

A Woman's Right to Choose: Counselling!

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Recently, an anonymous patient sued the NHS because she wasn't offered counselling after an abortion. Nor was she warned that psychological complications could follow the operation.

This legal action raises issues of vital concern to patients, counsellors, the NHS and tax-payers.

Few people relish abortion. Even pro-choice supporters regard it as "the lesser of two evils". But while other countries remain divided on the issue, the legal consensus in Britain has ruled that safe medical abortion ought to be available.

In the process, however, abortion has sometimes come to be regarded as a 'routine' procedure. This is a serious mistake.

Leaving aside the moral debate, an abortion is a totally different experience from having your appendix out. All personnel treating the patient should know this. The psychological issues involved are multiple and profound.

As soon as a woman is aware of any unwanted or accidental pregnancy she is forced to contemplate the immense consequences of any choice she makes.

She continues with the pregnancy and rears her child with or without help from the father.

She continues with the pregnancy and has the baby adopted.

She terminates the pregnancy.

In the first and second cases, there will be a child. She would become the mother. This act would determine many events for the rest of her days. The child would need a name and it would automatically be related to a wider group of people in at least two different families. Many of the relationships in that woman's life - and by definition the future life of the child - would at a stroke be altered.

Or if she continues with the pregnancy and then places her baby for adoption, she has to deal with the issues of detaching from baby. It is likely that she will have all the recognised symptoms of a major bereavement.

Thirdly, if she aborts, she may feel full of conflict. For most women having an abortion is not an easy option but one that is arrived at through painful dialogue with themselves and their partner. Because of this there is often strong ambivalence in the woman leading to resentment, anger and sadness. The idea of a child might awaken many deep-seated anxieties within the mother, especially if she has difficult memories from her own girlhood. Or the pregnancy's timing might come to represent a

form of doom. One woman said to us: "It's the story of my life. I always desperately wanted a baby; but not now, and not with him".

Few patients "mourn" their appendix when it is removed. Many women who choose abortion still "mourn" the lost possibilities of the life that will not be. Several years ago the privately funded Post Abortion Counselling Service was established in London to cope with these very problems. However, that leaves the rest of the nation and those who cannot pay.

Question: Do all women who undergo abortion need counselling afterwards?

No they need it before they undergo an abortion!

If Pre-Abortion Counselling is undertaken then there is less likelihood of post-abortion trauma. Pre-abortion counselling offers the opportunity for the woman and her partner to talk about how they think this termination will affect both their lives and their relationship.

Why is Abortion not treated in exactly the same way as other areas related to conception?

Counselling is part of the package offered to women/couples undergoing IVF and assisted conception.

An informed discussion is also required for those wishing to adopt a child.

Of course, the only people who should ever have formal counselling are those who say they want it. The process HAS to be voluntary. However, the British Association for Counselling and Psychotherapy very firmly believes that anyone who chooses to have an abortion should also be free to choose counselling to help cope with the emotional consequences. IT IS A BASIC COMPONENT OF "A WOMAN'S RIGHT TO CHOOSE".

NOTE: Pressurising a client to a particular course of action is fundamentally unethical and a contradiction of our profession. The idea of 'informed consent' lies at the heart of our ethical framework and a woman needs to know, for instance, that regret and guilt can follow the decision to continue OR terminate a pregnancy. Professional counselling cannot be conducted by those seeking to make converts to a cause and the moral and political views of the therapist must never be imposed upon the client. Always check if a 'counsellor' has been trained and accredited to BACP standards. Counselling doesn't happen just because somebody is 'listening'.

Abortion can carry many complex emotional responses which are often paradoxical - eg hope AND despair or relief AND bereavement. In each case individual needs need to be treated individually.

Pat Seber, an experienced counsellor, comments:

"Just as in physical appearance women are different in psychological make-up. Because abortion is not something that most women do on a regular basis but usually only once, they have no yardstick with which to measure their reactions. They don't know how they will feel, they can

only guess. Unfortunately if they get it wrong there is no way back and for these women this can turn into severe depression, anxiety, punitive behaviour both towards themselves and others. Often women say 'if only I could talk to someone who has had it done'. They want to know what they may feel both physically and emotionally. The act of having an abortion is not something that many women want to shout from the rooftops and are often denied the support in coming to terms with the loss which they WOULD have received had it been a miscarriage".

Overall, there is a "uniqueness of reaction to a not uncommon experience". This will decide whether a woman recovers or lapses into depression. Common sense, therefore, suggests that a greater provision of counselling services within the NHS is not just legally prudent. It is essential.

"The British Association for Counselling and Psychotherapy is not campaigning for post-operative counselling for all forms of surgery", said Deputy Chief Executive, Alan Jamieson. "We simply urge NHS trusts to give patients the emotional help their recovery requires".