Access to Care Through Telehealth pg. 5

Celebrating Life While Planning for Death pg. 6

New Ways of Connecting Amid Pandemic pg. 9

Faith Leaders Strengthen Our Movement pg. 12

FEATURING
Dr. Jeff Gardere

"America’s Psychologist” considers end-of-life issues from a clinical, ethical and spiritual perspective
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– Michael Wolf, New York

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Resilience in a Time of Adversity

It has been said that one of the most effective ways to test resilience is through adversity. The COVID-19 pandemic has been one of the most devastating tests of our resilience on a global scale in recent memory. It has challenged all of us in ways we couldn’t have imagined before.

The pandemic brought to the forefront of our society the unprecedented and urgent need for all of us to engage in thoughtful and informed discussions about end-of-life care. In the face of this incredibly fast-paced and evolving public health crisis, the need for greater humanity at life’s end has become more pronounced.

In short order, Compassion & Choices helped secure telehealth provisions in the new CARES Act to allow greater numbers of seriously and terminally ill patients to access quality end-of-life care at home; created a new toolkit to help people untangle the confusing and overwhelming issues around end-of-life planning specific to COVID-19; and launched Staying Stronger Together, a new webinar series designed to educate and empower more people in realizing choice at life’s end.

All of these activities can be attributed to the resilience and resolve of our amazing network — staff, volunteers, donors and supporters alike — united in common values and purpose.

I am truly humbled to be part of a network that has withstood this test of adversity and successfully elevated the need for greater autonomy and compassion in the public’s mind. I’m proud to say we are making and will continue to make a profound difference in the experience of dying for millions of people across the country.

In the Media

CBS Bay Area
“Ruling Bolsters California Assisted Death Law, Group Says”
(January 24, 2020)

In a major victory for end-of-life care options in California, a judge ruled that the state’s law was passed legitimately during a special session of the Legislature in 2015. This win in court isn’t the end of the legal battle, because opponents will appeal this ruling and continue to try to repeal the End of Life Option Act. But Compassion & Choices remains poised to thwart these challenges.

WAMC Radio, Albany
“Group Lobbying for Aid-in-Dying Legislation in New York”
(January 26, 2020)

In January, Compassion & Choices held a lobby day to encourage New York lawmakers to authorize medical aid in dying. Kim Callinan, Compassion & Choices president and CEO, told WAMC radio in Albany, “We need to demonstrate to lawmakers that the time is now to pass this legislation. There are adequate safeguards within this legislation to protect patients.”

Los Angeles Times en Español
“Preparing for Our Deaths in the Age of Coronavirus”
(April 15, 2020)

Mauricio Ochmann, actor and Compassion & Choices supporter, wrote an op-ed in Los Angeles Times en Español encouraging Latinos to have end-of-life care planning conversations in light of the coronavirus pandemic. “These critical steps show compassion and love for our loved ones, which is something all of us need during these unprecedented and very difficult times of life and death,” he wrote.

Delaware Business Times
“COVID-19 Crisis Demonstrates Urgent Need for End-of-Life Planning”
(April 15, 2020)

Compassion & Choices President and CEO Kim Callinan urged everyone to complete an advance directive and make their end-of-life wishes known on National Healthcare Decisions Day (April 16). “The only wrong answer with end-of-life care planning is failing to act,” she wrote. “Taking action now will reduce the guilt and guesswork from caregiving for your loved ones and decrease the likelihood you will needlessly suffer when you die at life’s inevitable end.”

Here Awhile movie now available!

Anna Camp stars as a terminally ill woman returning to her roots in Oregon to consider ending her life using the Death With Dignity Act. Now available on video-on-demand services. Learn more at CompassionAndChoices.org/HereAwhile.

In case you missed our interview with Anna, check out our Winter 2020 issue: CompassionAndChoices.org/magazine.
Reading List

One barometer of our movement’s growth is the increasing number of books written about end-of-life issues. Here is just a small selection of recent releases, available from various traditional and online booksellers — and maybe even your local library.

**When My Time Comes**
*by Diane Rehm*

Rehm explores medical aid in dying through the eyes of supporters and opponents, from bioethicists to doctors to terminally ill people and their families. The interviewees include Compassion & Choices President Emerita/Senior Adviser Barbara Coombs Lee and Compassion & Choices National Medical Director Dr. David Grube. The interviews also feature Compassion & Choices storytellers like Rev. Alexa Fraser, a Marylander who advocates for medical aid-in-dying legislation in her home state, and Stella Dawson, the widow of Mary Klein, who so bravely advocated for medical aid-in-dying accessibility in Washington, D.C. These stories sustain and propel our movement forward.

**Cruel Death, Heartless Aftermath: My Family’s End-of-Life Nightmare and How to Avoid It**
*by Barbara Mancini*

Mancini recalls the harrowing story of how she was arrested and prosecuted on the felony charge of aiding the suicide of her terminally ill 93-year-old father, Joseph Yourshaw. Mancini not only shares her deeply troubling experience, which took more than a year of her life and over $100,000, but advises other individuals and families on how to avoid the same fate. She is a vocal advocate for expanding end-of-life options across the country and remains a steadfast supporter of medical aid in dying, an option denied her father in Pennsylvania.

**Finish Strong: Putting Your Priorities First at Life’s End**
*by Barbara Coombs Lee*

Finish Strong is now available as an audiobook, recorded by the author, Compassion & Choices President Emerita/Senior Adviser Barbara Coombs Lee. This audiobook version offers the same wisdom as the original, empowering listeners to achieve a positive end-of-life experience that aligns with the values and beliefs they hold dear. The stories, commentary and tips available in Finish Strong are now even more accessible — for anyone to read or listen to.

Rapid Response to Pandemic Protects Vulnerable Patients

In March, when the world dramatically changed due to the coronavirus pandemic and access to medical care became more difficult and dangerous, immediate concern for vulnerable populations, including terminally ill patients, became a priority for Compassion & Choices and other like-minded organizations. The risk of our supporters being unable to access safe, quality hospice and palliative care led Compassion & Choices to rapidly respond to the crisis.

With other advocacy groups, Compassion & Choices provided recommendations, persuading congressional leaders to take significant steps to ensure at-home access to care. These steps also give quarantined doctors the ability to safely deliver quality healthcare.

Recommendations were included as provisions in the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) enacted into law in late March. Shortly thereafter, the Centers for Medicare & Medicaid Services (CMS) issued emergency regulations to implement them. Regulations include:

- CMS will now pay for more than 80 additional Medicare services when furnished via telehealth. They include emergency department visits, initial nursing facility and discharge visits, and home visits, provided by a clinician authorized to provide telehealth.
- Providers can evaluate Medicare beneficiaries who have audio phones only, a vitally important option for many seniors.
- Licensed clinical social worker services, clinical psychologist services, physical therapy services, occupational therapist services and speech language pathology services can receive payment for Medicare telehealth services.
- Licensed practitioners, such as nurse practitioners and physician assistants, are allowed to order Medicaid home health services during the existence of the public health emergency for the COVID-19 pandemic.

If you are a patient with a terminal or serious illness, or a caregiver to one, talk with your healthcare providers about whether telehealth could replace your in-person office visit. Doctors are more likely to take the steps necessary to learn and implement new approaches to medicine when patients request them.

Your self-advocacy for telehealth could contribute to more widespread adoption of this vital tool.

Supporter Joan McLaughlin wrote in an email to Compassion & Choices President and CEO Kim Callinan, “So glad to read that C&C had input into CARES; it brought tears to my eyes … So true there has been no pressure to implement telemedicine and unlock its tremendous potential, but there is now and it’s happening! … As always, I am so proud of C&C and so pleased with the impact it is having.”
Finishing Every Day Strong

Compassion & Choices Latino Leadership Council member Irisaida “Isa” Mendez understands that nobody fights alone.

From an early age, Isa embraced each day of life. She wanted to do everything, see everything, conquer every challenge. She traveled the world, excelled in her career and raised four kids on her own. Four years ago she met Pedro, a medical director at a local hospital, and married him. Her family grew to nine children and six grandchildren (and counting). “My personal and professional bucket lists were crossed off by the time I turned 40,” she said. “I had trouble relating to people who felt they had unfinished business yet stayed in idle mode instead of making things happen.”

Then the fibroid came, which was no big deal. Given her age and activity level, Isa opted to have it surgically removed. She had always taken good care of herself, and a fibroid wasn’t going to slow her down. When she woke up she heard, “It is OK babe. Everything is OK.” But she could tell by the faces it was not OK.

Isa was diagnosed with a cancerous tumor stage 2b, the size of a grapefruit. It was hiding behind her uterus, out of range of her regular exams and not visible on the presurgical sonogram. “You were lucky we went in,” her doctor said. “Otherwise who knows when we would have discovered it.”

Eleven months later, it came back, metastasized to a lung.

Fighting a recurrence is hard. Keeping hopeful is challenging.

As the wife of a physician, Isa’s care became “his thing.” While she appreciated Pedro’s expertise and trusted him implicitly, she wanted her care to be her thing: her decisions, her choices, her conversations with the endless march of specialists. She was used to advocating for herself and wasn’t about to stop now.

Slowly but surely, at her insistence, her medical team directed their eyes to her when they discussed her treatment plan. Pedro remained an essential part of her support team, but not her decider.

While recovering from her lobectomy, Isa enrolled in online coursework to become a certified death doula. “Living with metastatic cancer is not the end, but a rediscovery of life. To conquer it is to rise — mentally, emotionally, spiritually. I’d like to think I’ve become a better version of myself,” she said.

Isa paired her experiences with her communications expertise and became a “life-death communicator,” starting IM Kahlo. Inspired by Mexican painter Frida Kahlo’s courage, the mission is to boost confidence and behaviors to face life’s challenges and transitions. Isa connected with Compassion & Choices, joining the Latino Leadership Council. She read Barbara Coombs Lee’s Finish Strong: Putting Your Priorities First at Life’s End and dove into Compassion & Choices’ Finish Strong tools.

“As any patient living with a life-threatening disease, I’ve done my advance medical directives and expressed my end-of-life wishes. I want to leave a mark. This is my end-of-life legacy project, to transform pain into beauty — to help people discover a different perspective as they face life transitions.”

...she wanted her care to be her thing: her decisions, her choices, her conversations ...
We need options.” Put yourselves in our shoes to understand our reality.

In 2019, Isa prepared for the impending impact of her aggressive treatment plan. On the day of her first chemotherapy treatment, Isa's hairdresser for 20 years came from Puerto Rico to join the party. Isa got four different hairstyles that day, progressing to shaving her head. Some friends and family also shaved their heads in support. Despite brutal chemotherapy and radiation, the relentless tumor only increased in size and spread. Right now, Isa is doing well. She deals with COPD, chronic pain and aggressive neuropathy, but medication helps. She takes classes at the Miami Cancer Institute and hosts death talks, too. She spends as much time traveling and building memories with her family as she can, enjoying every life celebration.

“I’m not afraid of death. I see it as a transition, the same way birth is,” Isa said. “I hope Florida lawmakers understand what it means to keep their hearts open to understanding what we are facing.”

Isa’s work with clients is multifaceted. She leads discussions about death and celebrating life, helps create legacy projects, guides life transition due diligence, gives motivational talks and tries to lead by example.

Isa shares Compassion & Choices’ End-of-Life Decisions Guide and Toolkit in English and Spanish as an accessible way to organize and document instructions and wishes. In 2019, Isa prepared for the impending impact of her aggressive treatment plan. On the day of her first chemotherapy treatment, Isa’s hairdresser for 20 years came from Puerto Rico to join the party. Isa got four different hairstyles that day, progressing to shaving her head. Some friends and family also shaved their heads in support.

Despite brutal chemotherapy and radiation, the relentless tumor only increased in size and spread. Isa moved into a targeted immunotherapy program, a last resort for terminal cancer patients. The goal was to treat cancer like a chronic condition, managed long term but with severe side effects.

Right now, Isa is doing well. She deals with COPD, chronic pain and aggressive neuropathy, but medication helps. She takes classes at the Miami Cancer Institute and hosts death talks, too. She spends as much time traveling and building memories with her family as she can, enjoying every life celebration.

“Toward death, I see it as a transition, the same way birth is,” Isa said. “I hope Florida lawmakers understand what it means to keep their hearts open to understanding what we are facing.”

Compassion & Choices offers these authoritative tools free to you and yours.

**Dementia Values & Priorities Tool**
Our newest online resource helps you pre-claim your voice so a healthcare proxy can carry out your wishes should dementia take hold. It allows you to reduce the length of time you live with dementia by years if you so desire. By answering a series of questions and adding your own personalized markers, you can create a customized dementia amendment to your advance directive that you can print, download or email.

This guide helps you work through your end-of-life priorities and empowers you to have meaningful discussions with your family and healthcare providers. The toolkit includes forms for advance-care planning that can supplement your advance directive. In addition, our website links you to state-specific advance directives. Available in English and Spanish.

**Finish Strong: Putting Your Priorities First at Life’s End**
Available in print, e-book and audiobook, Finish Strong is a thorough, informative and engaging guide to achieving the positive end-of-life experience you want and deserve. Compassion & Choices President Emerita/ Senior Advisor Barbara Coombs Lee, an emergency room and intensive care unit nurse and physician assistant for 25 years, shares her vast expertise and unrivaled life experience on living strong to the end.

To find these tools and additional resources to help with your end-of-life planning, please visit: [CompassionAndChoices.org/finish-strong-tools](https://www.CompassionAndChoices.org/finish-strong-tools).

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**Building Blocks for Change**

At Compassion & Choices, we constantly consider how to reach all people in this country and help them prepare for their inevitable end-of-life journeys. This means bringing everyone to the table and coming up with innovative solutions. We strive to continue the conversation across demographics through various efforts.

**Pandemic Response Calls for New Ways to Connect and Educate**

In mid-March, face-to-face engagements, most legislative sessions, and in-person interaction with volunteers and supporters came to a screeching halt with the onset of social distancing to flatten the COVID-19 curve. Quickly, Compassion & Choices leadership and staff had to assess how to best address immediate and ongoing concerns in the end-of-life options space.

News that people with the coronavirus were dying, suffering and alone hit hard. We faced new confusion over ventilators and treatment options; concerns about dying in complete isolation from family; and worries about accessing all legal end-of-life options, from hospice to medical aid in dying. People were scared and looking for help in planning for whatever was ahead.

National Healthcare Decisions Day (NHDD), April 16, is intended to “inspire, educate and empower the public and providers about the importance of advance care planning.” This year, NHDD took on special meaning and urgency. COVID-19 gave many Americans a new awareness of their own mortality and raised the relevance of end-of-life planning. In response, Compassion & Choices created a family of programs and tools to address community concerns and hopefully aid in thoughtful planning that might ease the day-to-day anxiety that so many of us have been facing.

Our Tools to Finish Strong laid the groundwork, and they were expanded to include planning and education on a range of topics, such as end-of-life planning in a COVID-19 environment, living and dying with dementia, managing grief and more. New topics are added on a regular basis.

The first session on April 13, National Healthcare Decisions Day Town Hall: Navigating End-of-Life Care and Choice During the Pandemic, was a panel discussion hosted by President and CEO Kim Callinan. Guests included community leaders, medical and telehealth experts, and Isa Mendez, Compassion & Choices Latino Leadership Council member, living with stage 4 uterine cancer (see pg. 6). The response was overwhelming. Thousands of viewers watched through Zoom, on Facebook and, afterward, on YouTube.

As part of that series, Compassion & Choices has created resources to address questions about end-of-life care during the pandemic. Topics include COVID-19: Understanding Your Options; Using Telehealth to Reduce Your Risk; Advance Care Planning; Addendum to Your Advance Directive; Dying in the Age of the Pandemic; and Impact on Communities of Color.

[Registration for future webinars and recordings of past ones can be found at CompassionAndChoices.org/WebinarSeries.]

[CompassionAndChoices.org/covid-19-toolkit]
Healthcare Disparities in the Time of COVID-19

The coronavirus pandemic has taken a disproportionate toll on people of color, creating yet another healthcare disparity that communities of color face in the United States. Health disparities refer to differences among populations in the prevalence of disease, mortality and other adverse health conditions. Communities of color are in the minority, as they represent a smaller percentage of the national population yet continue to have higher rates of illness and death.

These disparities can exist across gender, sexual orientation, age, location, race and ethnicity, and exist due to historical discrimination that continues to this day. Generations have been subjected to historical trauma, medical and economic inequities, and systematic hurdles that have further perpetuated disparities.

According to the Henry J. Kaiser Family Foundation, communities of color are at increased risk for serious illness if they become infected with coronavirus due to higher rates of certain underlying health conditions compared to white people, such as diabetes, heart disease, asthma and lung disease. Early data shows that black and Latino people are dying at higher rates from COVID-19 across the United States.

Coronavirus is altering the way people die and will alter the way society approaches the end of life. The fierce urgency for frank and candid conversations between individuals, their loved ones and doctors about end-of-life options is undeniable. This is especially true in underserved communities, where these discussions are less frequent, resulting in poorer health outcomes. Planning for end-of-life care that reflects an individual’s values, priorities and beliefs has never been more relevant.

“The moment must be a catalyst to reverse the health disparities that we see time and time again in our communities,” said Brandi Alexander, national director of constituency at Compassion & Choices. “Right now, we can encourage our families and loved ones to engage in hard conversations and take steps to prepare themselves for the end of life.”

Compassion & Choices created resources specific to COVID-19 in English and Spanish, including a COVID-19 addendum to a standard, state-specific advance directive.

COVID-19 resources and more are available online in our Plan Your Care Resource Center: CompassionAndChoices.org/planning.

Reaching Spanish-Language Speakers

In 2015, Compassion & Choices launched its first Latino educational and media campaign to garner support for medical aid-in-dying legislation from Latinos, the nation’s fastest-growing ethnic group. This targeted effort heavily influenced the passage of California’s End of Life Option Act. The same model was adopted nationwide. Today, more Compassion & Choices’ materials are being translated to reach Spanish-language speakers throughout the United States, its islands and territories. We offer Spanish-language webinars, reaching new communities in California and New Mexico with information and resources for the end of life. We discuss different end-of-life options, including palliative sedation and voluntarily stopping eating and drinking. We also shared our End-of-Life Decisions Guide and Toolkit, now available in Spanish.

A Call to Action in the Disability Community

In February, we kicked off our National Disability Outreach monthly call series. Our first esteemed guest speaker was Dr. Seth Morgan, a Maryland supporter living with multiple sclerosis. He spoke about his efforts to advance Compassion & Choices’ work to elevate voices from the disability community, how medical aid-in-dying laws and end-of-life issues impact the disability community, and how we can be the best allies. We look forward to continuing the conversation and building on our goals to engage this important community.

Happy Pride Month 2020!

A time-honored tradition for our staff and supporters alike is representing Compassion & Choices at Pride events across the country. Every year, we launch our Pride in a Box campaign to provide supporters on the ground with Compassion & Choices materials to start conversations about our movement at local Pride parades, festivals and parties.

It’s important to recognize the pivotal partnership between the end-of-life options movement and the LGBTQ community that stems back to the AIDS epidemic of the 1980s. Our collaborations have helped us both achieve monumental progress over the years. From the charge to pass the nation’s first death-with-dignity act in 1994 to allowing same-sex couples to act as healthcare proxies for one another, the two movements have decades of crossover. From our family to yours, happy Pride month!
Faith in Our Movement

Compassion & Choices is partnering with faith leaders and prioritizing outreach to faith communities around the country. Opponents of the end-of-life options movement often cite religion as grounds to deny the compassionate option of medical aid in dying for terminally ill people, but we work in tandem with influential faith leaders from many religious backgrounds to pass legislation and introduce the end-of-life conversation to different communities.

In February, faith leaders from Maryland met in Annapolis and spoke passionately at a news conference about how their faith informs their thinking about medical aid in dying as an option to end unbearable suffering. They shared faith perspectives and personal experiences showing the need for options, and responded to opponents’ arguments against it. The news conference was hosted by the lead sponsors of the state’s End of Life Option Act: Shane Pendergrass, chair of the House of Delegates Health and Government Operations Committee; and Jeff Waldstreicher, vice chair of the Senate Judiciary Proceedings Committee. It included faith leaders from Judaism, the Presbyterian Church, the Unitarian Universalist Church and the United Church of Christ.

Compassion & Choices launched a monthly Faith Outreach call series to identify faith leaders, people of faith and thought leaders who will help us advance our work. Our first call, on February 28, featured a Catholic perspective by Compassion & Choices Latino Communications Director Patricia Gonzales-Portillo and Reverend John Hagedorn, who is an ordained minister in the Evangelical Lutheran Church, as well as a psychotherapist and Compassion & Choices Florida Action Team leader. We were joined by 120 supporters, a number we hope will grow each month.

Ordained minister Dr. Jeff Gardere helped tremendously in our work across many states. Known as “America’s Psychologist,” Dr. Jeff contributed to our “50 Reasons to Support Medical Aid in Dying in New York” and is participating in our video series aimed at communities of color. He testified in Maryland, took action in other legislative efforts nationwide and much more. Dr. Jeff became involved with Compassion & Choices because “there are too many terminally ill, dying New Yorkers who are unnecessarily suffering at the end of life. There are too many New Yorkers who passed away advocating for passage of this law.” (See pg. 19 to learn more about Dr. Jeff.)

In February, Compassion & Choices sponsored and distributed literature at the Samuel DeWitt Proctor 2020 Clergy & Lay Leadership Conference in Arlington, Virginia. The annual conference brings together faith leaders from communities of color around the country who focus on advocacy, community engagement and empowerment. Compassion & Choices was represented by National Director of Constituency Brandi Alexander; African American Outreach and Maryland and D.C. Area Director Donna Smith; National Constituency Manager Tony Jemison; and Constituency and Campaign Coordinator Wendy Minor. Also attending were Reverend Madison Shockley and Reverend Charles McNeill, members of Compassion & Choices African American Leadership Council (Shockley is also on the C&C board).

Compassion & Choices also sponsored and presented at the Empire Baptist Missionary Convention in Saratoga Springs, New York. Our staff presented to a group of rising young adult faith leaders and the general convention body, comprising an audience of approximately 900 adults and 200 youth. In the young adult session, Brandi Alexander and Tony Jemison discussed the importance of transitioning into the roles of adulthood, including advance care planning. The general session included highlights about Compassion & Choices’ Finish Strong resources.

If you are or know a faith leader who would like to join our efforts to expand the end-of-life movement, please email us at faith@CompassionAndChoices.org.
An Unstoppable Force

From an impactful run of lobby days, hearings and rallies — through a shift in priorities and tactics due to the postponement of many legislative sessions in March — Compassion & Choices worked in an ever-growing number of states to pass bills, protect and expand existing laws, and boost volunteer involvement.

This year’s legislative season certainly kept us on our toes, even with the mid-session suspension of activity in numerous state capitols due to the coronavirus. It is a true measure of our progress that so many states are tackling end-of-life autonomy, and we continue to educate people about the need for end-of-life options, using alternative communication channels in place of face-to-face meetings. With elections looming, 2020 is very much a building year across the country with our eyes set on 2021.

ARIZONA

Arizona lawmakers considered three bills to authorize medical aid in dying in 2020, but unfortunately none of the bills met legislative deadlines to advance. On March 1, our friend Diane Rehm visited Phoenix on her book tour for When My Time Comes (see pg. 4). Compassion & Choices proudly announced our new partnership with the Arizona End-of-Life Options Coalition, a grassroots volunteer group organized to pass medical aid-in-dying legislation in Arizona.

CALIFORNIA

In California, President and CEO Kim Callinan testified at an oversight hearing for the End of Life Option Act in February. Callinan reviewed the past three-and-a-half years of implementation with our bill sponsors. The room buzzed with energy and broad consensus that the law brings profound peace of mind to residents of the Golden State. At the hearing, Callinan suggested ways to amend the existing law because, as she testified, “Many eligible patients are unable to use the law.” We also launched several PSAs across 300 television stations to educate Californians about the End of Life Option Act.

COLORADO

Earlier this year, the Colorado Department of Public Health and Environment released its annual report on the state’s End-of-Life Options Act, which shows that more Coloradans are talking to their doctors about medical aid in dying. In 2019, 170 patients received medical aid-in-dying prescriptions, a 38% increase from 2018. Of those, 129 filled their prescription. For many qualified patients, the peace of mind that comes from having a prescription ready to be filled is enough. The report also shows that rural participation is higher than ever, a significant increase from 2018. Of those, 129 filled their prescription. For many qualified patients, the peace of mind that comes from having a prescription ready to be filled is enough. The report also shows that rural participation is higher than ever, a significant increase from 2018.

DELAWARE

A statewide survey released in March shows an overwhelming majority (72%) of Delaware residents support medical aid-in-dying legislation, giving lawmakers another compelling reason to support the Ron Silverio/Heather Block Delaware End of Life Options Act. Detailed survey results are available at CompassionAndChoices.org/depoll2020.

FLORIDA

We’ve been busy promoting our Tools to Finish Strong planning resource, and we hosted a series of events featuring Finish Strong: Putting YOUR Priorities First at Life’s End by Barbara Coombs Lee. This year, Dan Diaz toured the Sunshine State to talk about our Finish Strong materials and the work he does across the country as an advocate. Diaz covered over 900 miles, holding eight talks and events, sharing the story of his late wife, Brittany Maynard. Senator Kevin Rader introduced a medical aid-in-dying bill for the first time ever in Florida. Unfortunately, Florida’s 60-day legislative session ended on March 14 before the bill could advance.

HAWAII

In Hawaii, we cleared another hurdle when SB2582, the Our Care, Our Choice Act, passed out of the Senate on a 20-4 floor vote to make its way to the House, where it passed first reading. The Honolulu Star Advertiser posted an editorial by Dr. Charlotte Star Advertiser entitled, “Let advanced practice registered nurse prescribe end-of-life meds,” which talks about the need for and significance of legislation to improve access to the law.

ILLINOIS

Early this year, the Evanston City Council in Illinois held an informational session on a resolution endorsing medical aid-in-dying legislation to be introduced and passed in Springfield. While a vote was not taken due to procedural issues, the resolution attempt was an incredible showing of what the Compassion & Choices Evanston Action Team is capable of. In the meantime, the number of volunteer Action Teams across Illinois has tripled in the last year since Compassion & Choices hired dedicated advocacy staff — from three to nine teams, with three more in formation. In the six months before the pandemic, these action teams hosted over 50 events. In April, President and CEO Kim Callinan hosted a virtual conversation with supporters to discuss “Where We Are and Where We Are Headed.”

MARYLAND

Maryland’s Richard E. Israel and Roger “Pip” Moyer End-of-Life Option Act was introduced again in 2020, and Compassion & Choices led the charge to pass the bill. With the campaign slogan “The Time Is NOW,” we held a successful lobby day in January that saw over 185 supporters take to the halls of the Senate and House to speak to lawmakers about this important legislation. We held a summit in Annapolis with faith leaders urging passage of the law. The bill received its first hearing by the Senate Judicial Proceedings Committee in March. The Legislature adjourned early in March in the wake of the COVID-19 pandemic and is exploring options to reconvene for a special session when social distancing measures have been lifted.

advocacy in action
NEW MEXICO
We continue to prepare for New Mexico’s 2021 legislative session. We anticipate that our previous bill sponsors will reintroduce a medical aid-in-dying bill. Prior to the coronavirus pandemic, Compassion & Choices community organizers held continuing education training sessions across the state, in partnership with the New Mexico Community Health Worker Association. These sessions were designed to help lay members of the community who work either for pay or as volunteers in association with local healthcare systems start the conversation about end-of-life planning and decision-making in their communities.

NEW YORK
New York’s Medical Aid in Dying Act has gained nearly 60 legislative cosponsors, due in no small part to the courage of the first 20 volunteer storytellers we’ve featured as part of our 50 Reasons to Support New York’s Medical Aid in Dying Act series. We suspended the series when the coronavirus pandemic forced the closure of the capitol and lawmakers suspended all other business but passing the state budget. Our team in New York is working to highlight our end-of-life planning tools and stands ready to make a major push to pass the bill when the Legislature returns to nonpandemic-related policy. The first 20 stories in our 50 Reasons series are available to view at CompassionAndChoices.org/50ReasonsNY.

NEVADA
We’re actively building our grassroots advocacy community in Nevada. Prior to the pandemic, we hosted a table at the Springs Preserve Black History Month Festival and held a campaign update meeting with area advocates in Las Vegas. We have secured a legislative sponsor and several primary cosponsors for 2021 legislation. Our field team will continue to hold virtual update meetings and training sessions across the state to prepare for future legislative activity.

MASSACHUSETTS
Our efforts to advance legislation in Massachusetts recently received a big boost with the Committee granting an extension for the End of Life Options Act to be considered and voted on. This was a tremendous victory for our efforts and demonstrates the support for this bill in the Legislature.

MINNESOTA
Until the global pandemic halted in-person gatherings, Minnesota Campaign Manager Rebecca Thoman, MD, and the Minnesota Interfaith Clergy for End-of-Life Options hosted events across the state to educate people about the Minnesota End-of-Life Options Act and bring the issue of medical aid in dying to church congregations and community members. Minnesota supporters, watch for an “Ask the Candidates” opportunity in June sponsored by Compassion & Choices Action Network.

NEW JERSEY
On April 1, 2020, a New Jersey superior court granted a motion by state Attorney General Gurbir Grewal to dismiss the lawsuit filed in August 2019 — Glassman v. Grewal — seeking to overturn the New Jersey Medical Aid in Dying for the Terminally Ill Act. The ruling ends the threat to the law for now, but we remain vigilant against any and all efforts by the plaintiffs to appeal the judge’s ruling as well as any future legal challenges. Our political affairs team stays active in Trenton, focusing on limiting barriers to qualified patients accessing medical aid in dying.
Dr. Jeff, “America’s Psychologist,” Sees All Sides

Jeff Gardere, PhD, is one of the most highly sought-after experts in the field of mental health. Beyond his private practice in Manhattan and behavioral medicine post at Touro College, he has authored four books and appeared on numerous radio and television programs. We are fortunate to have Dr. Jeff, as he is best known, on our side and to have come to know more about him recently.

I didn’t take a personal interest in end-of-life issues until I realized recently at the age of almost 64 that I really do have to look at my mortality. Because my life partner is a physician, I told her that if I was at the end of my life and in insufferable pain, I hoped she would do ‘the right thing.’ We live in a state where medical aid in dying is not authorized yet, so her doing ‘the right thing’ would be illegal. Then when I learned of medical aid in dying, I thought wow, this is something I really believe in. This is something that I’ve actually requested from my own spouse! Luckily right now I’m in good health, but you know what? Everything might be bright and rosy today, but we never know what tomorrow brings. For me it’s having the peace of mind of knowing that if I’m at the end of life and in great pain, I can end my pain. It’s my decision to make.

My beliefs as both a psychologist and an ordained interfaith minister — religious, spiritual and ethical — align perfectly with medical aid in dying. I think those in the religious community who feel conflicted have concerns around what it means in terms of their relationship with God or their religious beliefs around taking one’s life into their own hands. So I do get that; as a minister I absolutely respect the sacred relationship between an individual and their faith and their creator or their God. Therefore, as an advocate of medical aid in dying, I’m not telling people to choose the option. I’m saying that I am not going to stand in the way of their personal, sacred relationship with their religion.

Religion has been a bedrock of the African American community. It helped us get through slavery. It helped us get through the civil rights struggle. It helps us get through a lot of the indignities that we face every single day when we’re treated as second- and third-class citizens. Because religion is such a bedrock, when our houses of worship have an opinion about
something like this, people sometimes just take the position of the head of the church. That being said, in talking with many people who are religious, who are African American, who are very spiritual, individually they seem to be much more supportive of medical aid in dying. Their own personal opinions differ from the stand taken by that house of worship or that particular religion. When you talk to individuals within a congregation, the opinions are much more diverse and much more understanding, because many of them have been in the position of watching family members die a very painful death. And for those who are very conservative, the more we talk about ALL end-of-life options — including hospice care, palliative care and the importance of advance directives — which we tend to use less as people of color, we get to having discussions about what benefits those who are in insufferable pain.

I had a powerful experience when I was at the Maryland Capitol talking to a subcommittee about medical aid in dying. It was the first time that I saw all of the folks who supported medical aid in dying: their particular situations and stories, some who knew that they were approaching the end of life due to a terminal disease, some who had watched a loved one die a painful death. Some on the other side had gone through the same things but did not believe in medical aid in dying. I got to see the full spectrum of people. I have to say, and I know this is going to sound corny, but I truly felt love for the people who were against medical aid in dying. I got to see the human faces. I got to see the emotions. It really fortified for me that I’m not taking the side of medical aid in dying; I’m taking a stance that I believe — as a minister, as a psychologist, as a human being — in the humanity of medical aid in dying.

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Dr. Jeff testified at a Maryland Senate hearing on the End-of-Life Option Act in Annapolis, MD.

There are many ways to help improve the dying process in America. I choose to support Compassion & Choices by giving monthly, so I never have to remember to contribute.

Kathy Cerminara, Fort Lauderdale, FL Champion Circle member since 2011

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