

Dear Chair Leibling and Members of the Committee,

Human Life Alliance is committed to building a culture where every life is valued. Our mission is to Inform and Inspire through education and by promoting life-affirming alternatives to abortion, infanticide, assisted suicide and euthanasia.

So-called “medical aid in dying” preys upon the discouragement and pain that individuals with chronic suffering experience. People with chronic and terminal diagnoses deserve better treatment than legislation that tells them they are a burden and their lives are not worth living.

Over the years, Human Life Alliance has heard from people who are in vulnerable medical situations themselves or are walking alongside loved ones. Mark Davis Pickup, who has spent his adult life navigating the challenges of multiple sclerosis, shared a note he wrote to his doctor urging him,

Protect me from myself, or others, who would take my life before my natural death... I would not ask you to stop being my healer and become my killer, unless my mental state and faculties were impaired by depression or disease.¹

No patient should worry that if they say the wrong thing to their doctor, he or she may help them end their lives instead of offering healing and support. No doctor should ever be placed in a position of violating the ethic of doing no harm to their patients and instead becoming an agent of death.

We also urge you to consider the ways that “safeguards” have been eroded, removed, and skirted in states that have embraced assisted suicide. In Oregon, only 1% of patients who sought assisted suicide in 2022 were even referred for psychological evaluation.² Suicidal ideation is not a sign of a healthy mental state. It is a clear sign of depression. These individuals were failed by the “safeguards” of a state that has embraced death as the “solution” to disease.

46% of patients seeking assisted suicide cited concerns about “becoming a burden” to their families or loved ones as a reason for their request.³ The three most cited reasons for seeking assisted suicide were loss of autonomy, loss of ability to do things they enjoyed, and loss of “dignity.”⁴ Needing care and assistance from others does not mean that a person no longer has dignity. Each one of us needs the help of those around us at some point in our lives. This does not mean we are not valuable—it means we are human. If we choose to become a society that treats vulnerable people as if they are disposable, the price will be our humanity.

¹ Mr. Pickup has also published his letter here: Pickup, Mark Davis. “A Letter to My Doctor Not to Kill Me.” *Human Life Matters*, 16 Apr. 2016, www.humanlifematters.org/2016/04/a-letter-to-my-doctor-not-to-kill-me.html.

² *Oregon Death With Dignity Act 2022 Data Summary*, Oregon Health Authority Public Health Division, 8 Mar. 2023, www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Documents/year25.pdf.

³ Ibid.

⁴ <https://wng.org/roundups/assisted-suicide-on-the-rise-1617226720>Ibid.

Just over a year ago, professionals in a Medical Aid in Dying seminar in Canada acknowledged that they have patients who are seeking death because they are poor.⁵ Here in the U.S., there are documented cases in assisted suicide states of insurance companies denying coverage for treatments and informing patients or doctors that assisted suicide is a covered option.⁶ Assisted suicide is not a compassionate, it is predatory and exploitative.

Assisted suicide has far-reaching consequences. It ends valuable lives and communicates to others that their lives are not worth living. It creates opportunities for bad actors to use their influence to hasten the demise of people they consider inconvenient. And it sends a message to every segment of society that life is not sacred. Should we be surprised that Oregon, the first state to legalize assisted suicide, has a suicide rate 40% higher than the national rate?⁷ We cannot cheapen life and then be shocked when people who are struggling to see their own value begin to question if their lives are worth living. We must do better than this.

At Human Life Alliance, we do not believe that suicide is the answer to suffering, nor do we believe that the appropriate response to someone who is depressed to the point of seeking to end their own life is to help them kill themselves. There is nothing compassionate about this legislation. There is nothing compassionate about telling people that their lives are not worth living.

In life,



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⁵ Briscoe, Joshua, et al. “‘I Don’t Want to Die’ - New Revelations on How Canada Ushers the Vulnerable to Medically Aided Death.” *The New Atlantis*, 19 Jan. 2023, www.thenewatlantis.com/publications/no-other-options.

⁶ Richardson, Bradford. “Assisted-Suicide Law Prompts Insurance Company to Deny Coverage to Terminally Ill California Woman.” *The Washington Times*, The Washington Times, 20 Oct. 2016, www.washingtontimes.com/news/2016/oct/20/assisted-suicide-law-prompts-insurance-company-den/. and Richardson, Bradford. “Insurance Companies Denied Treatment to Patients, Offered to Pay for Assisted Suicide, Doctor Claims.” *The Washington Times*, The Washington Times, 31 May 2017, www.washingtontimes.com/news/2017/may/31/insurance-companies-denied-treatment-to-patients-o/.

⁷ Valko N. Why are suicide rates climbing after years of decline? *Linacre Q*. 2017 May;84(2):108-110. doi: 10.1080/00243639.2016.1221305. Epub 2017 May 3. PMID: 28698703; PMCID: PMC5499219.