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# Time to Listen : Confronting Child Sexual Abuse by Catholic Clergy in Ireland. Executive Summary

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# **TIME TO LISTEN: CONFRONTING CHILD SEXUAL ABUSE BY CATHOLIC CLERGY IN IRELAND**

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## **OVERVIEW**

Almost all of the available information on child sexual abuse by clergy in Ireland is generated by media sources (through radio, television and newspaper coverage) or by individual accounts (usually as books written by or with the assistance of journalists). These have portrayed the grave consequences of child sexual abuse by clergy for those abused and their families, and to a lesser extent the impact on families and colleagues of abusers and on the wider Church community. The issue has not been the subject of systematic research to date.

In January 2001, the Bishops' Committee on Child Abuse (now known as the Bishops' Committee on Child Protection) of the Irish Roman Catholic Church commissioned an independent research study on child sexual abuse by clergy. The Health Services Research Centre at the Department of Psychology, Royal College of Surgeons in Ireland conducted the study.

## EXECUTIVE SUMMARY

### **Background**

The overall aim of the study was twofold. Firstly, since this is an issue with international relevance, an important aim was to extend scientific knowledge about the impact of child sexual abuse by clergy beyond the individual in order to assess its impact on all of those likely to be affected. These range from the family of the abused, convicted members of clergy and their families and colleagues, clergy and Church personnel and the wider Church community. The second broad aim was to understand clerical child sexual abuse in the Irish context — what were the salient factors concerning its occurrence and management and how can this information be used to inform practice in the future.

### **Method**

The study was conducted in three phases, using different research methodologies. In the first phase, a telephone survey was conducted to examine the attitudes and opinions of the Irish general public concerning clerical child sexual abuse. Participants were randomly selected from the general population in order to obtain the broadest representation of views of the wider Church community in the Republic of Ireland. Interviews were conducted during the period January to May 2002. Over 1,000 randomly selected Irish adults took part in the telephone survey of the Irish general public (n=1,081). This represented a 76% response rate; a high participation rate for a telephone survey.

The second phase involved qualitative interviews. Face-to-face in-depth interviews were conducted with individuals who had experienced child sexual abuse and their families, with convicted clergy and their families and colleagues, and with general clergy and Church personnel. Interviews were conducted during the period February 2002 to March 2003. A total of 48 people were inter-

viewed face-to-face. Of these, 7<sup>1</sup> were individuals who had experienced child sexual abuse and 3 were family members. Eight convicted clergy and 5 members of their families were interviewed. Twenty-four Church personnel were interviewed, these were 4 colleagues of clerical abusers and the remaining 20 were general members of the clergy and lay persons who work for the Church. Response rates for these groups were very low. Reluctance to participate in an interview study of such a highly sensitive topic is not unusual. While it means that interview results must be generalised with caution and it is possible that more distressed individuals chose not to participate, the process still provided a wide range of those involved with an equal opportunity to represent their experiences.

The individuals who experienced abuse were contacted through Church personnel and were known to Church authorities. However, many individuals will not have reported their abuse to Church authorities and must be identified through other means. A large national survey on the prevalence of sexual abuse and violence, conducted in 2001, provided the opportunity to identify individuals who had been sexually abused by clergy but had not reported their abuse to Church authorities. Thirty individuals reported child sexual abuse by clergy in the prevalence study. Of these, 25 gave permission to be re-contacted for future research. Fourteen (out of 25) of these individuals were interviewed by phone.

The third phase of the study was a postal survey of Church personnel with responsibility for the management of complaints concerning clerical child sexual abuse, i.e. Church delegates<sup>2</sup>, members of the Episcopal Conference and retired bishops. The survey was completed over a six-month period (July to December 2002). All 153 diocesan and religious delegates and all 44 Episco-

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<sup>1</sup> In addition to the seven individuals who experienced child sexual abuse one individual, who experienced clerical sexual abuse as an adult, was interviewed.

<sup>2</sup> Delegates are members of clergy (i.e. priests and religious) in each diocese and religious order who have been charged with responsibility for receiving allegations of clerical child sexual abuse.

pal Conference members and retired bishops in Ireland (Republic and Northern Ireland) were surveyed. From the total group, 102 delegates (a response rate of 67%) and 35 bishops (80% response rate) took part. The overall response rate of 70% was much higher than general population postal surveys.

## RESEARCH FINDINGS

### **Awareness of Child Sexual Abuse**

#### *Clergy*

Most participating clergy reported that their initial awareness of clerical sexual abuse was raised through the media. Knowledge of the effects of abuse on individuals was limited and had evolved over time to an appreciation of the extensive and long-term adverse effects of such experiences on the individual.

#### *General Public*

Similar to clergy, members of the public surveyed knew about child sexual abuse in general and child sexual abuse by clergy from the media (95% and 94% respectively). Concerning the prevalence of child sexual abuse by clergy, the Irish public overestimated the proportion of all child sexual abuse which is perpetrated by clergy. They also underestimated the number of clergy convicted for sexual offences against children.

However, the majority felt that clergy were as likely to sexually abuse children as other men in society. The majority of the public believed that child sexual abuse by clergy should be made public and felt that the media served a useful role in highlighting the issue.

### **Impact of Child Sexual Abuse by Clergy**

#### *Those Abused and Their Families*

Disclosure was described as an ongoing process rather than a once-off event, by those who had experienced child sexual abuse. Persistent psychological effects including depression, anxiety, sui-

cidal ideation and relationship and intimacy difficulties were reported by some of those who had been abused. Other effects included a decline in confidence in the Catholic Church as an institution and in Catholic clergy. Some described having lost their religious faith. This was attributed to the overall response they received from Church personnel when they reported their abuse rather than to the experience of abuse *per se*. Some of those abused had regained their trust in clergy and/or their religious faith while others had not done so.

Family members of those abused described major negative consequences of the abuse, particularly if disclosure occurred when the person was still a child. The impact of abuse extended to all immediate family members. For some, family relationships continued to be strained. Family members found the process of officially reporting the abuse to Church personnel to be a very difficult experience.

In retrospect, both those abused and their family members described a great sense of guilt because they had chosen to report the abuse to the Church rather than civil authorities. Many felt that other children may have been protected from abuse if they had chosen to report it to civil authorities instead.

#### *Family Members of Abusers*

Family members of convicted clergy also described major negative consequences on discovering that a member of their family had sexually abused children. A major struggle for these family members concerned how to balance providing some support for their relative with their own and others' sense of condemnation of his actions. Tensions existed within families as some family members wanted no further involvement with their convicted relative while others wanted to remain supportive.

#### *Colleagues of Convicted Clergy and General Clergy*

Colleagues of convicted clergy reported a sense of shame, disillusionment and abandonment. Their commentaries indicated that this impact had more to do with Church management than with

the occurrence of abuse itself. Most felt they were not provided with information or guidance or otherwise supported by Church leaders when a colleague in their parish or community was accused of sexually abusing children. Instead they felt they had to face their congregations alone and to continue with increased workloads and personal pressures without assistance.

Many members of the clergy described feeling shame as a consequence of Church-related child sexual abuse. Some reported attempts to conceal their identity in public to avoid being identified as clergy as a consequence of the issue. They reported a loss of public credibility and trust and a sense of low morale. Fear of a false allegation of abuse was also a concern.

Overall, clergy who participated in the study reported a significant loss of confidence in Church leadership as a result of mismanagement of child sexual abuse by Church authorities.

### *General Public*

According to the public survey, child sexual abuse by clergy has affected religious practices to some extent with 36% reporting an effect (e.g. on Mass attendance and time spent praying). It has also had an impact on willingness to trust Church personnel, i.e. 41% unwilling to automatically trust a priest on first arrival in their community. Faith in God was strong among the public with 93% believing in a God and the majority also reporting a personal relationship with God.

The public (72%) believed that priests in general had been unfairly judged as a result of clerical child sexual abuse. About half (54%) reported satisfaction with priests today and 47% judged the quality of priests to be better today compared to the past. Compared to the satisfaction level with individual priests, satisfaction with the Church more generally was lower (44% vs. 54%). The quality of today's Church was judged to be better than the Church in the past by 39% of those expressing views, the same by 45% and worse by 16%.

Two-thirds (66%) of the public said that they looked to priests to provide general moral guidance while only one-third (32%)



looked to the Church for guidance on human sexuality. Almost two-thirds (65%) of the public were positive about the prospect of their child becoming or being an altar server and just over half (56%) were positive about the prospect of their son becoming a priest.

## **Initial Response and Ongoing Management of Child Sexual Abuse by Clergy**

### *Those Abused and Their Families*

Most individuals who experienced abuse reported that Church personnel lacked awareness of the effects of child sexual abuse and did not always show compassion or sensitivity. Those who had experienced child sexual abuse and their family members also reported that Church personnel did not keep them informed and did not make themselves easily available to deal with the complaint. Legal concerns were seen by abused individuals and their families as taking precedence over a pastoral response by Church personnel.

### *Convicted Clergy*

All of the convicted clergy interviewed were sent for psychological treatment following an allegation of child sexual abuse. Treatment was usually experienced as very difficult but beneficial. Some convicted clergy reported that Church authorities made little attempt to understand them and treated them in a business-like manner. They also reported that Church personnel had inconsistent approaches to the management of convicted clergy, e.g. while none returned to ministry, some but not all have been laicised. Decisions about management of convicted clergy by dioceses/religious orders were seen by these men to focus on factors such as financial consideration rather than on the merits of individual cases. Convicted clergy reported mixed feelings about the support received from Church personnel during legal proceedings and time spent in prison.

### *Family Members of Convicted Clergy*

Some family members of convicted clergy were grateful for any support of their relative by Church personnel. They felt that any assistance should be regarded as positive given the crime that their relative had committed. However, others were critical, particularly in relation to what was perceived to be a lack of “brotherhood” and forgiveness.

### *Colleagues of Convicted Clergy*

Colleagues of convicted clergy felt that the Church’s management approach was more concerned with institutional protection than concern for the individuals abused or Church colleagues affected by the abuse.

### *General Clergy*

In the postal survey of bishops and delegates, fewer bishops than delegates (45% vs. 80%) reported being satisfied with their handling of past allegations of child sexual abuse. Similar to colleagues of convicted clergy, other Church personnel interviewed described the Church’s overall management strategy in relation to child sexual abuse as an attempt to prevent scandal and protect the Church as an institution. Ineffective leadership and poor communication were regarded as factors contributing to ineffective management. Other factors such as unfamiliarity with the issue, lack of procedures and conflicting external advice were also identified as challenges to effective management.

### *General Public*

Public perceptions of the Church’s overall management of child sexual abuse were critical. The majority (77%) felt that the Church was not dealing with the problem adequately. Only 42% believed that the Catholic Church would safeguard children entrusted to its care while 40% trusted the Church to handle problems with its own clergy.

Most (70%) of the Irish public surveyed believed that the individual abuser was responsible for the *occurrence* of child sexual

abuse while 39% saw the Church hierarchy as having responsibility for its *management* with 41% considering civil authorities as the ones responsible for management.

There was little public awareness of actions the Church has taken in recent years to address the issue of child sexual abuse by clergy. In the public survey, very few (10%) had heard of the *Framework Document*, the Catholic Church's policy document for responding to complaints of child sexual abuse by priests and religious.

## RECOMMENDATIONS

### Prevention of Child Sexual Abuse by Church Personnel

1. The Church, as an organisation, should study the systems being put in place in other organisations to identify and manage various types of risk and to respond in a prompt and effective manner to crises.
2. Child sexual abuse is a society-wide issue and the remit for child protection is broader than the Church. The Church should actively seek to work in co-operation with other agencies in this area in the interest of the best possible protection of children.
3. Prevention strategies should be informed by relevant research as conducted by the Church or other agencies and should be communicated to all Church personnel, to the wider Church community and to the general public.
4. The Catholic Church in Ireland should seek to develop a model of best practice for child protection based on ongoing review of current guidelines.
5. Church procedures for prevention should be audited at appropriate intervals. This could be done by the Church or by an external agency using a quality assurance approach.

## Management of Complaints of Sexual Abuse by Clergy

6. A clearly defined protocol for managing complaints,<sup>3</sup> based on a standardised approach, should be put in place with due regard for the role of the bishop/superior in a diocese/congregation. This standardised approach could be facilitated by a national Child Protection Office (CPO) or similar national central body and should be widely communicated to the general public. Such a protocol would facilitate those who do not wish to approach clergy per se (including some whose first or main complaint is to civil authorities); would broaden the categories of Church personnel against whom complaints could be made; and would improve accountability for the management of complaints.
7. The protocol should provide, *inter alia*, clear and practical instructions for responding to disclosures of child sexual abuse for all Church personnel. The protocol should also provide information on onward referral of the complaint to the national central body/CPO. Training in complaints procedures should be mandatory for all Church personnel and should be audited at appropriate intervals to ensure adherence. Both training and audit might be best undertaken by an external agency.
8. As per the *Framework Document* (Church Guidelines on Child Sexual Abuse), complaints of child sexual abuse by clergy should be referred promptly to the Garda Síochána. This should be co-ordinated by the national central body/CPO.
9. The national central body/CPO should notify the bishop, in the diocese where the abuse is alleged to have occurred, of complaints received. This notification should initiate a pastoral response from the local clergy/bishop in liaison with the national central body/CPO.

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<sup>3</sup> In this context, a complaint is defined as an official accusation by the person abused or a person acting on their behalf. Third-party reports, anonymous claims or hearsay do not constitute an official complaint.

10. Complaints procedures should be widened in scope so that they facilitate complaints against all clergy and lay personnel who work for the Church.
11. Church policies regarding the prevention and management of child sexual abuse should be extended to include inappropriate sexual behaviour of clergy with those who have learning disabilities and mental health problems.
12. All dioceses should have an advisory panel to deal with complaints of clerical child sexual abuse.
13. The *Framework Document* states that “adequate positive steps should be taken to restore the good name and reputation of a priest or religious who has been wrongly accused” (p. 19) but it does not describe the steps required. Policies for re-establishing the person’s good name and the procedures to be followed should be developed.

### **Professional Development of Clergy**

14. A code of professional conduct should be developed, in consultation with clergy and laity, to clarify roles and boundaries in relationships, to assist clergy in managing these boundaries and to underpin the professionalism of the Church as an organisation.
15. The personal and professional development of clergy, both those in training and those already in ministry, should be upgraded and should continue throughout their careers.
16. Support structures for clergy should be reviewed with a view to making support available on an ongoing basis. Personal development and spiritual support should be facilitated by these structures.
17. Those in leadership roles in the Church should receive professional training in management and leadership.
18. A programme of ongoing support and supervision for convicted clergy (including relapse prevention and preparation

for life without ministry) should be developed. The programme should facilitate co-operation with clergy who have abused. Such a programme should be developed in conjunction with professionals working with sex offenders.

19. Professional development procedures for clergy should be audited at appropriate intervals. This could be done by the Church or by an external agency using a quality assurance approach.

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*The Health Services Research Centre (HSRC) was established in 1997 at the Department of Psychology, Royal College of Surgeons in Ireland. Its aim is to promote quality in Irish healthcare through research. Its work facilitates co-operation among researchers, health professionals, policy makers and health service users. The HSRC produced the first national study on the lifetime prevalence of sexual abuse and violence in Ireland (SAVI) in 2002 and completed an evaluation of client experiences of the National Counselling Service (a service established by the government for those abused in institutional care in Ireland in 2003). Ongoing work includes evaluation of barriers to organ donation; public attitudes to, and experiences of, crisis pregnancy; the sexual health of the general population in Ireland and public views on the use of human organs and tissue in research. Its work is funded by Government agencies and voluntary bodies [www.rcsi.ie].*

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