

The Star-Ledger/**Eagleton-Rutgers Poll**

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A story based on the survey findings presented in this release and background memo will appear in the Sunday, July 16th Star-Ledger. We ask users to properly attribute this copyrighted information to "The Star-Ledger/Eagleton-Rutgers Poll."

NEW JERSEYANS AND LIFE'S FINAL DECISION: MOST PREFER COMFORTABLE END TO PAINFUL PROLONGATION

FEW HAVE MADE WISHES KNOWN TO HEALTH CARE PROVIDERS

An overwhelming majority of New Jerseyans support a terminally ill patient's right to choose to be taken off life support machines. And when faced with the choice of living longer with pain or minimizing that pain even if it means a shorter life, 7-in-10 New Jerseyans say they would opt to reduce their pain.

Despite the fact that a large majority of New Jersey residents have strong opinions about how they would like their lives to end in the event of a life-threatening illness, only a small number—fewer than 1-in-5—have spoken to a physician or health care provider about such plans. Asked how confident they are that their wishes would be followed out by hospital staff, only a third of residents report being 'very confident' that their health care wishes would be fulfilled.

These are some of the main findings of the most recent *Star-Ledger/Eagleton-Rutgers Poll*, done in conjunction with the Center for State Health Policy at Rutgers University. The current survey was done by telephone between June 8 and 13 with a random sample of 802 New Jersey adult residents. Sampling error for the full sample is plus or minus 3.5 percentage points.

The Star-Ledger/Eagleton-Rutgers Poll • Eagleton Institute of Politics

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Public support for a patient's right to choose to be taken off life support machines is at the same level it was in 1986: 88 percent of New Jerseyans believe a patient should have the right to choose to have the machines removed. Three quarters of New Jersey residents also believe that family members should be allowed to discontinue a terminally ill patient's medical treatment if the patient is unable to speak for herself, even if she has left no clear guidelines about the care she would prefer.

New Jerseyans' strong feelings about the issue do not mean that most have taken decisive measures to provide for their own care in the event of a life-threatening condition. While almost two-thirds of New Jerseyans have discussed such future health care plans with friends or family, with women (72%) far more likely than men (54%) to have done so, a much smaller percentage—fewer than 1-in-5—have spoken to a health care provider about plans for treatment in the event of a serious illness. Not surprisingly, older New Jerseyans are much more likely to have discussed health plans than are younger residents. Seventy-six percent of those 65 and older have spoken to family members and 35 percent have spoken to a doctor or health care provider about such plans. In comparison, only 46 percent of those aged 18-30 have spoken to family members about a terminal illness and only 12 percent have spoken to a health care provider.

Asked how confident they are that hospital staff would follow their health care wishes in the event of a life-threatening illness, only a third report that they are 'very confident,' with another 4-in-10 saying they are 'somewhat confident' that their wishes would be carried out by hospital workers. Two-in-ten New Jerseyans are clearly skeptical of health care professionals, saying they are 'not too confident' that hospital

staff would follow their wishes. Having spoken to a physician about health care plans factors into the amount of faith New Jerseyans have that their wishes will come to fruition: 44 percent of those people who talked to a doctor about their plans are 'very confident' that their wishes for treatment will be granted, while only 31 percent of those who have not talked to a doctor feel that confident.

Joel Cantor, director of the Rutgers' Center for State Health Policy, commented: "It is disconcerting that so few New Jersey residents have spoken with their doctors about treatment wishes. Patients cannot expect health care providers to be responsive unless they clearly communicate their wishes to medical professionals. Doctors and patients must share responsibility for improving communication."

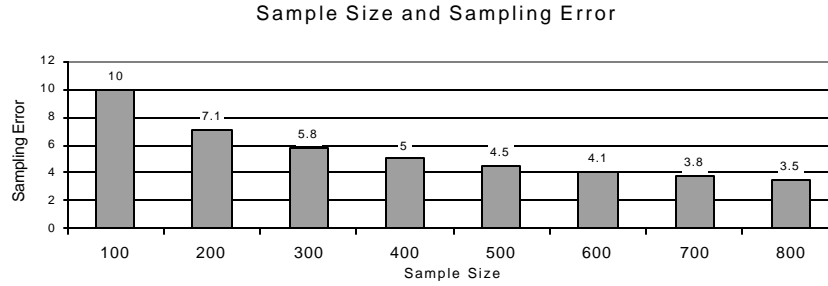
Respondents were asked to rate doctors' and hospital staff's ability to treat pain and deal with the emotional needs of their terminal patients. A majority of New Jerseyans give doctors and hospital staff favorable ratings of excellent or good for their ability to treat pain among patients with life-threatening ailments, but are divided about how well they attend to the emotional needs of their dying patients. Notably, opinion about health care providers does not cut across racial lines, with minority and white residents offering the same level of favorable and unfavorable ratings.

Positive opinions about health care providers' ability to treat pain outweigh negative opinions by more than two to one. At the same time, though, only 15 percent of New Jerseyans give hospital staff the highest rating of 'excellent.' Hospital staff get the highest ratings for pain treatment from those whose family income is over \$70,000 a year. Sixty-eight percent of this high-earning group give health care workers a positive rating, compared to 52 percent of those whose family income is under \$35,000 a year.

Opinion about physicians' and other staff's ability to care for the emotional needs of terminal patients is more mixed: 48 percent believe they do an 'excellent' or 'good' job, but 41 percent believe providers do an 'only fair' or 'poor' job of treating their patients with compassion, with 10% offering no opinion.

BACKGROUND MEMO – RELEASE (EP126-6), JULY 16, 2000

The latest *Star-Ledger/Eagleton-Rutgers* Poll was conducted between June 8 and 13, 2000 with a scientifically selected random sample of 802 New Jersey adult residents interviewed by telephone. The figures in this release are based on this sample size. 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. The sampling error for registered voters is ± 3.5 percent, at a 95 percent confidence interval. Thus if 50 percent of New Jerseyans were found to support a patient’s right to die, one would be 95 percent sure that the true figure would be between 46.5 and 53.5 percent (50 ± 3.5) had all New Jerseyans been interviewed, rather than just a sample. Sampling error increases as the sample size decreases, so statements based on various population subgroups, such as separate figures reported for men and women, are subject to more error than are statements based on the total sample. The following chart shows the relationship between sample size and sampling error.



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. The verbatim wording of all questions asked is reproduced in this background memo. The sample has been stratified based on county and the data have been weighted on age and education to insure an accurate proportional representation of the state. The questions referred to in this release are as follows:

“In your opinion, if a terminally ill person is mentally competent, but being kept alive only by a machine they want to be removed from, should they be allowed to do so even if it means they will die, or not?” [QRD1]

	<u>Yes</u>	<u>No</u>	<u>Depends- (Voluntary)</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	88%	6%	2%	3%	99%	(802)
Statewide, NJ 1986	88	6	3	3	100	(800)
<u>Age</u>						
--18-29	88	10	2	--	100	(134)
--30-49	90	5	1	4	100	(331)
--50-64	91	2	3	4	100	(176)
--65+	82	10	4	4	100	(136)
<u>Race</u>						
--White	91	5	2	2	100	(590)
--Black and Hispanic	84	8	3	5	100	(148)

“And what about if this same patient had not made his or her wishes known in advance? If the family believes the patient would not want to continue under such conditions, do you think they should or should not be allowed to discontinue medical treatment?”
[QRD2]

	<u>Should</u>	<u>Should Not</u>	<u>Depends</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ-June 2000	74%	18%	3%	5%	100%	(802)
<u>Income</u>						
--Under \$35000	71	18	4	7	100	(155)
--\$35000-\$70000	80	14	2	5	101	(264)
--Over \$70000	74	17	5	4	100	(268)
<u>Race</u>						
--White	77	15	3	5	100	(590)
--Black and Hispanic	69	24	3	4	100	(148)

“Have you talked to someone close to you--such as a spouse, partner, friend or grown child--about your wishes for health care during a life-threatening illness, or not?” [QRD4]

	<u>Yes</u>	<u>No</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	63%	37%	--	100%	(802)
<u>Sex</u>					
--Male	54	45	1	100	(399)
--Female	72	28	--	100	(403)
<u>Age</u>					
--18-29	46	53	1	100	(134)
--30-49	60	40	--	100	(331)
--50-64	74	26	--	100	(176)
--65+	76	23	1	100	(136)
<u>Income</u>					
--Under \$35000	58	42	--	100	(155)
--\$35000-\$70000	63	36	1	100	(264)
--Over \$70000	68	32	--	100	(268)
<u>Race</u>					
--White	69	31	--	100	(590)
--Black and Hispanic	52	46	1	99	(148)

“And have you talked to your doctor or current health provider about your wishes for health care during a life-threatening illness, or not?” [QRD5]

	<u>Yes</u>	<u>No</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	18%	82%	100%	(802)
<u>Sex</u>				
--Male	15	85	100	(399)
--Female	21	79	100	(403)
<u>Age</u>				
--18-29	12	88	100	(134)
--30-49	11	89	100	(331)
--50-64	21	79	100	(176)
--65+	35	65	100	(136)
<u>Marital Status</u>				
--Married	18	82	100	(444)
--Div/Sep	28	72	100	(159)
--Never Married	9	91	100	(191)

“If you were a patient with a life-threatening illness, which of these two treatments do you think you would choose (Randomize order of statements 1 and 2): 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.” [QRD7]

	<u>Extend Life</u>	<u>Minimize Pain</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ, June 2000	20%	70%	11%	101%	(802)
<u>Sex</u>					
--Male	23	66	11	100	(399)
--Female	16	73	11	100	(403)
<u>Age</u>					
--18-29	31	64	5	100	(134)
--30-49	20	70	10	100	(331)
--50-64	11	80	9	100	(176)
--65+	19	65	16	100	(136)
<u>Race</u>					
--White	17	71	11	99	(590)
--Black and Hispanic	23	68	8	99	(148)
<u>Religion</u>					
--Catholic	23	70	8	101	(386)
--Protestant	11	78	11	100	(174)

“Suppose you had made your wishes known for the health care you wanted during a life-threatening illness. How confident are you that those wishes would actually be followed by Doctors and hospital staff—very confident, somewhat confident or not too confident?”
[QRD8]

	<u>Very</u>	<u>Somewhat</u>	<u>Not Too</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	33%	42%	21%	3%	99%	(802)
<u>Sex</u>						
--Male	27	47	23	3	100	(399)
--Female	39	37	20	3	99	(403)
<u>Age</u>						
--18-29	29	50	20	--	99	(134)
--30-49	33	45	21	2	101	(331)
--50-64	34	37	23	6	100	(176)
--65+	38	35	22	6	101	(136)
<u>Race</u>						
--White	33	43	20	3	99	(590)
--Black and Hispanic	34	40	23	3	100	(148)
<u>Talked to Doctor About Health Plans</u>						
--Yes	44	35	17	4	100	(148)
--No	31	44	22	3	100	(654)

“In general, how well do you think doctors and hospital staff do in treating pain among patients with life-threatening illnesses—Do they do an excellent, good, only fair, or poor job?” [QRD9]

	<u>Excellent</u>	<u>Good</u>	<u>Only Fair</u>	<u>Poor</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	15%	46%	23%	5%	10%	99%	(802)
<u>Income</u>							
--Under \$35000	15	37	29	9	10	100	(155)
--\$35000-\$70000	14	50	22	4	10	100	(264)
--Over \$70000	18	50	21	4	7	100	(268)
<u>Talked to Doctor About Plans</u>							
--Yes	25	51	12	3	8	99	(148)
--No	13	46	25	6	10	100	(654)
<u>Race</u>							
--White	16	48	21	5	11	101	(590)
--Black and Hispanic	14	43	28	7	8	100	(148)

“In general, how well do you think that doctors and hospital staff do in caring for the emotional needs of patients with life-threatening illnesses—Do they do an excellent, good, only fair, or poor job?” [QRD10]

	<u>Excellent</u>	<u>Good</u>	<u>Only Fair</u>	<u>Poor</u>	<u>Don't Know</u>	<u>Total</u>	<u>(n)</u>
Statewide, NJ June 2000	10%	38%	32%	9%	10%	99%	(802)
<u>Age</u>							
--18-29	8	46	36	8	3	101	(134)
--30-49	11	40	31	11	8	101	(331)
--50-64	12	32	34	10	12	100	(176)
--65+	13	34	30	8	16	101	(136)
<u>Talked to Doctor about Health Plans</u>							
--Yes	20	36	28	6	10	100	(148)
--No	8	39	33	10	10	100	(654)
<u>Race</u>							
--White	10	38	32	9	10	99	(590)
--Black and Hispanic	12	39	33	8	8	100	(148)