



Euthanasia Prevention Coalition

NEWSLETTER

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Bill C-384 coming up for a vote

Bill C-384 was introduced by Bloc MP Francine Lalonde on May 13, 2009 to legalize euthanasia and assisted suicide in Canada. This was her third attempt to legalize euthanasia and assisted suicide with her previous two attempts dying on the order paper, without going to a vote, after elections were called.

On October 2, C-384 received its first hour of debate. C-384 is tentatively scheduled to receive its second hour of debate on Nov 16 and it is tentatively scheduled to be voted on at second reading on Nov 18.

Steve Passmore, a disability rights advocate who was born with cerebral palsy, will be protesting C-384 near the steps on parliament hill while it is being debated in the house on Monday November 16. His protest will go from 10:30 am to 12:30 (noon).

Passmore protested while the first hour of debate was held in the House of Commons on October 2nd and is hoping that many people with disabilities and others will join his next protest.

We expect that C-384 will be defeated by a significant margin. We are not resting. We need to continue putting pressure on MPs in order to ensure that we strongly defeat C-384.

For your information:

We distributed more than 120,000 "Stop Bill C-384" postcards to our contacts across Canada. Some groups produced their own postcard campaign as well.

We heard from MPs that they received many letters from constituents. Keep it up.

We sent out nearly 300 information packages to supporters upon request.

Every MP received from us a package written by Washington State attorney Margaret Dore explaining how C-384 fails to protect people from elder abuse and fails to protect people with depression.

Every MP received from us a package written by Dr. Kenneth Stevens - Vice President of the Physicians for Compassionate Care, explaining how the Oregon government has been denying people life-sustaining medical treatment but offering them assisted suicide.

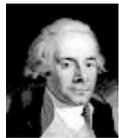
The Euthanasia Prevention Coalition is convinced that the debate over C-384 will provide the incentive for the government to create a new focus on improving end-of-life care in Canada. We support the efforts of palliative care expert Dr. José Pereira and the Canadian Society of Palliative Care Physicians to improve end-of-life care for all Canadians.

Wilberforce Weekend - November 13-14, 2009

The Euthanasia Prevention Coalition and the Manning Centre for Building Democracy are organizing a non-partisan Wilberforce Weekend strategy seminar in Ottawa - November 13-14, at the University of Ottawa - Jack Turcott hall - 85 University St.

The purpose of the weekend is to bring people together from differing backgrounds to examine the strategies that William Wilberforce employed to outlaw slavery in England. We will then examine the issues of euthanasia and assisted suicide within a Wilberforce framework.

This is a national seminar to explore, enhance and transform cultural and public policy advocacy on behalf of people with disabilities, those who are chronically ill, dying, or otherwise medically at risk.



Wilberforce

The registration fee is \$99. We are encouraging every concerned supporter, people with disabilities, and students to attend the seminar.

Hotel Accommodations have been arranged with the Novotel Hotel - under

For more information about the Wilberforce Weekend, go to www.euthanasiaprevention.on.ca

the title Wilberforce Weekend, Booking Order #15981, call: 613-230-3033.

For those who are unable to attend this important seminar, please consider making a \$99 donation to enable a person with a disability or a student to attend.

We are also seeking donations of \$100, \$500, or \$1,000 to help pay the cost for translation and recording.

Please join us in our quest to build a stronger and more diverse coalition of groups and individuals who oppose euthanasia and assisted suicide.

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Royal Society of Canada stacks the deck on research team to study euthanasia and assisted suicide

On October 27, The Royal Society of Canada (RSC) announced the formation of an “expert panel on end-of-life decision making” that is composed of 6 academics who will study the issues and release a report in the Spring of 2011.

The members of the panel on end-of-life decision-making are:

Udo Schuklenk (chair) - Ontario Research Chair in Bioethics, Jocelyn Downie – professor and Research Chair in Health Law and Policy, Sheila McClean - University of Glasgow, Johannes J.M. van Delden - Chair of the Ethical Commission of the Medical Council of the Royal Netherlands Academy of Arts and Sciences, Daniel Weinstock - Canada Research Chair in Ethics and Philosophy, Ross Upshur - Canada Research Chair in Primary Care Research.

Wesley J. Smith, a consultant to the International Task Force on Euthanasia and Assisted Suicide, writes in his blog, under the title “Stacking the Deck for Euthanasia in Canada” (go to <http://www.firstthings.com/blogs/secondhandsmoke/>):



“Stories such as this never seem to look deeper than the job titles of the panelists, as if they come to their work with no preexisting positions. So, I decided to check, starting with Udo Schuklenk. What a surprise: He’s a pro euthanasia philosopher. How do I know?”

He’s said so. For example, in an essay explaining why he is an atheist, he wrote:

“No matter how unbearably patients suffer due to illness or injury toward the end of their lives, the world’s monotheistic religions stand as one in their rejection of many dying patients’ requests to end their lives in dignity. That we may well be of sound mind, and that there is no prospect of our condition improving, makes no difference to their stance. Our own considered judgment that life is not worth living any longer counts for nothing to organized monotheistic religions. According to them, we are not ethically entitled to ask for physician assisted suicide or voluntary euthanasia. This is surprising, given that at the end of our natural lives churches have promised us that we would be going to heaven – or hell, as the case might be. If at the end of a decently lived life we would go to heaven and enjoy eternal life, why are they fighting our earthly death so vigorously? None of this makes any sense at all if we take religious beliefs about our afterlife seriously. Once again substantial, avoidable human suffering is a direct consequence of religious interference with our end-of-life decision-making.

“I don’t care about his religious views, but to chair a panel

with such a clear view in favor of assisted suicide, indicates the direction in which the commission’s recommendations are expected (designed) to go.”

Jocelyn Downie is a well-know advocate of assisted suicide. She holds a Canada Research Chair in Health Law and Policy, and is a Professor, Faculties of Law and Medicine, Faculty of Law, Dalhousie University. She is the author of *Dying Justice*, a book urging the legalization of euthanasia and assisted suicide in Canada.



Members of the Euthanasia Prevention Coalition will remember the reports that we have published on Downie.

In September 2006, she spoke at the World Federation of Right to Die Societies Conference in Toronto where she explained how to legalize euthanasia and assisted suicide in Canada.

In March 2007 Downie made a presentation at Carleton University in Ottawa where she explained that Canada needs to legalize euthanasia and assisted suicide. She said that the only safeguards that could withstand judicial scrutiny - Canada’s charter of rights and freedoms are those that ensure that a person is competent and freely choosing.

She also stated at the Carleton presentation that she had designed the “Rodriquez 2” case. She believes that the current Supreme Court of Canada would decide in favour of Sue Rodriquez if a similar case came before the courts today. In 1993 the Supreme Court of Canada decided (5-4) that Sue Rodriquez did not have a right to assisted suicide. She said that she was looking for a person for her case.

Earlier this year, Downie gave a one-sided presentation in Ottawa on behalf of the Canadian Institutes of Health Research (CIHR), a government agency, urging the government to legalize assisted suicide in Canada. She stated that she has created the “perfect law” to legalize assisted suicide in Canada and was hoping to find an MP who would present her bill in parliament.

Several MPs attended the CIHR event in Ottawa. After the event these MPs sent their concerns to the CIHR and the government wondering why a one-sided presentation would be funded by the Canadian government.

Why is Downie, a CIHR government funded chair, allowed to influence the Canadian government in a partisan manner?

Sheila McClean is a Scottish philosophy professor. She wrote *The case for Assisted Suicide*, a book described as arguing fervently in favour of legalizing assisted suicide.

Johannes J.M. van Delden is also known for his support of the Dutch euthanasia program.

It seems clear to us that the Royal Society of Canada is not interested in research from a non-biased point of view. By appointing committed euthanasia activists to its expert panel, it has created a panel whose sole purpose is to provide recommendations for the legalization of euthanasia in Canada and possibly world-wide.

Switzerland considers implementing restrictions to assisted suicide - possibly banning suicide tourism

Numerous articles in the mainstream media have shown how the Swiss law that allows assisted suicide is out-of-control and causing a concern for the Swiss government.

On October 28, Reuters reported that the Swiss government is looking to change the assisted suicide law to make sure that it is only used as a “last resort” for terminally ill people and that they would like to limit “suicide tourism”.

The issue of suicide tourism has become embarrassing for the Swiss due to the large number of high-profile suicide tourists from the UK, some of whom are not terminally ill, but simply tired of living and some cases were people who appear to be depressed.

The recent Canadian case of the couple from British Columbia who were seeking permission to die together at the Dignitas clinic in Switzerland was particularly distressing. The husband had a chronic health condition and his wife was perfectly healthy.

The Swiss Justice Minister stated at a news conference in Berne, “We have no interest, as a country, in being attractive for suicide tourism.”

A heated debate on the issue of suicide tourism has erupted in Switzerland due to the rise of suicide tourism and due to a study last year that indicated that many of the people who go to Switzerland for assisted suicide are not terminally ill.

The Swiss cabinet is divided on the issue. In response to their concerns they have made two proposals for a consultation that will continue until March 1, 2010. The first proposal

is to tighten regulations and the second proposal is an outright ban on suicide tourism.

The Swiss Justice Ministry stated that the government did not want to change the law but assisted suicide groups have increasingly tested the boundaries of the law creating an urgent need for guidelines.

Assisted suicide groups Dignitas and Exit have opposed the government proposals and have stated that they will seek a referendum on the topic if the law is tightened or if “suicide tourism” is banned.

The proposal to ban suicide tourism is based on the concerns of the Justice Ministry that “... individuals working in assisted suicide organisations are never actually motivated by purely altruistic reasons, and may develop a close relationship with the suicidal person.” They added, “Suicide must only be a last resort. The government believes that the protection of human life must be uppermost.”

The government has stated that they want to promote palliative care and suicide prevention.

The Euthanasia Prevention Coalition is hopeful that the Swiss government will restrict assisted suicide. Some media reports have indicated that the Swiss government might severely restrict assisted suicide, but the actual quotes from the Swiss government indicate that they want to eliminate “suicide tourism” and restrict assisted suicide to people who are terminally ill.

Nonetheless, this is a step forward.

Connecticut Court Challenge

On October 7, 2009 - Compassion & Choices filed a lawsuit to legalize assisted suicide in Connecticut. The suit was filed on behalf of Dr. Gary Blick of Norwalk and Dr. Ron Levine of Cos Cob.

Connecticut law states that a person is guilty of manslaughter in the second degree when that person intentionally aids another person to commit suicide.

Compassion & Choices states that the Connecticut law does not apply to “Aid in Dying” because the person who the physician aids is mentally competent and terminally ill. Their primary argument is that “Aid in Dying” is not suicide and therefore the act of “Aid in Dying” does not violate Connecticut law.

The lawsuit is based on a redefinition of language.

The fact is that “Aid in Dying” is essentially a contrived terminology for euthanasia and assisted suicide.

At the World Federation of Right to Die Societies Conference in Toronto - September 2006, Steve Hopcraft, a leader of Compassion & Choices, in his presentation entitled “Unifying Messages in a Polarized World,” explained how language was important to convince the culture to accept assisted suicide.

Hopcraft showed us the results from Focus Groups and Polling that proved that use of the terms “Aid in Dying” or “End of Life Choices” provide the euthanasia lobby 15% more support than using the term assisted suicide. The term “Aid in Dying” received the strongest support from focus groups.

Hopcraft then explained how they had failed to get the media to accept the term “Aid in Dying” during the California campaign. He made it clear that success will come when medical groups and the media begin to use the term “Aid in Dying” rather than assisted suicide.

Compassion & Choices chose Con-

necticut because of the previous activist judicial decisions that have been made.

It is important to remember that if assisted suicide is determined to be different than “Aid in Dying” then every state that has an assisted suicide statute, including Canada, will face a similar legal challenge that Connecticut is facing.

Euthanasia Prevention Coalition needs you

We are looking for people who are willing to focus primarily on the issues of euthanasia and assisted suicide. We need people from across Canada who are knowledgeable or willing to become knowledgeable about the issues. We also need people who are willing to write letters to the media or politicians and/or help organize a wider opposition to euthanasia and assisted suicide in general. Our work has become significantly important to our culture. Contact us: 1-877-439-3348 or info@epcc.ca

Mom charged with first-degree murder in the death of her autistic son

A Mississauga woman has been charged with killing her 15 year-old autistic son.

The *Toronto Sun* reported on October 26 that “the body of Tony Khor was found after police were called.

“Const. J.P. Valade refused to say who called police, but sources confirmed the woman called authorities, saying the boy was dead.

“Valade said the suspect and her husband had a domestic argument Saturday night. While she wasn’t physically hurt, she apparently felt that she needed to leave the home and she booked a room at the hotel for her and her son, he said.

“‘Sometime between (Saturday) evening and (Sunday) morning,’ the teen was killed, Valade said.

“Police said there were signs of trauma on the boy’s body, but didn’t release any details.

“Homicide detectives allege the boy’s murder was premeditated and charged the boy’s mother with first-degree murder.

“Police didn’t reveal the severity of Khor’s autism. The family is not known to police and Khor is the couple’s only child, Valade said.”

Comment by Alex Schadenberg, executive director, Euthanasia Prevention Coalition:

A similar incident happened more than a decade ago in Montreal where Charles Blais, an autistic boy, was killed by his mother. Blais’s mom was charged and prosecuted, but was given a suspended sentence.

These cases are particularly distressing because the autistic son will normally completely and totally trust and depend on his mother.

My fourteen year-old son is autistic and I feel particularly connected to cases where the parent of an autistic child injures or kills their child. I understand the challenges in raising an autistic child and I do not claim to be a perfect parent but the thought of killing an autistic child is abhorrent.

We cannot make a judgement on this case without further information. It is possible that Khor’s mother was experiencing mental stress, but even if that were true the court should not consider autism as a mitigating factor but rather society needs to extend special legal protection to people with disabilities because of their vulnerable nature.

Environics poll shows that Canadians want better end-of-life care, not euthanasia

An Environics group poll of 1,014 Canadians conducted between October 6-13 found that while 61% supported the legalization of euthanasia, 69% of the respondents stated that the Canadian government should make palliative/ hospice care a greater priority as compared to 18% who thought that the legalization of euthanasia was a greater priority.

The Environics poll was commissioned by several groups that included the Euthanasia Prevention Coalition.

The poll asked four questions.

The first question asked the respondents their degree of support for legalizing euthanasia.

61% supported — 25% strongly supported, 36% somewhat supported.

The strongest support for legalizing euthanasia was in Quebec - 75%. This response was similar to our last poll.

The second question asked respondents if they were concerned about the elderly feeling pressured to accept euthanasia.

56% were concerned — 30% very concerned, 26% somewhat concerned.

The third question asked respondents if they were concerned that sick/disabled/elderly people would be euthanized without their consent.

70% were concerned — 41% very concerned, 29% somewhat concerned.

It is interesting that 55% of those who strongly supported and 72% of those who somewhat supported the legalization of euthanasia were concerned that people will be euthanized without consent.

The last official report from the Netherlands (2005) showed that 550 people were euthanized without consent that year.

The fourth question asked respondents whether the government should have a greater priority on palliative/ hospice care or legalizing euthanasia.

69% stated that palliative/hospice care should have a greater priority while only 18% thought that legalizing euthanasia was a greater priority. 5% thought that both should be a priority while the others did not know.

Even people who strongly supported the legalization of euthanasia were more supportive of palliative/hospice care (43%) than legalizing euthanasia (38%).

Similar to previous polls, this poll shows that Canadians do not strongly support euthanasia and they are more concerned about abuses related to legalizing euthanasia and they are far more supportive of improving end-of-life care than legalizing euthanasia.