

Presentation by Cardinal Thomas Collins, Archbishop of Toronto to Standing Committee on Finance & Economic Affairs re: Bill 84, Medical Assistance in Dying Statute Law Amendment Act, 2017 March 23, 2017

Good afternoon and thank you for this opportunity.

By way of background, I serve as the spiritual leader of the Catholic Archdiocese of Toronto, comprised of 2 million Catholics and 225 churches, with services celebrated each week in more than 35 languages.

Long before Canada was a country the Church, often under the leadership of religious sisters, created hospitals and other havens of care and comfort. To this day, in those institutions and elsewhere as well, doctors, nurses, and other health care workers continue to devote their lives to the healing vocation of medicine, motivated by their faith and by their profound personal reverence for the dignity of the human person.

It is sad that I and others need to come before you today to urge you to protect these devoted healers from the punishment which they face if they refuse either to administer a lethal injection to their patients or, in effective referral, to arrange for that injection to be administered.

We all know people who have experienced suffering throughout life, and especially as they come to the end of their life. As a society we must offer them relief by making high quality palliative care available to all.

As a community, we seek to do all that we can to offer hope to those contemplating suicide. Unfortunately, suicide is now recognized legally as a legitimate option; it is our challenge to offer the loving accompaniment and expert mitigation of physical pain that will demonstrate to a person who is suffering in mind or body that there is another path.

Although the term "Medical Assistance in Dying" is used currently as a harmless sounding expression to cover over the grim reality of assisted suicide, we obviously should provide appropriate medical assistance to people who are dying. Not long ago, my sister Patricia died from pancreatic cancer, and I am grateful for the loving care and control of pain offered by the doctors and nurses at the Guelph General Hospital who gave her medical assistance as she was dying. Death comes to us all, and we need not extend earthly life when it is ending. We need to offer love, and medical assistance to those who are dying. But that is utterly different from administering an injection which is designed to kill them.

When a person is in pain, the solution is to kill the pain, not to kill the patient; those guided by that principle need protection so that they can act according to their conscience. This is necessary because the College of Physicians and Surgeons of Ontario has decreed that those who refuse to perform a procedure that is against their conscience must arrange for it to be performed. That is an unjust dilemma: either do it, or make it happen.



Every other foreign jurisdiction that has legalized assisted suicide recognizes the radical moral conflict faced by doctors and nurses. These countries and states have ensured that health care professionals have robust conscience protection. Eight other provinces in Canada provide conscience protection. Yet Ontario, where it is particularly needed, refuses to do so.

In the past year, I have met with dozens of elected members of parliament at both the federal and provincial level. In the last two months, more than 20,000 letters have been sent to members of provincial parliament on this issue. But to me, most striking are the personal stories I have heard from countless devoted doctors and nurses who cannot, in good conscience, cause their patients' death. And we must think as well of medical students, who are the future of compassionate health care; already voices are being raised to screen out of the medical profession those who are not willing either to administer a lethal injection, or to arrange for it to be administered.

It is particularly troubling that while Bill 84 has a clause to ensure that we will protect the rights of doctors who will help to kill their patients, we do not provide any legal protection to those who ask not to participate in the act.

Many patients want to be cared for only by physicians and nurses who they can be sure are not willing to kill. We must not abandon those patients, by driving out or screening out such physicians and nurses.

I am appealing to you today to work across party lines with your colleagues to include an amendment that will provide robust conscience protection for those who do not wish to participate in or – which is the same thing - to arrange for the death of their patients. There are many examples for you to reflect on of the conscience protection that is in place in other jurisdictions which allow assisted suicide.

Let us strive to protect doctors, nurses, and all health care workers, who serve us so faithfully, and who seek to heal, and to ease pain, but who refuse to kill.