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# By Rev. Matthew González, J.D., Executive Director, Clergy Care Collective

Below are seven original op-eds available for publication or adaptation. Each explores a unique facet of mental health, ministry, and justice, grounded in the Gospel and Catholic Social Teaching. These essays are part of Clergy Care Collective's mission to support the well-being of those in or preparing for Christian ministry.

#### 1. Why I Sued the Pope—and What It Says About Mental Health

In this piece I explain why I filed a lawsuit naming Pope Leo XIV and the Archdiocese of Chicago as defendants, not to seek money but to confront the exclusion of seminarians with mental illness. I argue that the case highlights the urgent need for the Church to embrace clergy mental health with compassion and justice.

# 2. A Church That Heals: Why We Must Support the Mental Health of Our Clergy

Clergy are often treated as spiritually invincible, yet many suffer in silence. This piece introduces the mission of Clergy Care Collective and calls on the Church to care for its caregivers with compassion and intentionality.

# 3. Who Cares for the Caregivers?

This op-ed explores the invisible toll of pastoral work and the systemic failure to support clergy mental health. It argues that wellness in ministry is a justice issue—not just a personal one.

#### 4. Equipped to Care: Why the Church Needs a Pastoral Toolkit for Mental Health

Announcing a new initiative, this op-ed makes the case for a free, ecumenical, trauma-informed toolkit to help pastors minister to those suffering with mental illness—and care for themselves in the process.

#### 5. The Gospel and the Safety Net: Why Faith Demands We Act

Rooted in Catholic Social Teaching, this urges faith communities to advocate for an expanded, just, and compassionate social safety net, especially for vulnerable seminarians and clergy.

#### 6. Breaking the Silence: Why Clergy Must Speak Openly About Mental Illness

This op-ed calls clergy and seminarians to break the silence around mental illness by sharing their struggles openly. When spiritual leaders speak honestly about their own wounds, they give their communities permission to seek help and create a culture of compassion instead of stigma.

#### 7. Saint Dymphna and the Stigmatized: A Patron for Our Time

A reflection on St. Dymphna as a beacon of healing in an age of mental health crisis. This piece offers a spiritual framing for destignatizing mental illness in Christian communities.

# First Op-Ed for Clergy Care Collective

# Why I Sued the Pope — and What It Says About Clergy Mental Health

Written by the Rev. Matthew González, J.D., Executive Director of Clergy Care Collective

When I walked into law school classrooms, I carried not only casebooks but also the invisible weight of bipolar-II disorder. Later, when I felt called to Catholic ministry, that same weight was used against me. I was told—without ceremony—that my diagnosis disqualified me from the priesthood. That is why I filed a lawsuit naming Pope Leo XIV, the Archdiocese of Chicago, and a local vocations director as defendants. I did not do this for money. I did it to shine a light on a silent crisis that affects seminarians, clergy, and countless faithful who live with mental illness.

Clergy mental health is the Church's unspoken frontier. Behind pulpits and altars, too many priests and pastors struggle in silence, fearing stigma, judgment, or outright exclusion. The vocation that should be a source of grace becomes, instead, a source of isolation. The institutional message is too often: "If you have a mental illness, you do not belong here." This message harms not only those of us called to ministry but also the congregations who rely on leaders who are fully human—fragile yet faithful.

My lawsuit may appear dramatic; naming the Pope is not something one does lightly. But the underlying issue is both simple and urgent: the Church, and society at large, must stop treating mental illness as a disqualifier. In every other realm of life, we increasingly recognize that people with depression, anxiety, or bipolar disorder can flourish as teachers, doctors, judges, and business leaders. Why should ministry be different? If anything, those who have wrestled with darkness may bring a deeper compassion to the pulpit.

This conviction is why I founded Clergy Care Collective, a 501(c)(3) nonprofit dedicated to supporting the mental health of clergy and seminarians. We provide peer support groups, pastoral care consultations, advocacy training, and a pastoral care toolkit that offers practical, traumainformed resources. Our mission is ecumenical but deeply rooted in Catholic social teaching and the witness of saints like St. Dymphna, the patron of those with mental illness. I have consecrated my ministry to her and to the Blessed Mother, not as a gesture of defiance but as a declaration of hope.

The legal complaint I filed in Cook County chancery court is about more than canonical rules or seminary gates. It is about dignity. It is about whether the Church of Jesus Christ, which proclaims the Beatitudes and welcomes the poor in spirit, will also welcome those who carry psychiatric diagnoses. To exclude seminarians or clergy based on mental illness is to deny the very Gospel that calls us to love one another without condition.

Some may ask, "Why sue? Why not simply pray or petition?" My answer is that law, too, is a form of moral witness. When procedural injustice persists, the courtroom can be a pulpit. By

asking a secular judge to weigh in, I am pressing the Church to confront its own gap between proclamation and practice.

This is not a fight against Rome. It is a plea for reform, transparency, and compassion. My hope is not that I "win" against the Pope but that the Church begins to see seminarians with mental illness as assets rather than liabilities, as bearers of unique empathy rather than problems to be managed.

If my lawsuit leads even one seminarian to be welcomed rather than turned away, then the case will have achieved its purpose. The Gospel is not diminished by our weaknesses—it is magnified through them. And so it must be in the Church.

Second Op-Ed for Clergy Care Collective

# Title: A Church That Heals: Why We Must Support the Mental Health of Our Clergy

Written by the Rev. Matthew González, J.D., Executive Director of Clergy Care Collective

Too often, we assume that those in ministry—bishops, pastors, priests, deacons, and seminarians—are spiritually invincible. We expect them to bear our burdens, comfort the dying, preach the Good News, and navigate congregational conflicts, all without showing signs of strain. But the truth is, clergy are human. And many suffer in silence.

This is why I founded Clergy Care Collective, a national 501(c)(3) nonprofit dedicated to the holistic well-being of those in or preparing for Christian ministry. Rooted in the Gospel and Catholic Social Teaching, we advocate for clergy mental health, support seminarians, and celebrate the gifts of pastoral scholarship and vocational service. Our mission is as bold as it is urgent: to ensure that those called to ministry do not burn out, break down, or feel alone.

We live in a world marked by spiritual fatigue and rising mental illness. Pastors are expected to do more with less—less time, less support, and, tragically, less empathy when they themselves are hurting. According to studies, rates of depression and anxiety among clergy rival those of first responders. Many hesitate to seek help for fear of judgment or professional repercussions.

Clergy Care Collective exists to change this. We provide theological resources that integrate mental health into faithful ministry. We champion those with disabilities and mental illness—not just as people to be served, but as beloved children of God whose experiences are vital to the Body of Christ.

Our patron saint is St. Dymphna, the seventh-century martyr and miracle worker known as the protector of those with mental illness. Her story reminds us that healing is possible—and that the Church can and must be a place of refuge, not stigma.

We also draw strength from Catholic Social Teaching, which demands justice and dignity for all, including those the world often overlooks. Pope Francis reminded us that "the weakest among us" must never be abandoned. We believe the mentally ill, the neurodivergent, and the weary shepherds of Christ deserve care, community, and hope.

Clergy Care Collective is intentionally ecumenical. We support Catholic, Protestant, and Eastern Orthodox clergy alike, affirming that our unity in Christ is stronger than our differences. We support and affirm lesbian, gay, bisexual, transgender, intersex, two spirit, and asexual seminarians and clergy.

The Church must be a place where all are seen, supported, and sent forth in mission.

Our programs are free, our finances transparent, and our commitment unwavering. We are funded entirely by generous donors who recognize that healthy clergy create healthy

congregations. Our leadership team includes ordained ministers and public interest attorneys who understand both the joys and burdens of ministry firsthand.

We are just getting started. And we need your prayers, your partnership, and your voice.

To those in ministry who are struggling: you are not alone. To those considering seminary but worried about stigma: you are seen and valued. And to every Christian who wants to build a more compassionate Church: join us.

It is time to care for those who care for others. The Gospel demands no less.

# Third Op-Ed for Clergy Care Collective

# **Title: Who Cares for the Caregivers?**

Written by the Rev. Matthew David González, J.D., Executive Director of Clergy Care Collective.

In every corner of the country, pastors, priests, seminarians, and ministry leaders are quietly holding together the emotional and spiritual fabric of their communities. They sit beside hospital beds, preach hope from pulpits, feed the hungry, and carry the pain of others with astonishing grace. But who cares for them? Who carries them when the burden becomes too heavy? The answer, too often, is no one. America's clergy are facing a crisis of burnout, depression, anxiety, and isolation. Many feel they must suffer in silence, fearing judgment, stigma, or dismissal if they admit their struggles. Some step away from ministry altogether. Others continue, hearts fraying at the seams. Behind the collar, behind the robe, behind the title is a human being wounded, exhausted, and often alone. This crisis is not merely personal; it is structural. The very systems that rely on clergy to hold others up offer few supports to hold them. In our churches and seminaries, there remains a dangerous myth that strength means suppressing suffering. That silence about mental illness is somehow holy. It is not. It is deadly. That's why we founded Clergy Care Collective. We are a nationwide, ecumenical 501(c)(3) public charity rooted in the Gospel and Catholic social teaching, committed to supporting the mental, emotional, and spiritual well-being of clergy and seminarians. We walk with them—intellectually, emotionally, and spiritually—affirming that to serve well, ministers must also be cared for.

Our mission includes providing practical support for those who are most vulnerable, such as individuals awaiting Supplemental Security Income (SSI) adjudication. The process is long, complicated, and unjustly delayed for many, particularly those suffering from mental illness. We offer interim charity to help them survive this bureaucratic limbo. These are not faceless applicants; they are often future pastors, the very people called to be vessels of grace. We also work to reform the safety net system itself. The Gospel compels us to stand with the poor and marginalized, to proclaim Christ among those the world forgets. Catholic social teaching calls this the preferential option for the poor. We call it common sense—and common decency.

Mental health must not be a side issue in ministry. It is central. Those in ministry are not superhuman. Many clerics carry wounds of trauma, of exhaustion, of spiritual anguish. And some clergy members, like me, have been diagnosed with mental illness. I live with depression and anxiety. Through medication, prayer, celebration of the daily Eucharist, eucharistic adoration, and community, I have found healing. But I have also faced the crushing silence and stigma that so often surround these realities. Our work is not only about crisis response, but also about celebration and resilience. We champion theological scholarship, amplifying voices of faithful thinkers and writers who nourish the Church intellectually. We stand for transparency, financial integrity, and ecumenical unity. We are just getting started. If you are a pastor or seminarian reading this and feeling unseen: you are not alone. If you are a donor wondering whether to invest in clergy wellness: please do. If you are a Church leader skeptical of mental

health ministry: come and see. Because if we do not care for those who care for others, the whole body suffers. We invite you to learn more, to pray with us, and to stand in solidarity with the wounded shepherds of God's people. In a time of fracture, let us become healers of those who heal.

Fourth Op-Ed for Clergy Care Collective

# Title: Equipped to Care: Why the Church Needs a Pastoral Toolkit for Mental Health

Written by the Rev. Matthew David González, J.D., Executive Director of Clergy Care Collective

What happens when the wounded come to church—and the pastor is wounded too?

In sanctuaries and seminaries, at hospital bedsides and kitchen tables, clergy are facing a rising tide of mental health crises. Many are faithfully walking alongside congregants struggling with depression, anxiety, trauma, or neurodivergence—all while quietly battling the same afflictions themselves. They do this sacred work often without adequate training, support, or tools.

Our next major initiative is the development of a **Pastoral Care Toolkit for Mental Health**—a practical, spiritually grounded, trauma-informed resource designed to help clergy minister more effectively to those facing psychological suffering. This toolkit will not be a generic brochure or a superficial gesture. It will be a theological statement: that caring well for the mentally ill is not peripheral to the Gospel—it is central to it.

We envision this toolkit as a comprehensive, free, and ecumenical resource containing pastoral guides, sample liturgies and prayers for those in distress, theological reflections, and best practices for clergy self-care. It will be designed with input from mental health professionals, theologians, and clergy from diverse traditions.

But more than a product, the toolkit will represent a cultural shift. For too long, churches have acted as if faith alone were a substitute for mental health care. We've reduced the agony of trauma to platitudes. We've shamed those with clinical depression and dismissed the neurodivergent as "difficult." We've mistaken exhaustion for weakness and silence for sanctity. It is time to repent of these habits and embrace a new model of ministry—one grounded in both spiritual wisdom and psychological insight.

The need is clear. Clergy are not only caregivers but care receivers. According to multiple studies, pastors suffer from rates of burnout, anxiety, and depression comparable to those of first responders. Many receive little or no training in how to support parishioners with mental health conditions. Some feel ill-equipped to respond when someone expresses suicidal ideation. Others struggle to know how to set healthy boundaries with those who are hurting.

This is not just a crisis of compassion. It is a crisis of formation.

The Church must prepare its ministers—whether ordained or lay—to walk alongside the suffering in ways that honor both soul and psyche. As *Gaudium et Spes* teaches, "Nothing genuinely human fails to raise an echo in the hearts of Christ's followers" (§1). Mental illness is not a distraction from the Gospel. It is a profound part of the human condition Christ came to redeem.

Clergy Care Collective is committed to resourcing the Church for this moment. We know this work cannot be done alone. That is why we are seeking input from pastors, therapists, seminary professors, and those with lived experience. We believe that wisdom is communal and that a truly effective pastoral response must be shaped by many voices.

To every pastor who has felt unequipped: you are not alone. To every seminarian struggling to balance empathy with boundaries: help is coming. And to every church leader wondering what to say or do when someone walks through the door in pain: we are building something for you.

Fifth Op-Ed for Clergy Care Collective

# Title: The Gospel and the Safety Net: Why Faith Demands We Act

By the Rev. Matthew González, J.D., Executive Director, Clergy Care Collective

As followers of Christ, we are called not just to charity but to justice. We are called to build a world where the poor are lifted up, the sick are healed, and the marginalized are brought to the center. Yet in today's America, far too many people—including seminarians and clergy—are falling through the cracks of a fraying social safety net.

Clergy Care Collective was founded to support the mental health and vocational flourishing of those in or preparing for ministry. But we cannot do that work in isolation. Many of the pastors and seminarians we serve are not only spiritually burdened, but they are also materially vulnerable. Some await Supplemental Security Income (SSI) with no income at all. Others battle serious mental illness while facing homelessness, hunger, or untreated medical needs. The system meant to protect them is often inaccessible, underfunded, or hostile to those in deepest need.

We believe this is a moral failure. And we believe the Church must speak.

Catholic Social Teaching affirms the dignity of every human person—not in theory, but in structures. In *Evangelii Gaudium*, Pope Francis writes, "The need to resolve the structural causes of poverty cannot be delayed... Inequality is the root of social ills" (§202). The Gospel does not permit indifference to suffering; it demands action. And action today means advocating for policies that ensure **universal access to healthcare**, **robust income support**, **affordable housing**, **and comprehensive mental health care**.

In *Caritas in Veritate*, Pope Benedict XVI affirmed the role of the state in ensuring justice: "The market cannot guarantee by itself the satisfaction of all essential human needs... Justice must be applied to every phase of economic activity" (§35, §36). In other words, we cannot rely on individual acts of charity alone. We must call for structural reforms that reflect Gospel values.

The Catechism of the Catholic Church teaches that "the right to private property... does not do away with the original gift of the earth to the whole of mankind" (CCC §2403). The goods of the earth are meant to serve the common good. When millions cannot access basic care or support because of bureaucratic inertia or ideological indifference, we are no longer a society of justice, we are a society of exclusion.

That is why Clergy Care Collective supports an **expanded**, **inclusive**, **and compassionate social safety net**. We advocate for a system where:

- People with disabilities are not left waiting for years for SSI benefits and do not have to try to subsist on less than \$1,000 a month.
- Mental health care is not a luxury, but a universal right.

- Food, shelter, and medical care are guaranteed to all, not rationed by wealth.
- Clergy and seminarians facing crises are met with grace—not stigma or silence.

This is not partisan. It is pastoral. It is Christian. And it is urgent.

Some may say that political advocacy is outside the Church's purview. But our tradition says otherwise. As Pope John Paul II declared in *Sollicitudo Rei Socialis*, "Solidarity is not a feeling of vague compassion... it is a firm and persevering determination to commit oneself to the common good" (§38). For us, that means advocating for policies that heal—not harm—the Body of Christ.

At Clergy Care Collective, we walk with those the system forgets. We support future ministers awaiting benefits. We fund interim care. We amplify the stories of those suffering silently. And now, we speak prophetically: the Gospel compels a stronger safety net. One rooted not in punishment, but in protection. Not in exclusion, but in mercy.

To policymakers: we urge you to listen to the voices of the vulnerable. To people of faith: we invite you to raise your voice. To the weary: we say you are not forgotten.

A nation that leaves its weakest behind cannot claim to be moral. But a Church that lifts up the poor—and demands that society do the same—can be a beacon of justice in a weary world.

Sixth Op-Ed for Clergy Care Collective

# Breaking the Silence: Why Clergy Must Speak Openly About Mental Illness

By the Rev. Matthew González, J.D., Executive Director, Clergy Care Collective

In sanctuaries across the country, sermons speak of hope, redemption, and healing. Yet too often the people delivering those sermons carry wounds they cannot name aloud. Clergy and seminarians who live with depression, anxiety, or bipolar disorder remain silent out of fear—fear of being judged, removed, or told that their faith should have "fixed" them. This silence is not only painful for those in ministry; it robs congregations of the truth that God's grace works most powerfully through human weakness.

Mental illness is not a disqualifier from ministry. It is a reality of life in a fallen world. Some of the greatest preachers, theologians, and saints bore deep emotional struggles. The psalmist's cry, "My tears have been my food day and night," is itself a testimony of despair woven into Scripture. Saint Paul confessed to having a "thorn in the flesh." And countless unnamed clergy today wrestle with depression or anxiety behind the closed doors of rectories and parsonages. When leaders hide this struggle, their silence unintentionally strengthens the stigma that mental illness is a source of shame.

The truth is that many congregants in the pews suffer quietly, too. Studies consistently show that nearly one in five adults in the United States lives with a diagnosable mental illness in any given year. When a pastor or priest stands before them pretending to be invulnerable, the message conveyed is that mental illness is something to be hidden, not healed. But when clergy speak honestly—whether from the pulpit, in a pastoral counseling session, or even in casual conversation—they grant permission for others to seek help. Transparency becomes ministry. Vulnerability becomes leadership.

This does not mean clergy should share every detail of their struggles. Boundaries and prudence matter. But acknowledging the reality—"I, too, have faced depression," or "I know what it is to live with anxiety"—can be liberating for entire communities. Such admissions can dismantle the toxic myth that faith and mental health are incompatible. They can model what it means to seek treatment, to take medication if needed, and to practice spiritual disciplines alongside therapy and medical care.

The silence is particularly crushing for seminarians. Many enter formation with zeal and devotion, only to find that a diagnosis can derail their path. Some are forced to choose between honesty and ordination. The result is a culture of concealment, where future leaders are trained to hide their wounds. This is not only cruel to the individual; it is corrosive to the Church's witness. A Church that silences its wounded leaders cannot proclaim credibly the Gospel of the Crucified One, whose own scars were not hidden but glorified.

Breaking the silence requires courage, but it also requires institutional support. Seminaries and dioceses must affirm openly that mental illness is not disqualifying. Denominations must build systems of pastoral care, counseling, and peer support for their leaders. Congregations must be taught that a pastor who admits to depression is not a weaker shepherd but a more honest one.

The late Henri Nouwen wrote of the "wounded healer"—the idea that those who have suffered are uniquely able to minister to others in suffering. Clergy who share their struggles embody this truth. Their testimony becomes an act of solidarity with every parishioner who has ever sat in the pews wondering if they were alone in their despair.

The silence has lasted too long. It is time for clergy and seminarians to speak openly, not as confessions of inadequacy but as proclamations of grace. In breaking the silence, we break the stigma. And in breaking the stigma, we bring the Church closer to its calling: to be a place of healing, honesty, and hope.

# Seventh Op-Ed for Clergy Care Collective

#### Saint Dymphna and the Stigmatized: A Patron for Our Time

By Rev. Matthew González, J.D., Executive Director, Clergy Care Collective

She was a seventh-century teenager, the daughter of a pagan Irish king, martyred by her own father when she refused his violent, incestuous demand. Her name is Dymphna—and she has become the patron saint of those suffering from mental illness. For too long, however, the Church has invoked her quietly, even awkwardly, as if her relevance were marginal. That must change.

Today, millions suffer from depression, anxiety, PTSD, bipolar disorder, and neurodivergence. Many are Christians. Some are clergy. And yet far too often, the Church continues to treat mental illness as a private shame rather than a shared concern. People are prayed over but not accompanied. Offered platitudes, but not presence. Given silence, but not sacrament. In the worst cases, they are told should they take their own life they will be committing a mortal sin.

Clergy Care Collective firmly rejects this and claims St. Dymphna as our patron—not just symbolically, but prophetically. Her story reminds us that trauma is real. That violence hides in unexpected places. And that healing—true, divine healing—comes not only through faith but through courageous truth-telling, accompaniment, and care.

We envision a Church where St. Dymphna is not just a name on a holy card, but a model for ministry. Where those suffering from mental illness are not sidelined or stigmatized but embraced as full members of the Body of Christ—with gifts to offer and stories to tell. We believe the Holy Spirit speaks through the neurodivergent, the traumatized, and the grieving. And we reject the notion that spiritual maturity requires emotional perfection.

At Clergy Care Collective, we support clergy and seminarians across denominations who live with mental illness—some diagnosed, some undiagnosed, many silently struggling. We offer support groups, theological education, and interim financial aid for those facing bureaucratic delays in accessing disability benefits. We do this because we know what it's like to be cast aside. And we believe no calling should be extinguished by shame.

Catholic Social Teaching, in which we are firmly rooted, affirms the dignity of every person. St. Dymphna embodies that dignity in defiance of unspeakable abuse. In an era when many are coming forward with stories of trauma—from clergy abuse survivors to those harmed by toxic spiritual environments—we need her intercession more than ever.

To every seminarian told not to mention their diagnosis: you are not disqualified. To every pastor hiding their depression for fear of dismissal: you are not alone. To every diocese or denominational body uncertain how to respond to clergy mental health: now is the time to learn, listen, and lead.

St. Dymphna is not a relic of the past. She is a guide for the present and a beacon for the future. The Church must no longer whisper her name. It must proclaim it.

On February 17, 2025, on the fourth anniversary of his ordination, and the 30th anniversary of the day he tried to take his own life, our Executive Director consecrated his entire ministry to St. Dymphna and her queen the Blessed Mother, knowing them each to be bona fide miracle workers.