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I am submitting testimony in support of Bill No. 7015 AN ACT CONCERNING AID IN DYING FOR TERMINALLY ILL PATIENTS.

I strongly urge you to support this bill. End of life care decisions should be based on the mentally competent, terminally ill person's life stance and personal choices. Horror stories abound, and just like with the vaccination issue, there are a lot of 'pretend' scientists who will spout misinformation that does way more harm than good.

Oregon's Death with Dignity's Annual Report (<http://www.healthoregon.org/dwd>) accurately showcases why this law works:

- The median age at death for 2014 was 72 years
- *"During 2014, no referrals were made to the Oregon Medical Board for failure to comply with DWDA requirements."*
- *"Of the 155 patients for whom DWDA prescriptions were written during 2014, 94 (60.6%) ingested the medication."*
- Choices were made because of *"loss of autonomy (91.4%), decreasing ability to participate in activities that made life enjoyable (86.7%), and loss of dignity (71.4%)"*.
- *"Excluding unknown cases, all (100.0%) had some form of health care insurance The number of patients who had only Medicare or Medicaid insurance was higher than in previous years (60.2% compared to 35.5%)."*
- *"As in previous years, decedents were commonly white (95.2%) and well-educated (47.6% had a least a baccalaureate degree)."*

Additionally, on a more personal note, as a person with a psychiatric illness and a neurological disorder, I truly get the fear the opponents of this bill have: the poor, infirmed and disabled will be lined up and forced to take a medical cocktail. I strongly believe that this bill cannot be used against me by my physicians, by my health insurance company, by my family or by my depressive self.

I have faith in these safe guards:

- Sec. 2(a) a physician must determine that the person's illness is terminal
- Sec. 8(b) if the physician decides the person's judgment is impaired because of depression or other causes, the physician cannot proceed and must refer the person to counseling.
- Sec. 2(b) only the person themselves can make the request
- Sec. 3(b) two requests, in writing, and the request need to be made no less than 15 days apart.
- Sec. 3(b) there needs to be witnesses to the request who cannot be family, estate beneficiaries or care providers. The witnesses must attest the person is of sound mind and is voluntarily making this request.

As a humanist, I embrace reason and science while tempering it with compassion and empathy. This law is not something new – it has been passed in several countries under much wider parameters. In America, the Oregon law solidly proves the opponents wrong. And the story of Brittany Maynard resonates with so many of us because her choice was noble and sincere; it was heart wrenching to know she had to give up her home to move to another state so as to be treated with dignity.

This bill will give people who are mentally competent and terminally ill a choice – nothing more nothing less. As the Oregon law so clearly demonstrates, only 60% of the people who choose this option actually ended up using it. The opponents scare tactics are not based on reality and their misinformation should be treated the same way as Jenny McCarthy's anti-vaccinations myths – with disdain and resentment for the misery her lies have caused our communities.