

CANADA

Position statement on Health Canada's report *What We Heard*: National conversation on advance requests for medical assistance in dying (MAID)

(Toronto, ON – November 2025) — The Alzheimer Society of Canada (ASC) acknowledges Health Canada's release of What We Heard: National Conversation on Advance Requests for Medical Assistance in Dying (MAID) and thanks the many Canadians—including people living with dementia and care partners—who shared their experiences and perspectives on this deeply personal issue. ASC supports the right of people living with dementia to make an advance request for MAID as one of their care options.

The What We Heard report summarizes Canada's 2024 national consultation on advance requests for medical assistance in dying (MAID).

Advance requests for MAID are currently not permitted under Canadian law. However, in Quebec, under *Bill 11: An Act to amend the Act respecting end-of-life care and other legislative provisions*, residents who meet the MAID eligibility criteria can make advance requests.

The consultation explored opinions on whether people in Canada should be permitted to make advance requests, and if so, what safeguards, conditions and support should be in place.

Overall, participants expressed broad support for legalizing advance requests—particularly for conditions like dementia—while emphasizing the need for strong safeguards, better support for families and health-care providers, and greater health-system capacity for end-of-life care.

We recognize that people living with dementia are individuals – first and foremost. They have the same rights as everyone else, including the right to participate in decisions about their life and care. We respect the rights of all people living with dementia to advocate for their individual best interests, including advocating for access to MAID through advance requests.

The Alzheimer Society of Canada appreciates the report's attention to system readiness. We recognize that planning for MAID must be an informed choice made in consultation with licensed health-care providers and with careful policy, procedures, and safeguards for vulnerable people. We also recognize the need for adequate resources and support for advance care planning, counselling, and access to quality long-term care and palliative care.

