



Canadian Unitarians for Social Justice

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www.cusj.org

LOBBYING YOUR MP ON *MEDICALLY-ASSISTED DYING*

LOBBY YOUR MP: Please don't forget to take a picture of you and your MP and send it, as well as your meeting's findings on page 3 to: webeditor@cusj.org.

INSTRUCTIONS

Thank you for volunteering to meet with your Member of Parliament (MP) on *medically-assisted dying*. Unitarian Universalists have been involved in the struggle for the right to die with dignity in Canada for decades. With 2015 [Supreme Court decision](#) (*Carter v. Canada*) and subsequent Trudeau Government Bill C-14, we may be finally near the finish line. Now is the time to talk to representatives!

Start by getting some local CUSJ members, UUs, or family or friends to agree to visit the MP with you (it's more fun as a group); then call and send email to your MP's office, like the one below, asking for a meeting.

- Your **1st objective** is to start a relationship with your MP. Start on a positive note by complimenting your MP on something they have said or done. Someone should take notes on page 3.
- Your **2nd objective** is to get the three points across (see POINTS TO MAKE).
- Your **3rd objective** is to gauge where your MP stands on medically-assisted dying (see page 3).
- Your **4th objective** is to keep in touch with your MP (a meeting in a few months) and with CUSJ letting us know the results of your meeting at webeditor@cusj.org.

Don't forget to thank your MP for their time, both at the end of the meeting and with a follow-up Thank You note. There is background information on this topic at www.dyingwithdignity.ca.

Email Requesting a Meeting (Find your MP using your postal code [here](#)!)

Dear [MP's NAME],

I'm writing as a constituent and as a member of Canadian Unitarians for Social Justice (CUSJ) to request a meeting with you. We would like to talk to you about Bill C-14 and medically-assisted dying.

In 2015 the Supreme Court struck down Canada's criminal prohibition on medical assistance for dying and imposed a deadline for Parliament to pass a new law. But Bill C-14 does not comply with the Court's ruling. If not amended, it will actually block Canadians with chronic degenerative diseases, and those who want to make advance requests for assistance in dying, from exercising their right to end of life choice.

We anticipate [NUMBER] of us will attend the meeting, myself, [LIST NAMES HERE]. As mentioned, I am / we are a member of CUSJ, a national faith-based social justice network that works to promote Unitarian values such as compassion, the right of conscience, and upholding the worth and dignity of all persons.

We appreciate you letting us know what date and time you might be available to see us.

Sincerely,

NAME,

PHONE NUMBER

POINTS TO MAKE:

1. Change the vague language in C-14 to comply with what the Supreme Court decided.

Bill C-14 only grants access to medically-assisted dying to those persons with a “terminal illness” and where natural death is “reasonably foreseeable.” This is very different from the rights established by the Supreme Court in the *Carter v. Canada* (2015) decision. Not only is the language vague, it excludes many who are suffering intolerably with incurable chronic conditions such as MS, Huntington’s Disease or ALS. According to the Court, the new law must make assisted dying a right for “*a competent adult person who (1) clearly consents to the termination of life and (2) has a grievous and irremediable medical condition (including an illness, disease or disability) that causes enduring suffering that is intolerable to the individual in the circumstances of his or her condition.*” According to the Supreme Court’s definition, ‘irremediable’ “*does not require the patient to undertake treatments that are not acceptable to the individual.*” Why not use the language the Supreme Court used, and comply with the Court ruling? C-14 risks being struck down as unconstitutional if passed as-is.

2. Give Advance Care Directives clear legal force.

Bill C-14, as written, stipulates that patients must be capable until the moment of assisted death. It allows no provision for Canadians to make advance requests for assisted dying, effectively discriminating against those with degenerative conditions such as dementia that take away mental capacity over time. Yet the Supreme Court did not restrict end of life choice from these Canadians in their ruling, instead choosing to remain silent on advance care instructions. Bill C-14 provides an ideal opportunity for legislators to provide a consistent legal status for Advance Care Directives across Canada, ending confusion and irregular compliance (even from one hospital, or doctor, to another) and the pointless family and patient suffering these cause. Moreover, Canadians who suffer from a degenerative illness, such as Alzheimer’s, will no longer feel they need to take their own lives unnecessarily early for fear that they will lose the capacity to do so on their own later.

3. Require referrals for patients to access end of life choice.

Nothing is said in either Bill C-14 or the Supreme Court’s *Carter v Canada* decision about the need for referrals for patients seeking to access end of life choice. Yet the fact remains that even a Canadian suffering with a grievous and irremediable terminal condition will be blocked from medical assistance in dying if their primary health care provider (in most cases, their doctor) conscientiously declines to assist them in dying – and also refuses to refer them to a medical practitioner who will assist them. This runs contrary to the spirit of the Supreme Court’s decision, if not the law. While all medical service providers should be able to decide their participation based on their conscience, this right should not infringe on the right of patients to access end of life choice. Bill C-14 again provides an opportunity to clarify the law on this before more unnecessary suffering and years of costly legal battles take place. The Parliament of Quebec passed Bill 52, ‘The End of Life Care Act’, which honours both a physician’s right to refuse assisted dying requests, and the patient’s right to a referral for access to end of life care.

<p>Name of MP: _____</p> <p>Party affiliation: _____</p> <p>Riding name: _____</p>	<p>Rank how important they think it is for people to be able to access medical help in dying: _____ Scale 0-4: 0=don't know ... 4=very important</p> <p>Rank how knowledgeable they are on the medically-assisted dying issue: _____ Scale 0-4: 0=don't know 1=ignorant ... 4=expert</p>
<p>APPRECIATION What has your MP done that you appreciate or noted?</p>	
<p>PARLIAMENTARY ACTIVITIES Parliamentary Committees? Relevant Legislation?</p>	
<p>POSITION</p> <p><i>Take notes on the back of this page</i></p>	<p>Check which positions they hold:</p> <p>q Medical assistance to end life should be illegal</p> <p>q Medically-assisted dying should only be an option:</p> <p> q for terminally ill patients with no hope of a cure</p> <p> q for those with “irremediable suffering” even if not terminally ill</p> <p> q for any competent adult</p> <p> q Other: _____</p> <p>q Advance Care Directives, even those mandating medically-assisted dying, should be legally enforceable</p> <p>q Support amending C-14’s eligibility criteria for medical assistance in dying to comply with the Court’s <i>Carter v Canada</i> decision</p> <p>q Require referrals for those seeking end of life choice</p> <p>q Other: _____</p>

