CANADIAN PSYCHOLOGICAL ASSOCIATION
SOCIÉTÉ CANADIENNE DE PSYCHOLOGIE

May 15, 2026

Senator Yonah Martin
Marcus Powlowski, M.P.
Co-Chairs, Special Joint Committee on Medical Assistance in Dying (MAiD)
The Senate of Canada
Ottawa, Ontario K1A 0A4

Dear Co-Chairs:

On behalf of the Canadian Psychological Association (CPA), we are writing as your committee discharges its responsibilities in reviewing Bill C-62 *An Act to amend the Criminal Code (medical assistance in dying), No2*. The CPA recognizes the significant work of the special joint committee on such a sensitive and delicate matter as Medical Assistance in Dying (MAiD), and the recommendations that are forthcoming.

The CPA is of the view that health care decisions and related legislation should always be guided by scientific evidence. While we appreciate that such decisions must fall within the bounds of the Canadian Charter of Rights and Freedoms, we are concerned that suicidology research has not been adequately considered in the deliberations regarding MAiD when mental disorders are the sole underlying condition (MAiD MD-SUMC).

Existing research underscored that determination of suicide risk is extremely difficult and a complex task. Over 75% of individuals who die by suicide do not disclose suicidal ideation to their clinician. A recent meta-analysis indicated that most individuals who died by suicide had been categorized as 'low risk' and only 5.5% of those who died by suicide were accurately identified as 'high risk'. These findings underscore requests for MAiD where MD-SUMC are extremely challenging.

In light of this data, should the decision be made to recommend MAiD where MD-SUMC, we would implore the committee to consider the need for much stronger safeguards than what is currently proposed.

Assessments for MAiD MD-SUMC should be conducted at multiple time points by practitioners who possess expertise in mental disorders and suicide risk assessment. More specifically, Track 2 requests should include at least one assessor with extensive mental health expertise. It is not sufficient to suggest that such experts should be consulted by assessors if assessors do not possess that expertise. Such a requirement fails to consider that in some cases practitioners do not know what they do not know, and may wrongfully and innocently assume that they possess the requisite knowledge and skill to distinguish a request for MAiD from suicidal intent.

Psychologists are uniquely trained in conducting complex assessments and possess the experience and expertise to contribute to the assessment of MAiD requests falling under the Track 2 provisions. In particular, psychologists are skilled in the use of objective assessment measures having established validity, reliability and embedded indices aimed at identifying inconsistent responding, feigned responding, symptom exaggeration, and suicidal ideation/intent.

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So critical is this process to making a determination in addition to serving the broader public interest, psychological assessments must be viewed as a standard of practice and part of a comprehensive patient assessment. In this regard, the CPA remains hopeful that the Canadian Association of MAiD Assessors and Providers will respond favourably to our pending request to access its MAiD curriculum and address this significant oversight.

The CPA is also concerned about the matter of system readiness and the ability to access evidence-based treatments. It is no secret that the mental health treatment and research have been grossly underfunded. Data from the Canadian Institute for Health Information found that 41 % of adults and 51% of young adults have an unmet need for mental health treatment. Research has shown that even when treatment is available, it is often fragmented, overly symptom-focused, and devoid of adequate long-term follow-up; factors that are bound to exacerbate suffering and hopelessness. When consideration is given to the vast disparities in health care resources that plague rural and northern communities, this reality is compounded further.

In closing, if a recommendation from the Special Joint Committee to consider a request for MAiD MD-SUMC is forthcoming, the CPA strongly believes there is an essential expert role for psychologists to play in collaborating with psychiatrists and nurse practitioners, and those who request Track 2.

We look forward to the committees' deliberations and final recommendations, and would be pleased to provide additional information, be it in writing and/or as a witness. I can be reached at executiveoffice@cpa.ca.

Sincerely,

Lisa Votta-Bleeker, Ph.D.
Chief Executive Officer

Copies to: The Honourable Marjorie Michel, Minister of Health
The Honourable Sean Fraser, Minister of Justice & The Attorney-General
Members, CPA Working Group on MAiD