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Suspension from the practice of the holy order in cases of *infirmitate psychica* in (1041. can., 1, 1044. can., 2 § 2)

Thesis booklet

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Contents

1. Topic and objective

Recently, heated debates have flared up around the life of priests, touching on even the most fundamental questions. This feverish unrest, which questions everything, affects everyone. We are not calm observers of this unrest, but participants in it, and in the turmoil of our times, we are more sensitive to how outsiders view priests. We often encounter priestly characters in fiction, and literature often paints a distorted picture of priests. In the eyes of writers, the priest is often the descendant of the Pharisees, who serves his own selfish purposes under the guise of holiness. At other times, the priest represents a type of person alienated from life, who retreats into a fortress of formalities or solitude so that he does not have to know and understand the misery of the people. Of course, in contrast to these distorted images, we also find attractive priestly characters in literature. If this is often how priests appear from the outside, then the current unrest surrounding the priestly life becomes more understandable and pronounced.[1]

This concern is understandable, given that the Second Vatican Council addressed the issue of clerical suitability, but also added that a shortage of priests cannot be a reason for the Church to accept unsuitable clerics into holy orders.[2] The psychological aspect deserves greater attention in assessing clerical suitability, since when it is lacking, sacred ministry can be dangerous, damaging the sacred order and the image of the Church.

One of the essential requirements for suitability and aptitude for the priesthood is a hard-working and proven constitution. In order for a priest to be able to fulfill his duties to others and the obligations of his vocation, he needs not only spiritual but also psychological health. It is true that it is primarily zeal that makes a priest a servant of God and a shepherd of the faithful, but life has taught us that perfect pastoral care cannot be achieved without adequate mental health.

In this changed world, it is very important for priests to maintain spiritual and mental balance, as only then will they be able to lead those entrusted to them, which Pope John Paul II considered to be their primary task.[3] Documents by Pope Pius XI, Pius XII, John XXIII, Paul VI, John Paul II, Benedict XVI, Pope Francis, and the documents of the Holy See indicate that, however painful the shortage of priests may be, only those who are spiritually, mentally, and intellectually healthy and thus capable of development should be allowed to the altar of ordination.[4] The *ordo* does not mean that it is protected *eo ipso* from all human weakness, error, and sin. The power of the Holy Spirit is not manifested with equal force in all the actions of the servant. While in the sacraments there is a guarantee that even the sinfulness of the minister cannot prevent grace from working, in many other

[1] DR. CSERHÁTI, J., DR. FÁBIÁN, Á., *A II. Vatikáni zsinat tanítása,* Budapest 1986, 221.
[2] LG, SC, PO, AG.
[3] *Pastores Dabo Vobis,* 48.
[4] Szentségi és Istentiszteleti Kongregáció, *Instructio de scrutionio ante ordinis,* 27. decembris 1930, 23 (1931) 120-129, in LE 1/1004.

actions the servant's human nature leaves its mark, which is not always a sign of fidelity to the Gospel and can therefore harm the apostolic fruitfulness of the Church. However, it clearly means intellectual and spiritual integrity, which theology refers to with *the expression gratia supponit naturam*, that is, that there should be human integrity, without which Christian life, and indeed normal human life, is unimaginable.

Today, the priesthood faces many and varied problems. Many priests have left and continue to leave their vocation. Certainly, more favorable conditions, especially within the Church, would keep more priests in the priesthood, but the Lord Jesus teaches his followers in every age that the life of a priest will be extremely challenging. Today, we proclaim that the life of the clergy, and even priestly formation itself, is in crisis. The main reason for this is the axiom "the harvest is plentiful, but the laborers are few," to which the Lord himself drew attention. Consequently, the shortage of laborers should not cause concern among church leaders.[5]

In ordination, Christ takes possession of the priest's person in such a radical way that his sacramental ministry becomes an expression and instrument of Christ's ministry. Sacramental ministry does not depend on the priest's individual holiness. Sacramental ministry is not only a reality given once and for all in the priest's soul, but also a constant call to growth. His mission permeates his entire life; like Christ, the mission encompasses the priest's entire personal reality and life. The priest is a living representative, proclaimer, teacher, and director of the liturgy, responsible for shaping the spiritual life of those entrusted to him, and at the same time he must be a role model who sets an example with his whole life. Clerical service presupposes a balanced character. If this balance is seriously lacking—one of the surest signs of which is gentleness—then this circumstance calls into question the clergyman's suitability.

I have often been preoccupied with the question of suitability for sacred ministry. How can we determine, morally, canonically, and spiritually, whether a cleric is suitable for holy service? What kind of interdisciplinary cooperation exists between psychology and canon law? What legal developments have resulted in the two canons before us? What is their psychological and legal basis? What are the mental illnesses that prevent a cleric from performing his ministry? These are questions that are asked countless times and in many different forms, even among practicing Catholics, but are rarely answered.[6]

[5] KUMINETZ, G., *Klerikusok kézikönyve II,* SZIT, Budapest 2012, 18.
[6] KUMINETZ, G., *Klerikusok kézikönyve I,* .... 4.

2. Sources and Methods of the Thesis

In this thesis, I would like to review this complex issue of psychological suitability, presenting the most well-known mental illnesses and their impact on the holy order in light of the documents of the Holy See. In addition, I will present the opinion of an internationally recognized canon lawyer and, finally, I will reflect on the science of psychology. The issue of sacred ministers and mental illnesses is an interdisciplinary one, and my chosen method is a desired interdisciplinary dialogue between theology, Christian philosophy, anthropology, canon law, church teaching, and the human sciences, especially psychiatry and psychology.

I believe that in addressing this topic, I often touch upon borderline cases. In approaching the psychological issues that arise, I strive to achieve what the code also aims for: to provide new opportunities for connection.

This dissertation attempts to answer the questions posed, approaching them from multiple perspectives. This work covers church history, psychology, and canon law.

3. The questionis of the Thesis

For my dissertation, I chose a relevant question that divides canon law authors and psychologists on several points, resulting in different positions. These positions provide different answers to the questions posed. When we want to present these questions in the literature, we are first confronted with the fact that they are particularly complex, since while some authors only reflect on the questions, others also examine their appearance. The relevance of my question is demonstrated by the fact that there has been a wide-ranging discourse on the subject in canon law for many years, resulting in the formation of distinct positions. There is a certain continuity in their writings, but their vocabulary, style, and use of definitions sometimes differ.

In my dissertation, I present this legislative gap, but a doctoral thesis in canon law cannot provide a definitive answer to the question of regulating disqualification from sacred ministry. Rather, it can raise questions that may later serve as additional information for further practical orientation on the issue.

After considering these points, I set the following objectives for this dissertation and sought answers to the following questions:

1. What does priestly suitability and character mean according to the teachings of Scripture and the Magisterium?

2. Is the existence of a mental illness in a cleric an irregularity or an impediment to sacred ministry? Does mental illness render him unfit for ecclesiastical office? What is the effect of an obstacle arising from a psychological illness?

3. What are the most common mental illnesses that affect and hinder the ministry of a cleric and the holding of ecclesiastical office?

4. What legal and pastoral frameworks can the ordinary use when a cleric suffers from a mental illness?

5. What are the rights and obligations of a cleric suffering from a mental illness and of the faithful entrusted to him?

4. Structure of the Thesis

In light of these questions, the dissertation consists of the following five chapters:

1. The Holy Scriptures and the Church's teaching on the holy order.

2. Irregularities and impediment to the practice of the holy order in canon law.

3. Medical knowledge of mental disorders.

4. The responsibility of ecclesiastical authorities for clergy suffering from mental illness.

5. The rights of clergy and Christians in the case of pastors suffering from mental illness.

In this thesis, I do not deal with the medical treatment of mental illness or therapies, as these issues deserve separate research.

5. Conclusion.

For the topic of my thesis, I chose an area of canon law that raises numerous questions and timely challenges not only for the authorities applying the law, but also for researchers studying canon law as an academic discipline. Below, I summarize the results of my thesis and answer the questions posed in the introduction.

1. What does priestly suitability and character mean according to the Holy Scriptures and the teachings of the Church?

In this current research, we have come to the conclusion that priestly suitability is an issue that has been of utmost importance since the founding of the Church. The history of the Church, from the time of the Apostolic Fathers and the Church Fathers, through the ecumenical councils and the first decretals, testifies to the priority given to priestly suitability and aptitude. Of course, both the Bible and the Church Fathers and councils used different terminology to define the exact nature of priestly suitability. Psychological aptitude is a constant feature among the various aspects of aptitude, although it is not always expressed in terms that have become familiar in the technical language of canon law, modern psychiatry, or psychology.

When we try to trace the idea of mental health in the history of the Church, we encounter numerous synonyms, such as wisdom, education, balance, maturity, and eloquence. The Church has also developed theological principles regarding the sacramental dignity of the holy orders and the right of the believers to receive the sacraments and the Word of God (which are the means of our

salvation) from a spiritual leader who is truly worthy of such a lofty ministry. It is also clear that the Church had to create legal and canonical systems that could adequately protect the dignity of the sacraments and the rights of the believers.

Based on the sources—beginning with the New Testament—it becomes clear that in order to judge a person's suitability for the holy order, knowledge of the true faith in both doctrine and discipline is essential, as well as a deep knowledge of the Bible—along with, of course, the candidate's good reputation among the believers.

The question of suitability for priestly ministry, especially psychological suitability, became an important and central issue in the nineteenth and twentieth centuries, when psychology and psychiatry dealt separately with the topics of personal maturity and suitability.

While long church tradition affirms that the validity of the sacraments does not depend on the dignity of the minister, an equally old tradition emphasizes that the fruitful celebration of the sacraments is significantly influenced by the holiness, competence, and effectiveness of the minister. The Church wisely sets certain minimum requirements for the clergy, which ensure that they truly serve in the name of the Church and truly meet the needs of the community. Clerical ministry presupposes a balanced character. If this balance, one of the surest signs of which is gentleness, is seriously lacking, then this circumstance calls into question the clergyman's suitability.

2. Is the presence of a mental illness in a cleric an irregularity or an impediment to sacred ministry? Does mental illness make him unfit to hold ecclesiastical office? What is the effect of an obstacle arising from a psychological illness?

Irregularities and impediments have classically become a legal method used to protect the sacramental nature of holy orders and the rights of the believers. This was best achieved by identifying the aspects that are considered unacceptable in a candidate for holy orders, emphasizing the positive aspects required of a cleric. Irregularities can be defined in canon law as follows: to be contrary to the prescription, the rule, which contains the appropriate authorization to receive ordination, to hold office, and to perform duties. According to canon law literature, the real difference between irregularities and impediments is that impediments are temporary, while irregularities are permanent. Another difference is that irregularities are internal, while impediments are external in nature. Their purpose is to protect the dignity of the sacred orders and to ensure that only suitable candidates are admitted to the sacred order and its practice.

The previous code of ’17 created the first clearly defined system that defined various irregularities and obstacles. It strictly separated irregularities and obstacles, and distinguished between ex defectu and ex delictu irregularities. Mental illnesses, including epilepsy and insanity, were classified as irregularities ex defectu (984. k. 3§). The new code no longer makes this distinction between types of irregularities, but rather uses the term irregularity as a collective term, which also

includes impediments as a concept of temporary irregularity. Nowadays, however, mental illness is considered an irregularity or an impediment to obtaining or practicing holy orders.

The new code not only changed the system and classification of irregularities and impediments, but also removed certain irregularities, such as epilepsy or mental illness, from the list due to advances in science and the reinterpretation of canon law. Physical illnesses do not prohibit the reception and practice of the sacraments, but mental disorders do.

According to various recognized canon lawyers, mental illness (psychicae infirmitatis) does not mean that someone temporarily loses their ability to think clearly due to injury or high fever, but rather refers to a permanent state in which the person is constantly confused.

In recent years, irregularities and obstacles arising from psychological problems have become one of the most interesting issues in canon law circles, because this legal procedure was seen as a possible solution to the problem of sexual abuse. The controversial question is: can we speak of irregularity in relation to a priest suffering from pedophilia, for example, on the basis of 1044. can. 2. § 2. sz.? In their opinion, many priests who suffer from pedophilia have the intellectual capacity to perform their priestly duties validly, so irregularity cannot be established in their case. According to the Apostolic Signatura, abnormal behavior in sexual matters is not necessarily and always the result of mental disorder or disability, so moral responsibility or serious guilt can never be invoked.

I have also come to the conclusion that the ordinary's determination of irregularity or impediment is not the only option, as criminal law and psychological therapy may also be important in these cases.

It should be added that many questions and misunderstandings have arisen regarding the effects of mental illness. According to Church tradition and the teaching of the Holy See, impediment prohibits all aspects of pastoral activity, not just liturgical ministry, such as the celebration of the Eucharist and the administration of the sacraments.

There is no general consensus on how long a prolonged (persistent) illness must last to result in irregularity. It seems clear that a brief loss of consciousness, concussion, or coma does not fall into this category, only those that are persistent and can be considered a condition. However, if a short-term illness causes permanent damage, this damage may be considered an irregularity. Although the irregularity is caused by the illness itself and not by the judgment pronounced on it, it is the decision of the superior that declares the existence of the irregularity.

Canons 1041 and 1044 emphasize the importance of consulting with an expert before determining irregularity or impediment, or announcing recovery from illness, since the final decision rests with the ordinary. However, this consultation does not exclude the involvement of others, such as seminary superiors, other priests, the dean, the parish priest, the priestly community, the supervisor, the coach, etc., who can also be of great help to the ordinary in making a decision.

3. What are the most common mental illnesses that affect and hinder clerical ministry and the exercise of ecclesiastical office?

In recent decades, new issues have arisen that can be described as interdisciplinary issues in canon law, involving dialogue between canon law and psychology/psychiatry. This is also true for the question of the psychological suitability of clergy, and in light of these interdisciplinary studies, new questions arise, such as: What does mental health mean? What is normal or abnormal, mature or immature? When does a mental illness become serious? We have found that there is no consensus on these questions among psychologists and psychiatrists, nor among the various schools of psychology or psychiatry. There are different definitions for the same problems, and there are different subcategories of mental illness. The independence of the science of psychology can be traced back to the 19th century. It encompasses many areas, the best known of which are psychology, psychiatry, and psychopathology. The priority of psychology is to explore the causes of pathological, abnormal mental phenomena and their effects on human behavior.

But how can the Church respond to these questions, and what does canon law say, taking into account the conclusions of other sciences in these interdisciplinary issues? Our answer would be as follows: although the Church today cannot ignore the human sciences in all interdisciplinary questions, including the psychological suitability of priests, there is nevertheless a more important rule that derives from Christian anthropology. This includes the teaching that the Church possesses the whole truth concerning man's relationship to God, to other people, and to himself. The Church teaches that man is created in the image of God. These fundamental truths of divine revelation determine the Church's understanding of Christian anthropology and its relationship to other sciences. Thus, however important cooperation on interdisciplinary issues may be, it cannot lead to opinions that contradict Christian anthropology. The Church has never opposed the use of psychology. It has often stated that certain tools of psychology are useful and permissible as long as they do not violate a person's rights to intimacy and privacy, as well as their personal rights.

Canon law does not concern itself with every single element of psychopathology, because there are serious psychological anomalies that affect admission to and practice of holy orders in canon law, and there are many other simpler disorders defined by psychiatry and psychology, but their impact on canon law is negligible. Psychology has elaborated in detail the syndromes of each disease, but many of these are clearly only theoretical issues that never or only very rarely occur in our daily lives. Canon law cannot provide an accurate clinical analysis of psychological disorders, but this is not its task, as it only needs to use the report provided by the psychologist or psychiatrist and apply it to the situation at hand.

Psychiatry and psychology can be of great help to canon law in recognizing the location and effects of a given illness, but it must then seek to examine the canonical effects of that illness, because different illnesses vary in severity, which has very different effects in canon law.

Mental (psychological, spiritual) disorders can develop at any time during our lives. Anxiety, panic disorder, phobias, body dysmorphic disorder, anorexia, or bulimia nervosa can seriously hinder sacred ministry if a clergy member suffers from them.

Given the prevalence of psychological disorders in today's society, it is inevitable that medical and psychological sciences will increasingly be called upon to help determine whether an active clergyman is truly fit to exercise his priestly vocation, whether physically, mentally, or spiritually. Consequently, psychological counseling and support should be considered or provided, as this is not currently clearly required by the code or the Holy See's regulations.

It is not difficult to understand why the issue of mental illness is so important and so relevant today. If an ordained cleric suffers from such an illness, it renders his entire pastoral ministry impossible, not just a part of it. After all, sacramental ministries, i.e., those that derive from the sacraments of the Church, are very important in the Church. A cleric can only fulfill his mission for the good of the whole Church if, in addition to his aspirations, he also has a natural disposition for ministry. A cleric entrusted with the spiritual care of the community of Christ's followers must truly stand before the believers as a shepherd. The spiritual goal requires that this mission must be fulfilled by those who are truly suitable. If, for any reason, their work becomes unsuitable for achieving the goal of the task, the competent superiors should have the opportunity to take the necessary steps so that the Word of God can truly bear fruit in abundance in souls.

4. What legal and pastoral framework can the ordinary use when a cleric suffers from mental illness?

In the case of a cleric suffering from mental illness, the primary responsibility lies with the bishop, who can seek numerous forms of assistance (consulting fellow priests, involving a psychologist or psychiatrist, a coach or supervisor, etc.) in order to find the best solution.

Since every case is different, just as every human life is different, the bishop must not forget the circumstances and background of the clergyman. The diocesan bishop must also take into account the good reputation of the cleric and the interests of the believers. It is also the bishop's duty to know his priests directly and personally, to engage in dialogue with them, and to help clergy in crisis.

According to psychiatry and psychology, there are many types of psychological disorders, but the ordinary is not obliged to declare irregularity or impediment in every case, because there are problems that are purely theoretical questions for psychology. The ordinary may decide that the case is not so serious as to justify a finding of irregularity or impediment, or he may believe that there is another, better solution to the specific problem: transfer, removal, retirement, temporary suspension

from sacred ministry, or sick leave. Sometimes the above options do not provide sufficient opportunity for recovery from psychological distress because the appropriate conditions are lacking within the given church. What other options are available? A good and frequently used solution is to transfer the cleric to another diocese. At the same time, the other ordinary is reluctant to accept a cleric struggling with psychological problems, because this means that the new diocese will be entirely responsible for his care and support, including the necessary psychological care.

But it is also true that there is no agreement among canon lawyers, bishops, and episcopal conferences on the best solution to certain specific and particularly difficult issues, such as sexual abuse, alcoholism, drug abuse, etc. Possible solutions include determining irregularities, psychological therapy, or even the application of criminal law (especially suspension or prohibition from priestly ministry), but in all these cases, the question arises as to what impact the psychological problem has on the responsibility of the cleric concerned. Here we can conclude that the function of ecclesiastical authority can never be an automatic procedure, but always depends on the nature and severity of the problem, its impact on priestly activity, and perhaps other personal circumstances that the authorities can never ignore, because every case is different, just as every human life is different.

Another question that arises is: what psychological disorders can lead to criminal behavior? However, it is important to note that ecclesiastical criminal law sometimes differs from civil criminal law, and psychiatry and psychology may use their own specific terminology to describe a particular problem and its impact on criminal behavior. Specific crimes resulting from psychological problems can be very diverse, including murder, assault and battery, car accidents, sexual crimes, pedophilia, other forms of sexual abuse, etc. There are certain factors that can influence a person's responsibility, such as age, drugs, alcohol, mental illness, passion, etc. However, not all psychological illnesses make a person capable of committing a crime, and not all psychological problems have the same effect on human freedom.

If a crime is the result of a mental illness, the clergyman may be suspended from sacred ministry. These measures, which temporarily suspend the exercise of ministry, whether they are actual punishments or merely disciplinary or administrative measures, may be appropriate for the Church to avoid accusations that it sought to conceal or cover up a punishable act that came to its attention, or that it delayed in taking action on a matter that could have been resolved quickly.

Another option available to the diocesan bishop is dismissal from the clerical state and placement in the lay state. It is not possible to dismiss someone from the clerical state ipso facto; there are precedents that already entail punishment and at the same time warn the offender of further possible penalties.

It is also important to know from the teachings of the Magisterium that, no matter how good a father the diocesan bishop must be to both seminarians and priests, the duties and rights of the

diocesan bishop differ in the case of seminarians and priests. In the case of clerics, however, the diocesan bishop must not forget his rights arising from ordination and incardination. Thus, the type of solution will also be different and must be chosen in such a way that it best serves recovery and reintegration into priestly work.

5. What are the rights and duties of a clergyman suffering from mental illness and the believers entrusted to him?

The bishop is the guardian of the entire diocese and must also take into account the interests of the believers, who have a right to a priest who is able to satisfy their needs for the sacraments and the Word of God. Thus, on the one hand, he must help the clergyman in his healing and reintegration process, but then he must say no if the priest's activities pose a danger to the community due to his mental disorder.

In cases of mental illness, the most important task of the diocesan bishop is to reconcile the various situations and rights. The priest has the right to a good reputation (res mixta), which is often damaged in such cases.

In addition to the right to a good reputation, the cleric also has the right to a livelihood, which must be sufficient to sustain him, and there is no justification for a priest suffering from mental health problems receiving less income than a healthy priest.

Similarly, the believers also have a right (christifideles) in cases where the pastor suffers from mental illness, as they have a right to a pastor who is able to fulfill his duties. A pastor who, due to mental illness, is unable to fulfill his duties and represent the rights of the believers, endangers the salus animarum of them, which is the primary goal of the sacraments and spiritual treasures of the Church. The believers have the right to inform the authorities of the pastor's unsuitability and to request a more suitable person who can adequately fulfill his duties in order to lead the community on the path to salvation.

In the near future, diocesan leaders may introduce the so-called ethics hotline (EY/Ethics Hotline-Code of Conduct) for the benefit of the believers and communities, which has been operating in the civil and competitive sectors for several years. Obviously, this is not an easy task, and it cannot be implemented overnight in the life of communities (applying to both priests and parishioners). The rhythm of life, challenges, and signs of the times lead to the conclusion that the Church must also adapt and accept new opportunities. This will remain an open question in the life of the Church in the future.

At the same time, the application of psychology raises very serious ethical and legal issues, as it affects the right to privacy, which competes with the public interest of the Church. The latter refers to the fact that the Church needs sufficiently prepared and healthy pastors, while the former refers to the fact that individuals also have the right to know as soon as possible whether the Church considers

their vocation to be authentic and whether it finds them suitable to practice it fruitfully, and to undergo the examinations necessary to achieve this. They also have the right to have the data obtained from such examinations kept confidential. If the competent authority deems someone unfit for sacred ministry, it must inform the person concerned as soon as possible, who must then make other plans for their life.

I would like to conclude with what are perhaps the most important points. Of course, we must do everything in our power to prevent the onset of psychological illness in priests. What psychology calls coping mechanisms, coping strategies, resilience, flexibility, growth, or coming out of trouble better than before, or growing beyond myself in the sense of constructive suffering, could be applied to priestly life as prevention and assistance. This can be achieved through a normal life, to which is added the idea of self-discipline, love for the Church and its sacraments, especially the Eucharist, frequent prayer, mutual help, trust, and love between bishops, seminarians, priests, and the believers. And even if mental illness still appears, the above values can definitely help in finding a solution—without ignoring the role of the human sciences—with the conviction that healing must come through the Church and Jesus Christ, for the words of the Apostle Peter are still relevant today: *"Master, to whom shall we go? You have the words of eternal life."* (*Jn 6:68).*