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to foster engagement and conversation by participants, to elicit their *expression* and *reflection*, to lend *access* to tradition in scholarly and life-giving ways, to encourage students toward personal *appropriation* and *decision* making.

So, a shared praxis approach usually begins with a focusing act that establishes the curriculum in an engaging way, raising up a theme that is 'generative' to the interests of these participants. Then, it invites students to express the 'data' from their own lives and contexts as they experience this generative theme (M 1). It encourages their own critical reflection on this 'present praxis', engaging reason, memory and imagination in personal reflection and social analysis (M 2). In response to their reflection on praxis, the teacher gives students access to the Story and Vision of a faith tradition, let us say Catholic Christianity. Regardless of the age level being taught, this instruction should reflect the best of scholarship and what its wisdom might be for the present (M 3). Then the teacher poses the kinds of questions and activities that encourage students to reflect on and probe the tradition, to remember and imagine its possibilities. Here the intent is that students come to see for themselves what this aspect of Christian faith might mean for their lives, to appropriate and make its wisdom their own, according to their own thinking (M 4). Finally, the pedagogy should invite to some kind of decision – cognitive, affective, or behavioural – encouraging students to take this spiritual wisdom into their own lives, allowing it to affect their very 'being'.

Note that such a pedagogy encourages both critical study and personal formation, or, we might say, study that is likely to *form as well as inform*. As such it can honour the intent of religious education with scholarship and free inquiry – it *can* hold its own as an 'exam subject' – and, on the one hand, honour the intent of catechesis without indoctrination or manipulation. Given the history and the present milieu of Ireland, it seems wise to do both in its secondary school curriculum. Post-modern Ireland needs religious education and catechesis, something like the wings of a bird. And a bird never ...

Child Sexual Abuse: the Heart of the Matter

Marie Keenan

I have been immensely privileged in my work in the area of sexual abuse in that I have found myself positioned in a way that allowed me access to a multitude of people and voices from apparently differing places, involved with or affected by the problem of child sexual abuse.

For the most part the very best I could do was to listen with an open heart. At other times I joined with the outrage. At other times still I shared information I had gathered through my listening, shared my tissues and determined to recruit everyone I could to the Movement; the movement against oppressive and abusive practices in whatever ways they presented themselves to me in my life and in my world. For me sexual offending must be set against a landscape of abuse of power and privilege.

Some of my greatest recruits to the Movement have been many of the men I have treated for sexual offending, in particular many priests and religious. Given half a chance these men could have much to teach us, a view not shared by many, as their personhood is reduced to that of non-person or 'worst than useless, unworthy of voice'.

And what I have learned from all of this listening is that there are two levels of lived experience in relation to this problem. At one level we have a world 'blinded by science' and expert positioning, fuelled by reductionism where everything has to have a label, a world in which the myth of 'scientific certainty' coupled with some professional and media discourses have promoted the false notion of 'them' and 'us', where hundreds upon hundreds of column inches are taken up reporting the same thing again and again. At another level there are the broken hearts and shattered lives; the human beings behind the statistics, the photographs and the sound-bytes, the painful lives being played out underneath this mantle of

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'them' and 'us'; the victims, the perpetrators, their families, their friends, their colleagues, you, me, all who hold them in our hearts.

'Them' and 'us' thinking fails to take account of two fundamental principles: all abuse, including sexual abuse takes place within a context of abuse of power and privilege. Secondly abuse, however private its exercise, is never simply personal, nor is abuse an isolated incident. Whether it occurs within a family or within an institution it occurs within a social context, which must be explored as the horizon from which abuse springs. This is not however to say other than the fact that the perpetrator must accept full responsibility for his offending behaviour at all times.

I want to tell you a story. This is the story of The Fifth Province, the story of an ancient Irish Celtic myth. According to this myth a Druidic site existed at the centre of Ireland where the four provinces of the country met. It was believed that the leaders and chieftains from the four provinces often came to this site to receive counsel and settle conflict through talking. Because of its siting at the meeting of the provinces, it was seen to be both apart from and a part of the four provinces and was imagined to constitute a province of imagination and possibility (McCarthy, 2001, 258). The Fifth Province Associates adopted the metaphor of the Fifth Province when they began their clinical and research work in Dublin's Mater Hospital in the 1980s on the problem of sexualized abuse disclosures. The metaphor also came to refer to the possibility of holding together, juxtaposing multiple and often conflicting social realities.

The Fifth Province for me represents a site where no voice is disqualified. It is a site where issues of power and marginalization are brought forth when a dominant view is juxtaposed with that of one on the margins. It is a site with a participatory ethic, an ethic of inclusion, where all lives are seen as sacred. It is a site in which it becomes possible to imagine the life of another by placing oneself in a disposition of ethical responsibility towards all. Ultimately it is a place of healing and of wisdom.

How badly we need a Fifth Province in Ireland at the moment! Instead we have adversary, one account disqualifying another, exclusion, secrecy, labelling, pathologizing of human beings and little attempt to search for meaning. Wisdom it appears to me comes in surrender. Attachment to power, position and privilege can corrupt. In the rush to point the finger we fail to see the other three pointing back towards ourselves.

THE POLITICS OF ABUSE

In the twenty-first century in the western world, sexual abuse of children is neither simply a minor aberration nor a private mental

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health matter for the person who has perpetrated such an offence. Neither is it simply a matter of personal oppression for the person who has been abused. This problem is now framed by criminal justice systems, mental health agencies and community interest groups (Keenan, 1997, 8). The media have become the primary front line educators of the public.

Against this background medico-legal professions have exerted a powerful influence on both professional and lay public perceptions of sex offenders. Medico-legal definitions have become crucial in shaping the social construction of 'the paedophile' and have become central to dictating professional responses to their 'treatment' and the political will to act (Cowburn and Dominelli, 2001, 402).

At the start of the twenty-first century, the term 'the paedophile' is most often used in the media to define any sex offender who is known to have sexually assaulted a child. This characterization, flawed in many ways, ignores the different types of sex offenders who abuse children, it ignores their potential for re-offending, it overlooks the relevance of the larger group of undetected sex offenders and it neglects their potential for rehabilitation. Most especially it ignores the relevance of the social context in which sexual offending takes place and the relevance of gendered power relations in sexualized violence (Cowburn and Dominelli, 2001, 400).

In taking this line the media neglects to ask questions that may be pertinent to the understanding of the issue; why is it that this is largely a male problem with male persons perpetrating 90%-95% of all sexual abuse, why is it that the perpetrator is someone known to the victim in 80%-95% of all child sexual offences? (ATSA, 1994, 4)

In the rush to individualize the problem and pathologize the individual who has perpetrated the abuse very useful sources of information, with potential for prevention, are thus lost. Attention is diverted away from its underlying social causes. The range of social relations of domination and subordination are never referred to e.g. *adultism* in which adults exercise power over children (Dominelli, 1989); *sexism* or the power that men deploy over women (Newburn and Stanko, 1994) and *racism* with its stereotyping of black men as sexually promiscuous (Wilson, 1993). The media's approach also fails to consider how sex offenders might be rehabilitated.

THE BIRTH OF THE PAEDOPHILE

There is no legal definition of the term 'paedophile'. *The Oxford English Dictionary* defines a 'paedophile' as 'a person with

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paedophilia, that is, an abnormal especially sexual love of children. Usage of the term originated in 'medicalized' professions and those allied to medicine, for example psychology and social work, and has subsequently been adopted and re-framed by the popular press. These discourses have focused on the pathology of individuals. Little regard is paid to the politics of social relations or the politics of masculinity. Connell's work (1995, 77) on the differing masculinities and the idea of 'hegemonic masculinity' could provide a useful contribution to the current discourse. It is my thesis that in part the politics of sexual abuse is contributed to by two powerful systems, that of hegemonic masculinity and that of the medical insurance industry.

Hegemonic masculinity draws on dynamics that construct men around a polarized dichotomy of 'normal' and 'deviant' men. Both groups are positioned at a social distance from each other (Connell, 1995, 77). The 'normal' or ordinary man assumes the role of protector within the society whilst the 'deviant' man is portrayed as a predator who needs to be guarded against. The predator is external to the community of 'normal' men – an outsider who is untrustworthy and dangerous. Within this frame attention is diverted away from addressing any of the social variables that may be relevant to a comprehensive analysis of the problem. Immediately the word 'paedophile' appears we have moved away from recognizing men who abuse as 'ordinary' men – fathers, brothers, uncles, colleagues – and we are returned to the more comfortable view of them as 'other', a small minority who are fundamentally different from most men (Kelly, 10). In short, attention shifts immediately away from the centrality of power and control to the safer terrain of 'abnormality'. This polarized dichotomy between 'good' and 'bad' men is fundamentally flawed. There is much good in the bad and there is much bad in the good.

Medicalized discourses are rooted in two principal systems of 'classification' of all diseases – the International Classification of Diseases, Injuries and Causes of Death (ICD) and the Diagnostic and Statistical Manual (DSM) (PA, 1995). Unchanged for nearly fifty years the current ICD version (ICD-10, WHO, 1988) defines paedophilia as 'a sexual preference for children, largely of pre-pubertal or early pre-pubertal age'. The diagnostic criterion for paedophilia in the DSM-IV (1994) emphasizes, 'recurrent, intense sexually arousing fantasies, sexual urges, behaviours or sexual activities for not less than six months, involving prepubescent children'. Given the power of these classification systems in the western world in constructing and languaging a problem and hence in determining the social action that will follow, it is worth locating these systems in a little of their own contexts.

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Health insurance coverage in the United States for emotional problems is only forthcoming if these problems can be described as biological illnesses. The diagnostic industry is at the heart of the US reimbursement system. Diagnoses and the supposedly scientific studies they are based on are often questionable and flawed (McNamee and Gergen, 1992, 9). In the United States the DSM-IV has become the diagnostic bible of the counselling business because insurance companies, including Medicaid, will not reimburse treatment costs without clearly defined diagnoses, according to certain psychiatric parameters. No counselling office is without its 'bible'. Between the covers of the DSM-IV there are currently 374 mental disorders listed, with their numbers growing in each edition. Therapists are trained to evaluate their patients/clients and diagnose them using a standardized diagnostic category. The diagnosed person and the diagnostic categories or labels often result in the process of stigmatization (Freeman-Longo & Blanchard, 1998, 148). Labels turn people into nouns. Hence 'the paedophile' is born! The DSM-IV might well be constructed as serving the psychiatric and counselling industry rather than the people who are clients or patients of these services.

In 1961 Goffman noted that the medicalization process of 'deviant' behaviour removed both the actor and the act from any larger social or sexual context and obscured the political dimension of pathology by the language of 'mental hygiene' (Goffman, 1961). If this stigmatization of the 'non-person' began with the involuntary confinement of the 'mentally ill' it was reinforced through the collaboration of law and psychiatry. In the realm of sexually offending behaviour, diagnostic typologies are merged with criminal identities in the construction of such non-citizens as the 'sex' offender. Against a backdrop of real risk and moral panic in relation to child abuse the paedophile has emerged as an icon of evil in populist reports of sexual crime (Mercer and Simmonds, 171).

THE CHURCH'S HANDLING OF ABUSE

I would like to present a summary of what I think has happened. —I believe it has been an extremely difficult time for all and has presented enormous challenges, raising questions about the very fundamentals of Church and of priesthood and of the relative order of civil, criminal and canon law in a civil society. I have much sympathy in a personal way for the individuals concerned. However the response to the problem is beyond individual and the system's response has proven to be problematic. The system's response spreads beyond Ireland and it appears to me that the same mistakes are being made time and again by the Church authorities across the Western world.

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- Writing in *The Furrow* (May 2002) Fr Enda McDonagh suggested that in formulating a response to this problem the Irish bishops as a body appeared to operate in secret and appeared to leave out from their deliberations key people involved in the process; victims and their families, the main body of priests and the community of Irish believers. I would also include priests who have perpetrated abuse and their families. I am inclined to agree with Fr McDonagh's analysis of the situation. The lack of participation by those who ought to have been consulted has contributed to victims feeling they have not been heard and to an already disenfranchised group of men who have given up their lives to do good, i.e. the body of priests, feeling further disenfranchised still. The involvement of the odd professional advisor, including myself, did little to 'open the door'. My belief is that this is not a reflection on individual bishops who appeared to me to so deeply want to do the right thing, but on a structure and a system of power relations that is crippling in its effect.
- As pointed out by Fr McDonagh, in such circumstances policy appeared to be determined by the most conservative common denominator or in my own view by the 'power' within the 'power'. Openness and accountability between the bishops did not appear to be evident. The structures facilitated this process.
- The prevailing feeling on the part of priests of being excluded and not consulted contributed to low morale. It is just not acceptable for some priests to be informed by the newspapers of issues relating to their lives and ministry. This has been the situation in some dioceses in relation to the Audit, for example. Rather than being informed of the details by the bishop some men read the terms of reference etc. in the newspaper. The lack of consultation between bishops and their priests appears to be a very real problem.
- This lack of consultation has led to pain, frustration and often despair for victims, their families, perpetrators and their families, priests and the body of the Church. I have no doubt that it has led to extreme frustration for many bishops too. While the issues are complex it is my view that the structures and systems of authority and power relations within the Church have allowed this secrecy and lack of openness and consultation to thrive. For many people it is the landscape against which much abuse including sexual abuse becomes possible.
- My final observation on the Church's response relates to how some Church personnel, under pressure, went on the defensive and said things like, 'Fathers also abuse their children, not just priests and religious.' Understandable as this argument is it

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misses the heart of the matter; when a priest or religious abuses a child it is as if God has allowed the abusing, so revered and sacred was and still is the priest in the lives of many members of the Church. He was and still is for many 'God's man on earth'. The shattered trust is immense, the pain excruciating. Failure of some Church personnel to come to know that at the level of the heart, is a big mistake. Any response to the problem must come from this place.

I believe that the development of entirely new ways of relating between bishops and bishops, between bishops and priests and between bishops, priests and people is required along with the development of structures of collective and individual accountability. An atmosphere of openness and humility is required. I believe if this were to happen that the bishops, as men ordained to be the spiritual leaders in our communities, might grasp the importance of their position on the issue so morally complex as sexualised abuse. The silence on the morality of the issues and the morality of truth and justice and the morality of compassion and forgiveness is deafening. The absence of true spiritual leadership on these complex issues in a world so hungry for a spirituality is frightening. The 'distance from the perpetrators' mentality that exists in some Church quarters saddens me greatly. It is just the flip side of the 'distance from the victims' coin that appears to have been the practice, if what victims tell is true. Why can our senior churchmen not help us embrace all God's children publicly? Is it not true that 'all God's children have a place in the choir'? Why cannot the Irish bishops take the lead on this, and stop assuming we have much to learn from the USA. Maybe we have much to teach the USA. Maybe the lawyers and the mental health professionals don't have all the answers after all.

TOWARDS AN UNDERSTANDING OF THE PROBLEM

Fr David Ranson, an Australian, has written in recent times his thoughts on the problem of sexual abuse by clergy (Ranson, 1997). He suggests that it is impossible to identify simple causative factors within the Catholic Church that provoke situations of abuse. Even less is it possible to furnish solutions, which promise surgical type excision of certain factors to prevent further occurrences. Rather the experience of abuse emerges from a situation which is constituted by the interplay of many and varied factors, some of which are more immediately apparent, others which are even subliminal, but nonetheless powerful in their influence. He suggests that abuse in the Catholic Church occurs in the intersection of the dysfunctional elements of three matrices. Each of these matrices must be attended to. To deal with one to the exclu-

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sion of the other two, comprises an inadequate and short-term response to the experience of sexual abuse. Failure to adequately address all three matrices, and their intersection, will simply perpetuate the experience of abuse. The matrices he refers to are the theological matrix, the psychological matrix and the social matrix.

Tony Ward at the University of Melbourne is doing much of the latest research on the genesis of sexual offending in the general population. He suggests that there are multiple pathways leading to the sexual abuse of a child. He suggest that the clinical phenomena evident among men who sexually abuse children are generated by four distinct and interacting types of psychological mechanism:

- Intimacy and social skills deficits: Failure to develop trust and a sense of personal security and power. Emotional isolation.
- Distorted sexual scripts: Acquired during the course of development that facilitate the interpretation of intimate sexual encounters, and guide subsequent sexual behaviour.
- Emotional dysregulation: The management of affective states in the service of individuals' goals.
- Cognitive distortions or implicit theories: Maladaptive beliefs and attitudes and problematic thinking styles. Cutting edge research is being carried out here.

He suggests that learning events and biological and cultural factors exert an influence through their effects on the structure and functioning of these sets of mechanisms.

Psychological mechanisms generating child sexual abuse constitute *vulnerability* factors.

SOME FINAL QUESTIONS

In the light of Ward's research I would like to raise some questions and address these questions to the body of priests.

1. How does the system of formation and the Church leadership help and support you to fulfil healthily your intimacy needs?
2. How does that system help priests in formation develop a healthy sexual script, one where the theology of sexuality that was built on a split between body and spirit is healed and where the humanity of body is loved as God given? How does that system help and support you to live a celibate sexuality at different developmental stages of the life cycle?
3. How does that system make room for your feelings and emotions in a way that is respectful of the necessity for negotiating your affective states to be truly alive?

If the system is not helping you with these issues it is failing you. The system may also be contributing to the development or maintenance of a climate in which sexual abuse can occur if we are to

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consider Ward's research. These questions need to be addressed at the level of the Church system along with that of the individual. If the Church is committed to preventing sexual abuse within the clergy these issues must be addressed in addition to some of the power and authority issues as outlined above. More detailed screening on entry may also be helpful but ultimately if the 'system' issues are contributing to the problem then the most sophisticated of screening will have limited value. My own research, which is addressing these questions, may be able to shed further light on the subject when it is complete. In the meantime I do not think that we can go too far wrong in responding to the problem of child sexual abuse if we listen well, stay open to all, move with humility, seek counsel, share our own vulnerability and remember at all times that love never fails and God's love excludes nobody.

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