



REALity

REALISTIC | EQUAL | ACTIVE | for LIFE

CONSERVATIVE LEADERSHIP RACE 2020

Since the federal election last October, the media have insisted that the Conservative Party, in order to be successful, must remove social conservative policies from its platform. That may be the opinion of the media, but that does not reflect the views of many Canadians.

Fortunately, to date, four social conservative candidates (pro-life and pro-family) have put their names forward to run for the Conservative leadership. They are:

- Richard Decarie: a former staff member for Prime Minister Stephen Harper, from Quebec;
- Derek Sloan: elected as MP in October 2019 in the Ontario riding of Hastings-Lennox and Addington;
- Dr. Leslyn Lewis: a Toronto Christian lawyer who has a PhD in international law;
- Jim Karahalios: a social conservative activist in the Ontario Provincial Conservative Party, who launched the "Axe the Carbon Tax in Ontario" and ran for leadership of the Provincial Progressive Conservative Party of Ontario.

ATTACKS ON SOCIAL CONSERVATIVES

Mr. Decarie was interviewed on CTV on January 22, 2020 during which he stated that homosexuality was a "choice". Homosexual activists who are also journalists, quickly sharpened their knives, and attacked Mr. Decarie (Justin Ling, National Post, January 24, and Jaime Watt, Toronto Star, January 26) claiming that he should not be permitted to run for the leadership because of his "ignorant" beliefs. Red Tory, left-leaning Conservative leadership candidates, Peter MacKay, MP Erin O'Toole (Durham) and MP Marilyn Gladu (Sarnia) agreed that Mr. Decarie's comments were unacceptable. MacKay and Gladu also stated that they would be participating in Toronto's

Gay Pride Parade in June. O'Toole will march if the police are in uniform. For convenience sake, perhaps these candidates should be all together dancing on a single float labeled "Red Tory Conservative Candidates" to ensure that their "tolerance" is duly noted. None of the above three, however, has announced that he/she will also be attending the popular Caribana Parade in Toronto this summer. Why are they discriminating against this other cultural minority event?

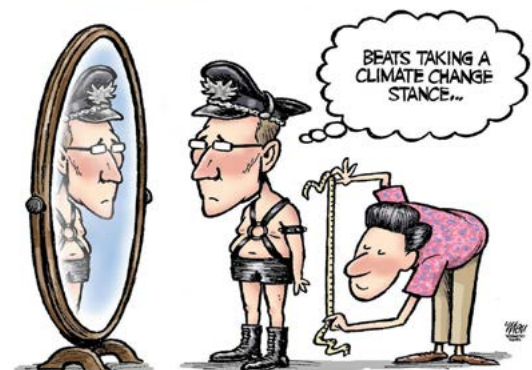
FIX IS "IN" FOR MACKAY

It seems that the "fix" is in by the Conservative elites and the media for Peter MacKay to win the leadership. They want him to receive a coronation at the convention. Mr. MacKay is no friend of social conservatives. He stated after the October 2019 election, that social conservative policies were a "stinking albatross" around the party's neck. The "fix" on Mr. MacKay is evidenced by the fact that he, apparently, was given prior notice of the criteria to enter the leadership race, which requires submitting \$300,000 and 3000 signatures, from 30 ridings across Canada. Mr. MacKay completed and submitted all of this by the end of January, even though prospective candidates are only required to submit an initial \$25,000 and 1000 endorsements by the end of February, the remaining \$275,000 and 2000 signatures due by March 25. Mr. MacKay's submission, placed well in advance of the deadline, indicates that he and his organizers had been previously advised of the criteria released to the public only two weeks previously on January 13, 2020.

CONTENTS

CONSERVATIVE LEADERSHIP RACE 2020.....	PAGE 1
THE DECEIT OF PM TRUDEAU IN EXPANDING THE ASSISTED SUICIDE LAW.....	PAGE 2
THE MISCALCULATIONS OF THE SUPREME COURT JUDGES ON ASSISTED SUICIDE LAW.....	PAGE 3
B.C. GOVERNMENT FORCING ASSISTED SUICIDE ON PALLIATIVE CARE FACILITIES.....	PAGE 4
HOMOSEXUAL ACTIVISTS AIM TO CONTROL.....	PAGE 5
PRESSURE TO DECRIMINALIZE ALL DRUGS.....	PAGE 5
PRESIDENT'S MESSAGE.....	PAGE 6

ITEM PETER MACKAY WILL ATTEND PRIDE



Peter MacKay prepares for the Gay Parade. Cartoon: Theo Moudakis, The Toronto Star, January 30, 2020



Red Tory Leadership Candidates.
Cartoon: Gary Clement, National Post, Feb 1, 2020

It is critical that social conservatives participate in the leadership race. To have a vote on the leadership one must become a member of the Party by April 17, 2020. You may vote by mail for the Conservative leader and need not attend the convention in person. It will be held in Toronto on June 27, 2020.

Membership costs only \$15. To become a member, apply online, or download the application form from the website and mail the membership application to:

Conservative Party of Canada
1720-130 Albert Street,
Ottawa, ON K1P 5G4

You can also phone the Conservative headquarters to become a member or check if your membership is still valid **1-866-808-8407**.

We have a job to do, so let's do it! †

THE DECEIT OF PRIME MINISTER TRUDEAU IN EXPANDING THE ASSISTED SUICIDE LAW

“Trudeau has learned nothing from the last election. ... He is using the Quebec lower court’s decision and the consultation process to camouflage the implementation of his own ‘progressive’ perspective on assisted suicide.”

Prime Minister Trudeau’s mistakes never end. He plans to amend the physician-assisted suicide legislation, called Medical Assistance In Dying (MAID), pretending that he is required to do so because of a court decision last September by a single judge on a Quebec lower court. That judge held that the law on assisted suicide was unconstitutional because it was based on the fact that the individual’s death must be “reasonably foreseeable” before it can be applied. She argued that the provision was unfair to patients who were “suffering” but were not terminally ill.

This decision of a provincial lower court is binding only in the province of Quebec, not nationally. Trudeau could have appealed this decision, but on the advice, presumably, of Minister of Justice, David Lametti, he did not do so. (Lametti did not vote for the current federal law when it was before Parliament in June 2016 because he thought it was too restrictive).

The Quebec court’s decision provided that the amendment to remove the expression “reasonably foreseeable” from the law must be implemented within six months, that is, by March 11, 2020. This was a nearly impossible feat because Parliament has sat only briefly since the federal election in October. A four month extension has now been requested.

Trudeau and Lametti are also using the Quebec decision as an opportunity to further expand the law to provide for its application to mature minors between 14 to 17 years of age to obtain medical aid in dying. Parents will have no authority to stop this in most provinces, since the decision as to their child’s capacity to understand the nature and the consequences of

the procedure will be determined by the physician, who will be carrying out the fatal procedure. Other amendments include allowing death for persons with mental illness (such as those with depression or schizophrenia) and persons, such as those with dementia, to make advance directives for an assisted death before losing their capacity to consent. Yet, these issues have not been extensively debated or resolved by Canadians.

Under the pretense that the federal government was obliged to act on the Quebec decision, on January 13, 2020, the government announced a brief, two-week public online consultation, which was to end on January 27, 2020.

This consultation was misleading for several reasons. The problems included its brief duration; the questions assumed that the respondent was in favor of MAID and wanted it to be expanded and that any safeguards proposed were to be within an expanded MAID legislation; and the opportunities to comment on the questionnaire allowed only enough characters for a few short sentences.

A spokesperson for Justice Minister Lametti has stated, “What we’re doing with this consultation is trying to assess from Canadians their views on the medical-assistance-in-[dying] regime and some of the finer points, to try to see if there is shared consensus on other issues...for example, like advance requests [for MAID]”.

There is no consensus in Canada on amending the legislation; only a consensus among the Laurentian group (Montreal, Ottawa, Toronto), but not the general public.

Trudeau has learned nothing from the last election. He still only speaks, as is his customary practice, for the Laurentian group. He is using the Quebec lower court’s decision and the consultation process to camouflage the implementation of his own “progressive” perspective on assisted suicide.

Please write to your MPs (regardless of party) to object to any expansion of the assisted suicide law. †

THE MISCALCULATIONS OF SUPREME COURT JUDGES ON ASSISTED SUICIDE LAW

One of the most glaring examples of why judges should not change a law in accordance with their own policy preferences, contrary to a law passed by Parliament, is the decision of the Supreme Court of Canada on assisted suicide (Carter vs Canada Attorney General, February 2015).

In this decision, the Supreme Court overturned the law that has stood for centuries prohibiting assisted suicide. In doing so, the court ignored its own 1993 decision on the issue. In the case of Sue Rodriguez, the court upheld the prohibition of this procedure.

The Supreme Court changed its previous decision by ignoring the established legal doctrine of stare decisis, which requires courts be bound by their previous decisions. They ignored precedent, they argued, because society has evolved so that it now accepts assisted suicide. (The purpose of stare decisis is to provide consistency, dependability, and stability in the law.)

The court also rejected the justifiable concerns that vulnerable people, such as the mentally ill, minors, and the aged, would be unable to protect themselves from pressure to end their lives. The court's response to this concern was that "properly designed and administered safeguards would protect such vulnerable people from abuse and error". In the course of its judgement the court referred to other jurisdictions that had permitted physician assisted suicide, which had provided "a body of evidence" indicating the effective use of safeguards to protect the vulnerable. However, countries such as Belgium and the Netherlands, that have implemented legislation that allows physician assisted suicide, have provided a dubious and extremely problematic record about the value of any safeguards.

THE RESULT OF THE CARTER CASE

The Carter decision by the Supreme Court of Canada has dramatically changed our country. No longer is assisting in the death of another person a criminal offence, but, instead, has become, according to the media and other progressives, a "blessing", releasing patients from the inconvenience of living and suffering. Thus, in these nearly four short years since the law was changed (June 2016), the procedure of medically assisted suicide has been normalized and become a "right" for patients and a mandatory procedure for physicians to provide or effectively refer, regardless of any conscientious objection they may have.

Consequently, rather than assisted suicide being an exception, as touted by the court, it has now become common practice to end many lives, rather than treating a patient's illness. For example, a man in British Columbia was granted assisted suicide for the reason that he was depressed. In Quebec, three individuals were granted assisted suicide because they had fractured hips. According to the Fourth Interim Report on Medical Assistance in Dying, released by Health Canada on April 25, 2019, there were 6700 assisted deaths as of October 31, 2018. This data however, is incomplete

as Quebec and the three territories did not provide full information to Health Canada. An accurate number of assisted suicide deaths, as of December 31, 2018 is 7949. Nearly all of these assisted deaths were euthanasia (by lethal injection) rather than by self-administered death (suicide). According to an analysis in Quebec, between April 1, 2017 and March 31, 2018, there were 142 deaths that did not fit the criteria set by the law. In 67 of these cases, the physician did not provide the procedural safeguards or provide the required information to determine if the assisted suicide complied with the law.

Assisted suicide law is out of control in Canada and is a disaster for the dignity of life.

SUMMARY OF THE MISCALCULATIONS BY THE JUDGES IN THEIR ASSISTED SUICIDE DECISION

The Supreme Court judges' decision, to change the law on assisted suicides in accordance with their own policy preference, was based on several serious miscalculations:

1. The court did not have sufficient information or understanding of assisted suicides that were occurring in other jurisdictions. The court based its decisions on the false belief that these laws were working satisfactorily.
2. The judges believed that their decision to permit assisted suicide would not lead down a slippery slope to an expansion of the law and would only be applied in exceptional cases. The law has now been normalized as a "right" for patients.
3. The judges' opinion that society had "evolved" to accept the concept of assisted suicide was misplaced. It was their decision on assisted suicide that has directly led to the changing of Canadian values and ethics on the issue. This is because the law is a teacher, and forms the consciences of many people. Many believe that what is legal is acceptable and as a result, they participate in such activities as assisted suicide, which they would not have considered doing before it was legalized.
4. The court miscalculated that coercion or errors in applying the assisted suicide law could be avoided by a system of careful safeguards. Even the very limited safeguards that were put in place when the law was passed in 2016 have now been eliminated by other judges, and also by physicians who, in practice, ignore restrictions and have not been charged for failure to comply with the law.
5. The judges blatantly stated in their judgement that "nothing in the decision would compel physicians to provide assistance in dying". Conscientious objection by physicians has been overturned by the courts, which demand that physicians must refer patients for this procedure. This referring of patients makes them participants in a wrongful act. Provincial funding agencies are now ordering government financed institutions, providing palliative care, to include assisted suicide among their services. (See story in this issue on the BC government imposing assisted suicide on a hospice in Ladner, BC)

JUDGES ILL-SUITED TO MAKE PUBLIC POLICY

This tragedy of the assisted suicide law has occurred because judges mistakenly believed that somehow they were superior to the public, and were justified in changing the law and thereby Canada's social, political and cultural values in accordance with their own policy preferences.

Judges, however, have no special or esoteric knowledge or ability to make decisions on public policy. Charter of Rights cases are based only on the narrow arguments of the litigants, which are all too frequently based on the wishful thinking of individuals or organizations that have the financial clout to initiate costly litigation. Neither do judges have the advantages of Parliament to make policy decisions, such as access to research facilities. As a result, they do not have

all the facts on an issue. They do not have the luxury of time to consider decisions thoroughly or access to the practical experience and views of the public on issues that are increasingly complex, socially and scientifically. Simply put, judges are incompetent to make policy decisions because they do not have the background and understanding to make public policy decisions which deeply affect the lives of Canadians.

Why are Canadians placing their destiny in the hands of nine appointed individuals who, instead of objectively interpreting the law, as they are supposed to do, are using their position to arrogantly change our laws according to their own perspective?

Judges should be restrained from carrying out their arrogant belief that they are capable of making policy decisions. They are not. †

B.C. GOVERNMENT FORCING ASSISTED SUICIDE ON PALLIATIVE CARE FACILITIES

The B.C. NDP government has demanded that palliative care services include physician assisted suicide.

The Irene Thomas Hospice, which is a ten bed palliative care facility located in Ladner B.C., has refused to comply with this directive, even though threatened with the loss of provincial funding and its lease on land held by the provincial government.

The problem began in September 2016 (only 3 months after the physician-assisted suicide law—MAID—became law) when the B.C. Fraser Health Authority, which provides health funding in the region, directed health institutions that receive more than fifty percent provincial funding, to provide assisted suicide in their services.

The hospice receives \$1.4 million in funding from the province, of its total budget of \$3 million. The remaining money comes from private donations.

The hospice, which is not faith-based (the latter are exempted from the directive), is operated by a non-profit board. The board has refused to comply with the directive because medical assisted suicide is not compatible with palliative care.

The hospice did agree, however, that it was prepared to give up \$750,000 in government funding in order to fall below the fifty percent funding threshold to avoid providing assisted suicide to its patients.

The hospice is supported in its position by the Canadian

Hospice Palliative Care Association (CHPCA) and Canadian Society of Palliative Care Physicians, which, in a joint statement, upheld the fact that hospice palliative care is not compatible with MAID, and that assisted suicide is not one of the tools in the "palliative care basket". Further, it stated that national and international hospice palliative care organizations were unified in the position that MAID is not part of the practice of hospice palliative care.

What is so odd about the B.C. government's demand is that a hospital providing assisted suicide is located just minutes away from the hospice, where a patient could be referred for death, if so desired.

It appears, therefore, that the B.C. NDP Government is forcing euthanasia into palliative care services to create a precedent so that all palliative care services across Canada will also be forced to provide assisted suicide.

At the time of this writing, the hospice remains determined to uphold its principles and reject euthanasia procedures within its facility. This has occurred even though, according to the board's chair, Angelina Ireland, there has been a constant barrage of personal attacks on social media directed at the staff and board members of the hospice to discredit them and ruin their careers and reputations within the community. There is also an active chapter of Dying with Dignity, an euthanasia lobby group which is working aggressively against the hospice, because the latter sends the message that euthanasia is morally wrong, and is an improper way to treat terminally ill patients.

Please write to the B.C. Minister of Health, Adrian Dix, to request he stop his demands to force palliative care facilities to provide assisted suicide.

Minister of Health Adrian Dix
Room 337 Parliament Buildings
Victoria, B.C. V8V 1X4
Email: Adrian.dix.MLA@leg.bc.ca †

SAVE THE DATE

 **REAL Women of Canada**
ANNUAL GENERAL MEETING

SATURDAY, MAY 30, 2020

LIBERTY SUITES HOTEL
7191 Yonge St, 12th Floor, Thornhill, ON

MORE DETAILS IN THE NEXT ISSUE!

HOMOSEXUAL ACTIVISTS AIM TO CONTROL

There is no longer any doubt that the most vicious, intolerant groups are homosexual lobby groups. In January 2020, several of these groups in the U.K. led by the group “All-Out”, prevented Franklin Graham, son of the renowned evangelist Billy Graham, from speaking at eight different venues. Mr. Franklin has been attacked and vilified by these extreme homosexual activists, who describe his views as “discriminatory” and “repulsive”. These activists forced the cancellation of Mr. Graham’s bookings in eight major U.K. cities: London, Glasgow, Liverpool, New Castle, Cardiff, Birmingham, Milton Keynes and Sheffield. The intolerance of this horde, by way of this mob mentality, puts to rest any possibility of having tolerance for any voice with which it disagrees. The claim of the LGBT lobby that it is an “inclusive” social movement is certainly undermined by this obnoxious, hateful behaviour. This is not the first time that such groups have attempted to silence the voice of others who have different views than they. In the past, they have targeted the International Organization of Families (IOF) and the World Conference of Families, attempting to shut down their conferences.

These homosexual bullies wish to silence Mr. Graham because he speaks in support of the traditional marriage of a man and woman, and supports teachings from the Bible.

They are testing the waters. If Franklin Graham can be

silenced, it will be easier to silence others who have less prominence in society.

In carrying out these disgraceful acts, the lobby has been aided by the failing U.K. Labour Party, which lost 59 seats in the U.K. election. The Labour Party and its leader, Jeremy Corbyn, demonstrably anti-Semitic in their views, are affiliated with the original protest petition against Mr. Graham’s presence in the U.K.

The homosexual activists (and the Labour Party) have no regard for the right to free speech or religious expression. Indeed, they are replacing these with their own rules governing what is acceptable to say, and they brook no dissent. This is totalitarianism. These actions indicate that we have reached a grave juncture in civic society and political discourse, when freedom of speech, opinion and religion are no longer supported.

Franklin Graham has responded to the LGBT lobby’s behaviour by stating, “It is said by some that I am coming to the U.K. to bring hateful speech to your community. This is just not true. I am coming to share the Gospel, which is the Good News that God loves the people of the U.K., and that Jesus Christ came to this earth to save us from our sins...I’m not coming to the U.K. to speak against anybody, I’m coming to speak for everybody. The Gospel is inclusive. I’m not coming out of hate, I’m coming out of love.” †

PRESSURE TO DECRIMINALIZE ALL DRUGS

Pressure is building toward decriminalizing all drugs in Canada. This outcome will have the effect of making drugs easily available and, therefore, more readily consumed because there would be no legal sanctions prohibiting their use. Legalization of drugs makes them accessible and socially acceptable. As a result, the consumption of drugs is increased, especially by young people, who equate legalization with a lower degree of harm.

The Liberal Party had planned to decriminalize drugs, as evidenced by the following:

- The Liberal Party, at its policy convention in April 2019, passed a non-binding resolution in support of decriminalization of drugs.
- In June 2019, the House of Commons Standing Committee on Health, controlled by the Liberal majority, recommended the decriminalization of small quantities of illicit substances.

This plan, however, may have been changed with the election in October, when the Liberals were reduced to a minority government.

Prime Minister Justin Trudeau is stating now that the decriminalization of small quantities of drugs “is not part of our plans”. Recently appointed Minister of Health, Patty Hajdu, in January 2020, explained that the decriminalization of drugs would not take place since it was “premature” to do so, owing to the lack of treatment beds. By this statement, she has acknowledged that decriminalization of drugs could increase the number of addicts and that the current number of treatment beds would not be sufficient to care for those in need.

Should the Liberals decide to proceed with decriminalization, they would not have difficulty doing so in this minority Parliament. The Green Party supports the decriminalization of all drug possession on the basis that it will curb the opioid crisis in Canada. According to former leader, Elizabeth May (who remains a sitting MP), “We must stop treating drug addiction as a criminal issue. This is a national health emergency.” The federal NDP, at its national convention held in February 2018, passed a resolution to end the criminalization of the personal possession of all drugs, arguing that illicit drug use should be treated as a social justice and healthcare issue, rather than a criminal matter. This notion fails to take into consideration the fact that that legal sanctions against the use of drugs serves as a remarkable deterrent to their use.

Sweden, a country noted for its liberal views, has found a viable solution to drug addiction. The country stands out as a model for a more restrictive drug policy. From the 1960s to the 1970s, Sweden experienced a large scale drug problem, which created a drug epidemic. In 1998, Sweden changed its drug policy to include strong law enforcement and mandatory treatment. Treatment facilities are widely available in Sweden. As a result of its policy, Sweden has the lowest rate of drug use in Europe.

It’s only a matter of time before the Liberal government decides that decriminalization is a “go”, since it will be supported by the left wing parties.

Canada needs fewer people addicted to drugs, not more, which would be the consequence of decriminalizing drugs. †

PRESIDENT'S MESSAGE



Dear supporter of REAL Women of Canada:

Welcome to the February 2020 issue of e-REALity and the January/February 2020 issue for those who receive the hard copy bi-monthly.

We have a date set for our Annual General Meeting. Mark the date on your calendar, Saturday, May 30, 2020, in the Toronto suburb of Thornhill, starting at 1 pm. We will have a guest speaker. More details will be announced in the next issue of REALity. Our AGM is open to members and associate members of REAL Women of Canada whose membership is current.

The issue of providing MAID (Medical Assistance in Dying/Euthanasia) in palliative care hospices is raising its ugly head in Canada. You will read in this issue about the case in Ladner, B.C., where a palliative care facility has been given an ultimatum by the Minister of Health: offer MAID or risk losing provincial funding and even losing its lease on land held by the provincial government. There are two on-line petitions to support the hospice's stance not to offer MAID, which is diametrically opposite to palliative care. Please sign these petitions. <https://citizengo.org/en/signit/175861/view> and <https://www.ipetitions.com/petition/citizens-for-patient-safety>. Another situation has arisen in North Bay, Ontario, at the Nipissing Serenity House hospice which opened its doors in January 2020. The paint was barely dry, when four local doctors who perform MAID, went to the local newspaper to complain that the new hospice was not offering MAID. This hospice receives government funding, so it may only be a matter of time before the Ontario government threatens to pull or reduce the hospice's funding. On February 20, REAL Women of Canada issued a press release "[Palliative Care Under Siege](#)". Please write to the Boards of these two hospices to offer your support for their policy not to perform MAID on their patients.

On February 6, we issued an ALERT "Conservative Party Candidate Nominations" which we've reprinted in this issue of REALity. On February 18, we issued a press release "[Discrimination Against Conservative Senator Lynn Beyak](#)". There was an article in July 2019 REALity, "The Suffocation of Freedom of Speech in Canada", regarding the unjust situation in which Senator Beyak is embroiled.

Would you consider placing an ad for REAL Women of Canada in your local church bulletin? Church bulletins/newsletters are often a good source of advertising, as most have a sponsorship page with ads of companies and organizations. The cost of placing a church ad will vary, depending on your church's policy. Contact our Ottawa office if you would like to do this and we can e-mail you the PDF of the ad, which is about the size of a business card. We have one in color, and one in black and white. With the permission of your pastor, you would then submit this to your church along with the money for the cost of the ad. This is not a fundraiser for REAL Women. Rather, it is a way of promoting our name and organization.

Thank you so much for advocating for all the good that is in the world! Never give up.

Regards,

Pauline Guzik

Pauline Guzik, National President

MESSAGE BOARD

- **Annual General Meeting and Guest Speaker:** Saturday, May 30, 2020, Liberty Suites Hotel, Thornhill (Toronto), Ontario at 1pm. More details to follow in our next issue.
- **Action Item:** Whether you live in B.C. or not, please write to the B.C. Minister of Health Adrian Dix to request that he stop his demands to force palliative care facilities to offer "MAID" (Euthanasia). For further information, please see the article in this issue.
- **Membership:** If you are not a member of REAL Women of Canada, what are you waiting for? Join the only Canadian women's movement that provides an alternative voice to the radical feminist ideology movement which believes all Canadian women should think alike. REAL Women will be YOUR voice, standing up for pro-life values and for the values of the natural, traditional family. [JOIN NOW!](#) There is strength in numbers. Men are also welcome to join as associate (non-voting) members.

SUPPORT REAL WOMEN OF CANADA

PLEASE MAKE A CONTRIBUTION TO JOIN OUR WORK
TO DEFEND & PROTECT LIFE & THE FAMILY

Membership **\$30/year** | Groups **\$50/year** | Donation _____
Contributions, unfortunately, are not tax deductible.

Name _____

Address _____

City _____

Province _____ Postal Code _____

Tel _____ Email _____

Send online at www.realwomenofcanada.ca or by mail. Thank you.

REALity is a publication of **REAL Women of Canada**

PO Box 8813 Station T Ottawa ON K1G 3J1 | Tel 613-236-4001 | Fax 613-236-7203
www.realwomenofcanada.ca | info@realwomenofcanada.ca