Countries With More Progressive End-of-Life Policies Than Any United States Jurisdiction

Switzerland

History

In 1942, Switzerland was the first country to legalize Voluntary Assisted Dying (VAD). This came about from a loophole in the Swiss penal code approved by the Federal Assembly in 1937, and then again through a popular referendum in 1938. The new penal code went into effect in 1942, with Article 115 of this penal code making it illegal to encourage or help someone hasten their death for "selfish reasons." By explicitly stating that assisted dying is a crime only if the motive is selfish, the law implied that assisting a death for an altruistic motive is not a crime. All subsequent Swiss policy around VAD is based on this implicit assumption that aiding an individual with VAD, if not done for selfish motives, is legal. Today, the decriminalization of Voluntary Assisted Dying enacted in 1942 is buttressed by numerous legislative provisions in Swiss Criminal Code, Civil Code, and laws governing prescription narcotics, medical doctors, and therapeutic products. As noted in the World Federation of Right to Die Society's website, court judgements, such as one by the Federal Supreme Court in 2006, which acknowledged the freedom and right of a competent individual to determine the time and manner of his/her end of life, complete this legal framework.

Who is Eligible?

Residency: Switzerland is the only country in the world that extends eligibility for VAD to individuals who are not citizens or legal residents. Each year hundreds of non-residents go to one of several Swiss nonprofit organizations to end their lives through Voluntary Assisted Dying.

Age: The legal framework regarding assisted dying in Switzerland does not establish a specific statutory minimum age. While the law is broad, the nonprofit organizations that facilitate end-of-life services in Switzerland typically implement their own internal guidelines and age requirements. These organizations generally limit their services to adults who are at least 18 years old.

Qualifying Conditions: First and foremost among qualifying conditions for Voluntary Assisted Dying in Switzerland is that an individual must have the mental competence to understand the nature, importance, and consequences of their decision. Beyond that, individuals must demonstrate

that their wish to die is “well considered” and not the result of a treatable mental disorder. End-of-life organizations in Switzerland also require that an individual’s decision be completely autonomous, free from any kind of outside pressure.

Switzerland does not limit eligibility to those with a specific medical prognosis. In practice, end-of-life organizations generally work with individuals facing serious medical conditions, including those that will lead to death in the foreseeable future. However, many organizations also consider cases involving subjectively defined “unbearable suffering” or “intolerable disability.”

This broader framework has made Switzerland a frequently utilized option for individuals with early to mid-stage dementia who still retain decision-making capacity but wish to avoid the later stages of the disease. In some cases, organizations have also accepted individuals with an intolerable mental illness.

Procedure: Each of the Swiss end-of-life clinics has a slightly different procedure individuals must follow to receive a Voluntary Assisted Death, but generally the procedure requires: (1) the individual to make an initial application, including a personal statement accompanied by medical records; (2) an independent Swiss doctor reviews the patient’s records to assure they meet the clinic’s guidelines; (3) the patient must submit legal documentation and a signed affidavit ensuring the request is voluntary; (4) the patient must submit to two personal interviews with the organization’s staff/doctors; and (5) the patient must voice or offer an otherwise affirmative consent to demonstrate mental capacity and a final clear decision before taking the lethal medication.

All deaths in the Swiss end-of-life clinics require the patient to self-administer the lethal medication, either orally or via IV. And, a subsequent investigation by police to assure all qualifying conditions for a Voluntary Assisted Death were met. This “investigation” is typically perfunctory, and in some cases handled remotely.

Netherlands

History

The Netherlands was the first country in the world to legalize Medically Assisted Dying for individuals who were not terminal and within six months of dying. In 2002, its legislature passed the Euthanasia Act and the Termination of Life on Request and Assisted Suicide Act. Taken together

these acts decriminalized Medically Assisted Dying, provided it is performed by a physician who adheres to strict “due care” criteria.

Who is Eligible?

Residency: While individuals do not technically have to be legal residents of the Netherlands, the requirement that an individual requesting Medically Assisted Dying have a long-term relationship with his/her doctor effectively rules out “medical tourism.”

Age: Adults as well as minors in extreme circumstances may access Medically Assisted Dying. Minors between 16 and 18 years old must consult with their parents, but the parents cannot veto the minor’s decision. Minors under 16 years old, with hopeless suffering can access Medically Assisted Dying, but require parental consent.

Qualifying Conditions: Individuals must be of sound mind and have “unbearable suffering with no prospect of improvement.” Both physician and patient must agree there is no other alternative. For adults, the unbearable suffering can include psychiatric disorders and advanced dementia.

For minors, the qualifying conditions are more stringent. They must be terminally ill and their death must be expected in a short time. Also, minors must be suffering constant pain and have parental consent. Unlike adults, minors cannot qualify for Medically Assisted Dying if they are suffering only psychological pain.

In cases where patients become mentally incompetent (e.g. dementia), Medically Assisted Dying can be administered by a physician on the basis of an Advance Directive. However, in these cases, doctors are very reluctant and typically exercise extreme caution.

Procedure: A patient must make what his/her physician considers a voluntary and “well considered” request for Medically Assisted Dying. The attending physician must then consult with at least one other independent physician, who sees the patient and concurs that the individual has met all of the qualifying medical conditions. The attending physician must exercise “due medical care and attention” in ending the patient’s life.

Afterwards, the physician who has performed the euthanasia sends a detailed report to the Municipal Pathologist, who investigates the death. The pathologist then sends his/her findings to a regional euthanasia review committee, which assures the physician has satisfied all required “due care criteria.”

Belgium

History

Belgium was the second country to legalize Medically Assisted Dying for individuals who were not terminal and within six months of dying. In 2002, "The Belgium Act of Euthanasia" decriminalized assisted dying for adults and doctors who follow a "due care criteria." In 2014, Belgium also extended the option of Medically Assisted Dying to minors in a very few extreme conditions.

Who is Eligible?

Residency: There is no explicit legal requirement that an individual must be a Belgian citizen or legal resident to qualify for Medically Assisted Dying in Belgium. However, finding a doctor willing to assist in the absence of a long-term therapeutic relationship with an individual is extremely difficult.

Age: Unlike most countries, Belgium permits Medically Assisted Dying both to minors in extreme circumstances who have the "capacity of discernment" as well as adults over 18 years old.

Qualifying Conditions: An individual must have a serious and incurable disorder caused by illness or accident, accompanied by unbearable physical or mental suffering. In Belgium, cases predicated solely on psychiatric conditions account for about 1% of all cases of Medically Assisted Dying.

Unlike an adult, a minor cannot qualify for Medically Assisted Dying with psychological pain only. They must have an incurable condition and be experiencing physical suffering. They must also possess the aforementioned "capacity of discernment", and have parental consent.

Individuals must be mentally competent as determined by their attending physician. In the event an individual is in an irreversible coma, Medically Assisted Dying is permitted through an Advance Directive. In addition to mental competency, minors must also show the cognitive capacity to understand the finality of their decision.

Procedure: Medically Assisted Dying is part of the broader doctor-patient relationship in Belgium. For adults, it rests ultimately on an individual's qualifying medical conditions and a patient's subjective suffering. The specific process requires: (1) the patient to make a written, repeated, voluntary request, free from any external pressure; (2) the treating physician to consult at least one independent doctor regarding the qualifying medical condition; and (3) a one-month waiting period, unless death is expected in the very near future.

The procedure is overseen by a Federal Control and Evaluation Commission on Euthanasia (FCEE), which reviews every reported case *after* the death to ensure legal criteria were met.

Canada

History

In the landmark 2015 *Carter v Canada* decision, the Supreme Court of Canada ruled that the criminal prohibition of Medical Assistance in Dying (MAID) was unconstitutional, violating the *Canadian Charter of Rights and Freedoms* by infringing on individuals' rights to life, liberty, and security of the person. This ruling legalized MAID for consenting adults with severe, irremediable medical conditions, prompting Parliament to pass legislation in 2016 to amend the Criminal Code allowing Canadians access to MAID. In 2021, Parliament again amended the Criminal Code to, among other things, repeal the provision that requires a person's natural death be reasonably foreseeable in order for them to be eligible for Medical Assistance in Dying.

Who is Eligible?

Residency: There is no explicit legal requirement that an individual must be a citizen or legal resident to qualify for Medical Assistance in Dying in Canada. However, to qualify for MAID an individual must be eligible for Health Care services in Canada, which effectively limits MAID to citizens and legal residents.

Age: To access MAID in Canada, individuals must be at least 18 years old.

Qualifying Conditions: Individuals must have a "grievous and irremediable medical condition." This means an individual: (1) has a serious and incurable illness, disease or disability; (2) is in an advanced state of irreversible decline in capability; and (3) has an illness, disease or disability or state of decline that causes them enduring physical or psychological suffering that is intolerable to them and that cannot be relieved under conditions that they consider acceptable. Individuals with a qualifying medical condition also must be of sound mind, and capable of making decisions about their health.

Under very specific circumstances, there is a waiver of final consent (Bill C-7) allowing individuals whose natural death is reasonably foreseeable and who have already been assessed and approved for MAID, to pre-arrange a MAID date, permitting the procedure if they lose capacity just before that date. It must be approved in writing with a practitioner, with

that practitioner allowed to administer MAID on or before the specified date if the patient loses the capacity to provide final consent at that time.

Currently, mental illness is not in and of itself a condition that allows an individual to access Medical Assistance in Dying.

Procedure: Individuals with a qualifying medical condition must make a completely voluntary written request for MAID. The request must be witnessed by two individuals independent of family members, medical providers, or anyone who may benefit materially from the individual's death. This request must be reviewed and approved by two independent physicians. The physician receiving this request has an obligation to inform the patient of alternate means that might relieve the patient's suffering, including palliative sedation. There is a mandatory ten day waiting period between the date of the request and date of the proposed MAID. Monitoring of MAID deaths in Canada is overseen by Health Canada. There are some differences in MAID policies between different provinces in Canada. For example, the province of Quebec has begun to allow the use of Advance Directives.

Germany

History

Like Canada, Germany's route to legally sanctioned Medical Aid in Dying initially came through a 2020 decision by the Federal Constitutional Court that struck down a provision of the Criminal Code which had criminalized "assisted suicide services." The justices asserted that the freedom to take one's own life inherently encompasses the freedom to seek and utilize assistance from third parties, **regardless of the presence of a terminal illness**, provided the decision is freely made. Governed only by this court ruling, the National Assembly drafted laws to formally regulate assisted dying in 2026.

Who is Eligible?

Residency: Individuals must be citizens or legal residents, and members of one of the nonprofit organizations that provide Medical Aid in Dying services.

Age: There is no legal age restriction, but, as in Switzerland, practical access to end-of-life services usually requires membership in a German nonprofit organization. These organizations refuse to work with individuals younger than 18 years old.

Qualifying Conditions: The core requirement to access MAID services in Germany is that the decision must be voluntary, serious, and permanent.

There is no requirement that the individual have a terminal illness, be suffering intensely, or have chronic and unbearable pain. Rather, access to MAID is based on the broad right to self-determination.

Individuals suffering psychiatric illness are also permitted in principle to access MAID, provided the illness does not impair the patient's ability to form "free will." Because these issues are particularly complex, individuals attempting to qualify for MAID on this basis require rigorous psychiatric assessment to ensure their wish is not a symptom of their disease.

Procedure: Medical Aid in Dying in Germany involves the patient self-administering lethal medication prescribed by a doctor. (1) The patient makes an initial request to a doctor or one of the nonprofit organizations that provide this service. (2) The patient is assessed by a doctor or other representative of the organizations doing this work to assure that the decision is voluntary, well-considered, and not influenced by external pressure. (3) If approved, a doctor prescribes a fatal dose of medication (typically a barbiturate). There is no legal obligation for any doctor to provide this service, making it a voluntary action for the medical professional. (4) The patient must take the medication themselves, either through ingestion or by opening an IV infusion valve. (5) A Public Prosecutor typically investigates the death to ensure it was completely voluntary.

Austria

History

As in Canada and Germany, an individual's right to Medical Aid in Dying in Austria was a direct legislative response in 2022 to a 2020 Constitutional Court ruling that lifted the nation's ban on the practice declaring the prohibition a violation of the right to self-determination.

Who is Eligible?

Residency: There is no explicit citizenship requirement in Austria, but the bureaucratic process effectively requires a physical presence and engagement with the Austrian legal system. This means MAID is limited to Austrian citizens and legal residents.

Age: Adults 18 years and older. Minors are specifically excluded.

Qualifying Conditions: Individuals must be fully capable of making decisions. They must also have a serious, incurable, and permanent illness with severe symptoms OR a terminal illness (death expected within a short time).

Procedure: A patient requesting MAID must be assessed by two independent physicians, one of whom must specialize in Palliative Medicine. They must verify the patient's capacity to make decisions and provide information about palliative alternatives. The patient must then prepare a formal "death decree" with a notary or a patient advocate. This is followed by a mandatory reflection period of 12 weeks, which is reduced to two weeks for those in the terminal phase of an illness. The patient or a designated third party must obtain the lethal medication (usually Sodium Pentobarbital) from a designated pharmacy. Finally, the patient must ingest the medication themselves.

New Zealand

History:
In 2020, New Zealand's End of Life Choice Act was approved by a binding public referendum and officially enacted in 2021.

Who is Eligible?
Residency: Individuals must be either citizens or permanent residents.
Age: Individuals must be adults 18 years or older.
Qualifying Conditions: Individuals must meet the following criteria: (1) must be mentally competent to make an informed decision; (2) must be making a voluntary request, free from any external pressure; (3) must have a terminal illness which is likely to end their life within six months; and (4) must be in an advanced state of decline and experiencing unbearable suffering that cannot be relieved in a manner they consider tolerable.

Legislation that permits MAID under the restrictive conditions noted above also explicitly prohibits access based solely on advanced age, mental illness or disability.

Procedure: Individuals must make a formal request to a doctor. This request must then be assessed by two independent doctors, with one appointed by the Ministry of Health. If approved, the individual chooses the date, time and method to administer the lethal medication. The patient can choose to take the lethal medication either through swallowing, feeding tube, or IV injection. In all cases, a medical professional must be present at the time of administration.

Australia

History:
MAID was first legalized in the Northern Territory in the 1990s, only to be overridden by a federal law. Then, in 2017, the Australian state of Victoria passed the Voluntary Assisted Dying Act. Within the next five years, all six Australian states enacted similar Voluntary Assisted Dying (VAD) laws. In 2022, both the Northern Territory and the Capital Territory also followed suit enacting their own Voluntary Assisted Dying laws.

Who is Eligible?
Residency: Eligible individuals must be either citizens or permanent residents of the relevant state for 12 months.
Age: Individuals must be adults 18 years or older.
Qualifying Conditions: Generally, eligibility is confined to individuals diagnosed with an incurable, advanced and progressive disease, illness or medical condition, which causes intolerable suffering. The condition must be expected to cause death within six months, or within 12 months for neurodegenerative diseases. Queensland allows a 12 month prognosis for all eligible conditions, and the Australian Capital Territory has removed any temporal framework entirely.
Procedure: The precise procedure for accessing VAD in Australia varies somewhat from one jurisdiction to another. However, the following steps are common to all jurisdictions: (1) the individual makes an initial request for VAD to his/her physician; (2) the individual undergoes an eligibility assessment by their attending physician; (3) the individual undergoes an eligibility assessment by a second medical practitioner; (4) the individual makes a second request in writing for VAD; (5) the individual makes a third and final request for VAD; (6) if the individual is found eligible, a lethal prescription is dispensed; and (7) the individual can either self-administer the medication or request the medication by administered by a qualified health practitioner.

Spain

History
In 2021, Spain's legislative body, the Cortes Generales, enacted the Organic Law on the Regulation of Euthanasia permitting both active euthanasia and assisted suicide.

Who is Eligible?

Residency: To access either of these options, individuals must either be a Spanish national or have legal residence in Spain for at least 12 months.
Age: Only adults 18 years or older qualify for Voluntary Assisted Dying.
Qualifying Conditions: An individual must be mentally competent and conscious at the time of a request to end his/her life. The individual must also suffer from a serious and incurable disease OR a serious, chronic, and incapacitating condition that causes physical or psychological limitations and intolerable suffering.
Procedure: The patient submits two written requests, separated by at least 15 days, which are reviewed by the attending physician as well as a second consulting physician. Final approval rests with the "Guarantee and Evaluation Commission." Individuals without capacity, who have already been approved for Voluntary Assisted Dying, are still eligible if they have previously signed an Advance Directive.

Uruguay

History

In 2025, Uruguay became the first country in Latin America to decriminalize euthanasia via the legislative process. In October of that year, it passed the "Ley de Muerte Digna." Colombia and Ecuador had previously legalized MAID, but had done so through Supreme Court decisions.

Who is Eligible?

Residency: Only Uruguayan citizens and individuals who have resided legally in the country for at least one year are eligible.
Age: Only individuals 18 years and older are eligible.
Qualifying Conditions: An individual must first be mentally competent at the time of the request for MAID. Individuals must have a terminal illness or severe and incurable medical condition that causes an extreme deterioration in quality of life, which entails unbearable physical or psychological pain and suffering with no reasonable prospect of recovery.
Procedure: The patient's request for MAID must be made in writing. Two independent physicians, one the treating physician and a second independent physician, must verify the medical condition and patient's suffering. If there is disagreement between physicians, a medical committee resolves the disagreement. Two witnesses must confirm that a patient's request is made freely with no external pressure. There is a required minimum ten-day waiting period between the patient's request and final approval. Individual physicians can opt out of the procedure, but

individual health institutions cannot. Finally, the only form of MAID in Uruguay is euthanasia administered by a health care professional. Voluntary assisted dying at the patient's own hand is not permitted.

Colombia

History

Colombia became the first country in Latin America to approve Medical Aid in Dying when in 1997, the Constitutional Court legalized euthanasia for terminally ill patients. Since then, MAID has been legalized in Colombia through several subsequent Constitutional Court decisions. In 2015, after years of bureaucratic foot dragging, the Court ordered the Ministry of Health to establish a regulatory framework for MAID in the country. And, in 2021, the Court expanded MAID for non-terminal patients. Despite its legality, Medical Aid in Dying continues to be seriously restricted by bureaucratic hurdles and very conservative doctors.

Who is Eligible?

Residency: You must be a Colombian national or foreign resident with a valid visa and residency status. Tourists are excluded.

Age: Adults as well as minors 14 to 18 years old have the legal right to consent to MAID. Adolescents between 12 and 14 years of age may also access euthanasia with parental consent. Even children 6 to 11 years old, with parental consent and in very exceptional circumstances, may be eligible.

Qualifying Conditions: The patient must have a serious, incurable, and progressive disease or bodily injury, which causes intense physical or psychological suffering that the patient considers incompatible with their dignity.

Procedure: Colombia permits two primary types of assisted death: (1) euthanasia, where a medical professional directly administers life ending medication and (2) medically assisted death, where the patient administers medication provided by the doctor. To access either of these end-of-life options an individual must: (1) make voluntary (free of external pressure), reiterated requests, which can be either verbal or written; (2) these requests must be reviewed by an interdisciplinary committee of doctors, psychologists, and lawyers; and (3) the individual must have their mental capacity to make the end-of-life choice assessed by a psychologist or psychiatrist.

Ecuador

History

In February of 2024, Ecuador's Constitutional Court decriminalized euthanasia, making it the second country in South America to do so. The landmark ruling allowed doctors to perform euthanasia without penalty under carefully prescribed circumstances.

Who is Eligible?

Residency: Qualifying individuals must be either Ecuadorian citizens or legal residents.

Age: Individuals must be a minimum of 18 years old.

Qualifying Conditions: To qualify for MAID in Ecuador, individuals must have a serious and incurable disease, or a serious and incurable bodily injury. The patient must also be experiencing intense suffering (physical or mental) arising from the qualifying injury or disease. This mental or physical suffering must be such that the individual considers it incompatible with their dignity. The qualifying injury or disease does not have to be terminal.

Procedure: The individual must be mentally competent and their request must be free from undue pressure. The ruling and regulations allow for consent to be provided by a legal representative if the patient is unable to express it, provided this aligns with their previously expressed wishes or best interests. The specific steps are as follows: (1) the patient or representative submits a formal application for "Voluntary Active Euthanasia"; (2) the physician must verify that the patient understands the meaning of the request and their right to palliative care, as well as their right to revoke the request at any time; (3) the attending physician must notify an Interdisciplinary Scientific Committee composed of a medical specialist, lawyer and psychologist who make sure all of the qualifying conditions have been met; (4) the procedure is performed by a medical professional; and (5) any medical professional who objects to the procedure cannot be forced to participate.

Portugal*

History:

Medically Assisted Death (Public Law 22/2023) was approved by Parliament over a Presidential veto in May of 2023. Subsequently, opponents forced a review of the law by the country's Constitutional Court.

In 2025, the Court required a tightening of language in the law, sending it back to Parliament for "re-amendment." The law has yet to emerge from this re-amendment process, and therefore has yet to be implemented in Portugal.

Who is Eligible?

Residency: Portuguese nationals and foreigners legally residing in the country. Specifically excluded from Medically Assisted Death under the current law are "medical tourists."

Age: Individuals must be a minimum of 18 years old.

Qualifying Conditions: Individuals must be mentally capable and conscious at the time of their request, as well as when the Medically Assisted Death is administered. Individuals must have a serious and incurable disease or an injury of extreme gravity. They also must be suffering great physical or psychological pain.

Procedure: Patients must self-administer the lethal medicines used in Medically Assisted Death. Physician Assisted Death is permitted only in those cases where individuals are physically unable to self-administer. Finalization of more specific required procedures awaits the still incomplete "re-amendment" process underway in Parliament.

Cuba*

History:

In December of 2023, Cuba's National Assembly legalized Medical Aid in Dying (MAID), including euthanasia and physician assisted death, as part of its universal health system.

Who is Eligible:

Residency: The law applies to Cuban citizens and foreign residents with permanent residency status. Because the procedure is administered as a public health service, it is not available to tourists or temporary visitors.

Age: *As of April 2026, specific regulations to implement MAID are still being developed.*

Qualifying Conditions: An individual must be diagnosed with a chronic, degenerative, and irreversible disease or be in the terminal phase of life (agony). The individual must also be experiencing intractable physical or psychological suffering that cannot be alleviated. An individual's request for MAID must be a free, informed and unequivocal expression of his/her will.

Procedure: *As of April 2026, specific regulations to implement MAID are still being developed.*

*** As of April 2026, specific regulations to implement Medically Assisted Death in Portugal or Medical Aid in Dying in Cuba are still being developed.**