

Abortion and Women's Rights

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Abstract

The primary focus of this research is on abortion and women's rights. Abortion presents a safe and straightforward method for terminating a pregnancy. Despite its widespread necessity, ensuring safe and legal access to abortion remains uncertain, depriving women of fundamental rights to make informed decisions regarding their health and bodies. Every woman possesses the right to her fertility and reproductive autonomy. Presently, discussions revolve around feminism, women's rights, women's governance, and women's reproductive rights across various spheres. Vigorous efforts are underway to guarantee the safety and dignity of women. Access to safe and legal abortion services stands as a woman's paramount right. This research delves into two critical questions: firstly, the association between abortion and serious health issues and women's rights, and secondly, how women resort to unsafe abortion due to legal restrictions. Abortion is restricted by law in many countries globally, hindering access to safe abortion services, primarily due to inadequate healthcare, economic, and political factors. Through the utilization of secondary data, this research aims to position abortion not solely as a women's right but as a human rights issue. It underscores that every woman holds the right to make informed decisions concerning reproduction, including abortion.

Keywords: Abortion, women's rights, fertility, reproductive autonomy, safe abortion, unsafe abortion.

Introduction:

Every woman and adolescent girl has the right to make their own decisions regarding their sexual and reproductive health and well-being, including the decision of when and how many children to have. Complications during pregnancy, such as bleeding from placenta previa, preeclampsia or eclampsia, and severe cardiac or kidney conditions can become so critical that abortion is the only way to protect a woman's health or save her life. Each year, nearly 75 million women undergo unintended abortions. The impact of these abortions affects a woman's health, family relationships, economic resources, and access to medical care. In places where abortion is highly restricted, women resort to unsafe methods to terminate unwanted pregnancies. These methods include self-inflicted abdominal trauma, ingestion of dangerous chemicals, self-medication with various drugs, and reliance on unqualified abortion providers. For decades, women's organizations worldwide have been fighting for the right to safe and legal abortions, and increasingly, international human rights laws are supporting their demands. Abortion is a sensitive issue especially in developing and cultural countries like Bangladesh (Khan et al., 1984). According to the World Health Organization (2020) nearly 73 million women undergo unsafe abortions each year. These unsafe abortions are responsible for the deaths of approximately 70,000 women annually.

Women who were determined not to carry unwanted pregnancies always found some way to attempt abortions. In the 1960s, abortion providers frequently turned women away if they could not pay. Some male abortion providers demanded sexual favours before performing the procedure. In the 1950s, approximately one million illegal abortions were performed annually in the United States, resulting in the deaths of over a thousand women each year. By 1969, more than 75% of women who die from abortions are due to illegal procedures. States can restrict second-trimester abortions only in the interest of the woman's safety. A viable fetus can only be protected during the third trimester. A woman cannot be forced to continue a pregnancy if her life or health is in danger. The first significant victory for the anti-abortion movement and the first setback for abortion rights occurred in July 1976 (Hull & Hoffer, 2021). In October 1977, Rosa Jimenez, a woman from Texas, died from an illegal abortion in Mexico after Texas stopped Medicaid funding for abortions. One of the goals of the anti-abortion movement is to target the rights of young women. Understanding that safe abortions protect health is crucial, and research on abortion and women's rights plays an important role in this. A specific aspect of this research is how restrictive abortion laws deprive women of safe and legal abortions, leading to higher maternal mortality rates, affecting mental health, increasing the rates of unsafe abortions, and denying women the right to make decisions about their bodies. Past attempts to address this issue have included legal challenges to restrictive laws, advocacy campaigns for reproductive rights, and research aimed at documenting the effects of these laws on women's health and well-being. There are certain particular regions where religion and culture influence abortion (Coleman, 2011). In conclusion, to respect a woman's right to plan her family, the government should make abortion services legal, safe, and accessible to all women. There are many situations where abortion is the only way for a woman who is pregnant to exercise her rights. Every woman has the right to freedom, health, autonomy, and education, as well as the right to make decisions. Social complexities, healthcare infrastructure, and the legal framework influence access to legal and safe abortion. The main aim of this research is to highlight the role of women's rights in abortion and to promote reproductive justice.

Literature Review:

Abortion is the medical or surgical termination of a pregnancy before the fetus can live independently outside the mother's womb. This procedure can be carried out through medication using drugs like mifepristone and misoprostol or surgical methods such as vacuum aspiration or dilation and curettage. Abortion is a highly debated topic, often divided along ethical, moral, and legal lines. From a legal perspective, the permissibility and accessibility of abortion vary widely across different countries and regions. Wade federally recognized a woman's right to choose an abortion, though this was recently overturned in 2022 by the *Dobbs v. Jackson Women's Health Organization* decision, allowing states to set their abortion laws. Ethically, abortion discussions often involve considerations of women's rights, bodily autonomy, and the moral status of the fetus. Proponents argue for a woman's right to control her own body and reproductive choices, while opponents typically emphasize the fetus's right to life. Medical perspectives focus on the safety and health implications of abortion, with major health organizations like the World Health Organization advocating for safe and accessible abortion services to protect women's health and reduce the risks associated with unsafe procedures (Chaturachinda et al., 1981)

Types of Abortion:

- i. **Medical Abortion:** *Early Medical Abortion* involves taking medications such as mifepristone followed by misoprostol to induce a miscarriage. It happens up to 10 weeks of pregnancy. *Later Medical Abortion* can be used after 10 weeks and involves a similar medication regimen but often requires more medical supervision due to increased risk of complications.
- ii. **Surgical Abortion:** *Aspiration (Suction) Abortion* procedure is usually performed up to 14-16 weeks of pregnancy. It involves removing the fetus and placenta using suction. *Dilation and Curettage (D&C)* is often used in the first trimester, this method combines suction with a curette (a surgical instrument) to scrape the uterine lining. *Dilation and Evacuation (D&E)* is typically performed after 14 weeks of pregnancy, this procedure involves dilating the cervix and removing fetal and placental tissue with surgical instruments and suction. *Induction Abortion* is used in the second or third trimester, this method involves inducing labour with medications. It is less common and typically used in cases of severe fetal anomalies or risk to the mother's health. *Intact Dilation and Extraction (D&X)*, also known as "partial-birth abortion," is a late-term procedure rarely performed and is subject to legal restrictions in many areas (Costescu et al., 2016).

Cause of Abortion:

- i. **Poverty and Financial Instability:** Financial constraints lead many women to seek abortions, with 40% citing economic concerns and 4% noting unemployment as reasons.
- ii. **Lack of Healthcare Access:** Limited or unaffordable healthcare increases unintended pregnancies and demand for abortions. WHO stresses the need for universal reproductive healthcare.
- iii. **Limited Education:** Inadequate sex education leads to higher rates of unintended pregnancies among adolescents, according to UNICEF.
- iv. **Rape or Sexual Assault:** Unwanted pregnancies from rape often result in abortions, as victims seek to regain control.
- v. **Maternal Health Risks:** Severe health issues may require abortion to protect the mother, as emphasized by the American College of Obstetricians and Gynecologists.
- vi. **Non-Medical Reason:** People seek abortions for various non-medical reasons, such as realizing they are pregnant late, limited knowledge about accessing abortion services, difficulties with transportation, lack of information about how pregnancy will change their lives, financial inability to afford the procedure, etc. (Tulu et al., 2018).

Safe Abortion:

Safe abortion refers to the termination of a pregnancy using methods that are medically approved and carried out in settings that adhere to established health and safety standards. (Bhiwandiwalla et al., 1982). This encompasses a range of procedures and practices designed to

ensure that the process is as safe as possible for the individual. By following these standards, healthcare providers can significantly reduce the risks associated with abortion, including complications and negative health outcomes. Safe abortion practices prioritize the well-being of the individual, ensuring they receive care that is respectful, informed, and supportive. This includes access to professional medical guidance, appropriate follow-up care, and necessary emotional support. Ensuring safe abortion services is crucial for protecting health and upholding the rights of individuals to make informed decisions about their reproductive health. Safe abortion services are a fundamental aspect of comprehensive healthcare, contributing to overall public health and individual empowerment.

Unsafe Abortion:

Unsafe abortion encompasses procedures performed by unqualified individuals or in settings lacking adequate medical oversight. These practices pose significant health risks and are a leading cause of maternal morbidity and mortality worldwide. The lack of adherence to medical standards during unsafe abortions increases the likelihood of severe complications, endangering the lives of women. Unsafe abortion practices not only jeopardize individual health but also strain healthcare systems and contribute to broader public health challenges. Addressing the issue requires comprehensive efforts to improve access to safe and legal abortion services, ensure proper training for healthcare providers, and promote awareness of reproductive health rights. By addressing the root causes of unsafe abortion, societies can protect the health and rights of women, advancing overall public health and well-being (Leone et al., 2016).

Research Methodology:

The methodology includes conducting a comprehensive literature review on abortion and women's rights by collecting qualitative data from academic articles, books, and magazines, as well as quantitative data. This involves thematic analysis to identify key trends and assess the impact of policies on women's health and rights.

Research Objectives:

- i. To discuss providing universal access to safe and legal abortion services to maintain women's health protection and reproductive rights.
- ii. To discuss deprivation of legal and safe abortions leads to unsafe abortions, resulting in increased maternal mortality rates, health deterioration, and the deprivation of women's reproductive autonomy and abortion rights.
- iii. To discuss social, political, and economic disparities that disproportionately affect marginalized communities, depriving them of access to reproductive health, including safe abortions.
- iv. To discuss informing individuals about proper sex education, effective contraceptive use, and access to safe abortions to reduce unsafe abortions.

Research Questions:

- i. What measures can be taken to ensure universal access to safe and legal abortion services for women's health and reproductive rights protection?
- ii. How does the lack of legal and safe abortion options lead to unsafe abortions, and what impact does this have on maternal mortality rates and women's reproductive autonomy?
- iii. How do social, political, and economic inequalities impact the access of marginalized communities to reproductive health services, including safe abortions?
- iv. What steps can be taken to educate individuals about proper sex education, effective contraceptive use, and safe abortion access to minimize unsafe abortions?

Analytical Findings and Discussions:

Punitive abortion laws fail to reduce the abortion rate; instead, they increase the danger, disproportionately affecting the poorest women. Every year, there are an estimated 211 million pregnancies worldwide, with 87 million being unintended and 46 million ending in abortion. Of those seeking abortions, 78% are from developing countries. The 19 million unsafe abortions that occur annually mainly happen in these developing regions (Bhiwandiwalla et al., 1982). Women around the globe opt for abortions for similar reasons, such as not wanting more children, lacking resources, pursuing educational goals, facing health concerns, or adhering to social and religious beliefs (ibid.). Many women, whether married or unmarried, lack control over their sexual lives. They are unable or not allowed to use safe family planning services, giving them little choice over when or if they become pregnant. Cultural and religious norms in many societies expose women, particularly young women and adolescents, to the dangers of unsafe abortions, as well as the risk of social ostracism and abandonment. In numerous countries, abortion is a deeply emotional and complex matter, frequently stifling balanced discourse. Unsafe abortions are both a result and a driver of poverty, intricately linked to societal gender inequality. The absence of modern contraceptives is a significant factor in unintended pregnancies, often resulting in unsafe abortions. Very few governments are brave enough to champion abortion rights, and similarly, only a handful of international organizations possess this bravery. This report states that a woman's right to abortion is not to be undermined by unjust legal interference or the serious risk of death due to inadequate medical standards and competence. The key message of the report is that criminalizing abortion does not address the issue; women still seek abortions for the reasons outlined in the document, and they continue to die as a result. Consequently, if a woman chooses to have an abortion, it must be both safe and legal (Guttmacher Institute, 2020).

When exploring the topic of abortion and women's rights, it's important to acknowledge the potential negative impacts that restrictive abortion laws and the broader societal stigmatization of abortion can have on modern women. These impacts include:

- i. **Increased Health Risks:** Restrictive abortion laws force many women to seek unsafe, unregulated abortion procedures. This can lead to serious health complications, such as infections, haemorrhaging, and in extreme cases, death. Women living in countries or regions with stringent abortion restrictions are particularly vulnerable, facing heightened physical and psychological risks (Jhara, 2024a).

- ii. **Psychological Trauma and Stigma:** The societal stigma surrounding abortion can lead to significant psychological distress for women. Modern women, who are increasingly aware of their rights and autonomy, may feel intense guilt, shame, or fear of judgment if they seek or undergo an abortion. This emotional burden can be exacerbated by a lack of support from family, community, or healthcare providers (McCauley et al., 2023).
- iii. **Economic and Social Inequality:** Restrictive abortion laws disproportionately impact women from lower socioeconomic backgrounds. Modern women who cannot afford to travel to regions where abortion is legal or to pay for safe, but illegal, procedures may be forced to carry unwanted pregnancies to term. This can perpetuate cycles of poverty, as these women might struggle to provide for themselves and their children, impacting their education, career opportunities, and overall economic stability (John & Martin, 2024).
- iv. **Loss of Autonomy:** Restrictive laws undermine modern women's sense of autonomy over their own bodies and reproductive choices. For women who have grown up in societies that promote gender equality and women's rights, being denied the right to choose whether or not to have an abortion can feel like a regression in their freedoms, leading to frustration and a sense of powerlessness (Jhara, 2024a).
- v. **Impact on Career and Education:** Women who are unable to access safe abortion services may be forced to carry an unwanted pregnancy to term, which can have a lasting impact on their careers and educational aspirations. The demands of pregnancy, childbirth, and raising a child can limit a woman's ability to pursue higher education or career advancement, particularly if she lacks social or financial support (John & Martin, 2024).
- vi. **Exacerbation of Gender Inequality:** The denial of safe and legal abortion services can reinforce gender inequalities by placing the burden of reproductive responsibility solely on women. In societies where women's roles are already undervalued, this can further entrench patriarchal norms, limiting women's opportunities to participate fully in social, economic, and political life (Jhara, 2024a).
- vii. **Mental Health Struggles:** Modern women who are denied abortion access may face long-term mental health struggles, including depression, anxiety, and post-traumatic stress disorder (PTSD). The psychological impact of being forced to carry an unwanted pregnancy or to undergo an unsafe abortion can have enduring consequences on a woman's mental well-being (McCauley et al., 2023).
- viii. **The strain on Healthcare Systems:** The rise in unsafe abortions due to legal restrictions can place a significant strain on healthcare systems, particularly in developing countries. Modern women may face longer wait times, reduced access to quality care, and increased healthcare costs due to the need to treat complications arising from unsafe procedures. This can further alienate women from seeking the care they need (John & Martin, 2024).

These negative impacts highlight the critical need for policies that protect and promote women's rights to safe and legal abortion services. Ensuring access to abortion is essential not

only for safeguarding women’s health and autonomy but also for advancing gender equality and improving the overall well-being of modern women in society.

Unique Outcomes of this Research:

- i. **Redefining Abortion in Human Rights Terms:** The research could pioneer a shift in how abortion is conceptualized within global human rights frameworks, emphasizing that access to safe abortion is not just a component of reproductive rights but a fundamental human right. This could lead to new international guidelines and declarations that recognize abortion as a critical aspect of human dignity and freedom (McCauley et al., 2023).
- ii. **Creation of a Legal and Health Risk Index:** The study could develop a unique “Legal and Health Risk Index” that quantitatively measures the correlation between the restrictiveness of abortion laws and the prevalence of unsafe abortions and associated health complications across different countries. This index could serve as a valuable tool for policymakers, healthcare providers, and human rights organizations to identify and target regions most in need of legal reform and healthcare intervention (Jhara, 2024a).
- iii. **Empirical Evidence on the Impact of Advocacy:** The research might provide empirical evidence showing that countries and regions where abortion is framed and advocated as a human rights issue have made more significant progress in ensuring safe and legal access to abortion services. This could underscore the importance of adopting a human rights approach in advocacy efforts (McCauley et al., 2023).
- iv. **Policy Blueprint for Reproductive Autonomy:** The research could result in a comprehensive policy blueprint that outlines specific legal and healthcare reforms needed to protect women’s reproductive autonomy. This blueprint could be tailored for use by different governments and international bodies, offering practical steps for aligning national laws with international human rights standards (Jhara, 2024a).
- v. **Highlighting Socioeconomic Disparities:** The research could uncover unique insights into how socioeconomic factors exacerbate the impact of restrictive abortion laws, revealing that women from lower-income backgrounds or marginalized communities are disproportionately affected by unsafe abortion practices. This could lead to targeted interventions aimed at addressing these disparities (McCauley et al., 2023).
- vi. **Transformation of Public Health Campaigns:** The findings could inspire new public health campaigns that emphasize the human rights dimension of abortion, shifting public perceptions and reducing the stigma associated with abortion. These campaigns could be designed to educate women about their rights and empower them to demand safe and legal abortion services (ibid.).

These outcomes would not only advance academic understanding but also have practical implications for policy, advocacy, and public health, ultimately contributing to the global effort to secure safe and legal abortion access for all women.

Potential Outcomes:

- i. **Broader Recognition of Abortion as a Human Rights Issue:** The research is expected to significantly contribute to the global discourse by reframing abortion from being solely a matter of women’s rights to a more encompassing human rights issue. This perspective is vital in advocating for universal access to safe abortion services, grounded in the principle of human dignity and equality (ibid.).
- ii. **In-depth Analysis of Legal Implications:** The study will likely provide a thorough analysis of how restrictive abortion laws contribute to the prevalence of unsafe abortion practices. By linking legal frameworks to adverse health outcomes, the research could offer compelling evidence for the need to reform laws that undermine women’s health and rights (Jhara, 2024a).
- iii. **Development of Policy Recommendations:** Based on the findings, the research could propose concrete policy recommendations aimed at governments, healthcare providers, and international organizations. These recommendations would focus on creating legal and healthcare environments that support safe and accessible abortion services, thereby protecting women’s rights and promoting public health (ibid.).
- iv. **Strengthening Advocacy for Reproductive Autonomy:** The research could play a pivotal role in bolstering advocacy efforts for reproductive rights by providing a robust evidence base that underscores the importance of legal and healthcare reforms. Advocacy groups could use these findings to push for changes that ensure women are not forced into unsafe abortion practices due to legal constraints (ibid.).
- v. **Contribution to Academic and Social Discourses:** The findings from this research could make a substantial contribution to feminist theory, human rights law, and public health discussions. By exploring the connections between abortion, legal restrictions, and human rights, the research could offer new insights and stimulate further academic inquiry into these critical issues (Jhara, 2024a).
- vi. **Empowerment of Women through Knowledge:** Ultimately, the research could empower women by affirming their right to make informed decisions about their reproductive health. By raising awareness about the legal and health-related challenges women face, the study could inspire further action to ensure that all women have access to safe and legal abortion services, free from stigma and coercion (ibid.).

The Challenges Modern Women Face Regarding Access to Safe and Legal Abortion:

- i. **Legal Restriction:** Many countries have laws that either severely restrict or completely ban abortion, often based on religious, cultural, or political beliefs. These laws criminalize abortion, forcing women to seek unsafe methods or travel long distances to access services in regions where abortion is legal. Governments and legislators who enact and uphold restrictive abortion laws are primarily responsible. These laws are often influenced by lobbying from conservative political groups and religious organizations.
- ii. **Political and Religious Influence:** In many regions, abortion is a highly politicized issue. Political parties, often aligned with religious institutions, may push for restrictive abortion laws as part of their platform, framing abortion as morally

wrong. This influence can be particularly strong in countries with significant religious populations or where religious values are deeply embedded in the political system. Political leaders, parties, and religious institutions that advocate for restrictive abortion laws are key players. They often shape public opinion and influence legal decisions, making them responsible for perpetuating restrictions on abortion.

- iii. **Societal Stigma and Patriarchy:** Societal stigma surrounding abortion is rooted in patriarchal norms that seek to control women's bodies and reproductive choices. This stigma can discourage women from seeking safe abortion services and contribute to their marginalization if they do. Cultural and social norms, perpetuated by patriarchal structures, are to blame. Community leaders, media, and educational institutions that reinforce negative stereotypes about women's reproductive choices also bear responsibility.
- iv. **Economic Disparities:** Women from lower socioeconomic backgrounds often have limited access to healthcare, including safe abortion services. Economic barriers, such as the cost of the procedure, travel expenses, and lack of insurance coverage, can force women into unsafe practices. Governments that fail to provide affordable healthcare and social safety nets are responsible. Additionally, healthcare systems that do not prioritize women's reproductive health contribute to these economic disparities.
- v. **Lack of Comprehensive Sex Education:** In many regions, inadequate sex education contributes to unintended pregnancies. Without proper knowledge about contraception and reproductive health, women are more likely to find themselves in situations where they might seek an abortion. Educational institutions, policymakers, and communities that oppose or neglect comprehensive sex education are responsible for this lack of awareness.
- vi. **Insufficient Healthcare Infrastructure:** In some countries, even where abortion is legal, access to safe procedures is limited due to inadequate healthcare infrastructure, especially in rural or underserved areas. This lack of access can lead to delays and increase the likelihood of women resorting to unsafe methods. Governments and healthcare authorities that fail to invest in and expand healthcare services, particularly reproductive healthcare, are responsible (Simon et al., 2022).
- vii. **International Influence and Aid Policies:** International policies and aid from some countries or organizations may impose restrictions on abortion services as a condition for receiving aid. This can limit access to abortion services in developing countries. International organizations, foreign governments, and NGOs that impose such conditions are responsible for exacerbating the challenges women face in accessing safe abortion services.

The question of whether women are found “Guilty” for seeking an abortion, and whether they might seek one again, is complex and depends on various factors, including legal, social, and personal contexts.

- i. **Legal Guilt:** In Some Countries, where abortion is illegal or heavily restricted, women who seek or undergo an abortion may be legally prosecuted and found guilty of a crime. This legal guilt can lead to criminal charges, fines, imprisonment,

or other forms of punishment. In some cases, even those who assist or provide abortion services can face legal consequences. In Other Regions where abortion is legal, women are not considered guilty of any crime for seeking an abortion. The procedure is viewed as a legitimate medical service, and women are protected by law when accessing it (Paltrow & Flavin, 2013).

- ii. **Societal and Moral “Guilt”:** Societal Stigma: Even in places where abortion is legal, societal stigma can lead to women feeling guilty or being judged by their community, family, or peers. This stigma is often rooted in cultural, religious, or moral beliefs that view abortion as wrong or immoral. Women may internalize these attitudes, leading to feelings of shame or guilt, even if they are not legally guilty (Colgrove, 2023). Personal Moral Conflict: Some women may experience personal moral conflict or guilt after an abortion, especially if they have been raised in environments where abortion is considered wrong. This emotional response can vary widely depending on individual beliefs, values, and the circumstances surrounding the pregnancy.
- iii. **Recurrence of Abortion:** Likelihood of Repeat Abortions: Women who have had one abortion may seek another in the future if they face similar circumstances, such as an unintended pregnancy, financial difficulties, or health risks. Studies have shown that repeat abortions are not uncommon, particularly in cases where access to effective contraception is limited, or when women face ongoing challenges that make carrying a pregnancy to term unfeasible. Contextual Factors: The decision to seek another abortion is influenced by various factors, including access to contraception, changes in personal circumstances, relationship dynamics, and broader social support systems. Women who receive comprehensive reproductive health care and education are less likely to experience unintended pregnancies and may therefore be less likely to seek repeat abortions (NASEM, 2018).

Mental Health of Women after an Abortion:

- i. **Emotional Reactions to Abortion:** Women may experience a range of emotions immediately after an abortion, including relief, sadness, guilt, or a sense of loss. For many, the dominant feeling is relief, especially if the pregnancy was unwanted or posed significant challenges (Kimport, et al., 2011). Some women may feel guilt or regret, particularly if they are influenced by societal stigma, religious beliefs, or personal moral convictions that frame abortion as wrong. These feelings can be more intense in environments where abortion is highly stigmatized. Conversely, many women feel relief and empowerment after an abortion, especially if they are confident in their decision. For these women, the ability to make a choice that aligns with their life circumstances can lead to positive emotional outcomes (Foster et al., 2013).
- ii. **Long-Term Mental Health Effects:** In some cases, women may experience symptoms of depression or anxiety following an abortion. These mental health issues are more likely to occur if the woman lacks support during the decision-making process or if she faces significant external pressures, such as societal stigma or relationship conflict. Although less common, some women may develop PTSD after an abortion, particularly if the procedure is accompanied by trauma, such as

domestic violence, coercion, or severe stigma. has shown that, for most women, abortion does not lead to long-term mental health problems. The APA (2008) and other major health organizations have found that the mental health outcomes for women who have abortions are generally no worse than for those who carry an unwanted pregnancy to term (Jhara, 2024b).

- iii. **Factors Influencing Mental Health Outcomes:** Women who have strong support networks, including friends, family, and healthcare providers, tend to have better mental health outcomes after an abortion. Supportive environments can help women process their emotions and reinforce their sense of autonomy. In societies where abortion is highly stigmatized, women may experience more intense feelings of shame, isolation, and guilt, which can negatively impact their mental health. Cultural and religious norms that condemn abortion can exacerbate these feelings. A woman's own beliefs about abortion play a significant role in her mental health outcomes. If a woman believes strongly in her right to choose and feels confident in her decision, she is more likely to have positive mental health outcomes. Conversely, if she has internal conflicts about abortion, she may be more susceptible to negative emotions (Major, B., Appelbaum, M., Beckman, L., Dutton, M. A., Russo, N. F., & West, C, 2009).
- iv. **The Role of Coercion and Pressure:** Women who feel coerced into having an abortion, whether by a partner, family members or due to external circumstances like financial pressure, are more likely to experience negative mental health effects. The lack of agency in the decision-making process can lead to feelings of powerlessness and resentment. Conversely, women who feel pressured to continue an unwanted pregnancy may experience significant mental distress, leading to anxiety, depression, and feelings of entrapment (Gerhardt, M. J, 1993).
- v. **Comparison to Carrying an Unwanted Pregnancy to Term:** Research indicates that carrying an unwanted pregnancy to term can have significant negative effects on a woman's mental health, including higher levels of anxiety, depression, and lower overall life satisfaction. In many cases, the stress of an unwanted pregnancy outweighs the mental health impact of abortion. For many women, the ability to make a decision that aligns with their life circumstances—whether that is to have an abortion or to carry a pregnancy to term—can have a positive impact on their mental health. Feeling in control of one's reproductive choices is a key factor in promoting mental well-being (Faghihzadeh, S., Babae Rochee, G., Lmyian, M., Mansourian, F., & Rezasoltani, P, 2003).

The mental health effects of abortion vary widely, but most women do not experience significant long-term mental health problems as a result of the procedure. Factors such as societal stigma, personal beliefs, support systems, and the circumstances surrounding abortion play critical roles in shaping mental health outcomes. It's essential to provide women with access to supportive counselling and care both before and after an abortion to help them navigate their emotions and reinforce their sense of autonomy and well-being.

Conclusion:

The issue of abortion is multifaceted, with legal, social, and psychological dimensions that deeply affect women's lives. While abortion is a safe and necessary healthcare procedure, the mental health outcomes for women can vary depending on the support they receive, the societal context, and the legal environment in which they live. Women are not inherently guilty of seeking an abortion; the notion of guilt is often imposed by external legal, societal, or cultural pressures. Whether a woman seeks an abortion again depends on her circumstances and the support she receives in managing her reproductive health. The focus should be on ensuring that women have access to the resources, education, and support they need to make informed decisions about their bodies, free from legal prosecution or societal judgment.

The impact of abortion on women's mental health is a nuanced and complex issue, with effects that can vary widely depending on the individual, the circumstances surrounding the abortion, and the support available to the woman before and after the procedure. To protect and promote women's mental health, it is essential to ensure that abortion is safe, legal, and accessible. This includes enacting supportive laws, reducing societal stigma, providing education, and ensuring access to mental health services. By addressing these areas, we can create a more just and equitable society where women have the autonomy to make informed decisions about their bodies and their futures, free from legal or societal judgment.

Restrictive abortion laws, societal stigma, and lack of access to reproductive health services exacerbate the mental health challenges that some women face after an abortion. Conversely, when women have access to comprehensive reproductive healthcare, including safe abortion services and mental health support, they are more likely to experience positive outcomes.

Recommendations:

- i. **Promote Comprehensive Reproductive Health Education:** Governments and educational institutions should provide comprehensive sex education that includes information about contraception, reproductive rights, and the legal status of abortion. This education should aim to reduce unintended pregnancies and ensure that women are informed about their reproductive choices. Empowering women with knowledge can help them make informed decisions, reducing the stigma associated with abortion and improving mental health outcomes.
- ii. **Improve Access to Contraceptive Services:** Healthcare systems should ensure widespread access to affordable and effective contraception, especially in regions where abortion is restricted. Family planning services should be easily accessible to all women, regardless of socioeconomic status. By preventing unintended pregnancies, the need for abortions can be reduced, which in turn can decrease the emotional and mental health burden on women.
- iii. **Support Legal Reforms for Safe Abortion Access:** Advocacy groups, international organizations, and governments should work together to reform restrictive abortion laws, ensuring that safe and legal abortion services are available to all women. Legal frameworks should protect women's reproductive autonomy and align with international human rights standards. Legal access to abortion can significantly reduce the incidence of unsafe abortions, thereby protecting women's health and reducing the associated mental health risks.

- iv. **Provide Psychological Support Services:** Mental health support should be integrated into reproductive healthcare services. Counselling should be offered to women before and after an abortion to help them process their emotions and cope with any psychological effects. Access to counselling and psychological support can help mitigate feelings of guilt, shame, or regret, and promote positive mental health outcomes.
- v. **Address Societal Stigma Through Public Awareness Campaigns:** Governments, NGOs, and community leaders should launch public awareness campaigns to reduce the stigma surrounding abortion. These campaigns should focus on normalizing abortion as a healthcare procedure and affirming women's rights to make decisions about their bodies. Reducing societal stigma can alleviate the psychological burden on women and foster a more supportive environment for those who choose to have an abortion.
- vi. **Support Research on Abortion and Mental Health:** Continued research should be encouraged to further understand the relationship between abortion and mental health, including the impact of various factors such as societal stigma, legal status, and personal beliefs. This research should inform policies and healthcare practices. Ongoing research will provide evidence-based insights that can improve mental health interventions and support services for women who have had an abortion.

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