



# Finding Solace in Faith

A Pastoral Letter of the Catholic Bishops of  
Manitoba regarding End-of-Life Issues

“Even though I walk through the valley of  
the shadow of death,  
I fear no evil, For You are with me; Your rod  
and Your staff comfort me”

*Psalm 23:4, NABRE*

# Finding Solace in Faith

## Dear Brothers and Sisters in Christ!

End of life issues, as uncomfortable as they may be, are very important and sensitive topics that we, as Catholics, ought to consider and approach with thoughtful reflection and discernment. We believe in the sanctity of life and the dignity of every human person from conception to natural death. This belief challenges us to contemplate how we want our life journey to culminate and how we can make decisions that align with our Catholic faith, understanding fully that preserving life is a moral obligation. However, this obligation is not absolute and is to be undertaken within reasonable means. This includes acknowledging the reality of death, including its inevitability and unpredictability, while upholding a hopeful perspective rooted in Christ's promise of resurrection. Pondering end of life issues involves discussions about advanced healthcare directives, especially in the case of prolonged illness, hospice care, funeral arrangements, and spiritual support. This is not an easy process, but it is necessary. By contemplating the end of our lives through a lens of faith and taking practical steps guided by Church teachings, we can ensure that our final days are lived meaningfully in preparation for eternity with God.

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# Table of Contents

Advance Health Care Directives	4
Palliative Care	5
Hospice Care	6
Medical Assistance in Dying According to Civil Legislation	7
Catholic Church Teaching vs MAiD	8
Holding Human Dignity	11
Spiritual Preparation to Meet Christ in Resurrection	13
Conclusion	14
Resources	15



# Advance Health Care Directives

An advance healthcare directive is a decision made in advance by a person and stated in a legal document that outlines medical decisions to be made if one cannot make such decisions due to illness or incapacity. Such a directive requires selecting a person who will act as our health care agent, acting for us in case of our incapacity to do so according to predetermined and preferred medical treatments and pain management, consistent with Catholic moral teaching.

An advance healthcare directive can help one get the desired medical care, avoid unnecessary frustration, and relieve caregivers of decision-making burdens during moments of crisis or grief. Federal and provincial healthcare websites provide guides to creating a good and complete advance healthcare directive.[1] Seeking advice regarding such a directive from your pastor, a Catholic ethicist, and doctor is highly recommended especially for greater clarity and understanding of terms of the directive and making final decisions in line with the Catholic faith.[2]

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[1] See Government of Canada, "Palliative Care Overview," <https://www.canada.ca/en/services/health/campaigns/palliative-care.html> (accessed December 18, 2025); Advance Care Planning Canada, "My Plan," <https://www.advancecareplanning.ca/start-planning/> (accessed December 18, 2025); Advance Care Planning Canada, "Workbook," <https://www.advancecareplanning.ca/wpcontent/uploads/2024/09/ACP-Guide-EN-ver-FINAL-reduced-size-3.pdf> (accessed December 18, 2025); Government of Manitoba Health Care Directive, [https://www.gov.mb.ca/health/documents/health\\_care\\_directive.pdf](https://www.gov.mb.ca/health/documents/health_care_directive.pdf) (accessed December 18, 2025); Archdiocese of Saint Boniface, A Faith-Based Advanced Health Care Directive, <https://www.archsaintboniface.ca/media/Famille-et-Vie-Family-and-Life-Service/Advance-care-directives/Health-Care-Directive-Final.pdf> (accessed December 18, 2025).

[2] As an example, Saint Boniface Hospital offers the consultative services of an ethicist. See Ethics Service, <https://stbonifacehospital.ca/patient-care/ethics-service/> (accessed December 18, 2025).

# Palliative Care

Palliative care is a comprehensive approach to maintaining and improving the quality of a person's life in time of diminishing strength and capacity. It concerns primarily the individual facing life-threatening illnesses or poor physical condition due to age and requires medical care and support at home or in a health care facility for an extensive period. Palliative care intends to prevent and relieve suffering by undertaking an assessment and management of pain that may be present because of health, psychosocial, and spiritual issues. From the Catholic moral perspective, it affirms the dignity and value of every human person, regardless of their quality of life or condition. Palliative care is not intended to hasten or delay death. In fact, it incorporates the use of effective, reasonable, and proportionate means of sustaining life with pain management, and, also, the right to refuse futile, burdensome, or morally unacceptable treatments. Accompaniment with the patient demonstrates compassion for those who are suffering and dying as they come near the end of their earthly journey. This is a sincere expression of human solidarity, concern, and charity, which is a hallmark of Catholic health care, rooted in the biblical vision of God's love and compassion for the suffering. For Catholics, faith and hope in the resurrection are always present.

Palliative care services are offered in each of Manitoba's Regional Health Authorities (RHAs) and can be accessed in specialized health care facilities or private patient homes. To identify palliative care resources in your community, contact your local RHA or ask our physician for guidance. Each RHA has developed a palliative care application referral form. The Winnipeg Regional Health Authority (WRHA) Palliative Care Program is also a resource that provides access to care 24 hours a day and consultative services for patients and health care professionals across Manitoba.

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[3] Winnipeg Regional Health Authority, "Palliative Care," [www.wrha.mb.ca/palliative-care/](http://www.wrha.mb.ca/palliative-care/) (accessed December 18, 2025); Government of Manitoba, "Palliative Care," [https://www.gov.mb.ca/health/palliative\\_care.html](https://www.gov.mb.ca/health/palliative_care.html) (accessed December 18, 2025); Palliative Manitoba, <https://palliativemanitoba.ca/> (accessed December 18, 2025); Government of Canada, "Background on Palliative Care," <https://www.canada.ca/en/health-canada/services/health-services-benefits/palliative-care/what-we-re-doing.html#Background> (accessed December 18, 2025); Canadian Hospice Palliative Care Association, "Palliative Care Info Sheets," <https://www.chpca.ca/education/resources/> (accessed December 18, 2025); Canadian Hospice Palliative Care Association, "Resources on Palliative Care," [www.chpca.ca/education/resources/](http://www.chpca.ca/education/resources/) (accessed December 18, 2025); Catholic Health Alliance of Canada, "Health Ethics Guide, Third Edition," <https://www.chac.ca/en/ethics/> (accessed December 18, 2025); United States Conference of Catholic Bishops, "Ethical and Religious Directives for Catholic Healthcare Services (2016)," <https://www.usccb.org/resources/ethical-and-religiousdirectives-catholic-healthcare-services> (accessed December 18, 2025); The National Catholic Bioethics Center, "Catholic Guide to Palliative Care and Hospice," <https://www.ncbcenter.org/store/catholic-guide-to-palliative-care-and-hospiceenglishpdf-download> (accessed December 18, 2025).

# Hospice Care

Hospice care is a type of palliative care that focuses on providing comfort and dignity to patients who are terminally ill or/and have a grave frail condition with a presumed expectancy to live for a few weeks or less in a special medical facility or hospital unit. Hospice care aims to relieve physical, emotional, and spiritual suffering, and to support the patient and their family in the final stage of life. This approach demonstrates respect for the natural process of dying and does not hasten or postpone death, which is consistent with the Catholic understanding of human dignity and the sanctity of life. Provision is made for the pastoral care and the Sacraments for the patient, as well as bereavement support after the death of the loved one.

Hospice care is needed because many people who are dying experience pain, anxiety, depression, loneliness, and fear. They need assistance in learning to cope with these challenges and finding meaning and peace in their last moments. Likewise, family members have the opportunity to cope with the stress and the grief of losing a loved one. Hospice care can be provided in various settings such as the patient's home, a hospice facility, a hospital, or a health care facility. [4]

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[4] Hospice care is available in Manitoba through various organizations and programs. Some of them are: The Winnipeg Regional Health Authority Palliative Care Program, which provides hospice care at home, in hospitals, or in personal care homes; The Riverview Health Centre Palliative Care Unit, which is a 30-bed unit that offers hospice care in a home-like environment; The St. Boniface Hospital Palliative Care Unit, which is a 16-bed unit that provides hospice care with a Catholic perspective; The Misericordia Health Centre Palliative Care Program, which is a 12-bed unit that offers hospice care with an interfaith approach; The Jocelyn House Hospice, which is a 4-bed facility that provides hospice care in a residential setting; The Grace Hospice, which is a 12-bed facility that offers hospice care in a hospital setting. For more information on hospice care in Manitoba, please visit: Winnipeg Regional Health Authority, "Palliative Care," <https://wrha.mb.ca/palliative-care/> (accessed December 18, 2025); Riverview Health Centre, "Palliative Care," <https://rhc.mb.ca/servicesprograms/palliative-care/> (accessed December 18, 2025); St. Boniface Hospital, <https://stbonifacehospital.ca/> (accessed December 18, 2025); Misericordia Health Centre, <https://misericordia.mb.ca/> (accessed December 18, 2025); Jocelyn House, <https://www.jocelynhouse.ca/> (accessed December 18, 2025); Grace Hospital, "Hospice Care," <https://gracehospital.ca/hospice/> (accessed December 18, 2025). See also: United States Conference of Catholic Bishops, "Ethical and Religious Directives for Catholic Healthcare Services (2016)," <https://www.usccb.org/resources/ethical-and-religious-directives-catholic-healthcare-services> (accessed December 18, 2025); The National Catholic Bioethics Center, "Catholic Guide to Palliative Care and Hospice," <https://www.ncbcenter.org/store/catholicguide-to-palliative-care-and-hospiceenglishpdf-download> (accessed December 18, 2025).

# Medical Assistance in Dying (MAiD) According to Civil Legislation

The recent expansion of Medical Assistance in Dying (MAiD) in our society is observed with profound sorrow and grave worry over its accessibility, acceptance, and implications. It is deeply concerning that ending life is presented as an option and solution during times of vulnerability and suffering, particularly when access to robust palliative and hospice care may be neglected or insufficient. This situation prompts reflection on how we can better support one another, offering hope and authentic care amidst life's challenges, rather than allowing MAiD to be perceived as an accessible alternative.

It is important to understand the context of MAiD's legality in Canada. Following the Supreme Court of Canada's landmark 2015 ruling in *Carter v. Canada*, which found that a blanket prohibition on MAiD violated the Charter of Rights and Freedoms under specific conditions, Medical Assistance in Dying became legal across the country in June 2016 through Bill C-14. This legislation permits eligible Canadian adults to request assistance from a doctor or nurse practitioner to end their life, either through a clinician-administered substance or a self-administered prescription.

Eligibility for MAiD is governed by federal legislation, which applies nationwide, including in Manitoba. The core federal eligibility criteria require an individual to be at least 18 years of age, eligible for government-funded health services in Canada, have decision-making capacity, make a voluntary request free from external pressure, and provide informed consent after being fully informed of available options to relieve suffering, including palliative care. A central requirement is that the individual must have a "grievous and irremediable medical condition."

The legal framework for MAiD was significantly amended by Bill C-7, which received Royal Assent in March 2021. This bill notably removed the prior requirement that a person's natural death must be "reasonably foreseeable" for them to be eligible for MAiD, establishing two distinct sets of procedural

safeguards depending on whether or not natural death is reasonably foreseeable. Bill C-7 also clarified the definition of a “grievous and irremediable medical condition” as a serious and incurable illness, disease, or disability; being in an advanced state of irreversible decline in capability; and experiencing enduring physical or psychological suffering that is intolerable to them and cannot be relieved under conditions they consider acceptable.

It is important to note that, as of 2025, individuals whose sole underlying medical condition is a mental illness are not eligible for MAiD. The planned expansion of eligibility to include this group has been legislatively delayed until March 17, 2027. While the federal government sets the eligibility criteria and conditions for MAiD, provinces and territories like Manitoba are responsible for the delivery and administration of MAiD services. In Manitoba, Shared Health oversees the provincial MAiD team, which coordinates requests and ensures the process aligns with the federal Criminal Code provisions.

## **Catholic Church teaching vs. MAiD**

It is imperative to know that not every law or procedure is intrinsically good and morally accepted. MAiD contradicts the teaching of the Catholic Church, which views euthanasia and assisted suicide as a direct and intentional killing of a person, a gravely sinful act which contravenes the fifth commandment of the Decalogue - “You shall not kill.” The Catholic Church’s teachings which deal with this topic, are found in various documents including the Catechism of the Catholic Church (CCC, #2276-2279), the Declaration on Euthanasia (1980) by the Sacred Congregation for the Doctrine of the Faith, and the Letter Samaritanus Bonus (2020) by the Congregation for the Doctrine of the Faith. The Conference of Canadian Catholic Bishops has issued numerous statements on assisted suicide including its opposition to “the Expansion of Euthanasia and Assisted Suicide in Canada” (April 8, 2021) and denying access to it in Canadian Catholic health organizations (November 30, 2023).

In summary, the Church points out the following negative consequences of MAiD:

1. The Catholic Church teaches that every human life is a sacred and inviolable gift from God, possessing inherent dignity and profound meaning from conception to natural death, irrespective of one's physical or mental condition. From this perspective, MAiD fundamentally undermines this sanctity and value because it involves the direct and intentional taking of human life, an act seen as usurping God's dominion over life and thus violating both natural law (the inherent moral order) and divine law. By offering death as a "solution" to suffering or incapacity, society accepts and promotes the premise that certain lives, particularly those of vulnerable, marginalized, physically disabled, or mentally incapacitated individuals, are of lesser worth or can be deemed "no longer worth living." This can profoundly devalue these individuals, exacerbating their sense of isolation, worthlessness, or being a burden, and can subtly pressure them towards choosing MAiD rather than receiving the authentic compassion and comprehensive care that would affirm their enduring dignity.
  
2. MAiD undermines the Christian understanding and meaning of suffering. The Catholic Church views suffering not as a meaningless evil to be eliminated, but as a universal human experience that, through Christ's Passion, can acquire redemptive (salvific) meaning. This perspective, rooted in Scripture, Catholic tradition and teaching,<sup>[5]</sup> fundamentally contrasts with the premises often underlying Medical Assistance in Dying. MAiD typically arises when suffering is deemed unbearable, rendering life valueless and justifying intentional death.

### ***Key Catholic Understandings:***

- A. Suffering Transformed by Christ: Jesus didn't eliminate suffering but transformed it. His Passion reveals God's love and offers a way to unite personal suffering with His redemptive work (*Salvifici Doloris*). This endows suffering with potential meaning and participation in salvation (Col 1:24, 1 Pt 4:13), conferring dignity upon the sufferer.

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<sup>[5]</sup> Cf. Pope John Paul II, Apostolic Letter *Salvifici Doloris* (On the Christian Meaning of Human Suffering); Pope John Paul II, Encyclical Letter *Evangelium Vitae* (The Gospel of Life); Congregation for the Doctrine of the Faith, Letter *Samaritanus Bonus* (On the Care of Persons in the Critical and Terminal Phases of Life)

- B. Spiritual Growth: Enduring suffering with faith can foster virtues like endurance, character, and hope (Rm 5:3-5), leading to spiritual maturity and deeper trust in God, even through abandonment to His will in illness (*Samaritanus Bonus*).
- C. Life's Inherent Dignity: Human life is a sacred, inviolable gift from God, possessing inherent dignity regardless of condition (*Evangelium Vitae*, CCC 2277). Humans are stewards, not owners, of life.
- D. The Call to Compassion & Care: Suffering calls for solidarity and active care, modeled by the Good Samaritan. The Church mandates compassionate presence and holistic care ("always to care"), especially palliative care, affirming dignity until natural death (*Samaritanus Bonus*, CCC 2278).

### ***Contrast with MAiD***

MAiD is intrinsically immoral because it involves the direct, intentional ending of innocent human life to eliminate suffering (direct euthanasia/assisted suicide). This:

- Rejects the potential for suffering to have redemptive meaning.
- Treats life's value as contingent on quality, undermining its status as a sacred gift.
- Represents an assertion of ultimate control over life, rather than stewardship and trust in God.
- Contradicts the mandate to "always care," opting instead to eliminate the sufferer (seen as "false mercy").

The following table summarizes the core divergences between the Catholic perspective and the premises underlying MAiD:

<b>Dimension</b>	<b>Catholic Christian Perspective</b>	<b>Perspective Implicit in Medical Assistance in Dying (MAiD)</b>
<b>Meaning of Suffering</b>	Potential for redemptive meaning, union with Christ, spiritual growth, solidarity	Primarily negative, potentially meaningless, an evil to be eliminated, capable of negating life's quality/value
<b>Value of Life in Suffering</b>	Inherent and inviolable dignity regardless of condition; life is a sacred gift from God	Value of life can be subjectively diminished by suffering to the point it is deemed no longer worth living
<b>Appropriate Response</b>	Compassionate care, palliative support, spiritual accompaniment, solidarity, commitment to “always to care”	An option to intentionally end life as a means to eliminate suffering
<b>Goal of Care</b>	To cure if possible always to care; accompany until natural death; alleviate pain while respecting life	Can include intentionally causing death as a means to relieve suffering
<b>Human Autonomy</b>	Valued, but exercised within the moral law and responsible stewardship of God's gift of life	Often presented as the paramount principle, asserting a near-absolute right to determine the timing and manner of death

<p><b>View of Death</b></p>	<p>A natural transition, consequence of sin; entry into eternal life; to be faced with hope in Christ</p>	<p>Can be viewed as a solution to intractable suffering, a means to control the end of life, an escape from indignity</p>
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3. MAiD erodes the trust and relationship between patients and healthcare providers. The Catholic Church affirms that healthcare providers have a moral obligation to care for the sick and dying with respect, compassion, and competence. They should also provide palliative care, which is aimed at relieving pain and suffering, enhancing quality of life, and affirming the dignity of the dying person. It is important to note that a medical practitioner or a nurse practitioner in Manitoba may refuse to administer MAiD based on conscientious objection, i.e., to have a strong belief and conviction that the requested procedure is morally wrong and would compromise personal integrity, and suffer no disciplinary repercussions;<sup>[6]</sup>
4. A MAiD policy creates social pressure or coercion leading some people to choose MAiD over other options. It devalues life in a subtle way, suggesting that lives with suffering, illness, or disability are less worthy, leading vulnerable individuals to internalize this and feel like a burden. Moreover, the option of MAiD itself can create an unspoken expectation, pressuring individuals to choose it to relieve others, especially if robust palliative care and social supports are lacking, making the “choice” not truly free. It risks shifting societal focus from compassionate care and support for the vulnerable towards offering death as a solution, eroding the fundamental duty to care.

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<sup>[6]</sup> The Medical Assistance in Dying (Protection for Health Professionals and Others) Act, Bill 34 (SM 2017, c. 38). [https://web2.gov.mb.ca/laws/statutes/2017/c03817e.php#2\(2\)](https://web2.gov.mb.ca/laws/statutes/2017/c03817e.php#2(2)).

5. MAiD diverts critical financial, human, and societal resources and attention away from improving palliative care and other forms of end-of-life support. [7] This shift in focus risks undermining the availability and advancement of true end-of-life support that affirms dignity by managing pain and addressing holistic needs, rather than offering death as a solution to suffering.

## Holding Human Dignity Above Pressures and Challenges of Daily Life

In contemporary Canada, many individuals, including our Indigenous brothers and sisters, especially those in Northern communities, grapple with significant socio-economic, economic, and cultural pressures that can profoundly impact their well-being and perceived options. Challenges such as restricted access to adequate education, healthcare, and employment opportunities are often intensified by geographical isolation and the steep cost of living. These cumulative hardships can foster distressing social perceptions, leading some, especially the elderly, to feel like a burden on their families and society. This is a stark contrast to traditional Indigenous cultures, where elders are revered as vital repositories of wisdom, tradition, and knowledge.

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[7] The Canadian Conference of Catholic Bishops (CCCB) has issued several documents on the topic of assisted suicide, also known as euthanasia or medical assistance in dying (MAiD): The Declaration on Euthanasia and Assisted Suicide (2015), which reaffirms the Church's teaching that human life is sacred and inviolable, and that euthanasia and assisted suicide are grave violations of the dignity of the person and the common good. <https://www.cccb.ca/letter/statement-assisted-suicide-issued-plenary-assembly-canadian-conference-catholic-bishops/> (accessed December 18, 2025); The Pastoral Statement for the Catholics of Canada on the Report "Medical Assistance in Dying: A Patient-Centred Approach" (2016), which addresses the legal and social changes that followed the legalization of MAiD in Canada, and offers practical advice for Catholics on how to respond to requests for MAiD, how to accompany the dying, and how to promote a culture of life and care. <https://www.cccb.ca/letter/pastoral-statement-catholics-canada-report-medical-assistance-dying-patientcentred-approach/> (accessed December 18, 2025); a CCCB statement on the passage of Bill C-7, which amended the Criminal Code to allow euthanasia and assisted dying for people who are not terminally ill, on March 17, 2021. The statement expressed the bishops' "deep sorrow" and "grave concern" over the new law and urged Catholics to uphold the dignity and sanctity of human life from conception to natural death. <https://www.cccb.ca/wp-content/uploads/2020/12/CCCB-Response-C-7-18-December-2020-EN.pdf> (accessed December 18, 2025); Open Letter from the Permanent Council to the Government of Canada on Permitting Persons Living with Mental Illness to Access Euthanasia/Assisted Suicide (2023), [https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Open-letter-to-Government\\_MAIDfinal.pdf](https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Open-letter-to-Government_MAIDfinal.pdf) (accessed December 18, 2025); Message from the Permanent Council to the Catholic Faithful on Permitting Persons Living with Mental Illness to Access Euthanasia/Assisted Suicide (2023), [https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Message-to-the-Catholic-Faithful\\_MAID-final.pdf](https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Message-to-the-Catholic-Faithful_MAID-final.pdf) (accessed December 18, 2025); Horizons of Hope: A Toolkit for Catholic Parishes on Palliative Care, <https://www.cccb.ca/faith-moral-issues/suffering-and-end-of-life/horizons-of-hope-a-toolkit-for-catholic-parishes-on-palliative-care/> (accessed December 18, 2025). See also: Message of His Holiness Pope Francis for the 27th World Day of the Sick 2020, which reflects on the theme of "Come to me, all you who labour and are burdened, and I will give you rest" (Mt 11:28), and invites Catholics to entrust themselves to Jesus, the Divine Physician, who heals not only the body but also the soul. [https://www.vatican.va/content/francesco/en/messages/sick/documents/papa-francesco\\_20200103\\_giornata-malato.html](https://www.vatican.va/content/francesco/en/messages/sick/documents/papa-francesco_20200103_giornata-malato.html) (accessed December 18, 2025). See also: College of Registered Nurses of Manitoba, "Conscientious objection," [www.crnmb.ca/wp-content/uploads/2022/01/MAID-guideline-july142021.pdf](http://www.crnmb.ca/wp-content/uploads/2022/01/MAID-guideline-july142021.pdf) (accessed December 18, 2025); Catholic Health Alliance of Canada, "Health Ethics Guide, Third Edition," <https://www.chac.ca/en/ethics/> (accessed December 18, 2025); The College of Physicians and Surgeons of Manitoba, "Standard of Practice Medical Assistance in Dying," [https://www.cpsmb.ca/assets/Standards%20of%20Practice/Standard%20of%20Practice%20Medical%20Assistance%20in%20Dying%20\(MAID\).pdf](https://www.cpsmb.ca/assets/Standards%20of%20Practice/Standard%20of%20Practice%20Medical%20Assistance%20in%20Dying%20(MAID).pdf) (accessed December 18, 2025).

From the perspective of Catholic teachings, every human life possesses an inherent and inalienable dignity, from conception to natural end, demanding profound respect and care. The pressures to consider MAiD as a solution to suffering or perceived burdens are contrary to this fundamental principle. The Church emphasizes that societal and economic challenges should never diminish the intrinsic worth of any individual, particularly the vulnerable and the elderly. As articulated in *Gaudium et Spes*, “Whatever insults human dignity... all these things and others of their like are infamies indeed. They poison human society, but they do more harm to those who practice them than to those who suffer from the injury.” [8] This underscores the moral imperative to address the root causes of suffering rather than ending life.

The convergence of traditional Indigenous reverence for elders and Catholic social teaching offers a powerful counter-narrative to despair and the notion that aging or vulnerability lessens a person's value. The Fourth Commandment of the Decalogue, “Honour your father and your mother,” establishes a foundational principle of respecting the preceding generation, an injunction that carries inherent implications for valuing the wisdom and experience of elders within the society. Furthermore, Scripture reminds us to cherish our elders: “Forsake not an old friend, for the new one is not equal to him. Old wine is good to drink, and the old friend is precious” (Sir 9:10). This wisdom calls us to combat social perceptions that devalue the elderly and to actively foster a culture of care and intergenerational support.

Therefore, the response to suffering and vulnerability, particularly among the elderly and those facing daunting life challenges, must be one of unwavering support and comprehensive care, including accessible and high-quality palliative care. MAiD is not an acceptable response because it cedes to a view that some lives are no longer worth living. Instead, human dignity demands that we, as individuals and as a society, especially within families, embrace our responsibility to care for our elders and all vulnerable members, ensuring they are never abandoned or made to feel that their lives are a burden.

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[8] *Gaudium et Spes*, 27.

# Spiritual Preparation to Meet Christ in Resurrection

Death is not the end of life, but a transition to a new kind of life as promised by Christ (*cf.* 1 Cor 2:9). Therefore, it is crucial to prepare oneself spiritually for this moment throughout and especially towards the end of our life journey, and to strive to finish it in a state of grace by receiving the Sacraments of Reconciliation, Eucharist (*Viaticum*), and Anointing of the Sick, “the sacraments that prepare us for our heavenly homeland” (CCC, 1525).

In this context, pastors can provide invaluable support by offering pastoral care visits, spiritual counselling, and leading prayers and meditations. They can administer the sacraments, offer emotional support to the family, assist in funeral planning, and provide ongoing bereavement support. Through these actions, a pastor helps the dying person, and their family find comfort, peace, and hope during this challenging time.

Much hope and faith can come to the dying and the family members from the reading of Holy Scripture, especially the passages that reveal God's love and mercy. Praying together, asking for God's will to be done, and invoking God's mercy give the dying and the family much consolation.

By relying on God's providence and mercy, we follow the example of Jesus, who entrusted himself to the Father in his agony and death, and who promised to prepare a place for us in his Father's house (*cf.* Jn 14:3). We will also imitate the saints, who faced death with courage and joy, knowing that they would see God face to face.

# Conclusion

As we face these challenges at the end of our lives, we know that our faith in God and his mercy gives us hope and strength. We are also called to respect and protect the dignity and sanctity of human life from conception to natural death. Euthanasia or any other means that intentionally hasten or cause death should never be considered as an option at the end our earthly life.

We call on healthcare providers and government bodies to make palliative care truly accessible to all in Manitoba at the end of life by urgently working to establish comprehensive services and facilities evenly throughout the province, rectifying the current lack of access, especially for Indigenous peoples in northern regions where such care is scarce or non-existent.

Supporting families and caregivers of those who are dying or have recently passed away is *a profound act of mercy* that calls many to share and ease the pain of losing a loved one. Pastors and parish prayer groups can hold prayer services for the deceased, including those who chose MAiD, and offer support to surviving family members and friends. They can also provide bereavement counselling and information about local resources.

Grief support groups can offer assistance, encourage networking, and organize workshops led by professionals who provide guidance. Through prayer, communal support, and resources, the spiritual, emotional, and practical needs of families and caregivers can be addressed during this difficult time.

Pastors, assisted by their catechetical teams and parish organizations, are encouraged to cultivate a deeper understanding of end-of-life issues through reflection and educational initiatives within their faith communities.

Above all, let us entrust our lives and the lives of our loved ones to God, who is the source and goal of our existence. We invite all to pray for the grace of a Christian death, a death that is peaceful, holy, and united with Christ. Remember in prayer those who are dying or who have died, that they may rest in peace and enjoy the vision of God.

May God bless you and keep you always in His love!

*Given on February 11, 2026*

Catholic Bishops of Manitoba

# Resources

## Advance Care Directives

Government of Canada, Palliative Care Overview

<https://www.canada.ca/en/services/health/campaigns/palliative-care.html>

Advance Care Planning Canada

[www.advancecareplanning.ca/my-plan/](http://www.advancecareplanning.ca/my-plan/)

Advance Care Planning Canada Workbook

[www.advancecareplanning.ca/wp-content/uploads/2020/10/ACP-Workbook Booklet\\_FINAL.pdf](http://www.advancecareplanning.ca/wp-content/uploads/2020/10/ACP-Workbook Booklet_FINAL.pdf)

Government of Manitoba Health Care Directive

<https://www.advancecareplanning.ca/wp-content/uploads/2024/09/ACP-Guide-EN-ver-FINAL-reduced-size-3.pdf>

Catholic Health Association of Manitoba, Advance Care Planning

<https://cham.mb.ca/main.php?p=86>

Archdiocese of Saint Boniface, A Faith-Based Advanced Health Care Directive

<https://www.archsaintboniface.ca/media/Famille-et-Vie-Family-and-Life-Service/Advance-care-directives/Health-Care-Directive-Final.pdf>

Archdiocese of Saint Boniface, Tim Scatliff (January 5, 2023)

<https://vimeo.com/1047273726/769afa95ca>

Saint Boniface Hospital, Consultative Ethics Service

<https://stbonifacehospital.ca/patient-care/ethics-service/>

## Palliative Care

Winnipeg Regional Health Authority, Palliative Care

[www.wrha.mb.ca/palliative-care/](http://www.wrha.mb.ca/palliative-care/)

Government of Manitoba, Palliative Care

[www.gov.mb.ca/health/palliative\\_care.html](http://www.gov.mb.ca/health/palliative_care.html)

Palliative Manitoba

[www.palliativemanitoba.ca](http://www.palliativemanitoba.ca)

Government of Canada, Background on Palliative Care

<https://www.canada.ca/en/health-canada/services/health-services-benefits/palliative-care.html>

Canadian Hospice Palliative Care Association, "Palliative Care Info Sheets,"

<https://www.chpca.ca/education/resources/>

Canadian Hospice Palliative Care Association, Resources on Palliative Care

[www.chpca.ca/education/resources/](http://www.chpca.ca/education/resources/)

# Resources

## **Palliative Care (*continued*)**

Catholic Health Alliance of Canada, Health Ethics Guide, Third Edition

<https://www.chac.ca/en/ethics/>

Pastoral Letter by the Catholic Bishops of Alberta and the Northwest Territories, "Remaining True to Christ Now and at the Hour of our Death" (2020)

Pastoral Care of the Sick, Frail, and Dying (lists various resources including some regional pastoral letters): <https://www.cccb.ca/faith-moral-issues/health-care/pastoral-care-of-the-sick-frail-and-dying/>

Suffering and End-of-Life (main page for Horizons of Hope)

<https://www.cccb.ca/faith-moral-issues/suffering-and-end-of-life/>

"Towards a Narrative of Hope": An International Interfaith Symposium on Palliative Care (May 21-23, 2024) and its outcomes

<https://www.cccb.ca/faith-moral-issues/health-care/palliative-care/towards-a-narrative-of-hope-an-international-interfaith-symposium-on-palliative-care/>

United States Conference of Catholic Bishops, Ethical and Religious Directives for Catholic Healthcare Services (2016)

<https://www.usccb.org/resources/ethical-and-religious-directives-catholic-healthcare-services>

The National Catholic Bioethics Center, Catholic Guide to Palliative Care and Hospice

<https://www.ncbcenter.org/ncbc-news/new-product-catholic-guide-to-palliative-care-and-hospice-pdf-and-print-editions>

Catholic Health Association of Manitoba, End of Life Care

<https://cham.mb.ca/main.php?p=74>

Action Plan on Palliative Care: Building on the Framework on Palliative Care in Canada (August 2019)

<https://www.canada.ca/en/health-canada/services/health-care-system/reports-publications/palliative-care/action-plan-palliative-care.html>

The Framework on Palliative Care in Canada—Five Years Later: A Report on the State of Palliative Care in Canada (December 2023)

<https://www.canada.ca/en/health-canada/services/publications/health-system-services/framework-palliative-care-five-years-later.html>

Access to Palliative Care in Canada Reports (Canadian Institute for Health Information - CIHI):

2023 Report Link: <https://www.cihi.ca/en/access-to-palliative-care-in-canada>

# Resources

## Hospice Care

*Hospice care is available in Manitoba through various organizations and programs. Some of them are:*

- The Winnipeg Regional Health Authority Palliative Care Program, which provides hospice care at home, in hospitals, or in personal care homes.
- The Riverview Health Centre Palliative Care Unit, which is a 30-bed unit that offers hospice care in a home-like environment.
- The St. Boniface Hospital Palliative Care Unit, which is a 16-bed unit that provides hospice care with a Catholic perspective.
- The Misericordia Health Centre Palliative Care Program, which is a 12-bed unit that offers hospice care with an interfaith approach.
- The Jocelyn House Hospice, which is a 4-bed facility that provides hospice care in a residential setting.
- The Grace Hospice, which is a 12-bed facility that offers hospice care in a hospital setting.

*For more information on hospice care in Manitoba, please visit:*

- Winnipeg Regional Health Authority, Palliative Care  
[www.wrha.mb.ca/palliative-care/](http://www.wrha.mb.ca/palliative-care/)
- Riverview Health Centre, Palliative Care  
<https://rhc.mb.ca/services-programs/palliative-care/>
- St. Boniface Hospital, Palliative Care  
<https://stbonifacehospital.ca/>
- Misericordia Health Centre  
<https://misericordia.mb.ca/>
- Jocelyn House  
[www.jocelynhouse.ca/](http://www.jocelynhouse.ca/)
- Grace Hospital, Hospice Care  
[www.gracehospital.ca/hospice/](http://www.gracehospital.ca/hospice/)
- Canadian Virtual Hospice  
[https://www.virtualhospice.ca/en\\_US/Main+Site+Navigation/Home/Topics/Topics/What+Is+Palliative+Care+Care+Care+Care.aspx](https://www.virtualhospice.ca/en_US/Main+Site+Navigation/Home/Topics/Topics/What+Is+Palliative+Care+Care+Care+Care.aspx)
- United States Conference of Catholic Bishops, Ethical and Religious Directives for Catholic Healthcare Services (2016)  
<https://www.usccb.org/resources/ethical-and-religious-directives-catholic-healthcare-services>

# Resources

## Hospice Care (*continued*)

The National Catholic Bioethics Center, Catholic Guide to Palliative Care and Hospice  
<https://www.ncbcenter.org/ncbc-news/new-product-catholic-guide-to-palliative-care-and-hospice-pdf-and-print-editions>

Congregation of the Doctrine of the Faith, *Samaritanus Bonus* - On the Care of Persons in the Critical and Terminal Phases of Life (2020)  
[www.vatican.va/roman\\_curia/congregations/cfaith/documents/rc\\_con\\_cfaith\\_doc\\_20200714\\_samaritanus-bonus\\_en.html](http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20200714_samaritanus-bonus_en.html)

Catholic Health Association of Manitoba, End of Life Care  
<https://cham.mb.ca/main.php?p=74>

## Medical Assistance in Dying (MAiD)

The Canadian Conference of Catholic Bishops (CCCCB) has issued several documents on the topic of assisted suicide, also known as euthanasia or medical assistance in dying (MAiD):

The Position of the Catholic Church and the Stance of the Catholic Bishops of Canada on 'The Giving of Assistance in Dying' (2015)  
<https://www.cccb.ca/wp-content/uploads/2018/01/Submission-to-the-Expert-Panel-on-assisted-suicide-EN.pdf>

The *Declaration on Euthanasia and Assisted Suicide* (2015), which reaffirms the Church's teaching that human life is sacred and inviolable, and that euthanasia and assisted suicide are grave violations of the dignity of the person and the common good.  
<https://www.cccb.ca/letter/statement-assisted-suicide-issued-plenary-assembly-canadian-conference-catholic-bishops/>

The Pastoral Statement for the Catholics of Canada on the Report "Medical Assistance in Dying: A Patient-Centred Approach" (2016), which addresses the legal and social changes that followed the legalization of MAiD in Canada, and offers practical advice for Catholics on how to respond to requests for MAiD, how to accompany the dying, and how to promote a culture of life and care.  
<https://www.cccb.ca/letter/pastoral-statement-catholics-canada-report-medical-assistance-dying-patient-centred-approach/>

Statement by the President of the Canadian Conference of Catholic Bishops on the approval of Bill C-14 legalizing euthanasia and assisted suicide (2016)  
[https://www.cccb.ca/wp-content/uploads/2018/08/CCCCB\\_statement\\_passage\\_Bill\\_C-14-EN-1.pdf](https://www.cccb.ca/wp-content/uploads/2018/08/CCCCB_statement_passage_Bill_C-14-EN-1.pdf)

# Resources

## Medical Assistance in Dying (MAiD) (*continued*)

“We Can and Must Do Much Better”: Joint Letter by Religious Leaders on Bill C-7 and the expansion of MAiD (2020)

[https://www.cccb.ca/wp-content/uploads/2020/10/MAID\\_Religious-Leaders-in-Canada-oppose-Bill-C-7\\_EN\\_FINAL.pdf](https://www.cccb.ca/wp-content/uploads/2020/10/MAID_Religious-Leaders-in-Canada-oppose-Bill-C-7_EN_FINAL.pdf)

A statement on the passage of Bill C-7, which amended the Criminal Code to allow euthanasia and assisted dying for people who are not terminally ill, on March 17, 2021. The statement expressed the bishops’ “deep sorrow” and “grave concern” over the new law and urged Catholics to uphold the dignity and sanctity of human life from conception to natural death.

<https://www.cccb.ca/wp-content/uploads/2020/12/CCCB-Response-C-7-18-December-2020-EN.pdf>

Open Letter from the Permanent Council to the Government of Canada on Permitting Persons Living with Mental Illness to Access Euthanasia/Assisted Suicide (2023)

<https://www.cccb.ca/letter/ccb-permanent-council-issues-an-open-letter-to-the-federal-government-and-a-message-to-the-catholic-faithful-on-permitting-persons-living-with-mental-illness-to-access-euthanasia-assisted-suicide/>

Message from the Permanent Council to the Catholic Faithful on Permitting Persons Living with Mental Illness to Access Euthanasia/Assisted Suicide (2023)

[https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Message-to-the-Catholic-Faithful\\_MAID-final.pdf](https://www.cccb.ca/wp-content/uploads/2023/05/2023-05-05-Message-to-the-Catholic-Faithful_MAID-final.pdf)

Statement by the Permanent Council in Support of Bill C-218: “ An Act to amend the Criminal Code (Medical Assistance in Dying “(2006)

<https://www.cccb.ca/wp-content/uploads/2026/02/2026-02-04-Statement-by-CCCB-PC-Support-of-Bill-C-218-2.pdf>

Horizons of Hope: A Toolkit for Catholic Parishes on Palliative Care

<https://www.cccb.ca/faith-moral-issues/suffering-and-end-of-life/horizons-of-hope-a-toolkit-for-catholic-parishes-on-palliative-care/>

## Catholic Church teaching vs. MAiD

Pope John Paul II, Apostolic Letter *Salvifici Doloris* (On the Christian Meaning of Human Suffering)

Pope John Paul II, Encyclical Letter *Evangelium Vitae* (The Gospel of Life)

Bill 34, The Medical Assistance in Dying (Protection for Health Professionals and Others) Act, 2nd Sess, 41st Leg, Manitoba, 2024 at cl 38

## Holding Human Dignity Above Pressures and Challenges of Daily Life

*Gaudium et Spes*, Pastoral Constitution on the Church in the Modern World, 7 December 1965

# Resources

## See also:

Message of His Holiness Pope Francis for the 27th World Day of the Sick 2020, which reflects on the theme of “Come to me, all you who labour and are burdened, and I will give you rest” (Mt 11:28), and invites Catholics to entrust themselves to Jesus, the Divine Physician, who heals not only the body but also the soul.

[https://www.vatican.va/content/francesco/en/messages/sick/documents/papa-francesco\\_20200103\\_giornata-malato.html](https://www.vatican.va/content/francesco/en/messages/sick/documents/papa-francesco_20200103_giornata-malato.html)

College of Registered Nurses of Manitoba, Conscientious objection  
[www.crnmb.ca/wp-content/uploads/2022/01/MAID-guideline-july142021.pdf](http://www.crnmb.ca/wp-content/uploads/2022/01/MAID-guideline-july142021.pdf)

Catholic Health Alliance of Canada, Health Ethics Guide, Third Edition  
<https://www.chac.ca/en/ethics/>

The College of Physicians and Surgeons of Manitoba, Standard of Practice Medical Assistance in Dying  
[https://cpsm.mb.ca/assets/Standards%20of%20Practice/Standard%20of%20Practice%20Medical%20Assistance%20in%20Dying%20\(MAID\).pdf](https://cpsm.mb.ca/assets/Standards%20of%20Practice/Standard%20of%20Practice%20Medical%20Assistance%20in%20Dying%20(MAID).pdf)

Council of Canadians with Disabilities, End of Life Ethics  
<http://www.ccdonline.ca/en/humanrights/endoflife/archives>

Euthanasia Prevention Coalition Resources  
<https://epcc.ca/resources/>

Dying To Meet You: A project of cultural renewal to humanize our conversation on suffering, death, meaning, and hope.  
<https://www.dyingtomeetyou.com/>

## *Government of Canada:*

MAID Overview  
<https://www.canada.ca/en/health-canada/services/health-services-benefits/medical-assistance-dying.html>

MAID Legislation Details  
<https://www.canada.ca/en/health-canada/services/health-services-benefits/medical-assistance-dying/legislation-canada.html>

Canada's MAID Law  
<https://www.justice.gc.ca/eng/cj-jp/ad-am/bk-di.html>

Bill C-7 (Royal Assent)  
<https://www.parl.ca/DocumentViewer/en/43-2/bill/C-7/royal-assent>

Bill C-7: Recent Changes to Canada's Legislation on MAiD  
<https://www.justice.gc.ca/eng/cj-jp/ad-am/bkdi.html#:~:text=The%20law%20no%20longer%20requires,and%20have%20decision%20making%20capacity>

# Resources

## ***Government of Canada (continued)***

Message from the Minister of Health - National Hospice Palliative Care Week 2018

<https://www.canada.ca/en/health-canada/news/2018/05/message-from-the-minister-of-health---national-hospice-palliative-care-week--may-6---12-2018.html>

Minister Qualtrough marks the Anniversary of Canada's Ratification of the United Nations Convention on the Rights of Persons with Disabilities (March 11, 2017)

[https://www.canada.ca/en/employment-social-development/news/2017/03/minister\\_qualtroughmarkstheanniversaryofcanadasratificationofthe.html](https://www.canada.ca/en/employment-social-development/news/2017/03/minister_qualtroughmarkstheanniversaryofcanadasratificationofthe.html)

Speech from the Honourable Carla Qualtrough - Tenth Session of the Conference of States Parties on the United Nations Convention on the Rights of Persons with Disabilities (June 13, 2017)

[https://www.canada.ca/en/employment-social-development/news/2017/06/speech\\_from\\_the\\_honourablecarlaqualtrough-tenthsessionoftheconfe.html](https://www.canada.ca/en/employment-social-development/news/2017/06/speech_from_the_honourablecarlaqualtrough-tenthsessionoftheconfe.html)

## ***United Nations:***

Disability is not a reason to sanction medically assisted dying – UN experts (January 25, 2021)

<https://www.ohchr.org/en/press-releases/2021/01/disability-not-reason-sanction-medically-assisted-dying-un-experts>

Convention on the Rights of Persons with Disabilities, Article 10 on the inherent dignity of all human persons (December 12, 2006)

<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities>

