

MEMORANDUM

TO: Members of the New Jersey Senate and General Assembly
FROM: Jennifer Thompson, National Association of Social Workers – NJ Chapter
DATE: March 25, 2019
RE: **A1504/S1072:** "Medical Aid in Dying for the Terminally Ill Act"; permits qualified terminally ill patient to self-administer medication to end life in humane and dignified manner.

As Executive Director of the National Association of Social Work – NJ Chapter (NASW-NJ), and on behalf of the nearly 7,000 social workers we represent and the clients they serve, we respectfully request your **support of A1504/S1072** which is scheduled for a vote today at both the New Jersey Senate and General Assembly voting sessions.

Issues of aid in dying for the terminally ill are issues of relevance to social workers, as we are often the front-line staff providing end-of-life planning and care for these individuals. Social workers providing hospice and palliative care are expected to develop specialized expertise in addressing issues of dying, bereavement, and cultural sensitivity to end-of life decisions.

The NASW policy statement, *Client Self-Determination in End-of-Life Decisions*, notes “Social workers have an important role in helping individuals identify the end-of-life options available to them ... **A key value for social workers is client self-determination. Competent [capable] individuals should have the opportunity to make their own choices**, but only after being informed of all options and consequences ... without coercion” (NASW, 2003).

This bill before you today allows for that choice.

Moreover, the *NASW Standards for Social Work Practice in Palliative and End of Life Care* also **emphasize client self-determination and protection of the vulnerable**. As such:

NASW affirms the right of the individual to determine the level of his or her care. Particular consideration should be given to special populations, such as people with mental illness, with developmental disability, individuals whose capacity or competence is questioned, children, and other groups who are vulnerable to coercion or who lack decisional capacity (NASW, 2004).

We recognize that this is a very emotional issue for advocates on both sides of this issue. However, ultimately, choice and self-determination for individuals facing end of life decisions should be the overriding factor in determining the viability of this legislation. We thank you for your consideration and urge you to vote YES on this import piece of legislation.