

Testimony of Brenda Arredondo

In Favor of the End-of-Life Option Act (The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act)

Most of us have had the misfortune of seeing a loved one suffer from a terminal illness or have at least heard about these situations from friends. It is heartbreaking to watch someone you love suffer until the end or think of the possibility of this happening to oneself.

I have primary lateral sclerosis — the less deadly cousin to ALS. Even though my disease is not usually fatal, there are several side effects that could lead to my death. And I have no interest in suffocating to death through no fault of my own. I am at the mercy of my own body. However, as diseases like mine progress, I believe I should have the choice to make the decision best for myself.

As such, I stand in favor of SB 845/HB 933, the End-of-Life Option Act — The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act.

As an advocate for medical aid in dying, I firmly believe no one should make the choice to end my life for me. However, neither should anyone be able to take that decision from me or from anyone else who may find themselves in a position where they're considering the option.

And others believe the same. 82% of pro-choice voters in Maryland support medical aid in dying, as do 49% of pro-life voters. Three-quarters of Americans (74%) support the option of medical aid in dying, according to a 2020 Gallup Poll.

As a member of the disability community who supports legalizing medical aid in dying for a terminally ill patient likely to die within six months, I can feel alone in my support. Disabled opponents of these types of laws are not shy, many times rising as the loudest voices in the room leading the community to believe there's overwhelming opposition to medical aid in dying legislation.

This could not be further from the truth. A [new poll](#) shows seventy-nine percent of those who self-identify as having a disability agree with the statement that medical aid in dying (MAID) should be legal for terminally ill, mentally capable adults who chose to self-ingest medication to die peacefully.

Additionally, the poll also found that 73 percent of individuals who identified as living in a household with an individual that identifies as living with a disability support patient-administered MAID for terminally ill, mentally capable adults. Of those who self-identified as being affiliated with a political party, 65 percent of Republicans, 79 percent of Democrats, and 83 percent of Independents supported MAID for terminally ill, mentally capable adults. Additionally, the poll found that 82 percent of African Americans, 81 percent of Latinos, and 75 percent of whites were in support of MAID for terminally ill, mentally capable adults.

The poll was sponsored by Us for Autonomy, a new organization spearheaded by advocates with disabilities — including me — whose aim is to affirm the autonomy of people with disabilities to have access to high-quality health care and choose end-of-life care that meets an individual's needs, values, and priorities. Us for Autonomy supports expanding healthcare options for people with disabilities who are nearing the end of their lives. An equitable healthcare system in this stage of life includes high-quality and affordable medical care; home care; hospice; palliative care; and medical aid in dying. The organization advocates for medical aid-in-dying laws that include strong safeguards to protect individuals from coercion and exploitation.

Prior to providing a prescription for medication to end one's life, two doctors must confirm the status of that person. They will have a terminal illness with a life expectancy of 6 months or less. This individual must be fully informed about additional end-of-life options, including palliative care, hospice and pain control. A person with disabilities is only eligible for medical aid in dying if they are an adult; terminally ill; have six months or less to live; able to make informed healthcare decisions; and able to take the medication themselves.

Coercing someone to use medical aid in dying is a felony punishable under state criminal laws. Medical aid in dying is a practice proven by decades of experience in authorized jurisdictions. There is not a single substantiated case of abuse or coercion nor any civil or criminal charges filed related to the practice. — not one. Currently, medical aid in dying is authorized in 11 jurisdictions. We must let the evidence and facts guide us.

The medical aid-in-dying and disability rights movements share important core values: autonomy, independence and self-determination.

The Maryland Legislature has the opportunity to help end the suffering of terminally ill residents. Give us the option of medical aid in dying to peacefully end our suffering if it becomes unbearable.

I implore you to vote in favor of SB 845/HB 933, the End-of-Life Option Act — The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass Act.