

**Canadian Association of Social Workers' Submission to the
Standing Committee on Justice and Human Rights**

Concerning Bill C-14 (medical assistance in dying)

April 2016

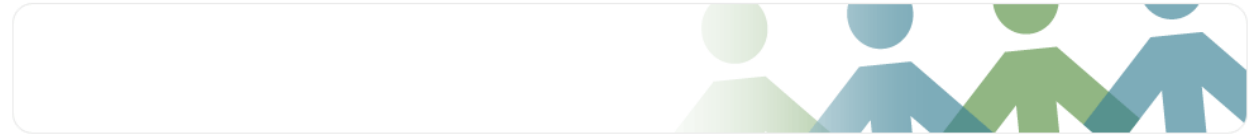




Founded in 1926 the Canadian Association of Social Workers (CASW) is the national association voice for the social work profession.

CASW has adopted a pro-active approach to issues pertinent to social policy/social work. It produces and distributes timely information for its members, and special projects are initiated and sponsored. With its concern for social justice and its continued role in social advocacy, CASW is recognized and called upon both nationally and internationally for its social policy expertise.

The mission of CASW is to promote the profession of social work in Canada and advance social justice. CASW is active in the International Federation of Social Workers (IFSW).



Concern

The Canadian Association of Social Workers (CASW) is pleased to be invited to submit this brief on Bill C-14, *Act to amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying)*.

To this end, CASW is concerned about the lack of clarity of the exemption for *persons aiding a practitioner* and *persons aiding a patient* under section 241 (1)(b) of the Criminal Code of Canada, specifically as to how this category may apply to social workers.

Furthermore, Bill C-14 focuses on the provision of medical assistance in dying while offering little insight into the process leading a person to this outcome. CASW is seeking further clarity on Section 241 (1)(a), specifically as to whether social workers who participate in client care leading to the decision to undergo medical assistance in death could be seen as “counsel[ing] a person to die by suicide or abet[ting] a person in dying by suicide,” and whether social workers are exempted in this regard.

Background

Although social workers will not be administering or providing a substance to cause death, they will certainly be involved during the process leading to the time of death.

As integral members of interdisciplinary care teams, and often as the only health, mental health, or helping professional available in some rural or remote contexts, social workers must be able to provide therapeutic counselling services, information, supports to clients and clients’ families and networks, and/or referrals to service on the subject of medical assistance in dying without fear of criminal consequence.

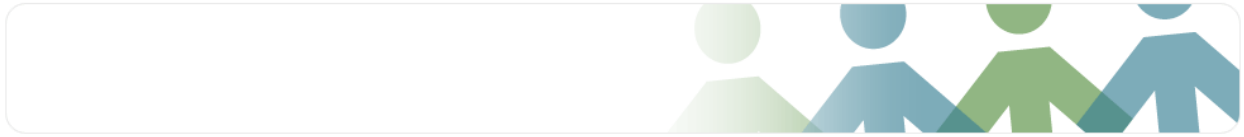
Social workers must be able to have candid discussions with clients on topics of the clients’ choosing to continue providing excellent care. Social workers have always engaged with clients addressing end of life concerns and must be empowered under the Criminal Code in this role.

Recommendation

CASW recommends that Bill C-14 be amended to add or alter the existing bill to provide an exemption for social workers who engage with clients on the subject of medical assistance in dying, whereas ‘engage’ is defined as the provision of therapeutic counselling services, information, supports to clients and clients’ families and networks, and/or referrals to service, so that:

No social worker who engages with a person on the subject of medical assistance in dying, whether preceding or following a person’s decision to pursue medical assistance in dying, is party to an offence under Section 214(1), paragraphs (a) and (b) of the Criminal Code and;

No social worker who aids a practitioner or patient by engaging with a person on the subject of medical assistance in dying is party to an offence under Section 241 (1)(b) of the Criminal Code.



Additional Resources

[Statement of Principles on Physician Assisted Dying](#) © 2015. Canadian Association of Social Workers.

[Physician-Assisted Death: Discussion Paper](#) © 2016. Canadian Association of Social Workers.