



College of Physicians and Surgeons of Ontario,
80 College Street,
Toronto, Ontario, M5G 2E2

August 5, 2014

Re: College of Physicians and Surgeons of Ontario consultation on the
policy “Physicians and the Ontario Human Rights Code”

I welcome the opportunity to participate in the consultation concerning the College of Physicians and Surgeons policy “Physicians and the Ontario Human Rights Code,” approved in September of 2008. I will specifically be referring to the subsection ii “Moral or Religious Beliefs” in section 1 “Providing medical services without discrimination.”

The first part of subsection ii surveys the legal context in Ontario, and specifically the Ontario Human Rights Code, and offers observations on how that affects the practice of medicine. It offers physicians “an indication of what principles may inform the decisions of Courts and Tribunals”, and so is largely informative, and does not take a position on issues.

The “College Expectations” section, however, establishes guidelines for physicians to follow.

I am glad that in the first of the “College Expectations” (“Communicate clearly and promptly about any treatments or procedures the physician chooses not to provide because of his or her moral beliefs.”) the policy recognizes that there may well be some treatments or procedures that a physician cannot, in good conscience, offer. It is vital that our society respect freedom of conscience. For the common good of any society it is essential that the state, or professional associations with power over their members, not intrude into the sanctuary of conscience. The protection of freedom of conscience is a basic human right of all people, whatever their

faith or lack of faith. Many people with clear religious beliefs selflessly serve others as a result of those beliefs, in medicine and in other areas, and their service is of inestimable benefit to all of us. Our society would be poorer without that service, and from that perspective alone it is important that freedom of conscience be respected. In my September 12, 2008, submission, the last time there was a consultation on this policy, I wrote: “Profound moral and religious convictions motivate and guide individual physicians, as well as nurses, pharmacists, and others. When I refer to physicians I also have in mind the others who use their skills and knowledge in the work of healing. In our province, and around the world, individuals and health care institutions motivated and guided by moral and religious convictions serve the sick and the suffering, and do so with respect and compassion. The benefits to society have been, and are, immense. For those who so generously devote their lives to the noble vocation of healing, ethical and religious convictions are not something optional or disconnected from the good they do.”

The third expectation, in the paragraph “Treat patients or individuals ...” is admirable. All patients should be treated with respect, and the physician-patient relationship should not be used as a forum for seeking to convert someone to one’s religious beliefs, or for criticizing other people, or entering into a debate with them. Those who have given their lives to the sacred vocation of medicine, and whose service is motivated by religious belief, treat the patient with special reverence, for he or she is seen as a child of God. Speaking only of my own religious tradition, physicians and hospitals whose mission is modeled on that of “Christ the Healer” are now, and have always been, agents of profound healing, and that is most appreciated by those who experience it, whatever their faith or lack of faith. If a physician, operating out of that richly beneficial medical tradition, politely declines to become involved with things such as contraception, abortion or (as may happen, eventually) euthanasia, then it would be a grave injustice to the physician, but also a loss to society, to seek to suppress his or her freedom of conscience.

The second expectation “Provide information about all clinical options ...” and the fourth “Advise patients or individuals ...” could have the potential for an infringement upon the rights of conscience of a physician, depending on the extent to which he or she is required to become actively involved in facilitating actions which go against his or her

conscience. A lot depends on what is involved in “help the patient or individual make arrangements to do so.”

I will end with a quote from my submission to the previous consultation, in 2008: “I urge the College of Physicians and Surgeons to support a physician who seeks to follow his or her conscience, and to take this opportunity of the preparation of a policy, to provide helpful and practical guidance to physicians on how to deal with the sometimes difficult situations they face, in a way that will allow them to maintain their moral integrity.”

+ Thomas Card. Collins

Cardinal Thomas Collins,
Archbishop of Toronto
President of the Assembly of Catholic Bishops of Ontario