Canada's "MAiD" Exposes The Dangers Ahead

By Grace-Marie Turner*

We wrote earlier in this space about the dangers of assisted suicide and the leadership role that Catholic physicians must take in stopping these murders.

We only need look at what's happening in Canada to see the imperative for action.

Recent articles are exposing the risk from the country's increasingly permissive euthanasia law, which a growing number of Canadians say is encouraging the vulnerable to seek "medical death."

Tight budgets—often global budgets—already result in long waiting times for surgeries and other treatments, limited access to the newest and best medicines, and less investment in the newest technologies.

The statistics are frightening, and the human stories are tragic. Euthanasia "providers" are given significant power to make judgment calls about who should be helped to live and who should be helped to die.

"One of the greatest reasons for concern is the sheer scale of Canada's euthanasia regime," according to a report by Alexander Raikin in *The New Atlantis* about patients who believe they have "No Other Options."

A former trucker who suffers from a serious medical injury as a result of an earlier surgery told Raikin: "I really don't want to die. I just can't afford to live."

"It's not that they are terminally ill or truly beyond help, but that they can't get the help they need in the system right now, so euthanasia seems like the only way out," Raikin writes. "…the picture that emerges is not a new flowering of autonomy but the hum of an efficient engine of death."

The article explains that "California provides a useful point of comparison: It legalized medically assisted death the same year as Canada, 2016, and it has about the same population, just under forty million. In 2021 in California, 486 people died using the state's assisted suicide program. In Canada in the same year, 10,064 people used MAiD (Medical Assistance in Dying)."

Prime Minister Justin Trudeau argues that Canada strikes the balance between protecting the vulnerable and offering the option of allowing people to choose assisted death but "in a way that isn't because you're not getting the supports and cares that you actually need."

But news reports show otherwise. "A number of recent news articles have reported on Canadians who, driven by poverty and a lack of access to adequate health care, housing, and social services, have turned to the country's euthanasia system. In multiple cases, veterans requesting help from Veterans Affairs Canada—at least one asked for PTSD treatment, another

for a ramp for her wheelchair — were asked by case workers if they would like to apply for euthanasia," Raikin reports.

It is as though the movie *Soylent Green* is being lived out. One Canadian assessor, who determines whether people are eligible for euthanasia, says, "It's a very elegant, graceful, dignified death," eerily evocative of the claim in the movie.

"MAiD is the new society safety net," writes Ottawa-based journalist Rupa Subramanya.

"It had not been lost on government officials that MAiD could save them a good bit of money," citing several examples of researchers calculating the savings to the government from the euthanasia program.

"I do worry MAiD is an easy solution to bed shortages and the terrible lack of resources patients are facing," Dr. Ramona Coelho, a family physician in a suburb of Toronto, told Subramanya. She added that "the perverse disincentive that exists for administrators and governments with providing MAiD rather than care and resources to live can present a real danger to the lives of vulnerable or marginalized persons."

Every life is a gift from God, from beginning to end. Physicians who use their skills to euthanize vulnerable patients, or deny babies medical care when they are born alive after an abortion, are violating the most basic, most sacred ethics of their profession.

Physicians have great respect for other physicians and hopefully will listen to your voices in warning of the terrible dangers ahead.

**Grace-Marie Turner is a volunteer policy adviser to CHCLA.*