Post-Abortion Healing

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Abstract

It is estimated that one in four women in the United States has had an abortion. 1 With the constant media attention around the overturning of Roe versus Wade, these women may, at varying levels of consciousness, feel quite triggered. Some may, for the first time, be consciously considering the possibility that the decision they made, based on thinking it was neutral, right, or didn't matter, was actually wrong and did matter. Women within the church are not immune to having abortions though they may have questioned the decision more both at the time and later. However, due to shame and guilt, these churched women may be likely to keep the abortion a secret. For both groups, rather than being the hospital it is intended to be, the church may feel like the last place to look for healing. Though arguably different in terms of moral culpability, both the churched and the unchurched post-abortive women may find themselves in a situation similar to that of soldiers coming home from a "just war" who have participated in killing. Both the soldier and the post-abortive woman, and man for that matter, may be dealing with what has been called "moral injury." Through sharing my own experience with post-abortion recovery work against a background of having both undergone much psychotherapy and also being a therapist, I shall relate how I came to be doing this work within the Orthodox community and key components of the work. I shall speak about the reality and manifestations of post-abortion syndrome and how it can involve but also differ from PTSD. Referencing the model of healing developed for moral injury, I shall speak to critical components of post-abortion recovery: grief work, confession, forgiveness work, the role of ritual, and the restoration of communion. Finally, I shall speak about the current landscape and setting of post-abortion work and the need for the Orthodox Church to more robustly and openly provide but also uniquely contribute to the healing of those carrying the tragedy of abortion.

Introduction

This paper will not be about the roar of political controversy surrounding abortion, but rather about the state of the woman after abortion and her need for healing.² I speak from experience as a woman who has had an abortion, who is an Orthodox Christian, and who has been given and continues to be given healing both psychological and spiritual. This short paper will serve only as a brief introduction and call to further dialogue.

¹ Tara C. Carleton and Jill L. Snodgrass, *Moral Injury After Abortion: Exploring the Psychospiritual Impact on Catholic Women (New York: Routledge, 2022)*, 124.

²The din of political controversy perhaps serves a defensive purpose of deflecting from the actual enormity of loss, grief, and the reality of the nature of the choice. See Frederica Mathewes-Green, *Real Choices, Listening to Women, Looking for Alternatives to Abortion* (Linthicum, MD: Felicity Press, 2013) 7.

The Choice

So often, in our individualistic culture, we are tempted to envision the woman choosing to abort as "unfettered, empowered, and free," in other words, a person who is neither affected by nor whose choices affect anyone else including herself. At the time of my choice, I may have seen myself that way. However, with grace-given clarity, I now see myself as being in a context of interacting, affecting, interpenetrating relationships in which choices are made that lead to actions that affect all. These relationships are to God, to myself, to my child, to my child's father, to the grandparents and family of my child, to the wider community and culture, to the Church, even to all creation.

Relationships ARE key in this choice. So often the reasons given for choosing to abort are the practicalities: finances, lack of support, fear of loss of job or school, the stigma, etc., But look more deeply and what one often finds is that the choice has been made by a woman who has some thought that abortion is wrong and believes she is carrying a child, but who is very impacted by other relationships. In story after story, the most prevalent factor in the woman's choice was pressure to have an abortion from the baby's father or by her own parents. Of course, I must add that some post-abortive fathers may feel similar pressures and may feel excluded from this decision. So, rather than free autonomy, this tragic, unthinkable choice is made at a time of crisis, amidst palpable physical and emotional vulnerability, and, often subject to strong pressures exerted by others. These women feel they have to choose between losing the baby or losing the baby's father, her family, her friends, her life, her plans, and her very self as she has defined them. I Ironically, out of fear of abandonment, the woman makes the most isolating of choices. Most pre-abortion counseling by design, *purposely* fails to inform the woman of actual options and that she may experience psychological, emotional, and even physical problems as a result of the abortion.

After the Choice

But for many, abortion does have effects. Often the procedure itself is traumatic-- the sights, sounds, smells, vulnerability, feeling of exposure, and of intrusion into the most private areas of the body, not to mention the pain. The term "post-abortion syndrome" points to psychological symptoms often seen in women who are post-abortive: substance abuse, depression, suicidality, psychic numbing, dissociation, insomnia, hyperarousal, relationship

¹ Ibid..11.

² I am indebted here to the work of Frederica Mathewes-Greene in her listening groups with post-abortive women as outlined in *Real Choices* and to the clinical accounts in Theresa Burke with David C. Reardon, *Forbidden Grief, The Unspoken Pain of Abortion* (Springfield, IL: Acorn Books, 2007), and the composites in Martha Shuping M.D. and Debbie McDaniel, M.A. *The Four Steps to Healing, Catholic Edition* (Tabor Garden Press, 2007).

³Burke, Forbidden Grief 33; and Bernard N. Nathanson, MD, The Hand of God, A Journey From Death to Life by the Abortion Doctor Who Changed His Mind. (Washington, DC: Regnery Publishing, 2013) 125.

difficulties, and eating disorders. These symptoms are often viewed as a form of PTSD or a complication of a grief process. Trauma occasions grief.

Let us look beyond diagnosis to what those who work with women post-abortively to provide counseling, support, and healing, actually see. Within the uniqueness of each woman's story, many consistent themes arise. In addition to the symptoms mentioned above, some post-abortive women have increased anxiety in subsequent pregnancies, fear of being able to become pregnant again, increased anxiety about bonding with a baby born from a subsequent pregnancy, doubts about the capacity to be a mother, difficulties in subsequent relationships with men, promiscuity, increased likelihood of another abortion, impaired relationships with family, avoidance of accessing medical care especially gynecological, avoidance of other pregnant women and babies, avoidance of children, fear of punishment, guilt, shame, self-hate, survivor's guilt, compulsive overworking, pre-occupation with death, self-punishment, feelings of alienation, avoidance of church, a sense of disallowed grief. Tragically, the woman often carries the burden of these thoughts and feelings alone, keeping her grief, guilt, doubts, fears, shame, traumatic memories, and flashbacks, a secret, at times even from herself.

There are post-abortive women who do not claim to be troubled or, if they are, do not associate these aspects of their lives with abortion. Are these the lucky ones to not be bothered by this sadness? I might say "Not yet." A curious aspect of post-abortion recovery work is that of women seeking to access help for the first time years after the abortion. One interpretation of this delay is that women are consciously or subconsciously waiting until their life feels safe and nurturing enough to begin to open that door.

I was one of those women who, without realizing it, waited. I first sought post-abortion recovery work over 35 years after the abortion. My pregnancy came in the midst of a fog of alcoholism and promiscuity. I did not reflect on the choice. I couldn't speed into it fast enough or away from it fast enough afterward. In the ensuing years, through grace, I did get sober, undergo extensive therapy, managed to become more functional in my life, have improved relationships, worked in child abuse prevention, and became a therapist. Nonetheless, there was a continued feeling of something unaddressed, unconfessed. This need for confession loomed large in my coming to Orthodoxy. Father Thomas Hopko in "The Word of the Cross" speaks of agonizingly painful wounds so deep that the person does not, in one sense, known in their conscious mind these wounds are there and, thus, are incapable of admitting them by themselves. The person only knows something is wrong.⁶

⁴ Carleton and Snodgrass, *Moral Injury*, 2.

⁵ Burke, Forbidden Grief, xviii.

⁶ Father Thomas Hopko, "The Word of the Cross."

https://www.ancientfaith.com/specials/hopko lectures/the word of the cros part 1>, February 19, 2011.

Moral Injury

Beyond PTSD, with abortion, there can be another dimension of wounding--soul wounding or moral injury. The term "moral injury arose in reference to the effects on a man of serving in the military in what is termed a "just war" and, in so doing, being exposed to or participated in killing. The original use of the term implied "bloodguiltiness." An Orthodox Christian writer describes the moral injury as follows:

That part of the soul that holds deep, sometimes nonarticulated and unconscious, moral sensitivities and codes becomes damaged and wounded, and fragmented when a person violates those moral sensitivities. Infractions of those laws of God written on the human heartbreak the heart, darken the *nous*(mind), impede the flow of the soul's natural energy, serve to dysregulate the nervous system, harm the body, and turn the human icon of God's image into a guilt-ridden, shabby, shattered mirror that cannot clearly reflect the image of God.⁸

Surely, one of the laws written on the human heart is motherhood. One of the pervasive themes among women who suffer post-abortively is that of a mother's loss, the deep impact on body and soul of the loss of motherhood itself even for a woman who had no religious upbringing and who may even have had a deeply troubled experience of being mothered.⁹

Two things are important to keep in mind about moral injury. First, moral injury is injury. Just as PTSD can be experienced by those who perpetrate as well as those who are the victims of violence, we sometimes don't see that the person themself is injured in a deep sense through violating their own moral sensitivities. Second, raising the issue of moral injury is never about condemnation or judgment but about bringing about a fullness of healing.

Healing

What, then, can be the long-term aftermath of abortion are complications to the grieving process and effects of PTSD with the added dimension of moral injury wherein guilt, shame, and secrecy impede the healing energies of confession, absolution, and mourning. With relationships, there is the potential loss of connection between oneself and one's child and through shame or

⁷ Timothy G. Patitsas, *The Ethics of Beauty* (Maysville, MO: St. Nicholas Press, 2020) 3.

⁸ Sean Levine, "Moral Injury, Confession, and Story: The Resolution of Moral Guilt and the Integration of War Trauma into the Personal Post War Narrative," in *Caregivers as Confessors & Healers, Proceedings from the Annual National Conference of The Orthodox Christian Association of Medicine, Psychology and Religion,* Nov. 5-7, 2015 (Wichita, Kansas: Eighth Day Institute, 2016) 106.

⁹ Mathewes-Green, *Real Choices*, 120.

blame from intimate or familial others, from one's culture, Church, and from God. The healing will need to be both psychological and spiritual.¹⁰

The 500-year-old Orthodox *Great Book of Needs* acknowledges the soul injury of the post-abortive woman and a path to healing. Suggestions are given for prayers for healing and forgiveness and, according to the priest's discernment, a limited period of not taking communion.

There is an implicit and compassionate acknowledgment here of the many unhappy circumstances that lead women to abortion. This prayer thus offers a path for peace and forgiveness for a woman who has had an abortion. It is a valuable reminder to all people that Christ's Church includes a path of love and forgiveness for everyone, no matter what their deeds.¹¹

This potential time-limited not taking Communion parallels a prohibition from Communion for men returning from war. ¹² Rather than seeing this prohibition as a judgment or punishment, it seems to reflect compassionately facing the reality that, were the person to participate in the unitive act of communion while in their present state, it might only increase their burden. As mentioned, the priest will need prayerful discernment. Likewise, regarding moral injury, it takes enormous sensitivity for a clinician to bridge this difficult topic in therapy in order to not foreclose treatment. ¹³ Still, the person has the hope of returning to the state of communion. It is not the passage of time alone that mechanically or magically restores the person to communion. Nor can it be done alone. The restoration must be interpersonal, ¹⁴ and relational.

Through a truly grace-filled path, ¹⁵ I came to be doing this healing work by connecting with an Orthodox woman, Lisa Palivoda, who had both participated in and facilitated postabortion healing work. We met weekly via Zoom for over a year going through a post-abortion

¹⁰ Carleton and Snodgrass, *Moral Injury*, Clinicians familiar working with moral injury speak to the necessity or spiritual resources for the moral injury. 104.

¹¹ Carrie Frederick Frost, "Pastoral Care of Perinatal and Infant Loss: The Importance of Rites," in Caregivers As Confessors & Healers, Proceedings from the Annual National Conference of The Orthodox Christian Association of Medicine, Psychology, and Religion, Nov. 5-7, 2015. (Wichita, Kansas: Eight h Day Institute, 2016) 196.

¹² Patitsas, The Ethics of Beauty, 9.

¹³ Personal correspondence from Steven-John M. Harris, Ph.D., of 10/9/22. Regarding the discernment of the priest, it would seem to me to be guided by what is most loving, that is to facilitate the person taking communion during the needed healing and reconciliation process or to suggest a time of not taking communion. In my own case, I think at least knowing of the possibility of not taking communion would have kindly and compassionately communicated to my dissociated self the reality of the magnitude of the need for healing. Moreover, this way the connection with the Church is maintained versus a self-banishment from communion which happens often enough either outwardly, inwardly, or both.

¹⁴ Patitsas, The Ethics of Beauty, 27.

Bible Study entitled *Portraits, Unveiled Freedom* by Fern Buzinski. ¹⁶ I want to underline Bible Study. The grounding in the Scriptures in regard to personhood, confession, forgiveness, healing, grieving, and life beyond death was foundational. Beginning to deal with my abortion in a deeper way was like dialing the last number on a combination lock allowing the lock to fall open.

Now I shall speak of the healing work itself, the Scriptural and interpersonal or relational work aimed at the restoration of communion. In this short paper, I shall focus on what stands out for me.

<u>Secrecy</u>. Secrecy must be broken. First, a post-abortive woman's relation to herself, her state of communion with the experience of her own soul, may well be broken or unconsciously through denial or dissociation.¹⁷ Other issues and core struggles affect the efforts to heal. Paradoxically, restoration of connection to oneself requires coming out of hiding and the presence of a witnessing, prayerful, and supportive other. This other needs likewise to be committed to the journey ahead and will not deflect, judge, or minimize. Eventually, the woman will need to communicate with God and with her child. Thinking of my choice to abort, one of the most heart-wrenching aspects is that, in addition to not seeking counsel or advice from anyone, I also did not pray. Prior to beginning the formal work with Lisa, my priest had suggested I write a letter to my child. Naming my daughter, Anna Ruth, and writing this letter were the beginning of acknowledging her personhood. I am fully convinced that until I related to my daughter as a person, I was not able to fully relate to myself as a person.

<u>Confession</u>: Two aspects of confession are important. In what could be called the therapeutic work of confession (to be done in a post-abortion healing setting, therapy, even Twelve Step) one needs to be able to discuss not only the abortion itself but also go into any feelings, especially of depression and anger. One needs to be able to talk about relationships and even about one's hopes and dreams. Second, is the sacrament of confession wherein one takes responsibility ¹⁸ for this choice without making excuses or blaming others and receives absolution. The sacramental and mystical elements are key. ¹⁹ When I think of this need to bring the confession to Christ, I believe one element is that the pain, grief, injury, and guilt are so great that only Christ can bear it, and only Christ can truly absolve, heal, and set one on the path to renewed life.

Receiving and Giving Forgiveness: Some women after receiving absolution, in whatever context, do not "feel" forgiven or struggle to forgive themselves. I shall speak personally of

¹⁶ Fern Buzinski, *Portraits, Unveiled Freedom: Hope for Healing After Abortion* (NW Canton, OH: Regency House Publishing, 1982).

¹⁷ For a treatment of the spiritual implications of dissociation, Steven-John M. Harris, *To Be or Not to Be, Explorations in Madness and Faith,* (Alhambra, CA: Sebastian Press, 2020), 29.

¹⁸Paradigms of taking responsibility for me are King David, "I have sinned against the Lord," 2 Kg2:13, the Prodigal Son, "Father, I have sinned against heaven and before you, and am no longer worthy to be called your son," Lk 15:18-19a. and the thief on the cross, "we receive the due reward of our deeds" Lk 23:41.

¹⁹ Levine, "Moral Injury,"126.

what has helped me, what I call the "taste of forgiveness" which speaks to how intertwined are the giving and receiving of forgiveness. It goes without saying that forgiving another person does not mean returning to a harmful situation. For too many years, I related to the hurt I had received from my parents by blaming them or making excuses for my own misdeeds. Through the healing work of intending to and working towards forgiveness of them, I received a gift. I believe all forgiveness both of ourselves and when we become able to forgive others, is a gift of grace. In acknowledging the reality of my own daughter and the abortion, I began to feel very grateful to my parents for giving me life. Moreover, I felt a true desire that they not be burdened with any guilt or shame for hurting me and also wanting to, as we say in Orthodoxy, repent for them, to take the burden of their missteps upon myself. Feelings of resentment, anger, and hurt were lifted. I believe through this gift, in small part, I am able to experience how Christ, who is the true giver of our life, relates to us, wanting to lift from us the burdens of shame and guilt and wanting to, if we let Him, heal the hurts and repair the harms to life both for us and through us.²⁰

<u>Grieving</u>: Grieving may be present all through this process. Space must be made for this grief. Remnants of shame and guilt may become obstacles to grieving so the healing process²¹ may be going from moments of grieving to moments of confession and forgiveness. So many women have felt that they don't deserve to grieve the loss of the earthly life of their child.²² Important moments for me were the memorial service that was held for my daughter toward the conclusion of this work and the Akathist prayer service held in our Church in conjunction with the March for Life. The grief was finally able to flow freely.

<u>Welcoming and Taking Up New Life</u>: Life wants to live! Through the healing process, there has been a re-connection to life, not as though the abortion had not happened but a return to the innocent embrace of life that was given up for lost. I do anticipate ever-deepening layers of repentance and further moments of grief. But the same God who brings a person to this work will carry the person forward to an even fuller life.

Conclusion

I hope that this paper brings forward the need for clinicians to be aware of the possibility that what shows up in therapy may be linked to abortion, to assess appropriately, and to have athand referrals for spiritual needs. Again, due to secrecy, stigma, and the need to maintain denial, abortion is often kept secret even in therapy. ²³

²⁰ To expand a bit on the issue of forgiveness of self, writings on moral injury stress the hurdle of self-forgiveness and its importance to healing. See Tara C. Carleton Snodgrass, *Moral Injury*, 118. What has also helped me is rather than speaking in the language of self-forgiveness, to relate to myself with compassion and acceptance.

²¹ Burke, Forbidden Grief, 249.

²² Mathewes-Green, Real Choices, 100, Burke, Forbidden Grief, 49

²³ Mathewes-Green, Real Choices, 96 and Burke, Forbidden Grief, 60.

For those in a more clerical role, I recommend involvement in Orthodox Christians for Life,²⁴ a recently revitalized organization aimed at serving the abortion-vulnerable but also at bringing abortion into the conversation of the parish in order to begin to break down the walls of stigma and secrecy. As a parish ministry affiliated with OC Life, each parish needs to be aware of resources for post-abortion healing.

Through my experience, I have come to believe that rather than being condemned, God has and is doing everything in His power to bring me and other post-abortive women into full Communion, to nurture and protect the personhood of both the mother and the child which are so inextricably bound, and to invite and support the ever-newness of life.

²⁴ <<u>oclife.org</u>>