

Walking with Individuals Considering Medical Assistance in Dying (MAiD)

Opening

When a person raises the possibility of MAiD, they are often expressing fear, suffering, or concern about dignity, pain, or burden. These conversations require careful, compassionate pastoral attention grounded in listening rather than debate.

This document offers suggested supports for pastors in accompanying individuals and families with integrity—holding together the church’s affirmation of the sanctity of life and the call to remain present with those who suffer, while encouraging life-affirming alternatives and maintaining clear pastoral boundaries.

1. Crisis Response at a Glance

(What to do immediately)

- Begin with compassion, not debate
- Listen carefully to fears and sources of suffering
- Affirm dignity and worth
- Clarify what is driving the MAiD request
- Advocate for life-affirming alternatives
- Suggest involvement of medical and palliative professionals early

2. Pastoral Posture

(How to be with the person)

1. Listen deeply to fears about pain, dignity, and burden
2. Affirm intrinsic human dignity regardless of health or ability

3. Avoid argument when fear or distress is dominant
4. Speak gently and over time to faith convictions
5. Communicate that opposition to MAiD does not mean acceptance of suffering

3. What To Do Now

(Concrete, time-ordered steps)

1. Invite the person to share why MAiD feels necessary
2. Identify sources of fear:
 - Pain
 - Isolation
 - Loss of autonomy
 - Financial or housing insecurity
3. Partner with medical, palliative, or hospice teams
4. Advocate for excellent symptom management:
 - Pain control
 - Palliative care
 - Comfort-focused treatment
5. Strengthen relational, emotional, and spiritual supports

4. What To Avoid

(Common pastoral mistakes in this crisis)

- Reducing the conversation to moral argument
- Glorifying suffering or endurance
- Withdrawing due to discomfort with MAiD discussions
- Ignoring social drivers of suffering
- Speaking in absolutes without pastoral sensitivity
- Participating in or remaining present for the administration of MAiD in ways that could be understood as endorsing the procedure.

5. When to Involve Others

(Clear thresholds — safety, legality, scope)

- Medical decision-making and symptom management rest with qualified healthcare professionals.
- Medical teams for symptom management and prognosis
- Palliative care specialists
- Family members (with appropriate consent)
- Social-service advocates for housing, income, or care access
- Spiritual care providers

6. Ongoing & Follow-Up Care

(What care looks like after the moment passes)

- Continue companionship regardless of decisions being considered
- Support family members before and after death
- Advocate for systemic supports as pastoral care
- Provide grief and spiritual care for loved ones
- Offer ongoing pastoral presence, prayer, and sacramental care

Closing

Faithful pastoral care in MAiD contexts requires both compassion and clarity. Pastors may walk closely with individuals and families while also maintaining appropriate boundaries, including not participating in or remaining present for the administration of MAiD. Each pastor will need to determine their personal convictions regarding presence in those final moments.

Care continues after death as families navigate complex grief. In all things, pastors bear witness to a God who does not abandon the suffering and who remains present through illness, dying, and mourning.