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Responding to child abuse in religious contexts

Philip Gilligan

Contexts, complexities and challenges

Abuse of children is perpetrated in a wide variety of contexts. It occurs in all cultures and countries (UNICEF 2014). Measuring its breadth and impact is challenging and its occurrence in different contexts is unevenly documented. Astbury (2013) stresses the importance of understanding each situational context, but concludes that cultural and religious contexts have been researched inadequately. Even when data are available, their scope may also be very limited. As in other situations, abuse in religious contexts may be physical, sexual or emotional; occur in multiple settings and may be perpetrated by individuals or groups or both. Both perpetrators and victims/survivors adhere to religious beliefs to varying degrees.

Awareness of abuse in religious contexts has increased over the past 25 years, notably since the explosion of disclosures about abuse perpetrated by Roman Catholic clergy in the USA, Ireland, England and Wales, Australia and elsewhere, and revelations about inappropriate responses by church authorities (John Jay College 2004; Keenan 2011; Pilgrim 2011; Scorer 2014; Terry 2014). However, both the quality and quantity of information regarding the many different phenomena that can be categorised as child abuse in a religious context remain extremely variable.

Reports of child abuse in religious contexts involve the full spectrum of faith groups, sects and denominations. Examples can be cited from Islam (Abrams 2011; Singleton 2010), Hinduism (Cahill 2012), Judaism (Borchelas-dan 2015; Otterman and Rivera 2012) and Buddhism (Pathirana 2012), but much more information is available regarding abuse in Christian churches, especially in industrialised and Anglophone countries, and this provides the bulk of current knowledge.

At the same time, the responses of many religious institutions to revelations by and demands from survivors and other campaigners for justice, openness and acknowledgement has often been one of defensiveness. This results in public controversy. Minister and Clergy Child Sexual Abuse Survivors [MACSAS], for example, suggest that ‘the failure of institutions such as the Catholic Church to hear, to respond and to accept responsibility is a scandal to the Christianity (sic)’ (MACSAS 2011), while the McLellan Commission (2015: 12) reports admissions by some church leaders that they ‘feel total shame with regard to past cover-up’.
The definition of ‘child abuse in religious contexts’ is not straightforward. Some actions are widely recognised as abusive (e.g. contact sexual abuse or physical assaults on children resulting in injury or death), but other behaviours, considered abusive by many professionals, remain both lawful and tolerated by society and are presented as essential to children’s spiritual well-being or membership of a faith community. They include physically non-violent exorcism of children accused of being possessed by evil spirits (Briggs et al. 2011; Stobart 2006) and medically unnecessary circumcision of male infants (Hinchley 2007; Patrick 2007). Questions such as the appropriate limits to parents’ rights to withhold recommended medical treatment from children on religious grounds remain contended and inadequately conceptualised in law (Humphrey 2008), while some would continue to argue that all religious indoctrination of children should be viewed as ‘child abuse’ (Hitchens 2007).

There are also questions about whether particular categories of abuse should be seen as occurring in a religious context. Genital mutilation or cutting of young women (FGM/C) provides one example of such questions. Programmes designed to eradicate FGM/C often place emphasis on the idea that those involved are being asked to abandon ‘cultural’, rather than ‘religious’ traditions (e.g. Innocenti Research Centre 2010), but this perhaps serves to demonstrate the need for practitioners to remember that, in the worldview of the individuals involved, their ‘abusive’ behaviour often results from a belief that they are fulfilling religious obligations. FGM/C is sanctioned by no sacred text and by no major religious authority, but pronouncements by religious authorities do not necessarily determine what individuals or communities believe to be their religious obligation. However, it is often associated with ‘religion’ because religion, tradition and culture are, in practice, intertwined (Innocenti 2010).

Now, a study of Mormon women survivors of church childhood...
sexual abuse, Gerdes et al. (2002) found that women’s healing journeys were especially difficult because the church pervaded so much of their social lives.

Farrell et al. (2010: 124) argue that sexual abuse perpetrated by clergy should be seen as a distinct form of trauma, generating ‘unique posttraumatic symptoms not accounted for within the existing Posttraumatic Stress Disorder conceptual frameworks’. These include ‘significant anxiety and distress in areas such as theological belief, crisis of faith, and fears surrounding the participant’s own mortality’. For some, the experience of abuse, especially by clergy, is experienced not only as betrayal by trusted authority figures, but as abuse within which God is perceived as ‘integral’ (Farell 2009: 39). On the basis of work with mainly female Christian survivors, Kennedy concludes:

Victims of abuse find it incredibly difficult to understand why it is that God/Jesus did not protect them. They blame God/Jesus for their abuse. It’s quite something to feel betrayed by your human family, but really huge to feel betrayed by an all-powerful deity.

(Kennedy 2003: 4)

Ryan (1998: 47) found that, while some writers argue that ongoing spiritual practice offers survivors a variety of benefits including ‘providing meaning for life and the traumatic experience, feeling less alone in the world and maintaining hope’, others find impediments to recovery in some spiritual belief systems. Impediments include fatalism, patriarchal hierarchies, stoicism, emphasis on forgiveness, self-blame and over-reliance on spiritual systems to the exclusion of other resources. At the same time, Doyle (2001, 2006) emphasises that religion can provide reassurance to victims of abuse and identifies ‘religiosity’ as a positive factor in children’s resilience.

Social work, religion and child abuse

Given the complexities involved, it is unsurprising that studies suggest social workers and others are often reluctant to engage with issues arising from religion and religious beliefs (Furness and Gilligan 2010) and that such reluctance impacts on their responses to survivors/victims of child abuse in religious contexts (Gilligan 2009). The nature of their responses may also be complicated further by the idea that social work and all forms of spirituality are in ‘opposition’ (Crisp 2010) and by individual experiences and beliefs that, in the absence of adequate reflection, may significantly influence practice. As a result, there seem to be great variations in practitioners’ willingness to consider the potential for service users’ religious beliefs to enhance their emotional wellbeing, to heighten their distress or to do both at the same time.

Religion is, however, significant in determining the ways in which some people interpret events, resolve dilemmas, make decisions and view themselves, their own and others’ actions and how they respond to these (Beit-Hallahmi and Argyle 1997; Hunt 2005). This is likely to be especially so in situations such as child abuse in religious contexts. Practitioners may not, therefore, be able to engage or to facilitate appropriate interventions if they take too little account of these aspects of people’s lives or consider them on the basis of inaccurate, ill-informed or stereotyped ‘knowledge’ (Hodge et al. 2006). At the same time, whatever the context, social workers need to adopt an approach that recognises that individual constructions of religion reflect the nature of individual experience (Hunt 2005). Thus, without more detailed information and dialogue, the fact that someone is known to be ‘Roman Catholic’, ‘Sikh’, ‘agnostic’ or whatever will, in itself, tell a social worker very little about that person’s specific attitudes, needs, strengths, beliefs or potential support networks. In the UK and other parts of Europe, an increasing majority of those who report that they are ‘Christian’ do so without any formal or regular participation in the activities of any particular church or sect. Their approach to religion
is individual and privatised (Hunt 2005). Practitioners, therefore, need to understand what, if anything, religion means to a particular individual.

In practice, social workers need to respond to actual and immediate situations, to recognise the potential significance of individuals’ religious beliefs and practices, and to assess the extent to which they are potentially beneficial, harmful or both in particular situations. On occasions, they may be involved with carers who believe they have a ‘religious’ duty to do something the wider society views as unacceptable. They may be involved with individuals who draw positive benefit from ‘religious’ practices that fall outside conventional categorisations. They also need to recognise that some victims/survivors will find contexts beyond their original faith community in which to express and benefit from their religious beliefs, including informal and formal religious services organised by survivors’ groups both independently and in cooperation with religious authorities.

The response of religious institutions

Moules (2006: 23) reminds us that ‘Children can be abused in any environment’ and that ‘It would be naïve to assume that child abuse could not happen within our faith’. Few would now argue that membership of any faith community provides protection from child abuse and in recent decades many religious institutions have established child protection policies and procedures (e.g. Archbishop’s Council 2011). In the UK, these can often be accessed online (e.g. Catholic Safeguarding Advisory Service 2015; The Methodist Church in England 2015). There have also been notable collaborations between safeguarding boards and Muslim organisations in relation to safeguarding in mosque schools and other Islamic study centres (e.g. Ahmed and Riasat 2013) and between majority black churches, safeguarding boards and organisations such as the Churches’ Child Protection Advisory Service and Africans Unite Against Child Abuse (Briggs et al. 2011).

Religious institutions have developed policies at very different speeds and implementation of them has not always been consistent. All members of Churches Together in Britain and Ireland agreed to implement the recommendations of Time for Action (Galloway and Gamble 2002), including those regarding the development of support services for survivors of sexual abuse in their churches. Some did so, but in its submission to the Cumberlege Commission, MACSAS (2006) claims, for example, that the Catholic Church did not. Subsequently, in 2015, writing of the year ahead, the chair of the National Catholic Safeguarding Commission [NCSC] admitted that ‘the one area where we will be most challenged is in listening to and meeting with survivors which is not an area of consistently good practice’ (NCSC 2015: 5). However, he also reported that ‘The working party on pastoral support for survivors has made real progress and … we believe we have a model that can be implemented gradually across all our Dioceses and Religious Communities’ (NCSC 2015: 4).

The model referred to by the NSCS is that developed by the Hurt by Abuse pilot in Sheffield, England in the Diocese of Hallam (2015), which makes explicit use of A Vision of a Catholic Church which Supports and Cares for Those Who Have Been Harmed (Markham 2010). This document emphasises the need to convey messages that child protection reflects core Gospel imperatives.

Among many other things, Markham (2010) promotes the idea of children’s advocates, for the church to communicate in its actions that allegations are taken seriously and for no-one to be deterred from reporting concerns. Markham also encourages victims/survivors to be used as expert witnesses and advisers, for the church to properly resource healing centres and demonstrate that it understands that victims/survivors have different needs, for holistic services
to families, for dedicated spiritual support and recognition of victim experiences in liturgical material. He sees a need for church leaders to recognise the complexity of gospel exhortations to forgive and the pressure these may place on victims, and for the church to ensure that it has the mechanisms to provide practical support and appropriate restitution for victims.

It is clear from their testimonies that for some victims and survivors, continuing religious practice, attendance at services and active involvement in their faith community is important to their ongoing ability to cope with having been abused, even when the perpetrator is a member of the clergy. Indeed, some writers suggest that ongoing participation in religion can provide reassurance to victims of abuse, who report that they gain strength from their belief that God loves them unconditionally (Crompton 1998; Doyle 2001, 2006). They suggest that spirituality benefits survivors by assisting them to transcend the violent experience as it is happening, providing meaning for both life and specific experiences and helping them to feel less alone in the world. Kennedy (1995: 34) emphasises that ‘for a great many Christian children who have been abused, if they see God as loving, then the continuation of a Christian practice is essential for healing’. At the same time, many of the same writers recognise impediments to recovery from the trauma of child abuse in certain spiritual belief systems. Kennedy (2003), for example, argues that Christian beliefs may shape victims’ acceptance of abuse and cause them to see their suffering as redemptive.

There are also some notable examples of churches and religious institutions exploring systems for restorative justice and compensation. These aim at restoring harm by including affected parties in user-led processes and encounters (direct and indirect) that promote understanding through honest dialogue, in which offenders take full responsibility for what they have done and institutions accept that they are accountable to the victims for helping them restore or be compensated for what they have lost (Gavrielides 2007, 2013; McKay 2014).

Criticisms of the responses of religious institutions

Many survivors’ groups and other observers remain extremely dissatisfied with the responses of religious institutions and hierarchies both in general and in specific cases, while others express concern that some religious communities remain unaware of the abuse occurring among them. Specific examples illustrate the types of difficulties that may arise across all faiths and religious institutions to varying degrees. Neustein and Lesher (2008) discuss the ways in which, in Orthodox Jewish communities, religious judicial processes may prevent individuals abused by rabbis from obtaining justice through secular legal processes; Gerdes et al. (2002) found that victims/survivors report that the typical reaction of the Mormon church was to tell them to forgive the perpetrator or to deny the facts. I have highlighted elsewhere (Gilligan 2012b) the apparent failure of the Roman Catholic church in England and Wales, a decade after acceptance of the Nolan Report (Nolan 2001), to implement its declared policies regarding the laicisation of clergy convicted of child sexual abuse offences by criminal courts. In 2006, Siddiqui (2006: 1) suggested that ‘The Muslim community is at present in a state of denial—denial of the fact that child abuse takes place in places of worship including in mosques, madrasas (mosque schools) and families’ while the Methodist Church in Britain (2015: 20) found that ‘ministers not only have difficulty recognising and accepting that abuse has taken place when the perpetrator is a colleague but also struggle to recognise it when it is a lay person abusing’.

In relation to the Roman Catholic church in England and Wales, the Cumberlege Commission (Cumberlege 2007: 22) stated concerns that five years after Lord Nolan reported, ‘Bishops and Congregational Leaders may be minimising the distressing consequences, the harmful impact and the anguish that follows in the wake of child abuse’, while, in Scotland, the McLellan...
Commission (2015: 10) reported that ‘No point was made more consistently to the Commission by survivors than their sense that they had not been listened to and not believed’.

I have previously argued that, where institutions seek to serve conflicting legitimacy communities, they risk alienating victims/survivors, especially where survivors’ experiences have left them feeling that the institution has prioritised financial interests and reputation over what they had come to expect in the context of rhetoric promising openness, honesty and sensitivity (Gilligan 2012a). In considering such a mismatch it is relevant to recall what we know from attachment theory: that is, a child who has the experience that ‘things did not turn out as he was led to believe’ learns that cognition ‘is not to be trusted’ (Crittenden 1999: 54) and that those who have had such experiences ‘always feel in danger of being manipulated by those who make promises’ (Howe 2005: 128).

At the same time, recognition that institutional hierarchies, formal authorities and faith leaders do not necessarily understand or represent the views or needs of individual members of their faith communities is of crucial importance in responding appropriately to the needs of those abused in religious contexts. Religion and religious activities may provide contexts where they can find recovery and build their resilience (Crompton 1998; Doyle 2001, 2006; Kennedy 1995). However, it is equally clear that especially for those for whom religious beliefs are of ongoing importance, failure by religious institutions to respond sensitively and adequately has heightened their distress (Lawrence 2011; MACSAS 2006).

Meeting the needs of victims/survivors of child abuse in religious contexts

The needs, strengths and responses of each victim/survivor are a unique result of the interaction of many factors. In this context, these factors are likely to include the impact of individuals’ religious beliefs on their experience of being abused and the impact of being abused on their religious beliefs (Farrell 2009). Some victims/survivors remain active members of their original faith community or join another, while others cease all involvement with religion or may become active critics of religion per se.

Meanwhile, survivors groups and individual victims/survivors have made clear statements regarding their needs. While some are satisfied with the response of religious institutions or express no further interest in relevant issues, many campaign actively for improved responses. They increasingly advocate the use of restorative justice, which, in addition to meeting the particular needs of individuals, also emphasises the need for victims/survivors to know that they have been believed, their pain is acknowledged both by perpetrators and religious institutions, they will be appropriately compensated and the faith community will maximise the protection of others and respond appropriately and sensitively to victims/survivors in the future. In 2014, Stop Church Child Abuse, an alliance of survivor support groups in England and Wales, advocated for a complaints system that is independent of churches, tailor-made support and therapy, and an improved system of redress and mandatory reporting of abuse (Stop Church Child Abuse 2015). Survivors NI (2011), meanwhile, called for reparation that will ‘redress all the consequences of the abuse suffered … be based on the needs, views and circumstances of the individual and … proportionate to the gravity of the violation and the resulting harm’. Survivors NI (2011) also suggest that such packages ‘should include restitution, compensation, rehabilitation, satisfaction and guarantees of non-repetition’, that institutions should contribute to costs to the extent to which they are accountable and that any individual or entity found liable should either provide that reparation or compensate the state for doing so.

Acknowledgement and validation are essential components of healing (Salter 1995) and, for at least some, experience of an adequate response from their religious institution or faith
community is crucial to recovery. Those involved in survivors’ groups are also likely to benefit from the sense of solidarity, empathy and understanding inherent in knowing they are not alone, but such emotionally secure bases may not be available to or accessed by all victims/survivors. Those who are not in contact with survivors’ organisations will remain particularly dependent on other sources of support. They will ultimately benefit indirectly from the work of survivors’ groups in pressing for more appropriate and consistent responses from religious institutions and others, including social workers in secular organisations, but much work remains to be done to establish both their needs and the most effective and sensitive ways of meeting these.

Professionals seeking to respond appropriately to individuals need to recognise that they are likely to have needs particular to them and their situation, as well as needs that appear to be shared by most victims/survivors of child abuse in religious contexts. Policy makers and lawyers would, in turn, do well to note the conclusion of Bottoms et al. (1995: 109), who emphasise that ‘in the long run, society should find ways to protect children from religion-related abuse and to help religions evolve in the direction of better treatment of children’. Freedom to choose and to practice a religion should not include freedom to abuse children.

References


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