Statement of Support of Minnesota End-of-Life Options Act

To: House Health Finance and Policy Committee, January 25, 2024

From: Joanne Roberts, MD, MHA/Retired Palliative Medicine Physician Executive

My name is Dr. Joanne Roberts. I retired after practicing palliative medicine in Everett, Washington for 30 years. Throughout my professional career, I have witnessed emotional and spiritual healing through the dying process. Throughout most of my career, I believed that physical, emotional and spiritual pain could be successfully eased with the palliative treatments already available, and so I opposed the Washington Death with Dignity Act when it was on the ballot in Washington in 2008.

I am here now to tell you that I was wrong. The Washington experience – and my own – have changed my mind.

In Washington, as in Oregon, which I have also studied, medical aid in dying has been used for many years, sparingly, compassionately, and thoughtfully. Each person who enrolled in the program has had complete agency in decision making and has had an imminently terminal disease such as cancer or ALS. Families were involved and it was clear that the option brought comfort and control. The dying process was peaceful.

In both Washington and Oregon, fewer than one-half of one percent of those who die do so through Medical Aid in Dying, and well over 90% are served by hospice. The laws in both Oregon and Washington are nearly identical to the Minnesota End of Life Options Act.

As a hospice medical director, I was witness to several patients who chose this option. All were well served by our hospices, but all had suffering beyond our capabilities to ease their pain. I did not participate directly in their medically-assisted deaths, but I witnessed great compassion among the doctors who did.

Now, I am living with my own terminal disease, and it is likely my suffering will be brief and manageable with hospice care. But, as a person who has death on my horizon, and having seen the law play out in other states, I feel I should be able to make my own end-of-life choices, and I feel that Minnesotans should no longer be denied this safe and well-tested option.

Thank you.