

# What it means to be human lies at heart of assisted-death debate

Some of us believe that life is a God-given gift given by God, which we have a sacred duty to protect, while others believe that each person's life is their own property, to do with as they wish. And when it comes to life and death decisions, the question is: can both beliefs be accommodated in a modern, publicly funded health care system?

That question was at the centre of a Jan. 13 forum at the University of Calgary, titled "Public Health, Public Money, Private Morals?" The forum, sponsored by the Rocky Mountain Civil Liberties Association, focused mainly on the issue of physician-assisted death, a practice that is not allowed in Catholic facilities operated by [Covenant Health](#) in Alberta and many other faith-based institutions.

Although organizers said the association had no stand on the issue, both the panellists and the audience of about 70 were clearly weighted in favour of assisted death, which was legalized in Canada in June 2016 following a Supreme Court of Canada ruling. Quebec is the only province where all hospitals are compelled to offer medical assistance in dying (MAID.)

Panellist Kent Donlevy, a lawyer and University of Calgary professor with expertise in constitutional, human rights and educational law, said he was happy to debate the issues as a concerned member of the Catholic community.

"I want to thank them very much for inviting me, because otherwise you would be sitting in an echo chamber – not a good thing for discussion in a free and democratic society," he told the group.

Speakers on the other side included Gary Bauslaugh, a Victoria humanist and writer who authored a book on the [Robert Latimer mercy killing case](#), and June Churchill, a retired clinical social worker who is active in the Calgary chapter of [Dying with Dignity](#).

"People want to die, and they want help to make the process a painless and graceful one," said Bauslaugh. The problem is that some people, such as Catholics, believe in a God who tells them that's wrong.

The Catholic Church, he said, is largely responsible for interfering in "what is essentially an act of mercy," because of its teachings on the nature of the human person.



Gary Bauslaugh is a Victoria writer known for his book on the controversial Robert Latimer 'mercy-killing' case.

"The most persistent, intractable and difficult of all of them is the notion that life is sacred, that it comes from God, and only God can meddle with it," he said.

"It has had a strong influence on many public policies, and it's always there when any public discussion about ownership of our lives arises."

It was strong lobbying by the Catholic Church after the [2015 Carter decision](#) and before the legislation was written that resulted in a "much weaker bill than the court had intended," Bauslaugh said.

"One can only be saddened by the medical practitioners who claim the moral high ground and refuse to participate in assisted death. What of human compassion, what of mercy?"

Donlevy dismissed that argument.

"No one in their right mind would say that the Catholic health services are not compassionate, that they don't show mercy. That's just not on the table, in this forum or anywhere else," he said. "Before government got on board, it was the Catholic Church, and the other churches, who took care of the poor and the indigent.

"To say that these religious services don't have compassion and don't exhibit mercy is fallacious. It's wrong."

"The most vulnerable people in society demand compassion, demand mercy, and I would agree with that," Donlevy said. "But also the individual who has certain ideas about freedom of conscience and freedom of religion has to be taken care of. It's through respectful dialogue that we can work together to help each other."

He also criticized the argument that belief in the sacred nature of life is not based on reason.

“After all, it was reason that gave us forced sterilization in Alberta. That was reasonable, so reasonable that the people of Alberta passed the legislation,” Donlevy said. “I don’t trust the government, and I don’t trust idea that says only reason should apply.

“It’s the anthropological difference in what it means to be human that leads us to some differences. So somehow we have to learn to work out our differences in a society without claiming that there is only one best way.”

“Those who believe they have a right to die have no right to say to somebody, ‘your freedom of conscience means nothing in this society and your freedom of religion means nothing.’”



June Churchill, a retired clinical social worker, is active in the Calgary chapter of Dying with Dignity.

Churchill argued that allowing individual doctors and faith-based institutions to refuse to participate in ending patients’ lives is “unconscionable,” because it forces medically frail people to be transferred to another facility as many as five times.

Donlevy disputed that, noting that a patient at a Covenant Health facility who asks for medical assistance in dying (MAID) will receive information about all the treatment options, including MAID.

And if they want to proceed, a “navigator” from Alberta Health Services may be called in to arrange medical assessments to determine whether the patient is eligible under the requirements of the federal law.

If they are eligible, it is AHS that arranges the transfer to another facility.

“Who would want to see a critically ill person moved just to receive an

assessment?" Donlevy asked. "That does not happen in Covenant Health facilities. Covenant Health provides for assessment within its institutions. It would be unconscionable to send them away for that, because after the assessment, that person may change their mind, and why would you want to do that?"

Covenant Health officials estimate that between 75 and 80 per cent of patients who express interest in medically assisted dying end up not pursuing it.

Most die of natural causes, or because they change their mind or lose decision-making capacity.

For her part, Churchill urged audience members to sign a new online petition sponsored by Dying with Dignity, calling on Canadian premiers to ban all transfers of patients in these cases.

"Now is the time, whether you are for or against, to let your wishes be known for the rights of patients," she said.



**MLA Dr. David Swann (Liberal), represents Calgary-Mountain View.**

David Swann, a physician and Liberal member of the Alberta legislature, was another panellist. In the house he has questioned whether having a separate a separate board and senior administration for Catholic health facilities is the best use of taxpayer funds.

But after hearing Donlevy point out that Covenant Health regularly meets or exceeds standards within the budget set by Alberta Health Services, he appeared to have second thoughts. "My argument isn't as strong when you can say that we're actually getting more value in one system than the other."

Donlevy described Alberta's Catholic health facilities as "a wonderful example of a very competent, caring, ethically driven service provider to the people of Alberta."

"Covenant serves the Alberta community as it has always served its mission,

which is to continue the healing mission of Jesus Christ by serving with compassion, upholding the sacredness of life in all its stages, and caring for the whole person – mind, body and soul. Covenant takes very seriously the words, ‘I was a stranger and you invited me in...I was sick and you looked after me.’” (*Matthew 25:35*)

Some Alberta numbers:

- 268 people have died with MAID since legislation passed in 2016
- 42 patients have been transported from faith-based facilities to those that provide MAID, and 5 transferred from non-faith-based facilities
- 17 hospitals and care centres are operated by Covenant Health
- 1 out of 5 Alberta babies are born at a Covenant Health facility
- 1 in 10 emergency visits are dealt with at a Covenant Health facility
- Covenant Health operates 119 palliative care beds and 254 beds for mentally ill patients.