

The Salvation Army in Canada Submission to the Council of Canadian Academies' Expert Panel on Medical Assistance in Dying

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The Salvation Army in Canada has more than 100 years of experience working with the country's most vulnerable and marginalized people. We strive to provide the highest standard of professional care to individuals, where every person is cared for unconditionally and without discrimination. Many of the 1.9 million people in Canada we served last year live with complex mental-health conditions. As a result, our submission today focuses on instances of medical assistance in dying (MAiD) where mental illness is the sole underlying medical condition.

The Salvation Army believes that MAiD should not be made available where mental illness is the sole underlying medical condition. "The sanctity of life is one of our most fundamental societal values"ⁱ and we submit expansion of the MAiD criteria would challenge this principle.

Mental Illness in Canada

In today's society, mental illness is one of the most significant barriers to well-being. The Salvation Army has witnessed the life-saving and life-changing impact mental-health supports and programs can make on the lives on individuals and their families. We remain committed to addressing and supporting those who are struggling with mental-health issues, ensuring there is always hope.

In any given year, 1 in 5 Canadians live with mental illness and/or substance-use disorders.ⁱⁱ Further, statistics indicate that suicide is the second leading cause of death among Canadians aged 15 to 34.ⁱⁱⁱ Despite the fact that 20% of people in Canada will experience mental illness, access to mental-health services is a significant problem. Access to services is impacted by numerous barriers: stigma, poverty, lack of integration between mental-health and health services, shortage of mental-health professionals, regional disparities, and cross-cultural diversity.^{iv}

Experience in Other Jurisdictions

The Salvation Army is moved by the evidence and experience of other jurisdictions that legalized euthanasia and assisted death in recent years, particularly the Netherlands and Belgium. In both countries, euthanasia and assisted death, where mental illness is the sole driving cause, appear to be on the rise. Since 2006, these services have increased in The Netherlands by an average of 15%.^v While this may reflect better reporting by medical professionals, statistics are similar in Belgium where the number of reported deaths rose from 742 in 2004/2005 to 2,086 in 2010/2011.^{vi}

Our Position

The Salvation Army strongly supports the recommendations put forward by the Canadian Mental Health Association.^{vii} In addition, we submit the following regarding requests for MAiD where mental illness is the sole underlying medical condition:

1. Availability of Treatment

Across the country, significant barriers exist for thousands of people seeking mental-illness treatments and services. Salvation Army ministry units witness individuals' daily struggles to access appropriate mental-illness treatment and services. Individuals and their families must often navigate multiple levels of bureaucracy to locate appropriate services and treatment.

In addition, suicide today, especially among youth, is a significant public health issue, with far reaching social, emotional, and economic consequences. Yet access to services, especially in remote communities, remains limited at best. Ongoing significant investment in mental health treatment and services across the country is needed before any discussion about the expansion of eligibility criteria for MAiD.

2. Faith in Recovery

The Salvation Army has journeyed with thousands of people on their paths to recovery. Recovery from mental illness is deeply personal, unique and may involve many different treatments and services. Recovery also means different things to different people—for some it will mean complete elimination of symptoms while for others it may involve the use of coping mechanisms for ongoing symptoms that enable them to lead fulfilling lives in their communities.

Studies indicate that, with the right supports and resources, recovery is possible regardless of the mental-health diagnoses.^{viii} We submit that allowing MAiD in cases where mental illness is the sole underlying condition will undermine the belief that recovery is possible.

3. Importance of Hope

Our brand promise, "Giving Hope Today," has been at the heart of The Salvation Army's mission in Canada for over 130 years. The Salvation Army has observed the power of hope in guiding people through their experiences with mental-health and substance-use concerns.

We believe that presenting MAiD as an option for those experiencing mental illness weakens a physician or mental health professional's ability to provide care and hope.

The Salvation Army contends that the right treatment and services can lead to restored hope, healing and new life, and that restored relationships are preventative factors against suicidal behaviour.

Recommendations

The Salvation Army has assisted countless Canadians in their recovery from mental illness and substance-use disorders. In doing so, we have witnessed the power of hope, faith in recovery, and the efficacy of mental-health supports and treatment. We are deeply concerned at the prospect of expanding MAiD criteria to include mental illness and put forward the following alternatives:

1. Focus on Recovery

The Salvation Army believes that every person living with mental-health and/or substance-use concerns must be actively supported on their journey to recovery. Where mental illness is the sole underlying cause for requesting MAiD, alternative recovery methods should be explored instead.

2. Investment in Community Mental-Health and Substance-Use Disorder Services and Supports

The Salvation Army calls for a greater Investment in community mental health and substance use disorder services and supports. Barriers to service access are a significant issue across the country. Although many are working to reduce the stigma associated with mental illness, the demand for services vastly outweighs their availability.

The Salvation Army submits that the expansion of MAiD to include vulnerable persons, especially those experiencing mental illness, challenges sanctity of life, one of the core and fundamental values of Canadian society.

ⁱ *Carter v. Canada (Attorney General)* 2015 SCC 5 at 63

ⁱⁱ Smetanin, P., Stiff, D., Briante, C., Adair, C.E., Ahmad, S. and Khan, M. *The Life and Economic Impact of Major Mental Illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada 2011.

ⁱⁱⁱ Navaneelan T (2017). *Suicide rates: An overview*. Statistics Canada. Accessible at www.statcan.gc.ca/pub/82-624-x/2012001/article/11696-eng.htm.

^{iv} Canadian Mental Health Association. "Access to Services" www.cmha.ca.

^v Theo A. Boer. "Euthanasia in the Netherlands: An Eyewitness Report," *Human Life Review* 41 (2015), p. 61.

^{vi} Thienpont L, Verhofstadt M, Van Loon T, et al "Euthanasia requests, procedures and outcomes for 100 Belgian patients suffering from psychiatric disorders: a retrospective, descriptive study" *BMJ Open* 2015, p. 3

^{vii} CMHA National. "Canadian Mental Health Association's position paper on medical assistance in dying (MAiD)." August 2017

^{viii} Mike Slade and Eleanor Longden. "Empirical evidence about recovery and mental health," *BMC Psychiatry* 15 (2015), p. 285.