

The same safeguards which the minority members recommended be applicable to assisted suicide, or even more stringent ones, would be required for the legalization of voluntary euthanasia. The report stressed — and I believe this very strongly — that before any debate takes place in Parliament on either a resolution or a draft legislation, a set of proposed safeguards and guidelines be formulated with the advice of the medical and other health professions and organizations, as well as people having experience and expertise in the area. The parliamentarians would then have an opportunity to recommend changes they felt necessary. They and the public could be assured how the regulations would be monitored and enforced, either at the federal or provincial levels. This preliminary measure would not commit the federal government to changing the existing laws, nor the medical and other health professions to approving changes, but it would give everyone a chance to assess the strength and security of the regulations which would be in place in case of change.

The committee did not have the time, nor did it receive sufficient advice from its witnesses to draw useful conclusions with respect to certain types of non-voluntary euthanasia. The committee has defined “non-voluntary euthanasia” as euthanasia done without the knowledge of the wishes of a competent or incompetent person. That particular category includes severely disabled neo-natal infants and persons in persistent vegetative states.

In those cases, doctors must decide if further treatment is futile because it will have no real benefit to the patient, but they can and do run into difficulties if relatives think otherwise. The same type of situation can occur when they try to determine what is in the best interest of a patient and relatives dispute the decision. The decisions might involve the withholding and withdrawing of treatment, which we know is acceptable when a competent patient gives his or her consent, but these cases involve incompetent people and someone else has to take responsibility for the act.

I understand the Canadian Medical Association has been studying these situations for some time in order to formulate protocols for decision making acceptable to its membership and, hopefully, to the public at large. I realize it is an extraordinarily difficult problem, but it is one for which the CMA must find an answer — and the sooner the better for all concerned.

• (2150)

The committee recommended that, if either voluntary or non-voluntary euthanasia remains a criminal offence, the

Criminal Code be amended to provide for a less severe penalty in cases where there is an essential element of compassion or mercy. That is a significant step forward.

Though I still cannot condone what Robert Latimer did, I think anyone who has read the full dispassionate account of the decisions which the Latimer parents had to make from the day Tracey was born, the almost interminable suffering which Tracey endured and they had to accept because there appeared to be no further medical miracles to alleviate their child's pain, will find the basis for the committee's decision to ask for lesser penalties in such cases. It must be a harrowing decision for any person to make, no matter how much compassion or mercy he or she feels, whether or not that other person requests it, because of that person's unrelievable suffering.

Finally, I leave you my personal message as one who believes in the right of a person to make choices concerning his or her own life, so long as they harm no one else. Other principles, such as respect for the sanctity of life or for our perceived societal values, surely do not include forcing any person to go on living beyond his or her human endurance. When you next debate assisted suicide and euthanasia, keep an open heart and mind. I wish you well.

Hon. Senators: Hear, hear!

Senator Neiman: Honourable senators, I move the adoption of the report of the Special Senate Committee on Euthanasia and Assisted Suicide.

Motion agreed to and report adopted.

TRANSPORT AND COMMUNICATIONS

NINTH REPORT OF COMMITTEE ADOPTED

The Senate proceeded to consideration of the ninth report of the Standing Senate Committee on Transport and Communications (budget—examination on Canada's international competitive position in telecommunications), presented in the Senate on June 21, 1995.—(*Honourable Senator Oliver*).

Hon. Donald H. Oliver moved the adoption of the report.

Motion agreed to and report adopted.