

**A BRIEF PRESENTED TO JUSTICE COMMITTEE REGARDING  
AMENDMENTS TO BILL C-7**

## **INTRODUCTION:**

Bill C-7 is an act to expand Canada's Euthanasia Law and amend the criminal code (MAID) in light of the decision made by the Quebec Truchon court regarding MAID in their jurisdiction. The promised five year review of MAID was to begin in June 2020, but this amendment is proposed instead and goes further than the Quebec amendment. When making changes, it must be remembered that MAID was first introduced in Canada with much trepidation. Previous governments were reluctant to change laws to accommodate this challenge to the Hippocratic Oath "to do no harm" because it meant stepping onto a "slippery slope".

## **RED FLAGS PRESENT IN BILL C-7:**

Bill C-7 is wrong in several of its approaches:

1. Bill C-7 would allow MAID to be carried out in an incompetent person, if this person had made an advanced directive for MAID while still competent. The current law does not permit a doctor or nurse to give a lethal injection to an incompetent person. Only competent people are allowed to be euthanized with their consent, but the passing of Bill C-7 would reverse this ruling.
2. Bill C-7 would eliminate the ten day waiting period required before MAID can be carried out in a terminally ill person. In other words a terminally ill person requesting MAID can be euthanized on that day. If having a bad day, a person could make this request, not realizing that he or she might think differently the next day. A person's will to live can change with time. In such situations caregivers need always be ready to promote standard good medical care over MAID.
3. Bill C-7 removes the requirement that death be reasonably foreseeable. One does not have to be terminally ill to request MAID. Persons who experiences physical or psychological suffering in a way that is intolerable and for which they feel there is no acceptable treatment can request MAID. After a 90 day waiting period they can be killed by lethal injection. However, psychological suffering must be defined in a way that excludes mental illness from euthanasia, as this bill claims to prevent euthanasia in the mentally ill. This is an example of a very slippery slope where future amendments to MAID could expand to include persons with mental illness.
4. Bill C-7 would reduce the number of independent witnesses from two to one in each case of assisted suicide. If safety is important, it is essential to have more than one witness.
5. Bill C-7 devalues the lives of the vulnerable in society, especially the aged and those with disabilities. Some people have been coerced to accept MAID to save money for the healthcare system or to reduce workload for caregivers. They may be called selfish if they resist MAID. Holistic support is essential for persons in long term care. They must be valued and treated with dignity and respect. Standard good medical care must not be withheld to encourage death as has been reported in some cases. Conflict of interests must not stand in the way of compassionate and wholesome care.

## **ANOTHER CONSIDERATION:**

There have been cases of depression in nurses who must participate in MAID. In regards to MAID it is essential that freedom of conscience be protected. Medical professionals must not be forced to participate in procedures that go against their conscience and moral values, especially when their oath to do no harm is challenged by laws to do the opposite (end life).

## **SUMMARY OF RECOMMENDATIONS:**

1. Ask Justice Committee to focus on preparation of the five year review of MAID Law that was promised to begin in June 2020. There needs to be ongoing review of all deaths by MAID to determine noncompliance to guidelines and illegal deaths by MAID.
2. Continue to withhold MAID procedure from incompetent persons.
3. Continue ten day waiting period between application for MAID and date for MAID procedure in terminally ill patients.
4. Do not remove the restriction that death be reasonably foreseeable before an individual can be approved for MAID.
5. Continue to require that there be two independent witnesses for each case of MAID.
6. Respect the lives of all people including the elderly and the disabled and treat with respect.
7. Offer good and supportive medical care to all people in long term care institutions and hospitals. MAID should only be considered if the person asks for it. It must never be forced on an individual.
8. Respect and protect the conscience rights of all medical professionals and caregivers.