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SUBMISSION TO STANDING COMMITTEE ON JUSTICE AND HUMAN RIGHTS

RE: BILL C-14 – AN ACT TO AMEND THE CRIMINAL CODE AND TO MAKE RELATED AMENDMENTS TO OTHER ACTS (MEDICAL ASSISTANCE IN DYING)

This proposed bill in my opinion narrows the ruling of the Supreme Court of Canada in "Carter". It proposes to modify "grievous and irremediable medical condition" by the phraseology "their natural death has become reasonably foreseeable". It is purported that this language was necessary to protect vulnerable persons "in moments of weakness to end their lives".

In the first instance there is no evidence from other jurisdictions that vulnerable persons are being induced to end their lives. The Select Committee from Quebec found no evidence of this vulnerability nor of a "slippery slope". In the second instance the phrase "whose deaths are reasonably foreseeable" is vague and uncertain for doctors (although lawyers and judges appear comfortable with this language). For example, it is "reasonably foreseeable" that I will be dead in 50 years. I do not believe that this language is precise enough. Precise language is necessary because if medical practitioners act outside the law they are committing "homicide" and could be imprisoned. It is my suggestion that the language regarding "reasonably foreseeable death" be removed from this bill. This language was not in "Carter".

I am opposed to any exclusion for individuals who are suffering from "mental illness" from this legislation. "Carter" makes no mention of mental illness. Mental illness has long had a stigma as being somewhat different than other medical illnesses. Mental illness, in the end, is a disorder of the human brain. In my opinion if a person meets the threshold of "a grievous and irremediable medical condition" there is no need to exclude the few individuals who will present with untreatable mental illness. Another ambiguity is what exactly comprises "mental illness". Is it dementia, seizures, depression, Parkinsonism, autism, conversion disorder, mental retardation or is it any condition that appears in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5)? Again, "Carter" does not exclude mental illness. Finally, under Section 15 of the Charter all Canadians have the right to equal protection and benefit of the law. Excluding "mental illness" is a violation of Section 15 in my opinion.

The last change that I would recommend is inclusion of an advanced directive such that individuals with dementia can when they are still competent agree to medical assistance in dying at some point down the line when they have drifted into the twilight zone of irreversible, impairing dementia. It is estimated that 15% of Canadians over age 65 currently have dementia and that by 2031 almost 1.5 million Canadians will have a dementing illness. Dementia is a terribly debilitating illness that robs the individual of their personality, cognitive abilities and body function and produces irreversible suffering which can go on for years. The risk of not having this language in Bill C-14 is that Canadians will be increasingly forced to travel abroad to Switzerland to end their lives. This of course is an option open only to those of means and many Canadians in the final stages of their illnesses cannot either afford or physically make this journey. I have personally witnessed the death of two close relatives from dementia and I can attest to the fact that their suffering was unbearable.

Some individuals have said that this bill is a good "first step". In my view we would not even have this bill without the ruling from the Supreme Court of Canada. It is unlikely that politicians in Canada with the exception of Quebec will address this issue in the "foreseeable future". We need to get this legislation right the first time and not hope for some revisions over the next five years. The forces opposed to medical assistance in dying will do their best to disrupt further deliberations on this issue as they appear to have done in influencing the drafting of Bill C -14. While we "study" this issue many Canadians will be unnecessarily forced to suffer agonizing deaths.

We need to keep in mind that medical doctors are only involved in this issue because they control access to and can administer lethal medications. There are other ways of inducing death, and by narrowing the language from "Carter" we will be forcing Canadians to consider alternate methods of euthanasia, such as overdoses, inhalations and shootings. This is in the context that suicide is a legal act and therefore open to any Canadian.

SUMMARY OF PROPOSED AMENDMENTS

1. Remove references to "their death has become reasonably foreseeable"
2. "Mental illness" should be removed as an exclusion
3. Include language on advanced directives

Respectfully,

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