

Study Shows 40% of Women Having Abortions Regret Their Decision for Decades

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For 40% of women, abortion grief can last for decades, according to a new peer-reviewed study examining a random, nationally representative sample of women 41 to 45 years of age.

The study compared women with a history of abortion to those with a history of miscarriage and other natural losses. Symptoms of prolonged grief disorder were common among both groups, but especially for women whose abortions were unwanted or coerced.

These findings point to a largely ignored mental burden on millions of women across the country.

Researchers analyzed responses from 1,925 women drawn from a topic-blind national panel. Among them, 409 (21.2%) women reported at least one induced abortion, while 573 (29.8%) reported a miscarriage or other natural pregnancy loss. The prevalence of

both experiences closely mirrors national averages, strengthening the study's conclusions.

What sets this research apart is how it listened to women's own descriptions of their abortion experiences. Rather than treating abortion as a single category, the study asked women to reflect on how the decision aligned—or conflicted—with their values and preferences. Their answers revealed four distinct experiences: abortions that were freely wanted (29.8%), those accepted but inconsistent with personal values (35.5%) , and those that were unwanted (22.0%) or coerced (12.7%).

Women were asked to rate the degree and type of symptoms associated with complicated grief that they directly attributed to their own pregnancy losses.

Grief was widespread across all groups, but was increasingly more common as the decision was less free and more conflicted. Among women whose abortions were freely wanted, 14 percent reported being at risk of PGD but this rose to nearly four fold among women who were coerced.

Nearly four in ten women said the worst of their emotional pain was still present, even today, an average of 20 years after their pregnancy losses. Grief was also strongly correlated to intrusive thoughts, nightmares, flashbacks, and significant interference with daily life, work, and relationships, which are also indicators of post-traumatic stress.

Feelings of internal conflict and shame were also critical risk factors contributing higher levels of grief and risk of PGD. This finding supports the hypothesis that a perceived lack of social understanding and support for pregnancy loss may contribute to the disenfranchised grief, a subtype of grief.

Taken together, the findings tell a sobering story: abortion-related grief is real, persistent, and deeply shaped by whether women felt free, supported, and aligned with their own values when making the decision.

The study's author argues that these realities demand change. Pre-abortion screening should identify women who feel pressured or conflicted, as they face a far greater risk of long-term psychological harm. And mental health professionals, the author notes, should routinely ask patients about *all* pregnancy losses—including induced abortions—to give women space to acknowledge and address grief that may have remained hidden for decades.

For many women, the loss did not end years ago. It has simply been hidden—until now.