

deVeber Institute Virtual Lecture FEEDBACK



2020

Perspectives

The deVeber Institute for Bioethics and Social Research

Research and Scholarship for an Informed Social Response to Human Life Questions

Thank you so much! Very informative and helpful in navigating our world. I am grateful for your ongoing research.

Thanks to Dr. Jane Pritchard I really appreciated her presentation. Hearing the stories of the vulnerable is very important toward changing minds, hearts and lives.

Thank you for all your work, which I will be digesting. It is refreshing to partner with you and I look forward to future such events.

Wow! Thank you for shedding light on all individuals in our community. What an important subject to discuss, please continue sharing.

Congratulations on a very successful virtual lecture. I thought the pace was good, the variety was excellent, and Dr. Jane Pritchard's presentation in particular very moving

You can watch the complete lecture on our website at www.deveber.org



In Review: The deVeber Institute's FIRST VIRTUAL LECTURE

"When one door closes, another door opens."

So many doors of our daily life have been shuttered as each of us is feeling the loss and aloneness of this pandemic period.

This time of retreat from the regular is fertile ground for our minds to be creative, our vision insightful, and our hearts courageous to make things better. If we have adapted to the quarantine restrictions in order to save lives, especially of the more vulnerable, let's ensure we actually rise to the challenge.

Will we be consistent and open the doors to inclusive protection to life without discrimination?

As of November 2020 over 10,000 Canadians and over 243,000 Americans have died directly due to the Covid-19 virus. Assisted Suicide was legalized by Medical Assistance in Dying (MAiD) in 2016 in Canada and approximately 14, 000 people died by MAID between 2016 and 2019.

What has been happening during the isolation of the pandemic?

One of the doors which the deVeber Institute opened was to present our annual lecture with four wonderful speakers in your home through our first virtual lecture on October 29th.

The lecture is now available for anyone to watch or share on our website.

- ❖ Toronto family doctor, Dr Jane Pritchard, tells tales of the pandemic, modeling kindness in her care as a physician to refugee and homeless patients.
- ❖ The gentle, hopeful voice of bioethicist Bob Parke working collectively to make palliative care for adults with intellectual disabilities a community reality.
- ❖ University student and activist, Breanna Tauschek, unpacks the research on the fatal effects of the systemic undervaluing of girls and women including abortion of unborn girls (illustrated in the enclosed info-graph postcard)
- ❖ Our committed Executive Assistant to the Board Zoe Stewart-Bedard clarifies how Assisted Suicide is spreading in Canada, explaining the extensive research uncovered by summer research associate Catherine Mathie.

Thank you for opening your doors to the efforts of the deVeber Institute to shed light and open minds.

— **Martha Crean, on behalf of the deVeber Board of Directors and Associates**



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Founded in 1982

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DR. JANE PRITCHARD

Dr. Pritchard is a Toronto-based doctor whose family practice is particularly focused on refugees and those living with homelessness. The following are excerpts from her presentation on the impact of Covid-19 on the marginalized.

“ This virus strikes us one at a time as single organisms. Some of us have been living in another sort of bubble for a couple generations; believing that our state of being—our personhood—is the essence of who we are. But nothing has popped this illusion more than seeing how we can infect each other with this virus. Like it or not, we are part of a larger community. There are those nearest and dearest to us and those we don’t care about or even know in this community. The well-being of one affects the well-being of all.

How do we weigh the well-being of the community in relation to the value of the individual in this pandemic? And which community do we count? Our neighbourhood? Our city?

I struggle with this dichotomy — the weighing of the community against the individual. It is not something you can put into an algorithm. So many people have gotten lost during Covid, surely there is a way to safeguard the flock and preserve the one. Save the herd and bring back the one who got lost.

In this pandemic in every country of the world we have to go after the ones who get lost. We have to look and figure out who they are and how to bring them back to safety. From infants to the aged, those isolated with abusive partners, those too terrified to leave their homes, those without homes too terrified to use shelters, those desperate enough to use toxic drugs alone. The list goes on.

As you can see, I have questions not answers, I can see what needs to change but I’m not sure how. I’m hoping our collective experience, built on that of our patients, can show us the way through this pandemic to a more equitable and compassionate future.

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BOB PARKE

A Toronto-based bioethicist who is committed to integrating the philosophy and practice of palliative care to the broadest range of illnesses. The following is from his presentation on the need to improve palliative care for individuals with intellectual disabilities.

“ What was striking to myself and a colleague in our (palliative care) work was that nothing was said about people with disabilities and particularly those with intellectual disabilities. There was almost a silence in the documents. We have to do something, we have to work on a response.

How can we insure that the knowledge and resources are there for people who work in palliative care settings so that they would know how best to care for people with intellectual disabilities and give them a dignified and meaningful experience until their life comes to its natural conclusion? ”



BREANNA TAUSCHEK

Summer research associate, now completing teachers college at the University of Windsor. The following is from her research into sex-selective abortion practices.

“ As of 2018, 1.8 million girls under the age of five go missing due to sex selective practices every year. It is possible that this number is much higher as instances of female abandonment, infanticide, and sex selection are likely under-reported to avoid violating laws against these practices.

In 2019, there had been almost 400 million reported abortions performed in China since the advent of the One Child policy. Sex selective abortion of females is a huge problem in China due to traditional son preference, and this has only been aggravated by the One and Two Child Policies.

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ZOE STEWART-BEDARD

Executive Assistant to the Board, presenting the research of Catherine Mathie concerning Bill C-7 and the co-relation between MAiD requests and Covid-19.

“ Shockingly, during this pandemic when family, friends and volunteers have been shut out of long-term care homes, providers of MAiD are free to enter.

Given all of the available evidence that isolation, economic restrictions and limits to medical access are driving up the number of MAiD requests, the need for greater detail is crucial. It will be most unfortunate if the red flags are missed that might save lives now, and this need only becomes recognized retroactively when the pandemic’s impact on MAiD has become too large to miss.

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