



MLCPC 208:

Post Abortion Syndrome:

Understanding Anxiety and Depression

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Abstract

This session will educate clients on the potential long-term impact of an abortion through the development of Post Abortion Stress Syndrome. The presenters discuss how to identify depression and anxiety in a post-abortive woman and how to create a safe place that invites her to share her story. Common prejudices toward women who have had abortions are also discussed, as well as the need for crisis pregnancy coaches' personal healing, if abortion is part of their past.

Learning Objectives

1. Participants will be able to identify the symptoms of Post Abortion Stress Syndrome.
2. Participants will learn the importance of their own personal healing and will be able to identify the ways in which they may seek healing prior to working with clients.
3. Participants will explore how to walk with a woman and process her abortion story in such a way that encourages self-forgiveness and healing.

I. Introduction to Post Abortion Stress Syndrome

- A.** There is great isolation and alienation around the issue of Post Abortion Syndrome. Women who are hurting often don't know where to turn.
- B.** Pregnancy coaches need to be equipped to minister hope and healing through God's Word and through a tangible program.
- C. Defining Post Abortion Syndrome**
 - 1.** It is the observation of symptoms of stress in persons who have been involved in an abortion.
 - 2.** It is not seen typically until 3-5 years or more following an abortion, but may also occur immediately.
 - 3.** It is a combination of stressors that occur following abortion including depression, anger, anxiety, and grief.

II. Recommendations for Crisis Pregnancy Coaches

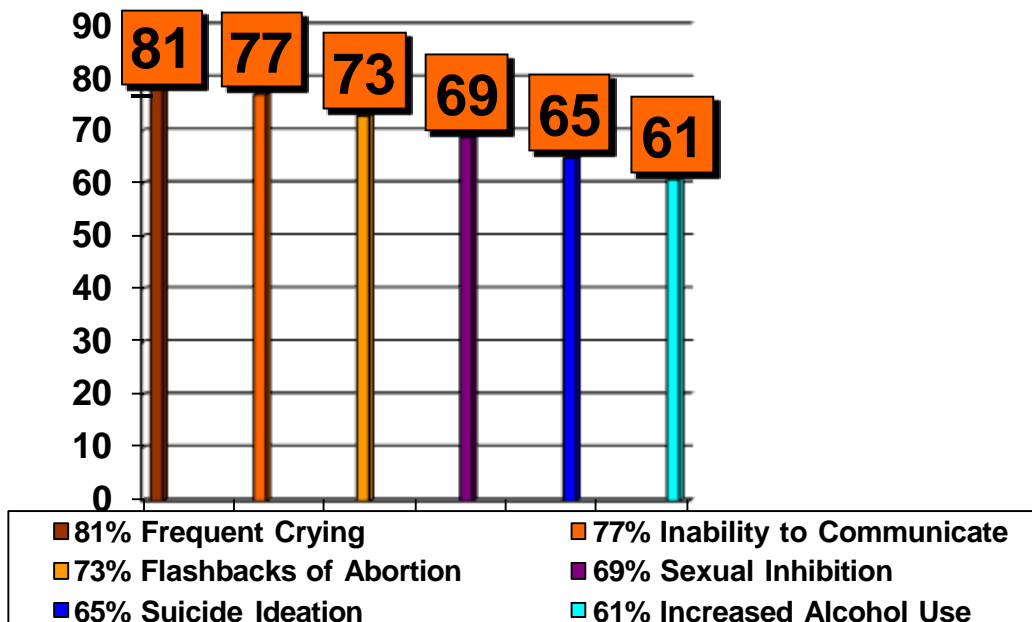
- A. Go Through Your Own Healing.** If you have had an abortion and want to help others, you have to go through healing yourself first.
- B. Examine Your Heart.** You may need to examine your heart to see if there's any prejudice there towards women who have had an abortion. Ask God to give you compassion. We all have prejudices. Take some time to identify your area of weakness:
 - 1.** Prejudice toward those who had an abortion as a Christian
 - 2.** Prejudice toward those who had more than one abortion
 - 3.** Prejudice toward those who had an abortion after marriage
 - 4.** Prejudice toward those who had a late-term abortion

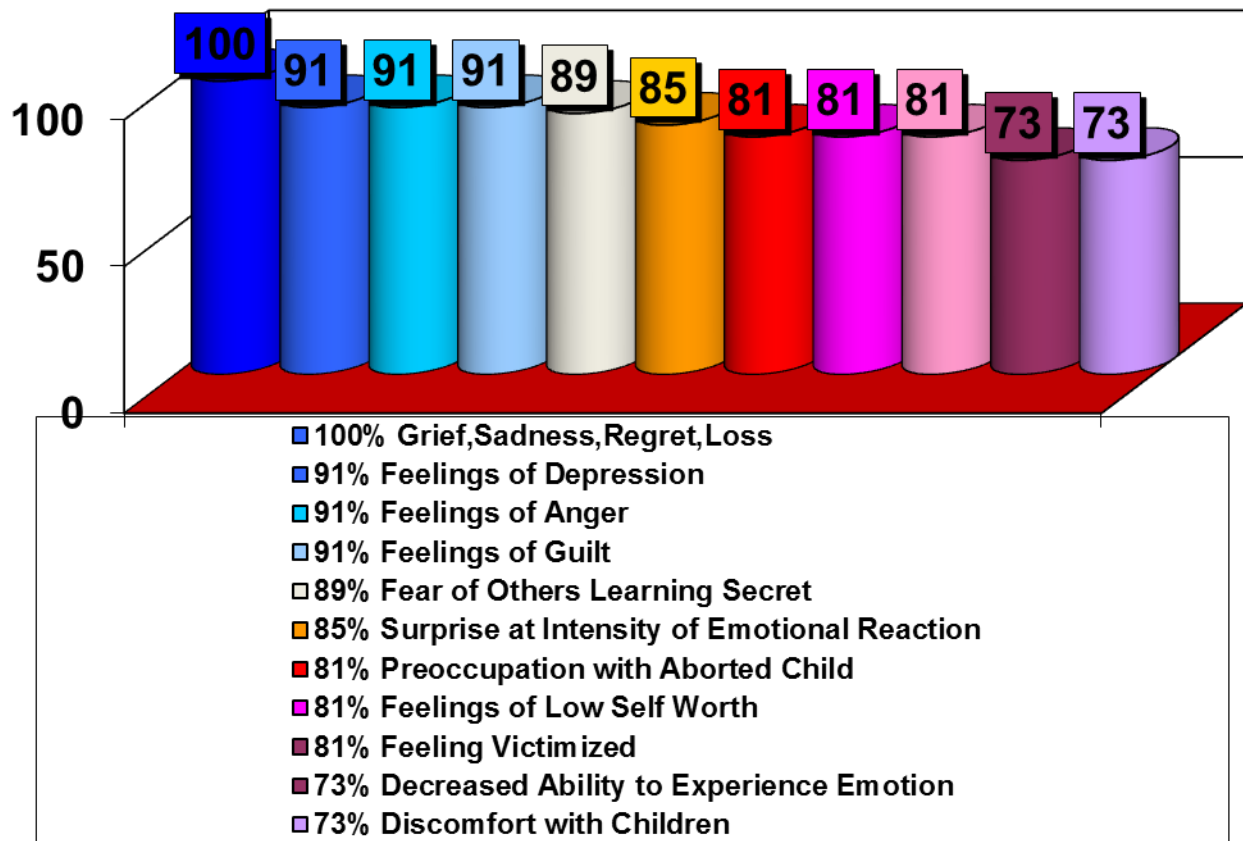
- C. **There's No Room for Judgment** in crisis pregnancy coaching. Anyone who wants to coach a post-abortive woman needs to be well-trained and prepared to offer genuine compassion, rather than prejudice.

III. Indicators of Post Abortion Stress:

Dr. Anne Speckhard, in a 1985 study of a non-representative sample of thirty women studied for their high stress responses to abortion, researched "long-term manifestations of abortion" (5-10 years), and found that 81% of mothers reported preoccupation with their aborted child, 54% had nightmares, 35% had perceived visitations with their child, and 96% felt their abortion had taken a human life.¹

This along with many other studies found PTSD responses in women who were specifically studied because they had suffered after their abortions. Not all women suffer to this extent and the best estimates of how many of all women having abortions develop post traumatic responses varies from expert to expert. Speckhard estimates that it is likely more than twenty percent of ALL women who have abortions, many prochoice researchers say it's less than a fraction of one percent and many pro-life researchers give quite high estimates.²





A. Top Indicators of Post Abortion Stress Syndrome

1. Frequent crying and grief reactions
2. Flashbacks of the abortion (similar to PTSD and reactions to other traumatic events)
 - Environmental triggers: Hospital visit, doctor's office, dentist's office
 - Emotional triggers: Sights, sounds, smells associated with the abortion
 - Experiential triggers: Baby showers, baby section at the grocery store
3. Reoccurring anxiety from unresolved grief and guilt
 - Hands shaking, sweating
 - Inability to focus or concentrate

4. The inability to find a place to go for healing
5. Anniversary reactions
 - Date of abortion, time when baby would have been born
 - Symptoms of illness, anxiety, depression
6. Other maladaptive behaviors
 - Increase in drug/alcohol use (pain reliever) when there seems nowhere to go with grief and guilt
 - Cutting behavior to numb the pain
7. Communication issues
8. Decision making difficulties
 - Preoccupied with the fear of making a wrong decision again
9. Romantic relationship difficulties
 - Great desire for intimacy, but afraid of becoming pregnant again
 - Extremes of running to relationships to numb the pain, but holding back emotionally out of fear
 - Inability to build a healthy relationship
10. Difficulty bonding with children
 - If a woman hasn't grieved the loss of her aborted child, it is often difficult to bond with a child who is present.
 - Some women become super-protective of their child, while others have a difficult time relating to their child at all. In both cases, women struggle to genuinely love because of crippling fear that something tragic will happen and they will lose this child as well.

11. Depression

- Usually lifts when grief and loss resolved and healing and forgiveness experienced
- Experience needs to be processed

IV. Crisis Pregnancy Coaches Create a Safe Place for Recovery

- A. Being able to talk about an abortion more freely is a good sign that healing is taking place. We overcome by the blood of the Lamb and the word of our testimony (Revelation 12:11). As you heal from a past abortion, God may direct you to share your story with a client.
- B. **Self-disclosure:** If a crisis pregnancy coach has been through her own personal healing and has made a safe place for the client, it is okay to share. **Not compulsively, but when you feel God's prompting.** And not of your own need for healing. It's not your session. It's the client's session.
- C. **The question,** "Would you like to talk with someone who's been through an abortion?" is a good door-opener to assess the client's openness and interest in hearing your story.
- D. **What makes crisis pregnancy coaching a safe place?**
1. *Be welcoming.* This will look different in different places, but avoid being baby-focused in the way you decorate your center. Be woman-focused and beauty-focused. Choose artwork and lighting strategically.
 2. *Be private and confidential.* The room where you meet with your client should be quiet, comfortable, and softly lit. Avoid florescent lights. Always have a door that

closes. The hallway outside should not be a high-traffic area. And, of course, you shouldn't be interrupted during your session.

3. *Be warm.* Introduce yourself. Offer your hand. Make eye contact. Communicate through your body language, facial expressions, and posture that you genuinely care about this woman and her story.

V. Implications of Untreated Depression

- A. Studies have shown that untreated, unresolved depression can lead to suicidal thoughts and suicidal actions.
- B. As a crisis pregnancy coach, you can help give clients hope and provide a safe environment for them to work through their trauma.
- C. Many women want to commit suicide "so I can be with my baby in heaven." Two common reactions include:
 1. Fear that "my child will hate me because I aborted him/her" OR
 2. A strong desire to "get to heaven to re-unite with my child"
- D. Often develops 3-5 years after the abortion
 1. Immediate feelings are often relief. Abortion is often viewed as a "quick fix." Whatever drove a woman to get the abortion is now over.
 2. Onset of depression depends on the woman. Sometimes, women feel grief and guilt immediately, but for most, these symptoms are insidious and slow to follow.

E. Future pregnancy as a trigger for depression

1. Being pregnant again often brings up the experience of past abortion.
2. Many women rationalize, “This is going to be the pregnancy I always wanted,” but still thoughts of the past often come up, because brokenness begs for healing.
3. Some women seek out help because they want to come to peace with the abortion before they have a new baby.

F. Embracing the healing journey

1. Many women believe if they have an abortion they will erase and eliminate the pregnancy—and never have to face it again. Yet, the memory and impact of the abortion lasts for years and years.
2. God will heal and bring a woman to peace with it, but there is always the looking forward to the future, longing to be reunited. You never forget, but there’s a peace, that Jesus is taking care of those children and He has helped us come to terms with the guilt and sorrow.

VI. Impact of Unresolved Guilt

When guilt goes underground and is not acknowledged, how does that show up in women’s psychological health?

- A.** Many counselors see post-abortive men and women in their offices who come in for eating disorders, emotional disorders, marriage difficulties, etc. While this may be their presenting problem, the underlying root is unresolved grief and guilt from an abortion.
- B.** What to include as part of the intake:
1. Pregnancy history
 2. Pregnancy losses
 3. Difficulties with pregnancies

Note: If the client leaves these lines blank, ask about it.

C. Talking about a past abortion

1. Remember that the fear of revealing you've had an abortion (or more than one) is usually very great. Probe a little bit, compassionately and gently.
2. A good way to approach the topic is, "I really want to make sure we address everything that is going on, so that you can come to a place where you have full emotional health."
3. Once trust has developed, ask if there has been an abortion in the past.

D. Why do women have a hard time admitting to multiple abortions?

1. When abortion became legal, it was viewed as an escape route for those who made a mistake. But there's an underlying judgment if you make that mistake again.
2. Women judge themselves, and in our culture the judgment is "Why didn't you use birth control?" or "What's wrong with you that your birth control failed?"
3. In God's kingdom, women feel the judgment of having sinned by having sex outside of the marriage relationship that God ordained for sexual intimacy.

VII. Coaching Men Affected by Abortion

A. Understand that men need physical activity in order to open up.

1. Men need "a pool table in between their healing." Men need healing also, but they process it somewhat differently. Women relieve their heartache and stress by talking, but men need something to act it out with.
2. Men's retreats that involve an activity (like fishing or camping) are often very effective in creating an environment where men feel safe enough to open up and share.

B. Acknowledge the damage to a man's masculinity

1. Because God created men to be providers and protectors, these two areas are damaged.
2. Today's culture is full of men who have been damaged in their ability to provide for their families. They've lost hope in their masculinity.

C. Look at the deeper anger issues

1. Men are often very physical in their anger.
2. Sometimes domestic violence is untreated post-abortion pain.

D. Resources for men

Healing a Father's Heart: A Post-Abortion Bible Study for Men, Linda Cochrane and Kathy Jones, Baker Book House Co., PO Box 6287, Grand Rapids, MI 49561-6287.

Men and Abortion – A Path to Healing, Catherine T. Coyle, Ph.D., Life Cycle Books, PO Box 420, Lewiston, NY 14092-0420, (800)214-5849, orders@lifecyclebooks.com.

Forgotten Fathers, Vincent Rue, Life Cycle Books, PO Box 420, Lewiston, NY 14092-0420, (800)214-5849, orders@lifecyclebooks.com.

VIII. The Counseling Profession's Response

Do professional counselors usually acknowledge the impact of abortion on their clients?

- A.** It's happening, but there needs to be more. This issue is becoming more recognized in the Christian counseling experience, and some schools/universities are becoming involved.

- B. The goal is to have referrals to Centers from local counselors who are working with clients struggling with eating disorders, relationship issues, unresolved depression and also have a history of abortion.
- C. The point of view of the counselor plays an important role. If he/she is open to understanding the true impact of abortion, they are more likely to refer their client to a Center for additional help.
- D. Many people fear talking about abortion because they think it may communicate judgment that pushes the client away. *But asking about a woman's history offers her the opportunity to tell her story. You may be the very first person she has ever told.* This is such a privilege!
- E. Centers should make sure to contact counselors in their area, let them know the services they offer, and that they're open to referrals. *Make sure to clarify that this doesn't mean you are trying to take a client away! You're offering additional help to focus on this area of need.*
- F. Scientific studies help underscore the need for treatment of Post Abortion Stress Syndrome
 - 1. Priscilla Coleman: Meta-analysis of all studies to date (complete list of published articles at <http://www.bgsu.edu/colleges/edhd/directory/fcs/page57559.html>)
 - 2. David Reardon: The Elliot Institute (www.afterabortion.org)
 - 3. Many forthcoming dissertations

IX. Working with Post-abortive and Abortion-minded Clients

A. How to process trauma as a crisis pregnancy coach

1. When a woman comes to you hurting, invite her to tell and re-tell her story and encourage her along the way.
2. Give her freedom to experience emotions and cry without shame.
3. As a part of restitution and healing, women often want to speak out and share their testimonies publicly. (See organizations such as Silent No More and Operation Outcry)

B. How to help a woman who does not want a Bible study

1. There still is hope and healing in relationship. We know that the Word of God heals, but the process of building trust in the relationship also starts the process of healing.
2. Meet with the client one-on-one and invite her to tell her story.
3. Help her put a name to what she's feeling.
4. Let her process the emotions and be a safe place.
5. When appropriate, incorporate the principles from *Forgiven and Set Free*.

C. How to help an abortion-minded client

1. Slow down the process and help the woman move past the panicky feeling of "I have to do this right now!"
2. Encourage her to take the time to look at all her options and all her circumstances and make a rational decision.
3. Encourage her to make the decision based on the facts, not emotions.

D. How to help a woman in her relationship with her parents

1. If a client didn't tell her parents about the abortion, the experience separates her and creates a wall. Part of healing is often going to the parents, sharing what happened and asking forgiveness. This opens the door for reconciliation.
2. The greatest pressure is often the real or perceived pressure from someone else saying that the woman must abort. Even women who haven't told their parents about being pregnant usually think their parents want them to have an abortion.
3. If you are speaking with an abortion-minded client, **encourage her to go to all the support people in her life and share that she is pregnant.** This prevents secrecy, which starts the roots of depression, guilt, grief, shame, rage, anger, etc. that can linger on for years.
4. When a woman does tell her parents, and her parents encourage her to have an abortion, this will affect the healing process. She will often have to work through anger and unforgiveness if she felt like she had no choice.

X. Compelling Stories and Life Application

A. Story 1: Girl who was raped

1. Many people oppose abortion in general, but when it comes to the issue of rape/incest, they feel that's a dividing line. They don't acknowledge the fact that regardless of how the pregnancy began, it is traumatizing to the woman to have an abortion, and therefore is not a solution.
2. Abortion after rape/incest is trauma upon trauma. Children are a blessing from the Lord and within that blessing there is healing.

B. Story 2: Woman who had multiple abortions

1. We must always remember to ask about previous abortions when a woman comes in for a pregnancy test. Do not shy away from it. After you have been through your own healing and examined your own heart, provide a safe place for the client to tell her story and process.

2. A good starting point might be, “How did you feel after your abortion?” Many women will be resistant and say, “It was fine.” You can go on and share that, “A lot of women experience difficulty afterwards—nobody wants to go through abortion, and usually there’s a lot of hard decisions surrounding it. How many weeks were you? Where did you go?” Draw your client out and give her an opportunity to talk.
3. Many women feel discomfort with sharing that they’re hurting because they’ve always heard that abortion is safe and legal. This is an opportunity to present the Lord’s healing and forgiveness.
4. It’s very important for coaches to remember that they have to be willing to acknowledge that abortion IS an option that people have. It is a choice they can legally make. **So we can’t be afraid to bring it up or talk about it.** We need to talk with women and fully prepare them for the possible consequences. If we shut ourselves down and don’t address them, we are more likely to nudge a woman into a defensive position where she will seek an abortion instead of being able to honestly look at all her options.
5. Often, women have a hard time even saying the word “abortion.” Gently respond with, “If you choose an abortion this is what you’re looking at.” They need to come to grips with knowing that if they get an abortion, they will be saying, “I chose an abortion.”

XI. Conclusion

- A. Abortion was enacted in law “to give freedom and power to women,” but it is in fact affecting them in a negative manner and causing greater stress to women throughout the country.
- B. Many women feel as if they are being disloyal to the pro-choice movement if they talk about how much it hurts and they don’t think pro-life movement will accept them.

- C. We have to be very vocal that **“we offer compassionate help to those who’ve chosen abortion.”** We must be very pro-active in making that part of our services. Many pro-choice people are hurt after an abortion but have nowhere to go.
- D. Many counselors have difficulty acknowledging and recognizing the impact of abortion. As crisis pregnancy coaches, we need to acknowledge, “This hurt you because you lost a child.” This kind of dialogue gives a woman permission to grieve her loss—because she has indeed lost something.

XII. Post-Abortion Resources

Books:

Forgiven and Set Free, Linda Cochrane, Baker Book House Co., PO Box 6287, Grand Rapids, MI 49561-6287.

The Path to Sexual Healing: A Biblical Study, Linda Cochrane, Baker Book House Co., PO Box 6287, Grand Rapids, MI 49561-6287.

Healing a Father’s Heart: A Post-Abortion Bible Study for Men, Linda Cochrane and Kathy Jones, Baker Book House Co., PO Box 6287, Grand Rapids, MI 49561-6287.

A Time to Heal, Linda Cochrane, Susan V. Fitch, Valley Publishing. Available from Care Net Care Net, 109 Carpenter Drive #100, Sterling, VA 20164, (703) 478-5661, www.care-net.org.

Her Choice to Heal: Finding Spiritual and Emotional Peace after Abortion, Sydna Masse and Joan Phillips, Ramah International, Inc., 1776 Hudson St., Englewood, FL 34223, (941)573-2188, www.ramahinternational.org.

I'll Hold You in Heaven, Jack Hayford, Life Cycle Books, PO Box 420, Lewiston, NY 14092, (800)214-5849.

Aborted Women, Silent No More, David Reardon, The Elliot Institute, PO Box 7348, Springfield, IL 62791, (217)525-8202, dave12@famvid.com.

Forbidden Grief: The Unspoken Pain of Abortion, Theresa Burke and David C. Reardon, Acorn Books, April 2002.

Men and Abortion – A Path to Healing, Catherine T. Coyle, Ph.D., Life Cycle Books, PO Box 420, Lewiston, NY 14092-0420, (800)214-5849, orders@lifecyclebooks.com.

Booklets/Brochures:

“National Memorial for the Unborn,” National Memorial for the Unborn, Ann Swafford, Director, 6230 Vance Rd., Chattanooga, TN 37421, (800)505-5565.

“When Pain Won’t Go Away: Dealing with the Aftereffects of Abortion,” Tim Jackson, RBC Ministries, PO Box 2222, Grand Rapids, MI 49555-0001, www.gospelcom.net/rbc/ms.

“Hope and Healing: When Someone You Know Has Had an Abortion,” Life Cycle Books, PO Box 420, Lewiston, NY 14092-0420, (800)214-5849, orders@lifecyclebooks.com.

“Forgotten Fathers,” Vincent Rue, Life Cycle Books, PO Box 420, Lewiston, NY 14092-0420, (800)214-5849, orders@lifecyclebooks.com.

Research and Networking Organizations:

Elliot Institute

David C. Reardon, Director

PO Box 7348

Springfield, IL 62-91-7348

(217)525-8202

www.afterabortion.org

Abortion Recovery International Network

5319 University Drive #252

Irvine, CA 92612

(949)378-5149

www.abortionrecoverynetwork.org

info@abortionrecoverynetwork.org

Websites:

Post Abortion Referrals – www.abortionchangesyou.org

Abortion Facts – <http://www.abortionfacts.com>

After Abortion (Elliot Institute) – www.afterabortion.org

Care Net – www.care-net.org

Heartbeat International – www.heartbeatinternational.org

Post-Abortion Chat Room – www.safehavenministries.com

Ramah International – <http://www.ramahinternational.org>

Silent No More – <http://www.silentnomoreawareness.org>

Endnotes

¹Anne Speckhard, *Psycho-social Stress Following Abortion* (Kansas City, MO.: Sheed & Ward, 1987).

²*Ibid.*