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Abortion and Post Traumatic Stress Disorder:

The Evidence Keeps Piling Up

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Joan can't bring herself to vacuum the rugs in her house because of acute panic attacks; they paralyze her when she is reminded of the suction machine used to terminate her pregnancy.

Terry is plagued by nightmares. There is always a little girl crying for "mommy," with her arms outstretched and her eyes filled with fear and abandon. Terry usually takes strong barbiturates each night to avoid this painful nocturnal phenomenon.

Patricia has become an alcoholic since her abortion. When drinking is not enough to avoid the inner misery, she resorts to cocaine.

Jillian becomes traumatized each time she makes a peanut butter and jelly sandwich for her daughter. The jelly reminds her of blood clots that she passed after her abortion.

Many misquote former Surgeon General Koop as saying that there were no adverse psychological effects of abortion on women. What Dr. Koop actually said, in a three-page letter to then-President Reagan, was that available studies were flawed, because they did not examine the problem of psychological consequences over a sufficiently long period. He recommended that millions of dollars be spent on investigating this area. Yet "choice" advocates and the present administration have consistently blocked governmental funding of these research efforts.

Certainly, not all women experience emotional problems following induced abortion. However, since Koop made his statement, an alarming amount of evidence has accumulated that, for some women, abortion is responsible for a broad array of deep psychological and emotional disturbances. Unfortunately,

these women keep their pain to themselves. According to one study, three out of four people surveyed keep sexual secrets, like abortion, from their partners – and even sometimes from themselves. By not acknowledging a traumatic abortion experience, a psychological barrier is erected and an emotional toxicity is perpetrated. A woman may experience – coupled with denial and avoidance – numbing, amnesia, phobic responses and interpersonal distancing. For this reason, elective abortion remains one of the most emotionally charged and politically sensitive topics worldwide.

In general, there is a ten to fifteen year period of denial during which women who were traumatized by their abortions will repress thoughts and feelings about the event. Memories are often triggered with the conception or birth of “wanted” children or by another life-stressing circumstance. For others the trauma may sink deeply into the unconscious and may never surface in her lifetime; yet she will often pay a heavy price – physically, emotionally, and spiritually. It may be alienation; it may be pushing away from intimacy, perhaps a hardening of the maternal instinct. Something happens on the deeper levels of a woman’s consciousness when she terminates a pregnancy. As a therapist, I see that there is definite emotional grief and mourning following an abortion. There is no question in my mind that we are disturbing a life process.

Hundreds of women who have had abortions were sampled by the post-abortion researchers at the Elliot Institute for Social Science Research. They report the following statistics:

- 90% suffer damage in their self-esteem
- 50% begin or increase alcohol and drugs
- 60% report suicidal ideation
- 28% actually attempt suicide
- 20% suffer full blown post traumatic stress disorder
- 50% report some symptoms of PTSD
- 52% felt pressured by others to have the abortion.

Oftentimes, women do not connect the emotional difficulties they suffer with the trauma of abortion. Their repressed feelings result in psychological and behavioral difficulties in other areas. Many women struggling with post abortion trauma may find an outlet through eating disorders, alcoholism, self-destructive behaviors, workaholism, promiscuity, difficulty with interpersonal relationships, sexual dysfunctions, anxiety and panic disorders, clinical and post-partum depressions, flashbacks and nightmares.

Gina describes her abortion as being a “land min” she walked on one day. Ever since then, she has been trying desperately to pick up the pieces of her shattered emotional life. She has been hospitalized for suicidal ideation on the

anniversary date of her abortion, and she struggles with chronic episodes of crippling depression.

The suicide/abortion link is well known among professionals who counsel suicidal persons. Meta Uchtman, director of Suicide Anonymous in Cincinnati, reported that over a 35 month period her group had worked with 4,000 women, of whom nearly half were calling in despair after terminating a pregnancy. Of those who had abortions, 1,400 were between the ages of 15 and 24, the age group with the fastest-growing suicide rate in the country.

As a psychologist dealing with abortion traumas, I have heard many individual stories. The women tell of pain, grief and sadness after losing a child whom they felt, for one reason or another, they could not bring into this world. Post Abortion Syndrome is a type of post-traumatic stress disorder which is brought about by stress involved in the abortion itself. Common in the post-abortion patient are grief and heartache over the procedure and feelings of loss and victimization. Even more important, however, is her inability to process the trauma and its accompanying feelings because of denying and repressing her thoughts and feelings about the event.

A certain amount of denial is normal and even healthy. People avoid thinking about certain traumatic events and emotions in order to alleviate physical or psychological pain. We find denial at work during illnesses and death, sexual abuse, and wartime trauma. In these cases, denial enables us to postpone processing what has happened until the crisis is over. Then, with the support of family, friends, and society, we can work through our pain.

In the aftermath of abortion, however, the woman has no place to process her trauma. She has had a grim, painful, perhaps frightening experience – and she can't talk about it. There is little social support for women who find abortion a stressful experience. There is no validation for her grief and anger. After all, it was her choice. From pro-life group she may feel she hears, "You murdered your baby; how did you expect to feel?" From pro-choice groups, she may be told "It's your body, and it was your decision. It was just a piece of tissue, and there is no reason to feel bad."

Since there is little publicity regarding this problem, many women suffer in silence. Most aborted women who experience trauma continue in denial rather than working through their pain, regret and grief. This may involve denying certain feelings or beliefs about abortion. It may involve funneling their efforts into the radical elements of the women's movement which validates their decision. After all, reproductive choice is often promoted as a great way to empower women and give them the right to control their lives.

Jennifer never thought about her abortion until she stared into the eyes of her precious newborn, 12 years later. From that moment on, she was filled with self-loathing and doubt. What kind of mother am I? How could I have killed another child of mine? Instead of bonding with the baby, she rejected him, feeling that she was incapable of nurturing and love.

Pam never dated after her abortion. As she approaches her forties, she lives with the knowledge that she aborted the only child she may ever have.

Who is at risk for post-abortion trauma?

Because abortion is selected some 1.6 million times annually, the average American woman has an estimated 46% chance of experiencing this procedure in her lifetime. Given the numbers of individuals potentially affected by abortion, it is surprising how little is known about its impact on reproductive, physical and mental health. There has never been one large-scale, long-term, national, epidemiological study of the psychological effects of induced abortion.

While the number of women who suffer post-abortion trauma is unknown, the characteristics of the women most likely to suffer severe post-abortion problems have been identified. The most common factors which lead to presumable trauma after an abortion are the feeling of being pressured into having the abortion and the feeling of uncertainty or ambivalence about the choice.

Many women feel pressured to comply with the needs or wishes of others. This is especially true if the "wishes" of others are experienced as coercion, subtle or overt, such as threatening to withhold love unless she "does the best thing." Lack of emotional support to keep a pregnancy can be experienced as pressure "forcing" a woman to choose abortion. Financial problems, being unmarried, social problems, or health problems may also make a woman feel "forced" to accept abortion as her only "choice."

A study of 252 aborted women who suffered psychological sequelae reported that 53% felt "forced" into the abortion by others, and 65% felt "forced" by their circumstances. Only 33% felt free to make their own decisions. Conversely, 83% stated they would have kept the pregnancy if they had been encouraged to do so by one or more other persons, and 84% would have kept the pregnancy under "better circumstances."

Another criterion for identifying high-risk patients is the existence in the patient of any reluctance to have the abortion. The source of her reservation may be conflicting moral views about abortion or an opposing desire to keep the baby. Researchers report that 30% to 60% of women seeking abortion express

some desire to keep the child (ambivalence). Various studies have found that 65% to 70% of women seeking abortions have a negative moral view of abortion. Only 6% to 20% of women receiving induced abortions report that they would have been willing to seek illegal abortions if legal ones had not been available.

Thus, from studies published on the characteristics of women seeking abortion, it can be estimated that up to 70% of all abortion patients fall into the high-risk category, because of coercive pressures and/or ambivalent feelings at the time of the abortion.

The fierce battlers for abortion rights are blindly dismissing the many women whose lives are being destroyed by the solution they chose to an unplanned pregnancy. Such an attitude displays an uncaring abandonment of reason in favor of ideology. Because the consequences of abortion can be so threatening, we don't want to exacerbate the problem by doubling or negating the many women who have undergone excruciating pain because of the "choice."

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