

## Setting the Record Straight: The Facts on Some Popular Myths About Abortion

*Some anti-abortion activists, in their efforts to undermine women's reproductive choice, distort the facts about abortion. Here are some of the more widely disseminated falsehoods about abortion, followed by a discussion of the responses of the medical, public health and scientific communities.*

**MYTH:** **Women will have fewer abortions if abortion is prohibited or restricted.<sup>1</sup>**

Anti-abortion activists assert that prohibiting or restricting the availability of abortion will lead women to carry unwanted pregnancies to term.

**REALITY:** **Women who need to end an unwanted pregnancy will find a way to do so, whether abortion is legal or not.**

Of the roughly 46 million abortions that occur worldwide each year, 19 million are illegal.<sup>2</sup> In Indonesia, where abortion is prohibited except to save a woman's life, it is estimated one to two million abortions are performed annually.<sup>3</sup> In Ireland, where abortion is similarly prohibited, 7,000 Irish women travel to England or Wales each year to have a legal procedure.<sup>4</sup> In the United States, where abortion was generally illegal prior to 1973, data from the 1950s and 1960s shows that an estimated 700,000 to 800,000 illegal abortions took place each year.<sup>5</sup> It is worth noting that where abortion is restricted or prohibited, women faced with an unwanted pregnancy are often forced to resort to untrained providers or to self induce abortion, which puts them at great risk of injury or death. WHO estimates that unsafe abortion accounts for 13% of the over half a million maternal deaths worldwide each year.<sup>6</sup>

It is not liberal abortion laws that prompt women to have abortions. Rather, it is the reality of living with an unwanted pregnancy. Nearly 40% of all pregnancies are unplanned.<sup>7</sup> Access to family planning would do far more to reduce abortion rates than would restrictive legislation on abortion. In Eastern Europe and the Former Soviet Republics, the widespread unavailability until recently of modern contraceptive methods resulted in high abortion rates.<sup>8</sup> In countries such as Kazakhstan, however, increased contraceptive use over the last decade is already leading to significantly lower abortion rates.<sup>9</sup> Governments can step up their efforts to prevent unwanted pregnancy while ensuring that safe and legal abortion is available to every woman who chooses to terminate a pregnancy.

**MYTH: Abortion increases the risk of breast cancer.<sup>10</sup>**

To undermine public support for legal abortion and to deter women from seeking the procedure, some anti-choice activists claim that abortion increases women's risk of breast cancer.

**REALITY: Scientific evidence shows that abortion does not increase the risk of breast cancer.**

Several scientific studies have examined the alleged link between abortion and breast cancer. The evidence has shown that abortion does not increase the risk of the disease. The World Health Organization (WHO) and several national medical associations in the United States have reached the same conclusion.<sup>11</sup>

The most methodologically-rigorous study on the issue to date was conducted by a team of Danish medical researchers in the late 1990s.<sup>12</sup> The study examined the official medical records of over one million Danish women and concluded that induced abortions have no overall effect on the risk of breast cancer.<sup>13</sup> Several subsequent well-regarded international studies have also used record-based research methods to examine the issue in different populations. Like the Danish study, these have all concluded that there is no relationship between abortion and breast cancer.<sup>14</sup>

**MYTH: Women who have had abortions experience psychiatric problems such as severe depression and bipolar disorder, otherwise characterized as "post-abortion syndrome."<sup>15</sup>**

For the past two decades, groups opposed to abortion have alleged the existence of so-called "post-abortion syndrome," which they claim is a severe post-traumatic condition suffered by women who have had abortions.

**REALITY: Mainstream medical opinions agree that there is no such thing as "post-abortion syndrome."**

Studies on the possible effects of abortion on women's emotional well-being have repeatedly shown that there is no scientific or medical evidence to support the existence of "post-abortion syndrome."<sup>16</sup> The studies have found that the major predictor of a woman's well-being after an abortion is her level of well-being prior to becoming pregnant.<sup>17</sup> They have also concluded that while some women may experience regret, sadness or guilt after an abortion, the overwhelming responses are positive feelings of relief and happiness.<sup>18</sup>

## *The Facts on Some Popular Myths About Abortion*

**MYTH: Emergency contraception is a form of abortion.<sup>19</sup>**

Activists opposed to reproductive choice have not only tried to block access to safe abortion services, but they have attempted to deny women the means to prevent unwanted pregnancy. As a strategy to restrict access to emergency contraception (EC), for example, they have equated this contraceptive method with abortion.

**REALITY: Emergency contraception is used to prevent a pregnancy after sex, while abortion is used to terminate a pregnancy.**

WHO describes EC as “contraceptive methods that can be used by women in the first few days following unprotected intercourse to prevent an unwanted pregnancy.”<sup>20</sup> EC includes emergency contraceptive pills, which are generally taken within 72 hours of unprotected sex, and the copper-T intrauterine device, which may be inserted up to five days after unprotected sex.<sup>21</sup> While EC has been thought to prevent pregnancy in a variety of ways, depending on where a woman is in her menstrual cycle at the time she uses EC,<sup>22</sup> recent scientific research indicates that the most popular method of EC appears to work by preventing a woman from ovulating.<sup>23</sup> No form of EC is effective once implantation has begun, meaning that EC cannot interfere with an existing pregnancy as abortion does.<sup>24</sup>

Countries worldwide have approved of EC as a contraceptive measure, either by licensing existing drugs or approving new drugs for use as EC, incorporating EC into government-regulated family planning services or into protocols for treating sexual assault survivors, or endorsing EC through publicity and information campaigns.<sup>25</sup> Several countries that permit EC, including Brazil, Colombia, El Salvador, Kenya, Pakistan, Thailand, and Venezuela, have highly restrictive abortion laws, revealing an understanding of EC as distinct from abortion.<sup>26</sup>

**ENDNOTES**

- 1 Cynthia Dailard, *Abortion in Context: United States and Worldwide*, ISSUES IN BRIEF (Alan Guttmacher Institute), 1999, No. 1, available at [http://www.guttmacher.org/pubs/ib\\_0599.pdf](http://www.guttmacher.org/pubs/ib_0599.pdf).
- 2 WORLD HEALTH ORGANIZATION (WHO), UNSAFE ABORTION 1 (2004), available at [http://www.who.int/reproductive-health/publications/unsafe\\_abortion\\_estimates\\_04/estimates.pdf](http://www.who.int/reproductive-health/publications/unsafe_abortion_estimates_04/estimates.pdf).
- 3 *Proposed Projects and Programmes, Recommendations of the General Director, Assistance to the Government of Indonesia*, U.N. Doc. DP/FPA/INS/6 (2000), available at <http://www.unfpa.org/asiapacific/indonesia/6ind0105.pdf>.
- 4 Susan A. Cohen, *Envisioning Life Without Roe: Lessons Without Borders*, GUTTMACHER REPORT ON PUBLIC POLICY (Alan Guttmacher Institute), May 2003, vol. 6, No. 2, at 3, available at <http://www.guttmacher.org/pubs/tgr/06/2/index.html>.
- 5 *Id.*
- 6 WHO, *supra* note 2, at 13.
- 7 *Id.* at 1.
- 8 Cohen, *supra* note 4, at 5.
- 9 *Id.*
- 10 See Center for Reproductive Rights, *Yet Another Anti-Abortion Scare Tactic: False Claims of Breast Cancer Risk* (April 2004), at [http://www.reproductiverights.org/pub\\_fac\\_brcancer.html](http://www.reproductiverights.org/pub_fac_brcancer.html).
- 11 World Health Organization (WHO), *Factsheet No. 240: Induced Abortion does not Increase Breast Cancer Risk* (June 2000), at <http://www.who.int/mediacentre/factsheets/fs240/en>. See American Cancer Society, *Can Having an Abortion Cause or Contribute to Breast Cancer?* (last modified Oct. 6, 2004), at  [\(July 31, 2003\), at \[http://www.acog.org/from\\\_home/publications/press\\\_releases/nr07-31-03-2.cfm?\]\(http://www.acog.org/from\_home/publications/press\_releases/nr07-31-03-2.cfm?\)](http://www.cancer.org/docroot/CRI/content/CRI_2_6x_Can_Having_an_Abortion_Cause_or_Contribute_to_Breast_Cancer.asp?sitearea; National Breast Cancer Coalition, Position Statement on Abortion and Breast Cancer Risk</a> (last modified May 2005), at <a href=)
- 12 Mads Melbye et al., *Induced Abortion and the Risk of Breast Cancer*, 336 NEW ENG. J. MED. 81 (1997).
- 13 *Id.*
- 14 See, e.g., M. Sanderson et al., *Abortion History and Breast Cancer Risk: Results From the Shanghai Breast Cancer Study*, 92 INT'L J. CANCER 899 (2001); Ye Z et al., *Breast Cancer in Relation to Induced Abortions in a Cohort of Chinese Women*, 87 BRIT. J. CANCER 977 (2002).
- 15 National Abortion Federation, *Abortion Myths: Post-Abortion Syndrome*, at [http://www.prochoice.org/about\\_abortion/myths/post\\_abortion\\_syndrome.html](http://www.prochoice.org/about_abortion/myths/post_abortion_syndrome.html) (last visited Aug. 8, 2005).
- 16 See Rene Almeling & Lauren Tews, National Abortion Federation, *Fact Sheet: Post Abortion Issues* (1999), at [http://www.prochoice.org/about\\_abortion/facts/post\\_abortion\\_issues.html](http://www.prochoice.org/about_abortion/facts/post_abortion_issues.html).
- 17 *Id.*
- 18 *Id.*
- 19 See Advocates for Youth, *Emergency Contraception Myths and Facts*, at <http://www.advocatesforyouth.org/youth/health/ec/mythsfacts.htm> (last visited Aug. 8, 2005).
- 20 WHO, EMERGENCY CONTRACEPTION, A GUIDE FOR SERVICE DELIVERY 7, WHO/FRH/FPP/98.19 (1998), available at [http://whqlibdoc.who.int/hq/1998/WHO\\_FRH\\_FPP\\_98.19.pdf](http://whqlibdoc.who.int/hq/1998/WHO_FRH_FPP_98.19.pdf). WHO also states that emergency contraceptive pills (ECPs) "do not interrupt pregnancy and thus are no form of abortion." *Id.* at 20.
- 21 International Consortium for Emergency Contraception (ICEC), *What is Emergency Contraception?*, at <http://www.cecinfo.org/html/fea-what-is-ec.htm> (last visited Aug. 8, 2005).
- 22 ICEC, *Policy Statement on Mechanism of Action: How do Emergency Contraceptive Pills Work to Prevent Pregnancy?* (July 2003), at <http://www.cecinfo.org/files/ICEC%20-%20Mechanism%20of%20Action%20Policy%20Statement%202003.pdf>. EC has been reported to prevent pregnancy by inhibiting ovulation, blocking fertilization, or preventing implantation of the fertilized egg in the uterus. *Id.*
- 23 *Emergency Contraception's Mode of Action Clarified*, POPULATION BRIEFS: REPORTS ON POPULATION COUNCIL RESEARCH (Population Council), May 2005, vol. 11, No. 2, available at [http://www.popcouncil.org/publications/popbriefs/pb11\(2\)\\_3.html](http://www.popcouncil.org/publications/popbriefs/pb11(2)_3.html).
- 24 ICEC, *Policy Statement on Mechanism of Action: How do Emergency Contraceptive Pills Work to Prevent Pregnancy?*, *supra* note 22.
- 25 See CENTER FOR REPRODUCTIVE RIGHTS, GOVERNMENTS WORLDWIDE PUT EMERGENCY CONTRACEPTION INTO WOMEN'S HANDS (2004), available at [http://www.reproductiverights.org/pdf/pub\\_bp\\_govtswwec.pdf](http://www.reproductiverights.org/pdf/pub_bp_govtswwec.pdf).
- 26 *Id.* at 3.