Sex abuse crisis requires ‘courageous’ response

Andy Telli

The pain, the anger, the hurt that brought the Catholic Church to its knees more than 15 years ago after reports of sexual abuse of minors by priests and the efforts to cover up that abuse by leaders of the Church in the Archdiocese of Boston and other dioceses across the country have resurfaced in recent weeks.

In Pennsylvania, the report of a grand jury investigation of sex abuse allegations in six dioceses in that state found that more than 300 priests were credibly accused of abusing more than 1,000 victims. The cases listed in the report go back as far as 70 years and most took place before U.S. bishops adopted the Charter for the Protection of Children and Young People in 2002. The report also detailed efforts to cover up the abuse by Church leaders.

The Pennsylvania report came weeks after the revelation of a credible allegation that Archbishop Theodore McCarrick abused a minor nearly 47 years ago as well as accusations against him of sexual misconduct with seminarians, all while he was rising through the ranks of the Church hierarchy to become a cardinal.

“Bishops are extremely humbled and humiliated by this,” said Bishop J. Mark Spalding of Nashville. “However, we can’t just stay immobilized. We have to respond in a courageous way.”

“As in grief, people respond very differently and that’s OK,” Bishop Spalding added. “Some respond with sadness, and that’s OK. Some respond with anger, and that’s OK. Some respond by wanting to run away. We can’t. We have to pray for the courage to confront this issue.”

Laity key to response

Cardinal Daniel DiNardo of Galveston-Houston, the president of the U.S. Conference of Catholic Bishops, has announced a plan to address the new abuse scandal. The plan, which will be considered at the November meeting of the nation’s bishops, will include “a full investigation” of the questions surrounding Archbishop McCarrick, including a request to the Vatican for an apostolic visitation to investigate the situation.

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Pope: Abuse victims’ outcry more powerful than efforts to silence them

Cindy Wooden CNS

VATICAN CITY. “No effort must be spared” to prevent future cases of clerical sexual abuse and “to prevent the possibility of their being covered up,” Pope Francis said in a letter addressed “to the people of God.”

“I acknowledge once more the suffering endured by many minors due to sexual abuse, the abuse of power and the abuse of conscience perpetrated by a significant number of clerics and consecrated persons,” the pope wrote in the letter dated and released Aug. 20. The letter was published less than a week after the release of a Pennsylvania grand jury report on decades of clerical sexual abuse and cover-ups in six dioceses. The report spoke of credible allegations against 301 priests in cases involving more than 1,000 children.

“The heart-wrenching pain of these victims, which cries out to heaven, was long ignored, kept quiet or silenced,” Pope Francis said. “But their outcry was more powerful than all the measures meant to silence them.”

“The pain of the victims and their families is also our pain,” he said, “and so it is urgent that we once more reaffirm our commitment to ensure the protection of minors and of vulnerable adults.”

In his letter, Pope Francis insisted all Catholics must be involved in the effort to accompany victims, to strengthen safeguarding measures and to end a culture where abuse is covered up.

While the letter called all Catholics to prayer and fasting, it does not change any current policies or offer specific new norms.

Clericalism part of the problem

It did, however, insist that “clericalism” has been a key part of the problem and said the involvement of the laity will be crucial to addressing the crime and scandal.

Change, he said, will require “the active participation of all the members of God’s people.”

“Many communities where sexual... Continued on page 7
Hospital chaplain honored for distinguished career in ministering to sick

Mary McWilliams

Mary Lou O’Gorman made a career of running toward people in painful, uncomfortable and life altering situations. The Christ the King parishioner was not a first responder in the sense of a firefighter or police officer, but a Catholic chaplain in Nashville hospitals.

O’Gorman was honored with the Distinguished Service Award by the National Association of Catholic Chaplains (NACC) July 14 in Anaheim, California, for her service and leadership in pioneering the advancement of educational requirements for chaplaincy certification and advocating for the importance of including the spiritual component of a patient into their overall care, in addition to the compassionate care she offered to patients, families and medical staff during her career.

“Catholic chaplaincy, and a woman’s role as a chaplain, O’Gorman said, is the “best kept secret in the Catholic Church.”

Among the makeup of the nearly 2,000 NACC members, more than 60 percent are women and 57 percent are laypeople, according to the National Association of Catholic Chaplains.

She explained that “chaplain” is a term for a minister who works in an institution such as a hospital or the military. In its most basic job description, the chaplain, she said, provides support and resources relevant to a patient.

Canonically, she said, the title is “lay ecclesiastical minister.”

But in its most complex and realistic form, the chaplain sits in the emergency room all night with a little boy whose mother was killed in a car accident.

The chaplain serves as a patient advocate who tells the medical team the patient doesn’t really understand the trajectory of a terminal illness and how long he will take.

The chaplain goes step-by-step with the family over the conditions and ramifications of end-of-life care. Particularly in end-of-life cases, the chaplain, she said, tries to understand what is “broken” in the patient’s life — or what is hindering that person from being at peace.

The chaplain comforts hospital personnel who are grieving the loss of a patient they’ve come to know fondly.

She describes her career as a chaplain, which began in 1985 at Saint Thomas West Hospital and continued until her retirement as a director of spiritual care in 2016, as “a wonderful, wonderful experience.”

O’Gorman started out as a Catholic elementary school teacher in St. Louis, and then, after she married, for a brief time in Belgium. She spent 14 years as a stay-at-home mother to her three sons, and then began to ponder, “What do I want to do when I grow up?”

Her husband taught at a Catholic seminary in Denver and she was able to take some courses there for free. Those courses turned out to be part of the master’s program in pastoral care.

“I felt a gift in working with the sick,” she said, “and I think He’s still working on me.”

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“I felt a gift in working with the sick,” she said, “and that gift was re-affirmed by her instructors.

But when her husband, Bob O’Gorman, took a job in Nashville in 1981 to teach at Scarritt College, now closed, she had to find a new channel for her studies. That ended up being Vanderbilt University where she was able to pursue a master’s degree in divinity, a course of study that often culminates in ordination.

“Some classmates said I should join another church and become ordained,” she recalled. But her strong identity as a Catholic woman made her choose to become a Muslim and a chaplain, which began in 1985 at Saint Thomas West Hospital and continued until her retirement as a director of spiritual care until her retirement as a director of spiritual care in 2016, as “a wonderful, wonderful experience.”

O’Gorman got her training at the Veterans’ Administration hospital, a facility, she noted, that does not have an emergency room. Her first assignment at Saint Thomas was to its emergency room, and there, she got a heavy taste of what it means to be a chaplain, which she said is “not a one-size fits all” kind of profession.

It was her first week on a Friday night and a woman was killed in a tragic car accident. The woman’s young son was in the emergency room and the hospital had a hard time tracking down the father. While she waited with the boy, she also had the opportunity to see how difficult the situation was on the emergency room staff.

The boy’s father was eventually found and took his son home. She, too, went home, but Monday morning checked in with the emergency room staff to see how they were holding up.

“They greeted me so warmly,” she said. She realized that their warmth was a result of seeing her persevering through the most trying ordeal as they had to do, “I realized that what I did was not run away.”

She also had the opportunity to see what the need for the chaplains by seeing them at work, making rounds, praying at a patient’s bedside and trying through the difficulties of an illness — sometimes life-altering, sometimes terminal — with both the patient and family.

Much of her work has been in end-of-life care.

As a result, she was able to help educate hospital personnel on the integration of spiritual care with their medical plans. She taught medical students and new personnel about the job of chaplains.

“They see the value of the human spirit,” O’Gorman said. “They see the value of spiritual personnel observing chaplains’ work. And tending to the human spirit.”

Her work didn’t stop in Nashville, however. O’Gorman’s leadership with the NACC has brought both regional and national advancements. She was instrumental in establishing guidelines for training and professional development for chaplaincy (a master’s in theology is required, plus one-year of clinical pastoral education), and continuing education.

She has held a number of leadership positions within the organization, served on the board of directors, and continues working to expand the role of chaplains.

NACC is currently in the beginning stages of training work with bishops, educating them about the chaplain’s role and how chaplains can fill the gaps of patient care when they are moved from one facility to another, such as hospital to nursing home.

Teacher, daughter spend summers helping kids in Sierra Leone

Continued from page 9

 nightly devotions and scripture exploration, and, according to Rippy, “an amazing pastor who reminds them daily that they are a special child of God, and that God has a plan and purpose for their lives.”

The entire orphanage gathers in the courtyard at day’s end, and the kids take turns leading the worship and reading lessons.

For Rippy, the mission work enabled her to have an “a-ha” revelation about her own faith.

“When we went the first time, I really thought we were going over to share the love of God with them,” she said.

“But when we got there and watched them during their prayers, their worship and their evening devotion time, it showed me that they have nothing, but they have everything. They really feel the love of God in ways that we don’t.”

Church leaders get training to help veterans heal

Continued from back page

to talk to them now,” she said. An important part of his ministry, he said, is one of presence, “being available to let them tell their stories.”

One challenge many military families face, Father Wolf said, is that when a soldier returns home from serving overseas and “the family has worked out a different way of getting along without them,” and they have to readjust to different family dynamics.

“I don’t know how these soldiers do what they do,” Father Wolf said. serving in multiple, back-to-back deployments overseas, having to continually withdraw and re-integrate into family life. Learning more about the concept of “moral injury” was helpful to Father Wolf, and he said he was glad to see that “the Army seems to be helping them work through that with dignity.”

Workshop participants also learned more about identifying potential conflicts between civilian and military cultures, identifying actions community clergy can take to assist military personnel and their families with a healthy adjustment to a civilian culture, types of common military events that can cause adjustment problems for military personnel and the psychiatric and psychological responses that often follow from them, identifying the relationship between spirituality and “meaning making,” the importance of personal narratives and the relationship between life altering, sometimes terminal — with both the patient and family.

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“Children in Africa know Him, and we can know Him that same way, if we just open ourselves up and forget all the trappings of the First World,” continued Rippy. “I know it has changed me, though in what ways I’m not really sure. Our faith is constantly evolving, and I think He’s still working on me.”

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