

NOTE: This document is not in contravention of Section 550 of the Canada Elections Act. Responses to this questionnaire are NOT in any way a legally binding commitment. They are instead a manner of providing the voters with the candidate's views on these particular issues.

1. Do you believe life begins at conception (fertilization)?  Yes  No

2. Are there any circumstances under which you believe a woman should have access to abortion?  Yes  No

If yes, please explain:

**\*Note: Medical treatments to save the life of a mother and which result in the UNINTENDED death of her unborn child, are NOT abortions. See next page for technical explanation/reasoning.**

3. If elected, will you strive to introduce and pass laws to protect all unborn children from the time of conception (fertilization) onward?  Yes  No

4. If elected, will you vote to pass laws protecting people from euthanasia and assisted-suicide, and vote to reject laws that would expand euthanasia and assisted-suicide?  Yes  No

5. Do you support the conscience rights of health care professionals to refuse to **do or refer** for medical procedures which they oppose?  Yes  No

6. Do you consider yourself  "pro-life" or  "pro-choice" ?

Candidate Name

Candidate Signature

Date

Federal Riding Political Party

\*See over for explanations of the issues in the above questions. Note 1: Additional comments may be written on this form or submitted on a separate page. For candidates opposed to checking off Yes or No questionnaires, a signed letter response to the above specific issues would be considered acceptable.

\*\* Generalized or non-committal statements would not be considered a valid response.

**Fighting for Truth and Justice**

Campaign Life Coalition is a National Pro-Life Organization representing 200,000 families across Canada.

## **Explanation of each question:**

**#1.** This question is designed to find out where the candidate stands on the basic issue of the beginning of life itself.

**#2.** Some candidates state they are opposed to abortion but would still allow it under specific conditions. These exceptions vary widely depending upon these candidates' understanding of the issue or personal experiences or beliefs. It is important that the voters are aware if there are any such exceptions. "The life of the mother exception" is often misunderstood by candidates noting that exception. In the case of an ectopic pregnancy (baby implanted in the fallopian tube), the mother's life is endangered by that situation and the child is certain to die as it grows. Removal of the fallopian tube to protect the mother's life is not a direct killing of the unborn child within the tube. It is considered treatment of the mother and is NOT an abortion. Similarly, when a pregnant woman is discovered to have cancer and is treated for that cancer with radiation and/or chemotherapy, the possible resulting death of her unborn child is NOT considered an abortion. That is because the measures are directly intended to treat the mother and NOT to kill her unborn child. As for intended abortions, there are no longer ANY valid reasons to consider such abortions being necessary to save a mother's life. The medical profession has for some time now been capable of treating BOTH mother and child in all situations. However, it is common for physicians to strongly suggest, in response to difficult pregnancies, that a mothers' life is endangered. Abortion is then frequently and unnecessarily recommended in order to lessen complications, extra costs and possible lawsuits.

If you accept abortion for rape and incest, you kill the child for the crime (sins) of the father." You may find a testimony of a person conceived in rape here: [www.campaignlifecoalition.com/testimony](http://www.campaignlifecoalition.com/testimony)

**#3.** This refers to your commitment to support proposals in parliament that would increase direct legal protection for the lives of unborn children without compromising the essential principle of respect for all human life.

This question includes all surgical abortions as well as abortion-inducing pharmaceuticals such as the abortion drug RU-486 or the so-called Morning-After Pill (MAP). One MAP objective is to bring about the death of a conceived human by preventing it from implanting in the wall of the mother's uterus. Also included is destructive embryonic stem cell research and any other reproductive technology developments that would result in the intended or deliberately allowed deaths of unborn humans at any stage. Other legislative proposals and policies could include defunding of abortion, conscience clauses for health care workers, mothers' right-to-know legislation, funding and promotion of crisis pregnancy centers and many other measures.

**#4.** This refers to your position on the legalized killing of sick, disabled, elderly or other vulnerable persons by active euthanasia or euthanasia by omission and assisted suicide which was made legal in Canada in 2016. There is often poor understanding of this issue. The removal of extraordinary medical treatment from a dying patient is neither assisted suicide nor euthanasia. However, basic nutrition and hydration are not medical treatment and may never be removed unless the patient is completely unable to assimilate them.

**#5.** This question refers to your position on conscience rights for medical practitioners and whether you will support legislation or policy changes that will protect healthcare professionals from being forced to engage in, directly or indirectly, in medical procedures such as abortion, euthanasia, assisted suicide, and other morally contentious acts.

**#6.** This asks how you sincerely view your overall position on the life issues. Most candidates view themselves as being one or the other, although often to significantly varying degrees.

**If further information is required, please do not hesitate to call and ask for a CLC election issues specialist at 416-204-9749 or 1-800-730-5358... (available 8 a.m. to 6 p.m. eastern, Monday through Friday during and two weeks before election. Otherwise available 9 a.m. to 5 p.m. eastern, Monday to Friday.)**

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