

Montréal, 17 November 2020

Standing Committee on Justice and Human Rights

House of Commons

Canada

Brief on Bill C-7

Hello,

I am a general practitioner physician. I am writing to you regarding Bill C-7, which deals with expanded access to medical assistance in dying.

I urge you to reconsider this bill or make the appropriate amendments.

Although individual rights are very important, they must have certain limits— as we have seen and applied in this pandemic—to protect other people, particularly the weak and vulnerable, as well as the vocation of the health system to care for all types of sick people. Even beyond COVID-19, there are reasonable limits to individual freedom: for example, you can't drink and drive, you can't smoke in an enclosed public space, etc. because you might harm others. Your government agrees with these limits, so it should maintain significant restrictions when it comes to MAID. The risk of vulnerable people being abused is likely to become even greater than it already is.

In 2013 I read a quote from 2009 when the UN was already concerned about the high and growing level of euthanasia being practised in the Netherlands. [TRANSLATION] “It's as if legalization increases permissiveness and tolerance of euthanasia among both doctors and some patients. In short, once institutionally and officially approved and practised, euthanasia develops its own momentum and resists all monitoring procedures aimed at containing it.”

And that is what we have seen: in just a few years, an increasing number of lethal injections being administered.

In early 2020, had it not been for public opinion and the media, which were alert that time, the Quebec government was prepared to make MAID available to people suffering only from mental health problems.

Despite the decision of the Quebec court in the Truchon/Gladu case, it is still possible for you to put a stop to the increasing validation of suicide, to the trivialization of the act of causing death, to the underestimation, discrimination and sometimes contempt for the lives of vulnerable people.

We really must keep the restrictions as tight as possible, as we were promised when medical assistance in dying was introduced.

Please consider voting **against** or **substantially amending** Bill C-7 with respect to:

- 1- Making it accessible to people who are not at the end of their life, and
The delays of only 90 days for them, whereas my patients have to wait much longer for real health care: mental health issues and chronic pain sometimes a year; home care, palliative care, geriatric care, to name but a few. Assisted suicide seems to be becoming more of a priority than real health care. This is unacceptable, even outrageous.
- 2- The lifting of the 10-day wait period for people at the end of life.
- 3- The change from requiring two independent witnesses to just one.
- 4- Removal of the requirement for competence at the time of MAID.

Please also consider adding a conscience protection clause for healthcare workers who have ethical objections to participating in any way in the killing of a patient, who with this expansion, would not even be at the end of life.

Let us retain as much of our humanity and true compassion as possible, see the value and dignity of each person regardless of their productivity, autonomy or distress, and provide good and timely care, not untimely death.

Thank you for your attention.

Sincerely,

Dr. Liette Pilon