

"...We are all of us responsible for our myriad pollutions, public, private and political." --Walt Kelly, Creator of Pogo<sup>1</sup>

## We Have Met the Enemy and They are Us

by Margaret R. Johnston

I was just a young pup when the Pogo cartoon that contained this line was published. As kids, my brothers and I loved the iconoclastic bunch of philosophizing animal misfits who lived in Okefenokee Swamp. It was mostly political satire and we could figure out which character was really J.Edgar Hoover, Spiro Agnew, Joe McCarthy ("Simple J. Malarkey"), and others who today's readers might translate to Rumsfeld, Cheney, or "Condi." But this line—WE HAVE MET THE ENEMY AND HE IS US-was about our treatment of the environment, and this cartoon ran in celebration of the first Earth Day in 1970.

"Oh," I remember thinking, "it's not just about how the leaders mess things up, it's about what we all do." It's hard to take responsibility for what's wrong in a culture and it's true that corporations and government have more power to change what's wrong. However, social change is not something that exists outside of us but a result of what we do or say or think. I count Pogo as one of my early influences and I think it is worth looking at what power we all have to move the current logjam of public opinion about abortion.

Before I hear someone from the repro rights camp protest that we didn't create this mess, I want to give full credit to the anti-abortion movement for succeeding in stigmatizing abortion. All that standing in front of abortion clinics and screaming at young women, "Don't kill your baby." "Mommy, don't murder me!" has really paid off. All those millions donated for Crisis Pregnancy Centers in every town to prey upon those considering abortion. All the silencing of anything supportive about abortion on the news, in magazines, on television and in movies. Today it is the rare woman presenting for an abortion who has not debated those picketers in her head or felt the weight of induced stigma. Most doctors and healthcare workers involved in abortion care have to at least grapple with whether they could become the target of some nut out to kill them. Terrorism is just as effective in Birmingham, Alabama, <sup>2</sup> as it is in Baghdad. As for the politicians--they don't need to think, they only need to *fear* electoral defeat at the hands of the well-organized fundamentalist troops that get whipped up over opposing abortion. The populace has not been so polarized about a social issue since the McCarthy era.

There are such negative cultural messages about abortion that 47 percent of women in a large study said that they felt stigmatized by having an abortion. In other words, they think that if someone knew they had an abortion, that person would think less of them.<sup>3</sup>

It would be easy to say, "It's all the fault of fundamentalist anti-abortion fanatics," and do a righteous angry counter-protest next time the January 22 *Roe v Wade* anniversary rolls around. But we are not fighting the "antis;" we are fighting ignorance, intolerance, and injustice. It is too easy to join the fray of The Abortion War and forget that the path to peace and understanding may be more in our control than we thought. As an abortion provider, I have been toe to toe with the anti's, and I am here to say, "Facing off the anti-abortion movement only feeds them." They need our participation in The Abortion War to have someone to play the bad guy to their "rescuer." <sup>4</sup> Although this may not work everywhere, I know that when I stopped yelling at the picketers, some of them stopped coming to my clinic and more importantly, I felt freer to do the important work inside the clinic. The constant polarization of the abortion issue has the effect of draining valuable energy from the abortion care workers who need it for their clients, and silencing well-meaning people who want to understand what all the fuss is about. I propose that we give as little energy as possible to the next awful thing the anti-abortion forces will think up, and pay attention to the people we see every day.

I hope you count yourself among the 37 percent of all women who has had an abortion or the 85 percent of partners who have been involved in an abortion decision, or the friend of someone who confided their abortion story with you, or even one of the lucky parents who actually got to be involved in your daughter's pregnancy decision. <sup>5</sup> If so, you are fortunate enough to experience one of life's most eye-opening moments—and you *know*: You *know* that there are no easy answers. You *know* that choosing abortion doesn't mean wanting an abortion. You *know* that a woman's decision can stem from it not being the right time to have a child, or the right person to be a parent to your child, or the right circumstances under which to bring a child into the world. To get that kind of profound insight into life may be hard, but it does bestow a rare wisdom.

The general public may believe that women who have abortions are turning their backs on "life," as though the only life involved is that of the potential baby. In my experience as an abortion provider, I know that, really, they are turning toward life in the most responsible way they know how. The decision to end a pregnancy invariably means choosing to care for an existing child or another person in need, or to focus on one's own future. This decision nearly always considers the quality of life they can offer a new life. If you have been privy to an abortion experience, you know the incredible complexity of such decisions. Stop a minute to consider—as those who are pregnant must —the intricate web of your life and what a new strand might do to the whole. Not everyone can experience this profound insight, but a pregnancy decision, no matter what is decided, is one way.

I have one question for those of you who have had the opportunity to consider the complexity and weight of pregnancy. *Why aren't you talking about it?* Why wait to tell your daughter about your abortion experience until *after* she gets pregnant? Why don't

you guys tell your new girlfriend what you learned about yourself when your ex-lover had an abortion? Why don't you tell your best friend? Why not talk about your own abortion? Have you considered revealing your personal experiences with others so that they might be comforted and enlightened about the reality of what a shared experience this is?

I know why the answers to these questions are so often "no." *Stigma*. Of course, no one wants others to think less of them or to question their motives or essential goodness. But really, this is profound stuff worth sharing. Remember after 9-11 when burly cops cried at the drop of hat and soccer moms couldn't drop their kids off without saying, "I love you," and everyone suddenly got cell phones so that they could connect with loved ones no matter what happened? America was wandering around in a big mushy emotional state until we went to war and shifted our emotions to the negative ones of collective fear and focused on killing suspected terrorists. It was a national brush with death, and in that brief moment we got to see what was important to us. Sometimes a crisis of such magnitude can open our eyes and change our lives.

Likewise, an abortion experience can help clarify what is important to us personally:

"I need to be there for the two kids I already have now." "I now realize how important going to school is for me." "What am I doing with this jerk?"

*"I do want a baby someday, but I want to be really ready."* Every year there are millions of pregnancy decisions that acknowledge this transformative power. More, if you count the partners, parents, and friends who have shared in these experiences.

In the unlikely event that you have never been part of this "in" crowd, where's your place in all of this? Your place is in acknowledging that this is complex stuff. Don't say, "*I* would decide to …" or "*I* would never …" You don't know what you would do, and you can't know, until you're there. Try to appreciate what would happen if your life turned on the pink line of that pregnancy test. What hopes and fears would it raise for you? Ask someone what their experience has been. Ask your partner. Ask your parents. Ask your friends. And then listen. You still won't know what you would do in that situation, but you can get a feel for the texture of the decision making. You might begin to feel the weight of the variables that go into a person's individual decision and the feelings that result when one path feels "right."

Try saying out loud—at work, school, or with your friends—"I have no idea what I would do if I/my partner were pregnant and didn't want to be, but I sure would want someone to talk to who wouldn't judge me." <sup>6</sup> Wait a week or two, and then don't be surprised if someone tells you their story. It might be a story about an unexpected pregnancy, a miscarriage, or something that made the person feel "not normal." There is no safety in the world for people to tell their abortion stories unless we make it safe. Remember, voice your willingness to listen without judgment *out loud*, in a roomful of people.

It may take a little courage, and in some cases, tremendous courage. Breaking silence always does, and there may be a few murmurings that such conversation is not polite, or even some loud mouths who spew their hatred or ignorance at you. Good. It's important for everyone to know who they are and what they stand for. Reveal the bullies, let them stand in their own narrow-mindedness. This is important work. The true value is in making room for those who have had an abortion experience to shed the stigma: "*Maybe not everyone would think less of me.*" Wouldn't that be profound?

Here's another thing that we have some power over: the post-abortion emotional health of women we know. Note the term: post-abortion emotional health. The antis say abortion is traumatic and results in "post-abortion stress syndrome" (PASS) and we have largely been mute about it. Now, there is a community of providers, researchers, clergy, social workers and others who want to understand how people can get through a difficult pregnancy decision and actually come out emotionally healthier. We do not want to ignore that some women have a very hard time coping, and we want to be able to spot those at greatest risk for poor outcomes and help them.

The research evidence has not been as reassuring as we might want. "Most women feel relief after an abortion," say most pro-choice activists. Which is true, but that is not the whole picture. Women are certainly capable of feeling more than one thing, and that mix of normal feelings may include sadness, guilt, anger, regret, and maybe even shame. Go back to what you know from experience: no one wants to be pregnant when they didn't intend to. It can certainly bring up a lot of life issues and feelings. Furthermore, because of the stigma, women may not feel comfortable confiding in people they normally talk to; this silencing may be a recipe for mental health trouble.

But traumatic? According to reliable research studies, (longitudinal, good sample size, peer reviewed, replicable, published studies by credentialed social scientists unlike anti abortion junk science), 1 percent of women will have a traumatic reaction to abortion. That's a small percentage, but it still amounts to a large number, given the statistic of the approximately a million women who have an abortion in a given year. But we should also place this statistic into a larger context. The rate of trauma reactions in the general population, for any reason, is 10.75 percent; 46% as a result of sexual abuse; and 48.5%. as a result of childhood abuse.<sup>8</sup>

When we set the statistics aside and look at actual abortion experiences, we find that, for some women, the pregnancy crisis, or even having a medical procedure, can trigger an existing trauma. Others may react traumatically to such a major decision, or the experience itself, especially if they were previously against abortion. Other women have had a break in a relationship, either with a partner or parent. A few women feel so alone or have so few coping skills that they wind up suffering emotionally. And do we really know what the effect of societal condemnation and cultural silence is on a person in the middle of an abortion experience? We don't need researchers to tell us it isn't good, but remember 47 percent of women felt that if they told someone about their abortion that that person "would think less of them." And we also know that suppressing emotions and concealing important experiences can be harmful. Many abortion providers are beginning to figure out which women are more at risk for poor emotional outcomes after their abortions and are thus able to offer some help and resources.<sup>9</sup> But there are still too many clinics where providers will not intervene, even if they see an emotional train wreck in the making. Of course you could create the most supportive abortion clinic in the country, but the question remains: What exists outside the clinic walls? The same picketers, stigmatizing cultural messages, and silence about the true complexity of an abortion decision, that's what.

Once again, it comes back to us--those closest to a woman or to a couple going through an abortion. Parents. Family. Partners. Best friends. Parents are often the least likely to be told, but the most likely, in the end, to provide help and comfort to their children. It can be a bumpy road, especially for parents of adolescents who opt for abortion. Parents often say: "If you get pregnant, you'll be out on the street," and even though kids don't seem to listen to anything else their parents have to say, this threat gets through loud and clear. Teenagers often say. "I can't tell my parents, they would be so *disappointed.*" Many say, "My parents would kill me," and for some it's not just a figure of speech. We have to ask ourselves why is it so rare for a parent to say, "I will always be there for you, no matter what." "You can tell me anything and I won't judge you."

Supportive people could do a lot more to promote communication between parents and their children on this subject, or at the very least help prevent the most egregious mistakes a parent is likely to make in a moment of shock. <sup>10</sup> If we are going to be *against* parental consent and notification, we need to be *for* parental involvement so that young people have the most support possible. Laws need to take into account those who are the most vulnerable--kids with absent parents, kids in abusive homes, etc. but at the same time we can invite the involvement of parents who, while not happy, nevertheless will support their children at a time when they really need it.

Who else are we abandoning? Those who rely on government insurance like Medicaid are on their own when it comes to paying for an abortion in most states. <sup>11</sup> So, what would you do if you could not pay for an abortion? Just like in the days when it was illegal, you might borrow ten or twenty dollars from lots of people. You would put off paying your rent or utilities. You might pawn something. You might even beg. This kind of begging is not as visible as the street people in big cities, but our cultural responses are similar: Look the other way. (The "system" should do something.) Think it's their fault. (Why weren't they using birth control?) Give a little something but tell them not to spend it on drugs or booze. (No repeat abortions!) Americans are very judgmental when it comes to their money; it is widely understood in politics that a majority favors the right to an abortion, but money for it is not. If you can't afford your own healthcare, you are in for some moralizing about your behavior.

If you really want to understand the reality of abortion, volunteer for (and contribute to) the more than one hundred abortion funds that have sprouted up to help women get access to abortion services. <sup>12</sup> We can donate millions to rant about universal healthcare or try to reinstate Medicaid funding for abortions--good causes-- but we can

also choose to make the world more just and fair by putting money directly into women's hands to pay for essential reproductive services.

"But why didn't she use birth control?" If I had a dollar for every time that question has been asked, we wouldn't need abortion funding. Here's a secret: birth control is not as effective as we want it to be. The public is lulled into thinking that condoms, for instance, are 90 percent effective, or that the Pill is 99 percent effective. All providers know that the methods themselves are fallible and that "perfect use" is only theoretical. More importantly, why do we demand perfection of others and ignore our own risk-taking? Truth time: we all take risks around sex. I would argue that it is probably hardwired into our genes. It's Mother Nature's relentless agenda to get us pregnant every month, so that otherwise perfectly responsible, sensible people end up throwing themselves at each other, birth control be damned.

If you cannot relate to risk-taking around sex, how about speeding in your car? How about your willingness to risk injury in sports? How about eating or drinking too much? Taking risks is human nature and although we usually avoid serious damage, the consequences can be grave. So inventory your own life, especially your youthful indiscretions, and lighten up on the judgment. Go further: acknowledge that sex is a normal part of life. There is some research that suggests that if we start from a position of accepting our sexual selves, as adolescents and as adults, we are better able to protect ourselves from the risks inherent in sexual encounters (emotional risks, as well as pregnancy, HIV, STI). <sup>13</sup> Our unintended pregnancy rates are among the highest in the industrialized world and our inability to talk realistically about sex and birth control surely contributes to our embarrassing world ranking.

Earlier I suggested that an abortion experience is "fortunate." because of the wisdom it can impart. I am intentionally reframing this personal crisis to illuminate the possible benefits that can result from a pregnancy decision. There is another unspoken potential that could come from an abortion experience--fetal tissue research. American scientists have been disadvantaged by our government's reactionary response to stem cell research. While most of the attention in this country has been focused on stem cells from extra embryos from fertility treatments, other countries are making valuable use of embryonic and fetal material obtained from abortions, with the enthusiastic consent of the women donors.

Imagine, then, that a woman (you or someone you know) becomes pregnant and for whatever reasons cannot continue the pregnancy. She chooses abortion with some dread because she knows the stigma against those who choose to end a pregnancy. At the clinic, she is treated compassionately and offered the opportunity to donate her pregnancy tissue to help others. In the midst of a complicated stew of personal upheaval and societal censure, suddenly she thinks, "Something good can come out of this." And it can, because around the world fetal tissue is being used to treat heart problems, severe burns, diabetes, and a whole host of other diseases. In all countries where embryonic tissue donation is an option, there is no economic profit for individual women, doctors, clinics, or researchers, and through the generosity of these individuals, a life event that might otherwise be seen as a tragedy, a sin, or a piece of bad luck can be transformed into one of the most life-affirming acts a woman could offer the world.

Can we imagine a world where each of us, through our everyday actions, changes a negative into a positive? A world where women who feel that everyone will think less of them because of their abortion instead are honored for the wisdom and compassion their experience imparts? Can we create such a world through our own ability to listen and speak out? Can we acknowledge that while abortion cuts off one potential it also opens up many more opportunities for life?

Yes, we can. And each of us can say it in our own way, out loud, to as many people as possible. Go for it.

Margaret R. Johnston has been the director of Southern Tier Women's Health Services in upstate NY since 1981, and has served as President of both the Abortion Conversation Projects and the Abortion Care Network. She is the creator of the Pregnancy Options Workbooks. She is a leader in developing educational handouts and materials directly about the abortion experience and has developed counseling training aids.

A version of this paper was published in Abortion Under Attack: Women on the Challenges Facing Choice, ed. by Krista Jacob, Seal Press, 2006.

## Notes:

 The Best of Pogo, edited by Mrs. Walt Kelly and Bill Crouch Jr. "POGO: WE HAVE MET THE ENEMY AND HE IS US," by Walt Kelly, Page 224. A Fireside Book, Simon & Schuster, 1982. First published as a poster, 1970 and in his comic strip, 1971.
Birmingham Alabama was the site of a bombing by Eric Rudolph, which killed a security guard and maimed a nurse in 1998.

 Major, B. & Gramzow, R. (1999). Abortion as stigma: Cognitive and emotional implications of concealment. Journal of Personality and Social Psychology. 77, 735-746.
I explored this theme thoroughly in "From the Birmingham Bombing to September 11<sup>th</sup>: Opting Out of the Abortion War" Our Choices, Our Lives, Unapologetic Writings on Abortion Krista Jacob, editor, iUniverse, 2004.

5. Major, B. ibid. In this study, less than 25% of women told their parents, but this may have changed with parental notification laws in effect in 34 states.

6. For this and other conversation starters, go to

www.abortionconversationprojects.org/conversations

 "Exploratory Meeting on Post Abortion Emotional Health" Report from a meeting Nov. 2000, co-sponsored by The Abortion Conversation Project and Exhale, 2001
Major, B., Cozzarelli, C., Cooper, M. L., Zubek, J., Richards, C., Wilhite, M., & Gramzow, R. (2000). Psychological responses of women following first trimester abortion. Archives of General Psychiatry, 57, 777-78410.

9. Statement on Post Abortion Emotional Health, National Coalition of Abortion Providers. 2000.

10. "Mom, Dad, I'm Pregnant"

http://www.abortionconversationprojects.org/conversations

11. Only 17 states use their own funds to pay for Medicaid eligible women's medically necessary abortions. www.aclu.org.

12. The National Network of Abortion Funds, www.nnaf.org

13. Tolman, Deborah, Dilemmas of Desire: Teenage Girls Talk about

Sexuality. Cambridge, MA: Harvard University Press 2002.