Guidelines to Communicating with the Public about Medical Aid in Dying

As Digital Marketing Lead for Arizona End of Life Options (AZELO), I have made thousands of social media posts promoting medical aid in dying (MAID), and after making a post, have engaged in the discourse that followed. From these discussions, I have identified patterns in the types of responses generated by this topic. People fall somewhere on the continuum of acceptance to rejection of MAID with unsure or undecided in the middle. They are easy to place too, as their comments clearly indicate where they stand. When I first began this campaign on social media, I would write out each candid reply, but eventually, realizing that I was repeating myself frequently, I began recording their comments and my replies, and then I'd just copy and paste my reply to the appropriate comment or question since they all were pretty repetitive.

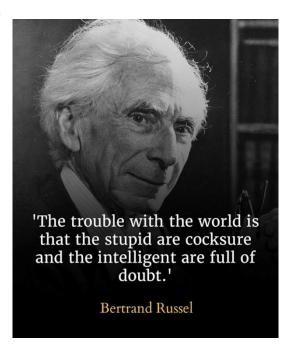
The following pages contains the comments that 98% of the public has made about my medical aid in dying posts and my chosen response to them. I think you'll see that when interacting with the public, you'll hear these same soundbites. These responses are in my language and my style; you should certainly devise your own responses that you are comfortable with, but a good rule of thumb is to keep them simple, factual, unemotional, and polite.

The three types of people I interacted with on social media and how I currently respond to them can be summed up here:

<u>Those who Agree with MAID:</u> These people are already on board, so I ask them to join our organization, explaining that we need them in order to get MAID legalized in AZ.

<u>Those who are Unsure:</u> These people have had little or no exposure to MAID, and don't know what it's about, or they have received secondhand information which is often incorrect. These people don't know the facts, so they are unsure about their stance on it. Give them the facts and encourage them to attend our webinars or read our material. They need education.

Those who are Opposed: These people just "know in their bones" that MAID is wrong and they will want to inform you of that. They frequently have been exposed to anti-MAID propaganda, are often emphatic, and will spew it back at you. I calmly attempt to correct them with the facts, but rarely feel listened to as their mind seems made up. Some even get angry. When you encounter this type of person, keep your cool and stay calm. Don't let their agitation affect you, as its just as easy to be amused at the human species trait of sticking to one's tribe and willing to fight when they think their tribal values are threatened. Smile and remember the famous philosopher, Bertrand Russel who in 1933, had a theory about what is wrong with the world today!



Initial Interaction

"I am advocating for a medical aid in dying law in Arizona." Smiling, confident, inviting.

"What's that?" Blank look; confused.

"Medical Aid in Dying is already legal in 10 states and the District of Columbia and allows a person with a six-month terminal prognosis to ingest a medication which will enable them to die in their sleep, if and when they decide to use it."

Yes, that's a mouthful. Even if they know what that is, I can see the churning in their brain, searching through their mental files for some reference to what I've just said.

"You know," I add, "the law in Oregon, where a person with a terminal illness, can ingest a medication to end their life? We want to pass this type of a law here in Arizona."

Then the "Ah, ha" moment arrives and I can see it on their face. Warm and welcoming, pinched with resentment, or anywhere in between. Be ready at this point to respond to any comments or questions they have.

Many of the people you interact with will have a story about a bad death or experience they want to share, and if allowed, will go on at length about it. I usually listen empathetically for a time, but since I have other people to attend to as well, I'll pretty quickly steer them to another topic (such as what our action teams are doing or our newest webinar "Let's Talk About Death".)

I've compiled real comments and questions from Arizonans who have responded to social media posts promoting MAID, just like the public you will encounter. Be ready, the majority of the people you interact with will mimic these same soundbites. I've put their comments/questions in bold, with my response following each.

To those who are Supportive

"I'm on Board! I agree!"

You are not alone! According to the 2022 Arizona Public Poll conducted by *OH Predictive Insights*, a majority of Arizona residents support Medical Aid in Dying – 60% of respondents to the January 2022 state-wide poll stated that they were supportive of Medical Aid in Dying

Since you believe Arizonans should have the right decide for themselves, please sign up to help pass our own MAID bill in Arizona. (Note: Have your phone or laptop handy so you can hand them the online registration form or fill it out for them) https://azendoflifeoptions.org/action-teams/

However, even though the bill to pass medical aid in dying in Arizona has been submitted to the AZ legislature each year, and despite the fact that the majority of Arizonans support this law, the Arizona legislators in

charge of bill submission have always refused to consider it. We need to let our leaders know that we want MAID legalized here like it is in 10 other states.

To stay informed of our progress, go to our website at https://azendoflifeoptions.org and subscribe to our newsletter.

"What is the MAID Definition?"

Should the proposed law be enacted in Arizona, it would be available to any adult resident of the state diagnosed with a terminal illness with six months or less to live, who is able to make informed decisions, and who is capable of ingesting the prescribed medication on their own. Once prescribed the medication, the patient decides when, and whether or not to take it.

The actual bill language can be found on our website at hppts://azendoflifeoptions.org under the *Proposed Law* tab.

"Where is MAID legal?"

10 jurisdictions in our country now have access to Medical Aid-in-Dying (that's over 72 million people) in California, Colorado, District of Columbia, Hawaii, Maine, New Jersey, New Mexico, Oregon, Vermont, and Washington. Why isn't Arizona on this list?

"Tell me about AZELO's webinars."

Offered twice monthly by two different presenters, <u>Dying in America: Care Options Near the End of Life</u> by Dr Tom Fitch and <u>Six Choices at the End of Life: Real Patients, Real Stories</u> by <u>Dwight Moore</u>, this hour-long session via zoom consists of a 30 minute powerpoint presentation explaining the six choices a person has at the end of life including Medical Aid in Dying in those states where it's legal. The second half of the session is for participants to ask questions regarding end-of-life issues.

Dr Dwight Moore is a PhD counseling psychologist who spends 6 months/year volunteering with the End of Life Washington group and has attended over 65 MAID deaths in Washington. He shares stories with an emphasis on the emotional side of death and dying.

Dr Tom Fitch is a retired Palliative Care and Oncology physician who has cared for thousands of terminally ill patients throughout his professional career. His presentation focuses largely on the medical aspects and statistics derived from the states where MAID is legal.

A third webinar, *Let's Talk About Death with Dwight Moore* is an hour-long session via zoom devoted to whatever is on participants' minds regarding death; their own or a loved one's. Maintaining a casual, non-judgmental atmosphere facilitated by Dwight, those attending are free to ask questions, ask for feedback, share the details of their own terminal illness, or express their grief.

"When a person dies using MAID, what is listed as the cause on the death certificate and is their life insurance jeopardized?"

The instructions for completing the death certificate are very specifically stipulated in the language of the MAID bill and the physician or coroner who is completing the death certificate must follow these guidelines: Whichever terminal illness the person is already dying from is what is listed as the cause of death on the death certificate and MAID is not mentioned. It goes to follow then, that life insurance is not be affected.

To those who are Undecided or Unsure

"Why not end my life with the stockpile of pills I already have at home?"

The rate of ER visits of overdose toxicity is just one reason not to attempt this. People have different rates of metabolism for drugs, and it's impossible to know how much a person would need of a drug to end their life. Most overdose attempts end up in the hospital, oftentimes alive, but with organ or brain damage. Another reason is that once a person attempts to take their life by suicide, the court will often take away the person's rights and place them in a supervised care setting where they will be prevented from causing any more self-harm.

"Doesn't this go against the Hippocratic Oath?"

Actually, I believe the Hippocratic Oath is about doing no harm. Allowing a dying person the option to exit this world on their own terms to avoid suffering doesn't seem to be about doing harm to the person, on the contrary, it is about compassion and alleviating suffering.

"Yes, but doctors make mistakes" or, "People who are not terminally ill will abuse MAID."

Eligibility is rather simple to figure. A person must have 6 months or less to live (Hospice has well-established criteria for this), be mentally competent, and able to self-administer the medication. If a person qualifies, it becomes their choice whether and when to use the medication. Those who are not terminally ill are not eligible thus, unable to abuse it.

"It just doesn't seem natural."

Is keeping a dying person alive on a ventilator natural? Are chemotherapy and radiation natural? Our medical technology has advanced to a state where people are long outliving our ability to enjoy our quality of life. If you intend to accept the cancer that God has graced you with and die naturally, that is your decision to make. But to condone a person who chooses to extend their life by using our advanced medical technology to a point where their mere existence causes suffering and then forbid them to end it in a peaceful and dignified way (again using advanced medical technology) seems completely hypocritical.

"I don't know if my doctor is supportive of this law."

You are right, according to the bill that is being proposed for Arizona, participation would be optional. The only way to know how your physician feels about it is to ask! You could say, "If I were to contract a terminal illness and then wanted to use medical aid in dying, would you support me if it becomes legal in Arizona?" If your doctor says they would not support your end-of-life choices, you might think about changing doctors now to one that is supportive of your choices.

"I don't know my church's stance on MAID."

The results from the 2022 OH Predictive Insights poll in Arizona show that people who identify as religious are overwhelmingly supportive of medical aid in dying. Among Roman Catholics, 52% are supportive, with only 18% opposed. 56% of Protestants are supportive, with just 18% opposed. Mormons? 59% supportive, 28% opposed, and Jewish are 79% supportive with just 5% opposed.

	Strongly	Somewhat	Total	Neutral	Somewhat	Strongly	Total	Unsure
	agree	agree	agree	or	opposed	opposed	opposed	
				Unsure				
Protestant	28	28	56	19	6	12	18	7
Roman	28	24	52	22	7	11	18	8
Catholic								
Mormon	32	27	59	3	19	9	28	10
Jewish	49	30	79	8	1	4	5	7
Muslim	52	18	70	29	0	0	0	0
Buddhist	51	0	51	49	0	0	0	0
Hindu	59	36	95	0	0	5	5	0

Methodists generally accept the individual's freedom of conscience to determine the means and timing of death. Some regional conferences have endorsed the legalization of medical aid in dying.

Unitarian Universalists support death with dignity. In its 1988 General Resolution, the Unitarian Universalist Association resolved to advocate for "the right to self-determination in dying" and to "support legislation that will create legal protection for the right to die with dignity, in accordance with one's own choice."

Many United Church of Christ clergy have been supportive of right-to-die legislation, and the UCC continues to encourage open, inclusive conversations about all aspects of death and dying.

The American Baptists have adopted the policy "to advocate within the medical community for increased emphasis on the caring goals of medicine which preserve the dignity and minimize the suffering of the individual and respect personal choice for end of life care."

A 1992 statement on end-of-life matters from the Evangelical Lutheran Church of America Council supports physician-assisted death: "Health care professionals are not required to use all available medical treatment in all circumstances. Medical treatment may be limited in some instances, and death allowed to occur."

"I'm not sure how I feel about it, so if it was on a ballot, I would vote against it."

The Ninth Circuit Court of Appeals made this statement in 1996:

"Those who believe strongly that death must come without physician assistance should be free to follow that creed, whether they be doctors or patients. But they should not be free to force their views, their religious convictions, or their philosophies on all other members of a democratic society, nor should they be free to compel those whose values differ from theirs to die painful, protracted, and agonizing deaths."

Simply put, the court believes people should be free to view MAID as the wrong choice for *themselves*, and not to use it, but they shouldn't prevent others from accessing this law. This includes voting against it, or proselytizing their views to others.

To those who are Opposed (general)

"It's a slippery slope."

Actually, there have been no reported cases of misuse of the medications during the 25 years Oregon's law has been in effect nor during the 13 years that Washington state's law has been in effect.

Or

Data and studies show that the safeguards in these laws work as intended, protecting patients and preventing misuse. No evidence of coercion or abuse has been documented since the first such law took effect in 1997.

"It's interfering with Nature's Course."

Medical professionals call pneumonia, "the old man's friend," yet people have no qualms about interfering with "Nature's Course" when they want antibiotics or a ventilator to keep the poor man alive as long as possible. Then when he's suffering miserably and wants to end it they say it's only God who can take life. Medical Aid in Dying is a law for individuals to decide what is best for them.

"Nope, I will never support this. It goes against my beliefs."

MAID may conflict with your beliefs and if that is the case you don't have to use the law. But it isn't about you, it's about people suffering with a terminal illness. Having compassion for these others, means that you allow them to *make their own decisions about what is right for them*, without your judgement or bias.

"It's suicide."

Professional organizations like the American Psychological Association, the American Public Health Association, and the American Association of Suicidology draw sharp distinctions between medical aid in dying and suicide. Suicides are often violent, traumatic, and shocking. Medical aid in dying is specifically intended to be peaceful and humane. There is a world of difference.

"It's assisted suicide."

It's not suicide and it's not assisted. It's a legal choice that a dying individual is given about their own body, and their own death. I will want that option if I become terminal, whether or not I choose to use it. Why wouldn't you?

"It's physician assisted suicide."

The term "physician-assisted suicide" has been used in the past as if it were a synonym for medical aid in dying, but the terms are not at all equivalent. "Physician-assisted suicide" is used in a negative and biased way by opposition groups in an attempt to stigmatize the issue, and is sometimes still used in media reports because reporters may not be aware that the term is not accurate.

"It's euthanasia."

Euthanasia is when someone injects another person with lethal medication. Medical aid in dying is when a dying person self-ingests a medication to hasten death.

"Pass this bill now and before you know it there will be death panels deciding who lives and who dies."

Medical aid in dying laws do not require anyone, whether patient or health care provider, to participate. No panel would have the power to make such a decision under this law.

"MAID is unnecessary, this is what Palliative Care and Hospice are for."

Yes, in the majority of cases, Palliative Care and Hospice are successful in managing pain and suffering at the end of life, and according to the state of Oregon's annual vital statistics report, just 0.59% of deaths in 2021 were attributed to MAID. These are the people who need the option of MAID, as their symptoms are not adequately managed by Palliative Care and Hospice.

To those who are Opposed (religious)

"It's suicide, and that's a sin against God. Only God is in control of whether we live or die."

Think of this analogy:

Suicide is when I intentionally jump off a tall building, which results in my death. That is taking control away from God and doing my own thing.

MAID is when the building is burning beneath me and I jump to my death before the fire reaches my floor (think Twin Towers). Between now and when the fire reaches my floor (and certain death, but filled with all sorts of unpleasant uncertainties such as suffering) -- I get to CHOOSE to jump out the window instead of burning to death. I know that jumping will be an instantaneous death but without the suffering therefore more manageable for me and my family.

This is not me taking the control away from God but instead exercising my free choice to make the inevitable less painful for all involved.

"It's goes against religion."

Medical aid in dying does not go against religion, it's actually an embrace of religious freedom. Dying is one of the most spiritual events of one's life. People of all faiths should be able to choose for themselves the circumstances under which they pass from this world.

To those who are Opposed (political)

"I don't want to have to pay for this and as a taxpayer I would end up contributing to something I don't believe in."

MAID is about personal choice, not money, neither is it "funded" by tax dollars. Patients pay for the medication themselves & doctors charge their normal fees for consultation. End-of-life conversations with one's physician is an approved Medicare charge. Some doctors choose not to participate in MAID, however, and when that's the case, there will be a list of volunteer doctors who will be willing to fill in if needed.

"MAID is a failed policy that's being pushed by the left."

Actually, it's more of a belief held by the majority of Americans. That is, 73% of Americans agree that when a person has a disease that cannot be cured, doctors should be allowed by law to end the patient's life by some painless means if the patient and his or her family request it." (Gallup Poll, June 2017) (Note that the wording in this poll is incorrect. Our Arizona bill is not worded this way; doctors will not be ending patients' lives. Despite the question being worded in this manner, American's were still in favor of the concept.)

And, according to the 2022 Arizona Public Poll, only 13% of Arizona residents oppose Medical Aid in Dying and 2.5 times as many Republicans support it as oppose it.

"The Second Amendment is a better solution than MAID."

No, the 2nd amendment is not better. It is violent, messy, and traumatic for families. It is also sometimes botched. A gun shot through the cheek or jaw that doesn't kill but maims horribly is not the solution.

~~~

The above comments and questions have come from Arizona residents responding to social media posts made during the fall of 2021. A benefit of responding via social media, is that I had time to formulate each response and to include documented evidence to support my message. This is not as easy when conversing in person, so being prepared in advance with the facts is important. I believe most of the comments you receive from people will be included in this list in some manner. Use it as a reference, and remember, the responses here are in my language and in my style; you should certainly come up with your own language that you are comfortable with. Again, a good rule of thumb is to keep your message simple, factual, unemotional, and polite.

As for the opposed, if after listening respectfully to their opinion, and correcting any misconceptions they may have had, thank them for talking about it with you. You might end the exchange by pointing out that, "the beauty of this law is that no one need use it if it conflicts with their beliefs." Agreeing to disagree is sometimes the best outcome.

Marie MacWhyte, Digital Marketing Lead for AZELO Arizona End-of-Life Options

