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STRONG SUPPORT FOR “AID IN DYING” BILL ASSISTED SUICIDE “MORALLY ACCEPTABLE,” RUTGERS-EAGLETON POLL FINDS

NEW BRUNSWICK, N.J. – As the “Aid in Dying for the Terminally Ill Act” awaits a vote in the state Senate, almost two-thirds (63 percent) of New Jerseyans support the measure, according to a new Rutgers-Eagleton Poll. The bill, which allows terminally ill patients to obtain prescription drugs to end their lives and was passed by the state Assembly in November, is opposed by 29 percent of residents. Eight percent have no opinion.

Furthermore, regardless of their personal feelings on the legality of assisted suicide, 63 percent believe that ending one’s own life is morally acceptable for the terminally ill. Thirty-two percent consider such a measure morally unacceptable.

While Gov. Chris Christie has expressed “grave concerns” over the bill, 58 percent of Republicans, as well as 64 percent of both Democrats and independents, favor the proposed legislation.

“This is not really a partisan issue in New Jersey,” said Ashley Koning, manager of the Rutgers-Eagleton Poll. “Though a difficult subject for many, the issue has widespread support and acceptance here. Public opinion is mainly on the bill’s side.”

Sixty-three percent also say that if they had a life-threatening illness, they would rather relieve pain and discomfort, even if it meant not living as long, while 29 percent would choose the alternative – living a longer life even if it meant more pain. When the poll last explored the subject in 2000, 70 percent of residents sided with the former and 20 percent with the latter.

Results are from a statewide poll of 813 residents contacted by live callers on both landlines and cell phones from Feb. 3-10, 2015, with a margin of error of +/-4.1 percentage points. Interviews were done in both English and, when requested, Spanish.

Differences by religious devotion, not denomination, spur opposition

While New Jerseyans generally support the “Aid in Dying” bill and express both moral acceptance of and personal agreement with the idea of self-determination, religion is a significant factor among dissenters. It is not so much one’s particular denomination – more than six in 10 Catholics, Protestants and other denominations support the bill and find the issue morally acceptable – but rather the frequency with which residents practice their religion.

The most devout are the strongest opponents: half of residents who attend religious services at least weekly oppose the bill, while 40 percent support it. Views reverse among those who attend religious services less frequently: among those who attend services once to a few times a month, 59 percent are in favor of the bill, while 73 percent of those who seldom or never attend religious services support it. “Born again” or evangelical Christians are also less likely to support the bill than others; 52 percent favor the proposed legislation and 41 percent oppose it.

Patterns are similar for moral acceptance. Fifty-seven percent of the most devout say ending one’s own life due to terminal illness is morally wrong, but 57 percent who attend religious services less frequently and 76 percent who seldom or never attend say the act is morally acceptable. Half of born again Christians believe the act to be morally wrong. Forty-one percent feel the opposite.

If personally faced with a terminal illness, a majority of New Jerseyans of all denominations and levels of religiosity would prefer to relieve pain and discomfort, even if that meant shortening their life – though to varying degrees. Catholics (64 percent) and other non-Protestant residents (59 percent) are slightly less likely than Protestants (73 percent) to prefer less pain if diagnosed with a life-threatening illness if the tradeoff meant a shorter life. Those who seldom or never attend religious services are eight points more likely than those who attend to prefer reduced pain and discomfort despite possible life-shortening consequences.

Bill support, moral acceptance, and personal choice intertwined

Views on the legality, acceptance and personal preference of ending life if terminally ill are related. Those who believe taking such action is morally wrong are overwhelmingly against the bill – 76 percent oppose, 20 percent support. New Jerseyans who find the act morally acceptable feel just the opposite, with even greater intensity: 89 percent are in favor, versus just 6 percent who oppose. Residents who would endure pain and discomfort to prolong life if faced with a similar situation are much less likely than those who would ease pain to support the bill (52 percent versus 69 percent).

Likewise, 88 percent of bill supporters find the act of taking one’s own life due to terminal illness morally acceptable, and 69 percent of this group would relieve pain and discomfort even if it meant a shorter life. Among bill opponents, 84 percent say the act is morally wrong. However, they still opt to relieve pain instead of extend life by a 53 percent to 41 percent margin. Those who find the act morally wrong are more split on the subject – 45 percent would extend life and 51 percent would relieve pain – while 69 percent of those who say it is morally acceptable would do the latter.

“The evidence is clear that while most New Jerseyans support the ‘Aid in Dying’ bill in New Jersey, personal religious and moral grounds drive those who oppose it,” noted Koning. “The more deep-seated one’s moral views and practices, the more they are against the idea.”

Other key demographics contribute to differences

While religion is a driving factor, other group differences do exist, many of which may be related to differences in religiosity across groups. Nonwhite residents are less likely to support the bill; a plurality of 49 percent do so, compared to 72 percent of white residents. Forty-nine percent of nonwhite

residents say ending life if terminally ill is morally acceptable, while 44 percent say it is wrong. Seventy-two percent of whites, on the other hand, say it is morally acceptable, while 24 percent say the opposite. Nonwhite residents are 10 points less likely than white residents to say they would prefer to relieve pain even if it meant not living as long, 57 percent versus 67 percent.

Support for the bill, moral acceptance, and personal preference on the issue increase with income and education.

Just over half of conservatives oppose the bill and think ending life is morally wrong – though six in 10 would still relieve pain at the risk of shortening life if faced with a similar situation.

While there is little difference by age on the bill or on moral acceptance, desire to relieve pain, even if it would shorten life, is preferred more as residents grow older. Three-quarters of senior citizens would choose this option, compared to just over half of those under 30.

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QUESTIONS AND TABLES FOLLOW ON THE NEXT PAGE

Questions and Tables

The questions covered in the release of February 25, 2015 are listed below. Column percentages may not add to 100% due to rounding. Respondents are New Jersey Adults unless otherwise indicated; all percentages are of weighted results.

Q. The New Jersey state legislature has been considering the “Aid in Dying” bill, which if passed would allow terminally ill patients to obtain a prescription to end their lives. Do you support or oppose this bill?

		Morally Acceptable/ Wrong to End Life if Terminally Ill		If Terminally Ill Patient Extend life, Relieve pain, even if even if not more pain living as long	
		Morally acceptable	Morally wrong	even if more pain	even if not living as long
Support	63%	89%	20%	52%	69%
Oppose	29%	6%	76%	41%	24%
Don't know	8%	5%	5%	7%	6%
Unwgt N=	799	497	238	202	511

	Party ID			Ideology			Gender		Race		Age			
	Dem	Ind	Rep	Lib	Mod	Con	Male	Female	White	Non- white	18-29	30-49	50-64	65+
Support	64%	64%	58%	75%	65%	42%	60%	66%	72%	49%	59%	63%	66%	62%
Oppose	27%	28%	36%	18%	28%	51%	31%	27%	23%	39%	31%	30%	25%	31%
Don't know	9%	8%	6%	8%	8%	7%	9%	7%	6%	12%	10%	8%	9%	6%
Unwgt N=	267	371	155	199	417	160	408	391	559	222	106	187	250	256

	Religion			Born Again		Religious Attendance		
	Catholic	Protestant	Jewish/ Other	Yes	No	At least once/ week	One to a few times/mo.	Seldom/ Never
Support	60%	69%	63%	52%	67%	40%	59%	73%
Oppose	32%	26%	27%	41%	27%	51%	31%	20%
Don't know	8%	5%	9%	7%	6%	9%	10%	7%
Unwgt N=	364	137	276	102	370	184	185	418

	Income				Education			
	<50K	50K- <100K	100K- <150K	150K+	HS or Less	Some Coll	Coll Grad	Grad Work
Support	54%	63%	72%	76%	55%	61%	66%	70%
Oppose	39%	28%	21%	15%	35%	31%	25%	25%
Don't know	8%	9%	7%	8%	11%	8%	9%	5%
Unwgt N=	184	239	107	121	195	208	212	184

*Aid in Dying Bill Feb 2015
Rutgers-Eagleton Poll*

Q. Regardless of whether you think it should be legal or illegal, do you personally believe that it is morally acceptable or morally wrong to end your own life if terminally ill?

		Aid in Dying Bill		If Terminally Ill Patient			
		Support	Oppose	Extend life, even if more pain	Relieve pain, even if not living as long		
Morally acceptable	63%	88%	12%	48%	69%		
Morally wrong	32%	10%	84%	49%	26%		
Don't know	5%	2%	3%	3%	5%		
Unwgt N=	790	509	220	204	507		

	Party ID			Ideology			Gender		Race		Age			
	Dem	Ind	Rep	Lib	Mod	Con	Male	Female	White	Non-white	18-29	30-49	50-64	65+
Acceptable	63%	67%	53%	76%	64%	42%	61%	65%	72%	49%	64%	63%	64%	60%
Wrong	31%	29%	41%	20%	31%	52%	33%	30%	24%	44%	32%	33%	30%	32%
Don't know	6%	5%	6%	4%	5%	5%	6%	4%	4%	8%	4%	4%	6%	8%
Unwgt N=	262	368	154	197	413	156	407	383	553	218	105	184	248	253

	Religion			Born Again		Religious Attendance		
	Catholic	Protestant	Jewish/Other	Yes	No	At least once/week	One to a few times/mo.	Seldom/ Never
Acceptable	62%	62%	64%	41%	69%	36%	57%	76%
Wrong	32%	35%	31%	52%	26%	57%	38%	19%
Don't know	7%	4%	5%	6%	5%	7%	5%	5%
Unwgt N=	360	134	275	101	366	182	181	415

	Income				Education			
	<50K	50K-100K	100K-150K	150K+	HS or Less	Some Coll	Coll Grad	Grad Work
Acceptable	56%	59%	66%	79%	54%	60%	71%	66%
Wrong	39%	35%	29%	18%	37%	36%	24%	29%
Don't know	5%	5%	5%	4%	9%	3%	5%	5%
Unwgt N=	182	237	106	120	192	204	210	184

Q. If you were a patient with a life-threatening illness, which of these two treatments do you think you would choose: [RANDOMIZE: extend life as much as possible, even if it means more pain and discomfort, or relieve pain and discomfort, even if it means not living as long]?

		Aid in Dying Bill		Morally Acceptable/ Wrong to End Life if Terminally Ill	
		Support	Oppose	Morally acceptable	Morally wrong
Extend life as much as possible	29%	24%	41%	22%	45%
Relieve pain and discomfort	63%	69%	53%	69%	51%
Don't know	8%	7%	6%	8%	5%
Unwgt N=	783	499	220	486	237

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	Party ID			Ideology			Gender		Race		Age			
	Dem	Ind	Rep	Lib	Mod	Con	Male	Female	White	Non-white	18-29	30-49	50-64	65+
Extend life	28%	29%	32%	18%	32%	35%	27%	31%	26%	33%	39%	32%	27%	19%
Relieve pain	62%	64%	62%	69%	61%	62%	66%	61%	67%	57%	54%	60%	65%	74%
Don't know	10%	7%	6%	14%	7%	3%	7%	8%	6%	10%	7%	8%	8%	7%
Unwgt N=	258	366	152	192	415	153	404	379	549	218	104	185	244	250

	Religion			Born Again		Religious Attendance		
	Catholic	Protestant	Jewish/ Other	Yes	No	At least once/ week	One to a few times/mo.	Seldom/ Never
Extend life	30%	21%	30%	31%	26%	33%	36%	24%
Relieve pain	64%	73%	59%	65%	69%	59%	59%	67%
Don't know	5%	6%	10%	4%	5%	8%	5%	8%
Unwgt N=	361	131	271	102	362	183	182	407

	Income				Education			
	<50K	50K- <100K	100K- <150K	150K+	HS or Less	Some Coll	Coll Grad	Grad Work
Extend life	37%	24%	29%	27%	33%	33%	29%	21%
Relieve pain	54%	68%	65%	66%	62%	57%	63%	72%
Don't know	8%	7%	6%	7%	5%	10%	8%	8%
Unwgt N=	182	234	106	120	189	204	208	182

Rutgers-Eagleton Poll February 3 – 10, 2015

The Rutgers-Eagleton Poll was conducted by telephone using live callers February 3-10, 2015 with a scientifically selected random sample of 813 New Jersey adults. The poll was available in Spanish for respondents who requested to do it in that language. This telephone poll included 290 landline and 523 cell phone adults, all acquired through random digit dialing. Distribution of household phone use in this sample is:

Cell Only:	13%
Dual Use, Reached on Cell:	23%
Dual Use, Reached on LL:	59%
Landline Only:	5%

Data were weighted to the demographics adults in New Jersey. Weights account for the probability of being selected within the sample frame and the probability of being sampled within a household, based on the number of individuals living in the household and the phone composition (cell, landline) of the household. The samples were weighted to several demographic variables reflecting the population parameters of the state of New Jersey: gender, race, age, and Hispanic ethnicity. The final weight, which combined all of the parameters mentioned, was trimmed at the 5th and 95th percentile so as to not accord too much weight to any one case or subset of cases. All results are reported with these weighted data.

All surveys are subject to sampling error, which is the expected probable difference between interviewing everyone in a population versus a scientific sampling drawn from that population. Sampling error should be adjusted to recognize the effect of weighting the data to better match the population. In this poll, the simple sampling error for the 813 adults is +/-3.4 percentage points at a 95 percent confidence interval. The adult sample weighting design effect is 1.41, making the adjusted margin of error +/- 4.1 percentage points for the adult sample.

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Thus if 50 percent of New Jersey adults in this sample favor a particular position, we would be 95 percent sure that the true figure is between 45.9 and 54.1 percent (50 +/-4.1) if all New Jersey adults had been interviewed, rather than just a sample.

Sampling error increases as the sample size decreases, so statements based on various population subgroups are subject to more error than are statements based on the total sample. Sampling error does not take into account other sources of variation inherent in public opinion studies, such as non-response, question wording or context effects.

This Rutgers-Eagleton Poll was fielded in house by the Eagleton Center for Public Interest Polling. The questionnaire was developed and all data analyses were completed in house. The Rutgers-Eagleton Poll is paid for and sponsored by the Eagleton Institute of Politics, Rutgers University, a non-partisan academic center for the study of politics and the political process.

Weighted Sample Characteristics			
813 New Jersey Adults			
34% Democrat	49% Male	26% 18-34	61% White
47% Independent	51% Female	36% 35-54	12% Black
19% Republican		37% 55+	16% Hispanic
			11% Asian/Other/Multi