Advance Requests for MAiD in Dementia: Survey of Canadian Public and MAiD Practitioners

Description

Advance Requests for MAiD in Dementia: Policy Implications from Survey of Canadian Public and MAiD Practitioners

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ABSTRACT

Background: The Canadian public has repeatedly expressed its desire for advance requests for Medical Assistance in Dying (MAiD) after dementia diagnosis, yet MAiD practitioners' willingness to accede to such advance requests is unknown. This study explores the extent and nature of any gap between the public's desire for, and practitioners' willingness to provide MAiD, and identifies policies to ameliorate such a gap. Methods: Two complementary mixed-method surveys gathered data from convenience samples of 83 Canadian adults and 103 MAiD practitioners. The public survey asked participants which of five specific circumstances commonly encountered in dementia they would include in their advance requests. The practitioner survey queried the validation level participants would require before providing MAiD in each specific circumstance. Participants' reasons were probed using thematic analysis of open-ended questions. Results: On average, 77% of public participants indicated they definitely or probably would include each of the five specific circumstances in their advance requests for MAiD. As validation level decreased from patient consent to patient assent, family assent, or advance request alone, the magnitude of the gap between the public's desire and practitioners' willingness increased. The practitioners' qualitative data contained many practical insights from which emerged seven policy recommendations to ameliorate this gap and increase the likelihood of honouring patient requests. Interpretation: The study provides evidence of a gap between public desire for, and practitioner willingness to provide MAiD in dementia. The policy recommendations are relevant to consideration of legislation for advance requests for MAiD.

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