Women Victimized by Abortion Strengthen Pro-Life Viewpoint

By: Nancy Valko

St. Louis – It was a vintage Barbara Walters question but the answer was totally unexpected. In a broadcast on ABC’s 20/20 news show a few years ago, Walters interviewed Lorena Bobbitt, the woman who made national news when she mutilated her husband’s genitals with a knife and said she was an abused wife. Walters asked what her thoughts were as she picked up the knife. “First, I thought of the abortion...” was the reply. Although Walters quickly changed the subject, court testimony revealed that Bobbitt had had an abortion almost exactly three years before her crime.

“Pat” was 5 ½ months pregnant and happily anticipating the birth of her first baby when her obstetrician bluntly informed her that her baby had anencephaly, a devastating birth defect, and that she needed to have an abortion as soon as possible to save her life. Frightened, she underwent a very difficult abortion the next day. It never occurred to her that her doctor would lie about anencephaly being a life-threatening condition for her.

Five years and two healthy sons later, Pat called a friend saying, “I don’t want a lecture, I only want to know one thing: what did they do with the body (of the aborted baby)?”

John Biskind, an Arizona abortionist, made national news when he almost completed a partial birth abortion on a full-term baby girl in June, fracturing her skull and lacerating her face. Shortly afterwards, reports surfaced of past problems with his clinic including a woman who bled to death after an abortion in his facility in April, 1998. Biskind’s AZ abortion clinic, like most Arizona abortion clinics, is not regulated or licensed by the state.

Such stories of physical and psychological suffering from abortion do not surprise people like those who attended the first national Women at Risk conference held in St. Louis last month. Approximately 80 people came from 27 states and had a wide range of disturbing stories to tell. But rather than just a
conference on post-abortion syndrome or the physical risks of abortion, the goal of this conference was to help women who have had abortions to have greater impact on the abortion debate by promoting action to protect women from abortion trauma, both physical and mental.

**A New Kind of Attitude**

This kind of militancy is a newer aspect in the abortion debate.

In the first years after *Roe v. Wade*, opposition to abortion focused on the humanity and rights of the unborn child. Education and legislation were tried in an effort to regain protection for the unborn child but these efforts met with limited success. As time went by and the numbers of abortions skyrocketed, groups like Feminists for Life and Women Exploited by Abortion (WEBA) increased awareness that women, too, were being hurt by abortion. While pro-abortion organizations maintained that women suffered and died because abortion had been illegal, cases of physical complications and even deaths from legal abortion began to emerge. At the same time, a pattern of emotional symptoms was noted among women who had had abortions and was named Post-Abortion Syndrome by those in the pro-life movement.

Support groups such as WEBA were later joined by organized healing programs like Project Rachel. Despite a virtual media blackout of the existence of such groups, the numbers of women and others seeking help after abortion has increased enormously. Legislation and education in recent years has begun to focus on issues affecting women such as parental consent for teens and stricter regulation of abortion clinics in terms of safety and information on risks and alternatives. These initiatives have run into ferocious opposition from pro-abortion groups, especially as the numbers of abortions appears to be decreasing and number of health care providers willing to perform abortion is dwindling. The voices of experience from women who have had abortions have had a particularly powerful impact on the abortion debate.

This does not surprise experts like David Reardon, Ph.D., who has studied and written on post-abortion issues for 15 years as direct of the Elliot Institute. One of the featured speakers at the Women at Risk conference, he points out that there can be an up to a 10-year lag before a woman realizes the negative impact of abortion on her life and it can take another 10 years before she feels healed enough to act and insist that women be protected. With the 25th anniversary of legalized abortion occurring this year, he says the timing may be right for many more women to come forward. The Women at Risk conference was formed to help such women organize for action.
Carefully avoiding a position on abortion itself, Women at Risk seeks to be open to both pro-life and pro-choice women and groups who truly want to protect women from abortion trauma. As one speaker who had an abortion said, “If a woman has a right to choose, she has a right to know what she’s choosing.” Model legislation was proposed at the conference and addressed such issues as better counseling for women, redress for those hurt by abortion, mandatory malpractice coverage, and full disclosure of risks.

Reardon believes that women who have had abortions can hold the key to solving a basic abortion puzzle: while the vast majority of people polled agree that abortion takes a human life, polls also show that the majority want to keep abortion legal, at least in some circumstances. Unfortunately, he says, the public views the abortion issue as a “false choice” between a woman and her unborn baby without recognizing that the “well-being of the baby and the mother are intertwined.” If a common consensus can be reached that at least some abortions are unwanted, coerced, or unsafe, he maintains, there would be a public demand that abortion clinics and providers be regulated to the kind of high standards enforced for regular medical procedures – a standard that would be virtually impossible for abortion clinics to meet.

**Hope and Healing**

Many of the attendees at the conference were also people actively involved in post-abortion healing organizations and they spoke of the need to reach aborted women with the message that there is hope and help for them.

In the past 10 years there has been an explosion of programs such as Project Rachel in dioceses around the country and other religious organizations currently provide training and support for post-abortion healing. Because of the recognition that abortion affects more people than just the women who have had abortions, post-abortion healing is also now available for men and relatives in their lives. But a major problem has been getting the word out to people suffering after abortion.

Ann V., a nurse who became suicidal after her abortion, says that women hurting after abortion can feel they are in a virtual no-man’s land. The pro-choice movement dismisses the pain women feel after abortion and the pro-life movement sometimes seems to ignore or judge the aborted woman. She believes that greater sensitivity and a more understanding attitude towards aborted women would open up more women to the help they need.

Efforts include distributing information to churches, colleges, and media outlets as well as less obvious venues. Heidi Heystek of Kalamazoo, Michigan, of Freedom Ministries, is active in a pilot program for post-abortion healing that was
started in a local prison this year. Although statistics are hard to come by, Heystek estimates that up to 70% of women in prison have had a prior abortion.

Experts in the field of post-abortion healing agree that an understanding and caring attitude is crucial to reaching people hurt by abortion and changing the public perception of abortion. While different approaches can and are being tried, it is likely that it will take a diversity of efforts to ultimately solve the abortion problem.

Nancy Valko writes from St. Louis, Missouri.