

tion, or status, abortion is becoming accepted by society as moral, right, and even necessary. It is worth noting that this shift in public attitude has affected the churches, the laws, and public policy rather than the reverse.

Since the old ethic has not yet been fully displaced, it has been necessary to separate the idea of abortion from the idea of killing, which continues to be socially abhorrent. The result has been a curious avoidance of the scientific fact, which everyone really knows, that human life begins at conception and is continuous whether intra or extra-uterine until death. The very considerable semantic gymnastics which are required to rationalize abortion as anything but taking a human life would be ludicrous if they were not often put forth under socially impeccable auspices. It is suggested that this schizophrenic sort of subterfuge is necessary because while a new ethic is being accepted the old one has not yet been rejected.

● (1730)

In defining a growing role of physicians in deciding who will and will not live, the editorial went on to state:

One may anticipate further development of these roles as the problems of birth control and birth selection are extended inevitably to death selection and death control whether by the individual or by society.

Those of us who believe in the old ethic, and I am convinced that represents by far the majority of Canadians, are looking to the political process to reflect these views.

It is extremely important in debating this issue that we work and seek a point of view which can be accepted by all rational men and women. In this regard I must say to my colleagues and those individuals who utilize the term "sanctity of life" that I find the term is restrictive. In many cases it may only be accepted by those with religious views. It does have the advantage, or disadvantage depending on the point of view, of settling the abortion debate. In similar fashion for those who have the points of view that support abortion on demand, the debate is settled very quickly. So I say to you, Madam Speaker, that it is impossible to have a meaningful dialogue with that term.

Another term which is frequently used and which has some credibility is "quality of life". I know that term is used very frequently by those to my left. I believe it is at times an overworked phrase and can take on a very serious dimension which is unacceptable to the majority of people. When quality of life is interpreted as abortion, when quality of life allows a deformed infant to die, or when quality of life determines whether government medical priorities infuse funds to the elderly rather than to the young—and I give that as an example—then surely it is obvious that a consensus among men and women will not be reached.

The question must then be asked: is there a common point of view acceptable to all? I believe the answer to that question is an unqualified yes. In Canada we have the Bill of Rights and in the United States the Constitution, which indicate that to be human is to possess certain rights, and among these is the right to life.

The phrase, the right to life, suggests something objective, something which can be defined and acted upon. For example, the fetus has a right to life; a comatose patient has a right to life; a patient with a brain stem injury who is in a coma has a right to life.

Abortion

This implies that a life should not be taken without adequate justification, and every living thing has a presumptuous right to live. In these circumstances the burden of proof rests on the individual who would take life and not on the individual who would preserve it. I recognize this leaves the crucial issue undetermined, namely, when is taking life justified? That, of course, is where disagreements occur.

I would state in the strongest terms possible that if we are looking for a point of view with universal acceptance, the right to life would fit the criterion, in my view. Such a point of view would protect our own self-interests and concern for our family, friends, and community. It is obvious there is an advantage to each of us to honour such a direction. And what is more important, Madam Speaker, it places the burden of proof on those who disobey the rule and opens the debate, as it should be opened, to decide what constitutes justifiable exceptions.

I hope my brief comments will serve a useful purpose in forming the framework upon which scientific data and the broad range of new knowledge and information can be added. I am convinced that if this House is permitted to debate this particular issue at a later date with honesty, with seriousness on the part of all members, and in a very rational form, and with new sources of information and knowledge, then the Committee of a Million that has been in Ottawa today will have been successful in its efforts.

Mr. Douglas Roche (Edmonton-Strathcona): It is a rare event when we hear in this House a speech of such high principle and practical wisdom as we have just heard from an hon. member who is, I would remind you, Madam Speaker, a medical doctor.

I should like to say a word in response to the speech made by the hon. member for New Westminster (Mr. Leggett) who summed up his remarks by saying, "Let's find out what is happening in the abortion issue". I can tell the hon. member what is happening.

I want to make some remarks concerning the suggestion of the hon. member in a spirit that I hope he will accept—a spirit that is not contentious, not filled with wild emotion. I would ask him to look at this very serious question in a way that I know he is capable of looking at it. In the time that we have served together in this House I have to come to admire the hon. member for the perspicacity of his approach, for his fighting spirit, for his legal expertise. Because he possesses these qualities I would ask him to move to an even higher level in this question and consider the civil rights of the unborn child.

The hon. member put forward a case that has a fundamental flaw. When he was summing up that portion of his remarks regarding Dr. Morgentaler he was calling for more therapeutic abortion committees to permit the kind of abortions that he would like to see permitted in the country. He moved from that to what is his real purpose, the real approach that he brings to this House, and that is not so much that he wants more therapeutic abortions as that he wants abortion taken out of the Criminal Code and made a private matter between a woman and her doctor—a matter in which, as he says, women will not be discriminated against.