

Discovery Conference Participants Advise ISTI Board

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The first major project of ISTI was the three national discovery conferences held in Los Angeles, Philadelphia and Saint Louis in February and March, 1995. These fact-finding days were co-sponsored by the local affiliates of Universal Health Systems, Inc - Del Amo Hospital, Torrance CA, Keystone Extended Care Unit, Chester PA and Masters and Johnson, Saint Louis MO - and supported also by a grant to ISTI from the LaCrosse Franciscan Sisters of Perpetual Adoration Ministry Fund.

The purpose of these conferences was to get a firsthand sampling of what is being done around the country across denominations and, from the perspective of the participants, what needs to be done to address the issues of sexual abuse within religions. A combined total of 275 people participated in the three conferences with an additional two dozen who could not attend but returned written comments and suggestions.

Dr Patrick Carnes and Dr Mark Schwartz gave separate presentations at each conference. (Video and audio tapes are available; see notice.) According to the discussion topics listed below, the participants self-selected groups that were lead by members of the ISTI board and site staff. A summary of the discussions with recommendations to the ISTI board was presented orally by a designated participant of each group to the entire conference with time at the end for more exchange.

In addition, the participants received a packet that included all the discussion headings plus questions to examine and respond to in writing at their leisure. Finally, each participant was asked to complete a personal questionnaire that included response items and a request to prioritize needs for victims, offenders and faith communities.

The following discussion headings each included 10 questions: What is traumatic stress doing to organized religions? How are survivors of sexual misconduct different or similar to other abuse survivors? The institutional response: closed and open systems. Responding to allegations of sexual abuse.

What is sexual health in a religious context? Can and should impaired religious professionals be helped? The impact of clergy sexual misconduct on faith communities. What went wrong and what must be done about the selection and formation of religious professionals?

Members of the ISTI board are in the process now of assimilating the information received through these 300 consultants and reporting the findings in a comprehensive document for publication. Although there was considerable variation among the respondents, according to Dr Patrick Carnes the preliminary findings from reviewing raw frequency distributions indicate that "the discovery conference participants, in general, believe

their church covered up abuse situations

clergy sexual misconduct is more common than most people think

complete healing of the victim is an attainable goal

offenders are attracted to positions of church leadership

the resolution of clergy sexual abuse requires public disclosure

offenders can work in ministry where there is no access to potential victims

church leadership must believe alleged victims

there can be a just alternative to litigation

clergy are especially vulnerable to the misuse of power

churches are more interested in their image than in justice

there is too much expected of clergy in ministry, and

celibacy is a factor in sexual abuse in the Catholic tradition."

Carnes continues, "The participants do not believe

religious institutions are responding appropriately to clergy sexual misconduct

the resolution requires the victims to confront their offenders

the identity of the victim should be disclosed

seminary training is adequate about human sexuality, authority and power

churches are doing all they can to prevent future abuse

their church's attitude toward women is equitable or fair and

enough attention is given to the faith community after abuse disclosure."

These people, however, Carnes concludes, "were divided on whether

offenders can ever work again in the active pastoral ministry

all information should be disclosed, and

all allegations of abuse should be believed."

Cross tab analyses indicate that conference participants felt the top three priorities for victims of clergy sexual abuse ought to be, in order of importance, validation and support, cost of therapy, and full disclosure; for offenders, full accountability including legal sanctions, opportunity to make personal restitution, and examination in depth of organizational factors that led to abuse; and for faith communities, full disclosure, process for discussing the nature of abuse and reactions, and parish education programs to prevent future abuse.

Self-identified religious traditions included Baptist, Episcopal, Evangelical, Fundamentalist, Jewish, Lutheran, Methodist, Presbyterian, Roman Catholic (about a third), UCC, and other non-christian groups. Fewer than a dozen non-whites attended. Women outnumbered men about two to one. Nearly half the participants indicated they were victims of sexual abuse (in order of frequency) by parents, clergy, relatives, health professionals, neighbors, educators and law professionals. Almost all the victims receive(d) professional help. About a dozen people admitted to having been offenders. The conferences were attended by clergy, therapists, educators, health and law professionals, advocates and church leaders. ISTI is deeply indebted to all the people who were able to participate in these conferences, many at considerable inconvenience. The participants found encouragement in this listening initiative of the board. Their numerous comments clearly indicate a need for hope that must come not only from wounded people clinging to one

another but especially from the leadership of organized religions that admits failure, examines wrongdoing and models change on the Gospel.

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