



Catholic Health Alliance of Canada
L204-323 Coventry Road
Ottawa, ON K1K 3X6
613-567-1200
www.chac.ca

Medical Assistance in Dying Committee
Committees and Legislative Services Directorate
Sixth Floor, 131 Queen Street
House of Commons
Ottawa ON K1A 0A6

Attention:

Joint Chairs: Hon. Yonah Marin & Mr. Marcus Powlowski
Joint Clerks: Mr. Jean-Francois Lafleur & Matthieu Boulianne

By email: AMAD@parl.gc.ca

June 5, 2026

Dear Hon. Martin and Mr. Powlowski,

Submission to the Special Joint Committee on Medical Assistance in Dying

**Re: Expansion of MAiD for Mental Disorders as the Sole Underlying Medical Condition
(MD-SUMC)**

The Catholic Health Alliance of Canada welcomes the opportunity to respond to the Committee's review of expanding the eligibility of persons whose sole underlying medical condition is mental illness to receive medical assistance in dying (MAiD).

About CHAC

The Catholic Health Alliance of Canada (CHAC) is a collaborative of 13 sponsor/owner organizations. Collectively, these organizations appoint the boards and CEOs of 129 health organizations with Catholic identity in Canada.



At the outset, it is important to reiterate two fundamental positions of Catholic health:

- The first is our ongoing commitment to being part of a high-quality integrated health system.
- The second is that the position of the Catholic Health Alliance of Canada (CHAC) relative to MAiD has not changed and has been reiterated by CHAC numerous times on many occasions. We remain opposed to the practice of MAiD as it is not compatible with the values of Catholic health and its commitment to the sanctity of life.

At the same time, as long as MAiD is legislatively permitted in Canada, we continue to advocate for the protection of vulnerable populations who like many Canadians face growing barriers in accessing care, in particular mental health supports. This position is shared by the UN Committee on the Rights of Persons who advocate for the repeal of current legislation or withdrawal of any proposed legislation for MAiD to be available to individuals whose death is not reasonably foreseeable.

Recommendation

It is within this context and fundamental opposition to MAiD that we **recommend that the Special Joint Committee repeal the expansion of MAiD to patients with mental disorders as their sole underlying condition (MD-SUMC).**

Rationale for Recommendation

1. Barriers and lack of access to Mental Health Supports.

There is a growing incidence of mental illness as reported in Statistics Canada alongside a healthsystem with stretched resources for this population. Women, youth, Indigenous people and other vulnerable populations already face increasing and disproportionate access to mental health care. MAiD cannot and ought not become the most accessible option for vulnerable people with mental illness when other treatment options and lack of supports have made their lives difficult to live. When MAiD becomes the default solution for human suffering rooted or exacerbated by social circumstance and access to services, we have failed as a society.

2. Conflict with suicide prevention initiatives

There are concerns raised by many psychiatrists that MAiD for patients with MD-SUMC undermines suicide prevention initiatives and sends a potentially troubling message in that some patients requesting MAiD as a result of mental illness will receive suicide prevention interventions while others will be assisted to die by MAiD. The criteria for which “stream” is offered is open to clinical uncertainty and a lack of consensus on standard of care and patient safety.



3. Lack of consensus on irremediability

Current data and clinical judgment do not support determining that any mental illness is ever irremediable with the consequence that any person requesting MAiD with MD-SUMC might not be able to meet that particular current eligibility criteria for MAiD. This raises significant concerns related to patient safety.

4. Problems with current insufficient safeguards

Current legislation does not require that patients receive any treatment for their illness (including mental illness), only that they be informed of available treatment options before they access MAiD. Coupled with a faster growth in MAiD than anticipated and troubling Coroner's reports regarding some MAiD cases, more analysis needs to occur about the compliance with and adequacy of current safeguards before any further expansion occurs.

Conclusion

The Catholic Health Alliance of Canada thanks you for the opportunity to respond and asks the Special Joint Committee to consider the following regarding the possible expansion of MAiD to people whose sole diagnosis is mental illness. We urge the committee to:

1. **Repeal** the expansion of MAiD to patients with mental disorders as their sole underlying condition (MD-SUMC).
2. **Increase** federal investment in high quality resources and supports for vulnerable Canadians particularly those living with mental health challenges.
3. **Prioritize** a social justice response to the mental health crisis that refocuses public systems energy and effort from ensuring the right to access MAiD in Canada to ensuring the human right to live a life of quality.
4. **Adopt comprehensive** and compassionate approaches to suffering that address its root causes, rather than providing MAiD as the path of least resistance or as a misguided form of harm reduction.
5. **Investigate and strengthen** current MAiD safeguards, particularly in cases involving non-compliance with safeguards and inadequate social supports which are resulting in cases where people are requesting MAiD because of loneliness and feelings of being a burden. The MAiD system already has identified issues that require investigation, enhanced safeguards, and better monitoring. These documented compliance issues warrant more effective federal enforcement measures, instead of an acceleration of expansion.



We respectfully submit our concerns and recommendations for your consideration and as a way of expressing our ongoing commitment to protecting the most vulnerable Canadians.

Sincerely,



Kelli O'Brien
President & CEO

c.c. Sara John Fowler, Governing Council Chair, Catholic Health Alliance of Canada

