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Miscarriage is Not a Cause of Death:
A Response to Berg’s “Abortion and Miscarriage”

Nicholas Colgrove, PhD
Wake Forest University

Shortened Title (running head): Miscarriage is Not a Cause of Death

Some opponents of abortion claim fetuses are persons from the moment of conception. Call these “Personhood-At-Conception” (or PAC), opponents of abortion. Amy Berg (2017) argues that if fetuses are persons from the moment of conception, then miscarriage kills *far* more people than abortion. Thus, PAC opponents of abortion *must* “immediately” and “substantially” shift their attention, resources, etc., toward preventing miscarriage *or* admit they do not believe that personhood begins at conception (or, at least, they should recognize they are not acting in ways consistent with this belief). Unfortunately, Berg’s argument fails at every step. After outlining her argument, I show that her claim—that “miscarriage...is much deadlier than abortion”—is false (when taken literally) and misleading otherwise. Further, Berg’s argument is identical in structure to a criticism sometimes levied against the “Black Lives Matter” movement. In the latter context, the argument has been vehemently rejected. Berg’s argument should be rejected for the same reasons. Finally, Berg cites no evidence when claiming that PAC opponents of abortion are “not doing enough” to prevent miscarriage. And even if PAC opponents of abortion are not diverting substantial funds towards miscarriage prevention, Berg fails to notice that this may be for good reason.

Keywords: Abortion, Miscarriage, Fetal personhood, Killing and letting-die distinction

Some opponents of abortion claim that fetuses are persons from the moment of conception. Following Berg (2017),¹ I will call these individuals “Personhood-At-Conception” (or PAC), opponents of abortion. Berg argues that if fetuses are persons from the moment of conception, then miscarriage kills *far* more people than abortion. As such, PAC opponents of abortion face the following dilemma: They must “immediately” and “substantially” shift their attention, resources, etc., toward preventing miscarriage or they must admit that they do not actually believe that fetuses are persons from the moment of conception (or, at least, they must recognize that they are not acting in ways that are consistent with this belief).

To be clear, this type of argument is neither new nor the only one of its kind. Ord (2008), Simkulet (2017), and Räsänen (2018) all present arguments in the same vein as Berg’s. These arguments have been met with a plurality of responses. Beckwith (2007, 76), for example, dismisses them as nothing more than an *ad hominem*. Burda (2008) responds to them from a perspective grounded in Catholic moral theology. Friberg-Fernros (2018) reject them by arguing that there is a moral distinction between killing and “letting die.” Abortion involves deliberate killing whereas miscarriage does not, so abortion is morally worse than miscarriage. Thus, it is reasonable to oppose abortion to a greater degree than miscarriage.²

I provide a different type of response to Berg’s style of argument. After outlining her argument (in section 1), I consider the central claim of Berg’s (2017, 1217) style of argument: That “miscarriage...is much deadlier than abortion.” In section 2, I argue that this claim is false (when

¹ See Berg, Amy (2017). “Abortion and Miscarriage.” *Philosophical Studies* 174(5): 1217–1226.

² I list only a few types of responses above, but here is a thorough map of the debate. Throughout this essay, I will compare and contrast my arguments to each of those listed here. For a direct response to Ord (2008), see Brakman (2008), Burda (2008), Camosy (2008), Card (2008), DiSilvestro (2008), and Marino (2008). For a response to Simkulet (2017), see Friberg-Fernros (2018). For a response to Räsänen (2018), see Kaczor (2018). Lastly, while this paper was under review, Blackshaw and Rodger (2019) published a response to Ord’s style of argument. Blackshaw and Rodger come the closest to offering the same type of response as me (particularly with respect to the first of three responses I develop), though as I note below, there are several ways in which our arguments are importantly different.

taken literally) and misleading otherwise. In section 3, I show that Berg's style of argument is identical in structure to a criticism that is sometimes levied against the recent "Black Lives Matter" movement. In the latter context, the argument has been vehemently rejected (as a red herring *at best*). I argue that Berg's style of argument should be rejected for the same reasons.

Finally, in section 4, I show that Berg's suggestion that opponents of abortion should divert "substantial" amounts of money and attention to miscarriage prevention faces two problems. First, these claims are made without any evidence regarding the actual priorities and spending habits of PAC opponents of abortion. If we are told "not enough is being done," one wonders: What is being done and how much counts as "enough"? Berg gives no answer to either question. Second, even if it is true that opponents of abortion do not pay substantial attention to miscarriage prevention, Berg fails to notice that this may be for good reason. I conclude that PAC opponents of abortion do not face the dilemma that Berg presents. It is perfectly consistent for them to maintain belief that all fetuses are persons without "immediately" and "substantially" shifting their attention, medical priorities, political priorities, and public resources to the prevention of miscarriage.

I. BERG'S ARGUMENT

PAC opponents of abortion are those who oppose abortion while holding to the belief that a fetus is a person from the moment of conception (Berg, 2017, 1217). Suppose PAC opponents are correct about the personhood of fetuses. Berg presents the following argument:

1. Miscarriage kills *far* more people than abortion.
2. If miscarriage kills far more people than abortion, then PAC opponents of abortion should either (i) dramatically shift their attention, resources, etc., to the prevention of miscarriage, or (ii) admit that they do not actually believe (or consistently adhere to) the claim that fetuses are persons from the moment of conception.
3. So, PAC opponents of abortion should either (i) dramatically shift their attention, resources, etc., to the prevention of miscarriage, or (ii) admit that they do not actually

believe (or consistently adhere to) the claim that fetuses are persons from the moment of conception. (from 1 and 2)

Later, Berg adds:

4. Many (or most) PAC opponents of abortion seem to be resistant towards (i).³
5. So, we have reason to believe that many (or most) PAC opponents of abortion do not actually believe (or consistently adhere to) the claim that fetuses are persons from the moment of conception. (from 3 and 4)

I will focus my criticism on premises 1, 2, and 4. Specifically, premise 1 is false, strictly speaking. Once we revise it (in the way Berg's argument requires), it becomes misleading. Next, I argue that premise 2 is false, independently of the problems raised for premise 1. Finally, contra Berg, I argue that there are good reasons for PAC opponents of abortion to be resistant towards (i). This resistance does not count against their belief that personhood begins at conception (nor does it imply that they are acting in ways that are inconsistent with that belief).

II. IS MISCARRIAGE "DEADLIER" THAN ABORTION?

Berg's first premise faces three problems. First, in a strict sense, it is false. Second, once we interpret the premise in a way that is not strictly false, it becomes misleading. In particular, the revised premise mistakenly treats a plurality of causes of death as though they form a singular threat to human life. Third, Berg fails to consider that not all miscarriages involve the death of a person (even if personhood begins at conception). I will consider each problem in turn.

Berg's first premise is false. She (2017, 1217) asserts that "miscarriage...is much deadlier than abortion" and that "miscarriage is...probably deadlier than any familiar disease." But miscarriage is not a cause of death. It is not capable of causing death, nor does it tend to cause death. Miscarriage is not a disease either. It is an *outcome*. Miscarriage does not kill anyone or

³ For example, Berg (2017, 1224) writes, "the medical and political priorities of PAC opponents of abortion show that they do not think it is the *same kind of* tragedy that the death of 22-89% of born persons would be."

anything. Other phenomena *cause* miscarriage, but “miscarriage” simply refers to the (unintended) death of individuals during a specific time in their development (i.e. while they are still in utero and less than 20-weeks-old).

If we take the terms literally, therefore, it makes little sense to call miscarriage “deadlier than abortion” (Berg 2017, 1217). In order to be “deadly” something has to cause or have the capability/tendency to cause death. To be “deadlier” than something else, it must have these features to a greater degree than the thing to which it is being compared. Miscarriage cannot be described as “deadly” (in a proper sense), given that it does not cause death, nor does it have the capability or tendency to cause death. Thus, it cannot reasonably be described as “deadlier” than anything either. The *causes* of miscarriage (grouped together) may account for more deaths than abortion. Maybe Berg means that the *causes* of miscarriage (grouped together) are “deadlier than abortion” (where “deadlier” means “account(s) for more deaths”).⁴

This raises the second problem: If Berg (2017, 1217-18) claims that all the causes of miscarriage (grouped together) account for many more fetal deaths than abortion, then statements like miscarriage “is much deadlier than abortion,” miscarriage is “probably deadlier than any familiar disease,” and miscarriage is “likely to be *the* biggest public-health crisis of our time,” are *misleading* (emphasis added). There is not *one* problem called “miscarriage” that causes millions

⁴ A more natural reading of “deadly” involves mortality rate. To illustrate, in the U.S., the parasite *naegleria fowleri* is responsible for 2-3 deaths per year. Breast cancer is responsible for around 42,000 deaths annually. Is breast cancer deadlier than naegleria? It clearly accounts for more deaths. But 97% of individuals infected by naegleria will die from it (often quite quickly). Breast cancer, on the other hand, has an average 10-year survival rate of 83%. So, even though breast cancer accounts for more deaths than naegleria, naegleria is still *deadlier* than breast cancer (it has a greater tendency to kill those affected by it than breast cancer). If abortion has a higher mortality rate than the causes of miscarriage, therefore, abortion is deadlier than the causes of miscarriage (even granting that jointly, the latter causes of death claim more lives than abortion). For the sake of argument, however, I have written premise 1 as “miscarriage kills *far* more people than abortion” to avoid these concerns. Data cited here on naegleria fowleri and breast cancer come from Parasites (2018) and Breast Cancer (2019), respectively.

of deaths.⁵ Rather, “the causes of miscarriage” is an umbrella term for a variety of distinct causes. By comparison, “infectious disease” is an umbrella term that may cover a wide variety of bacteria, viruses, fungi, and parasites. Yet, it would obviously be a mistake to think that all infectious diseases pose the same kind of threat to the human race, that they are all treatable in the same way, and so forth.

Grouping unintentional causes of fetal death together—as though they form a unified threat to human life—is artificial. To illustrate, consider the following case:

Septu-death Crisis: A madman has seized power and has begun to execute seventy-year-old people. He executes one million victims each year. A rebellion begins. Soon after, a news anchor reports, “There is a far greater threat to seventy-year-old people than the ongoing executions: *Septu-death*. In fact, septu-death claims the lives of about *two* million seventy-year-olds each year. If you care about saving the lives of seventy-year-olds, your resources are better spent combatting septu-death than the executions!”

Suppose listeners discover that “septu-death” refers to “unintended deaths of seventy-year-olds.” Septu-death is not a disease nor is it a cause of death. Rather, it is an umbrella term for *many* causes of death: Heart disease, cancer, illness, accidents, etc., grouped together. How should we assess the news anchor’s claim? Maybe it is true in *some* sense, but it is misleading. There is not some singular cause called “septu-death” causing two million deaths annually.

Must those who value the lives of seventy-year-olds shift their attention and resources to septu-death prevention (rather than oppose the executions)? If they care *only* about saving *as many lives as possible*, it makes more sense to proportion their efforts as follows: Invest the *largest* part of their resources towards stopping the executions. Then put their resources and time towards preventing each of the other causes of death (in proportion to the number of lives at stake).

⁵ See Tollefsen (2008) who writes, “it is not as if there is one pathology or disease that is responsible for all incidents of early embryo loss. This makes analogies to a single disease that wipes out a corresponding number of adults highly inapt.” In the remainder of section 2, I expand upon this type of thought.

The same story follows for the PAC opponent of abortion.⁶ If the PAC opponent of abortion only cares about *saving as many lives as possible*, then they should put the largest part of their time and resources towards stopping whichever cause of death accounts for the most lives lost. If abortion is the single greatest cause of fetal death, therefore, it deserves the largest part of the PAC advocate's attention (relative to other causes of fetal death).⁷ I assert a conditional here given that the truth of its antecedent will be difficult to determine. It seems plausible that abortion *is* the single greatest cause of fetal death when considering that the causes of miscarriage are legion. But a thorough investigation into these matters is beyond the scope of this essay. For one such investigation, see Blackshaw and Rodger (2019, 114-15).

Berg may object: If the PAC opponent of abortion proportions her attention in the right way, she will still end up devoting more of her *total* attention and resources towards preventing the causes of miscarriage than towards preventing abortion.⁸ To illustrate, consider a toy model:

Abortion kills four fetuses per year. Chromosomal abnormalities kill two, uterine abnormalities kill one, thyroid problems kill one, and diabetes-related issues kill one.

⁶ An anonymous reviewer raises the possibility of a disanalogy here. It seems reasonable for women to ask their doctors about how to prevent miscarriage. But nobody asks about preventing septu-death. In response, miscarriage prevention protocols will vary between women based on health, age, anatomy, lifestyle, etc. There are different protocols for avoiding miscarriage associated with diabetes than miscarriage associated with uterine abnormalities. Likewise, regarding septu-death prevention, there are different measures seventy-year-olds must take when trying to avoid death by heart disease than death by car accident. Thus, those who seek to prevent miscarriage and those who seek to prevent septu-death will proceed in analogous ways: By following distinct protocols that help them avoid each *particular* cause of death. And, in both cases (generally speaking), which cause(s) of death pose the greatest threat to an individual will be determined on a case-by-case basis.

⁷ An anonymous reviewer raises the question of whether different methods of induced abortion represent different types of causes of fetal death. Suppose they do. There are three responses to consider. First, according to Steinauer (2019), in the U.S., approximately 89% of abortions are performed using "suction curettage." Beckwith (2007, 84) cites the same data. Even if different methods of abortion should be considered in isolation, therefore, there is still one major target for PAC opponents of abortion to focus upon. Second, the intentionality associated with induced abortion seems to provide a unity that is lacking in the category of "unintentional fetal deaths." For the sake of space, however, I will not defend this claim here. Third, Berg's argument relies on separating causes into two categories: intentional and unintentional. I claimed that the latter is an artificial grouping. If it turns out the former is an artificial grouping too, that is still bad for Berg. In that case, *both* categories her argument relies upon are subject to the concerns I raise.

⁸ I am grateful to an anonymous reviewer for raising this objection.

We have two groups of causes: Intentional and unintentional. Intentional causes account for four deaths and unintentional causes account for five. If the PAC advocate focuses her resources proportionally, the total focus she places on preventing unintentional deaths will be greater than the total she assigns to combatting intentional death.

In response, consider two things. First, my claim is not that premise 1 is false, but that it is *misleading*. Premise 1 is used to support claims like miscarriage is “the biggest public-health crisis of our time” (Berg 2017, 1217). Or, as Ord (2008, 12-14) puts it, miscarriage is a kind of “scourge,” that seems to be “*the* major issue of the age” since it is “more deadly than anything else in human history” (emphasis added). These arguments rely on treating the causes of unintentional fetal death as a singular threat, something so frightening that responsible PAC advocates should drop every other commitment to combat “it.” But “unintended causes of fetal death” is not itself a cause of death. Just because the members of a set are causes of death, it does not follow that the set itself is a cause of death. Even if (annually) there are more unintended fetal deaths than intended ones, it does not follow that “unintended fetal death” is itself a threat to human life.⁹

Second, if grouping causes of death together is allowed, consider an argument like Berg’s:

Abortion+ claims far more lives (in the U.S.) per year than the causes of miscarriage combined. Thus, PAC opponents of abortion should *really* be focusing their time and resources combatting Abortion+ (rather than the causes of miscarriage). Given the number of lives lost to Abortion+, it is likely the biggest public-health crisis of our time.

What is Abortion+? It includes all causes of death for born individuals—see Deaths and Morality (2017)—combined with all deaths caused by induced abortion. Clearly, Abortion+ is “deadlier” than the causes of miscarriage (even combined).

⁹ Cf. Blackshaw and Rodger (2019, 110), who argue that “direct comparisons of spontaneous abortion with induced abortion...gives the misleading impression that it is a single cause of death that far outweighs any other cause.”

Yet, there is a more serious threat to human life than Abortion+: Abortion++. Abortion++ is the group of all causes of death included in Abortion+, plus all causes of unintended fetal death. PAC opponents of abortion should *really* be spending their time combatting Abortion++ (not Abortion+, abortion, or the causes of miscarriage). It would be irresponsible to focus on combatting the causes of miscarriage rather than Abortion++, since Abortion++ is so much “deadlier” than the causes of miscarriage. I do not expect anyone to take seriously the claim that Abortion+ or Abortion++ constitute a public health crisis. But these claims parallel Berg’s claims about miscarriage.

Suppose Berg can avoid these concerns. There is a third problem to consider: Not all miscarriages involve the death of a person.¹⁰ As Lee (1996, 104) points out, “in many cases the fertilization process is in effect incomplete, so that what is growing is not a complete human being. Many of the products of fertilization which fail to implant are no doubt the results of incomplete fertilizations and so are not human persons [or human beings].” In those cases, miscarriages occur even though conception (and, therefore, human life) does not. Beckwith (2007, 75) explains why these phenomena are important for the PAC advocate:

One who holds that a human being begins to exist as a single organism at conception is not arguing that everything that results from the sperm-egg union is necessarily a conception. That is, every conception of a human being is the result of a sperm-egg union, but not every sperm-egg union results in such a conception.

Berg never mentions this distinction. If some miscarriages—though tragic—do not involve the loss of human life, there is no reason to think PAC opponents of abortion must view them as the

¹⁰ Camosy (2008, 21) makes a similar point, suggesting that personhood does not begin until 8-10 days after conception, which is after the window during which most miscarriages occur. Thus, most miscarriages do not involve the death of a person. This maneuver is unavailable to the *PAC* opponent of abortion, however, and so I will set it aside.

moral equivalent to the loss of human lives. How often these events occur is hard to say. But, they must be considered if Berg's first premise is to be accepted.¹¹

In sum, Berg's claim that miscarriage is "deadlier" than abortion raises three concerns. Taken literally, it is false. Adjusting it—by specifying that the causes of miscarriage (combined) account for more fetal deaths than abortion—makes it misleading (given how it fits into Berg's argument overall). Rather than saying PAC opponents of abortion should combat miscarriage (as though the causes of miscarriage form a singular threat to life), it makes more sense to say that PAC opponents of abortion should address the specific causes of fetal death in proportion to the number of deaths caused by each. Abortion may still be the single greatest cause of fetal death (especially supposing that many miscarriages do not involve the loss of human life).¹² If so, then abortion prevention deserves the largest part of their attention (relative to other causes of fetal death).

Setting these considerations aside, this approach—of proportioning attention to causes of death based entirely on the numbers of lives at stake—only makes sense if we assume that "saving as many lives as possible" is the PAC advocate's sole concern. It is, however, an oversimplification to suggest (as Berg does) that PAC opponents of abortion are solely (or even *primarily*) concerned to "save as many lives as possible." Once we jettison that assumption, Berg's dilemma crumbles.

III. BERG'S DILEMMA (AND WHY IT FAILS)

The dilemma generated by premise 2 forms the core of Berg's argument. It states: If miscarriage

¹¹ Suppose, for instance, that Berg (2017, 1220) is right that (at the very least) miscarriage ends "one and a half to two times as many pregnancies as abortion does." If abortion ends 1 million lives in the U.S. (in a given year) then at least 1.5 to 2 million miscarriages occur in that same year. If, say, half of miscarriages do *not* involve the loss of human life, then it would turn out that either (i) abortion is *deadlier* than all causes of miscarriage combined or (ii) abortion is *just as deadly* as the causes of miscarriage combined. Both outcomes would undermine Berg's first premise. To be clear, this hypothetical case is just meant to illustrate the potential threat to Berg's first premise posed by instances of miscarriage that do not involve the loss of human life.

¹² See Blackshaw and Rodger (2019, 114-15), who provide data that seem to support this claim (i.e., that abortion is the leading cause of fetal death).

kills far more people than abortion, then PAC opponents of abortion should either (i) dramatically shift their attention, resources, etc., to the prevention of miscarriage, or (ii) admit that they do not actually believe (or consistently adhere to) the claim that fetuses are persons from the moment of conception.¹³ To show the problems here, I will start by comparing the form of Berg’s argument to a structurally similar argument in a different context.

In recent years, there has been a movement in the United States called “Black Lives Matter” (BLM). The movement is (in part) “a call to action in response to state-sanctioned violence and anti-Black racism.”¹⁴ Supporters of the movement adopt the mantra “Black Lives Matter” as a kind of *correction* to a legal system (or government) that, they claim, implies (explicitly or implicitly) that black lives *do not* matter. According to supporters of the BLM movement, this implication is made clear by state policy and (in)action, especially when non-black members of law enforcement have used excessive force (often lethal) when confronting African Americans.¹⁵

In *response* to the BLM movement, the following argument has been made¹⁶:

- 1*. The number of African Americans that are killed by other African Americans (who are not members of law enforcement) is *far* greater than the number of African Americans killed by members of law enforcement.¹⁷
- 2*. If 1* is true, then BLM advocates should either (i) dramatically shift their attention, resources, etc., to the prevention of *those* killings, or (ii) admit that they do not actually believe (or consistently adhere to) the claim that “black lives matter.”
- 3*. So, BLM advocates should either (i) dramatically shift their attention, resources, etc., to the prevention of *those* killings, or (ii) admit that they do not actually believe (or consistently adhere to) the claim that “black lives matter.”

¹³ Note, Berg’s argument does nothing to refute the claim that personhood begins at conception. On this point, see Beckwith (2007, 76) who dismisses arguments like Berg’s as entirely irrelevant to the abortion debate, given that “arguments, and not the people who offer them, ... are the proper object of analysis.” I will set Beckwith’s criticism to the side.

¹⁴ See Khan-Cullors, Garza, and Tometi (2018).

¹⁵ See Hafner (2018) for eleven examples that have been widely discussed in the U.S. media.

¹⁶ Arguments like this are discussed (but not endorsed) by Braga and Brunson (2015, 3).

¹⁷ See Cooper and Smith (2011) and Crime in the United States (2014) for these statistics.

This argument has received *scathing* criticism.¹⁸ Objectors emphasize that the BLM movement has a *particular target*. It is not solely fixated on saving as many lives as possible. It is aimed at revealing (and undoing) systematic injustice that is directed towards certain people. Thus, statistics like those stated in 1* are a red herring.

Statements 1*–3* resemble Berg’s 1–3. If the reader agrees that the above argument against BLM makes use of a red herring, then the same may follow for Berg’s argument. Even supposing the causes of miscarriage (all together) cause more death than abortion, must the consistent PAC opponent of abortion dramatically shift their attention and resources to the prevention of miscarriage? Just like in the case of the BLM argument, the answer is “of course not.” The typical PAC opponent of abortion is *not* solely fixated on preserving as many human lives as possible (just as the typical BLM advocate is not solely fixated on preventing the killing of as many African Americans as possible).

In other words, the stated intent of the BLM movement is not “to save as many African American lives as possible.” Similarly, the intent of PAC opponents of abortion is not simply (or automatically) “to save as many human lives as possible.” The objector to the BLM movement misunderstands what drives the BLM movement. Likewise, Berg misunderstands what drives the PAC opponent of abortion to oppose abortion. As Brakman (2008, 23) puts it, the problem with arguments like Berg’s is that the PAC opponent of abortion “is not usually (if ever!) a committed utilitarian.”¹⁹ That is, the PAC opponent of abortion is not usually (if ever) just fixated on the numbers of lives at stake. In addition to saving lives, PAC opponents of abortion are also invested

¹⁸ Harriot (2017), for example, writes, “It is true that the vast majority of black murders are committed by black men, ... but that fact has nothing to do with state violence. When anyone interrupts a discussion about Black Lives Matter by bringing up black-on-black crime, it sounds as stupid as if a doctor addressed a cancerous brain tumor by asking about domestic violence...No one would ever be that stupid.”

¹⁹ Brakman’s (2008) main argument is that abortion is a “moral problem” whereas miscarriage is not. My response to Berg (throughout this essay) is neutral with regard to the question of whether miscarriage is a moral problem or not.

in fighting against (what they perceive to be) a significant violation of *parental obligations*, the *unjust* killing of *innocent* human beings, horrific violations of *bodily integrity*, invasions of individuals' *right to privacy*, the *dehumanizing* of human beings, and a growing public perception that children are *disposable* if inconvenient or unwanted.

Beckwith (2007, 106), for example, suggests that “what makes abortion evil is the same thing that make rape evil: an innocent human person is brutally violated and dehumanized.” Schwarz (1990, 197) adds that “abortion is a violation of the child’s privacy” given that it involves “a violent sundering” of its “natural, intimate relationship” with its mother. Kaczor (2014, 128) argues that throughout history, each time human beings have been divided into “two classes in which one half was permitted to dispose of the other at will,” “gross moral mistakes were made.” These include “slavery, misogyny, racism, sexism, [and] anti-Semitism” (Kaczor 2014, 128). For Kaczor, permitting abortion (on the ground that fetuses—though human—are not fully “persons”) is just one more “gross moral mistake” in human history. One need not agree with Beckwith, Schwarz, or Kaczor to see that death and intentional killing are not the only “evils” that PAC opponents of abortion associate with abortion. It is false, therefore, that PAC opponents of abortion are always and only fixated on the *number* of human lives lost to abortion.

With this in mind, we can show that premise 2—Berg’s dilemma—is faulty as follows. I have assumed that the antecedent of premise 2 is true.²⁰ PAC opponents of abortion can still maintain that persons begin at conception *and* refuse to make significant shifts in their priorities towards combatting causes of miscarriage (rather than abortion) *if* there are *other* substantial negative factors associated with abortion (beyond the mere loss of human life).

²⁰ Thereby ignoring the problems raised for Berg in section 2.

To the PAC opponent of abortion, abortion is a far greater evil than miscarriage (even granting that the causes of miscarriage claim more lives). Generally speaking, there does not seem to be anything wrong with combatting (or opposing) something in proportion to how evil one takes it to be. It seems rational to oppose significant evils to a significant degree, while opposing lesser evils to lesser degrees. Thus, given that there are many other factors (beyond *the number of lives lost*) that count against abortion (but not the causes of miscarriage), the PAC opponent of abortion can cite those as the reasons she combats abortion more strongly than the causes of miscarriage.

In response to an argument *like* this one, Berg (2017, 1222) writes,

PAC opponents of abortion might continue to invest resources in opposition to abortion on the ground that they should be doing more to prevent killings than to prevent unintended deaths. But given how many deaths are caused by miscarriage, it would be strange for PAC opponents of abortion not to refocus *some* of their public efforts toward supporting research into how to stop miscarriages. (emphasis in the original)

This response is sensitive to the idea that PAC opponents of abortion sometimes associate a greater evil with abortion than with miscarriage (i.e. one involves “killing” whereas the other involves “letting die”).²¹ There are at least two problems here.

First, Berg (2017, 1222-3) argues that the killing/letting-die distinction *cannot* justify the PAC opponent of abortion “treating miscarriages differently from abortions.” She claims that an agent may have greater moral obligation not to kill than they have to prevent death (in many cases). When it comes to abortion and miscarriage, we are talking about *intervening to prevent a killing* versus *intervening to prevent someone from dying*. And, Berg (2017, 1222) asserts, the moral distinction between “killing and letting die does not appear to extend to *preventing* cases of killing

²¹ Appeals to the killing/letting die distinction are common in response to arguments like Berg’s. See, for example, Brakman (2008), Burda (2008), Card (2008), and Friberg-Fernros (2018). In what follows, I provide a response to Berg that does not rely on an appeal to this distinction.

versus letting die.”²² Whatever reasons there are for preventing instances of killing, Berg suggests, are just as much reason to prevent “letting die.”

This argument works only if the sole relevant factor is the number of lives lost in each case. But, again, the killing/letting-die distinction is just one way among *many* by which opponents of abortion distinguish the badness of abortion from the badness of miscarriage. Other factors—which Berg does not mention—are listed above (e.g. significant violations of parental obligations, etc.). A murder, for example, is a kind of unjust killing. The murder of a child by its parent is an unjust killing and flouting of parental responsibilities (among other things). And that state of affairs is worse (morally speaking) than the state of affairs in which a child (or embryo) dies due to natural causes.²³ In short, Berg fails to notice that there are relevant moral differences between abortion and miscarriage even if we set the killing/letting-die distinction to the side. Additionally, it is not as though Berg underappreciates the wrongs that PAC opponents of abortion associate with abortion. She overlooks them entirely.²⁴

Returning to the killing/letting-die distinction, Berg’s dismissal of the distinction faces its own problems. Suppose, for instance, I have the power to prevent all killings that occurred during the Holocaust. But I must make a choice: Use that power to prevent those killings or use that power to prevent the same number of naturally occurring deaths (caused by conditions associated with old age) during the 20th century. If Berg is right, I have *just as much reason* (morally speaking) to

²² Berg is relying on an argument made by Pogge (2010). When responding to Berg, Blackshaw and Rodger (2019, 112-13) argue that Berg has misrepresented Pogge’s position. Here, I will set Pogge’s view to the side, however, and engage Berg’s argument directly (so whether or not she represents Pogge’s work accurately is not my concern).

²³ Similarly, Friberg-Fernros (2018, 2) writes, “the former category [i.e. abortion] involves...two kinds of tragedies—the death of a human person and the human act of killing a human person, the latter [i.e. miscarriage] ‘only’ involves the death of a human person.” A major difference between Friberg-Fernros’s argument and mine is that he is explicitly relying on the killing/letting-die distinction to make this point, whereas I have argued the PAC opponent of abortion can make the same point on a variety of different grounds. In other words, my argument works even if the PAC opponent of abortion brackets the killing/letting-die distinction. Friberg-Fernros’s does not.

²⁴ The one exception to my claim here is Berg’s consideration of the killing/letting-die distinction, which, again, she dismisses as irrelevant.

prevent each (i.e. the respective states of affairs are morally comparable). That sounds like a *reductio* to me. It seems clear to me that there is something far worse (morally speaking) about the former deaths than the latter. If so, then there is greater reason (morally speaking) to prevent the former than the latter. And if that is right, then the principle that Berg relies upon (when dismissing the killing/letting-die distinction) is an implausible one.

Here is the second problem with Berg's (2017, 1222) assertion that, "...given how many deaths are caused by miscarriage, it would be strange for PAC opponents of abortion not to refocus *some* of their public efforts toward supporting research into how to stop miscarriages" (emphasis in the original). In this passage, she moves from claiming that (a) *PAC opponents should "immediately" and "substantially" shift their attention to preventing miscarriage or abandon their view of personhood* to (b) *PAC opponents should shift "some" of their attention to preventing miscarriage*. This reduces the force of her argument quite a bit. Devoting "some" attention towards preventing miscarriage is a far cry from demanding an immediate and substantial change in society's medical and political priorities. Berg's argument begins to sound more like a polite suggestion than a troubling dilemma. Probably, many PAC advocates would be happy to accept her suggestion.

Additionally, some PAC opponents of abortion may reason like this. That one's society allows abortions to occur (for a wide variety of reasons) suggests that the society fails to appreciate the value or dignity of unborn human beings. Unless we reshape that perception—i.e., the perception that the unborn do not have equal standing and can be killed for a wide variety of reasons—it will be very difficult to convince the medical community (or political powers) to invest resources into saving the lives of the unborn (when those lives are imperiled by other, unintentional causes). Thus, part of the "pro-life" platform may be to reshape the way society views the "worth"

of unborn individuals in general. Opponents of abortion may, therefore, focus on combatting abortion and defending the dignity of the unborn in the hopes that public perception will change, which will open up room for a discussion about preventing more miscarriages. To me, this seems like a strategic approach rather than an inconsistent one.

Whatever the case, Berg also seems to be implying that PAC opponents are doing *nothing* to prevent miscarriage. So, given the numbers of lives lost to causes of miscarriage, how *should* the priorities of the PAC opponent of abortion change (if at all)?

IV. A REFUSAL TO SHIFT PRIORITIES (SIGNIFICANTLY)

In the closing portion of her essay, Berg argues that we can expect that many PAC opponents of abortion will resist shifting public priorities and resources to combat the causes of miscarriage.

This, she (2017, 1224) supposes, is because

...very few people, even very few PAC opponents of abortion, truly believe that an early miscarriage is equivalent to the death of a born person. While miscarriage is often devastating, especially for those immediately affected by it, the medical and political priorities of PAC opponents of abortion show that they do not think it is the *same kind of* tragedy that the death of 22-89% of born persons would be. (emphasis in original)

In other words, that PAC opponents of abortion appear to be resistant to horn (i) of the dilemma (i.e. shifting their priorities to combat the causes of miscarriage) is good evidence that they “do not actually believe in the personhood of all fetuses” (Berg 2017, 1225).

Section 3 casts doubt on these claims. It is not that PAC opponents of abortion fail to believe that fetuses are persons. Rather, they may believe that there is greater moral reason to prevent abortion than miscarriage. Nonetheless, Berg’s argument that PAC opponents of abortion must “substantially” shift their priorities presupposes that whatever they *are* doing to prevent miscarriage, it is *not nearly enough*. To test this claim, we need to answer a few questions. First, what (if anything) *is* being done to prevent miscarriage? Second, what exactly must people do (and

how much must they do) for them to have done “enough”? Third, there must be an argument to support whatever we say in response to the second question. If “enough” means spending \$500 billion, then we need an argument that explains *why* \$500 billion is “enough.” Unless we complete these three steps (at least in outline), claims like “PAC opponents of abortion are not doing enough” are just empty rhetoric.

What *is* being done by PAC opponents of abortion to combat miscarriage? According to Berg: Nothing. She (2017, 1218-19) asserts, “we don’t see public service announcements; politicians don’t mention miscarriage in their stump speeches; no one holds rallies at the Capitol to prevent miscarriage.” Berg (2017, 1222) considers the possibility that “no PAC opponent of abortion is aware of the prevalence of miscarriage” and perhaps that is why they are doing nothing to combat the causes of miscarriage.

Is Berg right? If we are talking about money spent (emphasis on “if”), she has provided us with no data concerning the spending habits of the average PAC opponent of abortion. How money is spent is central to Berg’s critique, which is why I bring it up here. She (2017, 1220) claims, for example, that PAC opponents of abortion should fight for a “huge influx of money into medical research on the causes of and ways to prevent miscarriage,” “hold rallies to get people to donate money to miscarriage research,” etc.²⁵ Yet, rather than say how money is actually being spent, Berg (2017, 1218) apparently just *assumes* PAC opponents of abortion are doing nothing, given observations like, “politicians don’t mention miscarriage in their stump speeches.” This sounds like the vague impression one gets concerning public spending after skimming through the news.

²⁵ Alternatively, if we focus on something other than money—the number of rallies held promoting miscarriage prevention (compared against those held to oppose abortion), the number of articles published regarding miscarriage prevention (compared to those that oppose abortion), etc.—Berg still needs to do three things, as argued above: First, tell us what is being done. Second, tell us what people must do (and *how much* they must do) for them to have done “enough.” And third, she needs an argument to support whatever she says when completing the second task.

Räsänen (2018, 630) makes a similar move, asserting (without defense) that “if pro-life scholars really believe that human fetuses have significant moral status, they have strong moral obligations to oppose [miscarriage]. Yet, *few of them, devote any effort to doing so*” (emphasis added). Both Berg and Räsänen make broad claims about the personal, financial, and political practices of a large (nonhomogeneous) group of people. But both fail to provide any real evidence for their claims. It is unclear to me where the line is (in these cases) between making unfounded assertions and perpetuating stereotypes. Nonetheless, suppose Berg is right and virtually no funding is going towards research that is deliberately aimed at preventing miscarriage.

In some cases, this is probably because preventative treatment already exists. When it comes to uterine problems, the most common issue—and the issue most commonly associated with miscarriage—is when patients have a “septate uterus.”²⁶ Surgery can usually correct this problem (i.e., there already is a general treatment for it). Thus, a “huge influx of money into medical research” regarding this problem is unwarranted. What about miscarriage associated with substance abuse (e.g. smoking, alcohol, and cocaine use)? Are there no treatments available for *those* problems? That is, is there no money being spent to combat substance abuse? Berg does not say.²⁷ Moreover, (in)fertility research often aims at developing ways to reduce the chance of miscarriage by addressing many of the major risk factors associated with miscarriage, such as advanced maternal age, maternal obesity and high blood pressure, and history of previous

²⁶ See Behr, Courtier, and Qayyum (2012, 245ff).

²⁷ Marino (2008, 26) answers some of the questions raised here: “There are numerous scientific and clinical studies designed to help...women who do have documented pregnancy loss that is affecting their ability to get pregnant.” He also cites a variety of studies and initiatives that are dedicated towards reducing miscarriage in at-risk individuals. Marino (2008, 26-7) mentions Pearson et al. (2006) who work “to reduce pregnancy loss” in women who have diabetes, Meeker et al. (2007) who are studying the connection between cigarette smoke and miscarriage, and Price (2006) who examines the connection between income, education, and rates of miscarriage.

miscarriage.²⁸ How much money is being spent on fertility research and treatment? Hundreds of millions of dollars each year.²⁹

The reader may think I miss Berg's point here. The fact that these programs are well-funded (and have the *effect* of preventing miscarriage) is, perhaps, *no thanks to the PAC opponent of abortion*. This response will not work. Berg (2017, 1220) explicitly claims that the PAC opponent of abortion must significantly alter "*society's* medical and political priorities" (emphasis added). If it turns out society's medical priorities are already directed more heavily towards treating conditions that are associated with miscarriage than preventing abortion, then Berg's claim that a massive change needs to occur is unfounded.

Perhaps we should rewrite Berg's argument to focus on the amount that PAC opponents of abortion are currently spending to prevent miscarriage and compare that to the amount they are spending to combat abortion. There are two problems with this revised argument. First, Berg has not told us anything concrete about those respective amounts. Second, if miscarriage prevention is (in effect) far better funded than anti-abortion campaigns, then why *should* PAC opponents of abortion dramatically shift their own resources towards miscarriage prevention? For Berg, the prudent thing seems to be to fund preventing causes of death in proportion to the number of lives affected. There are two ways of approaching personal investment here. An agent may proportion her own investment by putting the largest part of it towards the biggest problem (and so on). Or, the agent may learn (insofar as is possible) what the current proportion of spending *is* (given the investments of everyone else). Once that information is gathered, then the agent should invest in whatever way will best secure the desired proportion of spending *overall*. The second option seems like a better way of achieving the goal Berg has set forth: That society's resources are proportioned

²⁸ See, for example, Warren and Silver (2008) as discussed by Marino (2008).

²⁹ See Arun (2018) and Estimates of Funding (2018).

in the right way. But the second option is compatible with—and may even require—investing one’s own resources in an otherwise *disproportionate* way.

If, for example, hundreds of millions of dollars are going towards developing treatments that reduce the chances of miscarriage, we might wonder how much is going towards “pro-life” organizations. In 2015, for example, some of the biggest “pro-life” organizations gave the following figures: The National Right to Life Committee reported a revenue of \$5.2 million, Human Life International raised \$2.8 million, and The March for Life Education and Defense Fund raised about \$1.2 million.³⁰

If Berg (2017, 1220) is right, then the causes of miscarriage end at least “one and a half to two times as many pregnancies as abortion.” Based on Berg’s (2017, 1220) claims, PAC opponents of abortion should invest their own resources in research accordingly. Ideally, this means that for every \$1.5 or \$2 society spends on combatting the causes of miscarriage, roughly \$1 should be put toward stopping abortion. If there is an imbalance in that ratio, PAC opponents of abortion should invest their own resources in a way that corrects the imbalance (as best they can). We saw that hundreds of millions of dollars are being spent to address the major risk factors associated with miscarriage.³¹ But only a few million are being donated to “pro-life” organizations. Thus, any PAC opponent of abortion that takes Berg’s advice seriously should immediately and substantially divert a huge influx of funding towards pro-life organizations.³² This turns Berg’s argument on its head.

³⁰ These figures come from each organization’s annual tax information, publicly available at Tigas et al. (2018).

³¹ From Arun (2018), Estimates of Funding (2018), and Marino (2008).

³² I do not think I am being unfair to Berg here. She is free to reject the principle, *fund research in proportion to the numbers of lives it may save*. But Berg (2017, 1220) has given no guidance here beyond insisting that more money *should* go towards research that affects more lives.

Finally, Berg (2017, 1221) focuses upon “intractable” chromosomal abnormalities that cause *most* miscarriages. Assume that no funding is going towards the treatment of these problems. *Should* funding be poured into research that aims to prevent those problems? Berg (2017, 1221) writes, “perhaps some future medical discovery will completely change our view of the intractability of miscarriage: we simply don’t know.” The idea is this: We should throw as much money at the problem as possible to maximize the chance of developing a solution in the shortest amount of time. How much *is* being spent already? We have not been told. Why would *more* funding bring about the desired effects? Berg (2017, 1221) points out that increasing funding “worked” in the case of HIV research. Not all problems work that way, however. I cannot throw more and more money at team of artists expecting that it will better enable them to draw a picture of square circle.

Berg’s point seems to be that “we don’t know” whether we will eventually be able to prevent the relevant deaths. Money *may* help. This puts PAC opponents of abortion in the following situation: Invest in a research program that aims to treat an “intractable” problem (hoping that a breakthrough occurs) or invest in treating conditions that are not intractable. We can debate about what should be done in these types of situations, but the *number* of lives at stake is not the only factor to consider. We must also consider *probability of success* when deciding how to invest.

PAC opponents of abortion should also ask: What procedures would be involved in research aimed at preventing (or treating) the chromosomal abnormalities Berg mentions? Invasive testing on women who are pregnant (or believe they may be pregnant)? PAC opponents of abortion may be hesitant to allow this type of testing. As Burda (2008, 25) points out, “attempting to treat all [miscarriages] may subject women to unnecessary and possibly harmful treatment and violate

the dignity and integrity of the pre-embryo, embryo, and pregnant woman.” Even common tests, like amniocentesis, usually have a very small chance of causing miscarriage, injury to the mother, or injury to the fetus. Thus, PAC opponents of abortion may (reasonably) oppose that testing.

Further, the relevant research would likely involve experimentation on embryos (directly or indirectly).³³ It is unclear to me that a treatment protocol for embryos with chromosomal abnormalities could ever be developed without human trials of *some* kind. CRISPR-Cas9 gene editing technology, for example, might allow researchers to edit and correct otherwise lethal genetic mutations present in embryos. But, as Flomenberg and Daniel (2019, 21) point out, using this technology on human beings raises a plethora of ethical questions about the subject’s “lack of ability to consent before birth,” the “potential for unanticipated adverse effects,” and the “potential effects on future generations.” Thus, PAC opponents of abortion may object to the use of such technology (even though it saves lives). In their view, the research *itself* is morally impermissible. There may be good reason for this view, given moral imperatives such as “always treat humanity as an end, never merely as a means.”³⁴ Assuming embryos are persons, then to perform tests on embryos—especially when the tests are not expected to benefit *those* embryos, but aim at gaining knowledge that *may* help others—is to use people as a mere means. This also illustrates why Berg’s comparison of “miscarriage research” to AIDS activism and research is inappropriate.³⁵ *Consenting adults* were the subjects of research in the latter case. That is not so when it comes to embryos and fetuses.³⁶

³³ Or, as Blackshaw and Rodger (2019, 115) put it, research “would likely require supporting destructive research on embryos,” which is “unacceptable for the pro-life position.”

³⁴ Cf. Burda (2008, 25) who states that “pre-embryos, embryos, and pregnant women must be treated as an end and never solely as a means.” A major difference between the arguments I present and those presented by Burda is that she builds her arguments upon Catholic moral theology, while my arguments make no reference to religious tenets.

³⁵ See Berg (2017, 1221-2).

³⁶ For more on common issues associated with informed consent, the morality of experiments that do not aim to benefit test subjects, and so on, see Munson (2011) as well as Beauchamp and Childress (2008).

The moral is this: Just as PAC opponents of abortion are not solely fixated on *saving as many human lives as possible*, they do not hold that human lives are to be saved *by any means necessary*. Some ends (e.g., finding a way to prevent all miscarriages) are extremely desirable. But the means of getting there (if those means involve using, harming, and/or destroying human beings) are not acceptable routes to take.³⁷

CONCLUSION

Berg's (2017) argument against PAC opponents of abortion is a failure. Her (2017, 1217-18) first claim—that miscarriage kills *far* more people than abortion—is false (when taken literally). It is misleading when adjusted. Second, the dilemma Berg presents falls apart given that PAC opponents of abortion oppose abortion for more reasons than “the number of lives lost.” Third, even assuming that Berg is right that miscarriage is “deadlier” than abortion *and* assuming her dilemma works, she has provided no evidence that PAC opponents of abortion are not doing enough to prevent miscarriage. Nor has she considered that PAC opponents of abortion may have good reason to oppose research programs that aim to prevent miscarriage (depending on the research methods involved). Hence, Berg's argument has failed at every stage.³⁸

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³⁷ Of course, there may be research campaigns that PAC advocates can support without compromising their ethical commitments. Card (2008, 28), for example, argues that “the cost of an educational campaign” aimed at addressing and reducing some of the risk factors associated with miscarriage is relatively low and is also consistent with PAC advocates' convictions. The PAC opponent of abortion may have good reason to invest in these types of campaigns. But if Card is right, doing so does not require that they fight for a massive and immediate shift in society's medical and political priorities (nor does it require they divert “a huge influx” of money towards the campaigns).

³⁸ I am grateful to David Alexander, Kelly Kate Evans, Jonathan Krull, Derek McAllister, Alexander Pruss, Daniel Rodger, Allison Krile Thornton, Margaret Greta Turnbull, Peter Younger, and the anonymous reviewers at *Journal of Medicine & Philosophy* for their comments on the arguments in this essay.

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