

Background

Medical Assistance in Dying (MAiD) in Canada, under Bill C-41, represents a historic change in Canadian society. This change requires nurses and nursing students to reorient toward directly assisting and hastening death for patients who make this choice. MAiD is carried out approximately twice per week in Island Health (Germain, 2016), and students are therefore encountering it in their clinical placements.

Research Objectives

- (1) To explore how student nurses make sense of their experience of participating or declining to participate in MAiD with patients who choose this care option
- (2) To understand how current nursing curriculum is informing students about MAiD, and identify potential gaps in existing knowledge- and skills-based preparation provided to students
- (3) To understand how student nurses perceive their future professional role, identity, and responsibilities in relation to MAiD.
- (4) To explore student nurses' comfort level in balancing their own views of MAiD with the wishes of patients and families.

Data Source

Nine fourth-year BSN nursing students at the University of Victoria were recruited through the UViC School of Nursing listserv and short class presentations by the JCURA student.

Age range	22-54
Gender	8 Female, 1 Male, 0 other
Religious Affiliation	5 yes, 4 no
MAiD experience	7 yes, 2 no

Methodology

A qualitative design using narrative inquiry and thematic analysis (Braun & Clarke, 2006) were used. One semi-structured interview in person or by phone was conducted with each participant.

Key Preliminary Findings

THEME 1: PERSONAL - PROFESSIONAL TENSIONS

Tensions felt by the participants were illustrated in narratives about personal values, professional responsibilities, encounters they have had with MAiD, and uneasy anticipation of future encounters.

Subtheme 1: Emotions and Intellect Entangled

Some participants expressed a contradiction between their intellectual understanding of MAiD, and the emotions that arose during the process of caring for a patient considering or receiving MAiD. Feelings of discomfort, unease, and ambiguity were expressed alongside a competing narrative of supporting MAiD on a logical level.

"I learnt that I have a few hang-ups about MAiD that I didn't realize I had. ...like logically, I have no problem with it ...but when it comes to the actual MAiD I found that it was ...a heart vs. brain thing and my heart was like, oh something doesn't feel quite right. I just felt a little uneasy about it and I didn't quite know why because I was all for it."

"I guess it's really hard to separate my own belief system at that point. Again, not that I would ever let that interfere with the process, professionally, but while watching somebody take their last breath, it's hard to not go to your innermost emotions."

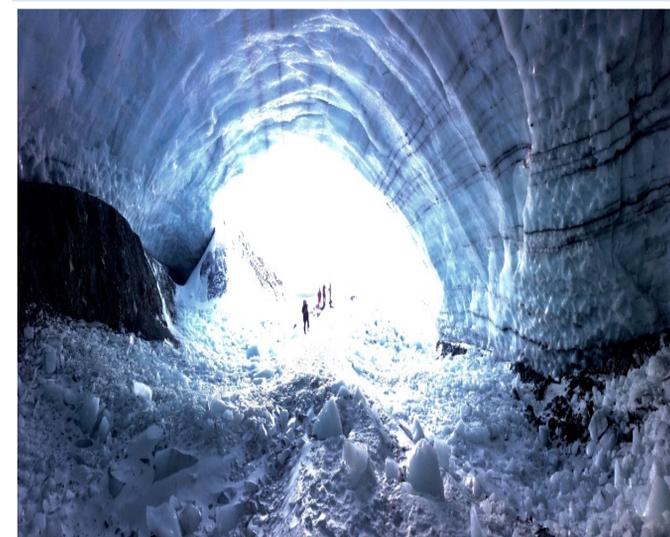
Subtheme 2: Discovering Hidden Values

Students' unexpected emotions around the practice of MAiD triggered reflection on this source of tension. Some identified their current religious affiliation or religious upbringing being in direct conflict with MAiD.

"I think part of it was that I had a very religious upbringing which isn't really part of my life anymore, but it conflicted with that ...I think lives like really deep down in my psyche and I didn't realize it was there until I was confronted with [MAiD]."

Discussion/ Implications for Practice and Education

- Personal-professional tension **highlights the complex nature of providing care** to a patient requesting or receiving MAiD.
- MAiD requires students to not only learn the nurse's role in providing this type of care, but to also **clarify their own beliefs**.
- Values clarification involved **grappling with the morality** of being implicated in hastening death.
- Providing opportunities for student nurses to reflect on their beliefs about MAiD prior to and after encountering it in practice is valuable.
- Being exposed to MAiD provides **opportunities to work through unease** before taking full responsibility as a nurse (RN).
- Continuing to facilitate these opportunities will strengthen students' sense of preparedness.



Resources

- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. doi:10.1191/1478088706qp063oa
- Germain, S. (2016) Strategic Advisor, Population and Community Health, New Policy Guides Staff on What To Do When a Patient Asks About Medical Assistance in Dying. Available at <https://intranet.viha.ca/pnp/pnpdocs/medical-assistance-dying-responding-patient-requests.pdf>

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