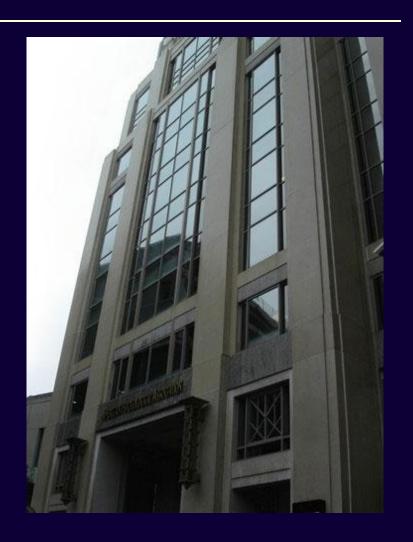
Abortion and
Mental Health:
The APA Task Force
Report of the
Literature
and the Reality

of Women, 53rd Session
United Nations, March 2009
Priscilla K. Coleman, Ph.D.
Bowling Green State University



Aims of this Presentation

- 1. Review evidence of a strong pro-choice bias in the APA Task Force Report released in 2008 on abortion and mental health.
- 2. Provide an up-to-date review of the scientific literature on the mental health implications of abortion.



Insufficient Information on the Development and Conduct of the Task Force

The following questions were not addressed by the APA:

- 1. What was done to assure that the representatives did not all hold similar ideological biases?
- 2. What was the process for selecting and securing reviewers?
- 3. How was reviewer feedback incorporated into revising the document?

Avoidance of Quantification

The authors of the APA Report avoid quantification of the adverse effects of abortion. This is a glaring omission of potentially very useful, summary information.



Avoidance of Quantification

- The APA representatives claimed there were too few studies to quantify effects yet a sweeping definitive statement indicating an absence of ill-effects is considered justified! This contradiction is indefensible.
- Had quantification of risk been conducted the conclusion would had to have been that abortion increases risk for a variety of mental health problems.

Deceptive Strategy to Justify Ignoring Studies Indicating Negative Effects

According to the report "The TFMHA evaluated all empirical studies published in English in peer-reviewed journals post-1989 that compared the mental health of women who had an induced abortion to the mental health of comparison groups of women (N=50) or that examined factors that predict mental health among women who have had an elective abortion in the United States (N=23)."

The 2nd type of study is conveniently restricted to the U.S. resulting in elimination of over 40 studies, most of which identified ill effects. As a reviewer, I summarized the international studies and sent a table to the APA. This was entirely ignored.

Methodologically-Based Selection Criteria are Not Employed.

The absence of methodologically-based selection criteria that reflect knowledge of this literature is shocking.

Sample size/characteristics/representativeness, type of design, employment of control techniques, discipline published in, etc. would have been logical places to begin.

Shifting Standards of Evaluation Based on Congruence with a Pro-Choice Agenda

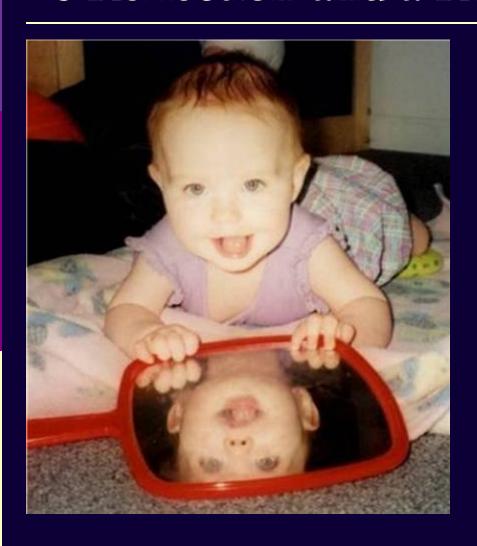
- There are numerous examples in the APA Report of studies with results suggesting no negative effects of abortion being reviewed less stringently than studies indicating adverse effects.
- The positive features of the studies suggesting abortion is a benign experience are highlighted while the positive features of the studies revealing adverse outcomes are downplayed or ignored.

Conclusion Derived Inappropriately

The APA Task Force concluded: "The best scientific evidence published indicates that among adult women who have an unplanned pregnancy the relative risk of mental health problems is no greater if they have a single elective first-trimester abortion than if they deliver that pregnancy."

This does not follow from the literature reviewed and it inappropriately rests on one study with many methodological flaws by Gilchrist et al. (1995) published in the U.K.

Is Reflection and a Retraction Possible?



With objection from researchers, professionals, and the public, perhaps the APA will take an honest look.

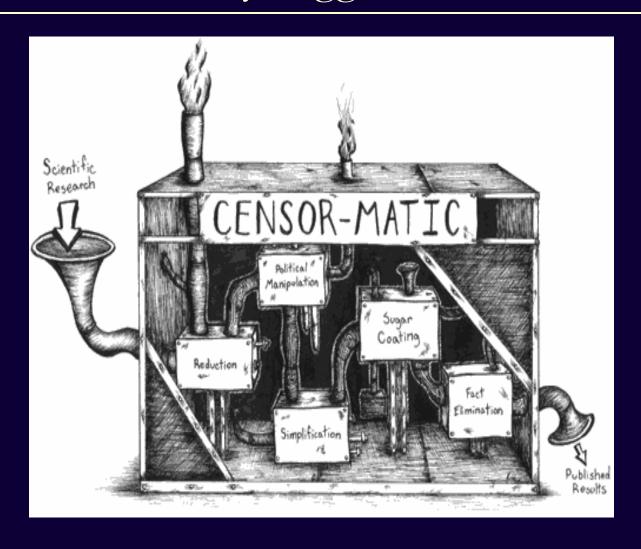
Sadly, history suggests just the opposite.....more concerted effort to distort and mislead in order to promote pro-choice ideology and insure the practice of abortion continues unhindered despite the enormous costs.

Truth in the Data

Despite their most ardent efforts to hide the truth, the APA can not put blindfolds on the women themselves who know all too well what abortion has done to their lives. Their pain cries loudly from honestly conducted research.



Let's turn now from the APA games to what the research actually suggests



Adverse Psychological Effects of Abortion: A Synopsis of the Literature



Adverse Psychological Effects of Abortion: A Synopsis of the Literature

Research indicates
20-30% of women
experience
adverse, prolonged
post-abortion
reactions.



Adverse Psychological Effects of Abortion: A Synopsis of the Literature

Latest research has many strengths:

- More longitudinal or prospective studies
- Larger, nationally representative samples
- Controls for prior mental health and other variables serving to equate abortion and no abortion groups
- Use of medical claims data
- Employment of unplanned pregnancy delivered as a comparison group

Adverse Psychological Effects of Abortion: A Synopsis of the Literature

These studies have clearly demonstrated that abortion significantly increases risk for depression, anxiety disorders, sleep problems, suicide ideation, suicide, and substance abuse.

Results of Recent Studies from Around the Globe



New Zealand



In 2006 Fergusson reported that women who aborted were at a significantly higher risk for mental health problems compared to those who delivered and were never pregnant. By age 25:

■ 42%: Major depression

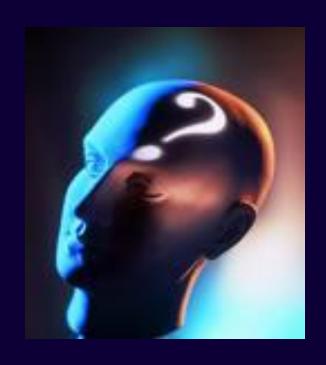
■ 39%: Anxiety

■ 27%: Suicidal ideation

• 6.8%: Alcohol dependence

New Zealand

In his article,
Fergusson challenged the
American Psychological
Association's conclusion
that: "Well-designed
studies of psychological
responses following
abortion have consistently
shown that risk of
psychological harm is low."



New Zealand

More recently, Fergusson published a longitudinal study in the *British Journal of Psychiatry* revealing the following increased risks associated with abortion:

- Suicide ideation: 61%
- Alcohol dependence: 188%
- □ Illicit drug dependence: 185%
- Major depression: 31%
- Anxiety Disorder: 113%

Australia

Published in the same issue of the *British*Journal of Psychiatry
was a study conducted by Australian researchers Dingle and colleagues.

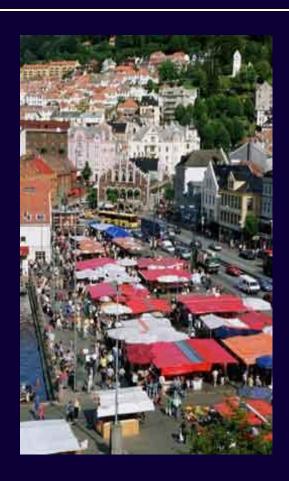


Australia

These authors reported that women with an abortion history had almost twice the risk for 12 month depression compared to women who did not report an abortion.

Abortion history was also associated with an almost 3 times greater risk of experiencing a lifetime illicit drug use disorder (not including marijuana) and twice the risk for an alcohol use disorder.

Norway: Pedersen



A Norwegian Sociologist, Willy Pedersen recently published two studies linking abortion to mental health problems.

Data for both studies was from the Young in Norway Longitudinal Study, which is nationally representative and includes over 700 respondents.

Norway: Pedersen

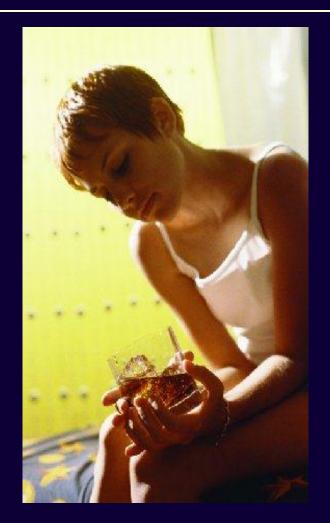
Women with an abortion history were nearly 3 times as likely as their peers without an abortion experience to report significant depression after the researcher controlled for parental education level, parental smoking habits, parental support, and prior history of depression.

Norway: Pedersen

Women who aborted had increased **risk of**

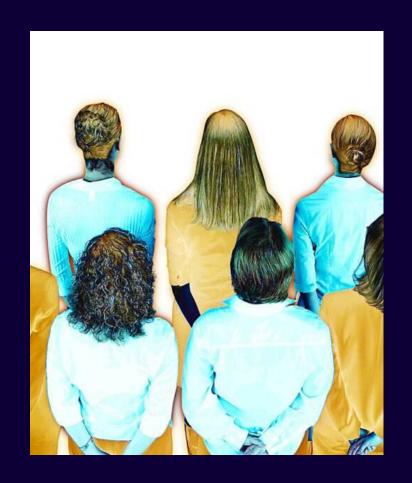
- Nicotine dependence: 400%
- □ Alcohol problems: 180%
- Marijuana use: 360%
- & other illegal drugs: 670%

after controlling for social background, parental and family history, smoking, alcohol and drug use, conduct problems, depression, schooling, and career variables.



United States: Coleman, Coyle, Shuping & Rue

We recently analyzed data from the *National Co-morbidity Survey*, which provides the most comprehensive epidemiological data on the prevalence of psychological disorders in the U.S.



United States: Coleman, Coyle, Shuping & Rue

Abortion made a significant contribution independent of 22 personal history and socio-demographic control variables to the following disorders. Increased risk estimates were from 44% to 167%.

- **Anxiety Disorders:** Panic Disorder, Panic Attacks, PTSD, Agoraphobia with Panic Disorder, Agoraphobia without Panic Disorder.
- **Substance Abuse Disorders:** Alcohol Abuse with or without Dependence, Alcohol Dependence, Drug Abuse with or without Dependence, and Drug Dependence.
- Mood Disorders: Bipolar Disorder and Major Depression.

United States: Coleman, Coyle, Shuping & Rue

$$PAF = \frac{p_e(RR-1)}{p_e(RR-1)+1}$$

PAF = the proportion of cases that would be prevented if the risk factor were eliminated.

 P_e = the estimated proportion of the population that is exposed to the risk factor of interest (i.e., prevalence expressed as a proportion).

RR = the relative risk estimate for the risk factor of interest ($RR \ge 1$) which represents the magnitude of the association between the risk factor and the disease. RR may be a risk ratio, a rate ratio, or an approximation of one of these two ratios, such as an odds ratio. Calculation of population attributable risks indicated that abortion was implicated in between 4.3% and 16.6% of the incidence of these disorders.

United States: Coleman, Coyle, Shuping & Rue

Abortion contributed significant **independent effects to many disorders** above and beyond that of other stressful life experiences including:

- frequent demands from relatives
- a history of miscarriage/stillbirth
- rape and abuse of various forms
- a life threatening accident
- difficulty paying bills
- health problems.

In fact, abortion made a significant independent contribution to more mental health outcomes than rape, sexual abuse in childhood, physical assault in adulthood, physical abuse in childhood, and neglect.

United States: Coleman, Maxey, Spence, and Nixon

This study was designed to identify **predictors of the choice to abort or deliver a child within 18 months of a previous birth** and to compare
mothers who chose to abort or deliver relative to
substance use and adverse partner behavior.

Study were examined. The sample included participants from 16 cities, and within the selected cities, hospitals with high rates of unmarried births were chosen.

United States: Coleman, Maxey, Spence, and Nixon

Several variables pertaining to the father's lack of commitment to raising a previously born child and to his relationship with the mother predicted the choice to abort.



United States: Coleman, Maxey, Spence, and Nixon

Further, a recent abortion was related to substance use (more than 3X greater risk of alcohol abuse and nearly 2X greater risk of smoking) and partner perpetrated physical aggression after the effects of confounding variables were removed.

Conclusion

Fergusson, Pedersen, Dingle, and others are representative of a new wave of international researchers who have the courage to publish objective, politically incorrect data, ushering in great hope that women's post-abortion suffering will eventually receive the professional attention deserved.



Conclusion



With the new administration, educational efforts will become more central to our efforts to protect women and children and it will become even more critical to disseminate accurate scientific information.