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executive summary

By Toni Broaddus

In the spring of 2014, Compassion & Choices launched a five-year campaign to make medical aid in dying an open and accessible option for terminally ill adults in California. Despite overwhelming public support (our July 2015 poll showed 69% support by California voters), at least four legislative attempts and two ballot efforts to pass a death-with-dignity law had failed over the past three decades. We knew we needed to start organizing. By October, we had a campaign team of 12 people and 10 times as many active volunteers. We visited district attorneys, county supervisors and city councilmembers to explore opportunities for local policy changes or resolutions. We identified supporters at health fairs, farmers markets and other community events. We launched a Spanish-language media campaign. We also invested in messaging research to understand how voters in our state think and talk about dying in their families and communities.

And then a California woman named Brittany Maynard told her story. The whole conversation about aid in dying changed after that.

Californians responded with their own stories, with their gratitude to Brittany, and with their time and money to change the law in California. We still thought we might have to go to the ballot – but we had savvy legislative authors, a top-notch team of lobbyists, and passionate supporters who showed up to legislative hearings in Sacramento, to rallies across the state, and in the offices of their elected representatives. Brittany’s story resonated deeply with the public, and C&C was able to leverage the mandate and momentum she created to pass a law that has been a long time coming in our state.

Our five-year goal to pass a law in California was achieved in just one year. That still seems amazing – but C&C was able to bring the strategic and financial resources necessary, while our supporters, volunteers, and especially our storytellers brought the magic. Together we made history.

In October 2014, a six-minute video featuring Brittany Maynard transformed the conversation about aid in dying. Americans in every state answered her call, and legislators responded. The progress has been breathtaking, but there is more to do.

Since Compassion & Choices’ partnership with Brittany, California made history by passing an aid-in-dying law after multiple attempts over 30 years.

From New York and New Jersey to Colorado, we recruited volunteers to testify, speak up at town halls and put a human face on legislation to show the positive impact expanding end-of-life care will have on families. Their efforts have resulted in more than 200 lawmakers signing on as cosponsors of bills in more than half the states and the District of Columbia in 2015.

“My dream is that every terminally ill American has access to the choice to die on their own terms with dignity.”

– Brittany Maynard
Our California campaign story

In the spring of 2014, Compassion & Choices launched a five-year plan to authorize the medical option of aid in dying to relieve unbearable suffering for terminally ill adults in California.

Our field and political work started by persuading city and county governments throughout the state to pass resolutions supporting medical aid in dying.

We also gathered signatures of support at local farmers markets, fairs, churches and community centers. We met with district attorneys to urge them to de-prioritize the prosecution of doctors and family members who provide aid-in-dying medication to mentally capable, terminally ill adults who request it.

With the help of the messaging team, we moved to the term “medical aid-in-dying option” to describe the practice. This shift helped us persuade lawmakers and voters on the fence about this issue that it was not a debate over a right, but an option that every Californian should have, whether they want to exercise it or not.

We launched a storytelling program to find real-life experiences that compellingly illustrated the need for aid in dying in California. We also commenced a first-time Spanish-language media campaign to garner Latino support. These targeted efforts heavily influenced the creation of a broad coalition of over 100 national, statewide and local organizations in support of the End of Life Option Act.

We hired three lobbying firms to help secure the votes needed to pass the bill through the Legislature.

The End of Life Option Act was introduced in the Senate in January 2015 by Senators Bill Monning and Lois Wolk. It cleared the first committee in March, followed by two additional committees and a full Senate vote. The majority of Democratic senators supported the legislation, but no Republican senators voted for it.

At each hearing, Compassion & Choices provided emotional testimonies from people like Dan Diaz, Brittany’s widower; Debbie Ziegler, her mother; and terminally ill Californians facing painful deaths.

We also provided expert testimony from physicians and religious leaders.

In May, two weeks before the Senate vote in June, the California Medical Association neutralized their position on our bill, after nearly 30 years of its opposition had doomed prior efforts to authorize medical aid in dying in the state.

We also sponsored a bipartisan poll released in late June after the Senate vote showing nearly 7 in 10 California voters (69%) supported the bill, including 70 percent of Latinos and 60 percent of Catholics.

The Catholic Archbishop of Los Angeles sent letters to legislators in the summer urging them to oppose our bill. Our response:

Hundreds of dying Californians and their families, religious leaders and civil rights activists rallied outside the offices of legislators throughout the state, targeting those who remained on the fence about the bill.

We experienced our biggest challenge in July when our bill stalled in the Assembly Health Committee. The news reported our movement dead. For weeks we kept quiet as we strategized and considered all options for reviving the bill.

Our efforts paid off in August when the End of Life Option Act by Assemblymember Susan Talamantes Eggman was reintroduced as ABX 2-15 during Gov. Jerry Brown’s extraordinary session on health care.

Our field efforts also continued. By the end of the campaign the political and field teams conducted more than 1,300 legislative visits, held 300 educational events all over the state, nearly quadrupled our supporters from 25,000 to 95,000, trained over 1,000 volunteers and deployed them through 26 action teams statewide.

We launched a California Won’t Wait campaign featuring religious leaders and terminally ill Californians as our primary spokespersons to exert pressure on lawmakers to pass the legislation during the special session.

Our bill cleared the Assembly Special Committee on Public Health and Developmental Services, followed by two additional committees and a full Assembly vote. The bill then moved to the Senate, where it passed for the second time.

Our bill landed on Governor Jerry Brown’s desk two weeks later.

We did everything we could think of to enact the legislation into law. An aggressive field push continued, including directing thousands of letters, emails, phone calls and tweets to the governor. We held rallies outside the governor’s offices in Sacramento and Los Angeles to urge signing of the bill. We even mobilized our president, Barbara Coombs Lee, to urge Nobel Prize winner Archbishop Desmond Tutu to urge Gov. Brown to sign the bill.

And Oct. 5, 2015, the governor did, making it our biggest victory since we passed Oregon’s Death With Dignity Act 20 years ago.

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Superior Court judge dismisses suit on behalf of Christy O’Donnell, Elizabeth Wallner, Wolf Breiman and Dr. Lynn Cederquist by saying the decision should be in the hands of the Legislature.

Assembleymember Susan Talamantes Eggman reintroduces the End of Life Option Act as ABX 2-15 during Gov. Jerry Brown’s extraordinary session on health care.

New poll by the University of California, Berkeley shows three out of four Californians support the End of Life Option Act.
We launched a Spanish-language media campaign by working with Brittany’s Catholic husband, Dan Diaz, to garner support for medical aid-in-dying legislation from Latinos, the nation’s fastest-growing ethnic group and 16 percent of its population. This targeted effort was critical for the passage of California’s End of Life Option Act.

With guidance from our research, we created emotional messaging to reach voters and inoculate them against the fear-based misinformation campaigns from our opponents.

We successfully pitched stories for multiple interviews with national Spanish-language media giants, including La Opinion (the leading Spanish-language daily newspaper in the United States), Telemundo and Univision, which has higher ratings than ABC, NBC, CBS and FOX networks in key demographic groups.

We also published editorials authored by Dan Diaz and Dr. Robert Olvera, a Catholic, Harvard-trained East Los Angeles physician whose daughter suffered horribly before her death at age 25 from leukemia. We also told the stories of Latino ministers who counseled terminally ill people in their final days.

Our efforts also involved giving editorial board meeting presentations on the issue that led to endorsements of the End of Life Option Act by various Spanish-language publications, including La Opinion, Hoy and Latino California.

In addition, we pitched stories to Univision anchor Jorge Ramos, an Emmy-award-winning journalist dubbed the “Latino Walter Cronkite” and the voice of 11.6 million Latino immigrants in the United States. Ramos publically endorsed our bill after an interview with Dan Diaz.

Our team also promoted the endorsement of the End of Life Option Act from Latino labor leader and civil rights icon Dolores Huerta. She joined other prominent Latinos we reached out to in support of the bill, including actor, director and activist Edward James Olmos.

At the end of our campaign, Compassion & Choices reached millions of Latino readers and viewers via Spanish-language media outlets that were once reluctant to cover our issue. In total, we generated more than 32,000 new stories, including over 300 columns, editorials and opinion pieces.

California newspapers, including La Opinion, wrote editorials urging the legislature to pass the End of Life Option Act from Latino labor leader and civil rights icon Dolores Huerta. She joined other prominent Latinos we reached out to in support of the bill, including actor, director and activist Edward James Olmos.

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We met Anita Freeman in August 2014, and we produced a video that outlined her sister’s struggles during the five agonizing weeks before she died from lung, liver and spinal cancer a few months earlier. Her heartbreaking story caught the attention of Los Angeles Times’ Steve Lopez, who wrote a column headlined “Death with dignity movement springs back to life in California.”

When Brittany died, Californians living with a terminal disease or who had suffered watching loved ones die in pain came forward to talk about aid in dying more openly than ever before.
**September**

Bill clears Assembly Public Health and Developmental Services on bipartisan vote of 10-3.

The Assembly Committee on Finance paving the way for full Assembly vote by approving the California bill by a vote of 5-3.

CA Assembly passes first medical aid-in-dying bill in state’s history by a vote of 44-35.

Dr. Robert Olivera speaks at a rally outside a legislator’s office in Southern California.

**October**


Governor Brown hands over a legislator’s office in Southern California.

HONORING THEIR WIVES’ LIVES AND DEATHS

Dan Diaz and Harlan Seymour

**Doctors for Dignity**

We launched the California Doctors for Dignity program to recruit physicians, other healthcare professionals and associations that support the End of Life Option campaign.

For months, doctors in the Golden State organized and advocated for the legislation before the California Medical Association (CMA). These efforts paid off in May when the powerful CMA dropped its historic opposition of the End of Life Option Act after 28 years.

Our Doctors for Dignity initiative helps educate and engage doctors, healthcare professionals and associations in support of aid in dying. In California, doctors focused efforts on the historic change of position from the California Medical Association. To date, Compassion & Choices has 148 doctors and 115 healthcare professionals who are part of Doctors for Dignity, as well as 18 national and state healthcare organizations that endorsed California’s End of Life Option Act.

“We believe it is up to the individual physician and their patient to decide voluntarily whether the End of Life Option Act is something in which they want to engage. Protecting that physician-patient relationship is essential.”

Luther F. Cobb, M.D.
President
California Medical Association

These two men married extraordinary women who died too young from cancer. Both their wives were brilliant, beautiful Californians who made deeply personal videos viewed by millions of Americans. And each woman made a request of her husband that they were proud to fulfill: to hold them as they died and to take up their selfless battles to spare other Americans similar suffering.

In August of 2012, Harlan married Jennifer Glass. Just before the New Year, he noticed the small lump on Jennifer’s neck, which revealed the lung cancer that would take her in less than three years. Jennifer, a public relations professional who believed in the power of stories, chose to share her life with cancer in order to live purposefully and give strength to others facing a similar diagnosis.

Dan married Brittany Maynard in September of 2012. Just over a year later, they learned the headaches she’d been suffering were caused by a brain tumor. After an eight-hour brain surgery and the tumor’s return, Brittany came to a heartbreaking realization: No treatment could save her life, and the side effects of potentially life-prolonging treatments would rob her of any quality of life. Brittany researched her options and asked her family to move with her to Oregon so she could access aid in dying, which is authorized by the state’s Death With Dignity Act. Once settled in Portland, Brittany contacted Compassion & Choices and offered to help.

In August of 2014, she recorded what became a viral video about her decision and her belief in end-of-life options. At the same time, Jennifer, who had also partnered with C&C, was celebrating a full year with no cancer growth after successful treatments. The next few months were busy.

As similar as their stories are, their wives had very different deaths. As her pain became unbearable, Jennifer did not have a peaceful death. As her pain became unbearable, she opted for palliative sedation, which some say is a good alternative to aid in dying. But for Jennifer, it was not, and she died after five traumatic days.

Jennifer always said that having the option of medical aid in dying might not make her fearless, but it would help her to fear less. Brittany said having it gave her a sense of peace in the face of fear and uncertainty.

Today, their widowers continue advocating for end-of-life options. They are also encouraged knowing half the states have now taken up similar death-with-dignity bills.

Both men continue their wives’ work— to pass laws that leave end-of-life decisions where they belong, between terminally ill individuals and their doctors.

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Merla Zellerbach, civic leader, author, philanthropist, TV personality and columnist, died of pancreatic cancer Dec. 26, 2014. Merla, 82, was an exceptional woman who devoted a lifetime to civic leadership. She was a dedicated supporter of Compassion & Choices. "Doctors have it hammered into their heads to do no harm," she told the San Francisco Chronicle a few days before her death. "But it’s pretty harmful to let people suffer."

-MERLA ZELLERBACH

Christy’s courageous journey

Christy O’Donnell’s doctors may have put an expiration date on her life, but that did not stop her from fighting for other terminally ill Californians like herself. So the single mother, civil rights attorney and former LAPD sergeant with lung, brain, liver, rib and spine cancer embarked on a journey with Compassion & Choices to help bring end-of-life options to California. "But as I am dying, I feel I have to speak out so people can understand that California’s current laws will prevent my daughter, Bailey, from sitting at my bedside surrounded by our support system as I take my last breath in our home," she said. O’Donnell was diagnosed with lung cancer in 2014. She soon learned that the cancer was aggressive. Christy’s doctors said she would likely die painfully within the next few months from the rapidly spreading disease. Despite her excruciating headaches, debilitating nausea, and pain in her head and neck, Christy traveled to Sacramento to testify in support of the bill before the Senate and the Assembly, fought a lawsuit, spoke to reporters, rallied legislators’ offices in the hot sun, and even made a public video plea to Gov. Jerry Brown to sign the End of Life Option Act. Christy died on February 6, 2016. She was unable to use the option provided by this law, which had not yet gone into effect at the time of her death. She knew this was likely, but she was still proud to make a difference. "I’m overjoyed for all the terminally ill in California, who can now relax knowing they finally have the choice of aid in dying as one of their end-of-life options," she said in October. "Governor Brown, you have made me a proud Californian today knowing I live in a state where our governor acts in accordance with what his people need, want and deserve. In this case, a peaceful and pain-free death with their family."
Compassion & Choices has now launched a bilingual campaign to educate terminally ill Californians, families and medical providers about the benefits and requirements of the End of Life Option Act. We are partnering with medical centers, hospice facilities, community health centers, nonprofit organizations and our vast network of volunteers to conduct community trainings to ensure that all Californians know about medical aid in dying as one end-of-life option. Terminally ill Californians and their families, physicians and pharmacists can call a free hotline, 800-893-4548, to access bilingual information on the End of Life Option Act. Through this hotline, practicing physicians will be able to access our free Doc2Doc consultation program to speak to doctors with years of experience in end-of-life care, including medical aid in dying. Pharmacists will also be able to access experienced pharmacists through the Pharmacist2Pharmacist consultation program.

Implemented in 1997, Oregon’s first-in-the-nation law authorizing death with dignity has been rigorously observed and documented by scientists, journalists and public health officials. The resulting record offers important insight into who uses aid in dying and how it works. Importantly, it also shows that none of the fears opponents of the law have raised over the years have materialized.

WHO THINKS ABOUT IT:
One in six dying Oregonians have considered requesting the aid-in-dying medication seriously enough to discuss it with their families.

WHO ASKS FOR IT:
According to physicians prescribing aid-in-dying medication, the top three concerns their terminally ill patients cite for requesting it are loss of autonomy, inability to participate in activities that make life enjoyable and loss of dignity.

WHO USES IT:
- Since 1997, Oregon doctors have written 1,173 aid-in-dying prescriptions. Of these, 752 patients have used the medication to shorten their dying process and 421 have chosen not to use it.
- 98 percent of Oregonians who receive and consume the medication are enrolled in hospice; more than 98 percent are covered by Medicare, Medicaid or private insurance.
- Aid in dying is completely voluntary for both doctors and patients; doctors may decline the request, and patients may rescind it. And of course, eligible patients may receive the prescription and never consume it since it is a self-administered medication.
- There has not been a single reported incident of abuse or coercion under Oregon’s death-with-dignity law.
- End-of-life care overall has improved in Oregon since the law’s implementation, in large part due to the dialogue the death-with-dignity law encourages and mandates between physicians and patients. Hospice referrals are up, as is the use of morphine for palliative care. Oregon now has the lowest rate of in-hospital deaths and the highest rate of at-home deaths in the nation.
glossary of terms

Decide what you want, and tell your loved ones today. Use these definitions to make sure everyone is on the same page. For more end-of-life planning resources visit CompassionAndChoices.org.

**Advance directive** – A legal document comprised of a “living will” and a “healthcare durable power of attorney.” In a living will people outline their end-of-life medical wishes in the event they are unable to communicate. The durable power of attorney allows people who are unable to communicate to appoint another person, called a healthcare agent or proxy, to make medical decisions on their behalf.

**Palliative care** – Sometimes called “comfort care,” palliative care is aimed at relieving a person’s pain through medication, physical therapy, spiritual counseling or other methods, and with the understanding that the treatment is not intended to cure or prolong the person’s life.

**Aid in dying** – The process that allows a mentally capable, terminally ill adult to legally request a prescription for a medication from their physician that they can decide to take to end their suffering and die peacefully. The medication must be self-administered.

**DNR** – Stands for “do not resuscitate,” a medical order documenting an individual’s request (made while that person is able and conscious, or by that person’s healthcare proxy if he or she is not) that no measures be taken to resuscitate them should their heart or breathing stop.

**Palliative sedation** – The continuous administration of medication to relieve severe, intractable symptoms that cannot be controlled while the person is conscious. This state is maintained until death occurs.

**Voluntary stopping of eating and drinking (VSED)** – The conscious refusal to accept fluids or nutrition. This procedure is gaining in popularity and acceptance as a method of ending prolonged suffering.

How to access the End of Life Option Act in California.

To qualify for medical aid in dying under California’s law, among other requirements, an individual must be:

- A terminally ill adult with a prognosis of six months or less to live
- Mentally capable of making healthcare decisions
- Making an informed decision, which includes being given information about all end-of-life options
- Capable of self-administering and ingesting the aid-in-dying medication

Talk to your medical providers now about the qualification requirements to ensure that this end-of-life care option is available to you later if you want it.

For more information on the End of Life Option Act or to get involved, visit EndofLifeOption.org, CompassionAndChoices.org/California or call our free bilingual hotline 800.893.4548