

## Ariana Costa

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**From:** Patricia Quail <quailp@hotmail.com>  
**Sent:** Tuesday, April 28, 2026 4:55 PM  
**To:** Rep. McEntee, Carol Hagan; Rep. Knight, Jason; Rep. Dawson, Matthew S.; Rep. Ajello, Edith H.; Rep. Batista, Jose F.; Rep. Bennett, David A.; Rep. Caldwell, Justine A.; Rep. Casimiro, Julie A.; Rep. Corvese, Arthur J.; Rep. Craven, Robert E.; Rep. Cruz, Cherie L.; Rep. Felix, Leonela; Rep. Hopkins, Marie A.; Rep. Noret, Thomas E.; Rep. Place, David J.; House Judiciary Committee  
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To the Members of the Judiciary and the Committee Clerk.

I want to state clearly that I share the concerns raised by disability-rights advocates and families of medically complex children, and I also believe—on moral grounds—that creating a legal pathway for ending life is fundamentally wrong. In every state where these laws have been adopted, safeguards that were initially described as strict have been loosened over time, through amendments, regulatory changes, or legal settlements. For communities already facing medical bias, inconsistent prognoses, and insurance pressures, this erosion is not theoretical. And for families of medically fragile children who rely on the same healthcare systems, the long-term risks are especially troubling. From my perspective, the pattern in other states shows how difficult it is to keep these guardrails intact once the framework is in place.

I understand that supporters view this as compassionate care, but from my perspective—and from the lived experience of many disabled people and families of medically complex children—compassion means expanding support, not offering an option that ends life. I believe it is a profound mistake to call this compassion when the systems people rely on are already failing them.

I appreciate your attention to these concerns, and I hope you will weigh the moral and practical risks that many disabled Rhode Islanders and families of medically complex children have raised.

Respectfully,  
Patricia Quail