

HOW TO LEAD PEOPLE WITH DEMENTIA THROUGH A SACRAMENTAL CONFESSION

People with dementia may be led through a good confession one of three basic ways, depending upon cognitive functioning and general wherewithal. The following three ways represent a gradation from the fullest/most ideal cognitive functioning to the least:

1) The patient is conversational with adequate memory

In this case, the confession would not be much different than that in which a penitent is led through a good confession based on the Ten Commandments. After the normal preliminary assessment (time since last confession, state in life, etc.), ask the person *first* if there is anything on his or her heart and mind that would be helpful to say with regard to sins of the past. *Then*, inviting the person to respond with a simple “yes” or “no” to the questions which will be asked (making clear that they *may*, of course, say more than “yes” or “no”), walk them through an examination of conscience based upon the Ten Commandments. Offering appropriate counsel throughout, or at the end (if such counsel can be received by the person), *lastly* give a penance that is easy to remember, or perhaps even better yet, could be completed *with* the confessor (such as an “Our Father” or a “Hail Mary” that the priest says with the person). For an Act of Contrition, a question such as “Are you sorry for all of your sins, including those which you may be forgetting?”, answered in the affirmative, suffices. Proceed to absolution.

2) The patient can respond minimally, but is still cognizant of the priest’s presence

In this case, the adage “less is more” applies. Judging the patient’s threshold for conversation is important. Do not “fatigue” the patient by too many words, or too many questions. This scenario may be handled in a very simple way, such as *firstly* “experimenting” with an assessment of sin using the “Ten Commandments” method (as in #1). If this is yet too much for the patient, a question such as “Are you sorry for all of your sins, including those which you may be forgetting?”, with an affirmative response, is sufficient to grant absolution. In the assessment of contrition for sin, it may be helpful for the priest to demonstratively nod his head in the affirmative *while* asking the question, to as to indicate in a kind of ‘imitative’ way to the penitent that they *want* to say “yes” to this question, especially if the patient is in more advanced stages of dementia. It may be the case that a patient in this scenario really could not complete a penance, even a short one. The priest may wish to give a penance such as, “For your penance, I will say the ‘Our Father’. Please follow along in your heart as best as you can”; or, he may see it more pastorally advantageous to dispense with a penance. In either case, absolution is given as normal.

3) The patient is not able to understand the nature of the priest’s presence, and may even be unable to respond

In this case, after having tried all reasonable means to engage the patient, the priest would simply directly proceed to absolve *conditionally*. The “conditional” part of the absolution does not need to be voiced in words, but can be held in the priest’s own mental awareness that this is, in fact, a conditional absolution. It is “conditional” based on factors beyond the priest’s control, e.g., *if* the patient is well disposed, and *if* the patient *would* be contrite *if* sins of the past could be recalled and confessed, etc.