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Abortion & Informed Consent – American Women Don't Need A Lecture?

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Debbie had her large intestine pulled out through her vagina when her uterus was perforated during an abortion. For the rest of her life, she will need a colostomy bag to expel solid waste from her body.

Karissa was an active and vivacious honor roll student. Since her abortion, her family has sought to keep her alive since the anorexia nervosa she developed has become life threatening. Her eating disorder is a disturbing metaphor to symbolize the emptiness she is feeling inside.

Beth was permanently sterilized after complications and infection following her abortion. She underwent a complete hysterectomy at the age of 22.

As a therapist at the Center for Post Abortion Healing, I have learned that Post Abortion Syndrome and physical complications from legal abortion is not a fictitious piece of propaganda circulated by those who want to scare women or make them feel guilty.

I have listened to many women's stories of what led them to "choose" abortion. For some, it appeared to be the very best option. For others, it seemed like the only choice. For all, it was perhaps the most traumatic event of their lives. If any of these women had even the slightest idea that their lives would have been effected in these ways, they never would have consented to an elective procedure – abortion.

There is a common thread which runs through countless testimonies of women who have suffered adverse psychological trauma or physical injury: A sense of anger and betrayal when they discover that they were never told about inherent dangers of induced abortion and realize the information after the fact.

Abortion is repeatedly sold as a "safe and simple" solution. Routinely, no information is given about alternatives, fetal development, or procedure risks.

Rita had a complete nervous breakdown when she suffered the effects of an incomplete abortion. She passed a fully developed leg onto her sanitary napkin, followed by more blood and an arm with hands and fingers. Rita was given no information on fetal development. "They didn't tell me it was a baby!" she sobbed hysterically.

As Pat Schroeder indignantly states, "American women do not need a lecture!" The U.S. Supreme Court apparently agrees with her, since they classify this information as "*not relevant to the woman's decisions, and that it may serve only to confuse and punish her and to heighten her anxiety.*" (476 U.S. at 762) Information regarding reproductive health risks, complications and fetal development is clearly within the scope of medical information to which a woman should have access in order to give their informed consent. It is precisely this type of information, which has the capacity to influence a woman's decision regarding a proposed surgical procedure, that constitutes the ability to make a truly informed "choice".

This *choice* is further distorted when information about alternatives are all ignored in the "counseling process". Such material would include:

- information about adoption planning
- medical assistance available for pre-natal care
- single parenting resources
- childbirth and neonatal care
- child support enlistment forms

The court has determined that this type of information is impermissible because it "*contains names of agencies that may be out of step with the needs of the particular woman, and thus places the physician in an awkward position and infringes upon his or her professional responsibilities.*" (476 U.S. at 763)

Before a woman can be truly free to make her own choice, she must make a decision based on factual information about all aspects of abortion, the risks of the procedure, adoption and parenting. The abortion industry's silence in these matters is based on the fact that it is a billion dollar business, the profitability of which depends on the number of women having abortions, the speed, efficiency, and minimizing of contact between physician and pregnant woman.

During a typical abortion, a woman's first and last meeting with the physician is when she has her legs strapped up on an abortion table.

Repeatedly, women and abortionists themselves speak of an “assembly line” procedure with no time for questions, consultations, medical histories, or aftercare. There is no screening process to identify “high risk” patients who may be likely candidates for developing psychological disturbances following their abortions.

No assessment is made of the impact of abortion on the mother’s overall physical, psychological, or emotional health. There are no surgical procedures done, except abortion, which do not take these critical factors into account.

One overlooked group affected by abortion is African Americans. The shocking fact is that although blacks make up only 12 percent of the nation’s population, over 43 percent of all aborted babies are black. Dr. Jean Thompson, from the International Black Woman’s Network refers to the abortion movement as “black genocide”. For many women of color, abortion is false compassion that keeps us from addressing real social issues which need to change.

The shocking number of women killed by legal abortion is a sobering indication that “safe and simple” abortion is a myth. A 33 year old mother of four, recently bled to death from laceration of the cervix and perforation of the uterus during her legal abortion. She joins the growing list of hundreds of women who have died from their choice. Their stories rarely make it into the headlines, like the 50% increase in breast cancer after abortion; the 400% increase in ectopic pregnancies following abortion; and the 200% increase in miscarriages. These and other facts would obviously not be good for business.

Abortion is a skillfully marketed product sold to a woman in time of crisis. When she finds out the product is defective it’s too late. A powerful unregulated industry is protected by a court system which upholds the legality of self-serving silence.

Women can not afford to be blind, deaf, and dumb about the irrefutable medical risks associated with abortion. We cannot be uneducated regarding the symptoms and pre-disposing determinants of Post Abortion Syndrome. Ignorance of alternatives does not constitute true choice. To assume that women and teenage girls are so informed and rational in a crisis, that they carefully think this all out, or go into libraries to do research is another misconception.

Individuals have a right to be informed about the inherent dangers of induced abortion. They should be aware that abortion doubles your risk

of developing breast cancer, that abortion often damages a woman's ability to bear children in the future, and that psychological problems and post-abortion trauma are a reality. At present, women are told nothing about the detrimental effects of abortion.

Our laws on abortion claim to be protecting a woman's constitutional right to "choice" when in actuality, it strips her of vital information necessary for control of her body, her capacity for future reproduction and her mental health.



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