

The Crisis in the Church: Dealing with the Many Faces of Cultural Hysteria

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ABSTRACT

The ideas in this paper were originally presented in 2002, to three Catholic audiences, at the height of the media storm about the handling of pedophilic priests by the Church. The speakers had taken part in the evaluation of more than 100 professionals who had crossed sexual boundaries, including 30 priests. Seven clinical perspectives on the cultural hysteria are offered to stimulate the thinking of mental health professionals:

- *Priests are only human beings.*
- *Most sexually inappropriate priests are not pedophiles.*
- *The media's use of "pedophilia" is different from psychiatry's use of the term.*
- *Catholicism is expected to offer redemption.*
- *Bishops have a public relations conundrum.*
- *More rigor and balance are necessary when evaluating the effects of priest abuse on victims.*
- *Homosexuality is not the root of the problem.*

Key words: Catholic church, crisis, cultural hysteria, pedophilia, priests

INTRODUCTION

On three occasions during the summer of 2002 we responded to invitations from parish staff to discuss the mounting national crisis with the Church with audiences of parishioners, lay ministers, nuns, and priests. We each presented for about 20 minutes and planned for at least 50 minutes of discussion. Each program ran over and could have continued for longer.

We will elaborate on seven ideas that we, as clinical experts who have evaluated more than 30 parish and Jesuit priests and 80 other professionals since 1991 (Fones et al., 1999), conveyed to the audience. Our hope was to calmly share what we knew about the subject (Levine et al., 1994) with audiences that were distraught and uncertain what to think, but which loved

their Church and were used to being comforted by their faith. The audiences seemed to find our views intriguing because:

- We have a different view of the lives of priests than they do.
- We were not defending or attacking any particular Catholic tradition.
- We were not hostile when we brought up politically incorrect matters.
- We are not Catholic.

THE MAJOR IDEAS

Priests are only human beings

Priests are special human beings because of their roles. But, as human beings, they are not exempt from the struggles that other men have for much of their lives with sexual feelings. From our readings and our clinical work, we have gathered the impression that the Church has experienced considerable discomfort with sexual expression for at least eight centuries. The discomfort is part of the institutional culture and is reflected both in how sexual topics are discussed and avoided. Men in seminary training are taught that celibacy is to be an absolute requirement of their future profession. They accept this expectation in adolescence when they perceive a calling to their vocation. What may escape them is what celibacy will affectively mean to them as they attempt to move through adulthood without sexual expression or physical intimacy.

During their seminary years, the silence about sexual matters is quite loud. When it is broken, according to numerous priest patient accounts, teachers tend to communicate in words that many young men find difficult to comprehend, for example, concupiscence or concupiscentia rather than sexual desire. Most priests recall no effective education about sexuality or how to manage their private lives. “Struggles of the flesh” (to use a Catholic phrase) – the conflict between the demand for orgasmic expression via masturbation or shared interpersonal sensual arousal to orgasm and the deeply felt expectation for chastity – are inherent in the Roman Catholic priesthood. They affect every priest, and get some priests into personal, social, administrative, and legal trouble.

Many parishioners persistently expect their clergy to live in complete sexual continence, despite their own struggles with masturbation, premarital, and marital sexual sins, which they are forever confessing to priests. Because parishioners perceive priests to be a rung or two closer on the ladder to God than themselves, when a priest is discovered to have behaved sexually, parishioners may be profoundly disappointed, become cynical, and loosen their connection to the Church. Many parishioners and nuns view priests’ sexual activities as personal spiritual failures – they are not close enough to Jesus – rather than as evidence that absolute sexual continence is beyond the reach of most humans.

Most sexually inappropriate priests are not pedophiles

Although we recognize the problems created by priests' sexual behaviors with minors, we clinicians distinguish a psychiatric diagnosis of "pedophilia" from the media convention of labeling all sexual behavior with minors as "pedophilia." The media has identified a few priests in the USA who have been driven during most of their post-ordination years to target young adolescents for sexual gratification. We might readily diagnose such men as having an ephebophilic (preference for early to middle adolescent males) form of pedophilia. Pedophilia is a psychiatric condition with legal implications because society designates sexual behaviors between an adult with those aged less than 14, 16, or 18 years as a crime. In Canada, for example, age 14 or less constitutes the age of minority for sexual purposes. It is lawful to have sex with 15-year-olds.

The vast majority of priests who have been reported to behave inappropriately with youth do not meet psychiatric criteria for pedophilia. We found one pedophile to be among our sample of clergy and he, now in prison, was a Protestant. The actual prevalence of the *diagnosis* of pedophilia among all American priests is unknown but probably small. The estimate of the number of priests who have been accused of sexual boundary crossings with minors is between two per cent (Greeley, 2003) and four per cent (National Review Board, 2004). In contrast, the minimal estimate of mental health professionals who have crossed sexual boundaries with their patients during their lifetimes is six per cent (Herman et al., 1987).

The media's routine use of the term "pedophilia" has a strong influence on public opinion. During the early summer of 2002, one of us (Levine) found himself accusingly thinking "pedophile" when he saw a man in a Roman collar at an airport. Our local media, in concert with several substantiated cases from other areas, began suggesting that the Cleveland Diocese was a sanctuary for those who lusted after adolescents. In response, the prosecutor announced that he was eager to investigate. When the paper published the names of 15 priests who had been accused of sexual contact with someone less than 18 years old during the previous 20 years, the prosecutor announced the assignment of 35 investigators to seek evidence for indictments. A few days later, a sixteenth priest killed himself four days after being accused by a victim. On the day their names were published, the 15 priests were re-suspended despite the fact that the diocese had previously suspended them and had already made judicious decisions on all of them five or more years ago. Eight anxious months later the Grand Jury indicted one priest – for purchasing sex from a teenage male prostitute. The prosecutor explained the low indictment rate by stating that he believed many of the 167 priests investigated were guilty but for various reasons could not be indicted. The newspaper did not focus on the damage that its relentless speculation had done to named and unnamed priests, parishioners,

and those youth who engaged sexually with a priest. The 14 named priests who were not indicted, however, were not returned to duty.

It is easy for the media to use the term “pedophilia” because we don’t give details and the priests do not defend themselves

The media does not know the details of what transpired between priests and youth. The Diocesan information source only leaked the names of ever-accused priests. The prosecutor’s information is secret. Even if the media did know, however, it might not graphically describe sexual behaviors because of public sensibilities. The behaviors are simply described as pedophilic. This encourages the public’s worst assumptions – sodomy of boys and vaginal penetration of girls.

Here is a clinical example, which we think of as a single episode of breakthrough of repressed sensual hunger, which our newspaper wrote about five times as prototypic of the priest’s pedophilic villainy and the Bishop’s cover-up.

In 1986, a heterosexual 44-year-old priest who, for 16 consecutive summers, camped with one or two adolescent males without sexual temptation, incident, or accusation, mightily embarrassed himself and frightened his 17-year-old companion by ejaculating while giving him a back rub when his hands touched the boy’s bare upper buttocks. Both were clad only in their underpants (their sleeping attire) in their tent. This was the first back rub the priest had ever given. The priest, who tries not to think much about sex (“What’s the use?” he says) and who never had discussed his occasional masturbation and kissing episodes with a woman with anyone, still claims that he did not know he was aroused during the back rub and was surprised by the appearance of copious semen on the boy’s back and legs. The boy, feeling wetness on his back, thought he was assaulted despite the priest’s immediate distress and red-faced apology. Both the priest and the boy had had some alcohol. Two days later, the boy disappeared while in town. When the panicky priest immediately called the boy’s parents, much to his relief, he learned that they had arranged his return home. The three of them agreed to talk about the incident when the priest got back to Cleveland. They agreed to inform the Diocese. The Bishop sent the priest for an inpatient psychiatric evaluation, after which a clarifying apologetic meeting was held with the boy and his understanding and forgiving parents. The boy was offered psychiatric assistance, paid for by the Diocese, and the family asked that the priest would be given psychiatric assistance. The same team re-evaluated him in early 1988. They again concluded that the priest was sexually repressed and worked too much but had no sexual or psychiatric disorder. After assigning him as a hospital chaplain and keeping him in psychotherapy for a year, the Bishop assigned him to a parish and eventually made him Pastor. In 1993, the Bishop asked us to assess his psychiatric and sexual status. The Diocese had nothing but positive feedback on his life and

work since 1986. We saw no psychopathology. He continued as Pastor without incident or complaint until 2002 when the Diocese responded to the Prosecutor's subpoena by turning over our 1993 report. Because the paper published his name, the Diocese immediately placed him on administrative leave. He had to leave his home, the rectory, the same day. In a few days, the paper began to repeatedly report that the priest had sexually abused a 17-year-old who escaped from a camping trip. During the recurrent media attention, the now 34-year-old man filed a lawsuit against the priest and Diocese. The priest received anonymous hate mail. Two years later, as of this writing, he is still on leave.

The Diocese and priests, on the advise of their separate lawyers, never respond to the accusations. Their silence allows the speculation that even the most respected, widely valued, and beloved priests are demons.

The public believes that any sexual contact with a priest ruins the life of the victim

What the media hears from victims, victim groups, and lawyers who sue the dioceses for victims is that these pedophilic behaviors have ruined the lives of the adolescents. We know that psychological damage can be done to minors (and even older individuals) who engage in sexual activities with priests. We clinicians who have dealt with victims, however, recognize that many variables come into play in determining the degree of life disruption and the duration of consequences caused by a specific trauma. Nowhere in this scenario is any public skepticism placed on the depictions of decades long suffering from one or two psychologically consensual nonviolent genital experiences with a priest. (Legal consent is not possible with a minor.) The depictions of the consequences of these acts give the impression that there is something so destructive about what happened that gender identity, orientation, sexual function, and general mental health are inevitably jeopardized. Many exaggerations abound, including that the gambling, drug abuse, depression, psychosis, and anxiety disorders of the victims were caused by the experience with the priest. Is the sexual seduction of an adolescent minor more problem-producing than the family dysfunctions that led to personal friendship of priest and father-abandoned adolescent? Is the impact of the sexual encounters more powerful in producing lasting psychopathology than the social forces that led to adolescents residing in the orphanages where they first encountered a priest? In our profound objection to sexual advantage-taking, we may be guilty of confusing our disapproval with the consequences of the act of which we disapprove.

No one has asked clinicians to testify about what is known about sexual victimization, gender differences in responses, and recovery from inappropriate or regretted adolescent sexual liaisons. No one has asked clinicians about our work with patients who eventually acknowledge their substantial distortions about what happened between them and priests many years ago. Mental health

professionals should recognize the derision with which their even minor expressions of skepticism about victimization will be met. Courage is required to present a balanced fair-to-all perspective.

Catholicism offers redemption

The Church is the refuge for souls tortured by past immoral, destructive, unwise, or inadequate behaviors. Many of the priests we have seen have engaged in sexual transgressions, lapses in judgment, succumbing to pleasures of the flesh with adults or older adolescents as they developed psychological intimacy with them. (Our sample of priests was not involved with pre-teen or young adolescents.) Most of these episodes of boundary crossings were self-corrected with or without the assistance of psychotherapy. Many parishioners feel there is something deeply unchristian about a special policy that says if a priest has ever misstepped in this way, no matter the reasons or his subsequent life course, he should be permanently banished in disgrace. For centuries, bishops have been thought to be the shepherds to their flocks of priests. They promised to care for their priests lovingly in return for their devotion to the work of the church. Many catholics sense the new policy as a betrayal of the priest (Rowe, 2004). Something uncatholic is going on here.

Does anyone want to be bishop?

The bishops, to put it euphemistically, have a public relations problem. "Conundrum" is a more apt description for its contradictory inherently insoluble nature. Few today envy the bishops' power as they seek to find a way to balance five vital obligations:

- To make the parishioners safe from exploitative priests.
- To care for the past victims.
- To see to the financial viability of the Church.
- To honor their commitment to their priests.
- To obey the laws of the land.

The homosexual priest is on many minds as the underlying source of the crisis

Although bishops make no public mention of the higher prevalence of homosexuality among priests than in the general population, this has been noted by many others in the Church (Cozzens, 2000). A calling to the priesthood occurs in both pre-homosexual and pre-heterosexual boys and adolescents. It brings with it an inhibition of masturbation and sexual experiences with partners and a lack of clarity about orientation. The strong defenses against sexual expression in both homoerotic and heteroerotic priests are

vulnerable to sudden erosion 10 years later when exposed to psychological intimacies with teenagers of either sex. The priests involved with male adolescents whom we have learned about are as likely to be repressed heterosexuals as they are to be repressed homosexuals. Most are uncertain about their sexual identities. In our experience, homosexual acting out priests tend to be involved in the social institutions of gay life – bars, bathhouses, and bookstores. No one suggests banning all heterosexuals priests when some mis-step with teenage girls. Assuming that just 20% of priests in America are homoerotic, banning gays from their work would not only deplete the Church of a major source of priestly talent, but it would punish many who have never lost control of their sexual impulses with minors.

FINAL THOUGHT

We offer this summary of our public work in the hope that other clinicians will be able to maintain their clinical balance when called upon to offer care to priests, nuns, victims, distressed Catholics, and others who have been passionately stirred by the hysteria that began to sweep the USA during 2002.

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