
The Importance of Debating Major Social Issues in Parliament:

The Example of Québec's Act respecting end-of-life care

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In an age when parliaments are often criticized for being too partisan in nature, it is still possible for legislatures to serve as exceptional forums to conduct in-depth examination of major social issues and foster broad-based consensus. Using the process employed when considering Québec's recent Act respecting end-of-life care as an example, the author shows how important and contentious social matters can be debated and examined in a constructive way by legislators, along with extensive participation from civil society. He concludes by proposing that Canadian parliaments may want to investigate whether to follow the examples of Finland and France by creating special committees to review such issues.



Parliaments, at their best, are capable of creating exceptional forums in which to conduct in-depth examination of major social issues, in a calm and non-partisan manner. Such initiatives should take place more often in my view because they give rise to the kind of broad-based consensus that fosters social progress. They also enhance the image of Parliament, which is too often seen as an arena for partisan debate. Québec's recent discussions surrounding its new *Act respecting end-of-life care* provide one recent example of the benefit of debating social issues.

The Select Committee on Dying with Dignity

The Act respecting end-of-life care was adopted in June 2014. Founded on respect, compassion and understanding, with regard to people who are at the end of their lives, the act sets out the rights relating to end-of-life care and prescribes the conditions under

which a person may obtain medical aid to die. The debate on euthanasia and assisted suicide has been going on in Québec for some 30 years, during which time a number of court rulings have been handed down on the subject.

The debate reached an important juncture in 2009, when the Collège des médecins du Québec published a paper which proposed that society, medical practitioners and the legislature consider whether euthanasia might not be, in cases of exceptional suffering, an appropriate final step in the continuum of end-of-life care. At about the same time, opinion polls showed that the public, in general, and doctors, in particular, supported medically assisted dying by a margin of more than 70 per cent, provided appropriate safeguards were put in place.

It was against this background that, on December 4, 2009, the Members of the National Assembly unanimously adopted a motion to create a select committee to study the issues relating to dying with dignity.

The Select Committee on Dying with Dignity was chaired by a government MNA and vice-chaired by the sponsor of the motion, an Official Opposition member. The committee's mandate was to study end-of-life issues, which included euthanasia and assisted suicide. In addition, it was to examine such subjects as palliative care, palliative sedation, refusal and

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cessation of treatment, and end-of-life planning, in case of incapacity.

Once the Committee had been struck, a four-and-a-half-year period of rigorous study and consultation followed. It is important to note that the Committee began, continued, and completed its mandate during three different legislatures, in which two different political parties held power and four parties were represented in the House.

The Committee's work was characterized by a targeted approach and a desire to give all citizens who wished to state their opinion a chance to do so.

It began by hearing approximately 30 experts from disciplines such as medicine, law, ethics, sociology and psychology. It then released a consultation document to increase public awareness of the subject and facilitate public participation.

The idea was to consult the greatest possible number of citizens. The Committee did everything in its power to encourage people to express their opinion; they sought out a briefs or comments, welcomed testimony before the committee without submitting a brief, and promoted an online questionnaire.

In total, 273 briefs were received and the Committee travelled throughout Québec to meet with people who wished to participate. From September 2010 to March 2011, 239 individuals and organizations were heard during 29 days of public hearings held in eight cities. Another 100 or so citizens expressed their views during the open mic periods provided.

More than 6,500 people completed the online questionnaire and some 16,000 comments were received by email, mail and fax, or included with the online questionnaires.

Clearly, people were provided ample opportunity to give their opinion on this most sensitive of issues. The hearings unfolded in a calm and serious atmosphere, with participants always respectful of opinions contrary to their own.

In June 2011, taking pains to cover all of the bases, four members of the Committee went on a study mission to the Netherlands and Belgium, two countries where certain forms of assisted dying are authorized, and to France, where the subject has been hotly debated for several years now.

The four delegates attended 21 meetings with parliamentarians, representatives from the main government departments concerned, doctors, nurses, palliative care workers, and ethics and legal experts.

Throughout its mandate, the Committee had a team of researchers at its disposal who organized and studied data using NVivo qualitative analysis software, as well as participated in drafting documents later published by the Committee.

The Committee's report, crafted after 51 deliberative meetings, contained 24 unanimous recommendations; it was tabled in the National Assembly on March 22, 2012. For the occasion, the Committee's nine members, representing all four political parties, held a press conference to announce their recommendations to the public. The report was extensively covered in the media, as was each stage of the Committee's work leading up to it. The rigour of the Committee's methods and the quality of its report were qualified as exemplary by political observers and the public alike.

Whatever their political allegiance, all parliamentarians who participated in the work of the Committee can be proud of the work accomplished.

The Act respecting end-of-life care

In June 2013, little more than a year after the report was tabled, the Minister for Health and Social Services introduced Bill 52.

The bill drew largely on the Committee's recommendations on palliative care, advance medical directives and the strict conditions under which a person may obtain medical aid to die. For example, such a request may be made only by a person who has reached the age of majority and is capable of consenting to care. The person must be an end-of-life patient who is suffering from a serious and incurable illness, is in an advanced state of irreversible decline in capability, and is experiencing constant and unbearable suffering that cannot be relieved by medical means.

As part of its examination of the bill, the Committee on Health and Social Services held public hearings in the fall of 2013, during which 55 groups gave their opinion on the bill. From November 2013 to January 2014, almost 52 hours were spent on clause-by-clause consideration, resulting in the unanimous adoption of 57 amendments.

However, in March 2014, just as the bill was about to come to a vote, the Assembly was dissolved and the 40th Legislature ended. In May 2014, at the start of the 41st Legislature, and after an agreement had been reached between the four political parties represented in the House, the Members unanimously agreed to reintroduce the bill at the stage it had reached in the legislative process prior to the end of the 40th Legislature.

In a gesture that was symbolic but deserves mentioning nonetheless, the bill was reintroduced by two co-sponsors: the Minister of Health and Social Services, and the Official Opposition member for the riding of Joliette—the same MNA who had introduced the initial motion in December 2009, vice-chaired the Select Committee, and introduced Bill 52 as Minister for Social Services.

The vote held on June 5, 2014, was one in which Members were free to follow their conscience and vote in accordance with their deepest convictions. In the end, 94 Members voted in favour of the bill, and 22 against.

Though the act has now been assented to, a healthy debate continues to make waves in Québec society.

Other Examples of Non-partisan Debates on Social Issues

The example of the process leading to the adoption of Bill 52 proves that parliaments can engage in non-partisan debates on important social issues and obtain concrete results. Indeed, other collaborative parliamentary initiatives in Québec have proven every bit as exemplary.

Here are three examples of other mandates carried out through collaborative efforts, each of which resulted in a report containing conclusions and unanimous recommendations.

- The link between artificial tanning and skin cancer was studied in response to the tabling of a citizens' petition. The committee's recommendations led to legislative amendments which, among other things, prohibit persons under 18 from having access to artificial tanning services.
- Members concerned by the phenomenon of homelessness in Québec published a consultation document, received almost 150 briefs, and heard from approximately 100 people during hearings held in four cities. The committee's 33 recommendations subsequently served as a guide for government policy.
- A parliamentary committee looked at the issue of how to better protect Québec investors in mutual funds. The committee published a consultation document on the subject. The committee received 35 briefs and 140 opinions, and heard 30 individuals and organizations in the course of public hearings. Its recommendations led to legislative measures aimed at better protecting Québec investors and strengthening their confidence in the financial sector.

It is interesting to note that, on average, six mandates of this kind are carried out each year in Québec, and some of them result in significant legislative amendments and changes to government policy.

It is safe to say that, more often than is commonly thought, the Members of the National Assembly examine major social issues in a spirit of collegiality that rises above all partisanship and focuses on the common interest. All of which proves that it is possible for parliamentarians to undertake fundamental discussions that eventually result in constructive reform.

Already, at the beginning of the 41st Legislature, a number of committees have taken on mandates of this kind. One example is the Committee on Citizen Relations. In the coming months, its members will study two important issues: poverty among young children, as well as the challenges faced by informal caregivers, who devote their time to providing care to their loved ones.

In addition, just recently, the government launched its anti-bullying program by announcing a new online consultation. This problem is another major issue that is best dealt with in discussions that bring non-partisan values to the fore.

Conclusion and Future Considerations

To my way of thinking, it would be productive if the Members agreed to create a committee that concentrated specifically on major social issues—a committee similar, perhaps, to those which exist in France and Finland.

In France, the Senate created a senatorial delegation for strategic foresight (*Délégation sénatoriale à la prospective*), whose mandate is to study changes in society and maintain relations with other bodies, French and foreign, that focus on issues relating to future social developments.

The French Senate drew its inspiration from Finland's Committee for the Future. With the creation of this committee, Finland inaugurated an ongoing process of reflection and concerted action with regard to the future of the country.

There must be no taboo subjects, and the Members must choose issues that have an impact on people's lives and could readily be studied in that most appropriate of forums: Parliament.