

**Sexual Abuse Against Children By Priests and Religious:  
A Study of Factors That Might Lead to Offence  
Within the Catholic Church**

by

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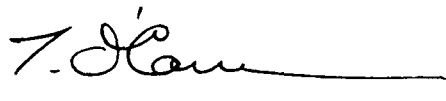
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6/11/2007

## **CERTIFICATE**

I hereby certify that the work embodied in this thesis is the result of original research and has not been submitted for a higher degree to any other University or Institution.

A handwritten signature in black ink, appearing to read 'P. O'Connor', with a long horizontal flourish extending to the right.

Paul T. O'Connor

## **Abstract**

This study identified a number of factors specific to the Catholic Church which might lead to the committing of sexual abuse against children by clergy and religious in Australia. Child sex offenders differ from the general population on a range of measures of psychopathology. The psychopathology of priest and religious child sex offenders is no different to that of offenders found in the general population. There were no observable differences between clergy, religious or nonreligious child sex offenders and the general population when a range of traditional environmental factors were examined. However, a number of factors specific to the Church environment in which clergy and religious operate were identified as contributing to the committing of child sex offences. Factors were identified through a review of the literature and a survey of Church personnel, victims and offenders. It is suggested the Church develop new standards and approaches covering the recruitment, formation and ongoing supervision of religious personnel. It must implement internal procedures for dealing with allegations of child sexual abuse as a response to public demands for a greater commitment to open and robust systems of accountability. The study provides a comprehensive framework upon which future researchers can build and suggests those key areas in which further research is warranted.



## **Acknowledgments**

This research evolved from a larger study undertaken by the Australian Catholic Social Welfare Commission in conjunction with Centacare Catholic Community Services, Sydney on behalf of the Australian Catholic Bishops and Religious Leaders. That study was concerned with sexual abuse by Church personnel with a major focus on adults. The present research is a fuller exploration of factors specific to the Catholic Church and child sexual abuse involving children.

I wish to express my gratitude and appreciation to my professional colleagues, Fr John Usher and Mr Bill Johnston, for their support throughout this research project. Their practical suggestions and support to investigate child sexual abuse as it might relate to priests, religious and the Catholic Church in general inspired me during the many hours of investigation.

I also wish to acknowledge the staff at the libraries of Macquarie University, the Australian Catholic University Signadou Campus and the Veech Library at the Catholic Institute of Sydney who provided assistance with locating relevant academic and professional publications especially their efforts in unearthing some of the more difficult sources.

There were others who made a significant contribution to the study who cannot be publicly mentioned. The stories and advice received from victims, Church personnel, therapists and a number of offenders was vital to the authenticity of the research.

I particularly wish to acknowledge the honesty, courage and commitment these individuals brought to the consultations and to the many private discussions during the course of the research.

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## **CHAPTER 1**

### **Introduction**

Reports of sexual abuse against children have dramatically increased in all developed countries of the world from the mid-1980s through to the 1990s. Disclosure of all forms of abuse perpetrated against children by members of their families and their family networks has dramatically increased as reporting mechanisms and procedures have been formalised and legislated in an increasing number of national and local jurisdictions.

During the same period, communities across the world have been faced with accounts in the media of sexual abuse against children committed by priests and religious of the Catholic Church. The increase in disclosures has been, in large part, due to the general public becoming more educated about the indicators of abuse within their communities, their understanding of the long-term negative psychological and emotional effects on children of sexual abuse and, their commitment to the right of children to freedom from all forms of harassment.

Reports of sexual abuse perpetrated against children by priests and religious have also been more frequent, as the institutional significance and power of the Catholic Church has increasingly been called into question by critics and committed members alike. Sexual exploitation of children by priests and religious has resulted in extensive damage to Church communities.

### **Historical Background**

Sigmund Freud made the first major attempt to explore the long-term implications of child sexual abuse on the human psyche. In the course of treating young women for what was termed 'hysteria', Freud identified that the common element in all their backgrounds was child abuse by an adult man (1958). Freud's theory met with such strong opposition and fierce indignation that



in 1897 he abandoned it in favour of one that proposed that the memory of childhood abuse is not a true memory but rather a childhood fantasy of desire for sexual contact with the parent of the opposite sex. It is likely that the shift in Freud's thinking was responsible for denying proper attention to the issue of child abuse for many years.

Alfred Kinsey became one of the best known researchers in the area of sexuality in our modern time (1948, 1953). However, in his national studies of the sexual behaviour of women and men in the United States very little attention was given to children and the issue of child sexual abuse. Kinsey referred not to child abuse but to adult-child contacts which were regarded as healthy in the context of sexual development. Kinsey, like Freud, bears a responsibility for maintaining the denial and ignorance that completely surrounded child sexual abuse until the 1970s.

In earlier times various theories were proposed to explain child sexual abuse by attributing causality to the behaviour of victims of incest. All of these were founded on the same assumption; namely, that the child (especially the female child) and not the offender, was ultimately responsible for the sexual aggression. Only in the late 1970s did significant change in thinking about the effects of adult-child contacts occur. This was due to a rapid rise in the number of reported cases of child sexual abuse as well as the publication of a number of careful and rigorous studies. Foremost among these studies were those conducted by David Finkelhor whose work brought societal recognition of the plight of abused children to a new level. However, it has been a slow and difficult road to convince society and its institutions to take cognisance of the fact of child abuse and the devastating effects on children.

### **Sexual Abuse in a Church Context**

When sexual abuse involves Church personnel, it presents a set of specific and fundamental challenges to Church leaders, to balance justice for victims with compassion for those responsible

for offending. Churches throughout the world are perceived to have been slow to respond to the challenges, most notably those which concern the discipline of the Church's own ministers. Throughout this document, the term 'minister' refers to both clergy and religious of the Catholic Church.

The history of the Catholic Church's responses to these challenges has been well documented, particularly in North America, and can be summarised as follows. Some responses from Church leaders, specifically the early reactions to public scandals, have appeared to be based on a belief that any so-called 'crisis' was really a result of overly sensational reporting - an anti-religious media campaign.

With the regular reporting of fresh offences, a number of Church leaders began to appreciate the reality that such occurrences are more than isolated individual incidents. However, there continues to be a strong public perception that Church leaders have been unable to address the complexity of issues implicit in each new allegation.

In the past ten years, however, Church groups throughout the world have begun to systematically address sexual abuse as a serious issue of both justice and their own credibility. That realisation among both Church leaders and clinicians has led to significant initiatives to address, professionally and justly, the growing feelings of distrust and alienation being generated within their flock and the general community. When such proactive approaches received the endorsement of the majority of Church leaders, the Church was finally able to give proper attention to the crisis.

The following documents are cited as evidence that Church authorities are taking these matters seriously: From Pain to Hope, Report from the Ad Hoc Committee on Child Sexual Abuse, Canadian Conference of Catholic Bishops (1992); Child Sexual Abuse: Framework for a Church

Response, Report of the Irish Bishops' Advisory Committee on Child Sexual Abuse by Priests and Religious (1996); Child Abuse: Pastoral and Procedural Guidelines, Catholic Bishops' Conference of England and Wales (1994); Twenty-eight Suggestions on Sexual Abuse Policies, United States Bishops' Ad Hoc Committee on Sexual Abuse (November, 1994).

The above summary represents an anatomy of the typical responses of the Catholic Church in the English-speaking world to the daunting challenge of sexual assault by priests and religious, particularly sexual abuse involving children. The experience in respect of the Australian Church's reaction to allegations of sexual abuse perpetrated by its personnel against children has been similar, though more recent.

### **The Australian Catholic Church Responses to Sexual Abuse**

At the April 1996 meeting of the national body of Catholic bishops of Australia, known as the Australian Catholic Bishops' Conference ('ACBC'), a comprehensive and detailed nine-point 'plan of action' was formulated. The plan sought to respond to "the magnitude of this problem of sexual abuse by priests and religious" (ACBC, 1996a). The plan of action was publicly released on 26 April 1996 and was accompanied by a *Pastoral Letter to the Catholic People of Australia* which announced nine specific initiatives which sought to respond to sexual abuse by priests and religious.

The pertinent initiatives to the present discussion include the establishment of a National Committee for Professional Standards to review and update the principles and procedures used by the bishops to deal with allegations of sexual abuse; the conduct of professional and independent studies to investigate how incidents of sexual abuse are handled by dioceses and religious orders; the conduct of studies to investigate how incidents of sexual abuse had been handled in those communities in which it has occurred; the development of a code of conduct for

priests and religious; and, the establishment of a national program to treat those clergy and religious who suffer from psycho-sexual disorders. (ACBC, 1996a)

The bishops' strategy was later endorsed by the Australian Conference of Leaders of Religious Institutes ('ACLRI'). The ACLRI is the national peak body representing the institutes of clerical religious (priests), religious brothers and religious women (religious sisters or nuns) and the societies of apostolic life and certain secular institutes operating in Australia. male and female religious orders. Membership of the new established National Committee for Professional Standards was drawn from both the bishops and the religious orders.

The determination of Church leaders in Australia to address the issue of sexual abuse can be gauged from the words of Bishop Robinson (1996, p.16), a member of the joint bishops' and religious leaders' National Committee for Professional Standards:

There must not be a complacent belief that the time of crisis will pass and, without any special effort on anyone's part, life will then be back to normal again. The revelations have been so shocking that the very word 'normal' will have a different meaning after this.

In keeping with the resolve to be open in the implementation of the nine-point plan of action, the Catholic bishops of Australia issued an update of outcomes achieved since April 1996 in a communique entitled *Responding to Sexual Abuse - A Progress Report*. The communique was publicly released to the Catholic people and the general community after the November 1996 meeting of the Australian bishops.

It is worth noting that this communique can be viewed as being an important precedent in the relationship between the Church and the secular community, by effectively introducing a procedure

of public accountability for the ongoing implementation of the plan of action. Such an approach is the first step in gaining the confidence and the trust of victims and the wider community that the Church is serious in its intent to address these matters.

December 1996 saw the Australian bishops and the religious leaders issue the document Towards Healing: Principles and Procedures in Responding to Complaints of Sexual Abuse Against Personnel of the Catholic Church in Australia (ACBC & ACLRI, 1996b) (hereinafter referred to as 'Towards Healing') which binds Church leaders *ad interim* to the provisions outlined therein.

Unlike protocols developed in other parts of the English-speaking Church which have primarily addressed the issue of child sexual abuse, Towards Healing has extended its coverage to the more difficult area of sexual offences involving adults.

The resolve of the Church in Australia to honour the commitments made to the community concerning sexual abuse by Church personnel was reinforced in early 1998.

In February of that year, the bishops and the religious leaders issued a draft document entitled Integrity in Ministry: A Document of Ethical Standards for Catholic Clergy and Religious in Australia (hereinafter referred to as 'Integrity in Ministry') which aims to give priests and religious a code of conduct to assist them "to exercise their pastoral ministry in an environment which is both safe and conducive to growth." (ACBC & ACLRI, 1997, p.v)

Following the announcement and implementation of these initiatives, many practitioners working in the area of sexual abuse involving Church personnel interviewed in the course of the present study expressed the view that the actions of Church leaders in Australia could be regarded as being at the forefront of the universal Catholic Church in their resolve to address the issue of sexual

abuse committed by Church personnel.

### **Relevance of the Present Study**

As a result of recent initiatives taken by the Australian Church, the present research was conducted at a time of hope and in an environment that was conducive to exploring whether there are any factors specific to the Catholic Church that might lead priests or religious to commit sexual abuse.

At the same time, it needs to be acknowledged that many people in the community consider the Catholic Church, like churches and religious institutions of other denominations, to be ill-equipped to deal with allegations of sexual abuse against children by its ministers. In the past there has been a pattern of dismissing allegations of abuse or of protecting the minister involved.

There are regular reports in the media of offending ministers being transferred from one parish or ministry to another where they have continued to commit abuse. One of the reasons for these types of responses has been a lack of understanding, on behalf of Church authorities, of the nature of and the reasons for the offence. Of particular concern to Church authorities and the wider community have been revelations in the public domain, in Australia and overseas, of the lack of appropriate action taken by some Church leaders when confronted with allegations or confirmed evidence of sexual abuse involving Church personnel against children.

Many commentators, particularly those who have been victims of child sexual abuse by Church personnel and those involved in the judicial system, have raised questions as to why Church authorities have been slow to react to allegations of child sexual abuse in the past. Others have suggested that some Church leaders continue to protect perpetrators of child sexual abuse. One of the reasons advanced for this inaction has been the lack of knowledge about child sexual abuse in general and child sex offenders especially by Church leaders and authorities.

## **Child Sexual Abuse Committed by Church Personnel**

This study seeks to make a contribution to the understanding of child sexual abuse perpetrated by Church personnel and, in particular, to an understanding of Church personnel who commit sexual offences against children. The term 'Church personnel' refers to priests and religious brothers and sisters of the Catholic Church. The study has particular relevance to Church leaders because it investigates whether there are any factors specific to priest and/or religious child sex offenders compared to non-religious child sex offenders.

Even if there are no differences between clergy and religious child sex offenders and non-religious child sex offenders, the very existence of priest and religious offenders, within and across the broad institutions of the Catholic Church, raises some important questions about aspects of Church life. For example, what is the actual incidence of priests and religious committing sexual offences against children? What role can psycho-sexual assessments play in identifying child sexual offenders? Does celibacy play a role? And, is there a future in the Church for priests and religious who are guilty of committing an offence? These are but a few of the questions being asked by Church leaders across the world as they respond to instances of child sexual abuse.

One of the starting points of the present research is the simple statement that sexual abuse is a phenomenon of human behaviour. The fact that an offender is a minister of a church provides a context or modality in which such behaviour is acted out.

The present study attempts to analyse that context as broadly as possible in order to determine whether there are some aspects of the environment of Church itself that influence the committing of sexual offences against children.

Therefore the study seeks to identify those factors relevant to the Church and to religious institutes

that have a bearing on, or give a context to, instances of abuse against children. In investigating this line of inquiry the following issues were considered:

- ☐ the procedures for assessing the psychological and dispositional suitability of prospective candidates to priesthood and religious life;
- ☐ the processes and programs to provide for personal and professional maturity and growth during the usually quite lengthy period of preparation for ministry;
- ☐ the place of ongoing support and development of a celibate ministry and lifestyle;
- ☐ the existence of professional supervision in ministry, understood as both accountability and professional and spiritual support; and,
- ☐ a variety of situation-based issues which may be relevant to the carrying out of specific ministries.

The study used responses from those holding positions of authority in the Australian Catholic Church, therapists involved with priest and religious child sex offenders and, victims of child sexual abuse to verify the nature and relevance of those factors identified from the literature as relating to the perpetration of child sex offences.

### **Applying Church and Civil Principles to Sexual Abuse Against Children**

Towards Healing (ACBC & ACLRI, 1996, pp.2-5) contains a set of principles for dealing with complaints of sexual abuse by priests, religious and Church personnel, which have been developed and endorsed by the Australian Catholic Bishops and the leaders of Religious Institutes operating in Australia. To that extent, it is more significantly explicit than similar documents of Bishops' Conferences elsewhere in the English-speaking world.

At the same time, Towards Healing is not an easily accessible document for ordinary readers, because of its 'Church' style and language. For example, Towards Healing frequently cites The



Code of Canon Law with which not all Church members would be familiar and which many outside the Church community would find difficult to comprehend or appreciate. Such an approach risks the Church presenting itself, and being perceived, as an institution with power and authority rather than with humility and pastoral care.

In order to set the present research in a more accessible framework, the values underpinning what is known as Catholic Social Teaching have been used to introduce a human rights perspective to the research in order to balance the legal, medical and psychological approaches which can sometimes be interpreted to soften the personal responsibility associated with sexually abusive behaviour involving children. These teachings are contained in the Gospel and various Church documents and fundamentally represent an historical theological and philosophical extension of the fundamental principle of the primacy of human dignity. The Australian Catholic Social Welfare Commission, the national social policy agency of the bishops, has demonstrated how these teachings can be applied to assess Church and secular social policies (ACSWC, 1996).

As well, those universally endorsed principles drawn from the secular human rights instruments such as the Universal Declaration of Human Rights (1948), International Covenant on Civil and Political Rights (1966), Convention for the Elimination of All Forms of Discrimination Against Women (1981), Convention on the Rights of the Child (1990) and, Declaration on the Elimination of Violence Against Women (1993) have been drawn upon to provide a framework against which the conduct of sexual dysfunction can be judged in terms of what constitutes unacceptable human behaviour.

The present study has also been conducted on the premise that the Catholic Church views instances of sexual abuse in a holistic rather than a partial context and that such a context has regard for victims, for communities and for offenders.

## **Questions of Interest to the Present Study**

Some of the research questions that are of particular interest to the present study are detailed below.

- Hypothesis 1: That in respect of sexual offences against children, there is no difference between the rate of offence committed by males compared to the rate of offence committed by females.
- Hypothesis 2: That in respect of sexual offences against children, there is no difference between the rate of offence in the general population and the rate of offence among priests or religious.
- Hypothesis 3: That in respect of sexual offences against children, there are no observable differences between the general population and child sex offenders on measures of psychopathology.
- Hypothesis 4: That in respect of sexual offences against children, there is no difference between child sex offenders in the general population and priests or religious child sex offenders on measures of psychopathology.
- Hypothesis 5: That in respect of sexual offences against children, there are no observable differences between the general population and child sex offenders within the general population when situational factors are taken into account.
- Hypothesis 6: That in respect of sexual offences against children, there are no observable differences between the child sex offenders in the general population and priests or religious child sex offenders when situational factors are taken into account.
- Hypothesis 7: That in the case of priests or religious who display 'true paraphilia' there is evidence of a correlation between offending against children and the offender's own traumatic personal background of unresolved childhood abuse.
- Hypothesis 8: That in the case of priests and religious child sex offenders, regardless of

whether the offender displays 'true paraphilia', there will be evidence from their adult personal life that indicates:

- a significant behavioural characteristic of seeking exclusively the company of children;
- social isolation from peers and other adults; and,
- obsessional behaviour patterns.

**Hypothesis 9:** That in the case of 'paraphilic' behaviours involving children engaged in by priests and religious, the majority of offenders exhibit this behaviour due to situational factors rather than irregular psychopathology.

**Hypothesis 10:** That given the existence of situational factors surrounding acts of child sexual abuse committed by priests or religious, the number of priests or religious who exhibit true paraphilia will be smaller than the number of priests or religious who engage in paraphilic behaviour.

**Hypothesis 11:** That the existence of situational factors associated with any act of child sexual abuse committed by priests or religious will not decrease the objective reality in the mind of the priests' or religious' superiors that an offence has occurred.

**Hypothesis 12:** That in respect of child sexual abuse, celibacy does not appear to be a significant factor for priests or religious child sex offenders.

**Hypothesis 13:** That priests and religious who commit sexual offences against children do not view their behaviour as a breach of celibacy.

## CHAPTER 2

### Definitions and Terminology

What is understood by the term 'sexual abuse' and to what does it refer?

The Catholic Church in Australia, in the document Towards Healing, has defined the term 'sexual abuse' to refer to "[a]ny form of sexual behaviour with a minor, whether child or adolescent...It is both immoral and criminal." (ACBC & ACLRI, 1996b, p.2). The Church's references to *sexual abuse* provide a basic, albeit generic, description of those behaviours which many in the community would identify as describing the broad ranges of activities associated with this specific term.

At the same time, it needs to be acknowledged that the clinical, legislative and judicial literature is replete with a range of other terms which are used to describe the act(s) of sexual abuse itself; the range of behaviour associated with performing sexual abuse; the agent responsible for initiating the act; the effect of the behaviour on the recipient of the act; the unequal balance of power between the agent and the recipient; etc. These terms are normally used to specify a particular behaviour or set of behaviours and activities which describe specific instance of sexual abuse.

#### Defining the Term 'Sexual Abuse Against Children'

There are a plethora of words used to describe sexual abuse against children. The most frequently cited terms in the clinical and legal literature used to identify this term include: 'sexual assault', 'rape', 'sexual violence', 'sexual violation', 'sexual misconduct', 'paedophilia', 'ephebophilia', 'child abuse', 'child sexual abuse', 'child sexual assault', 'professional misconduct', 'professional boundary violation' and 'unlawful sexual intercourse'.

The reader should be aware that some of these terms carry the nuances associated with a particular group in the community, i.e. children's rights movement, women's refuges, sexual assault services, victims' support groups, etc. while others are discipline-specific, i.e. legislative definitions such as 'sexual assault' have a high degree of specificity in the legal jurisdictions across the Australian States and Territories. The context or environment in which each of these terms is used determines the specific meaning attributable to the term.

The 1996 report to the bishops and religious leaders, Professional Standards Research Project: A National Treatment Program for Priests and Religious with Psycho-Sexual Disorders (ACBC & ACLRI, 1996a) which primarily focussed on sexual assault against children, included the following brief definitions of the terms 'sexual misconduct', 'sexual impropriety' and "sexual abuse' (pp.17-18):

Sexual misconduct and sexual impropriety' is construed to mean acts between consenting adults although it is often used to include behaviours between adults and adolescents/children. The nature of the behaviour itself may be normal or aberrant.

'Sexual abuse' is a generic term applied to any situation where an individual exploits another for his/her sexual advantage. 'Abuse' includes the full gamut of behaviours from hands-off offences such as exhibitionism, exposure to pornographic material, through to fondling, masturbation and penetration. The concept of 'sexual abuse' is also used to refer to the sexual exploitation (verbal or physical) of a child under the age of sixteen or eighteen by a person at least five years older.

This category incorporates the psychiatric diagnostic category of paedophilia. Again, the contact may be heterosexual or homosexual in nature. The age difference is arbitrary and may not rigorously apply where perpetrators are young adults and

victims are older adolescents. Note that at law minors are not capable of providing consent irrespective of their compliance or responsibility in initiating sexual contacts.

The use of the above definitions was meant as a guide only and they were not seen to be mutually exclusive. For example, a 'sexual boundary violation' and 'sexual abuse' may occur concurrently, i.e. in a situation where a priest acting as a counsellor may engage in sexual activities with a 15 year old seeking help for an emotional problem.

Neither of the two Church documents released in 1996 detailed the different terms and concepts contained in the criminal law on sexual assault in the Australian States and Territories. For a start all the Australian States and Territories, with the exception of Western Australia, have enacted legislation which requires the mandatory reporting of sexual assault involving children. The particular professional categories or occupations required to report sexual assault involving children as specified in the legislation varies across each jurisdiction but, in the main, applies to medical practitioners, teachers and workers engaged in what is best described as the general social welfare area.

While priests have been excluded from these mandatory reporting requirements a growing number of the Church's lay personnel are covered under the civil obligations. It is also a fact that a number of religious personnel including bishops and priests have been called to give evidence in various Commissions of Inquiry established by State Governments to investigate, among other issues, sexual offences against children. Any initiative undertaken by Church leaders and authorities to address allegations of sexual abuse against children involving religious personnel will of necessity need to be cognisant of the civil and criminal law.

Since the release of the 1996 Church documents an initiative by the Commonwealth Government

and the State and Territory Governments has sought to bring a precision to the meaning of the term 'sexual abuse'. In late 1996, the Model Criminal Code Officers Committee of the Standing Committee of Attorneys-General released a draft Discussion Paper entitled Model Criminal Code, Chapter 5: Sexual Offences Against the Person<sup>1</sup> which aims to:

- formulate a 'best practice' model for dealing with sexual offences;
- propose new uniformity in the sexual assault area of the criminal law; and,
- include recommendations with respect to future legal terminology.

It is considered pertinent to review the present laws relating to both sexual assault and consent, the terminology defined within these laws, and the proposed reform of sexual offence legislation in order to bring a preciseness to the meaning of the phrase 'sexual abuse against children by priests and religious'.

A national overview of existing criminal and sexual offence legislation is also considered to be relevant since priests and religious of the Catholic Church reside in and operate in all the Australian States and Territories. If the Australian Catholic Church is to address the issue of sexual abuse against children perpetrated by priests and religious, it is important for Church leaders to know the correct legal classifications and legal offences applicable to sexual assault against children.

### **Background to Sexual Offence Legislation Reforms**

The term 'criminal law' is used to refer to the Criminal Codes which operate in Queensland, Northern Territory, South Australia and Western Australia and the Crimes Acts which operate in the remaining State and Territory jurisdictions.

The past 15 years has seen the criminal law on sexual offences receive considerable attention in

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<sup>1</sup> Hereinafter referred to as 'MCC'.

all the legal jurisdictions of the Australian States and Territories. This attention has taken the form of reviews of existing sexual offence legislation and has resulted in substantial changes in the criminal law. For example, New South Wales has introduced substantive changes to that State's child sexual assault offence legislation and associated legislation commencing with the **Crimes (Sexual Assault) Amendment Act 1981**. A concise overview of these changes, up to the most recent changes contained in the **Crimes Amendment (Children's Evidence) Act 1996**, is contained in Appendices 1 to 3 of a recent Monograph published by the Judicial Commission of New South Wales (1997; pp.51–82).

The major areas where reform has been implemented can be summarised as relating to: standardisation of terminology; expansion of the range of conduct covered by sexual offence legislation; the introduction of the concept of 'violence' to sexual offences which resulted in various offences being graded according to differing levels of 'seriousness'; rules regarding the introduction of sexual reputation and history as evidence; the concept of rape within marriage; and issues concerning the age of consent and the age of criminal responsibility. (MCC, 1996, p.1)

Despite the extensiveness of these legislative reviews in terms of both scope and community consultation, the Australian States and Territories operate under eight separate jurisdictions and continue to operate with eight independent collections of sexual offences laws. Considerable differences can be found in the terminology and the definitions contained in the sexual offences legislation across the eight jurisdictions. Again, these differences lend support for the need to clarify the definitions and terminology used throughout this study.

In more recent years the Commonwealth Government has also taken an active interest in sexual offence laws particularly with respect to sexual assault against women. This interest has been due to a recognition that, although Australia's federated system of government limits the involvement of the Commonwealth in passing criminal laws requiring each State and Territory



to determine its own criminal laws, there is a need to achieve greater uniformity in sexual assault laws so that women and children residing in each State and Territory do not face different problems in their engagements with the legal system (Bargen & Fishwick, 1995, p.57).

Current Government interest has also been generated following the findings contained in a number of documents commissioned by various Commonwealth instrumentalities and national conferences which review the state of sexual abuse against women in particular. These include: Australian Institute of Criminology, Violence: Directions for Australia (1990); House of Representatives Standing Committee on Legal and Constitutional Affairs, Half Way to Equal: Report of the Inquiry into Equal Opportunity and Equal Status for Women in Australia (1992, pp.24–25); National Committee on Violence Against Women, National Strategy on Violence Against Women (1992); Australian Law Reform Commission, Equality Before the Law: Women's Access to the Legal System (1994a); Australian Law Reform Commission, Equality Before the Law: Justice for Women (1994b); The First National Conference on Child Sexual Abuse (1994); Bargen and Fishwick (1995) Sexual Assault Law Reform: A National Perspective; and, The First National Conference on Sexual Assault convened in 1995.

In mid–1990, the Standing Committee of the Commonwealth, State and Territory Attorneys–General ('SCAG') agreed to address the development of a national criminal code which would set out general principles of criminal responsibility. The Final Report of the SCAG was released in December 1992 and formed the basis for the **Commonwealth Criminal Code Bill 1994** which was subsequently passed by the Commonwealth Parliament in March 1995 and is known as the **Criminal Code Act 1995 (Cth)**.

The national importance of the Model Criminal Code project was endorsed at the 1994 Commonwealth Government and the State and Territory Premiers' Leaders Forum. Since 1994 the Model Criminal Code Officers' Committee has released further reports which have included

separate draft legislative frameworks or model legislation as a method to introduce a degree of uniformity into the criminal law. These models have been appended as Chapters to the original Model Criminal Code project and contain detailed recommendations in a specific area of the criminal law. Chapter 2, The General Principles of Criminal Responsibility and Chapter 3, Theft, Fraud, Bribery and Related Offences are two areas of the criminal law which have already been addressed.

More recently, three influential reports have highlighted the need for a national coordinated approach to bring about effective change to the sexual offences legislation presently operating in Australia: National Committee on Violence Against Women, National Strategy on Violence Against Women (1992); Australian Law Reform Commission, Equality Before the Law: Justice for Women (1994); and, Sexual Assault Law Reform: A National Perspective (1995).

In November 1996, the SCAG released the draft Discussion Paper which proposed a new framework for a revised Code for sexual offences. The Discussion Paper is Chapter 5 of the Model Criminal Code project.

While the SCAG is in the process of conducting national consultations on the Discussion Paper, it would appear that the resolve of the Australian Attorneys-General to bring about greater consistency across all jurisdictions will result in the model Code being adopted, to a greater rather than lesser extent, in the near future. This study has therefore drawn on the Discussion Paper and Sexual Assault Law Reform: A National Perspective (1995) to provide Church leaders with an update of the latest legal developments in the area of sexual offences against children.

### **Objectives of Sexual Offence Legislation**

In keeping with the present position in all Australian jurisdictions the MCC proposes a separate category of sexual offences be retained in the Model Criminal Code. The MCC

(*op. cit.*, p.3) argues that a sexual assault is "a particularly distinctive experience which cannot be compared to any non-sexual physical injury." The sexual nature of the assault involves two dimensions: assault against a person and instances whereby "the private and protected physical and psychological boundaries of the person are intrusively invaded." (NSW Standing Committee on Social Issues, 1993, p.4)

At the same time, it is worth noting here McConaghy's (1993) observation that current legislative measures to address child-adult sexual activity are premised, not on ethical or moral grounds, but on a medical model which proscribes such behaviours in terms of the long-term psychological harm caused to the child as victim (p.240). Hence legislation deals with 'degrees' of harm caused to children by defining some forms of sexual abuse as more significant than others.

### **The Physical and Fault Elements of Sexual Offence Legislation**

In all Australian jurisdictions there are three elements which define the basic offence of sexual assault:

- (i) the *physical act* which requires the prosecution to prove beyond reasonable doubt the 'act of penetration';
- (ii) the *lack of consent* which requires the prosecution to prove that the complainant did not consent to the act of penetration; and,
- (iii) the *fault element* which covers a range of instances whereby the person accused of sexual assault believed consent was given.

The present laws relating to the fault elements are as follows. The law in New South Wales, Victoria, South Australia and the Australian Capital Territory requires the prosecution to prove beyond a reasonable doubt that the person accused of the physical act knew that the victim was

not consenting or was reckless as to whether there was consent. In Queensland, Western Australia, Tasmania and the Northern Territory the prosecution is not required to prove any fault element – rather the accused is able to raise a defence based on the contention that the accused has reasonable grounds to believe that the complainant was consenting.

The other two of the elements which define the basic offence of sexual assault are summarised below with respect to the proposed Model Criminal Code in order to provide an overview of the range of behaviours which the MCC is proposing. These elements could in future constitute the basic offence of sexual assault and the circumstances relating to the nature of consent or lack of consent.

### **The Physical Act**

The MCC adopted the term 'unlawful sexual penetration' to cover the basic offences currently known as 'rape' and/or 'sexual assault' in most Australian jurisdictions.

The term was preferred over the common law terms of 'rape' and 'sexual assault' because the MCC believes it covers a wide definition of the behaviour defined by the basic offence. It properly describes and indicates the range of behaviours associated with the basic offences. It imputes the seriousness of the offences and, it is a term that can be readily understood by juries and the community. The background behind the decision to use the term 'unlawful sexual penetration' to describe the basic offence within the Model Criminal Code is outlined by the MCC (*op. cit.*, pp.15–29).

The meaning of the basic offence of sexual penetration as defined in the proposed Model Criminal Code is:

- (a) the penetration (to any extent) of the genitalia or anus  
of a person by any part of the body of a person or by

- any object manipulated by a person, or
- (b) the penetration (to any extent) of the mouth of a person by the penis of a person, or
- (c) the continuation of sexual penetration as defined in paragraph (a) or (b).

**(Part 5.3 – Sexual Offences, *Division 32 – Definitions*, 32.1, (1) to (2); MCC, p.14)**

It needs to be noted that the basic offence has been drafted in gender neutral terms in recognition that sexual assault is perpetrated against both women and men and that the law should offer both women and men equal protection. It should be further noted that some jurisdictions have already enacted new offences to cover sexual activity involving children and that these offences have been labelled 'unlawful sexual penetration' or 'unlawful sexual intercourse'.

Other sexual offences to be covered in the Model Criminal Code include the physical acts of indecent assault, referred to as 'indecent touching', and those situations where a person forces another to engage in sexual behaviour with a third person, referred to as 'compelling sexual acts'. These physical offences are defined respectively as follows:

### **33.3 Indecent touching**

A person who indecently touches another person:

- (a) without the other person's consent, and
- (b) knowing or being reckless about the lack of consent,
- is guilty of an offence.

**(Part 5.3 – Sexual Offences, *Division 33 – Sexual acts committed without consent*, 32.3. MCC, p.236)**

In relation to **section 33.3**, any type of physical touching could constitute indecent touching. The term 'indecent' is defined in the Model Code as "indecent according to the

standards of ordinary people and known by the defendant to be indecent according to the standards of ordinary people". (section 32.3, (1); p.235)

'Compelling sexual acts' is defined in section 33.4 and this definition seeks to cover acts of sexual penetration by other than the accused:

#### **33.4 Compelling sexual acts**

(1) A person who compels another person:

- (a) to sexually penetrate the person, or
  - (b) to sexually penetrate, or be sexually penetrated by a third person, or
  - (c) to sexually penetrate the other person's own genitalia or anus,
- is guilty of an offence.

...

(3) A person who compels another person to touch the person, or a third person, indecently is guilty of an offence.

**(Part 5.3 – Sexual Offences, Division 33 – Sexual acts committed without consent. MCC, p.236)**

#### **Lack of Consent**

At present all the Australian jurisdictions have taken different approaches to defining consent<sup>2</sup>. The concept of 'consent' itself is complex and is extensively covered in the legal literature.

The Northern Territory and Victoria have recently introduced similar amendments to their respective Criminal Codes whereby consent is defined in terms of a 'free agreement' involving the two parties and a list of non-exhaustive situations where such agreement is

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<sup>2</sup> See: ACT Crimes Act, s92P; NSW Crimes Act, s61R; NT Criminal Codes, s192; Qld Criminal Code, s347; SA Criminal Law Consolidation Act, s49; Tas Criminal Code, s2A; Vic Crimes Act, s36; WA Criminal Code, s319

negated.

The circumstances included in the Victorian legislation whereby a person does not freely agree to an act (MCC, p.49) include:

- (a) the person submits because of force or the fear of force to that person or someone else;
- (b) the person submits because of fear of harm of any type to that person or someone else;
- (c) the person submits because she or he is unlawfully detained;
- (d) the person is asleep, unconscious, or so affected by alcohol or another drug so as to be incapable of freely agreeing;
- (e) the person is incapable of understanding the sexual nature of the act or the identity of the person;
- (f) the person mistakenly believes that the act is for medical or hygienic purposes.

In order for a prosecution to succeed in a sexual offence case, it must be proven that the victim did not give their consent freely.

The Model Criminal Code defines consent as a "consent freely and voluntarily given" and the MCC recommends that the proposed Code adopt an inclusive definition which gives the term "its broad, natural meaning so as to retain flexibility and be capable of meeting

a wide range of circumstances" (MCC, *op. cit.*, pp.49,57).

The significance of this approach, if adopted by the Attorneys-General in any Statutory Definition of consent, is that the definition of consent will make clear the community's standards of acceptable sexual conduct and, consequently, what is unacceptable sexual conduct.

The provisions of the various existing Criminal Codes regarding consent and children are summarised below. There is also a range of cases where the issue of the giving of consent by the victim is not in question and these cases are summarised below.

### **The Age of Consent**

Under the criminal law, the issue of 'consent' arises in the context of assault, whether it be of a sexual or non-sexual kind. Matters related to consent under the criminal law are the legal concepts of capacity, voluntariness, duress and understanding- both from the victim's and the defendant's point of view. A final matter for consideration under the criminal law is the always difficult issue of the age(s) of the parties.

State and Territory jurisdictions have determined different ages of consent in respect of sexual activity involving children. These ages are codified in the respective legislative instruments of each jurisdiction and may vary within an individual jurisdiction according to whether the activity is heterosexual or homosexual. A summary of the present situation across the states is as follows (MCC, *op. cit.*, p.99):

Victoria has a series of general offences which apply where a child is between 10 and 16. In the ACT, the age of consent for both heterosexual and homosexual sex is 16. In New South Wales and the Northern Territory, the age of consent is 16 for heterosexual sex and 18 for homosexual sex. In South Australia, the age of



consent for both heterosexual and homosexual sex is 17. In Queensland, it is an offence to have vaginal intercourse with a girl under 16 or to have anal intercourse with a person under the age of 18. In Western Australia, it is an offence to sexually penetrate a child under 16, while the age of consent for homosexual sex is 21. In Tasmania, the age of consent is 17 for heterosexual sex while homosexual sex remains prohibited by the Tasmanian Criminal Code.

Subsequent amendment to the provisions of the Tasmanian Criminal Code have legislated the age of consent for homosexual sex to be 17 years as of 14 May 1997. This change in the Criminal Code is deemed to have taken effect from 4 April 1924.

The MCC took the view that there is no objective criteria for determining what the acceptable age of consent should be. On the basis that most jurisdictions currently set the age of 16 years as the age at which children can consent to heterosexual sex, the MCC has recommended that the age of consent, whether for heterosexual or homosexual activity, be set at 16 years for both males and females in the proposed new Criminal Code (*op. cit.*, **Division 34, s 34.1**, p.237). It should be noted that the Royal Commission into the New South Wales Police Service also contained a similar recommendation (Royal Commission into the New South Wales Police Service, Final Report. Volume V: The Paedophile Enquiry, (1997); pp.1079–1082).

The Model Criminal Code Officers Committee held the position that the age of consent should be the same regardless of whether the activity is heterosexual or homosexual on two grounds. First, an older age of consent for homosexual activity (i.e. 18 years of age) would infer that such activity "is an undesirable activity from which males should be both protected, and deterred, until adulthood", and this is not an appropriate aim of the criminal

law. Secondly, and related to the previous position, the Model Criminal Code was prepared on the basis that there not be any specific homosexual offences. (*op. cit.*, pp. 101, 8–10, respectively)

### **The Age a Child Cannot Give Consent**

All jurisdictions provide for the age at which a child is deemed unable to give informed consent to sexual activities. This provision covers those instances where the consent of a child to participate in a sexual activity is judged to be of no relevance to any defense in any circumstances.

The age below which a child cannot give consent differs across the state jurisdictions. The Australian Capital Territory, New South Wales and Victoria have set the age at 10 years. The age is 12 years in South Australia and Tasmania and 13 years of age in Western Australia. In all five of these jurisdictions sexual activity with a child under the specified ages renders the offender absolutely liable for such an offence. In Queensland and Northern Territory the age below which a child cannot give consent is set at 16 years for females and 18 years for males. However, in both of these jurisdictions it is a legal defence that the offender reasonably believed the female victim was of or above 16 years and the male victim was an adult.

The MCC has recommended that the age under which a child in Australia cannot give consent to any sexual activity be set at 10 years for both males and females (*op. cit.*, **Division 34**, pp.237–239). This is in line with **section 7.1** of the Model Criminal Code which provides that children under 10 years of age are not responsible for criminal offences.

An assessment of the merits of this recommendation is beyond the purview of the present

study. However, the Federal Attorney-General announced on 8 July 1997 that the Commonwealth Government does not support any recommendation which would see the present age of consent lowered (News Release, Attorney-General and Minister for Justice, The Hon. Daryl Williams, AM QC MP; 8 July, 1997 [297]).

### **The Ages of Restricted Consent**

'Restricted consent' refers to the age of a child between non-consent and consent. The issue of restricted consent is relevant because all jurisdictions currently provide for certain defences where a child is between the ages of non-consent and consent.

The types of defence pertinent to the present study are that the offender was not more than two years older than the child or the offender believed on reasonable grounds that the child was above the age of consent. Further details on the parameters of these defences are outlined in the MCC Discussion Paper at pages 199ff.

The MCC has recommended that the ages of restricted consent be between 10 and 16 years for both males and females (Division 34, MCC, pp.237–239). Again, an assessment of the merits of this recommendation is beyond the scope of the present research.

### **Consent in Canon Law**

The previous discussion referred to civil law. The Roman Catholic Church has a comprehensive set of internal laws contained in the Code of Canon Law (or 'the Code'). The current Code was declared on 25 January 1983 and binds persons and juridical persons in communion with the Bishop of Rome (canons 1, 96, 113–123). The Code contains a number of references to consent and the giving of consent with respect to the act of marriage. In the context of the present discussion, there are a number of relevant canons to note and these are summarised below.

In accord with ecclesiastical law, **canon 1083 §1** declares a minimum age below which people cannot marry validly even if they are judged to have sufficient use of reason. The age is 14 years for females and 16 years for males. (The Code of Canon Law, 1983, p.193)

These minimum ages were also specified in common law and the grounds are unclear as to why the differentiation of these ages is necessary, other than that they were seen to correlate with a notional age at which puberty occurs.

The ages nominated in the Code reflect the Church's belief that adolescents below these ages have not attained sufficient skills in reason and discretion of judgement to give adequate consent to marry. They also reflect the Church's belief that adolescents under these ages are incapable of giving consent to participation in sexual activity.

The age at which people can marry in Australia is 18 years for both females and males. A person under the age of 18 requires the written consent of his or her parents or guardians (**Marriage Act 1961 (Cth.)**, ss 5 & 13(1)). In some circumstances an application can be made by persons under the marriageable age – this is usually available to girls between 16 and 18 years (**Marriage Act 1961 (Cth.)**, ss 12 & 16) (Dickey 1990, pp.131–132; Finlay & Bailey–Harris 1989, pp.338–339).

Church law recognises variations in age of consent to marry in different parts of the world and gives local Conferences of Bishops the authority to align canonical with civil provision. Thus **canon 1083 §2** allows a Bishops' Conference to establish a higher age than that defined by **canon 1083 §1** so that there is lawful recognition of marriage in accord with the civil law.

## **Sexual Offences Against Children**

As noted at the beginning of this chapter, the previous research undertaken for the Catholic Church defined the term 'sexual abuse' as "a generic term applied to any situation where an individual exploits another for his/her sexual advantage" (ACBC & ACLRI, 1996a, p.18; 1996b, p.7).

This definition is indeed broad and sweeping in its focus. It includes, in addition to criminal behaviours, breaches of codes of professional ethics, conduct of a sexual nature in a pastoral relationship, behaviours covered under the Church's Code of Canon Law, forms of behaviour that might otherwise be characterised as consenting relationships between adults.

It is partly due to the generic usage associated with the term 'sexual abuse' that the very term is at risk of minimising the criminal significance of the behaviour engaged in by a person committing such an offence. This is particularly so in the case of sexual abuse of children, where such behaviour is, of its nature, a criminal offence.

In order not to minimise the criminal element of sexual abuse against children, the term 'sexual offences against children' will be used to refer to criminal sexual activities involving children. The terms 'unlawful sexual penetration', 'indecent touching involving a child' or 'compelling a child to engage in a sexual act' are used to describe particular types of sexual behaviour involving children.

The actual types of behaviours considered, by legislation, to be assaults against children can be obtained from Table 1 (see over) which has been compiled using a recent study of child sexual assault cases finalised in the District Court in New South Wales in 1994 (Judicial Commission of New South Wales, 1997). The information in this Table was developed with reference to the type of assault reflected in the charges laid. The frequency of each type of conduct was

calculated for female and male proven victims.

TYPE OF BEHAVIOUR	PERCENTAGE OF VICTIMS
Touching with hands	24.5
Penile vaginal penetration	16.3
Penile anal penetration	7.9
Digital (vaginal or anal)	12.5
Cunnilingus or fellatio on victim	12.0
Masturbation on offender	6.6
Touch or rub victim with penis	6.6
Fellatio on offender	5.9
Masturbation on victim	4.1
Exposure	0.8
Used in pornography	0.2
Victim made to masturbate	0.2
Other (inciting, etc)	2.3

Source: Table 3, Judicial Commission of New South Wales (1997, p.27).

**Table 1: Types of child sexual assault committed by adults  
in New South Wales in 1994**

The information cited in Table 1 refers to charges laid against all child sex offenders from New South Wales in 1994 provides a summary of the types of sexual offence behaviour committed against children. This information can not be taken as indicative of the generalised conduct of priests or religious but can be used to give an indication of the variety of behaviours that are covered under the criminal law.

### **Paraphiliac Disorders**

In light of the material outlined above, it is important to define the types of behaviour which are associated with two specific sexual dysfunctions involving children. The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (Fourth Edition) ('DSM-

IV') defines the essential feature of paraphilic disorders as inclusive of "recurrent, intense sexually arousing fantasies, sexual urges, or behaviours" involving children (DSM-IV, 1995, p.536). A description and the criteria for paraphilic disorders defined in the DSM-VI is provided at Appendix 1. The identification of a specific paraphilia relating to children is described below.

### **Paedophilia**

Paedophilia is the most commonly used term to describe sexual misconduct involving minors. The DSM-IV describes the essential features of this disorder as follows (1995, p.541):

Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving sexual activity with a prepubescent child or children...The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

The term 'paedophile' refers to a person, usually but not exclusively confined to a male, who engages in sexual activity with a prepubescent child, generally under the age of 13 years. This activity may involve unlawful sexual penetration of a male or female child; indecent touching of a male or female child; or, compelling a person to engage in a sexual act with a male or female prepubescent child where the person is at least 16 years of age and at least five years older than the child.

Paedophilic behaviour may vary from fondling of genitals/breast over clothing, to masturbation, oral-genital contact, and digital or penile penetration of vagina or anus. The intent and repetitive occurrence of behaviour differentiate paedophilia from 'accidental' bodily contact or socially inappropriate behaviours, e.g. hugging, encouraging kisses from

children without sexual arousal. (DSM-IV, 1995, pp.540–542)

The clinical literature makes a further distinction between 'exclusive' (or fixated) and 'nonexclusive' (or regressed) paedophiles. The former are only sexually interested in prepubescent children and have no interest in adults either male or female. The latter are sexually interested in prepubescent children as well as adults both male and female. A male paedophile who is only sexually interested in prepubescent males is a homosexual paedophile. It needs to be noted that the term 'homosexual paedophile' does not mean that such a person is necessarily a nonexclusive paedophile, since he may also be sexually interested in adult women.

It is important to distinguish between homosexuality and paedophilia. The term 'homosexuality' indicates sexual orientation. Paedophilia is a sexual orientation towards children. Homosexuality and paedophilia in and of themselves are different and distinct phenomena although an individual may have both orientations. The need to clearly distinguish between the two terms was made evident during the proceedings of the Royal Commission into the New South Wales Police Service.

Throughout this study the term 'homosexual paedophilia' refers to a precise category. This category does not include all homosexuals or all paedophiles.

### **Ephebophilia**

A recent trend in some of the clinical literature has been to distinguish between sexual behaviour involving prepubescent and postpubescent children. Ephebophilia can be defined as behaviour which involves recurrent, intense sexual interest in postpubescent young people and includes arousing fantasies, sexual urges, or behaviours involving sexual activity with them.



The term 'ephebophile' refers to a person, usually a male, who engages in: unlawful sexual penetration of either a male or female postpubescent young person; indecent touching involving a male or female postpubescent young person; or who, compels a person to engage in a sexual act with a male or female postpubescent young person where the person is at least five years older than the young person.

Again, an ephebophile may be exclusively or nonexclusively interested in postpubescent children/youth. He may be a homosexual or a heterosexual ephebophile.

Although ephebophilia is not listed in the DSM-IV, it is helpful to use the concept in order to make a distinction between fixated and regressed paedophiles. Research into sexual abuse against children by priests and religious, conducted by researchers overseas, has highlighted the incidence of offences against postpubescent children as particularly significant in the case of priest and religious offenders.

The paraphilias involving children should not be applied to those situations where an individual fleetingly or experimentally engages in sexual activity with children. While these situations are rightfully considered unlawful, a paraphilia properly refers to those situations where an individual prefers or requires sexual activity involving children in order to become aroused and/or to obtain sexual satisfaction.

Masters, Johnson and Kolodny (1994, pp.211–212) have conceptualised true paraphilia as abnormal in the sense that those who have a paraphilia represent a statistical minority of human sexual behaviour and are dysfunctional in the sense that they are "marked at [their] core by a combination of compulsivity and rigid focus".

In both paedophilia and ephebophilia the primary feature of the sexual offences involving

children is that the issue of consent by the child is irrelevant – a feature presently acknowledged in all Australian jurisdictions as noted above.

When the terms 'paedophilia' or 'paedophile' and 'ephebophilia' or 'ephebophile' are used throughout this Study, they are used in the context defined above.

### **Victims and Survivors**

The literature on sexual abuse commonly mentions the terms 'victim' and 'survivor' when referring to a person who has experienced sexual abuse. In some cases these terms are used interchangeably in the same book or article. Some authors prefer the term 'victim' to demystify any suggestion that children or women are to blame for inciting sexual abuse and to emphasise the horror of the event.

Others have preferred the term 'survivor' in order to highlight the psychological and physical strength of those who have been sexually abused. 'Survivor' also positively connotes hope for a more positive future.

Throughout this study preference has been given to the term 'victim' to describe the person, whether male or female, child or adolescent, who has experienced sexual abuse.

### **Offenders, Abusers and Perpetrators**

The terms 'offenders', 'abusers' and 'perpetrators' are used throughout the general literature to refer to those persons who are responsible for perpetrating a sexual offence against a child or adolescent or for carrying out some form of sexually abusive behaviour involving a child or adolescent, whether this behaviour is in violation of the Criminal or Civil Code or not.

The Research Team have preferred to use the term 'offender' throughout the study to describe the

person, whether male or female, who is responsible for any act of sexual abuse against children or adolescents. the word 'offender' reflects the serious nature of these offences and more fully links the conduct of individuals to the criminal nature and intent that accompanies many of these offences.

## CHAPTER 3

### Research Methodology

The study was conducted in five stages:

- Stage One: Preparatory planning phase which included the tasks of defining sexual abuse against children and of undertaking a comprehensive clinical literature review with a specific focus on reports of child sexual abuse committed by priests and religious.
- Stage Two: Development of a Survey Instrument based on the findings of the literature review that was designed to elicit open-ended written responses from a variety of subjects wishing to be involved in the research.
- Stage Three: Circulation of the Survey Instrument and conduct of *in situ* interviews with a number of different individuals and groups of subjects.
- Stage Four: Analysis of the responses received as a result of the Survey Instrument and other responses received from direct interviews with groups and individuals.
- Stage Five: Discussion of the responses to the Survey Instrument, the information that was gathered during the direct consultations and the findings of the clinical literature.

The definition of the term 'sexual abuse' in the context of children and other terms associated with sexual abuse involving children that appear in the clinical and legal literature has been covered in the preceding chapter.

## **Review of Clinical Literature**

A comprehensive search of the available literature utilising a number of databases in the fields of religion, psychology, psychiatry, medicine and sociology, using various descriptors was undertaken.

It was necessary to conduct a series of separate literature searches using specific descriptors in order to ensure all the available listings were covered with respect to: child sexual abuse; professional misconduct; and, references to priests and religious involved in these activities. The databases included information from international and Australian journals and publications. There was a dearth of relevant information available from Australian based journals and publications comparative to information gathered from overseas sources.

The ISTI Bibliography (Edition 2.03), compiled by the Interfaith Sexual Trauma Institute, Saint John's Abbey and University in Collegeville, USA provided a useful resource from which to extend the literature search thus ensuring the study comprehensively covered the latest clinical offerings. Relevant material identified from the databases and the bibliography was obtained from academic journals or, in the case of books and other publications, borrowed from other sources or purchased. Over 1,500 abstracts were reviewed.

Before reporting the findings of the literature review, four observations about the literature review should be noted. First, there is a small but persistent number of articles appearing in the professional literature since the 1970s which are difficult to comprehend in any other way than as defences of child sexual abuse. Some of these articles argue in favour of legal, social and/or biological definitions of child sex abuse. Some argue about the child's giving of 'true consent'. Some base their opposition to mandatory reporting of child sexual abuse on anthropological precedents.

Others again, argue that in some circumstances intrafamilial sex involving children could be beneficial to the future well-being of the children. These defences are difficult to understand other than in a sociopolitical context whereby a misogynist mindset is intent on minimising the influence of the feminist movement and the children's rights movement which have evolved since the 1970s.

A number of contributions have been ignored because they do not bring any worthwhile knowledge to the present research focus. Indeed, some of this material is dangerous in its defense of what the community clearly regards as unacceptable practices. At the same time, it must be acknowledged that some scholarly works have attempted, in an objective manner, to raise legitimate questions about the State's policies to address child sexual abuse. Where these are relevant to the present research focus they have been included.

Secondly, the academic and scientific journals and other literature surveyed with regard to sexual abuse committed by priests and religious originate mainly in the United States, Canada and the United Kingdom. Only a small number of journal articles and texts have their origin in Australia. However, it was also observed that, although the quantity of this material is small at present, there is a growing focus on sexual abuse involving priests, ministers and religious personnel in the literature.

Thirdly, there is substantial variability in the quality of results reported in the literature. The reported results and conclusions of some studies are, at best, questionable. In other studies the reported results and conclusions are spurious. For example, take the study of a treatment program for child sexual abuse offenders conducted in the late 1970s which reported a recidivism rate of just 0.6 percent. This figure is at odds with the majority of clinical findings which approach the issue from the perspective of 'minimising the risk' of future incidence of abuse,

rather than from the presumption that abusive behaviour can be truly 'cured'.

Finally, and partially related to the second observation above, while the Church in Australia has recently taken a decision to comprehensively address the challenges presented by sexual abuse committed by its members, it remains poorly resourced in terms of access to quality, Australian-based clinical information. Such information would better equip and prepare the Church to deal with the challenges in a strategic and action-oriented way.

### **Subjects**

During the initial planning stage of the research, it was considered not possible, nor desirable, to choose the various groups and individuals who might contribute to the study at random, using standard statistical sampling procedures. A strictly random and statistically valid consultation process was seen to be problematic and most probably undesirable.

The relative merits of both targeted or non-random and random sampling methods of potential subjects, using selected personal interviewing and written responses to a questionnaire instrument, were examined. Without seeking to target people or groups, it makes greater sense to focus on the practical experiences of sexual abuse from the perspectives of victims, offenders, clinicians and those within the Catholic Church who have responsibility for dealing with instances of allegations against Church personnel.

It was therefore decided to adopt a sociocultural, anthropological approach to the field research component of the study as the best method to augment and supplement the findings established in the course of the literature review. This approach required a descriptive analysis of qualitative data collected from a broad range of people associated with the Church including: bishops and religious leaders, clergy and religious, clinical therapists, legal professionals, Church members

and, where possible, the perspectives of victims and families, communities and offenders themselves were sought.

There can be no doubt that the best form of consultation on the matters at hand would have been an unrestricted and wide public consultative process, open to all people including those in positions of authority within the Church. Such public consultations have been a feature of other major inquiries that have focussed on social issues facing the Church. This option was not available to the researcher due to the prohibitive costs associated with undertaking travel necessary to attend such consultations across a range of dioceses.

Two types of consultative processes were used during the study. The first was through written response to a Survey Instrument. The second involved personal interview. The final sampling methodology was also based on the advantage of using a mixed model of selection which would ensure that significant groups of potential contributors were included and that various other groups and individuals were given the opportunity to participate of their own accord.

The decision not to conduct the consultative stages in an open public forum was not in any way influenced by what some respondents, notably victims of sexual abuse by priests and religious, have termed 'the climate of secrecy' they believe pervades throughout the Church on these sensitive matters.

It was also considered important to distinguish between the three groups of priests and male religious in Australia. There are two distinct groups of priests: those ordained for and incardinated into a diocese and, those belonging to specific religious institutes. Religious institutes can have both lay and ordained members or, they can have solely lay members. In Australia, the lay male religious institutes are principally institutes of teaching brothers.



Where possible and appropriate distinction was drawn between diocesan priests, clerical religious and non-clerical religious. It was also possible to consult with a small number of people who have left priesthood or religious life.

Among the varying reasons for people to make a decision to leave ministry and/or a religious community, it was not unreasonable to suppose that actual offences, or conscientious anxieties about the possibility of committing an offence some time in the future might be contributing factors. It was posited that especially in the latter case, perceptions could be of significant value to the research.

### **Development of Survey Instrument**

The wish to consult as widely as possible resulted in the development of a Survey Instrument designed to be open-ended. It also provided respondents with the opportunity to comment on any other issues they thought were relevant and which were not covered in the body of the Survey Instrument.

The Survey Instrument was devised to seek information which might confirm or refute a number of research findings and observations identified from the literature with a particular focus on those factors specific to sexual abuse committed by priests or religious as outlined in the research hypotheses. The aim of the Survey Instrument was to ascertain from respondents their experience of a number of specified internal and external factors based on their knowledge of known child sex offenders - these questions were particularly aimed at eliciting responses from clinicians.

The basis for these inquiries was to ascertain whether the factors specific to priests and religious identified from the literature were reflected in the responses to the Survey Instrument, i.e. what were the experiences of individual priest or religious offenders from the perspective of victims,

bishops, religious leaders, therapists, and others.

The Survey Instrument called for comment in three areas. The first section sought information concerning the personal background of child sex offenders who enter priesthood or religious life and their relationship with parents and siblings. The second section referred to the adult personal background and well-being of priests or religious who are known to have committed sexual offences against children.

The third section concentrated on the details and the context of the pastoral ministry of priest and religious offenders. It sought comment from respondents on whether the living arrangements and/or the professional practices of priesthood and religious life might be related to instances of sexual abuse of children and young people. This line of inquiry was specifically concerned with the nature and context of an offender's own exercise of ministry in the Church.

A copy of the Survey Instrument is provided at Appendix 2.

The survey documentation was mailed to potential respondents in late December 1996 and was part of a wider Church survey which included a questionnaire concerned with adult sexual abuse committed by priests and religious. Envelopes contained a covering letter from a Research Assistant and included a printed reply-post paid envelope to facilitate the return of completed Survey Instruments. A copy of the covering letter can be found at Appendix 1. A number of additional survey documents were hand delivered to some people who indicated an interest in participating in the study.

The return date for completed Survey Instruments, and other written comments, was February 1997. A number of mailed responses received after this date and the information gathered from

interviews convened after the return date were included in the final analysis.

### **Confidentiality of Responses**

The letter that accompanied the Survey Instrument included the following commitment to respect the confidentiality of all written and verbal communication received from respondents:

All survey responses will be received anonymously and treated in strictest confidence in accord with normal confidentiality requirements applying to academic research. The Research Team also makes a commitment to dispose of all material once the research is complete.

This commitment has been honoured.

### **Circulation of Survey Instrument and Interview Stage**

The third stage of the study involved a further series of interviews. These interviews were conducted with professionals who had direct clinical experience with priests and religious sexual abuse offenders. The interviews also included discussions which touched on the 'lived reality' of the Catholic Church, which sought more descriptive and analytical comment from bishops, religious leaders, priests, men and women religious, individual Church members and parish groups, victims and their advocates, offenders and their personal networks.

It became increasingly clear that the method of consultation in any particular instance would vary according to both the nature of the offence and the perspective of the person being consulted: victim, offender, community member, bishop or religious leader, therapist. Some of the factors identified in the literature search and review would be more relevant to particular respondents.

The circulation of the Survey Instrument was extensive and included the following individuals or groups:

- ❑ the Catholic bishops of Australia;
- ❑ members of the Australian Conference of Leaders of Religious Institutes;
- ❑ members of all the religious orders and congregations operating in Australia<sup>1</sup>;
- ❑ members of the National Professional Standards Committee;
- ❑ clinicians and therapists, including those consulted in previous research into the establishment of a National Treatment Program;
- ❑ all Catholic diocesan-based welfare agencies in Australia;
- ❑ Catholic education authorities in each of the States and Territories;
- ❑ victims support and advocacy groups; and,
- ❑ other people and groups who had expressed an interest in the project.

A total of 405 Survey Instruments and invitations to respond were distributed throughout Australia.

### **Analysis of Consultation Responses**

Both the written responses and the notes of interviews conducted *in situ* or over the telephone were collated by the researcher.

Due to the open-ended nature of the Survey Instrument and the diversity of respondents, written comments varied considerably in detail and in quality. Since the response forms asked for indication of the respondent's perspective, the collating was able to reflect, where appropriate,

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<sup>1</sup> There are 44 male institutes (i.e. clerical religious, religious brothers, secular institutes and societies of apostolic life) compared to 77 female institutes (i.e. religious women, one secular institute, and one society of apostolic life) active in Australia. In the case of some religious institutes (e.g. Congregation of Christian Brothers and the Institute of Sisters of Mercy) the Survey Instrument was forwarded to Provincial or Diocesan chapters.

the source of the comment made: bishop, leader, therapist or victim. Actual responses have been incorporated into the present report where these were seen to bring insight and significance to a particular issue.

While the analysis brought a deductive framework to the review of the clinical literature, an inductive or empirical process was applied to the analysis of the consultation material.

### **Discussion of Findings**

The final stage of the study involved integrating the information supplied by respondents to the Survey Instrument and those who participated in face-to-face interviews with the findings identified from the review of the clinical literature.

## **CHAPTER 4**

### **Sexual Offences Against Children: Review of the Literature**

A comprehensive search was made of the factors and characteristics identified in the clinical literature as having some correlation with the occurrence of sexually abusive behaviour involving children, committed by adults in the population in general, as well as the specific sub-population of priests and religious.

Much, although not all, of the literature relating to this sub-population draws on reports and accounts of sexual abuse committed by Catholic clergy and male religious. Academic literature relating to women religious and sexual offences is almost non-existent.

The exact number of people suffering paraphilias involving children and adolescents within the general and religious communities remains unknown. The present research is based on the best estimates available. The best estimates are based on:

- (i) extrapolated figures from offenders, both within the general community and Church populations, who have been identified by their coming into contact with the legal system;
- (ii) mandatory notifications to Australia's State and Territory departments of community services; and,
- (iii) similar reporting situations in overseas countries.

Few paraphiliac offenders voluntarily seek treatment. Those who have been paedophilic or ephebophilic offenders are even less likely to seek treatment and information on the prevalence rates is heavily reliant upon formal complaints of victims or third parties which have been notified to the public authorities, and upon those offenders who have been charged with a criminal offence.

In as much as not all offenders who have been charged with sexual offences against children face prosecution in court and those who are prosecuted are not always found guilty of the charge(s), it is difficult to assert with accuracy the actual prevalence rate in any population.

Bearing these data-related constraints in mind it is impossible to obtain a true current figure for the rate of abuse in the general community, in specific sub-populations or according to sub-categories of offenders with any accuracy. It is well accepted that not all cases of sexual abuse against children are reported or are identified by authorities.

At the same time, the figures used by researchers to determine the rate at which paraphilia involving children and adolescents exist in the general population are based on a highly biased sample of offenders or convicted offenders. Therefore, the figures reported here must be viewed as representing a conservative estimate of the true incidence rate of sexual abuse involving children or adolescents.

It has to be noted since not all cases of sexual abuse against children are reported or are identified by authorities, the figures reported here are based on a highly biased sample of offenders or convicted offenders. In as much as not all offenders who have been charged with sexual offences against children face prosecution in court and those who are prosecuted are not always found guilty of the charge(s), it is difficult to assert with accuracy the actual prevalence rate in any population.

## **The Incidence of Child Sex Offenders in the General Community and Amongst Priests and Religious**

### **Male Versus Female Offenders**

Finkelhor's 1985 study indicated that in a sample of university students who reported being

the victims of sexual abuse as children, 91 percent of these offences were initiated by a person older than the child and that boys and girls were mainly abused by older men (81% for girls and 83% for boys).

Finkelhor and Russell (1984) estimate that approximately 14 percent of sexual abuse of boys and six percent of girls is perpetrated by women. Rudin, Zalewski and Turner (1995) report that, on average, female offenders abuse children 3.3 years younger than male offenders.

McConaghy (1993) notes there is little available information from which to determine the percentage of persons within a representative normal population who have carried out sexual activity with children. However, in relation to offences against female children he states "...there are on average one to two female victims of a paedophile, if it is accepted that 90% of paedophiles are male, that 30% of women are their victims, and that there are about four times as many adults as children in the population, about 5% of men and 0.5% of women would molest girls." (p.308)

Citing a 1992 study of university students in Australia, McConaghy reports that 15 percent of male and two percent of female students indicated the likelihood of performing some type of sexual activity with a prepubertal child if they could do so with impunity (McConaghy & Zamir, 1992, *loc. cit.*)

A small proportion of the literature provides detailed information on the differentiation between sexual abuse committed by male or female offenders either overseas or in Australia. While Faller (1987) found that female and male child sex offenders do not differ in the number of victims they abuse, Finkelhor (1986) refutes speculation that the number of female offenders is underestimated and believes that a minimum of 90 percent



of all reported cases of sexual abuse involving children is committed by male offenders. It is possible to draw some conclusions on the incidence of sexual abuse committed by male and female adults from data recently collected in Australia.

The reports of crime statistics provide detailed information on the differentiation between sexual abuse committed by male or female offenders. The 1995 National Prison Census reports that for sentenced prisoners held in Australian prisons on 30 June 1995, there were 2,088 males compared to only two females serving terms for sexual assault (ABS, 1997a, p.21). Data collected by the Victorian Centres Against Sexual Assault, which are responsible for treatment services to victims of sexual offences, indicates that where the gender of the alleged offender was recorded, over 95 percent were male (Victorian Crime Prevention Committee, 1995, p.71).

Despite the overwhelming evidence to support the view that the greater number of sexual offences against children is committed by males, it should be recognised that an undisclosed number of sexual offences perpetrated by women against male children remain unreported. Kasl (1989, p.235) has proposed that sexual abuse of boys by females is far more widespread than any research has shown to date.

There is also some literature which suggests that a majority of men who had a prepubertal sexual experience with postpubertal women do not report the incident as a child because the molestation did not involve force. They recall their immediate response to the experience as positive and they report no significant psychopathology in their adulthood.

While findings relating to adult recollections of sexual abuse cannot be applied to the experiences of women who, as children experienced prepubertal sex with postpubertal women (Russell, 1986), the fact remains that many female children do not report such

incidences when they take place. The significance of noting these findings is to illustrate the fact that sexual offences against children involving female perpetrators will be under-reported both in the clinical literature and the sexual assault data.

On the available evidence it is apparent that males are more likely to perpetrate sexual offences against children than are females. At the same time it needs to be noted that while the offenders are overwhelmingly male, many women also commit sexual offences against children and many who have been the victims of female sexual abuse are now breaking the silence. See for example the recorded stories of victims recounted in Mullinar & Hunt (1997).

### **Male Versus Female Victims**

The literature is clear on the fact that victims of paedophiles and ephebophiles are boys and girls, ranging in age from infancy to 17 years. The number of male victims is probably under-reported, but continuing evidence shows the risk of abuse to girls is two to three times higher than boys. Most children maintain secrecy about their sexual abuse and some disclose the abuse only in adulthood.

While studies cited during the review of the literature vary in their findings about the number of victims of child sexual offences, there is general agreement by clinicians and police authorities that paedophiles and ephebophiles victimise many children over many years. (Goldman & Goldman, 1988)

Finkelhor's (1979, 1985) studies provide estimates of the prevalence of sexual abuse of male as well as female children. His 1985 study of university students reported that nine percent of male undergraduates had been sexually abused by older persons by the age of 16 years compared to approximately 18 percent of female undergraduates. Both male and

female victims were mainly abused by older men and 33 percent of offenders were family members.

Faller (1989) reports a lower proportion of sexual abuse involving male children than female children based on the nationally collected statistics provided by the United States child protection system which consistently supports male sexual abuse cases to be 20 percent or less compared to female cases. These national figures also provide evidence that 23 percent of boys and 14 percent of girls are abused by persons outside the child's family. A 1988 study in New Zealand reported that 10 percent of women surveyed had been victims of sexual abuse before the age of 13 years (Mullen, Roman-Clarkson & Walton).

In Australia, Goldman and Goldman (1988) replicated research of university students originally conducted by Finklehor in the United States. The Australian research, conducted in a range of Victorian post-secondary institutions in both urban and rural areas, confirmed Finklehor's findings that 28 percent of girls, at mean age of 9.4 years, and nine percent of boys, at mean age of 10.3 years, reported sexual experiences with an adult.

The available literature from studies on child sexual offences conducted in countries outside Australia suggests that between eight to 38 percent and even up to 60 percent of females under the age of 18 years and five to 10 percent of males under the age of 18 years have been subjected to some form of unwanted sexual behaviour (McNulty & Wardle, 1994). These reported rates of victimisation vary according to the definition of abuse used and the population from which the sample is drawn. This information offers limited assistance to determining the rate of offenders in the general population because many child sex offenders are repeat offenders.

For example, Jenkins reports that 29 child sex offenders participating in a treatment

program at the Gracewell Clinic who had been collectively convicted of 271 offences involving 178 victims later admitted to a total of 14,971 acts of abuse which could be classed as criminal offences which involved 1,082 victims – an average of 37.3 victims per offender. (Tucci, 1995, p.39) Abel, Becker, Mittelman, Cunningham–Rathner, Rouleau and Murphy (1987) reported that 377 unconvicted child molesters who had committed offences outside their home victimised an average of 11.8 girls and 61 boys.

### **Nonreligious Versus Religious Offenders**

A crucial issue for Church authorities concerns establishing whether there is any significant difference between the rate of sexual offences against children committed by priests and religious and the rate of similar offences committed by nonreligious individuals, i.e. the general population. This is an extremely difficult question to examine for reasons which will become clear.

One method that can be used to estimate the actual size of the sexual abuse problem within the general community is to attempt to identify the rate of offence from surveys and clinical studies involving sub–populations of offenders.

However, McConaghy (1993, p.308) notes there is a paucity of information available from a randomly selected sample drawn from general community populations which indicates the actual percentage of a sample's sub–population who have carried out paedophilic or ephebophilic acts. Such indications could be used to extrapolate the rate of incidence across a general population.

Some information on the rate of occurrence of paraphilia involving children in overseas populations does exist – mostly from North America. Again, identifying the size and extent of this rate relies upon information from two sources. Information on sexual

offences involving children, which includes unlawful sexual penetration, indecent touching and compelling sexual acts, can be estimated from studies that examine the prevalence of such behaviour from the responses of victims (i.e. self-reporting) to surveys. These surveys are referred to as 'victims' surveys'.

The second source estimates prevalence from the reporting of known offenders. Both these sources can provide some insight, albeit with limited reliability, into the rate of sexual abuse involving children that occurs within the general community. Both of these sources are likely to under-estimate the true rate of occurrence of paraphilia involving children.

The paedophile index retained by the Australian Criminal Intelligence Database currently contains the names of 2,114 persons suspected of or arrested for paedophilia in Australia. The index does not include the names of convicted paedophiles. (cited by Children's Commission of Queensland, 1997, p.70)

The Federal Parliamentary Joint Committee on the National Crime Authority reported tentative estimates of paedophiles made by some Australian state police forces as follows: South Australia – 300; Western Australia – 700; Queensland – 300; and Northern Territory – 45 (figures for other states not presented). These figures provide only an approximate estimate of the overall number of active paedophiles operating in Australia.

In 1995–96 the Australian Governments' departments of community services recorded a total of 91,734 notifications of child abuse and neglect of which 12 percent remained uninvestigated. Of the 67,816 notifications that were investigated, 61,383 (91%) were finalised (by 31 August 1996) of which 29,833 (49%) were substantiated and 47 percent were unsubstantiated. Four percent resulted in a 'child at risk' outcome. Sixteen percent, or 4,802 of all substantiated notifications involved child sexual abuse. (AIHW, 1997)

While the national figures indicate child sexual abuse is a major problem in Australia, reference to Table 2 demonstrates the lack of any observable uniform trend in the instance of child sexual abuse across the Australian States and Territories.

State	Substantiated notifications of sexual abuse	% of total substantiated notifications	Rate per 1,000 children
NSW <sup>a</sup>	2,776	20	1.7 <sup>e</sup>
Vic	644	10	0.6
Qld	301	6	0.3
WA <sup>b</sup>	328	30	0.7 <sup>f</sup>
SA <sup>c</sup>	600	25	1.6 <sup>g</sup>
Tas <sup>d</sup>	70	30	0.5 <sup>h</sup>
ACT	49	11	0.6
NT	34	13	0.6
<b>TOTA</b>	<b>4,802</b>	<b>16 (x)<sup>i</sup></b>	<b>1.0 (x)<sup>i</sup></b>

Source: Adapted from Tables 3 and 7, AIHW (1997)

- (a) In New South Wales in 1995–96, a notification was substantiated when the information about the notification was confirmed. As such the number of substantiated notifications includes substantiated general concerns about a child as well as child abuse and neglect.
- (b) 'New Directions' was phased in during 1995–96<sup>1</sup>.
- (c) Figures exclude 40 substantiated notifications classified as 'threat of abuse'.
- (d) The relatively low number of substantiated notifications for Tasmania is partly because of the lack of a common definition of 'substantiated' across regions during the counting period.
- (e) Includes children notified to the DCS because of child concerns.
- (f) 'New Directions' was phased in during 1995–96.
- (g) Excludes children subject to substantiated notifications with outcomes classified as 'threat of abuse'.
- (h) The relatively low rate for Tasmania is partly due to the absence of a common definition of 'substantiated' across regions during the counting period.
- (i) National average

**Table 2: Substantiated notifications of child sexual abuse and rate of child sexual abuse for children aged 0 to 16 years by State and Territory**

The inability to be precise about the incidence of sexual abuse against children, defined by substantiated notifications across jurisdictions, presents a major handicap to making

<sup>1</sup> The 'New Directions in Child Protection and Family Support' policy will substantially change the way the Department of Family and Children's Services classifies and deals with notifications of child abuse and neglect. The policy was trialed in five regions during 1995–96. From 1 May 1996 notifications of concerns about children have been separated from notifications of maltreatment, previously both were registered as notifications of abuse and neglect, and both are dealt with in different ways.

any firm extrapolations of the incidence of child sex offenders in the Australia population.

The principal reason for this inability can be attributed to the differing reporting requirements and regimes which have been introduced across the jurisdictions as a result of changes in policies relating to child abuse and neglect. For this reason, the available information is of limited use in determining the true rate of sexual abuse against children or the characteristics of offenders.

As previously reported, figures taken from the New South Wales Child Protection Council's Strategic Planning and Review Branch Report (1994) provide some appreciation of the extent of the problems facing researchers in determining any accurate figure relating to the prevalence of sexual offences involving children and the lack of accurate information from which the prevalence of paraphiliacs can be determined.

During the period 1993–94 there were 32,238 notifications involving 25,370 children. The term 'notification' refers to formal reports to the New South Wales Department of Community Services of instances where a child may be suffering any physical, sexual or emotional abuse and neglect. Although this rate of notifications has shown an increase of 56 percent since 1990–91, sexual abuse continues to have the lowest rate of notification compared to all other categories of notification (7,090 cases or 22% of total notifications).

Approximately half (47%) of all notifications were confirmed compared to only 24 percent (2,430) of all sexual abuse notification cases being confirmed. The rate for the proportion of children with confirmed sexual abuse in 1993–94 showed a decrease of 16 percent over the proportion in 1992–93 even though the number of finalised investigations of substantiated or 'child at risk' classifications increased by 5.9 percent

over the same period. (AIHW, 1997, Table 7A)

The Judicial Commission of New South Wales, commenting on lower rates of conviction for child sexual assault in 1994, noted that while there were more prosecutions occurring and more convictions recorded in New South Wales than was the case in 1982. The difference in the number of incidents reported to police and prosecuted "suggest[s] that the process remains a very difficult and painful task for victims." (1997, p.ix).

The Judicial Commission's examination of child sexual assault cases finalised in the District Court of New South Wales in 1994 also found a lower plea rate overall compared with that found in earlier studies of child sexual assault which has in turn also led to a lower conviction rate. This was particularly the case for multiple trial cases where only 14 percent of offences resulted in a guilty outcome (*ibid.*, p.x). Cunneen (1997) raises a number of problems in the prosecution of paedophiles which contribute to the low rate of successful prosecutions.

The data for child sexual assault cases prosecuted in 1994 included a category of offenders defined as non-family members who were in a position of authority over the victim, such as teachers, clergy or babysitters, which accounted for five percent of victims.

Further inquiries of the Judicial Commission confirmed that no Catholic priests or religious were included under the four other relationship of offender to victim categories, i.e. 'Immediate Family', 'Other Family', 'Acquaintance' or 'Stranger'. From further inquiries made of the Judicial Commission, it was established that the number of religious ministers included in the category 'In Authority (non family)' totalled four of whom two (or approximately 0.63% of proven offenders in 1994) were Catholic priests.



(Communication from Judicial Commission of New South Wales dated 4/8/97)

On the basis of national police statistics, Queensland had the second highest number of reported sexual offences involving children under 16 years in 1995 – a total of 1428 recorded offences (Children's Commission of Queensland, 1997, p.60). Of these notifications 238 (or 6.2%) were substantiated as involving sexual abuse primarily involving children between the ages of 5 and 14 years (Department of Families, Youth and Community Care, undated, pp.42–43). No information is available on offender characteristics.

Figures for the years 1992–93 to 1993–94 taken from the Victorian Crime Prevention Committee Inquiry into Sexual Offences Against Children and Adults (1995) are significantly lower than those for New South Wales due to the following factors. Victoria did not legislate for mandatory reporting of child sexual abuse until November 1993. Mandatory reporting in Victoria applied to doctors, nurses and police from 4 November 1993 and to teachers and school principals from 18 July 1994.

Recording of sex offences as the number of separate occurrences was not introduced until 1993–94. The Committee also suggested "that many notifications involving allegations of sexual assault are either not reported to police at all by protective workers, or there are substantial delays in notification to police" (p.17). Nevertheless, some of the data reported by the Committee is pertinent to the present review.

In 1992–93 a total of 19,344 notifications of child abuse were received by the Victorian Child Protective Services of which 3,242 (16.7%) involved allegations of sexual abuse. Only 10 percent (337) of these notifications were subsequently substantiated. However, with respect to this low figure it has to be noted that 52 percent of notifications received

are not investigated beyond questioning the notifier at the time the notification was lodged.

During the same period there were 3,561 reports of sexual offences to police of which 2,514 (70.6%) involved victims under the age of 17 years – approximately half the reported rate in New South Wales for the same period. In 1993–94 of the total 4,141 sexual assault victims, 2,583 (62.4%) were aged under 17 years, and approximately half of all sexual assaults were perpetrated against children under 14 years. Thirty one percent (281) of the reported total of 898 rape victims were aged under the age of 17 years.

Analysis of the Victorian data reported for 1992–93 shows that 170 cases (directly calculated from the provided figure of 6.77%) of reported sexual offences against children were "committed by a person in a position of authority to the child, for example a teacher, religious leader or sports coach." (p.37) Raw data identifying the actual number of Catholic priests or religious included in the figure of 170 is not publicly available.

Turning to child sexual offences involving priests and religious, Loftus and Camargo (1993) carried out a retrospective survey of 1,322 men who had attended treatment programs run at Southdown<sup>2</sup>. Their findings revealed that 117 residents admitted to age-inappropriate sexual misconduct (i.e. the victims who were the object of this behaviour were aged 19 years or under). Of the total sample, 8.4 percent reported some explicit genital activity with an 'underage' person. Those who had sexual contact with children aged 13 years or under, the group most likely to meet diagnostic criteria for paedophilia, represented 2.7 percent of the total sample surveyed.

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<sup>2</sup> Southdown was initially established for the treatment of addicted priests and has moved into the treatment of priests and religious with sexual disorders.

What is known about priests or religious child sex offenders?

Levin, Risen and Althof (1994) evaluated 31 professionals who had been accused of sexually inappropriate behaviours within the context of their work of which 14 (31%) were clergymen accused mainly of homosexual behaviours involving children. The majority of these clergy were accused of past sexual behaviour committed in their twenties or thirties, at least 10 years ago. A number of other reports have given general estimates of the rate of either paedophilic or ephebophilic homosexual behaviour among American clergy (Greeley, 1993; Sipe, 1990).

Greely (1993) estimates from his own database that between four and eight percent of American priests sexually abuse children. Sipe (1990), again drawing from a private data base collected over 30 years of clinical practice, estimates that six percent of American priests sexually abuse children. Of these offences, two percent involve paedophilic activities and four percent involve ephebophilic activities.

Such estimates have been consistent in offering rates of paraphiliac disorders involving children approximating four to 10 percent. It must be noted here that there has been some debate on the limitation of the scientific evidence Sipe has used to justify his claims of higher offending rates for priests, but it can be noted that a number of other researchers broadly support his finding (Fortune, 1989; Rutter, 1989; Steinke, 1989).

Although these studies are limited in the Catholic Church in northern America, in recent years there have been a series of formal inquiries conducted by the Church to investigate actual cases and allegations of child sexual abuse perpetrated by priests and religious. Three notable inquiries involved the Archdiocese of St. John's in Newfoundland in 1990, the Canadian Conference of Catholic Bishops in 1992 and, the Archdiocese of Chicago

in the same year. The Cardinal's Commission on Clerical Sexual Misconduct with Minors in the Archdiocese of Chicago (1992) established an offence rate, based on cases actually dealt with by the Archdiocese, in the order of 2.7 percent.

Literature from the various institutes that have offered treatment in America has concentrated on the needs of the client, often a quite varied clientele, and have not thus far been able to contribute substantially to better knowledge of prevalence within the Church. However, the Saint Luke Institute<sup>3</sup> cites a 1992 study by Dempsey, Gorman, Madden and Spilly estimating that "between 80 and 90 percent of sexual abuse of minors perpetrated by Catholic priests is directed at same-sex adolescents" and provides corroboration of this figure from estimates at Saint Luke's Institute and other facilities which assess and treat Catholic priests and religious. (Robinson, Montana & Thompson, 1993, p.1)

The Chicago Report estimates that approximately 90 percent of priests in the US who have sexually abused children under 18 years have been homosexual ephebophiles. In a review of records for 59 cases of priests reported for sexual offences involving children under 18 years, the overwhelming number of substantiated cases involved homosexual ephebophiles and only one case involved paedophilia. (Archdiocese of Chicago, 1992, pp.11-12)

### **The Influence of Psychological Factors on Child Sex Offenders in the General Population**

A wide range of theories are expounded in the literature on the possible psychological factors which contribute to child sexual offenders perpetrating abuse (for example see McConaghy, 1993, pp.329-346; Money, 1989; Finkelhor & Araji, 1986). These theories can be generally

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<sup>3</sup> The Saint Luke Institute is a psychiatric hospital in Maryland originally established to evaluate and treat alcoholic and addicted clergy and which, more recently, treats clergy with a variety of addiction and personality disorders including sexual dysfunction.

classified as belonging to one of two prevailing models.

The *stimulus control model* views sexual offences as being motivated by a subject's sexual preferences for the related deviant object(s) or behaviour(s). A number of *cognitive models* view sexual offences as being the result of socially induced cognitions which encourage and reward an offender's performance of deviant behaviour(s).

There is consensus within the literature that abusers are not 'out of control' people who have no ability to exercise choice about their behaviour or lack the ability to take responsibility for the consequences of their behaviour. At the same time there is broad agreement that many internal characteristics and external factors can influence the behaviour of those who commit sexual offences against children.

What follows is a summary of the internal characteristics, identified from a broad review of the literature, that play some role in the perpetration of child sexual abuse and draws on research material from 'stimulus control' and the 'cognitive' frameworks.

### **Psychology and Typology of Child Sexual Offenders**

The literature records that paraphiliac behaviours do occur in the context of certain types of psychiatric disorders (e.g. schizophrenia, manic depressive illness, antisocial personality disorder) and in certain organic conditions (e.g. frontal lobe damage) but these disorders are in the minority and are not relevant for the majority of individuals exhibiting a paraphilia.

Studies, such as that conducted by Kosky (1989), showing high rates of psychiatric disorders in sex offenders reflect a bias, in that they have generally been conducted on serious offenders in prison, a population known to exhibit excessive rates of psychiatric

disorders. The majority of paraphiliacs are not psychiatrically ill although they may suffer psychiatric symptoms or features of poor impulse control, disordered personality, anxiety or depression.

The literature also suggests that one cannot explain or dismiss paraphilia, and more specifically paedophilia or ephebophilia, as being symptomatic of another psychiatric illness. It is clear that in the majority of cases, the paedophile and the ephebophile know what they are doing is wrong and have full volitional control over their actions. Masters, Johnson and Kolodny (1994) propose that in severe cases of paraphilia the urge is so strong and "ever-present that it requires an almost ritualistic daily feeding, preferably through real-life enactment, but if this is not feasible, at least by fantasy-assisted masturbation." (p.213)

Seidman, Marshall, Hudson and Robinson (1994) report evidence that sex offenders, especially rapists and non-familial child molesters, suffer from intimacy deficits and are, as a consequence, lonely individuals. Other researchers report paraphiliacs to be evasive, isolated, have a low self-concept, inhibited aggression, have a strong need for approval, are insecure, have psychosexual inadequacies as well as intimacy deficits. They are hostile, socially alienated, self-centred, have poor control over impulses, and are conflicted over authority (Marshall & Eccles, 1991; Levin & Stava, 1987). They project blame, act-out tendencies of a self-defeating nature, are fearful of social involvement, and have a low capacity for interpersonal communication and empathy (Levin & Stava, 1987).

More specifically, Kalichman (1991) studied the affective, personality and psychopathological characteristics of three groups of sex offenders based on the age of their victims; prepubescent children (aged 12 years or under), post-pubescent adolescents

(aged between 13 and 17 years) and adults (aged 18 years and above). This research found that paedophiles demonstrated significant difficulties in developing interpersonal relationships, experienced social alienation, were consistently immature in a variety of behaviour settings, had unusual notions about sexuality, higher emotional disturbance, were socially inadequate, and were uncomfortable with others, compared to those who offended with adults.

On affective and self-esteem measures, paedophiles were found to possess higher trait anxiety, greater levels of trait anger and greater self-degradation when compared to adult sex offenders. Interestingly, ephebophiles fall somewhere between the prepubescent and adult sex offenders, leading Kalichman to conclude that the personality of sex offenders is congruent with the developmental stage of their victims.

Paedophiles and ephebophiles can be identified as fixated or regressive – refer to summary provided in Table 3.

Paedophilia Types			
<b>F I X A T E D  T Y P E</b>	1. Primary orientation to children	<b>R E G R E S S I V E  T Y P E</b>	1. Primary orientation to age appropriate person.
	2. Interests begin in adolescence		2. Paedophilia emerges in adult
	3. No persistent stress or subjective distress		3. Stress and distress evident.. Poor coping strategies
	4. Offences premeditated		4. Impulsive, episodic
	5. Close identification with child-parental figure		5. Shift of identification from adult to child
	6. Males primary target		6. Females primary target
	7. No age appropriate sexual behaviour		7. Age appropriate sexual behaviour
	8. Immature, poor socio-sexual relationships		8. Underdeveloped interpersonal relationships

**Table 3: Description of types of paedophilia**

The fixated abuser's sexual and erotic feelings and stimuli are focused primarily on male prepubescent, or on male post-pubescent children exclusively. Fixated abusers frequently display the following characteristics. They are:

- ☐ developmentally and psycho-sexually arrested;
- ☐ immature;
- ☐ non assertive;
- ☐ heterosexually inhibited;
- ☐ lacking social skills and knowledge of sex and sexuality; and/or
- ☐ possibly abused as children themselves.

Their relationships with adults are poor, manipulating and controlling children is easier since children are less able to retaliate and are more easily threatened. The fixated abuser's behaviour is often addictive, and only outside intervention will stop the abuse. Treatment prognosis is poor for fixated people leading Lothstein (1990) to warn the importance for clinical intervention to identify fixated paedophiles in order for specific and appropriate treatment and management regimes to be effective.

Regressed abusers, on the other hand, usually have heterosexual adult to adult relationships and are often married with families. Some are homosexually oriented. Regressed behaviour emerges during times of stress – in relationships specifically. They are people prone to drug and alcohol abuse, are incestuous abusers, preying on female family members or family friends who become adult substitutes (Entwistle, 1992). Treatment outcome possibilities for regressed paedophiles are marginally better than for fixated paedophiles, and overall better for paedophiles who engage in sexual activity with children later in their life than for long-term paedophiles.

Pithers, Kashima, Cumming, Beal and Buells (1988) have proposed that paedophiles and



ephebophiles share the following psychological characteristics:

- ☐ cognitive distortions;
- ☐ deviant sexual fantasies;
- ☐ disordered sexual arousal pattern;
- ☐ interpersonal dependence;
- ☐ low self-esteem;
- ☐ low victim empathy;
- ☐ planning of the sexual offence;
- ☐ deficient sexual knowledge; and
- ☐ lack of social skills.

Paedophiles and ephebophiles also manifest addictive behaviour and Entwistle (1992) describes this behaviour in terms of acting as a drug substitute. Manifestations of the addictive abuser can include the following characteristics:

- ☐ egocentric;
- ☐ concerned primarily with satisfying his own needs;
- ☐ subject to guilt, but not to an extent to stop the abuse;
- ☐ prevented only by intervention; or
- ☐ likely, in some cases, to express relief when exposed.

This understanding has led some researchers to suggest that alcohol and/or drugs may be used as a means of breaking down inhibitions prior to engaging in aberrant behaviour or may impair judgment by an offender. For example, Araj and Finkelhor (1985) have proposed that many paedophiles who were sexually abused in their childhood use alcohol or other drugs to lower their inhibitions prior to committing sexual offences against children. Finkelhor and Araj's contribution to the clinical research has been their willingness to allow for the interactions of various factors identified from both stimulus

control and cognitive model perspectives which contribute to paedophilic behaviours.

However, based on a sample of 34 paraphiliacs incarcerated in Canada, only 26 percent had committed the sexual offences, for which they were imprisoned, under the influence of alcohol or drugs (Earls *et al.* [1984], cited by Ames & Houston, 1990, p.337). Hence this connection may not be overly useful to an understanding of those internal factors relating to child sexual offenders.

Finklehor's (1984) four pre-conditions of abuse are considered to have proven validity. He postulates child sex offenders display some or all of the following:

1. a conscious wish to abuse;
2. manipulation of the environment to gain access to victims;
3. overcoming of the victim's resistance; and
4. internally moving beyond guilt, anger and fear so as to be able to offend again.

For such offenders, in the short-term, the rewards of addictive behaviour are very powerful. From this perspective, any long-term rewards for reform of such behaviours are difficult to appreciate. For instance, Looman (1995) reports that child molesters are more likely to fantasise about children when in negative moods, and disturbed behaviour adds to the disturbed moods.

### **Psychopathology of Child Sex Offenders**

The issue of the psychopathology of individual child sex offenders is another contributing factor to sexually abusive behaviour in men which has attracted many researchers who have developed theories about linking brain damage, or some brain pathology, with deviant behaviour. Abnormal hormone levels have been found in paedophiles. Berlin and Coyle (1981) found high levels of testosterone, and Gaffney and Berlin (1984) found high levels

of luteinising hormone which is linked to sexual behaviour.

Langevin, Wortzman, Wright and Handy (1989) investigated the results of neuropsychological tests of paedophiles, sexual aggressors and incest offenders and reported differences in observed patterns of neuropsychological deficits between subgroups of paedophiles. The patterns of heterosexual and homosexual paedophiles indicated left hemisphere dysfunction while the patterns of bisexual paedophiles indicated visual/spatial deficits typical of right hemisphere dysfunction.

Some theories suggest drug use, or stress, may affect brain formation in utero, and affect subsequent sexual behaviour. Brain abnormalities, either genetic or acquired, have been seen to impair cognitive ability.

Brain scans and imaging technologies have shown that some brain abnormalities are linked to specific behaviours. Miller, Cummings, McIntyre, Ebers and Grode (1986) found that some men do become hyper-sexual, others develop altered sexual orientation. Strokes, dementia, brain stem tumour and certain other illnesses often result in brain dysfunction which can give rise to impulsive behaviour, poor self management and exhibitionism.

Some therapeutic programs have used surgical or pharmacological castration in the treatment of paedophilia.

These radical treatment procedures reduce sexual appetite and sexually motivated behaviour by lowering testosterone levels. (Cimboric, 1992, p.612) McConaghy, Blaszczyński and Kidson (1988) also cite a high correlation between the reduction in the sexual interest of sex offenders and the level of reduction in their testosterone levels brought about through the use of medroxyprogesterone acetate.

## Genetic Factors

Biological endowments simply set the stage for learning, providing limits and possibilities rather than determining outcomes. With the exception of certain genetic hormonal conditions, there is no clear association between endocrinological functioning or hormone levels and sex offending against children.

Hormonal levels increase fourfold within the first 10 months of puberty and reach adult levels within two years. Thus researchers have concentrated their attention on the period corresponding to the onset of puberty since it appears to be a crucial period for the development of enduring sexual propensities which are, in part, dependent upon the child's family and environmental experiences. About half of all paraphiliacs report some recognition of their paraphilia around puberty. In adulthood, the effect of antiandrogen (anti-male hormone) treatment is to reduce cognitive activities surrounding sexual arousal.

Specific neurological factors which have been identified with paraphiliac sexual disorders include differences in EEG patterns (Flor-Henry, Lang, Koles & Freenzel, 1991), differences in neuro-psychological testing results (Langevin *et al.*, 1989), mild to severe frontal lobe dysfunction (Cassens, Ford, Lothstein and Gallenstein, 1988), and some types of brain abnormality (Scott, Cole, McKay, Golden & Ligget, 1984).

However, it can be concluded the importance accorded the place of genetic factors on abnormal and deviant sexual behaviours depends on the framework a researcher or clinician brings to this area. For example, those who rigidly follow the *stimulus control model*, with its reliance upon social learning theories, are less willing to concede that genetic factors may also play a role in behaviour. In considering the place of genetic factors some researchers have proposed that whilst these factors may have contributed to initial abnormal sexual behaviour, their contribution becomes minimal once the learnt behaviour becomes

firmly established over time (Marshall & Barbaree, 1990).

Commenting on this proposition, McConaghy (1993, p.345) points out that the individual responsibility trend is partly due to the prevailing bias of northern American theorists (and the contemporary political climate) who hold that human behaviour is solely determined by social experience. The social commentator Robert Hughes' (1993) observation on the influence of American sociopolitical trends on the culture of scientific thought and research comes to a similar conclusion– see in particular Hughes' lecture 'Culture and the Broken Polity'.

### **Childhood Experiences of Child Sex Offenders**

Much writing refers to the arrested social and sexual development of perpetrators of child sexual offences. Increasingly, links are being made in research between childhood experiences and arrested or fixated adult behaviour. Significantly, many offenders have in their background experiences of themselves being the victims of abuse. McConaghy and others would assert that perhaps the strongest single correlation with abusive behaviour as an adult would be experience as a victim of abuse in childhood.

Readers are cautioned against the misuse and misunderstanding some authors have given to the place of childhood experiences in explaining some offending behaviours committed by child sex offenders. In particular a generic and stereotypical view expounded by one statutory body in Australia is so general as to be unhelpful to any further development of informed discussion on these factors. The Children's Commission of Queensland (1997, p.7) makes a mistake when it puts forward the following stereotype:

Sexually abused boys might grow up to abuse their own or other people's children, while women who had been abused as children might be found among battering mothers. Girls who survived sexual abuse as children might find

themselves attracted by men who were, or who become, child molesters, and be unable to offer their children any protection.

Other therapists would go much further and identify wider elements of childhood human deprivation or neglect, both emotional and physical, as significant contributors to individuals being at risk of abusing as adults. Kinzl, Mangweth, Traweger and Bieble (1996) reported on the impact of childhood victimisation, physical abuse and dysfunctional family background on a university derived male sample. They found that occasional sexual dysfunctions (including 'sexual desire disorders') are frequent in young male adults but that long-lasting adverse familial relationships to attachment figures are more influential to later sexual dysfunction than are childhood sexual abuse experiences.

Cormier, Fugere and Thompson-Cooper (1995) claim some men manifest as late life paedophiles act out unresolved anxieties from childhood abuse. Childhood experiences are important in shaping a child's capacity for intimacy, security of attachment and role models. Thus, exposure to fragmented, inconsistent and disturbed parenting, domestic violence including child physical, sexual and emotional abuse and rejection, impede the development of self-esteem, emotional attachment and confidence in the expression of feelings.

All these factors can contribute to a lack of what Bowlby (1989) has termed a 'secure base' in the psyche of an individual which, unless treated, is carried through life. Hostile attitudes towards females may emerge and a sense of primary self-gratification may emerge if any type of interpersonal relationship predominates.

Approximately 30 percent of offenders have themselves been victims of childhood abuse and/or a long history of sexually deviant behaviour extending back into childhood (Howitt, 1995) including exhibitionism, voyeurism, public masturbation and cross-dressing (Kosky,

1989).

This finding led some researchers to conclude that there is an association between sexually aggressive behaviour and a history of childhood sexual abuse and is sometimes referred to as the 'abused abuser theory' (Freund & Kuban, 1994; Garland & Dougher, 1990; Becker, Kaplan & Kavoussi, 1988; Becker, Skinner, Abel & Treacy, 1982; Ryan *et al.*, 1987 cited by Kosky, 1989; Freeman-Longo, 1986). Research of imprisoned paraphiliacs by Earls *et al.* (1984) found 53 percent of the sample claimed to be victims of sexual abuse themselves (cited by Ames & Houston, 1990, p.337).

Romano and de Luca (1997) studied male, child sex offenders' choice of victims. The relationship between the gender of an offender's own childhood perpetrators and the gender of the children they sexually abused was found to be significant. It was reported that the majority of female child victims had been sexually abused by offenders whose own perpetrators had been female and, most male child victims had been sexually abused by offenders whose own perpetrators had been male. (*op. cit.*, p.93)

Australian support for these findings comes from Briggs and Hawkins (1996) who conducted a study of 84 child sex offenders incarcerated in seven prisons across three States (93% claimed sexual abuse in their childhood) and a control of 95 nonoffenders (all of whom claimed sexual abuse in their childhood). They reported that prisoners were abused by a significantly greater number of abusers, that they thought that the abuse was 'normal' and that a higher proportion of the prisoners had liked the sexual experience (66% compared to 20% of nonoffenders).

The negative effects of childhood sexual abuse were more commonly experienced by nonoffenders which suggests that the prisoners "were, in a sense, the product of their

experiences and the commission of sexual abuse on children was an accepted part of their world." (*op. cit.*, p.230) Although Freund, Watson and Dickey (1990) postulate that research findings linking childhood sexual abuse with later sexual offences in adults needs further validation, later research by Freund and Kuban (1994) used a logistic regression analysis to support such a suggestion.

Further evidence for this view comes from a review of clinical studies of sexual offenders with a history of childhood sexual abuse conducted by Hanson and Slater (1988). A more recent study reported an average of 28 percent of offenders recounted having experienced some form of childhood sexual abuse which is higher than that found in a sample of males from the general population (15.5%). (Bagley, Wood & Young, 1994)

In this discussion it must not be overlooked that some offenders claim past abuse to rationalise their current abnormal sexual behaviours. This raises the issue of strategies commonly employed by offenders to minimise what Festinger (1957) has termed 'cognitive dissonance' which refers to an individual's internal motivational drive to resolve a discrepancy which might arise when, for example, an individual's private behaviour is at odds with his publicly stated beliefs or values.

### **Responsibility for Behaviour and Actions**

Very few paedophiles or ephebophiles acknowledge or can accept the harm they do to their victims. Suzanne Jenkins' research indicates child sex offenders do not generally analyse their behaviour, but function on rationalisation. They use many rationalising strategies and arguments, such as those proposed by Festinger, to defend their abnormal and/or criminal behaviour.

Paedophiles and ephebophiles do not see themselves as aggressors and will argue that:



- ☐ they themselves are the 'victim';
  - ☐ their child victims like engaging in sexual behaviour;
  - ☐ the victims asked first;
  - ☐ they are educating the children;
  - ☐ they are giving the child love and affection;
  - ☐ it is a loving relationship;
  - ☐ the sexual engagement was spontaneous;
  - ☐ they just found themselves in the 'situation';
  - ☐ they fear the child;
  - ☐ the child is the seducer; and/or
  - ☐ they blame the child for their appearance, the way they dress, walk etc.
- as the primary cause(s), or excuse(s), for their behaviour.

There is evidence from the clinical literature to support the position that the psychopathology of child sexual offenders differs from that of nonoffenders on one or more of the following factors:

- ☐ offenders have a higher rate of personal sexual abuse in their childhood;
- ☐ offenders have experienced wider elements of human deprivation or neglect in their childhood in the form of emotional and physical abuse;
- ☐ offenders display intimacy deficits and can be generally described as 'lonely' individuals;
- ☐ offenders display poor and manipulating relationships with adults and peers;
- ☐ offenders exhibit significant difficulties in establishing and maintaining personal relationships which leads to social alienation;
- ☐ offenders display a level of psychosexual and social development equivalent to the stage of psychosexual and social development of their victims;
- ☐ offenders display behaviour patterns typical of addictive personalities such as:

- egocentrism,
  - a primary concern with fulfilling their own needs,
  - experience extreme guilt in relation to their offending behaviour but not to the extent to cease the abuse, and/or
  - are prevented from offending only by direct intervention;
- offenders take no responsibility for their own offending behaviour but rationalise their behaviour by blaming their victim.

### **The Influence of Psychological Factors on Priest and Religious Child Sex Offenders**

There is a view generally maintained in the literature that those priests and religious who commit sexual offences against children are no different from the general population of sexual offenders in terms of their psychopathology. It is argued that the dynamics and issues involved in cases of clergy or religious offenders parallel those of others in conventional positions of authority including incestuous parents and human service professionals such as therapists, doctors and teachers (Hulme, 1989; Blanchard, 1991; Loftus & Camargo, 1993). This point is cogently reinforced by Loftus and Camargo (1993, p.289) who state categorically that

[t]here are certainly no differences legally or in terms of public accountability in standards of rehabilitation. ...[We] do not think there is any significant difference in these men that is accounted for by religious motivation and/or spirituality. We certainly have no evidence to suggest that spiritual motivations or religious sensitivities make any difference in assessing or treating their behaviour.

Blanchard (1991, p.238) likens the driving forces behind sexual abuse by clergy to those that drive 'more conventional' sex offenders citing power, control, personal reassurance, anger and hostility as reasons behind the offences. Other researchers who have experience of priest and religious child sex offenders, like Suzanne Jenkins (cited by Tucci, 1995), hold the view that abusers can separate their public and private lives.

Some researchers with direct clinical experience of priest and religious offenders have put forward specific theoretical frameworks to help understand priest and religious child sex offenders.

### **Sipe's Four Continua**

Richard Sipe (1995), clinician and former Catholic priest, uses the terminology of four kinds of 'locks' to describe his personality-type profile of the abusive priest.

These locks hold people at a particular stage of development, especially in relation to their own sexual maturation. Each personality-type is seen to exist as a continuum. The extreme end of the continuum for each category signifies Sipe's 'lock' which "given ordinary circumstances and nonintervention, these men will inevitably act out and abuse." (*op.cit.*, p.13) He does not claim that the 'lock' is inevitable, despite the influences or circumstances that may contribute to it.

Sipe believes that certain people are genetically predisposed to sexual attraction to a certain age group and therefore their genetic endowment is the determining factor in their choice of sexual object. The term 'genetic lock' is used to refer to those instances where a person's level of intellectual and/or sexual development does not reach full adult maturity. Some gravitate to sexual partners who are at the same level of maturity. Some men are also not sexually active.

A 'psychodynamic lock' is another example of limited and arrested psychosexual development. Cognitive, biogenetic and psycho-sexual elements are often poorly integrated. Childhood sexual abuse usually distorts sexual maturity, and the abuser in this lock also focuses sexually on children and adolescents because the child or adolescent matches their own level of sexual experience, knowledge, expectation, and capacity. Again,

not all persons fitting this profile go on to abuse, but many go to great lengths to avoid contact with adult women, some adopting a covert strategy of denigration of women.

In respect of priests and religious, Sipe's view is that some men join the priesthood either intuitively or as a strategy to avoid sexual conflict. Some priests who have never abused are continuously tormented by just a single personal childhood experience of sexual abuse which takes on an intensity that distorts their view and understanding of adult to adult sexuality. Both the genetic and psychodynamic 'locks' are strong characteristics of fixated personality abusers.

A third grouping of priests who commit sexual offences against children defies standard psychiatric categorisation. A 'social-situational lock' refers to behaviour that is seen in unquestioning conformity to a particular culture, or group, such as priesthood or religious communities. It is a means of control and avoidance and takes place in a predominating misogynist leaning environment which "fosters a preadolescent stage of psychosexual development." (*ibid.*, p.18) As noted above, Rossetti (1994b) has also referred to excessively passive and conforming personalities of offenders as characteristic of child sex offenders.

Sipe contends that women are only seen as idealised 'virgins' and 'mothers', certainly not as equals or participants in the culture. This behaviour is frequently seen in the clergy because many of these men 'split' their behaviour between being worthy high profile leaders and doers on the one side, and carrying out secret lives of abuse on the other. Moreover, they are in positions of trust, especially educating, grooming and nurturing a ready and 'legitimate' supply of boys on whom they prey. Disclosure, through confrontation, of abuse committed by a priest who has a social-situational 'lock' is often so confronting to him that he may see suicide as a means of resolution.

Finally, the 'moral lock' describes a particularly dangerous form of behaviour in both the general population and the clergy. These men are so calculating and so deliberate in their sexual abuse activities that they should not be given the benefit of any understanding as products of social–situational conditioning nor do they "deserve the benefit of psychiatric diagnosis" (*ibid.*, pp.21–22). He goes on to observe that men fixated in the 'moral lock' are often in positions of power in a system they can control and manipulate and which effectively covers up, sometimes even overtly, for them.

Sipe's contribution to the literature is that he has proposed a framework based on clinical experience which can be utilised to understand some of the factors he believes may contribute to the underlying reasons why priests and religious commit child sexual offences. However, Sipe provides no research data of an empirical nature to support his framework.

### **Profiles and Characteristics of Priest and Religious Child Sex Offenders**

In Loftus and Camargo's 1993 survey of the Southdown Program, the typical priest or religious sex offender against children was described as over 49 years of age when first seen, from a middle–class, socio–economic background and to have had at least 15 years of priestly or religious ministry behind him before referral. These offenders showed no evidence of personal or family history of substance abuse or psychiatric disorder although they had frequent and random sexual encounters over a prolonged period of opportunities.

Rossetti (1994b), a Catholic priest, psychotherapist and Chief Operating Officer at the Saint Luke Institute, offers the following six 'warning signs' which should be considered when screening candidates to church ministry for sexual attraction to children or adults:

- (i) confusion about sexual orientation;
- (ii) childish interests and behaviour;
- (iii) lack of peer relationships;

- (iv) extremes in developmental sexual experiences;
- (v) personal history of childhood sexual abuse and/or deviant sexual experiences; and,
- (vi) an excessively passive, dependent, conforming personality.

Rossetti suggest these signs might be usefully deployed to identify six personality-related characteristics specific to priests and religious who have committed sexual offences against children although further research is required to establish the reliability and validity of such a psychometric measure.

### **Psychopathology of Priest and Religious Child Sex Offenders**

Blanchard (1991, p.238) has suggested that priests who commit addictive and assaultive sex develop long-lasting 'inner wounds' that are based in an individual's personal insecurities, shame, anger and loneliness.

Perhaps, the most conclusive research examining the differences within a population of priest and religious child sex offenders and religious nonoffenders on measures of psychopathology comes from a 1993 study conducted at the Saint Luke Institute (Robinson, Montana & Thompson, 1993).

This study reviewed the psychological, psychosocial and neuropsychological test profiles of clergy with: sexual difficulties toward children (the sample included paedophiles and ephebophiles); compulsive behaviours towards adults; alcohol problems; and, a control group consisting of priests with mood disorders requiring treatment. The study proposed that priests in the control group had no neuropsychological or psychological impairments and thus could be compared to the other groups.

The results of some of the differences observed between the paraphiliac groups and the

control group are as follows. Paedophiles and ephebophiles reported a high idealisation of both parents, particularly their mother; higher mean T scores on eight of the ten clinical scales of the Minnesota Multiphasic Personality Inventory (MMPI-2) a widely used personality inventory; evidence of some frontal lobe impairment; and evidenced longer mean response times to complete tasks requiring complex motor functions.

A greater number of ephebophiles demonstrated a higher impairment in attention/concentration, complex nonverbal problem solving and verbal memory than either paedophiles or the controls. Paedophiles performed worse on measures of nonverbal intelligence, mental flexibility and visual memory. There were no significant differences observed on IQ scores and minimal differences on general indicators of neuropsychological impairment across all three groups. (Robinson *et al.*, 1993) Similar results have reported by Robinson in 1994.

### **Childhood Experiences of Priest and Religious Child Sex Offenders**

About 30 percent of priests and religious offenders are victims of abuse themselves. This results in a cycle of offending in which the victim becomes an offender in his/her attempt to resolve personal issues of abuse.

The 1993 study previously cited by Robinson *et al.* identified that priests who were classified, using the DSM IIIR as paedophiles and ephebophiles, reported a significantly higher incidence of childhood or adolescent sexual experiences, with both same sex and opposite sex partners, compared to a control group of priests. Overall 43 percent of paedophiles and 40 percent of ephebophiles reported no childhood or adolescent sexual experiences compared to 60 percent of the control group. (*op. cit.*, Table 5)

However, Sipe (1995, pp.10-12) claims from his experience of 473 priest child sex

offenders in the United States, that 70 to 80 percent of priest abusers had themselves been abused as children, some by priests. Ten percent of Sipe's population of offending priests had been abused by a superior in a seminary training system.

Robinson *et al.* (*op. cit.*, Table 9) reported a significantly higher incidence of childhood or adolescent physical abuse recounted by paedophilic and ephebophilic priests compared to a control group. Dempsey (1992, p.6) noted that some priests who engaged in paraphiliac activities with children "have tended to choose a victim about the age they themselves were when they first entered the seminary."

### **The Influence of Situational Factors on Child Sex Offenders in the General Population**

Are there any situation specific factors (e.g. occupational status of offenders, ages of children abused, age of offenders, places where abuse takes place, etc.) reported in the literature on child sex offenders which might provide information on the influence of situational factors on the committing of child sex offences?

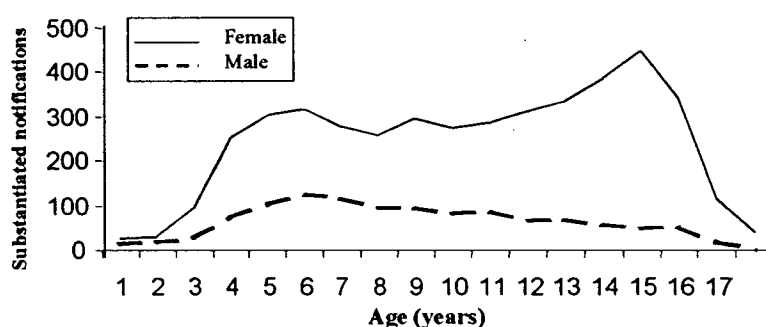
Most extrafamilial child sex abusers are not violent or aggressive towards their victims, but are manipulative and controlling, using strategies such as being caring and affectionate; showering attention on and giving gifts to or bribing their victims. Some build up trust relationships with the families of their victims and are often supported by the parents when a child tries to expose the abuser.

However, incestuous abusers tend to be more coercive and threatening and use a variety of manipulative behaviours such as cajoling, threatening force, trickery and wheedling. to achieve their desire. (Frenzel & Lang, 1989; Lang *et al.*, 1988)

One of the factors which can inform about the behaviours of child sex offenders is the age and



the sex of their victims. Figure 1 indicates that based on the number of substantiated notifications of sexual abuse in the general population, sexual abuse of children is far more likely to involve female children than male children at a rate of approximately 3:1 (AIHW, 1997, Table A9).



Source: Figure 5, AIHW (1997)

**Figure 1: Substantiated notifications of sexual abuse by sex and age of child for the 1995-96 period**

The pattern for sexual abuse substantiation involving female children peaks around ages three to four years and rises dramatically again at 14 years of age while for male children it peaks around four to five years of age. The national data summarised in Figure 1 highlights three realities about sexual offences against children.

First, no child in Australia is immune from abuse perpetrated by paedophiles or ephebophiles. Second, girls are more likely to be the victims of sexual abuse. And third, for girls and boys there are certain age groups when children are more at risk of being the victims of sexual abuse.

Stress and anxiety appear to function as disinhibitors of, or catalysts for, sexual activity. Many sex offenders report being under considerable stress at the time of the offence. In the addiction field and with other non-sexual impulse control disorders, negative emotional states of anger, stress, tension and depression act to initiate an episode of loss of control over behaviour.

In these disorders, including paedophilia, there may be an increasing sense of tension prior to the act and a sense of gratification and tension release on its completion. Fantasies involving sexual offences with children and use of memories of past offences during masturbation have frequently been reported as reinforcing and increasing the potential for the offender to repeat these offending types of behaviour later when again under stress.

While stress and anxiety may be significant factors in precipitating an event, this does not diminish the responsibility in the adult to control his behaviour. Stress is no excuse for loss of control.

The literature records that there are a multiplicity of reasons that can be postulated for offending. Many professional people in the community, including clergy, religious and health professionals command respect, trust and authority from those with whom they interact. As Quadrio (1993) notes, this opens up situations where individuals may abuse because of a sense of and a need for power, control, personal reassurance or in response to emotions of anger, resentment, hostility, need for intimacy, depression or arising out of a co-existing psychiatric illness or because of a compulsive sexual disorder.

Drug and alcohol abuse cannot be considered to 'cause' paedophilia or ephebophilia, although many sexually deviant men report using drugs and alcohol which in turn reduce inhibition when engaging in these behaviours. Excessive prolonged alcohol use or abuse can cause brain damage resulting in disturbed behaviour and thought processes, and/or sexual abuse.

While there is no systematic collection of data recorded by authorities for the specific occupational status of offenders, the categorisation of offender type for sexual offences involving children is available and has been summarised in Table 4 (see over).

Relationship of Offender to Victim	Percentage of total offenders	
	NSW <sup>a</sup>	VIC <sup>b</sup>
Immediate Family	31.2	31
Other Family	15.5	17.9
Acquaintance/Friend	43.2	34.2
In Authority (non family)	5.4	5.8
Stranger	4.6	5.7
Other/Unknown	-	5.5

<sup>a</sup>. Source: Figures from child sexual assault cases finalised in NSW in 1994 – adapted from Figure 9, Judicial Commission of New South Wales, (1997).

<sup>b</sup>. Source: Figures from sexual assault complaints involving children in Victoria in 1993 – adapted from Table 3, Victorian Crime Prevention Committee, (1995).

**Table 4: Percentage of child sexual abuse attributed to type of offender**

What is apparent from the data presented in Table 2 is that the vast majority of cases of sexual offences against children in New South Wales and Victoria is perpetrated by parents, siblings or relatives of children (approximately 48%). These Australian figures confirm Rossetti and Lothstein's (1993) view that between 70 and 80 percent of child sex abusers are known to their child and adolescent victims. Most have an established trust through a parental or authority relationship with their victims and are often physical or emotional father figures.

In New South Wales and Victoria (43.2% and 34.2% respectively) the largest single group of offenders is family/child acquaintances or friends. Adults who are placed in a position of trust and care over a child are also responsible for committing sexual offences against children.

National figures for 1995–96 report that only two percent of substantiated sexual abuse notifications involved strangers (AIHW, 1997, Table A24). As was noted above, data collected by civil authorities do not always contain any specific information on the number of offenders from a religious background.

It would appear, based on the cited figures of substantiated reports of sexual abuse against children in New South Wales and Victoria, the risk of a child being sexually abused by an adult increases from approximately one in 20 for strangers and authority figures to approximately one in three for family acquaintances and one in 2.2 for family members or relatives.

These trends are in part reflective of the physical environment and the social situations which perpetrators of child sexual assault seek to bring about in order to fulfil their sexual urges. Data collected by the Australian Institute of Health and Welfare also indicates that the type of families in which a child resides (i.e. two parent, step family, single parent) makes little difference to whether a child is the victim of sexual abuse (AIHW, 1997, Table A22).

McConaghy (1993) has noted a number of marked differences between homosexual and heterosexual paedophiles which are reproduced in Table 5 because these differences offer some information on the situational factors which characterise child sexual offences.

<i>Heterosexual paedophiles</i>	<i>Homosexual paedophiles</i>
<p>Few victims;</p> <p>Victims known to offender;</p> <p>Offences repeated with same victim for months/years;</p> <p>Mean age of victim 8 years;</p> <p>Offender attracted to adult women;</p> <p>Offender commonly married;</p> <p>Behaviour commenced in adulthood;</p> <p>Often low socio-economic class, alcoholic, unemployed, low IQ, psychopathic.</p>	<p>Many victims (up to hundreds);</p> <p>Victims unknown to offender;</p> <p>Offences usually occur only once with same victim;</p> <p>Mean age of victim 10 years;</p> <p>Offender not sexually attracted to adults of either sex;</p> <p>Offender single;</p> <p>Behaviour commenced in adolescence;</p> <p>Stable/employed, average IQ but 'immature', prefers company of children, not interested in friendships with adults.</p>

Source: McConaghy, 1993, Table 8.1

**Table 5: Characteristics of heterosexual and homosexual paedophiles**

McConaghy (1993, p.310) goes on to report that, based on his clinical experience, heterosexual paedophiles who do not evidence anti-social behaviours, below average intelligence or low moral standards, commonly report a complete lack of awareness of any attraction to prepubertal girls prior to their offence. Such offences are the result of impulsive responses to unexpected opportunities.

### **The Influence of Situational Factors on Priest and Religious Child Sex Offenders**

The clinical literature was surveyed to ascertain whether there are any situational-based factors which have specifically been identified for priests or religious child sex offenders.

In addition to those situational factors identified for the non-religious population of child sex offenders, it is possible to identify a number of factors that are more relevant to priests and religious who offend against children. Carnes (1987, cited by Robinson, 1994, pp.66–67) has noted that there are some specific occupational-related factors that he believes are peculiar to priests and which intensify and foster an addictive cycle amongst this group.

These include the 'pedestalisation' of clergy by congregations whose expectations only serve to enhance the sexual obsession and reinforce the need for secrecy; the martyr-like position clergy can portray due to their 'emotional poverty' coupled with their willingness to be at the service of the congregation; and, the trusted positions clergy enjoy, as guardians and champions of morality, which places them in dependency relationships with vulnerable people. These factors interact with an individual's inner beliefs about their own shamefulness encouraging an optimum environment in which obsessive sexual behaviour can take place.

The risk of offending is increased when the potential perpetrator confronts a person who, by virtue of their subordinate position or emotional state, is vulnerable to exploitation. This applies especially, but not exclusively, to priests and religious. A person may be vulnerable because

of the:

- ❑ age differences between the offender and victim (i.e. student and teacher);
- ❑ the offender occupies an esteemed position of trust (parish priest, Superior);
- ❑ there is a real or perceived imbalance of power and authority in the relationship (Superior and novice);
- ❑ the victim is placed in a role in which there is a natural desire to please (parish priest, teacher);
- ❑ the victim is undergoing a personal, emotional or sexual crisis (seeking guidance and assistance from religious counsellors).

As can be seen from Table 3 above, adults who are placed in a position of trust and care over the child, which includes priests and religious, are responsible for committing some of the reported sexual offences against children. The rate of offence for adults in a position of care and trust is at a significantly lower rate than the incidence of sexual offences committed by a child's immediate family and relatives, familial acquaintances or friends.

There is no evidence from the literature to confirm or deny whether priests and religious manoeuvre themselves into environments where children can be found, i.e. schools, parish youth groups, altar servers.

Robinson *et al.*, (1993) has also reported that approximately 25 percent of priest paedophiles and ephebophiles used alcohol prior to or during their sexual activities involving children.

### **Celibacy as a Factor in Sexual Offences Against Children by Priests and Religious**

The role of celibacy as a factor contributing to sexual offending is a sensitive issue. Celibacy is a state in which a voluntary decision is made to avoid sexual encounters of any kind or form. Although, as Loftus and Camargo (1993) have observed, there is no operational definition or

boundaries of what is meant by 'normal celibacy', the concept does not, and should not in any way, be taken to imply that celibates are 'asexual beings' devoid of any experience of sexual emotions, stimulation, arousal or exposure to temptation.

Recent litigation, media disclosures and publications attest to the active sexuality of at least a proportion of the population of priest and religious. Dempsey *et al.*, (1992, p.6) are amongst those theorists who make some connection between sexual abuse and celibacy.

At times, there may be a priest who is basically heterosexual in orientation but believes it is wrong either to feel or to express his sexual attraction to a woman because of his vow of celibacy. However, he is able to rationalise that having a sexual encounter with boys or adolescent males is not a violation of his vow of celibacy.

Four issues are considered crucial in determining whether clerics are at particular risk of committing sexual offences. First, celibacy influences the frequency with which sexual emotions may be expressed. A celibate heterosexual or homosexual religious individual may have difficulty coping with celibacy and this may create significant intrapersonal conflict and angst and is sometimes acted out in boundary violations. However, sexual boundary violations and breaches do occur involving non-celibate people. There is no evidence to make a causal link between lack of sexual outlet and perpetration of sexual abuse.

Second, celibacy itself cannot explain choice of partner or form of sexual expression. There is no strong empirical evidence in support of the contention that celibacy causes a person to develop paedophilic or other paraphiliac urges or behaviours. It should be noted that data supplied by the Judicial Commission of New South Wales reports that of the four ministers found guilty of sexual offences against children in 1994, two were married at the time of the offences. While the size of this sample of offending priests and religious is extremely small,

it does raise a question about the legitimacy of 'blaming' celibacy as the prime reason for offending.

It could be said that frequent contact with children may provide the opportunity for sexual involvement with children. However, it is argued that many paedophiles are either predatory in nature or have pre-existing paedophilic tendencies and therefore have a propensity to gravitate or manipulate themselves into situations allowing access to children. Although it is possible that some men enter religious life as a strategy to cope with their aberrant sexuality, there is no data to substantiate speculation that they become priests or religious to gain access to children.

Third, speculation that celibacy *per se* is responsible for priests and religious committing child sexual offences is to define the 'problem' as solely a problem of institutional design which detracts from, or even offers an excuse for, the legitimate exercise of personal responsibility. One must acknowledge that the early beginnings of sexual dysfunctions go unnoticed in adolescence and remain undetected for many years developing into disorders which can only be evidenced over time through abnormal behaviour. The unresolved question is whether an individual's sexual dysfunction played any role in, or had any influence over, either overtly or covertly, their decision to embark on the particular type of job or career they finally choose.

And finally, an active and satisfying sexual life is no guarantee against offending or violation of sexual boundaries. Absent or poor marital and/or sexual relationships may increase the risk of committing sexual offending but this is not an inevitable outcome. In fact, evidence indicates that a significant proportion of sexual offenders involving children have access to and engage in satisfactory sexual relationships with age and sex appropriate partners.

It is true that in relatively recent years a number of authors (e.g. Crosby, Fox, Greely, Sipe and



others) have begun to analyse the state of celibacy in the Church. These contributions come from a range of scholarly disciplines and draw on biblical exegesis, the behavioural sciences, historical studies and personal experience of celibacy. Some contributors have focussed on what they have identified as the negative aspects of mandatory celibacy.

Very few of these published works cite any scientific or empirical evidence which conclusively demonstrates that celibacy has a direct causal link to the committing of sexual abuse against children by either priests or religious.

### **Problems Identifying Specific Factors**

The present study represents a first step in the identification of a number of possible factors that might play a role in sexual abuse against children committed by priests and religious of the Catholic Church.

However, it does need to be stated that it is very difficult to be precise about the rate of sexual abuse against children in the general community, in specific sub-population of priests and religious, or according to subcategories of offender. The main reason for this is that not all cases of sexual abuse or sexual offence are reported to or identified by the authorities. Due to the qualitative nature of the consultations and the lack of access to any available records, it was not possible to draw any conclusions on the true prevalence rate of priests or religious who commit sexual offences against children.

In order to overcome the problems of determining the prevalence rate of sexual offences against children which are associated with under-reporting of sexual offences, some researchers have relied on household crime victimisation surveys. Crime victimisation surveys use a questionnaire to estimate the true level of crime in the community based the responses obtained from a random sample selected from the general population. Other researchers have gathered

information during community consultations convened to discuss aspects of legislative reform in the area of sexual abuse.

However, the data collected from these types of surveys can suffer from some methodological problems associated with interview technique and can produce wide discrepancies in a sample's results. There are a limited number of sexual abuse studies in Australia that have relied on this sampling technique.

As a general rule it has been concluded the figures cited in the clinical literature should be taken as representing a conservative estimate of the true prevalence rate of sexual abuse against children. This is due to overwhelming evidence from the psychological and legal literature which makes it clear that reported rates of incidence for sexual abuse offences both within the general population and the Church population understate the actual offences.

The identification of those factors which are seen to be possible causal factors associated with sexual abuse in the Church are equally diverse. All relate to the background and nature of the offender. At the same time, these causal factors are modified in each case by strong influences present in the institution of the Church and, the structures and the practices of dioceses and religious congregations.

### **Conclusions Regarding Sexual Offences Against Children by Priests and Religious**

Notwithstanding the above caution, based on the above literature, it is possible to draw a number of clear conclusions regarding the specific nature of sexual offences against children committed by priests and religious.

These conclusions refer to the nature of child sexual offences committed by priests or religious; to the childhood sexual experiences of many priest and religious offenders; and, to factors

concerning occupation-related issues that are specific to priests and religious. The conclusions are as follows:

- ❑ it is a fact that there are instances of fixated paedophilia among priests and religious of the Catholic Church in Australia. The prevalence of such fixated paedophilia appears to be lower than that in the community at large;
- ❑ some child sexual offences by priests and religious relate to dysfunctional psychopathological states;
- ❑ most child sexual offences by priests and religious involve ephebophilic rather than paedophilic behaviour and are frequently associated with situational factors relating to lifestyle and ministry;
- ❑ child sexual offences by priests and religious are more frequently homosexual rather than heterosexual in nature - this is the opposite of the pattern for child sex offenders in the community at large;
- ❑ the 'pedestalisation' of priests and religious by members of the Church, particularly by children as well as the associated belief in and respect for their spiritual authority, have led to misplaced trust being put in them and failure to adequately supervise adult-child interaction and activities. This finding refers to what could be termed a 'modality difference' inherent in clerical or religious vocations that can not be said to apply to nonreligious child sex offenders;
- ❑ a minority of priest and religious child sex offenders are themselves likely to have been the victims of sexual abuse as children; and
- ❑ erroneous views about the criminal nature of child sexual abuse and about the observance of celibacy seem to have some significance in instances of offence committed by priests and religious against children.

It makes little sense to seek to make predictions about any *single factor* as playing *the* significant role in sexual disorders involving children. It is more correct to conclude that sexual disorders

involving children, including paedophilia and ephebophilia, are a consequence of processes in which a number of psychopathological and situational factors play a role. This conclusion applies equally to priest and religious child sex offenders as it does to nonreligious child sex offenders.

## CHAPTER 5

### Report on the Consultations

A total of 405 Survey Instruments were distributed across the Catholic Church community in Australia.

Completed and returned Survey Instruments were received from 66 respondents representing a return rate of 16.3 per cent. A further 30 face-to-face consultations were conducted in the course of the study. A breakdown of the persons who responded to the Survey Instrument or participated in direct consultations is summarised in Table 6.

RESPONDENT	SURVEY	CONSULTATION	TOTAL
Bishop	14	5	19
Religious Leader	21	10	31
Therapist	26	6	32
Victim	5	9*	14
Offender	-	3	3
<b>TOTAL</b>	<b>66</b>	<b>33</b>	<b>99</b>

\* includes two meetings with groups of victims.

**Table 6: Summary of received responses to child sexual abuse survey**

The overall response rate for bishops<sup>1</sup> was approximately 33 percent and for religious leaders was approximately 25 percent. The relatively low response rate from religious leaders reflects the lack of known incidents of child sexual abuse by women notwithstanding the fact that the majority of religious in Australia are women.

Three priests who had been convicted of sexual offences against children were interviewed.

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<sup>1</sup> No bishop who was retired at January 1997 was sent a copy of the Survey Instrument. Between the time the Survey Instrument was mailed and the consultative processes completed a number of bishops retired from active pastoral duty.

A small number of victims of sexual abuse chose to respond for themselves. Some therapists actively encouraged victims to respond either directly or indirectly. The lack of formal involvement by a greater number of victims is an area future research will need to address.

### **Overview of Responses**

Analysis of the responses to the Survey Instrument or in personal consultations, indicates quite a variation in experience, in expertise and in awareness of issues among those consulted.

It was not surprising given Church protocol that many individual bishops and religious leaders have not personally had to deal with accusations or disclosures of sexual abuse involving their personnel. However, what was most apparent from responses received from this group was the lack of awareness of civil and criminal provisions relating to professional pastoral ministry, and slowness to put in place adequate policies and procedures to deal with future situations.

All of the written responses and consultations dealing with sexual abuse involving children committed by priests and religious overwhelmingly referred to male offenders.

The aim of the consultation stage of the research was to pursue those issues respondents considered were important, based on their experience of dealing with priests or religious who have committed sexual offences against children, as playing some role in the instances of offence perpetrated by individual offenders.

The purpose of seeking these comments was to have confirmation or otherwise as to whether the types of issues relating to child sexual offenders raised during the literature review bear any resemblance to those relating to priests and religious child sex offenders in Australia.

Not all respondents had a background of clinical expertise. However, it is pertinent to

acknowledge that approximately one third of all responses came from clinicians who have direct experience of counselling priests and religious child sex offenders. The contributions from clinicians have been highlighted where it is considered these bring a particular pertinence to the issue under discussion.

Finally, many respondents highlighted the lack of any formal system of data collection about offences and offenders which could be used by therapists and Church authorities to help address the occurrence of sexual abuse against children by priests and religious. The need for such data to be made available to future researchers will be crucial to the efforts of Church authorities to address this phenomenon. At the same time, it was recognised by some that there exists a multitude of complex issues (e.g. legal, confidentiality, storage, access, etc.) which will require attention before any initiative in this area can be advanced.

What follows is a summary account of the responses received from respondents who completed the Survey Instrument concerned with sexual offences involving children. Responses have been accurately and faithfully recorded. In some instances direct quotation has been used in an attempt to convey the reality of respondents' observations.

### **Personal Background of Priests and Religious Who Offend**

The first section of the Survey Instrument referred to the personal background of those who enter priesthood or religious life and their relationship with parents and siblings. Respondents were asked to comment on those aspects of an individual's personal and family background which they (the respondent) thought might have some relevance to the sexual offences committed by that individual.

#### **Family Background**

The most consistent comments provided by respondents in relation to issues of a male

offender's family background related to the offender's relationship with his parents. On the side of the mother, strength and dominance were stressed, over-attachment, linking the choice of priesthood or religious life with the religious influence of the mother. Typical expressions used to describe this mother-child relationship were: "controlling mother", "raised outside his own family by an aunt".

By contrast, severity, fear, lack of affective relationship were repeatedly stated in relation to the fathers of offenders. Typical expressions used to describe this father-child relationship are captured by the comment, "father absent physically and emotionally from his life".

In other cases, "deprived and difficult family circumstances" were mentioned. The patterns of early family life were consistently described as having a common theme that included a failure of nurturing relationships during childhood and adolescence.

There appeared to be no observable pattern in reported childhood relationships between offenders and their siblings. For example, some responses underlined both the presence and the absence of sibling relationships: "only child", "only boy in a family of girls" "adoption in infancy", growing up from an early age in an orphanage, or sent to boarding school at various stages of education.

The most notable comment made about the family background of offenders was that only a small number of offenders had what was described by respondents as a "loving, normal and healthy" childhood.

### **Childhood Physical or Sexual Abuse**

Sexual abuse of male offenders themselves in childhood was mentioned in a majority of



responses. The circumstances of this abuse varied considerably and included offences committed by: an older adolescent, a parent (in one case a mother), various family relatives, a pastor, school teachers and other young persons in the context of a boarding school (peers). A few of these responses alluded to instances of sexual abuse being accompanied by serious physical abuse.

Two respondents, both Church leaders and clinical therapists, stressed that in their experience, sexual abuse in childhood was "common but by no means universal" in the background of perpetrators of child sexual abuse.

### **Emotional and Intellectual Maturity When Entering Priesthood Or Religious Life**

The state of emotional and intellectual maturity that a priest or a male religious brought into their formation years was a factor that provoked strong response amongst respondents. Responses concentrated both on the nature of candidates and on the structures of admission.

It was evident from the nature of the responses that an amount of the comment referred to practices within seminaries and religious houses of formation that were current in the 20 year period between the mid-1960s and the mid-1980s. These included, but are not limited to, practices such as entry to the 'Juniorate'<sup>2</sup> at an age as young as 14 years; complete isolation from families; isolation from any involvement in the secular world (including newspapers, radio and television) and no interaction with members from the opposite sex. It was noted by most of the respondents that these practices are less applicable to the present processes of religious formation.

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<sup>2</sup> A juniorate was an institution attached to a house of religious formation attended by prospective religious during their secondary school years. During the earlier part of this century, young boys/youths intending to become priests often attended a 'minor seminary', attached to or associated with a major seminary, during their secondary years of education.

More than half of the responses stressed the superior intellectual abilities and qualities of offenders, but placed these in sharp contrast with their emotional and sexual immaturity. Further comment stressed the arresting of human development that accompanied entry to seminary or religious life directly from secondary school. One respondent commented that the years of formation for priests and religious can be identified as being responsible for an 'affective hibernation' that characterises the emotional and psychological growth of most males who entered seminaries or houses of formation – but especially offenders. This type of description of the formative years of priests and religious was echoed by other respondents.

It was claimed that the period of 'hibernation' coupled with a general lack of preparedness to acknowledge (let alone professionally address) the need to actively foster healthy emotional and intellectual development of trainees by those responsible for overseeing formation has resulted, and continues to result, in failures to identify serious personal problems and deficiencies in potential candidates to the ministry. Furthermore, some respondents proposed this inability also ensured normal social development and education are regarded as a peripheral to formation.

From the broad scope of responses, there was some acknowledgment of the considerable change that has taken place in the circumstances of entry to priesthood and religious life during the late 1990s. Comments from Church personnel expressed continuing personal reservations about the intellectual maturity and the affective orientation of candidates currently presenting as candidates for priesthood and religious life. One respondent commented on the 'maturity' of the contemporary formation system with the suggestion that the notion of "psychological maturity" does not rest exclusively on the individual.

## **Sexual Orientation, Affective and Sexual Development**

There was some overlap in comments received in response to this inquiry and the previous inquiry. Clinicians and religious leaders, who were the principal respondents to this inquiry, suggested that among priests and religious offenders the majority sexual orientation is a homosexual one.

Respondents claimed that confusion about personal sexual orientation is quite frequent, especially in those instances where an offender's own entry to priesthood or religious life was at a very young age, or when there had been a lack of affection evidenced in an offender's parental relationships.

Respondents cited the element of opportunism available to offenders as being a frequent factor in the committing of offences. These comments particularly related to male offenders whose ministry had required them to have regular close contact with children (e.g. working in school environments).

It was also stressed by one respondent that an offender's homosexual orientation *per se* does not mean that he will sexually "act out" this sexual preference or that there is any established causal link between homosexuality and the committing of criminal sexual offences of children.

## **Childhood Physical and Mental Health**

Comparatively little comment was made by respondents about offenders' histories of either physical health or mental health. There were certainly no responses that cited either of these health issues in the childhood background of offenders.

Comments received in the course of the consultative stage emphasised that while the

childhood physical or mental health of offenders may have played some significance in an offender's committing of sexual abuse (i.e. onset of offending, pattern of offences), any causal association was difficult to establish with certainty.

On the other hand, in accepting that the physical or mental health of offenders may play some role in the instance of sexual offences this relationship, many therapist respondents indicated that the evidence of childhood physical or pre-existing mental health of offenders is more likely to be identified as later accompaniments of abusive patterns of behaviour, rather than as predictive indicators *per se*. This reinforces the view that not every person who has experienced childhood abuse or earlier episodes of mental illness is predisposed to become a child sex offender but that many offenders have identifiable instances of these factors in their childhood or adolescent background.

### **Adult Personal Life of Priests and Religious Who Offend**

The second section of the Survey Instrument referred to the adult personal background of priest or religious who commit sexual offences against children. Respondents were asked to comment on those aspects of an individual offender's adult life and their behaviour which were thought might have some relevance to the sexual offences committed by that individual.

The purpose of including these questions was twofold. First, to examine whether respondents could identify significant background influences in the lives of priest and religious offenders. And secondly, if significant influences were reported whether these were in line with the factors identified in the clinical literature.

### **Significant Personality and Behaviour Characteristics**

Common to many of the observations reported by respondents with respect to significant characteristics of offenders' personality and behaviour was use of the word "ambivalence".

Two forms of behaviour were described as existing in the one personality. One referred to personal characteristics described by the words "gentle", "loving" and "understanding". The other was described using words such as "domineering", "threatening" and even "sadistic". Therapists reported that ambivalence evidenced itself most noticeably in respect to authority, swinging between the two extremes of a continuum – "submission and revolt".

Certain offenders were described as usually portraying an almost dual personality or set of diametrically opposed behaviours characterised by the words "reserved" and "proper", when in a comfortable environment through to "stubborn" and "determined" when in a challenging environment. Notable personality traits such as "withdrawn", "petty and at times intransigent" were frequently mentioned. "Passive aggressive" was the term used to describe the behaviour of other offenders in relation to the interpersonal style they adopted with authority figures.

"Retarded" affective development was frequently described, often hidden behind a facade of gentleness, kindness and generosity. Offenders were frequently seen as intense and restless, with low tolerance of stress, combined with a propensity to flare into anger. A therapist characterised her offender/client as "secretiveness and rage beneath a smooth exterior". Another comment was of a person who "works well in positions of authority and caring, finds it hard when challenged or in situation of conflict".

When it came to describing patterns of behaviour and relationships in work and ministry, many of the responses were quite negative. Offenders were variously described as: "displaying skills for engaging people and insinuating [themselves]", "demanding of others, with indications of perfectionism, control, manipulative behaviour, workaholism, passive aggression", "goal oriented for affirmation and concerned with issues rather than people", "always on the go, narcissistic, yet with an absence of true reflectiveness", "secretive and

'poker-faced' with little sense of guilt, facile at lying and denial", "a poor self-image seeking affirmation in a controlled setting, often that of children".

As well as the above comments which would seem to relate to all offenders against children, both the survey responses and the consultations were adamant in the view that priest and religious offenders used religion and their own religious role in an unhealthy and regressive way with adults but especially with children.

One therapist reported an example whereby a male religious frequently paraded his status as a religious, even to the extent of, to the therapist's mind, inappropriate wearing or "'parading' of his religious habit in public". One victim related that the priest who had committed sexual offences against him would regularly preface his offences by the words: "This is what God wants us to do."

Frequent reference was made to priests and religious offenders invoking a false spirituality in an attempt to impress others, or of hiding behind a clerical facade and using their position within the Church as a means of gaining respect. Offenders were described in terms of their social competence and their ability to be integrated in their normal public environments.

One comment described a priest offender as "popular socially and a good mixer, but at a superficial and undemanding level." Another comment described the general relationships of priest and religious offenders as "extensive but superficial".

### **Social Integration and Personal Adult Networks**

Comments on social integration from respondents were abundant and forceful. On the whole respondents suggested that dysfunctional social behaviour was a general

accompaniment of offending relationships with children. Offenders were described as "appearing gregarious". At the same time this outward expression masked the real situation of interpersonal relationships with most respondents citing evidence which pointed to relationships which were devoid of any significant peer relationships, without the commitment or "mutuality of genuine adult to adult relationship".

While priest and religious offenders often appeared socially capable and good mixers with others, their contacts were often at a superficial, undemanding level or one "that remains at the level of religion, sport or finance". In specific cases, offenders were seen "to relate only to adults that they could control" or 'to be quite seductive and to develop 'fan clubs' rather than mature relationships". Many priests and religious were reported as being dependent on their role identity as a priest or a religious for their acceptance by other adults and adult peers rather than on their own person.

Other offenders were described as "loners" and, in those instances where religious were the subject of comment, it was noted that members of religious communities had a history of being easily isolated from fellow members of their congregation. When these interactions took place, which was normally only as required (thereby limiting contact to essential issues) they tended to be characterised as being "functional" rather than "open and mutual".

Respondents reported the pattern of interpersonal contacts in which offenders felt "comfortable" was limited to those revolving around their work which in most cases involved direct regular contact with young people. Most respondents commented that priest and religious offenders themselves had reported that they were more comfortable in the company of children and young adults. Priests and religious who had offended against children had displayed a history of cultivating children, some of whom were victims of sexual offences, as leisure companions. Based on the responses, some indicative

significance was assigned to the behaviour of priests and religious who relate poorly to adults and who constantly seek out the company of children or young people.

If offenders against children do not relate well to adults in general, that is particularly so of their attitude to women. Poor adult relationships with women was stressed many times in submissions. Comments ranged from "awkwardness" and "avoidance", to seeing women as "a threat". At the most extreme end it was reported that some offenders had a distorted aberrant perspective to women in general characterised by comments such as "I hate the smell of women", "[women] lead us into sin", "there is nothing pure about them in any way". For numbers of offenders, the only so called 'real contact' with adult women was limited to their mother and female members of their family, with whom relationships were not always mature and healthy.

### **Perception of and Commitment to Celibacy**

Responses to the inquiry about an offender's understanding of and commitment to celibacy in light of his offending and criminal behaviours were diverse. There was essential unanimity in the comments of respondents about how offenders rationalise the contradictions between their commitment to celibacy and their committing of sexual abuse.

In the present context, respondents reported that for many offenders celibacy is accepted as "a rule of Church law which comes with the job" but that this law was not necessarily seen as being a positive choice from the perspective of an offender. For many offenders, the imposition of celibacy appears simply to infer two negatives states in the daily lives of priests and religious: no sexual expression and no marriage. Many respondents went on to indicate that such an attitude to and understanding of celibacy, which is not just confined to priest and religious offenders, was quite simplistic.



There was strong agreement amongst respondents that offenders in the main seem to dissociate their abusive behaviour from their notional commitment to celibacy and in so doing they split and compartmentalise aspects of their daily lives and behaviours. Of particular significance were the high number of responses which revealed descriptions of known offenders as having a 'strong commitment to celibacy'. One can only infer that respondents were underlining the dissociated and distorted thinking that there is in offenders between their chosen lifestyle and their actual behaviour.

It was clear from responses many offenders held the belief that by engaging in sexual offending involving children, they have observed the rules about adult women *vis-a-vis* celibacy. In these instances, respondents reported that an offender's rational intellectual commitment is divorced from his criminal and abusive behaviours. Furthermore they demonstrate an ability to live with the inconsistency of their lives, without seeking help or guidance.

Two therapists spoke of offenders who had reported having problems with their own sexuality prior to entering seminary or religious formation and who, at the time of entry and subsequent taking of vows, maintained the belief that a life of dedicated celibacy would ensure further problems did not occur. In both these cases, the offenders had said nothing about their problems at the time of entry and it was only offences committed by these offenders subsequent to their induction to ministry that the information became known to Church authorities.

On the other hand, there was a suggestion from more than one therapist that certain offenders who have been clinically identified as fixated paedophiles have, consciously or unconsciously, chosen priesthood or religious life as a place to act out their sexual predilections without being detected as an offender against children.

### **Age of Offenders in Relation to Committing Offence**

Only a small number of responses spoke of known priest or religious offenders offending prior to ordination or profession. It was possible to identify three broad age ranges linked with sexual offences against children committed by priests and religious:

- (i) the late twenties to early thirties;
- (ii) the middle forties; and,
- (iii) the sixties.

A small group of responses suggested there were differences in age patterns between those offences that were committed by fixated paedophiles and those committed by other offenders. This observation stresses the place of psychological development and sexual maturity rather than any clear relationship with chronological age in the committing of offences. For example, one respondent described an offence committed by a male religious in his forties with a thirteen year old boy "as if two 13 year olds were experimenting with their sexuality".

The most repeated statement about age was to trace origins of offence to offenders in their late twenties, after ordination or profession and some five years into active ministry. Whilst it is possible that first offences of sexual abuse involving children can occur at any stage of life, respondents noted the identification of child sexual abuse at quite early stages of ministry as significant. There was a suggestion that later age identification of abuse could well be the simple result of when offence patterns first became known through disclosure or accusation, rather than when offending actually commenced.

### **Addictive Behaviour Patterns**

The experience of some respondents, principally bishops and religious leaders, leads them to report little connection between an offender's addictive behaviours or dysfunctional

behaviours and the occurrence of sexual abuse offences against children. Others, principally therapists, found a clear association between the sexual abuse and other addictive behaviours or behavioural disorders exhibited by offenders, though these behaviours were not seen "as a cause, but an accompaniment of sexual abuse".

The consumption of alcohol by an offender was frequently mentioned as having occurred immediately prior to, and in some instances during, the committing of sexual offences. One victim, an adolescent at the time of offence, declared that he would be regularly offered alcohol by his offender prior to and during the sexual abuse. The majority of respondents reported that the use of alcohol by offenders had the effect of reducing their inhibitions to commit the offence. It was also reported that some offenders who used alcohol themselves provided alcohol to victims with the intent of reducing the inhibitions of victims. A number of offenders were described as being "alcoholic".

Other responses reported the presence of other addictive disorders, such as substance abuse (e.g. tobacco, alcohol, psychopharmacological substances), eating disorders, gambling, compulsive and obsessive work patterns, misuse of and dishonesty with parish or community finances, as being related to the offenders they had encountered. In a small number of accounts, respondents reported that offenders had a "morbid sexual curiosity", "recourse to pornography" and/or displayed other types of "compulsive sexual addiction", e.g. masturbation. Another victim reported being invited away by a priest offender for "special weekends" which would involve the viewing of pornographic material.

### **Adult Physical and Mental Health**

It is difficult to summarise the varying comments made by respondents about the physical and the mental health of offenders. Comments relating to the physical state of offenders included: "lack of exercise", "obesity", "serious substance abuse". It was the view of some

therapist respondents that an offender's physical state could be seen as sometimes accompanying patterns of offence. For example, binge eating and putting on weight in the case of one offender was identified as being directly linked to the periods when offending was committed.

Comments relating to offenders' mental state included: "constant stress", "depression", "anger" and "anxiety". In the case of an individual's mental health, it was reported that some of these states were likely to be a result of the person committing offences (i.e. an outward appearance of the internal tensions an offender experienced after committing an offence) rather than an independent and identifiable factor causal to the committing of an offence.

However, a series of comments dominating the responses from a range of respondents did stress "poor self-esteem" as being a constant characteristic of the priest and the religious child sexual offenders they had known. A therapist drew a clear distinction "between offenders who are priests and religious, compared with offenders in the general population; organic factors are more common amongst the latter, whilst personality factors predominate in the former."

### **Priesthood and Religious Life**

This section of the Survey Instrument sought to identify the details and the context of the pastoral ministry of priest and religious offenders. It sought comment from respondents on whether the living arrangements and professional practices of priesthood and religious life might be related to instances of sexual abuse of children and young people.

In line with the finding from the literature that situational factors can play in the committing of sexual offences against children it was relevant to explore whether there were any observable

differences between the ways in which various groups of priests and religious live and work. For instance, the vast majority of diocesan priests presently continue to function very much in single priest parishes often living alone. This living arrangement requires parish-based priests to minister across a broad group of generic situations which involve them making regular contact with many and varied individuals in a geographical area defined by the boundaries of the parish.

Religious institute priests, although living less in religious community situations compared to earlier years, retain a greater variety of specialised ministries than do priests of a diocese. Some religious institute priests may also reside in a parish and attend to parish duties. Others may reside in a parish and attend to parish duties while also working in occupations which take them outside the boundaries of their religious community and/or their parish. Some of these occupations may involve working within either a Church organisation (e.g. marriage tribunal, Catholic Education Office, Centacare, etc.) or a secular organisation (e.g. university, prison, hospital, etc.).

Compared to diocesan priests who may live alone, religious institute priests are more likely to live in community and it is the circumstances of this community living which suggests that there would be some procedures, either formal or informal, which require individual priests to indicate their whereabouts to their religious priest peers/fellow residents.

On the other hand religious brothers predominantly operate from religious community situations. Members of these communities also work in varied occupational duties which may see some members working within either a Church organisation or a secular organisation. A small number of religious are professionally engaged in educational facilities, predominantly primary and secondary schools. Like diocesan priests and religious institutes priests, religious brothers may also experience less structured living patterns (e.g. meal arrangements, group time) compared to most in the general community. Again, the circumstances of the style of community living

experienced by religious brothers suggests that there would be some procedures, either formal or informal, which require individual brothers to indicate their whereabouts to their religious brother peers/fellow residents.

It was therefore hypothesised that differences which primarily relate to the ministry lifestyle of priests and religious, the exposure this lifestyle might have with children and, the daily accountability to peers might be found to have some significance in the circumstances surrounding the occurrence of sexual offences against children by either priests or religious.

### **The Lifestyle Context of Priests and Religious**

Many respondents commented that a particular lifestyle context of religious ministry was applicable to all types of priestly and religious life – across all types of ministry occupation. It was noted that particular and observable features of this lifestyle gave rise to, in the opinion of some respondents, a lack of personal privacy and personal space, an authoritarian atmosphere and, a lack of human warmth and spontaneity in the lives of many priests and religious. As a result of this lifestyle one respondent commented "life in a presbytery, convent or monastery required a 'well-integrated personality'."

It was suggested that a well-integrated personality was especially required in the case of diocesan priests. Some respondents indicated that as well as an integrated personality, priests had to possess some independent traits. Independence was necessary even in those circumstances where there may be two or more priests living in a parish because living and working arrangements are often arranged so that individual ministries are largely independent of each other and therefore the time available for all priests living in a single presbytery to engage in group activities is minimal.

More than one respondent noted that some priests seemed to make living arrangements

which kept contact with other resident priests to a minimum. It was also noted by a number of therapist respondents that priests who sought out a "private or independent" lifestyle within a shared presbytery or community living situation should not be considered unusual or "unhealthy". Many other people in the general community choose single lifestyles and they are not considered to be living an unhealthy existence.

However, in the context of the respondents' comments many indicated that the risk exists for some priests and religious to channel all their energies into ministry activities thereby losing the sense of reflectiveness and spirituality necessary for managing their daily lives. Typical responses highlighted the belief that many priests are unable to manage all the demands made on their own lives. From this perspective they come to depend on what a number of respondents termed "the clerical system" - a system characterised in particular by those priests and religious who experience a sense of isolation. A number of priests and religious reported that some of their colleagues, not limited to those who were offenders, lived a lifestyle that was resulted in isolation from their superiors, from their own peers and house mates, from their ministry, from the people they come in contact with through their ministry and, on occasions, from the realities of everyday living. A victim respondent proposed that this feeling of "aloneness" was a contributing factor which resulted in offenders adopting an attitude that they "could always do whatever they want to - without hindrance or negotiation".

More than one therapist respondent commented that during preparation for priesthood and ministry, priests often have not learned, or been taught how, to successfully take on the possession and direction of their own lives. A summary of the comments made about the lifestyles of priests indicate that when a priest has a background that has not been allowed to mature normally and this is combined with living and functioning alone in ministry there exists both a climate and an opportunity for sexual offending.

In the case of religious priests and religious brothers, like diocesan priests, community life is no guarantee of a supportive context for ministry. Religious priest and brother offenders were also described as creating ministry and living situations which kept them isolated and unconnected with fellow priests/brothers in their community. In one instance considerable responsibility in ministry was given to a religious brother offender without any serious assessment of his capacity to manage the role that was assigned. One therapist respondent reported "a complete blurring of the boundaries between pastoral and personal life" as being associated with a religious priest offender.

Another reported instance involved a large community of religious priests, where the community was characterised by the experience of constant internal strains and dissension. This disconnected living situation created a predicament which resulted in a priest gradually separating himself from any meaningful contact with his fellow religious.

Several cases were cited by respondents where religious priests and religious brothers living in community had sought out the company of young people (adolescents) outside the community for their socialising. In a number of instances respondents identified that an offender had deliberately "targeted the sexually immature among the young people". The survey comments reinforced the significance of not maintaining many relationships with adults in ministry, religious community or personal networks for priests or religious who have subsequently been identified as having committed sexual offences against children.

### **Balancing Public Commitments with Personal Needs**

The workload and work commitments carried by diocesan and religious priests and religious brothers were frequently mentioned in connection with sexual offending involving children. One respondent differentiated between the general state of work



overload experienced by many priests and religious as a result of the decreasing number of those available to actively minister. This state is succinctly summarised by the phrase "the myths of all things to all men, twenty-four hour availability trap – 'the priest'" which highlights the type of over commitment characterising many priest and religious offenders.

The phenomenon of priests and religious putting prodigious energy into ministry and ministry-related activities was associated with the backgrounds of most priest and religious offenders. In relation to the role that work-related industriousness played in the lives of offenders there were a variety of comments. In one case, the absorption with work was described as "compensation for an inability to achieve mature relationships". In another, as an instance "to avoid dealing with personal life issues" that also allowed offenders to obtain a degree of personal success and affirmation.

Some religious leaders held a view that such heavy workloads were self-imposed rather than demanded by Church authorities. In line with this comment, respondents reported that in the case of numerous offenders work activities were seen to provide a cloak under which the abusive side of personal lifestyle remained shielded from outsiders. Continuous high levels of work-related activity were seen to be a strategy employed by offenders as a way of shifting attention away from any personal shortcomings and limitations on behalf of offenders.

When commenting on the personal life of known offenders, many responses used phrases such as "very private person", "kept to himself" or "secretive" to describe the persona projected by offenders. Several times, the word "narcissistic" was used to describe the dissociation of some offenders from open adult dealings and mutual adult relationships. At the same time as highlighting the lack of offenders establishing and maintaining real adult networks, all respondents made frequent and express mention of offenders'

association with children and adolescents.

In summary, it was reported that with respect to priest and religious offenders there is little internalised sense of personal boundaries, the distinction between professional and personal life or, the delineation of age appropriate boundaries.

### **Dimensions of Stress and Frustration**

Survey responses made an amount of comment around issues of stress and frustration that seemed more applicable to the lifestyles of non-offending diocesan priests than to religious priests or religious brothers. Stress and frustration were linked to a range of what could be termed "difficulties" confronting diocesan priests.

These difficulties include the general climate of priesthood which has seen significant change in the institutional and public image of the priest over the past two decades in particular. Both the esteem in which priesthood is held and the merits of the way priesthood is lived have decreased in the mind of the general community. Many priests, and religious, have felt the negativity towards the Church that has accompanied the reporting of Church offenders. Not a few respondents reported that there was a widespread sense within the ranks of diocesan priests in dioceses across Australia that the ministry of priesthood is neither appreciated or affirmed by bishops. This was seen as a significant contributing issue to any stress or frustration experienced by priests.

For diocesan priests, and those religious priests working in parishes, there can also be many frustrations in dealing with the daily affairs of the parish as well as the more demanding members of the parish. The presbytery is often not only isolated from the surrounding community it can easily be a lonely and solitary place for its inhabitant(s).

One priest offender summed up the frustration he had faced as a parish priest by the following catalogue of problems: "There's nowhere to talk, no one to talk to, real friendship is not there, the bishop is not readily available, priests have no professional skills, we aren't given opportunities to get together to talk about life, ...life is lived in isolation".

From a general perspective, many therapist and religious respondents expressed concern about the level of resentment they had discerned was being harboured by priests in general. While respondents reported that resentment was expressed in terms of ministry not being recognised by the Church and secular communities it was also cited as having a connection to beliefs held by many priests that others (i.e. their fellow priests) are not working as hard as they. This frustration with "the system" was seen as having a direct effect on the working environment of diocesan priests in particular.

There was agreement amongst respondents that the majority of diocesan priests, religious priests and religious brothers who have committed offences against children had suppressed and concealed stress and frustration in order to portray an external appearance of coping. Such interpersonal strategies were seen to be no different to the behaviour observed in their non-offending peers. Therapist respondents commented that even when priests and religious develop peer or age appropriate relationships, they experience great difficulties in communicating their inner state – even to counsellors.

A number of therapist respondents held the view that the amount of stress and frustration experienced by offenders was partly linked to the offenders' understanding and experience of his own sexuality and celibacy. At the same time it was also noted that priests live with the "usual sexual pressures of young celibate men" and the reality that "priesthood and celibacy are a package deal". In other words, the condition of celibacy could not be directly linked to the committing of sexual offences against children.

## **Morale and Sense of Professionalism**

In responding to this line of inquiry some respondents had a tendency to describe the overall situation for priests and religious rather than apply their comments specifically to any links between morale and the committing of offences. A number of Church respondents were quick to point out that morale among priests and religious was quite high in the 1960s and yet we readily acknowledge that sexual abuse of children occurred then as now. Another comment asked why this line of inquiry was significant, since "offenders rarely have the sense of belonging to a group" and regularly seem to separate their pastoral ministry as priest or religious from their private behaviour.

Notwithstanding these two positions, morale was almost universally described by respondents as poor. One reason forwarded for this state was that there is little sense of "professionalism in ministry". By 'professionalism' was meant what many described as a general lack of adequate, rather than formal, qualifications or the provision of quality professional development opportunities which would more readily equip priests to address the range of complex interpersonal situations they face in the conduct of their ministry. It would be fair to assume, as one respondent did, that many priests were searching for some type of specialised inservice training not available from retreats in order to enable them to perform their ministry better.

This framing of the issue can be seen as highlighting positive as well as negative aspects of contemporary ministry. On the one hand, a view proposed by some respondents was that expressions concerning the desire for more education in "people skills" reflects the professional approach priests have towards their ministry. On the other hand, the need to be better "equipped" to carry out ministry" perhaps signifies a willingness on behalf of some priests to review the belief that all they need to enable them to minister is a degree in theology – in adapting to the needs of the modern world change will upset many of the

prevailing pedagogies.

A number of respondents also claimed that there was small sense of overall job satisfaction because, in their belief, there was little evidence to indicate that any real trust or peer support existed between priests. As a result of a lack of personal support networks within the clergy, many priests struggle with the knowledge of their own state of hopelessness – "living in fear, holding an impression of constantly being judged, and feeling unappreciated by everyone".

One respondent reported that only some priests regard their lifestyle as being almost a counter witness to accepted normative patterns of living or lifestyles emanating from the present social climate of individualism, consumerism, etc. The same respondent noted that such a view portrays a conviction that the role of the Church and its priests is to assume, to some degree, the function of "prophet" in the modern world.

Within this social context it was further remarked it was surprising that priests and religious appear unable to draw strength from the example of their own ministry, and the ministry of their peers, in the daily living of their lifestyle.

It was clear that low morale on behalf of individuals was not cited as being a factor having any bearing on the committing of sexual offences against children.

However, it was also clear that the perpetrating of child sexual abuse by priests and religious does contribute to the low morale of priests and religious. In the words of one bishop, "[i]nconsistencies between proclaimed values and Church rules and lack of openness along the lines of authority militate against a sense of professionalism."

## **Professional Supervision in Ministry**

There were two distinct themes of comment in relation to the inquiry on supervision in ministry. The first related to statements concerned with the traditional individual ministry of priesthood, especially as exercised by the largest group of priests, those in dioceses. The following citations were typical of comments about this group. "The scope for supervision is limited; the priest has to be responsible for his own life and work". And, "we have a priesthood culture where he is a 'rugged individual, a man with the answers, God in his own domain'."

The second theme included the lament for the almost complete lack of supervision of priests and religious which manifests itself in everyday reality by priests and religious acting as though they are accountable to no one. One respondent contrasted the inability of even those priests and religious who themselves recognised the lack of role boundaries and acknowledged their own need for proper supervision in the conduct of their ministry, to change the "God like" disposition and imagery they utilised and relied upon in their own behaviours.

The lack of supervision of offenders, before and after instances of abuse had been brought to the attention of Church authorities, drew specific attention from respondents. In particular, one therapist cited two cases of child sexual abuse in which over 20 years of abuse took place before the offenders were apprehended as due to the absence of any supervision or accountability systems or procedures.

Both victim and therapist respondents expressed their concern that supervision, and for that matter support, systems have in the main only been instigated by Church authorities after an offence has occurred.

While strongly endorsing the need for supervision, another comment stressed that it will need to be accompanied by a "reformation in the way that priests minister, one based on trust, not authority". Such supervision needs to include "personal pastoral care of the priest, especially in openness about sexuality and commitment to celibacy".

### **Power and Authority**

Of all inquiries contained in the Survey Instrument, the issues of power and authority elicited the most compelling consensus in responses and consultations concerning abuse, both of children and of adults. The present section is confined to those comments made in response to priests and religious who have committed sexual offences against children.

In sexual abuse by a priest or religious, "there is abuse of adult power over a child, there is abuse of religious power by a God-person in the child's life, there is abuse of the position of trust given by the child and its family." Another statement claimed that "the power structures of a celibate priesthood create the climate for abuse to occur unchecked". Power is a key instrument of the abuser who knows how to use it and to abuse it. It is linked with secrecy and offenders use power not only to abuse but also to protect themselves.

If there are any doubts about the use of power in these offences, the following statement from a victim should put these to rest. "His attention towards me initially took the form of not altogether unwelcomed sexual initiation by a person of authority whom I trusted." The offence occurred when the victim was aged 13 years.

A number of therapists underlined the nature of religious authority in general and the particular structures of the Catholic Church as adding to the gravity of child abuse by priests and religious. Priests and religious offenders certainly maximise the use of their

power and their authority and, in some cases, that is more damaging than the acts of abuse themselves. The final comment to report comes from a religious leader respondent who stated that the present problems of the Church are "as much symptoms of a dysfunctional system as anything else and a true cure requires a reformation".

### **Readmission to Ministry After Offence**

Of particular interest to the present study is information concerning the views held by Church leaders about the issue of whether a child sex offender has a continuing role in active ministry in the public life of the Church.

There was universal acceptance that priests or religious who had been proven to have engaged in sexual abuse against children, either by a Court or by a Church or secular investigation, were "guilty" of committing such offences regardless of any situational factors which may have been cited by the offender as excusing the offence.

It also appeared that the impact of many criminal trials relating to child sexual abuse by priests and religious, along with the publicity surrounding the public enquiries into paedophilia in New South Wales and elsewhere, seemed to have clarified for many bishops and leaders the vexed question of a priest's or a religious' return to ministry after offence.

Despite the strength of the theology of ordination and its permanence and Christianity's stress on forgiveness and reconciliation, responses from all groups surveyed were almost unanimous that priests and religious convicted of offences against children should never be returned to ministries with children.

In particular, therapists were firm in their advocacy that there should be no return to ministry and that this should be an obligatory procedure, not as an unwillingness to forgive or reconcile the



perpetrator, but because the care and protection of children must always take precedence.

A smaller number of responses from bishops and religious leaders indicated that priests and religious convicted of offences against children should never be returned to any form of ministry. At the same time, bishops, religious leaders and therapists cited numerous cases where priests and religious child sex offenders who had been readmitted to ministry had "reoffended", sometimes immediately after returning to ministry.

A victim's support person wrote on the readmission of offenders to ministry as follows:

Forgiveness does not necessarily mean a restoration to all previous rights and privileges. It is not a matter of an abusive minister being excluded from the Church, merely from the exercise of ministry, since he has shown himself unworthy of the trust that has been placed in him by the whole Church community. This does not indicate any lack of forgiveness on the part of the Church.

The comment "[h]e must be stopped – this must not happen to others", which was made by one victim about the lack of action taken by a diocese towards a known offender, echoed similar comments made by other respondents.

It must also be noted that a number of therapist and two victim respondents went on to question how it was that the Church, with its own authority over its priests and religious personnel, could allow known (but not criminally convicted) abusers to continue in ministry when other priests and religious who had been found guilty at trial and subsequently sentenced to serve a gaol term were barred from returning to ministry.

### **Other Issues Arising from the Consultations**

The Survey Instrument provided respondents with space to make any other comments they

believed might be pertinent to the study. Four major groups of issues can be identified from these comments:

- (i) the need for an understanding of human sexuality in the formation and ongoing education of priests and religious;
- (ii) the need to situate the ministry of priests and religious in the wider context of a civil society;
- (iii) the need to examine whether the institution of the Church itself is a contributing factor in the perpetration of child sexual abuse committed by priests and religious;
- (iv) the need to examine whether the circumstances of the three sub-populations of diocesan priests, religious priests and religious brothers differentially affect the occurrence of child sexual abuse.

These four issues are explored in more detail below.

### **Formation and Ongoing Education in Human Sexuality**

On the relevance of psychological screening of potential candidates to the priesthood or religious life, one respondent questioned the effectiveness and reliability of the present pre-formation systems.

Although ... not deny[ing] the real need for professional psychological assessment prior to seminary, this practice is fraught with ambiguity. Firstly, it is limited in its scope of evaluation. Secondly, its results are often in the hands of superiors/bishops who are not professionally trained or well informed in the human sciences: the assessment can be a perfunctory exercise in any case and peripheral to the superior's own subjective discernment. Thirdly, it is of little benefit to either the candidate himself or his/her formation personnel unless resources and structures are in place to process, develop and integrate the initial material. ...No amount of initial vocational assessment will, in itself, limit the possibility of abuse occurring in the Church in the future.

Respondents expressed a clear desire to build the spiritual and pastoral role of priesthood and religious life on a healthy, open and mature personality. There was a group of interrelated comments that touched on this issue and which can be exemplified by the following:

The psychology of sexual growth was totally ignored in a system which presumed acceptance of celibacy as a way of life without any personal evaluation. A mixture of ignorance, curiosity, lack of interpersonal formation, left priests open to a variety of unhealthy responses to life situations that grew out of lack of self knowledge or sexual knowledge.

Some therapists and a religious leader respondent put the view that many of the present expressions of sexually dysfunctional behaviours by priests and religious are the result of poor formation in celibate sexuality. That was taken a little further by one director of formation who suggested that "the treatment of sexuality and celibacy needs to inform the seminarian or novice of the possibility of different perceptions by males and females with regard to displays of affection and sexual relationships."

With regard to the place of continuing professional development for priests and religious, one religious institutional leader saw

...the need at all stages of both preparation for and performance of priestly ministry, for procedures to ascertain the sexual adjustment of ministers. Waiting for a calamity to occur is not sufficient. Ongoing assessment is needed for all individually and provision of support provided.

The dysfunctional atmosphere and beliefs that broadly affected Catholics

adversely in their sexuality, the horrors of actual sexual abuse that have occurred in the ranks of the clergy, combined with the inherently difficult struggle to selfhood via the path of celibacy, call for far greater and more specific supports to the area of sexual development, spirituality and relatedness.

### **The Exercise of Ministry**

Many respondents commented that the structures of the Church have been so strong and autonomous that they seemed to function independently of the norms accepted and adopted in secular, civil society. One submission drew attention to the fact that priests and religious, enjoying a privileged position in the community, appeared to see themselves as being "independent of the civil law, unaccountable to the community they served". Such a situation perhaps, it was further suggested, subtly encouraged anti-social behaviours including sexual abuse.

A number of therapists commented that part of any preventative education campaign for Church ministers ought to ensure that all priests and religious, and their superiors, be fully aware and appreciative of the measures society has put in place against all forms of sexual abuse and exploitation, particularly of children.

### **The Institutional Church as a Contributing Factor in Sexual Abuse by Priests and Religious**

Abuse by priests and religious, whether of children or of adults, is a major issue in itself for Church authorities to address. A number of respondents highlighted their belief that the occurrence of abuse also points to our way of "being Church" which does not always reflect the Gospel message. One respondent referring to the patriarchal imagery of God prevalent through so much of the Church made the following observation.

[one]...ramification of God images is the manner in which 'failure' and 'vulnerability' is regarded. Particular God imagery will legitimate a public perfectionist tendency in which vulnerability is disavowed and 'conquered'. Such imagery will not favour 'process' but tends towards a confusion of ideals and fact. It will not invite persons to share their struggle toward maturation and favour a compartmentalisation of interior struggle and public persona. In parallel fashion, the ecclesial institution will distance itself from an individual's failures, particularly of a sexual nature, in favour of maintaining the public collective persona of 'perfectability' and invulnerability. Alternative God imagery will invite attendance to vulnerability and process, particularly of a sexual nature, and yield a readiness to publicly admit error.

Separate submissions proposed that in addition to the personal choices made by individual offenders, one could also posit that "the Church itself" can contribute to the incidence of sexual abuse.

Its own structures may make the detection of abuse more difficult or unlikely, thereby contributing to continuance of already occurring abuse... the context may include factors which those individuals who are inclined to acts of abuse can more easily weave into their rationalisations and self-justifications for their behaviour and perhaps use to elicit support when their abuse is detected.

One particular comment from a victim expressed a firm view on the institutional response to child sexual abuse.

Priests and religious offenders can be protected by the role and image they enjoy in the community. They are seen as trusted and responsible people of good reputation – men and women of God! It is often more difficult for the community at large to believe allegations about their deviant behaviour

than about the deviant behaviour of other offenders in the community.

Up until the publicity of recent years, their role and image made it safe for priest and religious offenders to offend.

Because they belong to a Church structure like a diocese or order, this protection can extend to shielding them from public exposure by interventions, plea bargaining and closed court hearings. They can also be moved about within the Church structure, without the offence being faced and dealt with in a public forum. Moreover, once the offence is disclosed, there is collusion among people in authority to protect, not just the particular Father or Brother, but the image of 'The Priest' or 'The Religious' – indeed, 'The Church'.

What therapists and especially victims are most critical of is the failure of appropriate people within Church structures to act in clear instances of abuse of children by priests and religious. Throughout the written submissions, during interviews and in a group meeting of victims and parish representatives, several cases of repeated complaints against both priests and religious child sex offenders to Church authorities over long periods (in one case for as long as 28 years) were referred to as overwhelming evidence of the Church's failure to seriously deal with complaints. A victim's comment on this matter demonstrates the disillusion and disgust many victims feel towards the Church: "He went to Court, was acquitted on a technicality and was returned to a parish to continue abusing others".

The Church's long-term knowledge of complaints and its failure to instigate investigation of complaints are the constant themes of victims, victims' support networks and victims' advocacy publications, e.g. Broken Rites publication In Fidelity. Such known failure to take decisive action, or even to investigate complaints is, of itself, they claim, a contributing factor to further sexual abuse of children perpetrated by priests and religious.

A cross-section of respondents made strong suggestions that the only way open to Church authorities to deal with the issue of sexual abuse of children by priests and religious was to introduce "radical reform" to all of the operations of the Church. Some respondents went on to define what they meant by this term. By 'radical reform' was meant a whole culture change in the Church, in priesthood and in ministry which must be characterised by "patent openness and honesty".

### **Differentiating Between Diocesan Priests, Religious Priests and Religious Brothers**

It is understandable that the replies made by bishops and religious leaders to the Survey Instrument were based on their own perspective of priesthood or religious life. Responses of therapists and discussion in consultations drew attention to the possible advantage of examining factors related to sexual offence of both children and adults with a consciousness of the differences that exist between groups of priests and religious.

As has previously noted, there are three principal groups of male ministry in Australia: diocesan priests, clerical religious or priest members of religious orders and, non-clerical religious or brothers. The total number of persons comprising these three groups in 1997 was 4,765 (The Official Directory of the Catholic Church in Australia 1997, [1997] pp.338-339), constituted as follows:

Diocesan priests:	2,126
Religious priests:	1,299
Religious brothers:	1,340

Sexual offences against children are acknowledged to have been perpetrated by individuals among each of these three groups. From the comments of respondents it does appear that the behaviour in most cases of sexual offences involving children did not represent that of

fixated paedophiles, but rather that of regressed or arrested persons.

There are no available statistics to differentiate factors of sexual abuse between each of the three groups. Even though this lack of data presents very significant problems for researchers in making any definitive assessment of the existence of factors specific to one or more of these three groups, two principal questions continued to be raised by participants in the *in situ* consultations.

Are the factors of abuse the same for each group? And, are there differences in the incidence of fixated paedophilia between each group?

These questions have specific relevance to the present study given the concentration of media reports over the past five years (both in Australia and overseas) which have highlighted the relatively high proportion of child sexual offences committed by religious brothers compared to priests. This trend was also reported by therapist respondents in the present survey.

In an attempt to seek whether there are any possible differences in the factors relating to the committing of child sexual abuse between diocesan clergy, clerical religious institutes and non-clerical institutes, the opportunity was taken to consult with leaders of two of the major congregations of male non-clerical religious institutes in Australia.

The discussion below provides the basis for further rigorous exploration of the differences in the factors relating to the committing of child sexual abuse between diocesan clergy, clerical religious institutes and non-clerical institutes. No definitive statements should be made on the basis of the present discourse.



There is strong anecdotal evidence to support the proposition that the incidence of allegation of sexual abuse offences involving children has been considerably higher, in a proportional sense, among religious teaching brothers than for any other group in Catholic Church pastoral ministry in Australia. Based on the reported incidence of child sexual offence committed by religious brothers in some Australian States, it is also pertinent to question what the rate of child sexual abuse among some institutes of religious brothers in Australia is relative to the rate found within the general population – bearing in mind the difficulties of determining the actual rate of child sexual abuse within the general population.

In discussing that situation with congregational leaders a number of significant comments were made, some of which relate to the personalities and background of the religious themselves and, some to institutional structures of formation and mission. As elsewhere in the Church, many of the disclosures and allegations made concerning religious brothers relate to incidences that occurred many years in the past. In particular, the period from the end of the 1940s to the 1970s accounts for the majority of disclosures, allegations and convictions. Congregational leaders reported that from the period defined by the mid-1970s to the present day a significantly smaller number of disclosures, allegations and convictions have been made.

It is now recognised by all Church institutions of formation in Australia that the former practice of sending boys as young as 12 years of age to a Juniorate, which operated on a religious life formation model (including separation from family and from society) to complete their secondary schooling, did not promote normal healthy affective development. During this period, there were no processes or procedures by which a candidate could be screened or systematically assessed.

There was also an almost complete lack of any psychological awareness or insight, based on the behavioural sciences, underpinning the basis of formation programs which tended to leave young religious graduating from early formation with arrested psychological and emotional maturity. It was reported by both congregational leaders that a number of offending religious had themselves come from childhood lives spent in substitute care in Church-based and secular institutions.

It is significant too to note that the dominant male Australian culture interacted with institute and general practices of religious life as it then was and resulted, in the words of one leader, in:

- ❑ a closed institutionalised way of living;
- ❑ a tendency to immature relational patterns, including a lack of skills for personal communication, confrontation and dealing with people;
- ❑ an emotional barrenness and harshness;
- ❑ a strong orientation to work and to success;
- ❑ a spirituality that was strongly devotional and ritualised and had little direct reference to daily life;
- ❑ a strong discouragement of close friendships and personal relationships, especially outside the ranks of the community; and,
- ❑ a strongly hierarchical and authoritarian style of administration which tended to treat individuals as 'subjects' who merely had to receive and execute orders. This style tended to produce either infantile submission or passivity, or in some cases, anger and resentment of authority. Either of these two patterns could have been destructive contributors towards later inappropriate acting out.

With the benefit of hindsight, when to this general situation was added pastoral ministry

in residential care institutions (e.g. orphanages or farm school settings), these particular environments themselves can be identified as providing a climate that was conducive to the committing of sexual abuse. The presence of a number of persistent and predatory offenders among the religious is undeniable and the influence these offenders have had on other religious in furthering patterns of abusive behaviour cannot be discounted.

It was also reported that some of the offences were perpetrated by "lay brothers", a group of men whose work was not in formal classroom education, who were not academically or professionally qualified, who learned their skills on the job in kitchen, laundry, workshop or in the fields. In so far as they were part of an informal class structure within institutes themselves it is clear that their intellectual development, their satisfaction in their ministry and their supervision were essentially neglected.

During meetings with congregational leaders, further clarification was sought of the nature of offences by religious brothers against children. When asked to review offences against children with which they were acquainted, amounting to an aggregate number of some 200 cases extending over a period of approximately 50 years, less than 10 offenders were identified as fixated paedophiles. In most cases regressed or arrested behaviour was identified, with all the accompanying issues of immaturity, inappropriateness of candidates for religious life, failures in formation and in supervision in ministry, that have been already identified as significant factors in offence.

In further discussion, one leader referred to the ministry of education as a "risk ministry" for offences against children because of the opportunities afforded to offenders or potential offenders by the presence of children and adolescents. Most religious institutes which conduct educational apostolates, whether of lay or clerical religious, have had instances of child sexual abuse with which to deal. Educational apostolates as an area of ministry was

confirmed as a significant factor associated with child sexual offence by a number of leaders of clerical religious institutes.

In all cases there was an unreserved acceptance on behalf of the congregational leader of the criminal nature of all offending behaviours.

## **CHAPTER 6**

### **Results**

Some caution needs to be exercised in drawing firm conclusions from the information obtained from the consultations given the small sample size and the sampling technique. However, based on the information reported in the literature and the findings from the consultations the following research hypotheses can be addressed.

**Hypothesis 1:** That in respect of sexual offences against children, the rate of offence committed by males is higher when compared to the rate of offence committed by females.

Information from criminal data sources, from the general literature and from the consultations supports the view that child sexual abuse is predominantly committed by males.

There was however, evidence presented in the literature to support the reality that sexual offences against children by women do occur. A number of disclosures made during the consultations clearly indicate that a small number of known offences against children have been committed by women religious.

**Hypothesis 2:** That in respect of sexual offences against children, there is no difference between the rate of offence in the general population and the rate of offence among priests or religious.

Reporting in the media and the strong reactions of victims' advocacy groups lead the public to believe the view that the incidence of child sexual offences within the Church is higher than in the general population. This perception is unable to be effectively challenged due to the lack of any systematic data collection or research being conducted by the civil authorities or the Catholic

Church. This lack of accurate figures on the prevalence rate of sexual abuse against children committed by priests and religious either for Australia or overseas is less than helpful in assessing with any degree of accuracy the extent of abuse.

It is to be expected that under-reporting of sexual offences by members of the Church community would follow the trend of under-reporting in the general community. Rossetti (1997) warns that "any statistics you've read are all guesses simply because there are no statistics available and there probably never will be." There is just no way of knowing how many child abusers there are in society at large. Victim rates are easier to find than offender rates.

Evidence from the literature and from the consultations involving clinicians and therapists, supports the view that there are no essential differences between the incidence of priest and religious child sex offenders and the incidence of child sex offenders in the general population. While there is no evidence to indicate that clergy or male religious molest minors at a higher rate than other males, there were reports that most child sexual offences by priests and religious involve ephebophilic rather than paedophilic behaviour. Priests and religious appear to be more frequently involved in homosexual rather than heterosexual activities - this is the opposite of the pattern for child sex offenders in the community at large.

Available statistics from studies indicate that between four to eight percent of priests abuse children. Sipe (1990) drawing from a private database collected over 30 years of clinical practice, estimates that six percent of American priests sexually abuse children. Of these offences, two percent involve paedophilic activities and four percent involve ephebophilic activities. A number of other researchers broadly support Sipe's findings (Fortune, 1989; Rutter, 1989; Steinke, 1989).

In the absence of empirical evidence, further research is necessary before any comparisons of child sexual abuse committed by women in the general population and women religious can be made.

Further research is also necessary before any contention that sexual offences committed by women religious is related to either pubescent or post-pubescent children can be substantiated.

**Hypothesis 3:** That in respect of sexual offences against children, there are no observable differences between the general population and child sex offenders on measures of psychopathology.

Evidence from the clinical literature, generally supported by reports from the consultations, promotes the position that the psychopathology of child sexual offenders differs from that of nonoffenders on one or more of the following factors:

- ☐ offenders have a higher rate of personal sexual abuse in their childhood;
- ☐ offenders have experienced wider elements of human deprivation or neglect in their childhood in the form of emotional and physical abuse;
- ☐ offenders display intimacy deficits and can be generally described as 'lonely' individuals;
- ☐ offenders display poor and manipulating relationships with adults and peers;
- ☐ offenders exhibit significant difficulties in establishing and maintaining personal relationships which leads to social alienation;
- ☐ offenders display a level of psychosexual and social development equivalent to the stage of psychosexual and social development of their victims;
- ☐ offenders take no responsibility for their own offending behaviour but rationalise their behaviour by blaming their victim
- ☐ offenders display behaviour patterns typical of addictive personalities such as:
  - egocentrism,
  - a primary concern with fulfilling their own needs,
  - experience extreme guilt in relation to their offending behaviour but not to the extent to cease the abuse, and/or
  - are prevented from offending only by direct intervention.

Very few paedophiles or ephebophiles acknowledge or can accept the harm they do to their victims. Research indicates child sex offenders do not generally analyse their behaviour in terms of criminality or immorality, but function on rationalisation - using many rationalising strategies and arguments to excuse their abnormal and/or criminal behaviour. The potential danger of searching for differences in the psychopathology of offenders versus nonoffenders is that it not only, albeit unintentionally, provides an explanation for criminal behaviour, it diminishes personal responsibility on behalf of the offender for acting criminally through child abuse.

**Hypothesis 4:** That in respect of sexual offences against children, there is no difference between child sex offenders in the general population and priests or religious child sex offenders on measures of psychopathology.

There was evidence from both the literature and the consultations to support the view that some child sexual offences by priests and religious relate to dysfunctional psychopathological states. However, there was no evidence to suggest there are any differences between child sex offenders in the general population and priest or religious child sex offenders on measures of psychopathology. Many clinicians cited in the literature and interviewed during the consultations impressed the fact that such differences are not observable. Again, at least among some of the interviewed clinicians, there was a strong view expressed that the very act of searching out such differences offers respite to offenders who are receptive to finding any explanation for unacceptable and criminal behaviour that nullifies the legal and ethical consequences for the individual offender.

**Hypothesis 5:** That in respect of sexual offences against children, there are no observable differences between the general population and child sex offenders within the general population when situational factors are taken into account.

There was no information to evidence the existence of significant differences between the



situational circumstances and environments in which child sexual offences occur when priests and religious child sex offenders are compared to child sex offenders drawn from the general population. In the absence of any reliable data concerning the situational factors associated with the occurrence of child sexual abuse no evidence was available to make a strong observation about this hypothesis.

Notwithstanding the above observation, the unfortunate reality is that the majority of sexual offences against children are perpetrated by family members and family friends. It is clear children are at greater risk of being sexually abused by family members and friends than by priests or religious.

**Hypothesis 6:** That in respect of sexual offences against children, there are no observable differences between the child sex offenders in the general population and priests or religious child sex offenders when situational factors are taken into account.

In addition to those situational factors identified for the non-religious population of child sex offenders, it is possible to identify a number of factors that are more relevant to priests and religious child sex offenders. According to one researcher there are some specific occupational-related factors that are peculiar to priests and which intensify and foster an addictive cycle amongst this group. These include:

- ❑ the 'pedestalisation' of clergy by congregations whose expectations only serve to enhance the sexual obsession and reinforce the need for secrecy;
- ❑ the martyr-like position clergy can portray due to their 'emotional poverty' coupled with their willingness to be at the service of the congregation; and,
- ❑ the trusted positions clergy enjoy, as guardians and champions of morality, which places them in dependency relationships with vulnerable people.

These factors interact with an individual's inner beliefs about their own shamefulness encouraging

an optimum environment in which obsessive sexual behaviour can take place. Religious life can appear to provide the sanctuary needed to avoid this continual battle with personal shame. It offers, so it seems, to poor self image and a certain status which together can provide the mechanism to do good for others.

The culture of Church and religious life, especially in the harshness of living, of obedience and discipline, of emotional deprivation, of an all male environment, is likely to have served to reinforce negative self-image in those who entered religious life with a poor sense of self. Reports from the consultations concerning the use of alcohol by priests and religious child sex offenders prior to or during their sexual activities involving children generally supported the finding of Robinson *et al.*, (1993) that a significant number (i.e. 25 %) of priest paedophiles and ephebophiles used alcohol but it was not possible to draw any conclusion involving any comparison with offenders in the general population.

**Hypothesis 7:** That in the case of priests or religious who display 'true paraphilia' there is evidence of a correlation between offending against children and the offender's own traumatic personal background of unresolved childhood abuse.

A significant number of perpetrators of child sexual offences appear to have arrested social and sexual development. Increasingly, links are being made in research between childhood experiences and arrested or fixated adult behaviour.

Many offenders have been the victims of abuse. Some researchers would assert that perhaps the strongest single correlation with abusive behaviour as an adult would be experiences as a victim of abuse in childhood. Other therapists would identify wider elements of childhood human deprivation or neglect, both emotional and physical, as significant contributors to individuals being at risk of abusing as adults. Exposure to fragmented, inconsistent and disturbed parenting, domestic violence including child physical, sexual and emotional abuse and rejection impede the

development of self-esteem, emotional attachment and confidence in expression of feelings. Such traumatic childhood backgrounds were reported by therapists in relation to priest and religious child sex offenders.

It does however, need to be realised that there is also consensus within the literature and from respondents that abusers are not 'out of control' people who have no ability to exercise choice about their behaviour or lack of ability to take responsibility for the consequences of their behaviour.

**Hypothesis 8:** That in the case of priests and religious child sex offenders, regardless of whether the offender displays 'true paraphilia', there will be evidence from their adult personal life that indicates:

- a significant behavioural characteristic of seeking exclusively the company of children;
- social isolation from peers and other adults; and,
- obsessional behaviour patterns.

The consultations confirmed the findings identified in the literature that risk of offending is increased when the potential perpetrator encounters a person who, by virtue of their subordinate position or emotional state, is vulnerable to exploitation. This applies especially, but not exclusively, to priests and religious. A person may be vulnerable because of the:

- ☐ age differences between the offender and victim (i.e. student and teacher);
- ☐ the offender occupies an esteemed position of trust (Parish Priest, Superior);
- ☐ there is a real or perceived imbalance of power and authority in the relationship (Superior and novice);
- ☐ the victim is placed in a role in which there is a natural desire to please (Parish Priest, teacher); and/or
- ☐ the victim is undergoing a personal, emotional or sexual crisis (seeking guidance and

assistance from religious counsellors).

In the case of known priest and religious child sex offenders the consultations revealed that these individuals sought out the company of children and adolescents and demonstrated a pattern of minimising social contact with their own age peers and work colleagues. A number of therapists reported that some offenders demonstrated various obsessional behaviour patterns which often displayed itself through over commitment in work and ministry activities.

**Hypothesis 9:** That in the case of 'paraphilic' behaviours involving children engaged in by priests and religious, the majority of offenders exhibit this behaviour due to situational factors rather than irregular psychopathology.

As has been noted, adults who are placed in a position of trust and care over the child, which includes priests and religious, are responsible for committing some of the reported sexual offences against children. The rate of offence for adults in a position of care and trust is at a significantly lower rate than the incidence of sexual offences committed by a child's immediate family and relatives, familial acquaintances or friends.

There is no evidence from the literature to confirm or deny whether priests and religious actively manoeuvre themselves into environments where children can be found, i.e. schools, parish youth groups, altar servers.

Priests and religious appear to be more frequently involved in homosexual rather than heterosexual activities. This may be due to situational factors associated with the environment in which clergy and religious minister. However, before any firm conclusions can be drawn about the situational context of offence, further research needs to be undertaken.

**Hypothesis 10:** That given the existence of situational factors surrounding acts of child sexual

abuse committed by priests or religious, the number of priests or religious who exhibit true paraphilia will be smaller than the number of priests or religious who engage in paraphilic behaviour.

The results of both the literature review and the consultations are consistent in suggesting that true paedophile activity by priests and male religious is overwhelmingly perpetrated against prepubescent boys. The consultations confirmed the findings from the literature that the incidence of true fixated paedophilia among priests and religious is quite small.

Furthermore, responses strongly reinforced the contention that most sexual offences against children committed by priests and religious can be described as instances of homosexual ephebophilia. Therapists were firm in their conviction on this matter. Moreover, on the basis of the limited available data, fixated paedophilia is not evidenced in the majority of criminal offences against children or against adolescents by either priests or religious.

This finding is the complete opposite of the pattern of offences committed by child sexual offenders in the general community who are more likely to offend against girls than boys. One explanation for this trend can be explained by the fact that many male religious who commit sexual offences against children are engaged in ministries which involve male environments, e.g. schools, and are therefore primarily due to situational factors rather than any irregular psychopathology.

**Hypothesis 11:** That the existence of situational factors associated with any act of child sexual abuse committed by priests or religious will not decrease the objective reality in the mind of the priests' or religious' superiors that an offence has occurred.

The Church authorities and leaders involved in the survey clearly indicated that they viewed any instance of criminal sexual offence involving children as just that - a criminal act. There was no evidence, with the exception of views expressed by a number of victims and victim support

groups, that Church authorities and leaders compromised the criminal element of these activities because of any extenuating circumstances surrounding the committing of such offences.

**Hypothesis 12:** That in respect of child sexual abuse, celibacy does not appear to be a significant factor for priests or religious child sex offenders.

The role of celibacy as a factor contributing to sexual offending is a sensitive issue. Celibacy is a state in which a voluntary decision is made to avoid sexual encounters of any kind or form. Recent litigation, media disclosures and publications attest to the active sexuality of at least a proportion of the population of priest and religious. Dempsey et al., (1992, p.6) are amongst those theorists who make some connection between sexual abuse and celibacy.

There is no evidence to support the position that the state of celibacy *per se* is a significant factor in the committing of sexual offences against children.

**Hypothesis 13:** That priests and religious who commit sexual offences against children do not view their behaviour as a breach of celibacy.

Whilst there is no evidence to support the position that the state of celibacy is a significant factor in the committing of sexual offences against children, reports from a number of priest offenders indicates that they were able to justify their homosexual encounters with children and youth on the basis that the act was not contrary to their own understanding of their vows of celibacy and chastity.

There was unanimity in the comments of respondents about how offenders rationalise the contradictions between their commitment to celibacy and their committing of sexual abuse. In the present context, respondents reported that many offenders grudgingly accepted the conditions of celibacy as "a rule of Church law which comes with the job" and regarded the conditions as not

necessarily positive. For many offenders, it seems the imposition of celibacy simply infers two negatives states in the daily lives of priests and religious: no sexual expression and no marriage.

There was evidence from the literature which received strong agreement amongst respondents that priest and religious offenders seem to dissociate their abusive behaviour from their notional commitment to celibacy and in so doing they split and compartmentalise aspects of their daily lives and behaviours. Of particular significance were the high number of responses which revealed descriptions of known offenders as having a "strong commitment to celibacy". One can only infer that respondents were underlining the dissociated and distorted thinking that there is in offenders between their chosen lifestyle and their actual behaviour.

It was clear from the responses certain offenders held the belief that by engaging in sexual offences involving children, they have observed the rules about adult women *vis-a-vis* celibacy. Furthermore offenders clearly demonstrated an ability to live with the inconsistency of their lives, without seeking outside help or guidance.

There was some suggestion from more than one therapist that certain offenders who have been clinically identified as fixated paedophiles have, consciously or unconsciously, chosen priesthood or religious life as a place to act out their sexual predilections, without being detected as an offender against children.

## **CHAPTER 7**

### **Discussion**

The following discussion brings together the findings from the clinical literature review and the consultations. The discussion addresses the following three areas.

- (i) A summary of those factors identified as relating to the sexual offences against children committed by priests or religious – the focus of this investigation will be on offenders as individuals.
- (ii) An investigation of those factors identified as relating to the wider operations of the Catholic Church and which also might relate to the perpetrating of sexual offences against children by priests or religious. The focus of this investigation will be on institutional Church structures and systems, present procedures utilised by the Church to address sexual offences against children and, interaction of these systems and procedures on priest and religious child sex offenders.
- (iii) An assessment of how well the Catholic Church in Australia has responded to instances of child sex offences allegedly committed by priests and religious.

#### **Identification of Factors Relating to Priest and Religious Child Sex Offenders**

The study actively sought information from a range of persons with direct experience of priest and religious child sex offenders. The sample size of those persons who provided information based on their experiences of offending priests and religious means some caution needs to be sounded about drawing firm or generalised conclusions from the recorded data. The small size of the sample, coupled with the method of locating subjects and the need to use non random sampling techniques, highlights the difficulties confronting researchers when attempting to make



conclusive statements about the existence of strong relationships between offenders when a range of internal and external factors are considered.

With this cautionary note in mind, the information identified through the literature review and from the consultative stage of the research can be used as a basis from which a number of broad conclusions can be drawn about the psychopathology of priest and religious child sex offenders and the environments in which they commit these offences.

### **Psychopathology in Relation to Sexual Offences Against Children**

There is clear evidence that considerable differences do exist between these child sex offenders and the population at large. This is not to claim that the factors identified are unique to child sex offenders, rather these factors have been widely accepted by clinicians as accompanying such behaviours.

When specific consideration is made of priests and religious, Loftus and Comargo (1993) argue there are no significant differences between the psychopathology associated with priest and religious child sex offenders compared to non-religious child sexual offenders. The opportunity presented by the consultations was used to assess the validity of this position.

Respondents were asked to comment on the family and emotional background of offenders as well as their childhood experience of physical or sexual abuse. Given that the majority of offenders went to seminary or religious life at the conclusion of secondary schooling rather than as mature adults, comment was also sought about emotional and intellectual maturity, sexual orientation, affective and sexual development at the time of entry.

There was substantial and comprehensive agreement from respondents that all the psychopathological factors identified by the research as relating to nonreligious child sex offenders equally applied to priest and religious offenders. Australian respondents reported that priest and religious child sex offenders exhibited some or all of the following psychological characteristics and backgrounds:

- ☐ greater incidence of personal childhood sexual abuse;
- ☐ greater incidence of childhood emotional and physical abuse;
- ☐ intimacy deficits;
- ☐ poor adult relationships;
- ☐ social alienation;
- ☐ a similar psycho-sexual and social development to their victims;
- ☐ addictive personality behaviours; and,
- ☐ rationalisation of behaviour by blaming victims.

Therapist respondents also reported, in the case of priests or religious who display 'true paraphilia', that there is often evidence of a strong relationship between offending against children and the offender's own traumatic personal history of unresolved childhood abuse.

The clinical literature is quite clear when it rules out other psychiatric disorders as being causally related to paraphilia, and particularly to paedophilia. Paedophiles and ephebophiles know the true nature of what they are doing and have volitional control over their actions. Respondents to the consultations and the Survey Instrument were also clear in their endorsement of this point and referred to techniques of denial, dissociation and rationalisation in offenders. Information from respondents relating to these techniques reflected general agreement with the summation of Pollock and Hashmall (cited in Parkinson, 1997; p.54) who have suggested five progressive levels of denial of offence:

1. Denial of fact ('Nothing happened');
2. Denial of responsibility ('Something happened but it was not my idea');
3. Denial of sexual intent ('Something happened and it was my idea, but it wasn't sexual');
4. Denial of wrongfulness ('Something happened and it was my idea, and it was sexual, but it wasn't wrong'); and,
5. Denial of self-determination ('Something happened and it was my idea, and it was sexual, and it was wrong, but there were extenuating circumstances').

There is widespread support to continue to press the view expressed in the literature review that child sex abuse behaviour is a result of choice made by an individual offender and that while the positions of priest or religious, health professional, scoutmaster or teacher provide a context for offence, they are not of themselves a cause of offence. Respondents agreed with this opinion for both fixated and regressed paedophilia.

In conclusion, it is stressed that all the psychological features identified above are generally associated with all child sex offenders. They should not be viewed as being uniquely attributable to priest or religious child sex offenders.

### **Situational Factors in Relation to Sexual Offences Against Children**

Neither the clinical literature nor responses from the consultations provided strong evidence for the existence of a definitive causal link between specific situational factors and the committing of child sex offences. However, there was evidence from the consultations that, regardless of whether the offender displays 'true paraphilia', there are observable patterns in an offender's adult personal life indicative of: a significant behavioural characteristic of exclusively seeking the company of children; social isolation from peers and other adults; and, obsessional behaviour patterns.

There is no evidence from the clinical literature to support the existence of significant situational or environmental differences between child sex offenders in the general population and priest or religious child sex offenders.

However, there are three observations to make based on information received in the form of comments and detailed discussions during the consultations which challenge the above statement. The first points to the identification of certain ministries within the Catholic Church as being 'risk ministries' for priests and religious (e.g. education, substitute care of children, working with youth). These ministries provide a ready opportunity for those priests and religious with a psycho-sexual disorder to engage in sexual behaviours with children. This risk must also be considered to equally apply to ministries engaged in by women religious.

A second observation relates to the fact that seminary formation for secular priests and community living for male religious takes place in an all male environment. This environment reflects male values and is conducive to a homo-erotic sexual development which does not adequately deal with sexuality in general, or the feminine in particular. When failure of celibacy occurs involving children or adolescents, it is frequently manifested in homosexual rather than heterosexual behaviour. It is suggested that this sexual orientation may be a result of the homo-erotic milieu of the seminary and community living environments. This is not to detract from the importance that poor formation in celibate sexuality and inappropriate choice of celibacy may also play during the formative period of priesthood and religious life.

A third observation is based on comments concerning environmental elements specific to the institution of the Church itself. Organisations like churches, whose authority is based on moral and religious principles, tend to have idealised expectations of priests and

religious and are therefore reluctant to acknowledge guilt and failure. The investigation experienced a certain 'closing of ranks' to defend the institution of the Church and the institution of priesthood during the course of the present research. For example, there was a common resort to the principle of confidentiality as a way of avoiding or minimising scandal and bad publicity or as a means of defending reputation. A number of therapist respondents reinforced the relevance of such institutional behaviour in respect to a number of priests and religious child sex offenders.

Such responses raise a question as to whether some of the present institutional reactions to disclosure of sexual abuse are in fact mechanisms to protect the offender. Further, there is the issue of the vulnerability of child victims. Since the Catholic Church has extensive involvement in education with children and young people in stress and crisis, it is these children who are the ones fixated and regressed paedophiles consciously groom as victims and consequently they are the most at risk. If there is any truth in this observation, continuation of such institutional responses will be damaging to Church leaders and the Church community in the long-term.

### **Celibate Lifestyle**

Although it is true that some persons who profess celibacy commit offences against children, celibacy remains a valid and respected lifestyle for a significant number of people in society. Based on an analysis of the literature and the responses received during the consultations it can be concluded that there is no evidence to support the view that celibacy, of itself, is a significant factor in contributing to child sexual offences committed by priests or religious, any more than it is for anyone else.

Notwithstanding the above conclusion, the disturbing fact needs to be reported that some priest child sex offenders hold a belief that sexual offences involving children (particularly

male children and youth) are not occasions when a vow of celibacy is broken. There is also clear evidence that some priests and religious who commit child sex offences do not view their behaviour as a breach of celibacy.

### **Identification of Factors Which Might Contribute to an Environment in which Sexual Offences Against Children Occur in the Catholic Church**

In the current social climate which accords a less privileged and exempt position to the Church, individual ministers, dioceses and religious orders have inevitably begun to face accusations of abuse against children, notably in the United States, later in Canada and, in recent years in Australia.

As early as the mid-1980s, in response to such accusations, the National Council of Catholic Bishops of the United States were provided with a confidential report entitled The Problem of Sexual Molestation by Roman Catholic Clergy: Meeting the Problem in a Comprehensive and Responsible Manner (1985). The United States Catholic Bishops went no further then, or in the period that immediately followed their private consideration of the 1985 report, than issuing statements of reassurance that the Church denounced child abuse and would work to deal with it when it occurred.

By the mid-1990s, the Catholic Church in the major English-speaking countries has been shaken publicly and internally by a range of clear cases of sexual abuse which has received exposure of individual cases in the public arena.

Earlier comments were made in support of the actions taken by the Catholic Church in Australia which publicly addressed the issue of sexual abuse, particularly the initiatives taken over the past three years. However, the research raises a number of factors specific to the Church itself which are considered to contribute to the environment in which sexual abuse against children by priests

and religious takes place.

### **Institutional Factors in Church Ministry and Church Structures**

It is clear after analysis of responses received to the Survey Instrument and information found in some of the literature (most notably that authored by Church personnel) that factors relating to the Church as a social institution play a significant role in certain instances of sexual offences against children by priests and religious. Many in the Church are uncomfortable about applying a sociological approach to the operations and functions of the Catholic Church. The Researcher does not share this view and discussion of a number of prominent issues from such a perspective is reported below.

### **Theology of Vocation and Ministry**

One important consideration concerns the theology of vocation according to which priests and religious of the Catholic Church have been accepted, educated and appointed to ministries.

There is evidence to suggest there exists a simplistic 'grace of state' affirmation on behalf of some priests and religious that see vocation as a direct calling from God. It appears to be based on the premise that with ordination or religious profession, would come all the divine assistance needed to live out a life commitment. This is a totally unrealistic and simplistic premise which minimises the human requirements for ministry in the contemporary Church. Such a perspective undoubtedly has resulted in people being accepted into religious life, or being 'given the benefit of the doubt', when there were strong human indications that ministry in the Church was inappropriate for them.

There has always been another different theology which affirms that 'grace builds on nature' and which calls for clear personal and social attributes as pre-requisite human

requirements of ministry in the Church. It would be the viewpoint of many members of the Church that one should not ask 'Is the candidate suitable for priestly or religious life?' But rather, 'Is priesthood or religious life suitable for this candidate?'

A further practical difficulty comes from the sacramental theology of ordination in the Catholic Church. Insistence on the special character and permanence of ordination has made for reluctance to permanently deprive the ordained minister of his ministry, except when patently a requirement in sexual offences against children. Consequently, preservation of the role of priesthood in the Church has in certain instances seemed to be regarded as more important than the demands of justice for victims or the protection of children.

If Christian commitment to unconditional forgiveness is added to an unrealistic and inappropriate theology of vocation, a climate can be created where sexual offences are seen as personal moral lapses which can and should be forgiven. Both the literature and the consultations underlined the importance of fundamental human personality qualities as the basic requirement for all exercise of ministry in the Church.

It is undeniable that some of the worst instances of child sexual offence committed by priests and religious have occurred when children have been subjected to predatory behaviours resulting in initial sexual offence and subsequently to further, and in some cases long-term, sexual offences by offenders who have continued in or returned to ministry. Most distressing is the fact that a small minority of these offences have involved priests and religious whose behaviours can be identified as those of fixated paedophiles.

### **Power and Independence in Church Structures**

The Catholic Church in Australia, as elsewhere, has always had a very visible structure in



which authority is vested in a bishop or a religious leader. Due to the size and complexity of administering modern dioceses and religious orders, though bishops and religious leaders retain ultimate responsibility, it has been necessary for them to delegate almost complete local control and management to individual pastors. A more contentious consequence of this structural arrangement is that bishops and religious leaders, and their delegates, have little accountability to Church membership.

Without exaggerating the extent of control inherent in such authoritative structures, it has been suggested in some of the literature that the Catholic Church, like other churches, has practised what Parkinson refers to in his concept of 'Christian Isolationism' (*op. cit.*, pp.185–191).

There are two elements to this concept in the Catholic context. First, there is a wish to deal with issues of sexual abuse within the Church's own structures. The second is a tendency to see the Church directing its own life, one that is distinct and separate from civil society. So its focus has been more on its own processes of canon law than on civil law, and more on the person of the clergy offender than on the victims of offence. Towards Healing and Integrity in Ministry are concrete examples of this internal emphasis.

It is further contended that such a context of ministry and of power can be, and is, knowingly used by offenders to exploit children and vulnerable adults. Bishops, religious leaders and Church communities give and respect the authority of the minister (whether priest or religious) as adult, as religious leader, as 'God figure' and, as someone who can be implicitly trusted. From the perspective of a child this authority represents power that is beyond question. Given this framework how could a child oppose the power and the authority of the priest when the whole context of the local Church accepts it?

The structure and the exercise of power in the Church are two of the broad issues being discussed in contemporary Catholicism. For example, both have been raised in relation to aspects of the Church's life as diverse as the role of women, the nomination of bishops and dialogue among the faithful on a range of contemporary social and moral issues. The history of offences against children by priests and religious gives abundant anecdotal evidence of misuse of power by ministers and of the powerlessness and vulnerability of their victims. It is specifically when sexual offences against children are viewed from a 'victim perspective' that the true nature of abuse of position and power by priests and religious is revealed.

### **Duty of Care To Children**

Recent cases in Australia involving church personnel who have committed sexual abuse or misconduct against children have highlighted not only the personal, civil and criminal responsibilities of ministers but, the onus of duty of care expected of all church authorities.

Quite apart from considerations of personal or institutional liability, concern for proactive care and protection of children and others in need argues for very clear and comprehensive information, policies and procedures for:

- (i) acceptance and education for ministry;
- (ii) the exercise of ministry; and,
- (iii) personal and professional supervision and accountability of ministers.

### **Acceptance and Education for Ministry**

There are no simple or immediate screening tests to identify either actual or potential sexual offenders against children (ACBC & ACLRI, 1996a; p.52). It would therefore appear essential that there be, in orientation and during the early formation of candidates to the priesthood and to religious life, definite and detailed education and awareness

programs that help candidates and Church authorities discern the suitability of potential candidates for ministerial lifestyle, especially where ministry might involve children.

The state of emotional and intellectual maturity that a priest or a male religious brought to their formation years was a factor that provoked strong response amongst respondents. Comments referred both to the nature of candidates and the structures of admission. It was evident that some comment referred to practices within seminaries and religious houses of formation that were current in the 20 year period between the mid-1960s and the mid-1980s. These included, but not limited to, entry to the Juniorate at an age as young as 14 years; complete isolation from families; isolation from any involvement in the wider community (including newspapers, radio and television) and deprivation of normal cross-gender social interaction.

More than half of the responses stressed the superior intellectual abilities and qualities of offenders but placed these in sharp contrast with their emotional and sexual immaturity. There was consensus that the arresting of human psycho-sexual and psychological development accompanied entry to seminary or religious life directly from secondary school and this was particularly noticeable in offenders.

It has been suggested that the period of 'hibernation' was coupled with a general lack of preparedness to acknowledge and professionally address) the importance of healthy emotional and intellectual development of trainees. The result is claimed to be failures to address serious personal problems and deficiencies in potential candidates for ministry. Such a situation becomes particularly regrettable in situations where normal social development and education are regarded as peripheral to formation for ministry. From the broad scope of responses, there was some acknowledgment of the considerable change that has taken place in the circumstances of entry to priesthood and religious life during the late

1990s.

Professional opinions on the value of screening vary, but all accept that screening is a necessary and helpful tool in the process of examining candidates for religious life. There is no certain way of predicting who will or will not commit acts of sexual abuse. The possibility of being abusive is simply a permanent dimension of the human situation. Screening, however, can provide valuable insight into the psychological and emotional development of the candidate. The phenomenon of child abuse coming to light in society and church over recent years, together with the recognition of widespread abuse in society, are further indications of the wisdom of screening.

It is worth noting that the Cardinal's Commission (1992, pp.19–20) stated quite starkly that *[a] recent review of the facts showed that 50% of the seminarians who had problems in the seminary during the past ten years have become problems as priests.*

Discussing the place of continuing professional development for priests and religious, the views of one religious institute leader are relevant

...the need at all stages of both preparation for and performance of priestly ministry, for procedures to ascertain the sexual adjustment of ministers. Waiting for a calamity to occur is not sufficient. Ongoing assessment is needed for all individually and provision of support provided.

The dysfunctional atmosphere and beliefs that broadly affected Catholics adversely in their sexuality, the horrors of actual sexual abuse that have occurred in the ranks of the clergy, combined with the inherently difficult struggle to selfhood via the path of celibacy, call for far greater and more specific supports to the area of sexual development, spirituality and relatedness.

There is adequate evidence in the literature, from the experiential domain of those involved in the process of formation and, from therapists to demonstrate that the failure of the Church to deal sensitively, but directly, with candidates about issues of personal sexual integration. Church leaders need to acknowledge that this failure has been a definite contributing factor to later sexual offending.

### **The Exercise of Ministry**

Many respondents commented that a particular lifestyle context of religious ministry was applicable to all types of priestly and religious life – across all types of ministry occupation. It was noted that particular and observable features of this lifestyle gave rise to, in the opinion of some respondents, a lack of personal privacy and personal space, an authoritarian atmosphere and, a lack of human warmth and spontaneity in the lives of many priests and religious. It was suggested that a well-integrated personality was especially required in the case of diocesan priests.

It was reported, however, that some priests and religious channel all their energies into ministry activities thereby losing the sense of reflectiveness and spirituality necessary for managing their daily lives. Typical responses highlighted the belief that many priests are unable to manage all the demands made on their own lives. Isolation from their superiors, from their peers, from their ministry, from the people they come in contact with through their ministry and, on occasions, from the realities of everyday living.

More than one therapist respondent commented that during preparation for priesthood and ministry, priests often have not learned, or been taught how, to successfully take on the possession and direction of their own lives. In the case of religious priests and religious brothers, community life is no guarantee of a supportive context for ministry.

Several cases were cited by respondents where religious priests and religious brothers living in community had sought out the company of sexually immature young people (adolescents) outside the community for their socialising. The survey comments reinforced the significance of not maintaining many relationships with adults in ministry, religious community or personal networks for priests or religious who have subsequently been identified as having committed sexual offences against children. A code of conduct that is clear and direct is perceived by many respondents to be available to give guidance on sensitive matters. The study of current practice of other bodies in the helping professions may well be of assistance when considering the adoption of a code eg the two recent (July 1997) sexual misconduct publications from the Health Care Complaints Commission of New South Wales, the Code of Conduct for Clergy from the Anglican Church Diocese of Sydney,

Reference has already been made to the importance and the value of supervision and accountability for all priests and all religious in their pastoral ministry.. However, supervision in ministry remains one of the most difficult issues to discuss with many priests and religious in the Catholic Church. Therapists who work in the general area of sexual offence against children by priests and religious consider that the committing of offences is directly related to the lack of any existing supervision or accountability mechanisms.

Therapists continually stressed the positive benefits, as well as the preventive aspects, that supervision programs can bring, especially to known offenders and those who may be at risk of offending. The issue of establishing adequate and appropriate supervision or accountability mechanisms is one which therapists, as well as lay members of the Church community, are most adamant is an absolute necessity. Their claim is that, apart from fairly infrequent parish or community visitations by bishops and religious leaders, priests in particular have little accountability and, with the possible exception of parish finances,

almost no supervision.

Many respondents claimed the failure to investigate complaints of sexual offences against children is the ultimate expression of lack of accountability on behalf of the Church. Lack of supervision in ministry has to be another significant factor contributing to not just the occurrence of sexual offences against children but, to their continuance.

In this regard the provision of appropriate and regular structured supervision and firm knowledge of the requirements and dimensions of accountability are essential elements in a bishops' and a religious leaders' duty of care towards their priests or their religious, children and adolescents and members of the Church.

### **Personal and Professional Supervision and Accountability**

Supervision in ministry remains one of the most difficult issues to discuss with many priests and religious in the Catholic Church. While many priests and religious view the very ideas of supervision and accountability *vis-a-vis* their own ministry with suspicion and scepticism, therapists who work in the general area of sexual offence against children by priests and religious consider that the committing of offences is directly related to the lack of any existing supervision or accountability mechanisms.

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Two distinct themes arose in relation to the question about supervision in ministry. The first acknowledged the traditional individual nature of priestly ministry, especially as exercised by the largest group of priests, those incardinated into dioceses. The second theme was a highlighting of the almost complete lack of supervision of priests and religious. The lack of supervision of offenders, before and after instances of abuse had been brought to the attention of Church Authorities, drew specific attention from respondents. Both victims and therapists expressed their concern that structures of supervision and support for priests have, for the most part, only been established by Church authorities and leaders after offences have occurred.

Few, if any, priests or religious in Australia would consider themselves to exercise ministry in isolation from a surrounding human and professional context. They almost certainly would have a sense of the requirements of their form of ministry in terms of academic preparation and qualification, liturgical awareness, relationship to the life and projects of their diocese or religious order, etc.

There is an almost complete lack of formal systems of accountability and of supervision in ministry. An independent/isolationist model of ministry is not healthy for, nor does it contribute to, the personal well-being of priests and religious. There is no doubt that in any other social context, such a model would be seen as inadequate by current professional



standards of health care or welfare, as indicated in various Codes of Ethics of professional bodies.

All major professions have Codes of Behaviour. Religious life ministries should be no exception. It is important that all areas of ministry are guided by properly formed Codes of Behaviour, and that appropriate Protocols are in place and known to all for dealing with instances of abusive behaviour including prompt attention to victims.

The Wood Commission (1997, pp.1033–1034) concludes its section on the churches by saying:

No Church can today responsibly exist without a protocol that suitably addresses at least:

- a procedure for receiving and dealing with allegations of sexual abuse, whether raised by the victim, a third party or self confessed perpetrator, to ensure that matters involving criminality are referred to the police for investigation, and that the remainder are suitably investigated and resolved internally;
- the provision of and support for and assistance of victims of such abuse at the hands of the clergy and others holding office within the Church, either as employees or volunteers;
- the provision of treatment, where assessed worthwhile and consented to by the offending member;
- the delivery of education and counselling concerning the risks of sexual abuse and the procedures/facilities earlier outlined, to all members of the Church, and particularly to those who are having difficulties with their own sexual urges, before they fall prey to them;
- the removal of those members for whom an unreasonable risk of harm to children is assessed to exist, from any positions placing them into contact with

children and young people; and that

- independent and effective oversight and monitoring of the operation of the protocols, guidelines and programs developed in this area.

If the present situation is to be seriously addressed, there needs to be a commitment from Church authorities and leaders to create an appropriate supportive environment for those ministers in their care. Church leadership must recognise that it is not simply a matter that can be addressed through the education of individual ministers in civil and criminal requirements, so that they can individually conduct themselves appropriately.

### **Overview of How Well the Catholic Church in Australia has Responded to Allegations of Child Sexual Abuse Involving Priests and Religious**

The experience of child sexual abuse for the Australian Catholic Church has been of more recent occurrence and has followed a somewhat similar, yet less extreme, pattern to that which has emerged in northern America.

In recent years in Australia there has been a discernible growing awareness of the personal rights of children, an emergence of the need for clearer codes of professional ethics for practitioners and, the establishment of public tribunals to deal with complaints, such as the Health Care Complaints Commissions in various states.

During this period there have been allegations made to Church authorities concerning priests and religious with respect to child sexual offences and there have been public disclosures of priests and religious who have committed child sex offences. Some of these public disclosures, after due investigation by civil authorities, have proceeded to criminal and civil hearings.

At the same time as these occurrences were taking place, there have been instances of allegations

made by the media which claim the Australian Catholic Church has acted slowly, reluctantly or, in some cases, not at all to allegations of child sexual abuse. A number of media reports (e.g. 'The Ultimate Betrayal' screened by ABC on the *4 Corners* program) have even proposed that some Church authorities have acted with complicity in minimising or refusing to accept information brought to them.

The number of quite public disclosures, allegations, trials and convictions relating to sexual offences against children over the past four to five years, has forced Australian society to acknowledge the magnitude of the problem, as evidenced by the establishment of public inquiries into paedophile activities in a number of Australian states. The findings of these inquiries and the public indignation that follows such revelations create a protective community awareness about children and sexual abuse. Furthermore, this awareness has resulted in the community holding a strong expectation that such offences will not be tolerated and that those whose actions do not measure up to this standard can expect no sympathy.

These expectations were reiterated during the Wood Royal Commission. The second instalment of the Final Report of the New South Wales Royal Commission, publicly released on 26 August 1997, includes a chapter titled 'The Churches' (1997, pp.991ff).

Justice Wood was not directly examining factors that lead to offences against children, but rather the way in which disclosures and allegations were managed after offences had occurred. The 'Wood Report' represents the first instance in which a competent independent statutory body has publicly and critically analysed the churches' handling of offences against children. Consequently, some of its findings are pertinent to the present discussion. He has documented the following the reactions of the churches to allegations of sexual abuse involving children:

- ❑ outright denial of complaints;
- ❑ minimisation and avoidance of complaints;

- ❑ regarding sexual abuse as moral failure rather than criminal offence;
- ❑ defending the institution of the church;
- ❑ disguising the reality of offence by using euphemistic language to describe the offence and to minimise the offence (e.g. *Professional Standards Committee* or *Special Issues Sub-Committee*);
- ❑ trying to deal with accusations within the forum of the church;
- ❑ invoking the confidentiality of the pastoral relationship;
- ❑ respecting victims' wishes that police not be notified; and,
- ❑ giving priority to insurance and liability concerns rather than putting victims first.

Observations made by respondents during the course of the present research about the way the Catholic Church responds to allegations of child sexual abuse by priests and religious endorse the applicability of the above reactions to the way the Catholic Church in Australia has dealt and continues to deal with allegations of sexual abuse.

The Royal Commission also examined the incidence of sexual abuse involving children in the churches and reviewed a number of case studies of offences by church ministers, before turning to the protocols that are in place in various groups to deal with instances where allegations are made.

Implicitly, the 'Wood Report' makes strong assertions about the sorts of environments that exist within Church structures which contribute to the occasioning of sexual abuse. It asserted that the incidence of offences against children within the churches is related to attitudes of denial, minimisation, secrecy and institutional protection. It associates the existence of child sexual abuse with ignorance and naïvety on the part of Church authorities and leaders about aspects of human sexuality and, specifically, about the behaviour of fixated and regressed paedophiles.

It also issued a clear warning that allegations of criminal abuse cannot, and must not, be dealt with by the institution in which they occur. Rather, allegations should be acted upon by the proper civil authorities. The necessity for adequate protocols to be in place in the churches and for ministers to be fully informed of them, is insisted on. The 'Wood Report' urges all churches to look at the procedures for dealing with allegations and investigation of sexual offences involving children that apply in the wider society. Justice Wood's observation that sexual abuse can no longer be regarded by Church Authorities as a problem of *moral failure* requiring pastoral help – it is a criminal offence and the processes of criminal and civil law must be applied (Wood, 1997, p.996) are strongly endorsed.

Finally, the Wood Royal Commission suggests that churches certainly have tended to defend the offender and not give first priority to victims; care for victims *at best has been patchy, and at worst uncaring (loc. cit.)*.

In the light of its commendation of the efforts being made to address instances of sexual offences against children, the Royal Commission made no specific recommendations in respect of the churches, other than stressing the significance of formal and comprehensive protocols for dealing with allegations and formal processes for acceptance, education and supervision of ministers.

Church authorities need to recognise that the procedures contained in Towards Healing operate in parallel to civil and criminal requirements even though the procedures do recognise that civil investigation may be necessitated<sup>1</sup>. There is a danger inherent in operating a parallel system that the Church may compromise itself in the way it deals with allegations of sexual abuse.

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<sup>1</sup> n4.3 All Church personnel shall comply with the requirements for mandatory reporting of child sexual abuse that exist in some States/Territories. The appropriate Church authority shall also be notified of any such report.  
(Towards Healing, *op. cit.*, p.9)

A number of victim respondents raised questions about the interpretation of some Clauses contained in Towards Healing. The following clauses from Towards Healing have been cited by victims and their families as being open to misinterpretation:

- n15** A compassionate response to the victim must be the first priority in all cases of abuse. A balance must be kept between the primary concern for the needs of the victims and the effort to ensure that the response is fair and just to all parties.
- n17** Whenever it is established, either by admission or by proof, that sexual abuse did in fact take place, the Church authority shall immediately enter into dialogue with victims concerning their needs and ensure they are given such assistance as is demanded by justice and compassion....

Some victims have interpreted these procedures as exemplifying the Church's preferred option to maintain secrecy. Many victims are firm in their belief that wherever possible the Church would prefer to deal with allegations and settle claims out of Court.

With these comments in mind, it was no surprise to find abundant evidence from the victims of such offences indicative of a strong scepticism towards the Church's resolve to deal justly with their (i.e. victims') complaints.

Despite the issuing of *Towards Healing* some victims remain highly critical of Church Authorities because the Church still does not take their allegations of sexual abuse seriously. Establishing a separate and internal complaints mechanism has not always reassured victims and their families that their complaints will be dealt with, and seen to be dealt with, in an open and just manner.

It must be acknowledged that the bishops and religious leaders do not regard Towards Healing

as a definitive document but, rather, a document which is open to ongoing revision as a means of improving the response of the Church to sexual offences committed by priests and religious (ACBC & ACLRI, 1996b; p.1). However, many victims of sexual offences by Church personnel are impatient with, and mistrustful of, any departure from clear civil and criminal provisions.

A considerable amount of work still needs to be undertaken by Church Authorities before victims will be confident that the Church's own system for dealing with allegations, and proven instances, of sexual abuse against children reflects a proper commitment to addressing these problems with true compassion and justice.

### **Need for Future Specific and Targeted Research**

The present study used the phrase 'priests and religious' to designate those who exercise ordained or other ministry. In respect of sexual offences against children, the broad group defined by the terms 'priests' and 'brothers', of whom there are currently some 4,750 in the Australian Catholic Church do not cover a homogeneous group – nor is it advisable to study them as such.

Future research which focuses on these specific sub-groups of priests and religious needs to be conducted. The principal reason for this approach is the recognition that the existing patterns of recruitment, education and formation for ministry, education for celibate lifestyle, the supervision and support mechanisms currently in place to assist in ministry, differ from diocese to diocese and from one religious institute to another.

Future controlled research should also be conducted with priest and religious child sex offenders in order to firmly establish whether any causal links exist between the psychopathology of priest and religious child sex offenders, the environments in which they commit these offences and the interaction of these two types of factors with the 'institutional culture' of the Church. This will require access to offenders in a therapeutic setting.

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## APPENDIX 1

### Description and Criteria for DSM-IV Listed Paraphilic Disorders<sup>1</sup>

Paedophilia refers to the recurrent, intense sexual urges and arousing fantasies, of at least six month's duration, involving sexual activity with a prepubescent child. True paedophilia requires the child to be under the age of 16 years, and a five year difference between the age of the child and offender.

Paedophiles have individual preferences for one of three specific age groupings; under six/seven years, seven to 11 years, and 10/11 to 16 years of age.

#### Diagnostic criteria for F65.4 Paedophilia

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving sexual activity with a prepubescent child or children (generally age 13 or younger).
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- C. The person is at least 16 years old and at least 5 years older than the child or children in criterion A.

**Note:** Do not include an individual in late adolescent involved in on-going sexual relationship with a 12- or 13- year old.

*Specify if:*

**Sexually Attracted to Males**  
**Sexually Attracted to Females**  
**Sexually Attracted to Both**

*Specify if:*

**Limited to Incest.**

*Specify type:*

**Exclusive Type (attracted only to children)**  
**Non-exclusive Type**

Acts may vary from fondling of genitals/breast over clothing, to masturbation, oral-genital contact, and digital or penile penetration of vagina or anus. The intent and repetitive occurrence of behaviour differentiates paedophilia from 'accidental' bodily contact or socially inappropriate behaviours, e.g. hugging, encouraging kisses from children without sexual arousal.

Informed consent is assumed to be absent given the child does not know and is incapable of understanding the full implication of what he/she is consenting to and does not have the power

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<sup>1</sup> Due acknowledgement is made to the American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, International Version. Washington, DC, American Psychiatric Association, 1995.

to refuse involvement (Finklehor, 1979).

The incidence and prevalence of child abuse varies considerably. Estimates range from six percent to 62 percent for females, and three percent to 31 percent for males (Peters *et al.*, 1986). Variance accounted for by differences in definition of abuse, selective samples, and data collection methods. Seventy percent to 80 percent of offenders are relatives or acquaintances of the child/family (e.g. baby-sitters, friends of the parents). Homosexual paedophiles often frequent amusement parlours, cinema complexes, video game parlours, and other environments frequented by children.

Most offenses are unreported; 11 undetected offenses to one conviction. Heterosexual paedophilia (Male adult– female child) twice as common as homosexual paedophilia.

However, evidence indicates that a small number of offenders account for a disproportionate number of offenses. For example, in a study of 561 sexual offenders, Abel and Rouleau (1990) noted that 224 paedophiles (male victims) reported a total of 4,435 completed acts, and 155 paedophiles (female victim) 29,981 victims. Of the incestuous paedophiles, 158 (female victims) reported 286 victims, and 44 (male victims) 75 acts. In one sample of 175 convicted offenders, 50 percent had 10 or more victims, 14 percent 50 or more, and six percent between 100 to 300 victims.

It would appear that non–incestuous paedophilia offend against many children but report fewer offenses per child, compared to incestuous paedophiles who have fewer victims but more offenses per child. In 10 percent to 30 percent of cases, the children are abused by more than one offender. There is no estimate of the prevalence of paedophiles in the general community.

Several subtypes of paedophiles have been suggested – refer Table 1 for description. The primary divisions has been based on the relationship of the victim to the offender and on the sexual orientation of the offender; incestuous versus non–incestuous paedophiles; and homosexual versus heterosexual paedophiles.

A further distinction has been made by Groth (1982) between the chronic repetitive pattern of abuse related to deviant arousal patterns versus the episodic pattern related to non–sexual stresses and impulsive acts acted upon under opportunistic circumstances. As Salter (1988) notes, the terms describing these categories may differ but the literature has accepted the broad division of paedophiles along these lines.

However, it must be emphasized that none of these categories are definitive or mutually exclusive. They must be used as a general guide in diagnosing and dealing with paedophiles.

Although there are overlapping features to be found between groups, the main advantage of such classificatory systems is that it provides a framework within which assessment can take place and management strategies designed. It also provides a useful demarcation in terms of assessing likely outcome to treatment with the episodic patterns more response to interventions compared to the chronic deviant arousal pattern.

Paedophilia Types					
F I X A T E D  T Y P E	1.	Primary Orientation to children	R E G R E S S E D  T Y P E	1.	Primary Orientation to age appropriate person.
	2.	Interests begin in adolescence		2.	Paedophilia emerges in adult
	3.	No persistent stress or subjective distress		3.	Stress and distress evident. Poor coping strategies
	4.	Offenses premeditated		4.	Impulsive, episodic
	5.	Close identification with child-parental figure		5.	Shift of identification from adult to child
	6.	Males primary target		6.	Females primary target
	7.	No age appropriate sexual behaviour		7.	Age appropriate sexual behaviour
	8.	Immature, poor socio-sexual relationships		8.	Underdeveloped interpersonal relationships

**Table 1: Description of types of paedophilia**

***Sadistic Offender:*** Fortunately represents a minority of paedophiles. Displays aggressive traits and antisocial personality features. Sexually aroused by aggressive acts and associated with high risk of physical damage/assault/death. Child is not usually known to offender, force used in abduction, primary aim is sexual gratification. Most likely to appear before the courts rather than mental health professionals. In a minority of cases, the person may be distressed by aggressive urges/fantasies and seek treatment. Response to treatment is poor.

***Regressed Offender:*** History of normal adolescence and age appropriate sexual and social relationships. Married. May react with feelings of inadequacy in response to environmental stresses, (e.g. unfaithful wife, loss of employment) and then engage in impulsive or opportunistic paedophilic acts. Excessive alcohol consumption may contribute to impulsivity. Usually heterosexual (female victims). Good prognosis if stress precipitants identified and managed.

***Fixated Offender:*** Fixated at early stage of psychosexual development. Manifests persistent chronic interest and arousal to children since early adolescence. Absence of precipitating factors in episodes. Males victims more typical. This group shows an affinity for socializing with children, is considered immature and has poor adult interpersonal skills.

Many charismatically attract children with shows of affection and offer of gifts. Gradual progression from mild physical contact to oral-genital

acts followed by intercourse. Poorly motivated for treatment and outcome poor. Adolescent offenders most resistant to treatment.

**Others:** Paedophilic type behaviours may occur in the context of senility, intellectual dysfunction or organicity.

## **Exhibitionism**

The term Exhibitionism (indecent exposure) was introduced by Lasague (1877) to describe the repetitive deliberate exposure of the genitals to achieve sexual gratification in the absence of any attempt to establish a relationship. During exposure, the penis may be erect or flaccid and masturbation may accompany the act or be engaged in later with fantasy. It is specifically a male disorder and the commonest of all sex offenses accounting for 33 percent to 50 percent of arrests.

### **Diagnostic criteria for F65.2 Exhibitionism**

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving the exposure of one's genitals to an unsuspecting stranger.
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Onset is in adolescents with a peak between ages 15 to 30 years. Onset after 30 years is rare except in cases of organicity and dementia. Multiple paraphilias may be present in exhibitionism, and in a small minority of cases, a progression to more serious offenses is suggested (although these cases evidence earlier sadistic tendencies).

Exhibitionist expose themselves to victims with a preferred characteristic, such as appearance (e.g. seductively dressed), age or location. Victims tend to be strangers, either single adult females or single and/or groups of female and/or male children. Forty percent of victims are females (teenagers to young adults). Offenders do not re-expose to the same individual.

Only four percent report expose under the influence of alcohol.

The frequency of offenses vary considerably, with some reporting intermittent exposure, and others, almost 50 to 100 over a month period. Only five percent of incidents are reported.

Many exhibitionists are married and describe satisfactory marital and sexual relationships but most are considered generally to be socially and sexually inadequate, introverted, shy, unassertive and passive.

The primary motive underlying exhibitionism is the sexual excitation associated with exposure and the reaction of the victim: shock, surprise or mild fear. There is no intent to harm or establish verbal or physical contact but psychological trauma may result in vulnerable victims. As a group exhibitionists are not sexually aggressive but in rare instances, aggressive behaviour may be provoked if the victim laughs or attempts to demean the exhibitionist. Contact with



victims is unusual but in one patient, six females out of 100 exposure victims established conversation and/or masturbated the offender.

Acts may be truly impulsive (even inexplicable to the offender), or premeditated. Impulsive exposure may occur without regard to risk of apprehension or consequences. Locations of exposure include shopping car-park, parked vehicles, and homes. In premeditated cases, the offender drives around for several hours searching for an ideal location/victim, parks his car ahead of the victim, and exposes (with or without masturbating) as the victim passes. Some exhibitionists will wear loose clothing or no underwear and then sit opposite their victim unobtrusively or 'inadvertently' being exposed.

Rooth (1973) identified two types of exhibitionists:

- (i) an inhibited males who attempts to suppress his impulses and feels guilty and anxious about his behaviour. Exposes flaccid penis without masturbating.
- (ii) less inhibited, exposes erect penis and masturbates. Feels little or no remorse. This type displays other paraphilias and is more likely to engage in more serious offenses.

**Aetiology:** Aetiology not known. Behavioural, psychoanalytic models offered.

**Treatment Outcome:** Approximately 50 percent to 60 percent respond to treatment or to the social trauma associated with conviction and subsequently do not re-offend. Prognosis is poor when victims are children and very poor if there have been two or more convictions.

## **Voyeurism**

The recurrent, intense sexual urge, fantasy or acts involving the observation of unsuspecting people in the process of undressing, naked or engaged in sexual activity. Also referred to as 'Scotophilia', 'Inspectionalism', 'Peeping Tom' and 'Flashing'. Exhibitionism and voyeurism can occur in the same individual.

### **Diagnostic criteria for F65.3 Voyeurism**

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving the act of observing an unsuspecting person who is naked, in the process of disrobing, or engaging in sexual activity.
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

As in Exhibitionism, contact with the victim is not sought, and masturbation may occur during the act or later. The key feature is the thrill/excitement generated by the risk associated with the unobtrusive observation. Voyeurs come to the attention of authorities and clinicians when caught harassing or trespassing. Voyeurs do not experience similar levels of arousal when viewing

pornography or strip-tease. Some voyeurs cruise around for three to four hours seeking an opportunity, going to extreme lengths to peep, for example, climbing drainpipes.

Onset is in early adolescence, usually by age 15 years. Frequently, voyeurs report an incidence of arousal in adolescence at the sight of a woman undressing.

Voyeuristic fantasies during masturbation reinforce voyeuristic tendencies. Subsequently, voyeuristic opportunities may be deliberately sought. Some may report impulsive acts, but most place themselves in high risk situations ('casually' walking past units/motels) or in a premeditated fashion, cruise for hours seeking opportunities. Only two percent fail to report co-existing paraphilias, usually exhibitionism and frottage.

Voyeurs appear to be hetero-sexually immature and frustrated, lack social/sexual skills, have a poor relationship with their father and an over protective mother, have low self-esteem and are self-critical. They tend to be young and chronically masturbate. Feelings of inadequacy and inferiority are prevalent, and voyeurism represents a safe distancing from a threatening sexual contact.

No known aetiology for voyeurism. Behavioural formulations emphasize classical conditioning in preadolescence, and instrumental conditioning maintaining the behaviour in the context of an individual with anxieties and deficits in interpersonal skills. Psychoanalytic formulations suggest the voyeur is fixated at the phallic stage of development.

### **Frottage**

Frotteurism is the derivation of sexual gratification from the rubbing of one's genitals against an unsuspecting/non-consenting person, or, in Toucherism, the fondling of another person's body. Generally frottage occurs unobtrusively in crowded circumstances with the victim ignorant of the act. In Toucherism, the offender may impulsively fondle a woman's breast or reach under her dress.

#### **Diagnostic criteria for F65.8 Frotteurism**

- |   |
|---|
| <p>A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving touching and rubbing against a nonconsenting person.</p> <p>B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.</p> |
|---|

Masturbation occurs later accompanied by fantasy of the act. In a few cases the victim may respond to the frotteurs actions and engage in similar behaviour or in surreptitious mutual masturbation.

Most acts occur between adolescence and age 25 years. Frottage leads to legal action and, unless directed by the courts, does not often come to the attention of clinicians. Holmes (1991) argues

that frotteurs do not respond well to treatment and may move on to other types of serious offenses. No known aetiology.

## **Fetishism**

A fetishist is one who obtains sexual gratification from touching, smelling or handling inanimate objects, most commonly female underwear, rubber and leather. Smells (associated with panties) may be included as a component. Onset is in childhood adolescents when excitement/arousal is associated with exposure to female underwear. Offenders may borrow items from their sister or mother, steal from shops or clothes-lines, or purchase them.

The fetishistic item is used during masturbation or to enhance arousal prior to/during intercourse. Offenders may be shy, introverted or have difficulty in establishing adequate relationships with females. Most fetishes remain unnoticed or disappear with maturation in the context of successful relationships.

### **Diagnostic criteria for F65.0 Fetishism**

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving the use of non living objects (e.g. female undergarments).
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- C. The fetish objects are not limited to articles of female clothing used in cross-dressing (as in Transvestic Fetishism) or devices designed for the purpose of tactile genital stimulation (e.g. a vibrator).

The term 'Partialism' is used when the fetish relates to certain non-genital parts of the body, e.g. feet, hands or hair. A fetish to feet is the most commonest. In uncommon instances, a fetish to an amputee ('Acrotomophilia') or self-amputation ('Apotemnophilia') is described.

Fetishists come to attention when they commit theft from shops or clotheslines ('snowdropping') to procure fetishistic items, or when partners object to the use of items, e.g. wearing leather or rubber garments.

## **Transvestic Fetishism**

This condition rarely presents problems in adults except when an effective relationship has not been established due to personality problems or intellectual disability, or in response to apprehension for theft of female clothing.

Onset is in early childhood or adolescence, occurs in heterosexual males, and is to be distinguished from the gender identity disorders of adolescence or adulthood such as transsexualism and heterosexual transvestism. However, in some cases the fetishistic component disappears with the cross-dressing functioning as an anxiety reduction act. When this occurs the diagnosis of a gender identity disorder should be considered.

Arousal is limited to female clothes used in cross-dressing. A fetishistic component is present with masturbation accompanying the cross-dressing. Fantasies of other males being attracted to the person may be present.

#### Diagnostic criteria for F65.1 Transvestic Fetishism

- A. Over a period of at least six months, in a heterosexual male, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving cross-dressing.
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

*Specify if:*

**With Gender Dysphoria:** if the person has persistent discomfort with gender role or identity.

The condition is dimensional in that the cross-dressing may range from occasional solitary wearing of clothing to subcultural involvement with transvestic organisations. Some homosexual activity may be prevalent.

#### Sexual Masochism

The essential feature of this disorder is the recurrent intense sexual urges, arousal and fantasies associated with suffering pain or humiliation. Masochistic acts may be carried solitary (i.e. self-flagellation, autoasphyxia, erotic piercing) or with a partner (e.g. bondage, discipline, urinated or defecated upon).

Autoasphyxia (also known as 'hypoxophilia' or 'erotic asphyxiation') involves the heightening of orgasm/arousal by use of devices designed to induce reduced oxygen through strangulation, suffocation or chest compression during sexual activity, either masturbation or in intercourse. Mechanism of action not known.

Predominantly males (90 percent) under age 30 years (60 percent single) but some female cases identified. However, failure of release of strangulation through overexcitement by self or partners have resulted in death. Hazelwood *et al.* (1983) describe 132 such fatal cases. Evidence of partial cross-dressing, pornographic material and some form of bondage noted.

#### Diagnostic criteria for F65.5 Sexual Masochism

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving the act (real, not simulated) of being humiliated, beaten, bound, or otherwise made to suffer.
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Erotic piercing ('Infibulation') involves the piercing or insertion of pins or chains through the flesh, nipples, labia, clitoris or penis. Tattooing is viewed by some as a form of infibulation. Cases have been noted of pins inserted into the urethra or scrotum.

Childhood abuse, female identification, submissiveness and depression relieved by mutilation are considered some aetiological factors. Fetishism, transvestic fetishism and sadism often coexist.

### **Sexual Sadism**

This condition is characterized by the experience of sexual arousal associated with the infliction of pain, suffering or humiliation to another, either a compliant or non-consenting partner.

#### **Diagnostic criteria for F65.5 Sexual Sadism**

- A. Over a period of at least six months, recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving acts (real, not simulated) in which the psychological or physical suffering (including humiliation) of the victim is sexually exciting to the person.
- B. The fantasies, sexual urges, or behaviours cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Behaviours range from dominance over another, mild spanking, whipping, to cutting, strangulation, torture, mutilation, killing.

In rape, distinguish those who derive sexual arousal from suffering (10 percent of cases) associated with excessive aggression or violence from those of non sadistic rape where sexual gratification is primary motivation and aggression sufficient only to subdue victim is present.

When the disorder is severe and in the presence of an antisocial personality disorder, the risk of serious injury/death is high. Subtypes found – issues of power and humiliation, displaced aggression, impulsive/opportunistic, psychopathic.

## APPENDIX 2

### Survey Instrument and Accompanying Letter

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#### *Sample Letter*

19 December, 1996

Dear –

Following the completion in April 1996, of the research study which has led to the establishment of a National Treatment Program for Priests and Religious with Psycho-sexual Disorders, the Australian Catholic Bishops' Conference and the Australian Conference of Leaders of Religious Institutes have commissioned a research study of the "factors specific to the Catholic Church which might lead to sexual abuse by priests and religious".

Two organisations, Centacare Sydney and the Australian Catholic Social Welfare Commission, have been asked to conduct and coordinate the second research study. The first stage of the present study consisted of a comprehensive search and review of the clinical and other literature and that is now complete.

As a member of the Research Team, I am writing to you to formally seek your active participation in the second stage of the study, entailing active fieldwork through an extensive consultation process.

The Research Team is inviting contributions from a wide range of people who have an involvement with and/or experience of the Catholic Church in Australia and who may be in a position to address some of the factors thought to be relevant to instances of sexual abuse committed by priests and religious.

The people being consulted in the field work/information-gathering stage of the research include professional counsellors and clinical practitioners; victims; survivor advocacy groups; members of Church communities; priests; male and female religious; Church leaders; and, directors of seminaries or formation programs.

The study is concerned with identifying possible factors leading to sexual abuse by priests or religious in instances of:

1. *Child criminal sexual abuse* of either:
  - pre-pubescent children or,
  - post-pubescent children or young people under the age of consent. (Note: the age of consent varies across Australian state jurisdictions);

2. *Adult sexual abuse or Professional boundary violation.*

The issues surrounding each of these two categories of sexual abuse are understandably quite different. For the purposes of the research, it will be important to identify whether responses are dealing with child sexual abuse or adult sexual abuse. Consequently, your separate comments are invited on each aspect, using the two enclosed copies of the questionnaire provided.

The questionnaire has been developed in an open-ended format and raises some possible issues for your reflection and response. These issues are offered merely as guidelines and we invite you to make your comments as free and wide-ranging as you wish, including any factors your experience suggests may have played a role in causing individuals to commit sexual abuse.

All survey responses will be received anonymously and treated in the strictest confidence in accord with normal confidentiality requirements applying to academic research. The Research Team also makes a commitment to dispose of all material once the research is complete.

Should you prefer to make direct contact rather than a written response, we invite you to telephone myself in Sydney on (02) 9283-3099 or Toby O'Connor in Canberra on (06) 285-2399, so that a personal interview or some other method of consultation can be arranged.

The results of this study will be reported to the Bishops and Religious Leaders in April, 1997. It is, therefore, essential that your responses reach the Research Team by **Friday 7 February, 1997**. Please use the enclosed reply-paid envelope.

Thank you for your support of this research.

Yours sincerely,

Mr W.J. Johnston  
on behalf of the Research Study Team

# STUDY OF THE FACTORS SPECIFIC TO THE CATHOLIC CHURCH WHICH MIGHT LEAD TO SEXUAL ABUSE BY PRIESTS AND RELIGIOUS

## PART 1      CHILD SEXUAL ABUSE

Thank you for your participation in this survey. In your comments, please ensure privacy and confidentiality for both yourself as writer and the person or persons who are the subject of your remarks. Would you please indicate the scope of your comments by specifying:

Comments relate to Sexual Abuse of :-

- |                             |                          |
|-----------------------------|--------------------------|
| Pre-pubescent children      | <input type="checkbox"/> |
| Post-pubescent young people | <input type="checkbox"/> |

Comments are made from the perspective(s) of:

- |                      |                          |                             |                          |
|----------------------|--------------------------|-----------------------------|--------------------------|
| counsellor/therapist | <input type="checkbox"/> | bishop/leader               | <input type="checkbox"/> |
| priest               | <input type="checkbox"/> | religious (male)            | <input type="checkbox"/> |
| religious (female)   | <input type="checkbox"/> | director seminary/formation | <input type="checkbox"/> |
| victim               | <input type="checkbox"/> | advocacy group              | <input type="checkbox"/> |
|                      |                          | member of Church community  | <input type="checkbox"/> |

## PERSONAL BACKGROUND OF PRIESTS AND RELIGIOUS

The importance of the years of early childhood on adult attitudes and behaviour is universally recognised. Studies of sexual abuse have also focused on aspects of childhood and family life as having significant links with commission of abuse by adults. In relation to your knowledge of cases of sexual abuse by priests or religious, could you comment on offenders' :-

**Family Background: relationships with parents and siblings**

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**Instances of personal childhood physical or sexual abuse**

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**Emotional and intellectual maturity when entering priesthood or religious life**

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**Sexual Orientation, affective and sexual development**

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**Personal history of physical and mental health**

**ADULT PERSONAL LIFE**

Sexual abuse is essentially a form of human behaviour. One of the clear conclusions of the Literature search and review for the present study is that the human factors leading to instances of sexual abuse by Catholic priests and religious are essentially the same ones as apply to the community in general. This section of the survey invites you to reflect and comment on the adult personal life of priests and religious who sexually abuse.

**Significant characteristics of personality and behaviour**

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**Social integration, personal adult networks**

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**Perception of and commitment to celibacy**

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**Age and its relation to offence**

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**Addictive behaviour patterns; gambling, alcohol, other substances. Their possible association with offence**

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**State of physical and mental health**

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**PRIESTHOOD/ RELIGIOUS LIFE**

The way in which priests and religious experience and live out their commitments, especially the details and context of their ministry, is also a crucial dimension for comment. This is all the more relevant, given that distinctions between ministerial life and personal life can be often unclear, almost to the point of being non-existent. It has also been suggested that some of the structures and practices of priesthood and religious life in our church contribute to the contexts in which sexual abuse can occur. From your knowledge of priests/religious who have committed sexual assault, please comment on:

**The lifestyle context of priests and religious**

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**Workload: sense of private life, private responsibility, personal social network**

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**Particular dimensions of stress and frustration**

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**Morale among priests and religious: sense of professionalism**

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**Professional supervision in ministry: accountability and support**

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**Religious power and authority in relation to abuse**

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## OFFENCE AND READMISSION TO MINISTRY

Bishops and religious leaders seek and justice and protection for victims, potential victims and communities and, where possible, reconciliation for offenders. The case against return to ministry is strongly argued by many professionals and victims' advocacy groups. How significant in your experience has return to ministry been as a factor in further instances of abuse?

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## OTHER COMMENTS

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**ONCE AGAIN, THANK YOU FOR RESPONDING TO THIS  
SURVEY**

**PLEASE RETURN IN THE ENVELOPE SUPPLIED  
BY FRIDAY, 7 FEBRUARY, 1997**