At the heart of change

Dying With Dignity Canada
It’s your life. It’s your choice.
Encapsulating 12 months in the life of Dying With Dignity Canada is always a daunting task. Conveying the fullness of what, where and when of a single year could fill a book the length of a George R.R. Martin fantasy sequel.

However, we fear that the plot for 2017, with its careening twists and turns, would strike readers as a little too far-fetched. The events would certainly seem unbelievable to us had we not lived them ourselves.

The truth is, serving as the leading defender of your end-of-life rights is stranger and more exciting than fiction. Each week presents us with new opportunities and challenges that no other non-profit in Canada has ever encountered. The stakes at play are dizzyingly high: nothing short of the future of your right to choice. The challenges that no other non-profit in Canada has ever encountered. The stakes at play are dizzyingly high: nothing short of the future of your right to choice.

As you flip through the pages of this report, you’ll learn more about these individuals who, what, where and when of a single year could realize their right to compassionate choice—encourages us to be a stronger and more ambitious force for justice.

That’s why, even though they are not physically with us, these men and women continue to stake a claim at the heart of change. Our successes are their successes. Our progress is a part of their legacy.

—Shanaz Gokool

Message from the CEO

Empowering storytellers to speak their truth

By harnessing the power of personal stories, DWDC has become a stronger, more effective advocate for Canadians.

Never underestimate the power of a personal story. Sue Rodriguez taught us that. So did Kay Carter. And Gloria Taylor. And Nagui Morcos. And Dr. Donald Low. By sharing their stories, these courageous individuals shifted public opinion and pushed the country closer to recognizing your right to a peaceful death.

Years later, storytelling now plays a key role in defending your right to assistance in dying—which is why we at Dying With Dignity Canada have made a concerted effort to give Canadians a platform to share their journeys with choice. Empowering our supporters to speak their truth has not only strengthened our human rights advocacy, it has bolstered the impact of our education and personal support programs as well.

How did DWDC leverage the power of personal stories in 2017? In the summer, we called on our supporters to send us their personal story.

Our supporters' testimonials were included in our official response to the CCA. It's difficult to put into words just how moving our supporters' testimonial letters were. Let's just say that more than a few tears were shed during the compiling of the letters. The letters are due at the end of 2018, so it's too early to gauge how much influence your letters will have had on the process. However, a CCA representative did reach out to tell us that the personal narratives contained in our submission were "quite compelling"—a positive sign for what's ahead.

A space for healing in the digital sphere

In addition, 2017 saw DWDC’s digital channels emerge as a space where Canadians with first-hand experience with assisted dying could share their stories with the world. With support from DWDC Digital Communications Coordinator Rachel Phan, storytellers have communicated their personal story.

To give storytellers like Liana a platform to raise their voice. As we learned in 2017, harnessing the transformative power of personal stories is perhaps the single most important thing we can do to effect positive change—whether it’s for one person or for the country as a whole.
At Dying With Dignity Canada, we are always on the lookout for threats to your choice and for new opportunities to protect your rights. In 2017, this meant taking strides to participate in, and inform Canadians about, major court cases concerning your right to a peaceful death. In doing so, we established ourselves as a formidable player in the legal battles over the future of assisted dying in Canada.

In the spring, we went to court to defend an Ontario policy that requires physicians who opposed assisted dying to refer patients who request it to another agency or provider. Launched by a coalition of anti-choice doctors, the legal challenge would have major implications for patients’ rights all across the country.

As official interveners in the case, we argued that the College of Physicians and Surgeons of Ontario’s (CPSO) policy on effective referral strikes a fair balance between a person’s right to care and a doctor’s right to religious freedom. Kelly Doctor, our pro bono lawyer, remanded the court that individuals who request assisted dying are some of this country’s most vulnerable, physically compromised patients. In her 20-minute presentation, Doctor cited the affidavit of a physician who had provided assisted dying and 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.

A panel of Ontario Superior Court judges agreed, ruling in January 2018 that the CPSO’s policy was constitutional and could remain in place. It was a resounding victory for patients’ rights.

Less than a week after the court hearings on the CPSO’s referral policy, we were involved in another case that would reshape assisted dying in Canada. In April, we came into contact with a 77-year-old Ontario woman who would end up going to court to assert her right to a peaceful death.

Two physicians had told the plaintiff in AB v. Canada — who was afflicted with severe, chronic osteoarthritis — that she qualified for an assisted death. However, the doctor who was supposed to provide her with life-ending treatment got cold feet because of the confusion surrounding a controversial rule in Bill C-14, Canada’s assisted dying law: the requirement that the patient’s natural death be “reasonably foreseeable.”

All leaned on DWDC during this ordeal. Shanaaz Gokool, our CEO, provided AB with proper referral service. Members of our PAC who request assisted dying are denied a proper referral. Members of our PAC informed us about a major obstacle facing patients in their care. In turn, we provided them with a platform to raise their concerns.

They are our eyes and ears inside the healthcare system, alerting us to the major roadblocks separating Canadians from their right to choice. We connect them with the leading jurists and policymakers in the field of end-of-life rights and amplify their voices in the national media.

Did you know 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.

Partners in protecting patients’ rights
DWDC’s work with healthcare professionals was instrumental in breaking down barriers to assisted dying access.

Our increasing influence in the healthcare sphere is a trend that shows no sign of slowing. We, along with L’Association Québécoise pour le Droit de Mourir dans la Dignité, have been accepted as official interveners in a court challenge against unfair restrictions in Bill C-14 and in Bill 52, Quebec’s assisted dying law. We will continue to educate the public, policymakers and healthcare professionals about AB’s story and what it means for access to assisted dying. And, guided by the experienced lawyers on our Legal Advisory Committee, we will continue to scope out opportunities to participate in cases where your choice is on the docket.

Our goal here is the same as it’s always been: to ensure that the scales of justice lean in the direction of patients’ rights, where they belong.

Dr. Stefanie Green is the president of the Canadian Association of MAID Assessors and Providers and a member of our Physicians Advisory Council. (Chad Hipolito)
After the legalization of assisted dying, Canadians flocked to us to get their questions answered. As the organization at the heart of the change, we felt we had no choice but to support these individuals and families however we could.

Our response has not only transformed our work, but it’s also altered how we think about what we do. Now, everyone on the roster at Dying With Dignity Canada’s national office, no matter their job title, plays a role in providing support to people who are navigating their legal end-of-life options. The insights we glean from these interactions guide us in our human-rights advocacy.

Our Personal Support Program remains at the core of DWDC’s efforts to ease the burden for suffering individuals and their loved ones. Last year, Nino Sekopet, the program’s manager, handled nearly 900 requests for information and emotional support. This represents a 26 per cent increase over 2016.

In reality, though, bridging the enormous gaps facing Canadians required an all-hands-on-deck approach in 2017. Whether they expected to or not, everyone in the office participated in providing personal support. Our administrative staff were often the ones to pick up the phone when a person was calling for help. Rachel Phan, our digital communications coordinator, triaged inquiries that came in through social media. Kelsey Goforth, as the coordinator of our independent-witness program, fielded calls from individuals who needed their requests for assisted dying signed by one of our trained volunteers.

And then there was DWDC CEO Shanaaz Gokool. In 2017, Shanaaz provided personal support to the plaintiff in AB v. Canada, whose case is mentioned several times in this report. After being formally approved for assisted dying, AB was told by her doctor that he wouldn’t proceed because of confusion surrounding the eligibility rules. In constant, excruciating pain as the result of chronic osteoarthritis, the 77-year-old grandmother contacted us in search of a solution.

As a chief executive, Shanaaz isn’t usually the main point of contact for individuals seeking personal support. But AB’s situation was complex, and it spoke to the heartbreaking problems posed by ambiguities in the federal assisted dying law. Solving it might require the participation of someone with Shanaaz’s expertise, influence and professional connections. Plus, she recognized early on that AB’s case had potential life-altering implications for other Canadians whose choice was on the line. Helping out, Shanaaz concluded, was just the right thing to do.

DWDC supported AB in several ways in the weeks before a judge issued his ruling in her case. Shanaaz visited AB at her home to learn more about her situation. She arranged for a doctor on our Physicians Advisory Council to provide a second opinion on AB’s eligibility for assisted dying. In addition, Shanaaz communicated with AB’s lawyers, supplying them with information and contacts that would prove useful in the case.

In June, Shanaaz was in the courtroom when Justice Paul Perel announced that AB did indeed qualify for an assisted death. When the two women spoke on the phone later that day, AB was “giddy with disbelief,” Shanaaz said. AB then implored us to use her story to help Canadians in her same position. As you read through this report, you will learn more about how we have leveraged AB’s experiences to help others. It’s a story we would never have been able to tell were it not for our “silo-free” approach to personal support. By thinking creatively, collaborating with others, and embodying DWDC’s commitment to putting the person first, Shanaaz empowered AB to break down barriers and, in the process, give her a platform to spread her message of hope.

This is but one example of how our personal support work informs our human-rights advocacy, and vice versa. Being there for AB deepened our understanding of Canada’s assisted dying rules; the lessons learned have equipped us to better serve the people who need our help.

In 2017, our volunteers supported a total of more than 12,500 volunteer hours, an increase of about 14 per cent over the previous year. Much of the uptick can be attributed to the growth of a groundbreaking initiative that has grabbed headlines and, more importantly, helped suffering Canadians overcome a major barrier to their choice.

We rolled out our independent-witness program in 2016 in response to the problems posed by a safeguard in the federal assisted dying law. Bill C-14 requires individuals who apply for assisted dying to get their requests signed by two independent witnesses. To qualify as “independent,” a person cannot be directly involved in the applicant’s care, nor can they stand to benefit financially from the person’s death. Here’s where the problem lies. People who qualify for medical assistance in dying are some of this country’s most frail, physically compromised patients. At this stage in their lives, they may have little to no social contact with anyone aside from their caregivers. Also, the suffering individual may not be comfortable—or even capable of—picking up the phone to ask a neighbour for help. This led us to start training volunteers who could sign an applicant’s form when no other eligible witness could be found.

Now, DWDC’s independent-witness program boasts a roster of more than 200 volunteers. That number continues to rise as more Canadians learn about the program and its impact.

In 2017, our volunteers signed a total of 325 requests for assisted dying. Most often, the person contacting us to ask for witnesses was a clinician or social worker—a sign of our volunteers’ reputation for professionalism and sensitivity. Sometimes a patient or caregiver would call after being referred to us by a provincial healthcare agency. Now that’s credibility.

DWDC volunteers empower Canadians in other ways. Our regional chapters hosted a total of 25 events across the country last year, including 15 Advance Care Planning workshops. A number of volunteers signed up as speakers for our End in Mind online education series. In total, our 2017 events—both online and in-person—attracted thousands of participants.

From the left: DWDC’s Personal Support Program Manager Nino Sekopet; National Events and Volunteer Coordinator Kelsey Goforth; CEO Shanaaz Gokool; and Communications Officer Cory Ruf.

“Each volunteer can actually make a difference in the life of someone who is suffering and wants choice at end of life.”—Susan Desjardins, chair, DWDC’s Ottawa chapter

What’s it like to be a DWDC volunteer at this moment in the organization’s history? The experience has been a “transformational” one, says Susan Desjardins, chair of our Ottawa chapter. “Each volunteer can actually make a difference in the life of someone who is suffering and wants choice at end of life,” she told us at our Annual General Meeting in May 2017. “At this time, we’re really part of a transformation of Canadian society. To be a small part of that is a momentous opportunity.”

As Susan knows, our volunteers are much more than just boots on the ground. They are also our eyes and ears in the field, supplying us with intel and expertise that have proven invaluable in our work. Our independent witnesses tip us off to new obstacles to choice that they spot in the healthcare system. The professionals on our Board, our Physicians Advisory Council and our Legal Advisory Committee aid us in the development of policies that keep us relevant in the post-Bill C-14 era. The members of our Disability Advisory Council ensure that our positions are informed by the lived experience of a key constituency of Canadians whose rights and choices are at stake.

All of this is to say, DWDC would not be the organization at the heart of change without the contributions of our dedicated volunteers. We couldn’t be more grateful.
Twelve Months at the Heart of Change

For Dying With Dignity Canada, 2017 was about tackling unexpected challenges and seizing new opportunities. Here’s a timeline of some of the big moments of the year.

- **January 31**: DWDC announces that outgoing Senator Jim Cowan would be joining our Board of Directors. Nancy Ruth, another retiring senator, joins our Patrons Council.
- **February 6**: Dr. Schipper issues a statement announcing that he is resigning as chair of the CCA’s panel on advance requests for assisted dying.
- **February 17**: The plaintiff in AB v. Canada, a 77-year-old woman who went to court to establish her right to assisted dying, dies at 27. In media interviews after his death, DWDC credits Adam Maier-Clayton, an outspoken advocate for the right to assisted dying, with sparking a national conversation on the end-of-life rights of Canadians with severe mental illness.
- **April 13**: An Ontario judge issues his decision in the case of AB v. Canada, a woman with Alzheimer’s disease. The ruling in AB v. Canada would eventually dispel some of the misconceptions that surround eligibility for assisted dying.
- **April 27**: DWDC files its official submission to the CCA. Urging an approach that puts the person first, our response contains the letters of 746 Canadians who wanted to share their thoughts on the future of assisted dying in this country.
- **June 15**: DWDC marks the one-year anniversary of the passage of Bill C-14.
- **June 17**: The New York Times publishes a 6,000-word profile on the last days of John Shields, a B.C. activist who ended his life with medical assistance. Journalist Catherine Porter interviewed several DWDC staff members and volunteers while reporting the story.
- **August 17**: After weeks of silence, Dr. Schipper issues a statement announcing that he is resigning as chair of the CCA’s panel on advance requests for assisted dying.
- **September 27**: The Council of Canadian Academies (CCA) announces the names of the researchers who will report to the government on the future of Canada’s assisted dying law. DWDC learns that the chair of the panel on advance requests for assisted dying had made derogatory comments about supporters of end-of-life choice. We later make a public call for Dr. Harvey Schipper to clarify his past statements.
- **November 6**: The plaintiff in AB v. Canada dies, with medical assistance, in the presence of her loved ones. DWDC CEO Shanaaz Gokool, who had provided her with personal support, was with AB when she died.
- **November 28**: Communications Officer Cory Ruf presents to a committee of Manitoba legislators on why the government’s bill on assisted dying poses a grave threat to residents’ right to assisted dying.
- **December 2**: The annual Voice Your Choice campaign kicks off with a special video to mark the two-year anniversary of the Supreme Court’s decision in Carter v. Canada.

At a press conference on Parliament Hill, CEO Shanaaz Gokool joins a group of politicians and advocates calling for fair access to assisted dying. The announcement comes on the two-year anniversary of the Supreme Court’s decision in Carter v. Canada.
Adam Ross chose a warm and starry night at the end of August to free himself from the pain. Alone on a bench in Vancouver’s Lighthouse Park, he took in the view laid out before him. The spot he had chosen was secluded, at a cove overlooking Burrard Inlet. The spot he had chosen was secluded, at a cove overlooking Burrard Inlet. Adam would not qualify at home. Because his natural death was not “reasonably foreseeable,” he knew the option of dying with the help of a clinician was off the table. Adam watched with interest as other Canadians began to speak out. B.C.’s Julia Lambi launched a constitutional challenge to the law, while Ontario’s Adam Maier-Clayton publicly advocated for the end-of-life rights of Canadians whose primary underlying medical condition is psychiatric. “My brother once shared with me his agreement with Adam Maier-Clayton’s point that people with certain diagnoses are in a privileged position under the law,” Sally reveals. “In the face of the diverse ways that complex pain or disease manifests, medical science and our healthcare systems are not equipped to help in every case, or even ease the burden enough for many sufferers to the point where they can cope.”

When Adam Ross eventually made the decision to let go of his body, it was one he did not take lightly. He worked compassionately to try to help his loved ones understand why this was his only option. He wanted them to trust that he had done everything he could to save his life. “Adam was very conscious of not dying before we all were connected in some way with him and his decision,” Anne shares. “He was extremely thoughtful, courageous and brave.”

Adam didn’t want to hurt anyone or cause us sorrow,” Brian adds. “I think that’s probably why he struggled for so long.” Adam considered every detail of his planning in a manner that radiated living. One of the paramedics who had been sent to recover the body later expressed how touched the team had been by the degree of Adam’s care, diligence and self-respect. Adam’s prior work to mitigate the shock could only go so far in preparing his family members and friends for the unfolding grief and loss. “He knew and verbalized how hard this was going to be on us,” Anne says. “You never want to think about someone having to die the way I was. It was so traumatic for us.”

Adam’s dying process would of course be important to him. “He would have liked to have seen this dialogue happen in our society,” Anne says. In his final letter, Adam articulates his love for life and the people he cared for, the personal peace he had come to in his choice, and his deep regret for the sadness his death would cause. “My pain has allowed me to understand what truly matters... Unfortunately, the miracles I witness each day are not enough for me to choose to endure this much pain... I don’t want to die, but to be free of the pain that I am condemned to live with, I have no other choice... The toughest of all places in the world to die.”

He continues, “Of course, I imagined dying in a different way, as it should be our right to choose when and how we would like that process to go, especially when you live with unbearable incurable pain that will not take you from this world naturally. But, like so many other aspects in this life, the human race has far to go in this regard.” Then, true to his thoughtful nature, Adam encourages us with the gift that death can offer to those open to embracing the opportunity: “Nothing brings people closer than loss;” he concludes. “So be closer.”
Media matters
In 2017, Dying With Dignity Canada’s outreach in the media helped shape the public’s understanding of the Canadian experience with assisted dying.

When a big story on assisted dying breaks in Canada, our phones ring off the hook with calls from journalists looking to get our take. That was the case in 2015, when the Supreme Court struck down the Criminal Code ban on assisted dying, and it’s still the case today. Increasingly, though, we at Dying With Dignity Canada are the ones breaking the news, tipping off journalists on the latest developments related to your end-of-life rights. In 2017, we raised the alarm on the emerging barriers to assisted dying access that we encountered in our work. In addition, we provided a conduit for Canadians who wanted to share their journey with choice with the general public.

One of the most important stories we were involved in breaking came out of Winnipeg. In June, we received a tip about a controversy brewing at St. Boniface General Hospital, where assisted dying is not allowed. The hospital’s board, our source said, had voted only days after it had been lifted — and our source had documents to prove it.

We put him in touch with Jane Gerster, the health reporter with the Winnipeg Free Press. The resulting story made the paper’s front page the very next day. More importantly, it sparked a countrywide dialogue about the injustice of allowing public health services to trump patients’ human rights.

Listing with whistleblowers and uncovering secret documents sounds exciting, and it is. But we’re even prouder of our participation in stories that put an intimate, human face on issues surrounding choice at end of life. Take, for example, our efforts to help CBC’s Noreen Campbell to share her story with Canadians.

A nurse, healthcare educator and a member of DWDC’s Disability Advisory Council, Noreen made a request for assisted dying on June 19, 2016, just two days after it was formally legalized in Canada. She had already undergone treatment for an aggressive form of oral cancer before being diagnosed with COPD. The condition severely restricted her breathing — she likened it to sucking in air through a McDonald’s straw — and it was getting worse. She feared suffocating to death and saw ending her life with a doctor’s help as a kinder alternative.

As one of the first Canadians to be assessed for assisted dying under the new federal law, Noreen gleaned rare insights on what it’s like to try to exercise one’s right to a peaceful death. Always a consummate teacher, she wanted to share the lessons she had learned. She enlisted DWDC to help her get the job done.

In the weeks before Noreen’s death in January 2017, we introduced her to trusted journalists at the Victoria Times Colonist and The Globe and Mail. On New Year’s Day, she sent us an email asking whether we could pitch CBC Radio host Dr. Brian Goldman — whom Noreen called her “hero” — an interviewing her for his program, White Coat, Black Art. He said yes without hesitation.

“The to think that all this is possible if you live within the right borders. Lots of work [to do], Canada — but good to be a Canadian today.” — Noreen Campbell

The newspaper and radio stories featuring Noreen were the first of their kind in Canada. They offered the country a glimpse into what it means to take control of the dying process. This is what Noreen had wanted and what had motivated her to ask for our help in spreading her message of hope.

“If our work producing this interview...helps to relieve anxiety about progressive disease, encourages palliative care, and brings peaceful death — awesome,” Noreen told Dr. Goldman by email on January 12, the day she chose to end her suffering. “To think that all this is possible if you live within the right borders. Lots of work [to do], Canada — but good to be a Canadian today.”

Financial information at a glance
When you invest in Canadians, they return the favour.

That’s always been our experience here at Dying With Dignity Canada, and it was definitely the case in 2017. Last year, our annual revenues jumped 15 per cent from 2016, to a total of $876,798. As a result, the $92,000 deficit we had budgeted for going into 2017 would narrow to $62,748 by year’s end.

The generosity of our donors, old and new, is responsible for the better-than-expected returns. Nearly 3,000 individuals and families gave to DWDC over the course of 2017, a 12 per cent increase over the previous year. In addition, our Defenders of Dignity monthly giving program grew from 788 donors to a total of 888.

We attribute the growth of DWDC’s donor base to the ever-expanding reach of our programs — from exposing and breaking down barriers to assisted dying access to the healthcare system, to the rewarding work we do to support individuals and families who are navigating their legal end-of-life choices. From coast to coast, Canadians saw how DWDC is effecting change in their communities, and they wanted to find out how they could make us an even stronger force for justice.

As a donor-funded organization, we know that our supporters expect us to use their dollars to make big of a difference as possible. We take pride in the fact that, in 2017, eight out of every 10 dollars we spent went toward our programs.

In the last fiscal year alone, we believe that we’ve found a formula for healthy growth. By investing in Canadians, respecting donors’ dollars and always putting the person first, we continue to grow our base of support and solidify our position at the heart of change.

This is now the keystone of our fundraising strategy. It’s also at the core of who we are.

In 2017, 12 per cent of our annual revenues went toward promoting respect for Canadians’ end-of-life rights and options. As a donor-funded organization, we know that our supporters expect us to use their dollars to make big of a difference as possible. We take pride in the fact that, in 2017, eight out of every 10 dollars we spent went toward our programs.

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Program spending by type

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<th>Category</th>
<th>2015</th>
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<tr>
<td>Programs</td>
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<td>Administration</td>
<td>31%</td>
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- **Educating about end-of-life rights and options**: 31%
- **Providing support to Canadians and their healthcare practitioners**: 31%
- **Exposing and breaking down barriers to access**: 26%
- **Promoting respect for Canadians’ right to medical assistance in dying**: 12%
Françoise Hébert has devoted hundreds of hours to making Dying With Dignity Canada a formidable force for justice. She first signed up to volunteer for the organization in late 2012, six months after she retired from her role as CEO of the Alzheimer Society of Toronto. By early 2013, Françoise was already representing DWDC in media interviews. By the spring, she had been elected as a member of our national Board of Directors, helping to steer the ship during a critical time in our history. Today, Françoise continues to propel our success in 2017.

Whether they contributed monthly, left a legacy in their will, or gave for the first time ever, DWDC’s donors fueled our successes in 2017.

Françoise Hébert

Leaving a legacy

We are immensely grateful to Françoise, who, like all of our donors, fueled our successes in 2017. She has also taken steps to ensure that DWDC will be a strong defender of Canadians’ rights for into the future. As a member of the Christie Bentham Legacy Society, she has committed to leaving DWDC a significant gift in her will. Françoise is passionate about DWDC’s work to defend the end-of-life rights of all Canadians, which is informed by both her personal experiences and her mother’s illness.

Françoise says, “I have seen how awful a death is in the final stages of dementia. I never want to go there, even.”

Françoise explains, “The fact that you’re frail, the fact that you’re very effective, and the fact that you’re in pain is something that you would create as a deep, personal and passionate.” It is significantly informed by her mother’s experiences with a rare form of muscular dystrophy. “I saw my mother suffering through a horrible death,” Françoise says. “She ended up basically wasting away.”

Her mother, she says, would have never asked for help to hasten her death. But if Françoise were in her same position, she would want the comfort of knowing that she would have choice in the face of unbearable suffering. “It’s about having that option, recognizing that very few people will avail themselves of it.”

In part because of her 10 years with the Alzheimer Society of Toronto, Françoise is especially passionate about DWDC’s work to defend the end-of-life rights of Canadians with conditions, such as dementia, that rob victims of their mental capacity as a matter of course. “I am a great believer in advance requests for assisted dying, something that you would create when you have the capacity to make an informed decision.” She says, “I have seen how awful a death is in the final stages of dementia. I never want to go there, even.”

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Françoise explains, “The fact that you’re frail, the fact that you’re very effective, and the fact that you’re in pain is something that you would create as a deep, personal and passionate.” It is significantly informed by her mother’s experiences with a rare form of muscular dystrophy. “I saw my mother suffering through a horrible death,” Françoise says. “She ended up basically wasting away.”

Her mother, she says, would have never asked for help to hasten her death. But if Françoise were in her same position, she would want the comfort of knowing that she would have choice in the face of unbearable suffering. “It’s about having that option, recognizing that very few people will avail themselves of it.”

In part because of her 10 years with the Alzheimer Society of Toronto, Françoise is especially passionate about DWDC’s work to defend the end-of-life rights of Canadians with conditions, such as dementia, that rob victims of their mental capacity as a matter of course. “I am a great believer in advance requests for assisted dying, something that you would create when you have the capacity to make an informed decision,” she says. “I have seen how awful a death is in the final stages of dementia. I never want to go there, even.”

Françoise was already representing DWDC in Canada a formidable force for justice. She first signed up to volunteer for the organization in late 2012, six months after she retired from her role as CEO of the Alzheimer Society of Toronto. By early 2013, Françoise was already representing DWDC in media interviews. By the spring, she had been elected as a member of our national Board of Directors, helping to steer the ship during a critical time in our history.

Today, Françoise continues to propel our success in 2017.
We would like to recognize the members of the Christie Bentham Legacy Society, who have committed to leaving a future legacy gift to DWDC. We thank these incredible donors for their dedication to protecting the rights and choices of generations to come.

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