

Correspondence

Birth equity: US Supreme Court must support Black people

As president of the National Birth Equity Collaborative, I agree that undermining the 1973 *Roe v. Wade* abortion-viability standard would detrimentally affect people with the capacity for pregnancy, particularly those who are Black (see *Nature* **599**, 187–189; 2021). The collaborative led the submission of an *amicus* brief on safe and legal access to abortion for maternal health and well-being (see go.nature.com/33jwjsn) as evidence against Mississippi state's *Dobbs v. Jackson Women's Health Organization*.

The legacy of exploitation, violence and control of Black people in the United States should not be furthered by eroding their reproductive rights through increased state control of abortion. Mississippi has some of the highest infant and maternal mortality rates in the country, yet it claims to be upholding maternal health by imposing arbitrary viability restrictions on abortion (A. J. Stevenson *Demography* **58**, 2019–2028; 2021). Along with Texas and other states waiting to pass such legislation, Mississippi and the US Supreme Court are essentially signalling how little they care about protecting Black lives.

The science is clear: the Supreme Court must conclude that human rights are more important than gerrymandered states' rights.

Joia A. Crear-Perry National Birth Equity Collaborative, New Orleans, Louisiana, USA.
drjoia@birthequity.org

Push for ethical practices in geoscience fieldwork

Destructive geoscientific sampling can have ethical repercussions. It can disrupt archives of Earth's history (see R. Butler *Nature Geosci.* **8**, 817–818; 2015) and the management of landscapes and geological formations that have local cultural significance (see *Nature Geosci.* **14**, 537; 2021). As members of the International Association for Promoting Geoethics, we suggest ways to ensure that geoscientific sampling and fieldwork are carried out ethically.

Geoscientists must engage with stakeholders from the start of their studies and respect their perspectives and sensitivities. The researchers should draw up detailed plans before collecting samples and follow local regulations meticulously. Any environmental damage must be minimal, particularly in geoheritage sites. And they must make all data available, including to local contributors, for re-examination and reproduction purposes.

Establishing ethical guidelines and best practices is a matter of urgency: common principles, values, methods and procedures must be defined. Incorporation of ethical and social considerations into university curricula and into fieldwork must not be postponed. It is important that the concepts of geoheritage and geoethics are not neglected (see go.nature.com/3kkjqjv).

Giuseppe Di Capua* National Institute of Geophysics and Volcanology, Rome, Italy.
giuseppe.dicapua@ingv.it

*On behalf of 6 correspondents; see go.nature.com/3ppk2xt

COVID-19: boost mental-health resilience

The social and economic effects of the COVID-19 pandemic are harming mental health and well-being. News of fast-spreading variants of the virus SARS-CoV-2 underscores the urgency of building population resilience to further damage.

Mental health is too frequently stranded on the periphery of health research, policy and practice. The World Health Organization has presented possible strategies to expand coverage by mental-health services in partnership with the social sector, based on the recent activities of stakeholders (see go.nature.com/3s60obu and go.nature.com/3porzta).

Psychological well-being also needs to be boosted, with help from community agents, to reduce the risks of future mental illness. Leveraging technology for service delivery is crucial to safeguard mental health and well-being, a target of the United Nations Sustainable Development Goals (go.nature.com/3duizoo).

Government and stakeholder partnerships must optimize social policies, including those on education, housing and transportation, to promote population resilience and sense of belonging. To increase outreach, mental-health goals should be integrated into disease-specific initiatives – such as those developed to prevent cardiovascular disease – and population-specific well-being programmes (to alleviate poverty, for instance).

Lola Kola WHO Collaborating Centre for Research and Training in Mental Health, Neurosciences and Drug and Alcohol Abuse, University of Ibadan, Nigeria.
lola_kola2004@yahoo.com

Engaging with the science of fetal origins

Anna Nowogrodzki states that my book, *The Maternal Imprint*, “doesn't engage” with programmes such as the Avon Longitudinal Study of Parents and Children (*Nature* **599**, 199–200; 2021). On the contrary, I introduce the study as exemplary of data-rich science on fetal origins in the opening pages, highlight the work of its researchers in testing causal hypotheses concerning fetal epigenetic programming, and feature my own collaborative scholarship with affiliated researchers in the book's closing chapter. My collaborations and exchanges with researchers on developmental origins underpinned the book.

I find Nowogrodzki's review inadequate in its appreciation of the approaches to evidence, analysis and argumentation that are core to the history and philosophy of science. She dismisses the book's first 150 pages as “overlong” and then focuses on a single later chapter, suggesting that “[Richardson] could have done a better job of showing her working”. But ours is slow scholarship and the book's arguments about fetal origins build over its chapters.

A more comprehensive overview is necessary to appreciate the book's nuanced arguments about cryptic causality, the development of biosocial science and reproductive responsibility in their full force.

Sarah S. Richardson Harvard University, Cambridge, Massachusetts, USA.
srichard@fas.harvard.edu