

HEALING POST-ABORTION TRAUMA

Susan Stanford-Rue

This is an image we would all identify as a picture of "motherhood." It is a woman holding a child. What are the first three words that come to your mind? There are many which might surface: nurturer, giver of life, defender, caring, loving, protector, encourager, taking responsibility.... Almost all are words of nurturance. It is my belief, strongly backed by my practice, that we now live in what Pope John Paul II calls "a culture of death," one that constantly gives conflictual messages about even so basic a factor in human life as motherhood. Instead of those nurturing images of motherhood, women are given a perversely manipulated image by being told that "Motherhood must be a matter of choice and abortion is a choice. The use of our bodies must be a matter of our choice." In my practice, this conflictual message produces great ramifications, far beyond the event of the abortion. This is true for women who have had an abortion in high school or college, before marriage, but later want children when married. But it is also true for those who have unplanned children during marriage and want to go back to raising the children they already have.

My message is that the ramifications of these abortions are greater and more long lasting than the event itself. They persist for five years, for ten, for fifteen, for twenty. In my current practice I am working with a woman who had an abortion thirty years ago, and yet just recently she shared something with me she had never told anyone else all her life.

Let me speak about theory first. Then I'll supply some anecdotal stories to convey an understanding about just how conflictual a message is being given to women in

our society. On the one hand they are to be nurturers but on the other hand it is acceptable to take the life of your unborn child.

FIGURE 1
POST ABORTION SYNDROME: DIAGNOSTIC CRITERIAⁱ

A. *Stressor*: The abortion experience, i.e., the intentional destruction of one's unborn child, is sufficiently traumatic and beyond the range of usual human experience so as to cause significant symptoms of re-experience, avoidance, and impacted grieving.

B. *Re-experience*: The abortion trauma is re-experienced in one of the following ways:

1. recurrent and intrusive distressing recollections of the abortion experience
2. recurrent distressing dreams of the abortion of the unborn child (e.g., baby dreams or fetal fantasies)
3. sudden acting or feeling as if the abortion were recurring (including reliving the experience, illusions, hallucinations, and dissociative [flashback] episodes including upon awakening or when intoxicated)
4. intense psychological distress at exposure to events that symbolize or resemble the abortion experience (e.g., clinics, pregnant mothers, subsequent pregnancies)
5. anniversary reactions of intense grieving and/or depression on subsequent anniversary dates of the abortion or on the projected due date of the aborted child

C. *Avoidance*: Persistent avoidance of stimuli associated with the abortion trauma or numbing of general responsiveness (not present before the abortion), as indicated by at least three of the following:

1. efforts to avoid or deny thoughts or feelings associated with the abortion
2. efforts to avoid activities, situations, or information that might arouse recollections of the abortion
3. inability to recall the abortion experience or an important aspect of the abortion (psychogenic amnesia)
4. markedly diminished interest in significant activities

5. feeling of detachment or estrangement from others
6. withdrawal in relationships and/or reduced communication
7. restricted range of affect, e.g., unable to have loving or tender feelings
8. sense of foreshortened future, e.g., does not expect to have a career, marriage, or children, or a long life

D. *Associated Features*: Persistent symptoms (not present before the abortion), as indicated by at least two of the following:

1. difficulty falling or staying asleep
2. irritability or outbursts of anger
3. difficulty concentrating
4. hypervigilance
5. exaggerated startle response to intrusive recollections or re-experiencing of the abortion trauma
6. physiologic reactivity upon exposure to events or situations that symbolize or resemble an aspect of the abortion (e.g., breaking out in a profuse sweat upon a pelvic examination or hearing vacuum pump sounds)
7. depression and suicidal ideation
8. guilt about surviving when one's unborn child did not
9. self devaluation and/or an inability to forgive one's self
10. secondary substance abuse

E. *Course*: Duration of the disturbance (symptoms in B, C, and D) of more than one month's duration, or onset may be delayed (greater than six months after the abortion)

The above chart depicts the various symptomatic aspects of Post-Traumatic Stress Disorder (hereafter PTSD). It was only in 1980 that the American Psychiatric Association recognized the trauma Vietnam veterans were chronically suffering and diagnosed it as PTSD. One of the most unhappy aspects of PTSD is the intrusive re-experiencing of traumatic memories.

In the case of post-abortion women, many of the women suffer from this same type of intrusive re-experiencing of memories of their abortion. These painful and sometimes horrific memories are part of their on-going trauma.

Many women try to "cope" with these intrusive

memories by not feeling them. Avoiding their painful feelings at all costs becomes a persistent goal. For some women this manifests itself by becoming workaholics; they keep themselves so busy that they do not have time to feel anything. Some women find they need several drinks at night to unwind. Still others find "help" by asking their doctors for more tranquilizers to help their chronic anxiety. And some turn to illegal drugs to escape their pain or self-hatred.

Unfortunately, what many people do not recognize is that all abortion is a death experience, and all death experiences need to be grieved and mourned. Women frequently complain of feelings of sadness, guilt, and shame. Abortion can cause tremendous shame and guilt. The memory of the event, if not properly grieved, acts as a "pus-pocket" inside the psyche. We can never get free of it. It is always lingering there in the background. We can try to run from it psychologically in many ways, but it is always there ungrieved, needing to be addressed.

If the abortion experience remains ungrieved and unhealed, a woman will have a sense of "re-experiencing" the abortion in any number of ways: a recollection or memory may come to her while at work or driving down the street. During sleep she may have nightmares or fetal dreams that recur. Such re-experiencings could be triggered by an unexpected resemblance, e.g., a suction-machine like a vacuum-cleaner, or a person who resembles the doctor or nurse from the abortion. Anniversary dates of the abortion or the would-be due date can be another trigger.

In my practice I am currently seeing a woman who presented her concern as one of thinking about changing careers, but in the course of taking an inventory of her history, it came out that she had had two abortions. I asked, "Do you feel resolved with these

or need to work some things out?" She cut me off abruptly, "I don't want to talk about it." I noted that she had unresolved issues. One day two months into our work she came in very angry and upset. When I asked why she was so upset, she answered, "It's the anniversary of my second abortion.... Maybe I do need to talk about it." She had no faith-experience to help her deal with the abortion. Apparently the anniversary always triggered a flashback she had just tried to run from.

It is very common for women to want to avoid these painful feelings. The problem is that they will not be resolved on their own. Feelings that are repressed over a long time can become a serious problem. Our defense-mechanisms work well in the short run, but they can become extremely dysfunctional in the long run. We can become very conflicted and torn. We just can't deny our sad and painful feelings across the spectrum. In fact, someone who tries to deny her feelings will "feel" less and less, even about day-to-day matters. She will have less interest in daily life and even feel "frozen" or just shut down. This is true of all grief experiences that have not been mourned. Ungrieved loss can become a slippery slope. She can eventually slide into a deep depression. Some may reach out to get help. But others think of getting out of life, i.e., suicidal attempts. Many women, however, seek no help and even take a stab at suicide. Some are found after their attempts and may finally get help then.

One aborted woman I have known had repressed her grief for an extremely prolonged time and suffered some horrific experiences as a result. She lived a very fast life-style. She was a professional skier and had had five abortions. She "coped" by using lots of recreational drugs. And she kept running from her

feelings. But she had a persistent, repetitive nightmare.

She dreamt of a tree with many branches, and on each branch was a fetus without limbs. Finally, unable to deny this horrific dream and act normally, she had to stop running from her grief. She had been suppressing the pain and the sadness. Like the Vietnam veterans after the war, she experienced a kind of "survivor guilt."

We have heard many Vietnam survivors report the feeling "How come I lived when my buddy died? Could I have done more to save him?" When my client began to deal with her feelings, she felt excruciating guilt that she was alive but her "babies" were all dead.

Today even Planned Parenthood acknowledges that some women have grief from their abortions. So many clients I have seen ask, "How come they never warned me that I would have to deal with these feelings? I have so much sadness. Much more than I ever expected. Even more than I know how to deal with." For most women grief takes at least a year to get over, sometimes more. Even in a crisis pregnancy they have lost a loved one. Our society acts as if they should simply make a decision and get on with their lives. But it is not that simple. Abortion's aftermath is very conflictual, and the woman persists in great pain and sadness that is not dealt with. So she goes through the next weeks and months often very unhappy. She may in fact be relieved from her immediate pregnancy crisis, but there is no one there to help her deal with this loss. Many women will tell no one, or just one person in their whole lives. They tend to cry alone, or use drugs alone.

They try to live with the pain alone. When they come into our office, they only want to know how to live with the pain. Many feel they do not deserve to be healed. Sadly, our society does nothing to prepare women for this tragic grief. The abortion industry certainly does nothing, and the print and television media never report

stories on a woman's need to grieve her abortion. Just a few stories in the media would give permission for thousands of women to seek help.

Let me share a couple of other examples from my practice of the conflictual message about motherhood and abortion and its consequent repercussions long afterwards. My first example is Jeannie (not her real name), now aged 40, who had an abortion during her sophomore year of college. She had been raised a Catholic. She told no one except her boyfriend about her decision to abort, and she promised herself that "no one will ever know." She went to New York for the abortion. She now "feels frozen" and remembers only the whirlwind of that time. There was no discussion of the risks, no help to deal with the grief. She remembers the abortion as painful, including the doctor yelling at her, "You'll hurt your kidneys if you don't stay still." In the recovery room she made a vow: never to let anyone get too close to her. Her husband knows the history, but she told no women friends. She had had a very successful career in real estate. Six years ago, at age 34, she decided to get pregnant. At first she had much difficulty in doing so but now has a little girl and stays at home with her. Her motherhood has been much affected by her abortion. She is utterly unsure of herself as a mother. She is always second-guessing herself. How odd this seems, given her prior successful career in a business with complicated negotiations and her experience of dealing with "all kinds of people." We have spent so many sessions on simple, small decisions. Today her daughter is very strong-willed and tests her mother all the time.

Jeannie had postponed motherhood for so long because she was so unsure of herself in this area. She began counseling by "presenting" issues about her child, but eventually she told me about her abortion.

She has not begun the grieving process for that child. It is indicative of how far the shame goes that recently she let a woman friend into her life, but only so far! Jeannie told me she wanted to refer this friend to me for counselling when the friend had asked whom she was seeing. But she couldn't bear to tell her my name because she couldn't stand the idea that someone she knew would talk to someone else who knew her story, and all my explanations of how entirely privileged and confidential such information always is made no difference to her. She still has a long way to go to forgive herself and be set free from her shame.

The next example is Lee, who had an abortion six months ago. She is now 36, the mother of two children, one ten, one seven. It is a very complicated story. Faith is not a strong part of her life. She was raised a Catholic but has been lukewarm with respect to religion in her life. She couldn't decide about whether to have a third child, so she started praying "If it be God's will." Her husband seemed satisfied with two children. She had had an abortion during her freshman year in college and said that it took her four years "to get over it." She had always said to herself, "I'll never do that again."

Unexpectedly she found herself pregnant after an occasion of unprotected sex. Initially she felt a sense of joy, that her prayers had been answered. Her husband seemed pleased and kissed her when she said to him one morning as he headed off to work that she had a hunch she was pregnant. Then her panic set in: "I don't know if I'm ready to do this again. Can I handle a little baby again?" When asked for counsel, her physician would give her no more help than to say "It's your choice." In her panic she asked her husband, "You have to tell me if it's okay to have an abortion." He vacillated, and further panic set in for her. They were

strained financially, but not at a breaking-point. In her panic she made an appointment for an abortion. When she came home, she went to bed and slept for 12 hours. But when she awoke, she began sobbing and couldn't stop. She couldn't face her two kids. She was angry with her husband, whom she had badgered until he said "It's your decision, do what you want." In shock this woman now sits in my office saying, "I am... a nurturer. I love kids." She feels alienated from all that she now does for her two kids. She seems utterly dumbfounded why she had the abortion. She says she thinks it is far too easy to get an abortion today. "Somebody should have stopped me." But nobody said, "It's just panic. Relax, you'll be okay." She has now had two abortions, the second one out of panic, and she feels terrible guilt. She hates herself for what she's done, and she can't believe that she did it. She calls herself "stupid" and asks "where was my brain?" She is now cold to her kids, and her husband spends most of the time tending to them. She cries a great deal. She is very conflicted in her concept of herself as a mother. She is very angry and full of sadness.

In summary, the women described above are typical of many thousands of women today suffering from "impacted grief." They suffer because: 1) There is lack of awareness of the grief to be expected and the need to mourn it. 2) In abortion there are no images and visual memories the way there are in other types of death. These images are always part of grief-work, but in abortion there are no memories, no pictures of the child. 3) Lack of awareness that she needs to do the catharsis-work, to deal with her pain. Consider, for example, a woman whose abortion was thirty years ago.

She only recently told me what she'd seen in her toilet after coming home from her abortion: part of the fetus was floating there, the face looking up.... She has

never before told a soul about this, and never forgiven herself. There are hundreds of examples of how women "cope" with their pain, e.g. by eating disorders, staying in abusive relationships, substance abuse, etc. More than anything they need to deal with their loss and then to seek forgiveness from God and to forgive themselves.

There are many stages a woman needs to go through as she heals from the pain of abortion. If she is Catholic, I encourage her to seek the sacramental gift of absolution in the rite of reconciliation. She will most likely need to see a trained professional to help her work through her guilt and shame. Many women find it helpful to write a letter to the baby that speaks of their love for the child and their regret at what happened. These letters really turn into love-letters and are a very cathartic tool toward healing.

Finally, when I feel the woman has adequately processed her grief and forgiven herself, I end my work with her by a "guided prayer" to Jesus. Almost all the women I have led through this prayer receive real peace and feel God's love amidst their tears. This guided prayer follows.

HEALING OF THE ABORTION MEMORYⁱⁱ

I begin the healing of the memories experience by asking my client, "Jane," to choose a comfortable posture, close her eyes, bow her head, and relax so that the details in her memory can unfold. I start the healing journey by expressing God's desire and power to heal us of our sins and our pain. Then I employ the psychological tool of directive reflection to lead the client back to the painful memory of her abortion.

"Healing Father, we thank You for Your promise that when two or more are gathered in Your name, You are in our midst. We thank You for Your presence here with us, and we ask You to guide us as we journey toward healing for 'Jane.' In the name of Jesus, I bind any spirits of darkness that would try to disrupt the healing process.

Jesus, I know You to be the one true Healer from whom all total healing comes, whether through medicine, psychology, or divine healing. Guide us now, Holy Spirit, so that 'Jane' will receive total forgiveness and healing from her abortion. May all the glory be Yours, dear Lord."

"I would like you now, 'Jane,' to let yourself journey back in your memory to that time around your abortion experience. Allow the Holy Spirit to run the projector of your memory. Perhaps some particular part of the event will stand out to you, like the abortion clinic, or where you were when you made the decision to have the abortion, or perhaps your feelings after you had the abortion. It is different for each individual. Just allow your mind to open up and visualize your memories." After a few moments' pause I then ask: "Can you tell me what has come to your mind at this point?"

Pause for client to share the memory that has come to her.

"Fine, 'Jane,' that's very good. Now I would like you to allow yourself not only to get in touch with the facts and the circumstances around your decision, but more importantly, to start to sense the breadth of feelings that were present at that time. Spend a few moments now concentrating on your emotions. If you want to cry, let the tears flow." Usually the client will begin to cry by now, and this is an important part of the grieving and healing process.

"Now, 'Jane,' in your memory I'd like you to look up from wherever you are sitting or lying and look over to the nearest doorway. I'd like you to see, standing at that door, what you would imagine a loving, forgiving, and healing Jesus to look like. He may be tall or short, He may or may not have a beard, but I want you to imagine Him as you think Jesus would look. He may have deep dark eyes that hold your attention immediately. He seems to be radiating a deep warmth and love, and there appears to be no judgment or scorn anywhere on His face.

"Then you also notice as you see Him standing there that He is holding something in His arms. It is something wrapped in a blanket, and after a moment or two you realize that He is holding a little baby. He is holding your baby, 'Jane,' and He loves this child even more than you would if that baby were right here on earth with you. Now I want you to get up and go across the room in your memory and face Jesus where He is standing. You look straight at Him, and He holds your gaze with His forgiving eyes. You realize that Jesus is not condemning you. He is only living you. His death

on the Cross was to atone for all of our sins, so He stands there offering you forgiveness and love. So the debt for your sin has already been paid. The gentle smile on His face never leaves, and you begin to feel His permeating love flowing deep into your heart and mind. I want you now just to drink in His love and allow it to come inside your whole being.

"I am going to be quiet for a few minutes, and I want you to dialogue with Jesus in silence. Give Him all of your pain. Tell Him about all the feelings and emotions that you have — every single one of them. Lay all of your hurt and sadness at His feet; give Him every feeling that is present for you.

"After you have poured out your feelings, you need to ask for God's forgiveness. In your words express your regret to Jesus for taking the life of your child and ask Him to forgive you. Tell Jesus you forgive all those who were involved in your abortion. If there is one or more particular individuals that are difficult for you to forgive, ask Jesus who is the essence of forgiving love, for the help to forgive them.

"You realize that the pain you have experienced is not punishment from the Father, but only a real consequence of the grieving of your child's death. As we take our pain to the Father through Jesus, whose greatest desire is for us to receive the Father's love, we are drawn closer to Him, and His forgiveness becomes the very foundation of your healing.

"When you are finished sharing, I want you to remain quiet and listen to what Jesus has to say to you. He has some specific things he wishes to say to you particularly. He may say just a word or two, or He may give you several sentences. You will come to realize His words are full of healing power. They are His healing touch to you. Just as He healed through touch during His life here on earth, His words to you will provide the healing for your abortion. As you are journeying in your dialogue with Jesus, I will be in silent prayer, interceding for you with our loving Father.

"After you have heard all that Jesus has to say to you, I want you to see Jesus giving you your little baby to hold. This is likely to produce some tears, but this is all part of the healing process. Please share with your child all that you would like to say regarding your love and how you regret what happened. Let your heart share fully as you hold your child. Do not be afraid to ask him or her for forgiveness."

After waiting ten minutes in quiet prayer, I then move to the committal prayer.

"Lord Jesus, we know that 'Jane's' baby is with You now in heaven. 'Jane' can see her baby being held in Your arms. Lord, we thank You for the love You have for this child and for how You love each one of us individually on this earth. We want, now, Lord, to commit this baby of 'Jane's' to You forever."

I now stop my prayer and ask 'Jane' if she has any sense of what the sex of her child might be. I then ask her if she has any hint of a name the baby might be called. After hearing these two vital pieces of information, I continue my prayer.

"Heavenly Father, Lord Jesus, and Holy Spirit, we come to you at this point in our journey, and we wish to dedicate this child to You for all eternity. We know, Lord, that You love this child more than any earthly parent can comprehend. But 'Jane,' as the earthly parent of this child, wishes now to commit little 'Janie' to You, Heavenly Father, to be with You in heaven, to be loved by You, and to be with Your host of angels for all time. Thank You, Father, for the love that You have for this child. We are confident, Lord, that one day the souls of 'Jane' and her daughter 'Janie' will be joined together in heaven, and we look forward to that day. We praise You, Father, and we thank You for all the healing that You are doing at this very moment."

I then conclude by asking 'Jane' if she has anything she would like to add to the prayer and committal service for her child, either out loud or privately. Finally, I close the service with this prayer.

"Lord Jesus, we praise You and we thank You for all that You have just done to heal 'Jane' of her abortion. We thank You for little 'Janie' and for Your taking care of her for all eternity. We thank You also, Lord, for how Your death and resurrection have set us free from all our sins. We thank You for the new freedom 'Jane' feels. Father, I ask You to carry 'Jane' in the palm of Your hand for this week until we meet again. Continue her healing. Help her to continue to see the power of Your love and Your healing forgiveness. We praise You, in Jesus' name. Amen."

NOTES

i. Developed by Vincent M. Rue, Ph.D., from diagnostic criteria for "post traumatic stress disorder" in *American Psychiatric Association, Diagnostic and Statistical Manual on Mental Disorders Revised* [DSM III-R: 309.89] (Washington, D.C.: American Psychiatric Press 1987) 250. The American Psychiatric Association in no way supports the existence of, nor does it find any clinical evidence for the basis of the diagnosis of "post abortion syndrome." The DSM III-R does not reference nor include the diagnosis of "post abortion syndrome," but the DSM III-R does identify abortion as a type of "psycho-social stressor" (p. 20).

ii. Taken from Susan M. Stanford-Rue, Ph.D., *Will I Cry Tomorrow? Healing Post-Abortion Trauma* (Old Tappan, N.J.: Revell 1986) ch. 12: "Healing Steps for Post-Abortion Trauma."