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The Canadian Mental Health Association, CAMH, The Canadian Association for Suicide Prevention, and my own organization (The Ontario Association for ACT & FACT [OAAF]), which is the largest professional association of community based tertiary mental health care in Canada, to name but a few... we have all denounced Bill C-7. Anyone who says there is an emerging consensus is grossly misinformed or worse.

The Quebec parliamentary commission listened to the facts. I am hoping you will listen to the facts and that this isn't just political theatre where the ending has already been written. Because what is happening is tragic.

For 20 years I have worked only with adults who have the most severe and persistent forms of mental illness – in cockroach and bedbug infested rooming houses and on the streets where our wealthy society forces them to live in poverty. Our sons and daughters treated as social outcasts.

MAID activists say everyone must be able to access MAID regardless of crushing poverty, the shocking lack of treatment availability, protracted wait times of years, or having brain diseases where it is impossible to predict irremediability. The rallying cry is autonomy at

all costs. But the inescapable cost is people dying who would get better. What number of mistaken guesses is acceptable to you?

Death is not an acceptable substitute for good treatment, food, housing, and compassion. You who voted for this law have not understood vulnerability and what it means for your doctor to offer you death over life. And do you seriously believe you can actually prevent abuses by the 100,000 MDs and NPs in Canada who now have a license to kill. Read the news.

You know Bill C-7 is not consistent with the Supreme Court’s stated principle in Carter to preserve life. The ruling explicitly supported people getting help killing themselves only when they could no longer physically do it themselves. Make a referral to the Supreme Court if you are so sure about how they will rule. Justice and the preservation of life demands it.

I am hearing shock and disbelief from psychiatrist colleagues. When the Ontario Medical Association 2021 survey asked Ontario psychiatrists clear questions, after Bill C-7 became law, 91% objected to the law, 7% were uncertain and only 2% supported what Bill C-7 has done. Only 2%.

Psychiatrists don’t know and can’t know who will get better and live decades of good life. Brain diseases are not liver diseases. If guesswork is good enough for you, it is not good enough for psychiatrists who understand the science and respect our duty to abide by a professional standard of care. You have been systematically misled by discriminatory ideology over clinical reality. Passing a law telling psychiatrists to make impossible predictions doesn’t magically make it possible.

Some of my patients are now refusing effective treatment to make themselves eligible for MAID. They are susceptible to the perverse lie it is not suicide. Suicide is always clinically

defined as taking steps to arrange your own death. The Canadian Association of Suicide Prevention has stated that all MAID for mental illness is suicide. The frankly bizarre assertion that suicide is always an impulsive and unplanned act is not rooted in reality. Only 7% of people who attempt suicide in Canada actually die. What will that percentage become? Likely number one in the world.

In the few European countries that at least require standard treatments be tried before euthanasia, there have been steady and significant rises in the overall suicide rates in the last two decades while the rates went down in all the countries around them. Women in particular have much higher suicide rates (Mroz). The false claim (that the Supreme Court accepted without evidence) that suicide rates do not go up with MAID is absolutely contradicted by the data. Suicide contagion should scare you. Do you support suicide prevention or not?

Telling my patients that you will make it easier for them to die has enraged me. They will doctor shop to find the few psychiatrists who fancy themselves defenders of autonomy at all costs, as already happens in the Benelux countries. And they will die because death was offered over full and purposeful membership in the human community. They will die because of the social suffering this law enshrines. They will die because of lack of services. They will die because psychiatrists will have legal permission to give up. They will die because, whether you can see it or not, you have told them they don't matter. You have killed hope in Canada in the places it is needed most.

References

Mroz, Sarah, et al. “Assisted dying around the world: a status quaestionis.” *Annals of Palliative Medicine* 10.3 (2021): 3540-3553.