



# LUKENOTES

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## CASE STUDY

### "Father John" • Social Skills and Emotional Intelligence

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Fr. John is a 38-year old priest who has worked for the past ten years in a large suburban parish. He is known by his colleagues as an "academic," someone who prepares brilliant homilies but struggles to connect with others socially. As a seminarian, Fr. John excelled in the classroom, and after ordination he was placed in a large parish. Because his social difficulties were apparent to the bishop, Fr. John was initially paired with a pastor who was adept at being pastoral. This pairing provided for a very strong parish team. Fr. John was able to challenge the parishioners with insightful homilies and the pastor was able to meet the peoples' relational needs.

When his father died last year, he experienced a noticeable change in his mood, his behavior and in his performance within the parish. He became distant, isolative and agitated. The pastor and the bishop expressed concerns, but Fr. John was reluctant to talk to them. He had always had significant difficulty asking for and accepting help from others. Recently after Mass, when a parishioner approached Fr. John about his homily, he began to cry and then to yell at the parishioner. Although this was not the first time that Fr. John had expressed anger or frustration at one of the parishioners, this outburst was the final straw for the pastor and the bishop. Fr. John was referred to SLI for an evaluation.

#### **Social Skills and Emotional Intelligence**

During Fr. John's evaluation, the team agreed that he was suffering from both depression and anxiety which seemed to be related to the death of his father and his difficulties in handling this loss. It also became apparent that Fr. John was having tremendous difficulty connecting with others. He had difficulty in one-on-one interviews and lacked strong social skills and emotional intelligence. Fr. John frequently appeared nervous, rarely made eye contact and when he did, he tended to stare too long, making others uncomfortable. In addition, while discussing his family and social history, Fr. John revealed that he had never had a good friend, even as a child. He described an isolated childhood in which he found solace in academics. He received praise for his school work but was never comfortable or confident with his peers. This pattern of academic excellence and isolation was consistent throughout his seminary training.

Fr. John described his childhood as very positive. However, further investigation revealed that his mother suffered from depression. His father was a university professor and, while very

intelligent, he was rarely home as he conducted a great deal of research and was heavily involved at the university. Fr. John idolized his father and his academic achievements and was left at home with a mother who was battling depression and barely able to attend to the emotional needs of a young child. As a result, Fr. John was not provided with the social stimulation he needed from his mother, was isolated from his peers, and found his only validation and positive reinforcement in academic excellence.

Following the evaluation, it was recommended that Fr. John be admitted to SLI. Being in residence would also provide him with a safe and supportive environment in which to develop some of the social skills and emotional intelligence that he was lacking.

Treatment for Fr. John included individual and group therapy. Through these experiences, Fr. John began to identify the underlying anxiety he feels when he encounters another individual. In addition, although he began to recognize a need for relationships with others, he also realized that he did not know how to develop or maintain a friendship. Individual therapy provided him with a safe space to explore these feelings and to develop insights about his emotional needs; it also allowed him to discuss his strong attachment to his father as well as the disappointment he felt in his mother. Group therapy afforded Fr. John a space to practice new relational skills, a little lab for life, one might say. Fr. John identified that his "angry outbursts" at parishioners or colleagues were typically related to his feelings of anxiety or frustration, especially when he could not interpret others' feelings or what they needed or wanted from him.

In treatment, Fr. John learned to recognize the physical sensations that accompany his own feelings. He expanded his emotional intelligence by paying attention to the facial expressions and body language of others and by asking for clarification when he could not "read" their expressions. In addition, he practiced checking with others about their intentions, rather than assuming the worst.

After several months in treatment, Fr. John was significantly less depressed and more aware of the implications of his own anxiety. He was more in tune with his own emotions, and he could identify feelings and emotions in others more confidently. He also learned to recognize the impact of his behavior and actions on others. Most importantly, he could identify three other residents with whom he felt he had developed genuine friendships.

When Fr. John's bishop came to visit him toward the end of treatment, the bishop noticed that Fr. John seemed genuinely happy and was able to demonstrate a social comfort that the bishop had never seen before in him. Fr. John returned to parish work where he began to take a more active role in meeting some of the emotional needs of the parishioners. Fr. John continues to work on identifying the feelings and emotions of others. With the appropriate social skills and resources that he learned in treatment, however, he is able to connect more successfully with others and can now say that he has some real friendships.

## **The Impact of Parental Depression**

The experiences of Fr. John are a good example of the way parental depression can impact a child's social and emotional development and can affect one's ability to demonstrate appropriate affective range. Depression can leave people feeling lethargic, down, sad, and agitated. Because Fr. John's primary caretaker, his mother, was detached and not emotionally present, he did not learn how to recognize others' emotions and he did not get to "practice" social skills with either his parents or his peers. Fr. John never learned how to pay attention to social cues and facial expressions because they were not present when he was a child. As a result, he has to work hard today to identify how others are feeling. However, with treatment and the support of his new-found friends and parish community, Fr. John is forming real relationships with his parishioners and is experiencing a new-found sense of connectedness.

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