

HB 7760 : Lila Manfield Sapinsley Compassionate Care Act

Thank you to the Committee for allowing me to testify. I especially appreciate the sponsors behind this important Bill. My name is Clara Hardy, and I live in Providence. I'm here today to offer my support for HB 7760, the Lila Manfield Sapinsley Compassionate Care Act. Year after year, I have sat before this same committee advocating for this legislation. Like many other bills in this chamber, this one is repeatedly "held for further study" and never brought to a vote in committee, so it can't even reach the House floor. To me, that feels undemocratic. Is it necessary to spend over a decade studying the same bill introduced repeatedly? Please, simply hold a committee vote.

As a social worker with extensive experience assisting elderly clients, I strive to support them in preparing for a dignified end-of-life experience by ensuring advanced directives are completed. This documentation allows their preferences regarding life-sustaining measures to be clearly stated. For many individuals' facing terminal illness, the fear of suffering often outweighs the fear of dying itself. This was true for my friend Steve, who passed away from colon cancer last October. Having cared for his wife through her battle with pancreatic cancer six years prior, Steve understood firsthand the physical destruction and emotional impact that cancer imposes—not only on patients, but also on their families. Steve was a reserved individual who seldom sought assistance, and when he distanced himself during his final year, I recognized this as his way of shielding me from his pain and hardship. Unfortunately, Steve endured significant suffering and lacked adequate support to cope with the physical and emotional toll of cancer. It is reassuring to think of him being reunited with his wife, Kathy.

The option of medical aid in dying could help prevent tragedies such as the one that occurred recently in Connecticut, where a husband—faced with his wife's terminal illness—took both their lives after contacting emergency services. Such incidents might be avoided if individuals with incurable conditions were permitted to die with dignity, thereby sparing themselves and their loved ones from needless pain and distress. Frequently, efforts are made to preserve life at all costs; yet providing humane relief from suffering when quality of life has irreversibly declined may be a more compassionate approach.

This principle is commonly applied in veterinary medicine. When my dog became severely debilitated, experiencing incontinence, blindness, and mobility loss, I chose to relieve her suffering. In a comfortable home environment, she was euthanized peacefully in my presence. Enabling humans to experience an equally peaceful and dignified passing, surrounded by those who care for them, would represent a compassionate and respectful end-of-life practice.

Let me conclude with Napoleon Bonaparte's words: "Nothing is more difficult, and therefore more precious, than to be able to decide." Distinguished Representatives, you now have the decision not only to vote on this bill, but also to empower those who are suffering and facing imminent death to choose a dignified end. This decision can spare both individuals and their families the agony of an extended, painful passing. Thank you sincerely for your attention.

Clara Hardy

Providence

