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Background

The notion that women who have an abortion are at higher risk of suicide is used as a rationale to restrict women's access to abortion. Currently, 8 states require that women be counseled on the negative emotional responses to abortion (Guttmacher Institute, 2017). In Texas, as part of the law mandating pre-abortion counseling, women are given a booklet warning them that they are at increased risk of becoming suicidal if they choose abortion (Texas DSHS, 2017).

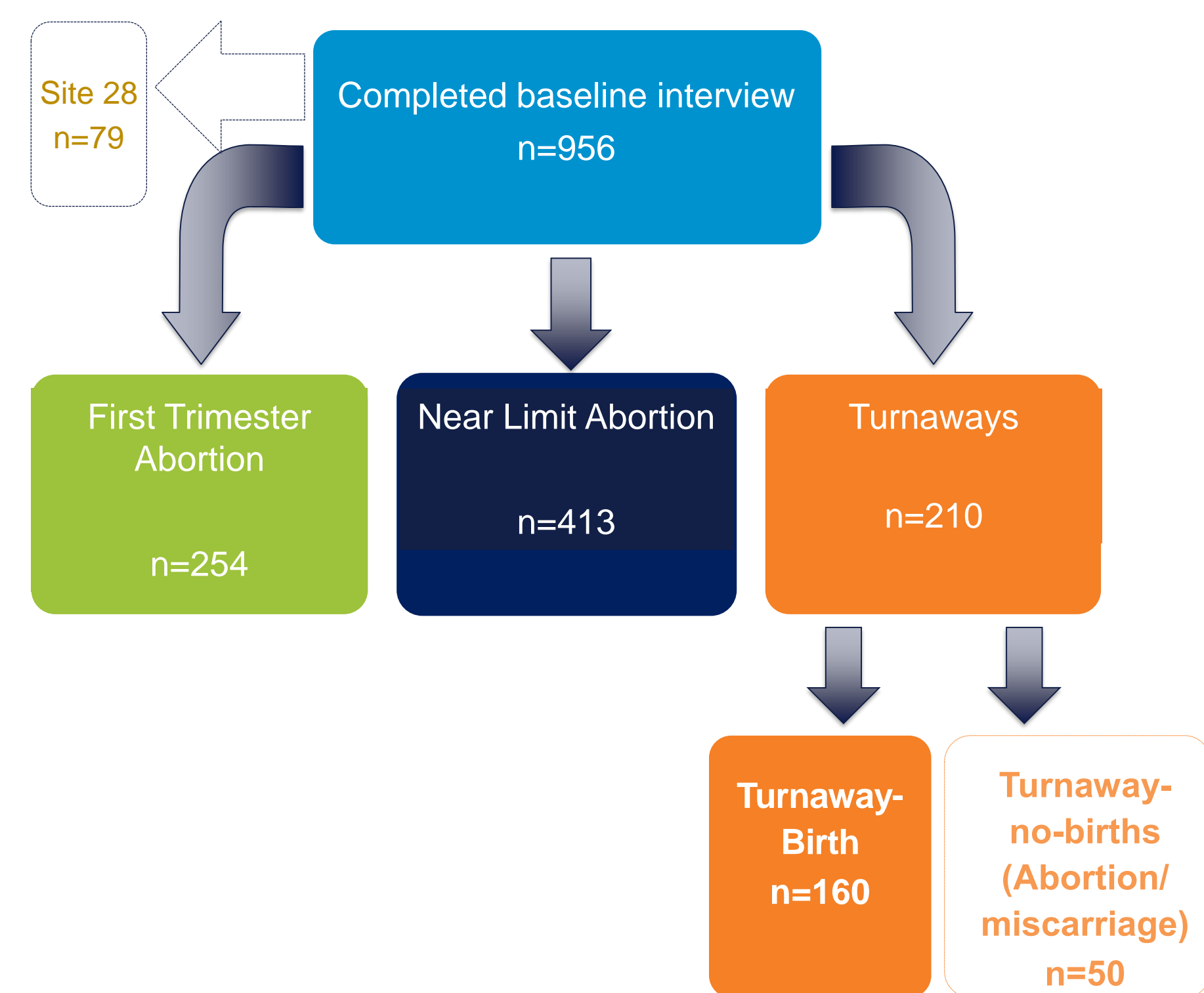
Existing studies don't account for predisposing factors (e.g. history of mental health issues and exposure to trauma) and use inappropriate comparison groups (e.g. women with wanted pregnancies who miscarry or chose to carry to term).

This study improves on many of the methodological shortcomings of the existing literature by controlling for previous history of abuse, intimate partner violence, and mental health issues, using an appropriate comparison group (women denied an abortion), and following women for five years.

Study Aim

- To assess the effects of receiving versus being denied an abortion on women's symptoms of suicidal ideation over five years

Study Sample



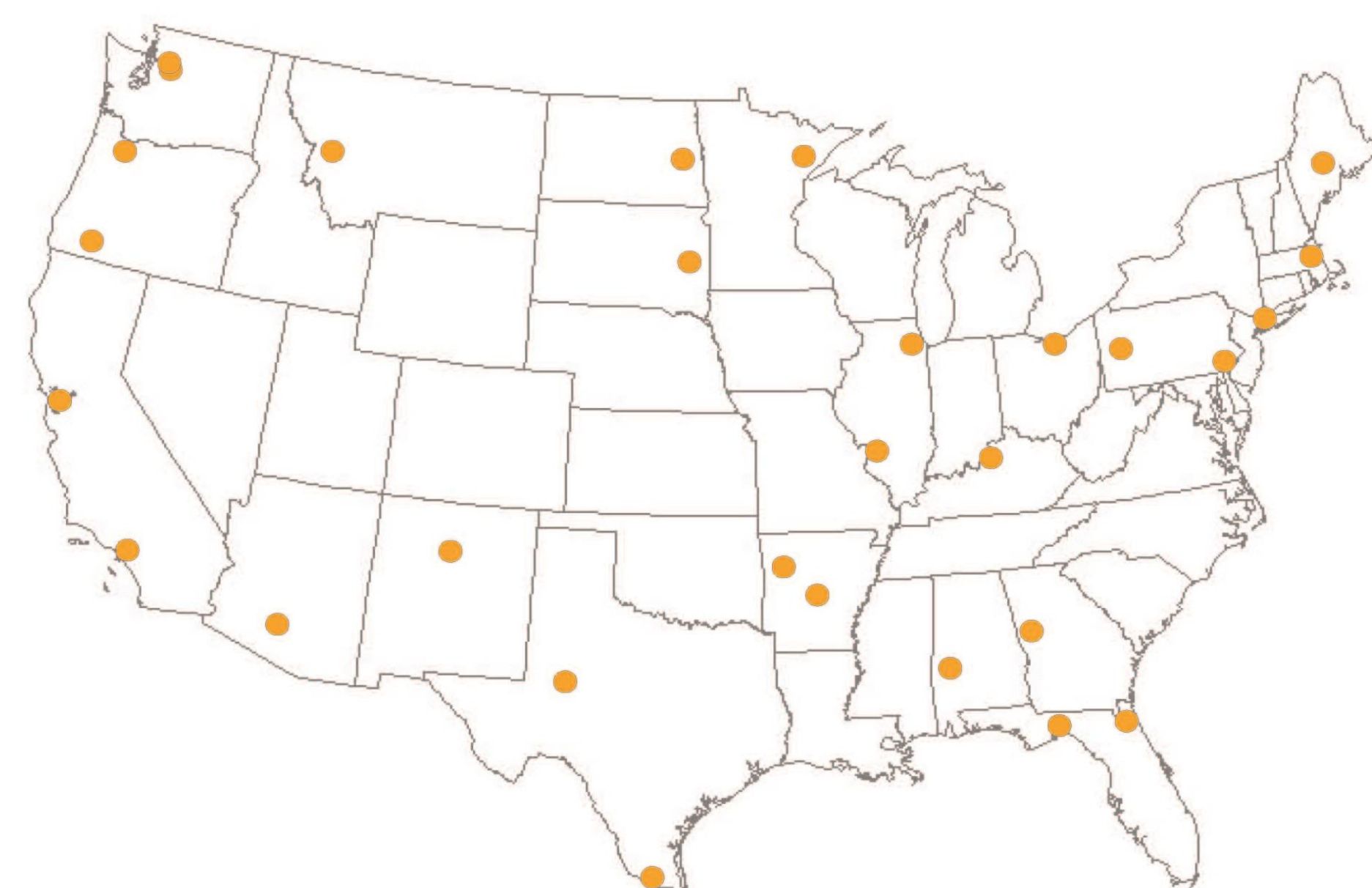
Methods

Design: The Turnaway study is a prospective study that interviewed abortion-seeking women semi-annually for five years.

Measures:

- Suicidal ideation symptoms* were assessed using the Brief Symptom Interview (BSI, Derogatis, 2001).
- Imminent suicidality* was assessed using the Sheehan-STS (Coric et al., 2009)
- Deaths due to suicide.* A Lexis/Nexis® death record search was conducted to identify any deaths during our study period, and their causes.

Setting: 30 U.S. abortion facilities with the latest gestational age of any other clinic within 150 miles.



Statistical analysis:

- Adjusted mixed effects regression analyses accounting for clustering by site and individual assessed whether levels and trajectories of suicidality differed by study group.
- A Lexis/Nexis® death record search was conducted to identify any deaths during our study period, and their causes.

Results

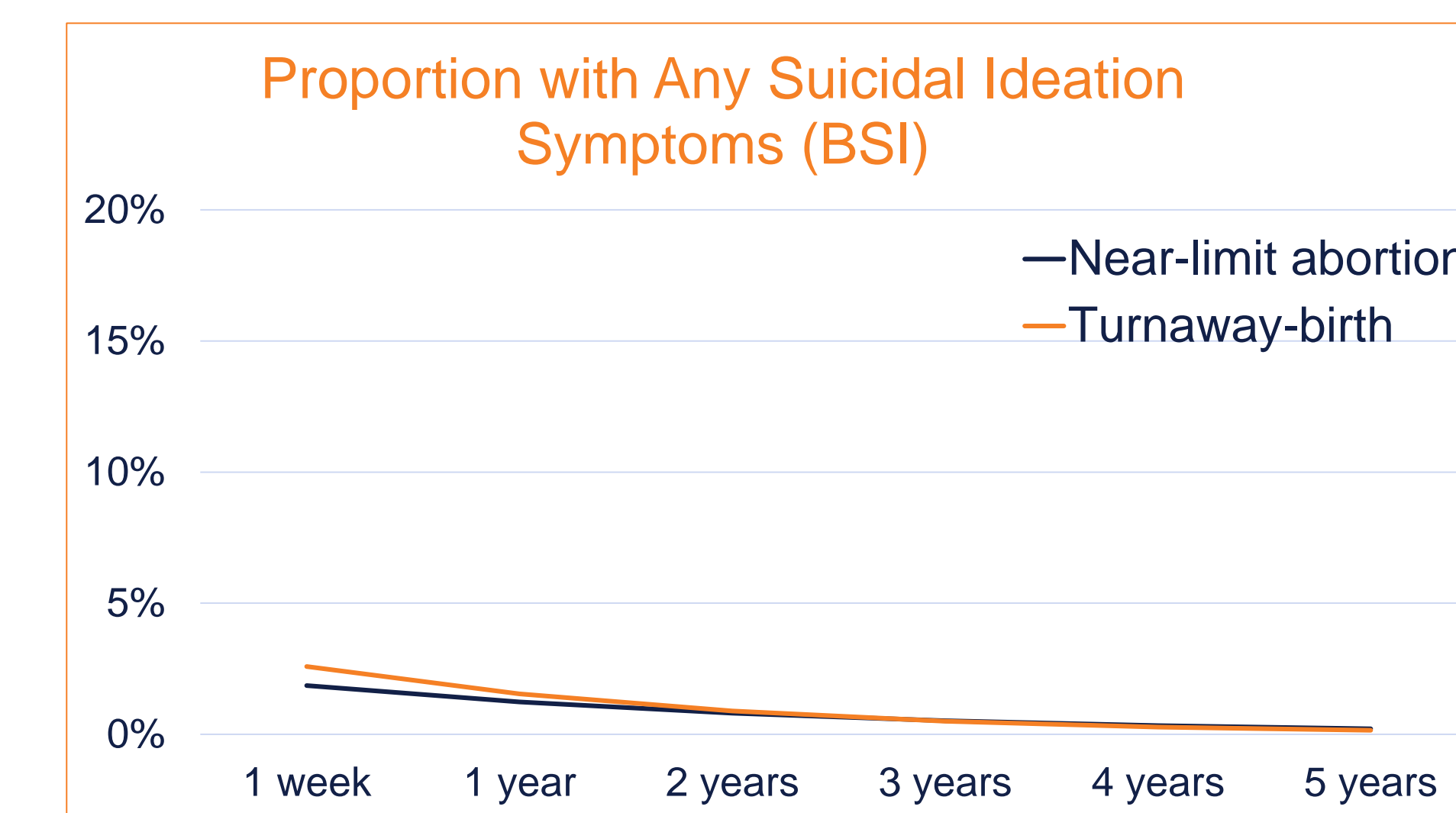
956 women (84.5%) completed baseline interviews. Baseline education, race/ethnicity, marital status, mental health history and history of trauma, history of drug use, and history of problem alcohol use did not differ by study group. When compared to *Near-limits*, *Turnaway-births* were younger and less likely to be employed.

Participant characteristics by study group

Participant characteristics	Near-limit abortion group n=413	Turnaway-Birth group n=160
Age, mean	24.9	23.4*
Employed	54%	40%*
Race/ethnicity		
White	32%	25%
African American	32%	34%
Hispanic/Latina	21%	28%
Other/mixed	15%	13%
Nulliparous	34%	47%*
Mental health history & trauma		
Diagnosed with anxiety or depression	23%	21%
Intimate partner violence/rape, past y	26%	26%
Child/abuse neglect	16%	10%

Proportion with any suicidal ideation symptoms (BSI)

- 0.9% of women had any suicidal ideation symptoms over the five-year study period
- The proportion of women with any symptoms did not differ significantly ($p > .05$) by study group at baseline or over the five-year period
- The proportion with any symptoms declined significantly ($p < .05$) over time for both study groups



Imminent suicidality (Sheehan-STS):

- Two women (0.04%) out of 4,210 observations were imminently suicidal and attempted suicide
- Both (2/2) women were in the *Near-limit abortion* group
- Both said the abortion was *the right decision*
- Both had a baseline *history of depression or anxiety* and *history of child abuse and neglect*

Women lost to follow-up:

- Women lost to follow-up were not significantly ($p > .05$) more likely to have a prior history of mental health issues, suicidal ideation or imminent suicidality
- Five women, as identified by a Lexis/Nexis® death record search, died during our study period. None had a previous history of depression or symptoms of suicidal ideation according to previous assessments

Conclusions

Women who had abortions were at no higher risk of experiencing suicidal thoughts than women denied abortions. Suicidal ideation rates are comparable or somewhat lower to a general population of adult women (CDC, 2011). Policies requiring women to be warned that they are at increased risk of becoming suicidal if they choose abortion are not evidence based.