



New Hope Christian Fellowship

I am opposed to Physician Assisted Suicide

Thank you for this opportunity to express my strong opposition to SB 1129

People can commit suicide at will, but by having a physician endorse it will communicate a message this is incorrect and destructive. I am opposed to the PAS bill first because:

1. It gives an inordinate amount of authority to an attending physician (or to two physicians) to make final determination that a person will die within six months. There are several in our congregation who were given three to six months to die, and they are still in our congregation five years later. A physician will have to play to the role of God to conclusively determine the timeline of a person's life, regardless of how conclusive a diagnosis may seem at a given time.
2. Secondly, they will need to conclusively determine that a person is of "sound mind". When persons are diagnosed with a terminal illness, they will many times go through a season where they feel resigned to dying. Then with a lost hope, they have suicidal tendencies. However, once they get through this period, their lives can regain momentum and oftentimes they beat the odds.
3. Physician's assisted suicide preempts this possibility of health. It also might be so premature that we can erroneously make a permanent decision based on a temporary health situation.

Thank you for your consideration and I ask you to vote "NO" on SB1129.

Dr Wayne Cordeiro
Sr. Pastor New Hope Christian Fellowship
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Hearing on Senate Bill 1129

Chair Baker, Vice Chair Nishihara and members Espero, Chang, Ihara, Kidani and Ruderman,

We are writing to express **OPPOSITION** to this SB1129. Obtaining services for our members is hard enough as it is without adding another layer of stress to their lives—wondering if someone will feel they would be better off dead.

"As an organization dedicated to advancing the rights of people with disabilities to live independent, productive lives, assisted suicide is counter to everything we believe in."

Billy Altom

Executive Director, Association of Programs for Rural Independent Living

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DREDF: Doing Disability Justice

To the Senate Committee on Consumer Protection and Health
Chair Baker, Vice Chair Nishihara, Members Chang, Espero, Ihara, Kidani, Ruderman

Please accept our **strenuous opposition to Senate Bill 1129** from our Hawaii
Advocate Chris Niemczyk on Wednesday February 15th, 2017 in Room 229.

The Disability Rights Education & Defense Fund (DREDF) is a leading national law and policy center on disability civil rights. We have worked against assisted suicide laws, in Hawaii and across the U.S., since 1999. There are many reasons for our opposition, including:

- There's a deadly mix between our broken, profit-driven health care system and legalizing assisted suicide, which will be the cheapest so-called treatment. Direct coercion is not even necessary. If insurers deny, or even merely delay, expensive live-saving treatment, the person will be steered toward assisted suicide. Will insurers do the right thing, or the cheap thing?
- Elder abuse, and abuse of people with disabilities, is a rising problem. Where assisted suicide is legal, an heir (someone who stands to inherit from the patient) or abusive caregiver may steer someone towards assisted suicide, witness the request, pick up the lethal dose, and even give the drug—no witnesses are required at the death, so who would know?
- Assisted suicide bills provide only very weak safeguards.
- Diagnoses of terminal illness are often wrong, leading people to give up on treatment and lose good years of their lives, and endangering people with disabilities, people with chronic illness, and other people misdiagnosed as terminally ill.
- People with depression and other psychiatric disabilities are at significant risk.
- The state oversight & data collection are grossly insufficient.
- Supporters of doctor-prescribed suicide always say this proposal won't affect people with disabilities. But it will, whether or not they realize it.

For any further questions we are at all times available

- Marilyn Golden
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To Senate CPH Chair Baker, Members Nishihara, Chang, Espero, Ihara, Kidani, Ruderman From Hawaii Representatives Ann Graham Chung, Brent Graham, and Jill Graham Kailua and Kaneohe Hawaii 96744 email: papiochamp@yahoo.com

Resolution Opposing the Legalization of Physician Assisted Suicide and SB 1129 Wednesday 2/15/17

Association for Persons with Severe Handicaps (TASH) - Disability Advocacy Worldwide 1997.

In their 1997 resolution opposing the legalization of physician assisted suicide, the Association for Persons with Severe Handicaps (TASH) provides a long list of reasons for their opposition to physician assisted suicide, including the negative aspects of allowing physicians to have such power, the insufficiency of proposed safeguards, and dissatisfaction with the implementation of safeguards in conjunction with euthanasia in the Netherlands. Internet publication URL: www.independentliving.org/docs6/tash199712.html

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WHEREAS, the U.S. Supreme Court has determined that assisted suicide is not a constitutional right, but is an issue to be decided by the states; and

WHEREAS, bills to legalize physician-assisted suicide are currently pending before state legislatures; and

WHEREAS, no bill to legalize physician-assisted suicide applies to all citizens equally, but singles out individuals based on their health status in violation of the Americans with Disabilities Act; and

WHEREAS the legalization of physician-assisted suicide give physicians the power to decide who will be given suicide prevention and who will receive suicide assistance and is, therefore, not based on individual choice and autonomy; and

WHEREAS current trends in managed care and health care rationing threaten to diminish the availability of health care and related services needed by people with disabilities; and

WHEREAS people with disabilities and chronic illnesses may be driven to despair as a result of fear of being forced into a nursing home or institution, fear of being a physical or financial burden on their families, lack of information, about independent living option, and weariness from the daily struggle to get their legal needs met; and

WHEREAS, any proposed legal "safeguard" requiring that physician-assisted suicide only be available to terminally ill individuals who voluntarily request it will not protect people with disabilities from abuse; and

WHEREAS, numerous courts have ruled that people with non-terminal disabilities are the same as terminally ill patients in that the usual state interest in preserving life does not apply to them; and

WHEREAS, many people with non-terminal disabilities are currently and repeatedly pressured to sign "do-not-resuscitate" orders and other advance directives calling for withholding and withdrawal of medical treatment; and

WHEREAS, there is no empirical data indicating that current laws concerning advance directives are applied on a nondiscriminatory basis; and

WHEREAS, over a decade of experience with these "safeguards" in the Netherlands demonstrates that significant numbers of people with non-terminal illnesses and disabilities have been involuntarily euthanized; and

WHEREAS enforcement of laws and regulations is unlikely in a social context which devalues people with disabilities as a drain on limited health care resources,

THEREFORE BE IT RESOLVED THAT, TASH opposes the legalization of Physician-Assisted Suicide.

Adopted December 1997

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