

HEALING GRACE

By BERNARD J. BUSH

SINCE I UNDERTOOK to write this article on healing grace in the light of our experience at the House of Affirmation, I have been listening with particular care to the troubled religious men and women who come to us. What follows is my attempt to articulate some reflections on my experience of that mysterious, mutually shared process of healing which takes place in the context of faith and therapy that is our ministry. I will give a brief outline of the history and work of the House of Affirmation and then add some observations on professional christian life and personal identity as it is evolving today. Particular attention will be paid to those aspects of contemporary religious living that present themselves through our clients as areas causing or intensifying psychological problems. It is not my intention, however, to deal extensively with the various psycho-pathologies we treat, as this is an article on spirituality rather than a discussion of psychology as such. There is a danger of over-simplification when making comparisons drawn from clinical experience with disturbed persons to religious life as a whole. Yet the people who come to us are from so many places in the world and from so many different types of communities and congregations that I feel justified in making some limited generalizations.

We are living in a age of rapid transition in which there is evidence of both decay and growth. We can find abundant reasons for despair and for hope. It is only by listening carefully with a discerning ear to all the evidence available that we will be able to understand what the Lord is saying to us. It is my belief that the people who are hurting and confused have at least as much to say about what is happening in the Church and world as those who are seemingly contented. There is often an incisive candour in a person who is suffering that cuts through to the sensitive heart of the matter.

Within the week prior to this writing, I have heard the following statements from sisters, priests, and brothers of various communities. (The quotations in this article from clients are printed with their permission.)

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Living in a ninety-eight per cent female environment is so sterile. I yearn for, no I am so lonesome for, real life.

My rectory is antiseptic. The formalities are observed, but day in and day out, I never meet – I don't even know what I am saying, but it is so, O hell! it's dead there, and I'm dead too.

I have such a gut aloneness, that I don't know what to do or where to turn.

Somehow I just can't shake the fear. I'm afraid all the time.

My superior is kind, and tries so hard, but I just can't stop being afraid of him, and in fact, I'm afraid of anyone in authority.

I don't find community a vital life-giving experience.

I deep down don't have confidence in my sisters. I always feel like they are judging me.

No matter what I do I feel guilty. Even if I please everyone else, I can't seem to please myself. I am a worthless failure.

I am coming more and more to resent celibacy. I don't know what it means. Not that I want to get married, I don't – and I do so want to serve God and his people, but something is so deeply missing. There is this man who loves me. We haven't done anything wrong, but I'm tempted to because it's only when I am with him that I really *feel* like I am loved. My sisters say they do, and I suppose they mean it, but it just doesn't somehow feel real.

Statements such as these, which are quite typical and taken at random, provide a source for reflection on religious life as it is actually being lived day to day. The people who said these things to me are not the malcontents or misfits. In each case they were said by religious who are functioning and holding positions of responsibility. They are considered in some instances to be the happiest and most stable members. What shows is not always what is really going on. Religious are exceptionally well trained to keep the cheerful front and to avoid looking at the realities. Communities often encourage such pretence. Some clients say that they dare not reveal to their communities what they are really thinking and feeling, or even that they are coming to us for help.

The obvious reply to what I have said is that of course we all have our moments of loneliness, sadness, depressions, and doubts, but is that not just part of the life we have chosen? Why dwell on that? Is there not enough misery around? The reasons for hope and confidence, the signs of the redeeming hand of God abound. It is easy to point out the faults and failures. It takes greatness of vision and faith to build up rather than to tear down. Why must we be continually reminded of the depressing side of religious life?

It is the unique ministry of the House of Affirmation to the Church to ask these questions and to search out the truth in order to heal and reconcile in an atmosphere of renewal and love. Our community is an international therapeutic treatment centre for emotionally troubled religious and clergy. It began in 1970 as the consulting Centre for Clergy and Religious for the diocese of Worcester, Massachusetts. The original out-patient service expanded in 1973 to include a residential treatment facility in Whitinsville, Massachusetts. Since then two additional satellite out-patient offices have been opened. In 1974, I opened an office in Boston, and Sister Malachy Joseph Lynch of the Selly Park Sisters opened one in Birmingham, England in 1975. This expansion was made in response to the ever increasing demand for our services. Each move was sanctioned and welcomed by the local diocesan and religious superiors. However, the House of Affirmation is a non-profit organization, incorporated in the state of Massachusetts. Its relationship to the Church, while not official, is close and collaborative. We are entirely dependent for our material functioning on donations from interested foundations, concerned members of the laity and clergy, and from donations made by communities and dioceses whose members come to us.

The variety of programmes offered by the House of Affirmation include individual and group therapy, communications and growth groups, career and candidate assessment, consultation to religious communities and workshops on psycho-theological issues, an internship leading to a master's degree in clinical psychology, and creative potential development courses.

The founders of the House of Affirmation are Sister Anna Polcino, S.C.M.M., M.D., and the Reverend Dr Thomas A. Kane, Ph.D. Sister Anna, formerly a missionary surgeon in West Pakistan and Bangladesh, is a practising psychiatrist. She is presently the psychiatric director of therapy. Fr Kane is a priest psychologist of the Worcester diocese and is executive director of the House. Both have impressive academic, religious and human qualifications for this work.¹ Since its founding, the clinical staff has been increased

¹ For fuller historical and biographical information and more detailed descriptions of different aspects of our work I refer the reader to the published writings of our staff: Bush, B., S.J., (ed.): *Coping: Issues of Emotional Living in an Age of Stress for Clergy and Religious* (Whitinsville, 1976); Jean, Sister Gabrielle L.: 'Affirmation: Healing in Community', in *Review for Religious*, vol 34, n 4, pp 535-541 (1975); Kane, Rev. Dr. Thomas A.: 'The House of Affirmation', in *Brothers' Newsletter*, vol 17, n 2, pp 18-27

as the need for expansion arose, until now it numbers twelve. This includes psychologists, psychiatrists, an art therapist, and a psychiatric nurse. There is additional part-time staff who provide the ancillary therapies which fill out the programme. We also have a dedicated staff of housekeepers, cooks, administrators and maintenance people. The staff is as widely varied as the Church itself, with diocesan and religious priests, brothers, sisters and lay persons, married, single and widowed, men and women of all ages and several cultures. Many schools of psychology are represented, as well as widely diversified educational backgrounds and interests.

The staff and residents together make a unique religious community within the Church. The atmosphere at the residential facility is familial and dignified in a beautiful eighty year old mansion and neighbouring buildings in the rolling hills of Massachusetts. There are twenty-five people in residence, which is the maximum capacity. Fr Kane aptly describes it as a place for the treatment of the whole person in a wholly therapeutic environment.

The House of Affirmation is a total therapeutic milieu with one permanent community and one which changes. In order to ensure a healing atmosphere and a climate of loving co-operation, the staff devotes considerable attention to their own inter-personal relationships. Time is regularly scheduled for the staff to meet to discuss clinical issues, enjoy one another socially, share areas of expertise, pray, resolve the inevitable conflicts that arise, and supervise one another. Care is taken that each staff member stays in good health and gets proper recreation. Decisions that affect the life of the community are arrived at by discussion and consensus. Thus the atmosphere among the staff is one of openness and shared responsibility. It seems that this human dimension, carefully attended to, is at least as important as clinical expertise for the work of healing, since it serves as a model of healthy community living. We are generally happy, hopeful, caring men and women of deep faith and love for the Church.

Our treatment philosophy, as the name implies, is affirmation of the whole person. Affirmation is the positive response to the recognized goodness of the other. It is an experience of a kind of relationship that is creative of the person. The opposite of affirma-

(1975); Kane, Thomas A., Ph.D.: *Who Controls Me? A Psychotheological Reflection* (New York, 1974); Polcino, Sister Anna: 'Psychotheological Community', in *The Priest*, vol 31, n 9, pp 19-23 (1975).

tion is denial, or non-recognition and non-response to the other. The effect of denial is psychic annihilation. Non-affirmed persons have generally experienced deprivation of affection in childhood, which is later reinforced by the impersonality and task-orientation of religious life. When personal worth is unrecognized and unacknowledged by others, the religious comes to believe that he or she has no value. The non-affirmed person can go through the motions of a productive life and even outwardly look happy, but much of the appearance is pretence. Inside there is anxiety, fear, insecurity, feelings of worthlessness, and depression. Efforts to boost oneself and reassurances from others do not seem to touch the deeper core where the unrest lies. Such feelings then produce behaviour which is self-defeating, such as attention-seeking, physical complaints, excessive business, hostility masked by a 'cheerful' facade, addictions, futile attempts to please others, conflict with peers and authorities, and compulsive sexual acting-out. Such behaviour serves only to increase loneliness and guilt-laden depression.

These problems are not cured by intensified spiritual practices or facile reassurances that one is 'o.k.', but by the genuine love of another which is felt and makes no demands. Such unqualified love creates a non-threatening environment where the person feels secure enough simply 'to be'. An atmosphere of consistent affirmation gives the necessary personal space and freedom to each person to develop his or her human identity as the base on which to build religious and community identities.

Every person is constituted by an almost infinite variety of identities. Each one partially answers the question, 'who am I?' These identities are arranged interiorly by each person in a constantly shifting hierarchy of relative importance. The identity which at any given time is the most personally important receives the greatest amount of attention and energy. There are, however, some identities which are of greater intrinsic value than others. For instance, my family and name are intrinsically more important for knowing who I am, than is the colour of my eyes. Both, however, are constitutive of my total identity. In the case of many religious, the relative value which is assigned to various identities is not in conformity with their real value. It is not uncommon to find religious professionals who find their most significant personal identity through membership in a particular congregation. This identity by affiliation is followed in order of importance by priest, sister, brother, function; then by roman catholic, christian, nationality, man or

woman, the least important identity being one's humanity. Thus the objectively least important ingredients of personal meaning become the most important to the individual and receive the most cultivation and attention. In fact, until recently, the most important and basic elements of personal identity, namely humanity and sexuality, were considered evils to be overcome. How can grace build on nature when one's humanity is deficient? It is much easier, but personally devastating in its effects, to define oneself in terms of a role than to rejoice in the goodness of being a living person. In other words, there are fairly accurate ways of measuring oneself and thus knowing when one is behaving like a 'good' religious of a particular congregation, or a 'good' sister or priest, because that is constantly being spelled out objectively in documents or group customs. It is much harder to know when one is being a 'good' human, or a 'good' man or woman. This problem of personal priority of identities becomes more acute when the various identities are seemingly in conflict. A man finds who he is as a man in relationship to his complement, a woman, and vice versa. However, when the atmosphere of seminary, convent or rectory is so restrictive that it prohibits or discourages normal relationships with the opposite sex, sexual identity must be developed in relation to the same sex. This exclusiveness often contributes to mutual reinforcement of the worst aspects of masculinity/femininity and impedes the process of maturing. Finally, when one's identity is defined in terms of observance of rules and structures, and those rules and structures are called into question or changed, the person who is unsure of his or her more basic identity experiences an acute emotional crisis. Some of the signs of such crisis are feelings of anxiety, bitterness, scepticism, defensiveness, selective rigidity and awkwardness in situations that call for human responses rather than pat dogmas.

Religious professionals have been uniquely trained to be models of the perfect life with ready solutions to the mysteries of this and the after life. But we who once thought we were already in the promised land are now finding ourselves once again wandering around in the Sinai desert. We simply do not have the road-map. The familiar landmarks of devotion have disappeared. However, we do have the special perspective of faith, the indispensable and unique point of departure for reflection to be shared with our fellow pilgrims. We are partners in a dialogue with the world, immersed in its life and profoundly sharing its questions and doubts. For this task, the religious person should be first a sound human being,

striving for maturity in the normal human way: that is, through the development of progressively deeper personal relationships and friendships. Faith assures that we can have confidence in the presence of the holy Spirit who permeates the process. Through contemplative reflection on personal experience enlightened by the scriptural revelation of God's ways with humans, the religious prophetically calls attention to that presence. This witness may not even involve much God-talk. It can simply be radiation of the inner joy and richness of one's life in the spirit.

The reality is sometimes quite different. One sister recently spoke to me of her disillusionment with her community and with much anguish told me: 'It all came to a head at our province assembly a few weeks ago. I looked around at several hundred sisters and all I saw were pale drawn faces and no joy. They were all so tired looking. I then took a long look at myself and saw that I was the same. I don't want to live this way any longer'.

To rediscover the life-springs within, a therapeutic community such as the House of Affirmation, and by extension, every religious community, should be a place where truth, reality and faith prevail. The grace of healing is present in the community as a whole and in the individuals of the community. The same grace is given to the one who is healing and to the one who is being healed. All are called upon both to be healed and to be healers of others, no matter how much one may be personally hurting. It is my conviction that the grace of healing is given precisely at the growing edge of the personality. A person is healed when most exposed and vulnerable, and likewise performs the most graceful healing when the sore places are reaching out tenderly to touch another. When façade relates to façade, or even when façade relates to suffering humanity, there is a pretence of loving and caring. The head may be present to the other, but the heart is not. The grace of healing is mediated through the humanity of each person in the community.

In our special healing community, the House of Affirmation, the principal responsibility for creating the atmosphere, developing programmes, etc., is with the staff. Each of us has come to this work through a personal odyssey of suffering, healing, change and growth. We are willing to share this weakness, and it is our greatest strength. We are constantly being reminded of our own frailty and limitations. Yet just as constantly, we discover the unfolding mystery of the action of God in our lives. This confidence in the strength and love of God gives us the willingness to risk feelings and responses of

genuine love to the goodness of the other which is more important for healing than clinical skill alone. However, without the clinical expertise, we could easily lose our way in the problems that present themselves. Our task is to be both loving and professional.

We have found that in most religious, intellectual and even sometimes spiritual growth has outstripped emotional development. The characteristic defence-mechanism of religious is intellectualization, in which feared emotional responses are cut off from and repressed by the intellect. Eventually the person becomes unable to feel anything at all. In our therapeutic programme, the religious can discover and actualize creative potentialities through guided trial and error, and incorporate them into the whole process of growth. Thus, each individual comes to understand the uniqueness of his or her learning style and pace of growth. Nothing is forced or unnatural.

Another important dimension of our life together is the opportunity for men and women to live in the same community, and to learn to relate to one another as persons rather than as objects of fear or phantasy. This kind of living sometimes gives rise to reactions that are characteristic of delayed adolescence. When such feelings arise, they become the material for guided growth toward sexual maturity within the context of celibacy and its limits. We have found that celibacy as such is not the main problem of most who come to us. It is rather the lack of affirmation and affection which leads to problems in the area of sexuality. Only a small proportion of those who have come through our programme have left religious life.

We firmly believe that our therapy is a work of collaboration with the healing spirit of God in humanity. This work demands much reflection and contemplation of where and how God is present with his healing grace in each person. In this prayerful therapeutic process, the neurotic barriers to inner freedom in both the healer and healed are discovered, exposed and removed. Growth in freedom and the consequent acceptance of increased responsibility demand deep faith in the incarnation, that God is among us in human flesh. Our goal, then, is to help religious with emotional disorders to achieve a balanced and integrated personhood, wherein all feelings are joyfully accepted and guided by the graced and gentle light of reason and will. To achieve this goal we have provided a milieu where the process of conversion from denial to affirmation can be experienced. Our clients are becoming healed and are returning to creative service in the Church. Our files contain many letters from former residents and non-residents, testifying to the

permanency of the growth and changes that have occurred in their lives. The sad part is that frequently the communities and work situations have not changed. At the end of the course of treatment there is a renewed sense of the loving presence of God at deeper levels of the personality and an increased desire for prayer. It is not uncommon for a person to make a directed retreat prior to discharge with an affective responsiveness that was simply impossible before coming to us.

I would like, finally, to make some observations about preventive mental health in religious community life. There is still among us a strong strain of moralism and idealistic perfectionism which compounds depressive guilt feelings and compulsive self-destructive behaviour. We find that many of the neuroses we treat are aggravated by styles of spirituality and community life that encourage religious to be slavishly dependent, to intellectualize and mask the so-called negative feelings, and to try to be happy without giving and receiving genuine affection and warm love.

There is also a tendency to consume too much valuable energy with introspective community reorganization and constant re-vamping of structures. This inward-looking tendency stifles the apostolic spirit of reaching out to others in their need. Meetings upon meetings can have a very depressing effect on people. Moreover, religious particularly need to be reminded that they need to say 'no', and set limits on the demands that others make on their time and energy. The fine balance must be struck between helping others and being good to oneself. This means that religious professionals need to find outlets for creative recreation and hobbies, and to develop the ability to have fun and 'waste time' enjoyably in ways that are more enriching than spending endless hours watching television or gossiping. Leisure time should be allowed for the development of friendships with persons of one's own choice, whether of the same or the other sex. For healthy living, time should also be set aside for contemplative reflection on one's own emotional and spiritual life in order fully to enjoy being alive and feeling. Prayer is time spent with the Lord, fostering an affective relationship with him. In an atmosphere of loving trust, I can bring my other affective relationships to the Lord, so that they may develop under the guidance of his spirit without fear of reprisal or condemnation, since they also are God-given. A community goal should be to strive to discover and encourage every aspect of each other's total life situation that is truly life-giving and affirming. Each person

should be able to feel himself/herself as both a healer and as needing to be healed by others. Honest and frank conversation without censoring or judging is needed. There must be freedom to confront and challenge lovingly, in order to prevent an irresponsible permissiveness.

Thus our communities can become affirming when the persons in them feel that they are secure to be themselves, to make mistakes, and to find gentle forgiveness and deeply caring support one for the other. Our Church professes and proclaims that its root and corner stone is incarnate love. Yet ironically, most of our religious patients come to us because there is a devastating lack of love in their lives.

In conclusion, I would like to state with gratitude that the work of the House of Affirmation has been abundantly blessed by God in the few years of its existence. While this might sound like excessive self-praise, this paper was shared with our residents in a lively discussion before the final copy was made. They offered many perceptive observations and suggested changes, mostly where I had understated what they are experiencing of our healing ministry. Church leaders have expressed their unanimous approval and support of our work. We have come upon many shoals which have nearly destroyed us. In each case we have been rescued by a presence that can only be called divine. Hence we rejoice and have great hope that our efforts will continue to be blessed, and that our service and experience will make a significant contribution to enhance the life of the whole Church.