## Roberta DiMezza

From: C Gilman <cgilman537@gmail.com>
Sent: Thursday, February 15, 2024 11:45 AM

To: Rep. Craven, Robert E.; Rep. McEntee, Carol Hagan; Rep. Knight, Jason; 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. Cruz, Cherie L.; Rep. Dawson, Matthew S.; Rep. Felix,

Leonela; Rep. Noret, Thomas E.; Rep. Place, David J.; Rep. Roberts, Sherry; House

**Judiciary Committee** 

**Subject:** 2024-H7100 Lila Manfield Sapinsley Compassionate Care Ac

Follow Up Flag: Follow up Flag Status: Completed

Good Morning.

My name is Charlene Gilman and I reside in Glocester, Rhode Island.

I am contacting you to ask that you vote against 2024-H7100 Lila Manfield Sapinsley Compassionate Care Act and any other future bills that may support assisted suicide in any way.

Rationale against Assisted Suicide:

- 1. Health Insurance companies may find in some instances, that they would rather pay for assisted suicide than for a patient's treatment, because they may find that assisted suicide is much less expensive than providing treatment.
- 2. Certain vulnerable people may be at risk of abuse and/or coercion. Especially the elderly who have dementia or Alzheimer's, the elderly whose finances maybe impacted adversely if they continue to live and whose families could coercion their elderly relative to choose Assisted Suicide for their own selfish reasons.
- 3. There is a dangerously broad definition of terminal illness and there is no legal distinction between whether a person would die in six months with treatment and those who will die within six months without treatment.
- 4. Pain is often not the primary issue for a person who chooses Assisted Suicide. In, Oregon per official annual state reports in 2016, 90% of Oregon patients seeking lethal drugs were doing so for various other reasons such as "less able to engage in activities" and were "losing autonomy". Other reasons cited were being a burden to family, friends or caretakers.
- 5. No Psychiatric Evaluation or Treatment Required. Many of the 95% of those who chose suicide had a diagnosable psychiatric illness (usually treatable depression).
- 6. Threatens Improvement of Palliative Care. There is compelling evidence that legalizing assisted suicide undermines efforts to maintain and improve good care for patients nearing end of life, including patients who never wanted assisted suicide.

7.Fosters Discrimination. Assisted Suicide creates two classes of people: Those we as a society will spend hundreds of millions of dollars each year to prevent and those whose suicides we assist and treat as a positive good.

There are many more reasons why legalizing Assisted Suicide is a bad and dangerous idea and I again ask you to vote against this each time it rears its ugly head.

Sincerely,

Charlene Gilman Resident of Glocester, RI