

WEBVTT

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00:00:00.400 --> 00:00:04.090

<v ->Hi, I'm Antonia Biggs, a social psychologist researcher

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00:00:04.090 --> 00:00:06.520

at Advancing New Standards in Reproductive Health

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00:00:06.520 --> 00:00:09.400

at the University of California San Francisco.

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00:00:09.400 --> 00:00:12.377

This is "Explained: Abortion Research & Policy."

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00:00:13.220 --> 00:00:14.490

Today I'll be sharing with you

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00:00:14.490 --> 00:00:16.960

the results from UCSF's "Turnaway Study,"

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00:00:16.960 --> 00:00:18.980

the most rigorous study we have to date

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00:00:18.980 --> 00:00:22.140

on the effects of abortion on women's mental health.

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00:00:22.140 --> 00:00:25.750

The "Turnaway Study" was led by Dr. Diana Greene Foster.

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00:00:25.750 --> 00:00:28.910

It looked at the effects of abortion on women's lives.

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00:00:28.910 --> 00:00:31.300

One of its goals was to improve our understanding

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00:00:31.300 --> 00:00:34.840

about how abortion may or may not affect different facets

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00:00:34.840 --> 00:00:36.800

of women's mental health and wellbeing.

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00:00:36.800 --> 00:00:39.470

For example, depression, anxiety, self-esteem,

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00:00:39.470 --> 00:00:41.410

and life satisfaction.

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00:00:41.410 --> 00:00:43.500

In this study, I led the analysis

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00:00:43.500 --> 00:00:46.340

looking at the effects of having or being denied an abortion

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00:00:46.340 --> 00:00:48.710

on women's psychological outcomes.

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00:00:48.710 --> 00:00:50.680

I found that denying a woman an abortion

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00:00:50.680 --> 00:00:53.240

had more negative consequences to her mental health

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00:00:53.240 --> 00:00:56.180

than allowing her to get the abortion she wants.

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00:00:56.180 --> 00:00:58.630

Yet, currently, the US has nine states

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00:00:58.630 --> 00:01:00.640

that require women to be counseled

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00:01:00.640 --> 00:01:03.230

on the negative psychological and emotional responses

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00:01:03.230 --> 00:01:05.060

to abortion stress.

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00:01:05.060 --> 00:01:08.600

These policies are not based on the latest evidence.

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00:01:08.600 --> 00:01:10.330

There long has been a desire

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00:01:10.330 --> 00:01:13.540

to better understand the effects of abortion on women.

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00:01:13.540 --> 00:01:17.320

In 1987, President Ronald Reagan requested a report

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00:01:17.320 --> 00:01:20.353

on the psychological and physical effects of abortion.

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00:01:21.220 --> 00:01:22.740

After reviewing the evidence,

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00:01:22.740 --> 00:01:26.197

the US Surgeon General issued a letter stating that

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00:01:26.197 --> 00:01:28.137

"the scientific studies to date

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00:01:28.137 --> 00:01:30.167

"do not provide conclusive data

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00:01:30.167 --> 00:01:33.330

"about the health effects of abortion on women,"

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00:01:33.330 --> 00:01:35.380

and he recommended a prospective

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00:01:35.380 --> 00:01:38.130

five-yr longitudinal cohort study

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00:01:38.130 --> 00:01:42.280

to provide the necessary conclusive data on the topic.

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00:01:42.280 --> 00:01:44.260

20 years later, in 2008,

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00:01:44.260 --> 00:01:47.010

the UCSF's "Turnaway Study" was launched.

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00:01:47.010 --> 00:01:48.920

It is the first study to respond

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00:01:48.920 --> 00:01:51.250

to the US Surgeon General's recommendation

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00:01:51.250 --> 00:01:54.400

to prospectively follow women for five years

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00:01:54.400 --> 00:01:56.470

after seeking an abortion.

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00:01:56.470 --> 00:01:59.420

The "Turnaway Study" recruited nearly 1,000 women

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00:01:59.420 --> 00:02:01.900

from 30 abortion facilities throughout the US

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00:02:01.900 --> 00:02:03.530

and followed them for five years

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00:02:03.530 --> 00:02:05.590

through semi-annual phone interviews.

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00:02:05.590 --> 00:02:10.130

We just completed our final interview in January of 2016.

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00:02:10.130 --> 00:02:12.830

The "Turnaway Study" compares women who received abortions

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00:02:12.830 --> 00:02:15.340

just under a facility's gestational limit

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00:02:15.340 --> 00:02:16.930

to women who were denied abortion

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00:02:16.930 --> 00:02:19.530

because they were just over the gestational limit.

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00:02:19.530 --> 00:02:21.690

For example, if a clinic offered abortion

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00:02:21.690 --> 00:02:23.400

up to 20 weeks gestation,

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00:02:23.400 --> 00:02:26.140

we recruited women who terminated their pregnancies

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00:02:26.140 --> 00:02:28.230

at 18 to 20 weeks gestation

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00:02:28.230 --> 00:02:32.810

and women who were turned away at 21 to 23 weeks gestation.

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The "Turnaway Study" improves

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00:02:34.280 --> 00:02:35.910

on the methodological shortcomings

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00:02:35.910 --> 00:02:37.630

found in the previous literature

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00:02:37.630 --> 00:02:40.350

by taking into account previous mental health conditions

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00:02:40.350 --> 00:02:42.470  
and examining both possible outcomes

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00:02:42.470 --> 00:02:44.040  
of an unwanted pregnancy:

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00:02:44.040 --> 00:02:47.130  
abortion and carrying the pregnancy to term.

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00:02:47.130 --> 00:02:49.340  
My colleagues and I have published several papers

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00:02:49.340 --> 00:02:52.870  
examining individual mental health and wellbeing outcomes.

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00:02:52.870 --> 00:02:55.070 line:15%  
In the case of anxiety and self-esteem,

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00:02:55.070 --> 00:02:57.560 line:15%  
we found that it was the women who were denied an abortion,

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00:02:57.560 --> 00:02:59.680 line:15%  
not the women who had their wanted abortions,

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00:02:59.680 --> 00:03:02.180 line:15%  
who were worst off, at least initially.

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00:03:02.180 --> 00:03:05.060 line:15%  
By six months to a year, both groups were similar,

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00:03:05.060 --> 00:03:07.220 line:15%  
and both groups improved over time.

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00:03:07.220 --> 00:03:09.080  
When we looked at symptoms of depression

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00:03:09.080 --> 00:03:11.940

and post-traumatic stress and life satisfaction,

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00:03:11.940 --> 00:03:15.030

we found no differences between those women who had

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00:03:15.030 --> 00:03:17.240

and those who were denied abortions.

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00:03:17.240 --> 00:03:21.100

For these outcomes, both groups also improved over time.

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00:03:21.100 --> 00:03:23.370

To give you a sense of the life circumstances

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00:03:23.370 --> 00:03:25.230

and causes of post-traumatic stress

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00:03:25.230 --> 00:03:26.820

among women seeking abortions,

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00:03:26.820 --> 00:03:28.430

I'd like to share some of the stories

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00:03:28.430 --> 00:03:30.800

from women in the "Turnaway Study."

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00:03:30.800 --> 00:03:32.300

Post-traumatic stress symptoms

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00:03:32.300 --> 00:03:34.390

include nightmares, being on edge,

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00:03:34.390 --> 00:03:37.030

feeling numb or detached, and thought avoidance,

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00:03:37.030 --> 00:03:38.960

which refers to attempts to stop thinking

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00:03:38.960 --> 00:03:40.830  
about a particular thought.

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00:03:40.830 --> 00:03:42.440  
When we asked women with these symptoms

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00:03:42.440 --> 00:03:43.900  
to identify their source,

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00:03:43.900 --> 00:03:46.060  
the most common reasons were prior history

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00:03:46.060 --> 00:03:50.250  
of sexual, physical, or emotional abuse, not the abortion.

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00:03:50.250 --> 00:03:52.950  
For example, some women said the source of their stress

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00:03:52.950 --> 00:03:55.080  
was the abortion clinic experience,

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00:03:55.080 --> 00:03:57.230  
seeing anti-abortion protesters,

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00:03:57.230 --> 00:04:00.020  
or just feeling overwhelmed about being pregnant.

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00:04:00.020 --> 00:04:01.360  
But these tend to be about

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00:04:01.360 --> 00:04:03.120  
the whole experience of pregnancy,

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00:04:03.120 --> 00:04:05.550  
decision-making, and abortion.

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00:04:05.550 --> 00:04:07.700

Symptoms of post-traumatic stress

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00:04:07.700 --> 00:04:10.450

were just as common among women who have an abortion

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00:04:10.450 --> 00:04:13.670

than among women who carry the unwanted pregnancy to term.

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00:04:13.670 --> 00:04:16.900

And again, we found that symptoms declined similarly

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00:04:16.900 --> 00:04:19.630

for both groups of women over time.

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00:04:19.630 --> 00:04:21.270

In fact, for all our outcomes,

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00:04:21.270 --> 00:04:24.210

both women who were denied and those who had their abortion

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00:04:24.210 --> 00:04:25.880

experienced general improvements

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00:04:25.880 --> 00:04:27.903

over our five-year study period.

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00:04:28.940 --> 00:04:30.810

The more negative outcomes observed

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00:04:30.810 --> 00:04:33.810

at the time of receiving or being denied an abortion

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00:04:33.810 --> 00:04:36.110

are likely due to the particular social

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00:04:36.110 --> 00:04:38.450

and emotional challenges faced at the time

113  
00:04:38.450 --> 00:04:40.660  
of discovering an unwanted pregnancy

114  
00:04:40.660 --> 00:04:42.233  
and deciding to terminate.

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00:04:43.440 --> 00:04:45.730  
The reasons women give for seeking abortion,

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00:04:45.730 --> 00:04:47.320  
not having enough money,

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00:04:47.320 --> 00:04:49.000  
having problems with their partners,

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00:04:49.000 --> 00:04:51.880  
bad timing, needing to focus on existing children,

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00:04:51.880 --> 00:04:54.330  
and not being emotionally or mentally prepared,

120  
00:04:54.330 --> 00:04:56.690  
are telling of their difficult circumstances

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00:04:56.690 --> 00:04:58.890  
at the time of abortion seeking.

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00:04:58.890 --> 00:05:01.030  
These factors, along with the stress

123  
00:05:01.030 --> 00:05:02.670  
of trying to procure an abortion,

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00:05:02.670 --> 00:05:06.040  
may be causing the initial elevated levels of distress,

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00:05:06.040 --> 00:05:09.610

which quickly dissipate over time for both groups of women.

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00:05:09.610 --> 00:05:12.340

To put the findings of the "Turnaway Study" in context,

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00:05:12.340 --> 00:05:14.220

I'd like to share with you a brief history

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00:05:14.220 --> 00:05:15.883

of the research that preceded it.

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00:05:16.970 --> 00:05:20.720

After the Surgeon General's 1989 letter to the President

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00:05:20.720 --> 00:05:23.620

indicating that more research on the topic is needed,

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00:05:23.620 --> 00:05:27.240

the American Psychological Association formed a task force

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00:05:27.240 --> 00:05:29.480

which would examine the scientific research

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00:05:29.480 --> 00:05:32.890

addressing mental health factors associated with abortion,

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00:05:32.890 --> 00:05:36.410

including the psychological responses following abortion.

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00:05:36.410 --> 00:05:39.760

This task force concluded that there's no evidence

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00:05:39.760 --> 00:05:42.150

that having a single first-trimester abortion

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00:05:42.150 --> 00:05:44.020

causes mental health problems,

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00:05:44.020 --> 00:05:46.450

and that many of the studies published

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00:05:46.450 --> 00:05:49.540

suffered from serious methodological problems.

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00:05:49.540 --> 00:05:51.780

Despite the lack of rigorous evidence

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00:05:51.780 --> 00:05:54.900

suggesting that abortion harms women psychologically,

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00:05:54.900 --> 00:05:57.800

policy decisions restricting abortions were made

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00:05:57.800 --> 00:05:59.420

with this claim in mind.

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00:05:59.420 --> 00:06:01.400

For example, in 2007,

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00:06:01.400 --> 00:06:03.990

the Supreme Court Justice Anthony Kennedy

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00:06:03.990 --> 00:06:07.270

wrote in the Gonzales v. Carhart majority opinion

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00:06:07.270 --> 00:06:08.470

which supported a ban

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00:06:08.470 --> 00:06:11.147

on a specific later abortion procedure,

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00:06:11.147 --> 00:06:14.257

"While we find no reliable data to measure the phenomena,

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00:06:14.257 --> 00:06:16.407

"it seems unexceptionable to conclude

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00:06:16.407 --> 00:06:19.247

"some women come to regret their choice to abort.

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00:06:19.247 --> 00:06:23.430

"Severe depression and loss of esteem can follow."

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00:06:23.430 --> 00:06:26.470

Over the decades, research on the topic continued,

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00:06:26.470 --> 00:06:28.530

the scientific methods improved,

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00:06:28.530 --> 00:06:30.680

and the most rigorous reviews of the literature

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00:06:30.680 --> 00:06:33.730

resulted in the conclusion that there is no evidence

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00:06:33.730 --> 00:06:36.240

that abortion leads to mental health harm,

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00:06:36.240 --> 00:06:39.743

and, at the same time, more rigorous research is needed.

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00:06:40.640 --> 00:06:44.310

Conducting rigorous research on the topic is difficult.

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00:06:44.310 --> 00:06:45.940

The primary challenge lies

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00:06:45.940 --> 00:06:48.280

in finding an appropriate comparison group.

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00:06:48.280 --> 00:06:49.680

Most studies have compared

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00:06:49.680 --> 00:06:52.270

the mental health outcomes of women having an abortion

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00:06:52.270 --> 00:06:53.740

to women who miscarry

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00:06:53.740 --> 00:06:56.273

or who have a pregnancy that is carried to term.

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00:06:57.210 --> 00:06:59.510

The trouble with comparing these two groups of women

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00:06:59.510 --> 00:07:01.770

is that their experiences and circumstances

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00:07:01.770 --> 00:07:03.670

are inherently different.

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00:07:03.670 --> 00:07:06.460

In the case of women who decide to have an abortion,

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00:07:06.460 --> 00:07:09.380

these are women who, after assessing their circumstances,

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00:07:09.380 --> 00:07:10.950

have decided that the hardship

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00:07:10.950 --> 00:07:14.330

of raising a child at this time is insurmountable.

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00:07:14.330 --> 00:07:17.550

This decision is usually based on a host of reasons,

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00:07:17.550 --> 00:07:19.790

often financial, partner-related,

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00:07:19.790 --> 00:07:22.913

the need to focus on existing children, or other reasons.

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00:07:24.000 --> 00:07:26.930

Whereas women who are actively seeking to get pregnant

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00:07:26.930 --> 00:07:29.060

or who experience an unintended pregnancy

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00:07:29.060 --> 00:07:31.260

that they decide to carry to term

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00:07:31.260 --> 00:07:34.190

have concluded that, given their current circumstances,

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00:07:34.190 --> 00:07:38.140

having a child at this time is possible or even desirable.

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00:07:38.140 --> 00:07:41.050

So when studies compare women who have abortions

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00:07:41.050 --> 00:07:42.490

to those who carry to term,

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00:07:42.490 --> 00:07:44.030

they may erroneously attribute

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00:07:44.030 --> 00:07:45.730

any differences to the abortion,

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00:07:45.730 --> 00:07:48.040

when in fact these differences more likely stem

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00:07:48.040 --> 00:07:50.360

from a woman's circumstances around the time

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00:07:50.360 --> 00:07:53.760

she decides to have an abortion or carry to term.

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00:07:53.760 --> 00:07:55.010

Some studies have found

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00:07:55.010 --> 00:07:57.820

a negative mental health impact on women due to abortion,

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00:07:57.820 --> 00:08:00.700

yet these studies have been critically refuted.

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00:08:00.700 --> 00:08:02.520

Usually, their analysis have lacked

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00:08:02.520 --> 00:08:03.990

appropriate comparison groups

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00:08:03.990 --> 00:08:05.140

and failed to control

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00:08:05.140 --> 00:08:07.700

for pre-existing mental health conditions,

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00:08:07.700 --> 00:08:10.590

which are known to be the most important indicators

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00:08:10.590 --> 00:08:14.100

of experiencing future mental health problems.

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00:08:14.100 --> 00:08:16.750

This error means that negative mental health conditions

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00:08:16.750 --> 00:08:19.530

after an abortion are attributed to the abortion

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00:08:19.530 --> 00:08:22.650

rather than circumstances that predated the pregnancy

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00:08:22.650 --> 00:08:26.330

and in fact may have prompted the decision to terminate.

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00:08:26.330 --> 00:08:29.230

Now, with the most recent data from the "Turnaway Study,"

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00:08:29.230 --> 00:08:30.860

which has successfully improved

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00:08:30.860 --> 00:08:33.480

on so many of the methodological shortcomings

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00:08:33.480 --> 00:08:34.770

of the studies before it,

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00:08:34.770 --> 00:08:36.460

we can confidently state

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00:08:36.460 --> 00:08:38.260

that negative mental health outcomes

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00:08:38.260 --> 00:08:40.940

are not more common among women having an abortion

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00:08:40.940 --> 00:08:43.290

compared to those who initially sought an abortion

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00:08:43.290 --> 00:08:45.670

and continued the pregnancy to term.

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00:08:45.670 --> 00:08:49.000

In fact, we now know that denying women an abortion

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00:08:49.000 --> 00:08:51.100

has a more negative effect on women,

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00:08:51.100 --> 00:08:52.550

at least in the short run,

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00:08:52.550 --> 00:08:55.550

than allowing women to get their wanted procedures.

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00:08:55.550 --> 00:08:59.330

Yet US policies are not supported by evidence.

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00:08:59.330 --> 00:09:01.060

It is encouraging that in the recent

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00:09:01.060 --> 00:09:03.750

Whole Woman's Health v. Hellerstedt case,

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00:09:03.750 --> 00:09:05.940

the Supreme Court based its decision

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00:09:05.940 --> 00:09:07.830

that abortion restrictions in Texas

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00:09:07.830 --> 00:09:09.890

were placing an undue burden on women

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00:09:09.890 --> 00:09:12.630

and doing little to protect women's health

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00:09:12.630 --> 00:09:15.430

using scientific evidence.

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00:09:15.430 --> 00:09:17.650

This represents tremendous progress

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00:09:17.650 --> 00:09:21.420

since the Gonzales v. Carhart case in 2007

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00:09:21.420 --> 00:09:23.920

where its decision was based on assumptions

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00:09:23.920 --> 00:09:25.353

rather than science.

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00:09:26.360 --> 00:09:29.250

Our scientific knowledge of the psychological effects

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00:09:29.250 --> 00:09:30.530

of abortion on women

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00:09:30.530 --> 00:09:35.000

is much stronger since the Surgeon's General letter in 1989.

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00:09:35.000 --> 00:09:36.930

We now have decades of research

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00:09:36.930 --> 00:09:40.030

that does not support restricting women's access to abortion

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00:09:40.030 --> 00:09:43.760

on the basis that abortion harms women's mental health.

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00:09:43.760 --> 00:09:46.230

It seems imperative to revise current laws

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00:09:46.230 --> 00:09:49.360

that mandate pre-abortion counseling on this basis,

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00:09:49.360 --> 00:09:52.330

and to ensure that any information we give women

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00:09:52.330 --> 00:09:55.310

regarding the effects of abortion on their mental health

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00:09:55.310 --> 00:09:58.040

be the most accurate and up to date.

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00:09:58.040 --> 00:10:00.733

For more information, please visit these websites.