

Daniel O'Rourke published "Stages of Faith in Our Lives" in *The Observer*, Dunkirk, NY, on December 10. Dan is a married Catholic Priest.

In our search to find purpose and meaning we go through different stages in our lives. Most people navigate this on-going search through religion, but religion does not have to be involved. All of us, religious and non-religious, seek meaning and purpose -- and this seeking evolves as we age.

James Fowler in his 1981 groundbreaking book, "Stages of Faith -- The Psychology of Human Development" interviewed more than 5000 people at different periods in their lives and identified six stages of faith. When Fowler, a developmental psychologist, speaks of "faith" he means the way individuals make sense of the world as they struggle to find meaning. Such "faith" is not "belief" and not necessarily religious.

Dr. John Testerman, MD, at the Seven Day Adventist Loma Linda University says these stages are "different lenses through which we view the world as we travel through life." These stages, however, are not inflexible. Individuals can and do wander back to the preceding or forward to the following stages.

In this column I rely extensively on Testerman's March 1995 article in "Adventist Today." There he states that transitions from one stage to another "occur when, in response to new experiences or life crises, our old way of seeing the world collapses and" we build "a new faith structure."

The first stage is THE MAGICAL WORLD of preschool children. These children experience the world through their imagination, intuition and feeling. Logic does not inhibit them. They live in a magical, egocentric world full of wonder.

Stage 2 is THE CONCRETE FAMILY -- a phase in which myths are taken literally. In it children from 6 to 12 "see the world through the lens of story -- a concrete, literal, narrative world of family and tribe, ritual and myth. They begin to identify with a faith community, which may be religiously, politically or culturally defined, and to locate themselves within its Master Story." That story tells them who they are.

For Christians the story is the Jesus story with its virgin birth, the star at Bethlehem, the crucifixion and resurrection. For those who center their lives on patriotism it is the national story with the romanticized myths of the Puritans and Native Americans, Washington and the cherry tree, and Lincoln altruistically freeing the slaves.

"Stage 2 collapses," Testerman observes, "when teenagers use their newfound power of abstract thought to deconstruct their previous concrete understanding of the world." Typically churches attempt to counteract this stage with religious education and bible study.

Stage 3 is the FAITH COMMUNITY. In this stage adolescents see the world through their peer community. Unconsciously, they incorporate their values and ways of thinking from their peer subculture. In Stage 3, "We are immersed in the thought system of our faith community like a fish that does not perceive the water in which it swims."

Stage 3 commonly "continues as the adult faith stage of most people in our churches and society." We do not question these culturally accepted ways of thinking because they have become part of us. Nor do we question their authoritative sources, such as the Bible, Church hierarchy, or military and political leaders, who dogmatically bolster our worldview. Stage 3 and its group-based identity provide cohesion for the group but also cause conflict. For "it is hard to deal calmly and rationally with issues which touch on one's identity."

When the traditional answers stop making sense, Stage 3 falls apart. Stage 4 is RATIONAL, RADICALLY PERSONAL CONCLUSIONS about life's meaning. "Stage 4 is a continuation of the rational examination of belief that begins during Stage 3." In Stage 4, however, young adults question "not only individual beliefs, but also the whole previously unquestioned traditional and authoritative bases of belief." They step back from their own faith heritage and examine it through the lens of reason. They "compare it to other faith traditions, throw out the parts that don't make sense, or even abandon it altogether."

Roman Catholics speak of cafeteria Catholics where people take what they want from the menu of beliefs and reject what to them is unreasonable. The institutional church condemns this approach, but as my niece told her mother. "You can get a good meal in a cafeteria -- if you just make the right choices." Cafeteria Catholics are in Stage 4.

"Stage 4 collapses when we run up against the limits of rational thought and the search for certainty ends in failure" or frustration. Stage 5 is THE WORLD OF PARADOX, a numinous and mystical world. To people in Stage 3, Stage 4 sounds like a loss of faith. "To those in Stage 4, Stage 3 looks like unthinking traditionalism and Stage 5 like mystical mush."

"Stage 5, which may begin at mid-life or later, is in some respects similar to Stage 1." We look at life again through the lens of imagination and intuition and live in a universe of mystery, wonder and paradox. Reason "is no longer the primary tool with which we attempt to apprehend ultimate reality" or life's meaning. In Stage 4 we assumed authority to ourselves through reason. In Stage 5 confronted by reason's limitations, we return to myth, symbol and feeling, which recapture the super natural (two words) dominance they held in our consciousness as children.

Stage 6 is rare. It is SELFLESS SERVICE AND RADICAL COMMITMENT. Individuals in this stage "identify deeply with all humanity, and therefore tend

to spend themselves in service of worldwide issues of love, justice and brotherhood.” Think: Francis of Assisi, Mahatma Gandhi, Albert Schweitzer, Dag Hammarskjöld, Abraham Heschel, Thomas Merton, or the Dalai Lama.

Our physical, intellectual and emotional lives are not static. Neither is our faith life. As it develops and changes it goes through distinct stages. Fowler helps us understand this. As we experience it in our own lives, it should not frighten us. Rather we should embrace it.

How many people you know go to church to find justification for what they already believe as opposed to being open to hear their views challenged and experience conversion?

Your Final Wish Isn't Always Your Doctor's Command

By Ann Woolner

Dec. 9 (Bloomberg) -- You think you've done the legal paperwork to avoid becoming another Terri Schiavo, who was trapped in a hopeless vegetative state while her family argued over whether to keep her going.

You've specified ahead of time that you want nothing artificial to prolong your life, not even a forced-feeding tube, if doctors say you won't recover from that state.

Don't rest assured. If that time comes, the documents you labored over won't count for much if you wind up in the wrong place.

More than 900 hospitals and health-care centers in the U.S. that treated 93 million patients last year are affiliated with the Catholic Church, whose American policy-making body won't let your end-of-life wishes come true while you are in their care.

Last month the U.S. Conference of Catholic Bishops resolved what had been a debate among clerics and ethicists over the morality of artificially feeding or hydrating patients who are stuck in a vegetative state, possibly for years.

What had been a “presumption” in favor of tube feeding in 2001 became, in the revised policy, an “obligation.”

“This obligation extends to patients in chronic and presumably irreversible conditions (e.g., the ‘persistent vegetative state’) who can reasonably be expected to live indefinitely if given such care,” the bishops announced in the latest version of their Ethical and Religious Directives for Catholic Health Care Services.

If an incapacitated patient has a living will that instructs physicians, it “should always be respected and morally complied with, unless it is contrary to Catholic moral teaching,” the bishops said.

That's a big “unless.”

If family members insist that the patient's directive be followed, they would have to move him to another facility, according to the Reverend Thomas Weinandy, executive director of the Conference of Bishops doctrine committee.

For thousands of Americans, a Catholic hospital is the only one they have, says Compassion and Choices, a non-profit group that advocates for the terminally ill.

Federal and state laws encourage people to think ahead of time about what medical treatment they would want, and under what circumstances, if they became incapacitated. Hospitals that accept federal funds are required to bring up the subject, and that's when they advise incoming patients of their policies.

You can spell out your wishes in an advance directive, and you can name a health-care proxy to speak for you on such matters.

"Where you actually have a medical directive, people are constitutionally entitled to have their wishes given effect," says Ray Madoff, a law professor at Boston College focusing on end-of-life issues.

The U.S. Supreme Court said so in the Nancy Cruzan case in 1990. But, Madoff asks, who's going to enforce that right?

Under older case law than Cruzan, if you are given a treatment you specifically declined, it is considered criminal battery under the law. Whether that applies to tubing for food and water, which some see as too basic to human existence to be considered medical treatment, isn't as clear.

In New York, state law requires an extra level of evidence that the patient didn't want a feeding tube for it to be denied. An advance directive would accomplish that, and so would a health-care proxy with knowledge of the patient's wishes.

But I digress.

The conflict between patient and medical personnel speaks to a larger health-care issue that reaches beyond Catholic institutions.

The notion is growing that the institutional or individual conscience of a health professional trumps a patient's wishes when they conflict, or at least makes them more difficult to carry out.

Health professionals have been winning ever-stronger language in state and federal laws that forbid discrimination against them if their moral or religious beliefs prevent them from assisting or performing abortion or prescribing birth control. You will find some version of it in health-care bills Congress is considering.

And while in most cases of conflict arrangements are made to transfer patients to health-care providers and professionals who will comply with their wishes, that isn't always possible.

This tugs at a sacred tenet of American health care: that an informed and competent patient should be allowed to make critical decisions over his own body, even in advance.

Increasingly, the patient's moral and religious convictions are taking a back seat to the beliefs of people charged with caring for their health.

So it was with the Bishops Conference, which ditched its more ambiguous stance to adopt principles taught by Pope John Paul II.

Catholic hospitals can still follow patient directives that refuse other sorts of medical treatments. The more difficult question was whether food and water are medical treatments and therefore morally optional. And what if the patient could exist for years in a vegetative state?

Or was it something so essential to a person's humanity that it must be given to affirm the value of human life, indefinitely? Would it be euthanasia to refrain from tubing?

It would, the bishops announced.

"We believe we are upholding the dignity and value of every human life," Weinandy said in a telephone interview.

And yet, there are others who believe their dignity requires health-care providers to abide by their wishes to keep feeding tubes out of their bodies if they have no hope of ever resuming consciousness.

At a time when the country is in desperate need to reduce health-care costs, surely we could start by agreeing that it's a good idea for patients not to be given treatment they have specifically refused.

From The Irish Times, December 2, the following commentary by Maureen Gaffney on the root cause of the sexual abuse crisis – which could just as easily be applied to the American Catholic Church.

Church's view of sex the root cause of its troubles

OPINION: After the first wave of revelations over a decade ago, the sexual abuse of children by the clergy was explained away by the Roman Catholic Church by the bad apple theory – that these isolated "sexual acts" were transgressions by a minority of weak priests. In the wake of the Dublin diocesan report, that explanation has been amplified to include institutional failures of decision-making in dealing with offenders and victims, and a culture of secrecy and cover-up ...

But tidying up corporate governance and instituting a more transparent culture is not going to resolve the scandal of clerical sexual abuse. That will require the church to face up to a much more profound problem – the church’s own teaching on sexuality.

Consider the list of issues the church has failed to deal with credibly since the 1960s: premarital and extramarital sex; remarriage; contraception; divorce; homosexuality; the role of women in ministry and women’s ordination; and the celibacy of the clergy. All have to do with sexuality.

Very few Catholics are looking to the church for moral guidelines in relation to any of these questions anymore. And why would they? After all, the church’s teaching on sexuality continues to insist that all intentionally sought sexual pleasure outside marriage is gravely sinful, and that every act of sexual intercourse within marriage must remain open to the transmission of life. The last pope, and most probably the present, took the view that intercourse, even in marriage, is not only “incomplete”, but even ceases to be an act of love, if contraception is used. Such pronouncements are so much at variance with the lived experience of most people as to undermine terminally the church’s credibility in the area of intimate relationships.

The sexual revolution, particularly the development of effective contraception, and the growth of the women’s and gay rights movements, has left the church stranded with an archaic psychology of sexuality. The world has moved decisively away from a view of sex as simply procreation. What preoccupies men and women in the modern world is trying to understand the psychological roots of their own sexuality: how it is formed; how central it is to their identity and sense of self; and probably most essentially, how it can make or break their relationships. Even the clergy cannot put up a credible defence for the insistence on priestly celibacy in the face of the almost complete collapse in vocations and the mounting evidence that many priests have ignored teachings on this matter.

Richard Sipe is a former priest and a recognised authority on celibacy. On the basis of his research in the US and other countries, he estimates between 45 and 50 per cent of Catholic clergy are sexually active. A study in Spain found that of those clergy who were sexually active, 53 per cent were having sex with an adult woman; 21 per cent with adult men; 14 per cent with minor boys and 12 per cent with minor girls. His own research showed 20 per cent of priests were involved in a more or less stable sexual relationship with a woman, or with sequential women in identifiable patterns. Another 10 per cent were in exploratory “dating” relationships that might include sexual contact.

Some of the remaining 70 per cent tried to solve the problems of their loneliness by having a close friendship with a woman that excluded sex. But, predictably, many priests discovered how dependent their celibacy was on the traditional all-male clerical structure of their lives that was no longer available to them as they increasingly worked in a more isolated way in communities.

Sipe estimates the proportion of gay men in the priesthood as between 30 per cent and 50 per cent, significantly greater than the proportion in the general population.

About 10 per cent of clergy in the US were involved in homosexual activity. A further 12 per cent identified themselves as homosexual or as having serious questions about their sexual orientation, although not all were sexually active. These men find themselves in a church which views a homosexual orientation as “an objective disorder”, “a more or less strong tendency towards evil”. How can gay men and women in religious life, or those troubled by their orientation, work out their sexual identity in such an environment, let alone minister to their gay and lesbian flock?

All of those issues are institutionally denied or shrouded in secrecy. Hardly surprising, then, that paedophilia can flourish in such an environment. It is important to stress here that homosexuality and paedophilia are two quite separate phenomena. A 2004 study for the American bishops found the percentage of clergy accused of child sexual abuse was consistently between 3 and 6 per cent, and the overall average is 5 per cent.

As the institutional structures of the church have weakened in the wake of successive scandals, it is likely that the proportions of priests who are actively engaged in sexuality of one kind or another may have increased.

Yet, the church has remained unmoved in the face of the mounting evidence of defection from its sexual teachings by both laity and clergy, although in the case of the offending clergy, they seem entirely capable of keeping their doctrinal orthodoxy psychologically separate from their actual behaviour.

It is predictable what will now happen. The church’s “learning curve” will crank up temporarily and its corporate governance on child sexual abuse may improve. And then, it will be business as usual. But no amount of improved decision-making and transparency will enable senior clergy to respond effectively to the church’s crisis of sexuality.

To do that, they must confront the root cause of the problem – that the Catholic Church is a powerful homo-social institution, where men are submissive to a hierarchical authority and where women are incidental and dispensable. It’s the purest form of a male hierarchy, reflected in the striking fact that we all collectively refer it to as “the Hierarchy”.

It has all the characteristics of the worst kind of such an institution: rigid in social structure; preoccupied by power; ruthless in suppressing internal dissent; in thrall to status, titles, and insignia, with an accompanying culture of narcissism and entitlement; and at a great psychological distance from human intimacy and suffering.

Most strikingly, it is a culture which is fearful and disdainful of women. As theologian William M Shea observes, “fear of women, and perhaps hatred of them, may well be just what we have to work out of the Catholic system”. Until that institutional misogyny is confronted, the church will be unable to confront the unresolved issue of its teaching on sexuality and the sexuality of the clergy. Instead, celibacy will continue to be used as a prop to the dysfunctional homo-social hierarchy. The

hierarchy will continue to project its fear of women on to an obsessive effort to exert control over their wombs, their fertility and their unruly sexual desires. That is the psychology of exclusion.

It is to be hoped that the Catholic Church in Ireland will resolve this issue. Not just because many of us don't want to lose the reassuring moral presence of the church, nor because we cannot easily do without the intelligent altruism of devoted religious, but because the great joy and hope of the Christian message was never more badly needed.

On occasion, the only thing that keeps the leadership honest is civil law enforcement. From the Huffington Post blog.

Lawsuits Once Again Help Expose Clergy Sexual Abuse

News Coverage of Cardinal Edward M. Egan's cover up of clergy sexual abuse in the 1990s while he was the bishop of Bridgeport would be shocking if it weren't so familiar. The list of high ranking Catholic Church officials who failed to report credible allegations of child sexual abuse by priests to law enforcement includes the most prominent prelates of this generation: Cardinal Joseph Bernadin in Chicago, Cardinal Bernard Law in Boston, Cardinal Anthony Bevilacqua in Philadelphia, and Cardinal Roger Mahony in Los Angeles.

The Egan case does, however, highlight one feature of this ongoing scandal that is frequently overlooked: the role that civil lawsuits have played in uncovering most of what we know about clergy sexual abuse in the Catholic Church and in motivating Church officials to address the problem.

To begin with, plaintiffs' have lawyers compelled Church officials to produce secret files concerning abuse allegations and to provide sworn testimony about their own failures to adequately address the problem. Media reports about Cardinal Egan's failures in Bridgeport are based on more than 12,000 pages of memos, church records, and testimony from 23 lawsuits against the diocese. Indeed, most media coverage of the scandal--dating back to the early 1980s--has been based on these types of litigation documents.

Civil lawsuits have also shaped our understanding of the clergy sexual abuse scandal as an institutional failure on the part of Church leaders. Throughout the scandal, some within the Church have attempted to focus attention exclusively on the perpetrators, suggesting that clergy sexual abuse is merely a matter of "a few bad apples." Others have argued that the whole matter has been blown out of proportion by plaintiffs' lawyers and their clients seeking to make money off of the scandal by filing lawsuits. One also frequently hears suggestions that news coverage of the scandal is motivated by anti-Catholic media bias. Indeed, Cardinal Egan's successor, Archbishop Timothy Dolan leveled this very accusation against the New York Times this fall.

By contrast, civil lawsuits have focused attention on the failures of Church officials. Plaintiffs' lawyers sue large institutional defendants because they are better able to pay large settlements and judgments, and so clergy sexual abuse lawsuits have emphasized the failure of diocesan officials--especially bishops--to protect children from known abusers.

Media coverage of the scandal has been heavily influenced by this framing of clergy sexual abuse as an institutional failure on the part of Church officials. Litigation and trials have traditionally provided the type of drama that makes them attractive to journalists seeking to draw in readers. In addition, documents filed in court and sworn testimony provide the kind of credible sources of information that journalists like to rely upon.

By framing clergy sexual abuse as a problem of institutional failure on the part of Church officials, civil lawsuits have also motivated dioceses around the country to institute new programs to prevent sexual abuse before it occurs and to report credible allegations of sexual abuse when it does happen. The U.S. Conference of Catholic Bishops reports that over 90 percent of dioceses have instituted such programs and have trained over 7 million people in preventing, investigating, and reporting child sexual abuse.

It is inconceivable that so many U.S. bishops would have instituted such ambitious efforts to address clergy sexual abuse in the absence of the intense media coverage and public attention generated by civil lawsuits--not to mention the liability exposure.

It has been 25 years since the first civil lawsuits were filed against Catholic Church officials for clergy sexual abuse, and much progress has been made as a result of them. That leading prelates such as Cardinal Egan are still fighting so hard to hide the record of their misdeeds indicates that there is more work to be done and that civil lawsuits against Church officials may still have a role in uncovering the truth, highlighting the misdeeds of officials, and providing much needed pressure for reform.

Your comments and articles are appreciated. Send them to tony@tonyercolano.com