Submission to the Special Joint Committee on Medical Assistance in Dying

I am writing to address the glaring lack of preparedness in Canada for the application of medical assistance in dying (MAID) in March 2024 for people whose sole underlying medical condition is mental illness.

Background

For context, I am a Canadian citizen living in Australia, where I am a social worker and employed as a clinical manager for adolescents with moderate to severe mental health conditions. Moreover, I am the third generation in my family with a lived experience of mental illness and have been involved in local, national and international initiatives over the last two decades as a mental health advocate. In this capacity, I have publicly shared aspects of my personal experience of severe mental illness in Canada and recovery in Australia to challenge the stigma of mental illness and try to raise awareness of recovery, inspire hope and encourage help-seeking behaviour. Video content related to my own experience of suicidal distress is currently part of 'Compassionate Foundations', a suicide prevention eLearning initiative established for the Australian Public Service.

• Inability to accurately predict the future and lack of informed consent

It is immoral for doctors to administer lethal injections to individuals whose sole medical condition is mental illness for several reasons, including the fact that mental health experts cannot accurately predict a person's future trajectory and quality of life. As a result, one psychiatrist describes MAID as "death under a false pretence." Clearly, the assessment process to be used for MAID for this cohort will not qualify as informed consent.

"The evidence shows that that we are right less than half the time," said Dr. Sonu Gaind, chief of psychiatry at Sunnybrook Health Sciences Centre in Toronto.

"That means that at least half the people who assessors say, 'You're not going to get better from your mental illness, and you can get MAID,' at least half of those people would have gotten better. Meaning, we would have provided death under a false pretence."

At the same time that it is necessary to acknowledge that assessments respecting a person's future mental health are highly unreliable, it is also important to stress that all doctors are not created equal. For example, the psychiatrist in Toronto who initially diagnosed me with bipolar disorder did not convey to me that it was possible for me to recover and lead a satisfying and productive life. Under his care, I felt a profound sense of hopelessness and my mental health significantly deteriorated. However, my subsequent psychiatrist in the same city was strengths-based, stressed my prior accomplishments in life, and expressed her confidence that I had the ability to learn how to effectively manage the severe mental illness.

I am convinced that these two psychiatrists would not predict exactly the same future outcomes for individuals seeking eligibility for lethal injections under MAID.

¹ Specific information is available on LinkedIn: https://au.linkedin.com/in/keithmahar

² Disclosures include a short film (https://vimeo.com/10911768), programs produced by the Australian Broadcasting Corporation (https://www.abc.net.au/local/videos/2011/09/27/3327005.htm):(https://www.abc.net.au/news/2013-08-02/choose-your-words-carefully/4862538) and a chapter in a book (https://www.amazon.com.au/Coming-Proud-Stigma-Mental-Illness/dp/0578158566).

3 https://www.suicidepreventionaust.org/courses/apsc-compassionatefoundations/

⁴ Kirkey, S. (6 November 2023). 'We're not ready': Psychiatrists clash as deadline for opening MAID for mental illness looms. *National Post*. https://nationalpost.com/news/canada/psychiatrists-clash-deadline-maid-mental-illness

• Mental health is significantly underfunded

Furthermore, Michel Rodrigue, president and CEO of the Mental Health Commission of Canada, has addressed that mental health care is significantly underfunded in the country.

In Canada, more than 1.6 million people have an unmet need for mental health care, one in two have experienced a delay in accessing services (or know someone who has), and five in six children are unable to access treatment.⁵

Given that mental health care is significantly underfunded, the decision by the Trudeau government to legislate MAID for people with mental illness is all the more reprehensible.

• Fostering and legitimizing a false sense of hopelessness

Importantly, the introduction of lethal injections for some individuals with mental illness will also result in heightened risk for other Canadians.

Mr. Rodrigue's plea for citizens to join a movement to improve mental health care in Canada is appropriately titled *Inspiring Hope: Our Lives Depend On It.*⁶

Hope is recognized as a critical protective factor against suicide – while a sense of hopelessness is a significant risk factor. Unfortunately, many adolescents and adults will experience a false sense of hopelessness in their lives as a symptom of depression.

Hope, self-efficacy and self-stigma are complex internal psychological processes which are greatly influenced by external social factors. The existence of MAID for individuals with mental illness will serve to both foster and legitimize the false sense of hopelessness experienced by some people with mental illness in Canada.

Consequently, it is entirely predictable that the legislation adopted by the Trudeau government will contribute to suicides by vulnerable adolescents and adults in the future. In fact, it is possible that it already has been a contributing factor in some suicides.

In conclusion, Canada is not prepared for lethal injections to be provided to people whose sole medical condition is mental illness in "a safe and adequate application of MAID"⁷, nor will it ever be.

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⁵ Rodrigue, M. 'Inspiring Hope: Our Lives Depend On It'. Mental Health Commission of Canada. https://mentalhealthcommission.ca/donate/

⁶ Ibid.

⁷ Follow-up on Recommendation 13 of the Second Report of The Special Joint Committee on Medical Assistance in Dying, 7 November 2023. Parliament of Canada. https://www.parl.ca/Committees/en/AMAD/StudyActivity?studyActivityId=12421513