



## An Online Pilot Study to Investigate the Effects of Abortion on Men

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### Introduction

The internet has changed many aspects of modern culture. It has provided a rapid means of communication to and from almost anywhere in the world. The internet has also proven to be a source of vast amounts of information on a multitude of topics including health, the sciences, current events, weather, and even humor. Recently, the internet has been used as a tool by social scientists to engage in online research.

While still relatively new, the use of the internet for research

purposes is rapidly expanding. This avenue of research offers considerable benefits including the following: cost efficiency, access to large and diverse samples, the ability to draw from self-selected samples, complete anonymity of participants, and findings that are similar to those obtained using more traditional methods of research.

Given these potential benefits, a pilot study was conducted to determine the usefulness of an online survey to collect data concerning the effects of abortion on men. Data obtained through this pilot study are summarized following a review of research pertaining to post-abortion men. It should be noted that current U.S. laws allow women to have an abortion for any reason at any time during pregnancy. Men have no legal power in the abortion decision even if they are married to women who choose abortion. Furthermore, there is no legal requirement to inform the father of the child being aborted.

### Men and Abortion

Rothstein (1978) published one of

the first studies concerning men and abortion. The author interviewed sixty males in the waiting room of an abortion clinic. During analysis of their answers to open-ended questions, two prominent themes emerged. These themes were related to caretaking and nurturing, as well as to issues of autonomy. The autonomy theme was particularly apparent among the adolescent males who were concerned about making autonomous decisions independently of their parents. These adolescent males expressed a desire to be caring husbands and fathers but, at the same time, struggled with dependency needs.

Only two intervention studies involving men and abortion have been published (Gordon and Kilpatrick, 1977; Coyle, 1997). In the first of these, Gordon & Kilpatrick (1977) implemented a program of group counseling for males accompanying their female partners to an abortion clinic. They noted the following emotions experienced by the men: anxiety, helplessness, guilt, regret, and confusion regarding responsibility. The defense mechanisms of denial, projection,

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intellectualization, and withdrawal were also in evidence among males who participated. In addition, "many clients said they did not express their feelings to their partners and instead felt the need to be a source of support by presenting a strong front" (p. 293).

In the second intervention study, Coyle (1997) utilized a forgiveness therapy program with men who identified themselves as having been hurt by their partner's decision to abort. The men were observed to have high anxiety, anger, and grief levels prior to intervention and significantly decreased levels of these variables after treatment as compared to control participants. At a three-month follow-up, participants continued to demonstrate these psychological improvements. Similar significant findings were observed among the control participants after they completed the intervention program. The men participating in this study reported, in varying degrees, the following as a consequence of their abortion experience: frequent thoughts about the lost child, difficulty concentrating, anger, anxiety, grief, guilt, helplessness, relationship problems, and confusion about the man's role in society. Role confusion was expressed as a direct result of the seemingly contradictory demands of a society that wants men to care for and support their off-spring but simultaneously denies them the ability to care for their children before birth. A majority of men also discussed their perceived need to put aside their own discomfort as they attempted to support their partners.

This tendency of males to repress

their emotions was also observed by Shostak and McLouth (1984) who note that "the typical man rushes to placate his partner, repress his emotions, and take his cues from an environment that others structure for him" (p. 22). Similarly, Patterson (1982) reports that a survey of men in an abortion clinic revealed that 77% of the men believed that the most valuable way they could help their partners was by maintaining control over their own emotions. Thus, many men are prone to passively accept a woman's suggestion that she have an abortion. Since he feels his role is to suppress his own emotions and as she has the legal right to obtain abortion, he is not likely to debate the abortion decision with his partner. Unfortunately then, he is also not likely to have the kind of discussion with his partner that would lead her to keep their child. Rue (1996) also notes that the suppression of negative emotions may make their resolution considerably more difficult. In other words, the denial and repression of a man's emotions makes him disinclined to seek the help he needs. He is, in effect, twice injured, first, by not actively attempting to participate in the abortion decision and second, by denying the psychological effects of the abortion after its occurrence.

Buchanan and Robbins (1990) investigated the consequences of adolescent pregnancy and its resolution as evidenced in adulthood. As hypothesized, the psychological distress scores were lowest among those adult males who had never experienced an adolescent pregnancy. However, an unexpected finding was that men whose partners had abortions

during adolescence were more distressed in adulthood than the men who became fathers during adolescence.

Coleman and Nelson (1998) surveyed college students and found that of those with a prior history of abortion, 51.6% of the male students reported feeling regret following abortion. These authors suggested that men may "be more inclined to experience pronounced post-abortive effects than women, because the decision to abort is ultimately the female's and the final decision opted for may not be congruent with the male's choice" (p. 428).

Still other researchers have investigated the effects of abortion on relationships and all report that relationships frequently do not survive after abortion. Failure rates ranged from 25% (Shostak & McLouth, 1984) to 70% (Milling, 1975). Mattinson (1985) observed the following effects of abortion within the marriage relationship: inability to conceive, emotional withdrawal, sexual and interpersonal conflicts, and a loss of trust.

The most comprehensive work pertaining to men and abortion was published by Shostak and McLouth (1984). These authors surveyed 1,000 men in 30 abortion clinics across the United States and followed up with post-abortion interviews involving 75 of those men. The persistence of occasional thoughts about the fetus was evident among the majority of post-abortion men interviewed. Less than one-third of the men reported having no thoughts about the fetus and 9% reported having frequent thoughts.

In addition, the men were observed to suffer from ambivalence as evidenced by the fact that while “39% believed the fetus was a human life, and 26% felt that abortion was the killing of a child, 83% did *not* want abortion outlawed” (p. 38). In fact, “only 15% believed the fetus was not human until birth and ... as many as 60% were troubled by the irrevocable ending of the life they had helped set in motion” (p. 162). Of those men surveyed, 11% stated that they were opposed to their partners' decision to abort and were described as experiencing a very profound sense of personal loss.

If Shostak and McLouth's (1984) sample is representative of males in the United States, we may extrapolate in terms of current abortion statistics. Given that over 50 million abortions have been performed since its legalization in 1973, there may be as many as 5 million men who have been negatively affected by abortion. This inference may be too conservative since it is based only on the 11% of men who were opposed to abortion in the Shostak and McLouth (1984) study and does not account for many other men who may not experience or even be aware of negative effects until quite some time after the abortion.

A recent study by Lauzon et al. (2000) compared women and their male partners involved in first-trimester abortions with a control group of men and women who had participated in a previous public health survey. Participants were given self-administered questionnaires at the first

consultation appointment prior to abortion at which time 56.9% of the women and 39.6% of the men evidenced significantly higher levels of psychological distress than their respective controls. After the abortion, participants were given a follow-up questionnaire and “three weeks after the abortion, 41.7% of women and 30.9% of the men were still highly distressed,” (p. 2033). The authors concluded that “being involved in a first-trimester abortion can be highly distressing for both women and men” (p. 2033).

Kero et al. (1999) administered pre-abortion questionnaires to 75 men whose female partners had applied for abortion. The topics covered in the questionnaire included: psychosocial history, current living conditions, relationship with partner, contraception use, abortion motivation and decision-making process, and questions related to pregnancy, current abortion, and previous abortions. Authors note the ambivalence experienced by participants stating that they saw abortion as bringing “relief, release, and responsibility but simultaneously the consequences of the choice were expressed in such words as anxiety, anguish, grief, and guilt,” (p. 2674). A follow-up study with 26 of the men (Kero & Lalos, 2004) involved interviews at 4 and 12 months post-abortion. At the four-month interview, a majority of men (16) expressed both positive and negative feelings and at 12 months, 11 of the men did so. At the latter interview, the men were asked if they ever thought about the abortion and 12 stated that they did so once or more each

month while one man stated he did so once or more each week. Thus, half of the men still had frequent thoughts about the abortion. In still another publication (Kero & Lalos, 2000), using the same sample referred to in Kero et al. (1999), these authors argued that the ambivalence experienced by both men and women prior to and following abortion is a *positive* response “indicating openness to the complexity of the abortion issue” (p. 90).

A recent case study (Holmes, 2004) highlighted the effects of abortion on a young man who learned that his partner had obtained an abortion nearly six months after the abortion occurred. Holmes describes the effects of worthlessness, emasculation, voicelessness, and the threat to the young man's belief system as a result of the abortion.

To summarize, those few who have researched the effects of abortion on men have found that such effects may include grief (Raphael, 1983), anxiety, guilt, helplessness (Gordon & Kilpatrick, 1977), and anger (Shostak & McLouth, 1984). The unequal power distribution concerning abortion may intensify those emotions and contribute to relationship failure (Milling, 1975; Shostak & McLouth, 1984). The fact that men tend to repress their emotions may also make their resolution more difficult (Rue, 1996). One may reasonably conclude from both the available research and clinical reports that, for some men, abortion poses significant psychological risk.

## Summary of Results

Over a period of approximately 24 months, 142 men responded to an online survey concerning their abortion experience. *Because all respondents did not answer all questions, the sample size (n) for each question is indicated in parentheses.*

### DEMOGRAPHIC INFORMATION

<b>Age</b> (n = 140)	Average age = 31 ½ years Age Range = 18-67 years The majority of respondents (67%) were between the ages of 20 and 39 years.
<b>Current Marital Status</b> (n = 118)	Married = 24 (20%) Single/Never-Married = 67 (57%) Single/Divorced = 13 (11%) Widowed = 3 (2.5%) Separated = 11 (9.5%)
<b>Education</b> (n = 117)	Less than 12 years = 8 (7%) High School Diploma = 25 (21%) Technical Training/Associate Degree = 35 (30%) Bachelor's Degree = 28 (24%) Graduate Degree = 21 (18%)
<b>Race</b> (n = 120)	Caucasian = 95 (79%) Afro-American = 5 (4%) Hispanic = 5 (4%) American Indian = 1 (1%) Asian = 4 (3%) Other = 10 (8%)
<b>Religion</b> (n = 118)	Christian = 76 (64%) Jewish = 2 (2%) Islam = 4 (3.5%) Other = 16 (13.5%) None = 20 (17%)

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### SIGNIFICANCE

The average “meaning” respondents ascribed to their religion was 3.5 on a five-point Likert scale. Of the 115 respondents who answered this question, 27% claimed their religion was “somewhat important” while 36% stated their religion was “very important” to them.

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### RESPONSES, PRIOR EVENTS

#### Responses to questions pertaining to events prior to the abortion decision

<b>Marital Status</b>	Thirty (21%) of 142 respondents said they were married to their partners at the time the abortion occurred.
<b>Contraception</b>	Forty-four (31%) of 141 respondents claimed to have been using birth control prior to pregnancy.
<b>Time</b> (n = 140)	The average time between abortion occurrence and completion of the survey was five years. However, the majority of abortions (73%) occurred five years or less prior to survey completion. The range of responses was from 1 month to 32 years thus skewing the mean. Thirteen (9%) of the abortions occurred between 15 to 32 years ago.

RESPONSES, PRIOR EVENTS (*cont.*)

## Responses to questions pertaining to events prior to the abortion decision

<b>Decision-Making</b> (n = 142)*	Both partners agreed to obtain abortion = 40 (28%) Man pressured partner to abort = 18 (12 %) Other pressured partner to abort = 35 (25%) Man left relationship prior to abortion = 8 (6%) Partner chose to abort against man's wishes = 64 (45%) Man passively left decision to partner = 38 (27%) Man unaware of abortion until after it occurred = 25 (18%)
<b>Reasons for Choosing Abortion</b> (n = 139)*	Mental Health/Emotional Distress = 59 (42%) Physical Health = 23 (16%) Financial Concerns = 85 (61%) School/Educational Plans = 67 (48%) Career Plans = 86 (62%) Family Size = 18 (13%) Social Reasons (i.e. embarrassment) = 63 (45%)

\*NOTE: Respondents were instructed to choose all that apply when responding to the questions concerning abortion decision-making and reasons for choosing abortion. Therefore, the percent values indicated for responses to those questions do not add up to 100.

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## RESPONSES, EFFECTS

## Responses to questions pertaining to effects of the abortion decision

(n = 140)

<b>Relationship Status</b>	The number of men who indicated that their relationships failed following the abortion = 93 (66%).  Seventy-seven (83%) of these men stated that their relationships ended within five years of less following the abortion.  Number of men still in a relationship with partners who aborted = 47 (33%)  Of these 47 men, 39 experienced abortion less than five years ago. Therefore, one may reasonably expect more of their relationships to eventually fail.  In fact, the average time for relationship failure following abortion was 1.41 years. This average is skewed given that a small number of relationships lasted for many years after the abortions occurred. Most of those that failed did so within the first year after abortion.
<b>Looking Back</b> <i>Men who would choose abortion again if they could go back to the time the decision to abort was made</i>	Of the forty men who agreed with their partners to obtain an abortion, 18 stated "yes", 20 stated "no" and 2 did not respond.  Of the 18 men who pressured their partners into choosing abortion, 2 stated "yes" and 16 stated "no".  Of the 8 men who left before the decision to abort was made, 2 stated "yes", and 6 stated "no".  Of the 38 men who passively left the decision to their partners, 11 stated "yes", 25 stated "no", and 2 did not respond.

*continued*



RESPONSES, EFFECTS (*cont.*)**Looking Forward**

*Men who would choose abortion in the future if faced with another unplanned pregnancy*  
(n = 130)

Seventeen of 130 respondents stated that they would choose abortion in the future if faced with another unplanned pregnancy.

**Communicating**

*Who the men shared their experience with*  
(n = 136; respondents could choose all that applied)

Friend = 93 (68%)  
Parent = 50 (37%)  
Sibling = 49 (36%)  
Counselor = 40 (29%)  
Clergy = 22 (16%)  
Other = 28 (20%)

Note that clergy was the least likely confidant chosen by the men who responded to the survey question asking whom they had confided in about their abortion experience. Furthermore, 24 (18%) of the men stated that they hadn't spoken with anyone about the abortion.

**Incidence of Post-Abortion Problems**

Grief/Sadness = 128  
Persistent thoughts about the baby = 118  
Helplessness = 116  
Relationship Problems = 115  
Anger = 113  
Guilt = 112  
Isolation = 103  
Difficulty Concentrating = 102  
Anxiety = 102  
Difficulty Sleeping = 91  
Sadness at Certain Times of Year = 89 (time of abortion, time of potential birth)  
Confusion about the male role = 87  
Sexual Problems = 79  
Disturbing Dreams/Nightmares = 77  
Increased Risk-taking = 73  
Alcohol/Drug Abuse = 68

Only five respondents did not report any of the problems listed above. Each of these five indicated that they and their partners had agreed to abort. However, 35 of the 40 men who agreed with their partners to abort *did* report experiencing one or more of these problems.

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## Summary

The data reported here indicate that the majority of men experienced relationship failure, regret, and numerous other psychological problems following abortion. Given that this is a relatively small, self-selected sample, generalizations cannot be made concerning post-abortion men overall. Nonetheless, the data confirm observations by other researchers and clinicians.

## Conclusion

An online pilot study was implemented to explore the usefulness of the internet for conducting abortion research. Such a method offers efficiency, anonymity, and the potential to reach a large and diverse sample. In addition, the exploratory nature of this research may help to more clearly define future studies and to direct clinical practice involving those affected by abortion.



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