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Sacraments and the Pandemic

By Marie Hilliard

Pandemic and the Right to the Sacraments

Catholics may become more aware of the need for the sacraments when they become unavailable. Access to the sacraments is a right of the faithful “who seek them at appropriate times, are properly disposed, and are not prohibited by law from receiving them.”¹ The local bishops, working with public health authorities, have been reviewing the issue of what constitutes “appropriate times” during this pandemic, with emphasis on protecting the individual parishioner, the congregation, the general public, and the ministers of the sacraments. As pastors of souls, they are making determinations such as restricting access to public Masses.

Loved ones may not have access to their ill family members at such a vulnerable time. Even when requesting sacraments for their dying loved ones, there is no guarantee that clergy will have direct access to the dying. Family also need the solace of the ministry of the Church, especially in knowing that their loved ones received the sacraments before death. Thus, at many levels, the hunger for the sacraments continues. But access to grace abounds.

Certain facts and considerations related to the sacraments are to be reviewed by the local diocesan bishop when discerning how to ensure that the sacraments are available during these extraordinary circumstances. Perhaps the most urgent matter is access to the sacraments of Penance and Anointing of the Sick as well as to the Apostolic pardon. (The Apostolic pardon is a plenary indulgence remitting all temporal punishment for sin. It is given to those facing death, usually after the Anointing of the Sick.) Special attention also must be given to the provision of Baptism, Confirmation, and the Eucharist. Considering these challenges, the Apostolic Penitentiary recently

¹Canon Law Society of America, *Code of Canon Law: Latin-English Editing* (Washington, DC: CLSA, 1999), cann. 213, 843 §1. Subsequent references given in text.



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issued provisions for special indulgences and addressed collective, or general, absolution during the COVID-19 pandemic.

Penance and Reconciliation

There is no more applicable canon than 978 §1: “In hearing confessions the priest is to remember that he is equally a judge and a physician and has been established by God as a minister of divine justice and mercy, so that he has regard for the divine honor and the salvation of souls.” Canon law dictates not just who can forgive sins, but also the place for it to occur: “The proper place to hear sacramental confessions is a church or oratory. The conference of bishops is to establish norms regarding the confessional; it is to take care, however, that there are always confessionals with a fixed grate between the penitent and the confessor in an open place so that the faithful who wish to can use them freely. Confessions are not to be heard outside a confessional without a just cause” (can. 964 §§1–2; see also can. 967 §§1–3).

Penance and Social Distancing

The pandemic clearly would equate to a just cause for confessions to be heard outside of a confessional. Social distancing and even quarantine are necessary to protect not only the priest but also the penitents. A number of priests have developed creative ways to respect confidentiality, the sacrament, and the health of all involved. Some priests have engaged in outdoor “parking lot” confessions in which the penitent sits in the car (of course, only one person per car), and the priest sits at a prescribed distance from the car window, with a confessional screen placed so the identity of the penitent is protected. Traffic control agents are placed to ensure proper distance between cars. Some diocesan bishops have prohibited this, and of course the permission of one’s local diocesan bishop should be sought before pursuing this strategy. The local health department also should be contacted, for example, with questions about the danger of droplet contagion due to the manner in which confessions are heard. The Church’s Apostolic Penitentiary has identified prudential measures for celebrating Penance, including “the celebration in a ventilated place outside

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the confessional, the adoption of a suitable distance, the use of protective masks, without prejudice to absolute attention to the safeguarding of the sacramental seal and the necessary discretion.”²

But what about vulnerable individuals who are unable to travel: those in hospitals, hospices, or nursing homes without a Catholic chaplain? Creative alternatives are proposed. In cases of grave necessity, the diocesan bishop may determine that it is lawful to impart general absolution, as described by the Apostolic Penitentiary, “for example, at the entrance to hospital wards, where the infected faithful in danger of death are hospitalised, using as far as possible and with the appropriate precautions the means of amplifying the voice so that absolution may be heard.”³ One priest indicated that his local bishop has approved his use of a bull horn outside of a nursing home to impart general absolution. Perhaps with the permission of the diocesan bishop, this could even be followed by the Apostolic pardon.

General Absolution

While individual confession is the ordinary way of celebrating the sacrament of Penance (can. 960), general absolution can be imparted under certain circumstance. The first scenario is when there is an imminent danger of death, and there is insufficient time for the priest or priests to hear the confessions of the individual penitents. The second scenario is when there is grave necessity—that is, when there are not enough confessors available to hear the confessions of the number of individuals, and thus persons will be deprived of the sacrament for a long while (The United States Conference of Catholic Bishops has determined this to be one month.) The diocesan bishop determines if the conditions of a grave necessity are present, consistent with criteria of the USCCB (can. 961 §§1–2). The Apostolic Penitentiary believes that, especially in the places most affected by the pandemic and until the phenomenon recedes, the cases of serious need will occur. If a sudden need exists for collective absolution, the priest is obliged to warn the diocesan bishop. If the priest cannot, he should inform the bishop as soon as possible.

For general absolution to be valid, the penitent must intend to confess serious sins within a suitable period of time (can. 962 §1). Canon 963 cites the obligation to approach individual confession “as soon as possible; given the opportunity, before receiving another general absolution,

²Apostolic Penitentiary, Note on the Sacrament of Reconciliation in the current pandemic (March 20, 2020).

³Ibid.



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unless a just cause intervenes.” The Apostolic Penitentiary uses the term “in due time.” Insofar as it can be done, the penitent is to be instructed on this obligation and exhorted to make an act of contrition before absolution if there is time (can. 962 §§1–2).

Rite for Emergencies

There is increasing evidence of priests’ being denied access to health care facilities as they attempt to impart the sacraments to the sick and dying. There also could be situations in which a priest is called to hear Confession and provide Anointing of the Sick for a gravely ill patient for whom direct and private access is prohibited. In this situation, the priest is physically present to the patient but remotely so—such as standing outside a patient’s room—where confidentiality will be breached. As stated above, canon law dictates that “individual and integral confession and absolution constitute the only ordinary means by which a member of the faithful conscious of grave sin is reconciled with God and the Church. *Only physical or moral impossibility excuses from confession of this type*; in such a case reconciliation can be obtained by other means” (can. 960, emphasis added). The roles of the diocesan bishop and the USCCB in determining situations in which those impossibilities exist is less clear. But the *Rite for Emergencies* provides guidance for “when the danger of death from injury or illness is sudden and unexpected or when a priest is not called to exercise his ministry until the person is at the point of death.”⁴ It indicates that if necessary the confession of sins may be generic.

Possible Scenarios during a Pandemic

In the first scenario, the priest is able to get access to personal protective equipment (PPE) and professional supervision of its use necessary to enable a physical presence to the patient. The confessional stole, if used, should be completely under the PPE. In this case Penance (depending on the circumstances, either an individual and integral confession or confession in a generic way as in the *Rite for Emergencies*), the Anointing of the Sick, and the Apostolic pardon (both addressed below) can be administered. It even may be possible to give Viaticum if no pyx is opened in the patient’s room. It should not be brought into the room unless it remains secured under PPE.

⁴International Commission on English in the Liturgy, *Pastoral Care of the Sick: Rites of Anointing and Viaticum* (Collegeville, MN: ICEL, 2004), n. 259.



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Nothing that cannot be discarded in the patient room should be brought into the room. Formulas for any of the sacraments or blessings can be written on a disposable card (to be disposed of in the patient's room). It is also important to seek direction beforehand from the patient's health personnel about standards for not introducing pathogens into the patient's environment when bringing to the patient Holy Eucharist and the oil of the sick. The use of host, oils, and their receptacles that have had direct or indirect contact with other persons must be prevented. The priest must follow strict protocol for entering and exiting the room, as directed by the health personnel. Again, there is the option for general absolution as described by the Apostolic Penitentiary or the *Rite for Emergencies* that involves no direct contact.

In the second scenario, the priest is able to communicate directly with the patient—from a short distance, while looking through a window, or in or just outside a doorway (speaking loudly or through an amplifying device)—but cannot have physical closeness with the person. In that case, the *Rite for Emergencies* and the Apostolic pardon would be possible, but administration of anointing would not be possible. Obviously, because of the seal of Confession there can be no articulation of sins. In this scenario, the requirements for absolution include an expression of sorrow—if the person is capable of such expression—and the intention to confess serious sins within a suitable period of time, as also referenced for general absolution. The priest can ask the patient to say, if possible, that he or she is sorry for any sins that may have been committed, indicating that at a suitable period of time if any unconfessed serious sins exist, they are to be confessed. This individual absolution is not unlike when Anointing of the Sick imparts the forgiveness of sin when the individual, especially an unconscious patient, is unable to make an individual and integral confession. This all assumes that health care personnel have approved the access required and there is compliance with their hygienic directives.

In the third scenario, the priest cannot have any direct presence to the person. When it is impossible to receive sacramental absolution, one should not forget that it is possible to obtain forgiveness of sin, even mortal sins, by expressing perfect contrition coming from one's love of God. It must be accompanied by the firm resolution to have recourse as soon as possible to sacramental confession. In that case, if it is possible to communicate by phone or by intercom from a distance away, the priest can offer consoling prayers and invite the person to offer prayers of

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perfect contrition and trust in God's mercy.⁵ The priest can offer appropriate prayers with family members and friends.

The Apostolic Penitentiary also has recommended that bishops consider establishing agreements with local health authorities for groups of "extraordinary hospital chaplains ... in compliance with the norms of protection from contagion, to guarantee the necessary spiritual assistance to the sick and dying."⁶

Anointing of the Sick

The sacrament of Anointing of the Sick not only is a sacrament of healing, but it carries with it the forgiveness of sins. That is why it can be administered only by a priest (can. 1003 §1) The sacrament should be administered, and even repeated consistent with canonical requirements, if requested by a person or his or her surrogate decision maker for an appropriate reason (e.g., danger due to sickness or old age). This applies for all people who have reached the age of reason, even if they are no longer able to exercise it. The canons speak to the administration of the sacrament in cases when the person "implicitly requested it" when he or she was competent (cann. 1004 §§1–2, 1005, 1006). However, the presumption that the person, if capable, would have asked for it—especially with grave illness or danger of death—could suffice. Before the penitent receives the sacrament, he or she must confess all serious sins that have not been confessed. If unable to do so, the penitent is to confess them as soon as possible, given the opportunity.

All priests entrusted with the care of souls have an obligation to administer this sacrament at the appropriate time (can. 1001, 1003 §2). The sacrament is conferred by anointing with oil and pronouncing the words prescribed in the liturgical books (can. 998). "In a case of necessity, however, a single anointing on the forehead or even on some other part of the body is sufficient, while the entire formula is said. The minister is to perform the anointings with his own hand, unless a grave reason warrants the use of an instrument" (can. 1000 §§1–2). Contagion presents a significant problem because of the proximity and physical contact between the priest and the person being anointed. This is not a sacrament administered at a distance. Also, the container of the oil of

⁵*Catechism of the Catholic Church*, 2nd ed. (Vatican City: Libreria Editrice Vaticana, 2012), n. 1452.

⁶Apostolic Penitentiary, Note on the Sacrament of Reconciliation.



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the sick cannot be brought into proximity of a patient nor reused between patients. The logistical hazards of contagion are very significant, and they affect not only the patient and the minister of the sacrament, but potentially everyone with whom he later has contact, and with all the individuals those persons later have contact.

The priest must follow strict protocol for entering and exiting the room, as directed by the health personnel. As stated earlier, it is also important to seek direction beforehand from the patient's health personnel about standards for not introducing pathogens into the patient's environment when bringing to the patient the oil of the sick, and the use of oils and their receptacles that have had direct or indirect contact with other persons must be prevented. There is the option for the priest to bless a very small amount of new oil of the sick (on the glove or swab) being used during that anointing: "In addition to a bishop, the following can bless the oil to be used in the anointing of the sick: ... any presbyter in a case of necessity, but only in the actual celebration of the sacrament" (Can. 999, 2°).

Health care units can provide PPE for the priest, who can use an individual pre-oiled glove, a long cotton-tipped swab, or a similar item for anointing that has been prepared before the priest enters the patient's room; the container cannot enter the patient's room. Nothing that cannot be discarded in the patient room should be brought into the room. Formulas for any of the sacraments or blessings can be written on a disposable card (to be disposed of in the patient's room). The priest should review the procedure for hygienic purposes with facility personnel and follow it exactly (e.g., the swab or glove cannot be redipped in the holy oil). This would include the proper disposal of the glove or swab, which are single use. This can create a problem with liturgical law, requiring burning of the swab or glove because of remains of the oil of the sick.⁷ However, currently all patients are to be treated as if they have COVID-19. Removing from the room items that have touched the patient or other items in the room violates isolation precautions. Chaplains report discarding the swab or glove with the PPE in the patient's room. The priest can ask beforehand if the room contains a receptacle for biological waste, and if it is being burned. If this is the case, he can ask the staff to dispose of it there. This clearly is less than ideal but herein one is dealing with what is possible.

⁷"If any of the oil is left after the celebration of the sacrament, it should be absorbed in cotton (cotton wool) and burned." ICEL, *Pastoral Care of the Sick* (Totowa, NJ: Catholic Book Publishing, 1991), n.22:



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Because of these significant hazards, it may be prudent to rely on general absolution or the *Rite for Emergencies* addressed above, consistent with canon 960 and the prescripts of the diocesan bishop. Once the sacrament is administered and death is anticipated, the Apostolic pardon can be administered without close proximity to the person.

Apostolic Blessing and Plenary Indulgence

An indulgence is the partial or plenary (total) remission of temporal punishment for sins already forgiven under certain conditions defined by the Church. All baptized members of the Christian faithful who are in communion with the Church and in the state of grace may receive an indulgence. To gain a plenary indulgence, the person must have at least the general intention of acquiring it and must fulfill the three specific conditions: sacramental confession, Eucharistic communion, and prayer according to the Holy Father's intentions (cann. 992, 993, 996 §§1–2).

A great gift of the Church is the Apostolic pardon, a special plenary indulgence offered when death is imminent. The *Manual of Indulgences* states the following: “At the Point of Death a priest who administers the sacraments to someone in danger of death should not fail to impart the apostolic blessing to which a plenary indulgence is attached. If a priest is unavailable, Holy Mother Church benevolently grants to the Christian faithful, who are duly disposed, a plenary indulgence to be acquired at the point of death, provided they have been in the habit of reciting some prayers during their lifetime; in such a case, the Church supplies for the three conditions ordinarily required for a plenary indulgence.”⁸

The Apostolic pardon is usually administered to a conscious or unconscious patient after the sacrament of Anointing of the Sick. It requires no direct contact with the recipient. Therefore, the diocesan bishop could consider approving the administration of the Apostolic pardon after administration of individual absolution, when integral confession is impossible, or when general absolution is administered, even using a bull horn as cited above. It is imparted with the following words (if the person is able, the response is *Amen*):

⁸United States Conference of Catholic Bishops, *Manual of Indulgences* (Washington, DC: USCCB, 2006), n. 12.



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Through the holy mysteries of our redemption, may almighty God release you from all punishments in this life and in the life to come. May he open to you the gates of paradise and welcome you to everlasting joy.

or

By the authority which the Apostolic See has given me, I grant you a full pardon and the remission of all your sins in the name of the Father, and of the Son, and of the Holy Spirit.⁹

A number of persons engaged in health care ministry, as well as the patients and families they serve, may be unaware of the Apostolic pardon. At the time of impending death, and in the absence of an available priest, the family or health care worker should help the patient to pray for such an indulgence, even if it is unclear whether the patient is conscious enough to do so. Again, our generous Church grants this plenary indulgence to persons who are properly disposed and who have been in the habit of reciting some prayers during their lifetime, as a substitute for the three usual conditions.

Decree of the Apostolic Penitentiary

A recent decree by the Apostolic Penitentiary on the granting of a plenary indulgence to the faithful in the current pandemic, expands on this further. The gift of special indulgences is granted to the faithful suffering from COVID-19 and their family members, as well as to health care workers who in any capacity care for them if

with a spirit detached from any sin, they unite spiritually through the media to the celebration of Holy Mass, the recitation of the Holy Rosary, to the pious practice of the Way of the Cross or other forms of devotion, or if at least they will recite the Creed, the Lord's Prayer and a pious invocation to the Blessed Virgin Mary, offering this trial in a spirit of faith in God and charity towards their brothers and sisters, with the will to fulfil the usual conditions (sacramental confession, Eucharistic communion and prayer according to the Holy Father's intentions), as soon as possible.¹⁰

⁹ *Ibid.*

¹⁰ Apostolic Penitentiary, Decree on the granting of special Indulgences to the faithful in the current pandemic (March 20, 2020).



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Even those who pray for the end of the epidemic, relief for those who are afflicted, and eternal salvation for those who have died have access to the plenary indulgence under the same conditions if they “offer a visit to the Blessed Sacrament, or Eucharistic adoration, or reading the Holy Scriptures for at least half an hour, or the recitation of the Holy Rosary, or the pious exercise of the Way of the Cross, or the recitation of the Chaplet of Divine Mercy.”¹¹

Interestingly, when addressing the situation in which death is imminent and there is no access to the Anointing of the Sick or viaticum, the Apostolic Penitentiary states that the substitute for the three usual conditions for the plenary indulgence is having “recited a few prayers during their lifetime.” This demonstrates the pastoral care of the Church. For the attainment of this indulgence the use of the crucifix or the cross is recommended.¹²

Baptism

Often parents delay baptism of their infant child until they can gather the family together for a celebration. However, “parents are obliged to see that their infants are baptised within the first few weeks. As soon as possible after the birth, indeed even before it, they are to approach the parish priest to ask for the sacrament for their child, and to be themselves duly prepared for it” (can. 867 §1). Also, there is to be a “founded hope that the infant will be brought up in the Catholic religion” (can. 868 §1, 2°). Even private baptisms may be delayed because of restrictions on size of gathering or travel, even local travel. A number of points of direct contact between the person to be baptized and the minister of baptism violate social distancing. The source of water may be a point of contamination. However, “an infant in danger of death is to be baptized without delay.” (can. 867 §2). For liceity it is required that at least one parent consents to the baptism of a child who has not reached the use of reason, but this is not required when the child is in danger of death (can. 868 §§1–2).

In the absence of clergy, especially when there is danger of death, any person who has the intent of the Church can baptize (can. 861 §2). The person does not even have to be a Christian. Stories exist of dying soldiers being baptized by their colleagues. Doctors and nurses have similar

¹¹Ibid.

¹²*Enchiridion indulgentiarum. Normae et concessiones* (Vatican City: Libreria Editrice Vaticana, 2009), n. 12.



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stories. All that is required is plain water and the correct formula: pouring water three times over the head of the person being baptized while stating the person's name and reciting the following words: "I baptize you in the name of the Father, and of the Son, and of the Holy Spirit." Of course, the person administering the baptism must be allowed to have contact with the child from a public health perspective. At the earliest opportunity, this should be reported to the local parish for recording. It is as valid as the baptism administered by Pope Francis in an elegant ceremony. The child is on the road to salvation by this simple act.

Confirmation

Shepherds of souls—especially pastors—are to ensure that those who have been baptized receive the formation needed for the sacrament of Confirmation and approach it at the appropriate time (cann. 890, 885 §1). In the Latin Church, all baptized Catholics who possess the use of reason (which is about the age of seven) may receive the sacrament of Confirmation within the age limits determined by the diocesan bishop if they are "suitably instructed, properly disposed and able to renew the baptismal promises" (can. 889 §§1–2).¹³ However, there is an exception when there is a danger of death or when, in the judgment of the minister, a grave cause suggests otherwise (can. 891). Furthermore, for those who because of intellectual or developmental disabilities may never attain the use of reason, confirmation can be administered any time after baptism, and they should be encouraged—either directly or, if necessary, through their parents—to receive it. Thus, during a pandemic, and at any other time when in danger of death, a baptized Catholic, regardless of age or the ability to renew his or her baptismal promises, could receive this sacrament.

While the ordinary minister of the sacrament is a bishop, a priest can confer the sacrament when there is danger of death (cann. 882; 883, 3°). However, since Confirmation is conferred by the anointing of chrism on the forehead, which is done by the imposition of the hand using the prescribed words, it creates all of the same hygiene issues already addressed under the Anointing of

¹³The National Conference of Catholic Bishops, in accord with the prescriptions of canon 891, decreed that "the Sacrament of Confirmation in the Latin rite shall be conferred between the age of discretion and about sixteen years of age, within the limits determined by the diocesan bishop and with regard for the legitimate exceptions given in canon 891." National Conference of Catholic Bishops, Complementary legislation for canon 891 (August 21, 2001).



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the Sick (can. 880 §1). However, chrism can be blessed (consecrated) only by the bishop. Similar to the Anointing of the Sick, an applicator of some sort could be used. Since this sacrament is not necessary for salvation, it also can be deferred. However, when in danger of death, especially for a child who has not reached the age of reason and thus is unable to receive the Anointing of the Sick, the administration of this sacrament, with the fullness of the Spirit received, gives great consolation to the family. However, all the cautions pertaining to contagion need to be addressed, as referenced for the Anointing of the Sick. As stated earlier, it is also important to seek direction beforehand from the patient's health personnel about standards for not introducing pathogens into the patient's environment or transmitting pathogens from the patient and that environment. This includes when bringing to the patient the chrism oil, and the use of oils and their receptacles that have had direct or indirect contact with other persons must be prevented. All the same precautions for entering and exiting the room addressed under the Anointing of the Sick are to be followed.

Eucharist

Reception of the holy Eucharist requires direct contact between the priest and recipient, even in situations where there are less than ten participants. One hears of "drive-by" opportunities, but this still requires close contact between minister and recipient. Furthermore, the delivery of the sacred host, even among a few recipients, requires serial touching of the sacred hosts. Again, it is important to seek direction beforehand from the patient's health personnel about standards for not introducing pathogens into the patient's environment or transmitting pathogens from the patient and that environment. When bringing to the patient Holy Eucharist, it is important to prevent the use of the host and pyx that have had direct or indirect contact with other persons. The pyx should not be brought into the isolation room unless it remains secured under PPE. Nothing that cannot be discarded in the patient room should be brought into the room. The priest must follow strict protocol for entering and exiting the room, as directed by the health personnel. Herein the option of a spiritual act of Holy Communion has great benefit: My Jesus, I believe that You are present in the Most Holy Sacrament. I love You above all things, and I desire to receive You into my soul. Since I cannot at this moment receive You sacramentally, come at least spiritually into my heart. I embrace

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You as if You were already there and unite myself wholly to You. Never permit me to be separated from You. Amen.

Providing Sacraments in Times of Pandemic

During this pandemic, there are challenges in meeting the rights of the faithful to receive the sacraments. Such rights are circumscribed by specific conditions, including that sacraments be available at the appropriate time. The faithful are hungry for the sacraments, and there is great evidence that clergy are also suffering from their inability to provide them. They are seeking alternative ways and sites to deliver them validly and safely.

There also is the tremendous need to minister to families of the victims of the pandemic. Required social isolation prevents family access to loved ones at the point of greatest need, when there is the danger of death. This is compounded by the reality that clergy may not have direct access to the dying or even to their family members. Thankfully, technology enables the ministry to families to continue even if through less ideal means.

However, the lack of direct sacramental access, especially to the dying, continues. One great possibility is the Apostolic Penitentiary's suggestion that priests collaborate with local health authorities to serve as "extraordinary hospital chaplains," complying with the norms of protection from contagion, "to guarantee the necessary spiritual assistance to the sick and dying."

If there is ever a message to be received during this pandemic, it is the importance of the sacraments, not just because of their salvific nature, but also for the graces imparted by them. But access to grace abounds. Just praying for those affected by the pandemic, and fulfilling the related conditions, can effect a plenary indulgence. Currently, despite the suffering faced by the human race, there is a great opportunity to access the graces available to all who seek them.