"Exploring The Mental Health Implications Understanding (PASS) Post-Abortion Stress Syndrome In Mothers: A Comprehensive Review

AASTHA SINGH
ASSISTANT PROFESSOR
SHARDA UNIVERSITY

Abstract:
PASS is a complex and multifaceted psychological phenomenon that affects a significant proportion of women following termination of pregnancy. This review aims to provide an overview of the current understanding of post-abortion depression, including its prevalence, risk factors, symptoms, and potential consequences for women's mental health and well-being. Drawing upon a synthesis of empirical research and theoretical frameworks, this paper explores various factors that may contribute to the development of post-abortion depression, such as pre-existing mental health conditions, socio-cultural influences, and individual experiences surrounding the abortion decision. Additionally, the review examines the impact of post-abortion depression on women's emotional health, interpersonal relationships, and overall quality of life. Furthermore, potential avenues for prevention, intervention, and support are discussed, highlighting the importance of comprehensive and sensitive care for women navigating the emotional aftermath of abortion. By enhancing our understanding of post-abortion depression, healthcare professionals and policymakers can better address the unique mental health needs of women who have undergone abortion procedures, ultimately promoting holistic well-being and recovery.

KEY WORDS: PASS, PTSD, APA, MTP, pregnancy loss, depression, healthcare professionals

Introduction:
Rumored to occur after an abortion, post-abortion stress syndrome (PASS) is a cluster of symptoms akin to post-traumatic stress disorder (PTSD). Nonetheless, there is little proof that PTSD-like symptoms are typical following an abortion, and leading mental health organizations do not acknowledge post-abortion stress syndrome as a legitimate psychological condition (21). Over fifty years of study, As stated in the 2008 report of the American Psychological Association's (APA) Task Force on Mental Health and
Abortion (TFMHA), "it is clear that some women possess clinically important disorders, including depression and anxiety, and some accomplish encounter sadness, grief, and feelings of loss adhering to termination of a pregnancy. In fact, according to task force chair Women after undergoing abortions exhibit signs of post traumatic stress disorders. Even after the unfortunate event of their life, women have a higher rate of despair and adverse reactions. (1) Similar data has been revealed by Brenda major et.al, 20….., (38% of women underwent abortions) where she emphasized on the detrimental impact of abortions on women’s physical and mental health in society.

Psychologist Nada L. Stotland, who was among the most vocal opponents of the "myth" of abortion trauma, later shared her personal professional experience of managing a patient whose miscarriage precipitated a mental health crisis stemming from unresolved difficulties related to a previous abortion. Following his tenure as president of the American Psychiatric Association, Stotland started advising prospective abortion patients to be screened for risk factors in order to inform decision counseling and determine the need for extra counseling.

The emotional and physical aftermath of an abortion, expressed as sadness, anger, humiliation, guilt, or other negative emotions, is known as post-abortion stress syndrome, or PASS. After having an abortion, a lot of people feel depressed, anxious, angry, and abandoned; these emotions can linger for a long time.

An abortion is performed on one in five pregnant women. This is a rather important component. Furthermore, compared to industrialized countries, underdeveloped countries have a higher chance of abortion. The mother may experience shock when she experiences a spontaneous abortion or miscarriage because it is unexpected and sudden.

An abortion that is medically induced is referred to as therapeutically induced. The mother willingly seeks a medical termination of pregnancy (MTP) in an elective abortion. The lady may have some time in either of these situations to mentally be ready for the changes she will be going through.

A woman has an elective abortion when she voluntarily decides to end her pregnancy. Despite not having completed their schooling or having as many children as they would like, they may remain steady and content. Women who undergo abortions due to unstable relationships or financial hardships fall under this group as well. However, learning that you are pregnant can come as a shock, and the time leading up to the abortion can be upsetting. Making the decision to have an abortion can be challenging, and the decision's rationale may have an impact on the person's psychological reactions following the procedure.

Depending on the type of abortion, the mother may have feelings of guilt or shame, attributing the cause to her own acts or neglect. The effects of abortion on mental health have been the subject of numerous research studies in the past, yet assessments of these studies have been conflicting. While some research suggests that women are more likely to experience psychological issues after having an abortion, others categorically deny the existence of post-abortion syndrome—an unofficial form of post-traumatic stress disorder (PTSD)—and other long-term mental health consequences.

The results of second-trimester abortions on women's mental health are not well documented in the literature. Greater bonding with the fetus, knowledge that the fetus has matured fully, a stronger desire
to carry the pregnancy to term, and other factors could be contributing factors to more severe psychological problems following late abortions. In order to obtain a deeper understanding of the mental health consequences of abortions, previous studies have urged for additional study on related subjects. Myths and societal pressures may exacerbate women's distress in India. By comparing the psychological results of the two kinds, pertinent risk factors for the emergence of psychosocial issues in a woman's postabortion life may be found. In India, not much research has been done on a woman's psychological well-being after an abortion.

IMPACT OF MENTAL HEALTH ON ABORTION:

According to recent studies, over two-thirds of abortions performed in India are unsafe and common in rural areas, particularly in the states of Bihar, Haryana, Punjab, Jharkhand, and Orissa. The majority of these women are forced to have the procedure after learning their sex. (6) Lack of access to high-quality abortion care puts women and girls' human rights—such as the right to life, the right to the best possible physical and mental health, the right to participate in scientific advancement and its realization, the freedom to choose how many children to have, when to have them, and the right to be free from torture and other forms of inhumane or cruel treatment and punishment—at risk of being violated. (7) Maternal deaths resulting from unsafe abortions range from 4.7 to 13.2% a year. For every 100,000 unsafe abortions performed in developed areas, 30 women are thought to lose their lives. That figure jumps to 220 deaths for every 100,000 unsafe abortions in underdeveloped nations. The depressing situation is most likely caused by:

- Inadequate demographic and socioeconomic traits
- Erratic behavior when seeking health
- Bad sexual behavior among our young people
- Ignorance of safe family planning practices
- The endless, long-standing Indian custom of desiring a boy to be born

The health of an Indian lady can be seriously jeopardized by all of these issues.
FIG 1: Number of estimated induced abortion across India

Abortions are more common among the younger age.

Young teenage girls, ages 15 to 19, are more likely to experience severe problems from abortion. Young girls are more likely to have an enforced abortion due to a number of circumstances, including early sexual debut, bad sex practices, and ignorance of contraception. Although abortion is legal in India (under certain conditions), the high estimated prevalence of unsafe abortion poses a serious threat to public health. A significant number of women in India are at
risk of unsafe abortions and abortion-related deaths due to a combination of socioeconomic vulnerability and limited access to healthcare treatments.

**Post-abortion stress : global prevalence**

Losing a pregnancy can have a significant negative effect on a woman's physical, emotional, and psychological health. Pregnant women who lose their babies frequently report feeling anxious and distressed, which can have a big emotional impact on them as well as their partners. Women are twice as likely as males to experience depression in their lives, making depression a serious public health concern. In the world, depression is the primary cause of disability, and one in five women report having depression following childbirth. Moreover, the prevalence of severe depression following an abortion is three times greater than it is at other points in a woman's life.

According to the data reviewed, there has been a discernible change in the past ten years in the prevalence of post-abortion depression. In particular, the condition's prevalence dropped from 30% in 2008 to 8.6% in 2018. Nonetheless, current data indicates a worrisome rise in depression rates, which reached 48.6% in 2021.

Several primary research studies have been carried out worldwide to ascertain the occurrence of depression following an abortion. With estimates ranging from 8.6% to 85%, these independent research have shown a significant variance or unpredictability in the prevalence of post-abortion depression globally. Because of the above-mentioned variation in the prevalence of post-abortion depression among women of reproductive age, it is imperative to combine and make use of this data globally. Furthermore, the paucity of national data and the small number of regional surveys that have been conducted are the main sources of current knowledge of the epidemiological nature of depression. The current Review intends to close this gap by updating the epidemiology of post-abortion depression and offering evidence-based guidance on how moms should prioritize mental health care.

**Post abortion essential therapy measures :**

A woman's life becomes emotionally and mentally threatened by the entire pregnancy experience that ends in an abortion. Any woman of reproductive age who has an abortion is likely to experience severe psychological pain, remorse and guilt, low self-esteem, nightmares, a sense of failure as a mother, and a persistent question, "Will I ever become a mother?" Her suffering is exacerbated by the severe shortage of psychiatric assistance and counseling in our contemporary social structure.
TLC, or tender love and care, is everything that a woman needs during this important and difficult time. This necessitates therapeutic lifestyle adjustments, such as:

- Maintaining a nutritious diet
- Suitable workout routines that incorporate yoga and meditation
- Social support and relationship from friends, family, and spouse, Unwinding and managing stress
- Engagement in religion and spirituality
- Counseling sessions with our mental health professionals are beneficial and worthwhile.

Recognizing Depression Associated with Abortion:

First and foremost, realize that depression following an abortion is a common problem that many women experience, despite its complexity. Your abortion-related emotions might run deep and can cause psychiatric issues. Reactions such as post-abortion syndrome, PTSD, bereavement, and other emotional difficulties are common among women. (12)

Numerous factors can contribute to depression following an abortion. It's also not unusual, according to research. Changes in hormones, social stigma, moral convictions over past experiences, and even pre-existing mental health issues can all be factors.

Changes in hormones: Following the end of a pregnancy, you will notice a sharp decline in hormones such as progesterone and estrogen. These may exacerbate symptoms of hormonal sadness or mood swings.

Social stigma: You may feel alone or ashamed if people in your social circle have unfavorable views on abortion. Depression may emerge from this very rapidly.

Moral convictions: Based on your own moral convictions or the moral convictions of others closest to you, you may feel remorse or guilt, which may lead to depressive episodes.

Past mental health issues: Following a pregnancy termination, you may be more susceptible to post-abortion depression, particularly if you have a history of anxiety or depression.

Face your emotions

There is no incorrect way to feel after an abortion; accepting your emotions—whether they be grief, rage, guilt, humiliation, or even relief—is an important part of coping with the procedure. Permitting yourself to feel all of your feelings is okay; just do it without passing judgment.

Locate a secure area to feel

After an abortion, getting assistance might also help you better control your emotions. You must establish or locate a safe space where you may freely express your ideas and feelings if you want to learn how to cope with the sadness that follows an abortion. You could consider keeping a journal, speaking with a
friend or relative who is understanding and supportive, or even signing up for an online support group for women seeking mental health services following an abortion.

**Seek compassion for yourself.**

If you're experiencing emotional difficulties following an abortion, self-compassion is essential. Treat yourself well and take care of yourself; although it may be tempting, self-loathing will not help you. It's crucial to remember that there is no right or wrong way to handle this, so be kind to yourself. Include a balanced diet, yoga or meditation, and good sleeping practices in your self-care regimen.

**Study stress-reduction strategies.**

Using stress-reduction strategies can help you overcome difficult situations. It's likely that you will continue to utilize them even after you think your grief has been resolved. Searching for strategies to control your post-abortion stress? Progressive muscle relaxation (PMR), deep breathing techniques, and attentive activities like mindfulness meditation are all excellent strategies to reduce any anxiety or depressive symptoms you may be experiencing.

**Give yourself permission to grieve:**

A necessary component of recovery is grieving. If necessary, allow yourself the time and space to grieve your loss. Regardless of whether you chose to have an abortion or not, acknowledge that what you're going through is a loss.

**Tell your tale:**

It can be really therapeutic to talk about your experience, especially with people who have experienced something similar. Make a connection with people who are sympathetic to your situation, rely on them, and find solace in the knowledge that you are not alone.

**Taking Care of Regret and Sorrow After Abortion:**

After any kind of loss, including an abortion, guilt and humiliation are typical negative feelings. It's necessary to face these emotions, even if it will be challenging, in order to process them and start the healing process.
Recognize the root of your feelings: Recognizing the source of any guilt or shame you may be experiencing is a necessary step in treating it. The emotions you're experiencing may be the result of cultural expectations, personal or familial abortion-related beliefs, or even pressure from others who disagree with your decision to undergo an abortion. You can learn to control or stay away from these triggers by thinking about them, which will allow you to concentrate on the healing process.

Recognize your feelings: A crucial step in the healing process is facing your feelings head-on rather than avoiding or repressing them. It's acceptable to feel guilty or humiliated; you should accept these emotions and constantly remind yourself that these sentiments are acceptable without passing judgment.

Increasing access to high-quality abortion services:

Research indicates that limiting access to abortions does not lower the number of abortions performed; yet, it does influence the safety and dignity of the abortions that women and girls choose to have. Compared to nations with less restrictive regulations, the percentage of unsafe abortions is noticeably higher in those with extremely severe legislation.

High prices, stigma towards women seeking abortions and healthcare professionals, and healthcare professionals' refusal to perform an abortion due to personal conscience or religious convictions are some of the obstacles to obtaining a safe and respectful abortion. Restrictive laws and regulations that are not supported by medical evidence further obstruct access. Examples of these include the criminalization of abortion, obligatory waiting periods, the provision of biased information or counseling, third-party authorization, and limitations on the kinds of healthcare providers or facilities that are permitted to perform abortions.

To ensure that everyone in need of abortion care gets access to it, a number of steps must be taken at the governmental, institutional, and community levels. An setting that is conducive to providing high-quality, all-inclusive abortion care has three key components:

- Respect for human rights, which includes a supportive legal and policy framework,
- Information accessibility and availability, and a well-functioning, widely available, reasonably priced health system.

Many elements are necessary for a health system to operate effectively, such as:

- Evidence-based regulations; universal health care
- A steady supply of high-quality
- Reasonably priced medical supplies and equipment
- The provision of abortion care by a sufficient number of health professionals of various specialties at a patient's accessible location
- The provision of contraception to prevent unwanted pregnancies
- The training of health workers to provide safe and respectful abortion care, to support informed decision-making and to interpret laws and policies regulating abortion
• The protection and wellbeing of health workers from stigma
• The delivery of abortion care through a variety of approaches, such as care in health facilities, digital interventions, and self-care approaches, allowing for choices depending on the values and preferences of the pregnant person, available resources, and the national and local context. (15).

The following advice will help you on your path to recovery:

Establish a self-care regimen: Regaining emotional equilibrium may be greatly aided by the establishment of a strong and healthful self-care regimen. Incorporate as much exercise as you can, a healthy diet, proper sleep, meditation, and engaging in pleasurable activities.

Regarding your own expectations, be reasonable: Remind yourself that these emotions are normal. As you move through the healing process, you may experience a wide range of emotions. Treat yourself gently and don't put immediate pressure on yourself to feel better. Allow yourself the time you require for healing.

Establish a network of support: Be in the company of people who comprehend what it's like to experience depression following an abortion. They can be understanding, sympathetic, and encouraging since they understand what you've been through.

Keep a journal: Keeping a journal may be a very effective therapeutic tool for mental health, assisting you in understanding your loss as you move past it. When you attempt to manage the multitude of emotions you may be feeling, it might provide insight into your emotional condition.

Think about counseling or treatment: If you're having trouble adjusting to the abortion, you might want to look into depression therapy or other similar services. If you observe deteriorating impacts on your mental health after the abortion, this may become much more serious. To help you process your feelings and start the healing process, a skilled, experienced therapist can provide you with individualized support and direction.

Getting Expert Assistance:

You need to get professional assistance if your depression worsens or becomes overwhelming following an abortion. Mental health specialists can provide knowledgeable counsel and coping mechanisms. Is there anything mentally ailing you that could be contributing to your depression after the abortion? A qualified therapist can assist.

Finding treatment for depression following an abortion is made simple by online counseling services like Talkspace. With the platform, therapy is affordable, discreet, convenient, and available from the comfort of your own home.

Get in touch with Talkspace right now if you need assistance with post-abortion depression. We can help you get the assistance you require to begin the healing process. After an abortion, there is a way ahead, and asking for assistance is not a sign of weakness.
Conclusion:

The issue of Post-Abortion Stress Syndrome (PASS) is complex and contentious, with divergent perspectives within medical and psychological communities. While some studies suggest that a minority of individuals may experience psychological distress following an abortion, the majority of research indicates that most women do not experience long-term negative mental health effects. Additionally, it's important to recognize that many factors contribute to a person's mental health, and individual experiences vary widely.

In conclusion, while it's essential to acknowledge and address the mental health needs of individuals who have undergone abortions, the evidence does not conclusively support the existence of a specific syndrome known as Post-Abortion Stress Syndrome. Instead, a nuanced understanding of the diverse experiences and circumstances surrounding abortion is necessary to provide appropriate support and care for individuals' mental well-being. This includes ensuring access to comprehensive reproductive healthcare, counseling services, and support networks tailored to meet the needs of those who have undergone abortions.

References:


15. https://www.who.int/news-room/fact-sheets/detail/abortion


