

Social Regression and the Global Prevalence of Abortion

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Full Text: Headnote ABSTRACTS: This paper advances the thesis that the high but little commented on global prevalence of abortion which amounts to 25% of the unborn being aborted world-wide, is mobilizing an almost universally denied and repressed dread of being aborted which is present to varying degrees in the unconscious of most humans, and that this dread and the defenses against facing it are transferentially acted out in the form of quiet or conspicuous individual and social regression. Evidence for social denial of this dread is seen in the underreporting of the prevalence of abortion in contrast to the strong focus on the prevalence of other forms of social regression. Although statistics are presented in this paper on the prevalence of both social regression and abortion, the import of both of these phenomena is best understood if they are looked at dynamically as intensive properties of society rather than as extensive properties measured in terms of numeric body count. The "too many people in the world" argument for abortion is examined in terms of abortion dynamics, and the relation of abortion to trust in human relations is emphasized. INTRODUCTION In this paper I shall advance the thesis that the current high but little commented on global prevalence of abortion, 25% of the unborn being aborted world wide, is a major etiological factor in social regression. A corollary of this thesis is that social regression in turn reciprocally fosters an increased prevalence of abortion. The basic premise upon which this thesis rests is that there is a denied and repressed dread of being aborted that is and has been almost universally present to varying degrees in the unconscious of most humans, and that it can be mobilized and intensified under certain circumstances. I have written about the dynamics of this dread from a psychoanalytic and family system perspective in two papers entitled "The Relevance of the Dread of Being Aborted to Models of Therapy and Models of the Mind, Part I: Case Examples, and Part II: Mentation and Communication in the Unborn," (Sonne 1994a, 1994b, 1995b, 1995c). When this dread threatens to surface, various mental mechanisms of defense, such as denial, repression, rationalization, displacement, dissociation, and projection come into play to avoid facing this dread and the hostility inherent in it. The ultimate defense is to act out socially. The dread of being aborted, and the defenses used against recognition of this dread, are transferentially and transformationally acted out in the form of individual and social regression. These regressions can be expressed in the assumption by a large component of society of either quiet primitive modes of existence which can be seen as symbolic representations of a retreat to pre-natal life as a protection against the dread of being aborted, or in self destructive and socially destructive behaviors which can be seen as symbolic representations of underlying wishes to be aborted or to abort others. Primitive, narcissistic thinking prevails in each instance, and there is a developmental arrest in the movement of mankind toward an increasingly mature civilization. Both social regression and abortion would appear to be on the increase globally. One is perhaps over-reported and the other definitely under-reported. Since social regression and abortion are both destructive phenomena, the fact that the destructiveness evident in social regression is discussed freely and the destructiveness evident in abortion is not, is highly suggestive that individual and socially shared mental mechanisms of defense are being collusively used to avoid awareness of the dread of being aborted, and that this dread and the defenses against acknowledging it are finding substitute expression elsewhere in a preoccupation with, and acting out of, self destructive and socially destructive behavior, including the abortion of others. It is implausible to think that a dread of being aborted would not be stimulated by the current worldwide prevalence of abortion, or that this would not reverberate throughout our social system, contaminating the lives of both wanted and unwanted children, abortion survivors, and adoptees, as well as

coloring marital relationships, child raising practices, psychotherapy, social interaction in general, governmental policy, and international and ethnic conflict. If my thesis is correct, that abortion causes social regression, efforts to reverse social regression which focus on child abuse, teenage pregnancy, the high divorce rate, crime, ethnic conflict, international warfare, baby seals, lost whales, fetal surgery, neonatal care of premature infants, prenatal care, the burgeoning population, the preservation of the family, and the degradation of the non-human environment, and not on abortion, are as much a part of the displacement derivative from the dread of being aborted as the original regression. They are doomed to failure as long as a large component of society continues to sanction abortion and abortions continue to be as prevalent as they are currently and does not address the dynamic of the dread of being aborted. These efforts may actually perpetuate or increase the prevalence of abortion, particularly so when some of these measures, often done in the name of love, actually concurrently espouse aborting unborn babies as a remedy for social regression.

THE IMPORT OF SOCIAL REGRESSION One of the most world shaking examples of destructive social regression in the not too distant past was the Holocaust of Nazi Germany, a destructive social movement which espoused abortion as one of its original tenets. Another example was seen in the atomic bombing of Japan in 1945. More recent examples include the 1989 slaughter of dissidents in Tiananmen Square in China, the 1993 terrorist bombing of the World Trade Center, the current "ethnic cleansing" in Yugoslavia, and violence in Rwanda and Haiti. The United States and Russia only recently discontinued aiming their atomic missiles at one another (Schulte 1994). There is wide spread drug use, and a world-wide ecological disregard for "mother" earth. There is violence in the streets of America, recently called the most violent developed nation in a United Nations survey. There is pervasive rudeness and lack of empathy in social interaction, and a decline in morals and matters of conscience. Examples of disregard for the truth, cheating, dishonesty and breaking the law are seen in everyday life, in the press and on television, and they are not uncommonly dismissed with little outrage as being of little import. Everyone does it, and the main problem is to not be stupid enough to be caught. In advertising, political discourse, and in intimate relationships, there is frequently a distorting and mystifying misuse of words that does violence to their usual meaning in human communication, and hence does violence to human trust. There is heightened conflict between excessive sexual repression or unrestrained sexual expression, hostility between the sexes, child abuse, and domestic violence in its extreme. We see widespread dependency, irresponsible procreation, incontinent abortion, and a loss of faith in corrupt governmental leaders who often blandly continue to lie even when caught red handed. Entropy seems to be gaining the upper hand in the negentropic-entropic flux of human life. Acting out in social regression is not always conspicuously violent. As mentioned earlier, it can also be expressed quietly. Mayr and Boelderl (1993), in their article, "The Pacifier Craze: Collective Regression in Europe," observed the recent phenomenon of large numbers of young adults in southern Europe between the ages of 15 to 30 wearing pacifiers around their necks, and the fascination of young people with a hugely popular French song, "Dur Dur d'Etre Bébé," (It's hard hard to be a baby), both of which suggest the presence of a wish of these young people to regress. They speculate that the reason for these regressive phenomena is the experiencing of the loss of trusted and protecting "mothers" in leadership positions, and that the resultant wish of the young people is to be cared-for newborn children. Mayr and Boelderl also observed young people between the ages of 10 and 20 having a predilection for Trolls as their favorite toy, and they speculated that this represented a collective group fantasy of the wish to regress even further back to the prenatal level of being an unborn child. This wish they regard as particularly ominous, akin to a death wish, and cite evidence of its reinforcement by parents who give their children candy labeled with such names as "stinky washcloth," "dead flies," "plant lice," "dog farts," "pissed diapers," and "baby belch." Although Mayr and Boelderl, in their focus on the lost mother, do not consider the dread of being aborted as a possible factor facilitating such regressive behavior, I believe this possibility is an appropriate extension of their ideas, and it was their paper which gave me the impetus to write this one. Despite these conspicuous examples it is difficult to obtain a consensus on whether social regression, either violent or quiet, is on the increase today. The

impression that it is may be an artifact based on the fact that when violent regressive acts do occur we hear of them immediately, and that quiet forms of regression which appear to be ubiquitous and persistent are not necessarily such but are only more visible than heretofore. Some reports suggest that our perception of an increase is just that, i.e. only a perceived increase and not a reality. Scholars disagree. DeMause (1994) is of the opinion that social violence in the world is decreasing. Gerbner (1995), Dean Emeritus of the University of Pennsylvania Annenberg School of Communication, is of the belief that regressive behavior is by no means as common as many people believe, and that "The Mean World Syndrome" is to a great extent a creation of the television industry. Zucchini (1994), in an article entitled "Today's Violent Crime is Old Story with a Twist: Mayhem seems to Abound. Statistics Paint a Less Dire Picture," cites data from the National Crime Victimization Survey, the FBI Crime Reports, and the National Council on Crime and Delinquency, documenting that there has been a statistical overall decrease in violent crime in the United States in recent years. Three increases however are noteworthy: crimes against children by other children, crimes against children by parents or guardians, and crimes by blacks. From the above it seems likely that, although we have better statistics today to measure the incidents of regression than we had in the past, it is almost impossible to determine a trend with certainty. It may be an error however to even attempt to use a numerical measure of incidents or a body count to document social regression. To do so is predicated on a view of social regression as if it were an extensive property of society. Social regression may be more accurately understood if episodes of it are viewed as an expression of an intensive property of society, i.e. as a dynamic matter of inclinations, moods, tendencies, and attitudes toward regressive behavior. The context, the roles the people involved are playing, the timing, the intensity, and the particular symbolic meaning of the regression must all be considered to grasp its import. Does society weigh the death of President John F. Kennedy by assassination in 1963 equally with the unfortunate death of a little known average citizen murdered during a robbery? And what of the assassinations of civil rights leader Martin Luther King Jr. and Robert Kennedy in 1968, and Rock star John Lennon in 1980? The Oklahoma City bombing on April 19, 1995, took the lives of only a relatively small number of people and lasted only a few minutes, but its occurrence was a social communication on trust of immeasurable but undeniably tremendous traumatic import that shook the world. A cartoon in Newsweek (Ohman 1995) expresses this point well. When one person surveying the wreckage of the Oklahoma City Federal Building asked another, "How many hurt?" the response was, "260 million Americans." Such episodes are particularly startling and frightening because they occur so suddenly, often unexpectedly, and have such a powerful impact on society in such a short span of time. We interpret them as harbingers or portents of a frightening and poorly understood underlying social pressure, and it is a challenge to ponder the symbolism inherent in the particular characteristics of each act. In looking at social regression as an intensive dynamic property of our social system, one must also consider the dynamic import of the fact that the impression that there has been an increase in social regression is a view commonly held and discussed by much of the populace. Such widely held impressions, even if they are possibly illusions, delusions, myths, or fantasies, as suggested by deMause and Gerbner, nevertheless are cultural realities that come to be regarded as truths. As wish fulfillment group fantasies, they can have an impact on the populace, influence people's thinking and behavior, motivate them to act out or to search for causes and remedies, and hence play a role in determining the future course of history. This point has been emphasized by McLuhan (1964) in "Understanding Media: the Extensions of Man," by Naisbitt (1984) in his book, "Megatrends," by deMause (1982) in "Foundations of Psychohistory," by Volkan (1988) in "The Need to Have Enemies and Allies," and by Hopper (1994) in "The Social Unconscious." This discussion of social regression would be incomplete without noting that in addition to feelings of criticism, revulsion, bewilderment, hopelessness, horror and anger which are connected with social regression, there is also often an accompanying parallel paradoxical sense of numbness, detachment and depersonalization. The combination of sensual stimulation and sensual numbing present in quiet social regression is facilitated by drugs, alcohol, easy sex, and by remote auditory and visual input, including that from the burgeoning field of virtual reality. As far as

violent regression is concerned, we are living in an electronic age in which we seem to have difficulty feeling the impact that destructive events are really happening, even though we know they are, for they seem to be occurring out-of-body as effortlessly as if we were playing a game of Nintendo or passively watching a movie. Millions of people watched the Persian Gulf War of 1991 in the comfort of their living rooms, and later heard General Norman Schwarzkopf on television say, as he showed the world his easy chair in an electronically equipped bunker, "This is where I ran the war." Even though I have made the point that social reaction to the prevalence of abortion is apparently bland compared to the reaction to social regression, we can see that even in social regression the pathological use of denial is becoming more evident, along with the blunting of appropriate affect, and even the experiencing of pleasure, in connection with violence. If, in addition to being desensitized to abortion, we are also becoming desensitized to social regression by being flooded with stimuli, where will the appropriate affect and the knowledge of it go next? A final point to bear in mind in assessing the import of social regression today and in comparing ourselves with past generations, is that the presence of such regressive happenings as described above stands starkly in contrast to our consciously sought after societal evolution toward enlightened views, values and goals. We aspire to be an advanced, civilized, educated and psychologically sophisticated society that espouses and purports to protect love, beauty, reverence for life and respect for human rights. At a time in history when people should feel safer than ever, many do not feel safe. They are preoccupied with fear for their own physical survival, their physical health and their material security. Feelings of anomie, paranoia, depression, anxiety and indifference are in the air, and the life of the soul is being pushed out the window along with the unborn baby. I believe that it is imperative for us to examine the dynamics of abortion and its social ramifications more closely than we have been doing.

THE IMPORT OF ABORTION

Having discussed the import of social regression, let me now turn to the import of abortion. As for the United States, the latest statistics from the Alan Guttmacher Institute (Glasgow 1994a, 1994b) report that 30% of pregnancies in America are being terminated by abortion, and that thirty five million abortions have been done since 1973, the year of the Roe vs Wade decision. In 1988, the rate of abortion per thousand was 57.3 for non-white women and 21.2 for white women. In the same year, the ratio of abortions to pregnancies was 55.6% among unmarried women, and 8.7% among married women. 40% of the American women having abortions have had multiple abortions. A conclusion that can be drawn from this data, allowing for repeat abortions, and the life expectancy of women of child bearing age, is that probably 25 million women alive in America today, or 20% of the total female population, have had at least one abortion. As for women of child bearing age the percentage would probably be much higher. Add to this figure the men who have fathered these aborted unborn, and we can see that a considerable percentage of the total American population, male and female, have aborted their offspring. If we consider the extended family, and others who have participated in these abortions, the percentage becomes even higher still. Extensive data on both the rate and ratio of abortions world-wide are available in an exhaustive statistical report published by Henshaw (1990), deputy director of research at The Alan Guttmacher Institute. Henshaw estimates that in 1987 there were between 36 and 55 million abortions world-wide, yielding an annual rate of 32 to 46 abortions per 1,000 women of reproductive age. In Australia (1988) the ratio of abortions to pregnancies in women from age 14 to 44 was 20.4%, for Belgium (1985) 12.2%, Bulgaria (1987) 50.7%, Canada (1985) 16.6%, China (1987) 31.4%, Cuba (1988) 45.3%, Czechoslovakia (1987) 42.3%, Denmark (1987) 27%, England and Wales (1987) 18.6%, Finland (1987) 18.0%, German Democratic Republic (1984) 29.7%, Hungary (1987) 40.2%, Iceland (1987) 14.0%, Netherlands (1986) 9.0%, New Zealand (1987) 13.6%, Norway (1987) 22.2%, Scotland (1987) 13.2%, Singapore (1987) 32.7%, Sweden (1987) 24.9%, Tunisia (1988) 9.8%, United States (1985) 29.7%, Vietnam (1980) 8.2%, Yugoslavia (1984) 48.8%. Incomplete data on the ratio of abortions to pregnancies cited by Henshaw are Bangladesh (1989) 1.6%, France (1987) 17.3%, German Federal Republic (1986) 12.8%, Hong Kong (1987) 20.1%, India (1987) 2.2%, Ireland (1987) 5.9%, Israel (1987) 13.5%, Italy (1987) 25.7%, Japan (1987) 27.0%, Poland (1987) 16.8%, Romania (1983) 56.7%, Soviet Union (1987) 54.9%. Henshaw also lists estimates based on surveys

and other data of Bangladesh (1986) 5.0%, Japan (1975) 55.0%, South Korea (1984) 43.0%, Soviet Union (1982) 68.0%, Spain unknown, Switzerland (1984) 15.0%, and Turkey (1987) 26.0%. Henshaw does not report statistics for South America but he notes that abortion services are available in all of the major cities. In Rio de Janeiro a chain of abortion clinics advertises in the newspapers, without, he notes, using the word "abortion." Henshaw points out that, at the present rate of abortion in the United States, 1,000 women would have 797 abortions during their lifetime. "Czechoslovakia and Hungary have rates over 1,000, meaning that the average woman in those countries would have more than one abortion during her lifetime. If accurate data were available total abortion rates would probably be as high or higher in Cuba, Japan, South Korea, the Soviet Union, Turkey and Yugoslavia and perhaps other countries as well." Averaging the ratios reported by Henshaw suggests that a conservative figure for the world-wide ratio of abortions to pregnancies would be in the neighborhood of 25%. For most of these nations, the ratios are particularly high for women age 14 to 19, and highest for women over 40, in some countries reaching 90%. Henshaw attributes the decline of abortion in recent years in Japan and Singapore to a national concern about the dropping birth rate. He also states that the ratio in India is probably much higher than reported. Nehra's (1994a) report of an abortion ratio of 25% in India supports this supposition. In addition to listing the global numerical prevalence of abortion, it is of interest to examine the legal restrictions or sanctions of abortion throughout the world. In the United States abortion is essentially legal throughout the entire pregnancy, since restrictions placed on abortion during the third trimester are capable of such broad interpretation that they can be easily overcome. China has had a policy of compulsory abortion and infanticide since 1972 (Mosher 1993). There have been several recently published reports of a not illegal current human embryo-as-food trade in China (Townsend 1995). Papademetriou (1990) of the European Law Division, Law Library of Congress has summarized the abortion laws of Austria, Belgium, Bulgaria, Canada, France, West Germany, Great Britain, Greece, Italy, the Netherlands, Poland, Portugal, Spain, Sweden and Switzerland. She notes that, during the 19th century, prohibitions against abortions were adopted in the criminal codes of the countries surveyed, but that most of these countries have reformed their abortion laws within the past two decades. The laws in Austria, Bulgaria, France, Greece, Italy, the Netherlands, and Sweden are broad enough today to permit the termination of a pregnancy on request, usually within the first trimester. Canada, West Germany, Great Britain, Poland, Portugal, Spain and Switzerland permit abortions on specific grounds. Wilke and Wilke (1990) report that there are no abortions in Moslem countries. It is of interest that of the many countries surveyed that have liberal abortion laws, many nevertheless have more restrictions on abortion than does the United States, which, as mentioned, in effect has none. Generally, abortions are not permitted after 12 weeks gestation. They are usually not permitted after twenty-four weeks of gestation even in the countries where it is available on request. Abortion after 28 weeks is considered a crime in Great Britain. There are numerous regulations, supervisory committees are not uncommon, and there are penalties for performing abortions outside of these regulations. Also, it is not only in the United States that there is a movement of opposition to abortion. In the World Law Bulletin of the Law Library of Congress, Schroff (1994a, 1994b) reports on a movement in Australia to question the legality of the large number of abortions performed each year, and in Great Britain bills have come before Parliament to outlaw abortions after 18 weeks (Schroff, in Papademetriou 1990). Nehra (1994b) reports that the Constitution of Kenya explicitly protects each person in terms of the right to life from conception on. Abortion, supplying implements for an abortion, killing an unborn child, and advertising drugs or appliances used in procuring an abortion, are felonies. The Republic of South Africa has specific requirements which must be met before an abortion can be performed. Whether there was as high a percentage of abortions in past centuries is unknown, since, just as with social regression, statistics are not available. DeMause (1994) states, without concrete evidence, that two hundred years ago most women had at least one abortion. Devereux (1976, p. 25) in his book, "Abortion in Primitive Societies," a treatise first published in 1955, which dealt primarily with abortion in primitive societies as an avenue toward exploring the role of the unconscious in culture, briefly notes statistics from anthropological reports on a small number of

primitive cultures which suggest that in these few cultures abortion was relatively common. Although he presents detailed and graphic summaries of over 300 anthropological studies of abortion in primitive cultures, he cautions that speculating about its frequency in the past in either these cultures, or in more sophisticated societies is unreliable. Even though we do have statistics today documenting a high prevalence of abortion in society, it is perhaps as much of an error to focus on statistics in discussing abortion as it is in discussing social regression, for the tendency to abort can also perhaps best be looked at as an intensive dynamic property of society, to be measured in inclinations, moods, and attitudes toward abortion. The widespread public acceptance and espousal of it, and the sanctioning or compulsion of it by legalization certainly appear to indicate that there is a powerful drive to abort in the human community. Just as social regression today is contradictory to our enlightened social values, the prevalence of abortion is equally contradictory when placed side by side with our increased knowledge of conception, the life of the unborn, and the increased skill and effort expended in caring for him and ensuring his survival. It may be true, as deMause has stated, that most women in the past have had at least one abortion. It may be that we are only now legalizing and reporting abortions that in the past would have been as prevalent but less visible. It may also come about that with newer abortifacient drugs abortion may continue to be as prevalent as it is today, or even more so, but its occurrence will be totally unknown by, or hidden from, society, fathers and siblings, and perhaps even unknown to the woman intending to abort, since it will be not just less visible, but totally invisible. The fact that the prevalence of abortion has surfaced, and is being statistically reported and defended as rational, legal and a woman's right, whether or not it was as prevalent in the past, is an opportunity to examine its dynamics and its social ramifications. If abortion becomes a totally invisible event, and even immanent underlying wishes to abort become immanifest, will the dynamics not still be the same? Will it then become a family secret, even more so than today, and also then a societal secret? In family therapy a family secret is often found to have had a powerful negative dynamic effect on the family even if it had been literally unknown to some members, who may sense that something is amiss but don't know the truth, and who may be colluding in the homeostatic myths that mask its suppression (Ferreira 1963; Webster 1992). In regard to abortion, the issue of the potential damage of secrecy is especially applicable to fathers and siblings, as well as to the woman who aborts. Could this not also apply to the larger society? THE DENIAL OF THE DREAD OF BEING ABORTED The dynamics motivating the prevalence of abortion, as well as the consequences of it, and the relative paucity of coverage and study of abortion in contrast to the reporting and study of other forms of social regression, all need to be addressed by social scientists. Images of starvation and carnage in Somalia, Rwanda and Yugoslavia, including detached body parts, corpses and live coverage of destruction as it is occurring, are seen daily on the evening news, and the number of casualties is reported as well. Yet portrayal of the crushing of the skull of a third trimester baby and the sucking out of his brains, and reports of the number of abortions occurring daily in America receive short shrift and slip quickly from the public consciousness. Do these phenomena not fit with the classic definitions of denial, repression, displacement, rationalization, projection, and acting out? The dread of being aborted, as mentioned at the beginning of this paper, is, I believe, an almost universal dread, a dread so great that people are strongly inclined to deny and repress it. If one adds to this dread the knowledge, also denied and repressed, that abortion is currently a socially sanctioned and deliberate practice, would this not increase the dread? Where does this augmented dread find expression? I suggest again that this dread, though denied and repressed, is simultaneously being symbolically transferentially defended against and transformationally acted out in social regression. As an illustration of how, even in professional and medical education circles, there is a defensive avoidance of examining abortion dynamics and its connection with social regression, I cite the response of the psychiatric staff to a talk Doctor O. Spurgeon English gave at a Grand Rounds of the Department of Psychiatry of Jefferson Medical College (1993), and to the staff's response to comments I made about abortion during the discussion period. After reminiscing and reflecting about his experiences as a psychoanalyst over what had been a long and distinguished career in psychiatry, Doctor English in his closing

remarks expressed his perplexity and concern about our deteriorating society, and lamented the failure of psychiatry to have prevented this. He wondered why, after all the advances in psychology in this age of psychotherapy, we were having more regressive behavior than ever, and in particular we were having more violence. Several voices, including that of the Chairman of the Department of Psychiatry, Doctor Troy Thompson, II, protested that to put responsibility for this on psychiatry was to expect too much from psychiatrists. I thought, however, that Doctor English had a good point. Concerns similar to his had been expressed by Hillman and Ventura (1992) in their book, "We've Had a Hundred Years of Psychotherapy and the World's Getting Worse." I added to the discussion the suggestion that perhaps the issue of violence could be addressed more effectively if psychiatrists were to pay more attention to abortion dynamics, since abortion was a violent action against the most helpless of us all, the unborn. My comments were met with a chorus of laughter from several members of the faculty, and the meeting ended with no further discussion. Not only do I believe that we should include abortion dynamics in any discussion of violence or social regression, I suggest that the prevalence of abortion, the legal sanction of it, the apparent casualness with which it is approached, and the denial of its being a violent act, are both a symptom and a cause of a denied or repressed uneasiness about personal survival, exemplified in particular as a dread of being aborted that finds expression in the acting out of a variety of socially regressive behaviors and thinking. I submit further that psychiatry does bear a responsibility to address and attempt to lessen social regression, and that one of its main shortcomings has been the neglect of the study of the unborn, the study of abortion dynamics, the dread of being aborted, and the relevance of this repressed or denied dread to destructive social interaction. Organized psychiatry, including psychoanalytic psychiatry, has not only neglected such studies, it has actually yielded to social activist pressure by issuing position papers which sanction abortion, thereby accepting a psychological abortion of its own axioms, and putting in place an impediment that tends to foreclose professional and social exploration of abortion dynamics, deterring all but the intrepid. The position statement on abortion of the Committee on Social Relations of the American Psychoanalytic Association, unanimously approved by the Executive Council on May 7, 1970, reads: "We support a woman's right to choose whether or not to continue her pregnancy. We view a therapeutic abortion as a medical procedure to be agreed upon between a patient and her physician, and one which should be removed entirely from the domain of criminal law" (American Psychoanalytic Association 1970). The American Psychiatric Association position statement on abortion, proposed by the Committee on Women of the Council on National Affairs, and approved by the Board of Trustees in September 1991, and by the Assembly of District Branches in November of 1991, states: "The American Psychiatric Association 1) opposes all constitutional amendments, legislation, and regulations curtailing family planning and abortion services to any segment of the population; 2) reaffirms its position that abortion is a medical procedure in which physicians should respect the patient's right to freedom of choice-psychiatrists may be called on as consultants to the patient or physician in those cases in which the patient or physician requests such consultation to expand mutual appreciation of motivation and consequences; and 3) affirms that the freedom to act to interrupt pregnancy must be considered a mental health imperative with major social and mental health implications." (American Psychiatric Association 1992). PSYCHOANALYTIC AXIOMS To further my psychoanalytic and systems approach to abortion and social regression, I should like at this point to underscore certain basic axioms of psychoanalysis: 1. Intense fear of abandonment, loss of love, body damage or superego punishment, mainly in early childhood, often leads to the excessive development of a variety of defense mechanisms, including repression, denial, projection, projective identification, secondary narcissism, intellectualization, reaction formation, identification with the aggressor, regression, developmental arrest, and acting out. 2. Many of the beliefs and actions of our lives are determined by unconscious motivations. 3. We rationalize our beliefs and actions as motivated by reactions to what are often symbolic representations in current external events, many of which we have contributed to bringing about ourselves, or which we have selectively focused on to confirm our a priori position. 4. There is a dynamic pressure of the repressed to return, which causes anxiety

and a further need to defend. 5. There is resistance to looking at the unconscious. 6. The greater the fear and anxiety the greater the resistance. 7. If one does not remember the past one is destined to repeat it. 8. If one is treated badly and does not know it one acts out.

DYNAMICS AND CHARACTERISTICS OF ABORTION SURVIVORS

On the level of the individual mental system, all of these axioms are applicable to understanding the dynamics of the defensive autoplasic processes operative in abortion survivors which result in the creation of their various symptoms and character traits. On the level of the interpersonal or interpsychic social system, these axioms are also applicable to understanding the dynamics of how the dread of being aborted is defended against alloplastically through the transference of autoplasic defenses operating in a socially shared acting out system. These interpsychic transference processes can operate in small family or family like systems and in larger social groups. They can operate both in any given generation or current culture, and can also carry through to influence succeeding generations and future cultures. I have outlined the dynamics of the defenses used against the dread of being aborted, and the symptoms and characteristics of abortion survivors, in the two papers on the dread of being aborted already mentioned (Sonne 1994a, 1994b, 1995b, 1995c). In addition, further examples have been presented in an essay entitled, "Interpreting the Dread of Being Aborted in Therapy," (Sonne 1995e) which describes ten cases of abortion survivors seen in therapy. Further examples have been presented in an essay entitled, "Prenatal Themes in Rock Music," (Sonne 1995d). In these papers, I explored, from a psychoanalytic and family system perspective, the individual and social dynamics, symptoms and characteristics of abortion survivors, and those of parents who aborted their offspring, or wished or attempted to do so. These dynamics primarily involve an identification with the aggressor mother and/or father, or society, which results in the acting out of parental and social abortion impulses by the acceptance of being psychologically aborted by others, psychologically self aborting, or self aborting by suicide. Similar to abused children who later become abusers, abortion survivors tend to physically or psychologically abort their own offspring, sanction the abortion of others' offspring, and in larger social contexts tend to abort other people through varying degrees of psychological or literal homicidal behavior. Their identification with the aggressor originates in utero, and has the power of an imprint that must be obeyed. It is often reinforced by postnatal experience, and continues to operate postnatally until modified through therapy or other life transforming experiences. Self loathing is prominent, and abortion survivors often regard any wish of others to have aborted them, or to abort them now, as justified. They often regard themselves as incurable, inherently and basically defective, and not deserving of help. They tend to believe that no one would want to help them or love them, and even if they did it would be a futile effort. In the transference they will make strong efforts to convince their therapist of these beliefs. Although usually unaware of the traumatic origins of their wishes or fears until they are uncovered in therapy, they fear being aborted, and also wish to be aborted. They want what they fear. Although they feel hated, in their identification with the aggressor, whom they often exonerate, they transfer their hate toward others, including many who have not aggressed against them. In this process they come to resemble aggressors themselves, full of the same hate they condemn others for having. Abortion survivors have incestuous fear, hostility and guilt connected with any thoughts of sexual intercourse or pregnancy. Their sibling rivalry is particularly prominent, and is often of murderous proportions. As part of the survivors' hostility there is a need to punish, a need to be punished. They have a fear of happiness in postnatal life, difficulty feeling entitled to be a parent, and difficulty loving and being loved. Abortion survivors live a life in which they are neither fully alive nor dead. They do not feel real, or present, and have little sense that time is passing. Ambivalence and a need for sameness are prominent features of mental processes and social interactions. Although there is often a need to cling to a dubious security in unsatisfactory relationships, this often alternates with high risk, sensation seeking behaviors such as reckless driving, flying, parachute jumping, white water rafting, scuba diving, and various manners of impulsive acting out involving drugs, alcohol, sex or fighting. Abortion survivors often have conspicuous symptoms such as fear of bridges, tunnels, social phobias and sexual inhibitions. They make little use of metaphors or metonyms, and have little sense of humor. They have

little respect for anything sacred, and little appreciation of or interest in the importance many people in society place on religion, tradition or the history of mankind over the millenia. There is a complex wish for a self-punitive sacrificial pre-natal reunion with the mother, which is composed of a desire to relieve personal suffering, a desire to achieve a supposed pre-natal happiness, and a desire to simultaneously please mother and rebuke her by giving up one's life and reuniting with her in death. This combination of a death wish with many of the other symptoms of abortion survivors is reminiscent of what was described decades ago by Ferenczi (1929) in his article on the unwelcome child. TRUST The issue of trust in others and fear for one's own survival underlie all of the above dynamics. In a paper entitled "Feticide as Acting Out," (Sonne 1966), written during a period prior to Roe vs Wade, when psychiatrists were increasingly being consulted to recommend abortion as necessary for the mother's mental health, I termed the fetus a message on trust: "Distrust of the treatment one might receive when in a defenseless position analogous to the fetal position is one of the greatest fears of man. If the therapist cooperates in feticide, will the patient ever trust him with her defenseless, helpless, fetal components?" I believe that an understanding of abortion dynamics and their pertinence to issues of trust and fear of survival, can help us better understand human interaction in larger social systems. Abortions, the threat of being aborted, and the dread of being aborted, may have been prevalent over the millenia in small family or family-like systems for a variety of dynamic reasons. They may have even been partially derivative from the anxiety stimulated by terrifying catastrophes of nature, both those occurring in recent history and those described by Velikovsky (1950) in ancient times, or the terror, grief, and physical threats to survival experienced in the midst of massive epidemics or famine. They may also be partially derivative from people absorbing Frank Lake's "pain of the world" (Moss 1987), to which we could add reactions to man-made catastrophes such as described by Wangh (1986) in his essay on children's fears of atomic warfare. Whatever the origins, abortions have now become so prevalent in larger social systems that it is my thesis that the dread of being aborted has become a major dynamic in social regression and splits in the social structure. It is not only the unborn who is destroyed by abortion, damaged by an abortion attempt, or traumatized by the threat of abortion in an ambivalent womb. It is parents, grandparents, other children and the larger society as well. How do lovers interpret the meaning of their love for one another if the baby they created in their sexual union, and who embodies their love, is destroyed by one or both of them, wished to be destroyed, attempted to be destroyed, or only half loved? Does not the abortion, or the wish or attempt to abort, their unborn send a message, known at some level but perhaps unthought, that perhaps their love for one another is likewise ambivalent and not to be trusted? Just as the parents may not hear the cries of their unborn, they may be unaware during the pregnancy of the import of the messages they are sending to one another. One woman divorced her husband when their baby was a year and a half old, saying that she could never trust him again, even though he had come to love their baby, because of his repeated insistence during pregnancy that she have an abortion (McGowan 1995). The children in a family in which one of their siblings was aborted, an example of which was seen on a recent television talk-show, are also damaged, even though they may parrot approval of the abortion, a parroting that in itself could be viewed as evidence of trauma. Do they really believe, or will they continue to believe, that they can trust their parents' love, and that their parents aborted their sibling because they loved and love the living ones so much? DeMause (1982) has raised similar questions about surviving siblings, who witnessed discarded newborns, particularly girls, who were tossed in the gutter in ancient Greece and Rome. On a larger social level, we might also ask what happens to our definition of the meaning of love for children, or love between a man and a woman, in a society that sanctions abortion. DOING AND UNDOING IN PREGNANCY AND ABORTION In looking at the high global prevalence of abortion, one must also examine the seemingly strange phenomenon of there simultaneously being an increased collective social motivation to become pregnant. In this regard it is noteworthy that immediately following World War II there was a 50% increase in birth rate world-wide. This suggests a global reproductive response to the threat of annihilation from the war, particularly because of the threat of the atom bomb. Wangh (1986), although not specifically focusing on the increase in birth rate, has

written on the general anxiety induced, particularly in young people, as a response to the threat of atomic warfare. Wangh makes the point that children do not mention this anxiety unless their parents or their therapists are receptive to hearing about it. Then they express thoughts such as that they will not even be alive ten years hence. A reproductive reaction to the threat to survival is also to be seen in the behavior of some Bosnian women who are consciously striving to become pregnant to replenish the Bosnian population that is being decimated by "ethnic cleansing" and diluted by the rape of Bosnian women that is deliberately planned to produce Serbian fathered babies (Demick 1994). Why, however, do we see simultaneously a strong wish to become pregnant and a strong wish to abort in populations who do not seem to be so obviously threatened as the Bosnians. Such behavior resembles that of the doing and undoing seen in an obsessive compulsive neurosis. I addressed this apparent paradox of doing and undoing pregnancy in a earlier paper entitled "Pregnancy, Abortion and the Unconscious," (Sonne 1975, pp. 13-14). In a section on "Worldwide Mass Movements in Pregnancy and Abortion," I wrote: "This brings me to a consideration of unconscious factors in the current mass movement of women becoming pregnant and then apparently rather casually aborting. Contraceptive measures have never before been so effective, and the knowledge and accessibility of them more widely available. The knowledge of the mechanism of conception has never been more widely disseminated. Why then is there such an apparent increase in so-called 'unwanted' pregnancies? What is the meaning of this? We seem to be witnessing a large group movement to conceive. The accompanying worldwide mass movement to abort seems to be of equal proportions. As for the unconscious factors, I would speculate that today a sector of many sexually active men and women, despite some surface gaiety, feels unhappily alive, frightened and living in unconscious terror in a 'mother' world that is not treating them very well, and whose existence they themselves are threatening with pollution and atomic destruction. They are threatened en masse with being aborted by their 'mother earth,' and thereby aborting themselves. Despite the fact that man, collectively speaking, has created his situation, he may, in his terror, be driven to procreate to assert his aliveness and his immortality through his progeny. He counterphobically combats his fear of being aborted, or his sacrificial wish to be aborted, by increased procreation. Then once having procreated he begins to fear the rivalry of his progeny for the resources of his 'mother earth.' He wishes his progeny to be destroyed. He acts out against them, in much the same manner as has been described earlier, the abortion impulses he feels impinging on himself, thereby hoping to maintain his own precarious security with what he sees as his angry, inhospitable, inimical 'mother earth' he is so aware he has been treating badly. He enviously and jealously blames his and his mother's troubles on his procreating siblings who are, he feels, irresponsibly enjoying life on earth." Not only are such dynamics possibly operative in the wish to become pregnant and then abort, and in the sponsoring of abortion of others, they can also be applied toward an understanding of social regression. If much of mankind is fearful of survival as a derivative from the dread of being aborted, a dread perhaps augmented by natural and man made disasters, this dread can easily be displaced through a process of social regression onto components of society that are seen as containing potentially dangerous enemies or competitors for survival who must be destroyed, or at the very least treated badly. The human community then become polarized and split into good and bad images in the same manner as the image of mother is split into images of a "good mother" and a "bad mother" in primitive thinking, and we argue about which is which. The aborting mother is often characterized as the "good mother" by a component of society, and the non-aborting mother is characterized as the "bad mother." The endorsement of the surviving children of the television talk-show family mentioned earlier, and of others present as well, who saw the aborting mother as the "good mother," is an example of this. As mentioned earlier, children whose parents have aborted one of their siblings, abortion survivors and abortion minded parents are singularly insensitive to others, and have difficulty loving and being loved. They often promote abortion on the grounds that, "There are too many people in the world." Many of the unborn these patients deem to be candidates for abortion are the progeny of people they consider to be ethnically inferior. If abortion won't eliminate potential competitors, there are other ways to act out against

them. Such a process escalates social regression and an increase in both procreation and abortion. In addition to the motivation to procreate or to destroy others as derivative from the dread of being aborted, another derivative can be seen in the social motivation mentioned earlier to wear pacifiers, collect trolls, or to masochistically or sacrificially give up one's life, as is seen in the recent suicide of Kurt Cobain, prenatally preoccupied rock singer and leader of the popular musical group Nirvana (Handy 1994; Sonne 1995d), and in the direct injection of the AIDS virus by young men in Cuba who say that they are tired of life and wish to be taken care of by society (Katel 1994).

TRANSGENERATIONAL TRANSMISSION OF ABORTION IMPULSES

The process by which irrational modes of thinking and behavior can be transgenerationally transmitted has been amply documented and described by Lidz (1958), Bowen (1973,1974,1978), Stierlin (1981), and a host of other psychoanalysts and family theoreticians. In the broader social realm this process has been studied by deMause (1982), Volkan (1988), Foucault (1965) and others. Defenses used to construct and maintain self-object distortions, psychosexual conflicts and family image deficits (Sonne 1991) find expression over the generations in mate selection, procreation, and child rearing practices. Pathological family images are also transferentially expressed and reciprocally reinforced through social interaction in wider non-family groups, morphogenetically influencing mores, ethnic conflict, governmental policy, and international relations. Just as in dysfunctional families, these pathological processes in larger social groups not only influence the current population, they are likewise carried over from one generation to the next, often escalating in their intensity until they are effectively dealt with (Sonne 1995e). All of these principles of transmission in the family and in society are eminently applicable to the transference of the dread of being aborted into the generative family matrix and into the flux of the social milieu, both in the short time span of one generation and in the longer time span of generation after generation. The dread of being aborted when operative over several generations can increasingly threaten the mental health of family members and perpetuate family image deficits. It can also, in a phenomenon similar to the phenomenon of anticipation noted in regard to the intergenerational transmission of genetic defects, threaten the literal survival of the family line. I have described such a process in a family in which a grandmother, who wished that she herself had been aborted, attempted unsuccessfully to have one of her sons aborted. Years later, her abortion survivor son and his wife aborted one of their children. One of their surviving children, a daughter, emphatically stated that she was determined to never have children (Sonne 1994a, 1995b). Similar processes can occur in the larger social sphere. The global high incidence of abortion is not only producing social regression, it is transgenerationally threatening the literal survival of some nations where many people, not only those aborting, have decided to remain childless.

ABORTION AS A REMEDY FOR SOCIAL REGRESSION

An examination of the relationship between abortion and social regression would be incomplete without addressing a frequently advanced argument that abortion, rather than contributing to social regression, is something that should be sanctioned as a remedy for it. Those who present this argument see social regression as a consequence of increased competition for land and the resources necessary to support the world's population, which has increased from three billion in 1982 to six billion in 1992. Sassone (1972), an expert on population and resources, in refuting this argument, states that all farms, roads, cities and buildings combined take up about 3% of the world surface, and all buildings take up less than 0.01% of the world surface. Clark (1972), another expert on natural resources, in his book, "Population Growth," by citing various population and resource statistics, also thoroughly refutes this argument, and even points to the benefits of an increasing population. He points out that the dynamics of procreation, and of the social interactions which influence it, are most complex and deserve much further study. Wilke and Wilke (1990) cite statistics showing that the birth rate in the United States since 1972 has been below the 2.1 children per woman of child bearing age needed to maintain ZPG (zero population growth). The increase in population since then has come from immigration and an increased life span, not from procreation. Unless the birth rate increases, the population will decrease in the near future as the long-lived aged eventually die. Furthermore, fewer young people will be coming along to support the economy and the aging population. They point out that we are an aging, dying

nation. What is happening in America is happening world-wide in the majority of developed nations. Ray and Guzzo (1993), in their book "Environmental Overkill," comprehensively address the issues of land, resources and population, and provide data that convincingly refutes the "too many people in the world" argument, and those who promote it. I submit that, in addition to the data supplied by Clark, Sassone, the Wilkes, Ray and Guzzo, the "too many people in the world" argument and the land argument are both open to question on the basis of the axioms of psychoanalysis listed earlier involving repression, denial, anxiety, and acting out, and how they pertain to procreation, abortion and social regression. There are unconscious psychodynamic processes involved in why we do not take care of our mother earth, and why we do not take care of ourselves and one another.

THE NEGLECT OF THE UNCONSCIOUS IN STUDIES OF SOCIAL CONFLICT

As a final comment on the need for further in-depth psychoanalytic and communicational systems studies of social regression, in particular relative to the issue of abortion, I wish to point out how amazing and lamentable it is that so many scholars of social conflict in other areas-which may also possibly have to do with abortion-do not consider the role of the unconscious, mental mechanisms of defense, and family system pathology in their studies (see Sonne 1995a, "The Family Image and Ethnic Conflict"). At a recent meeting of the American Jewish Committee (1993), Daniel Pipes and Adam Garfinkle of the Middle East Council, a division of the Foreign Policy Research Institute, spoke on the likely success or failure of the Israel-Palestine Accord. During the question period I asked if either of them included in their formulations of the Israel-Palestine conflict the psychosocial concepts of deMause and Volkan. When they answered that they were not familiar with either the authors or their concepts, I briefly reviewed deMause's concept of group fantasies being acted out on the public stage, and Volkan's concept of unresolved grief over the loss of group identity being acted out in local and global ethnic conflict. Pipes responded that the Israel-Palestine conflict had nothing psychological in it, but that it was simply a conflict about land! In the contrary, I submit that neither the increase in population nor limited land is the problem. These arguments in themselves exemplify symbolic rationalizations of denied and repressed unconscious wishes and fears about survival, a major one being the dread of being aborted.

SUMMARY

The thesis presented in this paper is that the global prevalence of abortion is a contributing factor in the social regression evident in the world today. I have given examples of what appears to be a ubiquitous social regression, characterized by either violence or by other quieter forms of primitive thinking and behavior. Data have been presented on the global prevalence of abortion showing that the ratio of abortions to pregnancies is in the neighborhood of 25%. The autoplasmic and alloplasmic dynamics and characteristics of abortion survivors have been summarized. I have proposed that there is, and always has been, an almost universally present but denied and repressed dread of being aborted in the unconscious of most people to varying degrees, and that this dread can be mobilized and intensified under certain circumstance, and transferentially expressed in social interaction. The dread of being aborted, and defenses against this dread are being augmented by the current prevalence of socially sanctioned abortion. Several axioms of psychoanalysis are summarized, and it is shown how they are applicable to both an understanding of the dynamics of abortion and to an understanding of the communicational processes whereby abortion dynamics contribute to social regression in larger social systems. The global prevalence of abortion and social regression represent the reciprocal acting out of transferential derivatives from prenatal trauma experienced in families of origin, and possibly from trauma experienced during natural or man-made disasters, both of which augment the dread of being aborted. The consequences of these traumas and the defenses used to handle them are transmitted transgenerationally, but their origin is denied, repressed, left unexplored, unremembered and unresolved. The point is made that the role of unconscious dynamics is insufficiently considered in many studies of social conflict and social policy. In particular, the underlying dread of being aborted is given short shrift. Considering this dread could be helpful as a unifying concept clarifying the behavior of all parties who claim, or have claimed, self righteousness in the seemingly intractable social conflicts that are occurring today, and that have plagued mankind throughout the course of human history. Transferential derivatives from the dread of being aborted, the wish to be aborted, and the wish

to abort others are projected onto the "population," and acted out symbolically in social regression. The focus is displaced from the dread of being aborted to fears about land, population and the control of behavior. Social regression is expressed by some in violent actions designed to rid the world of those considered by them to have an "Lebensunwertes Leben" (a life unworthy of life), the unborn and the competing siblings who are seen as threatening their "Lebensraum" (living space). Social regression is expressed by others in a retreat from reality and a search to return to an earlier time of life, or to death.

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