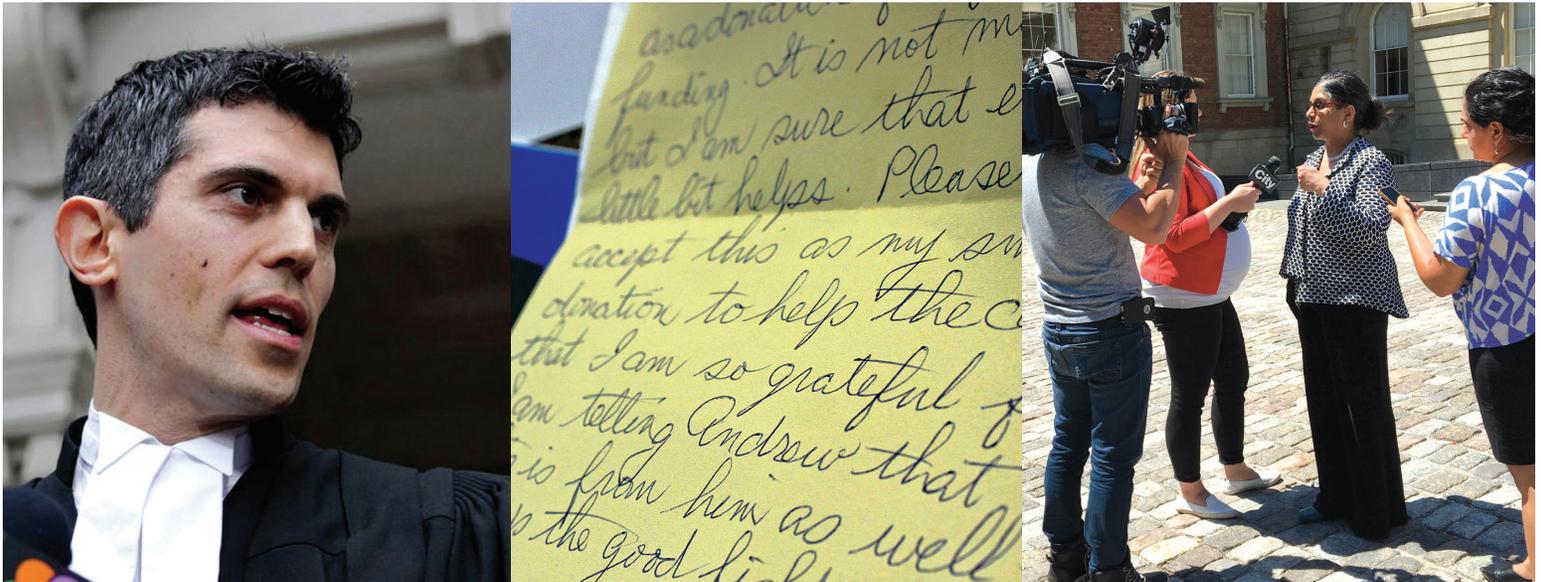




THE OFFICIAL NEWSLETTER OF DYING WITH DIGNITY CANADA

# VOICEFORCHOICE



From left to right: Lawyer Andrew Faith, who represented AB in court (Colin Perkel/The Canadian Press); a letter from AB to DWDC CEO Shanaaz Gokool; Gokool speaking with reporters about the ruling in AB's case on June 19, 2017.

## The long journey home

### How one woman's quest for a peaceful death changed assisted dying in Canada

The well-wishers started filing through AB's door before 6 a.m. As staff and fellow residents at a care home in Ontario came to say their final goodbyes, the tears that were shed couldn't wash away AB's resolve. At 77, she had lived a long, rich life, but the shattering pain she suffered for decades had grown too much for her to bear, and it was only getting worse. She told visitor after visitor that she was "going home."

Five hours later, on a balmy morning

in August, AB realized her long-sought-after wish: to die in peace with a doctor's help in the presence of her close family. It was the quiet culmination of a months-long struggle that saw AB go to court to confirm her eligibility for medical assistance in dying (MAID) once and for all. That she was ultimately successful is a testament to her persistence and resourcefulness, and in particular, her decision to enlist key players in Canada's right-to-die movement — including Dying

With Dignity Canada — to support her in her quest. In doing so, she has helped to dispel harmful misconceptions about this country's assisted dying law, breaking down barriers facing suffering Canadians who want to exercise their right to a peaceful death.

AB, whose name is protected under a court-ordered publication ban, made her first call to DWDC's national office in April. She introduced herself and explained that she had been approved for assisted dying, but that one of her doctors was having second thoughts. She asked if there was anything we could do to help her. DWDC Communications Officer Cory Ruf took down AB's contact information and quickly brought her call

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## MESSAGE FROM THE CEO

### Putting the focus on the person

DWDC's human-rights framework keeps us on course in the post-Bill C-14 era, writes CEO Shanaaz Gokool.

When I became Dying With Dignity Canada's CEO last year, our small staff was busy up to our ears launching online petitions, writing submissions to Parliament, and meeting with MPs and government staffers — all in the hopes of winning federal legislation that respects the Supreme Court's decision in *Carter v. Canada*.

It was a wild time, for sure. But since then, the scope of our work has only become larger and more intricate, like an obstacle course that's constantly shifting and expanding. That being said, we believe we are now better equipped than ever to navigate the terrain in front of us, for reasons that I will explain here.

How is our work getting more complicated? First, there's the fact that issues surrounding medical assistance in dying (MAID) will be contested in court for years. In fact, there was a seven-day period in June where four separate court actions related to assisted dying took place: two in Ontario, one in Quebec, and one in B.C. DWDC has been involved in the Ontario cases and is currently exploring ways to participate in the others.

Then, there's our work to expose early barriers to assisted dying access. We've spoken out extensively about how patient access is hindered by clinicians who refuse to provide referrals for MAID and public hospitals that refuse to allow MAID on-site. These threats to your choice were expected; many others were not.

Did we have a clue 12 months ago that we would end up advocating for fair compensation for healthcare practitioners who are involved in MAID? Hardly. However, the paltry pay rates that have been imposed are discouraging clinicians in some provinces from getting involved, making the existing shortage of MAID providers even worse. In the end, we knew we couldn't stay silent about this significant barrier to access.

Picking our battles can be challenging, but it's not as tough as you might think.



*Shanaaz Gokool is DWDC's CEO.*

Our consistent focus on the person — in particular, vulnerable patients whose rights and choices are most at risk — guides us as we set long-term priorities. It led our board to, at our annual retreat in May, direct us to ramp up our efforts to challenge Bill C-14's unconstitutional eligibility criteria and address institutional barriers to MAID access. These are gargantuan tasks that could see us participate in many a court challenge over the years, but we owe it to the person not to let up.

The board was also clear that our support work is critical in the post-Bill C-14 era. After getting involved in the case of AB, who is profiled in this newsletter, I have a new appreciation for the work that Nino Sekopet continues to do with our Personal Support Program. The reality at DWDC right now is that many of our staff are involved in providing support for people who contact our offices. Kelsey G. coordinates our volunteer independent-witness program, which puts her in touch with individuals and families who are exploring a MAID request. Rachel and Cory support people by helping them tell their stories on our blog and in the media. Supporting Canadians is truly a team effort.

Using a human-rights framework that puts the person first focuses us in our work, of course, but it's more than that. Interacting with people who seek our help, and hearing your personal stories, reminds us of why DWDC's presence is so important. You point us in the right direction *and* you inspire us to carry on.

I, for one, can't imagine a more potent recipe for positive change.

# 'I need to make sure that I am able to make a difference.'

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to the attention of Shanaaz Gokool, the organization's CEO. Shanaaz called her back soon after.

"I knew minutes into our first conversation that there was something special about her," Shanaaz said. "She explained her situation with such clarity and conviction. She had a fierce but dignified way of communicating that has really left an impression on me."

As Shanaaz would soon learn, pain had been a constant companion for AB during the last half of her life. In 1982, she was diagnosed with inflammatory and erosive osteoarthritis, an excruciating condition that causes the swelling of the joints and can disfigure the hands and feet. She was 43 at the time of her diagnosis. "At that time the pain was not debilitating," she said in an affidavit submitted to court. In fact, two years later, when her husband was felled by a sudden heart attack, she took full-time work as an administrator for an auto-parts company. "My condition caused me significant pain throughout the time I worked there — I would often have to put a bag of frozen peas on the back of my chair just to sit down — but I made enough to pay the bills and support my children," she told DWDC in early May.

AB worked for another 11 years until she "could no longer function with the pain." In retirement, she moved in with her daughter. To stay busy, she joined a seniors' group in the community. However, the creeping progression of her osteoarthritis made even the most basic daily activities a challenge. In the late 1990s and early 2000s, AB had six operations that were aimed at reducing her pain. Both knees and one of her hips were replaced, and she had rods inserted into her left leg and lower back — surgeries that, she said years later, had done her more harm than good. "In fact, the pain I experience is most severe in the places I had these operations."

By the end of 2016, AB had had enough. On January 1, 2017, she sent a letter to her doctor stating that she was ready to end her suffering. The doctor said he would not provide AB with an assisted death, but he agreed to refer her to a different physician. AB made a formal written request for MAID in early April, and the doctor determined that she was eligible for

access under the rules laid out in Bill C-14, Canada's assisted dying law.

Finding another independent physician to confirm AB's eligibility proved difficult. DWDC was able to help in this regard. We located a MAID provider in another part of the province who was willing to act as a second assessor. A date in May was set for this doctor to provide a detailed assessment through telemedicine. After days of deliberation, he, too, told AB that she qualified.

For a moment, it seemed as though AB's arduous journey was coming to an end. But in reality, it was far from over. Despite the opinion of the second assessor, the primary physician refused to move forward. He remained confident that AB qualified for MAID under his reading of Bill C-14, but feared that law enforcement didn't share his view. At the root of the dilemma was the law's most controversial requirement: that a person's natural death be "reasonably foreseeable." As soon as Bill C-14 was tabled in Parliament in April 2016, critics lambasted the reasonably-foreseeable rule as "vague" and difficult to apply. Its language was alien to doctors and nurse practitioners, who were accustomed to the exacting terminology of medical textbooks and scientific journals. The debate raised the spectre that, once enacted, the law would be applied inconsistently.

AB was devastated. On more than one occasion, her son purchased airline tickets to say his final goodbyes, AB said. "He has three times booked tickets ... The first time, he couldn't get any money back on it. The second time, he got some money back. The third time, he said, 'Mum, I have holidays anyways, I'm coming in two-and-a-half hours.' It's been very emotional."

Having her choice granted and then taken away was unacceptable to AB. She believed that neither she nor anyone else should be subjected to the same emotional rollercoaster. With the help of Toronto lawyer Andrew Faith, she made an application to court to have her eligibility for MAID confirmed once and for all.

On June 19, AB was vindicated. Ontario Superior Court Justice Paul Perell ruled that AB's death was "reasonably foreseeable." In addition, Perell's ruling

took aim at some of the misconceptions surrounding Bill C-14 that contributed to AB's ordeal. A person needn't be terminally ill for her natural death to be "reasonably foreseeable," nor does one need to be suffering from a fatal medical condition in order to qualify for MAID. When making a determination about a patient's eligibility, providers of MAID, "need not opine about the specific length of time that the person requesting medical assistance in dying has remaining in his or her lifetime," Perell noted.

Shanaaz was in court in support of AB on June 19 and called her soon after Justice Perell announced his decision. "She was in giddy disbelief," Shanaaz recalled. "And she wanted to know whether other Canadians in her position might benefit from the decision, too."

## A legacy of helping others

AB derived comfort from knowing that her struggle would help other Canadians facing unfair barriers to MAID access, said her first cousin and close confidante. "She had said to me, 'I need to make sure that I am able to make a difference before I go. Not to be remembered, but to make sure for [myself] that I did everything that I can before I go.'"

This attitude was familiar to those who knew AB well. As a single mother, she was dogged in ensuring that her children received a good education. A pillar in her community, she organized social gatherings at the long-term care home where she resided during the last years of her life. "She's given to others all of her life," her cousin said. "She's someone who wants to be in control of things and keeps things copacetic."

Much of AB's life was dedicated to attending to others' needs, but there was no mistaking that her last act was about tending to her own. "I've reached a stage in my life where I've done all the things I want to do," she said in May.

"I've produced three children — they're fantastic young people. I enjoyed being in business and I did a lot of meaningful work over the years.

"But now, I'm ready to go home."

—Cory Ruf

## Defending your choice in court

### DWDC brings the voices of patients to court challenges in Ontario and Quebec.

Dying With Dignity Canada brought the rights of vulnerable patients to the fore during the organization's first-ever oral presentation in court.

On June 16, Kelly Doctor, of the firm Goldblatt Partners LLP, spoke in front of a panel of three judges on the Superior Court of Justice of Ontario. Representing DWDC, she delivered arguments in support of the defence in an Ontario case that could set an important precedent for assisted dying access in Canada.

The case surrounds regulation that requires doctors who oppose assisted dying to, in a timely manner, refer patients who request it to a willing provider or third-party agency. The College of Physicians and Surgeons of Ontario (CPSO), the province's medical regulator, approved the policy last year. In response, a coalition of Christian medical practitioners launched a court challenge against the CPSO's effective referral requirement, arguing that it violates their *Charter* right to freedom of religion.

In our 20-minute presentation, DWDC stressed its support for the policy, which we believe strikes a sensible balance between a physician's right to conscientious objection and a patient's right to care. Doctor reminded the court that the Ontarians who are eligible to access medical assistance in dying (MAID) under federal law are often among the province's most physically compromised and vulnerable patients. She cited the affidavit of a physician who had provided assisted dying and who testified that two of his patients would have been physically unable to call or email a referral service by themselves. Their ability to access MAID depended on their doctors' willingness to connect them, directly

or indirectly, with the care they were seeking.

In addition, Doctor noted, connecting a patient with a willing provider or referral service doesn't mean that the objecting physician endorses MAID, nor does it mean that the patient will ultimately access life-ending treatment. "A referral is about giving the person a choice," she said.

DWDC's presentation came on the third and final day of hearings in the case. The judges then began deliberations. They are expected to release their decision before the end of this year.



*Lawyer Kelly Doctor (third from right) delivered oral arguments on behalf of DWDC in a Toronto court in June.*

### Quebecers' challenge to Bill C-14

Dying With Dignity Canada has also applied to be an intervener in the latest high-profile court action to challenge aspects of Bill C-14, the federal assisted dying law.

The plaintiffs are two Quebec residents who have each lived for decades with severe, debilitating medical conditions. Nicole Gladu, 72, and Jean Truchon, 49, would like to end their lives with the help of a physician, and both appear to satisfy the eligibility criteria laid out in the Supreme Court's 2015 ruling in *Carter v. Canada*.

However, for these two Montrealers, access to a peaceful death remains

out of reach because of controversial restrictions that elected officials have written into law. Under Bill C-14, only those suffering individuals whose natural death is "reasonably foreseeable" are eligible for access. Similarly, under Quebec's 2014 assisted dying law, one must be approaching end of life to qualify.

These conditions violate the *Canadian Charter of Rights and Freedoms* because they heap additional, unwanted hardship upon Canadians who are already suffering intolerably, said Jean Pierre Ménard, the lawyer representing Gladu and Truchon, at a press conference in June. "It's absolutely deplorable that these people who meet the law's criteria — a serious and irremediable illness with intolerable suffering — need to go to court to have their rights met."

In the summer, DWDC submitted a request to the Superior Court of Quebec asking to be an intervener in support of the applicants in the case. If we are accepted, we will present arguments about how Bill C-14's eligibility criteria unfairly deny many Canadians their right to a peaceful death. Gladu and Truchon aren't the first Canadians to go to court to test Bill C-14's constitutionality.

British Columbia's Julia Lamb made headlines in June 2016 when she and the B.C. Civil Liberties Association launched a court case challenging the law's restrictive eligibility rules. Lamb, who lives with a degenerative condition that causes the wasting of the muscles, does not want to access assisted dying in the near future, but wants to know that it will be available to her should her suffering become too much for her to bear. In May 2017, Robyn Moro, a 68-year-old Delta, B.C. resident who lives with Parkinson's disease, added her name to the list of plaintiffs in the *Lamb v. Canada* case.

Trial dates have not been set for either case.

—Cory Ruf

## Advancing the conversation on advance requests

Studies on the future of your choice present DWDC with new challenges and opportunities.

What a difference a Google search can make.

It was late April and the Council of Canadian Academies (CCA) — chosen by the federal government to conduct independent reviews into the possible expansion of Canada's assisted dying law — had just released the names of the academics who would oversee these studies. At the very top of the panel studying advance requests for assisted dying was the working group's chair, Dr. Harvey Schipper.

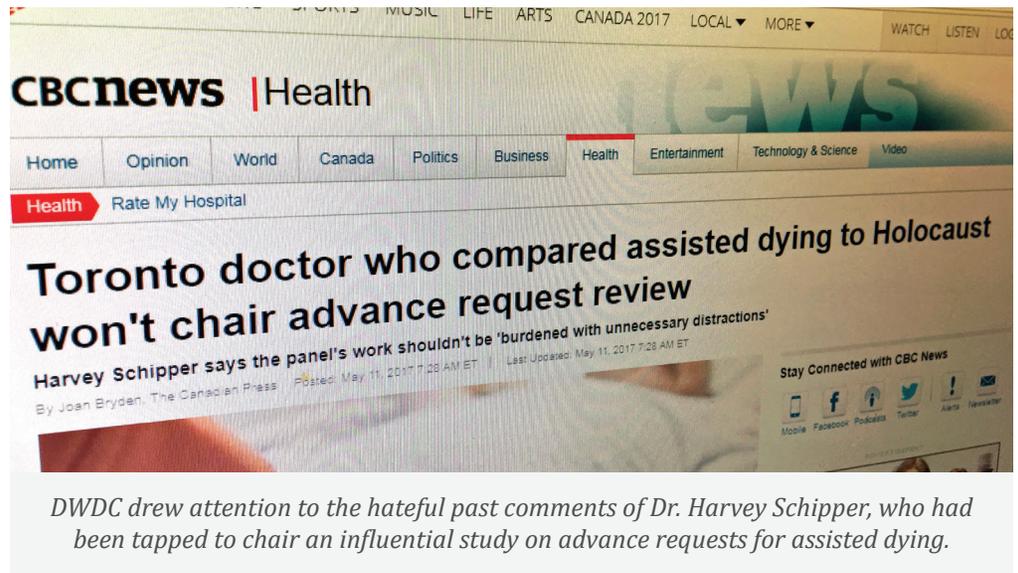
At first, the University of Toronto professor's appointment didn't raise any eyebrows. But after a quick search of his name, our reaction quickly shifted from neutral to stunned disbelief.

Right there, written plainly in a 2014 op-ed for *The Globe and Mail*, were Schipper's offensive statements likening assisted dying to the Holocaust. We asked ourselves, "Why would someone who had expressed such hateful views on assisted dying be appointed to lead a supposedly 'evidence-based' exploration on the future of your choice?"

Our supporters have told us loud and clear: defeating the discriminatory ban on advance requests for assisted dying must be a top priority for Dying With Dignity Canada. Consequently, we knew we couldn't stay silent about Schipper's comments, and we didn't. As you'll see, our response in the Schipper case is but one example of how we're defending the rights of Canadians who want — and have a right to — choice in the face of a dementia diagnosis.

Informing the media and our supporters was the first step. We sent a tip to Joan Bryden of The Canadian Press and watched as the news of Schipper's appointment and his inflammatory comments spread across the country.

DWDC also made a public call for



Schipper to clarify his statements. *Did he still stand by what he wrote? Could he affirm his commitment to impartiality as chair of the panel examining how Bill C-14 affects individuals whose choice depends on being able to make an advance request for assisted dying?*

After two weeks of silence, the CCA announced that Schipper would remain on the panel, but he would no longer serve as its chair. It was a promising development in a process that, while influential, has raised concerns for our organization. These studies were launched to examine the possibility of opening up assisted dying access to mature minors, individuals whose primary underlying condition is psychiatric, and individuals with degenerative conditions like dementia who would need to consent in advance in order to be able to have an assisted death. But from the get-go, the government instructed the working groups not to provide policy recommendations in the final report, which is due in late 2018. In our view, this decision has raised question about the sincerity of the government's commitment to upholding Canadians' right to assisted dying.

### Giving you a platform to Voice Your Choice

In addition, the CCA working groups will not be conducting broad consultations with ordinary Canadians whose rights are at stake. Instead, they have asked for

feedback from 500 organizations that have an interest in the issues at hand. We believe that excluding ordinary Canadians from this process is unjust and misguided. How can researchers understand the impacts of our country's assisted dying rules if they don't consult the people who are most affected?

Recognizing how crucial it is for our supporters to be heard, we have relaunched our Voice Your Choice campaign, inviting Canadians from coast to coast to share their personal stories and perspectives. In their own words, they have let us know exactly what is at stake for countless Canadians if the law remains unchanged. These testimonies will be included as part of our official submission to the CCA.

We know your stories are our best shot at effecting change this time around, and they will be pivotal in other studies, too. Quebec Health Minister Gaétan Barrette said in March that his government would be establishing its own expert panel to examine the issue of advance requests for assisted dying. We look forward to learning more details about the study and vow to keep our supporters informed about how they can get involved.

When Bill C-14 was passed last June, we knew we couldn't just pack it up and close up shop, not with so many Canadians still on the outside looking in. DWDC will continue to do everything in our power to make sure your voices are heard by the people on the inside — whether they like it or not.

—Rachel Phan

## Breaking down barriers, one headline at a time

Working to expose injustice in the Canadian healthcare system has brought DWDC's Cory Ruf back to his journalistic roots, he writes.

My friends sometimes ask me whether I regret quitting journalism almost three years ago to join the team at Dying With Dignity Canada.

*Regret quitting journalism?* It feels like I never left.

The truth is, I'm busier now breaking meaty stories than I was during my days scribbling for mainstream news outlets. In my job as DWDC's communications officer, there's never any shortage of opportunities to use my skills as a journalist to shed light on injustice. And if the events of the last six months are any indication, this trend shows no sign of going away.

One of the most important scoops of my career came via a call I received this June. It was from a man in Winnipeg who wanted to alert our organization to a situation that was brewing in his city. The board of a local public hospital, the source said, had voted in late May to allow assisted dying on its premises. The vote came after months of internal discussions at St. Boniface Hospital about the harms of requiring desperately ill patients to be transferred off-site to receive, or even be assessed for, medical assistance in dying (MAID).

But the policy to allow assisted dying in "rare circumstances only" was short-lived. The Catholic Health Corporation of Manitoba (CHCM), a faith-based organization that oversees more than a dozen healthcare facilities in the province, responded by adding new members to St. Boniface's board and forcing a new vote. Just like that, the hospital's ban on MAID was back in place only days after it had been lifted.

This turn of events infuriated our source, whom I'll call Peter. He had internal documents describing how St. Boniface's MAID ban had harmed dying



*Cory Ruf is DWDC's communications officer. (Kelsey Goforth)*

patients, traumatized their families and upset hospital staff. In one instance, a patient went into medical distress while being transferred for a MAID assessment and then died "naturally" hours after arriving at the receiving site. In effect, the hospital's policy deprived this poor individual of his or her right to a peaceful death.

Over the next few days, Peter and I developed a plan for how we would bring this information to light. With the help of DWDC's Winnipeg chapter, we approached Jane Gerster, health reporter with the *Winnipeg Free Press*, with the eye-popping allegations. The exposé she wrote made the newspaper's front page the very next day.

### Local story, national implications

The restacking of St. Boniface's board to quash assisted dying has attracted national attention, and for good reason. The CHCM's actions are a blatant example of a large, unaccountable institution — one that funnels millions of dollars in public healthcare spending — going to great lengths to keep MAID out of its facilities, at the expense of its most vulnerable patients. The debacle raises tough questions about whether it's appropriate to allow the politics of a public healthcare institution to impede Canadians' right to MAID.

Helping Peter raise the alarm was exhilarating, yes, but there's so much more we must do to alert Canadians to this kind of injustice. Accordingly, we have made a public call asking for more whistleblowers to come forward. We have filed a series of Freedom-of-Information requests in our search for public documents that show how facilities' MAID policies affect patient care. In addition, we are encouraging our supporters to find out where assisted dying is, or is not, available in their local communities. The data they gather gets plugged into DWDC's Shine a Light Progress Map, which itself has been the subject of a number of news stories.

Dealing with confidential sources, mining public documents, engaging audiences to produce crowd-sourced digital maps — this is what investigative journalism looks like in the 21st Century. In my case, I get to do it as part of a team that couldn't be more passionate, talented and supportive. Better still, my job puts me in contact with DWDC supporters from across the country.

I hope you can see now why I chuckle when I'm asked whether I regret "quitting journalism." In my job at DWDC, not only do I get to bust out my reporting chops, but I get to use them in service of a cause that matters a great deal to me.

I consider it an immense privilege to be involved in this work, and I thank you for giving me the opportunity to do it.

## 'Rights can be given, and rights can be taken away'

Why a Hamilton chapter coordinator chose to defend dignity in a big way

Yvonne Cunnington has never been one to shy away from conversations about death and dying.

Her husband, a physician, would often tell her about the experiences of patients that were at end of life.

Experiencing the deaths of both her parents was even more eye-opening for Yvonne. Both her parents had brain diseases: her father had Alzheimer's disease and her mother had a brain tumour. "My father was very lucky to have my mother," Yvonne says. "She was a wonderful caregiver."

Yet despite the fact that her parents were familiar with death and dying — particularly her mother after she cared for Yvonne's dying father — it struck her how uncomfortable they were discussing the topic.

"Over the years, it became clear to me that our culture doesn't want to acknowledge death and dying, and that physicians were very good at prolonging life through any means necessary," she muses.

### Upping the ante

A writer by trade, Yvonne wanted to use her skills and connections to promote a conversation about choices in dying. She joined DWDC as a member in 2014 and became a core organizer of the upstart Hamilton chapter by the end of the following year.

"I wanted to encourage others to talk much more openly about death and dying," says Yvonne, who has helped to organize advance-care planning workshops and small-group "gentle conversations" about end-of-life choice.

Yvonne's contributions to the cause have gone well beyond breaking down the stigma surrounding death and dying. Since Fall 2015, she has supported our operations through her membership in our Defenders of Dignity monthly-giving

program. "I wanted to give monthly because I know that DWDC operates with a very small budget," she says. "I thought it would be an easy way for me to help, since monthly gifts are automatically deducted each month."

If that wasn't enough, Yvonne



*Yvonne Cunnington speaks at a June 2017 event organized by DWDC's Hamilton chapter.*

bowled us over at our 2017 Annual General Meeting in Toronto when she told us she wanted to triple the amount of her monthly contribution. She made her decision after CEO Shanaaz Gokool introduced each member of the organization's staff to the crowd of supporters in attendance. "Shanaaz brought the team forward, and there was only about eight people!" she exclaims. "What the team is able to accomplish on basically peanuts compelled me to increase my monthly gift."

### 'This is a long-term job'

Like all of our Defenders of Dignity, Yvonne contributes on an ongoing basis because the work of defending Canadians' end-of-life rights is far from over.

"This is a long-term job," she says. "Rights can be given, and rights can be

taken away.

"Even though we have a law, it's not always going to work well. Some people will have major problems with access, while others are completely left out, like people with Alzheimer's disease."

While Yvonne's contributions to the national organization have helped us expand our reach in 2017, she and her colleagues in the Hamilton chapter continue to make in-roads in their local community. An event they held on June 28 featured author Sandra Martin, who has written extensively about Canada's right-to-die movement, clinical ethicist Andrea Frolic, who leads Hamilton Health Sciences' medical assistance in dying (MAID) program, and DWDC CEO Shanaaz Gokool. More than 70 people were in attendance for the presentation.

Thanks to the commitment of DWDC's donors and volunteers across the country, Yvonne is optimistic that systems for

MAID will run more smoothly in the near future. She also hopes that members of Canada's medical community will be more accepting of MAID and that the law is expanded to include advance requests.

"I really hope that in a few years, because of the work we're doing, our society can rethink how we approach end of life."

To become a Defender of Dignity like Yvonne, or to give a one-time gift in support of Dying With Dignity Canada, please call our office at 1-800-495-6156 or visit [Dyingwithdignity.ca/donate](http://Dyingwithdignity.ca/donate).

—Laura Satin Levin

## An ardent champion of choice, in life and in death

Katherine M. Svec's last act reminds us that our movement's work is far from over, writes former DWDC CEO Wanda Morris.

I am angry because someone I love, admire and respect has died too early.

I am angry because I lost days, weeks, months or possibly even years with a dear friend who went to Switzerland this spring for an assisted death because Canada failed her.

I am angry because a win at the Supreme Court wasn't enough. Canadians facing grievous illnesses are still forced to suffer too long — or die too early.

Some readers will be familiar with Katherine M. Svec. She wrote "Katherine's Corner," researched and wrote advance-care planning guides for every province in this country, and co-edited the newsletter during my tenure as CEO.

She was an extraordinary volunteer, donating thousands of hours.

She was the truest of friends. She was not afraid to take me to task, and was never short of encouraging words. She made me want to do better than my best, by truly believing I could do the impossible.

She had passed her 80th birthday but you would never have known it. She dressed elegantly, spoke articulately and fiercely refused to let age diminish her.

Katherine M. was an intensely private person. She told few that she was ill, fewer still of the nature of her illness. She wanted to spend her final days

looking outward at life, not inwards at her body's frailty.

Her decision to go to Switzerland was motivated by fear of the alternative. She cut her life short because she was at risk of having a stroke and refused to be trapped in a non-responsive body in a health system that would not allow her to consent to her own death by advance request. Her death has left a jagged, biting wound.

But Katherine M. was fierce right to the end. In a final letter sent to Dying With Dignity Canada, she used these words:

*"Following the Supreme Court of Canada's just and compassionate ruling on February 6, 2015, Canada had a unique opportunity to shine in the spotlight of the world stage. This has been denied us by Bill C-14 and subsequent legislation — a betrayal of the pre-election promises of Mr. Trudeau.*

*"Dying With Dignity Canada will guide us back into the light where we belong. It will not be easy, nor will it be immediate, but it will happen. And so my message to all supporters of the cause is this: however*



Katherine M. Svec (left) and Wanda Morris in 2015.

*long it takes and whatever the setbacks encountered, do not falter. Take strength in the knowledge that by continuing this battle against injustice, you are fighting not only to protect the rights of all suffering Canadians, but also to honour the memory of the dedicated warriors who have already fallen."*

Her words touch me now, even from her grave. I have made a tribute donation to DWDC in her memory. Please join me in honouring this fallen warrior. Her courage and our loss must not be in vain.

To give a gift in honour of Katherine or another valiant champion of change, please go to [Dyingwithdignity.ca/tribute\\_donations](http://Dyingwithdignity.ca/tribute_donations).

### More about Katherine

Katherine M. Svec was born in a small village on the south-west coast of Scotland. She often said that she grew up in one of the most beautiful areas of the Lowlands, surrounded as it was by wild countryside, with the waters of the Firth of Clyde on one side, and the heather hills of Ayrshire on the other.

In 1964, she immigrated to Canada, and set up the electron microscopy laboratory at the Banting and Best

Institute at the University of Toronto. Later, she was appointed head technician, responsible for the training of junior staff.

The final stage of her career was at the Wellesley Hospital, where she supervised the combined neuromuscular, electroencephalography and electromyography laboratories.

Katherine was married to a young Scottish musician. They came to Canada together, but the marriage did not survive.

She later married George, a union that lasted "until death did them part."

Katherine considered herself blessed in her friendships, particularly with the Scottish woman from her early days who was a friend and mentor and the greatest influence on her intellectual life. There were also the friends of her middle and later years, those who were to be her strength and support through the rest of her life.