

Analysis of Bill C-384

An act to amend the Criminal Code (right to die with dignity)

Summary of Bill C-384

- Bill C-384 would legalize euthanasia and assisted suicide in Canada. (For the purpose of the analysis, euthanasia and assisted suicide will be referred to as "intended death".)
- Bill C-384 does not restrict intended death to Canadian citizens. (The bill could make Canada a destination for Suicide Tourists and Suicide Clinics).
- The individual would need to be at least 18 years old.
- Bill C-384 does not limit intended death to the terminally ill and it does not define terminal illness.
- The individual may refuse appropriate treatments and still die by an intended death.
- Bill C-384 allows intended death for people who experience depression or other chronic mental conditions.
- Bill C-384 measures competency based on "appearing to be lucid". The term "appearing to be lucid" does not assure that the individual is actually lucid.
- Bill C-384 would allow intended death for incompetent people who stated their intentions while still competent. The language of the bill is not clear whether medical practitioners are the only individuals who can intend the death of an incompetent individual.
- Bill C-384 would require at least two medical practitioners to confirm the diagnosis in writing.
- Bill C-384 would require that all requests for intended death be made free of duress. (However, no assurances are built into the bill)
- Bill C-384 would require the medical practitioner to inform the individual of all alternatives. (There is no requirement to try effective treatments).
- Bill C-384 would require the medical practitioner to provide confirmation of the diagnosis to the coroner. This is a form of after-the-fact reporting. The medical practitioner is only required to file a report after the individual has died. This is to protect the medical practitioner and not the individual who is dead.
- The definition of medical practitioner is not limited to a physician.