

Mental Health Outcomes of Miscarriage vs. Induced Abortion

Both spontaneous miscarriage and induced abortion are common occurrences and there have been many scientific investigations concerning the psychological aftermath of each. However, few studies have compared the mental health outcomes of these two pregnancy termination events. The limited research that has done so is summarized here.

Broen, Moum, Bodtker, & Ekeberg, O. (2004)¹ interviewed women who had experienced a miscarriage or an induced abortion at 10 days, six months, and two years after the event. While women who miscarried evidenced feelings of loss and grief, those who elected to abort were more likely to report feelings of relief, guilt, and shame. Authors concluded that “The short term emotional reactions to miscarriage appear to be larger and more powerful than those to induced abortion. In the long-term, however, women who had induced abortion reported significantly more avoidance of thoughts and feelings related to the event than women who had a miscarriage,” (p. 265).

In a follow-up study, Broen, Moum, Bodtker, & Ekeberg, O. (2005)² surveyed the same women at five years after miscarriage or abortion. A similar pattern was observed at the five-year assessment with post-abortion women demonstrating significantly greater avoidance, guilt, shame, and relief than those women who miscarried. In addition, women who aborted had significantly higher anxiety scores than women in the general population.

A separate analysis of their data (Broen et al., 2006)³ revealed that for women who had abortions, doubt about the abortion decision was significantly associated with post-abortion depression and a negative attitude toward abortion was significantly associated with post-abortion anxiety. These authors suggested that these predictors of depression and anxiety “may be used to better identify women who are at risk of negative psychological responses following pregnancy termination,” (p. 317).

A study from New Zealand⁴ involved data collected over a 30-year period and compared three groups of young women: those who aborted, those who suffered spontaneous miscarriage, and those who gave birth. Results indicated that only abortion was associated with an increased risk for mental health problems. Furthermore, “the specificity of the association between abortion and mental health risks further reinforces the view that the association is causal,” (p. 449-450).

Given the shame and avoidance that may accompany abortion, women may be at risk for complicated mourning.⁵ These studies strongly suggest that women who have abortions may benefit from comprehensive pre and post-abortion counseling.

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¹ Broen, A.N., Moum, T., Bodtker, A.S. & Ekeberg, O. (2004). Psychological impact on women of miscarriage versus induced abortion: A 2-year follow-up study. *Psychosomatic Medicine*, 66, 265-277.

² Broen, A.N., Moum, T., Bodtker, A.S. & Ekeberg, O. (2005). The course of mental health after miscarriage and induced abortion: A longitudinal, 5-year follow-up study.

³ Broen, A.N., Moum, T., Bodtker, A.S. & Ekeberg, O. (2006). Predictors of anxiety and depression following pregnancy termination: A longitudinal 5-year follow-up study. *Acta Obstetrica et Gynecologica Scandinavica*, 85, 317-323.

⁴ Fergusson, D.M., Horwood, L.J. & Boden, J.M. (2008). Abortion and mental health disorders: Evidence from a 30-year longitudinal study. *British Journal of Psychiatry*, 193, 444-451.

⁵ Speckhard, A.C. & Rue, V.M. (1993). Complicated mourning: Dynamics of impacted post-abortion grief. *Prenatal and Perinatal Psychology Journal*, 8, 5-32.