Medical aid in Dying (MAiD)

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What is Medical aid in Dying?

Definition and Purpose

- **MAiD is an ethically complex healthcare practice that includes**
  - **Voluntary Euthanasia**
  - **Physician-assisted Suicide**
- **Originally intended to relieve the intolerable suffering of terminally ill patients**

The Ethical Debate

- **The use of MAiD is expanding in some countries to include individuals with Severe Psychiatric Conditions**

  Ex. Belgium 🇧🇪
- **Raises critical questions about**
  - **Patient Consent** and the
  - **Definition of "Irremediable Suffering"**
- Legal frameworks vary, with countries like Canada and Belgium having different criteria for eligibility

Implications for Healthcare Providers

- **Healthcare providers must navigate the complex ethical, clinical, and legal dimensions of this emotionally charged topic**
  - Tasked with **ensuring that care is**
    - **Compassionate**,
    - **Evidence-based,** and
    - **Ethically grounded**

Zoraya ter Beek, 28, together with her partner in the living room in their home in Oldenzaal, the Netherlands, on March 25, 2024. (Ilvy Njiokiktjien for The Free Press)

‘I’m 28. And I’m Scheduled to Die in May.’

At 28 years old, Zoraya made the decision to be euthanized in early May due to her struggles with depression, autism, and borderline personality disorder.

Despite being in a loving relationship and enjoying the comfort of her home, Zoraya says she feels overwhelmed by her mental health challenges, leading her to opt for a peaceful end to her suffering.

“Where the tree of life stands for growth and new beginnings, my tree is the opposite. It is losing its leaves, it is dying.”

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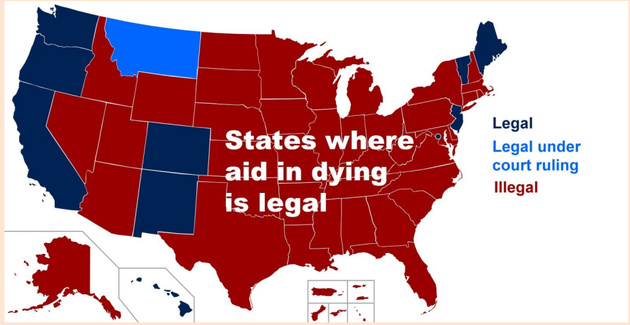
Current Legal Framework

Where is MAiD Legalized?



- Physician Assisted Suicide is currently authorized in 11 states and Washington, D.C.

- MAiD in Canada 🇨🇦
  - Legalized in 2016 with Bill C-14 after the Supreme Court's Carter v. Canada (2015) ruling
    - Deemed the prohibition of assisted suicide and euthanasia unconstitutional
  - Initially was restricted to adults with terminal illnesses
    - Later on expanded access to individuals with serious and irreversible medical conditions
  - Ongoing debates about including mental illness as the sole condition (currently delayed until 2027)

- MAiD in Belgium 🇧🇪
  - Legalized in 2002, one of the first countries to permit euthanasia!
  - Allows MAiD even for psychiatric disorders, but under strict conditions
  - Known for having some of the broadest criteria in the world

Both countries have strict safeguards in place!

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The Nature of Psychological Suffering

An Invisible Suffering

- “Mental suffering is much worse than physical suffering, as it can't be seen by anyone.”

- Unbearable psychological suffering, even when not linked to terminal illness, can reach a level of severity that prompts rational and sustained requests for MAiD.

- Many describe their suffering as constant, progressive, and irreversible- often viewing their condition as medically or existentially futile.

5 Overlapping Types of Suffering

Medical

- Patients reported distress not only from psychiatric symptoms like anxiety, shame, or dissociation, but also from years of ineffective treatments, misdiagnoses, and poor communication with healthcare providers.

Intrapersonal

- Past trauma, self-destructive behavior, and shame around failed suicide attempts
- Many preferred euthanasia because it offered dignity and peace, unlike the pain and unpredictability of suicide
- ***"I fear surviving another suicide attempt more than dying,"*** **shared one woman**

5 Overlapping Types of Suffering

Interpersonal

- Grief, isolation, and feeling like a burden
- One patient said, **“The people around you cannot believe that you want to die, because you're looking so good, so no one would allow you to die.”**

Societal

- Linked to poverty, unemployment
- Feeling “forced to mask” in a society that moved too fast

Existential

- Collapse of selfhood
- ***“I feel like a puppet of the medical system, not a person anymore.”***

3

Capacity and Consent in MAiD

Determining Capacity In Canada

- **Aid to Capacity Assessment** or the **MacArthur Competence Assessment Tool**
- Understanding information relevant to a condition and recommended treatment
- Appreciating the nature of their situation and the consequences of their choices
- Reasoning about the potential risks and benefits of their choices
- Expressing a choice
- A total of two independent interviews are performed

Obtaining Consent In Canada

- Initial informed consent
- Discusses the nature of medical aid in dying including the risks and benefits, as well as alternatives or palliative care.
- signing a request form or submitting a written statement
- Express consent
- A verbal affirmation illustrates consent for express consent.

Determining Capacity In Belgium

- **Cognitive ability model**
- Expression of choice
- Understanding
- Appreciation
- Reasoning

Obtaining Consent In Belgium

- The patient must not be under guardianship or legally incapacitated
- Must reflect the patient’s actual and persistent wish
- the patient must be adequately informed about their condition, prognosis, and treatments
- The patient must demonstrably possess decision-making capacity
- The physician needs to obtain an independent opinion from the psychiatrist, if the suffering is psychiatric in nature
- the patient can sign and date a formal written request

4

Impact on Healthcare Providers

Emotional Impact of MAiD on Healthcare Providers

Dholakia et al., BMJ Open, 2022

Why Does MAiD Cause Moral Distress in Providers?

Conflicting Values

Autonomy vs. sanctity of life

Reducing suffering vs. “do no harm”

These core ethical tensions can deeply conflict with personal or religious beliefs.

Emotional Burden

Providers feel both relief and guilt

Stronger distress in places with stricter MAiD laws (e.g., U.S.)

Less distress in places where MAiD is normalized (e.g., Belgium, Canada)

Patient Proximity Matters

Nurses and those with daily patient contact feel it most

They describe feeling drained, cold, or emotionally "pulled" after a patient dies

Why Does MAiD Cause Moral Distress in Providers?

Religious Beliefs

Providers with strong spiritual convictions often feel torn between their faith and their professional duty

This is worse in religious societies where MAiD is legally allowed

Uncertainty & Isolation

Lack of clear guidelines or support systems = confusion and burnout

Ethical ambiguity in non-terminal cases adds to the pressure

Silent Struggles

In liberal settings, some providers feel pressure to conform

Hiding personal objections leads to inner conflict and emotional fatigue

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Recommendations for Physician Assistants

Medical Assistance in Dying for People Living with Mental Disorders

Favron-Godbout and Racine (2023)

6 Key Areas of Concern

Societal Context

- Stigma, poverty, and isolation compress individuals towards MAiD-MD
- Life hardships may outweigh the illness in driving their decision

Healthcare System

- limited access to psychiatric care housing in long-term support
- Patients may feel like MAiD-MD is their only option due to lack of alternative

Continuum of Care

- Loss of therapeutic relationships, and unmet emotional needs
- Patients feel like a burden or lose hope in recovery.

6 Key Areas of Concern

Discussing MAiD

- Many providers feel unprepared or conflicted about how to respond

MAiD-MD Practices

- Symptoms can fluctuate, complicating decision making
- Hard to assess capacity, suffering, and irrimediability

Quality and Oversight

- Risk of bias, limited psychiatric input, and inconsistent evaluations

Recommendations

One

All attempted treatments, medication, therapy, and social intervention should be documented clearly to ensure MAiD is not pursued prematurely

Two

PAs should seek out or advocate for training programs focused on recognizing and managing stigmas

Three

Establish regular multidisciplinary meetings with psychiatrist, social workers and therapist

Four

Connect patients with community resources, such as housing assistance, peer support groups, and palliative psychiatry services

Thank You!

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