

GOVERNMENT RESPONSE

René Arseneault, MP
Honourable Yonah Martin
Joint Chairs, Special Joint Committee on Medical Assistance in Dying
Parliament of Canada
Ottawa, Ontario

Dear Mr. Arseneault, MP and Senator Martin,

I am pleased to respond, on behalf of the Government of Canada, to the third report of the Special Joint Committee on Medical Assistance in Dying (AMAD) entitled, "MAID and Mental Disorders: The Road Ahead," tabled in the House of Commons on January 29, 2024.

I would like to express gratitude to the members of AMAD for their diligent efforts in undertaking this study of the degree of Canada's preparedness for the safe and adequate application of medical assistance in dying (MAID) where mental illness is the sole underlying medical condition. I would also like to thank all of the witnesses and those who submitted briefs and who contributed their time and expertise to provide the Committee with information and evidence on the issue.

In response to the concerns we heard from Provinces and Territories and health system partners, and the important work of the members of AMAD, the Government introduced Bill C-62, *An Act to amend An Act to amend the Criminal Code (medical assistance in dying), No. 2*, which Parliament enacted on February 29, 2024. This bill extended the exclusion of MAID for mental illness until March 17, 2027. In addition, in accordance with the recommendation of AMAD, the legislation requires that a Joint Committee of Parliament be established by February 28, 2026, in order to undertake a comprehensive review relating to eligibility of persons whose sole condition is a mental illness.

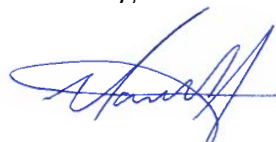
This additional three years will provide time for:

- MAID assessors/providers and psychiatrists interested in consulting on MAID requests to be trained;
- Provinces and Territories and their stakeholders to implement standards and enhance coordination and oversight mechanisms; and,
- The Special Joint Committee on MAID to be re-established to conduct a comprehensive review relating to eligibility of persons whose sole condition is a mental illness. This may include an assessment of the degree of preparedness attained for a safe and adequate application of MAID in these circumstances.

Over the course of the next three years, Health Canada will continue to work closely with provinces and territories and further engage with health professional and mental health stakeholders, including persons with lived experience, to determine what additional areas of work could be considered to support ongoing preparations for the new timeline. In addition, our work will focus on the following areas: ongoing support for training, guidance and resources for practitioners when assessing complex MAID cases, including those that involve mental illness; engagement with First Nations, Inuit and Métis, as well as other key stakeholder groups on MAID; further work to explore models of case review and quality improvement in MAID delivery; and, undertaking research that will provide insights into the reasons why people seek MAID and the views and experiences of MAID among key populations. These areas of work will be critical to inform the preparedness of the MAID regime for expansion in 2027.

In closing, I would like to again thank AMAD for its carefully considered review of Canada's preparedness for MAID expansion and for its diligence and compassion in understanding the delicate yet important considerations for MAID and mental illness.

Sincerely,



Mark Holland
Minister of Health