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BELGIUM

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Introduction

1. ADF International is a faith-based legal advocacy organization that protects fundamental freedoms and promotes the inherent dignity of all people.
2. This report highlights the alarming rise in euthanasia cases in Belgium and the ever-broadening interpretation of relevant legislation. The country's approach continues to expand, now considering eligibility for persons affected by dementia, despite persistent gaps in the availability of palliative care. These developments undermine Belgium's obligations to protect the rights to life and to the enjoyment of the highest attainable standard of physical and mental health.

(a) Right to Life

Background

3. Belgium maintains one of the world's most permissive euthanasia regimes. In 2024, euthanasia accounted for approximately 3.6% of deaths, up from 2.4% in 2021.¹ Of utmost concern is the growing recourse to euthanasia where death is not expected in the short term, with 932 such cases recorded in 2024, compared to 713 the previous year.² Within the same period, euthanasia involving psychiatric conditions and cognitive disorders—such as recurrent depression and Alzheimer's—rose dramatically from 91 to 161 individuals, accounting for 2.5% of all cases.³

Legal Framework

4. Belgium legalized euthanasia, defined as 'intentionally terminating life by someone other than the person concerned, at the latter's request', in 2002.⁴ Under the law, physicians are authorized to end the life of a patient when the following conditions are met:
 - 'The patient has attained the age of majority and is legally competent and conscious at the moment of making the request;
 - The request is voluntary, well-considered, and repeated, and is not the result of any external pressure; and

¹ Federal Health Public Service 'Euthanasia: Publication of 2024 Figures for euthanasia in Belgium' (2025) <<https://consultativebodies.health.belgium.be/en/documents/euthanasia-publication-2024-figures-euthanasia-belgium>>; Commission fédérale de Contrôle et d'Évaluation de l'Euthanasie 'Dixième rapport aux Chambres législatives (années 2020-2021)' <https://organesdeconcertation.sante.belgique.be/sites/default/files/documents/10_rapport-euthanasie_2020-2021-fr_1.pdf>.

² Federal Health Public Service 'Euthanasia: Publication of 2024 Figures for euthanasia in Belgium' (2025) <<https://consultativebodies.health.belgium.be/en/documents/euthanasia-publication-2024-figures-euthanasia-belgium>>.

³ Commission Fédérale de Contrôle et d'Évaluation de l'Euthanasie 'Onzième rapport aux Chambres législatives (années 2022-2023)' <https://organesdeconcertation.sante.belgique.be/sites/default/files/documents/11_rapport-euthanasie_2022-2023-fr.pdf>.

⁴ Belgique, Parlement Fédéral, Loi relative à l'euthanasie F. 2002-2141 [C 2002/09590] (28 May 2002), s. 2.

- The patient is in a medically futile condition of constant and unbearable physical or mental suffering that cannot be alleviated, resulting from a serious and incurable disorder caused by illness or accident.⁵
5. In 2014, Belgium became the first of only two countries in the world to remove all age restrictions for euthanasia, effectively permitting euthanasia for children.⁶
 6. In 2020, the Belgian parliament adopted amendments to the country's law on euthanasia that further liberalized the regime by mandating referrals by doctors who conscientiously object to ending their patients' lives, preventing healthcare institutions from prohibiting euthanasia on their premises, and allowing patients' advance directives to potentially remain valid indefinitely, instead of requiring their periodic re-evaluation.⁷
 7. Belgium is now considering extending euthanasia to persons with dementia, enabling advance declarations of intent while still mentally competent.⁸
 8. A profoundly troubling development is the rise of so-called 'euthanasia tourism'. Belgium remains the only country in the European Union that permits euthanasia for foreign nationals. This situation is drawing a growing number of vulnerable individuals—particularly from France—who travel to Belgium to end their lives. In 2024 alone, 120 non-residents were euthanized in Belgium, 102 of whom were French citizens.⁹

Euthanasia for Psychiatric Disorders: A Slippery Slope

9. Belgian authorities continue to approve euthanasia for individuals with treatable psychiatric conditions, failing to ensure the provision of comprehensive, affordable, and accessible mental health services.
10. In *Mortier v Belgium*, the European Court of Human Rights (ECtHR) ruled in 2022 that Belgium violated its right to life obligations in the euthanasia of Godelieva de Troyer, a 64-year-old, physically healthy woman diagnosed with 'incurable depression'.¹⁰ The euthanasia was performed by an oncologist without psychiatric expertise against the concerns of her long-term psychiatrist, who expressed doubts that she satisfied the relevant legal requirements.¹¹

⁵ Belgian Euthanasia Act (28 May 2022) <https://www.soinspalliatifs.be/images/pdf/loi_2002_05_28.pdf>.

⁶ Belgian Law amending the law of May 28, 2002 on euthanasia, with a view to extending euthanasia to minors (28 February 2014) <https://www.soinspalliatifs.be/images/pdf/LOI_MOD_LOI_2002-05-28.pdf>.

⁷ Belgian Law establishing various provisions in criminal matters (23 March 2020) <https://www.soinspalliatifs.be/images/pdf/Loi_2002_Euthanasie_-_MOD_2020_03_15.pdf>.

⁸ The Christian Post 'Euthanasia law expansion to include dementia patients being considered in Belgium' (07 May 2025) <<https://www.christianpost.com/news/belgium-lawmakers-consider-significant-euthanasia-law-expansion.html>>.

⁹ Euractiv 'Final journey: The divide within Europe over euthanasia and assisted dying' (30 July 2025) <<https://www.euractiv.com/section/health-consumers/news/the-final-journey-why-more-europeans-are-traveling-for-euthanasia/>>.

¹⁰ Case of *Mortier v. Belgium*, Application no. 78017/17, European Court of Human Rights (4 October 2022) <<https://hudoc.echr.coe.int/eng#%7B%22itemid%22%3A%22001-219988%22%7D%3E>>.

¹¹ ADF International 'Challenging Euthanasia Laws in Belgium' <<https://adfinternational.org/cases/tom-mortier>>.

11. In 2022, the son of Natalie Huygens—who had endured severe psychological trauma following a violent assault—publicly released a letter highlighting the circumstances surrounding his mother’s euthanasia. He described how her life had deteriorated dramatically after the attack, compounded by her parents’ divorce, repeated suicide attempts, and what he termed the ‘legal laxity’ shown toward her assailant. Although Huygens herself reportedly acknowledged the need for a prolonged psychiatric hospital stay, she stated that she was unable to afford such treatment, leaving her without access to the care she required.¹²
12. Also in 2022, Shanti De Corte, a young woman who had survived a terrorist attack in 2016, was euthanized after developing severe post-traumatic stress disorder (PTSD). A panel of doctors and psychiatrists indicated that her psychological suffering was both unbearable and incurable, thereby qualifying her for euthanasia under Belgian law.¹³
13. In 2023, Geneviève Lhermitte, a 56-year-old woman convicted of murdering her five minor children and sentenced to life imprisonment, was also granted euthanasia for ‘irreversible psychological suffering’ following her conditional release and subsequent detention in a psychiatric facility.¹⁴
14. Deep and growing concern has been expressed over the authorization of euthanasia in cases involving psychiatric illness. Clinical psychology and psychopathology professor Ariane Bazan has warned that such authorizations represent an abuse of the 2002 euthanasia law. She characterizes the practice as a cynical response to the systemic failures in Belgium’s mental healthcare system. According to Bazan, ‘Even if psychiatric suffering is indeed extremely difficult to bear, their incurability cannot be considered the same as cancer conditions or neurodegenerative pathologies.’¹⁵
15. Professor Bazan further observed that ‘we are confronted by a genuine epidemic of psychiatric ill-being’, noting that the majority of those seeking euthanasia for psychiatric reasons—approximately two-thirds—are women. These women often have complex and traumatic life histories marked by maltreatment and abuse, and persistent mental health conditions such as borderline personality conditions, self-harm, repeated suicide attempts, or eating disorders.¹⁶

Lack of Access to Palliative Care

16. Belgium faces a critical shortfall in the provision of palliative care, leaving growing numbers of vulnerable persons without access to essential end-of-life support.

¹² Alliance Vita ‘Belgium: 2 New Cases of Euthanasia for Psychiatric Disorders are Causing Controversy’ (9 March 2023) <<https://www.alliancevita.org/en/2023/03/belgium-2-new-cases-of-euthanasia-for-psychiatric-disorders-are-causing-controversy/>>.

¹³ Le Monde ‘2016 Brussels attack victim granted euthanasia after years of PTSD’ (10 October 2022) <https://www.lemonde.fr/en/international/article/2022/10/10/2016-brussels-attacks-victim-granted-euthanasia-after-years-of-ptsd_5999805_4.html>.

¹⁴ Rivista di Psichiatria ‘The case of Geneviève Lhermitte’s euthanasia between psychiatric evaluation, legal aspects and ethical reflection’ (2023) Novembre-Dicembre 2023, Vol. 58, N. 6 *Riv Psichiatr* 2023;58(6):305-309 <<https://www.rivistadipsichiatria.it/archivio/4143/articoli/41411/>>.

¹⁵ Alliance Vita ‘Belgium: 2 New Cases of Euthanasia for Psychiatric Disorders are Causing Controversy’ (9 March 2023) <<https://www.alliancevita.org/en/2023/03/belgium-2-new-cases-of-euthanasia-for-psychiatric-disorders-are-causing-controversy/>>.

¹⁶ Ibid.

17. A major 2025 report from the Federal Centre of Expertise for Health Care (KCE) confirms the inadequacy of Belgium's resources.¹⁷ More than two decades after legalizing euthanasia, Belgium has failed to build a palliative care infrastructure capable of meeting demand, with only 360 palliative care beds, despite requiring at least 880.¹⁸
18. Moreover, according to a survey by the Anscombe Bioethics Centre, respondents in Flanders observed that 'euthanasia receives a great deal of attention from the public and the media, which is not the case for palliative care'.¹⁹ This imbalance raises serious ethical concern, particularly the risk that individuals might opt for euthanasia without full awareness of palliative alternatives that could prevent their life and dignity.²⁰

Rights to Life and Health under International Law

19. There is no 'right to die' under international law. Article 6 of the International Covenant on Civil and Political Rights (ICCPR) recognizes that: '[E]very human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.' Article 10 of the Convention on the Rights of Persons with Disabilities (CRPD) safeguards the right to life of persons with disability without discrimination by affirming that: 'State Parties ... shall take all necessary measures to ensure its effective enjoyment by persons with disabilities on an equal basis with others.'
20. The obligation of states to protect this most fundamental human right is strictly interlinked to that to guarantee the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. It thus requires ensuring the highest possible quality of care to persons experiencing suffering of any kind, including palliative care.
21. Article 12 of the International Covenant on Economic, Social, Cultural Rights (ICESCR) imposes an obligation on its States Parties to achieve the progressive realization of 'the right to everyone to the enjoyment of the highest attainable standard of physical and mental health'. The CRPD further specifies in its Article 25 that 'persons with disabilities have the right to the enjoyment of the highest attainable standard of health, without discrimination on the basis of disability', and requires States Parties to take measures to 'enable persons with disabilities to attain and maintain independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life'.

¹⁷ European Institute for Bioethics 'How can palliative care be increased in a country that allows euthanasia?' (14 February 2025) <<https://www.ieb-eib.org/en/news/end-of-life/palliative-care/how-can-palliative-care-be-increased-in-a-country-that-allows-euthanasia-2328.html>>.

¹⁸ France 24 'Belgium's house of 'pass-ages': A Journey of birth and death' (14 March 2025) <<https://www.france24.com/en/tv-shows/reporters/20250314-belgium-s-house-of-pass-ages-a-journey-of-birth-and-death>>.

¹⁹ The Anscombe Bioethics Centre 'Evidence of Harm: Assessing the Impact of Assisted Dying / Assisted Suicide on Palliative Care' (2024) <<https://www.bioethics.org.uk/media/t1bf0icr/evidence-of-harm-assessing-the-impact-of-assisted-dying-assisted-suicide-on-palliative-care-prof-david-albert-jones.pdf>>.

²⁰ Ibid.

22. The legalization of practices such as assisted suicide constitutes a blatant violation of the right to life. As affirmed inter alia by the European Court of Human Rights in *Haas v Switzerland* and *Pretty v United Kingdom*, the right to life does not include a diametrically opposite right to die. These cases affirm that the rights invoked by proponents of assisted suicide, such as the right to privacy, as well as the freedom from torture or cruel, inhuman or degrading treatment or punishment, must be understood in conjunction with Article 2, which not only prohibits the State from intentionally taking life, but also imposes a positive obligation on States to take appropriate steps to safeguard the lives of individuals within its jurisdiction.²¹
23. The legalization of euthanasia in Belgium stands in flagrant violation of international law. Accordingly, Belgium's legal and policy frameworks should be urgently reviewed to ensure recognition of and respect for the equal dignity and rights to life and health of all persons, including particularly older persons and persons in situations of vulnerability, among others. This includes addressing the root causes of suffering—including social, economic, health, and spiritual needs.

(b) Recommendations

24. In light of the aforementioned, ADF International respectfully suggests the following recommendations be made to Belgium:
- a. Repeal its euthanasia legislation, in recognition that there is no 'right to die' under international law and that such practices constitute a violation of the right to life;
 - b. Cease all efforts to expand access to euthanasia, particularly for persons with dementia or other cognitive impairments;
 - c. Strengthen policies and substantially increase investments in the provision of high-quality, comprehensive palliative and hospice care, as well as psychological, socio-economic, and spiritual assistance for those in need;
 - d. Develop and implement awareness-raising initiatives, including suicide prevention campaigns, which combat harmful stereotypes related to mental health, disability, and ageing, and promote the inherent dignity of every person.

²¹ *Haas v Switzerland* (2011) 53 EHRR 33; *Pretty v United Kingdom* (2002) 35 EHRR 1.



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