

Criteria and norms concerning health impediments to receiving orders

Summary

To receive the sacrament of orders it is required to have adequate health, necessary to undertake and fulfill the tasks of deacons, presbyters and bishops. For this reason, only those men who are physically and mentally able to dedicate themselves permanently to the sacred ministries can be admitted to orders. Disabilities and diseases of the body, as well as mental disorders constitute limitations to receiving this sacrament. The assessment of whether a disease or disorder is a restriction to be admitted to orders is not always easy, as the legislator defines only the general principles, and the statements of popes and dicasteries of the Roman Curia regulate only some aspects of the problem.

The aim of this dissertation is to show health as one of the essential qualities required of candidates for ordination, the lack of which restricts admission to this sacrament. The current research is based on documents of popes and dicasteries of the Roman Curia regarding the sacrament of orders. The analysis of sources published, above all, after the promulgation of the Code of Canon Law of 1983 and the literature on the subject, allowed to prove the thesis and show that there are still difficulties in assessing the fitness of candidates for ordination because of their physical and mental health. They result from some inaccuracies or shortcomings regarding the subject discussed, as well as from the fact that the vast majority of statements made by the Holy See apply only to candidates for the presbyterate.

The conclusions from the conducted research are an attempt to thoroughly analyze and organize the criteria and standards concerning the health of candidates for ordination. Health is to be understood as lack of diseases and infirmities that make it impossible to perform the sacred ministry, and simultaneously, it is such a fitness of the body and mind, that, alongside with a mature personality, will allow for permanent and independent fulfillment of this ministry. A candidate for the presbyterate and for the permanent diaconate, already at the moment of entering the formation path, should be able to demonstrate that his state of health can be reconciled with future duties. Possible deficiencies, if they are to be healed and have no major impact on the formation process itself as well as on the future ministry, should be removed before the liturgical inclusion in the group of candidates of ordination. During the period of formation the candidates' health should be examined in order to allow only those who are fit to be ordained. Similarly, for the episcopate only those presbyters should be allowed whose state of health enables them to undertake the hardships of such pastoral ministry.

Among the specific issues raised in this doctoral dissertation there are several related to the health problems listed in the documents dedicated to candidates for ordination, such as, for example, celiac disease and alcoholism, or else irregularities resulting from psychological reasons, self-mutilation and suicide attempts. It was also pointed out that candidates for ordination should show a clear

masculine gender identity and be free from unmanly behaviors, therefore intersex people, those with Klinefelter syndrome, transvestites and transsexuals cannot be admitted to this sacrament. Additionally, they are required to achieve adequate emotional maturity, so that they can express their will to receive orders and undertake the ministry of the Church voluntarily and freely. Emotional maturity is also necessary for a serene experience of celibate life devoted exclusively to the affairs of the kingdom of God.

The solutions regarding health problems presented in this dissertation may be of help, for example to bishops or higher religious superiors, in assessing the suitability of candidates for orders and in deciding whether to grant a dispensation for irregularities. A prudent assessment of the physical and mental health of candidates is important, as it protects from admitting to orders a person with a disease or disorder. The research conducted allows to draw the conclusion that the legal solutions applicable in this respect are not sufficient, and the health problems of candidates for ordination are at present frequent and serious. Therefore it is necessary to update the health issues of the candidates based on the emerging new disease entities, and also take into account the positive possibilities of progress in medicine.

Translated by Izabela Kato