

## APPENDIX 2 CODE LIST

Codes that were made in the analysis of motives and experiences leading to seek DAS from a counsellor facilitated by De Einder, and content of and experiences with counselling.

Supercodes	Codes	Subcodes
A Personal characteristics		Gender, age, marital status, family situation, social contacts, ADL, character, religion, membership right-to-die organisations
B Current Health situation		Current health problems (physical, psychiatric, psychological), and evaluation by client, treatment history, available treatment options
C Motivation to contact counsellor	00 Dignity	Dignified life, dignified death
	10 Self determination	Self determination, responsibility, need for security / reassurance, fear of losing control, need for being independent / self-reliant
	20 Social motivation	Loss, aging, accepting end of life, completed life, decreased satisfaction with ADL, feeling useless, loneliness, no/small social network, not burdening others, not being remembered as decayed
	40 Health	Currently healthy, current problems (physical, memory, no more treatments, suicidal thoughts, completed life), prospective suffering, experiences with health situation of others
	50 Health care	Received health care by themselves (temporary admittance, problems mental health care, inability to discuss death wish), received health care by others (wishes not respected or granted, inability to offer help, observed health care), opinions on health care (palliative care, costs of care, bureaucracy and targets), experiences with suicide.
	60 Contact physician	PAD not discussed and reasons, PAD discussed and result, counselling not discussed and reasons, counselling discussed and result.
	70 Law	Opinion about PAD law (not used to full extent, obligation to refer, dependence on physician), opinion about 294 Penal Code (illegal assistance others, inability to be present at suicide, negative action of police and justice), opinion about relevant organisations.
	80 Other motivations	Earlier experiences with other Dutch right-to-die organisation
D Content of counselling	00 Form	Period, number of personal consults and other contacts, involved others, status
	10 Expectations / Goal	Creating clarity death wish (moral aspects, alternative to live, checking seriousness), responsible enactment, finding reassurance, not wanting to die alone, support with involving others, practical information on suicide, acquiring means
	20 Mental preparation	Motives wish to end life, effects of ending life, emotions
	30 Living wills	Living wills, contact with physician
	40 Juridical	Punishable actions involved others, acting of police and justice
	50 Others	Involvement of others (and reason therefor), openness towards others (and reasons therefor), meaning for others, carefulness towards others, presence of others, saying goodbye of others
	60 Medication method	Which medication, dosage, acquiring, interactions, shelf life, intake
	70 VRFF	
	80 Inert gas	
	90 Enactment suicide	Location, role counsellor, characteristics death, being found, acting of police and justice, arrangements after death (will, science, funeral)
E Result of counselling	10 Positive aspects	Personal approach, support, acceptation, reassurance, relief, non-violent death, no worries failure, quality of life, rational, information
	30 Negative aspects	Secrecy, worries failure, dependence on counsellor, option PAD not discussed enough.
	60 Timing of death	Wish to live, unknown, with more loss of quality of life
	70 Preference of manner of death	Natural death, PAD and advantages, DAS, disadvantages DAS, doubt suicide