

Briefing Notes on Euthanasia and Assisted Suicide: Bill C-14 and Conscience Protection for Institutions

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Many faith-based institutions provide senior care, extended care and hospice care. The care they offer is an expression of the deeply held beliefs of the communities that provide the care.

- To compel institutions to facilitate or allow assisted death on their premises denies the beliefs that animate their compassion.
- Health care professionals, staff and the administrators of these facilities should not be compelled to participate in or facilitate assisted death.
- These facilities should be able to obtain an exemption if Parliament proceeds with legislation on euthanasia and assisted suicide.

In [Bill C-14](#), proposed new legislation on euthanasia and assisted suicide, the government references a commitment to develop non-legislative measures that would respect the personal convictions of health care providers. In the House of Commons, on [April 22](#), the Minister of Justice indicated one of these measures would be an end-of-life care coordination system for linking patients with willing providers. The EFC supports a central referring agency as a means of facilitating conscience protection for practitioners. However, the bill does not mention objecting institutions or provide conscience protection. **We believe it is crucial to have conscience protection enshrined in Bill C-14.**

The EFC is asking for Bill C-14 to be amended to include provisions to protect the conscience of medical practitioners and institutions, as well as clear statements on the importance of conscience protection in the Preamble. For more information, go to www.evangelicalfellowship.ca/EuthanasiaUrgentAction.

The [Special Joint Committee on Physician-Assisted Dying](#) studied physician-assisted death this winter and recommended that the government work with the provinces and territories to ensure that all publicly funded health care institutions provide medical aid in dying, in spite of hearing clearly expressed testimony on the need for conscience protection for institutions.

Cardinal Collins, Archbishop of the Archdiocese of Toronto, told the committee on [Feb. 3](#):

“I think it's very true to say that institutions are not bricks and mortar..... They're not things; they're communities of people. They have values, and that's why people come to them. That's why they seek them out.”

“These institutions are funded by the government because they do immensely good work. ... If you undermine the institution for what it is, our society will be very much harmed. Our whole community would be a lot harsher, colder, crueller, without the witness given by communities of faith who are on the ground, on the street, day by day, caring for the most needy. I don't think they should be undermined or attacked.”

The **Salvation Army**'s [brief](#) to the committee states:

“Permitting some facilities to be exempt from providing physician-assisted death will not limit access in a meaningful way. Rather, allowing for institutions to be exempt will offer protection to the conscience, morality and beliefs of patients, health-care providers and organizations who do not wish to engage with physician assisted death. We note that several other jurisdictions such as Washington and Oregon offer health facilities or health care providers the option to decline from participating in physician assisted death.

The **Supreme Court of Canada**'s 2015 decision in the [Loyola](#) case strongly affirmed the communal nature of religious practice. The majority decision stated:

“Religious freedom under the *Charter* must therefore account for the socially embedded nature of religious belief, and the deep linkages between this belief and its manifestation through communal institutions and traditions.”

In the minority decision, the remaining three judges stressed the communal nature of religion. They argued that the religious freedom of individuals requires that the religious freedom of religious organizations be protected.

“The individual and collective aspects of freedom of religion are indissolubly intertwined.”

“The communal character of religion means that protecting the religious freedom of individuals requires protecting the religious freedom of religious organizations...”

The majority of the Supreme Court, in the 2015 decision in [Mouvement laïque québécois v. Saguenay](#), stated:

“A neutral public space free from coercion, pressure and judgment on the part of public authorities in matters of spirituality is intended to protect every person's freedom and dignity, and it helps preserve and promote the multicultural nature of Canadian society.”

In any regime allowing physician-hastened death, the conscientious objection of institutions must be protected.

A failure to respect the conscientious objection of institutions would violate fundamental conscience and religious beliefs. It would also put institutions offering much-needed services in the difficult position of choosing between violating their deeply-held beliefs or closing their doors.