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Statement submitted by Concepts of Truth, Inc., a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

Empowering Women and Girls in Decision Making Through Informed Consent

The United Nations' Universal Declaration of Human Rights (Declaration) affirms that all human beings are endowed with dignity, reason and conscience and have the right to freedom of opinion and expression, including the freedom "to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers." Declaration, Art. 1 and 19 (1948). Freedom of opinion requires that people have access to the information they need to make meaningful decisions.

Indeed, the Committee on the Status of Women in its Agreed Conclusions for the 60th Conference broadly recognized that to participate meaningfully in leadership and decision-making processes to protect women's rights and sexual and reproductive health, women must have access to information about health-care services, free from coercion, discrimination and violence. See Agreed Conclusions, par. 12, p. 5; par. o, p. 8. (March 2016). Often, however, information is withheld behind barriers of ideology; decision-making is not free; women's rights and dignity are violated.

The importance of informed decision-making in the area of reproductive health cannot be underestimated, especially during the pandemic, where gender based violence and abortions have increased dramatically as access to medical facilities and professionals has decreased. Because of the devastating effects of COVID-19 on women and girls, Natalia Kanem, executive director of the UN Population Fund, predicted that there could be up to seven million additional unintended pregnancies worldwide because of the crisis. Cousins, S. *The Lancet*, volume 396, Issue 10247, P301-302, August 1, 2020. Sixty-one percent of those pregnancies will likely end in abortion. See Bearak, J. et. al. *The Lancet*, volume 8, Issue 9, E1152-E1161, Sep. 1, 2020.

While for some women, abortion may provide short term relief from the physical and emotional stress of carrying an unexpected or unwanted child to term, abortion has significant physical, mental and spiritual consequences. Numerous global studies have confirmed the negative short and long-term health impact of abortion, including the prevalence of immediate post-abortion hemorrhage, infertility, uterine/cervical lacerations, retained fetal body parts, breast cancer, autoimmune disease and numerous psychiatric complications, including severe depression and suicide. See, e.g., Langranchi, A. et. al. *Complications: Abortion's Impact on Women*, The DeVeber Institute for Bioethics and Social Research, Toronto, Canada, 2015. ("Complications Report").

Information about the risks of abortion must be disseminated to empower women and girls to make informed decisions at the point they are deciding whether or not to consent to abortion procedures. Informed decision-making requires knowledge about, inter alia: 1) the prevalence of emotional trauma following abortion; 2) the repercussions of chemical abortions; and 3) the limitations parents of minors and other interested parties in the abortion process.

Emotional Trauma

Abortion is consistently associated with elevated rates of mental illness compared to women without a history of abortion (see, e.g. Reardon, D.C. *The abortion and mental health controversy: A comprehensive literature review of common ground agreements, disagreements, actionable recommendations, and research opportunities*. Sage Open Medicine Journal, volume 6, Oct. 29, 2018, and a

woman's ambivalence during the abortion decision-making process is one of the more common risk factors for mental health problems. Coleman, P., et al. Women Who Suffered emotionally from abortion: A qualitative synthesis of their experiences. *J. of Am. Phys. and Surg.*, Volume 22 Number 4, Winter 2017. According to 22 peer reviewed studies comprising 877,181 women who had abortions, women were 81 percent more likely to have mental health issues than those who did not have an abortion, and of those, nearly 10 percent of the incidence of mental health problems were shown to be directly attributable to the abortion itself, with substance abuse and suicide among the most common problems. *British Journal of Psychiatry*, Volume 199, Issue 3 September 2011, pp. 180-186.

More recently, the Complications Report found that women who aborted their first pregnancy were 65 percent more likely to fall into clinical depression than those who had the child, and post abortive women generally were at a much higher risk for suicide than women who completed their pregnancies. *Complications Report*, pp. 443. See also, "Depression Associated with Abortion and Childbirth: A Long-term Analysis of the NLSY Cohort." *Medical Science Monitor*. N.p., n.d. Web. 16 Mar. 2016. Such mental health consequences are often triggered by "moral injury" symptoms of post-traumatic stress similar to those experienced by veterans and health care workers who have taken a life in transgression of their own moral code.

Chemical Abortion

Chemical abortion usually refers to the medications, mifepristone and misoprostol, taken in sequence to terminate the pregnancy of a developing baby within the first 10 weeks. According to Heartbeat International, about one third of all abortions in the U.S. occur through the abortion pill, however, chemical abortions have risen sharply over the years and during COVID-19 as more and more women seek abortions at home and without medical supervision. Concepts of Truth, Inc., a non-governmental organisation that provides a 24-hour helpline for women who have suffered mental and physical consequences from their abortion, states that 6.54 per cent of its 1300 callers reported taking abortion pills in 2017. In 2019, 8.99 per cent of their 1478 callers claimed to have taken abortion pills and that number increased to 9.11 per cent of 987 callers by October 2020. Of the 2020 callers, a full 12.72 per cent used the drug at the peak of the lockdown in March 2020.

What many women and girls who have taken abortion pills may not know is that the medicine can cause severe bleeding, cramping, high blood pressure, overgrowth of the uterine lining and numerous other symptoms. See, *A closer look at the chemical abortion pill [Documentary – featuring Dr. Donna Harrison]*, American Association of Pro-Life Obstetricians and Gynecologists. More importantly, most women are ignorant of the fact that they can reverse their abortion after taking the first pill, mifepristone, but before taking the second pill, misoprostol. Currently, Heartbeat International reports that in the U.S., seven states have laws requiring abortion providers to provide patients with information about the possibility of reversing an abortion after taking the first pill: Arkansas, Idaho, Kentucky, Nebraska, North Dakota, Oklahoma, South Dakota, Utah, and Tennessee, but more needs to be done both in the U.S. and globally. Sadly, many women lack the information to make informed decisions about chemical abortions and mistakenly believe that once they have taken the first pill, they must take the second pill for medical or contractual reasons.

Parental Consent

In some countries like the US, parental consent is required for a minor to choose to have an abortion unless there is a medical emergency or the minor is the victim of abuse or neglect. Notwithstanding, what few minor girls know is that no person may

force, coerce, unduly influence or pressure that girl to have an abortion, and to do so could result in a conviction of fetal homicide or punishment for other criminal or civil laws. See, e.g., *Bellotti v. Baird*, 443 U.S. 622 (1979); *Arnold v. Bd. of Ed.*, 880 F.2d 305 (11th Cir. 1989); Too often, young women and girls are pressured by parents or partners to have abortions that they later regret and which can lead to serious emotional and/or physical distress.

Concept of Truth's international helpline has received approximately 20,000 calls from every state in the U.S. and other parts of the world. Every day the staff hears the voices of women and girls who are descending into mental illness, including depression, self-harm and sometimes suicide, because of the consequences of abortion. We cannot claim we are striving to empower women when we refuse to recognize their grief. Member states must educate their people about the realities of abortion, in particular, the physical, emotional and spiritual consequences of terminating a pregnancy, the availability of medically sound options to reverse the effects of mifepristone, and the rights of minors to refuse abortions, so that women and girls can make informed decisions.

As the *Journal of American Physicians and Surgeons* notes, "We need to develop a new body of knowledge regarding what emotional support women want and need along with their abortion care." *J. of Am. Phys. and S.* volume 22, no. 4 (2017). Concepts of Truth, Inc., an ECOSOC accredited NGO is ready to help meet these challenges and provides sexual health education, resources and counseling for reproductive loss and sexual trauma to educate and care for women (and men) and girls of all faiths, who seek to know the truth about life.
