# Measuring & Exploring Moral Injury Caused by Clergy Sexual Abuse

Marcus Mescher Kandi Stinson Anne Fuller Ashley Theuring

# **Acknowledgments**

**THIS PROJECT WOULD NOT HAVE BEEN POSSIBLE** without the support of many generous individuals. We would like to thank the Fordham *Taking Responsibility* team for this opportunity to develop a groundbreaking instrument to measure moral injury. The idea for this project originated with Dr. Gillian Ahlgren, whose sensitivity to survivors of sexual abuse and spiritual abuse informed the vision and motivation for undertaking this research. We are very grateful to Dr. William Madges, who helped shepherd the initial stages by bringing our research team together and drafting a successful grant proposal. Thanks, too, to Cheryl McElroy for sharing her meticulous attention to detail and grant navigation expertise over the last few years and to Dr. Paul Schutz for composing the final report.

**Dr. Kandi Stinson** did the lion's share of work to complete the IRB applications and secure IRB approval for both the quantitative and qualitative components. This project would not have gotten off the ground if it weren't for her tireless efforts to ensure that we delivered a safe and effective survey and interview protocol. **Dr. Marcus Mescher** developed the moral framework to measure moral injury in our quantitative and qualitative research component, helping us examine how moral injury impacts self-image, moral cognition, agency, and relationships with God, others, and institutions. **Dr. Anne Fuller** played a crucial role in designing the instrument to measure moral injury and to expertly analyze the data we collected. **Dr. Ashley Theuring** attentively facilitated the interviews with survivors of clergy sexual abuse and led the coding to help us detect key themes, trace connections, and paint a clearer picture of the dimensions of moral injury.

A NUMBER OF GRADUATE STUDENTS graciously made time to help with this project. We are especially thankful to Jonathan Hesford (in theology) for his work on collecting and organizing our research into moral injury and clergy sexual abuse. Skyler Clark, Rachel Wolen, Giovanna Marin, Katie Saba, and Shannon Carley (in clinical psychology) dedicated a lot of careful work and shared helpful insights in the process of transcribing and coding our interviews. **Our spouses and families** are also deserving of our thanks, given all the hours this research required and their love that helped sustain our labors over the past two years.

WE WOULD ALSO LIKE TO ACKNOWLEDGE all our participants, especially the survivors who completed our survey and were interviewed, as well as our external partners who helped us recruit participants in our survey and interview. There are too many to name here, but we especially appreciate the folks involved with SNAP, Awake Milwaukee, and survivor networks in the Twin Cities, Buffalo, and Pittsburgh, for their support. Finally, we express our deepest appreciation to the survivors of clergy sexual abuse who shared their experiences with us. We hope that our efforts will bring about greater transparency, accountability, and healing—as well as help create the conditions for a church that is safe for everyone.

# **About the Authors**



**Marcus Mescher (co-principal investigator)** is associate professor of Christian ethics at Xavier University (OH), specializing in Catholic social teaching and moral formation. In addition to earning his M.T.S. and Ph.D. at Boston College, he worked in parish youth ministry and college campus ministry for almost ten years. He is the author of more than a dozen academic essays and book chapters as well as many popular articles on topics ranging from the ethics of marriage and family life to the moral impact of digital devices to practicing Ignatian spirituality in healthcare settings. His first book, *The Ethics of Encounter* (Orbis, 2020), proposes how to build the "culture of encounter" championed by Pope Francis in pursuit of an inclusive and equitable "culture of belonging."



**Kandi Stinson (co-principal investigator)** is Professor of Sociology in the Department of Race, Intersectionality, Gender, and Sociology at Xavier University (OH). She completed a Ph.D. in Sociology at the University of North Carolina – Chapel Hill. Dr. Stinson taught at Xavier University from 1988 through 2022, serving in a variety of leadership positions on campus, including most recently as Program Director of Sociology and Faculty Director of the Center for Teaching Excellence. Her areas of specialty include both quantitative and qualitative research methods, gender, the sociology of health, and the sociology of religion.



Anne Fuller is assistant professor in the School of Psychology at Xavier University (OH). She earned her Ph.D. in clinical psychology from Loyola University Chicago in 2017. Dr. Fuller's research interests include community-based prevention and intervention programs as well as risk and resilience factors that influence children's, adolescents', and emerging adults' mental health. She has also conducted research and received clinical training related to experiences of trauma among youth.



Ashley Theuring is assistant professor of theology at Xavier University (OH), specializing in constructive and practical theologies. She completed her doctorate at the Boston University School of Theology in the Practical Theology program. Her first book, entitled *Fragile Resurrection* (Wipf and Stock, 2021), explores the question "What constitutes hope after domestic violence?" Dr. Theuring's theological research is informed by her past work at a rape, crisis, and abuse center, Women Helping Women of Hamilton County, where she was as an advocate and educator. Her research continues to be informed by contemporary communities of trauma survivors and focuses on exploring religious practices, meaning making, and survival in response to trauma.

# **Table of Contents**

- 1 Executive Summary
- **3** Background: Stages of Development
- 5 Method & Key Findings
  - 8 Moral Confusion
  - 9 Moral Agency
  - 9 Moral Identity
  - 10 Possible Implications for Moral Injury in General
- 12 Visual Representation of Key Findings
  - 13 Quantitative Results
  - 15 Qualitative Results
- 16 Reflections & Recommendations
- 19 Directions for Future Research



Copyright © 2022, Marcus Mescher, Kandi Stinson, Anne Fuller, and Ashley Theuring



# **Executive Summary**

MORAL INJURY RESULTS FROM A BETRAYAL OF TRUST, disrupting one's beliefs and moral compass. It comprises persistent psychological and emotional distress, moral confusion, spiritual anguish, social alienation, and distrust for institutions. Moral injury overlaps with and extends beyond post-traumatic stress disorder, which inadequately spans the psychological, emotional, moral, spiritual, behavioral, and relational dimensions of human personhood.

While the majority of research on moral injury has focused on soldiers' experience in combat, it has recently been explored in various professions ranging from healthcare to education to law enforcement. At present there are only a few, limited instruments to measure moral injury among civilians. To our knowledge, our instrument is the first to measure moral injury caused by clergy sexual abuse and its concealment.

In particular, this pilot study aims to measure moral injury as it relates to the moral conscience, which means "to know together." For this reason, our instrument explores moral injury on three levels—intrapersonally, interpersonally, and transpersonally—intent on examining the impact of clergy sexual abuse and its concealment by officials in the Catholic Church on relationships and our collective sense of what we "know together." Denying people the truth of what has happened deadens the moral conscience and undercuts the moral resources to respond to survivors and all those impacted with compassion and solidarity.

**OUR RESEARCH SHOWS** that clergy sexual abuse caused moral injury to survivors and that moral injury can be detected among other individuals, including those who work for the church at the diocesan or parish level as well as university students. We measured moral injury by addressing the following dimensions of the moral life: moral identity (the sense of one's inherent goodness or the experience of shame); moral perception and reasoning (the ability to make sound moral judgments or the experience of moral confusion/disorientation); moral agency (the capacity to exercise free will or the experience of constraint/futility); moral relationships with others (feeling safe and being able to trust others or the experience of betrayal, stigmatization, or isolation); and relationship to God and institutions like the church (feeling connected and finding institutions credible or experiencing abandonment, punishment, and loss of confidence in the authority or credibility of the church).

**WE DEVELOPED A SURVEY** that was distributed to adult survivors of clergy sexual abuse, current employees of Catholic dioceses and parishes, and students at a Jesuit university. Informed by extensive research into moral injury and clergy sexual abuse, this novel questionnaire assessed participants' religious identification and beliefs, awareness and impact of clergy sexual abuse in the Catholic Church, and experiences of moral injury in relation to the clergy abuse crisis.

A total of 389 participants responded to at least one of the items assessing moral injury. Analysis of the 59 moral injury items can be categorized in three areas: damage in trust towards authority/community (church, God, authority figures, organized community; 28 items), agency and perceived human goodness (10 items), and perceived lack of personal goodness or personal failure (16 items). Correlations between moral injury and symptoms of posttraumatic stress, depression, and anxiety indicate that moral injury is related to, yet distinct from, these mental health concepts. Our findings provide evidence that we developed a valid measure of moral injury in the context of clergy sexual abuse.

Additional analyses compared the degrees of moral injury endorsed by the three main groups of participants (i.e., survivors, employees, and students). An examination of total moral injury scores for the three groups indicated that on average, survivors experienced the highest levels of moral injury, followed by students; employees endorsed the lowest levels of moral injury despite the fact that they reported greater

# **Executive Summary**

exposure to abuse as compared to students. In the domain of damage in trust toward authority/community, survivors reported greater moral injury relative to students and employees. For the domain of agency and perceived human goodness, employees endorsed less moral injury compared to students and survivors. For perceived lack of personal goodness/personal failure, the pattern of results mirrored that of the results for total moral injury (survivors > students > employees).

**THESE RESULTS INDICATE** that while moral injury was generally higher among those who are directly connected to clergy sexual abuse via their personal experiences of abuse, the impact of this crisis extends further, causing moral injury among those with varying degrees of affiliation with the Cath-olic Church. Moreover, the variability in findings between total moral injury and the three components of moral injury suggests the importance of nuanced conceptualization and measurement of this construct.

In addition to the quantitative data collected by our research team, we designed an interview script based on our preliminary research on moral injury. Dr. Ashley Theuring interviewed 15 self-identified survivors of clergy sexual abuse, raising questions focusing on the moral lives of the participant, asking them to talk about their sense of identity and agency, their moral reasoning, and their relationships with the church, others, and God. This group of survivors consisted of five women and ten men who experienced clergy abuse from ages 6-16 years old (on average, the abuse started at age 10.8 years old and lasted 3.06 years). Six of the participants identified as Catholic, five identified as spiritual, and four identified as non-reli-gious/non-spiritual. After the interviews were conducted, transcribed, and anonymized, the research team coded the qualitative material for significant themes.

# MAJOR THEMES FROM OUR DATA INCLUDE:

- 1. Most if not all the survivors expressed wrestling with shame. We also found that shame was often linked to guilt, stigmatization, and isolation. Often survivors kept their abuse a secret, worried about the impact it would have on loved ones, in particular.
- 2. A majority of survivors reported that when they shared their experience of abuse with a church employee, they endured a negative response that ranged from blame, flat-out rejection, or silence. Some survivors were traumatized by the response they received from church officials.
- 3. A significant factor in the healing process is participation in community with other survivors.
- 4. As is common for childhood trauma, survivors denied their abuse or lost memory of it for decades. During this time, they often employed avoidance tactics to survive or cope. Survivors recounted the initial abuse and its resurfacing as traumatic.
- Participants shared that clergy sexual abuse damaged their relationship with God and in many cases, severed their relationship with the church. For many survivors, enduring clergy sexual abuse and its concealment by church officials irrevocably damaged their sense of the church's moral authority or credibility.

**THERE MAY BE A SIGNIFICANT EXPERIENCE** of moral injury during the period of avoidance or memory loss, but we were not able to directly measure it in this study because all the survivors we interviewed were in the process of addressing and healing their abuse. Participants described the period of time between their abuse and reporting it in terms of moral confusion ("a mess"), lacking moral agency (for many, enduring despair and futility), and a strong sense of shame (expressed as unworthiness, invisibility, destructive behaviors, and suicidality) in addition to poor mental health and in some cases, PTSD.





# Progression from 2020-2022

### **OUR RESEARCH BEGAN IN SUMMER 2020**

by compiling a 130-page annotated bibliography on moral injury and clergy sexual abuse. We studied existing measures of moral injury and PTSD, noticing that we could not find any instrument to measure moral injury among survivors of sexual abuse, to say nothing of clergy sexual abuse. We observed that moral injury has been often summarized in terms of a triggering event (a betrayal of trust or violation of deeply held moral values), psychological distress and negative emotions (most often orbiting around anger, guilt, shame, sorrow, despair, disorientation or confusion, isolation, and helplessness), and broken social bonds (due to loss of trust and enduring betrayal).

Most studies of moral injury consider it to be a state of persistent psychological, neurological, or physiological distress. In some studies, moral injury is addressed as a state of existential or spiritual distress. Some argue that moral injury should be classified as a mental health disorder (not currently represented in the Diagnostic and Statistical Manual of Mental Disorders, commonly referred to as DSM-5). In no cases could we find moral injury examined through the lens of the moral conscience, or a comprehensive treatment of the dimensions of moral injury as it impacts moral identity, moral perception and reasoning, moral agency, and relationships with God, others, and institutions. These areas of the moral life informed how we measured moral injury (in both the survey and interviews with survivors).

After more than a year of research and refining our instrument to measure moral injury in this pilot study, we received IRB approval for our survey in October 2021. We solicited responses from three groups of respondents: Xavier University undergraduate students (our intended control group), diocesan and parish employees (who represent the church and may identify as implicated or entangled in the clergy sexual abuse scandal be-

cause of their profession), and survivors of clergy sexual abuse (recruited among survivor networks through national and local chapters of SNAP, Awake Milwaukee, and informal survivor groups in Buffalo, Pittsburgh, Minneapolis and St. Paul, and a few other communities).

389 participants belonged to the following categories: student (n = 208), diocesan/parish employee (n = 44), survivor (n = 62), student/employee (n = 8), student/survivor (n = 6), and employee/survivor (n = 8). Please see Figures 1-3 on pp. 16-18, illustrating our findings at present.

In November 2021, we secured IRB approval for our qualitative portion of the project. Over the first several months of 2022, Dr. Ashley Theuring interviewed 15 self-identified survivors of clergy sexual abuse (of these, five are women and 10 are men). On average, the survivors were abused starting at age 10.8 years; the abuse ranged from ages 6-16 years old. The average length of abuse was 3.06 years, ranging from four months to 10 years. All 15 survivors were raised in the Catholic Church. Today, six identify as Catholic, five identify as spiritual, and four identify as non-religious/ non-spiritual. We coded these transcripts for negative effects on mental health, moral identity, moral reasoning, moral agency, relationship to God, relationship to others, relationship to institutions, and healing. The 299-page code book will provide an abundance of material for our ongoing analysis and interpretation (see the figures on pp. 13-15 for illustrations of initial conclusions).







TO ASSESS MORAL INJURY RELATED TO CLERGY SEXUAL ABUSE, we developed a survey that was distributed to adult survivors of clergy sexual abuse, current employees of Catholic dioceses and parishes, and students at a Jesuit university. We created this survey by referencing existing measures of moral injury, which predominantly assess moral injury within the context of the military. This novel questionnaire assessed participants' religious identification and beliefs, awareness and impact of clergy sexual abuse in the Catholic Church, and experiences of moral injury in relation to the clergy abuse crisis.

The 59 items assessing moral injury were intended to examine five domains: moral identity (shame), moral reasoning (disorientation), moral agency (futility), moral relationships (betrayal), and moral institutions (loss of authority/credibility, especially as it relates to the church). There were also 15 items assessing experiences of potentially morally injurious events (PMIEs) relevant to clergy sexual abuse and its cover-up by authorities (e.g., awareness of things the participant felt were immoral, anger, disgust, guilt over not being more helpful to a survivor of clergy abuse). The items assessing moral injury and experiences of PMIEs were rated on a scale from 1 ("Strongly disagree") to 5 ("Strongly agree"); each set of items was summed to compute total scores. Seven additional items assessed participants' degree of exposure to abuse (e.g., awareness of sexual abuse by Catholic clergy; personal experience of sexual abuse by a member of the clergy; having a friend, family member, or another individual close to the participant who had experienced clergy sexual abuse); total scores were calculated to reflect the number of items endorsed by participants.

To enhance understanding of associations between moral injury and conceptually related mental health constructs, participants completed additional questionnaires measuring symptoms of posttraumatic stress, anxiety, and depression. Scores for each measure used in the analyses below were computed only for participants who responded to all items included in that measure.

# **Five Domains of Moral Injury**

Moral Identity (shame)

Moral Reasoning (disorientation)

Moral Agency (futility)

Moral Relationships (betrayal)

*Moral Institutions* (loss of authority/credibility)

A TOTAL OF 389 PARTICIPANTS responded to at least one of the items assessing moral injury. This group of participants included 246 females, 123 males, and three non-binary individuals; the remaining 17 participants did not respond to the item asking about gender or indicated that they preferred not to respond. Participants were born between 1929 and 2003. The 389 participants belonged to the following categories: student (n = 208), diocesan/parish employee (n = 44), survivor (n = 62), student/employee (n = 8), student/survivor (n = 6), and employee/survivor (n = 8). The remaining 55 participants could not be assigned to a category based on the available data.

An analysis of the 59 moral injury items indicated that these can be reduced to three components: damage in trust towards authority/community (church, God, authority figures, organized community; 28 items), agency of self and others/perceived human goodness (10 items), and perceived lack of personal goodness/personal failure (16 items). Five items were not included on any components based on the results of the statistical analysis. Scores for items on the second component were reversed such that higher scores reflect greater moral injury, consistent with the scoring of the other two components.

Correlations between scores for exposure to abuse, experiences of PMIEs, and moral injury generally indicated that individuals who reported greater levels of exposure to abuse and experiences of PMIEs also endorsed greater moral injury. Moreover, correlations between moral injury and symptoms of posttraumatic stress, depression, and anxiety indicate that moral injury is related to, yet distinct from, these mental health concepts.

Together, these findings provide evidence that we developed a valid measure of moral injury in the context of clergy sexual abuse.

ADDITIONAL ANALYSES compared the degrees of moral injury endorsed by the three main groups of participants (i.e., survivors, employees, and students). Participants belonging to multiple categories were excluded from these analyses due to the small numbers of participants in those groups. An examination of total moral injury scores for the three groups indicated that survivors experienced the highest levels of moral injury, followed by students, followed by employees.

These results differed somewhat from the patterns that emerged for the three components of moral injury as well as for exposure to abuse and experience of PMIEs. Differences between the three groups varied somewhat when examining the three components of moral injury. In the domain of damage in trust toward authority/community, survivors reported greater moral injury relative to students and employees. For the domain of agency of self and others/perceived human goodness, employees endorsed less moral injury compared to students and survivors. For perceived lack of personal goodness/personal failure, the pattern of results mirrored that of the results for total moral injury (survivors > students > employees).

As expected, survivors reported the highest levels of exposure to abuse and experience of PMIEs, supporting the validity of these measures.

Employees reported greater exposure to abuse relative to students, and students and employees did not significantly differ from each other in their reports of experiencing PMIEs. Together, these results indicate that while moral injury was generally higher among those who are directly connected to clergy sexual abuse via their personal experiences of abuse, the impact of this crisis extends further, causing moral injury among those with varying degrees of affiliation with the Catholic Church. Moreover, the variability in findings between total moral injury and the three components of moral injury suggests the importance of nuanced conceptualization and measurement of this construct.

# **FOR THE QUALITATIVE PORTION OF THIS PROJECT,** 15 study participants were selected to share their experiences and perspectives to help identify the varying impacts of clergy sexual abuse and its concealment. Our questions focused on learning more about the relevant dimensions of moral injury. We interviewed 15 self-identified survivors of clergy sexual abuse. The participants had to be over 18 at the time of the interview, and the abuse had to have begun before age 16.

The participants were recruited via a snowball sampling strategy whereby the research investigators contacted organizations that support and advocate for survivors, asking the organization to share the study information with individuals they know who met the criteria. Survivors then contacted the investigators themselves via an XU email account set up to handle all correspondence about this project. When participants scheduled their interview, they received a full informed consent document.

Verbal consent was confirmed at the interview. The major part of the interview included a series of questions intended to measure five dimensions of moral injury: 1) moral identity – the perception of oneself and others as good and capable of doing good; 2) moral perception and reasoning – the belief that one can make sound moral judgments; 3) moral agency – the ability to use free will and to choose what is good and avoid what is evil; 4)

moral relationships – the ability to trust, feel safe, and seek counsel or offer it to others; and 5) moral authority/credibility – trust in organized religion, local faith communities, and clergy.

At the end of the interview, participants were sent a list of resources that participants could contact if they wanted support. Interviews were transcribed, anonymized, and stored in a secure electronic file.

Key Findings & Main Conclusions

**OVERALL, CLERGY SEXUAL ABUSE CREATES MORAL CONFUSION IN VICTIMS.** Until the moral confusion is resolved, survivors experience a limited sense of moral agency and a negative moral identity, often marked by shame and guilt. Ongoing sexual abuse damages one's relationship with God and for many survivors severs their relationship with the church. Most if not all survivors have difficulty trusting others or giving credence to the moral authority of the Catholic Church.

On Moral Confusion

**THE MORAL CONFUSION** experienced by victims of clergy abuse is created when their previously held beliefs about the world (their moral reasoning) are contradicted by experiencing abuse.

For example, prior to abuse a person might believe any of the following:

- Priests are good, nice, moral, or even sinless.
- My parents will protect me from harm.
- The world is a safe place.
- My church is a safe place.

The experience of abuse contradicts these beliefs:

- Priests are evil, mean, immoral, or sinful.
- My parents can't or won't protect me.
- The world is scary and confusing.
- My church is not safe; it is a place of pain.



# **Selected Quotations on Moral Confusion**

"There's so much happening in that pubescent age that you don't know if this is actually supposed to be happening.
[...] You know is this what guys do?

Is this normal?"

(Transcript 10, Page 4)

"...developmental stage that you truly don't know if this is right. If this is real. Because there's a huge part of me that wants to be you know open and honest member of the church. Loving to my God and just did not know whether this was supposed to be happening or not. [...] And again, it was something that... Who am I going to talk to? And who am I going to ask? Whether this is good or is this bad? What's the difference?"

(Transcript 10, Page 6)

### MORAL CONFUSION CAN BE RESOLVED

by constructing moral clarity through the acceptance, rejection, or reimagination of previously held beliefs and/or the creation of new beliefs.

For example, the belief and experience of contradiction that priests are good, nice, moral, or even sinless, can resolve in the following ways:

- Acceptance: priests are good.
- Reimagination: some priests are good and some priests are bad.
- Rejection and creation of new beliefs: priests are bad.



# **Selected Quotations on Moral Clarity**

"I, I have a very good understanding of what's right and wrong because of the things that happened to me. And I choose to live in the light, I choose, y'know, healthy over harmful."

(Transcript 1, Page 10)

"Um, he was just a bad man. So I can reconcile that, that he was a bad man. His format to groom others was the priesthood. There are many bad men that are using other [formats], they're coaches, they're piano teachers, and they're, y'know, he just chose the priesthood as his method to abuse children."

(Transcript 1, Page 25)

"And any kind of faults or difficulty we had, were not the, not because we were faulty, or we were bad, but because we were affected by a really bad man."

(Transcript 1, Page 28)

On Moral Agency

# **LIMITED MORAL AGENCY OCCURS** when survivors cannot make sense of their experience, leaving them unsure of what they can say or do. For example, one might believe the following:

 If priests are good, I don't have the language to talk about a bad priest. I won't be able to make sense of my abuse or tell others about what is happening (or happened), so I experience constraint, futility, or helplessness.

Selected Quotations on Limited/No Moral Agency

"And then the, you know feeling unworthy. Um... Well, I mean I had no voice. I had no voice at the table. Why would anyone listen to me?" (Transcript 5, Page 19) "I had kept all this inside, uh, because any kind of youth doesn't have the emotional capacity to express my own needs, given the nature of this abuser, and his public status. And, my parents loved him dearly, as a dear friend. And those types of scenarios are literally impossible for a young person to, to overcome." (Transcript 1, page 2)

WHEN SURVIVORS ARE ABLE TO MAKE SENSE OF THEIR EXPERIENCE, they experience moral agency, giving them options for moving forward and reaching out for help. For example, one might come to say:

Priests are sometimes bad, which I experienced through abuse, and I can talk about this with someone I trust.

# **Selected Quotations on Moral Agency**

"I want to be a voice for victims and survivors... some victims can speak publicly and some victims are incapacitated... and can't. And not that anybody has to go through my particular story, but, um, some kind of story. Y'know, if you, there's a model of what healing might look like. And I don't know what that is, but I'll share mine."

(Transcript 1, Page 20)

"I didn't gain any of my power back until I started to share my story because then they didn't own me anymore." (Transcript 10, Page 23)

On Moral Identity

# **NEGATIVE MORAL IDENTITY BEGINS TO TAKE HOLD** when a survivor feels they are limited by their situation and lack of relational support. For example, one might express shame, or guilt:

- I'm powerless to change this. I must be weak.
- I'm disgusted with myself for being so helpless.

# **Selected Quotations on Negative Moral Identity**

"Extreme periods of low self-esteem for many years. [...] With a huge talent to cover it all up. [...] Mask it. I could wear any mask. I could present myself with a smile. Suit. Tie. Fresh haircut. And you would think that I had the world on a string. [...] Um, but I was a shell." (Transcript 10, Page 22)

"I just couldn't... I guess it was you know honestly all of the anxiety just was... I couldn't sleep. I couldn't live with myself. It was... [...] It felt like I had a disease on me, and I didn't know what to do with it. I didn't know. I wanted it gone but I didn't know any other way to get it gone. I wanted to forget it. You know I wanted to go to sleep, wake up, and say, 'Oh, that really didn't happen.' But then you know, it came back."

(Transcript 5, Page 10)

"So, I felt that I was a failure and just let everyone down. That's what it was. Even knowing you know what happened... That sense of failure went all the way through college and turned into a sense of unworthiness like I'm not worth—it's not worth having a serious relationship, it's not worth falling in love, it's not worth having children. You know, it's not worth anything. [...] You know when you feel like a failure and unworthy you still act when there's still nothing but shame like why live? [...] There's nothing that's going to clean it up. There's nothing. No one is ever going to look at you. And want to be my friend. Or how can I be a mother? How can I be a wife? Nothing. So, that... That level of shame was almost unbearable. And um... And there's—that's one that I still—That I— There's still heaps of that." (Transcript 5, Page 13)

#### POSITIVE MORAL IDENTITY CAN BE ESTAB-

**LISHED** when a survivor feels they are able to impact their situation and others. Many survivors indicated their healing resulted from positive responses from others, support from loved ones, and participating in survivor advocacy groups. Such healing might lead one to say:

- I am good and able to help others.
- I am able to advocate for change.

# Selected Quotations on Positive Moral Identity

"...the more you talk about it, the healthier I got. And I didn't let it define me." (Transcript 10, Page 19)

"But now, and it's thanks to amazing therapists, amaz—you know just time. These incredible people that have just listened to my story and talking it out that I know I can find—actually it's been recent, really recent. That I finally said, 'I'm worth. I'm worth it. I'm worth having a good marriage. I'm worth somebody fighting for me."

(Transcript 5, Page 13)

"And the more involved I am, the um the better I feel about myself. Um, the better my mindset is. Um, the more I think of myself as a good person." (Transcript 13, Page 24)



Possible Implications for Moral Injury in General

- 1. Moral reasoning is formed through relationships, lived experience, and one's social context. Specifically, we found in the interviews that participants formed their sense of right/good and wrong/evil through the traditions of their church, family, culture, faith or relationship with God, and personal reflections.
- 2. Moral reasoning informs both moral identity and moral agency. Specifically, we found that participants understood their agency (what they could say and do) and identity (self-image as good or bad) through the lens of their moral reasoning (knowledge about self and others, relationship to authority figures/institutions, and ability to self-express through narrative).
- 3. An experience that contradicts a participant's sense of right and wrong (their moral perception and reasoning) created moral confusion. Specifically, we found in the interviews that participants felt their experience of clergy sexual abuse contradicted their previously held knowledge about others (for example, priests are good and my parents will protect me).
- 4. Moral confusion impacts moral identity and moral agency. Specifically, we found that participants who experienced moral confusion also experienced limited moral agency (e.g., helplessness, despair, or futility) and a negative moral identity, resulting in negative health/wellbeing. Limited moral agency results from moral confusion. The lack of ability to express oneself in language/narrative, lack of trust in authorities, and moral confusion makes it difficult to name or discuss the abuse. This, in turn, contributes to negative moral identity, often experienced as guilt and shame.
- 5. Participants demonstrated an ability to construct moral clarity by accepting, reimagining, or rejecting and creating new moral knowledge and relationships with authorities. Specifically, we found that participants who expe-

- rienced moral clarity also experienced positive moral identity and moral agency, resulting in greater wellbeing. Moral agency depends on moral clarity. When participants expressed an ability to understand what they endured and found the language to name the abuse, this correlated to positive moral identity and having moral agency.
- 6. Participants described shame as feeling physical disgust and being a failure, wrestling with moral confusion, and feeling limited by doubt, denial, or secrecy. They often stated that abuse should be kept a secret (especially from parents), and when they did not respond to or stop the abuse, this resulted in disgust with oneself.
- 7. Participants described guilt as feeling weak or (wrongly) responsible for their abuse. Some described a sense that they should have prevented, avoided, or stopped the abuse and needing to make it right in order to take responsibility for their sin.
- 8. Our interviews underscored the importance of relationships with others in the formation of the moral self. Not only do other people shape one's moral identity (beliefs, values, practices) but other people also contribute to and/or constrain one's moral agency. When survivors experience stigma, silence, and isolation, they are not able to recover a positive moral identity or heal from their abuse. When others reject, minimize, or misinterpret a survivor's story, it undermines one's moral value (i.e., sense of being worthy or belonging).





# **Quantitative Results**

# **Components of Moral Injury and Sample Items**

# **Damage in Trust Towards Authority/Community**

- Clergy abuse and the authority cover-up have strained my relationships with clergy.
- Because of clergy abuse and the authority cover-up, I have:
  - Stopped turning to the church for guidance in my moral thinking.
  - Lost confidence in the moral credibility of my religious tradition.
  - Become more withdrawn from my religious community.
  - Felt angry at organized religion.
  - Felt loss of religious faith.
  - Stopped attending church.

# Agency of Self and Others/Perceived Human Goodness (Reflects Lack of Moral Injury)

- I believe others are naturally good.
- Because of clergy abuse and the authority cover-up:
  - I feel I can do the right thing.
  - I can affect others in positive ways.
  - I feel free to act morally in the future.
  - I have a good sense of what makes life meaningful.
  - I believe my relationship with God can be made right.

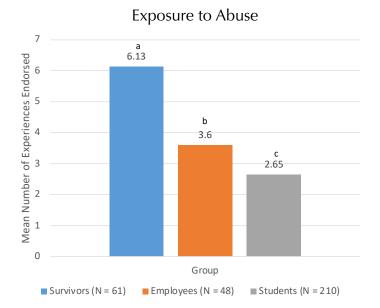
### Perceived Lack of Personal Goodness/Personal Failure

- I believe others are naturally good.
- Because of clergy abuse and the authority cover-up:
  - I feel I can do the right thing.
  - I can affect others in positive ways.
  - I feel free to act morally in the future.
  - I have a good sense of what makes life meaningful.
  - I believe my relationship with God can be made right.

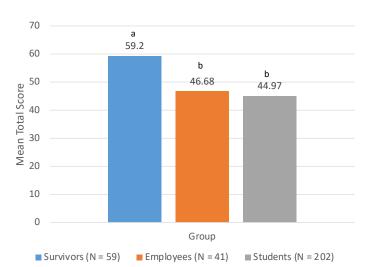
**RESULTS FROM AN ANALYSIS OF THE 59 MORAL INJURY ITEMS** indicate that these can be reduced to three components: damage in trust towards authority/community (church, God, authority figures, organized community; 28 items), agency of self and others/perceived human goodness (10 items), and perceived lack of personal goodness/personal failure (16 items). Five items were excluded from the components based on the results of the statistical analysis.

The second component reflects a lack of moral injury; however, scores on the items comprised by this component were reversed in subsequent analyses such that higher scores reflect greater moral injury, consistent with the other two components.

# **Comparisons of Exposure to Abuse and PMIEs by Participant Group**

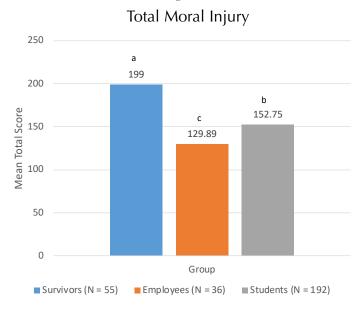


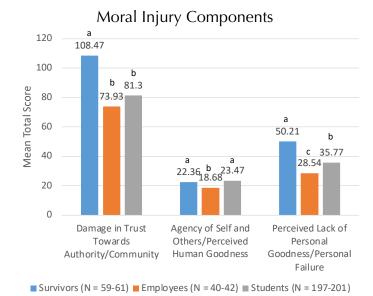
Experience of Potentially Morally Injurious Events



**THE THREE PARTICIPANT GROUPS** varied in their endorsement of their experiences of exposure to abuse and PMIEs. Survivors reported the highest levels of exposure to abuse, and employees reported greater exposure than students. For PMIEs, survivors reported the highest degrees of experiencing such events, while employees and students did not differ from each other. For each graph, columns with different letters above them indicate that the corresponding mean scores are significantly different from one another.

# **Comparisons of Moral Injury by Participant Group**



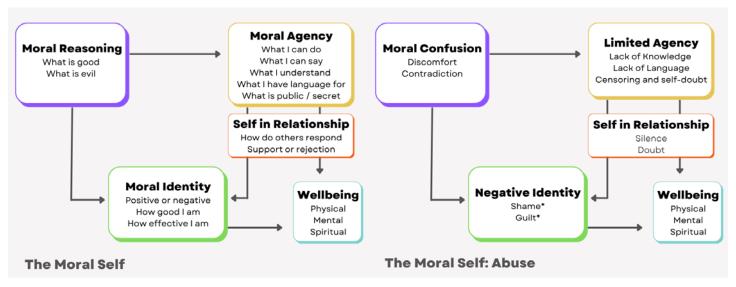


**DIFFERENT PATTERNS OF RESULTS EMERGED** for total moral injury compared to the three components of moral injury. Survivors experienced the highest levels of total moral injury, followed by students; employees endorsed the lowest levels of total moral injury. Differences between the three groups varied somewhat when examining the three components of moral injury. In the domain of damage in trust towards authority/community, survivors reported greater moral injury relative to students and employees. For the domain of agency of self and others/perceived human goodness, employees endorsed less moral injury compared to students and survivors. For perceived lack of personal goodness/personal failure, the pattern of results mirrored that of the results for total moral injury (survivors > students > employees). For each graph, columns with different letters above them indicate that the corresponding mean scores are significantly different from one another.

# **Qualitative Results**

The Moral Self before Abuse

The Moral Self after Abuse

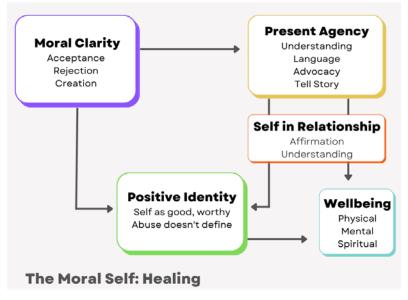


**MORAL REASONING INFORMS** both moral identity and moral agency. Our interviews with survivors of clergy sexual abuse show that participants understood their agency (what they could understand, say, or do) and identity (self-image as good or bad) through the lens of their moral reasoning, attempting to make sense of their own knowledge, relationship to authorities, and ability to self-express through narrative.

Clergy sexual abuse is a source of contradiction and disorientation. It opposes what survivors previously believed about their knowledge of self and others as well as their ability to trust authority figures. Enduring sexual abuse by clergy results in moral confusion, which negatively impacts both moral identity (primarily through shame and guilt) and moral agency (due to self-doubt, censoring, and an inability to put into words their experience of abuse).

- \* Participants described shame in terms of physical disgust, feeling like a failure, and feeling compelled to deny their abuse or keep it a secret.
- \* Participants described guilt as feeling sinful or weak, torn over what they should/must do, and often expressed self-condemnation or a wrong sense of responsibility (i.e., self-blame) for being sexually abused by clergy.

## The Moral Self on the Path toward Healing



PARTICIPANTS IN OUR INTERVIEWS largely showed progress on the path toward healing. This was indicated by recovering from moral confusion and reconstructing moral clarity as it relates to one's relationships (to family and friends, others in general, the church, and with God). In our interviews with survivors of clergy sexual abuse, we found moral clarity resulting from accepting, rejecting, and reimagining previously held beliefs about self and others. Participants who expressed moral clarity also described having moral agency and positive moral identity (as well as overall greater wellbeing). In our analysis, embracing one's moral agency relies on possessing moral clarity. This often corresponded with having language to name and discuss the abuse.



## Reflections & Recommendations

**IN THE FINAL ANALYSIS,** we have ample evidence that we were successful in creating an instrument to measure moral injury. We collected a tremendous amount of quantitative and qualitative data that has helped us better understand the scope of the harm caused by the twin crises of clergy sexual abuse and its concealment. Given the sheer amount and special relevance of the data this research project produced, we are confident our findings will help inform psychological, theological, moral, ecclesiological, and pastoral responses to bring about greater transparency, healing, and restorative justice on the individual, interpersonal, and potentially the institutional levels of the church.

Still, one of the sobering results of this project is to find that many survivors of clergy sexual abuse continue to feel invisible and insignificant. While many people think of survivors of clergy sexual abuse like former altar servers (presumed to be white and male, abused as children), getting in touch with survivors helped us recognize a far more diverse spectrum of abuse—and the ways in which those abused as adults often are overlooked. Our interviews focused on those abused as minors, and a possible next step would be to interview adult survivors of clergy sexual abuse to better understand and possibly compare their experience of moral injury. These instances of abuse are often labeled more as "boundary violations" or instances where a priest broke his vow of celibacy. This fails to adequately describe the asymmetries in power that exist between ordained and lay members of religious communities or the patterns of abuse of sacred trust that happens with adults.

**CLERGY SEXUAL ABUSE CAUSES MORAL INJURY** not only because it is a betrayal of sacred trust, but because of who is responsible for the betrayal: a person ordained in persona Christi (in the person of Jesus Christ) who represents what is holy if not also the church or God. The fact that other clergy were aware of abuse and protected perpetrators, silenced survivors, or cast doubt upon them only compounds the overlapping layers of psychological, spiritual, and moral harm. This is further exacerbated when survivors encounter ignorance, indifference, and inaction on the part of other members of the church. In this way, an original violation progresses into deeper levels of betrayal and moral loneliness if not also emptiness.

JESUIT INSTITUTIONS ARE STILL MARKED BY CLERICALISM, which proves an obstacle to the transparency, accountability, and equitable power-sharing that will bring the truth "into the light," as St. Ignatius often encouraged retreatants in the Spiritual Exercises. When teaching this material to students, they express a sense of sadness, distrust, anger, and sometimes even disgust at how often predators were protected and enabled while survivors were often silenced and shamed. At the same time, students often report that when this topic is addressed in the classroom, it is the first time they have been given permission (or a formal setting) to study and discuss clergy sexual abuse, which they appreciate. This research project has given us many tools to help inform, engage, and empower our students. And yet, there is still a lot of work left to be done. For example, the Jesuits still have not made publicly available cases of established allegations against Jesuits who have abused adults (in their listings of those credibly accused of abuse, it only includes those who abused a minor). We are still far from ensuring our church—and Jesuit institutions—are places that are welcoming and safe for all.

**SURVIVORS OF CLERGY SEXUAL ABUSE CARRY LIFELONG WOUNDS** caused by the betrayal of sacred trust and the violation of their vulnerability. Most if not all survivors were on the receiving end of negative responses when they tried to tell the story of what they endured: the abuse was often rejected, ignored, or minimized. In too many cases, people (both lay and ordained) are more interested in protecting the reputation of the church (or specific clergy) than in doing justice to the persons impacted by abuse.

Survivors of clergy sexual abuse are in unexpected places, including on our campuses. We need to address clergy sexual abuse and its concealment like survivors (and perhaps even perpetrators or those who were aware of abuse and did not do enough to prevent or end it) are in the room. What is more, our research on moral injury shows that the ripple effects of harm reach beyond victim-survivors, with students (and presumably fac-

# Reflections & Recommendations

ulty and staff as well) sharing various dimensions of moral injury including negative emotions like sadness and grief, anger and shame, self-condemnation, confusion, and helplessness; the resulting sense of betrayal can undermine safety and trust in others and in institutions, especially the church.

It will be a tall task to restore the moral authority and credibility of the church in the wake of so many examples where abusers were protected and enabled, or where ignorance, indifference, and inaction around clergy sexual abuse undermined the compassion and solidarity that survivors (and all those impacted by abuse) deserve.

WE HOPE THAT SUBSEQUENT RESEARCH on this topic can contribute toward cultivating Catholic and Jesuit communities where abuse is unthinkable and all share in the responsibility to bring healing to those affected by clergy sexual abuse and its concealment.







## Directions for Future Research

**IN LIGHT OF OUR RESEARCH,** these are the main areas of continued interest for our team. We hope to continue exploring these questions and hope other researchers might build on the work we have done.

- 1. Revise the quantitative survey from the initial pilot study version so that it can be sharpened to measure moral injury more precisely. What can we learn from comparison/contrast with the brief (10 item) "Moral Injury Symptom Scale for Civilians" created by Koenig, Ames, and Pearce (see Religion and Recovery from PTSD, 2019)?
- 2. **Continue to look for patterns** (e.g., convergence or divergence in survivor experiences and reflections) in our code book. What lessons could be drawn from recoding the interviews to develop a more fine-grained analysis of their sense of moral identity, perception and reasoning, agency, and relationships to God, others, and institutions?
- 3. Collect and compare moral injury levels among survivors abused as children with those abused as adults. Collect and compare moral injury levels among survivors' friends and family with lay Catholics, non-practicing (or former) Catholics, and former diocesan employees. How do other groups experience moral injury?
- 4. **Follow up with the survivors we interviewed.** How do survivors respond to the data we collected and conclusions we've drawn?
- 5. **Explore the theological implications of our work.** Given links between moral confusion/clarity and finding language to name and give voice to clergy sexual abuse, there is much more to explore as it relates to how theological narratives shape our moral perception and reasoning. How could we measure the kinds of narratives that cause moral confusion or contribute to moral clarity in the wake of trauma or abuse?
- 6. Assess differences in levels of moral injury. How can we make sense of the lower levels of moral injury among employees compared to students (despite employees' greater levels of exposure to abuse as compared to students)? What factors protect against or increase risk for moral injury?
- 7. **Connect our research with moral education.** In light of the fact that many survivors of child sexual abuse endure moral confusion for decades before finding the language to give voice to their experience, how can moral education programs give young people appropriate tools for self-expression?
- 8. Investigate further the connections between moral confusion, agency, and identity. Many survivors expressed that they struggled to identify their abuse as bad/wrong because they were raised to believe that priests are good (or could not sin). Others interpreted their abuse as punishment for being bad. How does this indicate a false moral clarity (i.e., overly simplistic and inaccurate) and what effects does it have for moral identity and agency?
- 9. Consider "conscience" and moral reasoning in relationship to moral injury. Insofar as "conscience" means "to know together," how can we create instruments to measure moral injury that accurately assess the interpersonal dimension of moral identity, perception and reasoning, and agency? In what ways does moral injury impair our ability to reliably "know together" when it comes to what is right, true, good, and just?
- 10. **Reflect further on possibilities of growth for survivors.** What does post-moral-injury growth look like for survivors of clergy sexual abuse and all who have been impacted by the church's failure to prevent and respond to these patterns of abuse?

