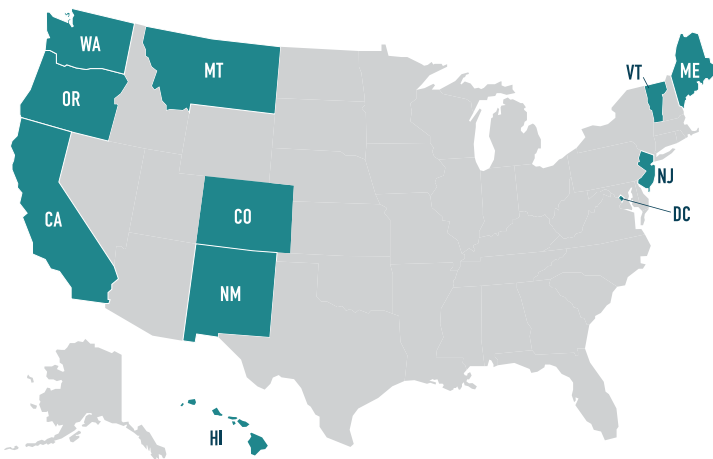


Medical Aid in Dying

Medical Aid in Dying (MAID) is the practice of providing medicine to a terminally ill patient to end their life on their own terms. They must be within six months of their expected death in order to aid their autonomous choice and it must be deemed appropriate by a physician. These patients are not choosing between life and death, but between one kind of death and another.

Studies have shown that, more than physical pain, the most common motivations for choosing MAID are loss of autonomy and dignity and the inability to enjoy life and regular activities.



As of 2023, Medical Aid in Dying is legal in just 10 states plus the District of Columbia, which amounts to just 20% of Americans.

Even in those states, the process for attaining MAID is lengthy, and without private insurance, can be prohibitively expensive.

■ In California, a person must meet **13 different requirements** for MAID.



■ Most private insurance and state-funded Medicaid plans in **California, Hawaii** and **Oregon** cover most of the substantial cost of medical aid in dying, including aid-in-dying medication and clinician appointments to establish if the

person requesting it is eligible.

■ But for millions of Americans who depend on federally funded insurance (e.g., Medicare, Tricare) and medical facilities (e.g., Veterans Affairs facilities), medical aid in dying is inaccessible.

■ In April 1997, Congress passed the erroneously and pejoratively named* law called the **Assisted Suicide Funding Restriction Act (ASFRA)**, which bans the use of federal funds to pay for end-of-life care. ASFRA was a preemptive strike against Oregon's first-in-the-nation, **medical aid-in-dying law**, which was implemented six months later in October 1997. **Read more**



* A Note on Terminology

The term “assisted suicide” is offensive to many people seeking Medical Aid in Dying.

■ Calling assisted dying “suicide” taps into cultural hang-ups and moral anger that surround the act of taking one’s life.

■ This moral outrage, in turn, reflects back on the grieving loved ones who end up suffering what bereavement experts call “**disenfranchised grief**”—hidden grief that is not fully acknowledged or even allowed by society because of the way someone died, such as from a drug overdose. **Read more**

When Medical Aid in Dying Isn’t Available

With significant caregiving and hospice support, a determined and well-informed individual can successfully choose the end-of-life option of voluntarily stopping eating or drinking, also known as VSED.

■ The median time of death from the start of fasting in VSED patients is 7 days.

■ A **2003 study** of hospice nurses in Oregon gave a median score of 8 on a scale of 0 to 9 (a very good death) when asked to rate the quality of deaths of their VSED patients.



Terminally ill patients who seek an assisted death aren’t suicidal. Absent a terminal prognosis, they have no independent desire to end their life.
— cultural anthropologist Anita Hannig

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