Eastern Washington State tends to be a socially conservative place where religion and traditions guide the outlook of many people. When Cindy Nover, Associate Professor of Social Work at Eastern Washington University and EOLWA board member, speaks at a Lions Club meeting in Spokane about death with dignity and medical aid-in-dying (MAiD), her audience is confused. It's early 2022 and over 12 years since Washington State passed medical aid-in-dying legislation. Terminally ill patients of sound mind with less than six months to live can request to use a lethal dose of medication to end their lives, if at least two doctors testify that their illness is terminal. However, Cindy’s audience doesn’t know this. Is she talking about suicide? Or euthanasia? Aren’t both illegal, not to mention immoral? When they learn that Cindy offers a facility for patients to consume the medication that will end their lives, the reactions are mixed. The local pastor asks if a patient can bring along members of their religious community to support them in their last hours, which Cindy confirms is perfectly ok. It’s after lunch, when Cindy is getting ready to leave, that people really get comfortable and begin to open up. She hears more than a few times of a family member who, when faced with a terminal illness and acute suffering, wanted to explore MAiD but didn’t get support from the rest of the family.

(continued on p. 6)
So much has happened since our last newsletter was sent to you in May of this year.

End of Life Washington (EOLWA) has hired a Medical Director to help us launch the first-of-its-kind Aid-in-Dying Provider Network. Dr. Jess Kaan joined our team at the end of summer and will help increase the number of providers across the state who support their patients’ wish to access aid-in-dying.

EOLWA’s Visionaries Giving Circle, which generously funds this groundbreaking Network, has launched as well. You can read more about how you can help increase the number of providers statewide, supporting access to aid-in-dying, on page 6.

Midge Levy, EOLWA’s founder, recently reminded me that the combination of hiring a Medical Director and our unparalleled client growth has propelled EOLWA into brand new territory. While we may no longer be a grassroots organization, we remain committed to being a place where caring people can join with others to create a world where people understand their end-of-life choices and can die on their own terms, without barriers.

EOLWA’s other matriarch, Sheila Cook, died via aid-in-dying on her 91st birthday, April 12, at home surrounded by her children and friends. Sheila was central to designing EOLWA’s client services model. In 1991, she helped to get Washington Initiative-119 on the ballot, which was our nation’s first effort to allow doctors to assist terminally ill patients who wanted to end their suffering.

We are continuing our work related to diversity, equity, and inclusion. In a recent survey, the vast majority of EOLWA board members, staff, and volunteers agree that racial equity, inclusion, and diversity are central to our mission. We will continue to examine how our current practices unintentionally exclude and disenfranchise Black, Indigenous, and People of Color (BIPOC), develop goals, and replace those with racially equitable, welcoming, and inclusive practices.

As we step into a new season, change remains a constant. I want to publicly thank our board of directors, volunteers, donors, providers, and staff for weathering these unprecedented days with me. I am proud of our work together, as illustrated in our Annual Report (page 4).

I am reminded that how we go through the change matters as much as the change itself. Thanks ever so much for stepping up and speaking out to protect and support our neighbors’ well-being in their final days. Throughout this newsletter, we will show you how you can get involved.

All of us together, our various talents and ideas, help to create the world we imagine.

In the spirit of community,

Judy A. Kinney, MSW
Executive Director
What’s on the Minds of End of Life Washington’s New Board Leaders?

by Teresa Chiftis, Current President of EOLWA Board of Directors

It is with great appreciation and anticipation that I introduce myself to you as the current President of End of Life Washington’s board of directors. My association with End of Life Washington started when my late husband, Jeff, was diagnosed with a progressive, degenerative neurological disease in 2015. Jeff knew from the outset that he was not going to see this disease to its bitter end, and he sought resources to help him take control of his death. EOLWA was the organization that provided the education and support we needed to help Jeff successfully choose to voluntarily stop eating and drinking (VSED).

Having supported Jeff in his courageous decision to VSED, I knew that I wanted to be part of a community that fiercely defended and supported Washington’s Death with Dignity law as well as other legally available options. EOLWA was the place for me. I became a board member in March of 2020 and served as Treasurer for the past year.

The past two years – under the outstanding leadership of our Executive Director, Judy Kinney, and our Past President, Bob Free – saw EOLWA significantly strengthen its staff, greatly increase its education and outreach, and serve unprecedented numbers of clients seeking our services. The success of the past two years allows the board to focus on a number of goals for this upcoming year, notably – equity, inclusion, and diversity; board development; and succession planning. I look forward to the upcoming year and working closely with all board members and our ED as we focus on these topics.

I’d also like to take this opportunity to introduce you to our two newest board members: Cindy Nover and Sue Curry.

Cindy has a doctorate in social work and is an Associate Professor at Eastern Washington University’s School of Social Work. She also works as a licensed independent clinical social worker and has a private practice providing clinical supervision to LICSW and LMHC candidates. Cindy is the founder and owner of Sagebrush Crossing – an end-of-life space in southwest Spokane County.

Sue has a Ph.D. in Psychology and is an emerita Dean and Distinguished Professor in the Department of Health Management and Policy of the University of Iowa College of Public Health. Sue joined the University of Iowa in 2008, serving as Dean of the College of Public Health, then serving as Interim Executive Vice President and Provost from 2017 – 2019.

We are delighted to have both Cindy and Sue joining the EOLWA board of directors.

I am so very grateful for the dedication of our staff, our volunteers, my fellow board members, and especially the support of our donors – all of whom work tirelessly to advance the end-of-life choices for all Washingtonians.

Are you interested in more information about joining the Board of Directors? Please contact info@endoflifewa.org

What Are Entheogens?

by Sunil Aggarwal, MD, Ph.D., Board Vice President

Recognizing the urgent need for more options to alleviate the at times paralyzing psychospiritual distress that accompanies a terminal illness diagnosis and at end of life, End of Life Washington broke new ground in the Fall of 2020 when it became the first statewide medical aid-in-dying stewarding organization to release a policy paper supporting psilocybin-assisted psychotherapy as a legal option, as a part of palliative care for terminally ill patients.

Found at endoflifewa.org, the policy paper written by then-board member Judith Gordon, Ph.D., summarized the findings of studies that showed that psilocybin therapy is effective in relieving emotional and existential distress at the end of life for 65-85% of terminally ill people in clinical trials when administered properly. There were no lasting negative effects, and many significant and enduring positive benefits. These findings fit in with the goals of palliative care, which per the WHO “Integrates the psychological and spiritual aspects of patient care; enhance[s] quality of life…”

Psilocybin is one of a family of similar substances from plants, fungi, or other sources, that have been known as entheogens, a term coined by scientists and scholars in 1979 that refers to substances that ‘occasion the divine or transcendent within’ (en-within, theo-god, gen-generates). Indigenous human cultures worldwide have utilized entheogens in traditional healing and spiritual development, including in times of major life transitions. We prefer the term ‘entheogen’ to the more modern term ‘psychedelic,’ as it is broader and more inclusive and connotes the much longer, millennia-old practice of psychospiritual healing with entheogens.

This year, EOLWA started an Entheogen Working Group to explore how EOLWA can include entheogenic care as a part of our mission (support, awareness, advocacy) and EOLWA choices umbrella. I am pleased to lead this workshop with the support of our Executive Director, Judy Kinney.

I am also serving on the Washington State Legislature’s Psilocybin
End of Life Washington continues to assist people with all aspects of end-of-life decision-making as they face incurable and terminal illnesses.

**SUPPORT**

- **773 New Clients**
  (31% increase from 2021)
- **949 Clients Served**
  (25% increase from 2021)
- **746 Death with Dignity (DwD) Clients**
- **293 Clients Used DwD Law**
  (27% increase from 2021)
- **16 Clients Used VSED**
  (33% increase from 2021)
- **27 Voluntarily Stop Eating and Drinking (VSED) Clients**

Our direct services were busier than ever before. More than **1,600 calls** were answered for people wanting information and support for their end-of-life decisions. Our Volunteer Client Advisors (VCAs) and **40 volunteer physicians** supported folks across the state. Volunteers contributed over **9,000 hours** to support our rapid client growth. A small, dedicated team of **six doctors** volunteered outside of their restrictive institution for our Continuation of Care program and supported **58** of their patients’ access to medical aid-in-dying (MAiD). Our extraordinary team of VCAs and volunteer physicians are crucial for clients accessing end-of-life options. Thank you for your time and effort!

**EDUCATION**

Through our team of ambassadors and staff, over **3,000** people participated in End of Life Washington presentations or End of Life Ready (EOLR) sessions to ensure Washingtonians understand end-of-life options and the importance of advance care planning.

**114 MAiD, VSED and Advance Directive presentations to health providers, social workers and individuals across the state.**

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**Volunteers are Key to Our Growth**

**Volunteers**
- 80 Volunteer Client Advisors (VCAs)
- 40 Volunteer Providers
- 48 New Volunteers
- 11 New End of Life Ready (EOLR) Ambassadors

**In Eastern Washington**
- 3 New Providers
- 1 New VCA
- 1 Board Member
- 10 Presentations

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“It was a comfort to me to share information with someone who understands. People like you make a difference...you have true compassion which is heart driven.”

—EOLWA Client
**ADVOCACY**

We continued to fight to pass HB 1141, the Increasing Access to Death with Dignity Act, which reduces the waiting period from 15 days to 72 hours, widens the scope of attending and consulting providers, and modernizes prescription delivery.

**HB 1141 Highlights**
- Lobbyists met with over 20 senators to garner their support
- Coordinated constituent meetings with 8 key Senators
- More than 1,000 people urged their legislator to support HB 1141

We will continue to fight for full access to this law and its intent.

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**FINANCES**

Donations from End of Life Washington’s dedicated supporters ensure that our services remain free and allow us to fight for more end-of-life choices for all Washingtonians.

We are honored to be thoughtful stewards of your financial support. Individual donors provide 75% of the income needed to support, protect and inform Washingtonians’ end-of-life choices and peace of mind in their final days. This year, we are especially grateful for the 12 Visionaries who are helping to fund the first-in-the-nation Aid-in-Dying Provider Network.

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**Two Key Successes:**

01 Representative Rude secured $200,000 in funding to study the need for Washington residents to have full access to the Washington Death with Dignity Act.

02 Increased awareness and support for HB 1141.

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Your support helps us bring our vision to life, especially amid these unprecedented times!
Even those whose reservations stem from religious beliefs open up to the idea when it is presented as a matter of preserving individual choice.

It's understandable that people are not comfortable talking about death, let alone MAiD. In our society, it is taboo. Over the last 100 years, lifespans have significantly increased. The medical system views any life lost to disease as a failure. We are not as familiar with death as our great-grandparents’ generation was. Our discomfort with the topic is such that less than half of all Americans have a legal will that describes how they would like their money and estate to be handled after their death. Cindy is an exception. She is one of those rare individuals who has had an advanced directive – a legal document that explains how you want medical decisions about you to be made if you cannot make the decisions yourself - since she was a young adult. For much of her professional career, she has had to talk with people about difficult things. In a former role at a pediatric intensive care unit at Georgetown hospital, she has had to speak to parents about the possibility of their kids dying and help them fill out their own advanced directives. As she puts it, “it comes naturally to me to sit with people at such times and to be able to have these difficult and heart-wrenching conversations.”

In many ways, her own personal losses have led Cindy to become an advocate for Death with Dignity and MAiD. Her dad lived out his last days on hospice at her home, looking out at the pretty lake that sits outside. Just a little after, Cindy was present at the unexpected passing of her tenant, an older gentleman. Shortly before he passed, he had shared with Cindy, “I don't want to die in a hospital. I'd like to just walk out in the woods and die one day.” That's when the idea for Sagebrush Crossing was born, as Cindy started thinking about offering her home as a facility for terminally ill patients who want the freedom of choice to die with dignity. Sagebrush Crossing is now a registered social purpose corporation whose services are available to any patient with a need.

Per current law, only MDs and Doctors of Osteopathic Medicine can be attending physicians to patients who have opted for MAiD. In rural America, qualified providers are few. Most general practitioners in rural areas are physician assistants or nurses. Among some medical professionals, there is little understanding of the role they can play, the legalities, and processes for patients to follow in the context of MAiD. Cindy is on a mission to fix this.

There is clearly interest and a need, even while conservative and religious values can be a barrier.

Cindy hopes to see the day when more people open up their hearts and homes to the terminally ill, just like she has done with her organization. Starting with the germ of an idea, Sagebrush Crossing has now taken root and is offering a scarce and much-needed service amongst the farmlands of Eastern Washington.

How You Can Help
EOLWA Protect and Improve End-of-Life Care

End of Life Washington depends almost entirely on gifts from people like you. With your help, EOLWA educates the public, builds partnerships with health care providers, advocates for patients’ rights, and provides services and resources — free of charge — to incurably and terminally ill people and their loved ones. Your tax-deductible gift will be used to continue EOLWA's profound sense of care, commitment to reducing suffering at the end of life, and dedicated statewide community of volunteers.

Donate by Check
EOLWA 9311 SE 36th St, Suite 110,
Mercer Island, WA 98040

Donate Online
www.endoflifewa.org/support

Other Ways to Give
Arrange for a Memorial Request
Give a Legacy Gift
Employee Giving Programs
Matching Gifts
Donate Stock
Make a Qualified Charitable Distribution

Please contact
End of Life Washington’s
Executive Director, Judy Kinney, at
jkinney@endoflifewa.org
to explore how your financial gift can support choice at the end of life.

Meet our New Medical Director

Dr. Jessica Kaan attended Creighton University for her undergraduate education and received her medical degree from Des Moines University. She completed her internship and residency at Providence Portland Medical Center. She then served three years in the National Health Service Corps, providing high-quality medical services to the underserved population of eastern Puerto Rico, where she became fluent in Spanish. Her special interests include population-based healthcare and the integration of high-quality research and alternative medicine.

Dr. Kaan works as a hospitalist in southern Washington and circuitously became involved in end-of-life work. Her father is from the Netherlands, and his uncle accessed medical aid-in-dying (MAiD) in the eighties in the Netherlands, so it was always something she was aware of. Going through med school, the topic wasn’t touched on in her training, and when she began her clinical practice as a hospitalist, she witnessed many deaths, some painful and distressing. As she became more involved in end-of-life care, her patients often asked her about their options, including MAiD. Dr. Kaan could find few doctors in southern Washington willing to prescribe MAiD for patients. Knowing someone should be trained, Dr. Kaan traveled to California to train in MAiD. She now sees patients across southern WA who desire death with dignity. Dr. Kaan enjoys work as it is meaningful to be involved with patients in this way. Patients are best cared for by their own practitioners, and she hopes that in the role as EOLWA’s Medical Director, more providers will be prepared to support their patients’ choices.

As EOLWA’s Medical Director, Dr. Kaan will help to hone the talents of volunteer providers and will reach out to providers and encourage them to support the end-of-life choices of their patients. She will help coordinate services and ongoing opportunities for provider professional development, peer support, and networking. We are thrilled to have Dr. Jess Kaan join us as medical director; please extend a warm welcome.

Effectively Engaging Your Legislators

by Nancy Sapiro, JD, EOLWA Lobbyist

While it may seem like the ink is barely dry on the bills that were signed into law from the 2022 session, End of Life Washington’s advocacy work is well underway, preparing for the 2023 session. We’ve been meeting internally to discuss strategy, as well as meeting with legislators, all in an effort to get our medical aid in dying bill across the finish line in 2023. As you likely remember from our alerts and newsletters last session, HB 1141 would improve access to our state’s Death with Dignity law by shortening the waiting period, increasing the types of providers that can participate in DWD, and allowing prescriptions to be delivered by mail.

Of course, the work that we are able to do is informed by the current makeup of the Legislature. And as the flood of campaign ads and letters popping up in your mailboxes indicates, it is election season. This means that all 98 of the House seats and half (25) of the Senate seats are up for election this fall. In addition to the natural turnover that results from elections, there are over 20 legislators who decided not to run for re-election or are running for a different seat. This means there will be many new faces in the Legislature in January of 2023 and lots of educational work to do with these new members. It is surprising how few legislators know about medical-aid-in-dying generally or about the specifics of our Death with Dignity law. This is your opportunity to help change that narrative!

Find out who the candidates are for the House and Senate seats in your district. Attend a forum where they will be debating; write or call them and ask about their position on medical aid in dying. Don’t assume that the candidate supports our work regardless of their support of other issues or their party affiliation. Ask the questions so that you know where they stand. This is also an opportunity for you to begin developing a relationship with them, so that you can call upon them in January to support our legislation.

All of us connected with EOLWA know well the importance and necessity of medical aid in dying, and the challenges in both accessing it and ensuring that it is accessible for those who want to use it. It is a complicated issue for many legislators, however, and it is only through conversation and connection that we will turn hearts and minds to support our work. I encourage you to be a part of this effort.

To stay informed and learn about how you can take action, sign up for our E-Newsletter at www.endoflifewa.org/news
End of Life Washington Visionaries

Become part of an incredible community of people who are passionately dedicated to protecting end-of-life options.

End of Life Washington Visionaries will raise $570,000 over three years to launch Washington’s Aid-in-Dying Provider Network and increasing the number of providers statewide.

For more information or to become a Visionary, please contact End of Life Washington’s Executive Director, Judy Kinney, at jkinney@endoflifewa.org

Legacy Circle
Beth Rudolph
Midge Levy
Phyllis Hatfield
Wayne T. Dodge, M.D. Legacy

Sustainers Circle
Jane Verner

Builders Circle
Beatrice Sager
Bob Free
Deborah Cohen
Jim Kinsella & Bob McNeal
Ruth Kraus
Teresa Chiftis
Wendy Gelbart

End of Life Care Across Washington