2026.03 Exclude Advance Requests for Medical Assistance in Dying

Resolved, that national council of The Catholic Women's League of Canada in 106th national annual meeting of members assembled opposes all forms of medical assistance in dying and urges the federal government to exclude advance requests for medical assistance in dying (MAiD).

Brief: Exclude Advance Requests for Medical Assistance in Dying

Since 2016, medical assistance in dying (MAiD) has been legal in Canada for eligible people whose natural death is considered reasonably foreseeable (Bravo). MAiD's scope was expanded in 2021 to include people whose death is not reasonably foreseeable but whose suffering they considered to be intolerable and incapable of remedy (Canada, Health, Fourth Annual). The federal government is currently considering expanding the scope of MAiD to include advance requests for medical-assisted death (Canada, Health, Medical). An advance request is a request for MAiD made by an individual who still has the capacity to make decisions before they are eligible or want to receive it. The Catholic Women's League of Canada is called to protect the sanctity of life from conception to natural death.

In cases where the patient no longer has legal competence, legalizing advance requests removes an existing safeguard in Canada's MAiD framework—final-moment consent. Personal autonomy is a value Canadians cherish. Under Section 7 of the *Canadian Charter of Rights and Freedoms*, the state possesses an absolute constitutional duty to protect the life and security of the vulnerable—especially those who can no longer speak for themselves (Canada, Justice).

Proponents of advance requests argue that a healthy, capable individual can accurately predict what level of future cognitive or physical decline will render their life 'intolerable.' Behavioural science and Canadian health economics do not agree. Human beings tend to have what psychologists call 'impact bias,' which is a tendency to overestimate the magnitude and persistence of the emotional consequences of future events or life circumstances (Campbell 3). Canadian research on progressive dementia proves that a patient's self-reported quality of life does not follow a linear drop with cognitive decline (Lawton et al. 8). Many patients maintain stable levels of subjective well-being and continue to find pleasure in everyday interactions (3).

Canadians are concerned. Advance requests take away a person's right to change their mind. In broader national consultations regarding advance directives, 51% of participants strongly emphasized that the protection of vulnerable people must remain the guiding national value (Canada, Health, What). For example, Health Canada's national reporting data indicates that 35.3% of MAiD recipients cite 'feeling like a burden' as a primary driver of their decision, while 17.1% identify severe isolation and loneliness (Canada, Health, Fourth 30).

In Canada, families face multi-year waitlists for long-term care facilities and chronic underfunding for specialized care. If advance requests are legalized, there is a risk of perceiving MAiD as a cost-effective alternative to providing high-quality care (Canada, Health, Fourth).

The Catholic Women's League of Canada urges the federal government to exclude advance requests for medical assistance in dying by retaining the strict requirement for final-moment consent.

Exclude Advance Requests for Medical Assistance in Dying

Works Cited

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Action Plan: Exclude Advance Requests for Medical Assistance in Dying

1. Communicate with the prime minister, the minister of health and local members of parliament (MPs), asking the government to exclude advance requests for medical assistance in dying (MAiD) and to provide solid support and appropriate funding for palliative care and caregivers. Refer to the *National Manual of Policy and Procedure* for options, including letter-writing, petitions and postcards.

2. Encourage members to support palliative care, hospices and organizations such as Euthanasia Prevention Coalition and Campaign Life.

3. Promote discussions and develop educational workshops, webinars and informational materials.

4. Monitor the federal government's response.