Psychological knowledge production about abortion: the politics of location and representation

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ABSTRACT

Background Despite considerable psychology research being conducted on abortion, there has been no study of the history of psychological knowledge production on the topic. The aim of our research was to analyse journal articles published in English language psychology journals using a politics of location and of representation analytical lens.

Study design A systematic search for articles published on abortion in psychology journals from 1960 to 2015 was conducted. A mixedmethod approach (content analysis and narrative review) was used to analyse the dataset. Articles were coded according to: decade of publication, region, types of research conducted, and main issues focused on. A narrative review of the dominant issue researched – psychological consequences – in two decades (the 1970s and 2000s) was conducted.

Results Knowledge production began in the 1970s in most regions featured in the dataset and in the 1990s in South Africa. Research is dominated by quantitative studies conducted in North America and Europe concerning the demarcation of psychological consequences of abortion performed under safe conditions. In the 1970s, abortion was viewed as leading to benign psychological consequences, but by the 2000s traumatology talk was firmly entrenched. Only one article, emanating from South Africa, addressed the question of unsafe abortion.

Conclusions Knowledge production in psychology needs to move beyond a narrow focus on the psychological consequences of abortion and attitudes to abortion. Nuanced, contextualised research of the psychology of both safe and unsafe abortion is necessary.

INTRODUCTION

The importance of viewing abortion in context has recently been highlighted. 12

Key messages

- North American positivist research has set the parameters for psychology research, allowing little space for nuanced, contextual understandings.
- ➤ The dominance of research on psychological consequences following abortion has allowed for an antiabortion frame extension which affects policy and service delivery.
- The lack of attention to the psychological consequences of unsafe abortion needs to be addressed.

In this article, we investigate, using a lens of the politics of location and representation, the context of knowledge production about abortion within psychology journals. This context is important as psychological understandings of abortion filter into not only policy discussions but also healthcare provision.³ To our knowledge, there has been no investigation of the history of psychological knowledge production on abortion.

An analysis of the politics of location involves understanding how location may work to foreground particular readings while undermining or silencing others. In this article, location refers to how knowledge generation is enabled and circumscribed by sociohistorical and sociogeographic issues.⁴

The politics of representation refers to an analysis of *how* people or constructs are represented. Denzin and Lincoln⁵ indicate that such an analysis allows scholars to see how text creates the world – in other words, how context is constructed. In this article, we analyse the ways that abortion, as a practice



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and construct, is represented in psychology journal articles.

METHODS

We conducted a systematic search for literature on abortion published in psychology journals in the following databases: Health Source Nursing/Academic, Medline, PsycArticles, PsycINFO, SocIndex. We restricted the search to the years 1960 (the decade before *Roe v Wade*) through to 2015 and to journal articles.

The search terms were 'termination of pregnancy' or 'abortion' or 'medical termination' or 'surgical termination' in the key words, and 'psychology', 'psychological' or 'psychologist' in the source (ie, journal title). The restriction of our search to journals with the title 'psychology' (or derivatives) is clearly a limitation: papers dealing with psychology and abortion may be published in journals without psychology (or its derivatives) in their titles. Nevertheless, we retained this restriction to ensure that the articles sourced were definitely within the field of psychology. The initial search yielded 360 results. After two authors excluded duplicates and articles where abortion was not the main problematic, 166 articles were analysed and coded (see full list in the online supplementary files).

We have not excluded articles on the basis of the quality of the research conducted. Our inclusion of articles that have since been criticised methodologically (see discussion below) is important because these articles are nevertheless part of psychological knowledge production and their legacy is still evident. And it is precisely this legacy that we address in this article. In addition, as the data are journal articles in the public domain, no ethical clearance was necessary for this study.

Data were coded as follows: (1) politics of location: decade of publication; regions studies were conducted; regions of first author affiliation and (2) politics of representation: types of research conducted; main topic focused on. An initial code book for (2) was developed independently by the second and third

authors, after reading through the data. The two code books were compared and a final one decided on by all the authors.

The second and third authors coded the data independently. The level of agreement for codes in which judgement was required were: types of research (92.1%; Scott's pi 0.85); main topics researched (71.1%; Scott's pi 0.61). This resulted in 61 disagreements in coding. These were resolved through discussion involving all the authors. We analysed the coded material using frequency counts and cross-tabulations.

We homed in on the dominant issue researched as revealed in our quantitative analysis: the psychological consequences of abortion. We conducted a qualitative narrative review of articles appearing within this code in two decades – the 1970s and 2000s – to reflect earlier and later representations (the 2000s being the last full decade in the dataset). This involved reading and re-reading the texts and drawing out major themes across the two periods.

Patient and public involvement

No patients were involved in the design of this research.

RESULTS

The politics of location: when and where knowledge is generated

Psychology research interest in abortion emerged in the 1970s, with most attention being paid to the issue in the 1990s. Zero articles appeared in the 1960s, 15.7% of the dataset in the 1970s, 22.9% in the 1980s, 30.7% in the 1990s, 24.1% in the 2000s and 6.6% in 2010–2015.

Knowledge production is dominated by research conducted in North America, with over half of the articles being generated in this context (table 1). All articles generated in sub-Saharan Africa come from South Africa.

Table 2 shows that knowledge about abortion in the 1970s was predominantly produced in North America

Table 1 Region in which the research was conducted and region of first author affiliation								
Region	Frequency (research)	Percentage (research)	Frequency (author affiliation)	Percentage (author affiliation)				
North America	88	53.0	94	56.6				
Europe	22	13.3	26	15.7				
Sub-Saharan Africa	11	6.6	11	6.6				
Mixed	5	3.0	7	4.2				
Australia/New Zealand	4	2.4	5	3.0				
Asia	3	1.8	3	1.8				
Middle East	1	0.6	1	0.6				
Latin America/Central America/North Africa/Eurasia/Oceanic	0	0	0	0				
Unclear/not applicable	32	19.3	19	11.4				
Total	166	100	166	100				

Original research

Table 2 Cross-tabulation: decade by region of first author affiliation									
Decade	North America	Europe	Sub-Saharan Africa	Mixed	Australia/ New Zealand	Middle East	Asia	Unclear	Total
1970s	65.4 (17)	3.9 (1)	0	0	15.4 (4)	0	0	15.4 (4)	100%, n=26
1980s	63.2 (24)	15.8 (6)	0	0	0	2.6 (1)	2.6 (1)	15.8 (6)	100%, n=38
1990s	68.6 (35)	9.8 (5)	3.9 (2)	3.9 (2)	0.	0	2.0 (1)	11.8 (6)	100%, n=51
2000	37.5 (15)	17.5 (7)	22.5 (9)	10.0 (4)	2.5 (1)	0	2.5 (1)	7.5 (3)	100%, n=40
2010–2015	27.3 (3)	63.6 (7)	0	9.1 (1)	0	0	0	0	100%, n=11

Data are given as percentage (n).

(17 articles). The dominance of North America in knowledge production continued into the 1990s (35 articles in that decade). Knowledge production from Europe and sub-Saharan Africa (South Africa) increased proportionally to other regions in the 2000s compared with previous decades.

The politics of representation: type of research and issues studied

Empirical quantitative methods dominate (69.3%). Over the full timespan, only 9% of articles use qualitative methods, 9.6% are reviews, 9.6% are commentaries, 1.2% mixed methods and 1.2% theoretical.

Two topics dominate knowledge production: the psychological consequences of abortion (41%) and attitudes towards abortion (28.9%). Abortion decision making (10.2%), abortion services (6%), the factors associated with abortion(4.8%), the experience of abortion (4.2%), the incidence of abortion (3%) and unsafe abortion (0.6%) received scant attention over the years.

Linking the politics of location and of representation

A cross-tabulation of decade by type of research showed that empirical quantitative articles dominated throughout the decades (lowest at 63.2% in the 1980s and 76.9% in the 1970s). Qualitative articles only started to appear in the 1980s (5.3% of articles), with 27.3% of articles appearing in the last 6 years being qualitative.

In table 3 results of the cross-tabulation of decade and main topic are presented. The proportion of articles dedicated to the psychological consequences of abortion has steadily increased from the 1970s to the 2000s, with the trend continuing in the last 6 years. Over the decades, the proportion of articles

exploring attitudes to abortion has varied from about a quarter to a third (minimum eight and maximum 15 articles in a single decade). The proportion of articles concentrating on the experience of abortion has steadily increased, a trend that may be associated with the increase in articles using qualitative methodologies.

A cross-tabulation of region of first author affiliation and type of research shows a dominance of quantitative research written by authors from North America with only 2.1% of articles being qualitative. In contrast, 53.9% and 23.1% of the articles by European-based first authors were quantitative and qualitative, respectively, while in South Africa the trend is reversed (27.3% and 45.5%, respectively).

In table 4A cross-tabulation of regions in which more than 10 articles over the period under review were produced (understood through first author affiliation) and main topic is presented. Similar levels of interest in the psychological consequences of abortion are noted across the three main regions. Outside of this main issue, European authors appear to have concentrated on attitudes to abortion, while North American writers have tackled a range of topics. The only article tackling unsafe abortion emanated from South Africa.

Representations of the psychological consequences of abortion in the 1970s and 2000s

In this section we outline how the dominant topic of research as revealed in the above analysis was approached in the 1970s and 2000s. This snapshot provides a brief insight into developments in constructions of this topic. Given space constraints, this analysis is necessarily truncated.

Table 3 Cross-tabulation: decade by main issue studied								
Decade	Psychological consequences	Attitudes	Decision making	Services	Factors	Experience	Other	Total
1970s	34.6 (9)	30.8 (8)	11.5 (3)	11.5 (3)	3.9 (1)	0	7.7 (2)	100%, n=26
1980s	39.5 (15)	23.7 (9)	15.8 (6)	5.3 (2)	10.5 (4)	2.6 (1)	2.6 (1)	100%, n=38
1990s	43.1 (22)	29.4 (15)	11.8 (6)	3.9 (2)	2.0 (1)	3.9 (2)	5.9 (3)	100%, n=51
2000s	42.5 (17)	32.5 (13)	5.0 (2)	2.5 (1)	5.0 (2)	7.5 (3)	5.0 (2)	100%, n=40
2010–2015	45.5 (5)	27.3 (3)	0	18.2 (2)	0	9.1 (1)	0	100%, n=11

Data are given as percentage (n).

 Table 4
 Cross-tabulation: three main regions by main issue studied

Region	Psychological consequences	Attitudes	Decision making	Services	Factors	Experience	Other (incidence, unsafe)	Total
North America	37.5. (33)	27.3 (24)	15.9 (14)	4.5 (4)	4.5 (4)	4.5 (4)	5.7 (5)	100%, n=88
Europe	63.6 (14)	22.7 (5)	0	4.5 (1)	0	9.1 (2)	0	100%, n=22
South Africa	45.5 (5)	18.2 (2)	0	9.1 (1)	9.1 (1)	9.1 (1)	9.1 (1)	100%, n=11

Data are given as percentage (n).

Research on the psychological consequences of abortion appearing in the 1970s, all of which emanated from the United States in the decade in which abortion was legalised, for the most part indicates that there are no or few negative outcomes. Gordon⁶ and Shusterman⁷ conducted literature reviews of studies concerning the psychological outcomes of abortion. After critiquing the methodologies of some studies (lack of adequate control group) and pointing to the falsity of comparing studies conducted in different cultural and legal contexts, Gordon concluded that "legal abortion has few serious psychological sequelae" (p.45). Shusterman's review, which included studies on the medical and psychological consequences of abortion, reached a similar conclusion: "the psychological consequences of abortion on request appear to be mostly benign" (p. 79). Adler⁸ suggested, however, that methodologically studies are unlikely to pick up women who experience negative consequences.

Authors sought to locate the suggestion of inevitable psychological consequences following abortion within reproductive and gendered context. Thus, Gordon⁶ postulated that any "inroad on a person's body" (p.39), including birth, has some psychological component. Shusterman⁷ indicated that emotional responses are related to the attitudes of medical staff to women presenting for abortion. Fingerer⁹ argued that anticipation of depression is associated with "society's acceptance of the 'motherhood myth', that is that woman's highest function is to be a good mother" (p.223-4). Martin¹⁰ investigated the influence, inter alia, of women's relationship with the male responsible for the pregnancy, parents, siblings, and peers, religious and moral convictions, and medical care on psychological responses to abortion.

Methodological critiques were accompanied by debates about the best way to measure psychological sequelae. Robbins¹¹ argued that there was no relation between objective measures, such as the Minnesota Multiphasic Personality Inventory, and women's self-report, concluding that "affectivity reported by some women after induced abortion may have little impact on overall psychological functioning" (p.994). Gayton *et al*¹² suggested that while "the majority of women who receive abortions seldom manifest serious psychiatric sequalae" (p.649), a screening instrument such as the Mini-Mult was necessary for high-risk cases.

By the 2000s the notion of abortion potentially constituting a form of trauma had taken firm root. Much research was conducted to explore the factors associated with post-traumatic symptomatology following abortion, ^{13–15} including "recognition of the life of the fetus, attachment" (pp.14, 41). The term post-abortion syndrome was taken up as a real clinical diagnosis in the description of therapeutic cases. ¹⁶

The range of consequences researched expanded considerably to include not only anxiety and depression, but also difficulties maintaining committed relationships, sexual dysfunction, ¹⁷ quality of child-caring and children's development, ¹⁸ substance use, ¹⁹ attachment styles, ²⁰ grief, ²¹ self-efficacy, ²² suicidal behaviour, ²³ shame, embarrassment, guilt, and moral concerns. ²⁴ Some research homed in on young women or minors specifically, ²³ ²⁵ and reviews of the evidence were conducted. ^{26–28}

There was, however, also dispute concerning the use of the term post-abortion syndrome.²⁹ Researchers pointed to the methodological weaknesses in studies that found negative psychological consequences.²⁸ Others argued that there were a diversity of responses,²⁶ and that reactions are located in social context,³⁰ including a history of violence and abuse.³¹

The entrenchment of traumatology talk and the increase in the kinds of negative consequences envisaged and researched meant that significant labour was necessary to undermine such claims. To this effect, a major study was commissioned by the American Psychological Association. ²⁸ The researchers pointed to many methodological flaws in studies. They concluded that the most rigorous research showed that "the relative risk of mental health problems among adult women who have a single, legal, first-trimester abortion of an unwanted pregnancy is no greater than the risk among women who deliver an unwanted pregnancy" (p.863).

DISCUSSION

Politics of location: time and region of knowledge production

The absence of articles in the 1960s (particularly from North America that has dominated knowledge production from the 1970s until recently), and the absence of articles emanating from South Africa until the 1990s, may point to a trend whereby psychology researchers begin to engage with abortion as a research topic only once it was legitimised through the legalisation of

abortion. The *Roe v Wade* landmark case in 1973 in the United States, and the South African Choice on Termination of Pregnancy Act (Act No. 92 of 1996), may have provided the impetus for psychology researchers to engage with abortion in these regions.

The lack of engagement by psychology researchers with unsafe and illegal abortion may have to do with a range of factors: such research becomes publicly acceptable and fundable with the liberalisation of legislation; there are complicated legal and ethical issues attached to researching an illegal activity; and participants are difficult to reach under restrictive legislation.

The lack of substantive engagement by psychology researchers from Australia and Aotearoa/New Zealand requires a somewhat different explanation. Abortion law varies in Australia by state, from liberal legislation allowing abortion on request to restrictive legislation allowing abortion to protect the woman's health. Aotearoa/New Zealand also has restrictive legislation. Thus, in addition to the above explanation, the relative paucity of psychological knowledge production on abortion may be connected to the role that abortion plays in the region's political imagination. While abortion forms part of public debate in these countries, it is not embedded as a highly contested and volatile issue in the national political imagination as occurs in the United States (Shona Crabb, Gareth Treharne, personal communications, 2018).

The dominance of North American and European knowledge about abortion is possibly not surprising, given the global allocation of research and publication resources and the fact that we accessed English language journals. This dominance does, however, has implications for what kinds of knowledge are produced, which we address next.

Politics of representation: implications of dominant knowledge production

Knowledge about abortion in psychology has been produced mainly through empirical quantitative research. While it is obvious that only certain questions can be answered by particular methodologies, there is a paucity of qualitative research, which allows for nuanced and in-depth investigation of the complexities of abortion.

The main topic researched is the psychological consequences of abortion. Relative interest in the topic has increased over the decades, and it has dominated research conducted across the main regions of knowledge production. A closer, qualitative look at the conclusions reached in this research in the 1970s and the 2000s reveals a remarkable shift: in the 1970s, abortion was viewed as leading, for the most part, to benign psychological consequences; by the 2000s there was a firm entrenchment of traumatology talk, the extension of consequences to a range of difficulties, and vigorous scientific debate regarding whether abortion is, indeed, psychologically deleterious.

Indeed, much energy has been spent on highlighting the methodological flaws of papers that purport to show that abortion leads to mental difficulties. For example, Steinberg and colleagues³ (not included in our dataset) indicates the following regarding Priscilla Coleman's and colleagues' work: "Here we detail seven errors of this meta-analysis and three significant shortcomings of the included studies because policy, practice and the public have been misinformed. These errors and shortcomings render the meta-analysis' conclusions invalid" (p.430). This kind of work is important in highlighting the interconnection of the politics of representation in knowledge production and fraught national politics concerning abortion care.

What is remarkable, though, is that knowledge production about the psychological consequences of abortion does not extend to tackling abortion that is performed under unsafe or illegal conditions. An estimated 6.9 million women in the so-called developing world were treated for complications from unsafe abortion in 2012 (this excludes those who did not report to a healthcare facility). Only *one* article, emanating from South Africa, in the full dataset addressed the question of unsafe abortion.

Implications

The combination of the consistent dominance of North American and of quantitative research on the psychological consequences of abortion means that the terms of the debate have been narrowly defined. Given its dominance, North American positivist research sets the parameters within which other psychology research may be judged. Diverse norms and ways of understanding abortion have to battle in the field of the politics of representation and location to gain legitimacy. Research that locates women's decision-making processes, and responses to an abortion, within gendered sociocultural norms and contexts are few and far between.

The concentration on the psychological consequences of abortion is associated with what Trumpy³³ calls a frame extension in anti-abortion activism, whereby scientific psychological language is used to move beyond a focus on fetal rights to a pro-woman frame in which it is argued that women's right to mental health is being undermined through abortion. While this narrative is strongly opposed by some researchers, as noted, it remains entrenched within the public imagination in many spaces.

The lack of attention to the psychological consequences of unsafe abortion is noteworthy, given the likelihood of trauma facing women who have to access abortion in these conditions: procuring the abortion in secret, undergoing an unsafe procedure, dealing with physical complications that may result from the abortion, contemplating the possibility of arrest given the illegal status of the abortion, and coping with significant stigma should the abortion be found out.

Contributors All authors contributed to the conceptualisation of the article. JM and MC collected and analysed the data, and commented on drafts of the article. CM wrote the first draft of the article and managed revisions. RT assisted with data analysis and commented on drafts of the article.

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REFERENCES

- 1 Marecek J, Macleod C, Hoggart L. Abortion in legal, social, and healthcare contexts. Fem Psychol 2017;27:4–14.
- 2 Marecek J, Macleod C, Hoggart L. Abortion embedded and embodied in social relations: challenges for feminist psychology. *Fem Psychol* 2017;27:133–43.
- Steinberg JR, Trussell J, Hall KS, et al. Fatal flaws in a recent meta-analysis on abortion and mental health. Contraception 2012;86:430-7.
- 4. Giroux H. Paulo Freire and the politics of postcolonialism. In: Kempf A, ed. *Breaching the colonial contract*. Amsterdam, Netherlands: Springer, 2009: 79–89.
- 5. Denzin N, Preface LYDenzin N, Lincoln Y, New York NY, eds. *The SAGE handbook of qualitative research*. 4th edn. US: SAGE, 2011: ix–xv.
- Gordon A. Psychological sequelae of abortion. NZ Psychol 1976;5:37–47.
- Shusterman LR. The psychosocial factors of the abortion experience: a critical review. *Psychol Women Q* 1976;1:79– 106.
- Adler NE. Sample attrition in studies of psychosocial sequelae of abortion: how great a problem?1. *J Appl Soc Psychol* 1976;6:240–59.
- 9. Fingerer ME. Psychological sequelae of abortion: anxiety and depression. *J Community Psychol* 1973;1:221–5.
- Martin CD. Psychological problems of abortion for the unwed teenage girl. Genet Psychol Monogr 1973;88:23–110.
- 11. Robbins JM. Objective versus subjective responses to abortion. *J Consult Clin Psychol* 1979;47:994–5.
- 12. Gayton WF, Fogg ME, Tavormina J, *et al.* Comparison of the MMPI and mini-mult with women who request abortion. *J Clin Psychol* 1976;32:648–50.
- Jind L. Parents' adjustment to late abortion, stillbirth or infant death: the role of causal attributions. *Scand J Psychol* 2003;44:383–94.
- Mufel N, Speckhard AC, Sivuha S. Predictors of posttraumatic stress disorder following abortion in a former Soviet Union country. J Prenat Perinat Psychol Heal 2002;17:41–61.
- van Emmerik AAP, Kamphuis JH, Emmelkamp PMG.
 Prevalence and prediction of re-experiencing and avoidance

- after elective surgical abortion: a prospective study. *Clin Psychol Psychother* 2008;15:378–85.
- Boulind M, Edwards D. The assessment and treatment of post-abortion syndrome: a systematic case study from southern Africa. *Journal of Psychology in Africa* 2008;18:539–47.
- 17. Coleman PK, Rue VM, Spence M, et al. Abortion and the sexual lives of men and women: is casual sexual behavior more appealing and more common after abortion? Int J Clin Heal Psychol 2008;8:77–91.
- Coleman PK, Reardon DC, Cougle J. The quality of the caregiving environment and child developmental outcomes associated with maternal history of abortion using the NLSY data. J Child Psychol Psychiatry 2002;43:743–57.
- Coleman PK, Reardon DC, Cougle JR. Substance use among pregnant women in the context of previous reproductive loss and desire for current pregnancy. *Br J Health Psychol* 2005;10:255–68.
- Cozzarelli C, Karafa JA, Collins NL, et al. Stability and change in adult attachment styles: associations with personal vulnerabilities, life events. and global construals of self and others. J Soc Clin Psychol 2003;22:315–46.
- Speckhard A, Mufel N. Universal responses to abortion? Attachment, trauma, and grief responses in women following abortion. J Prenat Perinat Psychol Heal 2016;18:3–37.
- Faure S, Loxton H, Anxiety LH. Anxiety, depression and selfefficacy levels of women undergoing first trimester abortion. S Afr J Psychol 2003;33:28–38.
- Fergusson DM, Horwood LJ, Ridder EM. Abortion in young women and subsequent mental health. *J Child Psychol Psychiatry* 2006;47:16–24.
- Mojapelo-Batka EM, Schoeman JB. Voluntary termination of pregnancy: moral concerns and emotional experiences among black South African adolescents. S Afr J Psychol 2003;33:144– 53.
- Quinton WJ, Major B, Richards C. Adolescents and adjustment to abortion: are minors at greater risk? *Psychol Public Policy Law* 2001;7:491–514.
- Bradshaw Z, Slade P. The effects of induced abortion on emotional experiences and relationships: a critical review of the literature. *Clin Psychol Rev* 2003;23:929–58.
- Coleman PK, Reardon DC, StrahanT, et al. The psychology of abortion: a review and suggestions for future research. Psychol Health 2005;20:237–71.
- 28. Major B, Appelbaum M, Beckman L, *et al.* Abortion and mental health: evaluating the evidence. *Am Psychol* 2009;64:863–90.
- 17 Macleod C. Why We Should Avoid the use of the Term "Post-Abortion Syndrome": Commentary on Boulind and Edwards (2008). *Journal of Psychology in Africa* 2009;19:423–7.
- 30. Goodwin P, Ogden J. Women's reflections upon their past abortions: an exploration of how and why emotional reactions change over time. *Psychol Health* 2007;22:231–48.
- Russo NF, Denious JE. Violence in the lives of women having abortions: implications for practice and public policy. *Prof Psychol* 2001;32:142–50.
- 32. Sedgh G, Bearak J, Singh S, *et al.* Abortion incidence between 1990 and 2014: global, regional, and subregional levels and trends. *The Lancet* 2016;388:258–67.
- Trumpy AJ. Woman vs. fetus: frame transformation and intramovement dynamics in the pro-life movement. *Sociol Spectr* 2014;34:163–84.