



The Girl Who Died Twice

Lesson Plan

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This Lesson Plan accompanies Episode 2, Season 1 of *playing god?*

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Summary

In 2013, a 13-year-old girl from Oakland named Jahi McMath suffered a surgical complication that led to her being pronounced brain dead by the medical staff at the hospital where she was being treated. The State of California issued a death certificate as in all cases of death. Five years later, a second death certificate for Jahi was issued in New Jersey. How could one person die twice? In this Episode, we learn that the line between life and death isn't always as clear as you might think.

This Lesson Plan discusses the concept of death by neurological criteria (brain death), its history, and its controversy. Students will learn about definitions of death and why it became necessary to establish a new category of death. They will discuss and deliberate the conflict in the story—whether families should be allowed to opt out when their loved one is declared dead by neurological criteria rather than by circulatory death— and explore the challenges of delivering this diagnosis.

This Lesson Plan can also be used to discuss issues of health equity, racism, and mistrust in the healthcare system.

Vocabulary

The following are key terms used in the Episode and their definitions. The terms are marked in bold when they appear elsewhere in the Lesson Plan.

Ambiguous

Capable of being understood in two more possible senses or ways.¹

Circulatory Death

A permanent, irreversible loss of heart and lung function, including the loss of blood circulation.

Death by Neurological Criteria, or Brain Death

A permanent, irreversible loss of brain function or activity.

Dogma

Something held as an established opinion.²

Life Support

Medical treatments, techniques, and technologies that can replace essential bodily functions.

→A ventilator is a form of **life support** for patients who struggle to breathe on their own.

Social Construct

In medicine, the idea that the understanding and experience of health, illness, and disease are not solely based on biological facts, but are also significantly shaped by cultural meaning and societal norms, created and widely accepted by the people in a society.³

→**Brain death (death by neurological criteria)** is a **socially constructed** definition of death. It is not only marked by biological conditions, like an absence of brain function, but is also significantly informed by societal norms, medical technologies, and ethical considerations, whereas **circulatory death** is a biological phenomenon.

Discussion Guide

The following Assessment Questions can be used by instructors to evaluate student comprehension of Andrea's story and the bioethics concepts featured in the Podcast Episode. The Discussion Questions can prompt students to make claims and provide evidence and their reasoning. Student comprehension and views can be assessed before and after listening to the Episode and/or participating in the group activity.

Assessment Questions

- How did Jahi McMath end up on **life support**?
- What is **brain death**? What is its history? What is the difference between **brain death** and **circulatory death**?
- What factors contributed to the disagreement between Jahi's family and the doctors in California? *Sample answers provided.*
 - *Her family's cultural and religious beliefs about death*
 - *The way they were treated in the hospital*
 - *Racism*
 - *A lack of action from doctors and nurses*
 - *How quickly the doctors declared her dead*
- What problems might arise if families and doctors disagree about whether someone is dead? *Sample answers provided.*
 - *Hospital resources: medical and nursing staff care, specialized equipment and care if a patient is maintained on life support*
 - *Mistrust in healthcare and healthcare providers*
 - *Legal or practical problems: having two death certificates*
 - *Lack of closure for family and others close to the patient*

Discussion Questions

- Can you think of a time when your input was not considered or overlooked? How did you react or feel?
- Who do you think should be involved in discussions about brain death?
 - Should families be involved in decision making about whether a patient meets criteria for death?
 - Should families be allowed to opt out of medical professionals' declaration of brain death? Why or why not?
- Who should be invited to create policies about brain death criteria?

- In what ways could the medical team have handled Jahi McMath's situation differently to better support the family?
- Do you think the history of mistrust in healthcare played a role in this story? If so, how?

Sample Activities

The activities allow students to actively engage with the bioethics questions at the center of the Episode. Students will develop critical thinking skills and reason-based judgment by citing evidence from the Podcast and other sources. In bioethics, there often isn't a single "right" answer to a particular question; ideally, students will express and evaluate diverse viewpoints about complex, real-world problems.

Small Group Activity: Difficult Conversations

Instructions:

Split the class into groups of 4-5 students. One student (Student A) will play the role of a doctor and another student (Student B) will play the role of a patient's family member. The two will simulate a conversation in which Student A must deliver the diagnosis of **brain death** of the patient to Student B, and Student B can react, expressing emotions, asking follow-up questions, etc. After a few minutes of simulated conversation, the role play can pause and the small group can debrief and give feedback on Student A's delivery of the diagnosis and response to Student B's concerns.

After a few minutes of debriefing, two new students in the group can assume the roles and simulate the conversation again. The conversation will likely look different after students give feedback each time.

Prompts to Reflect on the Conversation:

- Was the diagnosis delivered in clear language? Did the family member understand the diagnosis and its implications?
- Did the doctor show empathy or acknowledge the emotions that were expressed?
- Did the doctor do a good job responding to the family member's questions and concerns?
- How did the conversation end? Based on how the conversation went, what do you think will happen next?
- How did the conversation go well?
- In what ways did the conversation go wrong? Or, how could it have gone better?

Individual Activity: Research & Writing

1. *ELA writing assignment:* Research three technologies that may affect our perceptions and understanding of death. Pick two technologies from the past, how they work, and how they impacted the **social construct** of death. Pick an emerging or hypothetical technology and show how it might change the way we currently understand death in the future. How is this the third technology similar to or different from the other technologies? *Example technologies provided.*
 - *From the 20th century*
 - *Ventilator*
 - *Artificial nutrition/hydration*
 - *CPR*
 - *Defibrillator*
 - *CT and MRI scanners*
 - *Older than 20th century*
 - *Stethoscope*
 - *X-ray machines*
 - *Future technologies*
 - *Cryogenics*
 - *Advanced brain imaging and scanning*
 - *Transhumanism/"uploading consciousness"*
 - *AI holograms*

2. *ELA Writing Assignment:* Other than **brain death**, there are many other instances and areas in which there has historically been mistrust between healthcare professionals and patients. Each student can pick one of these themes or notable events in history and do a presentation on how these examples may have contributed to mistrust and its consequences. *Examples provided.*
 - *News articles, legislation, or legal cases in several US states regarding unconsented/forced sterilization of:*
 - *African American women*
 - *Immigrant women*
 - *Indigenous women*
 - *Incarcerated individuals, or individuals convicted of crimes*
 - *Individuals with disabilities or other "undesirable" characteristics*
 - *News articles or scientific research on disparities in pain treatment across:*
 - *Gender groups (for example, men and women)*
 - *Racial groups (for example, Black Americans with sickle cell disease)*
 - *News articles, research papers, or books on medical experimentation*
 - *On Black Americans in the United States*
 - *Using unconsented individuals' biological materials*
 - *On incarcerated individuals*

Additional Resources

Further readings about key topics covered in the Episode.

More About Jahi McMath

[What Does It Mean To Die?](#) The New Yorker, 2018.

More About the Determination of Brain Death

[The Uniform Determination of Death Act](#), 1980.

[Pediatric and Adult Brain Death/Death by Neurologic Criteria Consensus Guideline](#), 2023, A Report by the American Academy of Neurology Guidelines Subcommittee, the American Academy of Pediatrics, the Child Neurology Society, and the Society of Critical Care Medicine.

[Standards and Ethics Issues in the Determination of Death: A Position Paper From the American College of Physicians](#), 2023.

More About the 1986 Harvard Committee

[Death is universal, but sometimes murky](#), The Harvard Gazette, 2018.

[Expanding the Social Status of “Corpse” to the Severely Comatose: Henry Beecher and the Harvard Brain Death Committee](#), *Perspectives in Biology and Medicine*, 2022.

Careers Mentioned

Physician:

Robert “Bob” Truog, MD, MA
(pediatric critical care and pediatric anesthesiology)

Bioethicist:

Yolonda Wilson, PhD (philosophy)
Robert “Bob” Truog, MD, MA (philosophy)
Jeffrey Kahn, PhD, MPH (philosophy and public health)

Nurse

About This Lesson Plan

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The sample small group activity was adapted from a medical ethics simulation designed by Marielle Gross, MD, MBE.

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¹ Merriam-Webster, retrieved 2024

² Merriam-Webster, retrieved 2024

³ Conrad P, Barker KK. "The social construction of illness: key insights and policy implications." 2010. Journal of Health and Social Behavior 51(1): S67-S69.