Introduction

The American Psychological Association (APA) has had a long standing social policy position in support of abortion as an unrestricted constitutional right for women, that is; abortion on demand. They have contributed Amicus briefs in court cases opposing such pro-life initiatives as the Akron Ordinance and the Webster Case. In the Akron case they argue that women’s rights would not be advanced by giving them information about the risks of the medical procedure they were about to undergo. With the recent pro-life gains and the changes in the Supreme Court, the APA has moved to strengthen it's advocacy position. At its national conference in August of this year, the APA adopted a resolution calling for “freedom of reproductive choice as a mental health and child welfare issue” and announced a plan to disseminate “scientific data” to all state legislatures.

The so-called ‘scientific data’ is the recently hyped study entitled Born Unwanted: Developmental Effects of Denied Abortion by Henry David of the Transnational Family Research Institute, Bethesda, Md., and Dytrych, Matejcek and Schuller, Prague Psychiatrists (1988). The book includes a follow-up of a group of 220 children born to mothers in Czechoslovakia who applied twice for abortions but were denied them by state abortion committees. The book also includes a 35 year follow-up of 120 children in Sweden which was initiated in the late 1950’s and a study in Northern Finland initiated in 1966. Henry David in public statements has claimed the data “prove(s) that... involuntary childbearing is rarely conducive to sound public health practice. Unwantedness can pose serious risks for child development, with socially undesirable long-term implications. Hopefully, our attempt to share experiences from Northern and Central Europe will strengthen the worldwide efforts to reduce the incidence of unwanted pregnancy while maintaining ready access to safe legal abortion for women in need.”

This shamelessly biased presentation is neither scientific nor accurate. David and the APA err in two areas: 1. The data he has accumulated simply do not prove anything of the sort, and 2. The jump to social policy recommendations is an outrageous extension of the findings, even if they were true.

The Central European study referred to by Henry David has been highly praised for it's excellent methodology and it's conclusions have been quoted with approval in various publications. How-
ever, there are a number of problems in the methodology that are being quietly overlooked.

The Czech study attempted to find 220 matched controls for comparison purposes. The intention, of course, was to produce a control group that was exactly the same as the sample, except that the mothers had wanted pregnancies. When the two groups of children are compared, it is then assumed that any differences are due to being unwanted, not to any other factors. However, the control group in the Czech study is clearly not matched to the sample. The two groups of children were paired with respect to grade in school, sex, birth order, number of siblings, mothers marital status, and fathers occupation. Based on this, the authors claimed that the social background of the two groups were the same. However, the study failed to take into account a number of factors.

"Positive acceptance seemed to be most strongly related to two factors: the age of the parents and the relationship that causes them to live together or apart."

Dytrych, Matejcek, David (1975)

There are a number of indications that the group of "unwanted" children were born into lower social class circumstances than the control group. For example, at the time of the child's birth the families of the "unwanted" children were less apt to have their own place to live and were much more apt to require grandparents to help with child-care.

There was also evidence of more family disruption. The mothers of "unwanted" children were more apt to be divorced (13% vs 8%) and to be married to a man other than the child's father (10% vs 3.6%) and were more apt to have had an abortion (8% vs 2% had 3 or more prior abortions). The study children were significantly more often reared by persons other than their natural parents and 47% of the study children were educated elsewhere and not living at home compared to 29% of the control children.

In the Czech study, the control group is not made up only of mothers who "wanted" the child. Nine percent of the control group admitted that the target child was unplanned and unwanted, but they went ahead with the pregnancy anyway. An additional 56% said the pregnancy was unplanned but they decided they wanted the child anyway. Only 34% of the control group mothers had planned for and wanted the pregnancy of the child in question.

Unwanted pregnancy in the study was defined as one the mother was forced to complete after twice requesting an abortion and twice being refused. The use of the construct "unwanted pregnancy" as synonymous with an abortion request is incorrect because of the many variables involved. It is essential that operational variables be well defined in research. A willingness to use abortion as a form of birth control may be indicative of a tendency to use violent solutions rather than to express a lack of planning. One of the variables is time. Nine years after the refused abortion 38% of the "unwanted" group women and 50% of the fathers of the "unwanted" group children denied they had ever asked for an induced abortion. Clearly an "unwanted pregnancy" was not synonymous with a desire for abortion at this later time.

The authors of the Czech study, in a 1975 article arrived at a similar conclusion and said: "by and large the study group mothers did move from initial rejection to ultimate acceptance in the 9 year interval. However, it was reported that some mothers continued to be dissatisfied with their children. Positive acceptance seemed to be most strongly related to two factors: the age of the parents and the relationship that causes them to live together or apart. The continuing negative attitude of the mother to the child appears to be a function of her relationship with the father of the child and of her own psychosexual development"... "Our findings suggest that the commonly held belief among professionals that a child unwanted during pregnancy remains unwanted, is not necessarily
November, 1989

Dear Friends:

At a meeting of representatives of the Association this past summer it was agreed that the Association could play a helpful role in collecting data for a nationwide case study. The purpose of this study is to identify as many cases as possible of women and members of their family who have suffered some adverse effects from their abortion experience. The Elliot Institute for Social Science Research, founded and directed by David Reardon, will collect the case study project forms. However, the Elliot Institute cannot process requests for additional blank forms. The case study project form may be freely copied and we are asking that you provide a service by making additional copies and distributing them to the fullest extent possible.

The purpose of the project is to collect tens of thousands of case studies to document the adverse effects of abortion in such an impressive way that its reality can no longer be denied. To achieve this goal we need the assistance and cooperation of everyone. If you need additional copies of the case study project form you may contact Marie Hagan at (202) 626-8812 and she will forward them to you.

Sincerely,

Wanda Franz, PhD
President
THE ABORTION CASE STUDY PROJECT

PURPOSE OF THE STUDY:
There is a critical need for politicians, scientists, and ordinary people to understand the impact of abortion on the lives of women and men who have been through an abortion experience. Such information will help shape future laws about abortion. If you have ever been involved in an abortion, your participation in this project would be greatly appreciated.

INSTRUCTIONS:
1. Please use the questions below to write a "guided narrative" about your pregnancy and the abortion.
2. Feel free to write whatever you would like and attach additional pages if necessary.
3. Return your story to:

   CASE STUDY PROJECT
   The Elliot Institute
   P. O. Box 9079
   Springfield, IL 62791

1. How did you come to have the abortion(s) and who was involved?

2. How would you describe your abortion(s).

3. How did your abortion(s) affect you and others?

4. Please describe what you have done to deal with your abortion(s), and did it help.

5. How do you think your abortion(s) changed your life?

PLEASE MAKE COPIES OF THIS FORM and give it to anyone you know who has been involved in an abortion and would like to write about it.

If you would like to include your name and address, please fill in the form below.

Name: ___________________Address: ___________________City: ________________State ______Zip: ______

My name and address should remain confidential - Yes____ No____

"If you would like to discuss this further, or need any medical, legal, or emotional help, or simply want some free information on abortion recovery, call 1-800-634-2224."
true. However, the opposite notion, more common among the lay public, that the birth of a child causes a complete change in attitude and that every woman who becomes a mother who will love her child is also untrue."

Henry David in his Born Unwanted review of the Czech study of the 220 'unwanted' children refutes the 'wanted' - 'unwanted' distinction himself when he concludes "an originally planned pregnancy can produce a child unwanted after birth, complicated unconscious drives can trigger negative parental reactions or compensatory mechanisms may negate original unwantedness."3

"the commonly held belief among professionals that a child unwanted during pregnancy remains unwanted, is not necessarily true."

Dytrych, Matejcek, David (1975)2

The second major fallacy of Born Unwanted is the claim that the findings justify abortion on demand. However, fears of abortion supporters that women who were refused abortion would murder or neglect their children were groundless. All of the children in the "unwanted" groups lived into their adult years. Further, research into the causative factors has consistently shown that 'unwanted' pregnancies have no relationship to subsequent child abuse or neglect. There is a considerable body of literature collected on that point.4 David and his associates have failed to evaluate and apply this data and have failed to integrate or attempt to explain their conflicting findings. In fact, David grudgingly admits that children in the Czech study were adequately provided for economically and attributes it to the particular circumstances of post World War II Czech society. David also admits that "extreme forms of 'unwantedness' are lacking in the children such as infanticide or permanent isolation."

It is important to keep in mind that David and the APA are recommending that death is preferable to the outcome that would occur if the child were born. What are some of the findings that David considers the most damaging? In the Czech study, the "unwanted" children at the age of eight showed mild disabilities: "were rated less favorably in school performance, diligence and behavior by their teachers and mothers" and received lower language scores but not lower math scores than the control children. Matejcek, Dytrych, Schuller (1985)5 called these differences "undramatic but became strikingly apparent if summed up." He concluded that "unwanted pregnancy represents an 'aggravating circumstance', which may or not materialize in a child's life."

David claims, however, that the gap between the two widens at the follow-up age of 14 to 16 years. At this age, the "unwanted" children were under-represented among the above average students, although none of them were failing. That is to say, they were average. None of them went into professional areas requiring academic high school program, but instead took on apprenticeships or went into business. They were more apt to report "contentious relationships" with their parents.

At the last follow-up interview, when the children were 21 to 23 years old, the differences are supposed to be even more negative. For example, they were more likely to report lower job satisfaction, more conflict with co-workers and fewer and less satisfying relationships with friends and a greater proneness to social problems (26% vs. 16%). Among those who had married, they rated their marriage as less happy and more often expressed a desire not to be married at all. David said, in an interview, "the point is, these differences over 20 years became wider and more statistically significant."

The assumption is made that the children born from refused abortion would be better off dead. But when the Czech children themselves were asked about life satisfaction at age 20 a much different picture emerges. 63.7% vs. 85% of the
controls said they were ‘perfectly satisfied’ or ‘on the whole satisfied’. Only 6.2% were ‘very dissatisfied’, (30% were ‘rather dissatisfied’). One wonders what moral justification there is for implying that all of the children should be aborted when so many turned out so well and are satisfied to be alive.6

One wonders what moral justification there is for implying that all of the children should be aborted when so many turned out so well and are satisfied to be alive.

SWEDISH STUDY

The book Born Unwanted also includes the Swedish study by Forssman and Thuwe of 120 children born of refused abortion. In this study those women who were denied abortion all originally sought abortion on psychiatric grounds. The control group consisted of children of the same sex and born in the same maternity unit as soon as possible after the refused abortion birth. The personality characteristics of the refused abortion mothers and the control group mothers were significantly different. 48% of the mothers denied abortion subsequently actually sought psychiatric assistance concerning something “not directly concerned with the abortion” vs. only 16% of the control group. 26% of the children born after denied abortion were born out of wedlock vs. only 7.5% of the controls. 14.2% of the children of the parents denied abortion received public assistance between the ages of 16-21 vs. only 7.5% of the controls. 14.2% of the parents of the children denied abortion received public assistance between the ages of 16-21 vs. 2.5% of the control group. All of the children in the refused abortion group as well as the control group reached the age of 21 years.

The Swedish study confirms that women who seek or obtain an induced abortion are not a random sample of the population. Studies of the World Health Organization have found that women who have an induced abortion are more likely to be unmarried, be regular drinkers or smokers, have failed contraception and to be uncertain of menstrual dates when compared with primigravidae of similar age or with women who have had spontaneous abortions.8 Researchers Cameron and Tichenor9 in reviewing the Swedish study concluded that “when suitable adjustments for social class differences have been made, the study tends to support the proposition that social outcome for children is most probably independent of the mother’s attitude toward the pregnancy. Henry David himself in a 1972 article10 warned that the Swedish study was “seriously flawed by major differences between the experimental children and control children and between their mothers. “However, in Born Unwanted David attempts to rely upon the study to ‘prove’ that `unwanted’ children should be aborted.

Again, in the Swedish study the differences between the children of denied abortion and the control group were not particularly great. 10.8% of the denied abortion group vs. 5.0% of the control group were considered to have ‘subnormal educability’. 35% of the denied group vs. 54% of the control group were totally free of social problems over 35 years. The difference narrowed in later years. Between 21-35 years 61.7% of the denied group vs. 74.2% of the control group were totally free of social problems. The denied group was brought up by both parents in 55% of the cases vs. 69.4% of the controls. No statistically significant differences in marriage, divorce and childbearing behavior were noted between the two groups of children.

However, David and his colleagues, by implying that these Swedish women should have aborted, ignored the substantial body of literature finding that women with pre-existing psychiatric problems are at particular risk for adverse psychological effects following induced abortion. For example, Nash and Drower11 in a South African study of 157 women who applied for induced abortion on psychiatric grounds compared the mental health outcome 12-18 months after initial presentation among women whose pregnancies were ter-
minated by abortion with those who were refused abortion and carried their children to term. Those who had abortions had a higher incidence of psychiatric treatment in the interval (13.6% vs 8.7%); admitted to increased use of alcohol, tobacco or drugs; admitted to greater use of tranquilizers; greater adverse personality change and greater social isolation according to the self-reports of the women involved. Thus abortion would only tend to worsen the pre-existing problems of the women involved not correct them and cause additional problems for their families.

Further, 48% of the women refused abortion who did seek psychiatric assistance appeared to do well as mothers. This has been supported by other studies as well and evidence suggests that giving birth to a child can often have therapeutic benefits to the mother.12

A study of 11,737 women from Northern Finland initiated in 1966 is also included in the book. 63% of the Finnish women initially accepted the pregnancy; 25% thought it would have been more desirable later and 12% thought it should not have occurred at all. This group is different from the denied abortion groups because apparently abortion was never requested. "The 12% group consisted of women who were more often unmarried, widowed or divorced and lived under poorer socioeconomic conditions in more remote villages" than the other groups studied. Children of these problem pregnancies were found to have greater health problems and lower IQ at age 14, but by age 16, the researchers were able to find few significant differences in educational achievements or in parent-child relationships. The authors concluded that, these 'unwanted' children appeared to evidence 'paternal rather than maternal deprivation'.

However they failed to draw the obvious inference that poorer socioeconomic conditions and more remote living conditions could be a more basic reason for problems encountered by the children rather than the initial reaction to pregnancy.

ADDITIONAL STUDY DEFECTS

Each of the studies in question had significant differences in single parenthood and incidence of divorce between study and control groups and failed to take into account that these factors, among others, may lead to an adverse effect on the development of children. Educational researchers have known for some time that children from one-parent households do not perform as well in school as do their peers from two-parent homes. A 1968 study at Bowling Green State University and Columbia concluded that father absence causes "a depressive effect" upon student achievement and that this effect was "dramatic".

In a recent study at Memphis State University and the University of Missouri, researchers found that mother-son relationships were far less warm and affectionate in households where the father was absent than in households where the father was present. Similarly, a recent survey in North Dakota found that unmarried mothers report "less positive relationships with their children than do married mothers". The surveyed mothers complained especially of a lack of obedience from their offspring. A study at the University of Georgia found parental divorce implicated in the worst cases of truancy, fighting, lying, and other antisocial disorders.13 Thus, the conclusions drawn by David and his colleagues that denied abortion leads to impaired social development in the children is most likely false. Rather, the small variations in development are probably explained by the extensive literature on the effects of family life on social and other developmental factors.

CONCLUSION

The authors of Born Unwanted and their supporters are apparently willing to kill the children for the reasons stated in each of the studies. But on what
basis can it be argued that the differences are so great that death is a solution? Is anyone who decides to become a plumber instead of a professor destined to have their life questioned? Is anyone who doesn’t like his job a questionable candidate for the human race? Are people in unhappy marriages worthy of the death penalty?

These studies are actually very valuable to pro-life concerns because Born Unwanted has been able to actually document the lives of individuals who have escaped the abortionist’s knife. We find that there are no Beethovens among this group. We find, instead, very average people, much like us, who have done nothing to indicate that they are a threat to society.

Their lives are not perfect, but not one of them has given any indication that they would like to give up. There are no suicides among them. The vast majority appear to be happy. Their only “crime” appears to be a very dubious claim that they were unwanted at conception, and for this they were to have paid with their lives. These studies should help lay to rest the fears of those who believed the myth that an ‘unwanted’ child is consigned to a life of misery and poverty, because the studies have clearly shown that belief to be untrue. Fears of abortion supporters that women who were refused abortion would murder or neglect their children are groundless. Parents make the adjustment after an initial adverse response to a pregnancy. Abortion is simply not needed.

Wanda Franz, Ph.D.

---

**REFERENCES**


3. David, *Born Unwanted*, p. 33


Dr. Franz is a developmental psychologist and professor of child development and family relations at West Virginia University. She has been a consultant to various agencies of the Federal Government and has testified before the U.S. Congress on child development and issues related to abortion.