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House Human Services Committee  
Testimony in Opposition to HB1415

Chairman Robin Weisz and members of the Committee, I am submitting my testimony today as a concerned citizen, a caregiver and someone who has cared for loved ones with long-term, difficult conditions. Today I am sharing in opposition to HB 1415 relating to medical/physician assisted suicide.

As a former professional caregiver, I have had the duty and the privilege of caring for people with different abilities (physically, mentally as well as socially “disabled”). Some could not walk or talk, some could not feed themselves or handle personal care of any kind. Some of my patients were born with these limitations, some had injuries or illnesses that lead to them. The one thing that made them the same as everyone else, was their humanity. Their right to have human dignity and compassion. Their loved ones may have been given grim possibilities for their long-term outcomes, but in truth, their existence brought much joy to those who knew them. Even as their days seemed impossible and challenging, their life had meaning and value. To walk with them and their family to the process of their end of life transition, was something I regard as one of the most meaningful responsibilities I have ever had.

More importantly, I speak in opposition to HB 1415 as someone who tended to my loved ones who had life changing diagnoses, that ultimately lead to their deaths. My hope is the experiences I share will help you to see the importance of support from loved ones (which this bill does not require) and the fact that assisted suicide is still a devastating force, as any suicide or homicide is, to a family.

When I consider that this bill is directed to people given 6 months or less to live, it terrifies me. My grandmother, who was also my legal guardian and raised me during her “golden years” was given a lung cancer diagnosis, with the prognosis of 6-12 months to live. She was an educated woman, a retired Registered Nurse, not a deeply religious person and she valued her life. She attempted aggressive measures to end the cancer, however they did not work. But what did happen was she lived somewhat comfortably and happily for almost 36 months. She witnessed the births of two great grandchildren and was able to attend the wedding of two other grandsons. She had pain and problems, but she had purpose. Even in her limitations she had value. She suffered, but she knew her life was more than just her cancer. Our family helped care for her until the very last breath. Those last breaths were hard, very scary and difficult to watch, but we wouldn’t trade them for a moment, and neither would she, because each moment with her was precious. She died with dignity.

Another example was my grandfather, also my legal guardian (and husband and former caregiver to my grandma mentioned above). He was a retired evolutionary biologist, university professor and author of numerous college textbooks. Not only did he help raise me and my brothers, when our parents were absent, he also helped modernized a rural, all-risk volunteer/reserve fire department (when he was in his 70’s). He walked 6-8 miles per day and was a modern day “superman”. Until 2014, when his previous problems with “Mild Cognitive Impairment” transitioned into the “A” word (Alzheimer’s). A man who lectured in front of 200

hundred students now had to be reminded to take his dentures out of his mouth to clean them (even though he argued they were his real teeth). He needed to be prompted to eat, when to sleep and where it was appropriate to go to the bathroom. Many would say, that is not a life worth living. He could have made the argument that he wanted to die with dignity and choose when and how to end his alleged suffering. But he knew that was not his decision to make. His experience as a biologist and later as an EMT/Firefighter engrained deep in his brain, that all life had a purpose. He knew suicide was not going to take away the pain we all were experiencing with his changes. There were days he even questioned that he truly had Alzheimer's (even though the scans, tests and behaviors were conclusive). He had a contagious laugh, he loved to talk about his childhood on Long Island and his time in the Navy during the Korean War.

Towards the end of 2019, we were told that he would probably die from aspiration pneumonia within the year. As we watched him struggle with a few bouts of pneumonia, we knew that was going to be his reality. On April 11, 2020, amid global chaos because of COVID-19, I began the death-watch of my real-life superhero. It was awful, it was painful, it made me cry. He slept through most of it and as his breathing got more labored, his loved ones took turns whispering words of love and admiration into his ear. Friends from all over the country called to say a few last words, even though he could not respond, just to have the opportunity to share how much they appreciated his time on earth with them. As the clock ticked, and during his last repositioning, his eyes opened wide, he looked into my face. I held his cheeks and told him it was ok, he was safe, he was loved. He seemed a little scared, a little apprehensive, but he also knew he was not alone. He knew his time to die had come, and it was a natural process. He died with dignity.

Even more recently, I had a vastly different experience. In early December of 2020, I received a text message from my aunt, she was 62 years old, and was in the end stages of COPD. She had been struggling for about a year with the process of her lungs failing. She had been a bitter woman, who lived a challenging life. She lived in a state that has already legalized medical/physician assisted suicide. Her text read, "I have decided to exercise my right to die with dignity, if you would like to talk to me, you are welcome to call." How do I, respond to that kind of message? As, a person who values life, who sees all people as important and deserving of dignity, this concept of her committing suicide, and at the hands of her doctors and loved ones, was so tormenting. I let her know how valued her life was, and that every moment on earth has meaning, and not shortchange herself or her loved ones those precious days of life she had left. Later that night, she chose to commit suicide with the help of her children and husband. She used medication prescribed to her by a medical doctor who went to medical school with the express purpose to learn to help heal, offer comfort and ultimately save lives. Within hours after her death, her family was devastated. They questioned if it was the right time. They did not feel the peace and release they expected. Not only did they feel grief that is typical of any loss of a loved one, but they also felt fear and regret and confusion. This was not what was supposed to happen. Where is the dignity here?

When a person is faced with life altering news, they are in turmoil. They need support, they need care, they need to trust that they have value and their life, whatever the condition, will be protected and honored.

Suicide is defined as self-injurious, with the intent to take one's life. Dignity is defined as the quality or state of being worthy, honored, or esteemed. How can we, as conscionable people favorably use the word suicide in the same sentence as the word dignity?

Please vote, "Do not pass" on HB1415, it denies both the protection and dignity our fellow citizens deserve.