



ROMAN CATHOLIC CHURCH IN THE STATE OF HAWAII  
**DIocese OF HONOLULU**  
WITNESS TO JESUS

**DECREE ISSUING INSTRUCTION**

It is with sadness but also with hope that I issue the attached *Instruction Regarding Sacraments and Funerals in Situations Involving Physician Assisted Suicide*. It with sadness because of the new law which permits such actions in the State of Hawaii, contravening the law of God. But it is with hope because of the possibility that some may be led to contrition and repentance and a sharing in God's mercy as a result of these procedures.

The supreme law of the Church is the salvation of souls, and as the chief pastor of the Diocese of Honolulu, I must put the goal of eternal life with God as my top priority for the people of the state. I hope that this document will give guidance to the clergy, parish staffs and others who minister to the sick to further that end.

The state law allowing physician assisted suicide, euphemistically called the "Our Care, Our Choice Act," goes into effect on January 1, 2019. In order to allow for pastoral preparation this instruction goes into effect immediately.

Given at the Office of the Bishop on the fifth day of November 2018.

+ Clarence Silva

Most Reverend Clarence Silva  
Bishop of Honolulu

Kei & Co. LLC  
Notary

**Instruction**  
**Regarding Sacraments and Funerals**  
**In Situations Involving Physician Assisted Suicide**  
 for Clergy, Parish Staff and  
 Ministers to the Sick and Homebound

“Everyone is responsible for his life before God who has given it to him. It is God who remains the sovereign Master of life. We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls. We are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of” (*Catechism of the Catholic Church [CCC], no. 2280*).

**A. Celebration of the Sacraments for Those Seeking Physician Assisted Suicide**

1. The sacraments that are a preparation for death are primarily Penance and Viaticum, the sacrament of the Most Holy Eucharist as food for the journey to heaven.
2. These sacraments are not denied to Catholics, but in some cases, when a person is not prepared or properly disposed, they may be *delayed*.
3. It must be made clear to people who have decided upon physician assisted suicide that any postponement of a sacrament is due to his or her intention and that there will be no delay otherwise.
4. The danger of celebrating a sacrament with someone as they prepare to commit assisted suicide is that it may give *implicit approval* of their decision to end their own life.

*The Sacrament of Penance:*

5. The sacrament of Penance requires contrition: celebrating Penance without contrition is like celebrating Baptism without water or the Holy Eucharist without bread and wine.
6. Contrition includes sorrow for past sins and an intention not to sin in the future, along with an intention to repair damage caused by one’s sins.
7. For a sin to be a mortal sin, three conditions must be fulfilled:
  - the matter must be grave,
  - the person must have knowledge of the gravity of the matter, and
  - the person must freely choose the matter after sufficient deliberation (see CCC, nos. 1857-1859).
8. The process required by the State of Hawaii for a person seeking medically assisted suicide is meant to guarantee that he or she is fully informed and has made a deliberate consent, thus likely fulfilling the requirements for mortal sin.
9. If a person dies in mortal sin without contrition, such final impenitence results in the “exclusion from Christ’s kingdom and the eternal death of hell, for our freedom has the power to make choices for ever, with no turning back” (CCC, no. 1861; see no. 1864).

10. Even though the State of Hawaii seeks to safeguard that a person has informed consent in seeking assisted suicide, the civil law does not guarantee that the person is fully instructed in his or her faith.

Priests, therefore, before hearing a confession must take into account the possibility that a person may be ignorant of the gravity of the matter before God and may not be fully informed about the Church's teachings. In such situations, the priest is called upon to provide teachings to the person about the dignity that God has bestowed upon human life, about the salvific effects of suffering, and about the gravity of the act he or she is considering relative to the salvation of his or her soul.

11. The priest must also take into account any factors that are pressuring the person to seek assisted suicide or impairing his or her deliberation. These factors may be internal (e.g., fears) or external (e.g., pressure from others). Even though the process required by the State of Hawaii seeks to guarantee the person's freedom and sufficient deliberation, a person may reveal private considerations to a priest that he or she has not revealed to others. In such a situation, the priest is to urge the person to reveal these pressures to his or her physician or another disinterested person.
12. If a person gives any indication of a willingness to reconsider his or her decision or to learn better the teachings of the Church, the sacrament of Penance may be celebrated, putting hope in the grace of the sacrament to bring contrition to completion.
13. If a person is merely considering assisted suicide in the future, lacks a stubbornness of will, or seems indecisive, then the sacrament of Penance may be celebrated with a similar hope.
14. Celebration of the sacrament of Penance with one who has firmly decided to commit medically assisted suicide must be *delayed* until the person is ready to renounce his or her decision. A person may make a comment such as, "I am at peace with my decision," when considering assisted suicide. While this may be emotionally allaying to family or friends who hear it, such a comment may indicate an inflexibility to reconsider his or her decision and consequently must result in a *delay* in celebrating the sacrament of Penance.

*The Anointing of the Sick:*

15. Like Penance, the Anointing of the Sick is a *sacrament of healing*. The effects of the Anointing of the Sick are spiritual assistance, forgiveness, healing, and salvation. The sacrament joins a person's suffering to the passion of Christ, thus making it a gift that brings salvation to the world.
16. Since, during the Anointing of the Sick, the Church prays for healing, it is antithetical to the meaning of the sacrament to anoint a person on track to commit assisted suicide. Therefore, such situations call for a *delay* of the sacrament.
17. If a person is fully aware, the Anointing of the Sick is preceded by the sacrament of Penance. Therefore the guidance regarding the sacrament of Penance above must be followed first, before a person is anointed.

18. In the case of a person who has fallen unconscious during the process of committing assisted suicide, a priest cannot presume his or her repentance and proper disposition for the sacrament of Anointing unless he or she first gave some sign of repentance.

*Viaticum:*

19. A person conscious of grave sin, such as having made a decision to commit assisted suicide, must celebrate the sacrament of Penance in order to be in a state of grace before receiving Holy Communion as Viaticum. The guidance regarding the sacrament of Penance above must be followed first.

*Prayer for God's Mercy:*

20. Prayer for the person is always permitted, even if the sacraments are being delayed. Prayer is appropriate even if the person is in the process of committing suicide (e.g., the person has taken the "medication" [i.e., poison], but it has not yet had full effect). Such prayer fittingly takes a penitential tone, calling upon God's mercy. Appropriate texts may be chosen from the "Commendation of the Dying" in the *Pastoral Care of the Sick*.

**B. Celebration of Funerals for Those Who Have Committed Assisted Suicide**

21. Canon law recognizes that Catholics have a basic right to ecclesiastical funeral rites (*Code of Canon Law*, canon 1176 §1). All restrictions on that right are to be interpreted narrowly (see canon 18). Therefore, in most cases, funeral rites may be celebrated even for someone who has committed assisted suicide. It may be noted that being granted funeral rites is not a guarantee of eternal life with God.
22. There is no requirement that the priest, deacon or parish staff inquire about the cause of death of a person who has died.
23. If Catholic ecclesiastical funeral rites are allowed to a person, all parts of the funeral celebrations are allowed (i.e., vigil, funeral Mass or service, burial) (canon 1185).
24. The purpose of Catholic funeral rites are (canon 1176 §2):
- to pray for the deceased for forgiveness of their sins,
  - to honor their bodies as temples of the Holy Spirit, and
  - to bring the solace of hope to the family and friends.

It is fitting to keep these purposes in mind for all funerals and to avoid the current secular notion that funerals are a "celebration of life" of the individual, which does not reflect the genuine purposes of Catholic funerals. Such a secular approach in particular runs contrary to the celebration of funeral rites for a person who has ended his or her own life.

25. There may be some limited situations, however, where funeral rites must be denied to those who committed assisted suicide. Canon 1184 §1 governs restrictions on the right to ecclesiastical funeral rites: "Unless they gave some signs of repentance before death, the following must be deprived of ecclesiastical funerals: ... notorious ... heretics ... [and] other manifest sinners who cannot be granted ecclesiastical funerals without public scandal of the faithful."

The canon mandates that some *heretics* be denied ecclesiastical funeral rites. A Catholic who espoused a position that assisted suicide is morally acceptable meets the definition of a heretic. However, in order to be denied funeral rites, the heretic must also be *notorious*. So a person who made his or her position regarding assisted suicide publically and generally known prior to his or her suicide must be denied funeral rites.

Similarly, the canon mandates that other *manifest sinners who cannot be granted ecclesiastical funerals without public scandal of the faithful* must be denied funeral rites. *Scandal* relates to the possibility of leading another person into sin by one's example. If a person is generally known to have committed assisted suicide and then the Church grants funeral rites, tacit approval is given to the person's actions. This may give the impression to others that assisted suicide is acceptable or that the sin is forgivable once completed. So a person who is publically known to have committed assisted suicide must also be denied funeral rites. (In practice, this may be quite similar to the situation described in the prior paragraph.)

However, absent these two situations, a person who has committed assisted suicide must be granted ecclesiastical funeral rites. Only God can judge the souls of those who commit suicide or know the pressures they were under.

26. Canon 1184 §2 adds regarding doubtful situations about whether or not to grant funeral rites: "If any doubt occurs, the local Ordinary [i.e., bishop or vicar general] is to be consulted, and his judgment must be followed."
27. Offering the sacrament of Penance to family and friends of a person who has committed assisted suicide may be appropriate. Some may have "supported" a relative or friend as he or she moved along the process of assisted suicide. Such individuals, however, may need to be enlightened with the truth about the gravity of what has happened prior to the celebration of the sacrament so that their contrition may be complete.