Co-Chairs Abrams and Steinberg and members of the Public Health Committee:

My name is Phyllis Ross, and I’m here today because of my mother’s tragic death.

In her last six months of life, she was under Hospice care, but they could do little to help her except administer medication to lessen her pain.

But, it was not the pain that distressed her most, it was the total helplessness she felt. She could not walk, dress or feed herself. She was incontinent, couldn’t sit up by herself and had to be turned in bed to prevent bed sores. She wished her suffering would end. But that wasn’t possible.

You are now being asked to make a crucial decision that would give terminally-ill patients, like my mother, a humane end-of-life option.

Please consider the following:

1. Currently there are seven states and Washington DC that have medical aid in dying laws similar to our bill. There are 19 more state legislatures considering bills. And that number is growing.

2. Much of the opposition to this bill is based on conjecture and fear that it might lead to illegal or inappropriate actions. However, that has been thoroughly disproven. States that permit medical-aid-in-dying, including Oregon with 22 years of experience, have had no legal problems, no abuses and no successful challenges to their laws.

3. As of 2019, The Connecticut State Medical Society no longer opposes medical aid in dying. The society advocates “engaged neutrality.” Its president Dr. Claudia Gruss said, “The Connecticut State Medical Society is committed to protecting its members’ freedom to decide what medical aid-in-dying options to provide to patients.”

Where do the people of Connecticut stand on medical aid in dying? A Quinnipiac Poll, taken in 2015, showed 63% would allow it. Only 34% were opposed. A majority of people favor this legislation—almost 2 to 1.
So, why haven’t we already passed this bill? Perhaps it’s because of the well-organized opposition and lobbying by religious entities that believe all terminally ill people—regardless of religious affiliation—should not be allowed to end their suffering.

This is not the American way. The First Amendment provides what Thomas Jefferson called a wall of separation between church and State. President John F. Kennedy, said “I believe in an America where the separation of church and state is absolute.”

I urge you to vote for **HR 5898**. It’s the compassionate thing to do, and it’s what the majority of your constituents favor.

Thank you,
Phyllis G. Ross

201 Blood Street
Lyme, CT 06371

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**Summary**:
~ **HR 5898** is a bill modeled on the Death with Dignity Act that has been successful in Oregon for 22 years. There has been “no adverse impact on end-of-life care” as a result.
~ It effects only terminally-ill (having 6 months or less to live), mentally-competent patients, allowing them to appeal to their doctors for medication they can self-administer, if and when they choose.
~ The Connecticut State Medical Association approves of its members’ “freedom to decide what medical aid-in-dying options to provide to patients” including “prescribing a lethal dose of medication, if legalized in Connecticut.”
~ It would be available as an end-of-life option to be used or not used by eligible patients.

**Supporters of Aid in Dying include:**
The American Public Health Association, the nation’s largest public health association
The American Medical Women’s Association
The American Medical Students Association
American College of Legal Medicine
The American Civil Liberties Union of Connecticut and the Elder Law and Human Rights section of the Connecticut Bar Association