



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.

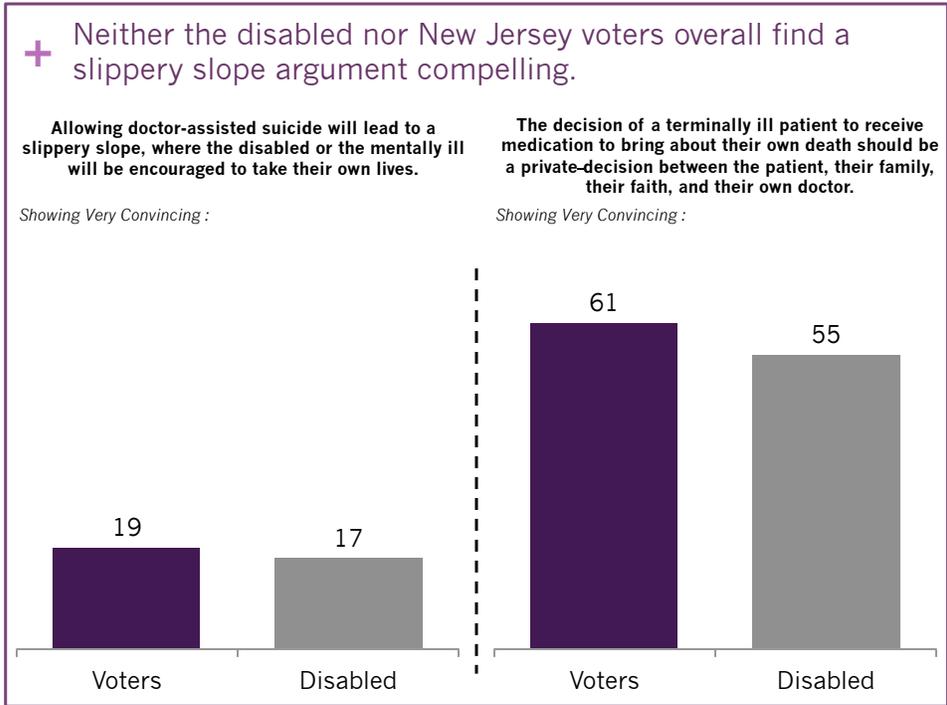
Purple Insights is the in-house opinion research group at Purple Strategies. Since its founding, Purple Insights has provided opinion research and strategic counsel to some of the most recognizable brands in the world. Purple Insights also created the PurplePoll to provide a bipartisan look at the critical 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,



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

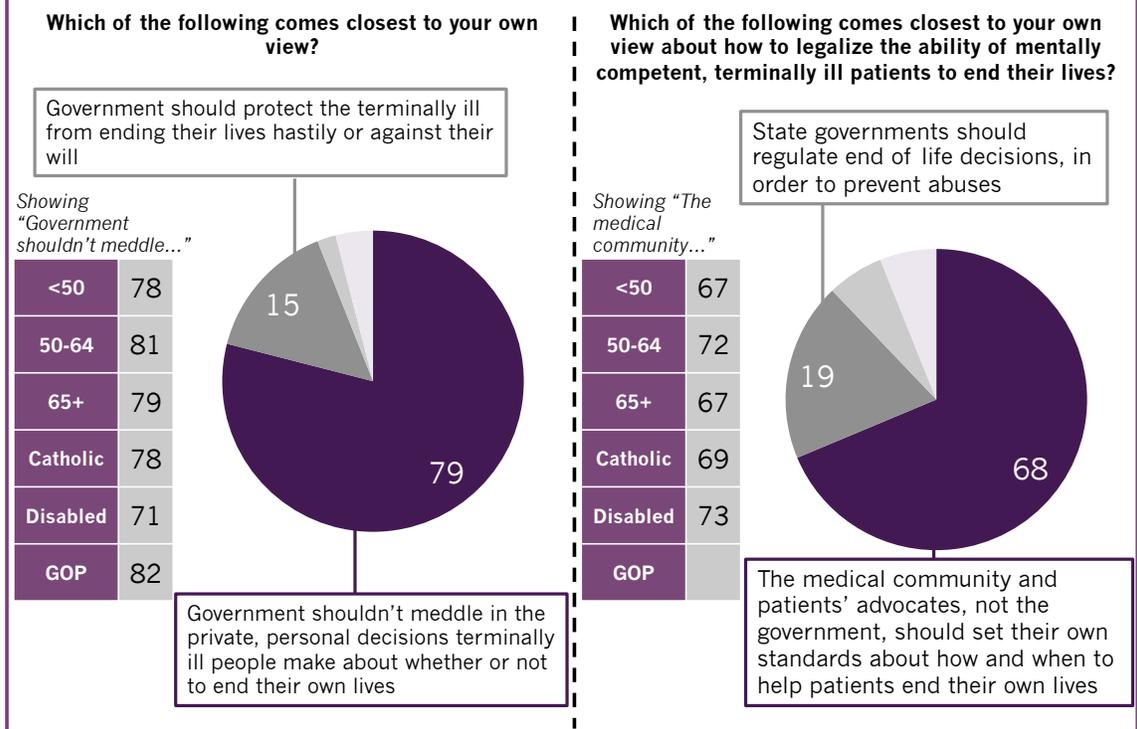
option to end their own lives should they become terminally ill. This choice transcends demographic groupings; majorities across age groups (<50: 72%, 50-64: 76%, 65+ 70%), and even Catholics (65%) and Republicans (63%) want this right for themselves. In our 2012 Massachusetts survey, slightly fewer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

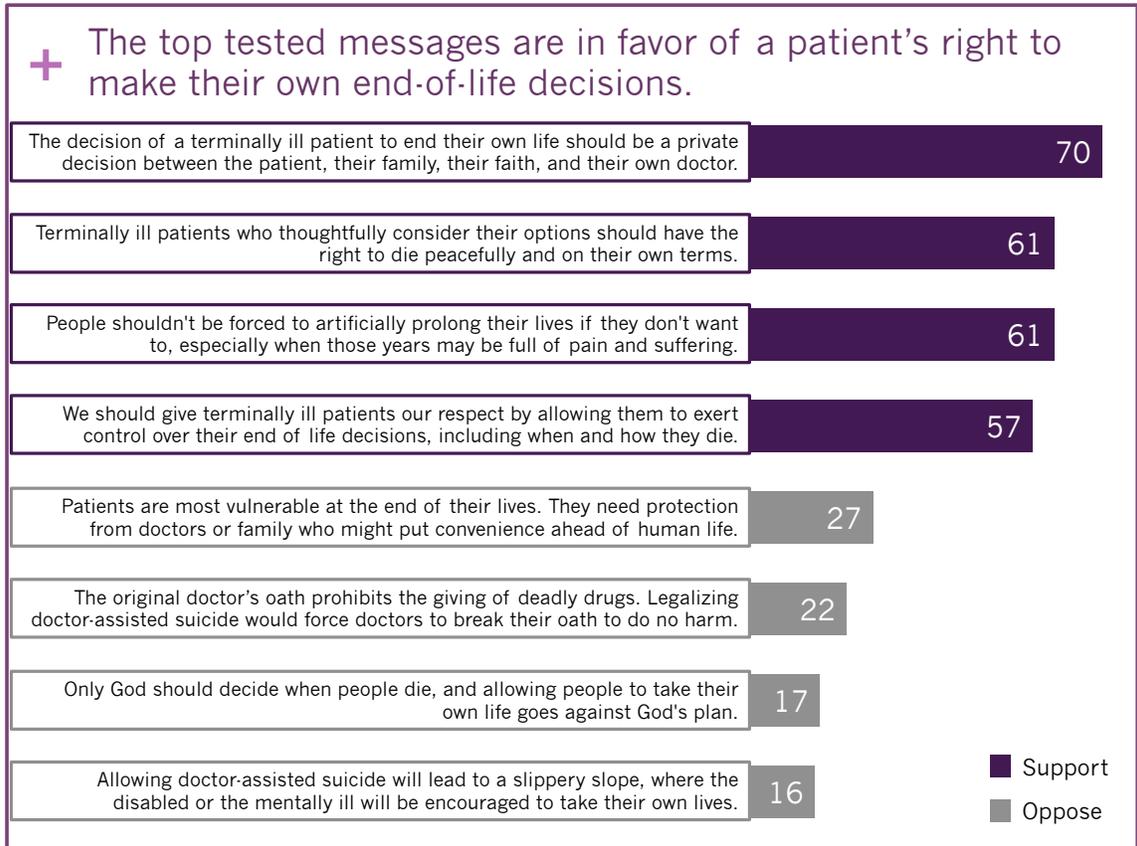
+ Voters do not want the government involved in their personal decision about whether or not to end their own lives.



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.

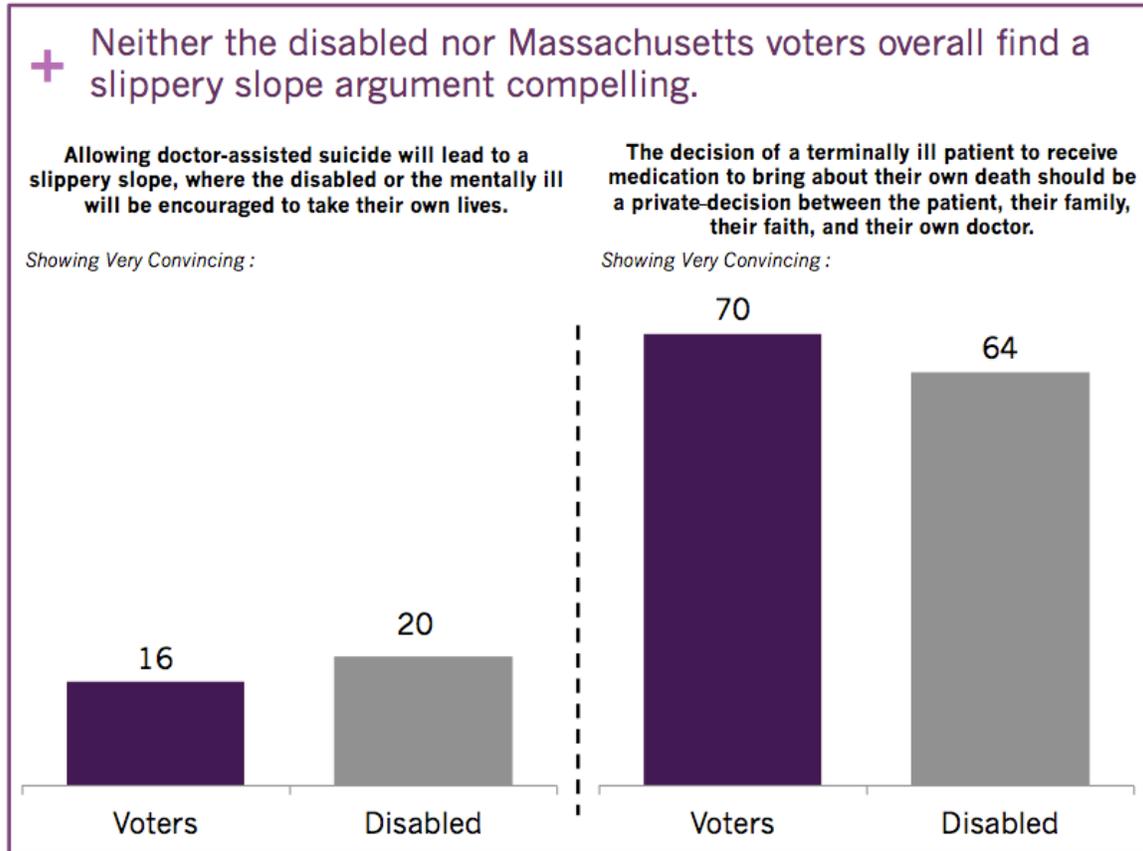
Disabled adults feel much like Massachusetts voters overall on this issue. They clearly support the right to a death with dignity, both broadly (75%) and for themselves (69%). A sizeable majority also supports the sample legislation (75%), even strongly (63%).

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.