

**PRESS
CONFERENCE
MEDIA KIT**

**TROUSSE DE
MÉDIA POUR LA
CONFÉRENCE DE
PRESSE**

Date: February 23, 2024 / le 23 février 2024

Proceedings (all times in EST)

- 9:00 am: Press Conference Starts – Introduction from Kurt Goddard
- 9:07 am: Kerri Joffe
- 9:13 am: Bonnie Brayton
- 9:19 am: Heather Walkus
- 9:25 am: Krista Carr
- 9:30 am: Conclusion from Kurt Goddard
- 9:32 am: Question Period Begins
- 10:00 am: Press Conference Ends

Our Panel

Opening & Closing Remarks

Kurt Goddard, Executive Director of Legal & Public Affairs, Inclusion Canada

Speakers

Bonnie Brayton, CEO, DAWN Canada

A recognized leader in both the feminist and disability movements, Bonnie Brayton has been the National Executive Director of [DAWN Canada](#) since May 2007. In this role, she has proven herself as a formidable advocate for women with disabilities here in Canada and internationally. During her tenure with DAWN Canada, Ms. Brayton has worked diligently to highlight key issues that impact the lives of women and girls with disabilities.

Krista Carr, Executive Vice President, Inclusion Canada

Krista Carr is a long-time advocate in the inclusion movement. She is the Executive Vice President (CEO) of Inclusion Canada, one of Canada's 10 largest charitable organizations. Inclusion Canada is a national federation of 300 local and 13 Provincial/Territorial Associations working on behalf of approximately 1 million Canadians with a developmental disability and their families.

Kerri Joffe, Staff Lawyer, ARCH Disability Law Centre (ARCH)

Kerri Joffe is a human rights lawyer at ARCH Disability Law Centre. Kerri has been involved in disability rights litigation at various tribunals and courts, including the Supreme Court of Canada. Kerri has presented law reform and policy submissions about disability law issues to legislative committees, governments, administrative bodies, and the United Nations Committee on the Rights of Persons with Disabilities. She has authored law reform reports for the Law Commission of Ontario, the Canadian Human Rights Commission, and the Government of Canada. Kerri holds degrees in law and social work from McGill University.

Heather Walkus, Chairperson, Council of Canadians with Disabilities (CCD)

The Council of Canadians with Disabilities is now 48 years old and, Heather Walkus, is the National Chair. She brings a lifelong personal understanding and expertise of the intersection of disability and identity in her work based on Disability Justice, Human Rights and Community Development principles. Heather also has a background in universal design and international development. Through that work she clearly articulates that it is the people impacted that must have the agency over their voice and supported to build capacity, in which to develop and have that voice listened to.

Quotations from Stakeholders

Neil Belanger, Executive Director, Indigenous Disability Canada

"First Nations, Inuit and Metis people have been largely ignored for all aspects of MAiD since its inception. Indigenous Peoples face higher rates of disability, poverty, and isolation. MAiD will never be an acceptable alternative to timely and appropriate supports. We call on the government of Canada to permanently repeal Track 2, including assisted suicide for mental illness."

Bonnie Brayton, CEO, DAWN Canada

"According to Statistics Canada 30% of all women in Canada live with a disability. We experience the highest rates of gender-based violence, the highest rates of poverty and unemployment and now we appear to be accessing MAiD Track 2 at the highest rates as well. A G7 country that purports to be committed to women's equality is becoming better known for being the easiest place to access death instead."

Krista Carr, Executive Vice President, Inclusion Canada

"The sunset clause needs to go. Despite what some may believe, greater access to assisted suicide shouldn't be inevitable, not now and not ever. In fact, there are big problems with Canada's existing MAiD law, which makes assisted suicide available to people who are not at the end of life, on the basis of their disability status. We've already gone too far."

Robert Lattanzio, Executive Director, ARCH Disability Law Centre

"ARCH is deeply concerned that people with disabilities are dying by MAiD not because they want to end their lives, but because they are suffering due to dehumanizing social and economic conditions. Expanding MAiD to people whose only condition is a "mental disorder" will exacerbate this. ARCH and disability communities from across Canada have repeatedly brought these concerns to government and lawmakers."

Rohini Peris, President & CEO, Association pour la santé environnementale du Québec – Environmental Health Association of Québec

"Over 1.1 million people have a diagnosis of Multiple Chemical Sensitivities (MCS) in Canada. MCS is a largely ignored and neglected disability, and people with MCS frequently fall between the cracks of support systems. The resulting mental anguish and immeasurable suffering cannot be erased with medical interventions to address the effects of neglect, stigma, and abuse. The lack of a medical solution for the mental effects of this distress will qualify people with MCS for MAiD.

We deeply, deeply miss our friend Sophia, a member and volunteer who was given MAiD instead of healthy housing; Sophia's life was ended on February 22nd, 2022."

Heather Walkus, Chairperson, Council of Canadians with Disabilities (CCD)

"It is cheaper to kill us than include us in society."

Citations de parties prenantes

Neil Bélanger, directeur administratif, Indigenous Disability Canada

« Depuis la création de l'AMM, les Premières Nations, les Inuits et les Métis ont été largement ignorés dans tous ses aspects. Les peuples autochtones sont confrontés à des taux plus élevés de handicap, de pauvreté et d'isolement. L'AMM ne sera jamais une solution de rechange acceptable à du soutien opportun et adéquat. Nous demandons au gouvernement du Canada d'abroger définitivement la voie deux, y compris l'aide au suicide pour les maladies mentales. »

Bonnie Brayton, PDG, DAWN Canada

« Selon Statistique Canada, au Canada, 30 % des femmes sont en situation de handicap. Nous connaissons les taux les plus élevés de violence fondée sur le sexe, les taux les plus élevés de pauvreté et de chômage et, à présent, il semble que nous ayons également les taux les plus élevés d'accès à la voie deux de l'AMM. Un pays du G7 qui prétend être en faveur de l'égalité des femmes est de plus en plus connu comme l'endroit où il est le plus facile d'accéder à la mort. »

Krista Carr, vice-présidente à la direction, Inclusion Canada

« La disposition de temporisation doit être supprimée. Malgré ce que certaines personnes peuvent croire, un plus grand accès au suicide assisté ne devrait pas être inévitable; ni maintenant, ni jamais. En fait, il y a de gros problèmes avec la loi canadienne actuelle sur l'AMM, qui rend le suicide assisté accessible aux personnes qui ne sont pas en fin de vie, du fait qu'elles sont en situation de handicap. Nous sommes déjà allés trop loin. »

Robert Lattanzio, directeur administratif, ARCH Disability Law Centre

« ARCH est profondément troublé par le fait que les personnes en situation de handicap meurent grâce à l'AMM non pas parce qu'elles veulent mettre fin à leur vie, mais parce qu'elles souffrent en raison de conditions sociales et d'une conjoncture économique déshumanisantes. L'élargissement de l'AMM aux personnes dont le seul problème de santé est un "trouble de santé mentale" ne fera qu'exacerber la situation. Les communautés d'ARCH et les communautés de personnes en situation de handicap de partout au Canada ont à maintes reprises fait part de ces préoccupations au gouvernement et aux pouvoirs législatifs. »

Rohini Peris, président et PDG, Association pour la santé environnementale du Québec – Environmental Health Association of Québec

« Au Canada, plus de 1,1 million de personnes ont reçu un diagnostic de polytoxicosensibilité. La polytoxicosensibilité est un handicap largement ignoré et négligé. Les personnes atteintes de polytoxicosensibilité sont souvent laissées pour compte par les réseaux de soutien. La souffrance morale et les difficultés incommensurables qui en résultent ne peuvent être gommées par des interventions médicales visant à remédier aux répercussions de la négligence, de la stigmatisation et des abus. L'absence de solution médicale aux effets mentaux de cette détresse fera en sorte que les personnes atteintes de polytoxicosensibilité répondront aux critères d'admissibilité à l'AMM.

Nous regrettons profondément le départ de notre amie Sophia, membre et bénévole, à qui l'on a donné l'AMM au lieu d'un logement sain. La vie de Sophia a pris fin le 22 février 2022. »

Heather Walkus, Conseil des Canadiens avec déficiences (CCD)

« Il coûte moins cher de nous tuer que de nous inclure dans la société. »

Interview Contacts

The following people have made themselves available for follow-up interviews by request:

Neil Belanger
Executive Director
Indigenous Disability Canada
Email: exdir@bcands.bc.ca

Bonnie Brayton
CEO
Disabled Women's Network Canada (DAWN)
Email: admin@dawncanada.net

Krista Carr
Executive Vice President
Inclusion Canada
Email: kcarr@inclusioncanada.ca

Kerri Joffe
Staff Lawyer
ARCH Disability Law Centre (ARCH)
Email: kerri.joffe@arch.clcj.ca

Heather Walkus
Chairperson
Council of Canadians with Disabilities (CCD)
Email: heather@ccdonline.ca

Pour des entretiens en français, veuillez contacter :

Samuel Ragot
Analyste sénior aux politiques publiques et conseiller à la défense des droits
Société Québécoise de la Déficience Intellectuelle
E-mail : sragot@sqdi.ca

For all other communications support and requests, please contact:

Marc Muschler
Senior Communications Officer
Inclusion Canada
Email: mmuschler@inclusioncanada.ca



ORGANIZATIONS CALL FOR SWIFT PASSAGE OF BILL C-62 WITH ONE KEY AMENDMENT: FULL REPEAL OF THE "SUNSET CLAUSE"

**For Immediate Release
Friday, February 23, 2024**

OTTAWA, ON - At a press conference at the National Press Gallery, Inclusion Canada, joined by representatives from ARCH Disability Law Centre, DAWN Canada, and the Council of Canadians with Disabilities, called for an indefinite delay to the legalization of medical assistance in dying (MAiD) for those with a mental illness as their sole medical condition; the groups seek an amendment to Bill C-62 which would repeal the "sunset clause" in Canada's MAiD law. Following this, the organizations are calling for the repeal of track two, which makes MAiD available for people with disabilities not at the end of life.

This call-to-action echoes that of the majority of the Special Joint Committee on MAiD, provincial and territorial ministers of health, and the Board of the Society of Canadian Psychiatry, amongst others.

The event was sponsored by Senator Marilou McPhedran.

The organizations are seeking Bill C-62 to be passed by March 1st, with one key amendment: a full repeal of the "sunset clause." Bill C-62 would delay the availability of assisted suicide on the basis of mental illness to 2027. If the "sunset clause" were to be repealed, Canada would no longer have a firm date upon which MAiD for mental illness will automatically become legalized.

"The sunset clause needs to go," says Krista Carr, Executive Vice-President of Inclusion Canada, who spoke at the press conference, "Despite what some may believe, greater access to assisted suicide shouldn't be inevitable; not now and not ever. In fact, there are big problems with Canada's existing MAiD law, which makes assisted suicide available to people who are not at the end of life, on the basis of their disability status. We've already gone too far."

Carr was not alone in raising concerns with Canada's current MAiD law - and its discriminatory impact on people with disabilities. Kerri Joffe, from ARCH disability law centre, spoke about how MAiD for people with disabilities whose deaths are not reasonably foreseeable (track two MAiD) is a core concern being communicated by the disability community to the United Nations through an ongoing rights monitoring process.

Bonnie Brayton, with DAWN Canada, highlighted how women with disabilities are over-represented in track-two deaths, warning that if MAiD for mental illness were to

become available, this trend would worsen. And Heather Walkus, from the Council of Canadians with Disabilities, boldly called for a repeal of track two, following C-62's passage.

"It's time to bring Canada's MAiD laws back into alignment with disability rights," said Moira Wilson, President of Inclusion Canada, when asked to comment on the press conference. "Families of people with disabilities, like mine, are terrified by track two MAiD and its potential further expansion. We want our children to be fully valued as equal citizens, supported to live good lives, and be fully included in the community, not offered state-assisted suicide on the basis of "suffering" that is not inherent in their disability but rather is a result of lack of income and disability support. My son's life should be of value irrespective of his disability. He should not feel or be threatened because he has a disability, yet this is our Canada now. The government should start by doing away with the 'sunset clause', but the work certainly doesn't end there."

Without intervention from parliamentarians, medical assistance in dying for mental illness will become legal on March 17, 2024. Given the current sitting calendar, MPs and Senators have one week to make this happen.

-30-

For media inquiries, please contact:

Marc Muschler, Senior Communications Officer
416-661-9611 ext. 232
mmuschler@inclusioncanada.ca

About Inclusion Canada

Inclusion Canada is a nationwide community that champions the rights and inclusion of individuals with intellectual disabilities, their families, allies, and local associations across Canada. The organization is committed to creating an inclusive Canada where everyone, regardless of intellectual capability, is valued and fully engaged in community life.



LES ORGANISATIONS DEMANDENT L'ADOPTION RAPIDE DU PROJET DE LOI C-62 AVEC UN AMENDEMENT CLÉ : L'ABROGATION COMPLÈTE DE LA « DISPOSITION DE TEMPORISATION »

**Pour publication immédiate
Vendredi 23 février 2024**

OTTAWA, ON – Dans le cadre d'une conférence de presse à la Tribune de la presse nationale, Inclusion Canada, rejoint par des mandataires d'ARCH Disability Law Centre, de DAWN Canada et du Conseil des Canadiens avec déficiences, a demandé un report indéfini de la légalisation sur l'aide médicale à mourir (AMM) pour les personnes dont le seul problème de santé est un trouble de santé mentale. Les groupes demandent un amendement au projet de loi C-62 qui abrogerait la « disposition de temporisation » de la loi canadienne sur l'AMM. Par la suite, les organisations demandent l'abrogation de la voie deux, qui rend l'AMM accessible aux personnes en situation de handicap qui ne sont pas en fin de vie.

Cet appel à l'action fait écho à celui de la majorité des membres du Comité mixte spécial sur l'aide médicale à mourir, des ministres provinciaux et territoriaux de la Santé et du Board of the Society of Canadian Psychiatry, entre autres.

L'événement était parrainé par la sénatrice Marilou McPhedran.

Les organisations demandent que le projet de loi C-62 soit adopté d'ici le 1^{er} mars, avec un amendement important, l'abrogation complète de la « disposition de temporisation ». Le projet de loi C-62 reporte à 2027 la possibilité de recourir au suicide assisté pour cause de maladie mentale. Si la « disposition de temporisation » était abrogée, le Canada ne disposerait plus d'une date définitive à laquelle l'AMM pour cause de maladie mentale serait automatiquement légalisée.

« La disposition de temporisation doit être supprimée », a déclaré Krista Carr, vice-présidente à la direction d'Inclusion Canada, qui s'est exprimée lors de la conférence de presse. « Malgré ce que certaines personnes peuvent croire, un plus grand accès au suicide assisté ne devrait pas être inévitable; ni maintenant, ni jamais. En fait, il y a de gros problèmes avec la loi canadienne actuelle sur l'AMM, qui rend le suicide assisté accessible aux personnes qui ne sont pas en fin de vie, du fait qu'elles sont en situation de handicap. Nous sommes déjà allés trop loin. »

Krista Carr n'est pas la seule à exprimer des inquiétudes quant à l'actuelle loi

canadienne sur l'AMM et à son impact discriminatoire sur les personnes en situation de handicap. Kerri Joffe, d'ARCH Disability Law Centre, a expliqué aux Nations Unies, dans le cadre d'un processus continu de surveillance des droits, pourquoi l'AMM pour les personnes en situation de handicap dont la mort naturelle n'est pas raisonnablement prévisible (voie deux de l'AMM) est une grande préoccupation pour la communauté des personnes en situation de handicap.

Bonnie Brayton, de DAWN Canada, a affirmé que les femmes en situation de handicap sont surreprésentées dans les décès liés à la voie deux, et a averti que si l'AMM pour les maladies mentales devenait disponible, cette tendance s'aggraverait. Heather Walkus, du Conseil des Canadiens avec déficiences, a courageusement demandé l'abrogation de la voie deux, suite à l'adoption du projet de loi C-62.

« Il est temps d'aligner de nouveau les lois canadiennes sur l'AMM sur les droits des personnes en situation de handicap », a déclaré Moira Wilson, présidente d'Inclusion Canada, lorsqu'on lui a demandé de commenter la conférence de presse. « Les familles de personnes en situation de handicap, comme la mienne, sont terrifiées par la voie deux de l'AMM et son élargissement potentiel. Nous souhaitons que nos enfants soient considérés comme des citoyens et citoyennes à part entière, qu'ils soient soutenus pour mener une bonne vie et être pleinement intégrés dans la communauté, et non pas qu'on leur propose un suicide assisté par l'État sur le fondement d'une "souffrance" qui n'est pas inhérente à leur handicap, mais qui est plutôt le résultat d'un manque de revenus et d'aide aux personnes en situation de handicap. La vie de mon fils devrait avoir de la valeur indépendamment de son handicap. Il ne devrait pas se sentir menacé ou être menacé parce qu'il est en situation de handicap. Le gouvernement devrait commencer par supprimer la "disposition de temporisation", mais le travail ne s'arrête certainement pas là ! »

Sans intervention des parlementaires, l'AMM pour les maladies mentales sera légalisée le 17 mars 2024. Compte tenu du calendrier actuel des séances, les membres du parlement et du sénat disposent d'une semaine pour faire en sorte que cela se produise.

-30-

Pour les demandes des médias, contacter:
Marc Muschler, agent principal des communications
416-661-9611 poste 232
mmuschler@inclusioncanada.ca


Inclusion Canada en bref :

Inclusion Canada est une communauté nationale qui défend les droits et l'inclusion des personnes ayant une déficience intellectuelle, de leurs familles, de leurs alliés et des associations locales à travers le Canada. L'organisation s'est engagée à bâtir un Canada inclusif dans lequel chaque personne, quelle que soit sa capacité intellectuelle, est valorisée et pleinement engagée dans la vie de la communauté.


The Data: Medical Assistance in Dying in 2022

Health Canada's Fourth Annual Report on Medical Assistance in Dying (MAiD) tells Canadians statistics about the people who died by MAiD in 2022.

In total, 13,241 people died by MAiD in 2022. This is a 31.2% increase over the previous year. Here are some things that we learned (about MAiD in general) from the report:

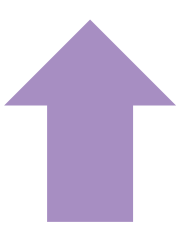
 **44,958**
people died by MAiD between 2016 and 2022.

 **1 in 3**
people died feeling like a burden to others.

 **49+**
people who died in 2022 could not access necessary disability supports.


 **1 in 2**
people had or feared having unmanaged pain when they died.

Here is what we learned about assisted suicide on the basis of disability (Track Two MAiD / death not reasonably foreseeable):

 **463**
people died by assisted suicide / Track Two MAiD in 2022. The 2021 and 2022 combined total is 682 deaths.

 **1 in 2**
people who died by assisted suicide / Track Two MAiD required disability supports.

 **More women**
than men died by assisted suicide / Track Two MAiD. Health Canada did not report on non-binary or genderqueer people.

 **59%**
of people who died by assisted suicide / Track Two MAiD are listed as having "other conditions" or "multiple comorbidities"

Here are some things that Health Canada is not reporting on:

The suffering experienced by people who die by assisted suicide / Track Two MAiD. Does the nature of suffering differ?

The voices of persons with disabilities. Would quotes from those who died differ in tone from the "practitioners" quotes sprinkled throughout the report?

There are 309 people who needed disability support services who are unaccounted for in the report. Did these people receive the supports they required?

Intersectional analysis. Who, other than women, is over-represented in Track Two?

The Data: Mental Health and Disability in 2024

The Canadian Survey on Disability (2022) reveals that mental health related disability is the fastest growing disability in Canada. Over 3 million Canadians have a mental health related disability and the majority are women. Did you know the following statistics? :



1 in 2

Canadians have unmet mental health care needs.



6 months

is the average wait for psychiatric care in Canada. In some areas, the wait is closer to 2 years.



90%

of people who die by suicide have a mental illness.



4 in 5

people with a mental health disability have at least one other disability.

People labelled with both an intellectual disability and a mental health disability are said to have a "dual diagnosis." Did you know the following statistics? :



45%

of people with an intellectual disability will be diagnosed with a mental illness in their lifetime.



1 in 4

people with an intellectual disability have contemplated suicide.



1 in 3

people with an intellectual disability are over prescribed anti-psychotic medication.



Barriers

limit people with intellectual disabilities' access to mental health care. Waits can be far longer.

Ableism and exclusion have a serious impact on wellbeing. Inclusion saves lives.

Canadians at the intersections of disability and mental illness have unique experiences. Did you know the following statistics? :



Indigenous

people in Canada have higher rates of disability, and poorer mental health. They are 9 times more likely to die by suicide.



LGBTQ2S+

Canadians have higher rates of disability, and poorer mental health. Gender dysphoria continues to be pathologized.



40%

of people with disabilities live in poverty. People living in poverty experience poorer mental health.



Violence

and abuse are more commonly experienced by people labelled with disabilities and mental illness.

Trauma and oppression is tied to mental illness and disability.