

## “Not the Canada I Want...”

The Supreme Court of Canada wants to change the rules against assisted suicide and euthanasia.

The Feb. 6, 2015 ruling has huge implications for health care and for our society.

### Here’s why we should all be concerned if Canada adopts state-sanctioned suicide and gives physicians permission to kill their patients:

- **No human being dies in a social vacuum.** Anyone who has been touched by suicide, for example, knows how the effects of one person’s death ripple through a community. Likewise, other people would be impacted by assisted suicide (providing the means for someone to kill oneself) and euthanasia (killing someone, such as by lethal injection, to end their suffering). What about the impact on the person who is responsible for ending someone’s life?
- **The solution to suffering is not to be killed, but to have proper pain management and proper support from the medical system.** Parliament passed a motion in 2014 calling for a pan-Canadian palliative and end-of-life care strategy. Now it needs to act on it. Timely access to universal, palliative care must be a priority.
- **The absolute ban on assisted suicide and euthanasia is the norm in all but a handful of countries, where the initial restrictions against abuse quickly eroded.** There is well-documented evidence of the abuse of euthanasia and of its expansion, showing that safeguards do NOT work.
- **Many doctors and other health professionals who want nothing to do with killing their patients will leave the profession, and many young adults considering a medical profession will choose another path if they are expected to become killers instead of healers.** This will compound the difficulties many communities already have in recruiting and retaining physicians. No health professional or organization should be obliged to participate in assisted suicide or euthanasia.
- **The natural process of dying might be recast as a process to be avoided, so that assisted suicide and euthanasia could become the norm.** Might there also be pressure to offer death to patients as a cost-saving measure?
- **How will the normalization of suicide affect suicide prevention programs?** What will happen if suicide, instead of being a tragedy to avoid, becomes an acceptable option, a right that we must uphold? Will people with disabilities be given the same suicide-prevention options and support that able-bodied persons receive, or will we just kill them?
- **People with disabilities merit protection against discrimination.** Instead, the Court’s decision entrenches the idea that



some lives are not worthy of living.

- **Elder abuse and neglect is already a problem in society** and could be extended to include pressure to request euthanasia or assisted suicide, becoming the duty to die.
- **All human life deserves respect and protection but many people will be put at risk: persons who are elderly, disabled, mentally ill, depressed, or who have dementia.**

What is initially considered a compassionate course of action could eventually evolve into eugenics.

- **The Court ruling states that a person need NOT have a terminal illness to request assisted suicide,** only a “medical condition” (including illness, disease or disability) that causes enduring suffering (physical or psychological) that is intolerable to that person. This throws the gates of assisted suicide wide open, forcing the state to agree to assisted suicide in every situation.

- **Patients already have the right to refuse medical treatments that they consider**

**burdensome.** They are not required to do everything possible to stay alive as long as possible. Also, giving patients enough medication to provide pain relief is not euthanasia, even if the higher dose might unintentionally shorten the person’s life. (The intent here is to reduce suffering rather than to hasten death, unlike assisted suicide and euthanasia whose intent is to make the patient die before his or her time.)

#### Do you want to live in a Canada that allows some people to kill others?

Do you want to live in a Canada that considers taking a life to be a positive good, a “service” to be performed at public expense and the state’s obligation to facilitate? That subtly or overtly pressures the most vulnerable among us to end their lives? That blurs the line between suicide and assisted suicide?

That pressures doctors to kill patients against their will and better judgment?

**This is an issue of public safety and of preserving our social heritage of caring.**

**What kind of world do we want to leave for our children and grandchildren?**

