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## Are Successful Applicants to the Priesthood Psychologically Healthy?

Thomas G. Plante<sup>1,2,3</sup>, Arianna Aldridge<sup>1</sup>, and Christina Louie<sup>1</sup>

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*The current investigation evaluated psychological and personality profiles of successful applicants to a major Roman Catholic religious order. The MMPI-2 and 16PF were administered to 68 applicants between 1990 and 2004 who subsequently entered seminary. Results indicate that these applicants to the priesthood were generally well-adjusted as well as being socially responsible, interpersonally sensitive and sociable. Findings also suggest some tendency for defensiveness and repression. Furthermore, dealing with perceived negative impulses such as anger and hostility may also be a concern for many of these men.*

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In recent years, the Roman Catholic Church has experienced a remarkable amount of highly negative media attention primarily focused on stories of sexual abuse perpetrated by priests as well as mismanagement by bishops and other church leaders (Boston Globe Investigative Staff, 2002; Goodstein, 2003; Plante, 2004). Furthermore, highly conservative and frequently unpopular positions of the church regarding women, homosexuality, contraception, and abortion have kept the Catholic Church in the news. Many have wondered if the Catholic

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Church needs to radically change in order to stay relevant in today's world since many of the policies and positions seem inconsistent with cultural and scientific trends, as well as the positions of many other religious traditions (Sipe, 2004).

The current scrutiny has also included questions concerning the character and general psychological health and well being of priests and applicants to the priesthood. Some have suggested that priests and applicants to the priesthood too often experience psychological dysfunction (e.g., Gafford, 2001; Meloy, 1986). Others have suggested that the Church system may be designed to encourage men with significant psychosexual difficulties to enter religious life (Doyle, 2003; Sipe, 2004). The question of the psychological health of Catholic priests is an intriguing one that has received a great deal of media attention, but remarkably little empirical investigation in the professional psychological literature.

Different types of people seek to become Catholic priests and a wide variety of personality styles are found in seminary and in the priesthood. Yet, a small number of empirical studies have examined the typical psychological profile of Catholic priests or seminary applicants (e.g., Banks, Mooney, Mucowski, & Williams, 1984; Gafford, 2001; Keddy, Erdberg, & Sammon, 1990; Kosek, 2000; Plante, Manuel, & Tandez, 1996). Many more research studies have investigated the psychological and personality profiles of non-Catholic clergy, such as Anglican or other protestant ministers (e.g., Ashbrook & Powell, 1967; Ekhardt & Goldsmith, 1984; Francis, Payne, & Jones, 2001; Musson & Francis, 2002; Patrick, 1990, 1991; Thorson, 1992). Almost all of these studies have used the MMPI to evaluate psychological functioning, while some have used the 16PF or other instruments. Curiously, the relentless recent media attention questioning the psychological health of priests has not yet resulted in a flood of newly

published empirical research studies. However, a review of the available research indicates that specific priest psychological profiles and tendencies have surfaced.

Nauss (1973) reviewed the professional literature over 30 years ago and found MMPI elevations for both Catholic and Protestant clergy on the K, Hy, Pd, Mf, and Ma scales and low scores on the Si scale. He then described the ministerial personality as being characterized by "...extroversion, reflectiveness or intuitiveness, nurturance, and co-operation, and environment ordering" (p. 89). Nauss also suggested that Catholic seminary students were more introverted than Protestant students.

The Church and society in general have changed a great deal since the 1973 review by Nauss and many wonder if applicants to the priesthood in more recent years are significantly different from those who entered religious life during previous generations. For example, prior to the Nauss review, many boys entered seminaries while they were still teenagers, whereas today's applicant is likely to be closer to 30 years old (Plante et al., 1996). In a large study of Catholic clergy a decade following the Nauss review, Banks et al. (1984) examined 94 candidates to the Franciscan religious order. They found that these applicants had lower scores on the MMPI Si subscale and higher scores on the MMPI Sc subscale, suggesting that applicants experienced unusual or idiosyncratic thinking as well as a strong need for affiliation. More recently, Keddy et al. (1990) found elevated L scales on the MMPI, suggesting priests often maintain defensive styles, while Dunn (1990) reviewed the professional literature concerning MMPI investigations with Catholic priests, and noted frequent elevations on the Mf, Pt, and Sc Scales. These findings imply that priests, "...tend to be more perfectionistic, worrisome, introversive, socially inept and in more extreme cases, perhaps more isolated and withdrawn" (p. 133). Meloy (1986) suggests that Catholic clergy may tend to be narcissistic. Plante et al (1996) evaluated 21 priest applicants

and found elevations on the MMPI measures of defensiveness (L, K, and R scales) as well as the MF, Hy, GF, Re, and OH scales. This suggests that they experience more gender feminine interests, interpersonal sensitivity, social responsibility, and challenges with coping with negative impulse associated with anger and hostility than the general population. Gafford (2001) examined MMPI-2 profiles of 131 priests and suggested that they were emotionally underdeveloped. Kimmons (2002) examined MMPI profiles from 162 Jesuit applicants, and found that they generally had lower scores on the Si scale than the general population suggesting a high degree of sociability.

Overall, the research in recent years does not appear to paint an overly flattering picture of applicants to religious life as priests. Although, many of these studies have found somewhat conflicting results, a number of consistent patterns have emerged to suggest that priest applicants may experience more defensiveness and social discomfort than the general population. However, Plante et al. (1996) conclude, using MMPI and 16PF data, that successful applicants to the priesthood, by and large, are “well adjusted... (and) relative to many previous studies, (research) results represent a more positive picture of Catholic clergy applicants” (p. 39).

The purpose of the current study was to further investigate the personality and psychological functioning of recent candidates to the priesthood of a major religious order. The current study sought to update previous research (Plante et al., 1996), using 68 successful applicants who applied to religious life between 1990 until 2004. An examination of psychological profiles relative to national norms was conducted to investigate the general psychological and personality health of these men.

## **METHODS**

### **Subjects**

Sixty-eight successful applicants to the priesthood of a major Catholic religious order were utilized as research participants (Mean age = 28.51, SD = 7.65, range 17 to 47 years).

### **Measurements**

The MMPI-2 (Hathaway & McKinley, 1989) is the most commonly used and researched psychological self-report measure available. It includes 567 true-false items that comprise 3 validity scales, 10 basic clinical scales, and over 50 supplementary and additional subscales. The most recent edition is normed on 1980 U.S. Census figures. The questionnaire is considered highly reliable and valid.

The 16PF (Cattell, Cattell, & Cattell, 1993) is a well researched personality questionnaire that consists of 185 multiple-choice items comprising 16 primary personality factor scales. Internal consistency reliabilities average about .74 with test-retest reliabilities averaging about .80 for two-week intervals, and about .70 for two-month intervals. The newest edition is normed on 1990 U.S. Census figures.

### **Procedure**

The applicants completed the MMPI-2 and 16PF, as well as a one hour clinical interview prior to admission to seminary between 1990 and 2004. The psychological evaluation was conducted as one of the last procedures of the application process prior to admission. All results were converted to standard scores and entered onto a computer using SPSS-X.

## **RESULTS**

Means and standard deviations for MMPI-2 scales and 16PF scores are provided in Tables 1 and 2.

[Insert Tables 1 and 2 about Here]

### **MMPI-2 Results**

Standardized T-scores from the applicants were compared to national norms using mean T-scores of 50 and standard deviations of 10 (Hathaway & McKinley, 1989). A review of Table 1 indicates a variety of significant MMPI-2 findings when compared to these national norms. First, the applicants tend to be defensive with significant elevations on the MMPI-2 L ( $M = 55.44$ ,  $SD = 10.56$ ;  $p < .001$ ), K ( $M = 60.23$ ,  $SD = 7.96$ ,  $p < .001$ ), and R ( $M = 58.03$ ,  $SD = 9.41$ ,  $p < .001$ ), and low scores on the F scale ( $M = 43.91$ ,  $SD = 5.38$ ,  $p < .001$ ). Second, subjects tend to experience many traditional feminine interests with elevations on the MF scale ( $M = 55.64$ ,  $SD = 9.88$ ,  $p < .001$ ). Third, subjects tend to score high on overcontrolled hostility ( $M = 61.58$ ,  $SD = 8.66$ ,  $p < .001$ ) and dominance (Scale Do:  $M = 55.65$ ,  $SD = 7.40$ ,  $p < .001$ ). Fourth, subjects tend to score high on social responsibility (Scale RE:  $M = 57.52$ ,  $SD = 9.70$ ,  $p < .01$ ). Finally, subjects tend to show generally good adjustment with significantly low scores on a wide variety of clinical measures, as compared to national norms such as anxiety (Scale A:  $M = 43.93$ ,  $SD = 6.97$ ,  $p < .001$  and Scale ANX:  $M = 45.13$ ,  $SD = 8.12$ ,  $p < .001$ ), depression (Scale D:  $M = 47.28$ ,  $SD = 8.50$ ,  $p < .01$  and Scale DEP:  $M = 44.06$ ,  $SD = 7.09$ ,  $p < .001$ ), anger (Scale ANG:  $M = 42.81$ ,  $SD = 8.35$ ,  $p < .001$ ), antisocial behavior (Scale ASP:  $M = 41.09$ ,  $SD = 6.43$ ,  $p < .001$ ), Type A behavior (Scale TPA:  $M = 41.46$ ,  $SD = 6.80$ ,  $p < .001$ ), and obsessions (Scale OBS:  $M = 43.54$ ,  $SD = 7.68$ ,  $p < .001$ ).

Given the large number of statistically significant findings relative to national norms, it is important to note the most elevated findings that may have more clinical significance. For example, the highest mean elevations with scaled scores at or above 60 included measures of defensiveness (K Scale), and over controlled hostility (Scale OH). Examining scores above 65,

which the MMPI-2 developers consider clinically significant, found that the most frequent scores that were above 65 were found on the K scale (occurring among 4 of the 68 applicants representing 6% of the group), and the *Mf* scale (also occurring among 4 of the 68 applicants). A composite MMPI-2 profile can be found in Figures 1.

[Insert Figure 1 about Here]

### **16PF Results**

Sten scores from the subjects were compared to national norms using mean sten scores of 5.5 and standard deviations of 3 (Cattell, Cattell, & Cattell, 1993). A review of Table 2 indicates a variety of significant 16PF findings when compared to these national norms. First, subjects tend to be bright (Scale B:  $\underline{M}$  = 7.80,  $\underline{SD}$  = 1.89,  $p < .001$ ). Second, subjects tend to be sensitive (Scale I:  $\underline{M}$  = 7.63,  $\underline{SD}$  = 2.00,  $p < .001$ ), and emotionally stable (Scale C:  $\underline{M}$  = 6.78,  $\underline{SD}$  = 1.67,  $p < .001$ ). A composite 16PF profile can be found in Figure 2.

[Insert Figure 2 about Here]

### **DISCUSSION**

Results from this investigation of 68 successful applicants to the priesthood suggest that these men are generally well-adjusted individuals. Findings suggest that these successful applicants are bright, socially responsible, emotionally stable, and interpersonally sensitive and sociable. However, results also suggest that they tend to maintain defensive (especially repressive) styles, and may be challenged in controlling hostile and dominant impulses.

Relative to many previous studies, the present results represent a more positive view of successful priest applicants. The current investigation did not reveal, for example, elevations on the Pd, Hy, Pt, Ma, Sc, or Si Scales of the MMPI. Other than defensiveness and overcontrolled hostility, the composite profiles of these subjects appear generally healthy and well adjusted.

A variety of methodological issues suggest that these results must be viewed with caution. First, this study utilized a modest number of successful applicants from one religious order without the benefits of control groups. Therefore, conclusions concerning the personality and psychological functioning of this group could be associated with a number of factors (e.g., education, social class, screening process prior to the psychological evaluation), in addition to their desire to enter the priesthood. Second, a number of analyses were conducted given the modest sample size which increases the chance of false positive or Type I errors. Finally, the defensive pattern that surfaced with this sample could be an artifact of the testing situation. All of the men completed psychological testing as part of the application procedure to enter the religious life. Therefore, they likely wanted to present a highly favorable view of themselves in the context of the application process.

Overall, results suggest that successful applicants to the priesthood and to this religious order were generally well-adjusted individuals. Results also suggest that defensiveness (especially repression), and coping with perceived negative impulses (such as anger and hostility) may be an issue for many. Further research regarding these issues is needed to better understand the personality and psychological functioning of Catholic clergy. Future research should utilize larger sample sizes and control conditions to better understand the psychological and personality functioning of clergy. During these challenging times for Catholic priests and the American Catholic Church in general, research is especially needed to assist both the Church and the general population in the hopes of developing better screening and selection measures for Catholic clergy. However, in the meantime, it appears that the answer to the question posed in the title of this paper, “Are successful applicants to the priesthood psychologically healthy?” is yes.

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**Table 1.** Means and standard deviations for MMPI-2 scores among successful Catholic clergy applicants

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Validity Measures	Means	Standard Deviations
L	55.44	(10.56) *** ^
F	43.91	(5.38)***
K	60.24	(7.96)*** ^
Clinical Scales		
Hs	51.10	(7.05)
D	47.28	(8.50)*
Hy	52.76	(7.62)**
Pd	52.70	(8.16)**
Mf	55.64	(9.88)*** ^
Pa	52.25	(8.62)*
Pt	51.82	(8.19)
Sc	52.13	(7.04)*
Ma	50.37	(9.61)
Si	43.87	(7.94)***

Table 1, continued

Selected Supplementary and Content Scales

A	43.93	(6.97)***
R	58.03	(9.41)*** ^
Es	54.49	(8.67)***
Mac-R	43.23	(7.90)***
OH	61.58	(8.66)*** ^
Do	55.65	(7.40)*** ^
Re	57.21	(8.20)*** ^

Content Scales

ANX	45.13	(8.12)***
FRS	47.02	(8.74)*
OBS	43.54	(7.68)***
DEP	44.06	(7.09)***
HEA	44.07	(8.52)***
ANG	42.81	(8.35)***
CYN	41.98	(6.09)***
ASP	41.02	(6.43)***
TPA	41.46	(6.80)***
LSE	44.80	(7.47)***
SOD	47.50	(8.32)*
FAM	45.48	(7.89)***
WRK	44.74	(8.56)***

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\*  $p < .05$

\*\*  $p < .01$

\*\*\*  $p < .001$

^ most significant elevations above 55

**Table 2.** Means and standard deviations for 16PF Scores among successful Catholic clergy applicants

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Factors	Means	Standard Deviations
A	6.71	(1.58)***
B	7.80	(1.89)*** ^
C	6.78	(1.67)***
E	4.94	(1.95)
F	5.38	(1.66)
G	5.77	(1.60)***
H	6.35	(1.82)***
I	7.63	(2.00)*** ^
L	4.11	(1.95)***
M	5.97	(2.19)**
N	4.78	(1.92)
O	4.72	(1.91)
Q1	6.40	(2.08)***
Q2	5.32	(1.80)
Q3	5.38	(1.86)
Q4	4.32	(1.85)**

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\*  $p < .05$

\*\*  $p < .01$

\*\*\*  $p < .001$

^ most significant deviations



**Figure 1. MMPI-2 Composite Profile**

**Figure 2.** 16PF Fifth Edition Composite Profile