After the Deed is Done
By Pat Centner

Studies validate increase in depression, substance abuse among women who have had abortions.

“No woman wants an abortion as she wants an ice cream cone or a Porsche. She wants an abortion as an animal caught in a trap wants to gnaw off its own leg”.

This stark analogy referenced in the book, Forbidden Grief: the Unspoken Pain of Abortion, lays bare the desperation of women who contemplate an abortion because they believe it is either their only choice, or the best choice they have under extremely difficult circumstances.

For the past 30 years, untold numbers of young girls and women in this nation have found themselves lying on an operating table trembling with apprehension, waiting for an abortion. Many have come to this juncture in their lives after being forced to face one or more of the following: the inconvenience for others around them; or perhaps saddest of all, the “assurance” by others that that which is growing in their womb is “just a blob of tissue”.

This scenario is played out time and again in Forbidden Grief, as Theresa K. Burke, Ph.D., the book’s author and a psychotherapist, reveals the grief and anguish of some of the women who have come to her for help. Burke has been treating women with post-abortion issues since 1986. Her book speaks to their suffering – to the fact that oftentimes after an abortion, the boyfriend or spouse, along with family members and friends, pretends nothing has happened. No one talks about it; there is no opportunity for the one who endured the abortion to tell how she feels. In this walled-off silence, grief is forbidden, and the message is clear that she is not to display any feeling of regret, or guilt or shame. Pretend it didn’t happen. Life goes on.

Yes, life goes on – for one – but not for the other. And the denial and blotting out of this truth has resulted in devastating emotional and psychological consequences for many who have experienced an abortion. Forbidden Grief focuses on the repressed emotions that many live with for years, and explains...
how those emotions can manifest themselves in self-loathing and self-destructive behaviors that run the gamut from clinical depression and suicide attempts to eating disorders, sexual promiscuity and substance abuse.

“Monica”, a patient quoted in the book, says it so well: “...I frequently thought about killing myself. I had anger and rage,...incredible self-hatred and depression that came and went like an unexpected wind. But most of all, grief, that chilled me to the bone. My grief turned on me like a hungry lion waiting to destroy every area of my life. Drinking and drugs were the only way I could cope”.

The Naysayers

Of course, there are those who discount completely the premise that an induced abortion can be the cause of such negative behaviors and blatant unhappiness. The pro-abortion crowd has utter disdain for the pro-life organizations, physicians, researchers and individuals who uphold the position that a woman can suffer severe trauma and years of unresolved grief and misery as the result of an abortion.

Cynthia L. Cooper, in a particularly scathing article in the August/September 2001 issue of Ms. Magazine, says the “religious right” has manufactured the whole concept of emotional and behavioral problems being experienced by women who’ve had an abortion. She contends that pro-life organizations have created “post-abortion stress syndrome” as a way to line their own pockets when women who’ve had an abortion buy into their rhetoric and come to them for assistance.

Cooper declares this “anti-choice dirty-play at its worst”. She soundly blasts and attempts to discredit David Reardon, Ph.D., who is a leading researcher on post-abortion issues, and founder of the pro-life Elliot Institute in Springfield, Illinois. Reardon collaborated with Dr. Burke on Forbidden Grief.

Studies Speak For Themselves

The pro-aborts can spout all the rhetoric they want about “anti-choice” alarmists, says Dr. Reardon, but the fact is, there are several recently published studies that prove conclusively the existence of a substantial increase in depression and substance abuse among women who have had prior abortions.

Clinical depression – The web site for the Elliot Institute, www.afterabortion.org, released an article on January 18, 2002, that referred to a study published that week in the prestigious British Medical Journal. The study, which determined a link between clinical depression and abortion, found that, on
average, eight years after aborting an unwanted child, married women were 138% more likely to be at high risk of clinical depression than women who had carried their unwanted first pregnancies to term.

This study was particularly significant because it was the first national representative study to examine rates of depression several years after an abortion. From their findings, Reardon and his colleagues concluded that screening patients for abortion history could help physicians identify women who would benefit from counseling.

Substance abuse – The highly-respected American Journal of Obstetrics and Gynecology, in its December 2002 issue, published a study that concluded: Women with a prior history of abortion were twice as likely to use alcohol, five times more likely to use drugs, and ten times more likely to use marijuana during subsequent pregnancies than women who had either no previous births, or who had one previous birth.

Dr. Reardon, one of this study’s authors, explained that women with unresolved issues of grief and loss resulting from a previous abortion use drugs as a coping mechanism, especially since a second pregnancy often brings back the maternal emotions they experienced before the abortion.

Based on the National Pregnancy and Health Survey, this study drew on the data collected from 2,613 women who had just given birth. Researchers concluded that screening patients for abortion history might help to identify pregnant women who are at risk for substance use.

An article published by the Pro-Life Infonet says this study is the seventeenth linking abortion to elevated rates of substance abuse, but the first to specifically show that drug and alcohol abuse remain higher during subsequent pregnancies.

Other studies – Five studies documenting emotional problems tied to abortion were published this past year, and Dr. Reardon participated in all five. In addition to those mentioned above, the others linked abortion to an increased need for mental health treatments, higher death rates (including suicide), and poor parenting issues involving subsequent children.

Articles and information about these and numerous other studies published in medical journals in the U.S. and other countries can be found at the Elliot Institute’s website.
Turning A Deaf Ear

When asked if having the studies appear in highly respected medical journals was a major coup for the pro-life cause Reardon laughed and said, “Well, yes, it’s important that they’ve been published, but they’re largely ignored.

“We’ve received very little media attention for any of the studies”, he continued, “even though we sent out press releases and information every time. But that’s very typical”.

He added that even though the media pretty much ignores the studies, the data is conclusive, and the medical establishment can’t ignore that.

To come full circle, the sad significance of these studies and others that show a link between abortion and subsequent tragic behaviors is that abortion not only kills the tiny being suctioned from its mothers womb, but it can afterward maim the mental and emotional life of the mother for years.