

CHAPTER 5

CASE STUDIES

In this chapter, five case studies will be presented in order to show how clergy have been led to drink alcohol excessively, and its consequences and effects on their ministry, their families and the church. The names that will be used throughout this chapter are not their real names to protect their identity and confidentiality. Certain questions were asked to enter into the lives of clergy, see appendix A.

5.1 CASE STUDY 1

This is the story of Joshua.

Joshua was ordained in his late 20's; those who knew him before he was ordained, while at seminary, described him as an intelligent and articulate young man. A man who was not afraid to raise uncomfortable issues and stand by his truth; He had a way of influencing his opposition to see his point of view in every argument or conversation, and win them over to his side. Even though he was a brilliant young man, his consumption of alcohol was undesirable, and when he was drunk his actions and attitude, especially to the opposite gender, was deplorable. Who he was during the week and the man he became from Friday to Sunday were two opposite people. He attended church services every Sunday because he was expected to; he went in smelling of alcohol and in most

cases still wearing yesterday's clothes and remembering little of what took place the day before.

Those close to him said that no one ever dared to confront him regarding his alcohol drinking behavior. One of his friends said there was no reason to confront him, because his drinking was on weekends and not during the week. And because he was a brilliant and an influential student and no one dared to take him on. After his time in seminary, he returned to his home diocese where he was ordained and a lot was expected from him, a young clergy who passed his studies with distinction and was being groomed for the leadership of the church.

The church community where he was placed expected him to get married and become a family man. And he did as expected. His marital status changed but the one thing that did not change was his excessive drinking, he was popular in taverns and shebeens, and the community knew him and he was warmly welcomed, and in many instances he did not need to buy any alcoholic drink as it was given to him for free. Many owners of these outlets wanted to be associated with this community leader and though they were not members of his church, they knew that one day they will need his services or the church's assistance. So, it was important to them to be seen to have a warm relationship with him.

The church leadership expected that he will further his studies and get a post-graduate degree, there was even a talk of sending him to a university or seminary overseas in order to pursue his post-graduate studies. But that was just an idea that did not materialize. One of the un-communicated reasons was his drinking problem and the shame he will bring to the sending diocese. Many parishioners in his church were uncomfortable and complained to the bishop about his behavior in church and in the community. Some asked that he be helped and placed in an alcoholic rehabilitation center, but not to be removed from the parish, while the others asked that he should not return to the parish after rehabilitation.

After his stay at the rehabilitation center, the leadership of the church opted to move him from that parish and place him in one of the prominent parishes in the diocese. For the first year, he did exceptionally well, it was a new lease of life for him and his family, especially for his family as they were convinced that he has found his drive and the passion for the vocation to the priesthood has been renewed. He began to make new friends and somehow he started to drink heavily again. Parishioners started re-telling stories of what happened at the previous parish, in relation to how he abused alcohol and his behavior.

The leadership of the new parish started giving him ultimatums, he either had to change his behavior or face the consequences. His wife could not cope any

longer, she went to see the bishop and pleaded with him to intervene as their marriage was in trouble, and the major reason was his excessive drinking. With pressure from all sides he drank more, he neglected his duties, and his wife took their children and moved out of the rectory.

Then Joshua decided to pack his clothes and left without telling anyone where he was going, he left the church, the ministry and his family. There are rumors of him being spotted here and there. No one knows exactly what triggered him to take this decision.

5.1.1 REFLECTION ON THE CASE STUDY

Alcohol seems to affect those who are in position of leadership. A young man with a brilliant mind, envied by his peers at seminary, yet his love for alcohol was a problem. It also affected his ministry, relationships and family. Those who were close to him were never prepared to bring this sore point of alcohol with him when he was sober. One wonders whether his brilliance in class and maybe the academic help he provided to those who were struggling in class was a major reason why none of them wanted to confront him.

The seminary leadership seemed to have overlooked this alcohol matter with his sending diocese, especially when there was a talk of him being groomed for future church leadership. The author wonders if he was set up to fail. From the

expectation of family, community and church, and the increased responsibilities resulted in escalation of his drinking problem. He even lost out on the opportunity to further his studies.

Though he was taken for rehabilitation, his immediate family was left out. They found hope when he was moved to a new parish, for many priests and those with families, a move to another parish becomes a chance of reinvention and a breath of fresh air. But it was not long when he made new friends and reverted back to his old ways. The question one asks is whether the church is to be blamed for tolerating his drinking behavior that resulted, among other things, the failure of his marriage.

5.2 CASE STUDY 2

This is the story of Moses

Moses' call to ministry came at the time of political uprisings in South African townships in 1980's. He believed that God did not create God's children to suffer in the hands of others because of the colour of their skin. The role played by prominent religious leaders such as Archbishop Emeritus Desmond Tutu, inspired him to take the calling very seriously and wanted to be an "agent of change" in the devastating situation of oppression.

He was one of three young men from his parish to be sent to seminary, his political influence and wanting to see social and political change in his country was a driving force to work hard. While in seminary, he was detained by police for participating in an “illegal” gathering, and this did not stop him from mixing his political involvement with theology. He was described as strong willed, sober minded and a very spiritual person.

On his return from seminary, he was placed in a multi-racial parish, though he was in a position of a spiritual leader, he says that he never felt welcomed by some members of the congregation, and he attributes this to racism. After serving his curacy, he was moved and placed in a parish that was in a politically volatile township, he seemed to relish the chance. He used his political connections and the church influence to mediate between the warring factions. Not only did he bring attention to himself, he also attracted many people especially the young people to the church. The number of congregants increased, and structural changes were done to the church in order to accommodate the growing congregation. Those in church hierarchal structures took notice and he was appointed to various committees in the church, in order to address problems faced by the oppressed.

The above situation changed his way of living; his influence and power reached far and beyond his imagination. He began to use this attributes for his own gain;

he started to have extra marital affairs with young ladies who were either in the youth group or in the choir. Even though there was a men's guild in the parish he formed another men's group, he spent most of his time with members of this new group, they not only drank alcohol with him, and they also supplied it. This created tension between older and young members in the church. Though all of this was known, no one dared to speak about it publicly, because those who opposed him were in the minority and afraid to be singled out as trouble makers by those in support of the priest.

With pressure from members of the congregation who called themselves "concerned parishioners", the bishop was undated with complaints, and he was moved to another parish. Though the church has rules and processes that govern it, many parishioners get impatient when they feel that things are not done at their own time and pace, hence the formation of "concerned parishioners" group. The new parish was more demanding than the previous one, because it was known that he can deliver, and that he will use his community building and networking skills to grow the parish. Somehow, the expectations from the diocesan leadership were very high for him and he failed to deliver, and within a year things were getting sour in the parish. He used the pulpit not to preach the good news but to fight his battles with those who were opposing him. For example, the disapproval of his leadership style that was raised in parish council

meeting, he attacked the church council on the pulpit and told the congregation that they elected people who did not have their best interest at heart.

The parish began to divide, he started the young men's group similarly to the one at his previous parish, this added to the tension in the parish, and he came to church services and meetings openly drunk. The leadership of the diocese received numerous complaints from the parishioners. He was taken to an alcoholic rehabilitation center; he came back after his in-patient treatment, and within months, he had relapsed. He has since been back to rehabilitation three times and nothing seems to work.

The congregation has dwindled, no one respects him, and parishioners have complained to the diocesan leadership and believe that he is protected since no visible action has been taken against him. The diocesan leadership was no longer trusted by parishioners as they were seen to be condoning the behavior and not acting decisively, the researcher wonders whether the leadership will ever be able to win back the trust of this congregation.

5.2.1 REFLECTION ON THE CASE STUDY

It is interesting to note that, the community issues that shaped his ministerial calling and formed his theology, were the same issues that made him prominent

and brought attention to the ministry and they shaped his future participation in the leadership structures of the church, such as equal opportunities for all.

Though he fought for equality in the community, he became a dividing factor in his parish because of his infidelity and alcohol abuse. The church leadership seemed to have faith in his leadership; this was evident with the move and placement at the parish that was bigger than the previous one and with more responsibility. He failed to rise to the challenge and with his failures came condemnation from the pews and he responded to them via the pulpit, a mistake that no priest should commit. The systematic process of misuse of power led to him destroying spiritual lives of parishioners.

Psychologically, he was damaged and could not care for the flock. He was in desperate need for care, himself. With three visits to the rehabilitation center, nothing seemed to help. The author in her reflections wonders where was his family when he was receiving help, who was caring for them? What kind of help did they receive, what do they think about the church? Has the church failed them and what can we learn from their pain?

5.3 CASE STUDY 3

This is the story of Sizwe

Sizwe was an ordained priest and was placed in the rural part of his diocese; his parish was responsible for other seven chapels or ‘out-station’s as they are called in his context. The furthest chapel was two hundred and fifty kilometers away from the main parish, and being the only ordained priest and working with mostly lay ministers. The work he had to do in the outstations was so demanding that, at times he was gone for two to three days per week and he was left with little time for himself or his family.

After 10 years of being married, a tragic thing happened, his wife died in a head-on collision with another car, this was devastating to him and he was left to care for their four children. Suddenly, he was a widower and a single parent. Sizwe was distraught, he says that during the days after his wife death, he was emotionally absent, he could not express any emotion and could not cry and this is what Ross will call denial stage, where one is trying to avoid the inevitable (1969). He remembers seeing people coming in the house to pay their respects, and he could not be on his own to think or even cry, as he was in and out of the rectory making arrangements for the funeral. Sizwe and his wife did not own a house and they lived far away from their parents; they could not afford to bury

her at her hometown (as it is a case with many other clergy), so the rectory was the obvious choice for them to bury her.

Sizwe showed PTSD (Post-Traumatic Stress Syndrome) symptoms, Sinclere believes that people who survive severe trauma become expert at avoidance and at hiding pain because it is constantly present and because it is so alien to those around them. Through their own interpretation of events, friends and loved ones along with clergy and counselors often misread the actions of traumatized people (1993: 27). The author wonders whether Sizwe will be able to journey in burying the wife.

The funeral service was held a week after her death, on a Saturday and people came in droves to support the family. It was a surprise to many to see him on a procession the following day on a Sunday, to lead the service. The congregants expected him to be with his family and participate and observe the cultural rituals that are performed after one has lost a family member.

In his case, the cultural rituals include a cleansing ceremony of a home, day after a funeral by the family elders, the bereaved family be cleansed by water with a mixture of a gal of the animal slaughtered for the funeral and an aloe plant. This symbolizes that death is washed away and they can now freely mix with the community. A widower is expected to stay home and continue the

process of mourning and is not expected to be seen in public meeting or talking to people of the opposite sex if they are not members of his family, and wear a black armband on the sleeve of his shirts/jacket, the mourning period can last from a three months to a year.

Sizwe presided over the communion and served it, and a large number of congregants did not receive communion from him as they said “*o nale sefifi*” loosely translated “*he is covered in darkness/ shade of darkness*”, they can only receive communion from him after he is being cleansed.

He became more isolated from the community, felt alone and did not know who he can turn to or talk to; he felt that the church expected him to go on with his priestly duties as if nothing has changed.

The researcher connect what Sizwe was going through, with what Wimberley said about Job’s shame and honor, he writes, “a bewildered Job seek to understand what is happening...he insists on his innocence, his shame is no fault of his; he has done nothing to deserve what is happening to him. Job does all he can do; he protests and laments his innocence before his friends and before God” (2003: 118). The comparison of him to Job will help me understand what Sizwe was going through; he had done nothing wrong, why does he need to explain himself to his parishioners, and why do they treat him like a leper? He

was trying to satisfy everyone and hoping that getting on with his ministerial duties was a right thing. He felt shamed for doing an honorable deed.

As he entered a new pattern of life as a widower, he was to discover what it is to be a single parent? His youngest child asked him every day, “*when is mommy coming back home*”. Every time the question was asked tears rolled down his face. This situation led him to alcohol as a coping mechanism and he started drinking alcohol to be able to sleep, to forget, and to cheer himself up. Then Sinclair was right when he said that, a high percentage of people who have experienced severe trauma in their lives have at some time used drugs and alcohol to manage their symptom (1993: 17). And Sizwe was medicating his pain and avoiding dealing with the matter.

These problems began steering Sizwe into drinking as a way of addressing them. The impact of the above affected his ministry. Within months he was seldom seen sober, his parish council decided to give him a month off so that he can rest and sort out his issues; he left the children in the care of his mother and went away. While he was away, he received a call from his mother letting him know that there were people at the rectory and they are talking about curtains and painting the house interior walls and they were accompanied by some members of the parish council.

When he enquired further, he was told that those people who went to the rectory are the new priest and his family, and they will be moving in the next three months. And that the parish leadership has requested the bishop to move him and find them a new priest as he cannot cope anymore and they do not want a priest who is a drunkard. He made a decision to leave the ministry and now he works for a Non-Governmental Organization. He felt let down by the church and he is a very bitter and angry man, angry towards the church and God.

What the parish leadership did was contrary to the Canons and Constitution of the church; Canon 25 (2) reads;

“No clergy person shall take upon him/herself the Pastoral Charge of any congregation to which he/she may be presented, or shall become entitled to the emoluments of any Benefice, until the Bishop of the Diocese in which such Charge of Benefice is situated, or his/her Commissary in his/her absence, shall have collated him/her to such Charge or Benefice, or have intimated to him in writing, that he is ready to collate him/her, or shall have accepted the Deed of Presentation, and instituted him/her in due form, or shall have intimated to him/her in writing, that he is ready to institute him/her” (2007:61).

And Canon 26 (3) reads;

“If an incumbent shall be absent from his/her parish for a period of three months without permission of the Bishop of the Diocese, it shall be competent for the Bishop to call upon him/her to return; and if at the expiration of a further three months he/she shall still be absent, it shall be competent for the Bishop, after consultation with his/her Chapter, to declare the Cure vacant” (2007: 63).

5.3.1 REFLECTION ON THE CASE STUDY

Sizwe’s focus was on being a good priest and giving leadership to the parish and its out-stations, he somehow shifted both the parental and home responsibilities to his wife. Wimberly says the following about clergy like Sizwe who put their family last and the church first, “there is a well-known saying that the preacher can help everybody except members of his or her own family. Why is this? Why it is so hard for preachers to care for their own? It is because the work of God is so consuming that we must sacrifice our families? It is because the work of caring for others takes precedence over all other things including our families? Or is it because the work of caring for our family is very difficult; and, therefore, we as ministers are completely unprepared to tend to the work of ministry and care for our families simultaneously?” (2003: 83). Balancing home life and pastoral work is very important for the clergy, because

if one is out of alignment and nothing is done about it, it has a way of throwing everything of and untold damage can be done.

After Sizwe wife's tragic death, he realized how he spent most of his time with the church rather than with his family. The same parishioners he gave his all for, just a day after his wife's burial, they rejected him and the elements he had consecrated of the bread and wine because of cultural observance. The church's expectations of him as a priest and rector, and on top of that being a single parent, he could not cope, so he turned to alcohol for solace and to medicate himself. The only thing that did not demand something back from him was alcohol.

When the parish gave him time off, he never thought that, that was a way to getting rid of him. Because he could not cope with his wife's death, being a single parent and other ministerial responsibilities he was seen as useless with nothing to offer. He was grieving and felt rejected, and alcohol became a means to numb his pain. One wonders where the support system from fellow clergy and the diocesan leadership was, why were they not there to support him by taking services on his behalf, while he mourns for his wife? Why didn't someone in the leadership of the diocese think of asking him to take a compassionate leave, rather than the parish leadership asking him to take some time off, knowing very well that this was a way to get rid of him?

5.4 CASE STUDY 4

This is the story of Thabang

Thabang, a handsome priest, and is married to an equally gorgeous wife. The couple was envied by many both lay and ordained families. Thabang knew that he was good looking and he took pride on how he looked. However many would comment that what he lacked in his brain, was made up by his good looks. He worked in a number of parishes as an assistant priest since it was said that he was not yet ready to be on his own in a parish, and did not possess the qualities of being in-charge of a parish. After eight years of being an assistant priest, he was finally made a rector of a small parish.

The beauty, the title and the status made Thabang and the wife to feel extra important; they surrounded themselves with influential and wealthy members of the parish. These members were the brains and he was the implementer of their ideas on how the parish needed to be run and who should be part of the leadership, they bought him expensive gifts, such as clothes, furniture items, alcohol and gave him cash. These deeds gave them access to control him. The parish council was not happy with the external influence; as they are required to rubber stamp the decisions that have been taken outside the parish council meetings. Another issue for them was that he declared nothing of all everything he received as per the requirements and agreement.

The parish became divided on how he did things. To site a few examples; if he was to conduct a service for marriage, funeral, unveiling of tombstone or baptism, he would tell the respective families or individual members to “put money in the envelope for him and it should be accompanied by a Bottle of whisky” as a thanksgiving for the work he has done for them. This was contrary to the norm of the parish, where after such services are rendered for parishioners, individual families would offer their thanksgiving to the church, be it money, vestments, communion wine or wafers.

The division in the parish was coined as to why he was charging the people for doing his work, while on the other hand he is paid a stipend with a good allowance. They were also concerned how on earth he could ask for alcohol from parishioners. This made him to lose respect from those who looked up to him as a spiritual leader, the parish was in conflict and his inner circle was more vocal-threatening and intimidating those who condemned him. Paul when writing to Timothy on the virtues of one holding such office says, “Deacons (Priest) likewise must be serious, not double-tongued, not indulging in much wine, not greedy for money; they must hold fast to the mystery of the faith with clear conscience” (1 Timothy 3: 8 – 9).

Thabang spent most of his time causing conflict and dealing with conflict situations and less time doing his pastoral and ministerial work. He once made a

remark to the congregation that they can go and complain to the bishop, but they should know that they are wasting their time as the bishop won't move him, and he also boasted that he was going nowhere. Many parishioners left the parish and those who remained stopped tithing or giving collection and this led to the parish experiencing a financial crisis and not being able to pay his stipend, allowances and other the parish had.

With no one to influence and nothing to control, the inner circle began to fragment and he found himself more and more alone. Without a regular income, expensive gifts no longer coming in and unable to maintain the lifestyle they are accustomed to, his marriage was in trouble.

Eventually Thabang's wife filed for divorce and left him. Life was no longer good for him in the parish, Thabang went to the bishop and pleaded with him to move him; the bishop told him that there's no parish he can place him in, he just needed to remain where he was until a vacancy appeared. His words came back to haunt him, he had to go back to the parish and clean the mess he created. He had forgotten what he once told the congregation that the Bishop will not move him from that parish, and that they were stuck with him.

5.4.1 REFLECTION ON THE CASE STUDY

Clergy by the nature of their position are influential and have attributes of power. With these attributes they can choose on whether they will exercise them negatively or positively. Thabang and his wife chose to use them for their own personal gain; Thabang knew that he was not supposed to ask parishioners to pay him for performing any sacramental duties, be it baptism, wedding or even a funeral. It was up to the goodness of those who received this service to thank the church or the priest. He knew that the church catechism stated that, *“sacraments are outward and visible signs of inward and spiritual grace given by Christ as sure and certain means by which we receive that grace”* (Anglican Prayer Book 1989: 438). Did he forget this, or did he conveniently erase it from his memory and the process of his ministerial formation. One wonders whether the stipend (which for many it is not enough) cause clergy to disregard the spiritual formation truths of the church, so that they can get an extra “buck”.

One of the reasons that angered parishioners was that on top of the money he demanded, they still had to bring him alcohol, and the revolt resulted into divisions that led to his inner group disbanding and leaving him to face the music on his own, and not only them but his wife too. This is not only Thabang’s lessons but, every clergy-persons lesson too.

And when he found himself alone, he requested the bishop to move him to another parish, with the hope of starting afresh. He had forgotten that he once told the congregation that they can complain as much as they like to the bishop and that they would be wasting their time as the bishop won't move him. Those words became true when his request was not honored, he was to stay at that parish and make things right. Alcohol did play a part in his downfall.

5.5 CASE STUDY 5

This is the story of Paul

Paul had always being a loner, (*dictionary explain a loner as one who avoids other people*). Even though he was always surrounded by people, he was always emotionally and physically absent from the conversations and interactions. This was evident during seminary days and on his first placement. A number of parishioners remarked that they only saw him when he has been to lead the worship service. He was a kind of a priest that reinforced the perception and stereotype of some lay people who said 'priests only work on Sunday'.

The parishioners also complained that he was not well kept; he did not look tidy and had a touch smell of alcohol. The above signs when tackled early would help the church to address the issue of loneliness that may lead the clergy to drink.

The diocesan leadership thought that moving him to another parish would benefit him; it was decided that he should be placed at a parish that had a number of activities during the week. It was also hoped that he will get out of his shell and blossom. With a well-organized weekly plan for him by the parish that sought to involve him in the life of the parish, great things were expected to come from him. One thing that was glaring was his lack of hygiene, and how drunk he was on his day off. He never allowed anyone to visit him where he lived, he even asked the housekeeper (employed by the parish) to stop coming, as he will tidy the house by himself.

Things did not work out as expected, the parish leadership decided that maybe if he is on his own in a parish he will open up and relate better with parishioners, and maybe take better care of himself. The bishop agreed to move him, and the new parish welcomed and provided him with all the necessities that an incumbent needs. He still failed to connect with parishioners except those who supplied alcohol and those that he drank with. His intake of alcohol had increased compared to when he was in other parishes he worked in, it was said that he did this because there was no one of authority over him in that parish, so he could do whatever he wants.

Parishioners complained bitterly about how untidy he was and his lack of sobriety, to a point that many decided to stop coming to that parish for worship.

Because of that and the fact that his alcohol consumption was out of control and did not heed the diocesan leadership advice and warning, so the end result was that he was released from his responsibility as a priest in that parish and in the diocese. He told them that he will continue to be a priest forever; as he is a priest according to the Order of Milchidezek (he was quoting Psalm 110:4).

5.5.1 REFLECTION ON THE CASE STUDY

A number of problems were evident before and after his ordination especially his anti-social behavior, and yet no one picked them up and helped him deal with them. It was hoped that a new parish with a busy scheduled will assist him with people skills and leadership; however, that was not helpful.

When Paul's work load increased so did his alcohol intake and this resulted in many things going wrong. I suppose that when the leadership interventions failed, they were left with one choice but to withdrawing his ministerial license. And it seemed in this case that the diocesan leadership was quick to move him, without effectively dealing with the problem. Every time he moved, he moved with the problem that got escalated and got to be shaped into something else by the context.

5.6 ANALYSIS OF THE CASE STUDIES

The five case studies presented on this research highlight that there's no one method or formula that leads the clergy to abuse alcohol to a point of being alcoholics. And that their problem is not their own private affair, it get extended to and affects immediate family members, the congregation and the leadership of the church and community. Many parishioners still hold a view that a priest is a representative of God and his/her behavior is supposed to be that of God, and even if a priest chooses to drink alcohol for recreational purposes, he/she should not do it in a public arena. They believe that, he not only shame himself, but also God and the church that we serve.

Another evident thing from the case studies is how the leadership of the church is inconsistent in addressing the matter and their inconsistency adds to the frustrations of both laypeople and the ordained; more will be said about this later in this chapter. And in chapter 6, the therapeutic models of healing to assist clergy and the diocesan leadership will be dealt with.

5.7 WHAT MAKES CLERGY TO CONSUME ALCOHOL

My analysis did not quench my thirst of understanding why the clergy consume alcohol, and this led me to create a questionnaire. Ten questionnaires were

distributed amongst the clergy on this matter. The following reasons were provided as to why they consume alcohol.

The results are verbatim. The question being answered were “if you consume alcohol, can you please give a reason or two”

- I consume alcohol for my digestive system and to relax my mind and body.
- I consume alcohol for fellowship and pleasure.
- I consume alcohol because it is available to me.
- I consume alcohol only when I’m invited and offered it.
- I consume alcohol just for fun.
- I consume alcohol only at events when we toast.
- I consume alcohol to relax and because a family member provides it.
- If communion wine counts here, that is the only time I consume alcohol
- I consume alcohol at dinner and when I’m with friends.
- I consume alcohol because I enjoy it.

The above shows that there are varied reasons on why the clergy consume alcohol and that many do it voluntarily, and without thinking of the

consequences, such as how this affect their families, the ministry and those they are set apart to minister to.

Let us now analyses how other scholars dealt with this issue. The author took stories shared by Fichter on the clergy who are recovering alcoholics and why they became alcoholics. And these stories will strike some familiarity with the case studies shared above.

◎ Father John Doe released his autobiography titled “*Prodigal Shepherd*”, where he called himself a neurotic and suffered four nervous breakdowns during his adult life, but was sure that these were neither the cause nor the effect of excessive drinking. For him alcohol relieved tension and was enjoyable and he became addicted. He was appointed to good parishes, got in trouble with his bishop and was moved.

Father Doe’s story similarities with Joshua’s (case study 1), where gifted priests start as casual drinkers and end up becoming addicted and unable to perform their ministerial duties as rectors. Also that every time they get into trouble in their parishes, their bishop’s move them.

◎ A priest under the pseudonym of Greg Martin, found great pleasure in drinking, especially in the company of some of the most loyal members of his congregation. After 17 years of steady drinking he reached the

point of no return. His excessive drinking threatened his marriage and led to missing out on two opportunities for career promotion.

Greg Martin, just like Thabang (case study 4), “fall from grace” was the assumption that drinking in the company of trusted parishioners was the safe things to do. Greg’s marriage was threatened, while Thabang’s ended in divorce, and their career path was negatively affected.

◎ A priest who did not want his name mentioned said he had a drinking problem while still in school before entering the seminary. He was convinced that the life and expectation of the priestly vocation were an excellent means of practicing temperance, and he did refrain from drinking until almost a decade after ordination. Then the tensions of marriage and children, the worries of insufficient income, and strains of the parish ministry returned him to drinking for consolation.

Sizwe (see case study 3) and this priest respectively experienced loss of loved ones, work and family related tension, and were led to find consolation and comfort in drinking alcohol. In the end this was not helpful as it did not resolve the issues and tensions.

◎ As priest who began his ministry in a small rural church, he had a frustrating lack of success. He received and accepted a call from a better congregation, then a large one, and another, until he had been in charge of

a flourishing suburban church. He says that he “picked up the habit” of social drinking only as he gradually moved upward in his career to minister to affluent church members with whom he felt comfortable with at the country club, at dinner parties and other social gatherings (Fichter 1982: 20 – 21).

David McClelland believes that there are five explanations on why the clergy continue drinking alcohol. He says that;

1. In the face of frustration ambition, the alcoholic resorts to drinking to achieve a euphonic sense of power and achievement.” The fallacy of this kind of hypothesis is clear when one recognizes frustrated clergy who are not alcoholics, as well as alcoholic clergy who already “have power” in high church positions.
2. Sophisticated casual theory is that of *anomic*, which Durkheim defined as an absence of behavioral norms, but which in the case of the alcoholic deviant is often interpreted as a conflict of norms (similar to Thabang’s story see page 107). This means that the clergy person is pulled in two directions: toward the *self-gratification* of the secular ethos and towards the *self-denial* of his/her religious commitment. Fichte makes an observation that alcoholism cannot exist unless there is a conflict between the values and the behavior of the drinker.

3. The explanation of excessive drinking comes under the general heading of cultural heading of cultural permissiveness and is presented in more specific form in Sutherland's hypothesis of "differential association." McClellans highlights two notions involved here. The first one (notion) is that there is a drinking culture in which people are expected to participate. The second notion is that the old adage that people tend to imitate the behavior of those with whom they most closely associate. An example is given of one young curate who never had a drink until he (sic) served under a priest who insisted on the ritual of sherry before meals and cordials after meals from then on he "formed the habit."
4. This attributes continued excessive drinking to defects of moral character. The alcoholic does not exercise self-control. This lack of will power may be said to reflect even greater moral culpability in the religious professional than it does in the lay person who drinks too much. Church officials tend to look upon drunkenness as scandalous behavior, and so do the faithful in the pews. The excessive drinker feels shame and guilt, and when he/she is called on the carpet he/she promises to do better. Many alcoholics prolong their suffering by assuring themselves as well as their church superiors, that they "will never touch another drop."
5. This theory comes closer to an acceptable explanation of why the alcoholic continues to drink immoderately. This is the allergy hypothesis

which means that some people have a physiological predisposition to alcoholism. In essence, this theory suggests that alcoholics are born, not made, and that people who do not suffer this underlying biological malfunction need not to have fear of developing an addiction to alcohol. The so called “craving” for drinking is a chemical dependency which turns the individual to compulsive obsessive personality disorder. Obviously this theory removes the weight of moral responsibility from the addict and undergirds the disease concept of alcoholism (Fichter 1982: 27). Pollard’s Positive Deconstruction theory requires the church to not quickly (or not) rush to move the clergy person to another parish without dealing decisively with the problem of alcoholism. The theory requires that the parish and diocesan leadership identify the cause, analyze it, affirm the elements of truth which it contains and discover the errors both of a priest involved and the context.

Fichter’s explanations highlight what many people can identify with this and collaborate with the reasons given by the clergy who’ve been interviewed. That it is not only external factors that lead one to be an alcoholic, but also internal factors like biological malfunction.

5.7 ALCOHOLIC CLERGY AND THE CHURCH LEADERSHIP

The clergy person is a professional employee in a voluntary work; and is not expected to deal with parishioners as though they are his/her clients or customers. His/her fellow clergy do not relate to him/her as though he/she were a business competitor. The church official to whom the clergy must give account of his/her stewardship is not like the boss in a commercial enterprise. Because of these reasons and many more the clergy alcoholic cannot be viewed as just another troublesome employee.

The South African labour law states that a “licensed priest is not an “employee” of the church; because employment relationship cannot exist unless parties have entered into valid contract of service. Relationship between priest and church does not constitute employment relationship.” [2001] 11 BLLR 1213 (LC). Despite what the law of the country says about the clergy employment, many clergy believe that they are in the ministry because God called them and, God is the one who has employed them, through the church.

An example for the above is seen on the case that was brought to the labour court that stated that “The applicant [denomination] did not conclude employment contracts with its clerics. Instead, the clerics acknowledged that they entered its ministry to serve God. The relationship between the clerics and the applicant was purely spiritual, and the clerics did not sell their services to

the applicant. Save for direction on administrative matters, the applicant exercised no control {Page 1265 – [2004] 12 BLLR 1264 (LC)} over clerics in the application of their ministries. The Court, accordingly, held that the applicant does not enter contracts of service with its clergy, and that their relationship was not one of employment.

The Court ruled that the applicant's clergy were not employees for purposes of the Labour Relations Acts (LRA), the Basic Conditions of Employment Act 75 of 1997, the Employment Equity Act 55 of 1998, the Skills Development Act 97 of 1998 and the Compensation for Occupational Injuries and Diseases Act 103 of 1993.

Nevertheless, the clergy, like other professionals, do get work assignments. They do have jobs to keep them busy; they are expected to demonstrate a fair degree of competence and efficiency. The clergy person who is an alcoholic presents a special kind of employment problem in the ecclesiastical work structure. His/her job performance can be only be roughly evaluated, and he/she gets blamed for poor performance only in the most outrageous instance of neglect. The chief reason that the top management in the church is concerned about this clergy is because he/she is a disgrace to his/her calling.

5.8 IS THE CHURCH LEADERSHIP ABLE TO DEAL WITH AN ALCOHOLIC CLERGY?

From the research conducted, the researcher has found that the church leadership is rarely involved in helping the alcoholic priest. When the intervention happens, it is either that the clergy are sent to alcoholic rehabilitation centers or expected that they will miraculously change their habit. Another factor for those who go to rehab is that no one prepares the parishioners and leadership on the process to accept back the priest. The only person who gets help, returns back to a context that has not changed and in most cases judgmental and hostile. And in most cases the clergy gets to be moved to another parish, to start a new ministry there. So far no other intervention methods have been employed.

The following is what the leadership says are the factors that contribute to clergy becoming alcoholics;

1. Personal and pastoral stress
2. Loneliness
3. Financial problems
4. Family problems
5. Social pressures

6. Lack of pastoral care for clergy
7. Lack of understanding of what priesthood is all about
8. Peer pressure {*See also appendix C*}

The problem of alcoholic employees has gained the attention of top executives in industry, government, creative arts and elsewhere in the occupational world. Research has shown that the involvement of management is a necessary factor in the rehabilitation programs for alcoholic employees. We may need to ask whether the successful practice of management in conventional occupational system have been or can be translated to the ecclesiastical structures.

The challenge to this is how to accomplish this desirable goal for clergy alcoholics is complicated by the singular occupational structure in which the clergy person is employed. The leadership structures in the church that have oversight over the priest are the office of the bishop and the archdeacon. And the bishop is charged to:

“To share in Jesus’ work of sanctifying and shepherding God’s people and of speaking in God’s name. In a life of prayer you will seek God’s blessing in all you do; you will baptize and confirm; you will preside at the Eucharist, lead the people in worship, and intercede for those committed to your charge. Those who are weak will be your special

concern. You will endeavor with a shepherd's love to exercise, with wisdom and mercy, the authority and oversight entrusted to you by Christ our King. It is your responsibility and your joy to ordain deacons and priest and send forth other ministers. You will guide and encourage those who share your ministry of building up the people of God" (Anglican Prayer Book 1989:597). The above becomes limited as it is not detailed on matters that are of ill-discipline nature and where a priest is not discharging his/her duties, with that the bishop is then required to consult and apply the Canon of the church.

While the Archdeacons are charged to:

“Share in the pastoral ministry and missionary leadership with the Bishop, in the area to which they Archdeacon is appointed. By virtue of their office the Archdeacons are entitled to the same obedience as the Bishop with regard to such matters as have entrusted to him/her. In addition to administrative duties the Archdeacon shall;

- Support, encourage and assist clergy to be effective in their ministry
- Acts as a mentor and wise counselor to the clergy of the archdeaconry; and facilitate their on-going spiritual faithfulness and growth

- Promote fellowship within the Archdeaconry through regular meetings of clergy and lay leaders” (Canon 15 & Diocese of Johannesburg Rules 2005).

Both the rules and canons encourage the Bishop and the Archdeacon to be in regular contact with clergy in the diocese. And with that they will be able to pick up challenges and opportunities that the clergy encounter. Fichter notes that “the priest who has a reputation for excessive drinking wants as little contact as possible with church authorities. He (sic) realizes that he is in trouble and that a showdown is probably inevitable, but he wants to postpone it until the distant future” (1982: 46). And this priest will be the one who does not attend meetings either called by the bishop or those set in authority over him, his/her parish in most times will be in conflict. These are the signs that something is not right, and intervention is needed urgently.

5.9 PRELIMINARY CONCLUSION

Abusing alcohol is a problem that affects both the ordained and laity. But when it is done by an ordained person it hurts and disturbs many souls and spiritual lives. The case studies shared are just a few of the evidence that there is an alcohol problem in the church, and that the most challenging factor for a number of clergy is how or what the church leadership is doing to stop or even assist in eradicating. Is pretending not to see and hear what people are reporting,

the right way to go about? And withdrawing of the ministerial license is not helpful either as this might not be cure.

McClelland presented five explanations on why the clergy continue to drink reveals that there's more that needs to be learned and understood by all involved in order to come up with therapeutic model to help everyone affected, and the following chapter will provide more details on this.

The purpose of this chapter is to demonstrate how clergy get to be alcoholics, by sharing their stories. Also to highlight the tension alcohol creates in homes and churches. The glaring issue is that, the church leadership intervention comes late or does not come at all in some of these cases. There's a sense that the church leadership does not have knowledge or the skill of dealing with an alcoholic priest. Sharing the cases from the labour court, demonstrates that the status of clergy as "volunteers" rather than "employees" presents a challenge to the leadership of the church when it comes to discipline. Especially in the case of someone who comes to work and performs his/her duties under the influence of alcohol.

CHAPTER 6

THERAPEUTIC MODEL

6.1 INTRODUCTION

The Wimberly's make this point; "clergy families are not immune to the ravages and trauma of unseen events and the difficult task of managing their lives in their aftermath. Clergy families are not beyond the need for care and succor" (2007:136). The above statement rings true, as it has been established by this research that within the church's system there is no model of caring for clergy who are alcoholics, and not only for the clergy but also their families and parishioners who have been affected by the priest's abuse of alcohol.

Seeking to come up with a model of caring, the author is challenged by the Wimberly's question, they ask; "what does managing catastrophic events and other devastating circumstances mean? How may we manage the pain of traumatic events amidst public scrutiny and expectations? What images, metaphors, or faith stories help us move through raging storms of tragedy to the winds of promise" (2007: 137). Reading the responses given by the church leadership (see chapter seven), it is clear that they do not have model of care in place to move clergy, their families and laity through raging storms of tragedy. Pollard's Positive Deconstruction theory will be fully employed in coming up with the comprehensive caring model.

In this chapter the author would like to achieve these outcomes;

- Identify the signs that can lead one into being an alcoholic
- Recommend a healing process for:
 - Recovering clergy
 - Clergy families
 - Parishes that have been affected by the behaviour of an alcoholic clergy
- Spiritual recovery
- Empower the leadership to deal with alcoholic clergy

6.2 HOW TO IDENTIFY AN ALCOHOLIC

Clergy are more likely than others to be surrounded by ‘enablers,’ people who make it easy for them to continue in their drinking. The parish secretary, the rectory housekeeper, and the church’s vergers are in a position to know the drinking habits of the priest, as is the wife (if married) and family of the priest. Whether through sympathy or loyalty, they are reluctant to report the situation to church officials, or even convince themselves that there is a serious problem. They enable the alcoholic to escape detection.

Fichter alludes that the people who are probably the first to spot the aberrant behaviour of the clergy alcoholic are fellow clergy persons, who are most closely associated with him (sic), and take his duties when he is unable to

perform them. They protect him and want to keep him out of trouble (1982:62). The author wonders whether this is done with the view to protect or to destroy the fellow clergy person. In other cases, it has been the same clergy who pretend to be supportive, who in-turn have given the diocesan and or parish leadership a call and told them where to find the intoxicated priest. Could this be a betrayal like that was received by Christ from Judas? For others, even if they have little sympathy for their drinking colleague, they may have a well-developed sense of loyalty that prevents them for “telling or blowing the whistle.”

6.3 THERAPY MODEL

In chapter four the researcher went into depth on sharing about alcohol and its effects, but what were not included were the symptoms of an alcoholic. For anyone to intervene and provided any assistance, they have to be able to identify the correct symptoms of an alcoholic. From the above one examines how the AA deals with this issue.

Alcoholic Anonymous provides the test; this test was prepared by John Hopkins University Hospital for use in determining whether or not a person is suffering from alcoholism. They continue to say, if you answer yes to any of the following questions, there is a definite warning one may be an alcoholic, if one answers yes to any two, chances are that you are an alcoholic. If you answer yes

to three or more, you are definitely an alcoholic. The following questions were used in order to test the hypothesis.

- i. Do you lose time from work due to drinking?
- ii. Is drinking making your home life unhappy?
- iii. Do you drink because you are shy with other people?
- iv. Is drinking affecting your reputation?
- v. Have you ever felt remorse after drinking?
- vi. Have you gotten into financial difficulties as a result of drinking?
- vii. Do you turn to lower companions and an inferior environment when drinking?
- viii. Does your drinking make you careless for your family's welfare?
- ix. Has your ambition decreased since drinking?
- x. Do you crave a drinking at a definite time daily?
- xi. Do you want a drink the next morning?
- xii. Does drinking cause you to have difficulty in sleeping?
- xiii. Has your efficiency decreased since drinking?
- xiv. Is drinking jeopardising your job or business?
- xv. Do you drink to escape from worries or trouble?
- xvi. Do you drink alone?
- xvii. Have you ever had a complete loss of memory as a result of drinking?
- xviii. Has your doctor ever treated you for drinking?

- xix. Do you drink to build self-confidence?
- xx. Have you ever been to hospital or an institution on account of drinking?

The reader needs to be aware that, if you answer yes to any of the following questions, there is a definite warning one may be an alcoholic, if one answers yes to any two, chances are that you are an alcoholic. If you answer yes to three or more, you are definitely an alcoholic. The case studies that are presented in chapter five do fulfil a number of the above criteria and with no doubt it classify them as persons suffering from alcoholism.

Nick Pollard in his theory of Positive Deconstruction talks about looking at an issue holistically and take out the part that is not working and replaces it with the same part that is functioning better (1997: 45). In this matter, you look at a priest who shows the signs of being an alcoholic and work on those areas, be it financial, family/personal/work related stress or boredom, and assist the priest in working the issues and problem out. Because without proper intervention just and hope that one will stop drinking alcohol has never worked-out and when intervention comes, is too late for many including for those affected by the drinking.

The author had a difficult time in interviews with co-researchers because, not all affected clergy volunteered to find help or be sent to places where they will be

helped. Fichter shares knowledge on this matter, from the research he conducted, he says that one-fifth (21.5%) of the alcoholic clergy he interviewed, claim that no pressure at all was placed on them to go for treatment. He continues to say that there comes a time in their drinking experience when denial is more frustrating than admission. 17.7% of the clergy, who check-in secretly into treatment centres, claim that they do not want anyone to know that they had to submit to alcohol therapy.

Most of them were able to pay their own way, or got quite a financial assistance from relatives and friends (1983:59). Although experts in this field tell us that the alcoholic will not stop drinking until he is ready, what is of importance is that those who are doing the intervention in the life of an alcoholic should not necessarily wait for them to hit rock bottom or motivate himself into rehabilitation facility before taking therapeutic measures. Among clergy alcoholics, this means that he has to be discovered first, and then confronted with the evidence of his misbehaviour, and then sent for therapy.

Although there is an exceptional minority of clergy alcoholics who willingly surrender themselves for treatment, the vast majority tend to evade the fact of their addiction. It is characteristic of the active alcoholic that he stays as far away as possible from the church leadership, and this would certainly not be the case if he were suffering from flu or a broken limb. They want to stay out of

trouble with church officials, which means that they realize the delinquent nature of their behaviour.

6.4 INTERVENTION METHODS

Intervention can be done by an individual, who recognizes that he needs help; or it can be done by other concerned parties such as family members, employer or friends. Those in the know tell us that you cannot force anyone to receive alcohol treatment and that it has to be a personal choice and willingness to recover from the disease. Many alcoholics have tried on their own to stop drinking, and did not succeed, and the next step is of seeking help at an alcoholic treatment center.

In most cases, the clergy alcoholic has been confronted with primary evidence of drunken behavior and it is this behavior that has to be reformed. The secondary evidence is bodily deterioration and declining job performance. If excessive drinking comes under the rubric of deviance, the ordinary expectation is that a ‘sentence’ would be passed on the deviant who is an alcoholic clergyman by the diocesan leadership. This suggests that alcoholism is a punishable offence. When the drinking cleric comes up on his first offense, the church leadership tends to be lenient, suspends sentence, and extracts a promise to stop drinking. The history of promises made and promises broken is similar

to that of the ‘pledge’ which appears to have been relatively ineffective for authentic alcoholics.

The contemporary enlightened concept is that alcoholism is a problem of chemical dependency that should not be handled by an ecclesiastical tribunal to mete out penalties according to the seriousness of the “offence.” Alcoholics differ as individuals; they may be at different stages of alcoholism, or suffering from different species of alcoholism. The question then arises concerning the kind of therapy required and whether a clergy alcoholic really needs extended, in-patient treatment. The general pattern is to try out the Alcoholic Anonymous (AA) meetings for a specified period of time.

Fichter states that, there’s no solid data on clergy who regained sobriety on the AA program without having gone to a treatment center. The quick assumption is that the easy cases, those who are younger and less impaired, can succeed on the AA program. However the hard case, those who have a long history of compulsive drinking, have to have the special care of a treatment center. Regaining sobriety through AA means that the program is working for them to that extend, but we do not know how many clerics have tried it and failed (1982: 69). Fichter comments that, “priesthood doesn’t set a priest apart in any other illness, association with lay alcoholics makes priest realize that they are

not clergy with a problem, but sick men (sic), no matter their profession or occupation is” (1982: 72).

The researcher contacted the regional offices of AA, and enquired if they do have a special treatment for clerics and the answer was that there’s no such treatment. Clergy and lay people are treated equally. They also could not disclose if the number of clergy seeking help in their facilities has increased or decreased in the last five years. A priest psychologist who treats alcoholics shares that he has never had a clergy as a patient. He remarked that, most priests would feel awkward being with lay people, because there would be no special attention given them. They would have to sleep in a dormitory. The priest is used to some dignity – no matter the condition may be and he would not receive that particular kind of respect in a place like a rehabilitation center. It would undermine his spirit.

This could be supported by the fact that, in some cases a clergy person goes to rehabilitation center under a shroud of secrecy even though his reputation as a hard drinker had been probably been well known in the parish and the diocese. There is still a tendency on the part of church leadership to “keep quiet,” not only to preserve the anonymity of the deviant addict, but also to protect the reputation of the church and the ministry in general. It is when a priest has caused a spectacle by behaving in an unbecoming manner for a priest that

congregations' get to know about what is happening and what would happen to the priest. The author was told a story of a priest, who was caught by law enforcement driving under the influence of alcohol, and he was jailed, the media got hold of the story and publicized it and there was no hiding for this priest. On the Sunday before leaving for treatment he gave a talk at the church service, in which he asked the parishioners to forgive his behavior, and explained the reasons for going to seek help for his addiction and begged for their prayers.

The author contacted Alcoholic Anonymous (AA) regional office, and they shared the following about the patients who seek to find help in their facility; “We who are in Alcohol Anonymous came because we finally gave up trying to control our drinking. We still hate to admit that we could never drink safely. Then we heard from other AA members that we were sick (*we thought so for years!*) we found out that many people suffered from the same feelings of guilt and loneliness and hopelessness that we did. We found out that we had these feelings because we had the disease of alcoholism. We decided to try and face up to what alcohol had done to us. Here are some of the questions we tried to answer honestly, if we answered yes to four or more questions, we were in deep trouble with our drinking.”

- a) Have you ever decided to stop drinking for a week or so, but only lasted for a couple of days?

- b) Do you wish people would mind their own business about your drinking and stop telling you what to do?
- c) Have you ever switched from one kind of drinking to another in the hope that this would keep you from getting drunk?
- d) Have you had to have an eye-opener upon awakening during the past year?
- e) Do you envy people who can drink without getting into trouble?
- f) Have you had problems connected with drinking during the past year?
- g) Has your drinking caused trouble at home?
- h) Do you ever try to get 'extra' drinks at a party because you do not get enough?
- i) Do you tell yourself you can stop drinking any time you want to, even though you keep getting drunk when you don't mean to?
- j) Have you missed days of work or school because of drinking?
- k) Do you have 'blackouts'?
- l) Have you ever felt that your life would be better if you did not drink?

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The above process is helpful when analysing clergy who are alcoholics as they will help the researcher enter into the world of shame that surround clergy alcoholics.

Answering most of these questions *yes* mean that it's time to receive help. Every rehabilitation or treatment center has it's time frames on how long one stays in its' facilities to receive help as an in-patient. The stay can range from four to six weeks. It has been said that the minimum stay is partly because of financial restriction, another factor for time limitation is the notion that any institutional arrangement of day-to-day living is an artificial social setting and that the patient should get back to his job and family as soon as possible. If they stay too long, it becomes non-productive, says one therapist. They get itchy, it is not normal living, it is too protective a world, it's unreal. Yet, there are instances in which patients are advised to stay in treatment longer than required.

6.5 CHURCH LEADERSHIP AND INTERVENTION

As the results from the questionnaire have revealed (see chapter seven) that the church leadership has no plan of dealing or even advising a clergyperson with an alcohol problem. The intervention method is a great tool that can be used to assist the leadership in this matter. Milgram offers the following;

“Intervention is neither casual activity nor one that should be done without direction and guidance. A trained, professional counselor often

organizes and plans the method and the strategies of the intervention. If the professional is to be a viable part of the intervention team, he or she should be aware of the situation. The participants in this process must be close and significant people in the alcoholic's life who know the facts about the disease and the problems associated with it. Family members most frequently form the nucleus of the group. A person from workplace (*church*), such as the supervisor (*Archdeacon*), can be valuable member of the team, because he or she can provide detailed information about the alcoholic's behavior. The team should consist of at least three people who are emotionally stable and able to handle the stress of the situation in a calm and supportive fashion. Prior to the intervention, those involved must decide what issues will be discussed and by whom. Members of the group select an order of presentation and agree on a calm style of discussion" (1990: 105).

The team that is going to try to motivate an alcoholic to accept treatment should consider the following issues:

- Plan to conduct the discussion in a thoughtful and calm manner; this eliminates the possibility of having a shouting match.
- Select specific observations of situations related to the person's drinking that have caused problems.

- Establish a goal for the meeting; ultimatums will be presented to the alcoholic, and the parties should stick to the goals that are stated.
- Choose a time when it's likely that the alcoholic will be sober and not drinking.
- Ensure that the atmosphere is open and supportive, not angry or threatening.
- Know what treatment resources are available and that the facility can and will admit the alcoholic; knowing where and when AA meetings take place can be helpful.
- Understand that the alcoholic may become angered by the discussion.
- Be prepared to deal with the outcome of either taking the alcoholic to treatment immediately or for incurring his or her wrath.

The hope is that the above guidelines will empower the leadership to know what to do, when they have to deal with complaints from parishioners, regarding a priest who is suspected to have an alcoholic problem.

6.6 THERAPEUTIC COMMUNITY

A therapeutic community is a community that governs itself, plan activities and support its members; and it is made up of recovering alcoholics. Here, everybody helps everybody else and the person who helps others benefit the exchange. In this community, the clergy have a common factor, that they not only share a commitment to God and the church, but also that they all have the chronic common complaint of alcoholism, and this binds them together. This promotes a relationship that might not otherwise exist. This is a reminder that we are connected and need each other, an African proverb says, “*Motho ke Motho, ka Batho*” “*a person is a person because of other people.*”

Alcoholism has been called “the lonely sickness” as it dissocializes the individual, focuses his attention on the object of his addiction, and cuts him off from ordinary and normal human relations. The process of rehabilitation is a preparation for the resumption of these relationships, and the attempt to do this occurs in the artificial circumstance of a treatment facility. More than other kinds of sick people, the alcoholic has to have group support to recuperate from alcoholism and later to maintain sobriety. Alcoholic addiction is nurtured in secrecy, isolation and loneliness. The active alcoholic expends great effort in concealing his habits and in denying the extent of his drinking. In the program of recovery, the therapeutic community breaks open this secrecy, removes the dishonesty, and replaces the social isolation.

A counselor, who has dealt extensively with clergy alcoholics, says that clergy alcoholics were socially isolated; and that they were emotionally separated from others, some of them say that they had no one to turn to. Their church leadership were the ones they were supposed to go to when they were in trouble, but these are the people they were afraid to approach. They were withdrawn; they were locking themselves up; and they continued to drink.

Recovering clergy alcoholics, not only need physical and emotional recovery, they also need spiritual recovery. Not only for those in their care, but for themselves also.

6.7 SPIRITUAL RECOVERY

For any clergy person, who recovers from alcoholism, will also need to recover spiritually with the help of a mentor, colleagues and the parish. There is frequent discussion of alcoholism as a spiritual illness, and the deterioration of the addict's relationship with God, even among the ministers of religion. Anderson reiterates this when he says 'undernourished spiritual life can take many forms, it can suffer intellectually when asked to strive only on thoughts rather than feelings. Or it can suffer emotional deadness due to lack of strong affect such as compassion, grief, joy or even anger. Also it can suffer relationally when the outer life becomes driven more by task and function than

communion with others’ (2003: 106). One priest who has been through the addictive experience, says that while the physical effects are most visible, they are last to appear in the progress of the illness. The heart of the matter is spiritual and the sickness begins in the soul.

For Anderson, spiritual recovery or fitness has trades of spiritual recovery; it is the wisdom of life lived out of self as bearing the imprint of the divine, without being divine (2003: 104). This is an eye opener and a reminder that no one can put aside part of their being and not deal with it, hoping that it will sort itself out. When that happens, certain parts of our lives spiral out of control.

Another priest shared that he was spiritually bankrupt when he was in his worst stage of alcoholism; he says he sometimes felt abandoned, even by God and was strongly tempted to commit suicide. And concluded by saying ‘God knew I didn’t want to be a drunk, but I just couldn’t stop drinking.’

Part of the recovery has to contain a therapeutic process of spiritual renewal that would help clergy to deal with their sense of guilt, remorse and failure to God and those in their care. Moore says, “when a soul is neglected, it doesn’t just go away, it appears symptomatically in obsessions, addictions, violence and loss of meaning” (see Anderson 2003: 99). Recovering alcoholics who are on the AA program come to the admission that they themselves lacked the ‘power’ to

control their intake of liquor, and then “came to believe that a Power greater than themselves could restore their sanity” (Second step of the AA Twelve Step Program). They see alcoholism as a spiritual illness which requires a conversion, a renewed dependency on God. Clinard suggest that “the so-called religious emphasis in AA may be explained in terms of Durkheim’s thesis that religion represents essentially the group and the feeling of outside of one’s self by identification with others” (see Fichter 1982:126).

Anderson believes that “spiritual recovery activates inner resources of healing, release untapped energy and produces a sense of personal well-being that contributes effective relation with others including God” (2003: 99). The challenge that faces the recovering alcoholic clergy, is that when they return to the parish to resume duties as a “cure of souls,” there will be those parishioners who expect him to be “sharp and ready” to deal and instruct them in the ways of God and help them grow spiritually and also embody the image of God. The challenge is: What will the clergy give if he is spiritually empty? Like any professional in his/her profession, clergy should be ready to care and give advice, Anderson gives an example on this by saying; “a medical doctor when consulting with a patient will say, you need to take better care of your health as she writes a prescription for reducing elevated blood pressure.

A nutritionist, says ‘take more care about what you eat,’ as he outlines a program of relaxation techniques. The physical fitness trainer, will say ‘you need to take care of your body’ as he develops a personal plan for increasing muscle tone and decreasing body fat. And the priest as a professional spiritual care giver needs to care for him/herself spiritually, before they can prescribe to others what they should do with their spiritual lives (2003: 96). As a priest, I fully agree with the above statement, as priests we cannot give what we do not know or do not have.

6.8 HEALING AND RECONCILING THE PARISH

During the time when a priest is abusing alcohol, his actions and behavior does hurt members of the congregation. Their spiritual life is taken out of alignment, their relationship with the priest get affected, and also with God and with each other, especially when the parish gets divided over this matter. For many, their connection with God is linked to their relationship with the priest, and for many, coming to church is not only about worshipping God, but also about relationships they have formed with another be it layperson or the ordained. Williams puts it this way, “some come to church, either nominally or actively; some once belonged and have left; some have been hurt by their experience in the church; and some are seeking for the first time to become members of the

body of Christ. But in all pastoral care, the church is present as the context in which the healing power of grace is to be known” (1961: 122).

Part of the therapy for both the priest and people, is for “clearing the air” opportunity needs to be created so that healing can take place. It will take a shape of a “*Parish Indaba*” (community meeting), where an atmosphere of safety, confidentiality and mutual respect will be created. And allow those present to talk on how they each have been affected by the events and instances where the priest under the influence of alcohol has acted, and the parish has reacted.

This is done so that the church can be seen as a community of acceptance, humility and love, in which personal faith is natured and where forgiveness is offered and accepted.

6.8.1 FORGIVENESS

In the church, all the experiences of life are surrounded with sacramental expressions of forgiveness and eternal life. This is evident even in churches that do not adhere to the 7 sacraments recognized by the Anglican Church, which are;

- Holy Eucharist

- Confirmation
- Holy Matrimony
- Baptism
- Ordination
- Confession
- Anointing the sick

The church is understood as a community of acceptance and reconciliation; the sacramental forms have been discovered to have a meaning and power. Acceptance and reconciliation is needed for everyone including the priest. A moment needs to be created before the priest returns to lead the congregation that has been hurt by his alcoholism, where parishioners can express how they feel about what has taken place and not only that, but also how they will work with the priest and assist him in his recovery. Part of AA recovery literature reads, “Soon you will be back out there in the real world again. You will find it is the same old world with the same old problems.” It is not helpful to want to take a person to rehabilitation and seeks to change his ways, while the environment that he lives in or works in has not changed.

As part of the healing process, the researcher suggests that a service of reconciliation and repentance be held; preferably led by a senior priest who will be approved by both the priest and the congregation. This service will not only take a form of confession and making amends but also to accept each other, as a priest and people, who bear the identity and the image of God.

The structure of the service (liturgy) will be as follows;

1. Opening Hymn
2. Greetings and Welcome
3. God's Dream in created a human being...but what we have done...and followed by a lament.
4. Conversion and Repent
5. God's Dream Renewed
6. Eucharist Rite.
7. Closing Hymn

6.9 FAMILIES OF ALCOHOLIC CLERGY

The family plays a crucial role in guiding an alcoholic toward accepting treatment for his or her disease, especially during the early stages when the problems caused by drinking are visible only to those closest to the alcoholic. Significant others – lovers, companions, or close friends, sometimes take on the family’s role for un-married alcoholics. Wallace offers seven rules to follow for living with an alcoholic and for setting the stage for accepting help:

1. Do not be misled by the alcoholic’s excuses. The reasons for drinking are not valid and should not be accepted or considered appropriate.
2. Understand that alcoholism is a disease and that no one is to blame. When the family understands that it is not the cause of the alcoholism, it is able to deal with the alcoholic’s attacks on the personality and character of family members.
3. Do not deny the disease. The people around the alcoholic should not cover up the consequences of the alcohol problem; instead, they should point out to the alcoholic the results of his or her drinking.
4. Seek help. In seeking help, the spouse and family realize that no one except the alcoholic can control the alcoholism and keep the alcoholic sober. Outside help provides the necessary support when the alcoholic is finally ready to accept help. There are many places to which a family can

turn for help: the family doctor, an employee (*bishop or Archdeacon*), the local Al-Anon family group, and the 24 hours AA toll free number.

5. Timing is crucial: Do not try to reason or argue with the alcoholic when he or she is intoxicated. The alcoholic will not understand or will make promises that most likely will be forgotten when he or she is sober. In addition, intoxication often intensifies defense mechanisms, belligerence, and anger, which may result in physical abuse.
6. Examine your own drinking, explore reasons for use, and examine patterns of behavior. Non-alcoholic family members may trigger use or enable the continuation of heavy drinking by their own patterns of drinking, for examples, alcoholic drink before dinner every night or by their own behavior – for example, taking part in an argument that becomes an excuse for drinking.
7. Do not become obsessed with the alcoholic. Family members must break free of their own obsession with the drinking; they cannot “control” the alcoholic out of the disease. To enable change, growth, and development, each family member needs to assume responsibility for his or her own life. When the family lets go of the responsibility for the alcoholism, the atmosphere at home changes drastically. This reflects on the freedom the family experiences when the alcoholic is no longer the center of

everything; the stress that is caused by the family life revolving around the alcoholic is alleviated (see Milgram 1990; 103).

The above is meant to re-assure the families that help is available for them and their loved one who is addicted to alcohol. And that they need not to take blame for things they have no control over.

Case studies presented on chapter five, highlighted the fact that clergy families get affected by the abuse of alcohol by their loved one; and also by the talk and behavior of the church members towards their loved one. It is also evident when, they are not cared for that unless they confront the leadership regarding the problems they experienced related to abuse of alcohol.

Even though they are not the ones who are ordained, the congregation places expectations on them by virtue of their association with the priest. The Wimberly's quote Charles Foster when he says, "clergy are among the most public of professions and the clergy family does not escape this reality" (2007: 51). The author has been troubled by the fact that clergy are the one of few cases who are offered help and not their families, even though there's an unspoken expectation of clergy family members by the parishioners.

There are organizations, which are offering help for family members of an alcoholic.

6.9.1 AL-ANON

While an alcoholic person receives healing, families of an alcoholic person, need support and healing too. The Alcohol Anonymous offers support for family members of an alcoholic they call themselves Al-Anon Family Groups. The Al-Anon members admit that they cannot control the alcoholic and, with the support of friends, work on their own self-understanding and growth. Al-Anon also helps members develop a plan of action for dealing with the alcoholic and his or her behavior, a process that helps break down denial of the disease and helps to open the door for discussion about alcoholism with children (Milgram 1990: 127).

They offer understanding, help and support to the families of problem drinkers. This is what they say about themselves, “we are a fellowship of relatives and friends who share our experience, strength and hope in order to solve common problems. We believe that alcoholism is a family illness and that changed attitudes can aid recovery. Al-Anon is not allied with any sect, denomination, political entity, organization or institution; does not engage in any controversy, neither endorses nor opposes any cause. There are no dues for membership. Al-Anon is self-supporting through its own voluntary contributions. Meetings are free, anonymous and confidential. Our primary purpose is to help families of problem drinkers” (www.aasouthafrica.co.za).

6.9.2 ALTEEN

In many cases when help is offered it is received mainly by adults and children are not necessarily included. Alteen is a self-help group for adolescents with an alcoholic parent. It is open to all adolescents whether or not the alcoholic parent is a member of AA. The adolescent only needs to want to understand the problem and get help. As in Al-Anon, the group provides information on alcoholism to the teenager and offers help for the young person to live his or her life. Alteen also gives young people a safe space to talk about feelings and concerns. As children in an alcoholic home, they have had to cover up most of their feelings and have learned to actively participate in the family's denial of alcoholism. Alteen provides guidance and support to enable these adolescents to break some of the destructive behavior patterns that they have developed due to alcoholism and to take responsibility for themselves. The group helps its members understand that alcoholism is not their fault and, although they cannot control the alcoholism, they can help themselves.

The Wimberly's says, "as clergy families we are not immune to the ravages and trauma of unforeseen events and the difficult task of managing our lives in their aftermath, we are not beyond the need for care and succour" (2007:135). As AA provides help, they emphasise that they are not allied to denomination, the researcher interprets this as not offering any spiritual guidance and this lives a

void that the church needs to fill as this young people and their families deal with their own hurt, disappointment and public expectations.

To deal with the spiritual and pastoral care, the Wimberly's use the method of recalling and sharing stories in order to discover the presence of facilitating and sustaining. They maintain that telling and retelling stories together in individual family settings, in small groups of clergy families during organized retreats and other times, or in special forms of sabbatical rest building bridges for self-discovery and growth (2007: 136). It is of importance that a safe space is created for clergy families to tell their stories. As their family lives have or continue to unfold in view of a congregation and the larger public.

The process of sharing is outlined and it is suggested that clergy and family members enter this process in the presence of a skilled helper. Whether in a retreat setting, in small clergy family clusters, or in individual family contexts. Guidance of a skilled helper is warranted because of the emotions evoked by recalling present and past experiences of events and other devastating circumstances. The planners and helpers know that persons must tell and retell their stories because doing so and connecting with biblical stories allows immobilizing emotions to surface as well as personal and spiritual resources to emerge that are needed to manage the journey ahead. The task of helpers is also

to be the kind of attending presence, listener, prompter, and encourager that forms an environment of openness, trust, and willingness of clergy family members to share their stories. (2007: 143). The following protocol is designed to assist clergy family members in engaging in story-sharing focused events and other devastating circumstances.

- Describe an event or other devastating circumstance.
- Introduce the tension or conflict.
- Invite catharsis and relate empathically.
- Some clues.
- Unpack your story.
- Way forward.

The closing of a retreat may end with a symbolic ritual, which is a reminder that the Christian plot is a hopeful one, but there are many setbacks. But while there are setbacks, the direction of the Christian plot is always moving forward toward the end that God intends, and we do embrace and act on this plot by marching in step and in support of one another. Partaking in Holy Communion may follow the communal ritual and the leader close with words of encouragement, saying, “what a fitting end to our time of Sabbath, of putting our lives in divine perspective and remembering God’s faithfulness to us, despite the challenges we went through” (2007: 150).

6.10 PRELIMINARY CONCLUSION

The clergy, apart from being set apart to shepherd God's flock, are fully human and at times find themselves in situations and predicaments that make some to question their calling. It is at times like these that we need be acknowledge that we do need other people to rescue us from our destructive behavior.

It is only possible for those who are called to help to be empowered on what kind of intervention they need to give, and those who are going to make an intervention need to know what is it that they are looking for and how they will deal with what they will discover and this includes the resistance of an alcoholic to accept help.

This chapter has highlighted the methods and therapeutic models available for clergy, their families and the church at large. Being an alcoholic is a disease, which if not treated properly destroys many people's self-esteem, spiritual lives and family lives. And that an alcoholic person needs a community (be it family, work place and friends) that will journey with as they seek to recover and contribute meaningfully to the society.

The following chapter will deal with the finds from the questionnaires and interviews conducted with clergy, laity and the church leadership; and the observations that the author has made from that material.