



Unitarian Universalist Legislative Ministry of Maryland

Testimony in Support of HB 403 End-Of-Life Option Act (The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act)

TO: Delegate Joseline Peña-Melnyk, Chair, and members of the House Health and Government Operations Committee and
Luke Clippinger, Chair and Members of the Judiciary Committee
FROM: Stephen C. Buckingham, Lay Community Minister and Advocacy Lead,
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DATE: February 16th, 2024

Unitarian Universalists (UUs) have a long and powerful history of belief and action promoting Death with Dignity legislation. Back in 1988, way ahead of its time, UU General Assembly voted a resolution stating in part:

Guided by our belief as Unitarian Universalists that human life has inherent dignity, which may be compromised when life is extended beyond the will or ability of a person to sustain that dignity; and believing that it is every person's inviolable right to determine in advance the course of action to be taken in the event that there is no reasonable expectation of recovery from extreme physical or mental disability... Unitarian Universalists [should] advocate the right to self-determination in dying, and the release from civil or criminal penalties of those who, under proper safeguards, act to honor the right of terminally ill patients to select the time of their own deaths, . . . advocate safeguards against abuses by those who would hasten death contrary to an individual's desires; and . . . inform and petition legislators to support legislation that will create legal protection for the right to die with dignity, in accordance with one's own choice.

Each of Unitarian Universalism's Seven Principles offer support for providing end of life options, allowing for individual choice. People make choices within the options available to them – that is how they craft their dignity and worth. Dignity is not a matter of surviving as long as possible, receiving supportive care (e.g., being fed or toileted when you are no longer able to do these things for yourself), or refusing supportive care (refusing to be fed when you can no longer feed yourself), being able bodied or dying “with your boots on.” Dignity is achieved by doing what you can, what you choose, with the choices available to you.

Compassion leads us to offer the full range of options for end of life care and choices around dying. The full range of options includes state-of-the-art medical support provided to all (universal health care), superb hospice and palliative care, and must also include aid in dying. Compassion for others is the reason that we should make as many options as possible available at the end of life so that they, not we, should make those important, personal choices.

We are not accepting one another if someone can determine how someone else will die. Limiting options at the end of life, and most assuredly imposing choices of any kind is the opposite of accepting one another. Spiritual growth can come out of the deep reflection needed to decide how you want to die. Thus limiting end of life options can limit this aspect of spiritual growth. Some might conclude that they personally believe that the use of fewer resources at the end of life is a responsible choice given the interdependent web.

We urge your Committees to adopt a favorable report for this measure and move it to the full House for approval.

In faith,

Stephen C. Buckingham

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