

Institution: The Open University (OU)		
Unit of Assessment: C20 Social Policy and Social Work		
Title of case study: Destigmatising abortion with practitioners and legislators, through education and public engagement, for women who have had an abortion and people in wider society		
Period when the underpinning research was undertaken: 2014-2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Prof Lesley Hoggart	Senior Lecturer now Professor	2013– to present
Dr Victoria Newton	Research Fellow now Senior Research Fellow	2014– to present
Period when the claimed impact occurred: 2014-2020		
Is this case study continued from a case study submitted in 2014? N		
1. Summary of the impact		
<p>Abortion in England & Wales is at its highest recorded rate, but women who experience abortion often feel isolated and stigmatised. Professor Hoggart and Dr Newton's research on women's experiences of abortion highlighted the problems of stigma and identified ways to combat it. They initiated a programme of activities with abortion providers, and women who have experienced abortion. Resulting public engagement activities have improved knowledge, made strides towards normalising abortion, and challenged abortion-related stigma. In addition, the research has: helped to change the way information is provided for women at national abortion services in England; contributed to new curriculum in relationships and sex education (RSE); contributed to a change in the abortion law in Northern Ireland; and resulted in the formation of a new charity.</p>		
2. Underpinning research		
<p>Research by Hoggart and Newton produced a body of work that provides unique insights into the ways in which women experience internalised abortion-related stigma in contexts of social stigma and enacted stigma (for example where treatment is negatively affected by stigma felt by healthcare workers) [O1]. The underpinning research was a significant mixed methods study funded by Marie Stopes International and conducted between 2012 and 2015. The overall objective of the study was to investigate different aspects of young women's (aged 16-24) experiences of one or more unintended pregnancies ending in abortion. The first phase of the research was a quantitative telephone survey with 430 women following an abortion at one of Marie Stopes' main centres. The second phase, for which Hoggart and Newton were responsible at the OU, was qualitative longitudinal research. Thirty-six young women were interviewed following their abortion. Seventeen of these participants were interviewed for a second time approximately five to eight months later. The interviews and data collection were followed by data analysis, and report writing.</p> <p>The analysis showed how respondents internalised a perception of abortion as morally questionable and socially unacceptable (social stigma) and that in some instances they had experienced stigmatising treatment (enacted stigma) [O2]. In the qualitative interviews, abortion-related stigma was a feature in all the women's recollections of their abortion journey, and some women recounted instances of encountering abortion negativity, from family and friends and by practitioners, that caused referral delays. The qualitative research findings highlighted the negative effects that internalised abortion stigma can have on women who have experienced an abortion; it leads many to feel ashamed of their action and blame themselves for what they felt was generally viewed as moral transgression. In particular, the research shows that abortion stigma is associated with secrecy and shame around abortion experiences. The extent to which women internalised abortion stigma differed between participants. There was strong evidence that popular discourses about abortion had influenced how many young women felt about their decision: <i>"I just felt like a bit of a wrong 'un, you know"</i> [O3, p.28].</p>		

The research findings led to recommendations [O3, p.30] about how to reduce the stigmatisation of women who access abortion(s):

- By establishing the ordinariness of abortion, so that women who experience an abortion do not feel they have transgressed, or that they are alone.
- By ensuring women receive non-judgmental abortion care.
- By ensuring that Relationships and Sexuality Education (RSE) includes non-judgmental, non-moralistic, discussion of abortion within its remit.
- By creating resources that tell the stories of women's abortion experiences (from the research) which helps women undergoing an abortion to feel less alone and stigmatised.

Hoggart and **Newton** drew on their research to develop relevant theory concerning abortion-related stigma [O1-O6]. This shows how internalised stigma is magnified for women who have more than one abortion [O4] but also how labelling reveals an implicit assumption of abortion as morally wrong, an important driver of internalised abortion stigma [O2]. They point to stigma resistance and rejection as important elements of stigma that are often ignored [O1]. They developed theory on moral agency, arguing that women who are morally confident and thus exercise moral agency are less likely to internalise abortion stigma [O2]. Finally, they assessed a number of other studies to examine closely language (the 'explanatory schema') that women draw upon to challenge abortion-related stigma [O5]; and how health care professionals may themselves internalise abortion-related stigma as well as unwittingly enact stigma [O6].

3. References to the research

- O1. Hoggart, L.** (2017) Internalised abortion stigma: young women's strategies of resistance and rejection. *Feminism and Psychology*, 27(2), 186–202. <https://doi.org/10.1177/0959353517698997>
- O2. Hoggart, L.** (2019) Moral dilemmas and abortion decision-making: lessons learnt from abortion research in England and Wales. *Global Public Health an International Journal for Research, Policy and Practice*, 14(1), 1-8. <https://doi.org/10.1080/17441692.2018.1474482>
- O3. Hoggart, L., Newton, V.L., & Bury, L.** (2015) "How could this happen to me?" Young women's experiences of unintended pregnancies: A qualitative study (Research Report). Milton Keynes: The Open University <http://oro.open.ac.uk/45139/>. (reviewed by expert advisory group).
- O4. Hoggart, L., Newton, V.L., & Bury, L.** (2016) "Repeat Abortion", a phrase to be avoided? Qualitative insights into labelling and stigma. *Journal for Family Planning and Reproductive Healthcare*, 43(1), 26-30. <https://doi.org/10.1136/jfprhc-2016-101487>
- O5. Purcell, C., Maxwell, K., Bloomer, F., Rowlands, S., & Hoggart, L.** (2020) Toward normalising abortion: findings from a qualitative secondary analysis study. *Culture, Health & Sexuality*, 22(12), 1349-1364. <https://doi.org/10.1080/13691058.2019.1679395>
- O6. Maxwell, K.J., Hoggart, L., Bloomer, F., Rowlands, S., & Purcell, C.** (2021) Normalising abortion: what role can health professionals play? *BMJ Sexual and Reproductive Health*, 27: 32-36 Published Online First: 02 April 2020. <https://doi.org/10.1136/bmjshr-2019-200480>

Research funding

- G1.** (2012-2015) *Investigating relationships between post abortion sexual and contraceptive behaviour and unwanted pregnancies among young women (under 25) in England and Wales: a mixed method longitudinal study*. Marie Stopes International, GBP102,000. PI **Hoggart**.
- G2.** (2016-2017) *Abortion Morality and Abortion Stigma: Developing Social Media Resources*, Social Sciences Knowledge Exchange (KE) Dialogues Scheme: 1609-dial-252. GBP2,439 PI **Hoggart**.
- G3.** (2017-2018) *Abortion Stories: Showing and Telling*. ESRC Impact Acceleration Award: 1702-KEA-264. GBP37,811. PI **Hoggart**.

4. Details of the impact

A new consortium was created to build on the research (Dialogue Workshop - **G2**, My Body My Life - **G3**) which includes abortion providers (British Pregnancy Advisory Service (BPAS), Marie Stopes United Kingdom (MSUK), as well as national advisory services and policy makers (Public Health England, Faculty of Sexual and Reproductive Healthcare, British Society of Abortion Care Providers), and providers of sexual health and contraception (Brook, Family Planning Association). A key pathway to impact is through an interactive abortion story-telling initiative – *My Body My Life (MBML)*. MBML is a travelling exhibition, website, and booklet [evaluation **C1**]. The consortium has undertaken a programme of public engagement, based on the research, which has challenged abortion stigma with beneficial effects for service providers, practitioners, people who have had an abortion and the wider public.

Impact on information provided to women at the time of their abortion

The two main abortion providers in the UK (BPAS and MSUK) have developed and adopted stigma-challenging initiatives to improve women's abortion experiences as a direct result of recommendations from **Hoggart** and **Newton's** research [**O3**]. BPAS worked with **Hoggart** on an abortion story-telling booklet *MBML: real stories of abortion* [**C2**]. This initiative has been positively evaluated in an independent evaluation [**C1**] which illustrates the meaningfulness of the booklet for practitioners and their end-clients. The report recommended that booklets should be made available electronically for women when they first contact BPAS (approximately 90,000 women per year), and that BPAS make hard copies of the booklet available in all their clinics. BPAS reached the decision that the booklet "*helps to reassure them [women] their lives will be okay*" [**C3**], and actioned both these recommendations ordering a further 500 booklets to retain in their waiting rooms, and placing the electronic booklet prominently in information sent to women [**C2**]. The booklet is available in all BPAS clinic waiting rooms (over 40 clinics) and online on the BPAS website. In addition, the second largest abortion provider, MSUK (who commissioned the original research), responded by developing a women's story-telling section on their website and stocking the *MBML* booklet, noting that "*a booklet of women's experiences was invaluable in prompting questions clients might have about their own abortions*" [**C4**]. It is estimated that since 2018 over 400,000 women have had direct access to the booklet through abortion providers.

Impact on service providers

The research led to increased awareness that abortion providers need to provide sensitive, compassionate and – above all – non-judgmental care to women who use their services. The evaluation report noted clinic staff "*felt the booklet has potential to raise awareness and understanding of the different circumstances that lead to an abortion and that this knowledge can help clients feel comforted and less isolated*" [**C1**, p.12]. The research has also changed counselling practice at BPAS. The lead counsellor at BPAS recommends that all counsellors read the booklet and promote it to clients: "*I use it in my own face-to-face counselling with clients and in my supervisory role as lead counsellor I have recommended that other counsellors also use it*" [**C3**]. The *MBML* exhibition has been invited to large national and international medical conferences. The exhibition was showcased at the British Society of Abortion Care Providers conference and two significant and influential international conferences (FIAPAC international conference of abortion and contraception providers [456 participants] and 2019 Royal College of Obstetricians and Gynaecologists Global Congress [over 4,000 attendees]). An evaluation [**C1**, p. 23] of the impact of the exhibition at FIAPAC showed that a high proportion of practitioner respondents agreed the exhibition is useful for their work (83%) and 76% thought that '*visiting the MBML exhibition helped to increase my understanding of women's experiences of abortion*' [**C1**, p.23]. Some of the written comments indicated that respondents had become more reflexive in their practice "*I believe it helps us as practitioners to understand the experience from a woman's perspective*" [**C1**, p. 22]. Following its success at FIAPAC, the exhibition was invited to the European Society of Contraception and Reproductive Health Conference in Dublin, May 2020, the largest international conference of relevant practitioners (re-scheduled for October 2021).

Impact on public awareness of the normality of abortion

The MBML public engagement exhibition has had considerable reach [C1], having been open to the general public in six venues in Edinburgh, Oxford, Belfast, and London. By the final public exhibition in London 2018 MBML had achieved: over 1,200 exhibition visitors; over 140 stories submitted (online and hard copy); 13,726 website views; 691 Twitter followers and >300,000 impressions between July 2017 and February 2018; over 350 attendees at speaker events; and, circa 1,000 views on YouTube [C5]. The exhibition also enjoyed substantial reach through media coverage, including pieces in The Independent and Metro. A BuzzFeed social media piece that led with the headline, *Women Are Sharing Their Abortion Stories To Try To Tackle The Stigma Of Ending A Pregnancy*, was highly visual showing many images from the exhibition and was visited 1,628,000 times [C5]. The MBML exhibition has also had a significant and meaningful impact on people who have visited it [C1] demonstrated through stories submitted on the website. Of 345 responses, the quantitative data is overwhelmingly positive, and written responses show how the exhibition raised visitor awareness about the incidence of abortion and the range of circumstances leading to an abortion: *"I found the experience eye-opening. Got me to consider issues I wouldn't usually"; "I had never thought about how abortions could happen as a result of medical issues and finance. Before this I assumed it was young girls who had made a mistake, I didn't think it was as common in older people who already have children"* [C1, p.14]. Using the research MSUK launched their own #SmashAbortionStigma campaign which also involves collecting women's abortion stories for the MSUK website. The collaboration continued with the advocacy and public affairs advisor noting *"the My Body My Life website was an important resource for MSUK because it collected testimonies of women's past experiences of abortion to augment the recent testimonies of clients that were coming through the MSUK website"* [C4].

Impact on women who have had abortion

Perhaps the most profound impact has been on women who have had an abortion. The exhibition had a powerful effect on visitors, especially those who had experienced an abortion or supported someone close to them through abortion. Many comments reflected this: *"It made me feel less alone, that so many other women go through this."* Over 140 women contributed their own abortion stories on a public storyboard and testified to the power of the project. One of the visitors who had experienced an abortion later submitted her story to the website: *"I am grateful to the exhibition and this portal which has helped me heal. It made me feel I am not the only one. It made me feel connected to strangers who have had this experience and I am ever grateful to you for this"* [C1, p.21]. The report on booklet use in abortion clinics also noted the positive impact the booklet has had on women attending BPAS clinics, with high levels of agreement with the statement: *"the booklet helped me to understand how common it is for women to have an abortion";* and comments, such as: *"it has put me at ease knowing that a lot of other women have or are going through the same as me. I feel more comfortable and openminded, not under pressure"; "It made me feel less alone and that so many other women go through this"* [C1, p.11].

Impact on change in law in Northern Ireland

The research supported campaigning activities in Northern Ireland that contributed to a change in the abortion law in October 2019 [C6]. Hoggart has twice presented the abortion research at the Northern Ireland Assembly Knowledge Exchange Seminars; and has worked closely with Alliance for Choice (AFC), a civil movement in Northern Ireland which campaigned for the decriminalisation of abortion and continues to campaign to end abortion discrimination. The co-convenor of AFC confirmed *"My Body My Life contributed to the campaign to end abortion criminalisation in Northern Ireland and continues to contribute to the campaign to end abortion stigmatisation and discrimination"* [C6]. As part of AFC's activities to normalise abortion, MBML visited Belfast in December 2017 achieving over 1,000 visitors (exhibition and associated events) [C6]. The MBML booklet has been used in community workshops and by AFC for their campaigning and advocacy in briefings to Westminster MPs and peers and in a submission to the Women and Equalities Committee Inquiry on Abortion in Northern Ireland [C6]. AFC's report on the community workshops describes MBML overall as *"an essential tool in tackling abortion stigma, breaking the silence and normalising abortion as part of reproductive healthcare"* a change that was an essential prerequisite for legal reform [C7].

Influencing relationships and sex education in schools

Hoggart and Newton's research had noted that it was important to include material that helped young people understand about the commonality of abortion in Relationships and Sex Education (RSE) [O3]. As a result, the OU developed a course on abortion with Brook Learn, for teachers delivering RSE. This course is non-moralistic and offers a radical change to the tone and nature of abortion information designed for school students: *"The e-learning module on abortion was designed to give secondary school teachers a training on teaching abortion in a way that prompted them to question their own values"* [C8a]. Material from the abortion research, from the booklet, and from the *MBML* exhibition (including stories) is embedded in the course [C8b].

The Brook Learn abortion course was launched in March 2020 [C8b]. Brook Learn courses are currently taken up by an average of around 900 teachers/trainers but due to COVID this has been delayed. Evaluation of a pilot noted: *"the [MBML] videos added to the learning experience providing real stories told by actors that helped personalise what otherwise could be quite an abstract subject. The videos helped teachers feel more prepared to teach RSE, and not only helped them to be more aware of the different circumstances young people faced with an unplanned pregnancy, but also highlighted examples and scenarios that they could use in class"* [C9, p.14].

A new charity

The research was foundational to the formation of a new UK abortion charity (number 297667), named *Abortion Talk*. The primary objectives of the charity are to develop online resources which challenge abortion stigma in society and offer information and support; provide a helpline and tailored discussion space and support for people affected by abortion; present provider workshops to share information, resources and support; provide safe spaces for people emotionally affected by abortion to talk, and seek support, around their experiences; and, provide a social media platform for talking about these experiences. The charity is supported by the British Society for Abortion Care Providers, BPAS, Brook Young People and Doctors for Choice; and will start the helpline and workshops early in 2021. *MBML* is a core element of the charity, as noted by one of the founder members: *"MBML has been central to the setting up of this new charity which will challenge the stigma and accepted secrecy around abortion by providing a helpline and workshops where people can discuss their experiences, including the emotional impact, of having/providing abortions"* [C10].

5. Sources to corroborate the impact

- C1.** An independent evaluation of the *MBML* public exhibition; medical practitioner conference; and the provision of the *MBML* booklet in abortion clinics. Available at: <http://wels.open.ac.uk/research/areas/reproduction-sexualities-and-health/projects>. (2017-20).
- C2.** British Pregnancy Advisory Service (BPAS) website link to booklet. Available at: <https://www.bpasorg.uk/abortion-care/what-to-expect-on-the-day/>. (2018-20).
- C3.** Testimonial from British Pregnancy Advisory Service (BPAS), Lead Care Coordinator, with a responsibility to advocate for the voice of the client to be heard. (2017-20).
- C4.** Testimonial from advocacy and public affairs advisor at Marie Stopes UK (MSUK) for 5.5 years ending in July 2020.
- C5.** Media and social media report including Twitter. (2016-20).
- C6.** Testimonial from co-convenor of Alliance for Choice (AFC). (2016-20).
- C7.** Alliance for Choice report of community workshops with the *MBML* booklets. (2017)
- C8.** Brook: a) testimonial, b) Brook Learn press release, and c) evaluation. Brook is the only national charity in the UK to offer clinical sexual health services and education services for young people. Testimonial from Head of Policy and Public Affairs at Brook. (2016-20).
- C9.** Independent evaluation of Brook Learn's RSE abortion module. (2019-20)
- C10.** Testimonial from Associate Professor at University College of London Medical School (UCLMS), co-chair Doctors for Choice UK (DfCUK), member of the Royal College of Obstetricians & Gynaecologists (RCOG) abortion taskforce group. (2016-20).