Abortion linked to mental problems

- Increased risk of depression
- Most detailed study so far

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Medical Editor

HAVING an abortion as a young woman raises the risk of developing later mental health problems - including depression, anxiety and drug and alcohol abuse - according to the most detailed long-term study to date into the divisive question.

The results could undermine the legal basis for access to abortion in jurisdictions, including NSW, in which termination is legal only if continuing the pregnancy would threaten the woman's physical or mental health, said David Fergusson, the leader of the New Zealand study. The findings tipped the balance of scientific evidence towards the conclusion that abortion increased psychological distress rather than alleviating it, said Professor Fergusson, who supports unrestricted access to abortion and describes himself as "an atheist, a rationalist and pro-choice". That could make it more difficult for doctors to claim they were performing an abortion on health grounds, he said.

"There'll be cheering for our results on the pro-life side and denouncing us angrily on the pro-choice side," said Professor Fergusson, a psychologist and epidemiologist at the Christchurch School of Medicine and Health Sciences. "Neither of those positions is sound."

He said the study was conducted to address the dearth of reliable evidence on the mental health effects of abortion. "The issue is not a trivial one," he said. "Abortion is the most common medical or surgical procedure young women undergo by far and there are potential adverse reactions. The aim of our research was never political. It was..."
to say, "The science in this area is not good. Let's add to it.""

The findings come from the Christchurch Health and Development Study of 1265 children tracked since birth in the 1970s. The researchers found 41 per cent of the more than 500 women remaining in the cohort had become pregnant by age 25 and 34.6 per cent had sought an abortion. In total, 90 pregnancies were terminated.

At age 25, 42 per cent of those who had had an abortion had also experienced major depression at some stage during the previous four years – nearly double the rate of those who had never been pregnant and 35 per cent higher than those who had chosen to continue a pregnancy.

The risk of anxiety disorders was raised by a similar degree, while the women who had had at least one abortion were twice as likely to drink alcohol at dangerous levels compared with those who had not terminated their pregnancies, and three times as likely to be dependent on illicit drugs. The study was published this week in the Journal of Child Psychiatry and Psychology.

Professor Fergusson said the results had surprised him, but they were statistically strong. Separate analysis had confirmed the mental health problems followed abortion - not the other way round. The study, funded mainly by the New Zealand Government, had assessed the young women's mental health regularly through adolescence, and had also considered their family and educational circumstances.

It was plausible that abortion might trigger mental illness, he said, because it could be a traumatic life event and involve loss – both of which are linked to increased psychological problems.

Edith Weisberg, the research director of FPA Health, said the research was disturbing and important, but it also had limitations. Some women might not have mentioned their abortions, the effects might be different for older women, and the study had not explored why the women had terminated their pregnancies or their attitudes to abortion, she said. "The reason they had the abortion may be more of a problem than the abortion itself," Dr Weisberg said.
Priorities for Victorian women’s health
2014–2018

Developed by
Victorian women’s health services

March 2014
National research that found that 61 per cent of same-sex attracted young people reported experiencing verbal homophobia abuse and 18 per cent physical abuse.11

- Infertility is a growing concern with approximately one in six Australian couples taking longer than one year to conceive a planned pregnancy during their reproductive life12 and approximately 4 per cent of Australian children are now born via some form of assisted reproductive technology.13

- Births to women aged under 30 years contributed three-quarters (76 per cent) of the total fertility rate for Aboriginal and Torres Strait Islander women in 2012, compared with less than half of the total fertility rate for all women (45 per cent).14

- A 2013 Australian study on contraceptive use and unintended pregnancy among 18–23 year old women found that of those who had been pregnant 69 per cent were reported using a range of contraceptive methods.15

- Women with a disability continue to have their sexual and reproductive rights denied through forced sterilisation, denial of appropriate sexual and reproductive healthcare, access to assisted reproductive technologies and poorly managed pregnancy, birth and post natal care.16

- A large national representative survey found that 22.6 percent of women aged 16–59 years in Australia report ever having had an abortion.17

- International and Australian research consistently shows an emphatic association between intimate partner violence and abortion.18 Results from the World Health Organisation 2013 multi-country study found that primary prevention efforts that reduce rates of intimate partner violence by 50 per cent could potentially reduce unintended pregnancy by 2–18 per cent and abortion by 4.5–40 per cent.19

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11 Ibid.
ADVICE CURBS TERMINATIONS

The Sunday Mail (Adelaide) 25 July 2004

Counselling and second thoughts have persuaded more than 25 per cent of women planning abortions at a major city hospital to change their mind.

The drop in terminations has prompted calls for more comprehensive counselling to ensure women are fully informed of the financial and social support available, their options and the emotional impact of the decision.

The Australian Medical Association also wants more post-termination counselling, warning most women face unexpected grief.

Last year, 584 women made appointments at the Women's and Children's Hospital for terminations, where counselling is mandatory.

The delay saw only 473 turn up for the talk, then only 417 went through with the termination after discussing their options.

WCH senior social worker Jayne Rickard said women needed to be fully informed of their options.

"It is their decision and they should not be coerced into it by feeling they have no options", she said.

"This is not something women should rush into - it is important they are fully informed when they make their decision"

The WCH has mandatory counselling which allows people to make a fully informed decision.

Ms Rickard said the availability of new long-term contraceptives, including those which lasted three years, might cut the termination rate.

The WCH only performs terminations up to 12 weeks, unless there are genetic problems.

Ms Rickard said the medically preferred time was at six to eight weeks. The baby bonus had had no effect on termination decisions so far, she said.

"No one is talking about the money, they either want a baby or they do not", she said.
The most recent state-wide figures show there were 5,417 terminations performed in SA in 2002.

The Pregnancy Advisory Centre, which has counsellors but does not insist on it, performed 55 per cent of the terminations, or 3,006 abortions.

Human Services Department Pregnancy Outcome Unit director Dr Annabelle Chan said only about 2 per cent of terminations were due to congenital problems. "Most are unplanned pregnancies, and we hope the rate will decrease if women receive more information and are more careful with contraception and prevention", she said.

Australian Medical Association spokesman, obstetrician and gynaecologist Dr Trevor Mudge said women needed access to post-termination counselling.

"It is important to get unbiased information before a termination so they can make their own decision but the problem is that unbiased advice does not exist", he said.

"Abortion is an issue where almost no one has an unbiased view and many so-called counselling services, particularly in the US and UK but also locally, are really pro or anti abortion groups.

Counselling after a termination is important because you don't just go back to where you were; there is a big problem with post-termination grief but services are not easily available.

With abortion there is no such thing as a correct decision, but you have to remember there is no society where it does not exist."