Thank you, Chair.

I am Amir Attaran, professor in both the faculties of law and medicine at the University of Ottawa. Health law is my field, and while I know Bill C-14 well, I am not going to talk about it much.

Instead, I am going to tell a cautionary health law story, out of Parliament's history books. For history teaches that the Senate should not pass C-14.

In 2004, Parliament passed Bill C-6, otherwise called the *Assisted Human Reproduction Act*. Unlike Bill C-14, which is about ending life, the *Assisted Human Reproduction Act* is about creating life. Then, as now, because the subject touched life itself, Parliament felt it that had to micromanage the nitty-gritty, because without "national standards", there would be a patchwork, the provinces couldn't manage, the sky would fall – you've heard all that from others.

So, with that inflated sense of urgency, the House gave he Assisted Human Reproduction Act first, second and third reading, all in a single day—hurling it supersonically into the Senate's inbox. The Senate dashed off to committee, where the Bill got a little study, but not much. The Assisted Human Reproduction Act traveled from bill to law inside of a month.

At the time, many warned, isn't this haste ironic? For if creating life was so ultra-sensitive that Ottawa had to regulate it, shouldn't Parliamentarians labour over it for, you know, at least two meals? Lunch without supper does not sober second thought make.

Now, is this sounding familiar yet? Good. Because here comes the scary part.

Just as Bill C-14 places legal limits on <u>ending</u> life, the Assisted Human Reproduction Act placed legal limits on <u>creating</u> life. A whole federal bureaucracy was created to collect data and churn out national standards on fertility treatments, but the Governor-in-Council never enacted Regulations for those purposes. So the bureaucracy sat idle, although keeping the lights on at the Assisted Human Reproduction Agency cost \$10 million annually.

Of course, Parliament knew there would be teething pains, so it wrote a three-year review into the Act. Nice idea, but the Parliamentary review never happened.

Then, the inevitable happened. The law faced a constitutional challenge from Quebec, saying it trampled on provincial jurisdiction over healthcare. And that killed it. The Supreme Court eviscerated the Assisted Human Reproduction Act; today only a rump survives. The Assisted Human Reproduction Agency became an Ottawa zombie, which in seven years – so, about \$70 million –held

meetings and published pamphlets but never introduced a single, substantive "national standard". Thankfully it is now defunct.

See where I am going with this? The Assisted Human Reproduction Act was rushed through Parliament with imprudent haste, and Ministerial promises that any bugs would be worked out at Parliament's three-year review, which never happened. Then came the constitutional challenge that everyone predicted, which gutted the law. All the while, an ineffectual but pricy bureaucracy struggled to find relevance, but without Regulations it was master of nothing.

Simply put, Parliament's misadventure on assisted human reproduction did more harm than good, and even today Canada remains backwards on human reproduction.

And now, history is repeating itself. Bill C-14 is rushed. Promises that Parliament will review and fix it in some years are empty, because legal challenges will poke at its constitutional infirmities well before that. While some of C-14 may survive the judges, to think that all of it will survive is magisterially delusional. What will be left after an engagement in the courts is a shredded, legislative rump, which will downgrade the standard of care in physician assisted dying to hardboiled mediocrity—exactly as happened with assisted reproduction.

So the moral of the story: When the federal government micromanages health interventions, because they are "life and death", or because there must be "national standards", its track record is terrible. "National standards" are mythical and overrated anyway; name for me one other physician intervention having national standards. There isn't one. And while "life and death" sounds impressively dramatic, it is already well managed by the health professions and the provinces, thank you.

To close: I appreciate the Senate very rarely vetoes or volleys a Bill back to the House in a conference, but when a Bill is not fit for purpose, reason holds that should be done.

So endeth the history lecture. I'll take absolutely any questions you have—and yes, ask me anything on C-14.