

Senate Judiciary Committee SB 1003 Monday, March 3, 2025 Sharolyn Smith, Oregon Right to Life

Chair Prozanski, Vice-Chair Thatcher, and Members of the Committee,

I am writing on behalf of Oregon Right to Life to express a strong opposition to Senate Bill 1003 (SB 1003), which dangerously expands assisted suicide in three key ways:

- Allowing physicians' assistants and nurse practitioners to consult and prescribe for assisted suicide.
- Eliminating the 15-day waiting period, reverting to only 48 hours between request and receiving the lethal drugs.
- Requiring hospitals and hospice centers to disclose on their website and in their facilities whether or not they provide assisted suicide.

Oregon was the first state to legalize assisted suicide in 1994 with legal battles carrying it an additional 3 years after that. When voters initially approved the so-called "Death with Dignity Act" they did so being promised safeguards, including but not limited to residency requirements, patient-provider relationships, waiting periods, and physician oversight. Over time, these limited protections have been continually stripped away, leaving vulnerable patients at an even greater risk.

But I am not *only* writing on behalf of Oregon Right to Life. This issue is deeply personal to me. My dad has a history of medical complexities, he is disabled, has lived with chronic pain for over 20 years, and recently received a terminal diagnosis. I've spent my life in and out of doctor's offices watching his independence continue to slip away. As a result, I have walked alongside him through his ongoing struggle with depression and suicidal ideation. Despite having a strong support system, my dad still has a daily struggle with feeling like he is a burden.

Reports by Oregon Health Authority show that the primary reasons behind patients seeking assisted suicide are not because the patient is in pain, or even because they are concerned about future pain, but because of a decline in ability, autonomy, or they feel like a burden on their loved ones.

That's why I fear what SB 1003 could mean for people like him. Instead of affirming his value, this bill makes it even easier for a broken health care system to suggest death as the answer.



My dad – and every patient like him – is valuable and deserves true care and support no matter their diagnosis or level of ability.

There continues to be a lot of policy discussion in Oregon about creating better mental health programs, building awareness of resources, and suicide prevention, *except* in the case of those who are medically complex or approaching the end of their life. It's discrimination and a not so subtle message that the "right to die" has become a "duty to die."

We must reject policies that pressure people into thinking their lives are worth less because of a medical diagnosis. Oregonians deserve better. Instead of expanding assisted suicide, we should focus on real support — better palliative care, mental health resources, and a health care system that values every life.

I urge you to oppose Senate Bill 1003. Thank you.