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Shannon Nicole Thomas

Thomas G. Plante

Santa Clara University, tplante@scu.edu

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Psychological Well-Being of Roman Catholic and Episcopal Clergy Applicants

Shannon Nicole Thomas and Thomas G. Plante¹

Abstract The current study investigated the psychological functioning of over 200 applicants to the priesthood or diaconate in the Roman Catholic and Episcopal churches, as revealed by the subjects' scores on the Minnesota Multiphasic Personality Inventory, Second Edition (MMPI-2). Results revealed an overall trend of psychological health in the sample population, evidenced by few systematic elevations in indices of psychopathology. Within the Catholic sample, deacons demonstrated lower MMPI-2 scores on several measures, perhaps suggesting slightly better psychological well-being than their priest counterparts.

Keywords Catholic, Episcopal, Priest, Deacon, Clerical entrants, MMPI-2

The United States population has almost doubled in the past 50 years, yet the number of individuals making the choice to become Roman Catholic and Episcopal clergy continues to diminish (Allen, 2009; Pew Forum on Religion and Public Life, 2008). For example, the popularity of the late Pope John Paul II and current Pope Francis has not prevented a worldwide decline of nearly 300,000 Catholic priests and nuns over the last 40 years (McKenna, 2013). An

¹ T. G. Plante (Contact)

Department of Psychology, Santa Clara University

Santa Clara, California 95053-0333, USA

E-mail: tplante@scu.edu

analysis of the global trajectory overall suggests that the number of clergy members will continue to drop (Allen, 2009; Dollhopf & Scheitl, 2013). These trends beg the question, Given the declining numbers of clergy members and a decade of severely negative publicity concerning clergy sexual abuse worldwide (Chandler, 1990; Plante & McChesney, 2011), who currently desires to enter the clerical profession? Additionally and most importantly, can applicants to the clerical state who face great adversity and challenges within their respective institutions be considered psychologically healthy?

Some research conducted in recent years has focused on various aspects of the psychological health of clergy members (e.g., Kappler, Hancock, & Plante, 2013; Plante, Manuel, & Tandez, 1996; Rossetti, 2011). These studies, among others, have found that clergy members in the Catholic and Episcopal traditions are generally healthy, happy, and functioning well. However, few studies have examined the psychological functioning and well-being of Catholic and Episcopal clerics within the same study with data secured after the challenging clergy abuse crisis that came to national and international attention in 2002.

The Catholic and Episcopalian churches experience more similarities than differences and therefore make for good comparison groups. Both are highly sacrament-driven churches. Differences certainly exist, however. The Episcopalian church has not suffered the media attention over scandals of the kind faced by the Roman Catholic Church, which attributes for some of the recent declines in clerical applicants and attendants among Catholics (Gillis, 2012). The Episcopalian church is typically the more liberal of the sacrament-focused Christian denominations; unlike the Roman Catholic Church, it accepts female and married clergy members as well as homosexual clerics in many (but not all) dioceses (Marty, 2011). Priestly

attire is similar as well, which includes wearing a clerical white collar and black clothes, and thus the clergy are often indistinguishable to the average person.

The present study analyzed the psychological well-being of individuals seeking to become priests or deacons in the Roman Catholic and Episcopal churches following the clergy abuse scandals. The aim was simply to determine the psychological well-being of contemporary clerical applicants, who apparently are not deterred by the diminishing number of entrants or the recent sex abuse scandals. We hypothesized that these subjects, consistent with research prior to the recent post-2002 abuse scandals (e.g., Plante, Manuel, & Tandez, 1996), would be psychologically sound, as demonstrated by their scores on a number of scales on the MMPI-2 questionnaire that examines indices of psychopathology. In addition, the current study examines how the psychological health of Catholic and Episcopal clerics compare and, furthermore, how that of priests and deacons compare within the Roman Catholic Church.

Method

Participants

The current investigation's 211 participants included a combination of males and females from 18 to 72 years of age (mean age = 46.62 years, $SD = 13.89$) who were applicants to the either the Catholic or Episcopalian priesthood or diaconate primarily from the western part of the United States. They were entering diocesan and religious orders on the West Coast of the United States and were evaluated after 2008. The participants were referred for psychological evaluation by their local dioceses, as is required of all applicants to ordained ministry in these faith traditions.

Measurement

The Minnesota Multiphasic Personality Inventory-2 (MMPI-2; Hathaway & McKinley, 1989) is the most respected, researched, and popularly employed psychological assessment (Butcher et al., 1989). This self-report instrument is comprised of 567 true or false items, including three major validity scales and ten major clinical scales, supplemented by numerous additional subscales. These clinical scales assess the ten most common categories of abnormal behavior that can indicate impaired psychological well-being and psychopathology. The MMPI-2 has been used in previous research investigating clerical populations (e.g., Putnam, Kurtz, & Houts, 1996; Plante, Aldridge, & Louie, 2005).

Procedure

The current study analyzed participants' self-reported scores on the MMPI-2 questionnaire that they completed as part of their requirements to seek ordained ministry. These psychological evaluations were conducted at the request of the church as a final stage of the clerical application process. The individual scores, mean scores, and standard deviations of participants' scores on the MMPI-2 scales were entered into a computerized data file and analyzed using SPSS Statistics software.

Results

Our analysis of the psychological health of the current study's 211 participants (see tables 1–4) suggests that both Catholic and Episcopal participants, as a group, are indeed psychologically healthy. This is indicated by their scores on the MMPI-2 scales that examine psychological functioning in that none of the scales revealed average scores above 65, which would indicate potential pathology.

There was no statistically significant difference in the MMPI-2 scores of Catholic ($n = 117$) versus Episcopalian ($n = 94$) participants. Thus, the psychological functioning between Catholic and Episcopal clerical applicants did not significantly differ. In contrast, when Catholic participants were isolated and separated into priest and deacon participants, analysis of their MMPI-2 questionnaire scores revealed some significant differences. Catholic deacons ($n = 48$), whose scores revealed no significant elevations on any MMPI-2 scale, had generally lower MMPI-2 elevations than Catholic priest participants ($n = 69$), who scored statistically significantly higher than deacons on several measures (i.e., Psychopathic Deviate [$M = 54.70$, $SD = 9.30$, $p < .001$], Psychasthenia [$M = 53.01$, $SD = 6.08$, $p < .001$], and Schizophrenia [$M = 53.17$, $SD = 6.58$, $p < .001$]) scales. The differences between Episcopal deacons and priests were not significant ($p > .05$).

When Catholic and Episcopal participants were combined and then subdivided into priest and deacon subgroups, both Catholic and Episcopal priest participants' elevated scores on six MMPI-2 scales consistently revealed a significantly greater potential for psychopathology than did those of deacons. These six scales included the Defensiveness, K ($M = 62.04$, $SD = 9.93$, $p < .001$), Superlative Self-presentation, S ($M = 62.23$, $SD = 10.03$, $p < .001$), Over-controlled Hostility, O-H ($M = 64.83$, $SD = , p < .001$), Lie, L ($M = 61.65$, $SD = 16.14$, $p < .001$), Need for Affection, Hy2 ($M = 57.09$, $SD = 10.11$, $p < .001$), and Repression, R ($M = 59.00$, $SD = 8.77$, $p < .001$) scales.

Table 1 Means and Standard Deviations for MMPI-2 Scores among Catholic Participants

Validity Measures	<i>M</i>	<i>SD</i>
L	62.61	15.18

F	44.21	5.85
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K	61.16	9.56
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Clinical scales

Hs	52.54	9.12
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D	50.56	6.95
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Hy	53.38	8.10
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Pd	52.62	8.41
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Mf	49.46	8.17
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Pa	51.21	8.68
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Pt	51.48	6.13
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Sc	51.23	6.65
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Ma	47.79	6.46
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Si	45.16	8.58
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Selected supplementary

scales

A	42.69	7.28
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R	58.29	8.56
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S	62.61	9.11
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Mac-R	43.76	7.24
OH	64.58	10.03
Do	52.01	8.29
Hy2	57.09	10.11
Pa3	57.77	8.23

Table 2 Means and Standard Deviations for MMPI-2 Scores among Episcopalian Participants

Validity Measures	<i>M</i>	<i>SD</i>
L	57.81	11.10
F	44.53	7.44
K	63.31	8.49
Clinical scales		
Hs	52.85	6.89
D	48.45	6.92
Hy	55.47	7.21
Pd	53.34	7.87
Mf	50.80	7.35
Pa	50.64	8.81
Pt	50.44	6.74
Sc	50.61	6.31
Ma	46.38	7.05
Si	44.13	6.79

Selected supplementary

scales

A	40.98	5.96
R	56.80	7.75
S	63.62	8.92
Mac-R	43.76	6.87
OH	61.31	8.81
Do	56.67	7.32
Hy2	61.54	8.53
Pa3	58.43	7.79

Table 3 Means and Standard Deviations for MMPI-2 Scores among Catholic Priests

Validity Measures	<i>M</i>	<i>SD</i>
L	61.65	16.14
F	44.87	5.69
K	62.04	9.93
Clinical scales		
Hs	52.94	8.37
D	50.88	8.37
Hy	53.70	8.97
Pd	54.70	9.30
Mf	50.03	8.68
Pa	52.39	8.75
Pt	53.01	6.08
Sc	53.17	6.58
Ma	47.75	6.42
Si	45.22	8.54

Selected supplementary

scales

A	43.25	7.63
R	59.00	8.77
S	62.23	10.03
Mac-R	43.78	6.58
OH	64.83	10.35
Do	52.72	8.55
Hy2	57.09	10.11
Pa3	58.04	8.41

Table 4 Means and Standard Deviations for MMPI-2 Scores among Catholic Deacons

Validity Measures	<i>M</i>	<i>SD</i>
L	63.98	13.74
F	43.25	6.01
K	59.90	8.95
Clinical scales		
Hs	63.15	7.69
D	50.08	6.89
Hy	52.94	6.72
Pd	59.63	5.84
Mf	48.65	7.40
Pa	49.52	8.38
Pt	49.27	5.54
Sc	48.44	5.76
Ma	47.85	6.59
Si	45.08	8.72

Selected supplementary

scales

A	41.90	6.75
R	57.27	8.23
S	63.15	7.69
Mac-R	43.73	8.17
OH	64.23	9.65
Do	50.98	7.87
Hy2	57.16	8.47
Pa3	57.38	8.03

Discussion

Although the number of clergy applicants has markedly declined in recent decades and experts predict that this trend will continue in the future, the MMPI-2 scores of the participants in the current study reveal that these Catholic and Episcopal entrants are generally psychologically healthy individuals who exhibit socially responsible and emotionally stable patterns.

There was not a significant difference in psychological health measures between Catholics and Episcopal entrants, and the current study's results support the findings of previous research that applicants tend to be psychologically healthy, well-adjusted individuals (e.g., Plante, Manuel, & Tandez, 1996; Plante & Boccaccini, 1998; Rossetti, 2011). There were, however, statistically significant differences in some MMPI-2 scores amongst Catholic clergy. When Catholic priests and Catholic deacons were analyzed separately, a pattern of deacons scoring lower on several MMPI-2 measures than their priest counterparts emerged. These results

are similarly supported by previously conducted clerical research (Plante, Manuel, & Bryant, 1996).

This study is unique because it focuses on the psychological functioning of clergy applicants after the decade of abuse and sex scandals that have challenged the Catholic Church and greatly threatened its global reputation. In addition, the present study examines Catholics and Episcopal clergy members together as well as separately, rather than simply separating their analysis or only studying one denomination like many previously conducted studies have done (e.g., Plante, Aldridge, & Louie, 2005). It is important to note, however, that the associated stress of psychological screening, desire to appear favorably, or defensiveness may have skewed the current study's results by becoming confounding variables causing or strongly contributing to subjects' MMPI-2 scores.

Although the clergy members analyzed in the current study appear to be psychologically healthy overall, continued research that builds upon the findings of previously conducted clergy studies is vital to developing and enhancing psychological screening methods to ensure psychologically healthy clergy members. Future studies may wish to expand this research to other religious groups. Also, with larger sample sizes additional and more nuanced hypotheses can be addressed. This study, given the small sample size, needed to be mindful of Type I errors and thus was limited in terms of the scope and nuancing on research questions. Another suggestion for future research is to conduct a follow-up study with the same participants to reveal how these subjects' psychological health and behavior unfolds in the future after they have been in ministry for extended periods of time. Better understanding the psychological functioning of clerics and clerical applicants is important in multiple ways in order for these churches to survive and thrive in the future.

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