The Moral Injury of Abortion

Kay Lyn Carlson

Omega Graduate School

February 22, 2023

120-DAY Assignment Submission

(includes 60-day developmental readings previously submitted and graded)

Note: This submission is an update of revisions provided by Professor Dr. Hughes on the January 100-day assignment, which could not be uploaded to DIAL.

120-Day Works Cited begins on page 14

60-Day Developmental readings begin on page 18

#4. [120-Days: Revision of Original Draft](https://www.ogsdial.org/system/Assignment_View.asp?ASSIGNMENT_ID=8134&COURSE_ID=2358)

120 Day – Revision of Original Draft
1. Revise your argumentative essay according to your Professor's recommendations. Submit the second draft to DIAL by the end of 120 days.

2. Include the sentence outline and headings developed for the 60-day and 100-day assignment with any changes received from professor feedback.

3. Additional drafts may be required before you will be allowed to present your paper in the Forum during Core 4.
4. Review the syllabus for the milestones that will need to be met in Core 3.
5. The submission of the forum paper (COM 822-62 Milestone #4) for consideration of presentation is a condition of attending Core 4.
6. Your Core 4 grade for this course will be the average of the grades submitted by the Faculty Dais.
7. The forum paper must be presented in Core 4 before being admitted to Core 5.
8. Any exceptions due to extenuating circumstances must be requested in writing to the Chief Academic Officer/Dean (chughes@ogs.edu).

**Thesis Statement**

There exists more unacknowledged and untreated abortion harm than is currently recognized within the applied behavioral science field.

**The Moral Injury of Abortion**

Abortion has always been a highly polarizing subject in the United States, dividing the country into two opposing sides, either anti-abortion (where abortion is viewed as taking the life of another human being and should be illegal) or pro-choice (women have the right to bodily autonomy and therefore should remain legal). The scientific community is also divided on whether undergoing an abortion procedure (either medically or surgically) is detrimental to a woman's overall health.

Research on both sides of the debate agrees that abortion can cause mental health issues in some women (MacNair, 2016). However, the extent of harm to one's overall biopsychosocial spiritual well-being and the number of people negatively impacted remains highly contested among the research community. Organizations such as the American Psychological Association (APA), the American Psychiatric Association, and the National Association of Social Workers support abortion access as a constitutional right for all women (*Major Mental Health Associations Decry U.S. Supreme Court Decision Overturning Roe v. Wade*, n.d.). Because of the position of these organizations supporting abortion, the research they deem scientifically sound may be questionable. There is plenty of published research to the contrary (Coleman et al., 2017; Rafferty & Longbons, 2020; Rue et al., 2004; Reardon & Longbons, 2023). Indeed, there exists more unacknowledged and untreated abortion harm than is currently recognized within the applied behavioral science field.

**Supporting Arguments:**

**Subpoint 1 – Abortion can be Morally Injurious**

**Moral Injury Defined**

The concept of moral injury originated with Dr. Johnathan Shay's work with war veterans. This concept has since been described as "potentially morally injurious events, such as perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations may be deleterious in the long-term, emotionally, psychologically, behaviorally, spiritually, and socially (what we label as moral injury)" (Litz, 2009, p.695). Likewise, moral injury has been defined and assessed as "a particular type of trauma characterized by… guilt, shame, spiritual/existential conflict, and loss of trust are identified as core symptoms. Depression, anxiety, anger, reexperiencing, self-harm, and social problems are identified as secondary symptoms" (Jinkerson, 2016, p. 122).

**Moral Injury and the Abortion Connection**

Similarly, abortion is a morally injurious event for scores of people negatively impacted by an abortion experience. Research reveals that abortion can be morally injurious to women based on similar symptoms experienced post-abortion. For example, Coleman et al. (2017) found that abortion's negative impact on women included "deep feelings of loss, existential concerns, and declines in quality of life. More specifically, common negatives included feelings about termination of a life, regret, shame, guilt, depression, anxiety, compromised self-appraisals, and self-destructive behaviors" (p. 113). Moreover, post-abortion testimonies demonstrate the moral injury suffered.

**Personal Testimony of Potential Moral Injury After Abortion**

Personal testimonies were recorded from over five-thousand women and several testimonies presented to the Supreme Court in the 2022 overturning of the Roe v Wade decision. One testimonial said, "They all tell you 'It is your choice' at the moment, but you do not feel that it is. Being unable to afford it, unable to tell your loved ones, not having the help, or feeling unable to support a child. When your partner doesn't want it like you do. All these things push you, blind you to a decision that you don't realize will destroy you" (Rafferty & Longbons, 2020, p. 5).

**Subpoint 2 – Inadequate research framework obstructs an adequate understanding of abortion-related trauma.**

**Moral Injury after Abortion (MI-A) Framework**

The need to develop a more inclusive research framework, moral injury after abortion (MI-A), is critical to understanding the depth and breadth of severe mental health issues among post-abortion women. Indeed, more researchers are beginning to recognize MI-A, (Koenig & Al Zaben, 2021; Dumbo et al., 2013; Carleton & Snodgrass, 2022) that goes beyond the military context. When a woman is morally conflicted regarding abortion and goes through with the procedure, there is a high likelihood that moral injury will occur. Regrettably, without the MI-A framework, the source of MI-related symptoms is ignored or misinterpreted. The woman believes no one understands her pain, and the trauma remains. Alternatively, she is led to believe that something is wrong with her (why she cannot get over it). Often, the secular society blames the trauma on religious beliefs, not recognizing the conscience as the trustworthy source of the pain.

**Personal Testimony with MI-A Symptoms**

"My child is dead and by my own choice. I spent years of anger, shame, and grief. It damaged my relationship with my husband, my children, and my God. For 30 years, I did not speak of it to anyone but my husband. My grief overwhelmed him and left him powerless and ashamed. For years I cried every Sunday in church, experienced dark depressions, thought of suicide, and flashes of anger" (Coleman et al., 2017, p. 116).

**The American Psychiatric Association's rejection of Criteria Related to Moral Injury**

In 2014, Johnathan Shay shared his frustrations with the American Psychiatric Association where he stated:

We have been carefully taught to believe that good character cannot change in adulthood…No bad experience can break it. The trouble with this lovely idea is that it is bunk…Over the years, the American Psychiatric Association has rejected every diagnostic concept that even hints at the possibility that bad experiences in adulthood can damage good character...I believe the stubborn American Psychiatric Association opposition comes from American attachment to this old philosophic position with its brilliant pedigree, not from empirical facts, which abundantly show the opposite (p. 184).

**Personal Testimony of Recognizable Character Change after Abortion.**

 "We were told we would go back to normal and it won't affect us but they were wrong!!! All I feel is emptiness and hatred. I used to be the happiest, most positive girl. All I want is to take it back" (Rafferty & Longbons, 2020, p. 5).

**Subpoint 3 – The United States court system recognizes abortion as harmful to women.**

**The South Dakota Task Force to Study Abortion Report**

In 2005, the South Dakota Task Force to Study Abortion was created following a majority vote from both the House and Senate. Legislatures were moved by the testimonies they heard, recognizing the need for an inquiry, and mandated further study on abortion. Part of their study included reviewing close to 2,000 testimonies from post-abortion women, and the Task Force report concluded that "a pattern of shared experiences and trauma and a common sense of loss emerge" (p. 7). Also, (p. 41) "[a]fter reviewing the lengthy and considerably referenced materials and testimony presented, the Task Force finds that there is a substantial discrepancy between current medical and psychological information and the medical and psychological information conveyed by abortion facilities (including Planned Parenthood of South Dakota) to their abortion patients." Moreover, "[t]he Task Force finds that it is simply unrealistic to expect that a pregnant mother is capable of being involved in the termination of the life of her own child without risk of suffering significant psychological trauma and distress. To do so is beyond the normal, natural, and healthy capability of a woman whose natural instincts are to protect and nurture her child" (p. 47-48).

**Affidavits Submitted to the Courts are Seriously Considered**

The affidavits of post-abortion women submitted to the judicial system (and studied by the Task Force) are sworn statements resulting in perjury should one be proven false. Because of the severe punishment risk, the court takes the submitted testimonies very seriously (Lanfranchi et al., 2018, p. 370). The Justice Foundation provides an example of an affidavit, and the morally injurious symptoms are apparent if read carefully.

**Example of Affidavit Submitted to South Dakota Legislative Body**

My heart is broken and longs for my child. I am ashamed of what I did. It is hard raising my children to have morals and integrity when I feel I have committed the most heinous act against my own flesh and blood. It's not easy living and working and trying to do what's right everyday while knowing that I had committed murder. How hasn't it [affected me]? Severe depression, nightmares where I see my child dragging its mangling limbs behind it as it walks towards me, knowing I've killed my own child, feelings of inadequacy as a mother to my children born afterwards. My resulting depression has had negative effects on everyone in my life.

**Counter Arguments:**

**Subpoint 1 – Scientific research shows abortion is not linked to negative mental health issues, but restricting access is (*Abortion,* n.d.).**

**The American Psychological Association's 2008 Task Force Report**

 In 2008, the American Psychological Association's (APA) Task Force on Mental Health and Abortion (TFMHA) reported that "the best scientific evidence published indicates that among adult women who have an unplanned pregnancy, the relative risk of mental health problems is no greater if they have a single elective first-trimester abortion than if they deliver that pregnancy" (p. 4).

**Restricting Abortion Access Leads to Economic Hardship and Insecurity.**

"Women denied an abortion were more likely than were women who received an abortion to experience economic hardship and insecurity lasting years. Laws that restrict access to abortion may result in worsened economic outcomes for women" (Foster et al., 2022, p. 1290).

**Personal Testimony of Positive Abortion Outcome**

Three women (out of 81 who felt like abortion changed them) felt a positive change. "Abortion did change my life…As soon as the stomach cramps (only slightly worse than regular menstrual pains) went away, I felt like a whole new person. I couldn't believe how much energy I had again. It was like waking out of a deep depression" (Rafferty & Longbons, p. 6).

**Subpoint 2 – Stigma and Prior Mental Health Issues are cause for Negative Abortion Reaction**

**The American Psychological Association's 2008 Task Force Report**

In the TFMHA report, they "reviewed no evidence sufficient to support the claim that an observed association between abortion history and mental health was caused by the abortion per se, as opposed to other factors" (p. 4). Other factors include perceptions of stigma, and the main factor resulting in a negative psychological reaction post-abortion is prior mental health issues (p.4).

**Internalized Stigma**

"While perceived abortion stigma refers to people's perceptions of how others judge them for seeking or obtaining an abortion, internalized stigma is when these views have been incorporated into one's sense of self in the form of shame, guilt, or secrecy. People who have had an abortion and hold anti-abortion attitudes may have internalized stigma" (Biggs, et al., 2020, p. 2-3).

**Subpoint 3 – Abortion is necessary for women's healthcare and socioeconomic success.**

**Reproductive Health benefits women and their family**

"Reproductive health is not just a benefit to a woman's individual rights, but her gateway for breaking free from her poverty trap and improving the welfare of herself, her children, and her household" (Finlay et al., 2018, p. 300).

**Reproductive Health allows sexual and reproductive freedoms**

**"**Within the framework of WHO's definition of health as a state of complete physical, mental and social well-being...Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so" (Finlay et al., 2018, p. 306).

**The Negative Effects of Motherhood in Poverty**

"[The] high cost of motherhood for poor women and their offspring manifests in disproportionately high lifelong rates of poverty, ill-health and mortality for offspring and mothers, alike" (Oberman, 2018, p. 665).

**Conclusion**

Concerning abortion harm, how is it possible that scientific research findings can come up with such vast differences in outcomes? Perhaps Brett Litz, Ph.D., said it best in a 2015 webinar titled *Moral Injury and Repair in Veterans of War* when he stated, "Unfortunately, psychologists have totally dominated the discourse about PTSD and have not reached out to others that know about the other types of impacts – biological, behavioral, social, relational, and spiritual and the effects on the family and culture. So, the impact of trauma is multi-dimensional" (U.S. Naval War College, 2015). Indeed, there is a considerable gap in the scientific literature because of this.

 After reading the 2005 "report of the South Dakota Task Force To Study Abortion" (*South Dakota Abortion Task Force Report.Pdf*, n.d., p. 1), it is clear that we as a society have been misled, misinformed, even lied to, and as a result, suffered beyond comprehension. For example, abortion doctors testified that they had withheld information on how the procedure is performed, using euphemisms to sanitize abortion language, not providing informed consent prior to the abortion, and reporting that abortions are voluntary when they are not. These misrepresentations can lead to moral injury, traumatic loss, and profound grief disorder in women and men.

In addition, the statement made by the APA Task Force on Mental Health and Abortion is very misleading due to what was excluded in their research to arrive at their conclusion regarding abortion harm. In response to their claim, the American Association of Pro-life Obstetricians and Gynecologists (AAPLOG) issued the following statement:

The charge of the APA Task Force was to collect, examine, and summarize peer-reviewed research published over the last 17 years about outcomes associated with abortion. It is important to note that nearly 50% of abortions are "repeat" abortions, and additionally, significant numbers of abortions are done after the first trimester. Thus, this sweeping conclusion only addresses half the women affected. So the report's conclusion (whether accurate or inaccurate), at best, pertains to only 50% of women who chose abortion. This select sample hardly represents all the women who have had an abortion experience. AAPLOG doctors are greatly concerned that the sweeping summary statement is entirely unbalanced, based, as it is, on a single study done in Great Britain in 1995. Many excellent studies, which reach a different conclusion, are disqualified for various technical reasons. As a result of the APA's reassurance to the public of "no increased risk", informed consent for abortion-minded women will continue to be grossly one-sided, and post-abortive women with significant mental health issues may miss the opportunity to have their abortion issue addressed in therapy (*AAPLOG Response to the APA Task Force Report – Prolife OBGYNS – AAPLOG – American Association of Pro-Life Obstetricians & Gynecologists*, n.d.).

 As the testimonies reveal, when a post-abortion woman discovers what the abortion entailed, she realizes that a human life was destroyed and that she was a perpetrator in the baby's demise. She can no longer hide from her denial, and grief and despair follow. Responses like this are not a new phenomenon. Several biblical passages relate to the after-effects of shedding innocent blood (David, who had Uriah killed, Paul, who had Christians killed, and Judas, who betrayed Jesus Christ that, ultimately led to his death); all had to confront the reality of what they had done. David and Paul were able to reconcile with God but not Judas.

Matthew 27:3-5 states, "When Judas, who had betrayed him, saw that Jesus was condemned, he was seized with remorse and returned the thirty silver coins to the chief priests and the elders. 'I have sinned,' he said, 'for I have betrayed innocent blood'…Then he went away and hanged himself" (New International Version Bible, 2004, Matthew 27: 3-5). Being seized with remorse is likened to what an untold number of post-abortion women experience once the blindfolds come off – either through seeing an ultrasound for the first time and realizing that it is not a blob of tissue as women are often told or by finding out how the procedure was performed or both. Also, like Judas, who went away, it is common for post-abortion women to experience avoidance symptoms (Rue et al., 2004, p. SR7), and some have suicidal thoughts (Rue et al., 2004, p. SR8).

 Without a doubt, the construct of moral injury for combat veterans needs to be equally understood with the population of women who have experienced abortion. This cross-population experience of moral injury provides a new framework that captures more multi-dimensional aspects that impact post-abortion well-being. To do otherwise is leadership malpractice, and the APA and other organizations should be held accountable to the potential millions of women and men who have suffered greatly because of their philosophical differences and lack of moral integrity.

Works Cited

AAPLOG Response to the APA Task Force Report. Prolife OBGYNS – AAPLOG. *American Association of Pro-life Obstetricians & Gynecologists.* (n.d.). https://aaplog.org/aaplog-response-to-the-apa-task-force-report-2/

Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. *PLOS ONE, 15*, e0226417. https://doi.org/10.1371/journal.pone.022641

AAPLOG Response to the APA Task Force Report – Prolife OBGYNS – AAPLOG. *American Association of Pro-life Obstetricians & Gynecologists.* (n.d.). https://aaplog.org/aaplog-response-to-the-apa-task-force-report-2/

Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. *PLOS ONE, 15*, e0226417. https://doi.org/10.1371/journal.pone.0226417

Coleman, P. K., Boswell, K., Etzkorn, K., & Turnwald, R. (2017). Women who suffered emotionally from abortion: A qualitative synthesis of their experiences.  *Journal of American Physicians and Surgeons*, *22(4)*, 133–118.

Carleton, T.C., & Snodgrass, J.L. (2022).  *Moral injury after abortion: Exploring the psychospiritual impact on Catholic women (1st ed.)*. Routledge. https://doi.org/10.4324/
9781003008613

Dombo, E. A., Gray, C., & Early, B. P. (2013). The trauma of moral injury: Beyond the battlefield. *Journal of Religion & Spirituality in Social Work: Social Thought*, *32*(3), 197–210. <https://doi.org/10.1080/15426432.2013.801732>

Finlay, J. E., & Lee, M. A. (2018). Identifying causal effects of reproductive health: Improvements on women's economic empowerment through the population poverty research initiative. *The Milbank Quarterly, 96(2)*, 300–322. https://doi.org/10.1111/
1468-0009.12326

Foster, D. G., Biggs, M. A., Ralph, L., Gerdts, C., Roberts, S., & Glymour, M. M. (2022). Socioeconomic outcomes of women who receive and women who are denied wanted abortions in the United States. *American Journal of Public Health, 112(9)*, 1290–1296. https://doi.org/10.2105/AJPH.2017.304247

Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. *Traumatology, 22(2)*, 122–130. https://doi.org/10.1037/trm0000069

Koenig, H. G., & Al Zaben, F. (2021). Moral injury: An increasingly recognized and widespread syndrome.  *Journal of Religion and Health, 60(5)*, 2989–3011. https://doi.org/10.1007/
s10943-021-01328-0

Litz, B. T., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009). Moral injury and moral repair in war veterans: A preliminary model and intervention strategy. *Clinical Psychology Review*, *29*(8), 695–706. https://doi.org/10.1016
/j.cpr.2009.07.003

Lanfranchi, A., Gentles, I., & Ring-Cassidy, E. (2108).  *Complications: Abortion's impact on women (2nd ed.*). The deVeber Institute for Bioethics and Social Research.

*Major Mental Health Associations decry U.S. Supreme Court decision overturning Roe v. Wade.* (n.d.). https://www.socialworkers.org/News/News-Releases/ID/2504/Major-Mental-Health-Associations-decry-US-Supreme-Court-decision-overturning-Roe-v-Wade

McNair, R. (2016).  *Peace Psychology Perspectives on Abortion*. Feminism & Nonvioence Studies Association.

Mental Health and Abortion Task Force Report. (n.d.). https://www.Apa.Org. https://www.apa.org/pi/women/programs/abortion/index

Oberman, M. (2018). Motherhood, abortion, and the medicalization of poverty. *Journal Law, Medicine & Ethics, 45*(3), 665-671. doi: 10.1177/1073110518804221

Rafferty, K. A., & Longbons, T. (2020). #Abortionchangesyou: A case study to understand the communicative tensions in women's medication abortion narratives. *Health Communication,* *1–10*. https://doi.org/10.1080/10410236.2020.1770507

Reardon, D. C., & Longbons, T. (2023). Effects of pressure to abort on women's emotional responses and mental health. *Cureus*, *15(1)*, e34456. https://doi.org/10.7759/
cureus.34456

Rue, V., Coleman, P., Rue, J., & Reardon, D. (2004). Induced abortion and traumatic stress: A preliminary comparison of American and Russian women. *Medical Science Monitor : International Medical Journal of Experimental and Clinical Research, 10*, SR5-16.

Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*, 182–191.https://doi.org/10.1037/
a0036090

South Dakota Abortion Task Force Report.pdf. (n.d.). https://www.dakotavoice.com/Docs/South
%20Dakota%20Abortion%20Task%20Force%20Report.pdf

The Justice Foundation. (2022). Amicus curiae brief of Melinda Thybault, founder of the moral outcry petition, (individually and acting on behalf of 539,108 signers of the moral outcry petition), 2,249 women injured by abortion, the National Institute of Family and Life Advocates (NIFLA), and Florida voice for the unborn in support of petitioners for reversal on the merits in support of Mississippi. https://www.dropbox.com/sh/p2fi4
taxmrbivyz/AAAP\_aenldXwXb34Ktcq\_X8la?dl=0

**Developmental Readings**

**Source One:** *Mental health and abortion task force report*. (n.d.). https://www.Apa.Org. <https://www.apa.org/pi/women/programs/abortion/index>

**Comment 1**

**Quote/Paraphrase: "**[The] best scientific evidence published indicates that among adult women who have an unplanned pregnancy the relative risk of mental health problems is no greater if they have a single elective first-trimester abortion than if they deliver that pregnancy" (p. 4)**.**

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills. Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** For the American Psychological Association (APA) to make a claim regarding the low risk of mental health problems following an abortion is variant to my worldview and my professional expertise on the subject matter.

**Contextualization:**  Using critical reading and analysis skills is vitally important when reviewing published literature. For the unassuming audience, it appears that the APA's 2008 task force report on abortion, indicates that there is no mental health difference between having an abortion versus having a baby. However, not only does APA exclude nearly half of the abortion population in their research – younger women (versus adult women), planned pregnancy (versus unplanned pregnancy), single abortion (versus more than one abortion), first-trimester (versus second and third trimester), but they also excluded international scholarly research as well. There are other flaws in their report as well and I can use this information while communicating persuasively how abortion can be morally injurious.

**Comment 2:**

**Quote/Paraphrase:** [It] is clear that some women do experience sadness, grief, and feelings of loss following termination of a pregnancy, and some experience clinically significant disorders, including depression and anxiety. However, the TFMHA reviewed no evidence sufficient to support the claim that an observed association between abortion history and mental health was caused by the abortion per se, as opposed to other factors (p.4).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The above statement is both additive and variant to my worldview and understanding regarding abortion. Variant because there is a gap in research that doesn't assess for moral injury post abortion. As a result, more women (than some) are negatively impacted. Additive to my worldview are the experiences that women share – although more exist than are mentioned in APA's report.

**Contextualization:**  I can use this information to identify that morally injurious symptoms do exist with research presented by proponents of abortion that will help communicate a better understanding that a new construct to be considered – Moral Injury - Abortion (MI-A).

**Comment 3:**

**Quote/Paraphrase:** Women who come to internalize stigma associated with abortion (e.g., who see themselves as tainted, flawed, or morally deficient) are likely to be particularly vulnerable to later psychological distress" (*Mental Health and Abortion Task Force Report*, n.d., p. 12)

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** The above quote is a variant analysis regarding internalized stigma associated with abortion –both of my worldview and professional knowledge regarding abortion.

**Contextualization:**  Women who view themselves as tainted, flawed, or morally deficient has more to do with moral injury after abortion by going against one's conscience than it has to do with internalized stigma. In my Christian worldview, it is the work of the Holy Spirit piercing our conscience with guilt in order for us to reconcile with God and receive His grace. Secular understanding views culture, the judgements of others, and religion as reasons why women have internalized stigma whereby they eliminate the spiritual crisis of an individual that is a part of moral injury.

**Source Two:** Coleman, P. K., Boswell, K., Etzkorn, K., & Turnwald, R. (2017). Women who suffered emotionally from abortion: A qualitative synthesis of their experiences.  *Journal of American Physicians and Surgeons, 22(4)*, 133–118.

**Comment 4:**

**Quote/Paraphrase:** Even in an ideal environment wherein women receive adequate counseling, are offered support to continue their pregnancies, and do not present with established risk factors, it is still possible to be blindsided by an abortion and suffer ill effects due to the inherent complexity of abortion (p.118).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper. Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Being blindsided after an abortion is additive to my worldview and professional experience working with women post abortion.

**Contextualization:**  I can use this quote to further communicate how abortion can be morally injurious even when a woman feels completely informed and has no ambivalence toward having an abortion. It may not be an immediate blindsiding and it may take years but there can come a time in a women's life where she realizes the magnitude of what took place and the results can be traumatic. As we mature, so does our understanding about life, the importance of family, the value of friendships, and what it means to love. We also understand more clearly the horrors of abortion where one realizes later in life that abortion was murder resulting in a haunting that can plague one for the rest of their life.

**Comment 5**

**Quote/Paraphrase: "**A thematic analysis showed that commonly voiced positives included spiritual growth, involvement in pro-life efforts, and reaching out to other women who were considering the procedure or had obtained an abortion" (p. 113).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Finding the positive after abortion is additive to my Christian worldview (Genesis 50:20) where what was meant for evil God can use it for good.

**Contextualization:**  It is important to use critical reading and analyzing skills while conducting research. In the quote above, some readers may interpret that woman had a positive abortion outcome experience, when they did not. The growth (sometimes biblically referred to as beauty for ashes) is how one transforms a traumatic experience into something good. This is also referred to as post-traumatic growth – where one can recover and rise above the traumatic experience with a new sense of purpose and meaning making of a horrific event.

 **Comment 6**

**Quote/Paraphrase** "Negatives included deep feelings of loss, existential concerns, and declines in quality of life. More specifically, common negatives included feelings about termination of a life, regret, shame, guilt, depression, anxiety, compromised self-appraisals, and self-destructive behaviors" (p. 113).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The negative experiences after abortion are additive to my Christian worldview and professional experience.

**Contextualization:**  I can correlate the negative post abortion symptoms to the moral injury symptoms listed in Jeremy Jinkerson's article (Defining and assessing moral injury: A syndrome perspective) where he advances the moral injury concept into moral injury as a syndrome.

**Comment 7**

**Quote/Paraphrase:** "Every woman knows in her heart that abortion is wrong. Even though I was young & scared, there was a feeling of 'working against' myself. Through my twenties I would think about it but pushed it aside. It was only when I married & started my family that I began to really struggle with my abortion decision. When my first son was born I realized what I had done so many years ago. The love I have for my children was/is more powerful than any emotion I've ever experienced. The thought of anyone hurting them has an enormous effect on me as a mother. The knowledge that I ended the life of my child is difficult to manage emotionally. I have struggled over the years with being extremely hard on myself & emotionally beating up on myself. On the outside I don't think anyone would see that. I look like I have it 'together.' However, it is a battle that I have to be very intentional about. Regret is a crippling state of mind" (p.116-117).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** The personal testimony of abortion harm is additive to my Christian worldview and professional experience.

**Contextualization:** I can use personal post abortion testimonies of women that will help others to realize that moral injury after abortion does exist. Stories have a way of connecting us emotionally to the pain suffered by others.

**Source Three**: Rafferty, K. A., & Longbons, T. (2020). #AbortionChangesYou: A case study to understand the communicative tensions in women's medication abortion narratives.  *Health Communication, 1–10*. <https://doi.org/10.1080/10410236.2020.1770507>

**Comment 8:**

**Quote/Paraphrase:**  "They all tell you 'It's your choice' in the moment, but you don't feel that it is. Being unable to afford it, unable to tell your loved ones, not having the help or feeling unable to support a child. When your partner doesn't want it like you do. All these things push you, blind you to a decision that you don't realize will desroy you" (p. 5).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The personal story of the agony of the abortion decision and the aftermath suffered is additive to my worldview and professional experience.

**Contextualization:** I can use this quote to help others realize the ambivalence that exists prior to having an abortion. The entrapment a woman feels causes her to do things she would otherwise not do. The testimony is a clear indication of moral injury as well as traumatic loss and potential prolonged grief disorder. The quote will also help me to communicate persuasively for the need to understand abortion in the context of moral injury.

 **Comment 9**

**Quote/Paraphrase:** "I felt the child growing inside of me. I was rubbing my stomach without me even knowing. I felt the doubt in my heart, but kept telling myself this is the best decision I needed to make" (p. 4).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills. Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** The ambivalence experienced in the above testimony is an example of how women feel torn regarding the abortion experience which is additive to my worldview.

**Contextualization:**  I can use this quote to demonstrate how morally injurious abortion has the potential to be. When a woman rubs her stomach, this is a clear indication she has already unconsciously and consciously attached to the fetus. Acknowledging that a life was growing and the doubt in her heart indicate that going through with the abortion procedure could be a potentially moral injurious event.

**Source Four** Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. *PLOS ONE, 15, e0226417*. https://doi.org/10.1371/journal.pone.0226417

**Comment 10:**

**Quote/Paraphrase:** "While perceived abortion stigma refers to people's perceptions of how others judge them for seeking or obtaining an abortion, internalized stigma is when these views have been incorporated into one's sense of self in the form of shame, guilt, or secrecy. People who have had an abortion and hold anti-abortion attitudes may have internalized stigma" (p. 2-3).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Internalized stigma is variant analysis to my Christian worldview and professional experience.

**Contextualization:**  While internalized stigma may contribute from the effects of perceived abortion stigma, there are other factors at play that bring about shame, guilt, or secrecy both before and after an abortion. While proponents of abortion may view internalized stigma because of society's worldviews against abortion, the conscience, (Holy Spirit), is negligibly ignored and omitted as sources of moral injury caused by an abortion experience.

**Comment 11:**

**Quote/Paraphrase: "**Most people considering abortion perceive some abortion stigma, which is associated with psychological distress years later" (p. 2).

**Essential Element:**  Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The result of abortion stigma associated with psychological distress years later is variant to my worldview.

**Contextualization:**  While abortion stigma contributes to psychological distress, it is the moral injury, traumatic loss, and profound grief that causes post-traumatic stress disorder. Better terminology is needed other than stigma to accurately articulate symptoms post-abortion.

**Source Five:** Camilla. (n.d.). Complications. DeVeber Institute. [https://www.deveber.org/
complications/](https://www.deveber.org/complications/)

**Comment 12:**

**Quote/Paraphrase:** "Affidavits, as sworn statements, are treated with the utmost seriousness within the judicial system. False statements on affidavits are defined as perjury and can lead to severe punishment of the guilty party" (p. 370).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Affidavits are an additive analysis to my worldview.

**Contextualization:**  I can use the affidavits submitted to the United States Supreme Court, that accurately reflects how abortion can be morally injurious and the symptoms they incur.

**Source Six:** Finlay, J. E., & Lee, M. A. (2018). Identifying causal effects of reproductive health improvements on women's economic empowerment through the population poverty research initiative.  *The Milbank Quarterly, 96(2)*, 300–322. <https://doi.org/10.1111/1468-0009.12326>

**Comment 13:**

**Quote/Paraphrase:** "Reproductive health is not just a benefit to a woman's individual rights, but her gateway for breaking free from her poverty trap and improving the welfare of herself, her children, and her household" (p.300).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Abortion is not reproductive health and is variant to my Christian worldview.

**Contextualization:** Whatever happened to the concept of a husband and wife working together to raise a family while being socially responsible adults? Unfortunately, the abortion narrative is described as an economic empowerment for women to break free from poverty. But at what cost? The bible verse Mark 8: 36 is appropriate for us to be wise in our decision making regarding abortion – choosing economic freedom while losing your soul profits one nothing. Personally, I would live in a tent to have my baby back and any economic hardships it would possibly create would be well worth the love experienced between a mother and child.

**Comment 14**

**Quote/Paraphrase: "**Within the framework of WHO's definition of health as a state of complete physical, mental and social well-being. . . Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so" (p. 306).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Reproductive Health, as defined in the quote above, is a variant analysis to my Christian worldview for multiple reasons.

**Contextualization:** Reproductive Health terminology profoundly neglects the trauma suffered from having sexual and reproductive freedoms. The so-called enjoyment is short lived and when the reality is no longer deniable, regret and long-term suffering abides. From a biblical perspective, reproductive health consists of a properly structured order between a husband and wife. Without it, chaos ensues.

**Source Seven:** Foster, D. G., Biggs, M. A., Ralph, L., Gerdts, C., Roberts, S., & Glymour, M. M. (2022). Socioeconomic outcomes of women who receive and women who are denied wanted abortions in the United States.  *American Journal of Public Health, 112(9)*, 1290–1296. <https://doi.org/10.2105/AJPH.2017.304247>

**Comment 15:**

**Quote/Paraphrase: "**Women denied an abortion were more likely than were women who received an abortion to experience economic hardship and insecurity lasting years. Laws that restrict access to abortion may result in worsened economic outcomes for women" (P. 1290).

**Essential Element:** Use critical reading, analyzing, note-taking, and

summarization skills.

**Additive/Variant Analysis:** Women suffering economic hardship and insecurity is an additive analysis to my worldview.

**Contextualization:** Secular society deems pregnancy in terms of economic instability for women rather than a beautiful opportunity to experience love at the deepest level of human existence. Abortion has become a scapegoat for unsuspecting men and women who have been groomed to believe the lie that money and security will bring about long-lasting happiness. While I agree that women who choose not to have an abortion do experience more economic hardship and insecurity, it's something we can do something about versus making the woman feel entrapped into making a forced decision to survive.

**Source Eight:** Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. *Traumatology, 22(2)*, 122–130. <https://doi.org/10.1037/trm0000069>
 **Comment 16:**

**Quote/Paraphrase: "**Moral injury is a particular type of trauma characterized by… guilt, shame, spiritual/existential conflict, and loss of trust are identified as core symptoms. Depression, anxiety, anger, reexperiencing, self-harm, and social problems are identified as secondary symptoms" (p. 122).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Moral injury symptoms is additive to my Christian worldview and professional experience working with women post-abortion.

**Contextualization:** I can use this information to persuasively communicate the gap in literature regarding abortion trauma. The symptoms of moral injury correlate with those who have been harmed in some way through an abortion experience. This is the central idea to my paper and the need for the MI-A construct to exist.

**Comment 17**

**Quote/Paraphrase: "**For providers, researchers, clergy, veterans, and other stakeholders to consistently identify this particular invisible injury, it is imperative that moral injury be defined in symptomological terms. Such a definitional update would allow for improved clinical assessment strategies, quantitative scientific study, and cohesive discussion among stakeholders" (p. 122).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Defining moral injury in symptomological terms is additive to my Christian worldview.

**Contextualization:** For too long, proponents of abortion have controlled the narrative that abortion is easy, safe, and normal while those experiencing distress are made to feel that something is wrong with them. Having the ability to categorize the symptoms commonly experienced after abortion has the potential to be revolutionary in capturing the magnitude of its traumatic harm.

**Source Nine**: Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*, 182–191. <https://doi.org/10.1037/a0036090>

**Comment 18:**

**Quote/Paraphrase:** "We have been carefully taught to believe that good character cannot change in adulthood…No bad experience can break it. The trouble with this lovely idea is that it is bunk…Over the years, the American Psychiatric Association has rejected every diagnostic concept that even hints at the possibility that bad experience in adulthood can damage good character...I believe the stubborn American Psychiatric Association opposition comes from American attachment to this old philosophic position with its brilliant pedigree, not from empirical facts, which abundantly show the opposite" (p. 184).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The idea that a bad experience can damage good character and how the American Psychiatric Association's rejection of the concept is an additive analysis to my Christian worldview.

**Contextualization:** I can use this above quote to persuasively communicate how and why abortion can change good character – from believing oneself to be loving, caring, kind, and nurturing into a murderer, selfish, loathsome, and deserving of death character -- regardless of whether abortion is legal or not.

**Comment 19**

**Quote/Paraphrase: "**What I have to say compliment's what Litz., et al. (2009) have described, differing primarily in the "who" of the violator. In their definition the violator is the self, whereas in mine the violator is a powerholder" (p. 184).

**Essential Element:**  Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Defining the "who" violator is an additive analysis to my worldview.

**Contextualization:**  We have been taught not to blame others for the transgressions we commit and to take full responsibility for our actions. As a result, post-abortive women fail to have compassion on themselves for how they were misled, mistreated, and misguided regarding abortion. The "who" violator in moral injury is not only the self, but the violator can also be the powerholder. For example, if abortion is legal, it must be okay, believing that government (powerholder) can be trusted not to enact laws that could be potentially harmful.

**Comment 20**

**Quote/Paraphrase: "**How does moral injury change someone? It deteriorates their character, their ideals, ambitions, and attachments begin to change and shrink. [It] impair[s] and sometimes destroy[s] the capacity to trust. When social trust is destroyed, it is replaced by the settled expectancy of harm, exploitation, and humiliation from others" (p. 186).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** How moral injury changes someone is an additive analysis to my Christian worldview.

**Contextualization:** It is important to understand that post abortion women who have been morally injured are very selective on who they can trust with their story. Unfortunately, proponents of abortion rights have wrongly accused women of having a political agenda when they do step out and share how abortion negatively impacted their lives. Oftentimes, "the expectancy of harm, exploitation, and humiliation from others" (p. 186) is real and serves as a barrier to speak out against abortion.

**Source Ten:** Koenig, H. G., & Al Zaben, F. (2021). Moral injury: An increasingly recognized and widespread syndrome.  *Journal of Religion and Health, 60(5)*, 2989–3011. [https://doi.org/
10.1007/s10943-021-01328-0](https://doi.org/10.1007/s10943-021-01328-0)

**Comment 21:**

**Quote/Paraphrase:** "Symptoms of MI may also be experienced by those outside of the military. The perceived transgression of moral values is common in healthcare professionals and first responders (police, firemen, emergency medical personnel) exposed to severe trauma, as well as among individuals experiencing any type of physical or severe emotional/physical trauma (rape, abortion, automobile accidents, other accidents, etc.)" (Koenig & Al Zaben, 2021).

**Essential Element:** Use critical reading, analyzing, note-taking, and

summarization skills.

**Additive/Variant Analysis:** Recognizing moral injury symptoms in other populations and contexts (other than war veterans) is an additive analysis to my Christian worldview.

**Contextualization:**  Transgressing one's internal moral compass creates dissonance both interpersonally and intrapersonally and has the potential to be a traumatic experience. There is plenty of valid research evidence to support the claim that abortion is morally injurious and that both the American Psychological Association and the American Psychiatric Association should acknowledge and address the potential outcome post abortion. To do otherwise, is an abuse of their power and neglect to adequately address the abortion sufficiently.

**Source Eleven:** Reardon, D., Longbons, T., & Reardon, D. C. (2023). Effects of pressure to abort on women’s emotional responses and mental health. *Cureus Journal of Medical Science*, *15*(1).

**Comment 22:**

**Quote/Paraphrase: "**Women frequently choose abortion due to perceived pressures from other people, financial concerns, or other circumstantial pressures. These pressures, individually and/or together, are strongly associated with more negative emotions about their abortion; more disruptions of their daily life, work, or relationships; more frequent dreams, flashbacks, or intrusive thoughts about their abortions; more frequent feelings of loss, grief, or sadness about their abortions; more moral and maternal conflict over their abortion decisions; a perceived decline in their overall mental health that they attribute to their abortions; and a higher degree of desire or need for help to cope with negative feelings about their abortions" (p. 9).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** This 2023 article regarding the negative effects of abortion are additive to my analysis and Christian worldview.

**Contextualization:**  I can use this article to further persuade how abortion can be devastating to a women's overall well-being. Looking at abortion through a moral lens provides a clear pathway to recognize the moral injury suffered post abortion.

**Source 12:** Dombo, E. A., Gray, C., & Early, B. P. (2013). The trauma of moral injury: Beyond the battlefield. *Journal of Religion & Spirituality in Social Work: Social Thought*, *32*(3), 197–210. <https://doi.org/10.1080/15426432.2013.801732>

**Comment 23**

**Quote/Paraphrase:** "The social work mandate of starting where the client is guides us to include focus on the client's morality and not to neglect to address a key traumatic experience for numerous people: moral injury" (p. 207).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** Starting where the client is and not neglecting moral issues in the social work setting is additive to my Christian worldview.

**Contextualization:** I can use the above article and quote to address the need that social workers must assess for potential moral injury incurred by post abortion sufferers. Many women believe therapists do not understand or fail to reach deep enough in the innermost parts of a women's soul to fully appreciate their traumatic injury post-abortion. Oftentimes, the therapy session explores the reasons why the abortion was a necessary decision and fail to address key components that would be beneficial in recovery.

**Comment 24**

**Quote/Paraphrase:** "This same concept of moral injury may be applied beyond the battlefield to nonmilitary clients who also experience the emotional effects of their own actions that violate the dictates of their moral compass" (p.198).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** To expand the concept of moral injury is additive to my Christian worldview.

**Contextualization:** The concept of moral injury is not a difficult construct to understand and as more research is unfolding, moral injury can occur to anyone who is haunted by a decision that was in violation of their own morals and values.

Works Cited

AAPLOG Response to the APA Task Force Report – Prolife OBGYNS – AAPLOG. *American Association of Pro-life Obstetricians & Gynecologists.* (n.d.). https://aaplog.org/aaplog-response-to-the-apa-task-force-report-2/

Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. *PLOS ONE, 15*, e0226417. https://doi.org/10.1371/journal.pone.0226417

Coleman, P. K., Boswell, K., Etzkorn, K., & Turnwald, R. (2017). Women who suffered emotionally from abortion: A qualitative synthesis of their experiences.  *Journal of American Physicians and Surgeons*, 22(4), 133–118.

Carleton, T.C., & Snodgrass, J.L. (2022).  *Moral injury after abortion: Exploring the psychospiritual impact on Catholic women (1st ed.)*. Routledge. https://doi.org/10.4324/
9781003008613

Dombo, E. A., Gray, C., & Early, B. P. (2013). The trauma of moral injury: Beyond the battlefield. *Journal of Religion & Spirituality in Social Work: Social Thought*, *32*(3), 197–210. <https://doi.org/10.1080/15426432.2013.801732>

Finlay, J. E., & Lee, M. A. (2018). Identifying causal effects of reproductive health: Improvements on women's economic empowerment through the population poverty research initiative. *The Milbank Quarterly, 96(2)*, 300–322. https://doi.org/10.1111/
1468-0009.12326

Foster, D. G., Biggs, M. A., Ralph, L., Gerdts, C., Roberts, S., & Glymour, M. M. (2022). Socioeconomic outcomes of women who receive and women who are denied wanted abortions in the United States. *American Journal of Public Health, 112(9)*, 1290–1296. https://doi.org/10.2105/AJPH.2017.304247

Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. *Traumatology, 22(2)*, 122–130. https://doi.org/10.1037/trm0000069

Koenig, H. G., & Al Zaben, F. (2021). Moral injury: An increasingly recognized and widespread syndrome.  *Journal of Religion and Health, 60(5)*, 2989–3011. https://doi.org/10.1007/
s10943-021-01328-0

Litz, B. T., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009). Moral injury and moral repair in war veterans: A preliminary model and intervention strategy. *Clinical Psychology Review*, *29*(8), 695–706. https://doi.org/10.1016
/j.cpr.2009.07.003

Lanfranchi, A., Gentles, I., & Ring-Cassidy, E. (2108).  *Complications: Abortion's impact on women* (2nd ed.). The deVeber Institute for Bioethics and Social Research.

*Major Mental Health Associations decry U.S. Supreme Court decision overturning Roe v. Wade.* (n.d.). https://www.socialworkers.org/News/News-Releases/ID/2504/Major-Mental-Health-Associations-decry-US-Supreme-Court-decision-overturning-Roe-v-Wade

McNair, R. (2016).  *Peace Psychology Perspectives on Abortion*. Feminism & Nonvioence Studies Association.

Mental Health and Abortion Task Force Report. (n.d.). https://www.Apa.Org. https://www.apa.org/pi/women/programs/abortion/index

Oberman, M. (2018). Motherhood, Abortion, and the Medicalization of Poverty. *Journal Law, Medicine & Ethics, 45*(3), 665-671. doi: 10.1177/1073110518804221

Rafferty, K. A., & Longbons, T. (2020). #AbortionChangesYou: A Case Study to Understand the Communicative Tensions in Women's Medication Abortion Narratives. Health Communication, 1–10. https://doi.org/10.1080/10410236.2020.1770507

Reardon, D. C., & Longbons, T. (2023). Effects of Pressure to Abort on Women's Emotional Responses and Mental Health. *Cureus*, *15*(1), e34456. https://doi.org/10.7759/cureus.34456

Rue, V., Coleman, P., Rue, J., & Reardon, D. (2004). Induced abortion and traumatic stress: A preliminary comparison of American and Russian women. Medical Science Monitor : International Medical Journal of Experimental and Clinical Research, 10, SR5-16.

Shay, J. (2014). Moral injury. Psychoanalytic Psychology, 31, 182–191. https://doi.org/10.1037/a0036090

South Dakota Abortion Task Force Report.pdf. (n.d.). https://www.dakotavoice.com/Docs/South%20Dakota%20Abortion%20Task%20Force%20Report.pdf

The Justice Foundation. (2022). Amicus curiae brief of Melinda Thybault, founder of the moral outcry petition, (individually and acting on behalf of 539,108 signers of the moral outcry petition), 2,249 women injured by abortion, the National Institute of Family and Life Advocates (NIFLA), and Florida voice for the unborn in support of petitioners for reversal on the merits in support of Mississippi https://www.dropbox.com/sh/p2fi4taxmrbivyz/AAAP\_aenldXwXb34Ktcq\_X8la?dl=0

 **Developmental Readings**

**Source One:** *Mental Health and Abortion Task Force Report*. (n.d.). Https://Www.Apa.Org. Retrieved June 13, 2019, from <https://www.apa.org/pi/women/programs/abortion/index>

**Comment 1**

**Quote/Paraphrase: "**[The] best scientific evidence published indicates that among adult women who have an unplanned pregnancy the relative risk of mental health problems is no greater if they have a single elective first-trimester abortion than if they deliver that pregnancy" (p. 4)**.**

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills. Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** For the American Psychological Association (APA) to make a claim regarding the low risk of mental health problems following an abortion is variant to my worldview and my professional expertise on the subject matter.

**Contextualization:**  Using critical reading and analysis skills is vitally important when reviewing published literature. For the unassuming audience, it appears that the APA's 2008 task force report on abortion, indicates that there is no mental health difference between having an abortion versus having a baby. However, not only does APA exclude nearly half of the abortion population in their research – younger women (versus adult women), planned pregnancy (versus unplanned pregnancy), single abortion (versus more than one abortion), first-trimester (versus second and third trimester), but they also excluded international scholarly research as well. There are other flaws in their report as well and I can use this information while communicating persuasively how abortion can be morally injurious.

**Comment 2:**

**Quote/Paraphrase:** [It] is clear that some women do experience sadness, grief, and feelings of loss following termination of a pregnancy, and some experience clinically significant disorders, including depression and anxiety. However, the TFMHA reviewed no evidence sufficient to support the claim that an observed association between abortion history and mental health was caused by the abortion per se, as opposed to other factors (p.4).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The above statement is both additive and variant to my worldview and understanding regarding abortion. Variant because there is a gap in research that doesn't assess for moral injury post abortion. As a result, more women (than some) are negatively impacted. Additive to my worldview are the experiences that women share – although more exist than are mentioned in APA's report.

**Contextualization:**  I can use this information to identify that morally injurious symptoms do exist with research presented by proponents of abortion that will help communicate a better understanding that a new construct to be considered – Moral Injury - Abortion (MI-A).

**Comment 3:**

**Quote/Paraphrase:** Women who come to internalize stigma associated with abortion (e.g., who see themselves as tainted, flawed, or morally deficient) are likely to be particularly vulnerable to later psychological distress" (*Mental Health and Abortion Task Force Report*, n.d., p. 12)

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** The above quote is a variant analysis regarding internalized stigma associated with abortion –both of my worldview and professional knowledge regarding abortion.

**Contextualization:**  Women who view themselves as tainted, flawed, or morally deficient has more to do with moral injury after abortion by going against one's conscience than it has to do with internalized stigma. In my Christian worldview, it is the work of the Holy Spirit piercing our conscience with guilt in order for us to reconcile with God and receive His grace. Secular understanding views culture, the judgements of others, and religion as reasons why women have internalized stigma whereby they eliminate the spiritual crisis of an individual that is a part of moral injury.

**Source Two:** Coleman, P. K., Boswell, K., Etzkorn, K., & Turnwald, R. (2017). Women who suffered emotionally from abortion: A qualitative synthesis of their experiences. Journal of American Physicians and Surgeons, 22(4), 133–118.

**Comment 4:**

**Quote/Paraphrase:** Even in an ideal environment wherein women receive adequate counseling, are offered support to continue their pregnancies, and do not present with established risk factors, it is still possible to be blindsided by an abortion and suffer ill effects due to the inherent complexity of abortion (p.118).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper. Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Being blindsided after an abortion is additive to my worldview and professional experience working with women post abortion.

**Contextualization:**  I can use this quote to further communicate how abortion can be morally injurious even when a woman feels completely informed and has no ambivalence toward having an abortion. It may not be an immediate blindsiding and it may take years but there can come a time in a women's life where she realizes the magnitude of what took place and the results can be traumatic. As we mature, so does our understanding about life, the importance of family, the value of friendships, and what it means to love. We also understand more clearly the horrors of abortion where one realizes later in life that abortion was murder resulting in a haunting that can plague one for the rest of their life.

**Comment 5**

**Quote/Paraphrase: "**A thematic analysis showed that commonly voiced positives included spiritual growth, involvement in pro-life efforts, and reaching out to other women who were considering the procedure or had obtained an abortion" (p. 113).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Finding the positive after abortion is additive to my Christian worldview (Genesis 50:20) where what was meant for evil God can use it for good.

**Contextualization:**  It is important to use critical reading and analyzing skills while conducting research. In the quote above, some readers may interpret that woman had a positive abortion outcome experience, when they did not. The growth (sometimes biblically referred to as beauty for ashes) is how one transforms a traumatic experience into something good. This is also referred to as post-traumatic growth – where one can recover and rise above the traumatic experience with a new sense of purpose and meaning making of a horrific event.

 **Comment 6**

**Quote/Paraphrase** "Negatives included deep feelings of loss, existential concerns, and declines in quality of life. More specifically, common negatives included feelings about termination of a life, regret, shame, guilt, depression, anxiety, compromised self-appraisals, and self-destructive behaviors" (p. 113).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The negative experiences after abortion are additive to my Christian worldview and professional experience.

**Contextualization:**  I can correlate the negative post abortion symptoms to the moral injury symptoms listed in Jeremy Jinkerson's article (Defining and assessing moral injury: A syndrome perspective) where he advances the moral injury concept into moral injury as a syndrome.

**Comment 7**

**Quote/Paraphrase:** "Every woman knows in her heart that abortion is wrong. Even though I was young & scared, there was a feeling of 'working against' myself. Through my twenties I would think about it but pushed it aside. It was only when I married & started my family that I began to really struggle with my abortion decision. When my first son was born I realized what I had done so many years ago. The love I have for my children was/is more powerful than any emotion I've ever experienced. The thought of anyone hurting them has an enormous effect on me as a mother. The knowledge that I ended the life of my child is difficult to manage emotionally. I have struggled over the years with being extremely hard on myself & emotionally beating up on myself. On the outside I don't think anyone would see that. I look like I have it 'together.' However, it is a battle that I have to be very intentional about. Regret is a crippling state of mind" (p.116-117).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** The personal testimony of abortion harm is additive to my Christian worldview and professional experience.

**Contextualization:** I can use personal post abortion testimonies of women that will help others to realize that moral injury after abortion does exist. Stories have a way of connecting us emotionally to the pain suffered by others.

**Source Three**: Rafferty, K. A., & Longbons, T. (2020). #AbortionChangesYou: A Case Study to Understand the Communicative Tensions in Women's Medication Abortion Narratives. Health Communication, 1–10. <https://doi.org/10.1080/10410236.2020.1770507>

**Comment 8:**

**Quote/Paraphrase:**  "They all tell you 'It's your choice' in the moment, but you don't feel that it is. Being unable to afford it, unable to tell your loved ones, not having the help or feeling unable to support a child. When your partner doesn't want it like you do. All these things push you, blind you to a decision that you don't realize will desroy you" (p. 5).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The personal story of the agony of the abortion decision and the aftermath suffered is additive to my worldview and professional experience.

**Contextualization:** I can use this quote to help others realize the ambivalence that exists prior to having an abortion. The entrapment a woman feels causes her to do things she would otherwise not do. The testimony is a clear indication of moral injury as well as traumatic loss and potential prolonged grief disorder. The quote will also help me to communicate persuasively for the need to understand abortion in the context of moral injury.

 **Comment 9**

**Quote/Paraphrase:** "I felt the child growing inside of me. I was rubbing my stomach without me even knowing. I felt the doubt in my heart, but kept telling myself this is the best decision I needed to make" (p. 4).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills. Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** The ambivalence experienced in the above testimony is an example of how women feel torn regarding the abortion experience which is additive to my worldview.

**Contextualization:**  I can use this quote to demonstrate how morally injurious abortion has the potential to be. When a woman rubs her stomach, this is a clear indication she has already unconsciously and consciously attached to the fetus. Acknowledging that a life was growing and the doubt in her heart indicate that going through with the abortion procedure could be a potentially moral injurious event.

**Source Four** Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. PLOS ONE, 15, e0226417. https://doi.org/10.1371/journal.pone.0226417

**Comment 10:**

**Quote/Paraphrase:** "While perceived abortion stigma refers to people's perceptions of how others judge them for seeking or obtaining an abortion, internalized stigma is when these views have been incorporated into one's sense of self in the form of shame, guilt, or secrecy. People who have had an abortion and hold anti-abortion attitudes may have internalized stigma" (p. 2-3).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Internalized stigma is variant analysis to my Christian worldview and professional experience.

**Contextualization:**  While internalized stigma may contribute from the effects of perceived abortion stigma, there are other factors at play that bring about shame, guilt, or secrecy both before and after an abortion. While proponents of abortion may view internalized stigma because of society's worldviews against abortion, the conscience, (Holy Spirit), is negligibly ignored and omitted as sources of moral injury caused by an abortion experience.

**Comment 11:**

**Quote/Paraphrase: "**Most people considering abortion perceive some abortion stigma, which is associated with psychological distress years later" (p. 2).

**Essential Element:**  Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The result of abortion stigma associated with psychological distress years later is variant to my worldview.

**Contextualization:**  While abortion stigma contributes to psychological distress, it is the moral injury, traumatic loss, and profound grief that causes post-traumatic stress disorder. Better terminology is needed other than stigma to accurately articulate symptoms post-abortion.

**Source Five:** Camilla. (n.d.). Complications. DeVeber Institute. Retrieved January 16, 2023, from <https://www.deveber.org/complications/>

**Comment 12:**

**Quote/Paraphrase:** "Affidavits, as sworn statements, are treated with the utmost seriousness within the judicial system. False statements on affidavits are defined as perjury and can lead to severe punishment of the guilty party" (p. 370).

**Essential Element:** Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Affidavits are an additive analysis to my worldview.

**Contextualization:**  I can use the affidavits submitted to the United States Supreme Court, that accurately reflects how abortion can be morally injurious and the symptoms they incur.

**Source Six:** Finlay, J. E., & Lee, M. A. (2018). Identifying Causal Effects of Reproductive Health Improvements on Women's Economic Empowerment Through the Population Poverty Research Initiative. The Milbank Quarterly, 96(2), 300–322. <https://doi.org/10.1111/1468-0009.12326>

**Comment 13:**

**Quote/Paraphrase:** "Reproductive health is not just a benefit to a woman's individual rights, but her gateway for breaking free from her poverty trap and improving the welfare of herself, her children, and her household" (p.300).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Abortion is not reproductive health and is variant to my Christian worldview.

**Contextualization:** Whatever happened to the concept of a husband and wife working together to raise a family while being socially responsible adults? Unfortunately, the abortion narrative is described as an economic empowerment for women to break free from poverty. But at what cost? The bible verse Mark 8: 36 is appropriate for us to be wise in our decision making regarding abortion – choosing economic freedom while losing your soul profits one nothing. Personally, I would live in a tent to have my baby back and any economic hardships it would possibly create would be well worth the love experienced between a mother and child.

**Comment 14**

**Quote/Paraphrase: "**Within the framework of WHO's definition of health as a state of complete physical, mental and social well-being. . . Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so" (p. 306).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** Reproductive Health, as defined in the quote above, is a variant analysis to my Christian worldview for multiple reasons.

**Contextualization:** Reproductive Health terminology profoundly neglects the trauma suffered from having sexual and reproductive freedoms. The so-called enjoyment is short lived and when the reality is no longer deniable, regret and long-term suffering abides. From a biblical perspective, reproductive health consists of a properly structured order between a husband and wife. Without it, chaos ensues.

**Source Seven:** Foster, D. G., Biggs, M. A., Ralph, L., Gerdts, C., Roberts, S., & Glymour, M. M. (2022). Socioeconomic Outcomes of Women Who Receive and Women Who Are Denied Wanted Abortions in the United States. American Journal of Public Health, 112(9), 1290–1296. <https://doi.org/10.2105/AJPH.2017.304247>

**Comment 15:**

**Quote/Paraphrase: "**Women denied an abortion were more likely than were women who received an abortion to experience economic hardship and insecurity lasting years. Laws that restrict access to abortion may result in worsened economic outcomes for women" (P. 1290).

**Essential Element:** Use critical reading, analyzing, note-taking, and

summarization skills.

**Additive/Variant Analysis:** Women suffering economic hardship and insecurity is an additive analysis to my worldview.

**Contextualization:** Secular society deems pregnancy in terms of economic instability for women rather than a beautiful opportunity to experience love at the deepest level of human existence. Abortion has become a scapegoat for unsuspecting men and women who have been groomed to believe the lie that money and security will bring about long-lasting happiness. While I agree that women who choose not to have an abortion do experience more economic hardship and insecurity, it's something we can do something about versus making the woman feel entrapped into making a forced decision to survive.

**Source Eight:** Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. Traumatology, 22(2), 122–130. <https://doi.org/10.1037/trm0000069>
 **Comment 16:**

**Quote/Paraphrase: "**Moral injury is a particular type of trauma characterized by… guilt, shame, spiritual/existential conflict, and loss of trust are identified as core symptoms. Depression, anxiety, anger, reexperiencing, self-harm, and social problems are identified as secondary symptoms" (p. 122).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Moral injury symptoms is additive to my Christian worldview and professional experience working with women post-abortion.

**Contextualization:** I can use this information to persuasively communicate the gap in literature regarding abortion trauma. The symptoms of moral injury correlate with those who have been harmed in some way through an abortion experience. This is the central idea to my paper and the need for the MI-A construct to exist.

**Comment 17**

**Quote/Paraphrase: "**For providers, researchers, clergy, veterans, and other stakeholders to consistently identify this particular invisible injury, it is imperative that moral injury be defined in symptomological terms. Such a definitional update would allow for improved clinical assessment strategies, quantitative scientific study, and cohesive discussion among stakeholders" (p. 122).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** Defining moral injury in symptomological terms is additive to my Christian worldview.

**Contextualization:** For too long, proponents of abortion have controlled the narrative that abortion is easy, safe, and normal while those experiencing distress are made to feel that something is wrong with them. Having the ability to categorize the symptoms commonly experienced after abortion has the potential to be revolutionary in capturing the magnitude of its traumatic harm.

**Source Nine**: Shay, J. (2014). Moral injury. Psychoanalytic Psychology, 31, 182–191. <https://doi.org/10.1037/a0036090>

**Comment 18:**

**Quote/Paraphrase:** "We have been carefully taught to believe that good character cannot change in adulthood…No bad experience can break it. The trouble with this lovely idea is that it is bunk…Over the years, the American Psychiatric Association has rejected every diagnostic concept that even hints at the possibility that bad experience in adulthood can damage good character...I believe the stubborn American Psychiatric Association opposition comes from American attachment to this old philosophic position with its brilliant pedigree, not from empirical facts, which abundantly show the opposite" (p. 184).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** The idea that a bad experience can damage good character and how the American Psychiatric Association's rejection of the concept is an additive analysis to my Christian worldview.

**Contextualization:** I can use this above quote to persuasively communicate how and why abortion can change good character – from believing oneself to be loving, caring, kind, and nurturing into a murderer, selfish, loathsome, and deserving of death character -- regardless of whether abortion is legal or not.

**Comment 19**

**Quote/Paraphrase: "**What I have to say compliment's what Litz., et al. (2009) have described, differing primarily in the "who" of the violator. In their definition the violator is the self, whereas in mine the violator is a powerholder" (p. 184).

**Essential Element:**  Use critical reading, analyzing, note-taking, and summarization skills.

**Additive/Variant Analysis:** Defining the "who" violator is an additive analysis to my worldview.

**Contextualization:**  We have been taught not to blame others for the transgressions we commit and to take full responsibility for our actions. As a result, post-abortive women fail to have compassion on themselves for how they were misled, mistreated, and misguided regarding abortion. The "who" violator in moral injury is not only the self, but the violator can also be the powerholder. For example, if abortion is legal, it must be okay, believing that government (powerholder) can be trusted not to enact laws that could be potentially harmful.

**Comment 20**

**Quote/Paraphrase: "**How does moral injury change someone? It deteriorates their character, their ideals, ambitions, and attachments begin to change and shrink. [It] impair[s] and sometimes destroy[s] the capacity to trust. When social trust is destroyed, it is replaced by the settled expectancy of harm, exploitation, and humiliation from others" (p. 186).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** How moral injury changes someone is an additive analysis to my Christian worldview.

**Contextualization:** It is important to understand that post abortion women who have been morally injured are very selective on who they can trust with their story. Unfortunately, proponents of abortion rights have wrongly accused women of having a political agenda when they do step out and share how abortion negatively impacted their lives. Oftentimes, "the expectancy of harm, exploitation, and humiliation from others" (p. 186) is real and serves as a barrier to speak out against abortion.

**Source Ten:** Koenig, H. G., & Al Zaben, F. (2021). Moral Injury: An Increasingly Recognized and Widespread Syndrome. Journal of Religion and Health, 60(5), 2989–3011. <https://doi.org/10.1007/s10943-021-01328-0>

**Comment 21:**

**Quote/Paraphrase:** "Symptoms of MI may also be experienced by those outside of the military. The perceived transgression of moral values is common in healthcare professionals and first responders (police, firemen, emergency medical personnel) exposed to severe trauma, as well as among individuals experiencing any type of physical or severe emotional/physical trauma (rape, abortion, automobile accidents, other accidents, etc.)" (Koenig & Al Zaben, 2021).

**Essential Element:** Use critical reading, analyzing, note-taking, and

summarization skills.

**Additive/Variant Analysis:** Recognizing moral injury symptoms in other populations and contexts (other than war veterans) is an additive analysis to my Christian worldview.

**Contextualization:**  Transgressing one's internal moral compass creates dissonance both interpersonally and intrapersonally and has the potential to be a traumatic experience. There is plenty of valid research evidence to support the claim that abortion is morally injurious and that both the American Psychological Association and the American Psychiatric Association should acknowledge and address the potential outcome post abortion. To do otherwise, is an abuse of their power and neglect to adequately address the abortion sufficiently.

**Source Eleven:** Reardon, D., Longbons, T., & Reardon, D. C. (2023). Effects of pressure to abort on women's emotional responses and mental health.. *Cureus Journal of Medical Science*, *15*(1).

**Comment 22:**

**Quote/Paraphrase: "**Women frequently choose abortion due to perceived pressures from other people, financial concerns, or other circumstantial pressures. These pressures, individually and/or together, are strongly associated with more negative emotions about their abortion; more disruptions of their daily life, work, or relationships; more frequent dreams, flashbacks, or intrusive thoughts about their abortions; more frequent feelings of loss, grief, or sadness about their abortions; more moral and maternal conflict over their abortion decisions; a perceived decline in their overall mental health that they attribute to their abortions; and a higher degree of desire or need for help to cope with negative feelings about their abortions" (p. 9).

**Essential Element:** Research and reference a minimum of 24 scholarly journal articles that are both additive and variant to the chosen argumentative position addressing both sides of the argument.

**Additive/Variant Analysis:** This 2023 article regarding the negative effects of abortion are additive to my analysis and Christian worldview.

**Contextualization:**  I can use this article to further persuade how abortion can be devastating to a women's overall well-being. Looking at abortion through a moral lens provides a clear pathway to recognize the moral injury suffered post abortion.

**Source 12:** Dombo, E. A., Gray, C., & Early, B. P. (2013). The trauma of moral injury: Beyond the battlefield. *Journal of Religion & Spirituality in Social Work: Social Thought*, *32*(3), 197–210. <https://doi.org/10.1080/15426432.2013.801732>

**Comment 23**

**Quote/Paraphrase:** "The social work mandate of starting where the client is guides us to include focus on the client's morality and not to neglect to address a key traumatic experience for numerous people: moral injury" (p. 207).

**Essential Element:** Choose a topic, with two or more opposing perspectives, for writing an argumentative research paper.

**Additive/Variant Analysis:** Starting where the client is and not neglecting moral issues in the social work setting is additive to my Christian worldview.

**Contextualization:** I can use the above article and quote to address the need that social workers must assess for potential moral injury incurred by post abortion sufferers. Many women believe therapists do not understand or fail to reach deep enough in the innermost parts of a women's soul to fully appreciate their traumatic injury post-abortion. Oftentimes, the therapy session explores the reasons why the abortion was a necessary decision and fail to address key components that would be beneficial in recovery.

**Comment 24**

**Quote/Paraphrase:** "This same concept of moral injury may be applied beyond the battlefield to nonmilitary clients who also experience the emotional effects of their own actions that violate the dictates of their moral compass" (p.198).

**Essential Element:** Identify the central idea of a relevant topic, understand and analyze pertinent arguments of support for or against the resolution, and frame valid points based on researched evidence.

**Additive/Variant Analysis:** To expand the concept of moral injury is additive to my Christian worldview.

**Contextualization:** The concept of moral injury is not a difficult construct to understand and as more research is unfolding, moral injury can occur to anyone who is haunted by a decision that was in violation of their own morals and values.

WORKS CITED

Biggs, M. A., Brown, K., & Foster, D. (2020). Perceived abortion stigma and psychological well-being over five years after receiving or being denied an abortion. *PLOS ONE, 15*, e0226417. https://doi.org/10.1371/journal.pone.0226417

Camilla. (n.d.). *Complications*. DeVeber Institute. <https://www.deveber.org/complications/>

Coleman, P. K., Boswell, K., Etzkorn, K., & Turnwald, R. (2017). Women who suffered emotionally from abortion: A qualitative synthesis of their experiences.  *Journal of American Physicians and Surgeons, 22(4)*, 133–118.

Dombo, E. A., Gray, C., & Early, B. P. (2013). The trauma of moral injury: Beyond the battlefield. *Journal of Religion & Spirituality in Social Work: Social Thought*, *32*(3), 197–210. <https://doi.org/10.1080/15426432.2013.801732>

Finlay, J. E., & Lee, M. A. (2018). Identifying causal effects of reproductive health improvements on women's economic empowerment through the population poverty Research Initiative. *The Milbank Quarterly, 96(2)*, 300–322. [https://doi.org/10.1111/
1468-0009.12326](https://doi.org/10.1111/1468-0009.12326)

Foster, D. G., Biggs, M. A., Ralph, L., Gerdts, C., Roberts, S., & Glymour, M. M. (2022). Socioeconomic outcomes of women who receive and women who are denied wanted abortions in the United States.  *American Journal of Public Health, 112(9)*, 1290–1296. <https://doi.org/10.2105/AJPH.2017.304247>

Koenig, H. G., & Al Zaben, F. (2021). MoraliInjury: An increasingly recognized and widespread wyndrome. *Journal of Religion and Health, 60(5)*, 2989–3011. [https://doi.org/10.1007/
s10943-021-01328-0](https://doi.org/10.1007/s10943-021-01328-0)

Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. *Traumatology, 22(2)*, 122–130. <https://doi.org/10.1037/trm0000069>

*Mental Health and Abortion Task Force Report*. (n.d.). https://www.Apa.Org. Retrieved June 13, 2019, from <https://www.apa.org/pi/women/programs/abortion/index>

Rafferty, K. A., & Longbons, T. (2020). #Abortionchangesyou: A case study to understand the communicative tensions in women's medication abortion narratives. *Health Communication, 1–10*. <https://doi.org/10.1080/10410236.2020.1770507>

Reardon, D., Longbons, T., & Reardon, D. C. (2023). Effects of pressure to abort on women's emotional responses and mental health. *Cureus Journal of Medical Science*, *15*(1).

Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*, 182–191. [https://doi.org/
10.1037/a0036090](https://doi.org/10.1037/a0036090)