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International study reveals challenges to providing legal assisted dying and euthanasia during COVID-19

Internationally, providers of services for legal assisted dying and euthanasia (AD&E) have met a raft of challenges in continuing to provide those services, due to pandemic restrictions. Conducted under the auspices of the World Federation of Right to Die Societies (WFRtDS) from mid-2020 to early 2021, the research found that providers have had to be highly adaptable, within legal and ethical requirements, to ensure that AD&E services remained accessible to both already approved patients and other potentially eligible people. Dr Rob Jonquière, Executive Director of the WFRtDS, commented, “These constraints are challenging the services of doctors both logistically and ethically.”

Areas where AD&E providers have had to adjust services to remain both effective and timely included witnessing requirements, use of telemedicine for communications and assessments, and the administration of medications. A key revelation to providers was that these systems innovations often resulted in more client-centred practice.

Some research participants also held concerns for a post-COVID context in which people with severe long-term ‘post-COVID syndrome’ may reconsider their quality of life, potentially straining the capacity of AD&E services. As a result, provider agencies internationally have identified an urgent need to both review the feasibility of some key aspects of the laws and develop greater capacity.

The research found that the COVID-19 pandemic experience has provided a unique opportunity for lessons to be gained for providing essential AD&E services in a major health sector crisis. The researchers concluded that, as AD&E agencies and practitioners have developed new and often better ways to provide their services, the challenge now is for those developments to be shared across the sector internationally and the respective laws revised to reflect those improvements.

[Providing legal assisted dying and euthanasia services in a global pandemic: Provider experiences and lessons for the future.](#)

Study conducted by: Dr Pam Oliver, independent health/law researcher specialising in AD&E research; Mike Wilson, registered nurse, doctoral candidate (University of Adelaide), Australia; Dr Rob Jonquiere, Executive Director, WFRtDS, The Netherlands; and Dr Cameron McLaren, medical oncologist providing assisted dying services in Victoria, Australia.

Produced under the auspices of the World Federation of Right to Die Societies.

NOTES TO EDITORS: The World Federation of Right to Die Societies' goal is to ensure that everyone has the right to die with dignity, peacefully and without suffering. Founded in 1980, the Federation comprises 55 right to die organizations from 28 countries and facilitates the cooperation between member societies to utilize the experience and expertise of professionals already lawfully assisting people to die. For more information, please visit www.wfrtds.org

Biographies:

Dr. Pam Oliver (PhD Psychology, PhD Law) – Principal researcher pam.oliver.waiheke@gmail.com

Pam has 25 years experience in social and health services research and evaluation, and has specialised for the past decade in research on legal assisted dying and end-of-life service provision. In recent years her research has focused in particular on the legislative and other barriers to legal assisted dying and euthanasia, along with the professional issues for health practitioners who wish to engage in those services. Her assisted dying research has been published in journals internationally and used in several jurisdictions to inform new assisted dying laws.

Dr. Rob Jonquière

As a family doctor, Rob Jonquiere guided patients through all phases of life including euthanasia. In 1999 he became CEO of NVVE, the leading Dutch Right to Die Society, where he contributed to the implementation of national legislation on euthanasia. There he served for nine years before becoming the Executive Director of the World Federation of Right to Die Societies in 2008 to extend his contribution to euthanasia legislation globally.

Michael Wilson

Mike retired from a career in mental health nursing and research to do a PhD in nurses' decision-making in response to requests for legal assisted dying. His early research has been used to reduce coercion in mental health settings in New Zealand. He has recently co-authored AD&E research published in the *New Zealand Medical Journal*, *International Journal of Nursing Studies* and *Nursing Ethics*. His current goal is to translate AD&E research into future training opportunities for Australian nurses to take up new roles in end-of-life care.

Dr Cameron McLaren

Cam is a medical oncologist in Melbourne, Victoria, providing assisted dying assessments under Victoria's Voluntary Assisted Dying (VAD) legislation. His VAD participation reflects his strong commitment to the philosophy of patient-centred care. He is a Clinical Moderator of the VAD Community of Practice - a resource for doctors to discuss their VAD experiences, and a Board member of Dying with Dignity, Victoria. He is undertaking a PhD on the effects of VAD on patients' quality of life and the bereavement experience of families.
