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TESTIMONY IN SUPPORT OF 16-H 7659 – LILA MANFIELD SAPINSLEY COMPASSIONATE CARE ACT March 23, 2016

At the heart of our constitutional rights in the fundamental right to self-determination, a right that is as critical at the end of life as it is throughout. The ACLU of Rhode Island believes that the personal and necessary medical decisions surrounding end of life care are a natural and necessary extension of this fundamental freedom.

While some individuals facing terminal illnesses may seek out aggressive medical treatment, others, in conjunction with their families and their doctors, may determine the suffering they are facing to be too painful, and wish to end their lives with dignity, and with medical assistance. Each of these personal, private, medical decisions has merit, and should be respected. Yet, Rhode Island law currently recognizes the autonomy of only one of these patients and, severely restricts the right of the second patient to determine treatment in their final days. With the appropriately strong safeguards that this bill prescribes, this discrepancy should be eliminated.

Decisions around end-of-life care are never easy, and adults facing terminal illness are certainly not taking these decisions lightly. Rather than be condemned to suffer, these individuals deserve the dignity, autonomy, and privacy to decide for themselves how to live their final days. Some may choose not to seek intervention while others may choose compassionate care; ultimately, though, it is inappropriate for the state to essentially make that decision for them.

For nearly twenty years, safe and legal medical assistance has been available to adults in Oregon suffering from advanced terminal illness. As of last year, of the thousands of individuals who have contracted fatal illness in that time, only approximately 859 patients have taken advantage of the program and ended their own suffering through the medical decisions made in conjunction with their doctors. For those 859 patients, the freedom to make their own medical decisions was critical in determining the quality of their final days, and undoubtedly provided relief that would have otherwise been denied to them.

Similar laws now exist in Washington and Vermont; courts in New Mexico and Montana have also allowed the practice. The right to make knowing, competent and voluntary decisions about death when in the throes of a terminal illness is simply an extension of the liberty and right to self-determination at the heart of freedom. Passage of this legislation would allow Rhode Islanders to maintain the right to determine to the very end what happens to them, and we urge the committee to approve this fair and compassionate legislation.