



**Voter + Disabled Community
New Jersey Survey
February 2014**

METHODOLOGY

Purple Insights conducted 601 interviews by phone in New Jersey among likely 2014 voters. Eighty percent (80%) of the interviews done by phone were completed on landlines and 20% on cell phones. In addition, an oversample of 100 disabled adults were done through online interviews. All interviews were fielded between February 1st and February 9th, 2014. The margin of error for statewide voters is +/- 4.0%.

VIEWS TOWARD AID IN DYING

1. In general, do you support or oppose allowing a mentally competent adult, who is dying of a terminal disease with no hope of recovery, the choice to bring about their own death?

	Voters	Disabled
Strongly support	47	50
Not so strongly support	15	13
Not so strongly oppose	8	5
Strongly oppose	17	14
DK/ref	13	18
NET SUPPORT	62	63
NET OPPOSE	25	18

2. Now I'm going to read a proposal that may be up for consideration in your state. Should mentally competent, terminally ill patients with less than six months to live be able to end their life in a humane and dignified manner, using prescription medications they can self-administer? This would be entirely voluntary on the part of all participants, including the patient, physician, and any other health care provider. Do you support or oppose this proposal?

	Voters	Disabled
Strongly support	47	50
Not so strongly support	15	13
Not so strongly oppose	6	4
Strongly oppose	23	18
DK/ref	8	15
NET SUPPORT	62	63
NET OPPOSE	29	22

3. Which comes closest to your own view about how you would feel if you were a terminally ill patient?

	Voters	Disabled
I would want a legal option to end my own life	65	62
I would not want a legal option to end my own life	28	22
I'm not sure about this	7	16

4. Which of the following comes closest to your own view?

	Voters	Disabled
Government shouldn't meddle in the private, personal decisions terminally ill people make about whether or not to end their own lives	76	68
Government should protect the terminally ill from ending their lives hastily or against their will	18	15
Neither	2	6
I'm not sure about this	5	11

5. Which of the following comes closest to your own view about how to legalize the ability of mentally competent, terminally ill patients to end their own lives?

	Voters	Disabled
The medical community and patients' advocates, not the government, should set their own standards about how and when to help patients end their own lives	64	55
State governments should regulate end of life decisions, in order to prevent abuses	21	15
Neither	7	14
I'm not sure about this	8	15

MESSAGING

6. Now I'm going to read you some things that might be reasons to SUPPORT allowing terminally ill patients to take their own lives. After each, please tell me whether you find it very convincing, somewhat convincing, not too convincing, or not at all convincing.

<i>Showing Very Convincing</i>	Voters	Disabled
The decision of a terminally ill patient to receive medication to bring about their own death should be a private-decision between the patient, their family, their faith, and their own doctor.	61	55
Terminally ill patients who thoughtfully consider their options should have the right to die peacefully and on their own terms.	58	62
Advances in science and technology have created many medical interventions that can prolong life for people with terminal diseases for years. But those years may be full of pain, suffering, lengthy hospital stays, and increased dependency on one's family. People shouldn't be forced to artificially prolong their lives if they don't want to.	53	54
We should give terminally ill patients our respect by allowing them to exert control over their end of life decisions, including when and how they die.	52	52

7. Now I'm going to read you some things that might be reasons to OPPOSE allowing terminally ill patients to take their own lives. After each, please tell me whether you find it very convincing, somewhat convincing, not too convincing, or not at all convincing. If you're not sure, just say so & we'll move on.

<i>Showing Very Convincing</i>	Voters	Disabled
Patients at the end of their lives are at their most vulnerable. They need extra protection from unscrupulous or rushed doctors or family who might put convenience ahead of human life.	32	31
Only God should decide when people die, and allowing people to take their own life goes against God's plan.	28	28
Doctors take an oath to help people, and the original oath specifically prohibits the giving of deadly drugs. Legalizing doctor-assisted suicide would force doctors to break their oath to do no harm.	20	17
Allowing doctor-assisted suicide will lead to a slippery slope, where the disabled or the mentally ill will be encouraged to take their own lives	19	17

DEMOGRAPHICS

8. What is your gender?

	Voters	Disabled
Female	52	63
Male	48	37

9. In politics today, do you consider yourself a Republican, Democrat, or Independent?

	Voters	Disabled
Democrat, strongly	28	31
Democrat, not strongly	9	17
Independent, lean Democrat	8	10
Independent	20	17
Independent, lean Republican	7	7
Republican, not strongly	8	9
Republican, strongly	15	7
Don't Know/Refused	5	2

10. What is your age?

	Voters	Disabled
18-29	7	21
30-39	11	12
40-49	19	10
50-59	24	20
60-69	21	24
70-79	13	9
80+	5	3
Refusal/DK	0	0

11. What is the highest level of education that you have completed?

	Voters	Disabled
Less than high school	1	2
High school graduate	13	22
Some college	16	23
Trade or professional school	4	9
College graduate	37	29
Post-graduate work or degree	29	15
Don't Know/Refused	0	0

12. Are you black, white, Hispanic, Asian, or Native American?		
	Voters	Disabled
White	77	73
Black	9	11
Hispanic	3	6
Asian	2	5
Native American	1	2
Other	3	1
Don't Know /Refused	5	3

13. What is your marital status?		
	Voters	Disabled
Single	16	34
Married or domestic partnership	69	46
Widowed	8	6
Divorced	5	13
Separated	1	1
Don't know/Refused	1	1

14. What is your present religion, if any?		
	Voters	Disabled
Catholic	36	34
Other Christian	18	13
Protestant	15	15
Jewish	11	12
None/Atheist	11	9
Agnostic	2	3
Muslim	0	1
Something else	3	5
Not sure/refused	4	9



**Voters (Statewide, SD 13, SD 31, HD 114) + Disabled Community
Connecticut Survey
February 2014**

METHODOLOGY

Purple Insights conducted 600 interviews by phone in Connecticut among likely 2014 voters, with an oversample of 100 voters each in SD 13, SD 31, and HD 114. Eighty percent (80%) of the interviews done by phone were completed on landlines and 20% on cell phones. In addition, an oversample of 100 disabled adults were done through online interviews. All interviews were fielded between February 1st and February 7th, 2014. The margin of error for statewide voters is +/- 4.0%.

SCREENER

1. Which, if any, of the following conditions apply to you?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
I have serious difficulty walking or climbing stairs	5	6	7	1	32
I have a disability	4	1	4	2	42
I currently suffer from a chronic disease or serious, advanced or terminal illness	3	5	9	2	35
I am deaf or have serious difficulty hearing	2	1	2	2	12
I am blind or have serious difficulty seeing even when wearing glasses	1	1	1	2	6
Because of a physical, mental, or emotional condition, I have serious difficulty concentrating, remembering, or making decisions	1	1	2	0	16
Because of a physical, mental, or emotional condition, I have difficulty doing errands alone such as visiting a doctor's office or shopping	1	1	4	1	18
I have difficulty dressing or bathing	0	1	1	0	4
None of the above	89	91	86	92	0

VIEWS TOWARD AID IN DYING

2. In general, do you support or oppose allowing a mentally competent adult, who is dying of a terminal disease with no hope of recovery, the choice to bring about their own death?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Strongly support	51	52	51	59	56
Not so strongly support	14	20	14	16	11
Not so strongly oppose	8	9	6	7	6
Strongly oppose	13	10	13	7	10
DK/ref	13	9	16	11	17
NET SUPPORT	65	72	65	75	67
NET OPPOSE	22	20	19	14	16

3. Now I'm going to read a proposal that may be up for consideration in your state. Should mentally competent, terminally ill patients with less than six months to live be able to end their life in a humane and dignified manner, using prescription medications they can self-administer? This would be entirely voluntary on the part of all participants, including the patient, physician, and any other health care provider. Do you support or oppose this proposal?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Strongly support	50	53	55	51	56
Not so strongly support	16	11	13	17	9
Not so strongly oppose	9	11	11	5	7
Strongly oppose	18	19	16	20	14
DK/ref	7	6	6	7	13
NET SUPPORT	66	64	67	68	65
NET OPPOSE	27	30	27	25	22

4. Which comes closest to your own view about how you would feel if you were a terminally ill patient?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
I would want a legal option to end my own life	69	70	61	70	61
I would not want a legal option to end my own life	25	23	30	21	23
I'm not sure about this	6	7	9	9	16

5. Which of the following comes closest to your own view?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Government shouldn't meddle in the private, personal decisions terminally ill people make about whether or not to end their own lives	79	83	81	77	74
Government should protect the terminally ill from ending their lives hastily or against their will	14	12	12	13	12
Neither	3	2	1	4	6
I'm not sure about this	5	3	6	6	8

6. Which of the following comes closest to your own view about how to legalize the ability of mentally competent, terminally ill patients to end their own lives?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
The medical community and patients' advocates, not the government, should set their own standards about how and when to help patients end their own lives	67	63	67	70	59
State governments should regulate end of life decisions, in order to prevent abuses	19	19	19	17	18
Neither	7	11	3	3	9
I'm not sure about this	7	7	10	10	13

MESSAGING

7. Now I'm going to read you some things that might be reasons to SUPPORT allowing terminally ill patients to take their own lives. After each, please tell me whether you find it very convincing, somewhat convincing, not too convincing, or not at all convincing.

<i>Showing Very Convincing</i>	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
The decision of a terminally ill patient to receive medication to bring about their own death should be a private decision between the patient, their family, their faith, and their own doctor.	66	60	73	70	71
Terminally ill patients who thoughtfully consider their options should have the right to die peacefully and on their own terms.	64	52	70	69	66
Advances in science and technology have created many medical interventions that can prolong life for people with terminal diseases for years. But those years may be full of pain, suffering, lengthy hospital stays, and increased dependency on one's family. People shouldn't be forced to artificially prolong their lives if they don't want to.	60	57	63	72	62
We should give terminally ill patients our respect by allowing them to exert control over their end of life decisions, including when and how they die.	56	56	65	57	64

8. Now I'm going to read you some things that might be reasons to OPPOSE allowing terminally ill patients to take their own lives. After each, please tell me whether you find it very convincing, somewhat convincing, not too convincing, or not at all convincing. If you're not sure, just say so & we'll move on.

Showing Very Convincing	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Patients at the end of their lives are at their most vulnerable. They need extra protection from unscrupulous or rushed doctors or family who might put convenience ahead of human life.	28	29	30	27	33
Only God should decide when people die, and allowing people to take their own life goes against God's plan.	22	21	27	23	28
Doctors take an oath to help people, and the original oath specifically prohibits the giving of deadly drugs. Legalizing doctor-assisted suicide would force doctors to break their oath to do no harm.	21	20	19	26	25
Allowing doctor-assisted suicide will lead to a slippery slope, where the disabled or the mentally ill will be encouraged to take their own lives.	21	20	19	23	26

DEMOGRAPHICS

9. What is your gender?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Female	52	53	53	53	62
Male	48	47	47	47	38

10. In politics today, do you consider yourself a Republican, Democrat, or Independent?

	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Democrat, strongly	22	19	19	27	24
Democrat, not strongly	10	10	8	9	12
Independent, lean Democrat	10	10	10	12	12
Independent	22	28	22	18	23
Independent, lean Republican	8	15	13	8	8
Republican, not strongly	8	7	6	6	4
Republican, strongly	15	8	18	16	11
Don't Know/Refused	5	4	4	3	6

11. What is your age?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
18-29	6	6	6	9	11
30-39	10	14	12	8	14
40-49	19	15	18	13	15
50-59	24	25	25	23	16
60-69	23	19	17	20	27
70-79	10	11	15	11	6
80+	7	9	6	13	11
Refusal/DK	1	1	0	2	1

12. What is the highest level of education that you have completed?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Less than high school	1	0	4	0	2
High school graduate	9	10	13	10	16
Some college	17	21	22	12	29
Trade or professional school	7	7	10	7	11
College graduate	35	35	33	32	22
Post-graduate work or degree	31	27	17	38	18
Don't Know/Refused	0	0	0	1	2

13. Are you black, white, Hispanic, Asian, or Native American?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
White	86	85	89	90	84
Black	3	1	3	3	3
Native American	2	0	2	0	2
Hispanic	2	3	1	1	5
Asian	1	1	0	2	2
Other	1	3	2	1	2
Don't Know /Refused	4	7	2	3	2

14. What is your marital status?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Single	15	17	17	18	25
Married or domestic partnership	71	64	69	69	50
Widowed	7	10	7	7	7
Divorced	6	8	7	5	15
Separated	0	1	0	0	2
Don't know/Refused	1	0	0	0	1

15. What is your present religion, if any?					
	Voters				Disabled
	Statewide	SD 13	SD 31	HD 114	
Catholic	39	53	50	46	42
Protestant	21	15	17	10	16
Other Christian	12	10	16	15	12
Jewish	4	1	1	8	5
Muslim	0	0	0	0	0
Agnostic	6	4	1	3	6
None/Atheist	13	10	12	10	11
Something else	2	3	0	8	3
Not sure/refused	4	5	2	1	6



To: Interested Parties
From: Margie Omero, Purple Insights
Date: February 19, 2013
RE: Recent polling in MA

Methodology: *Fielded 2/1-2/7, interviews were conducted with respondents using both landline phones and cell phones. Eighty percent (80%) of the interviews were conducted via landline phone, and 20% were conducted with respondents on their cell phones. Total N size=600 likely 2014 voters. A 100-interview online survey of disabled adults was also conducted concurrently. The margin of error for the base 600-interview sample is +/-4.0%. The margin of error for subgroups may be larger. Research was sponsored by Compassion & Choices.*

Purple Insights is the in-house opinion research group at Purple Strategies. Since its founding, Purple Insights has provided opinion research and strategic counsel to some of the most recognizable brands in the world. Purple Insights also created the PurplePoll to provide a bipartisan look at the critical electorate that would determine the 2012 election outcome. The PurplePoll was cited as one of the top five most accurate polls of 2012 ahead of every major news organization, and polling organizations including Pew, Gallup, and many others.

Majorities say they support a right to death with dignity, broadly, and for themselves.

Massachusetts voters clearly support the right for terminally ill, mentally competent adults to end their own lives, often called death with dignity. Over two-thirds (70%) support this right, with more than half (53%) strongly supporting it. Majorities across age groups support this right (<50: 72%, 50-64: 71%, 65+ 70%), and even 64% of Catholics and half (61%) of Republicans.

Support remains strong when we test the foundation of a potential law or ballot measure specifying the role of self-administered medicine, providers being allowed to opt-out, and “six months to live” as a marker of “terminal.” Here, nearly three-fourths (71%) support the measure, with a majority (54%) strongly supporting it. This majority total support holds across all age groups (<50: 73%, 50-64: 73%, 65+: 67%), Catholics (64%), and Republicans (61%).

These results are nearly identical—if not slightly higher—than in a similar Massachusetts survey sponsored by Compassion & Choices and conducted in May 2012. In that survey,



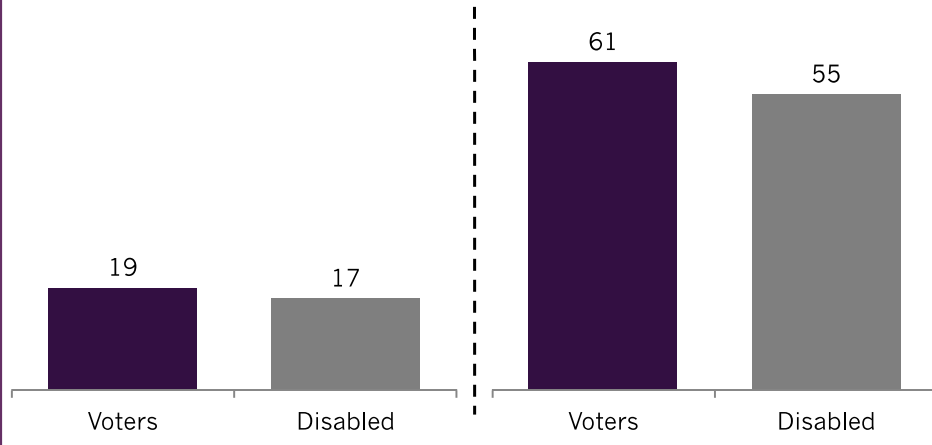
Neither the disabled nor New Jersey voters overall find a slippery slope argument compelling.

Allowing doctor-assisted suicide will lead to a slippery slope, where the disabled or the mentally ill will be encouraged to take their own lives.

Showing Very Convincing :

The decision of a terminally ill patient to receive medication to bring about their own death should be a private-decision between the patient, their family, their faith, and their own doctor.

Showing Very Convincing :



71% supported the basic right, and 61% supported sample legislative language. Massachusetts voters also want this right for themselves, as again three-fourths (73%) would want a legal

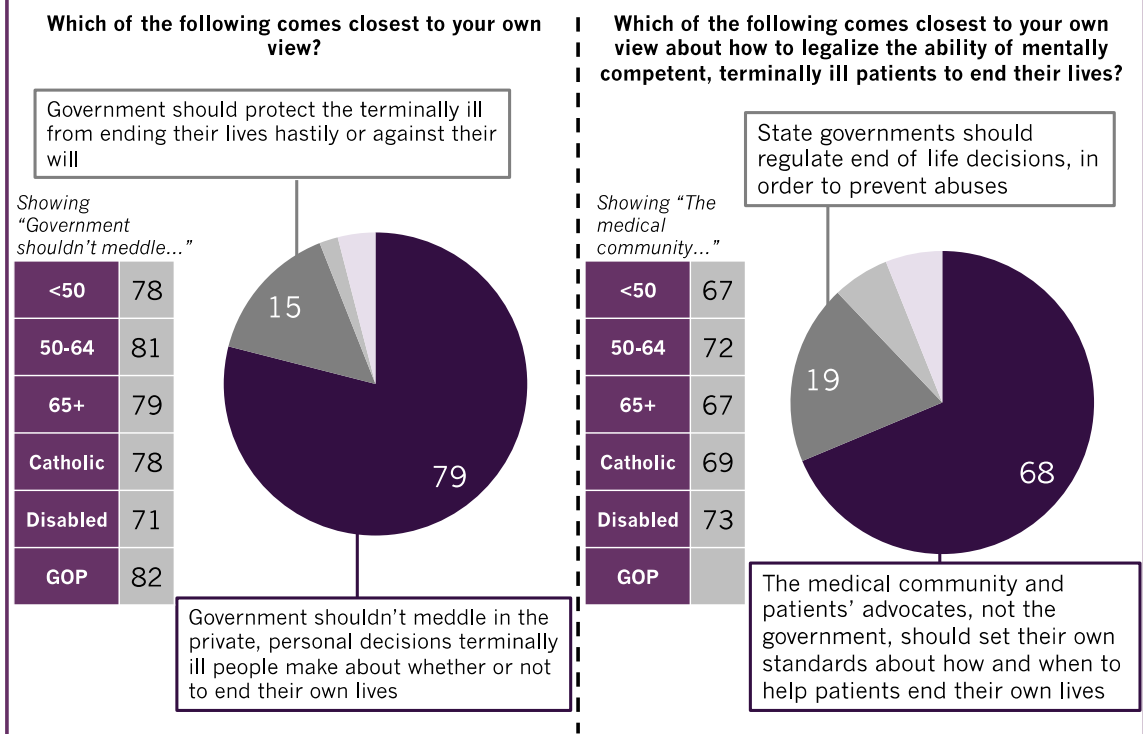
option to end their own lives should they become terminally ill. This choice transcends demographic groupings; majorities across age groups (<50: 72%, 50-64: 76%, 65+ 70%), and even Catholics (65%) and Republicans (63%) want this right for themselves. In our 2012 Massachusetts survey, slightly fewer (62%) said they would want a legal option for themselves.

Few see any role for government in end-of-life choices.

Given both broad and deep support for the right to death with dignity, it is no surprise few see a role here for government interference. Eight in ten (79%) do not think the government should “meddle with the private, personal decision of terminally ill patients to end their own lives.” This is consistent across all ages (<50: 78%, 50-64: 81%, 65+ 79%) and with Catholics (78%) and Republicans (82%), and is an increase from our 2012 survey (58%).

Two-thirds (68%) also agree that the medical community and patients’ advocates, not the government, should control how and when to help patients end their own lives. Again, this pattern holds across age groups (<50: 67%, 50-64: 72%, 65+: 67%), Catholics (69%) and Republicans (73%).

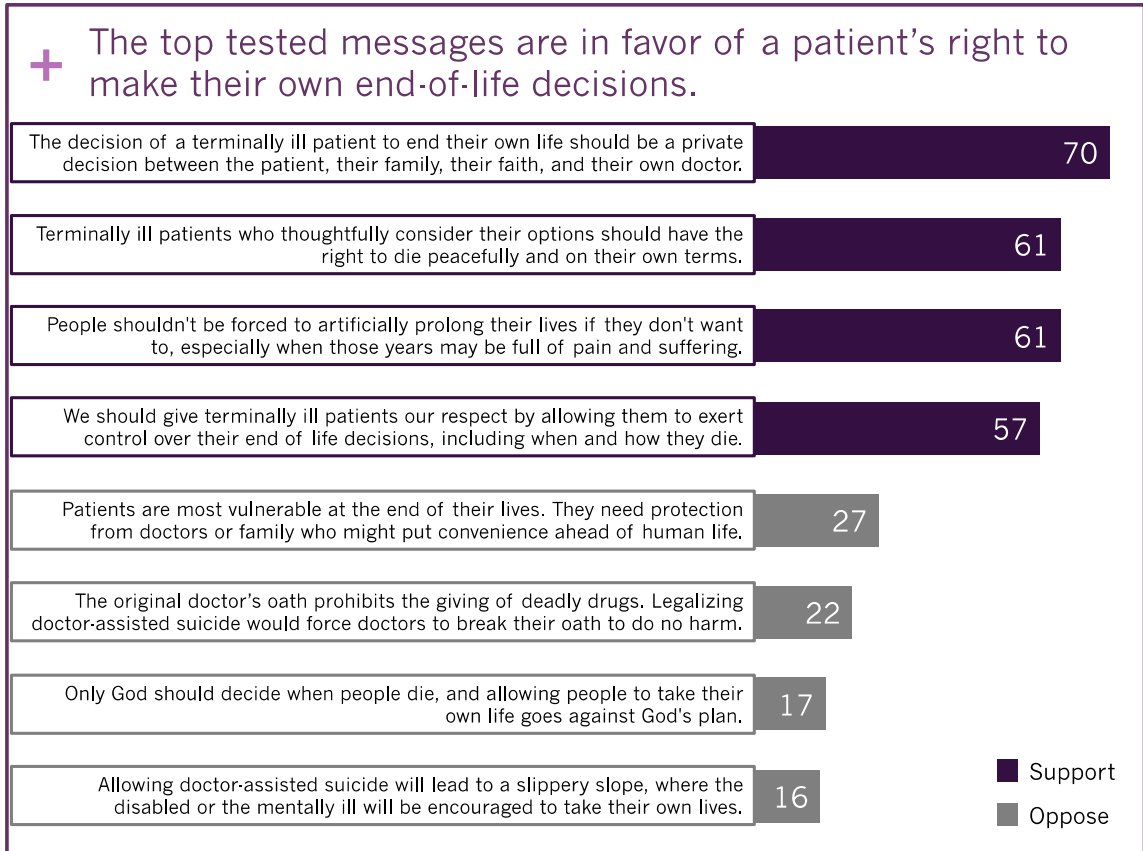
+ Voters do not want the government involved in their personal decision about whether or not to end their own lives.



Messages in support work better than messages against.

Digging beneath the surface confirms strong support for a right to death with dignity. A sizeable majority find every supporting message we tested "very convincing" (between 57% and 70%). The highest scoring message focuses on death with dignity being a "private decision between the patient, their family, their faith, and their doctor." Every message in favor of death with dignity works better than every message against it.

Opposing messages are far less convincing, with less than one-quarter of voters (between 16% and 27%) calling each "very convincing." Support for these opposition-related messages are stronger among Republicans and Catholics (33%, 32%, respectively for the top message), but even with these groups all supporters' messages trump all opponents' messages.



There are few differences on this issue between the disabled community and voters overall.

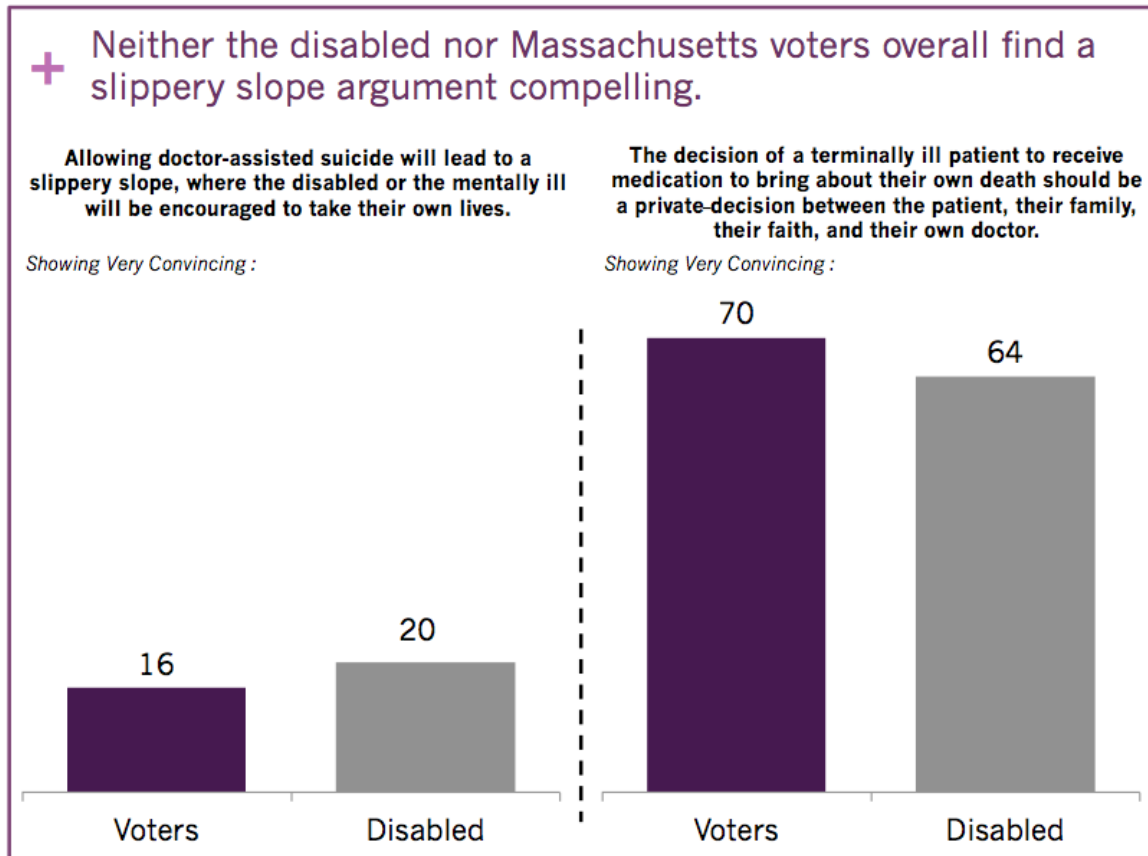
Disabled adults feel much like Massachusetts voters overall on this issue. They clearly support the right to a death with dignity, both broadly (75%) and for themselves (69%). A sizeable majority also supports the sample legislation (75%), even strongly (63%).

This community similarly sees no role for government. Seven in ten (71%) do not want the government involved in private, personal decisions about whether to end a life, and two-thirds (66%) think the medical community and patients’ advocates, not the government, should set these standards.

Finally, messages in support of allowing terminally ill patients to take their own lives test much higher among disabled voters (ranging from 59% - 64% “very convincing”) than messages against (ranging from 20% - 25% “very convincing”).

In fact, an opposition message specifically mentioning the disabled (“Allowing doctor-assisted suicide will lead to a slippery slope, where the disabled or the mentally ill will be encouraged to take their own lives”) is not particularly compelling with this group (20% very convincing).

(For our oversample of disabled adults, we used an 8-part question nearly identical to the census definition, asking respondents whether they have a disability, are blind or deaf, have difficulty with daily tasks, and other standard measures.)



Conclusion:

The right to a dignified death, broadly and personally, receives widespread support. Voters do not think the government should be involved in this decision, but think something so personal and private should be left to patients and their families. Death with dignity is a foundational, transcendent right across most subgroups we tested, including Catholics, Republicans, the disabled, and seniors.