April 30, 2026

Dear State of Rhode Island Judiciary Committee,

My name is Kira Philips, and I am writing to ask you to please support and pass H7760, *The Lila Manfield Sapinsley Compassionate Care Act*.

I have been a passionate advocate for Medical Aid in Dying (MAID) since 2021, when I lost my beloved mom, Clare Marie Philips, to suicide on June 3rd of that year. Early in the morning, my mom hobbled out to the shed in our backyard and shot herself in the head. My dad, her husband of over 40 years, had to find her, and now lives with that image for the rest of his life. I was still asleep when he came running upstairs to tell me what had happened. Within 15 minutes there was a swarm of law enforcement lining our street and coming in and out of our house. We were questioned by detectives and they confiscated the letter my mom had left. In the coming days we had to hire a biohazard cleaning service and make arrangements for my mom with the funeral home, in which they told us there was “too much trauma” to do anything but cremation. The prolonged and complex grief caused by the manner of her death has impacted me and my dad profoundly.

For some background, I was adopted as an infant, and my parents were some of the first Americans to travel to China to adopt unwanted baby girls in the early 1990’s. This speaks to their selflessness, compassion, and kindness. I grew up in central Connecticut and have lived all over, including Cape Cod, Portland, OR, and Copenhagen, Denmark, but I now reside a little more than half a mile down the street in Smith Hill, where I bought my first home a couple years ago. Being raised by my parents was the greatest gift of my life, and I will forever be grateful to them for every opportunity I’ve been given. My dad graduated from Yale and was a lawyer in Hartford for over 30 years, and my mom was born and raised in Connecticut and was a graphic designer for Hartford Hospital for the majority of her career. She was also a talented fine artist, and was very involved in the art community in Hartford. My mom was truly the most gentle and loving soul, hence why her firearm suicide remains so utterly shocking.

My mom was diagnosed with Multiple Myeloma in 2018. She was being treated by oncologists at Dana Farber and Hartford Healthcare, but her diagnosis was tumultuous. She was in and out of hospice, had a period of remission, and then a quick decline before her ultimate death. Much of this period also coincided with the pandemic lockdown as well as the summer of 2020, when the country was experiencing political unrest after the murder of George Floyd. During the pandemic I moved from New London, CT back to my parents’ home in Hartford, which is actually located directly behind the Governor’s mansion (we literally shared a property line). In the summer of 2020, the country was facing Black Lives Matter protests, Trump rallies, and mask mandate objections, as well as other events such as an uptick in Asian hate crimes. Many of these protests were happening daily in our neighborhood. My parents had never owned a gun before, so when my mom told us she wanted to get a gun it was extremely out of character. However, given the societal unrest at the time, it actually seemed valid. That summer, my mom was in remission and she obtained a gun permit, took shooting lessons, and legally bought a small firearm, of which she kept hidden in the basement and I never laid eyes on it. I now see clearly that her intention for getting a gun was not for protection, but to have it as a fast escape if her cancer progressed significantly, which it did when she stopped responding to treatment in early 2021.

The Multiple Myeloma compacted my mom’s spine causing her to shrink six literal inches in height. It also caused excruciating, radiating back and pelvic pain, making it difficult to walk and then stand. I recall more than once having to watch her crawl up the stairs to the bedroom. My mom endured a year– one whole year– of relentless nausea from the chemotherapy, and she developed a golf ball-sized tumor that protruded from her scalp. She became just a shell of her former self and the rate at which she physically declined was terrifying and heart wrenching.

On June 1, 2021 my mom and dad drove up to Dana Farber and she was offered one last treatment option. CAR-T Cell Therapy is a highly invasive blood and bone marrow transfusion that would have required my mom to be in-patient for a month, followed by six months of being in close proximity to the hospital in case there were complications. This meant my mom would have had to not only endure this treatment but also rent an apartment in Boston for six months. The therapy could have potentially given her some more months or year(s) of remission, but it was not going to cure her cancer. She just did not have the strength to pursue it after what she had already been through with radiation and chemo. My mom and dad also discussed moving to Vermont to legally pursue MAID, but given her prognosis she did not have enough time to gain residency (six months), nor did she have the energy to get an apartment and establish a new medical team there. Today, Vermont is one of two states that has lifted the residency restriction, and my mom could have gone there and died peacefully.

No one deserves to get cancer. No one deserves to watch their loved one suffer and die horrifically. No one, especially my mom, deserves to die violently, alone, on the cold concrete floor of a dark shed. It is now my life's mission to ensure that no other family unnecessarily experience this kind of trauma. Medical Aid in Dying is the preventative mechanism. MAID not only prevents terminally ill people from suffering at the end of their life, but it prevents them from resorting to desperate, violent, and/or illegal methods. Additionally, it prevents having to watch a loved one suffer, and it prevents trauma for surviving loved ones. I received my Master of Public Health from Brown last year, with a thesis on "Suicide Amongst Terminally Ill Patients and Medical Aid in Dying as Prevention". Recently, I have focused much of my energy on education and research. I was able to present to Brown students in the following groups: Brown Society of Bioethics and Health Humanities, Brown Hospice Volunteer Organization, SOC1874- Medical Sociology, and PHP1680- Disability Health and Justice. I am also a research assistant with Rutgers School of Public Health, and did data collection and abstraction of over 300 hospice websites in states where MAID is legal to see if they had any form of MAID policy available transparently. We found that only 5.4% did, which you are more than welcome to read in our article published in the *Journal of Palliative*. I am wholeheartedly committed to the expansion of MAID legalization as well as empirical research, and education. It is the only way I have been able to cope with the loss of my mom. All of this is to honor her.

The people of Rhode Island dying from terminal illness are at high risk of suffering. They deserve this right, if they so choose, and to deny them of it is an infringement of their respect for autonomy. For personal, moral, or religious reasons, there are probably very few qualified individuals who are actually interested in this option, even fewer will choose to pursue it, and even fewer will follow through with it and end their life with the medication. If *Compassionate Care Act* can save one person from dying like my mom, it will be worth it. I am respectfully imploring you to please allow dying individuals this end-of-life healthcare option.

Thank you so much for your time and consideration,

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My mom and me in the mid '90s