



Congress Should Not Legitimize the Mythical “Post-Abortion Syndrome”

Anti-choice activists have long hoped for scientific support that abortion causes a range of negative effects on women who choose this reproductive option – from increased rates of breast cancer to higher rates of depression, even to a supposed “link” with alcoholism. In recent years, anti-choice lawmakers have increased efforts to lend unmerited credence to “post-abortion syndrome,” a supposed psychological phenomenon that has never been shown to exist by any legitimate scientific or medical study. In fact, the claims have been *disproven* by a long line of credible, scientific research.

Expert Medical and Health Organizations Have Studied the Issue, and Found No Evidence of a “Post-Abortion Syndrome”

In 1987, President Reagan directed Surgeon General C. Everett Koop to study the health effects of abortion on women. Dr. Koop reviewed some 250 studies on the subject. Despite powerful political pressure to support the existence of such a syndrome, as well as his own personal anti-choice beliefs, Dr. Koop concluded that “the data do not support the premise that abortion does or does not cause or contribute to psychological problems.”¹

Since then, the American Psychological Association, the Journal of the American Medical Association, and other groups with medical and health expertise have investigated the alleged existence of “post-abortion stress” or “post-abortion trauma.” None has found it to exist. For example, a 1997 study published in *Professional Psychology: Research and Practice* found that abortion has no effect on women’s psychological well-being over time.² A 2000 study published in the *Archives of General Psychiatry* concurred, finding that few women experience psychological problems two years after having chosen abortion, and those who do tend to have a prior history of depression.³

Further, the American Psychiatric Association’s *DSM-IV*, the definitive manual of mental illnesses and psychological phenomena, does not recognize “post-abortion trauma” or any related category as an identifiable mental-health condition.⁴ And, in 2008, after a two-year review of the “best scientific evidence published,” the American Psychological Association’s Task Force on Mental Health and Abortion found that a woman who chooses abortion is at no greater risk for mental-health problems than if she chooses to carry an unintended pregnancy to term.⁵ In considering the psychological implications of abortion, the task force recognized that women face complex and diverse circumstances when making decisions about their reproductive health, which may lead to variability in women’s psychological reactions. Interestingly, the task force also found that societal stigma, need for secrecy, and low or anticipated social support for the decision – all tactics undertaken by the anti-choice movement – may contribute to negative psychological responses in women who choose abortion.

Congress Should Allow Scientific and Medical Experts to Determine How to Research This Issue

In the National Institutes of Health, the United States has the world's foremost medical-research agency and scientists. One of the reasons our medical-research system works so well is that it is directed by *scientific* expertise and promise, not political favor or influence. Politics should never dictate the outcome of a scientific study, but this unfortunately would be the result of any legislative proposals that presuppose the existence of a syndrome no one has ever shown to exist.

Moreover, measures to influence scientific research are designed also to put Congress on the record as formally "endorsing" the existence of this alleged "syndrome." For example, immediately after the Senate adopted language offered by then-Sen. Bob Smith (R-NH) in 2001 that urged the NIH to study "post-abortion depression and abortion psychosis,"⁶ anti-choice groups trumpeted the move: "Senate recognizes post-abortion syndrome."⁷ Another calls the amendment significant as "the first federal recognition [of]... a genuine, medically recognized depression."⁸

Legitimate, Objective Research Concerning the Effects of Women's Reproductive Lives on Their Mental Health is Appropriate and Should Be Funded

The effects of reproductive-health choices on both men and women's mental health warrant serious and thorough scientific research. If Congress is genuinely interested in encouraging research in this area, lawmakers should work with the scientific establishment to set up parameters that encompass the full range of reproductive issues Americans face today, rather than giving unfounded directives solely to further a specific ideological agenda. As Dr. Koop said in his 1989 letter to President Reagan, an appropriate study "should include the psychological effects of failure to conceive, as well as the physical and mental sequelae of pregnancy."⁹ Such research, structured as Dr. Koop proposed, could be fairly and objectively conducted, and would undoubtedly benefit countless men and women – in stark contrast to language anti-choice lawmakers have tried unsuccessfully to enact into law.

Despite the Lack of Any Credible Scientific Evidence Supporting "Post-Abortion Syndrome," Anti-Choice Activists Remain Undaunted in Their Pursuit for its Recognition

Lawmakers have pursued a number of legislative avenues to promote misinformation about "post-abortion syndrome." As mentioned above, anti-choice then-Sen. Smith inserted a non-binding resolution into the FY'02 Labor, Health and Human Services and Education funding bill, urging the National Institutes of Health to research "post-abortion depression and post-abortion psychosis."¹⁰ The provision was later dropped, but has continued to surface as free-standing bill – most recently H.R.1457, sponsored by anti-choice Rep. Joe Pitts (R-PA).¹¹

In 2004, anti-choice lawmakers in both the House and Senate held hearings where they coupled the mythical “post-abortion syndrome” with post-partum depression, a very real illness that deserves serious attention. Again in 2007, anti-choice lawmakers invited witnesses to discuss the unproven “post-abortion syndrome” at a hearing specifically designed to highlight the devastating effects of post-partum depression.

More troubling, the U.S. Supreme Court, in its closely divided 5-4 ruling in *Gonzales v. Carhart* upholding the first-ever federal ban on an abortion method, ventured into this topic.¹² Oddly, the majority opinion acknowledged the lack of *any* scientific support for “post-abortion syndrome” while seemingly giving the mythical syndrome some credence.¹³ In an inflammatory and scientifically unsupportable statement, Justice Kennedy’s majority opinion said “[w]hile we find no reliable data to measure the phenomenon, it seems unexceptionable to conclude some women come to regret their choice to abort the infant life they once created and sustained.”¹⁴

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Notes

¹ Memorandum from C. Everett Koop, M.D., Sc.D., Surgeon General, U.S.P.H.S., to Ronald Reagan, President of the United States (January 9, 1989) (on file at NARAL Pro-Choice America).

² Russo, Nancy Felipe & Amy J. Dabul, *The Relationship of Abortion to Well-Being: Do Race and Religion Make a Difference?*, 28 PROFESSIONAL PSYCHOLOGY: RESEARCH AND PRACTICE 23-31 n. 1 (1997).

³ Brenda Major, et al., *Psychological Responses of Women After First-Trimester Abortion*, 57 ARCHIVES OF GENERAL PSYCHIATRY 193-4 n. 8 (2000).

⁴ AMERICAN PSYCHIATRIC ASSOCIATION, DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS, FOURTH EDITION, TEXT REVISION (DS-IV-TR) (2000).

⁵ American Psychological Association Task Force on Mental Health and Abortion, *Report of the APA Task Force on Mental Health and Abortion* at www.apa.org/releases/abortion-report.pdf (last visited Nov. 10, 2008).

⁶ H.R.3061, EAS 107th Cong. (2001)

⁷ MiVille, Charles R., *Senate Recognizes Post-Abortion Syndrome*, Family News: In Focus, Nov. 12, 2001.

⁸ Lopez, Kathryn Jean, *Looking Beyond Choice: The Senate passes an important, if overlooked, amendment*, National Review Online (Nov. 7, 2001).

⁹ Memorandum from C. Everett Koop, M.D., Sc.D., Surgeon General, U.S.P.H.S., to Ronald Reagan, President of the United States (January 9, 1989) (on file at NARAL Pro-Choice America).

¹⁰ H.R.3061, EAS 107th Cong. (2001).

¹¹ H.R.1457, 110th Cong. (2007).

¹² *Gonzales v. Carhart and Gonzales v. Planned Parenthood Federation of America*, 127 S. Ct. 1610 (2007).

¹³ *Carhart/PPFA*, 127 S.Ct. at 1634.

¹⁴ *Carhart/PPFA*, 127 S.Ct. at 1634.