## Dear Mr. MacPherson:

I am writing to make a submission to the Standing Committee because the Medically Assisted Dying Bill (C-14) will very soon be introduced in the legislature and to date most of the safeguards in the Vulnerable Persons Standard have been ignored in the proposed bill.

These are my areas of concern:

- The federal government plans to explore broadening eligibility criteria to mature minors, people with psychological disabilities, and through advanced planning. The implications of this are very worrying. When do we decide children are "mature" enough to choose to die? Why would someone with a psychological disability choose death over life? perhaps because there are no or very limited social supports that would make life worth living. Who can know in advance how they will feel in the future? A person could sign a directive that allows a doctor to end his or her life and may be unable to say when the time comes that actually it is not what they want.
- Accountability mechanisms are weak and until a regulation is in place, provinces will be asked to <u>voluntarily</u> report on medically assisted dying. We need strong accountability mechanisms and specific areas of reporting that will help people understand how the law is being used and in what circumstances.
- Nothing in the bill as written will require provinces to ensure that there are adequate social and medical services in place so that people have alternatives to choosing suicide. We need to do so much more to improve pain management and to improve access to adequate supports in the community so that people with profound pain or disabilities will not feel that death is the only option.

As a person living with a disability I have advocated for many years for a better understanding of disabled lives, greater access to supports and services and equal treatment in all areas of our society. One of the first thoughts to occur to a person after an accident has left him quadriplegic is the desire to die. That person's life will never be the same again, but with the right equipment, attendant care, adequate pain relief, emotional and financial support that person could go on to live an amazing accomplished life. How tragic if such a person were to ask for an assisted death because he was not aware of what is possible or these supports were not made available.

A minor who is enduring a terminal illness could decide to ask for an assisted death against the parents' wishes. Can that child really decide such a thing? What kind of supports are lacking that would make a child so desperately want to die sooner than the illness itself dictates? We must do better to improve palliative care and family supports and pain management so that neither a child nor an adult will seek to deprive herself of the most precious last days of her life.

For people with psychiatric disabilities social stigma, lack of understanding and support can make life unbearable. But in this situation an assisted death is surely reflective of a tremendous failure of our healthcare system and social services.

When death is imminent and suffering unbearable it makes sense to give people the legal right to ask for help to end their lives sooner. But Canadians must not look upon assisted death as a

solution to the failings of our healthcare system to provide alternative choices. We must guard against the slippery slope that this legal right can become for the vulnerable members of society poor people, disabled people, mental and psychiatrically disabled people, children, anyone unable to speak for themselves. We need a law that will protect people from the actions of those with misguided assumptions and beliefs about the value and quality of disabled lives.

We need to do so much more to improve access to services, government funding of essential equipment to improve quality of life, funding for attendant support, emotional support and counselling services and access to pain control that can make life not only liveable, but a joy to live. We need these things to be real alternatives to the desire to die too soon.

Please do not pass Bill C-14 without The Vulnerable Persons Standard recommendations in place.

http://www.vps-npv.c

If these standards can be adhered to we can be sure that physician assisted death will be carefully and appropriately put into practice without causing harm or potential risk to vulnerable members of our society.

Thank you for your attention to my concerns.

Sincerely,

Jane Field