



SYMPOSIUM ON
PALLIATIVE CARE
Towards a Narrative of Hope 21-23 May 2024

An International Interfaith Symposium on Palliative Care
Presented by:
Canadian Conference of Catholic Bishops (CCCCB)
Pontifical Academy for Life (PAV)



Towards a Narrative of Hope

*An International
Interfaith Symposium
on Palliative Care*

(Toronto, Canada, 21-23 May 2024)

POST-SYMPOSIUM STATEMENT AND RECOMMENDATIONS

PREPARED BY THE POST-SYMPOSIUM WORKING GROUP

24 OCTOBER 2024

ACKNOWLEDGEMENTS

The symposium organizers sincerely thank the post-symposium working group of academic experts for preparing this final statement. It summarizes the event and opens a path forward for future action.

For more information, please contact:

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Towards a Narrative of Hope

*An International Interfaith Symposium on Palliative Care*¹

(Toronto, Canada, 21-23 May 2024)

POST-SYMPOSIUM STATEMENT AND RECOMMENDATIONS

The Canadian Conference of Catholic Bishops and the Pontifical Academy for Life, in collaboration with other partners, organized an International Interfaith Symposium on Palliative Care titled “Towards a Narrative of Hope,” which took place in Toronto on 21-23 May 2024. The goal was to build a strong advocacy network in Canada and internationally and, together, develop a strategic framework for future action. In a written message, Pope Francis warmly encouraged the participants to persevere in their commitment to promoting palliative care, which is an expression of compassion and respect for the infinite dignity of every person.²

With over 110 participants from diverse backgrounds from across Canada and internationally, presentations explored educating and promoting a culture of social

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- 1 Symposium attendees included representation from: Pontifical Academy for Life; Canadian Conference of Catholic Bishops; United States Conference of Catholic Bishops; Catholic Health Alliance of Canada; Knights of Columbus; Catholic Women’s League; Interfaith Panel of Jewish, Christian, and Muslim perspectives; Indigenous perspective; Canadian and international organizations and individual healthcare practitioners, ethicists and theologians, and others with expertise and/or experience in palliative care.
 - 2 FRANCIS, “Letter to Participants. *Towards a Narrative of Hope. An International Interfaith Symposium on Palliative Care*,” 2024. https://www.cccb.ca/wp-content/uploads/2024/05/2024-Pope-Francis-Message_Symposium_EN-Final.pdf



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responsibility in palliative care. Experts in ethics, medicine, healthcare, policy, law, communication, and pastoral care deliberated on the challenges and successes of effective strategies to relieve suffering during illness and dying and ways to provide appropriate human accompaniment to improve patients' and their families' quality of life and well-being. An interfaith panel featuring different religious and cultural perspectives, including an Indigenous perspective, highlighted the importance of faith and culture in supporting the needs of the sick and dying and alleviating their physical, spiritual, and emotional suffering.

Collaborative discussion groups developed concrete ideas for action that focussed on palliative care advocacy, community engagement and support, education, cultural responsiveness in palliative care, and policy and legislation. A post-symposium working group developed this Statement, which includes recommendations for action.

Developing a Common Vision of Quality and Comprehensive Palliative Care

Unlike other medical specialties that focus on a particular organ, group of diseases, or type of medical intervention, palliative care integrates these domains into a unifying concentration on the alleviation of suffering and the improvement of the patient's quality of life. This unique focus on the lived experience of patients, who suffer not only physically but also psychosocially and spiritually, initially grew out of the hospice movement, started by Dame Cicely Saunders in the UK in the 1960s. Deeply rooted in her Christian faith, Dame Saunders created a model of care that emphasized the inherent dignity of every patient, even (and especially) as their physical bodies begin to fail in the face of terminal illness.

This model of care has since grown into the internationally recognized medical practice of the specialization in palliative care, which focuses on the evaluation and treatment of suffering for patients and their families facing serious – but diagnosed terminal – illness. The evidence base for palliative care has grown substantially over the past two decades. Across multiple studies in various contexts, it has been shown that the early integration of palliative care results in improved patient outcomes and



decreased overall healthcare costs.³ In 2014, the World Health Organization (WHO) declared that access to basic palliative care is a human right and an ethical mandate for all healthcare systems worldwide to provide to their populations.⁴ Despite this declaration, most patients around the globe with serious illnesses still do not have access to even basic palliative care services.

Emerging from a deep sense of resolve and concern, a growing network of stakeholders in Canada and internationally are compelled to advocate together that our communities (local, provincial, national, and international) provide, have access to, and receive quality comprehensive palliative care. Every person facing a serious or life-threatening illness has the right to access care that improves the quality of life through the prevention and relief of physical, psychosocial, or spiritual suffering. This commitment, as was evident at the recent symposium, is a true sign and authentic witness of “Compassionate Communities”⁵ that value and support all human life, intending neither to hasten nor to postpone death and seeing natural death as a normal part of life.

Many of the world’s faith traditions – which, for centuries, have reflected on the meaning of suffering, illness, and dying – are champions of palliative care and are given to attest to this commitment. For instance, Jewish, Christian, and Muslim wisdom teaches that, as embodied beings, all humans are vulnerable. Caring for the ill and accompanying the dying are theological imperatives rooted in this shared vulnerability; they are practical expressions of love of God and neighbour.

Speakers at the symposium representing different faith traditions brought to the fore a number of concepts and values that pointed to a shared vision for the promotion of a *culture* of palliative care: the understanding of human life as a gift;

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- 3 CANADIAN SOCIETY OF PALLIATIVE CARE PHYSICIANS, “Palliative Care. A Vital Service with Clear Economic, Health and Social Benefits,” 2017. <https://pallmed.ca/wp-content/uploads/2023/02/Economics-of-Palliative-Care-Final-EN.pdf>
 - 4 WORLD HEALTH ASSEMBLY, “Strengthening of Palliative Care as a Component of Comprehensive Care Throughout the Life Course,” 2014. <https://iris.who.int/handle/10665/162863>
 - 5 See HEALTH CANADA, *Framework on Palliative Care in Canada* (2018): “A Compassionate Community is a group of people that provide compassion, care and practical supports to patients who are seriously ill or frail, and their families, throughout the illness and bereavement.” (footnote 14). <https://www.canada.ca/en/health-canada/services/health-care-system/reports-publications/palliative-care/framework-palliative-care-canada.html#p1.1>



the recognition that human persons are more than a collection of symptoms to be treated; the call to compassion and solidarity; the preferential option for the poor, marginalized, and those excluded in our societies; and the accompaniment of the ill and dying – and their families – as a sacred ministry of presence.

Charity and Hope: A Theological and Ethical Reflection on Palliative Care from the Catholic Tradition

The Catholic tradition has encouraged palliative care as a “special form of disinterested charity” (*Catechism of the Catholic Church*, n. 2279). For the Church, charity “is not a kind of welfare activity which could equally well be left to others, but is a part of her nature, an indispensable expression of her very being.”⁶ Christians are called to the cultivation and practice of charity – the theological virtue by which we love God and neighbour – not only because the world is in need of it, but because it is integral to our identity as human beings made in the image and likeness of God, who is Love.

Caritas can be expressed in many different ways, including accompanying and being present to the sick and dying. Indeed, for the Church, “palliative care is an authentic expression of the human and Christian activity of providing care, the tangible symbol of the compassionate ‘remaining’ at the side of the suffering person.”⁷ Pope Francis, in his letter to the participants of the symposium, calls palliative care “a concrete sign of closeness and solidarity with our brothers and sisters who are suffering”; in this way, the Church carries out its moral responsibility as a “community of love.”⁸ The pope goes on to state that “*authentic* palliative care is radically different from euthanasia, which is . . . a failure of love, a reflection of a ‘throw-away culture.’”⁹ He laments that “euthanasia is often presented falsely as a form of

6 BENEDICT XVI, *Deus Caritas Est*, 2005, n. 25. https://www.vatican.va/content/benedict-xvi/en/encyclicals/documents/hf_ben-xvi_enc_20051225_deus-caritas-est.html

7 CONGREGATION FOR THE DOCTRINE OF THE FAITH, *Samaritanus Bonus*, 2020, V, 4. https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20200714_samaritanus-bonus_en.html

8 See BENEDICT XVI, *Deus Caritas Est*, n. 19.

9 FRANCIS, “Letter to Participants,” 2024. Emphasis added.



compassion. Yet ‘compassion’, a word that means ‘suffering with’, does not involve the intentional ending of a life, but rather the willingness to share the burdens of those facing the end stages of our earthly pilgrimage.”¹⁰

The Church, then, is committed to a vision of comprehensive and inclusive palliative care as a genuine expression of compassion and hope, rooted in the virtue of *caritas*, that responds to suffering in its many forms and respects death as part of – but not the end of – the human narrative which is fully revealed in Christ. With the Good Samaritan as a model of caregiving, the Church encounters those who suffer – especially those who feel that they are a burden to others – with consolation and with a hope that is fastened to the nearness and presence of Christ. “Hope is not only the expectation of a greater good,” the Church teaches, “but is a gaze on the present full of significance. In the Christian faith, the event of the Resurrection not only reveals eternal life, but it makes manifest that *in* history the last word never belongs to death, pain, betrayal, and suffering. Christ rises *in* history, and in the mystery of the Resurrection the abiding love of the Father is confirmed.”¹¹

Staying with – or being present to – those who are ill and dying is a sign of the charity and hope that are at the heart of the ministry of caregiving; it is also a sign of the solidarity that springs from our shared vulnerability, limitedness, and mortality.

Recommendations for Action

Given the ongoing global need to dramatically increase palliative care access, together with the uniquely Christian origin of the palliative care movement, it is now more important than ever for the world’s faith traditions – and all those who share this same value of support and care for life – to articulate clear and action-oriented support for the expansion of palliative care services, both in Canada and across the globe.

Grounded in the vision of palliative care described above, participants of the symposium propose the following recommendations for action:

10 FRANCIS, “Letter to Participants,” 2024.

11 CONGREGATION FOR THE DOCTRINE OF THE FAITH, *Samaritanus Bonus*, II.



RECOMMENDATIONS FOR ACTION

1. In the Canadian context, implement the 67th World Health Assembly (2014)'s call for WHO member states to “strengthen palliative care as a component of comprehensive care throughout the life course” by establishing palliative care as an essential medical service under the Canada Health Act.¹²
2. Promote an authentic vision and practice of palliative care that is separate and distinct from euthanasia and assisted suicide, and where there are laws permitting euthanasia, find ways to limit and lessen the harms done by such a law.¹³
3. Advocate for the necessary legal protections for healthcare professionals and institutions who do not provide euthanasia and assisted suicide because of the incompatibility of these practices with their beliefs, mission, or values.¹⁴
4. Expand communication, education, and advocacy efforts regarding early and comprehensive palliative care to grassroots organizations, such as schools and parishes (for example, see the CCCB and partners' [Horizons of Hope: A Toolkit for Catholic Parishes on Palliative Care](#)).
5. Engage in conversations and partnerships for action with various faith communities and others to promote access to palliative care as part of advancing the common good.
6. Challenge all peoples of faith and all those who align with the vision described in this statement to prioritize promoting access for all to palliative care internationally and to advocate for the sharing of religious and global resources to this end (for example, see the Pontifical Academy for Life, [White Book for Global Palliative Care Advocacy](#)).

12 WORLD HEALTH ASSEMBLY, “Strengthening of Palliative Care as a Component of Comprehensive Care Throughout the Life Course,” 2014.

13 JOHN PAUL II, *Evangelium Vitae*, 1995, 73. https://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_25031995_evangelium-vitae.html

14 CANADIAN CONFERENCE OF CATHOLIC BISHOPS, “Statement by the Canadian Conference of Catholic Bishops on the Non-Permissibility of Euthanasia and Assisted Suicide within Canadian Health Organizations with a Catholic Identity,” November 30, 2023. <https://www.cccb.ca/media-release/statement-by-the-canadian-conference-of-catholic-bishops-on-the-non-permissibility-of-euthanasia-and-assisted-suicide-within-canadian-health-organizations-with-a-catholic-identity>



RELATED RESOURCES

- **International Interfaith Symposium on Palliative Care Video Recap**

[ENGLISH](#) / [FRENCH](#)

- **Video Message from the Canadian Conference of Catholic Bishops announcing the Symposium**

[ENGLISH](#) / [FRENCH](#)

- **Video Messages from the Pontifical Academy for Life announcing the Symposium**

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