

Testimony FOR H7760/ S2051 Lila Saplnsley Compassionate Care Act

My name is Jessie Kingston. I'm retired and live in Providence.

The bill provides the mechanism by which terminally ill, mentally capable patients can obtain a prescription from a doctor to *self administer* a medication that allows them to end their own lives painlessly —if and when they *choose*. It's legal in 14 states so far and counting. In Oregon, it has been legal for 26 years. It provides the terminal patient with a choice/an option for end of life care

The acronym used for this is MAID: medical aid in dying. This is a *medical* practice involving a dying person and their *healthcare* professionals.

The freedom of religion we enjoy thanks to the Constitution means that everyone can make their own decisions about end of life care, based on their own beliefs. *Supportive* faith leaders might well be present at the request of the patient during their end of life journey and final days.

CompassionandChoices.org,(linked in my written testimony) is the national organization that educates, lobbies and supports patients and medical professionals about this practice. On their website is a chart based on surveys showing that the majority of religious faith communities and leaders support MAID.

No faith leader, or for that matter no medical professional, pharmacist or patient will ever be forced to participate. Those who do choose to play a role are shielded from liability if they have followed the necessary steps outlined in this bill.

Obtaining the medication is time consuming and actually quite difficult. No less than three and a half pages of the bill meticulously outline the many safeguards and requirements.

In Oregon where they have 26 years of data, they found that 37% of the patients who went to the trouble to obtain the medication, never ultimately used it. For terminal people who have lost agency over every single part of their lives, just *knowing* it was available as an option gave them invaluable peace of mind.

It's probably obvious that I want this option for myself. I also come at this from a perspective gleaned during my four years as a Hospice volunteer in Connecticut. Hospice "neither prolongs life nor hastens death". A so-called natural death is often a lot of work for multiple days with varying degrees of pain, even with best efforts to titrate pain medication to keep the patient comfortable. Invariably, almost all the patients who were still verbal as well as their loving family members would ask "Why is this taking so long?"

We have only to look at the recent tragic case of a Connecticut man who called 911 before killing his terminally ill wife suffering from cancer and then taking his own life.

<https://www.courant.com/2026/02/24/police-ct-man-calls-911-with-warning-before-shooting-wife-with-terminal-cancer-taking-own-life/>

Rhode Island can prevent another tragedy like this by allowing for the option of death with dignity under the terms of this bill.

Please vote this out of committee so that it may proceed to a vote on the floor.