



**BILL 84,
AN ACT TO AMEND VARIOUS ACTS WITH RESPECT TO MEDICAL
ASSISTANCE IN DYING**

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Presented to:

**THE STANDING COMMITTEE ON FINANCE AND ECONOMIC
AFFAIRS**

Submitted by:

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PRESENTATION TO THE STANDING COMMITTEE ON FINANCE AND ECONOMIC AFFAIRS

RE: BILL 84 - AN ACT TO AMEND VARIOUS ACTS WITH RESPECT TO MEDICAL ASSISTANCE IN DYING

Introduction

REAL Women of Canada is a non-partisan non-denominational women's organization, federally incorporated in 1983. The members of REAL Women of Canada come from all walks of life and from differing economic, social, cultural and religious backgrounds. We are united by our concern for the family, the basic unit of society.

REAL Women of Canada promotes the equality, advancement and well-being of women, recognizing their contribution as interdependent members of society, in the family, the workplace and the community.

Concerns About Bill 84

1. No Protection for the Conscience Rights of Physicians

The Supreme Court of Canada, in its decision to legalize physician-assisted suicide, *Carter v. Attorney General* (2015), stated that, "Nothing in this declaration would compel physicians to provide assistance in dying". However, the subsequent federal legislation on assisted suicide makes no reference to the conscience rights of physicians in regard to this procedure. Instead, the federal legislation left this controversial issue to the provinces. REAL Women of Canada is deeply concerned that Ontario Bill 84 does not provide any provision to protect the conscience rights of physicians. This is a devastating omission. The province appears to have uncritically accepted the position of the College of Physicians and Surgeons of Ontario (CPSO) to compel physicians to participate in assisted-suicide or to make an "effective referral" of a patient to another healthcare provider, regardless of the physician's conscience rights. This latter provision makes the physician complicit in the act.

The failure to provide for conscience rights protection of physicians serves only to normalize the killing of patients by assisted suicide as it indicates that it is merely a standard medical procedure without moral consideration. This is a reversal of the Hippocratic Oath, which provides that physicians "do no harm" to patients. This principle has been upheld by physicians over many centuries.

No other foreign jurisdiction that has legalized assisted suicide requires an effective referral, nor have eight Canadian provinces made effective referral a requirement.

Yet, freedom of conscience is enshrined in the Canadian Charter of Rights and these rights should be respected, especially in regard to matters of life and death.

As every family is different, every individual and every physician is different. Individual views and opinions, which are reflected in an individual's conscience, contribute to the broad diversity which comprises the mosaic of Canadian society. It is a concern, therefore, that although Bill 84 provides immunity for those wishing to participate in assisted suicide, it provides no immunity for those who do not wish to participate in it. This is discriminatory and a denial of equality for those physicians who, for conscience reasons, do not want to facilitate the killing of their patients. Moreover, no physician should be exploited by someone else to be forced to become a tool to serve that person's personal objectives, especially in regard to an act that the physician regards as wrong and evil. The CPSO Regulation has made it mandatory that there be "effective referral", i.e. participation in the deliberate termination of life. Such coercion does not erase the moral responsibility of the physician, nor does it extinguish his/her personal culpability for this wrongful act.

REAL Women of Canada strongly urges an amendment to Bill 84 in order to provide protection for the conscience right of physicians/nurse practitioners.

2. Reporting Assisted Suicide to the Coroner

Bill 84 provides that, after the fact, a physician or nurse practitioner, who provides medical assistance in dying, notify the coroner of this occurrence, and provide any information about the facts and circumstances relating to this death, if requested by the coroner. Experience from other jurisdictions that have permitted assisted suicide, indicate that such reporting is a completely unreliable source of information since it provides an excellent opportunity for cover-up. It is critical, therefore, that Bill 84 be amended to provide for an advance review by a third party of the decision to provide assisted suicide prior to death, in order to ascertain whether the procedure has been properly complied with under the legislation. To review after the death has taken place is not helpful for the dead patient.

RECOMMENDATION

Bill 84 be amended to include a provision for an advance review by a third party prior to the assisted suicide procedure in order to ensure that the provisions of the legislation have been properly complied with.