

November 2021

To the Leadership of the Canadian Psychiatric Association:

We, Indigenous Healers, Elders, and leaders, write to express our alarm that, while claiming it is not taking a position, the Canadian Psychiatric Association clearly supports MAiD for mental illness, i.e., euthanasia or assisted suicide. Your support is apparent by your continuing to say it is discriminatory for those with mental illness not to be offered MAiD.

Your position will adversely impact Indigenous populations in Canada as your organizations actual policy documents and Position Statements provide recommendations that continue policies of privilege.

We are shocked that your November 2021 Position Statement Update still does not address the phenomenon of suicide contagion and the importance of suicide prevention, or the risks of suicide to marginalized populations. How is it even possible not to mention this in a Position Statement on mental illness and death? We are fighting to combat the Indigenous suicide crisis. Our consistent message to our community is that healing, hope, and resilience are possible, and suicide is not an option.

On what medical evidence are you supporting offering death for those trying to overcome life-suffering? What evidence do you have that mental illnesses can even be predicted to be “irremediable” for MAiD? Without this evidence, you are implicitly allowing a system of assisted suicide for social suffering.

The definition of mental wellness is a balance of the mental, physical, spiritual and emotional. This balance is enriched as individuals have: purpose in their daily lives whether it is through education, employment, care-giving activities, or cultural ways of being and doing; hope for their future and those of their families that is grounded in a sense of identity, unique indigenous values, having a belief in spirit; a sense of belonging and connectedness within their families, to community, and to culture; and finally a sense of meaning and understanding of how their lives and those of their families and communities are a part of creation and a rich history. [First Nations Mental Wellness Continuum Framework, Summary report, Health Canada, January 2016].

We encourage you to consider the Senate testimony of our esteemed colleague who is an internationally renowned expert in Indigenous mental health:

“A few common messages emerged from those who recovered from being suicidal. The first was that youth shared how their thinking was very distorted when they were suicidal. Other distorted beliefs were that there was no hope of helping with their suffering and no chance of ending the pain. They believed life wasn’t worth living and that others wouldn’t care if they killed themselves.

In recovery, they realized how inaccurate these beliefs were. In hindsight, they shared the message that they thought suicide was a permanent solution to a temporary problem. The message that MAiD presents to those who are suffering is that when the suffering becomes more than they can tolerate, they can have medical professionals end their lives for them. This message undermines the whole concept of suicide prevention.

Our friends and family die of preventable diseases. We watch many prematurely end their lives and experience death in custody, in the care of social services and the justice system. Our people die of complex and higher rates of disease than the general population. So when we’re already overrepresented at every stage of this health system, it seems ironic to provide yet another path to death.”

- Dr. Rod McCormick, Mohawk psychotherapist

<https://sencanada.ca/en/Content/Sen/Committee/432/LCJC/11ev-55129-e>

MAiD is not coherent with our beliefs about life and death and is yet another form of cultural colonialism.

“ In this world view of the Dene, there is no description or word for ‘medical assistance in dying’ or suicide...Today, suicide runs rampant in our communities. It’s become like a way of life. As I said, we have no word for suicide. It’s totally against the spiritual laws of how we live.”

- François Paulette, respected elder and a chair of Yellowknife Stanton Territorial Health Authority Elders’ Advisory Council

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We have lived through forced sterilization and residential schooling, and do not want other practices imposed on our people. CPA’s Position Statement increases the risk of our most vulnerable, already struggling with social injustice and disparities, now seeking enticed death. We are already experiencing a suicide epidemic and we do not need help to end our people’s lives. If psychiatrists support, become involved in, or are explicitly obligated to refer patients for medical assistance in dying for mental illness, this will inflict a new generational

trauma on our communities, propagated by the professionals tasked with helping our communities heal. Your role in facilitating this would be shameful.

Indigenous persons experience severe health inequalities compared to non-Indigenous persons in many areas including chronic illness, disability and mental illness. This is compounded by limited access to health services. Our life expectancy is markedly lower than the national average and this is caused mainly by our burden of mental illness and suicide completion. Our people also endure poverty, food insecurity, and high rates of unemployment –social determinants that negatively impact all mental health outcomes.

“.. I express my concerns about expanding MAiD to include people whose natural death is not reasonably foreseeable. Why is this? This is because Indigenous peoples are not secure in our health system. Racism exists in health care.

..In my opinion, a bill that does not actually take into account how social inequities disproportionately affect Indigenous peoples is highly problematic.”

Dr. Lisa Richardson is mixed blood Anishinaabe Kwe. She is the strategic lead for the Centre for Wise Practices in Indigenous Health, Women’s College Hospital.

<https://sencanada.ca/en/Content/Sen/Committee/432/LCJC/55130-e>

We know that meaningful actions are represented by policy recommendations and Position Statements. We ask the Canadian Psychiatric Association to modify its Position Statement on MAiD for mental illness, to explicitly point out the risks of suicide of marginalized people suffering from inequities, to express its strongest support for suicide prevention measures and better culturally sensitive mental health services. Also, especially in the absence of evidence showing mental illnesses can be predicted to be irremediable, to clearly indicate that MAiD cannot be provided for mental illnesses.

Please consider the responsibility you carry to faithfully represent critical evidence and the safety of all Canadians.

Assisted-death bill sends wrong message to Indigenous people, advocates say

<https://www.thestar.com/news/canada/2020/11/24/assisted-death-bill-sends-wrong-message-to-indigenous-people-advocates-say.html>

Signatories:

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to review youth suicide prevention and mental health services, 2021
Member of Wolastoqey Nation

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