

Canada's dangerous euthanasia and assisted suicide law

Evidence shows that Canada's Medical Assistance in Dying (MAID) law is extremely dangerous for some of the most vulnerable in society.¹ In Ontario alone between 2018 and 2024 over [400 cases](#) of malpractice were identified post-mortem. For these patients, safeguards failed.

Euthanasia now normalised and accepted

- The number of MAID deaths has [risen significantly](#) year-on-year. In 2023, there were 15,343, an increase of 15.8% from [2022](#). Annual MAID deaths have risen more than five-fold since 2017, and now account for 4.7% of all deaths in Canada.
- In April 2023, Canadian bioethicists Professor Amy Mullin and Kayla Wiebe published an article in the [Journal of Medical Ethics](#) claiming that euthanasia "should be available" for people "in unjust social circumstances".
- A [poll](#) has found that **27% of Canadians think it should be acceptable for people to be killed due to poverty**, and 28% think **homelessness** is an appropriate reason to die under MAID.

Examples of vulnerable people harmed by the law

- In January 2024, [Normand Meunier](#), a quadriplegic man entered a Quebec hospital with a respiratory infection. Four days after being confined to an emergency-room stretcher, he was unable to secure a proper mattress despite his partner's pleas. He suffered from a painful bed sore that led him to apply for MAID. He spoke with Radio-Canada the day before he was euthanised: "I don't want to be a burden".
- ['Kat'](#), in her late 30s, living in British Columbia, suffers from Ehlers-Danlos Syndrome. She doesn't have access to the specialist medical care she needs to manage her condition well, but has been approved for assisted suicide. Combined with not having the financial means to ensure she gets the right care outside of state help, she feels it is "far easier to let go".
- Many older people struggle with loneliness. [Nancy Russell](#), 90, struggled with the isolation caused by lockdown during the Covid-19 pandemic. Though she was initially turned down by her GP who told her she had 'too much to live for', she later secured approval from doctors for her death. Her family say she ended her life due to not wanting to be lonely. Her daughter reflected: "I worry about seniors, I worry about families who feel helpless. I felt helpless and I believe some other members of my family did at times."
- 61-year-old [Alan Nichols](#) had a history of depression. A month after he was hospitalised over fears that he might be suicidal, he submitted an application to be euthanised, with the help of hospital staff. "Hearing loss" was the only reason cited for his request.

¹ [One fifth](#) of Canadians aged 25-64 live with some form of disability, but they account for 41% of the low income population. [Disabled Canadians](#) got \$600 in additional financial assistance during Covid; university students got \$5,000. People with disabilities who are in poverty are more likely to feel a burden due to the cost of their care and inability to work.

- A physically disabled [breast cancer patient](#) who was “readying for a lifesaving mastectomy” [was asked](#) twice, whilst sat alone waiting for imminent operations, whether she was familiar with assisted dying. She shared: “There are people who have lists of conditions like mine who don’t have a big, happy loving family, or financial or emotional support... If those words are said to them when they’re lonely and alone.... If my life were like that, I may not have had the strength or courage to either pretend that that question didn’t exist or just say, ‘No, I don’t want to talk about it. Let’s move on.’”
- When [Kathrin Mentler](#) attended Vancouver General Hospital seeking psychiatric help, a staff member asked if she had considered death by MAID. During her assessment by a clinician, the 37-year-old was told there were “no beds” and that she should expect a long wait to see a psychiatrist as an out-patient. Mentler said she was then asked, **“Have you considered MAID?”** and that the clinician went on to speak of her [“relief”](#) at the death of another patient struggling with mental illness.
- Lisa Pauli has been suffering from anorexia since childhood. She [plans to request MAID](#), when the rules are changed to allow euthanasia due to mental illness (NB this has been delayed until at least 2027).
- Sheila Elson’s adult daughter [Candice Lewis](#) had medical conditions including cerebral palsy and spina bifida. Sheila was told by a doctor, within her daughter's hearing, that MAID was an option and that she would be selfish not to consider it. Lewis was capable of verbally communicating and was an avid painter.
- Mother-of-three [Rose Finlay](#) suffered a spinal cord injury at 17 and is quadriplegic. She says it is much easier to pursue MAID than to get Government support for her disability, noting that while the MAID eligibility assessment takes 90 days, it can take up to eight months to receive disability support.
- [55-year-old Madeline](#) has accumulated \$40,000 in debts trying to treat her multiple illnesses and disabilities. Ongoing money struggles and repeatedly having to ask for help mean that for her, MAID is a “brutal practicality”.
- [Donna Duncan](#) died through Canada’s Medical Assistance in Dying (MAiD) program. Despite not being terminally ill, disabled, or diagnosed with a chronic condition, her request for assisted death was granted, after initially being refused by a first doctor. At the time, her daughter Alicia says, she was “severely underweight, had recently attempted suicide, and was suffering from what her family now understands was likely anorexia—yet this went unrecognized by the healthcare system. Rather than receiving psychiatric care or support for a suspected eating disorder, her request for MAiD was approved.” Alicia stated: **“In the weeks before her death, she told her daughters she felt like a burden to her partner and believed he would be better off without her.** Her partner even said to them, ‘As terrible as it would be to lose your mom, at least I would get my life back.’ These kinds of statements created a context in which Donna internalized the belief that her death would be a relief to others—a hallmark of emotional coercion.”