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Testimony of Michael C. Culhane
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Judiciary Committee
March 18, 2015
Legislative Office Building, Room 2C

HB 7015, *“An Act Concerning Compassionate Aid in Dying for Terminally Ill Patients”*

Good Morning Senator Coleman, Representative Tong and Members of the Judiciary Committee. My name is Michael C. Culhane and I am the Executive Director of the Connecticut Catholic Public Affairs Conference (“Conference”). For the record, the Conference is the public policy office of the Catholic Bishops of Connecticut and I am here today to urge the members of this Committee to reject HB 7015, *“An Act Concerning Compassionate Aid in Dying for Terminally Ill Patients”*.

As this is the third time in three years that this legislation has come before the General Assembly, I would like to take a moment to briefly reiterate 2 points from my testimony last year and emphasize a third.

Firstly, the Conference again opposes this legislation because it is a clear affront to the teaching of the Church, and...

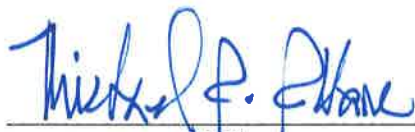
Secondly, the proponents of this measure would have the members of this Committee believe that this is solely a “Catholic” issue, but in fact they must know that nothing can be further from the truth. The Church is but one of dozens of organizations representing the medical, nursing, hospice, elderly and disability communities who have publicly, and emphatically and consistently opposed this legislation since the birth of The Hemlock Society in 1980.

And thirdly, I am certain that this Committee knows of the existence of the Advisory Council on Palliative Care. This Council has been meeting for the last fifteenth months in an effort to fulfill its main objectives: which is to analyze the current state of Palliative Care in Connecticut and to advise the Department of Public Health on matters related to improving Palliative Care and the quality of life for people with serious and chronic illness.

I question the rationale or logic of advancing this legislation dealing with Physician-Assisted Suicide while – at the same time – the General Assembly awaits the recommendations of this Council. There is a preliminary draft report dated January, 2015, but the Council continues to solicit expert testimony and to amass the research needed prior to the submission of its final report to the General Assembly.

The Conference strongly believes that the proper answer to this end-of-life issue is to wait for the final recommendations of the Advisory Council. From all accounts, Palliative Care provides for a comfortable and supportive atmosphere that reduces stress and anxiety and helps to achieve the best possible quality of life for a suffering patient.

For the above-referenced reasons, I urge this Committee to reject HB 7015.



Michael C. Culhane
Executive Director