



# Missouri Right to Life (MRL) Policy Statements Overview

Please see the following pages for more details  
All policies listed below updated and approved in February 2020.

**Abortion**..... **Oppose**

**Rape & Incest**..... **Oppose**  
Except in Rare Instances.

**Contraceptives, with notes on “morning after pill” and RU-486**..... **No Position**  
MRL takes no position on artificial contraception – But opposes all drugs or devices that are known to act at least some of the time as abortifacients.

**School-Based Clinics**..... **Oppose**  
School-based clinics’ providing birth control services to unmarried adolescents and making referrals for abortions.

**Civil Disobedience, Direct Action, Violence** ..... **Oppose**  
MRL finds unacceptable any type of violent activity done in the name of the pro-life movement. We do not condone, authorize, or encourage violence or engaging in unlawful activities, but support only legal and lawful means of saving lives.

**Equal Rights Amendment**..... **Oppose**

**Embryonic Stem Cell Research** ..... **Oppose**

**Human Cloning** ..... **Oppose**

**Protection of Human Clones** All innocent human beings should have equal protection of the law.

**Chimeras** ..... **Oppose**  
MRL is opposed to the production of chimeras in part from human genetic materials.

**Living Wills & Advance Directives** ..... **Support**  
MRL urges all persons to prepare and execute durable powers of attorney for health care and advance directives that incorporate prolife principles.

**Euthanasia** ..... **Oppose**  
MRL does not oppose allowing people to die when death is imminent. We do, however, oppose the hastening of death.

**Organ Donations, with note on non-heart-beating donations** ..... **Oppose**  
No organs should be removed from a person for transplant until the person is dead. Current practices do not assure that death has occurred before organs are removed.

**Capital Punishment** ..... **No Position**

**March of Dimes**..... **Oppose**  
Because the March of Dimes is anti-life in its recommendations, MRL urges citizens to consider carefully whether to support the March of Dimes.

**Susan G. Komen Foundation and Race for the Cure** ..... **Oppose**  
Because the Susan G. Komen Foundation, sponsor of the “Race for the Cure,” supports embryonic stem cell research and allocates money to Planned Parenthood at the national level, MRL urges citizens to consider carefully whether to support the Race for the Cure and other activities of the Susan G. Komen Foundation.

**Girl Scouts USA**..... **Oppose**  
Because Girl Scouts USA promotes, both directly and indirectly through other organizations, policies and behaviors clearly contradictory to the goals and purposes of Missouri Right to Life, Missouri Right to Life urges citizens to consider carefully whether to participate in Girl Scouts or support them in any way.

**Organizations That Take Anti-Life Positions** ..... **Oppose**  
MRL does not support any organization that in its statements or in practice manifests antilife positions on abortion, infanticide, euthanasia, embryonic stem cell research, or cloning. MRL urges citizens to consider carefully whether to support such organizations.

## **MISSOURI RIGHT TO LIFE POLICY ON ABORTION**

### **Policy**

We hold that the laws of our society should preserve and protect all innocent human beings from intentional destruction by abortion. Until the U. S. Constitution is interpreted to allow Congress or Missouri to provide such protection, the enactment of laws that reduce the number of deaths but fall short of complete protection will be necessary.

### **Explanation**

Every human being has been endowed with an unalienable right to life from inception to natural death. From that unalienable right flows the principle of equal rights of all under law, which disappears if the right to life of each one is not honored.

Abortion tramples an individual's equal right to life. It violently ends all the unrealized potential of its innocent victim, a human being invested with immeasurable capacities for awe, for good, for ingenuity, and for molding this world into a fairer place for all fellow humans. Moreover, abortion neither solves the true problems of a mother nor resolves the problems of society as a whole. It represents a confession of despair followed by the void of destruction.

>From these premises, we hold that the positive laws of our society should preserve and protect all human beings from intentional destruction by abortion. To be clear, we mean "abortion" to consist of the intentional destruction of the life of an unborn human, excepting only those rare cases in which such destruction is unavoidable to save the mother's physical life. We further mean "unborn" to include those human beings who may be created and gestated outside the womb until the age at which a baby in the womb would normally be born or until the positive law acknowledges the rights of such a human being. We further mean "human being" to consist of any individual of the species homo sapiens, however he or she begins, whether conceived in the natural way, or begun by fertilization outside the womb, or created by processes including cloning and perhaps others still waiting to be developed by the mind of man.

The United States Supreme Court has imposed an unwarranted and arrogant decree upon our nation, holding that the Constitution of the United States does not include unborn human beings as "persons" and forbidding our federal and state legislatures from protecting the right to life of unborn human beings from abortion. We cannot obtain from our legislators the full set of positive laws that we seek while this decree remains in place. In fighting for pro-life legislation, we understand that we may have to accept lesser degrees of legal protection from time to time than we ultimately seek to achieve.

We will work in the long term to reverse the Supreme Court's unjust and dehumanizing decree, and we will do all that we can in the short term to save lives through education, legislation, and other lawful, non-violent means.

## **MISSOURI RIGHT TO LIFE POLICY ON RAPE AND INCEST EXCEPTIONS**

### **Policy**

Each human being, regardless of how he or she is conceived, deserves protection under the law; however, MRL will sometimes be compelled to tolerate the addition of a rape or incest exception to a measure in order to obtain more protection for the unborn than now exists.

### **Explanation**

It is a rare part of life that human beings are sometimes created by rape or by incestuous sex. Abortion compounds the trauma to the woman by destroying the new human being who has been created within her. The baby had nothing to do with his or her conception. Abortion does not erase the rape or the incest that has occurred. The literature of abortion has begun to include accounts by women who have chosen to love their babies conceived in this way. Later, of course, when the children may learn the circumstances of their origins, they will be grateful to be alive.

In Missouri Right to Life's work to reclaim protection of the law for the unborn, there may be occasions when a pro-life bill or regulation will not be enacted unless exceptions are made to its coverage. Among the most common are exceptions for rape and incest. In view of the legal status of abortion in our society under the regime of Roe v. Wade, where an abortion for any reason or no reason is allowed at all stages of pregnancy as long as a doctor is willing to declare that it is for the mother's health, MRL will sometimes be compelled to tolerate the addition of a rape or incest exception to a measure in order to obtain more protection for the unborn than now exists. We will continue to educate our fellow citizens, lawmakers and judges to become more and more inclusive in regard to the reasons for which they will agree to protect unborn babies in law.

## **MISSOURI RIGHT TO LIFE POLICY ON CONTRACEPTIVES THAT ACT AS ABORTIFACIENTS**

### **Policy**

Missouri Right to Life does not take a position on artificial contraception per se, but MRL is opposed to all drugs or devices that are known to act at least some of the time as abortifacients.

### **Explanation**

Missouri Right to Life acknowledges the scientific reality that for humans produced by fertilization, the life of a human being begins at conception.<sup>1</sup> Therefore, all drugs or devices that are intended to prevent implantation after conception occurs, or in any other way destroy human life, cause abortions. They are abortifacients. Some drugs, such as the so-called “morning after” pills (“Plan B”) do not act as abortifacients in every instance. Plan B in some instances prevents conception. If conception occurs despite taking Plan B, however, Plan B prevents implantation, and as a result, the new human being cannot obtain nutrition and dies. Because of this feature of Plan B, one never knows when it will act as an abortifacient. Anything that may act as an abortifacient at any time is wrong to use. Just like Russian roulette, it may kill at any time. Therefore, Missouri Right to Life opposes “Plan B” and any other drugs that may act like it.

The abortifacient known as mifepristone (brand name, “Mifeprex,” formerly known as “RU-486”), is never taken as a “morning after” contraceptive pill, but is used several days after conception purely and simply as an abortifacient. It always acts, and is intended to act, by killing the child. Abortions by chemicals are just as lethal to unborn children as abortions by surgery. Missouri Right to Life opposes abortions that are done by any means.

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<sup>1</sup> For humans produced by cloning, the better word is “inception,” because they are not conceived in the usual sense.

**MISSOURI RIGHT TO LIFE**  
**POLICY REGARDING SCHOOL-BASED CLINICS**

**Policy**

Missouri Right to Life is deeply concerned about unwed adolescent sexual activity, unmarried adolescent pregnancies, referrals for abortions by nurses in school settings or by other school personnel, and abortions upon school-aged women. MRL opposes school-based clinics' providing birth control services to unmarried adolescents and making referrals for abortions.

**Explanation**

Regardless of claims to the contrary, statistics have proven that school-based clinics that provide birth-control services foster and promote increased adolescent sexual activity, giving rise to a higher rate of pregnancies among unmarried teens which so often end in abortions.

In a society where public policy and law accept abortion as a method of birth control, and where birth control is freely available to minors without parental consent, placing such clinics within the school directs our public education system to legitimize and promote unwed adolescent sexual activity, birth control, and abortions and undermines parents' rights, roles, and responsibilities as primary educators of their children.

Missouri Right to Life, however, has no opposition to other health services that have as their goal the genuine improvement and maintenance of health for any and all classes of society.

**MISSOURI RIGHT TO LIFE**  
**RESOLUTION CONCERNING DIRECT ACTION**

**Policy**

Missouri Right to Life finds unacceptable any type of violent activity done in the name of the pro-life movement. We do not condone, authorize, or encourage violence or engaging in unlawful activities, but support only legal and lawful means of saving lives.

**Explanation**

Missouri Right to Life is dedicated to changing the system that has allowed countless unborn children to be destroyed by abortion on demand, threatens the lives of handicapped newborns through infanticide and threatens the elderly and infirm through euthanasia.

We recognize that a multitude of pro-life efforts are necessary to protect lives.

It is the policy of this organization that all officers and board members of this corporation as delineated in Article IX of the by-laws as well as standing committee chairmen, refrain from participation in unlawful acts, including trespassing, when engaging in activities in any way related to the purposes for which Missouri Right to Life is organized, whether or not such activities are sanctioned or sponsored by Missouri Right to Life.

## MISSOURI RIGHT TO LIFE POLICY ON RATIFICATION OF THE FEDERAL EQUAL RIGHTS AMENDMENT

### Policy

Missouri Right to Life opposes ratification of the 1972 proposed federal Equal Rights Amendment (ERA).

### Explanation

Ratification of the 1972 proposed federal Equal Rights Amendment (ERA) would be a disaster for the pro-life movement, because it would undoubtedly be used by federal courts to bar even the modest regulations on abortion allowed under Roe v. Wade, such as parental consent requirements and bans on the use of tax money to subsidize abortions. Certain state courts have construed their state constitutions' equal rights provisions in this fashion, fueling pro-life concerns about the ERA at the federal level. See, New Mexico Right to Choose/NARAL v. Johnson, 975 P.2d 841 (N.M. 1998); Low Income Women of Texas v. Bost, 38 S.W.3d 689 (Tex. Civ. App. 2000).

A 2006 law review article by Professor Linda J. Wharton, who represented the pro-abortion side in the 1992 Supreme Court case, *Planned Parenthood v. Casey*, describes these cases. “[C]hallenges under state ERAs or other state constitutional guarantees have successfully invalidated restrictions on public funding for abortion in many states.” L. J. Wharton, *State Equal Rights Amendments Revisited: Evaluating Their Effectiveness in Advancing Protection Against Sex Discrimination*, 36 Rutgers L. J. 1201, 1250-51 nn.216-217 (2006) (collecting cases). If restrictions on governmental funding can be overturned, obviously any and all regulations of abortion can be set aside under an ERA.

In all the state ERA cases, attorneys from NARAL or NOW have argued that an equal rights amendment forbids any type of regulation on abortions. They fully intend to argue the same way in lawsuits against states if the 1972 proposed federal ERA is ever ratified. The difference is that a federal ERA would cover the entire country. Why should we give federal courts the opportunity to impose on the entire country—including Missouri—a ban on all abortion regulations that up to now has been only imposed in certain states? Such a ruling would invalidate common-sense regulations including those requiring parental consent, outlawing partial-birth abortions, specifying what types of information should be given to women before an abortion, requiring a waiting period before abortion, and many others. In short, over three decades of work by the Missouri General Assembly in the pro-life area could be wiped out if the 1972 federal ERA were ever ratified.

There should be no doubt of the reality of the risk that the federal courts will interpret a federal ERA to forbid any and all regulations of abortion. When Justice Ruth Bader Ginsburg was the head of the ACLU, she argued that *Roe v. Wade* should be recast from a due process decision to an equal rights decision. R. B. Ginsburg, *Some Thoughts on Autonomy and Equality in Relation to Roe v. Wade*, 63 N.C.L. Rev. 375, 383 (1985). Her philosophy remains the same now that she serves on the Supreme Court, as her dissent in the partial-birth abortion case, Gonzalez v. Carhart, illustrates:

[L]egal challenges to undue restrictions on abortion procedures do not seek to vindicate some generalized notion of privacy; rather, they center on a woman's autonomy to determine her life's course, and thus to enjoy equal citizenship stature.

Dissent of Justice Ginsberg, Gonzalez v. Carhart, 550 U.S. 124, \_\_\_; slip op. at 1 (2007).

Justice Ginsberg's theory has not carried the day yet, because Roe v. Wade and Planned Parenthood v. Casey were not decided on equal protection grounds. However, ratification of the ERA would hand to like-minded justices the equal protection tool that they need to rule that the federal constitution protects the right to abortion and prevents any regulation at all, except regulations that in their view enhance women's health. Remember that under the companion case to Roe v. Wade, "health" includes all factors that an abortionist wants to use to justify an abortion, including "physical, emotional, psychological, familial [factors], and the woman's age." Doe v. Bolton, 410 U.S. 179, 192 (1973).

Some legislators may suggest that Missouri's ratification should be conditioned on adding language to the ERA that makes it abortion-neutral. Unfortunately, the controlling decisions of the United States Supreme Court do not appear to allow a state legislature's ratification of a federal constitutional amendment to be conditional. Hawke v. Smith, 253 U.S. 221 (1920). In fact, contrary to what one would intuitively expect, the Court has ruled that a conditional ratification is treated as an *unconditional* ratification, because the U. S. Constitution recognizes only an up or down vote on the question and disregards all conditions that a state legislature may try to attach. Hawke, supra; Leser v. Garnett, 258 U.S. 130 (1922).

For all these reasons, Missouri Right to Life and National Right to Life Committee are energetically opposed to any attempt to ratify the 1972 federal ERA. See Memorandum to Members of the Illinois General Assembly dated March 20, 2007 (available at <http://www.nrlc.org/Federal/ERA/index.html>). Women's equal rights do not depend on taking the lives of their babies, and we should not give federal judges a vehicle that they can use to rule otherwise.



## **MISSOURI RIGHT TO LIFE POLICY ON RESEARCH THAT USES HUMAN EMBRYOS**

### **Policy**

Missouri Right to Life is opposed to all research using human embryos unless the research is intended to promote the health of the embryos, the research cannot instead be performed on adults, and the research entails only minimal risk of harm to the embryonic humans who are involved.

### **Explanation**

This policy statement is taken almost verbatim from the Declaration of Helsinki of the World Medical Association. See World Medical Association, "Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects," paragraph 27 (1964, as amended through Oct. 22, 2008).

In the years just after the turn of this century, embryonic stem cell research (ESCR) has been touted as a source for miracle cures of many conditions and diseases. Unfortunately, under current procedures, in order to obtain the embryonic stem cells with which to conduct research, human beings are killed. In addition, some scientists may want to use living embryonic humans in other ways for research when the research will not benefit the human subjects involved.

In the area of ESCR, it is essential to distinguish between legitimate research that utilizes the somewhat inaptly-named "adult" stem cells, which are stem cells obtained from such sources as baby teeth, umbilical cord and placental blood after birth, bone marrow, ordinary fat, and other sources, and the illegitimate research that uses embryonic stem cells. The use of adult stem cells for research does not involve killing any human beings to obtain the cells, and there is no problem from a pro-life standpoint in conducting adult stem cell research. The members of Missouri Right to Life support and encourage such research, for we all rather like scientific advances and the benefits of health that they bring.

It is how embryonic stem cells are currently obtained that compels a different judgment of ESCR. Under current biological technology, the stage of development when the embryonic stem cells are most prized for research is when a human being exists as a blastocyst, just before implantation. One must keep in mind that there is no such thing as implantation of "a fertilized egg," for between the time of fertilization in the fallopian tube and the time when the blastocyst reaches the womb for implantation, a week of development has occurred. No longer a "blob of cells" or a "mass of cells" (descriptions which new discoveries indicate are never accurate about any stage of development, anyway), the new human being has begun the processes of specialization that will lead to many different functions and structures within the body. It is already a complex organism, constantly growing and developing in a self-directed process not controlled by the mother's body. The new human at this stage, consisting of almost 200 well-organized cells, appears as a hollow ball, on the inside of which are found the stem cells that ESCR researchers desire so greatly. To obtain the stem cells, the new human will be destroyed by being opened up so that the inner mass of embryonic stem cells may be removed. It will be just as if adults were disemboweled for their inner organs. Obtaining the human stem cells for ESCR represents nothing less than medical cannibalism. Civilized societies would not permit it.

The destruction of human embryos to obtain their stem cells is not necessary. It is the pluripotency of embryonic stem cells that makes them most desirable for scientific research. Alternative means of producing pluripotent cells have been found in recent years. The process of producing "induced pluripotent stem cells" (iPSC) shows particular promise in that regard. It reprograms, as it were, the genetic contents of ordinary (somatic) cells from the body by inserting key genes that allow the cells to act like embryonic stem cells. If the stem cells that are produced from this process or any like process are deemed to be "embryonic," then MRL's policy would not result in MRL's opposing such research. It is the killing of human embryos in order to obtain embryonic stem cells that Missouri Right to Life opposes.

The abuse of living human embryos for other research purposes is also barbaric. It converts human beings from ends in and of themselves to means of achieving others' ends. For any procedure or research upon a human being to be just and ethical, it must be directed to the good of the human subject, not to someone else's good, and it must not cause substantial harm to the human who is involved.

## **MISSOURI RIGHT TO LIFE POLICY ON HUMAN CLONING**

### **Policy**

Missouri Right to Life is opposed to human cloning.

### **Explanation**

Cloning is no longer a matter of science fiction, as in the Stars Wars movies references to “the clone wars.” Cloning of humans is here; it has been successfully achieved. A. J. French et al., “Development of Human Cloned Blastocysts Following Somatic Cell Nuclear Transfer (SCNT) with Adult Fibroblasts,” Stem Cells, 26 (2): 485 - 493 (February, 2008).

At the time of this writing (September, 2009), the only successful method of cloning humans has been somatic cell nuclear transfer (SCNT). However, the principles involved do not depend on the exact procedure that is utilized. Therefore, “cloning” is used in a broader sense, with the meaning that was used by the President’s Council on Bioethics in 2002:

In the sense relevant here, “cloning” is a form of asexual reproduction (parthenogenesis is another), the production of a new individual not by the chance union of egg and sperm but by some form of replication of the genetic makeup of a single existing or previously existing individual. (In biological or functional terms, the core of sexual reproduction is not bodily intercourse but the fusion of male and female *germ cells*; thus IVF, though it takes place outside the body, is—biologically speaking—a form of sexual reproduction.)

Cloning is the activity of producing a clone, an individual or group of individuals genetically virtually identical to the precursor that is being “replicated.”

President’s Council on Bioethics, Human Cloning and Human Dignity: An Ethical Inquiry, pp. 42-43 (July, 2002) (internal footnotes omitted).

Human cloning is an abuse of human rights. There is no intent on the part of those who engage in cloning to allow the human beings produced by cloning to live. This would be what the cloners condemn as “reproductive cloning.” Rather, the intent of the cloners is to end the lives of human beings produced by cloning after harvesting stem cells from them or performing some other experimental research on them. This is exploitation of helpless young human beings for the benefit of other human beings, and it is wrong. To destroy young human beings for their cells, tissues, or organs is nothing but medical cannibalism. Because this is what cloning represents in current practice, Missouri Right to Life opposes it.

**MISSOURI RIGHT TO LIFE POLICY ON THE PROTECTION  
OF ARTIFICIALLY- PRODUCED HUMAN BEINGS**

**Policy**

The laws should preserve and protect all innocent human beings outside the womb from injury or destruction, no matter how they are created. All human beings should enjoy the equal protection of the law.

**Explanation**

Every human being has been endowed with an unalienable right to life from inception to natural death. From that unalienable right flows the principle of equal rights of all under the law, which disappears if the right to life of each one is not honored.

We hold that a human being consists of any individual of the species *homo sapiens*, however he or she begins, whether conceived in the natural way, or begun by fertilization outside the womb, or created by any process such as cloning that is now imaginable or even unimaginable. To exclude a member of *homo sapiens* from the ranks of humanity is a flawed philosophical judgment which strikes at the heart of human dignity and equality. How many peoples and nations have walked down this tragic road! The bloody carnage that results from dehumanizing unwanted persons stretches from the beginning of history past the 19th century slave plantations of our own Union, through the concentration camps of 20th century Germany, and into the nascent 21st century “brave new world.”

## **MISSOURI RIGHT TO LIFE POLICY ON CHIMERAS**

### **Policy**

Missouri Right to Life is opposed to the production of chimeras in part from human genetic materials.

### **Explanation**

A “chimera” may be described as an artificially produced individual having tissues of two or more species. The idea of combining human genetic materials (e.g., chromosomes, genes, and the DNA strands out of which genes and chromosomes are composed) with genetic materials of non-humans has graduated from bad science fiction into current reality. (Pictures and technical details may be found at Y. Chung et al., “Reprogramming of Human Somatic Cells Using Human and Animal Oocytes,” *Cloning and Stem Cells* (journal), vol 11, no. 2 (2009), available at <http://www.liebertonline.com/doi/pdf/10.1089/clo.2009.0004?cookieSet=1>. See also Chelsea Zimmermann, “The Absolute Uniqueness of Human Beings,” *Reflections of a Paralytic* (web log) (October 26, 2009), available at <http://reflectionsofaparalytic.com/>, and “It Is Easier to Clone a Human Than to Blend One With an Animal,” *Discover Magazine 80 Beats* (web log) (February 4, 2009), available at <http://blogs.discovermagazine.com/80beats/2009/02/04/it-is-easier-to-clone-a-human-than-to-blend-one-with-an-animals/>.)

For scientists deliberately to produce a mixed biological creature that is part-human and part-animal is to show contempt for human beings. In such a project, all respect for humanity is abdicated in favor of ruthless utilitarianism, by which any travesty may be practiced upon another human (or part-human) who is not strong enough or conscious enough to resist. The scientific hubris – the desire to “play God” – that drives such experiments is minimized in public pronouncements; they are projected as founded upon humanitarian motives, especially finding cures for disease.

Missouri Right to Life insists that human beings be treated as subjects, not objects. Every human being is unique, with capacities and promise that are too boundless for measurement. On this earth, only humans have minds that are capable of contemplating the infinite and the unknown. Only humans can make promises and keep them. Only humans can write and appreciate poetry, or paint icons and landscapes, or dream of justice and peace. There is something inherent in the human heart that longs to voyage beyond mere laboratory data into limitless depths of truth and good and beauty, of which the most sublime symphonies or elegant ballets are mere hints and whisperings.

No mechanistic and materialistic view of the world can account for such things as love, sacrifice, imagination, or beauty without reducing them to unrecognizable caricatures of what people actually experience in their lives on a daily basis. No one is justified in reducing humanity to an object for manipulation in laboratories. Missouri Right to Life condemns the production of mixed human-animal creatures by whatever means may be invented in the mind of man.

# **MISSOURI RIGHT TO LIFE POLICY ON LIVING WILLS, ADVANCE DIRECTIVES, AND DURABLE POWERS OF ATTORNEY FOR HEALTH CARE**

## **Policy**

Missouri Right to Life urges all persons to prepare and execute durable powers of attorney for health care and advance directives that incorporate pro-life principles.

## **Explanation**

All human life is sacred, and each human life is a gift. No one can legitimately presume to terminate this sacred gift, even in the face of pain and suffering. As a practical matter, in this era of medical knowledge, no pain is uncontrollable; pain can be rendered tolerable with proper medical attention. It is not a reason to end life before a person's natural end. Human suffering may be turned into an opportunity to learn humility and acceptance, and for those who are religious, to use prayer to prepare to meet one's Creator.

The term, "living wills," is one of the most misunderstood phrases in the English language. Everyone thinks it refers to a document that says, "When things get bad enough for me, stop treatment and let me die." Unfortunately, very few people agree on when things become "bad enough" for the "living will" to kick in. Even if the document spells it out, health care professionals often think they know what a "living will" provides without reading it, so conditions and stipulations in a patient's "living will" often are ignored by those who are supposed to abide by them.

Missouri law does not provide for "living wills," but for "declarations concerning death-prolonging procedures," "advance directives," and "durable powers of attorney for health care."

The first type of document, "declarations concerning death-prolonging procedures," becomes effective only when the declarant's condition is terminal and the declarant does not have the capacity to make health-care decisions. Sec. 459.025, RSMo. It is designed to allow a patient to forgo "death prolonging procedures," which are defined as "any medical procedure or intervention which, when applied to a patient, would serve only to prolong artificially the dying process and where, in the judgment of the attending physician pursuant to usual and customary medical standards, death will occur within a short time whether or not such procedure or intervention is utilized. Death-prolonging procedure shall not include the administration of medication or the performance of medical procedure deemed necessary to provide comfort, care or to alleviate pain nor the performance of any procedure to provide nutrition or hydration." Sec. 459.010(3), RSMo.

Missouri Right to Life finds nothing objectionable in such declarations, for they allow for a natural death without shortening life. They are rarely used, however, because many people are told that they do not allow for the exercise of control in enough circumstances.

"Advance directives" are more like the documents that most people think of when the terms "living will" comes up, and they are commonly provided as part of estate planning packages offered by lawyers.. The Missouri Bar and other organizations sponsor certain forms for living wills. Often, the basic principle that appears to govern such documents is that if a person is unconscious for a long enough period of time so that doctors and/or relatives give up hope of recovery, that is the time to end treatment. Furthermore, they address tube feeding and hydration by tube as types of treatment that may be ended along with any other treatment, thus directing death to be caused by dehydration and/or

starvation, rather than allowing death to occur. Depriving a person of food and water always causes death, no matter how healthy or sick a person may be otherwise.

Advance directives satisfy the requirement of Missouri law that a person may be deprived of medical care and treatment that would keep the person alive when unconscious only if there is clear and convincing evidence that the person stated in advance his or her wishes so to be deprived. Cruzan v. Harmon, 760 S.W.2d 408 (Mo. 1988). A properly-signed advance directive can provide such clear and convincing evidence.

Not all advance directives are unethical. An ethical advance directive may be drawn for a person who respects the nature of life as a gift and refuses the presumption of thinking that the gift can be terminated at will when pain becomes too much or life has become “useless.”

The use of advance directives is futile if health care professionals do not pay attention to them, as happens all too often. As a practical matter, it is important to find a person who will advocate for a patient with the health care system. Such a person is most often an “attorney in fact” in legal parlance or a “health care agent” in ordinary language. In Missouri, the legal document that appoints this agent is a durable power of attorney for health care. See sections 404.800-.872, RSMo. This document may contain a reference to the advance directive or it can overlap the advance directive by including some of the same conditions. It is recommended that both an advance directive and a durable power of attorney for health care be used to provide for one's future care based on ethical, pro-life principles.

Models for ethical advance directives and durable powers of attorney for health care include the following:

National Right to Life Committee (advance directive under the title, “Will to Live”), <http://www.nrlc.org/MedEthics/WilltoLiveProject.html> (last visited August 8, 2009) (no charge).

International Anti-Euthanasia Task Force (under the title, “Protective Medical Decisions Document”), [http://www.internationaltaskforce.org/resource\\_materials.htm](http://www.internationaltaskforce.org/resource_materials.htm) (last visited August 9, 2009) (fee is charged).

Catholic Archdiocese of St. Louis, Missouri, Durable Power of Attorney for Health Care, [www.archstl.org/respectlife/images/stories/documents/2008healthcare\\_dpa.doc](http://www.archstl.org/respectlife/images/stories/documents/2008healthcare_dpa.doc) (last visited August 8, 2009) (incorporating Roman Catholic principles on end-of-life decisions) (no charge).

## **MISSOURI RIGHT TO LIFE POLICY ON EUTHANASIA**

### **Policy**

Missouri Right to Life does not oppose allowing people to die when death is imminent. We do, however, oppose the hastening of death.

### **Explanation**

Every human being is unique and possessed of inherent dignity, regardless of age or condition. Missouri Right to Life upholds this basic right to life of every innocent human being from inception to natural death.

Missouri Right to Life does not oppose allowing people to die when they are actually dying. We do, however, oppose causing the death of non-dying people. Furthermore, we do object when public policy defines nutrition and hydration as medical treatment which can be removed from persons who are not dying when that removal results in their death.

There is and should remain in the law a basic difference between allowing a dying patient to die and causing a patient to die by dehydration, starvation, lack of basic medical care or any positive act, including lethal injection or overdose.

Society should work toward implementing positive policies to:

- Provide basic medical care, comfort care and pain control for the dying and/or disabled;
- Provide emotional support and encouragement for these individuals and their families so that neither would consider death as a solution to their problems.

Missouri Right to Life will work toward these goals.



## MISSOURI RIGHT TO LIFE POLICY ON TAKING ORGANS FOR TRANSPLANT

### Policy

No organs should be removed from a person for transplant until the person is dead. Current practices do not assure that death has occurred before organs are removed.

### Explanation

Every human being is unique, and his or her life is sacred, not to be cut short artificially. No human being should be treated as a means rather than an end. In the context of donations of organs, these universal principles mean that no one's life should be ended for the purpose of taking organs for use by others. Rather, only after a person has died may his or her organs be taken, and then only after informed consent has been given.

Recent articles in medical journals and commentary by informed writers have indicated that this basic ethical rule is violated too often. Nancy Valko, R.N., "Death and the Organ Donor," Voices (Women for Faith and Family, Eastertide, 2009) (online at [www.wf-f.org/MedicalMoral.html](http://www.wf-f.org/MedicalMoral.html)). "Brain death," a legal measure for determining death under most states' laws, is now questioned as a reliable indicator of death. Furthermore, the procedures for measuring "brain death" vary in significant ways from institution to institution, so even if in principle it was reliable, in practice it is not. Valko, id., citing the President's Council on Bioethics, "Controversies in the Determination of Death: A White Paper" (January, 2009).

The traditional measure of death has always been the end of heartbeat and breathing. That is the basis of a newer practice known as "donation after cardiac death" or DCD (formerly known as "non-heartbeating organ donation" or NHBD). According to this measure, a person is dead after "irreversible" cessation of heartbeat and breathing, but caution making the determination of death is discarded. The presumption is that any cessation of heartbeat and breathing when people are in serious straits is "irreversible." Valko, describing the findings of the President's Council on Bioethics, has written, "Most people would consider 'irreversible' in this context to mean that the heart has lost the ability to beat. But in DCD/NHBD, 'irreversible' instead means that there is a deliberate decision not to try to restart the heart when it stops and that enough time has elapsed to ensure that the heart will not resume beating on its own." Valko, id. In other words, a short cessation of heartbeat, even if the heart could be restarted easily, is used to judge a person to be dead, and organs are harvested right away.

Organs from cadavers may legitimately be taken, if informed consent has been given by the deceased person ahead of time or by authorized family members, but to shorten a person's life in order to take organs is an abuse that Missouri Right to Life opposes.

# MISSOURI RIGHT TO LIFE POLICY ON CAPITAL PUNISHMENT

## Policy

Missouri Right to Life takes no position on capital punishment.

## Explanation

Missouri Right to Life has never taken a stand for or against the death penalty or on many other issues which relate to the killing of human beings, such as war in general, particular wars, genocide, political gulags, diversion of famine relief from starving people by corrupt governments, unjust trade barriers by rich countries against poor ones which deprive the poor ones of money to buy food and medicine for their people, the providing of contraceptive supplies to refugees instead of real medical assistance, and the like. We focus on the problems of the destruction of innocent human life by abortion, infanticide, euthanasia and the abuses of cloning and embryonic stem cell research. Many other problems may legitimately be considered as "life issues," and they are certainly serious issues, but they are not our issues.

There are people of good will who believe that one cannot be truly pro-life while remaining silent on other life issues. They may not have considered that the many life issues are not of equal moral importance. They may simply part company with us in that assessment. The following considerations impel MRL to consider abortion and the other assaults on innocent life to be of far greater societal importance than the death penalty. When one compares the magnitude of the respective problems and the legal process available for potential victims, one can see that the death penalty is far less an attack on the good of society than are the problems that MRL addresses.

Consider first the magnitude of the abortion problem compared to that of the death penalty. From the year the death penalty was re-instituted by the Supreme Court, 1976, through the year 2008, the Justice Department reports that a total of 1,136 executions have occurred. That is a total, not an annual, figure. In the last year for which national abortion statistics are available at the time of this writing, 2005, the Guttmacher Institute (Planned Parenthood's research arm) reports approximately 1.21 million abortions were performed. (Praise God that the rate is down somewhat from the 1.6 million per year which occurred from the late 1970's through the early 1990's.) In other words, each day of the year 2005, day in and day out (Sundays included), an average of 3,315 unborn children were killed by abortion. Thus, in 2005, on each day almost three times as many persons were killed by abortion as the total of all the executions which have taken place in the last 33 years.

The numbers stagger the imagination: 3,315 deaths per day by abortion in 2005; 1,136 total executions in 33 years. There have been over 50 million deaths in America by surgical abortion since 1973. The aggregate numbers thus reflect approximately 50,000 deaths of unborn babies for each single death by execution.

Now, persons concerned about the death penalty may reply that each person executed is a unique human being of incalculable value, so one should not compare numbers. But that is just as true of the babies as of the executed criminals; each one of the aborted babies was a unique human being of incalculable value, too.

Consider further that each person who faces the death penalty has had a trial at which he was found guilty beyond a reasonable doubt of a heinous crime. While errors in convictions have occurred, each convicted person has had at least one appeal. The vast majority have had multiple appeals. Compare that to what is available for the protection of the unborn or the newly-born. There is no court procedure at all. Fathers and grandparents of the babies are not allowed into the courts to try to save the lives of their babies, for the Supreme Court has stated they have no cognizable interest in the lives of their young. It is even unconstitutional, decrees the Supreme Court, for laws to require that notice of the abortion be given to the father or grandparents of the baby. And the babies themselves, of course, have no right to an attorney to go to court for their lives.

## A Word on One Church's Teaching

When Missouri Right to Life is questioned about the death penalty, the question usually comes from a member of the Catholic Church in something like the following form: "How can you claim to be pro-life when you do not oppose the death penalty?" This section is added because of the frequency of questions from Catholics on this issue, not to single out the Catholic Church on the basis of its teachings. If other religious traditions have questions about MRL's position based on their own church's teachings on capital punishment, then MRL will be happy to address them.

MRL's members come from many religious traditions. The Catholic members of MRL believe that MRL's position is consistent with Catholic teaching. The Catholic Church teaches that protecting innocent life is of paramount importance, involving a principle that can never be subject to considerations of particular circumstances, while opposition to the death penalty depends on a prudential judgment about the circumstances of society in modern times. MRL focuses its efforts on reforming society to honor the paramount principle, and it lets other organizations address the principles of secondary importance that depend on societal circumstances.

His Holiness John Paul II brought opposition to the death penalty to the fore in the teaching of the Catholic Church in a manner never undertaken by his predecessors. In his magnificent encyclical, Evangelium Vitae (1995), John Paul II taught that although capital punishment was once a legitimate form of punishment because it was necessary for the protection of society, it is legitimate no longer. Modern societies can protect themselves against the worst criminals without it. (Evangelium Vitae, no. 56.) This is a prudential judgment, yet a clear papal teaching which, it is understood, Catholics are bound to follow.

However, His Holiness contrasted the respect which is to be shown for the lives of convicted criminals with the absolute protection to be provided to the innocent. As he stated,

If such great care must be taken to respect every life, even that of criminals and unjust aggressors, the commandment "You shall not kill" has absolute value when it refers to the innocent person. And all the more so in the case of weak and defenseless human beings, who find their ultimate defence against the arrogance and caprice of others only in the absolute binding force of God's commandment. (Evangelium Vitae, no. 57, emphasis added.)

The protection for the innocent and vulnerable is absolute, in contrast to the protection of the guilty, which depends on whether society can protect itself from them or not. And to underscore the importance of the absolute protection to be given the innocent, His Holiness issued the following solemn pronouncement:

Therefore, by the authority which Christ conferred upon Peter and his Successors, and in communion with the Bishops of the Catholic Church, I confirm that the direct and voluntary killing of an innocent human being is always gravely immoral. This doctrine, based upon that unwritten law which man, in the light of reason, finds in his own heart (cf. Romans 2:14-15), is reaffirmed by Sacred Scripture, transmitted by the Tradition of the Church and taught by the ordinary and universal Magisterium. (Id.)

It is hard to find a more authoritative statement in Catholic teaching than one stated "by the authority which Christ conferred upon Peter" and resting upon Scripture, Tradition, and the ordinary and universal Magisterium.

The bishops of the United States agree that direct attacks on vulnerable innocent humans is of first priority. "As disciples of Christ, as bishops in his church, our first concern for human life has to be for those who are unwanted—with fatal results—by their parents or their children, or by society itself. Such as these fall victim to the ultimate abuse of abortion or euthanasia." U. S. Conference of Catholic Bishops, "Faithful for Life, A Moral Reflection," p. 2 (September, 1995) (on-line at <http://www.usccb.org/prolife/tdocs/FaithfulForLife.pdf>). "Yet abortion and euthanasia have become preeminent threats to human dignity because they directly attack life itself, the most fundamental human good and the condition for all others. USCCB, "Living the Gospel of Life:

A Challenge to American Catholics,” no. 5 (1998) (<http://www.usccb.org/prolife/gospel.shtml>). “As Americans, as Catholics and as pastors of our people, we write therefore today *to call our fellow citizens back to our country's founding principles*, and most especially *to renew our national respect for the rights of those who are unborn, weak, disabled and terminally ill*. Real freedom rests on the inviolability of every person as a child of God. The inherent value of human life, at every stage and in every circumstance, is not a sectarian issue any more than the Declaration of Independence is a sectarian creed.” Id., no. 6 (emphasis in original).

The first concern is for those who fall victim to abortion or euthanasia. The preeminent threats to human dignity are abortion and euthanasia. The bishops call upon our fellow citizens most especially to renew their respect for the unborn, weak, disabled and terminally ill.

Missouri Right to Life’s Catholic members would submit that in concentrating on abortion, infanticide, euthanasia, and abuses of cloning and embryonic stem cell research, MRL concentrates on the life issues which the Catholic Church itself pronounces as most important. After all, if the innocent and defenseless among us have no right to life protectible under the law, how long are the rest of us, convicted criminals included, going to enjoy any legal rights?

## **MISSOURI RIGHT TO LIFE POLICY ON THE MARCH OF DIMES**

### **Policy**

Because the March of Dimes is anti-life in its recommendations, Missouri Right to Life urges citizens to consider carefully whether to support the March of Dimes.

### **Explanation**

The March of Dimes strongly encourages testing of unborn babies for the possibility of birth defects (e.g., Beta-Thalassemia, hemophilia A, Duchenne Muscular Dystrophy, and cystic fibrosis) and for genetic conditions that are socially unacceptable (e.g., Down's Syndrome). (March of Dimes Birth Defects Foundation, *March of Dimes Global Report on Birth Defects*, pp. 41, 47 [White Plains, New York; 2006], available at <http://www.marchofdimes.com/MOD-Report-PF.pdf>.) Such prenatal testing has no beneficial outcome for the child. The March Of Dimes professes to be neutral on abortion (*id.*, p. 41), but it encourages prenatal testing with full knowledge that abortion is the outcome for many, if not most, unborn babies who are found to have such conditions (*id.*, pp. 50-52).

The March of Dimes also supports the use of fetal tissue in the course of medical research, including fetal tissue derived from aborted babies (J. C. Willke, M.D., "New Information on March of Dimes Boycott," *Life Issues Connector* [Cincinnati, July, 1997], available at [http://www.abortionfacts.com/dr\\_willke/connector\\_july\\_97.asp](http://www.abortionfacts.com/dr_willke/connector_july_97.asp); State Office of Bishops' Pastoral Plan for Pro-Life Activities, *Survey of Medical Research Associations and Foundations* (quoting response from March of Dimes Foundation) [Lincoln, Neb., April 20, 2001], available at <http://www.catharchdioceseokc.org/family/survey.htm>). It also supports embryonic stem cell research, which sacrifices human beings at the embryo stage in order to obtain their stem cells. ("*Letter from the Research Community to Representative John Porter*," July 29, 1999, p. 3, available at <http://www.lifeissues.org/cloningstemcell/escrletter.html>.)

Until the March of Dimes renounces "search and destroy" prenatal testing and the deaths of unborn human beings to produce research tissue, Missouri Right to Life considers March of Dimes to be anti-life in actuality. Missouri Right to Life urges citizens to consider carefully whether to support the March of Dimes in light of its anti-life activities.

## **MISSOURI RIGHT TO LIFE POLICY ON THE RACE FOR THE CURE**

### **Policy**

Because the Susan G. Komen Foundation, sponsor of the “Race for the Cure,” allocates money to Planned Parenthood at the national level, Missouri Right to Life urges citizens to consider carefully whether to support the Race for the Cure and other activities of the Susan G. Komen Foundation.

### **Explanation**

Each year, the Susan G. Komen Foundation sponsors the “Race for the Cure,” involving long runs to raise funds for research into cures for breast cancer. The goal is a worthy one. Unfortunately, the Foundation allocates money to Planned Parenthood in some areas. (Examples: 2009 grant to Planned Parenthood of North Texas, <http://ww5.komen.org/GrantDescription.aspx?CID=29029>; 2007 grant to Planned Parenthood of Wisconsin, <http://ww5.komen.org/GrantDescription.aspx?CID=27130>; 2006 grant to Planned Parenthood of Rocky Mountains, <http://ww5.komen.org/GrantDescription.aspx?CID=23668>.) It appears that the local chapters in Missouri of the Susan G. Komen Foundation do not contribute directly to Planned Parenthood or other abortion advocacy organizations, but other parts of the Foundation do.

It is highly ironic that the Susan G. Komen Foundation supports an organization, Planned Parenthood, that is probably responsible for thousands of women’s deaths annually because of the link between abortion and breast cancer. Many peer-reviewed scientific studies demonstrate the statistical correlation between a previous abortion and a much higher risk of breast cancer in the future. (See, for example, the following from a British expert: “Breast cancer is diagnosed in 33,000 women in the U.K. each year; of these, an unusually high proportion had an abortion before eventually starting a family. Such women are up to four times more likely to develop breast cancer.” Thomas Stuttaford, M.D., “Fresh Line of Attack,” *The Times of London*, May 17, 2001, cited in *Life Site News* at <http://www.lifesitenews.com/ldn/2001/jun/01062102.html>). The Foundation and Planned Parenthood respond with claims that the pro-life studies are wrong, but their reviews of the scientific literature are untrustworthy due to faulty methodology and simple misrepresentation of the results of their own data. (Ian Gentles, “Women’s Health After Abortion: A Fresh Look at the Evidence,” *Human Life Review*, Fall, 2002.)

Hence, the Susan G. Komen Foundation, which aims to overcome breast cancer through research to find a cure, not only funds abortions of many female humans that will never grow into a womanhood free from breast cancer, but also funds a leading provider of a procedure that is one of the principal causes of breast cancer in the first place.

Until the Susan G. Komen Foundation renounces its support of Planned Parenthood and any other pro-abortion advocacy organizations, Missouri Right to Life considers the Foundation to be anti-life in actuality. Missouri Right to Life urges citizens to consider carefully whether to support the Race for the Cure and other activities of the Susan G. Komen Foundation in light of the Foundation’s anti-life activities.

## **MISSOURI RIGHT TO LIFE POLICY ON ORGANIZATIONS THAT TAKE ANTI-LIFE POSITIONS**

### **Policy**

Missouri Right to Life does not support any organization that in its statements or in practice manifests anti-life positions on abortion, infanticide, euthanasia, embryonic stem cell research, or cloning. Missouri Right to Life urges citizens to consider carefully whether to support such organizations.

### **Explanation**

Anti-life positions are manifested by organizations that are not directly involved in anti-life activities. Examples include, but are by no means limited to, such organizations as the American Bar Association (ABA Policy on Legislative and National Issues: Abortion [adopted August, 1992], available at <http://www.abanet.org/policy/Ch-13greenbook2009-10.pdf>), the Sierra Club (“[T]he Sierra Club is a pro-choice organization that has worked for population stabilization since 1965,” Sierra Club policy on Population, p. 3 [undated], available at <http://www.sierraclub.org/policy/conservation/population.pdf#pop>), and Juvenile Diabetes Association (embryonic stem cell research and cloning: Juvenile Diabetes Foundation, “Stem Cell Facts” [undated], available at [http://advocacy.jdrf.org/files/General\\_Files/Advocacy/2009/0509\\_SC\\_1\\_therapies.pdf](http://advocacy.jdrf.org/files/General_Files/Advocacy/2009/0509_SC_1_therapies.pdf)). All who value life should consider carefully whether they should support such organizations. Sources of information on such groups are readily available on the Internet.