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Sacramental Life in the Hospital Community

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An overview of the developments in Roman Catholic sacramental discipline since the Second Vatican Council should be of interest and help to all Catholics who are involved in health care. Doctors, nurses, administrators, technicians, as well as pastoral ministers in Catholic hospitals or community institutions with a significant number of Catholic patients should be aware of the new shapes of the sacraments which are emerging in this period of renewal. The seven sacraments are the vital signs in the life of the believing community; they are much more than specially solemn moments of private praver or isolated gestures of devotion or even transfusions of grace. The sacraments are expressions of the vitality, the faith and caring of the Christian gathering wherein

they are celebrated, even the small gathering around a sick bed. The way these liturgical actions are carried out must be of concern to everyone who is responsible for the quality of the community and the kind of care found within it.

Sacramental practice within the Catholic church has not been subject to as thorough an examination or as sweeping a reform since the sixteenth century; this present process of renewal is truly epochal. It was set in motion by the liturgical movement earlier in this century, authorized and advanced by the bishops at the Vatican Council, and now it is being prayerfully and painstakingly carried out all over the world. If it is to be successful it demands the understanding and participation of Catholics everywhere, particularly those in positions of leadership.

This present study examines the changes in sacramental discipline, the canonical and liturgical regulations which guide priests and people in administering and receiving these vital signs of Christ's powerful and healing presence. The sources or official documents are noted, some of the reasons for and implications of the reformed rites are given, and helpful commentaries or articles for further reflection are suggested. The amount of liturgical legislation in these few years since the Ecumenical Council is simply astonishing.¹ Only the high points or general outlines can be indicated here. Those sacramental forms often used in hospital settings or

in healing ministries are emphasized.

The process of liturgical change and pastoral adaptation is still going on and will continue into the foreseeable future. The *Code* of *Canon Law* is still in the process of revision, and a new code is not in sight. Still the lines and directions of the renewed discipline of the sacraments are clear; their appreciation and acceptance by Catholic people everywhere are of critical importance to the success of this whole church reform movement.

Another preliminary observation before looking at the seven sacraments individually: the principles of cultural adaptation and of subsidiary function, adapted at the Second Vatican Council, highlight the crucial relationship between sacraments and people.² The sacramental celebrations must be very carefully suited to this group of people, in this social and personal setting, at this moment in time. Sacramental experience must be sensitively adapted to the people and their situation. This is now possible in the new rites; many options and alternatives are provided-in solemnity. in length, in prayers and formulas. But for these possibilities to be fruitfully utilized requires conscientious planning, thorough preparation, and continual searching for improvements. If the sacraments are to be encounters with Christ, privileged moments of grace, experiences of caring and support within a community of belief, then they must be filled

with meaning for those who take part in them.

Baptism

The Second Vatican Council called for a revision of the rite of baptism to accomplish these purposes:

The rite for the baptism of infants is to be revised, and should be adapted to the circumstance that those to be baptized are, in fact, infants. The roles of parents and godparents, and also their duties, should be brought out more sharply in the rite itself.

In place of the rite called the "Order of Supplying What Was Omitted in the Baptism of an Infant," a new rite is to be drawn up which manifests more fittingly and clearly that the infant, baptized by the short rite, has already been received into the Church.

A new rite is also to be drawn up for converts who have already been validly baptized; it should indicate that they are now admitted to communion with the Church.³

On May 15, 1969, a new ritual for the baptism of children was issued.4 It affords new and enriched formulas for the celebration of infant baptism in various settings. e.g., for one or several children, within Mass or apart from it, with or without the ministry of priest or deacon, baptism in danger of death, and the "bringing to church" of a child previously baptized in danger of death. The new rites more clearly and accurately reflect the theology of baptism and of the church. They emphasize the pastoral preparation of the parents and godparents, the welcome and entry into the community of the church, the central

role of the child's parents in its Christian formation, and the fruitful celebration of the saving word of God in the context of the baptismal-ceremony. In order to stress the child's close connection with and reception into the local faith community, the place for baptism is ordinarily to be in the parish church rather than in the hospital or at home.⁵ However, there is provision for baptism in danger of death, and special attention should be given to the more meaningful but abbreviated form of the rite which is to be employed when death is not imminent or immediately feared.⁶ The united prayer, profession of faith, and supportive presence of even a hastily-summoned and modest-sized group of fellow believers in Christ adds great significance to the sacramental event. Doctors, nurses, medical social workers and others associated with health care should know how to baptize properly in emergency situations.

The appropriate time for the baptism of children is described in these terms in the new ritual:

As for the time of baptism, the first consideration is the welfare of the child, that it may not be deprived of the benefit of the sacrament; then the health of the mother must be considered, so that, as far as possible she too may be present. Then, as long as they do not interfere with the greater good of the child, there are pastoral considerations such as allowing sufficient time to prepare the parents and for planning the actual celebration to bring out its paschal character:

1) If the child is in danger of death, it is to be baptized without delay.

2) In other cases, as soon as possible and even before the child is born, the parents should be in touch with the parish priest concerning the baptism, so that proper preparation may be made for the celebration.

3) An infant should be baptized within the first weeks after birth. The conference of bishops may, for sufficiently serious pastoral reasons, determine a longer interval of time between birth and baptism.

4) When the parents are not yet prepared to profess the faith or to undertake the duty of bringing up their children as Christians, it is for the parish priest, keeping in mind whatever regulations may have been laid down by the conference of bishops, to determine the time for the baptism of infants.⁷

This pastoral judgment to be made about the appropriate time for the baptism of the children of non-practicing or insincere parents-those who are apparently not committed to rearing the children in the faith-is a most delicate and widely discussed matter. A private response from the Congregation for the Doctrine of the Faith directs the priest to defer the baptism of a child whose parents give inadequate assurances of their intention to provide a Catholic education for it. The priest is to register the child in view of baptism to be administered at a later date, and maintain contact with the parents.8

The bishops of Switzerland recently provided guidelines for such situations and the closely related circumstance in which the parents desire to defer baptism until the child is able to make a personal decision.

In the thought of the Church, the order to baptize given by Jesus (Mt. 28, 16-20) binds also for children. The Church considers baptism received as soon as possible as a gift from God. However, this presupposes that the parents fulfill this act in faith in full consciousness of their responsibilities. They must be helped to arrive, through adequate preparation, at a conviction and an authentic celebration of baptism.

The Synod recognizes the various situations in which families find themselves. It knows that the baptism of a child requires the assent of the parents. This assent likewise includes the fact that they are disposed, in Christian responsibility, to educate their children according to the response of faith required by baptism.

When believing parents wish to defer baptism until their child is able to make a personal decision of faith, such an attitude will certainly not be recommended, but it will be respected. In such cases, a rite of reception could be envisaged.⁹

The new rite of initiation for adult Christians revives the formal stages of the catechumenate and carefully outlines the phases of entry into the Catholic communion.10 The three steps or grades are: 1) the entry into the catechumenate with reception and inscription, then, 2) after an extended period of instruction, reflection, and prayer, the "election" or selection on the part of the community, usually on the first Sunday of Lent, marking the beginning of an intense period of purification and enlightenment before sacramental admission. and 3) the actual reception of the sacraments of initiation, viz., baptism, confirmation, and eucharist. These measured and studied stages are protracted over some considerable time, even several years, but there is also provision for an abbreviated form for the admission of adults in danger of death or at the point of death.11 These shorter and simpler ceremonies, led by a priest, deacon, catechist or lay person, are flexible enough to be adapted to the condition of the sick person, and yet rich with meaning and suitable solemnity.

A procedure is provided to prepare for confirmation and eucharist those who were baptized in the Church as infants but never instructed in the faith.12 Another feature of the ritual for the initiation of adults is a rite for the admission into the full communion of the Catholic church of those who have been validly baptized in "a separated ecclesial community."13 This ceremony centers upon a profession of faith and the reception of the eucharist, and is ordinarily to take place within Mass. It is described and to be administered with great ecumenical sensitivity and tact.

Earlier changes of both ecumenical and pastoral importance refer to the previously routine practice of conditional re-baptism of converts from other Christian churches, and to those who are qualified to act as sponsors or godparents. Indiscriminate conditional Baptism of all who desire full communion with the Catholic Church cannot be approved. The sacrament of Baptism cannot be repeated and therefore to baptize again conditionally is not allowed unless there is prudent doubt of the fact, or of the validity, of a Baptism already administered.¹⁴

There is a strong presumption in favor of the validity of the baptism performed within the principal Protestant churches (and no doubt at all about Orthodox baptism). Only when, after serious investigation, reasonable doubt remains about the proper administration of this original baptism, can the sacrament be celebrated conditionally.¹⁵ And then it is to be performed in a private manner and accompanied by careful explanation.

A non-Catholic Christian may be invited to serve as a godparent or Christian witness at a Catholic baptism along with another godparent who is a Catholic.16 This ecumenical advance is a symbol of the unity of faith in Christ. However, one sponsor or godparent at least must be a member of the Catholic communion in order to profess the church's faith at the baptism (or to testify to the candidate's faith in the case of an adult) and assume the responsibility for the education in the faith of the baptized child in the event the parents should be unable to do so.

Finally, regarding the minister of baptism, it should be noted that a deacon is now an ordinary minister of baptism (along with bishops and priests).17 Catechists may administer the sacrament (using the special forms of the rite provided for the purposes) when no ordinary minister is available. Religious men and women may also be authorized to baptize (using the rite for catechists) in similar circumstances if the bishop obtains an indult permitting it. In danger of death, of course, when no ordinary minister is available, any member of the faithful or any person with the right intention may baptize.18

Confirmation

The Fathers of Vatican II called for a renewal of the rite of confirmation also,19 and on August 22, 1971, a new Ordo was issued for the celebration of this sacrament of initiation.20 Pope Paul's Apostolic Constitution. which preceded the Ordo by a week,²¹ centers on the meaning of the sacrament, its variant historical forms, and a new determination of the "matter" and "form" of confirmation in the Latin Church: "The sacrament of confirmation is conferred by anointing the forehead with chrism, by means of the imposition of the hand, and by the words, 'Receive the seal of the gift of the Holy Spirit'."22

The sacrament is described as a part of the whole rite of Christian initiation (and, in the case of adults or of children who are in danger of death, it is to be administered immediately after baptism), but also speaks of confirmation as a special sign of the gift of the Spirit and of growth, strength, maturity, and advance in faith and charity.²³

The introductory instruction to the Rite of Confirmation stresses the role of the community into which the baptized person is confirmed. The people of God have the responsibility to prepare and form the candidate through catechesis, to celebrate the festive occasion of the confirmation (normally within Mass so as to link it closely with the Eucharist, the final sacrament of initiation), and to lend continual support, encouragement, and example to the one confirmed.24 Even when administered in danger of death or in emergency situations, the preparatory catechesis and support of the surrounding community of faith are to be provided to whatever extent possible.25

The sponsor at confirmation, who is now preferably the same person as the godparent at baptism, is to present the candidate and later to assist the confirmed to faithfully fulfill his/her commitments in the Spirit.²⁶

The ordinary minister of confirmation is a bishop, but the new rite gives the faculty to many other priests to either administer the sacrament in place of a bishop or along with a bishop in the same ceremony. Apostolic administrators, vicars and prefects apostolic, etc., who are assigned to a given territory, may confirm, as well as those priests (e.g., pastors) who by virtue of their office can baptize adults or admit baptized adults (converts) into full communion with the church. In danger of death, pastors, administrators, substitutes and assistants may administer confirmation, and in their absence, any priest not under censure.27 Hospital chaplains can confirm if they have pastoral prerogatives, or if they have been granted an indult. or in danger of death when the other parish priests are not available. This expansion of faculties for priests expresses the church's concern to make this sacrament of initiation and strengthening in the Spirit available to all the baptized.

When there are a large number of people to be confirmed (or for other reasons) the chief minister may be assisted by others in administering the sacrament: either those with a diocesan or regional office, the local pastor or pastors of the candidates, or priests who have assisted in the preparation of the candidates.²⁸ This sharing of the ministerial function permits the ceremony to be short enough to fit comfortably into the eucharistic setting.

Eucharist

The rites of Christian initiation culminate in the celebration of the Body and Blood of Christ. The eucharist is the central and principal action of the Church's worship. As such, it received first attention in the conciliar and post-conciliar renewal of liturgy. A profusion of legislation and instruction has issued in the ten years since the epochal Constitution on the Sacred Liturgy.²⁰ Many of these "changes in the Mass" are well known to practicing Catholics. Most have been welcomed as improvements; much remains to be done to further perfect the celebrations of this central mystery of Christ and of the church. Here we set aside this huge and crucial issue of eucharistic renewal and its disciplinary guidelines, and simply remark on a few relatively minor but significant developments which could have important effects on Mass and communion in hospital settings.

1) Active participation of the faithful, both representatively in various ministerial roles and directly through the congregational responses, songs, gestures, etc., is a central principle of all liturgical renewal.³⁰ It is to be urged and fostered in every form of eucharistic celebration or administration of holy communion.

2) The eucharist may be celebrated outside of churches and chapels;³¹ it may take place, for example, in houses, hospital units, auditoria, dining rooms, recreation areas, etc., wherever surroundings are suitable and decorum can be maintained.

3) "The sign of communion is more complete when given under both kinds, since in that form the sign of the eucharistic meal appears more clearly." Masses celebrated in the home when viaticum is administered is one of the many specific instances when communion under both species is permitted. Various forms of administration are provided.³²

4) The eucharistic fast from

solid food and drink, excepting water, is reduced to about a quarter of an hour for the sick, the elderly who are confined, and persons who care for or are related to the ill or elderly and who wish to receive communion with them.³³

5) Communion may be received more than once on the same day by relatives and friends of the sick person when viaticum is administered.³⁴

6) Communion may be administered by extraordinary ministers, suitable men or women properly appointed, especially in order to make holy communion more readily available to the sick.³⁵ This important change should be of great assistance in hospital ministry.

7) Special adaptations may be made for Masses with children. This includes those situations when there are also many adults present. Simplification, clarity and flexibility are some of the values presented in order to make the eucharist meaningful to the young.³⁶

8) Sharing eucharistic communion with those not fully in communion with the Roman Catholic church is generally not permitted because the unity of the churches for which we long has not yet been completely achieved. Still there are circumstances when holy communion can be administered to our separated brothers and sisters, and danger of death or grave spiritual need coupled with lack of access to a minister of their own communion are among them.³⁷ 9) Women may exercise various liturgical ministries at Mass including those of reader, cantor, leader of singing, commentator, and leader of participation. These important functions may be performed either within or outside the sanctuary depending upon convenience.³⁸

10) Communion is to be distributed by placing the consecrated bread on the tongue of the communicant. "Communion in the hand" may be permitted by national bishops' conferences,³⁹ but the U.S. bishops have not yet given approval for this alternate form. The practice, which has been approved in many other nations and will most likely be allowed here as well before much longer, is encountered in many places today.⁴⁰

Penance

Reconciliation of man to God was at the heart of the mission of Christ. Reconciling men with and among themselves and thereby to the Father is a central work of the church. The Sacrament of penance is a privileged form of the reconciliatory function of the church, and it has been revised only recently. The new *Rite of Penance* was issued on December 2, 1973, and the English translation is now awaiting approval.⁴¹

This reorganization of the sacrament provides distinct rites for reconciling individual penitents, for reconciliation of several penitents with individual confession and absolution, and for the reconciliation of penitents with general confession and absolution. The *Ordo* also contains instructions for penitential celebrations and provision for local adaptations by the national conference, e.g., omission or enlargement of some of the parts of the ritual, selection of readings and prayers, choice of suitable place for celebrating the sacrament.

The outline of the rite for reconciling individual penitents is: 1) prayerful preparation by both priest and penitent; 2) a charitable welcome and introductory greeting; 3) a reading from holy scripture; 4) confession of sins, admonition, and assignment of penance; 5) a prayer for pardon and absolution (customary formulation accompanied by the extension of hands over penitent's head and a sign of the cross); 6) a proclamation of praise and dismissal of the penitent in peace.⁴² A shorter rite is provided for circumstances when pastoral needs demand it, and the usual form is retained when there is danger of death.43 A special form for celebrating the sacrament for the sick is suggested in an appendix. to the Ordo.44

The discipline of general absolution is the same as that outlined in the "Pastoral norms" of June 16, 1972.⁴⁵ It is presented as an extraordinary form of sacramental absolution which is very carefully circumscribed by limiting conditions and special authorization. In part, it is presented this way: Particular and occasional circumstances may render it lawful and even necessary to give absolution in a general manner to a number of penitents without their previous individual confession.

Besides cases involving danger of death, it is lawful to give sacramental absolution to several faithful at the same time, after they have made only a generic confession but are suitably moved to repentance, if there is grave need, namely when, in view of the number of penitents, sufficient confessors are not available to hear individual confessions within a suitable period of time, so that the penitents would, through no fault of their own, have to remain for a long time without sacramental grace or holy communion.

The judgment concerning the presence of the above conditions and the decision concerning the lawfulness of giving general sacramental absolution is reserved to the bishop of the diocese, who is to take counsel with the other members of the episcopal conference.

Besides the cases determined by the diocesan bishop, if any other serious need arises for giving sacramental absolution to several persons together, the priest must have recourse to the local ordinary beforehand, when this is possible, if he is to give absolution licitly. Otherwise, he should inform the Ordinary as soon as possible of the need and of the absolution which he gave.⁴⁶

This major revision of the sacrament of penance obviously envisions a more personal and less perfunctory encounter between minister and penitent; it stresses the ecclesial nature of the sacrament, and focuses on the central role of the saving word of God.

Its successful implementation in parish and hospital settings will call forth the best in pastoral reflection and creativity.⁴⁷

Two further items related to the sacrament of penance deserve mention. The canonical provisions regarding special confessors for religious men and women were suspended and partially replaced by a decree of the Congregation for Religious.48 No special jurisdication is needed by the priest for these penitents, and religious women may go to confession to any priest who has faculties to hear confessions. Ordinary and extraordinary confessors are to be supplied to some religion houses, e.g., contemplative monasteries, houses of formation, larger communities, or those which request an assigned confessor, after consultation with the community concerned. Religious are urged to go to confession frequently (the decree suggests twice a month), and their superiors are admonished to foster this practice and make it readily possible.

The lively controversy over whether or not children must go to confession before first receiving holy communion has simmered down, and pastoral practice remains diverse. A declaration from the Congregations of Sacraments and Clergy in 1973 called for a halt to the experimental practice of allowing children to receive first communion without going to confession.⁴⁹ The American bishops requested that the experiment be extended, but their petition was denied. Various accommodations have been worked out in American diocese; penance is not to be denied to children who desire or request it, but the obligation to receive penance does not exist when there is no consciousness of serious sin.⁵⁰

Anointing of the Sick

By the sacred anointing of the sick and the prayer of her priests, the whole Church commends those who are ill to the suffering and glorified Lord, asking that He may lighten their suffering and save them (cf. Jas. 5:14-16). She exhorts them, moreover, to contribute to the welfare of the whole People of God by associating themselves freely with the passion and death of Christ (cf. Rom. 8:17; Col. 1:24; 2 Tim. 2:11-12; 1 Pet. 4:13).⁵¹

This sacrament of healing stands at the heart of the church's mission of healing and is the central focus of pastoral ministry to the sick. The revisions of the rite, which were called for by the Second Vatican Council, have recently been accomplished, and they represent a very healthy and welcome sacramental development.⁵² Not only parish priests and hospital chaplains, but all who are involved in health care should carefully examine and apply these revised and improved rites.34 The sacrament of healing is placed quite properly within the context of Christian ministry to those who are ill.

Perhaps the most important feature of the revised rites is their clear orientation toward the sick —anyone afflicted with serious illness—whether he is in danger of death or not. This new direction, in which the care, solace, support, and powerful prayer of the believing community are brought to bear on the sick brother or sister, are expressed in the key section of the papal document:

The sacrament of the anointing of the sick is administered to those who are dangerously ill, by anointing them on the forehead and hands with olive oil or, if opportune, with another properly blessed vegetable oil and saying once only the following words: "Through this holy anointing and his great love for you. may the Lord help you by the power of his Holy Spirit. May the Lord who freed you from sin heal you and extend his saving grace to you."

In case of necessity, however, it is sufficient that a single anointing be given on the forehead or, because of the particular condition of the sick person, on another more suitable part of the body, the whole formula being pronounced.

This sacrament can be repeated if the sick person, having received the anointing, recovers and then again falls ill or if, in the course of the same illness, the danger becomes more serious.⁵⁴

The emphasis is shifted from the forgiveness of sins committed through the various senses to help and healing for the person who is sick and suffering.

The sacrament should be celebrated at the earliest moment, as soon as possible after the onset of the serious illness.⁵⁵ The rite is to be understood and shared in by the sick person and celebrated with the active participation of friends and family. It is an action of the community of faith, not a quick, private, mechanistic gesture. The focus is on the healing which is associated with the prayer and anointing by the elders of the church in the Epistle of James.

Anointing can be given before surgery, to elderly people weakened in health, and to children of an age to appreciate it. It is not to be administered to one who is surely dead. Vegetable oils may be used for the anointing as well as olive oil, and, if necessary, the priest can bless the oil.⁵⁶ Several optional formulas are provided in the rite so that it may be readily adapted to the circumstances of the individual.

In addition to the sacramental rites of anointing, the ritual contains sections on visiting the sick, taking communion to the sick, administering viaticum, administering the sacraments of penance, anointing, and eucharist to one who is near death, and other important pastoral guides for ministering to the sick and to the dying. The whole document, the theology and Christian compassion which it embodies, and the rich liturgical actions and prayers which it contains, deserve the most serious study and planned implementation.57

Orders

The ceremonies and texts of the ordination rites have been revised since the Ecumenical Council in response to the mandate of the Council Fathers.⁵⁸ However, more important for the hospital or medical apostolate, are the revisions in the very structures of the church's ministries. Certain ministries have been virtually abolished, e.g., the minor orders of exorcist and porter and the subdiaconate, and others reconstituted or reorganized, e.g., the ministries of reader and acolyte and the permanent diaconate.⁵⁹ Two developments should be pointed out in particular: the functions of the permanent deacon and the possibility of new lay ministries.

To the permanent deacon have been assigned a variety of possible duties ranging from the distribution of communion, the administration of viaticum, the instruction of the faithful, and presiding at worship, to works charity and ecclesiastical administration.60 This spectrum of appropriate functions enables the deacon to be a very valuable hospital minister. Equipped with the necessary skills for this specialized ministry he could be perfectly suitable either alone or as a member of a pastoral team in a healing apostolate.

New ministries can be requested by episcopal conferences if they judge them to be necessary or useful in their territories.⁶¹ The American hierarchy has already asked for the establishment of the lay minister of catechist and minister of music.⁶² A similar ministry, with suitable rite of liturgical institution, could be requested for hospital ministers if this would be judged helpful.

Matrimony

The Constitution on the Sacred Liturgy asked that the marriage rite "be revised and enriched in a way which more clearly expresses the grace of the sacrament and the duties of the spouses."63 This new rite was issued in 1969, and has been in use for some time.64 More basically, the vision of Christian marriage held up by the Pastoral Constitution on the Church in the Modern World has added impetus to the discussion about the nature and qualities of this unique sacrament.65 Not only is a new theological understanding of marriage in Christ beginning to emerge, but juridical effects are beginning to be felt in the decisions of the church's matrimonial tribunals.66 Whole categories of causes of nullity are developing based on a person's immaturity, inability to assume such a responsibility as marriage, lack of conjugal love, failure to comprehend or carry out matrimonial obligations, or to live in a lasting and compatible relationship with a given other person for psychological reasons. These various "defects of consent" in one way or another are seen to fall short of the commitment to a community of life and love which Christian marriage is meant to be. The canonical developments are rapid and major.

Procedures employed in ecclesiastical tribunals have been greatly streamlined in recent years, and this too is having a profound effect on the volume of decisions being issued on the validity of marriages.⁶⁷

The discipline for "mixed marriage," i.e., between a Catholic and a non-Catholic, has been notably reorganized under the ecumenical influence of the Vatican Council.68 While a fundamentally negative attitude toward such unions continues to prevail in the legislation, still the conditions have been much mitigated, e.g., the milder form of the "promises" regarding the faith of the Catholic partner and children to be born, the ready dispensation from the canonical form, which normally requires the presence of a priest and two witnesses, and the abrogation of penalties previously threatened for violations.

The admission to the sacraments of those living in canonically invalid marriages has been the subject of considerable discussion in recent years.6" When a present marriage cannot be validated in the church because of a previous union which was not demonstrably null and cannot be dissolved (e.g., by means of a "Pauline privilege" or a "favor of the faith" decree), and the parties to the present marriage are in good faith, show evidence of genuine Christian striving, are rearing their children in the faith, good pastoral practice permits them to be re-admitted to the sacraments of penance and eucharist. "Scandal" or any denigration of the permanence of Christian marriage must be precluded, of course, and great discretion and prudence is required on the part of the pastor or ministering priest. This significant development in pastoral practice, sometimes called the "good faith" or "internal forum" solution, is still open to debate, but it is well grounded and apparently growing.

Godfrey Diekmann recently defined sacraments as "the chief Christ-derived visible signs by which he continues to send us his Spirit for the upbuilding of the Church into a community of faith and love, to the glory of the Father."⁷⁰ If this description is accurate, then the sacramental life of any community, any segment or part of the church, is as crucial as heart function is to the human body. It must be a matter of first concern.

To celebrate the sacraments well in the straitened circumstances often encountered when ministering to the sick or dying requires even greater than usual pastoral skill and effort.71 Often in hospitals there are intense pressures of time, cramped quarters, emotional upset, busy medical personnel, and a patient beset and indisposed by the effects of illness, injury, medication or therapy. Such conditions sometimes demand attenuated and hasty sacramental ministrations. But even in the most difficult circumstances honesty of sign, maximum meaning, and prayerful performance must be maintained. Like the practice of medicine in a field hospital or in emergency situations, more is demanded of those doing the ministering, rath-

er than less, if the sacraments are to be salutary.

This admittedly incomplete overview of the changes in the discipline of the sacraments is intended to alert those in health care communities to the progress and direction of liturgical renewal. It is the author's earnest hope that the medical and pastoral personnel responsible for religious practice in these institutions will not only be aware of these new sacramental postures and possibilities, but will actively assist, promote, and revitalize their celebration.

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8. Notitiae 7(1971)64-73.

9. La Documentation Catholique 71(1974)490 (translation of F. Morrisey in paper cited above, p. 5); cf.. action of the National Conference of Catholic Bishops, Nov. 10-14, 1969, Jurist 30(1970)233.

10. Ordo Initiationis Christianae Adultorum (Vatican: Polyglot Press. 1972); Rite of Christian Initiation of Adults (Provisional Text), (Washington: USCC, 1974), Introduction, 6-40. Cf., A. Kavanagh, "The Norm of Baptism: The New Rite of Christian Initiation of Adults," Worship 48(1974) 143-52, and, idem. "Christian Initiation of Adults: The Rites," Worship 48 (1974)318-335, Father Kavanagh opines that "this document may well appear to a writer a century from now as the most important result of the Second Vatican Council for the life of the church." (Ibid., p. 335.) He points out one of the important underlying values of the revision: "The previous separateness of the several sacraments (of initiation) has been compromised in a salutary manner by norms which regard the sacraments as closely articulated phases of a whole people's continuing life together in faith. Less do these same norms present the sacraments as discrete events geared to phases in an individual's life than as stages in the process of ecclesial living together under the aegis of Jesus Christ dying and rising continually among his faithful ones." (Ibid., p. 319.)

N. Mitchell provides a good historical background in "Christian Initiation: Decline and Dismemberment." Worship 48(1974)458-79, and R. Keifer offers a dour judgment on the church's ability to profit from these new rites in "Christian Initiation: The State of the Question," Worship 48 (1974)392-404.

11. Rite of Christian Initiation of Adults, 278-94.

12. Ibid., 295-305.

13. "Ordo Admissionis Valide Iam Baptizatorum In Plenam Communionem Ecclesiae Catholicae," Ordo Initiatiaonis, Appendix, nos. 1-31.

14. Directory for the Application of the Decisions of the Second Ecumeni-

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cal Council of the Vatican Concerning Ecumenical Matters, Secretariat for Promoting Christian Unity, May 14, 1967 (Washington: USCC, 1967), no. 14, A.A.S., 59 (1967) 574-92,

15. *Ibid.*, 9-18. No longer is there any need to absolve from censures or to exact an abjuration of heresy. Nos. 19-20.

16. *Ibid.*, 48 and 57. Note the significant difference between Orthodox and Protestants in this regard.

17. General Norms for Restoring the Permanent Diaconate in the Latin Church, Paul VI, June 18, 1967 (Washington: USCC, 1967); Sacrum Diaconatus Ordinem, A.A.S., 59(1967) 697-704, no. 22.

18. Rite of Baptism for Children. General Introduction, 16. The practice of indiscriminately baptizing the recently deceased, e.g., accident victims, or those who are unconscious and about whom nothing is known should not be recommended.

19. S.C., 71.

20. Ordo Confirmationis (Vatican: Polyglot Press, 1973); Rite of Confirmation (Washington: NCCB, 1972).

21. Divinae consortium naturae, A.A.S., 63(1971)657-64.

22. In the American provisional text the form is rendered: "Receive the seal of the Holy Spirit, the gift of the Father." A response from the Commission for Interpreting the Decrees of the Second Vatican Council, June 9, 1972, stated that the gesture of anointing expresses the laying on of hands; there is no need for a separate imposition of hands. A.A.S., 64(1972)526.

23. N. Mitchell, art. cit., and A. Kavanagh, "Initiation: Baptism and Confirmation," Worship 46(1972)262-76, give the history and problem of the separation of the sacraments of initiation. Three brief and valuable reflections on confirmation by Massey Shepherd, Joseph Powers, and Charles Buswell are found in Worship 46 (1972) 15-34.

24. Rite of Confirmation, Introduction, 3-4.

25. Ibid., 12, 52-3.

26. Ibid., 5-6.

27. Ibid., 7. A review of previous legislation on this matter can be found in *Canon Law Digest*, II, 185-8, III, 303-14, IV, 253-6, and V, 411-3.

28. Rite of Confirmation, 8.

29. S.C., 47-58. Shortly after the promulgation of the conciliar text, a Motu Proprio, Sacram Liturgiam, was issued (Jan. 25, 1964; A.A.S. 56[1964] 139-44). Then followed three instructions on implementing the conciliar Constitution: Inter Oecumenici (Sept. 26, 1964; A.A.S. 56[1964]877-900). Tres abhinc annos (May 4, 1967; A.A.S. 59[1967]442-8), and Liturgicae instaurationes (Sept. 5, 1970; A.A.S. 62[1970]692-704). An Instruction on Eucharistic Worship (Eucharisticum mysterium; A.A.S. 59[1967]550-64) was issued by the Congregation of Rites on May 25, 1967. In addition to these, the principal sources for the discipline of eucharistic celebration are found in the Lectionary (approved May 25, 1969) and the Roman Missal (approved March 26, 1970). The pertinent documents are listed in the USCC leaflet and the article by F. Morrisey cited in footnote 1. Notitiae is the best official source.

30. S.C., 26-32, 48-50; Roman Missal, General Instruction, Chap. I, 2-4, et passim.

31. Ibid., Chap. IV, 253, 260, 265; Instruction on Masses for Special Groups, Congregation for Divine Worship, May 15, 1969 (Actio pastoralis, A.A.S. 61[1969]806-11) cf. nos. 3-4.

32. Roman Missal, General Instruction, Chap. IV, 240-252.

33. Roman Ritual, Communion outside of Mass, no. 24. De sacra communione et de cultu mysterii eucharistici extra missam, Cong. for Divine Worship, Jan. 21, 1973. Notitiae 9 (1973) 306-33.

34. Instruction on Facilitating Sacramental Communion in Particular Circumstances, Cong. for Discipline of Sacraments, Jan. 29, 1973 (Immensae caritatis: A.A.S. 67[1973]264-71)II. Consult the Study Text prepared by the Bishops' Committee on the Liturgy, Holy Communion (Washington: USCC, 1973),

35. Immensae caritatis, II; Roman Ritual, Communion outside of Mass, 17.

36. Directory for Masses with Children, Cong. for Divine Worship, Nov. 1, 1973 (Directorium de Missis cum Pueris; A.A.S. 66[1974]30-46). Confer A. Tegels, "Chronicle," Worship 48 (1974)367-71.

37. Directory for Ecumenical Matters, May 14, 1967, nos. 39-45, 55; Instruction on Admitting Other Christians to Eucharistic Communion in the Catholic Church, Secretariat for Promoting Christian Unity, June 1. 1972 (A.A.S. 64[1972]518-25); a communication interpreting the 1972 Instruction was issued by the Secretariat on Oct. 17, 1973 (A.A.S. 65[1973] 616-9).

38. Roman Missal, General Instruction, 65-73, and the adaptations made for the U.S. by the NCCB, Appendix, 66.

 Roman Ritual, Communion outside of Mass, 21; Notitiae 9(1973)314.

40. F. McManus, "Liturgical Law and Difficult Cases," Worship 48 (1974) 347-66.

41. S.C., 72; Ordo Paenitentiae (Vatican: Polyglot Press, 1974).

42. Ordo, Praenotanda, 15-20.

43. Ibid., 21.

44. Ibid., Appendix II, 63-73.

45. Pastoral Norms Concerning the Administration of General Sacramental Absolution, Cong. of Doctrine of Faith, (Sacramentum Paenitentiae, A.A.S. 63[1972]510-14). Ordo, 31-35. 46. Ibid., 31-2.

47. These articles should be of help: J. Gallen, "A Pastoral-Liturgical View of Penance Today," *Worship* 45(1971) 132-50; C. Peter, "The New Norms for Communal Penance: Will They Help?", *Worship* 47(1973)2-10; G. Coless, "The Sacrament of Penance: Creative Ferment," *Worship* 47(1973) 463-72; A. Tegels, "Chronicle," Worship 48(1974)242-6; R. Duffy, "Concelebration of Penance and a Therapeutic Model," Worship 48(1974)258-69.

48. Canons 518-28, and 876; Dum canonicarum legum, Dec. 8, 1970 (A.A.S. 63[1971]318-19).

49. A.A.S. 65(1973)410. The declaration draws attention to Addendum 5 to the General Catechetical Directory issued by the Cong. for Clergy in 1971 (Washington: USCC, 1971, pp. 98-102; A.A.S. 64[1972]173-6) which in turn is based on the 1910 decree Quam Singulari (A.A.S. 2[1910]583).

50. Origins 3(1973-4)137-9, 157-60, 204-8, 489-95. See "First Confession— First Communion," National Center for Religious Education, *Living Light* 10(1973)578-608.

51. Dogmatic Constitution on the Church, Lumen Gentium, 11.

52. S.C., 73-5; The Rite of Anointing and Pastoral Care of the Sick was approved in the Apostolic Constitution Sacram Unctionem Infirmorum, Nov. 30, 1972 (A.A.S. 65[1973]5-9) and the decree accompanying the new rite was Infirmis cum Ecclesia, Dec. 7, 1972 (A.A.S. 65[1973]275-6). Notitiae 9 (1973)51-69.

53. A Study Text, Anointing and Pastoral Care of the Sick issued by the Bishops' Committee on the Liturgy (Washington: USCC, 1973) is highly recommended.

54. A.A.S. 65(1973)8-9; translation from the Study Text.

55. Rite of Anointing and Pastoral Care of the Sick (Collegeville: Liturgical Press, 1974), Introduction, 8.

56. Ibid., 10-12, 15, 20-1.

57. Of assistance in this task will be: C. Gusmer, "I Was Sick and You Visited Me: The Revised Rites for the Sick," Worship 48(1974)516-25; idem, "Liturgical Traditions of Christian IIIness: Rites of the Sick," Worship 46 (1972)528-43; T. Talley, "Healing: Sacrament or Charism?", Worship 46 (1972)518-27; the Study Text mentioned above and the bibliography it provides. 58. S.C., 76; Apostolic Constitution Pontificalis Romani, June 18, 1968, Notitiae 4(1968)209-19, and the decree of the Cong. for Divine Worship, Ministeriorum Disciplina, Dec. 3, 1972, A.A.S. 65(1972)274-5.

59. Lumen Gentium, 29; Motu Proprio Sacrum Diaconatus Ordinem, June 18, 1967 (A.A.S. 59[1967]697-704); Apostolic Letters, Ministeria Quaedam and Ad pascendum, Aug. 15, 1972 (A.A.S. 64[1972]529-40).

60. Sacrum Diaconatus Ordinem, 22: Permanent Deacons in the United States, Guidelines on Their Formation and Ministry (Washington: USCC, 1971), 16-25.

61. Ministeria Quaedam; Study Text, Ministries in the Church, Bishops' Committee on the Liturgy (Washington: USCC, 1974), 4-5.

62. Jurist 34(1974)195-6.

63. S.C., 77-8.

64. Cong. of Rites, Ordo Celebrandi Matrimonium, March 19, 1969, Notitiae 5(1969)203-220.

65. Gaudium et Spes, 47-52.

66. For example, see W. LaDue, "Conjugal Love and the Juridical Structure of Christian Marriage," Jurist 34(1974)36-67; C. Murtagh, "The Juridical Importance of Amor Conjugalis," Jurist 33(1973)377-83.

67. Apostolic Letter Causas Matrimoniales issued motu proprio on March 28, 1971, effective from Oct. 1, 1971, until the new Code of Canon Law is promulgated (A.A.S. 63[1971] 441-6); "Norms for Expediting Marriage Cases," Jurist 31(1971)668-72.

For use in the United States a set of "Procedural Norms for Matrimonial Cases," Jurist 30(1970)363-8, were issued by indult, renewed for one year on July 1, 1973, and again renewed on May 22, 1974, until such time as new procedural law is promulgated for the Latin church.

68. Apostolic Letter Matrimonia Mixta, March 31, 1970 (A.A.S. 62 [1970]257-63); Norms for Mixed Marriages (Washington: NCCB, 1970); Statement on the Implementation of the Apostolic Letter on Mixed Marriages, Jan. 1, 1971 (Washington: NCCB, 1971).

69. R. Carey, "The Good Faith Solution," Jurist 29(1969)428-38; the five articles on the subject by Orsy, Huizing, Haring, Kosnik, Farley and Reich in Jurist 30(1970)1-74; "Internal Forum Solutions," a letter from the Cong. for the Doctrine of the Faith, April 11, 1973, Jurist 33(1973) 304; A Coyle and D. Bonner, The Church Under Tension (N.Y.: Catholic Book, 1972), 76-96; "The Problem of Second Marriages," a committee report, Proceedings of the Catholic Theological Society of America, 27 (1972) 233-40.

70. "The Laying On of Hands: The Basic Sacramental Rite," *Proceedings* of the Catholic Theological Society of America, 29(1974)351.

71. Many helpful suggestions about this special form of pastoral care are found in R. Karl, "Pastoral Visitation of the Sick," *Pastoral Care of the Sick*, ed. by Nat. Assn. of Catholic Chaplains (Washington: USCC, 1974) 31-38, and in other chapters of this handbook.