

Thank you for giving me the opportunity to submit this brief. My name is Barbara Bagshaw, I am a widow and the mother of six children and grandmother of twenty - three.

My late husband obtained employment at Canadair, and in August 1966 together with our two youngest children aged three years and fifteen months respectively, we came to Canada.

I gave up my career as a teacher of Home Economics and during the following years found Home Economics to be rather more interesting than I could have imagined. I have no regrets, it was all worthwhile. When my youngest son was three years old I put him in a pre-school to learn French and I taught there for several years. I now teach decorative painting.

My mother died in 1959 at the age of fifty from breast cancer which had spread to other parts of her body. She had a single mastectomy followed by other surgeries and later received radiation treatments at Christie's Cancer Hospital in Manchester. We lived in the country but my mother wanted to be at home and that is where she lived until she died. At the time I was studying Home Economics at Manchester College of Housecraft and I used to go home at the week-ends to help care for her. We were given prescription medication to control her pain, in pill form at first and then ampoules of morphine which were given by injection. We had strict instructions about the frequency with which to give this medication.

My husband died in 1999 at the age of sixty from a massive heart attack. He had bypass surgery at the age of thirty-nine and again ten years later. He worked until the day he died. The week after his death I had surgery for breast cancer, followed by thirty radiation treatments.

My father who for many years was the Headmaster of an elementary school in England came to Canada in 1969, he taught grade seven here for a number of years. In 1999 he suffered a stroke which left him paralyzed and unable to speak, he was also legally blind. He died in 2003 at the age of ninety-four at C.H.S.L.D. Lachine. I am most grateful for the care he received there. Neither my father nor my mother would have considered Euthanasia and they would never have contemplated suicide.

All of us those submitting briefs and those reading or listening to them have one thing in common, whether we like it or not, we are all living under a death sentence. For each of us that last day will come. In a matter of such importance we cannot afford to mask the truth by using misleading vocabulary and by the same token we need to know exactly what is meant by Euthanasia and assisted suicide.

Permit me therefore to state clearly what Euthanasia is, and is not

- We have the right to be relieved from pain. None of us wants to suffer pain. With the advances in modern medicine it is possible to alleviate almost all pain. In extremely rare cases a coma can be induced so that the person does not feel pain. This is not Euthanasia.

- We have the right to refuse treatment that would prolong our life. This is not Euthanasia.
- We have the right to food and water. It is not taken extraordinary measures to give food and water. When death is imminent the body begins to “shut down” and is incapable of absorbing either food or water. At this stage the person does not feel pain and if they are conscious refuse either. This is what happened in the case of my father. This is not Euthanasia.
- Euthanasia is the deliberate administration of a substance with the sole intention of ending a person’s life or of doing a procedure that would end a person’s life. To put it honestly and simply deliberately killing a person.

Recently a Canadian soldier on trial for having killed a seriously injured Afghan man was told: “execution is not mercy”.

Our hospitals have been places where the sick and dying are cared for, hopefully with love and compassion. I sincerely hope that they are not going to become places where we care for the sick and kill the dying. Killing people is a crime not a medical procedure by any stretch of the imagination. The prospect of lying in a hospital bed with relatives outside in the corridor discussing with the doctor when exactly to administer the lethal dose is abhorrent.

I strongly suggest that people make a notarized will whilst they are of sound mind stating unequivocally that if there is even a remote hint that they died as a result of Euthanasia none of their assets be left to the family.

The prospect of growing old is not something that we like to dwell on and many of us do our best to maintain health of mind and body as long as possible. I do not think that most of us would like to think that in addition to being old and frail would be added the fear of entering a hospital where they would kill us.

None of us wants to be a burden but ageing and dying are a part of life. Suffering in one form or another will affect all of all of us. I have learnt the truth of what someone once said “The sweet never fills to overflowing and the bitter never lasts forever.”

In this twenty-first century with all the advances in technology and medicine we should be able to care for the sick and dying better than at any time in history - making them comfortable, providing palliative care and giving assistance to the caregivers.

What kind of human beings have we become if we kill people because they are old, sick or handicapped?

Recently, I was at a shopping mall when a group of handicapped people arrived accompanied by caregivers. They were having a blast. It is those caregivers who deserve our respect and assistance. They

demonstrate love, compassion, maturity and courage virtues that are sadly in short supply in our materialistic, selfish, me generation.

As Fyodor Dostoevsky pointed out in his novel; *Crime and Punishment*: “where is it I’ve read that someone condemned to death says or thinks an hour before his death, that if he had to live on some high rock, on such a narrow ledge that he’d only room to stand, and the ocean, everlasting darkness, everlasting solitude, everlasting tempest around him, if he had to remain standing on a square yard of space all his life, a thousand years, eternity, it were better to live so than to die at once! Only to live, to live and live! Life whatever it may be.”

Are there any of us so naive as to think that if Euthanasia and assisted suicide became legal there would not be abuses. None of us can think “it won’t happen to me.” In fact in this situation no amount of wealth, position or power will help us. When Nicholas the second of Russia, a man who held one sixth of the wealth of the world in his hands was imprisoned in the Ipatiev house and when he had lost everything he remarked after spending a few minutes outside : “It’s good to be alive!”

We live in quite possibly the best place in the entire world. We have everything- art-culture- universities-theatres-sports-parks-etc. We have diversity of culture like nowhere else on earth. We have the potential to be leaders on the world stage providing the best palliative care and the most assistance to caregivers. It’s not a question of money it’s a question of priorities. Money can always be found for things that are important to us.

Often the ones who suffer the most are not the terminally ill, not the handicapped but those who care for them and those who are close to them. As Dostoevsky said “its beauty only that will save the world”. There is dignity and beauty to be found in those people who care for the most vulnerable of our society. As for Suicide shouldn’t we be finding ways to help those so desperate that they want to end their lives rather than helping them to kill themselves?

To do homage to greatness of heart is possible only to the great-hearted. Goodness cannot be loved by those who do evil wilfully. From the spirit of love, as from Tolstoy’s angel ever shines a brightness as from summer lightning upon all those who reverence it. *D.C.Fisher Introduction to Stories and Legends by Leo Tolstoy.*

Barbara Bagshaw