

# Big Girls Do CTU: THE HIDDEN TRUTH OF ABORTION

by Dr. Martha Shuping and Chris Gacek

There is a serious psychological impact on women post-abortion that must not be ignored or pushed aside. As President Barack Obama begins his first term, there is great anticipation about the policies he will pursue. Regarding abortion, there is much less mystery. In November 2008, major pro-abortion groups such as Planned Parenthood and the ACLU completed an elaborate 55-page strategy document, "Advancing Reproductive Rights and Health in a New Administration," that lays out their sweeping agenda. Unfortunately for them, the document was inadvertently posted on the Obama transition team's website for the world to see. The agenda is consistent with Obama's pro-abortion voting record in Illinois and the U.S. Senate.

Among other things, the planning document calls for: 1) the repeal of the Hyde Amendment, which limits federal abortion funding; 2) the removal of the ban on performing abortions at military facilities; 3) the elimination of the Weldon Amendment, which provides right of conscience protection for those unwilling to provide abortions; and 4) the enactment of the Freedom of Choice Act, an extremely aggressive law that would overturn state abortion restrictions (e.g., 40 laws limiting laterterm abortions).

The effect of eliminating federal funding restrictions and overriding state laws will be to increase abortions. The effect on the babies to be aborted is obvious, but little attention is paid to how increasing abortions will affect women.

The growing weight of scientific studies and the voices of women



Medical and scientific studies and personal stories reveal that abortion is a life-changing experience that causes many women to suffer psychologically.

themselves tell the story of abortion as a life-changing, adverse experience for many. Through the lens of Dr. Martha Shuping's years of clinical experience as a psychiatrist and emerging scientific literature, we can say with conviction that these personal accounts provide powerful and true insights into the psychological impact of abortion. (All names have been changed for the privacy of the women who have agreed to share their stories.)

### FIRST IMPRESSIONS

In 1973, as a 19-year-old pre-medical student, I worked as a volunteer at a clinic that helped women to access abortion services. Although the clinic originally sent women to New York for their abortions, in the early days following *Roe v. Wade*, we began referring to a clinic in our own back yard. In just one evening of training, I learned to tell women that the fetus was nothing more than a clump of cells and that the procedure was akin to having one's tonsils removed. There were no side effects or complications to consider with this "simple, safe procedure."

Thirty-five years later, abortion clinic staff still recite the same clichés, but I would not give the same advice today. I know better. As a psychiatrist, I have helped women heal from the effects of their abortions for more than 20 years through individual psychotherapy and group programs for abortion recovery. Having been entrusted with the intimate details of hundreds of abortions. I now could not truthfully say there are no risks: Women's hearts are at risk with abortion, and peer-reviewed research increasingly confirms the risks to women's mental health.

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### PRESSURE TO ABORT

When I met Jill, she was reporting symptoms of severe clinical depression-she was unable to enjoy anything, had frequent crying spells, could not sleep for more than a few hours at night and had frequent thoughts of suicide. She also reported frequent, disabling panic attacks during which she felt like she was having a heart attack, with shortness of breath, rapid heartbeat and chest pain. Her symptoms were severe enough to prevent her from holding a job. She had been prescribed dozens of medications over a period of about 10 years, but nothing had helped. Trying to get a handle on why treatment wasn't working, I asked her, "How did this start?"

Jill had become pregnant at 18, and her father had threatened her with homelessness if she did not have an abortion. That's pressure. He told her she could not live at home with her baby, so she had an abortion, not knowing of any other options. She pinpointed the abortion as the start of her symptoms.

Besides textbook symptoms of depression and panic, Jill also reported other symptoms that seemed specific to the abortion. She felt extremely upset when she was around her sister's baby, because it reminded her of her own baby whom she had wanted but lost. She felt guilty avoiding family gatherings, but it was too painful for her to be around her infant niece. She also couldn't stand the sound of a vacuum cleaner, which reminded her of the suction device used in her abortion.

It is not only teens who experience pressure to abort and the consequences of an unwanted abortion, but adult women, too. Melody was a married stavat-home mom with two children and a husband who was well-established in a successful career. She was happy about her pregnancy and looking forward to the birth of another child. But she was shocked to learn that her husband was unwilling to accept one more child into his busy life. When they met with their pastor, he also pressured for the abortion. If her husband felt he was too busy or lacked energy for one more, she should be supportive and respect his wishes.

Pressured by her husband and her pastor, Melody complied with the abortion, but found herself afterwards disabled by grief and depression. She would lie awake crying through the night and then find herself unable to get out of bed to face the day, unable to care for her two living children as she grieved the one she had lost. Despite her pastor's permission to abort, her own heart had given her no such permission. She believed she had committed a sin that could not be forgiven. She wanted to die.

Amazingly, abortion providers know that at least some women are pressured, and they also know that being pressured



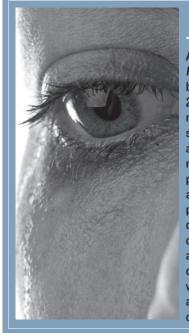
Louisiana State Leader for Operation Outcry Cindy Collins, left, and another supporter stand outside an abortion clinic, ready to tell pregnant women of their options other than abortion. Operation Outcry is a grassroots movement of women speaking out about their abortions.

puts women at greater risk for mental health problems after abortion. A 1993 "Fact Sheet" from Planned Parenthood lists numerous factors known to put women at risk for negative psychological reactions, and being pressured or coerced is one of them.

In the textbook, "A Clinician's Guide

to Medical and Surgical Abortion," even "perceived" coercion is considered a risk factor for an adverse mental health outcome after abortion. If the woman feels that that she is being coerced, she's more likely to have problems—whether or not others agree with her perceptions.

Many women, like Jill and Melody,



### Abortion's Serious Impact

A study in the Journal of Psychiatric Research led by Dr. Priscilla Coleman in 2008, utilizing a nationally representative U.S. sample, showed that abortion was associated with increased risk for I2 mental health problems, including panic attacks, panic disorder, post-traumatic stress disorder or PTSD, major depression, bipolar disorder and substance-abuse disorders. The associations were statistically significant and included statistical controls.

In some previous studies, it has been speculated that mental health problems after abortion may have been due to other factors. But Coleman showed that abortion "made a significant independent contribution to more mental health outcomes than a history of rape, sexual abuse in childhood, physical assault in adulthood, physical abuse in childhood and neglect."

Dr. Coleman is codirector of the Association for Post-Abortion Research and Training, where her research and that of others can be accessed: StandApart.org.

### ADDITIONAL RESOURCES:

• Family Research Council panel discussion: "Postabortion Mental Health Effects, Awareness, and Politics." This resource includes video, audio and documents: FRC.org/ Lectures/Post-Abortion-Mental-Health-Effects-Awareness-And-Politics • Dr. Martha Shuping, M.D., has research and resources at: RachelNetwork.org have told me of being pressured. This is consistent with a 2004 study led by Dr. Vincent Rue (comparing Russian and American women after abortion), in which 64 percent of the American women reported feeling pressured to abort.

In light of this, one might expect this issue to be routinely explored in pre-abortion counseling. Is this abortion truly the woman's choice, or is she being pressured by someone? Has she been informed about options that may be available to her, such as maternity homes that offer a free place to live, plus job training and child care after the child is born? Information on the range of options may relieve some of the pressures.

### LACK OF COUNSELING

Certainly, not all abortions are pressured. The word "choice" is often used when speaking of abortion. This would seem to assume that actual choices are available and accessible, perhaps even implying that women are informed of their choices during informed-consent counseling.

Julie was 16 when she became pregnant. She was happy and excited about the baby, and her mom was happy about becoming a grandmother. Julie already had a part-time job and was trying to think through a realistic plan to care for her child. She says she definitely wanted the baby and was still considering her options when her boyfriend's father made the

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Julie had the abortion, without receiving any counseling or any information on support services that might have helped her to make a different choice. She said she definitely wanted her baby, but did not know what else she could do.

Julie was not given any information about the type of procedure or what would take place, only that it would stop the pregnancy. It was so painful, she was not able to walk afterwards but had to be carried to the car. She was surprised to later pass the baby at home alone.

The majority of women who come to me report they had had little to no counseling. One woman said, "I received better informed-consent counseling when my dog had surgery, compared to what I received before my abortion."

The majority of the American women in Rue's study reported similar experiences in regard to counseling. Two thirds reported they had received no counseling at all. Only 17.7 percent reported being counseled on alternatives, and only 10.8 percent believed they had received adequate counseling.

### WANTED BABIES

For Jill, Melody and Julie, their abortions were clearly someone else's idea. But nobody pressured Rose at all. The abortion was her idea, and her secret. She told no one.

Rose was 17, and her pregnancy was far enough along that she had felt her baby move. She said, "I really wanted this child, but I didn't know what to do"—a statement I have heard from many women. A senior in high school, just weeks away from graduation, Rose worked and saved her money, and in the end, pawned some cherished possessions to get enough money for the abortion.

Still, even though Rose clearly had made her own choice for abortion and worked to pay for it herself, she is equally clear that she wanted her baby. I often hear this from women, that even though abortion was chosen, the baby was heartbreakingly wanted. Researchers often mistakenly assume that an unintended pregnancy is always an unwanted pregnancy and that the

## GETTING HELP

More Information for those needing healing after abortion.

• "The Four Steps to Healing," by Martha Shuping, M.D., and Debbie McDaniel, M.A., L.P.C., is a pursesize paperback that helps one begin to explore abortion issues privately at home. Drawing on the experiences of real women, the book leads the reader through a fourstep process of abortion recovery. PostAbortionHealing.net

• **The Abortion Recovery Directory** is an online, international listing of abortion recovery programs, serving 30,000 people annually. AbortionRecovery.org

• National Helpline for Abortion Recovery is staffed by women who have personally experienced abortion, providing referrals to a variety of programs in your area. I-866-482-LIFE

• Rachel's Vineyard offers confidential, nonjudgmental weekend retreats at 150 locations worldwide, in Protestant and Catholic formats, open to men and women. I-877-HOPE-4-ME or RachelsVineyard.org

• **Option Line** refers callers to support groups affiliated with Care Net and Heartbeat International. I-800-395-HELP or OptionLine.org

choice of abortion always implies that the baby was unwanted. But many woman report wanting their baby while choosing abortion.

Rue's study showed that 17.7 percent of the American women reported the pregnancy was "desired," even though abortion was chosen. Thus, perhaps more than 200,000 American women abort desired pregnancies every year. Why would it then be surprising if many women experience grief, loss and other powerful emotions after their abortion?

### SUICIDAL THOUGHTS AND ATTEMPTS

Rose says that immediately after the abortion she felt an overwhelming sense of loss and regret, beyond anything she had imagined. She named her son Joseph as she walked out the clinic door.

Soon after the abortion, she made two suicide attempts. First, she took a gun to a lonely place at night and tried to shoot herself. After the gun misfired, she hit it against the asphalt parking lot, and

that this is not an isolated occurrence. A 2006 study from New Zealand under lead author Dr. David Fergusson found higher risk of having suicidal thoughts and attempts after abortion, compared post-abortive young women had three to another group of young women who became pregnant but did not abort. The study controlled for more than a dozen

Fergusson's study also revealed that the young women had a statistically significant risk of major depression after abortion, compared to those who were never pregnant and those who were pregnant but did not abort. (Major depression is a psychiatric disorder in which suicidal thoughts often occur.)

Dr. John Thorp, the McAllister

An abortion doctor talks to an unidentified 27-year-old woman before she undergoes an abortion.

Distinguished Professor of OB/GYN at University of North Carolina Medical School, was lead author of a large review article that included all large, long-term studies of abortion in English through 2002. The authors concluded that abortion is associated with depression serious enough to cause risk of self-harm and that women should be warned in the informed-consent process.

Several other peer-reviewed studies have uncovered an increased risk of suicide after abortion, a risk that persists over a period of years. But suicide and suicide attempts are the most extreme adverse outcome after abortion and appear to represent "the tip of the iceberg."

Many women have degrees of emotional reactions that may be causing distress to themselves and even those around them without ending in death or a suicide attempt. It is important to realize that there are many different symptoms and different psychiatric illnesses to which the abortion may be a contributing factor.

### MENTAL HEALTH **OVERVIEW**

Dr. Priscilla Coleman, associate professor of Human Development and Family Studies at Bowling Green State University, says in her report, "Abortion and Mental Health," that studies using nationally representative samples and various controls have shown that abortion significantly increases risk for several mental health problems, including depression, anxiety, substance abuse and suicidal thoughts and behaviors.

In her report, "Does Abortion Cause Mental Health Problems?," Coleman identifies more than 40 studies from peer-reviewed literature that include controls and show a strong effect of abortion as a risk factor contributing to the development of these mental

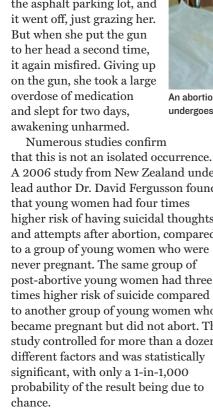
health problems.

There is not one set of reactions after abortion, or one type of psychiatric disorder that may result after abortion. Rather, a large body of solid research indicates that abortion can function as a stress that places women at higher risk for developing a range of mental health problems.

The 2006 Fergusson study illustrates this point. For total mental health problems, not just depression and suicidal ideation, the post-abortive young women had higher rates of problems compared to the other two groups, after controlling for numerous factors.

### DELAYED REACTIONS

Darla described her abortion experience as "very peaceful." She says, "Everyone was very kind," and she felt only relief that she could finish her college studies without interruption. She had no concerns about her abortion until almost 20 years later.







Working in a health profession, she found herself caring for premature babies in a hospital nursery. "That's when it really hit me." Somehow, the tiny preemies reminded her of the abortion and her own child who might have been similar in size and development.

The degree of distress she experienced was profound enough to lead her to mental health treatment and later to Rachel's Vineyard, an abortion recovery weekend. Telling others about her abortion in a confidential group setting was a key component in her healing. "There was a sense of laying down this burden, laying down this secret. I felt free being released from this secret."

Today, Darla has completed a degree in counseling and is now a Rachel's Vineyard facilitator, helping others to heal.

### **GRIEF AND HEALING**

Rose's abortion issues did not end with the failed suicide attempts. She also went through a period of drug addiction. Even after resolving her addiction, thoughts of her baby persisted for many years.

When Rose was in nursing school,



Left: Danelle Hallenbeck, North Carolina state leader for Operation Outcry, displays a rose from a memorial service for her baby that she keeps in her grandmother's Bible. Danelle, who attended a Rachel's Vineyard retreat, says the event changed her life. Above: During memorial services at the Rachel's Vineyard retreats, candles are lit in memory of each child lost through abortion.

helping a woman during a miscarriage, "It made me think of my baby, and I wanted him back."

"I thought about him every day," she said. "How old would he be? What color were his eyes?" Even after being married and having a daughter, she remembered her aborted child, Joseph.

She was afraid to bond with her infant daughter, believing that her daughter might die as a punishment for the past abortion. She wasn't able to feel emotionally close to her daughter, as she remembered Joseph and felt she should have nurtured him.

Rose's healing began with an abortion recovery support group. The memorial service at the conclusion was especially significant for her. She read a poem in memory of Joseph, later cross-stitching the poem into a keepsake. This and other mementos now help her to remember Joseph in a positive way.

After 30 years, she says that healing from her abortion has finally allowed her to develop a close relationship with her daughter.

Julie's grief was similar. After the abortion, "I named the little boy Dennis." She continued to remember him over the years. During pregnancy, childbirth and important events with her children, the thought of her missing first child was always there, taking away from the joy she should have felt. Constantly stuffing down grief "kept me from fully enjoying my life."

Her children knew she was depressed but could not understand why. One of her adult children says, "Now I understand-it is like a missing piece." Participation in an abortion recovery program has given Julie the peace of recognizing that her child is in heaven and has finally allowed her to enjoy closeness with her children.

### A BRIGHTER FUTURE

Like Darla, Julie and Rose now share with others the peace and comfort they have received, as members of Rachel's Vineyard teams. The existence of a growing abortion recovery movement, with thousands of support groups and programs from which to choose, testifies to the need women have to grieve for their loss while offering true hope that healing can take place.

Only in vacant policy debates and politically sanitized clinical studies do abortion's effects on women seem minor and unworthy of recognition. The real voices of many women tell far different stories—stories of life-altering experiences marked by a profound sense of loss and the need for spiritual and emotional repair. Maria put it this way, "The day that my baby died I realized that I had died, too." She is not alone. Maria and many others like her deserve our acknowledgement, our help and our love. •

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