

General Synod of the Dioceses in Australia and Tasmania.

SESSION 1916.

REPORT *RE* USE OF SEPARATE CUPS IN THE ADMINISTRATION OF THE HOLY COMMUNION.

The following report is made in obedience to a vote of the Bishops' Meeting, held in Synod, at the time of the General Synod in October, 1910. We regret that death has deprived us of the help of our Convener, Bishop Barlow of Goulburn, whose experience and judgment would have been of the greatest value.

ORIGIN OF THE PRACTICE.

The practice upon which we are asked to consider and report has its origin outside the Church of England, and seems to have arisen with us only in obedience to suggestions from others. The pressure comes from non-episcopal Christendom. On the side of Rome the question does not arise, since there the Cup is withheld altogether from the laity. Among Methodists, Congregationalists, and Baptists it has taken root, and is on the increase. The Conference of the Methodist Church of Australia held in Brisbane in 1913 passed the following resolution, urgently recommending it:—

"That, in the opinion of this Conference it is urgently necessary that, in the administration of the Holy Communion the method of using the individual cup should be adopted, and the annual conferences are requested to take immediate steps to have the method adopted whenever possible." (Extract from page 98 of minutes of Fourth General Conference of the Methodist Church of Australasia, held in Brisbane June 12th, 1913.)

On the other hand the practice does not commend itself in all cases and is definitely opposed in certain quarters, especially among the Presbyterians.

NATURE OF IT.

The practice as found in our Church consists in the use of as many separate cups as there are communicants, the wine having been previously consecrated in the flagon, since it is impossible in most cases, to consecrate the separate cups in full accord with the rubric (*i.e.*, the Priest "is to take the cup into his hand" and "to lay his hand upon every vessel . . ."). There is no evidence before us that the individual cups are cleansed before the communicants leave the Church. The cups are ministered to the communicants either by hand or by means of a tray.

EXTENT AND GROUNDS OF THE DEMAND.

Whatever view may be taken of this practice it is obviously an innovation upon the general practice of the Church for 1900 years. But "every particular or national Church hath authority to ordain, change and abolish ceremonies or rites of the Church ordained only by man's authority," and while it is questionable whether an individual bishop, still more whether an individual clergyman, may initiate the change; yet undoubtedly, in a practical matter of this kind, the Church is free to innovate. It is necessary therefore to ask what demand there is for the proposed change, and what are the grounds of it. Our investigation leads us to conclude that the demand is considerably less than is popularly supposed. For instance, in one Diocese where the Clergy were thoroughly canvassed thirty-two answers out of the forty-

a fair proportion

six received reported that no question as to a divided cup had ever been raised in the writer's experience, while of the remaining fourteen only six reported an actual demand for the change. It is probably localised in certain spots and is unknown over large areas of the Church.

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Where the demand exists it is persistent, even though not articulate, and is normally based upon the fear of infection which has entered the popular mind through recent discoveries of bacteriology. Many Parish Priests report individual cases within their knowledge, and in some cases the fear is sufficiently pronounced to lead to complete cessation of attendance at Holy Communion. Several Parish Priests however qualify their evidence with the opinion that the difficulty is most commonly found where there is an antecedent slackness with regard to all Church observance.

MEDICAL OPINION.

Medical opinion is divided in the matter. We quote here two representative Australian opinions.

Professor E. C. Stirling, C.M.G., M.D., F.R.S., when President of the Australian Medical Congress, in his Presidential Address at Adelaide on September 4th 1905 made the following statement:—

"What might be done towards the relief, or even the abolition, of that scourge of human life—consumption—if only people would cease from doing those things which favour its production and continuance, and would do those which they can be told in all honesty will certainly prevent its spread and bring about its cure. But how shall we blame the general public for their errors of commission and omission when those who cannot claim the excuse of ignorance, in defiance of risks which are not so imaginary as they seem to think, assist in continuing the reprehensible and unsanitary practice of the promiscuous transference from mouth to mouth of the uncleansed Communion Cup."

On the other hand, Dr. Cyril E. Corlette, M.D., Ch.M.(Syd.), D.P.H.(Camb.), writes in the *Australasian Church Quarterly Review* for August 1911:—

"The abstract possibility of infection in this way (i.e., through the common cup), with syphilis, diphtheria, influenza, measles, whooping cough, mumps, and a variety of other diseases may certainly be admitted; but whether any one of them is, or ever has been, actually conveyed by the Chalice is a question which, in the last word, would have to be decided on evidence, though it would usually be very difficult to decide the question in any concrete case because of the very numerous sources of fallacy which are possible. As for syphilis in particular, neither reading nor experience has furnished me with a single example of transmission in this way, and I am tolerably certain that the literature of disease up to the present contains no record of any authentic case."

The Melbourne Board of Public Health is not composed, we understand, of medical experts: but action was taken by that body on April 14th 1913 for which, so far as we know, there is no precedent or parallel, the following letter having been written to the heads of the various religious denomination throughout Melbourne:—

"Public Health Department,

"Melbourne, April 14th 1913.

"Sir,—At a meeting of the Board of Public Health held on 2nd instant consideration was given to the likelihood of disease being transmitted from one person to another through the Common Cup as used in Church Communion Services.

"The Board is of opinion that the practice of using the Common Cup is one that is undesirable from a hygienic point of view and that in the interests of public health the common cup should not be retained.

"I am accordingly, in pursuance of a resolution passed by the Board, to invite the earnest attention of Church authorities to the matter, and to express the hope that, where the practice of using the common cup is in force, steps may be taken to, as far as practicable, abolish it and substitute a separate vessel for each Communicant.

I have the honour to be,

Sir,

Your obedient servant,

(Signed) T. W. H. HOLMES,

Secretary."

A MORE WIDESPREAD GROUND OF DISCONTENT.

But our investigations lead us to conclude that whatever unrest there is in our Church is due, not so much to fear of infection as to a modern sense of cleanliness. Apart from all fear of infection people dislike the use of a cup already used by others, and consequently in normal circumstances the use of a purificator or maniple to wipe the rim of the chalice satisfies all complaints. In the Diocese above referred to thirteen out of forty-six reported a demand for the use of the purificator for this purpose. It is necessary, however, to add that this use of the purificator offends the scruples of very many of the most reverent of our Church people.

? of Superstitions.

SOME IMPORTANT CONSIDERATIONS.

In view of the division of medical opinion, the final decision must lie with the common sense of the people, and before committing ourselves to innovation upon a custom so long established, it is important to weigh the following considerations:—

1. The fear of infection is notoriously liable to become a panic, against which all well balanced minds should be on their guard.

2. The practical risk can hardly exist if it has taken 1900 years to discover it, and indeed the experience of the Clergy themselves would seem to be almost conclusive in this matter. They are so situated in the pursuance of their office as to be the most subject of all communicants to danger from infection by the chalice, and yet the longevity of the clergy is known to exceed that of any other profession. — *this is not an over alarm in view of life.*

3. The innovation itself is no safeguard from a strictly scientific point of view, unless the separated cups are actually sterilised after use: no instance of this practice is before us.

4. It is highly important to bear in mind that while a comparatively small majority might be gratified by the change, vast numbers on the other hand would resent a change in the practice of 1900 years, and the consequent loss of the beautiful symbolism of realised unity which we see in the Common Cup. Indeed, there is reason to fear that not a few would be shaken, if the change were widely made, in their allegiance to the Church of their Fathers.

5. The evidence of Scripture, so far as it goes, is clearly against innovation, cf. St. Matthew xxvi., 27, "He took the cup, and gave thanks, and gave it to them, saying, Drink ye all of it." St. Mark xiv., 23, "He took the cup, and when he had given thanks, he gave it to them: and they all drank of it." St. Luke xxii., 20, "Likewise also the cup after supper, saying, This cup is the new testament in my blood: this do ye, as oft as ye drink

Not proven

*An argument equally in
favour of change, as a practical*

*lots of things have taken a great
deal longer to discover but
they exist all the same.*

*This is splitting hairs
for undoubtedly it very materially
lessens it*

*If a majority are gratified
should they not be considered?*

*Is the symbolism of unity
incident in the Comm. Cup or
in the consecrated contents
of the Cup.*

*In the Revised Version "the" is
omitted "A" adopted in
both places.*

it, in remembrance of me." Further, it is worth bearing in mind that St. Paul's reference to the Eucharist as symbolising the oneness of the Christian community seems to contemplate the one cup as well as the one bread. (1 Cor., x., 15-17.)

6. Very many will feel it incredible to Christian faith that harm should come in actual obedience to the Lord's command.

CONCLUSIONS.

1. We are unanimously of opinion that in normal circumstances there are no grounds for so radical an innovation upon the custom of the Church.

2. We lay emphasis on the phrase "in normal circumstances." It is our obvious duty, even in this most sacred act of our life, to take what reasonable precautions are suggested by medical science. And in cases of known and obvious infection, whether in sanatoria for specific diseases or in the case of an individual sufferer, we are not prepared to press the use of the Common Cup. In these cases we suggest that the precedent, afforded through many centuries, of the Holy Orthodox Church of the East, where intinction is the custom, i.e., the conveying of the wine to the Communicant by means of a portion of the Consecrated Bread dipped in the Chalice is worth considering. This method represents a far less considerable innovation upon ancient custom, and moreover, has the advantage of Catholic precedent.

this is best intinction

3. In conclusion we would urge that in a matter of this kind which affects not only the hygienic ideas but also the tenderest religious scruples of many of our people, recourse should be had to the advice of the Bishop in every case before changes are made.

As the conclusions here reached follow those of the Lambeth Conference of 1908, we herewith append the report of the Committee of that body appointed to consider the matter, a report which was endorsed by resolution of the whole Conference:—

"Your Committee, having received the help of important testimony with high medical authority, believe that, save in extraordinary circumstances, the risk of infection being conveyed by the chalice is far less than that which is constantly and unhesitatingly incurred in the circumstances and intercourse of daily life. As scientific investigation discloses more and more of the multitudinous possibilities of disease besetting human life under its present conditions, there is need to hold a middle course between carelessness on the one hand and panic or a paralysing solicitude on the other; and freedom or ease of mind in social life would be almost impossible if men were to recoil from every risk of infection which can be suggested to them. Your Committee believe it is not necessary, on the ground of any dread of such risk, to make any change in the received manner of administration; that it would be unwise to recognise and encourage by such a change an alarm which should be met by the exercise of common sense.

"In special cases, where exceptional circumstances seem to require a departure from the usual manner of administration, your Committee advise that counsel and direction should be sought from the Bishop of the Diocese."

ST. CLAIR BRISBANE,

A. NUTTER ADELAIDE,

JOHN D. BENDIGO.