


REDUCING ABORTION STIGMA



GLOBAL ACHIEVEMENTS **since 2014**

CONTENTS

1. Introduction	3
1.1 What is abortion stigma and why does it matter?	3
1.2 IPPF: a trailblazer in reducing abortion stigma	4
2. Achievements	5
2.1 Stigma-free messaging and education	5
2.1.1 Global guidance, tools and resources on messaging	6
2.1.2 Member Association stigma-free messaging	8
2.2 Stigma-free service delivery	14
2.3 Youth-driven programmes	17
2.4 Research and evidence generation	20
3. Learning	23
4. Resources	26
5. Conclusions	27

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Cover: IPPF/Xaume Olleros - Benin. Grace M., 22, economics student, at the ABPF clinic during a follow-up appointment two months after her abortion to the ABPF clinic in Cotonou, Benin. ABPF is implementing a two-year programme which is designed to empower young people to realize and exercise their right to safe abortion by reducing abortion stigma.

1 INTRODUCTION

1.1 What is abortion stigma and why does it matter?

Around the world, abortion is commonplace: it is estimated that three out of ten pregnancies end in abortion.¹ When performed by a skilled practitioner, in line with recommended guidelines, abortion is extremely safe. Indeed, abortion is one of the safest medical procedures available, safer than giving birth. Access to safe abortion is a fundamental human right. And yet, abortion has a long history of being marginalized and shrouded in secrecy and shame. Stigma is directed at people who seek, provide or support abortion.

Rooted in beliefs, attitudes and social norms and reinforced by restrictive laws and policies, stigma silences open discussion of abortion and suppresses accurate information. This cloud of misinformation can cast doubt over people's right to access a safe abortion. Myths limit people's knowledge of abortion, spreading confusion about the conditions under which abortion is legally permitted.

1. World Health Organization (WHO) (2020), Preventing Unsafe Abortion. Available at: <https://www.who.int/news-room/fact-sheets/detail/preventing-unsafe-abortion>

2. Ibid.

Even when safely and legally available in a country, abortion can be socially prohibited and discouraged. Stigma can lead people to prioritize secrecy over safety. Fear of being recognized by family and friends when visiting a clinic for an abortion and fear of being judged by providers, prompt many young women to avoid trained health professionals in formal medical settings.

Stigma affects everyone: individuals, communities and service providers. Young women and adolescent girls bear the brunt of abortion stigma due to gender stereotypes that they cannot or should not make decisions about their own bodies: they are judged for having sex outside marriage or when they are thought to be / considered by others as 'too young'.

Stigma causes delays in people seeking abortion and stops others from accessing abortion, leading to unintended pregnancies. Stigma drives abortion underground, where it is more likely to be unsafe. Shame, fear, judgement, guilt and secrecy all fuel unsafe abortion, which accounts for up to 13 per cent of maternal deaths worldwide, most of which are entirely preventable. Stigma matters because it can kill.

3. Singh, S et al. (2018), Abortion Worldwide 2017: Uneven Progress and Unequal Access, Guttmacher Institute. Available at: <https://www.guttmacher.org/report/abortion-worldwide-2017>

4. WHO Ibid.

Right: IPPF/Xaume Olleros - Benin. Participant from the Cocotomey-La Paix district on the outskirts of Cotonou taking part in an exercise about abortion stigma organised by ABPF staff.



1.2 IPPF: a trailblazer in reducing abortion stigma

The International Planned Parenthood Federation (IPPF) leads global efforts to tackle abortion stigma. Its model of integrated service provision, including safe abortion; focus on quality of care; and locally-owned Member Associations (MAs), embedded in their communities, make IPPF uniquely positioned to address abortion stigma. IPPF is committed to promoting the sexual rights of all people and a youth-centred approach, as enshrined in its Strategic Framework (2016–2022).

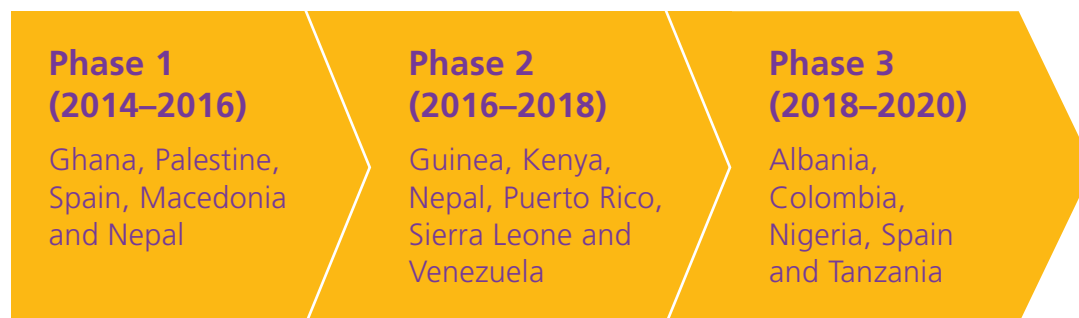
Since 2014, the generous support of the David & Lucile Packard Foundation has enabled IPPF to reduce abortion stigma affecting young people around the world. Meaningful youth participation has ensured that young people's lived experiences were central in every aspect of this work. IPPF has advanced understanding of how abortion stigma curtails young people's ability to exercise their sexual and reproductive rights, how to combat stigma and how to scale up access to safe abortion care. We have gained a wealth of knowledge and expertise in implementing effective, innovative strategies to reduce stigma. Because abortion stigma manifests at many levels – individual, community, provider/organization and the

media – IPPF has worked with a wide range of audiences to challenge bias and judgement, counter misinformation and dispel myths. Working closely with young people, IPPF MAs and the Secretariat have been fully involved in this ground-breaking programme.

Our work spans many countries around the world:



IPPF also awarded small grants to young people in the following countries (see [page 19](#)):



2 ACHIEVEMENTS

Since 2014, IPPF has:

Developed expert global guidance, tools and resources on stigma-free messaging on abortion and **delivered** accurate information and education

Stigma-free messaging and education on [page 5](#)

Increased provision of stigma-free abortion care to young women.

Stigma-free service delivery on [page 14](#)

Supported programming designed and led by young people.

Youth-driven programmes on [page 17](#)

Expanded the evidence base and shared expertise on how to address abortion stigma.

Research and evidence generation on [page 20](#)

2.1 Stigma-free messaging and education

Myths about abortion fuel community judgement and disapproval as well as provider bias, limiting access to safe abortion care. In response, IPPF has successfully delivered accurate, non-judgemental information, messaging and education – using neutral language and stigma-free images – that do not shame the people who seek, provide or support abortion.

IPPF has brought clarity to a debate that was clouded by misinformation. In many settings across the world, IPPF has transformed the attitudes, beliefs and harmful norms that promote abortion stigma. To achieve this, MAs and the Secretariat have worked in tandem with young people. This work has positioned IPPF as a global leader in non-stigmatizing messaging on abortion.

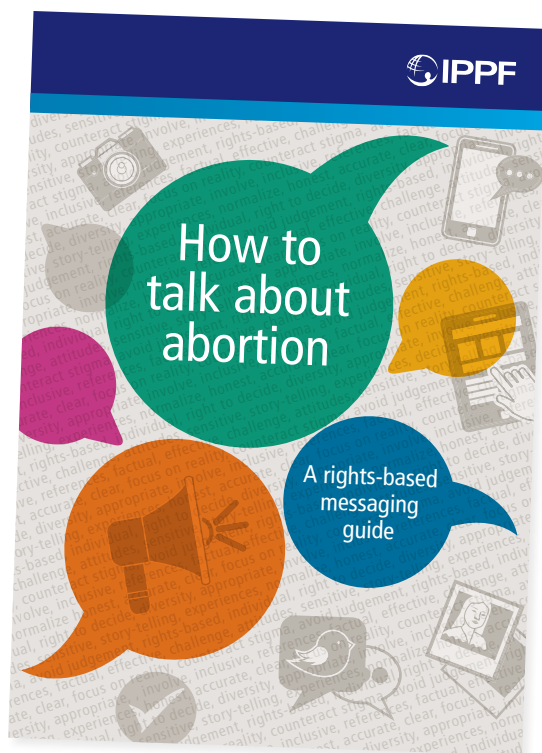
Right: IPPF / PPAG - Ghana. Young person supporting the campaign #PinkShoesGhana.



[BACK TO CONTENTS](#)

2.1.1 Global guidance, tools and resources on messaging

IPPF MAs expressed the need for support in developing stigma-free messaging on abortion, given the shortage of relevant materials. The Secretariat therefore produced a series of expert tools offering practical guidance to inform and promote positive, rights-based messaging:



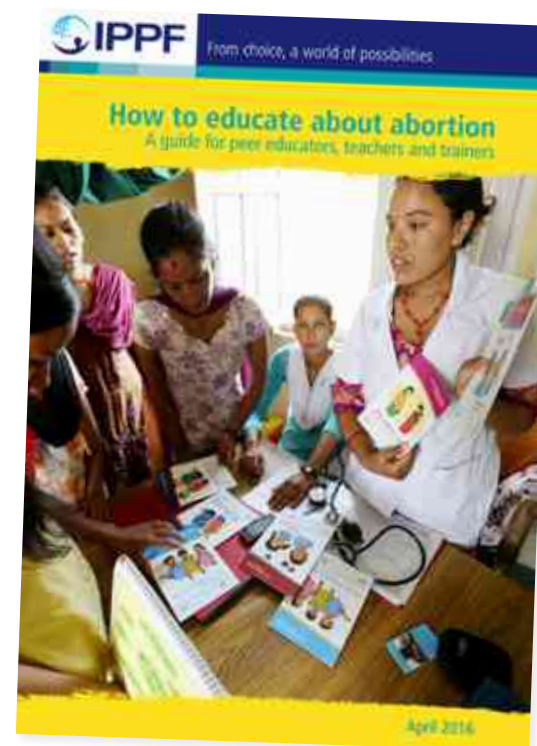
Above: How to talk about abortion: a rights-based messaging guide (2015).

[How to talk about abortion: a guide to rights-based messaging \(2015\)](#)

This is designed to help individuals and organizations think about the language and images they use to communicate about abortion. The content includes examples of rights-based messages and useful tips and advice on how to avoid the use of stigmatizing language and images. This guide can be used by educators, advocates, programmers, health professionals and policymakers to inform a wide range of communication materials. It is accompanied by an engaging, two-minute animated [film](#). Available in English, French, Spanish and Arabic, the messaging guide was updated in 2019 and rolled out to MAs and external organizations.

[How to educate about abortion: a guide for peer educators, teachers and trainers \(2016\)](#)

This provides the rationale for teaching about abortion. It offers practical support for trainers and educators who want to deliver workshops or training on abortion to young people, especially peer educators. The guide, which is available in English, French and Spanish, includes key terms, instructions for facilitators as well as specific activities that educators can use. The guide is accompanied by a popular, short, animated [film](#). [How to educate about abortion – the essentials](#) (2017) is a brief version.



Above: How to educate about abortion: a guide for peer educators, teachers and trainers (2017).

[How to report on abortion: a guide for journalists, editors and media outlets \(2017\)](#)

This aims to encourage accurate reporting of the facts about abortion, including the use of stigma-free images. The way abortion is presented in the media can influence how it is perceived. This guide was written for journalists, editors and media outlets to inspire honest portrayals of abortion as part of real people's lives and relationships. It is available in English and Spanish.



Abortion Matters an Introduction (2018):

A free, online that covers all the basics of abortion, to increase your confidence and ability to raise awareness and advocate for safe abortion. An updated version (2020) includes animated short videos to learn about the two types of safe abortion: [medical](#) and [surgical](#); specific reference to gender as it relates to abortion; [guidance on abortion in humanitarian settings](#); [Trans-inclusive abortion services](#); [Disability Inclusion in Abortion and Contraceptive Care](#) and much more. This was developed with the [Get Up Speak Out for Youth Rights](#) programme.

Understanding abortion: a visual resource (2020)

This aims to fill a gap in communication, reducing literacy and language barriers around abortion messaging. It can be used with a range of different audiences, including people with learning disabilities, to support them in making an informed, consensual decision on pregnancy and abortion. This resource offers an insight into what the process of having an abortion is like, showing a young person's journey if they decided to have an abortion. Available in English, French and Spanish, it is intended to support community health workers, young people and advocates.

Left top: How to report on abortion: a guide for journalists, editors and media outlets (2017).

Left bottom: Abortion - making the decision. Illustration from 'Understanding abortion: a visual resource' 2020.

These expert guides, tools and resources have been rolled out across the Federation. Extremely well-received, they have filled gaps in knowledge about how to combat abortion stigma and have strengthened the capacity of MAs and other organizations to advocate for safe abortion care. The guides, How to talk about abortion and How to educate about abortion, have received more than 12,000 views on IPPF's website since 2016.

The resources have formed the basis of training workshops for IPPF young champions, peer educators, advocates and young volunteers. As a result, participants reported improved knowledge of how to educate other young people on abortion. They also increased the number of referrals they made to safe abortion services.

In addition, the resources have been used extensively across the globe by other organizations to inform their messaging. These include Amplify Change, Catholics for Choice, CREA, Inroads, International Youth Alliance for Family Planning, Ipas, Medical Students for Choice (MSFC), Rutgers, SheDecides, Stop AIDS and Women on Waves. MSFC sent How to talk about abortion to around 200 medical schools in 31 countries and received positive feedback from student leaders.





2.1.2 Member Association stigma-free messaging

Informed and shaped by the IPPF Secretariat's resources, MAs around the world have reframed messaging and delivered stigma-free information and education to individuals, communities and service providers. MAs have integrated the resources in their own messaging on abortion stigma: adapting the tools, revising messages to suit the context, using national data and translating them into local languages. They have sensitized the general population and providers to the preventable health risks posed by unsafe abortion and addressed any cultural, societal and religious objections.

Sensitizing communities

Using IPPF's comprehensive guide, *How to talk about abortion*, MAs designed and delivered rights-based messages on abortion within the community. IPPF MAs succeeded in reframing the debate on abortion: avoiding negative associations and using culturally appropriate communication, alongside stigma-free images, that generate positive responses.

Specifically, messaging in each country provided information on the legal status and availability of safe abortion services; the risks

of unsafe abortion; the safety of abortion when conducted in correct conditions; and reinforced access to safe abortion as a fundamental human right that protects women's health and wellbeing. Many MAs clarified the law to explain the cases in which abortion is legally permitted. This is critical as in many countries, despite abortion being legal, unsafe abortion remains a major public health issue, for example in Ghana, and knowledge is limited of the availability of safe abortion, for example in Nepal. In many settings around the world, this messaging has informed young people of their rights and changed mindsets within the community.

Young people's decisions about pregnancy and abortion are shaped by parents, guardians, teachers, community and religious leaders, peers and 'influencers'. Guided and led by young people, MAs therefore sought to reach a broad range of audiences, including schools, colleges and universities (students, teachers and educators) and powerholders (traditional chiefs, community leaders, religious leaders and police officers). Young peer educators played a vital role in delivering stigma-free messaging to other young people. MAs focused on young people not in formal education, such as hairdressers, apprentices and carpenters (Benin) and young women taking beauty or tailoring courses (Pakistan) or in beauty parlours (India). MAs raised

Left: IPPF/ Albanian Centre for Population and Development (ACPD) - Youth Grants 2019.



awareness among large groups and increased the diversity of young people reached. In Nepal, the focus was on marginalized young people, including people living with HIV and disabilities. Dramas, written by peer educators, were performed in schools for visually impaired children. IPPF's latest guide, *Understanding abortion: a visual resource*, will be invaluable in helping MAs to reach under-served communities.

Each MA, in partnership with youth leaders, devised locally appropriate and innovative strategies to sensitize young people. Stigma-busting messages and creative communications materials were successfully delivered through a range of channels, including community dialogues, lively workshops and events, dance, street theatre (Nepal), poetry (Burkina Faso), film, drama (Ghana), murals (India) and comprehensive sexuality education for children in and out of school (India and Nepal).

left: IPPF / PPAG - Ghana. Participants of Dance Off Abortion Stigma Outreach Programme.

CASE STUDIES:

Reaching the community with stigma-free messages

In Ghana, the Planned Parenthood Association of Ghana (PPAG) conducted community dialogues to sensitize traditional leaders. To open up the conversation, each leader was asked to tell a story of unsafe abortion that they had heard and to share how they felt. One traditional leader told the story of a popular 15-year-old girl in Tamale who was found dead after an unsafe abortion. PPAG reported that:

“After recounting the story, he indicated that he was sad and hurt. As to what he would have done differently, he said he would encourage her to go for safe abortion care. This story, like other stories, triggered the emotions of participants, particularly the chiefs, to understand the dangers involved with unsafe abortion and how the community will lose if young people are not provided with the option of non-judgemental safe abortion services.”

In Benin, L'Association Béninoise pour la Promotion de la Famille (ABPF) worked with young apprentices, holding educational sessions in the local language and reaching young people outside formal education. Young trainee hairdressers, craftsmen and carpenters were encouraged to attend Youth Action Movement meetings and bring friends. The MA trained young peer educators in how to talk about abortion and reached students and teachers in high schools and colleges. Mr Agondanou Patrice, Head of the Belle Ivoire d'Abomey sewing workshop, said:

"I used to send my apprentices away when they became pregnant. But I finally realized that this is one way to encourage them to resort to clandestine abortions because they don't always want to give up learning."

Right: IPPF/Xaume Olleros - Benin. Students (10 to 24 years old) and teachers attend a workshop run by ABPF staff on abortion and stigma at Fiyegnon collège d'enseignement général in Cotonou, Benin.



Below: IPPF/Xaume Olleros - Benin. Volunteers and IPPF staff attend the Tweet activity at the ABPF clinic in Cotonou, Benin.

The media can propagate abortion stigma through negative messages about young people's sexuality and sexual rights. This can have a far-reaching impact. Conversely, IPPF has seen the huge benefits of working with the media and engaging social media to transform people's attitudes to abortion and overcome stigma. Working with young people, MAs used mass media channels (television, radio, newspapers and film) and harnessed the power of social media to extend the reach of stigma-free messaging. Using IPPF's guide, *How to report on abortion*, MAs trained journalists to foster accurate media coverage.

Working with the media and social media

In Venezuela, trained youth volunteers at the Asociación Civil de Planificación Familiar (PLAFAM) mounted a highly successful social media campaign – reaching over 27,000 people – to shatter the silence and taboos around abortion. Young people held rallies and created infographics, videos and colourful posters to communicate the lived experiences of young women who had had abortions and tell their stories. Vanessa, youth volunteer at PLAFAM, said,

Youth champions from Benin and Burkina Faso hosted a joint online campaign on International Safe Abortion Day (2017). Messaging called for restrictive abortion laws to be eased in both countries. And in Ghana, to highlight International Safe Abortion Day (2019), youth champions organized two Twitter chats in collaboration with the team from Benin. Questions were asked in both French and English. In Ghana, the hashtag #SafeAbortionSaves trended (ranking third). In Nepal, the Family Planning Association of Nepal (FPAN) changed community perceptions of abortion. Mobilizing the media played a vital role, with FPAN's messaging on the radio about safe abortion reaching many young people during the COVID-19 pandemic.



Above: IPPF / FPAN, Nepal. Behind the scenes of the short-film "Lanchhana" (Stigma), which originates from the street plays the project has replicated across the country.

The MA shared a powerful story of a young woman who they had helped:

"A 17-year-old girl from the rural area of Palpa district got married to a boy of the same age. They dropped out of school and travelled for labour work. The girl was sexually exploited and tormented after a few months of marriage. She became pregnant at the age of 18. When the abuse from her husband got worse, she ran away from him and came back to Palpa. She didn't have any income and no option left other than abortion. On the radio, she heard about safe abortion services offered by FPAN.

She came to us and did her check-up, but unfortunately, she was 15 weeks pregnant. As FPAN was unable to provide safe abortion services beyond the 12-week gestation period, the service provider referred her for a second trimester safe abortion service in the provincial hospital. She is now living independently, has joined college and started teaching in a Montessori school. She visited the FPAN clinic one month after her abortion and was very thankful to us and our services. She wants to work as a FPAN volunteer and is referring clients who need services to our clinics."

Storytelling

Sharing personal stories of young women who have had an abortion and/or who have experienced abortion stigma is an important strategy to 'normalize' abortion. By increasing the visibility of abortion, storytelling can shift cultural norms that stigmatize the procedure.

Storytelling highlights the fact that abortion is a common and real experience, not an abstract political issue. Sharing experiences publicly can help those who have had an abortion, or are considering doing so, realize that they are not alone. Sharing stories can also be an empowering experience for young women.

IPPF MAs have encouraged and supported young people to tell their stories. In Benin, the MA collected 14 video and written testimonials from young women who had had an abortion and/or experienced stigma. In Ghana, youth champion Wendy Nondia Tipoka shared a story, [Young Love, Young Pregnancy](#), on the Youth Against Abortion Stigma site.

Right: IPPF/ Youth grants, Palestine.



2.2 Stigma-free service delivery

People who seek an abortion risk stigma, discrimination and shaming by service providers who perceive it as unlawful or immoral. These judgemental attitudes, which can result in delays in accessing abortion as well as negative experiences, are a major barrier to quality of care. In response, IPPF has worked hard to sensitize healthcare providers to the importance of delivering quality abortion care, counselling and support to young people. As a result, safe abortion services delivered to young women rose between 2014 and 2020.

Training staff

IPPF MAs have delivered non-stigmatizing messages to healthcare providers at public and private facilities to improve the quality of care and strengthen abortion services, ensuring privacy and confidentiality. Some MAs have provided values clarification training to explore health professionals' attitudes to abortion. This has sparked critical reflection so that providers can better support young women rather than judge or lecture them, developing their capacity to deliver compassionate abortion care.

Right: IPPF/ Community outreach with the Abortion Stigma Project - Nepal.

CASE STUDIES:

Values clarification training to improve abortion care

In India, following a productive values clarification training session, a clinic staff member said:

“I used to get very irritated when clients came for [more than one abortion]. I thought they were being irresponsible. Later on, thanks to the project activities that encouraged open discussion, I realized how those women had no negotiating power over the men and how my attitude was only bringing them more misery. I learned to become non-judgemental in a true sense.”

In Nepal, training showed that there was still some level of stigma among service providers. Participants shared their experience of having a bad dream on the day they provided safe abortion services. One said that her family members had blamed her after she had had a miscarriage, saying it was due to 'the sin of performing abortion on other women'. All these misconceptions were addressed during values clarification training.



[BACK TO CONTENTS](#)



Working with a range of healthcare providers to strengthen referrals to clinics

In order to reduce barriers to safe abortion care, IPPF MAs have seen the benefits of collaborating with other providers, including community health workers, midwives and pharmacists.

CASE STUDIES:

Working with a range of healthcare providers to strengthen referrals

In India, the Family Planning Association of India (FPAI) trained healthcare providers on young people's sexual and reproductive health needs and rights, the risks of unsafe abortion and the importance of youth-friendly services. These discussions triggered a change in providers' attitudes towards young people. FPAI collaborated with the Government's accredited social health activists (ASHAs) to disseminate messages about safe abortion care. The MA encouraged ASHAs to refer people to FPAI's clinics or peer educators. In Murhu, youth champions engaged with local pharmacies to minimize self-medication of medical abortion and develop referral linkages for safe abortion. As a result, pharmacists regularly sent young women who came to them for pills to the FPAI clinic

Left: IPPF/ Midwife, working with The Association Béninoise pour la Promotion de la Famille (ABPF), in Benin.

for comprehensive care, non-judgemental counselling and information. In Ghana, PPAG and youth champions oriented service providers, including midwives from the maternity home and teaching hospital in Accra, on the standards and protocols relating to the provision of abortion care, youth-friendly services and effective ways to communicate abortion. Following the workshop, many participants had a better understanding and appreciation of comprehensive abortion care.

Providing youth-friendly spaces.

IPPF MAs have created safe spaces where young people can meet in a confidential, stigma-free environment. Led by trained peer educators, they have been able to discuss sensitive issues such as sexuality, sexual and reproductive rights and abortion. This has helped to challenge abortion stigma.

CASE STUDIES:

Creating youth-friendly spaces

In Pakistan, working in a highly restrictive setting, Rahnuma-Family Planning Association of Pakistan (R-FPAP) upgraded its pioneering youth-friendly spaces to combat the stigma surrounding abortion. R-FPAP found that offering practical training in beauty and

tailoring helped attract young women to its centres. Youth-friendly safe spaces created an opportunity for peer educators to discuss abortion, supporting other young people to overcome barriers to accessing services, such as parental permission. A toll-free helpline, where young people can receive confidential support by trained counsellors on pregnancy and abortion, has also proved popular.

Accountability: ensuring quality of care

IPPF is committed to ensuring quality of care. This means delivering services that uphold the rights to privacy, confidentiality, dignity, choices and safety. IPPF has used a range of mechanisms, including self-assessments, audits, customer satisfaction surveys, mystery clients and youth advisory groups, to assess the quality of abortion care provided by each MA and promote accountability. An integral part of this is empowering young clients to understand their rights and what a quality service should entail, and supporting them to monitor services.

CASE STUDIES:

Social accountability

In Benin, the MA evaluated the quality of care provided to adolescents and young people in clinics where providers are trained to offer youth-friendly services, with a focus on their reproductive rights. To do this, the MA used interview questionnaires, surveys and mystery clients (trained young women who visited the clinic to request an abortion and report on their experience). Mystery clients revealed excellent practices: a satisfaction rate of 100 per cent at the Lokossa clinic, 95 per cent at the Bohicon clinic and 98 per cent at the Cotonou clinic.

In Colombia, a small grant was awarded to support activities by Jóvenes VIVE. Jóvenes VIVE is a *veeduría juvenil* (youth citizens' oversight group) that carries out advocacy directed at healthcare providers, with the aim of making institutional bodies accountable and protecting young people's right to safe abortion. Jóvenes VIVE held workshops and training for clinics and universities on a rights-based approach to abortion. They instigated a protocol of action towards healthcare institutions, using letters, requests and petitions. Since the group acts as a formal watchdog, healthcare institutions have a duty to reply on how they are addressing the concerns raised.

Right: IPPF / Jóvenes VIVE, Colombia, Youth Grants.



[BACK TO CONTENTS](#)



2.3 Youth-driven programmes

Young people are at the heart of IPPF's work to reduce abortion stigma. Not only are they most affected by the stigma surrounding abortion, but young people also drive initiatives and devise resourceful, creative ways to reach others.

We know that to reach young people, messaging must be meaningful. IPPF recognizes the value of young people's voices, perspectives and insights, as well as their keen understanding of which messages, media and resources will resonate with their peers. We have listened to young people and employed a range of strategies to ensure that our initiatives were genuinely led by youth.

Empowering youth champions and fostering young people's leadership.

IPPF MAs trained two youth champions in each country to design and lead diverse stigma-busting activities. Youth champions played a pivotal role in advocating for abortion rights within the community and helped deliver comprehensive sexuality education for adolescents in and out of school. Youth champions also facilitated young people's access to safe abortion services, providing counselling, strengthening referrals and acting as 'buddies',

Left: IPPF/ Albanian Centre for Population and Development (ACPD) - Youth Grants 2019.



accompanying young clients to clinics ([Bosnia](#)). Youth champions who conducted values clarification training helped improve the quality of abortion care provided.

Youth champions have used their valuable insights to develop and review tools and resources. They have also taken part in research that has enriched the programme and built their capacity. In turn, youth champions trained other peer educators and youth advocates, thereby amplifying the impact and sustainability of IPPF's essential work.

IPPF has invested in youth leadership, supporting youth champions to participate in international conferences, for example the global meetings of the Inroads network, to share experiences and learn. In 2019, youth champion Surakshya Giri took part in UNFPA's youth dialogue and panel discussion event with Dr Natalia Kanem, Executive Director, UNFPA in Kathmandu, Nepal.

In 2020, Ibis Reproductive Health (Ibis) carried out research to understand and evaluate the youth champion model – from the perspective of the youth champions. Many youth champions shared positive feedback. They reported feeling empowered by the experience, gaining confidence and acquiring new skills. See [page 20](#).

Left: IPPF/ Youth Champions Training, 2016.

CASE STUDIES:

Youth champions overcome abortion stigma

In a village near Ouagadougou, Burkina Faso, Sawdate, a confident youth champion, changed the views of community elders and even the chief, using a 'cross the line' values clarification exercise. A witness from the IPPF Secretariat said:

"I saw, in front of my eyes, those who had denounced abortion as a sin, start to accept that safe abortion does in fact save lives, and that there are circumstances where it is completely understandable that a woman would need to end a pregnancy. The session ended with the village chief agreeing to refer any young people presenting to him with pregnancy or sexual health issues to the ABBEF [L'Association Burkinabè pour le Bien-Être Familial] clinic."

Building the capacity of young people to advocate for abortion rights

IPPF has empowered many young people to become articulate advocates for safe abortion. Building young people's skills, knowledge and confidence has supported them to speak up for their right to safe abortion. In Zambia, for example, young people were trained at the MA, Planned Parenthood Association of Zambia, in 2016. Following the training, young people reported a better understanding of reproductive rights and strengthened advocacy capacity. One young participant said:

"With the information provided to me, I can now stand my ground and talk about abortion in my community."

Awarding grants to support youth-led activities

IPPF has awarded numerous small grants to support young people's creativity in developing stigma-busting communications materials and activities. Innovative projects include theatre, dance and live Twitter chats to dispel myths about abortion in Kenya, and in Palestine, youth volunteers painted public murals to spark discussion and draw attention to the 'secret' of abortion. These projects are showcased in [documents](#) online aimed at inspiring others.

CASE STUDIES:

Youth-led projects tackle abortion stigma

In Nepal, young volunteers at FPAN developed a project to reduce abortion stigma among medical students and healthcare providers and improve young people's access to safe abortion care. Following initial focus group discussions, young people organized training workshops for medical students, who were equipped with the information they need to provide stigma-free, non-discriminatory services. One student said:

"I have understood that abortion is a human right. A woman's bodily autonomy cannot be ignored and must be protected."

Amplifying young people's voices.

The creation of an online Youth Advisory Group on abortion stigma has amplified young people's voices and ensured that activities were informed by youth. Established by the Secretariat in 2014, the group now counts 245 members. Young people review resources, including the guides How to talk about abortion and How to educate about abortion. They have used their expertise as peer educators and advocates to make the

resources more culturally sensitive, relevant and youth-focused. A consultation with members of the Youth Advisory Group in 2019 showed that young people value the group as a source of advice, inspiration and opportunities.

Members of the Youth Advisory Group also contribute lively blogs to the [Youth Against Abortion Stigma](#) website, which was designed and created by young people to address the impact that negative beliefs about abortion have on access to and scale-up of safe abortion care. This is a unique forum that shares young people's insights, perspectives and stories from around the world.



Above: IPPF/ PPAG Girl Boss event, Ghana.

2.4 Research and evidence generation

IPPF has built a body of evidence and knowledge on abortion stigma. Expanding the evidence base has shed light on the impact of stigma on access to quality abortion care for young people. In turn, this has informed understanding and effective programming by IPPF MAs and other organizations.

Conducting research

Early in the programme, using Ipas' Stigmatizing Attitudes, Beliefs and Actions Scale (SABAS), research was conducted in four countries to measure community attitudes to abortion. Key [findings](#) suggested that negative stereotyping about women who have had an abortion – rather than exclusion or discrimination – is the most common form of abortion stigma. This learning enriched messaging in each country, enabling MAs and young people to tailor activities accordingly and make them more effective. IPPF adapted the SABAS tool as it was not primarily aimed at young women; this tool has now been shared and used by other organizations. In India, the SABAS baseline study report, which identified statements related to abortion associated with high stigma, was discussed during a workshop with youth champions and peer educators. Young people reviewed the statements and developed positive messages in Hindi to address stigma within the community and change mindsets.

CASE STUDIES:

Research designed and led by young people

In Ghana, PPAG collaborated with Youth Development Labs (YLabs) in developing and testing a prototype for peer provision of abortion. YLabs' methodology is based on user-centred design that involves young people in development, implementation and evaluation. Young women refined interventions according to their needs and perspectives. The research team engaged young people, stakeholders and providers to evaluate access to abortion information and services for young people and find solutions to improve access to safe abortion care for girls aged 14-19.

The team tested three solutions: girl boss (an outreach event offering girls mentorship from successful, older female peers), safe pass (a referral partnership with chemists that are accessed by girls) and sister support (a helpline staffed by friendly female peer counsellors to support girls around pregnancy and link them to services). The evaluation found that the solutions were promising for increasing contraceptive uptake but unclear for abortion, due to the need for more time. The solutions appeared to be effective in boosting girls' willingness to go to the clinic. The YLabs concept and activities were revolutionary in their effectiveness in reaching young girls.



Left: IPPF / PPAG, Ghana. Young activist speaks at a Girl Boss event.

In 2019, in collaboration with the Global Comprehensive Abortion Care Initiative (GCACI) and Ibis, IPPF published an article in Sexual and Reproductive Health Matters, [Exploring stigma and social norms in women's abortion experiences and their expectations of care](#). Research examined women's expectations and concerns before seeking abortion, their beliefs about abortion, experiences of stigma and perceptions of quality of care in India and Kenya. The study found that most women reported that before seeking abortion they had little knowledge about the service, expected to be judged during care, and feared the service would be ineffective or harmful. Many reported that community members disapproved of abortion and that a woman's age or marital status could exacerbate judgement.

In 2020, Ibis conducted focus group discussions to evaluate the youth champion model from their point of view. While most feedback was overwhelmingly positive, youth champions did identify some challenges, such as the stigma and judgement they faced in their work. They suggested ways to improve the model, including increased capacity building and support.

Sharing research and learning

Throughout the programme, IPPF has shared learning, specifically research into abortion stigma, at international conferences and summits. These include the International Conference on Family Planning (2016), the International Federation of Gynaecology and Obstetrics World Congress (2015 and 2018), the Ipas Youth Summit and the World Congress on Adolescent Health. IPPF has also supported young people to attend global conferences, such as the International Conference on Family Planning (2016) and Women Deliver Conference (2016), where Youth Advisory Group members shared learning and held a workshop on abortion stigma.

Collaboration

IPPF continued collaboration with Ibis on the use of the SABAS tool to measure stigma at the community level. In addition, the work complemented IPPF's GCACI and the Safe Abortion Action Fund. This fruitful collaboration has created many opportunities for cross-learning, exchange of ideas and information. This has maximized the impact of the programmes and enabled more women to claim their right to quality abortion care.

Right: IPPF/Xaume Olleros - Benin. IPPF committee meeting at the headquarters of The Association Béninoise pour la Promotion de la Famille (ABPF) in Cotonou, Benin.



3 LEARNING

Over the years, IPPF has become a technical hub for learning and expertise on abortion stigma. Some of the most useful learning arises not only from our many successes but also from overcoming the challenges we have faced.

Changing mindsets takes time and commitment

Encouraging conservative community members to open up and share their thoughts on issues that are considered sensitive or taboo – and ultimately to change their beliefs – is not easy. It is a process that takes time. IPPF has learned that a reframing approach requires engagement and commitment.

“Reframing is more a matter of accessing what we and like-minded others already believe unconsciously, making it conscious, and repeating it till it enters the public discourse. It doesn’t happen overnight. It’s an ongoing process. It requires repetition and focus and dedication.”⁵

5. George Lakoff (2014), The All New Don’t Think of an Elephant! Know Your Values and Frame the Debate. Available at: <https://georgelakoff.com>

Right: IPPF/Xaume Olleros - Benin. Jacques Gadesson, literature teacher, at Fiyegnon collège d’enseignement général participated in a ABPF workshop with students on abortion and stigma in Cotonou, Benin.

In India, for example, FPAI did not initially receive permission from schools and colleges to deliver comprehensive sexuality education because of parental opposition. However, after regular, sustained communication with school authorities, including one-on-one meetings with parents to address specific fears, FPAI was able to deliver the sessions.

Appropriate use of language respects the dignity, choices, bodily integrity and rights of all concerned. Yet IPPF understands that it is not just a matter of reframing language: images also shape how abortion is depicted and can help change hearts and minds. To this end, MAs reviewed clinic materials to avoid stigmatizing images.

Service provider training should involve all staff

IPPF has learned that training should not be limited to health professionals only. In Benin, the MA, ABPF, trained all staff on abortion stigma, including security guards who are often the first to greet young people in clinics and youth centres. This helps welcome young women and reiterates the importance of maintaining privacy and confidentiality. And in Burkina Faso, ABBEF trained receptionists, cleaners and guards so that they had greater



Below: IPPF/ Youth Champions Induction Training, Istanbul 2019.



ownership of the project and were supportive of clients' rights to quality services. In order to achieve lasting transformation of service providers' attitudes and beliefs, we have also learnt that capacity building is not a one-off exercise. We have seen the power of values clarification training in helping providers to offer non-judgemental care. We recognize that specific training is required to support the decision-making process of younger and/or unmarried women who may feel vulnerable and isolated.

Supporting youth champions amplifies young people's voices

IPPF's strategy of training two youth champions from each MA on abortion stigma, who then trained other peer educators and youth advocates, has proven extremely successful in ensuring that the work was truly youth-centred. IPPF has supported and invested in youth champions, and seen their confidence grow. Youth champions have consistently modelled leadership. We have seen their power and bravery in speaking up on sensitive issues within traditional communities and challenging negative beliefs about abortion.

Using and refining research

Data on the extent of stigma in the community, collected using the SABAS tool, proved extremely useful in informing programme planning. In settings where



notions of abortion as a 'sin' are prevalent, for example, this research enabled organizations to target interventions by focusing on faith. However, the study had several limitations, which made it difficult to compare data across time and location and assess attribution. These limitations were subsequently addressed, in collaboration with Ibis, so that baseline and endline results could be compared more closely.

Creating professional alliances

To promote rights-based messaging to a wider audience, IPPF has seen the value of forming partnerships not only with organizations active in the field of sexual and reproductive health and rights but also beyond. Building coalitions has helped bring about real change. In Guinea, young people at L'Association Guinéenne pour le Bien-Être Familial invited human rights and youth organizations to educational talks so that they could understand the importance of safe abortion.

In the UK, the Secretariat held two successful workshops with organizations not directly involved in abortion, including Amnesty International, BBC Media Action, Plan UK and Stop AIDS, to help them incorporate stigma-free messaging in their work. In this way, IPPF has extended its field of influence: bringing the issue of abortion stigma to the forefront in areas beyond sexual and reproductive health and rights. Furthermore, at the service delivery level, partnerships with other providers, such as pharmacists, ASHAs and midwives, have been beneficial.

Above: IPPF / Webinar 'Youth Against Abortion Stigma', 2021.

4 RESOURCES

Over the course of the programme, IPPF has developed and disseminated a wide range of resources to enhance understanding of abortion stigma, develop the capacity of MAs and other organizations, share learning and inform effective programming. These accessible, engaging tools promote sustainability by enduring after the end of the programme. Here are some of our key resources:

- ▶ [How to talk about abortion: a guide to rights-based messaging](#)
- ▶ [How to talk about abortion: video](#)
- ▶ [How to educate about abortion: a guide for peer educators, teachers and trainers](#)
- ▶ [How to educate about abortion: video](#)
- ▶ [How to educate about abortion – the essentials](#)
- ▶ [How to report on abortion: a guide for journalists, editors and media outlets](#)
- ▶ [Understanding abortion: a visual resource](#)
- ▶ [How to improve young people's access to safe abortion – MAs in four countries share best practices, tips and effective strategies: \[Bosnia and Herzegovina\]\(#\) \(using a buddy system\), \[Cameroon\]\(#\) \(partnering with educational institutions\), \[Ghana\]\(#\) \(using social media\) and \[Pakistan\]\(#\) \(youth-friendly spaces\)](#)
- ▶ [IPPF funds youth-led projects to tackle abortion stigma in Ghana, Palestine, Spain, Macedonia and Nepal](#)
- ▶ [IPPF funds youth-led projects to tackle abortion stigma in Guinea, Kenya, Nepal, Puerto Rico, Sierra Leone and Venezuela](#)
- ▶ [IPPF funds youth-led projects to tackle abortion stigma in Albania, Colombia, Nigeria, Spain and Tanzania](#)
- ▶ [Youth against abortion stigma website featuring blogs from IPPF young volunteers around the world](#)
- ▶ [Addressing abortion stigma as it affects young people in South Asia and West Africa](#)
- ▶ [Abortion Matters course](#)

5 CONCLUSIONS

Through this ground-breaking work, IPPF has successfully reduced abortion stigma at the individual, community and service provider level and in the public discourse, via the media and social media. This is despite an extremely challenging environment, characterized by the Global Gag Rule, attempts to roll back reproductive rights in many countries and the devastating COVID-19 pandemic.

IPPF's global guidance, tools and resources have informed and promoted widespread positive, accurate, stigma-free messaging on abortion. Many examples across the Federation illustrate how MAs – led by and working closely with young people – have integrated the resources in their work and combated the stigma surrounding abortion, prompting traditional power holders within the community to change their mindsets. IPPF has also reduced service provider bias, which is essential for the provision of non-judgemental support and care to marginalized young people. Young people have increased their knowledge of their sexual and reproductive rights and fostered accountability.

In addition, IPPF has expanded the evidence base, shining a light on the impact of stigma on access to safe abortion for young women. By sharing expertise, learning, evidence and best practices on how to bust stigma with

partner organizations within and beyond the sexual and reproductive health and rights sector, IPPF has extended the reach and impact of this valuable work.


Young people have been – and always will be – at the heart of this initiative and the entire Federation. Positive, stigma-free information and communication about safe abortion, combined with improved access to quality care has countered negative stereotypes, shaming and harmful gender norms, dispelled myths and empowered young people around the world to claim their right to safe abortion without discrimination. Young champions and peer educators have increased the number of referrals to IPPF's clinics. As a result of this pioneering work, more young women have accessed quality abortion care: taking control of their bodies, health, lives and their future.

IPPF's popular resources will last beyond the life of the programme: enhancing safe abortion initiatives implemented by IPPF as well as other organizations and, crucially, ensuring that the focus on stigma is not lost. The skills and knowledge young people have acquired during the programme will endure, boosting sustainability. The better understanding of how stigma affects young people, particularly young women, will strengthen other youth-led programmes. IPPF will keep supporting young people to share their abortion stories without shame, to speak out and defend their rights. And we will keep supporting other organizations to carry the torch and sustain the movement.



Above: IPPF/Xaume Olleros - Benin. Helene Hlungbo (C), ABPF youth champion, 27, at the ABPF clinic in Cotonou, Benin.

REDUCING ABORTION STIGMA



GLOBAL ACHIEVEMENTS *since 2014*

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