Roman Catholic priests*) 1559 Rockville Pike, Rockville, MD 2085: (301) 230-2004 ext. PEER.

Pro-Survivors Anonymous: (401) 737-7505, Rhode Island.

Sanctuary, 27 Pojac Point Road, North Kingstown, RI 02852: (401) 884-3741.

Soul Friends Ministry, St. Thomas More Parish Center, 108 McLean Street, Iowa City, IA 52246.

Support for Women Abused by Nuns [SWAN], P.O. Box 20766, Ferndale, MI 48220.

Survivor Connections, Inc., 52 Lyndon Road, Cranston, RI 02905: (401) 941-2548.

Survivors of Clergy Abuse Reachout [SCAR] P.O. Box 248, Avon Lake, OH 44012.

Survivors' Network for those Sexually Abused by Priests [SNAP] 8025 So. Honore, Chicago, IL 60620: (312) 483-1059.

Tamar's Voice (*advocacy and support for women abused as adults by clergy*) 3130 Crow Canyon Place, Suite 260, San Ramon, CA 94583: (510)-275-0886.

The Spiritual Dimension in Victim Services, P.O. Box 163304, Sacramento, CA 95816: (916) 446-7202.

Victims of Clergy Abuse Link-Up, 1935 S. Plum Grove Road, Box 257, Palatine, IL 60067: (708) 202-0242.

Wisconsin Action Network for Survivors of Clergy Sexual Abuse, P.O. Box 93521, Milwaukee, WI 53203: (414) 961-2536.

RESOURCES OUTSIDE THE U.S.

Australia

Connors, Canice. "Rebuilding trust: Clergy sexual abuse," *Compass* (Canterbury, Vic.) 27 (Summer 1993) 30-34.

Connors stresses the need for the Church to overcome denial and to minister compassionately to both victim-survivors and perpetrators. Differentiates between "cure" and "recovery" by using the model of recovering alcoholics. Indicates that little attention has been given to the possibility that some abusers can be returned to active ministry. (Reprint of article in *Church* 9:2 from the United States.)

Canada

Southdown (treatment center), 1335 St. John's Sdrd. E., RR. #2, Aurora, Ontario, L4G 3G8, Canada: (905) 727-4214. Contact: Donna J. Markham, OP, P.D.

England

Christian Survivors of Sexual Abuse (CSSA), BM-CSSA, London, WCIN 3XX (Regional groups in London, Liverpool, Newcastle, Nottingham, Yorkshire-Leeds and Wakeheld).

Ireland

Stanton, Carol. "The church and the problem of paedophilia," *The Furrow* (Dec. 1993) 659-65.

This article gives an overview of the issue of sexual abuse of minors by Catholic priests in the United States.

The Netherlands

Van Dam, Gideon and Marjo Eitjes. "*Een pastor moet je toch kunnen vertrouwen!*": *Over seksueel misbruik door pastores*. Uitgeverij meinema, Zoetermeer, 1994. [ISBN 90-211-3600-7].

The first European publication on the topic of clergy sexual abuse. Printed in Dutch.

Sexueel Misbruik. A video documentary produced for the Dutch program KRUIS-PUNT which aired on KRO television Nov. 8, 1992. Program contains information about James Porter, Cardinal Joseph Bernardin and the founding of a survivors' network in Holland (Dutch language). For information contact: Stijn Fens, Reporter, Kruispunt TV, KRO/Dutch Broadcasting Organization, Emmastraat 54, P.O.

Box 23000, 1202 EA Hilversum NL. Telephone 31 35 71 33 96 / Telefax 31 35 23 22 43.

Sexueel Misbruik U.S.A. Video documentary produced for the Dutch program KRUIPUNT which aired on KRO television Oct. 10, 1993. Program contains English interviews with Bishop John Kinney and journalist Elinor Burkett along with information about the suicides of American priests confronted with allegations of sexual abuse of minor children. For information contact Stijn Fens at address in previous entry.

Survivors' Network. Contact: Stijn Fens (Address in *Sexueel Misbruik* entry above).