



PASSING A LOCAL RESOLUTION

Volunteer Action Network Toolkit

Passing a Local Resolution

Local government resolutions, proclamations or declarations in support of advance care planning, end of life healthcare, and medical aid in dying send an important message about the values of a community and its citizens. Local resolutions also alert state legislators that other levels of government support medical aid in dying. Passing a local resolution can be an effective strategy to further state legislative efforts to authorize medical aid in dying.

What Is a Local Resolution?

A local resolution is an expression of support or recognition from an elected city or county body, such as a council, board, assembly or commission. Every city and county has different procedures regarding public statements, and they may have different names. Often, it is a mayor who issues such declarations — or signs or vetoes those passed by a city council. In some jurisdictions, a resolution is actually a binding commitment for city lawmakers. Regardless of the small differences, in every city- or county-elected body, there is a mechanism for the elected representatives to vote on and issue some kind of public declaration expressing their support or opposition to — or at least acknowledgment of — a matter of public importance or interest.

Resolutions and other declarations on medical aid in dying have been critical momentum-builders in states like California, during our campaign to pass a statewide law. They can also be enormously important to generate awareness in states where we are still building capacity and laying the foundation for future legislative efforts.

Do Your Research and Know the Rules

Not all local elected bodies or officials will be ready to take a stand publicly on medical aid in dying. Be sure to focus your efforts on the most impactful actions by doing some preliminary research before pursuing a local resolution. Identify your local jurisdiction's elected bodies, review the elected officials who serve on them and use this information to guide your decision on whether it is possible or beneficial to pass a local resolution.

Identify Your Local Jurisdictions' Leaders

Your local jurisdiction's elected bodies may include your town or city council, the county board of commissioners or supervisors, community councils, etc. Research the process by which your jurisdiction issues resolutions or proclamations.

» Does the body have any similar resolutions on the books?

- » How many council/board members are there?
- » What is the legislative process to pass a resolution?
 - Will a resolution have to go through a subcommittee before reaching the full body for a vote?
 - If so, which subcommittee is it and which members are on it?
 - How often do the subcommittees or councils meet?
 - How many votes are needed for a resolution to pass both the subcommittee and the full council or board?
 - Can the mayor, chair or president veto the resolution?
 - Is the mayor, chair or president a voting member of the body?

If these answers are not obvious after an online search, call the elected body's clerk or contact your locally elected official and ask what the procedures are for passing resolutions or proclamations.

Know the Elected Officials

Learn more about each of the elected officials whose vote is needed to pass the resolution. Make a spreadsheet to track your findings.

- » Name
- » Party affiliation (if none, research political leanings)
- » Priority issues
- » Voting record on health-related issues
- » Their role and standing on the board or commission
- » Past experience, media mentions and standing in the community
- » Personal story related to the issue
- » Policy experiences related to the issue and other related efforts

Make a Decision

Once you've collected the information you need, discuss the details with your Compassion & Choices field staff contact and have a conversation to determine whether the jurisdiction is a good option for pursuing a local resolution. *We recommend to only move forward with efforts where the resolution has a realistic, solid chance to succeed.*

In May 2015, the Los Angeles City Council unanimously passed a resolution

supporting medical aid-in-dying legislation. In October of that same year, the state Legislature approved the California End of Life Option Act.

Getting a Local Resolution Passed

Getting a local resolution passed is no small project, so consider recruiting additional volunteers. It's a community process that exists for a reason, and your willingness to participate in local politics is commended. Consider the following recommendations to organize a successful campaign to pass a local resolution.

As you work toward a public hearing, you may do some tabling, outreach or other base-building activities to build your grassroots team. You can easily create events, send invitations and manage RSVPs online using Mobilize.us. C&C has numerous templates for a variety of events for you to generate attendance to grow the local group. (Mobilize coming Fall 2025!)

Identify a Strategic Sponsor and Champion

Ideally, you will have an ally on the city council, county commission, township board, or even in the mayor. Perhaps your champion will be a retired elected official who knows the system and has some connections. Your champion should not be polarizing. They should have a proven record in the community and some credibility to speak to this issue. Compassion & Choices field staff can help with talking points, messaging and fact sheets for you, your champion and other supporters to use.

Draft Your Resolution

The precise wording of the resolution is flexible. Not every local council or government body is ready to publicly support full authorization of medical aid in dying, but they may be willing to make more general statements supporting end-of-life options, patient-directed end-of-life care and individual autonomy. An assortment of verbiage for a resolution is available in the **Resources section** at the end of this toolkit. There are also links to view actual resolutions from the cities of West Hollywood, California, and Cambridge, Massachusetts.

Contact Those Who Will Be Voting on Your Resolution

As you reach out to your local elected officials, you will find that medical aid in dying is not a traditional partisan issue. The idea that people who are dying need the option to end their suffering in the face of certain, imminent death resonates with people across the political

spectrum. Additionally, the idea that individuals should be able to make medical decisions for themselves, free from government intrusion, is fundamental to the Bill of Rights and basic freedoms of Americans. Your Compassion & Choices field staff contact can assist you by providing materials for legislative packets you can distribute to elected officials.

Be Available to Discuss the Issue With the Undecided and Persuadable

Some members of the body will likely oppose medical aid in dying; don't badger them. Respect their position, but try to clear up any misinformation or confusion. Be prepared to answer any clarifying questions asked by those who are undecided, and provide them further educational resources. If officials are leaning supportive, make sure to solidify their support by educating them further if possible and by providing or following up with any information they request. Do not feel you must persuade members of the body who express strong opposition. This can be counterproductive and may antagonize them further.

Plan for a Great Public Hearing

If you do have enough votes and decide to move forward, there will likely be a public hearing. Again, *we recommend to only continue with efforts where the resolution has a realistic chance to succeed*. Compassion & Choices has a detailed checklist to prepare you for a public hearing. Below is a general overview of key elements. Your Compassion & Choices field staff can help with additional tips and guidelines for a successful hearing, including writing a press release of the vote to share with the media and on our website.

- » Identify supportive constituents and organizations with a strong voice in the community to join your cause. The more people who are present and willing to testify in support of a resolution, the more likely it will pass.
- » Seek out opinion leaders with a stake in this issue such as doctors, faith leaders and hospice nurses who are in favor of this end-of-life option.
- » Work with your Compassion & Choices field staff to invite supporters from our database to attend the hearing.
- » Provide Compassion & Choices talking points and fact sheets to all of your speakers, including supportive members of the elected body.
- » Confirm that your speakers know the location and time of the hearing, and that they dress professionally.
- » Make sure your speakers know the rules for the hearing. There will likely be a limit on how long testimony can run, often just 1-2 minutes per speaker. Coach your speakers to practice and stay within that limit and on message.
- » Encourage supporters who can't attend the hearing to email or call the committee members and urge them to vote in favor of the resolution.

- » If you have identified supporters with particularly compelling stories, Compassion & Choices has resources and experts who can provide training and guidance on effective messaging and storytelling. A well-prepared storyteller can have a tremendous impact on persuading undecided voters. Invite them to share their story at www.compassionandchoices.org.
- » Be flexible and prepared for a hearing to be postponed or rescheduled.

TIP: Review additional best practices and ideas for public hearings in our Basic Lobbying Toolkit.

Follow Up and Get the Word Out

No matter the outcome, write thank you notes/emails to your champion, the members of the body and all the supporters for their time and support.

Be sure to work with Compassion & Choices in advance of the vote so that we can prepare and send a press release, publicize your win, get it on our website and help celebrate your success! If the effort is not successful, reassess with your champion and Compassion & Choices field staff for next steps.

Thank you

Once again, we're so grateful that you've chosen Compassion & Choices as a place to invest your time, energy and talent as a volunteer.

Additional resources and draft resolution language can be found on the following pages.

Resources

[Sedona, AZ City Council Resolution](#)

[American Ethical Union Resolution](#)

[Albuquerque, NM City Council Resolution](#)

Sample Draft Resolution:

(Each municipality can decide which statements to include or exclude.)

WHEREAS, [state] has long recognized that adult, terminally ill individuals have a fundamental right to determine their own medical treatment options as they near the end of life, free from coercion and in accordance with their own values, beliefs or personal preferences; and

WHEREAS, [local jurisdiction] recognizes that the choices a person makes at the end of life should be inalienably grounded in that individual person's own life experiences and values;

WHEREAS, advances in science and technology have created medical interventions that often prolong the dying process and increase suffering; and

WHEREAS, terminally ill patients may undergo pain, suffering and an irreversible reduction in their quality of life in their final days, and only the patient can determine whether their suffering is unbearable; and

WHEREAS, medical aid in dying is an option in a growing number of states (Oregon, Washington, Montana, Vermont, California, Colorado, Hawaii, New Jersey, New Mexico, Maine and the District of Columbia) for mentally capable, terminally ill adults with six months or less to live to get prescription medication they can decide to take peacefully to end unbearable suffering.

WHEREAS, participation in the practice of medical aid in dying by medical providers for terminally ill patients who request this end-of-life option respects and honors patients' values and priorities for their own death and puts the patient at the center of their own care; and

WHEREAS, medical aid in dying provides comfort and peace of mind to dying people by providing a safe, compassionate alternative to unnecessary pain and suffering regardless of whether they choose to utilize the law; and

WHEREAS, medical aid in dying has been safely and successfully implemented in Oregon for over 20 years, and with a combined 40-plus years of experience across nine states and the District of Columbia, not a single instance of abuse or coercion having been substantiated, and studies and reports of medical aid in dying practice in Oregon overwhelmingly demonstrate the compassion and safety of medical aid in dying in upholding a patient's right to self-determination; and

WHEREAS, medical aid in dying improves end-of-life care, and since the law was implemented in Oregon, the quality of end-of-life care, pain management and hospice services have all greatly improved; and

WHEREAS, over two decades of Oregon implementation data shows “no evidence of heightened risk for the elderly, women, the uninsured, people with low educational status, the poor, the physically disabled or chronically ill, minors, people with psychiatric illnesses including depression, or racial or ethnic minorities;” and

WHEREAS, well-respected national health and medical organizations recognize medical aid in dying as a legitimate end-of-life option for eligible adults facing an imminent death from a terminal illness, including The American Academy of Hospice and Palliative Medicine, The American Public Health Association, The American Medical Women's Association, The American Medical Student Association, The National Student Nursing Association, The American College of Legal Medicine, GLMA, Healthcare Professionals Advancing LGBT Equality, and the National Hispanic Council on Aging; and

WHEREAS, A [year conducted] public opinion poll by [name of poll] found [% supporting aid in dying] percent of [name of state] adults and [% supporting aid in dying] of the state's registered voters agree with the statement: [insert poll language here]; and **NOTE: this can be a national poll if no state-specific poll is available.**

WHEREAS, the availability of medical aid in dying provides an additional palliative care option to terminally ill individuals and allows them to live their remaining days to the fullest even if they ultimately choose not to utilize aid-in-dying medication, and

THEREFORE BE IT NOW RESOLVED, that [local jurisdiction] respects and supports the diversity of perspectives on end-of-life decisions; and

THEREFORE BE IT FURTHER RESOLVED, [local jurisdiction] recognizes the practice of medical aid in dying as a compassionate end-of-life healthcare option for terminally ill, mentally capable adults with six months or less to live; and

THEREFORE BE IT FURTHER RESOLVED, that [local jurisdiction] urges the [name of state] Legislature to enact medical aid-in-dying legislation that would afford safe harbor for physicians and other healthcare providers to provide comfort and peace of mind for terminally ill adults who may otherwise endure unnecessary pain and unbearable suffering; and

THEREFORE BE IT FURTHER RESOLVED, that this resolution be delivered and presented to the [name of state] Legislature and to the [office of the district attorney of the county of [name of county]].

TIP: Follow the format of other resolutions passed by the body you are working with. It is not necessary to include every “Whereas” or “Therefore” illustrated above. They are simply examples. It is fine to nuance your own language, specific to your state and jurisdiction. Most resolutions are not very long, so customize it for your local purposes.

Remember the Mission, Vision and Values of Compassion and Choices in your volunteer efforts.

Mission

Compassion & Choices improves care, expands options and empowers everyone to chart their end-of-life journey.

Vision

A society that affirms life, accepts the inevitability of death, embraces expanded options for compassionate dying and enables everyone to choose end-of-life care that reflects their values, priorities and beliefs.

Values

Compassionate in our commitment to dying patients having access to needed care at the end of life and being free of unwanted treatment, suffering or interference.

Respectful of the autonomy of individuals to decide what end-of-life options are best for them and their loved ones.

Courageous in our willingness to confront the toughest end-of-life health challenges, disrupt the broken status quo and protect an individual's right to self-determination.

Credible in all our education, advocacy and partnerships — our efforts are grounded in objective research and demonstrable facts.

Resilient in our capacity to respond to opportunities and threats in the movement, so that we can achieve our vision as quickly as possible.