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Testimony of Barbara J. Collins
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In OPPOSITION to

**HB 5326, An Act Concerning Compassionate Aid in Dying
for Terminally Ill Patients**

Public Health Committee
March 17, 2014

Thank you for allowing me to address our position today regarding our **opposition to HB 5326, An Act Concerning Compassionate Aid in Dying for Terminally Ill Patients.**

I am Barbara J. Collins, Chair of the Human Rights and Responsibility Section of the Connecticut Bar Association. I am here to speak in opposition to the proposed Act concerning the allowing persons who are terminally ill to legally end their life in certain circumstances. The Section opposes the bill because we believe that additional protections are needed to ensure that adults with severe physical and mental disabilities who do not want to terminate their life are protected.

There are many adults in Connecticut who must rely upon the aid of others to perform many if not all of the daily tasks of life such as bathing, toileting and feeding. Many cannot speak or write and must rely upon others to do their communication and may have inadequate support and services. Unfortunately, many look on such citizens and think, if that was me I would kill myself OR what a burden they are on their family OR they may have inadequate supports and services OR providing care to such adults is expensive to the State, the insurance companies and families. Disabled citizens are aware of the expense and feel the financial and emotional pressure.

HB 5326, as drafted, makes an implicit assumption that the person seeking aid in dying is an elderly person or someone who had no disabilities except a major illness that is deemed to be fatal. The Act does not give protections to those who are disabled or are succumbing to the financial pressure from family or lack of adequate medical care. That is why the Section is proposing four (4) additions to the Act which it believes will protect citizens from undue pressure and ensure that anyone who utilizes the rights under the Act does it of his or her own free will.

The four proposals are as follows:

1. Amend Section 2 (c) and the “form” language in Section 4 to provide that Care givers and heirs cannot be a witness to the request of the patient for medication to aid in dying.

The logic behind this proposal is much like the requirement that heirs cannot be witnesses to a will in which they are a beneficiary, the economic incentive but also takes into consideration that caregivers may have incentive to relieve the pressure of being a caregiver.

2. Amend Section 2(a) (4) to require that the attending physician along with another independent physician, not in the same practice, must sign off on the terminal nature of the illness.

Section 2 does put a burden on doctors to effectively agree and support a patient’s decision to die but it also requires a doctor to make assumptions about the wishes of a person with a disability, particularly one who cannot speak or may have a mental disability. This requirement would eliminate any danger of a physician assuming that the patient no longer wishes to live and lessens the ability of any family member, insurance company or caregiver to pressure a doctor to support a suicide.

3. Amend Section 3 to add a requirement that The Office of Protection and Advocacy for People with Disabilities review each request to ensure that the motivation for the request is not based upon the inadequate medications, services or supports.

If a request raised questions concerning the motivation then OPAPD could stop the request and work with the applicant to obtain the necessary care, services or supports.

4. Amend Section 2(a) to add a requirement that the applicant submit evidence or undergo a mental health evaluation by a psychologist or psychiatrist.

The purpose of this evaluation is to ensure that the applicant is not seeking suicide because of depression or any other mental health condition. Such evaluations are required for gastric bypass operations whose consequences are much less severe.

The proposed legislation is very important and will have dramatic impact on citizens in Connecticut; we just want to ensure that only those adults who truly wish to utilize its provisions do so.