

Government Orders

arbitrarily extinguish life at any point along this continuum shows a contempt for human life itself.

Yesterday the Minister of National Health and Welfare stated that our societal values change with time. I agree that some societal attitudes may change with time. I submit and add that life and its protection are eternal values that do not change and ought not to change with time. In an enlightened society such as ours, it should be legally acknowledged that life cannot be surrendered, that a bad law can be amended. True, a bad law is worse than no law, but it is no excuse for not enacting a good law.

Let us send this bill to committee for further study, to test the constitutionality and other aspects that we would like to raise. We cannot allow this bill as is. It will lead to a legal conundrum. It will be an invitation to abuse and a prescription for disrespect for the rule of law.

It is not sufficient to focus only on the political and legal ramifications of abortion policies.

Canada should make childbirth a more attractive alternative. Any society that prohibits abortion and does not care for the needs and distress of the mother, child and family after birth, is hypocritical. By legislating to protect unborn human life, the dignity of all Canadians and indeed the dignity of all human beings will be affirmed.

Those who are protected at the most vulnerable moment of their lives will thank us for the courageous and principled stand we take, and our country will have benefited from our faith in the inherent worth and dignity of all human life. Canada must continue to care for people, for life, when it begins. I resolutely believe that my constituents in Winnipeg North, in fact all Canadians, believe in the sanctity of life. I am confident they will be with me when I exercise my solemn duty to vote to reflect the collective conscience of Canadians.

• (1750)

Mr. Friesen: Mr. Speaker, first of all I would like to tell the member how much I appreciated his remarks. I think that they were sensitive and well thought out, and I certainly agree with the body of them.

A few minutes ago when the member for Surrey North was speaking, he mentioned that the problem with this legislation was that the decision would not be made by a woman but by a doctor. I asked him whether there were any other medical cases where the patient decided what the treatment should be rather than the doctor. He answered: "Yes, lots of them".

Now since the member for Winnipeg North is a medical doctor, I would like to ask him if he agrees that there are many cases where the patient decides rather than the doctor what the treatment should be.

Mr. Pagtakhan: Mr. Speaker, I thought following my election to Parliament that I would not be giving any more medical opinion. Of course, I alluded to that in my speech. In response to the hon. member, the answer is no. The medical doctor, by the medical act, makes the decision whether or not to treat. If he or she does this in great error, he or she, as a physician, is subject to the medical malpractice suit.

My concern, in fact, about this bill is that because there are no limits it is possible that a physician, because of his philosophical conviction, may do other than what medical practice usually allows a physician to do. I am still a member of the medical profession, although I am on leave of absence from the university. I find it difficult that the Canadian Medical Association has taken a position by a vote during a convention that performing abortion ought to be left to the decision of the woman and the doctor, as though that is the ultimate criterion for care of the unborn child, for care of the pregnant woman.

It is established medical practice that the criteria for treatment of almost all conditions, with very few exceptions, are based on scientific evidence. It is never based on a popular vote. It is because of that that I am concerned that the absence of strict limits of how even my own medical colleague would interpret the provision law. The absence of that certainty would not let me support this bill as is, and I would like clarification during debate at the committee level.

Ms. Black: Mr. Speaker, I too listened carefully to the member's comments today, and I know that he speaks with true conviction. I respect his conviction and I certainly respect his right to hold the views that he holds. I have some empathy with his position.

The member is a medical doctor and he spoke about women who are pregnant, under a variety of situations,