

# CALIFORNIA RIGHT TO LIFE EDUCATION FUND

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*Established 1981*

## October 2014

### Defending the Unborn

By Cecelia Cody

*Let us take a few moments to review the most common reasons used to justify abortion, and formulate a response to each.*

**RAPE** - The most common line you will hear is, "What about in cases of rape, incest or the life of the mother?" So let's start with "rape/incest," perhaps the most emotionally charged objection. Pregnancy occurs in about 5% of all rapes, and it is interesting to note that abortions due to rape/incest account for less than 1% of all abortions in the United States. Statistics aside, rape is a horrible crime, and the perpetrator deserves to be prosecuted to the full extent of the law; however, the baby conceived is a person who has done nothing wrong and does not deserve the death penalty. Even the rapist doesn't get a death penalty for his crime. If we truly believe that the baby in the womb has the same intrinsic value as a baby outside the womb, then this argument collapses on itself.

I recently heard a response that resonated within me to the "rape" objection. Imagine if you will, the woman carries to term the baby conceived by rape, and two or three years later is watching her little boy at play. All of a sudden she sees in her toddler a likeness of the rapist. She impulsively takes out a knife and stabs her child to death. We would say she has committed a crime.... Back up the timeline to right after the rape. What is the difference? In both cases a life has been violently terminated with a sharp instrument; a person has been killed.

**My Body / My Choice** – I recently saw a somewhat humorous cartoon that shreds this objection. A woman is driving down the street and as she tosses her toddler out the window she is saying: "my car/my choice." Next panel: a parent of a teenager throws the teenager out of the house, saying: "my house/my choice." Or getting back to "my body" – our society does not give a person the choice to use illegal drugs, or to kill oneself, so we do not have full "choice" over our bodies.

The idea that a baby is a part of a woman's body defies science. Yes, there is a "dependency relationship" between the mother and child throughout the pregnancy; however, after birth the baby is still dependent on his parents for all the necessities of life. (Recently I read a horrible news story of a couple who didn't feed their newborn for three months and the baby died.) Even a teenager is somewhat dependent on his family for food, shelter and clothing.

**Health/Life of the Mother** – Let's raise the ante a bit. Suppose the pregnancy is not just "inconvenient," but may be "hazardous to the health" of the mother. We have already documented that there are two "persons" involved in any pregnancy decision, and the objective is to save them both. The "health of the mother" has been used to defend abortions for all sorts of reasons, from a desire to not have stretch marks to possibly life threatening scenarios, including cancer. Recently in Ireland a woman claimed she was suicidal and wanted an abortion. (The baby was delivered early by C-section. However, this severely premature newborn had to spend several weeks in the NICU, solely because one judge determined the mother's life was at risk.) Advances in medical research and technology have discovered that the treatment protocols of many "health" issues of the pregnant mother are no longer as dangerous for the developing baby as previously thought. Chemotherapy after the first trimester, that is after the major organs are formed, is rarely harmful to the developing baby. Gestational diabetes can be controlled with careful monitoring. So health of the mother is pretty much a moot issue with modern medical interventions. The cases wherein the LIFE of the mother at risk, while present are not prevalent, and must be reviewed on a case by case basis, and as mentioned before, our ultimate objective is to "save them both."

**Do you know someone who might be considering abortion?**

**Make sure they get the facts first!**

**A LIFE depends on it...**

**1-800-712-HELP (4357)**

**Website: <http://www.optionline.org/>**

# Questions Surrounding the Definition of "Brain Death"

Bradley Mattes, Executive Director  
Life Issues Institute

**How do we define “death” today? There are some serious questions surrounding the definition and diagnosis of “brain death.”** Are there doctors who exploit the line between life and death? How does organ donation play a role?

Historically, the prevailing determination of death was the cardiopulmonary standard, which is defined as the irreversible loss of heart and lung function. In 1968, *the Report of the Ad Hoc Committee of the Harvard Medical School to Examine the Definition of Brain Death* was published in the *Journal of the American Medical Association*. It ushered in the first introduction of “brain death” as a determination of death. **It was no coincidence that this coincided with the advent of technology that enabled the first transplants of vital organs.** The 1968 report actually stated that the previously established criteria for death were “obsolete” and that it was a contributing factor to the shortage of organs available for transplant.

In 1981, the National Conference of Commissioners on Uniform State Laws, American Medical Association, American Bar Association and President’s Commission for the Study of Ethical Problems in medicine and Biomedical and Behavioral Research drafted a state law called *The Uniform Determination of Death Act*. It further described “brain death” as the “irreversible cessation of circulatory and respiratory functions, or the irreversible cessation of all functions of the entire brain, including the brain stem.” Many states have since adopted it as a guide for determining death.

The criteria for “brain death” varies by state, however there are general evaluations that physicians typically perform. These include: eye response to light; gagging and swallowing reflexes; and the ability to breathe without a ventilator. It is also critical that the doctor determines there are no other contributing factors such as drugs that can be anesthetizing or paralyzing the

patient because these can often mimic symptoms of “brain death.”

The debate ensues because the current criteria for brain death are not infallible. There are other functions of the brain stem that are not accounted for including, maintaining a normal body temperature and control of heart rate and blood pressure. For example, surgeons have reported that so-called “brain dead” patients have reacted to surgical incision during an organ procurement procedure. They observed rapid increases in heart rate and a sharp rise in blood pressure. It begs the question, is “brain death” truly death? Is it possible that we cannot accurately determine how the brain functions?

Dr. Robert Truog, an associate professor of anesthesia at Harvard Medical School agrees, “There is evidence that many individuals who fulfill all of the tests for brain death do not have the permanent cessation of functioning of the entire brain.” The revelation that there’s much we still don’t know about brain function,

combined with advancements in medical technology, likely means the 1968 report and 1981 state draft are obsolete in their application to the definition of brain death.

This controversy has ties to the organ procurement industry. The reason is organs can continue to be

preserved under the current “brain death” designation. Respiratory and circulatory functions are necessary to maintain the organ’s viability and can be artificially maintained. Organs quickly begin to deteriorate with the loss of the heart and lungs, which makes successful organ transplantation far less likely. So, a vested interest does exist in the “brain death” diagnosis.

There’s a distinct link between the dignity of the beginning of human life and the end of life. Both deserve to be protected. Doctors should not rush into making a determination of “brain death.” Families should be willing to have prior conversations with their loved ones and prepare for these potential tragic cases as much as possible. One step you can take is to complete a Durable Power of Attorney. Education and awareness are our best allies as we fight to protect life at all stages.

*(Durable Power of Attorney for Health Care forms are available from the Patients Rights Council [www.patientsrightscouncil.org](http://www.patientsrightscouncil.org))*

*To obtain a durable power of attorney for health care for the state in which you are a resident, call the Patients Rights Council*

*(800-958-5678 or 740-282-3810) between 8:30am and 4:30pm (Eastern Time).*

Article is an excerpt from  
<http://www.lifeissues.org/breakingnews/2014/bn8-7-14.html>

## Around the Office

By Cecelia M. Cody, Administrative Director

**“Flash Mob” at the Mall** – I’ve sat at the mall table many a morning and had just a few people visit the table. And then the youth volunteers would arrive, and I’d go get a bite to eat, and come back to the scene of a table full of youth talking with our youth volunteers. Well I tried not to take it personally, but you know even we “older folks” wonder why the difference in visitor count? Well Friday, September 12<sup>th</sup>, the youth were unable to staff the table in the late afternoon, so I was sitting at the table about 4:30pm contemplating calling it a day and packing up to go home. All of a sudden a dozen teens and pre-teens approached the table and asked for a “baby.” It seems word had gotten out at the mall that the “people with the babies” (our 10-12 week precious preborn models) were at the mall. Suddenly I was energized, got my second wind and began to tell our story of fetal development: heartbeat at 23 days, brain waves at 43 days, hold up the precious feet pin and explain that these are the feet I then gave each youth a “baby” and the card that goes with it detailing the fetal development, along with a precious feet pin if they wanted one, and invited the youth to look over our literature and take whatever they wanted. I ended with “Any questions?” and there were a few. This went on for almost an hour; the youth kept coming in waves, and I ran out of the over 50 “Precious Preborns” I had brought. If even a small percentage of those “babies” are shared with classmates and friend, it could have a huge impact! I have shared in previous newsletters follow-up stories of how these “babies” have gone to scout meetings, Sunday School, and public and private school classrooms, as well as being shared around the family dinner table. They are our most popular item with the students, and the precious feet pins are the most popular with the adults.

As always, several people stopped by the table to thank us for being there, and we even had a few of our “visitors” talking with each other and networking for life.

**Californians For Life** – *“Californians for Life” are diverse, ordinary people who recognize abortion as the most important social justice issue of our*

*generation and are therefore, dedicated to working together with collaboration and synergy to end abortion in our state.”* Recently they launched their new website <http://www.californiansforlife.org/> full of a treasure trove of information. Click on the “Join Us” button at the bottom of the homepage and keep updated on activities that are of interest to you. There is a group reaching out to churches, youth, schools, and even legislation and voter outreach...something for everyone! Spread the word, tell all your friends. We at California Right to Life Educational Fund have several members actively involved with this initiative. If you would like to work with one of our members, contact this office to see if we have someone working in your “passion” area.

**New e-mail System-** You may have noticed our e-blasts now come from a service called “MailChimp.” If you aren’t getting these e-mails it is most likely because we do not have a current e-mail address for you. And that must be the case for about 80% of the addresses. The new system provides us all sorts of information and one of the statistics is that our “Open Rate” is about 17% ☹ which has Cecelia a little sad these days. Let’s work on getting a ☺ Happy Face for Cecelia by providing current e-mail addresses. She works hard putting out these e-blasts, and provides some wonderful information on breaking news and updates of events that happen between newsletter dates, including our Mall Table dates.

**Drought Update** – A Special THANK YOU to all who made a contribution in the last month. If California would have a nice “rainfall” like we had in the last month in donations, the water drought might be curtailed. We have somewhat alleviated our summer cash crunch; however, our expanding opportunities to “Evangelize for Life” including anticipated future “Flash Mobs” we will need to continue to replenish our supplies to keep our Information Tables for Life well stocked.

### *Calendar of Events*

*For the latest updates of events see*

[www.calendarforlife.org](http://www.calendarforlife.org)

**40-DAYS FOR LIFE** – Sept. 24-Nov. 3, 2014  
See: <http://40daysforlife.com/> for a location near you.

**LIFE CHAIN** – October 5, 2014 in most locations.  
For a location nearest you see: <http://lifechain.net/>

**MARCH FOR LIFE** – Washington D.C.  
Thursday January 22, 2015

**STUDENTS FOR LIFE NATIONAL  
CONFERENCES**

**East Coast** – Friday January 23, 2015 - First Baptist  
Church of Glenarden, Upper Marlboro, MD

**West Coast** – Sunday January 25, 2015 – St. Mary  
Cathedral, San Francisco

For Further Information see: <http://www.sflalive.org/>

**WALK FOR LIFE – WEST COAST**

San Francisco – Saturday January 24<sup>th</sup> 2015

See: <http://www.walkforlifewc.com/>

**Combined Federal Campaign, United  
Way Payroll Deductions, and other  
“Give at Work” Payroll Charity Drives**

Please remember California Right to Life  
Educational Fund when the payroll pledge card  
comes around this fall. If you need assistance in  
designating us as your charity of choice, feel  
free to contact our office 925-944-5351 or by e-  
mail at [callife@calright2life.org](mailto:callife@calright2life.org) (**Federal  
employees: our CFC number is 49743**)

**WHO IS CALIFORNIA RIGHT TO LIFE?**

This is the newsletter of **California Right to Life  
Education Fund**, a 501-c-3 organization established  
to educate the public about pro-life issues. Donations  
to the EDUCATION FUND are **tax-deductible** and  
can be sent to P.O. Box 4343, Walnut Creek, CA  
94596-0343.

California Right to Life **Committee, Inc.** is a 501-c-4  
organization providing information on legislative  
issues affecting the right to life, and pro-life political  
advocacy. **CRLC, Inc. is not permitted**, under IRS  
regulations, to offer a tax deduction for donations.  
\$24.99 annually is requested for a subscription to the  
CRLC legislative email updates list and can be sent to  
1920 Monument Blvd #309, Concord, CA 94520.

Both are affiliates of American Life League, headed  
by Judie Brown, and share the same “no-exceptions,  
no excuses” beliefs and the same dedication to  
promoting the Culture of Life, respecting all innocent  
human life from the single-cell stage to natural death.

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