



## **EXPLORING ABORTION**

**A collection of self-reflection and  
sensitization activities for global audiences**



Ipas is a nonprofit organization that works around the world to increase women's ability to exercise their sexual and reproductive rights, especially the right to safe abortion. We seek to eliminate unsafe abortion and the resulting deaths and injuries and to expand women's access to comprehensive abortion care, including contraception and related reproductive health information and care. We strive to foster a legal, policy and social environment supportive of women's rights to make their own sexual and reproductive health decisions freely and safely.

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For more information or to donate to Ipas:

Ipas  
P.O. Box 5027  
Chapel Hill, NC 27514 USA  
1-919-967-7052  
ipas@ipas.org  
www.ipas.org

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Deborah McSmith, Evelina Börjesson, Laura Villa and Katherine L. Turner. 2011. *Exploring abortion: A collection of self-reflection and sensitization activities for global audiences*. Chapel Hill, NC, Ipas.

Graphic Design: Rachel Goodwin  
Editor: Mélodie Hunter

Produced in the United States of America

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# **EXPLORING ABORTION**

## **A collection of self-reflection and sensitization activities for global audiences**

By Deborah McSmith, Evelina Börjesson, Laura Villa and Katherine L. Turner

## About the Collection

This collection contains five independent self-reflection and sensitization activities on abortion, some of which have been adapted from widely used sexual and reproductive health and rights (SRHR) exercises. The activities were originally tested with young audiences, including SRHR peer-educators and advocates. They are effective in helping young people reflect on their abortion-related feelings and experiences, as well as in preparing young audiences for further discussions, values clarification, and skills-building related to abortion. While the activities have not been tested specifically with adult audiences, they are designed to be used with or adapted for any audience interested in learning more about abortion, and exploring the relationship between the self and perceptions and experiences of abortion. A useful resource to facilitate more in-depth exploration and discussion of abortion values, attitudes and practices is Turner, Katherine L. and Kimberly Chapman Page. 2008. *Abortion attitude transformation: A values clarification toolkit for global audiences*. Chapel Hill, NC, Ipas. Available at: [http://www.ipas.org/Publications/Abortion\\_attitude\\_transformation\\_A\\_values\\_clarification\\_toolkit\\_for\\_global\\_audiences.aspx](http://www.ipas.org/Publications/Abortion_attitude_transformation_A_values_clarification_toolkit_for_global_audiences.aspx)

Ideas and comments are welcomed and can be shared with the Youth Program at [youth@ipas.org](mailto:youth@ipas.org).

The activities presented in this edition of the collection include:

- Activity 1. The River of Life
- Activity 2A. Abortion and Me
- Activity 2B. Abortion and Me
- Activity 3. Women We Esteem
- Activity 4. The Privilege Walk
- Activity 5. Positive Improvisation

The activities provide a platform for participants to:

- Reflect on their own abortion-related feelings and experiences;
- Learn about other people's abortion related feelings and experiences;
- Identify social constructs that affect women's experiences with abortion;
- Prepare for more in-depth discussions about abortion related issues.

Each activity description includes information about:

- Objectives
- Materials needed
- Timeline
- Advance preparations

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Abortion is one of the most common experiences that women share (Ipas 2010), and across the world about 40–50 million pregnancies end in induced abortion each year. Women terminate pregnancy for many different reasons, and when denied the right and access to safe abortion care, will take desperate measures to end unwanted pregnancy (Ipas 2009). Approximately half of the induced abortions are unsafe, with women in the developing world bearing the heaviest burden. Roughly 47,000 women die from unsafe abortion worldwide each year (Shah and Ahman 2010), and millions more suffer serious complications (WHO 2003). The vast majority of these deaths and injuries are preventable, yet women continue to face barriers to accessing lifesaving information and care. Restrictive laws and policies, stigma around sexuality and abortion, and health system barriers are particularly detrimental to women.

Because of special circumstances, adolescents and young women are disproportionately affected by many of the barriers. Each year, 14 million adolescents between 15 and 19 years of age give birth, and pregnancy and childbirth-related complications are the leading cause of death for girls in this age group (Rowbottom 2007). Adolescent girls in developing countries undergo at least 2.2 to 4 million unsafe abortions each year. In 2003, young women aged 10–24 accounted for approximately 45 percent of the estimated unsafe abortion-related deaths (WHO 2007). Adolescent and young women are different from adult women because:

- Young women may have less experience related to sexual and reproductive health;
- Their community is less likely to support their access to information and services;
- An unsafe abortion may be their first obstetric event;
- Compared to adult women, young women require different outreach strategies;
- They have different skills to provide solutions appropriate for them and their peers.

Because abortion is so common and yet so stigmatized, it is important for anyone interested or active in SRHR work to have explored their own feelings about abortion and have an understanding of others' feelings and experiences.

# ACTIVITY 1

## The River of Life

This is a drawing activity, which is a useful opening for a workshop or training on abortion. At the start of any group work, particularly on stigmatized issues such as abortion, participants may find it easier or more comfortable to follow the actions or match the statements of other participants. A drawing activity like this one supports the expression of each participant's unique feelings and experiences, and encourages participants to focus on the individual level before approaching abortion from a wider perspective. It also contributes to building trust among participants.



### Objectives

By the end of this activity, participants will be able to:

- Identify factors in their lives, such as events and experiences, that influence their involvement with the issue of abortion, and their participation in this workshop;
- Recognize and respect a broad spectrum of life experiences that relate to, and form different perspectives of, the issue of abortion.



### Materials

- Several markers of different colors
- Sheets of flip chart paper cut in half, or A4 or 11x14 paper for drawing



### Timeline

- 10 minutes to introduce the activity
- 15 minutes to draw rivers
- 25 minutes for voluntary participant sharing
- 10 minutes to summarize and close the activity

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**60 minutes total**



### Advance preparation

- If possible, seat participants around a large table, or in smaller groups around several smaller tables, to provide a firm drawing surface. If no table is available, participants may sit and draw on the floor or ground.



### NOTE TO FACILITATORS

It's important to ensure that you have established group norms, especially related to confidentiality, prior to this activity.





### Instructions

1. Ask participants to spread out as much as possible to allow for privacy.
2. Give each participant a sheet of paper and a few markers. If participants are seated at table(s), place papers and markers in the center of the tables so that participants can choose different colors freely.
3. Ask participants not to talk with each other during this activity. Explain that this activity offers an opportunity for quiet self-reflection and there will be a voluntary sharing opportunity later.

4. Tell participants they are going to draw a “River of Life” that represents events and experiences in their lives that influenced their being present in this workshop and addressing abortion issues at this moment. You can say:

*Imagine your life as a river. The source of your river is the day you were born, and your river continues to flow until the last day of your life.*

*Please draw a river, in any way you wish, that represents your life. You can make your river straight or winding, horizontal or vertical, as you prefer.*

*In and along your river, please draw life experiences or influences that helped to bring you to this workshop, and the issue of abortion. These could include people, events, laws or messages. You can put symbols or words in your river to highlight experiences that you feel are important to you.*

*Each person’s river will look different. There is no wrong way to draw your river; everything you draw in or along your river belongs there.*

5. While these instructions should be sufficient to help most participants understand the task, some participants may feel uncomfortable with the open-ended nature of the activity. Allow this discomfort unless participants are unable to carry out the task without more guidance. If this situation arises, give one more example, for instance: You can draw books to show things you have learned. Assure the group again that there are no wrong responses in this activity.

# ACTIVITY 1

## The River of Life

6. Keep time. Allow 15 minutes for drawing, unless all participants finish in less time.
7. Tell participants that drawing time is finished. Invite them to look at their rivers and silently reflect on what they have drawn.
8. Invite participants who wish to share their rivers with the group to do so. Assure participants that sharing is voluntary and that it is equally fine to share or not share. Emphasize that creating a safe space for sharing personal information includes not being judgmental of what others may say. Encourage participants to listen respectfully to each others' experiences and feelings, including those that may differ from their own.



### NOTE TO FACILITATORS

If you have a large group (more than 15), invite participants to form groups of five or six people and share within these groups. Remind small groups that sharing is voluntary. Then invite one person from each small group to share with the whole group.

9. Allow two or three minutes for each person to talk, depending on the number of participants. Be prepared for participants to share difficult or painful life experiences, happy and positive life experiences, or both. Provide supportive listening regardless of what participants say. Do not ask participants to provide more details than those they offer.
10. If any participant makes a judgmental or unsympathetic remark during another person's time of sharing, remind the group that information shared is not meant to be judged or commented on. Remind the group of the importance of building trust and providing a mutually safe space for this activity and the rest of the workshop.
11. When participants have finished talking about their drawings, summarize what has been shared. Reflect on the range of difficult or painful experiences, as well as the range of positive or happy experiences. Acknowledge the many ways in which abortion affects us, and shapes our fears, hopes, values, and decisions. Acknowledge that thinking about these personal experiences can be difficult, and thank participants for their courage in participating in this activity.

# ACTIVITY 1

## The River of Life

12. If you sense that the group wants to share more about their experience, you may wish to follow up with a few questions. Possible discussion questions include:
  - *What feelings came up as you were drawing your river?*
  - *Were you surprised by any of the life experiences that you thought of and drew in your river during this activity?*
  - *Did you learn anything new about yourself and your thoughts on abortion?*
  
13. If you use the follow-up questions, conclude the additional discussion by thanking participants for sharing additional thoughts, and reminding participants that people come to events like this with different perspectives and motives, all of which deserve to be respected, even if they don't match our own or may be difficult for us to understand.
  
14. To close the activity, you may want to provide some concluding remarks:
  - *Abortion can be a very personal issue. Many experiences shape the way we feel about abortion. Until we are aware of and respect our own feelings and experiences, we cannot fully respect the feelings and experiences of other people. So it is important that we first approach abortion from a personal perspective. This lays the foundation for looking at abortion from broader perspectives later on.*

Activity adapted from: Innovation Center for Community and Youth Development and Kellogg Leadership for Community Change. 2008. *Collective leadership works: Preparing youth and adults for community change*. Takoma Park, MD: The Innovation Center.

# ACTIVITY 2A

## Abortion and Me

This activity allows participants to visually explore and show themselves, and other participants, how they relate to, or have been affected by abortion. It encourages honesty through self-reflection, and discourages participants from mimicking others. This is a useful activity to conduct in the beginning or middle of an event.



### Objectives

By the end of this activity, participants will be able to:

- Discover where and how their thoughts, feelings and experiences that are related to abortion connect with their bodies.



### Materials

- Flip chart paper sheets, enough to tape two large sheets together for each participant
- Tape
- Putty or pins for hanging drawings on the walls
- Several markers of different colors



### Timeline

- 10 minutes to introduce activity
- 20 minutes for drawing
- 20 minutes for participants to share
- 10 minutes to close activity

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**60 minutes total**



### Advance preparation

- Tape together two sheets of flip chart paper for each participant.
- If flip chart paper is not available, use regular sheets of paper and modify the activity as explained below.



### NOTE TO FACILITATORS

It is important to ensure that you have established group norms about confidentiality before you conduct this activity.



### Instructions

1. Tell participants:

*Often, conversations about abortion are about whether people approve or disapprove of abortion, and on differences in our beliefs about values or rights. Yet few people thoughtfully examine their personal feelings and experiences with abortion. In this activity, we are going to focus on how abortion affects each of us personally. This may include what we think and feel, as well as what we have experienced.*

2. If you are working with an exclusively young audience, ask any adult observers, including teachers if you are in a classroom, to leave the room for the duration of this activity. Similarly, for adult or mixed audiences, ask any observer (non-participant) to leave the room for the duration of this activity. This will ensure privacy while participants are drawing and some degree of anonymity when drawings are later posted on the wall.
3. Ask participants to work in pairs to trace each other's bodies on paper. One participant lies down on the large sheet of paper while the other traces the outline of this person on the paper, being careful not to bring markers into contact with clothing. Then the person who has been traced does the same for his/her partner on the partner's large sheet of paper.

#### NOTE TO FACILITATORS

Depending on the age of participants and cultural context that you are in, you may want to consider same-sex pairs only. If there is an uneven number of boys or girls, you can create one small group of three.



#### NOTE TO FACILITATORS

If large paper is not available, hand out smaller sheets of paper and ask participants to quickly draw their outlines or a simple self portrait on their papers.



4. Once everyone has been traced and is standing by their own body drawing, ask participants to take two minutes to personalize their drawings and make each drawing unique and representative of the individual. Participants may draw their hair or eye color, earrings, favorite shoes, a hat or scarf, or other identifying details.

## ACTIVITY 2A

### Abortion and Me

5. Tell participants:

*Your drawing represents you. Whether you have or have not had an abortion, and whether you do or do not know someone who has had an abortion, chances are that you have been affected in some way by the issue of abortion. Perhaps that is what brought you to this event?*

*Please take a few moments to quietly consider your own thoughts, feelings and experiences that relate to abortion. Then draw on the figure you have created where and how abortion affects you.*

*Please work silently while you draw.*



#### NOTE TO FACILITATORS

It may help to write the question “Where and how does abortion affect you?” on a paper and post it in the room where all participants can clearly see it. This allows for easier visual reflection.

6. Invite the group to draw whatever this activity prompts them to draw. Allow participants to sit with any uncertainty until they are able and ready to begin.

7. Participants may feel confused by the instructions. They may ask you to explain more clearly what you mean, or may offer various interpretations of what they think you mean. If they ask questions or for clarification, reassure them that there is no wrong interpretation of the activity. Whatever comes to mind is right for them to draw on their picture.



#### NOTE TO FACILITATORS

You may find that participants draw symbols that represent heartache or power, speaking out or inability to speak, or conflicting messages from people in their lives. However, it is important that you do not offer any of these examples to the participants.

8. After 15–20 minutes, tell the group that drawing time is finished. Invite participants to share what they drew and why, if they wish to do so. Respect the wishes of those who prefer not to share. Remind participants about the group norm of confidentiality established at the beginning of the event.

## ACTIVITY 2A

### Abortion and Me

9. Allow two or three minutes for each person to talk, depending on the number of participants. If any judgmental comments are made, remind participants that there is no judgment in this activity, only an opportunity to learn from one another.

#### NOTE TO FACILITATORS

If you have a large group – more than 15 – invite participants to form groups of five or six people and share within these groups. Then invite one person from each small group to share with the whole group.



10. When participants have finished sharing their drawings, acknowledge the creativity of the group and the many ways in which they responded to the question, “Where and how does abortion affect you?” Ask them to tape their drawings on the wall to serve as “workshop wallpaper.”
11. If you sense that the group wants to share more about their experience, you may wish to follow up with a few questions. Possible discussion questions include:
  - *How did you feel as you were drawing?*
  - *Were you surprised by any of the life experiences or feelings that you thought of and drew?*
  - *Did you learn anything new about yourself and why the issue of abortion is important to you?*
  - *How do you think your feelings and experiences translate into values and opinions that you hold?*
12. Thank participants for sharing more about their experience with the activity, and inform them that they will have an opportunity to revisit their drawings at the end of the workshop.
13. At the end of the workshop, ask participants if they want to modify their drawings in any way. If they do, make sure you have markers available. Additions or changes to the drawings provide an opportunity for both participants and facilitators to assess whether and how they have changed as a result of the workshop. Make sure there is space in your agenda for this.

# ACTIVITY 2B

## Abortion and Me

This version of the Abortion and Me activity is designed for use with women who have directly experienced abortion. This activity should be facilitated by someone with postabortion counseling skills and ideally, if working with young women, with experience in counseling young people. It is important that the facilitator be able to provide appropriate support and comfort to young women as they explore their postabortion thoughts and feelings.

### Objectives

By the end of this activity, participants will be able to:

- Discover where and how their (mental) thoughts and (emotional) feelings related to their personal abortion experiences connect with their (physical) bodies.



### Materials

- Flip chart paper sheets, enough to tape two sheets together for each participant
- Tape
- Putty or pins for hanging drawings on the walls
- Several markers of different colors
- Kleenex or other paper tissues



### Timeline

- 10 minutes to introduce activity
- 20 minutes for drawing
- 20 minutes for participants to share
- 10 minutes to close activity

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**60 minutes total**



### Advance preparation

- Tape together two sheets of flip chart paper for each participant.
- If flip chart paper is not available, use regular sheets of paper and modify as explained below.





### Instructions

1. Tell participants that often women who have personally experienced abortions are not given opportunities to reflect on the thoughts and feelings they carry with them after the abortion experience. This may happen because the abortion must be kept a secret, because other people consider it a shameful topic, or because women are encouraged to put an abortion event behind them and move on with their lives. Say:

*In this activity, we are going to focus on how your thoughts and feelings about your abortion experience affect you and how they connect with your body.*

#### NOTE TO FACILITATORS

If you are working with very young women, you may wish to use the term “girls” rather than “women.” For example: “...often, girls who have personally experienced abortion are not given opportunities to reflect on the thoughts and feelings they carry with them after the abortion experience.”



2. If you are working with an exclusively young audience, ask any adult observers, including teachers if you are in a classroom, to leave the room for the duration of this activity. Similarly, for adult or mixed audiences, ask any observer (non-participant) to leave the room for the duration of this activity. This will ensure privacy while participants are making and sharing their drawings.
3. Ask participants to work in pairs to trace each other’s bodies on paper. One participant lies down on the large sheet of paper while the other traces the outline of this person on the paper, being careful not to bring markers into contact with clothing. Then the person who has been traced does the same for her partner on the partner’s large sheet of paper.

#### NOTE TO FACILITATORS

If large paper is not available, hand out smaller sheets of paper and ask participants to quickly draw their outlines or a simple self portrait on their papers.



4. Once everyone has been traced and is standing by their body drawing, ask participants to take two minutes to personalize their drawings and make each drawing unique and representative of the individual. Participants may draw their hair or eye color, earrings, favorite shoes, a hat or scarf, or other identifying details.

## ACTIVITY 2B

### Abortion and Me

5. Walk participants slowly through the following instructions, allowing them time to fully reflect on each statement before you read the next statement. Say:

*Please close your eyes while I read the instructions for this activity.*

*I want you to imagine that your drawing is you, that this drawing of your body is your body.*

*Please take a few minutes to think about where you were when your abortion happened.*

*How did you feel before the abortion began?*

*Who was with you during the abortion?*

*How did they treat you?*

*Think about how you felt while the abortion was happening.*

*How did you feel after the abortion was finished?*

*Now I want you to bring your memories and thoughts and feelings to your body.*

*Take a few moments to think about this question: "Where and how do my memories, thoughts and feelings about my abortion show up in my body?"*

*Repeat the question.*

*Now open your eyes and, in whatever way you wish, draw your answers to this question on your body.*

*Please work silently while you draw.*



#### NOTE TO FACILITATORS

It may help to write the question "Where and how do my memories, thoughts and feelings about my abortion show up in my body?" on a paper and post it in the room where all participants can clearly see it. This allows for easier visual reflection.

6. Invite the group to draw whatever this question prompts them to draw. Do not offer any examples. Allow them to sit with any uncertainty until they are able and ready to begin.



#### NOTE TO FACILITATORS

Because this is an intensely personal exercise, participants may need additional time to reflect on their thoughts and feelings, or to draw them. Make sure participants have enough space between each other to feel privacy.

## ACTIVITY 2B

### Abortion and Me

7. After 15 minutes, tell the group that drawing time is finished. Invite participants to share what they drew and why, if they wish to do so. Respect the wishes of those who prefer not to share. Remind participants about the group norm of confidentiality established at the beginning of the workshop.
8. Be prepared to offer emotional comfort or support as participants share what they have drawn. Have Kleenex or other paper tissues on hand for participants who may cry during this sharing time. Remind participants that each person's experience may be different, and of the importance of accepting and respecting each person's experience.
9. When participants have finished sharing their drawings, acknowledge the group's courage to confront a topic that can elicit many strong feelings and memories.
10. If you sense that the group wants to share more about their experience, you may wish to follow up with a few questions. Possible discussion questions include:
  - *How did you feel as you were drawing?*
  - *Were you surprised by any of the feelings or things that you thought of and drew?*
  - *How do you feel now?*
  - *How do you think your experiences and feelings affect how you think about abortion today?*
11. Thank participants for sharing more about their experience with the activity, and ask them if it is okay to move to the next activity.

# ACTIVITY 3

## Women We Esteem

This activity is designed to help participants understand and identify ways in which they may have internalized abortion stigma.

### Objectives

By the end of this activity, participants will be able to:

- Recognize how an abortion decision can change the way in which they view other women, even those whom they hold in high esteem;
- Differentiate to some extent internalized stigma that relates to sexuality or sexual activity as opposed to stigma that is specifically related to the choice to have an abortion.

### Materials

- Two flip charts or two flip chart papers
- Markers
- Personal journals, one per participant, and pens or pencils
- Sticky post-it notes, or index cards, two per participant

### Timeline

- 15 minutes for visualization activity
- 10 minutes for private journaling
- 15 minutes for sharing comments from journals
- 20 minutes large group discussion

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**60 minutes total**

### Advance preparation

- Read the box on abortion stigma at the end of this activity, and refer to the recommended references for more information.
- If possible, go through this activity as if you were a participant before you facilitate it.



### Instructions

1. Tell participants that this is an activity in which they will be given an opportunity to explore feelings and values that they hold related to abortion. Do not give participants more information when you introduce the activity.

2. Ask participants to close their eyes. Say:

*I want you think of a woman in your life for whom you feel great admiration, love or respect. Think of someone you hold in very high esteem, perhaps someone who is a wonderful role model for you and whom you want to be like.*

3. Wait several seconds, then say:

*I want you to bring the image of the woman you have chosen into your mind. Imagine her standing in front of you. How does she look? What is she wearing today? Is she smiling? Working? Gesturing?*

4. Give participants several seconds to form a complete mental image of the person they are thinking of, and then ask:

*What is it about her that is so admirable? What are the specific qualities and characteristics that cause you to feel such love or admiration for this woman?*

5. Ask participants to open their eyes, and to call out these qualities and characteristics while you write them on a flipchart. Allow participants to call out many qualities; this reinforces their strong positive feelings for the women they have chosen and helps them feel that the women they love and admire are represented on the list.

6. When the list is complete, ask participants to close their eyes again. Ask them to imagine the woman they admire once more.

7. Say:

*Now I'd like for you think about the feelings that you have for this woman.*

(Pause for several seconds while they do this.) Invite participants to name some of their feelings out loud while keeping their eyes closed.

8. Then tell participants:

*Now I want you to imagine this woman has just told you that she had an abortion when she was 15 weeks pregnant.*

(Pause for several seconds while they absorb this information.)

# ACTIVITY 3

## Women We Esteem

9. Ask participants to consider the next questions silently:

*What thoughts and feelings are going through your mind?*

*What are your feelings about this woman now that you know this about her?*

*Do you see her any differently now?*

*How would you describe her now?*

(Pause long enough to allow participants to reflect seriously on the questions.)

10. Ask participants to open their eyes and spend 10 minutes writing in personal journals whether their feelings about this woman were the same or different after they learned that she had an abortion at 15 weeks, and how they would describe her based on this new information.
11. After 10 minutes, distribute sticky notes or index cards. Ask participants to write two of their descriptions or comments on the notes or cards, and not to include their names (keeping comments confidential will encourage participants to be honest).
12. Collect comments and ask someone to read them out loud while you write them on another flipchart.
13. Have participants consider and compare the first and second flipcharts. Ask them to point out differences they see.
14. Facilitate a large group discussion. Possible questions include:
- *Did your feelings about this esteemed woman change when you learned she had an abortion at 15 weeks? If so, how?*
  - *What are the reasons for any changes in your feelings about her?*
  - *Did your feelings change when you learned that the woman you admire is sexually active?*
  - *If this is true for you, do you think your feelings changed more because she is sexually active, or because she had an abortion?*
  - *What does this tell us about how we see abortion? Second trimester abortion? Women who have abortions?*
  - *Are you surprised by anything you thought or felt during this activity?*
  - *Are you surprised by anything that you learned about yourself in this activity?*

15. Introduce the concept of abortion stigma. Explain that because abortion can be such a highly charged and emotional issue, with direct relationship to moral and religious values and views about the sanctity of life, even individuals who work on behalf of women's rights to have safe, legal abortions may internalize abortion stigma in different ways, sometimes without realizing it. You may wish to ask some additional questions:

- *What is the relationship between our individual emotions and beliefs, and abortion stigma?*
- *How could abortion stigma affect women who may consider terminating a pregnancy?*
- *How could abortion stigma affect women who are terminating a pregnancy?*
- *How could abortion stigma affect women who have terminated a pregnancy?*

16. Acknowledge and thank participants for their honest self reflections.

### Abortion Stigma

Stigma can be conceptualized as an "attribute that is deeply discrediting" and which negatively changes the identity of an individual to a "tainted, discounted one" (Goffman 1963). People are stigmatized against for many different reasons, including gender, sexuality and HIV status. Women who have had, or are thought to have had, an abortion, are also often stigmatized against. People might face multiple layers of stigma. For example, for young unmarried women, stigma may be especially paralyzing as they "face the dual challenge of avoiding both the discrediting stigmas of birth out of wedlock and abortion" (Kumar et al. 2009).

Stigma may be present in institutional policies, architecture, or norms and beliefs held by communities and individuals. For example, organizations "that physically separate abortion services from other medical care in health facilities create missed opportunities for meeting women's other health needs. Where abortion is segregated, women are less likely to receive post-abortion contraception, HIV counseling, STI treatment, cervical cancer screening or other services they may need" (Kumar et al. 2009). Further, the lack of systematic training of abortion providers in medical schools is an example of how institutional policies can sustain abortion stigma.

Sometimes stigma results in myths and misconceptions about the stigmatized issue, and myths and misconceptions can in turn

reinforce stigma. "Widespread practices of under-reporting and intentionally misclassifying abortion procedures by women and providers alike results in misconceptions about prevalence" and can contribute to the production of abortion stigma (Kumar et al. 2009). Stigma surrounding abortion also often results in unsafe practices shrouded in secrecy and shame. Stigma and its manifestations present key barriers to women's access to safe abortion and postabortion care. For example, the stigmatization of young people's sexuality and sexual behavior has profound effects on their access to, and use of, health resources (Kumar et al. 2009).

Identifying social norms that stigmatize abortion and postabortion care and reducing abortion-related stigma are essential to ensuring that all women are able to exercise their reproductive health rights. Stigma must be addressed at various levels with gatekeepers and opinion leaders, community groups, abortion care providers and individual women and men to find ways to mitigate its impact, create awareness and understanding of the harm it causes and block its perpetuation.

#### More Information and References

Goffman, E. 1963. *Stigma: Notes on the management of spoiled identity*. Upper Saddle River, NJ: Prentice Hall.

Kumar, Anuradha, Leila Hessini and Ellen M. H. Mitchell. 2009. *Conceptualising abortion stigma*. *Culture, Health and Sexuality*, 11(6), 625.

Activity inspired by: Billings, Debbie, Leila Hessini and Kathryn Andersen Clark. 2009. *Focus group guide for exploring abortion stigma*. Chapel Hill, NC: [http://www.ipas.org/Publications/Focus\\_group\\_guide\\_for\\_exploring\\_abortion-related\\_stigma.aspx](http://www.ipas.org/Publications/Focus_group_guide_for_exploring_abortion-related_stigma.aspx)

# ACTIVITY 4

## Privilege Walk

This activity encourages participants to think about social structures that influence their opportunities and limitations in life, including abortion related experiences. This version of the activity is designed to be used with young participants. You can use this activity to help youth participants better understand who is privileged based on social and cultural advantages, and who is made vulnerable by disadvantages. You can also use the activity to help adults who work with young people better understand the spectrum of youth populations and the differences in their life circumstances.

### Objectives

By the end of this activity, participants will be able to:

- Understand how a variety of social, cultural and gender values both limit and enhance our life opportunities and outcomes;
- Reflect on how it feels to stand in the shoes of someone whose life circumstances are very different from their own;
- Recognize that young people are not a homogenous population/group.



### Materials

- Small notepads or journals and pens for participants
- A basket, box or hat in which to place folded slips of paper – you need as many folded slips with identities as you have participants (they can all be different or some can be duplicates).
- 20 slips of paper, each containing an role description (see Advance preparation)



### Timeline

- 5 minutes to introduce activity
- 30 minutes to carry out the activity
- 10 minutes personal journaling

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**45 minutes total**



### Advance preparation

- If possible, go through this activity as if you were a participant before you facilitate it.
- Cut the role descriptions provided at the end of this exercise into individual slips of paper and place them in a basket, box or hat.
- Prepare a sign with three questions, to be posted on the wall later in the activity:

*How did you feel in the role of the person you were portraying in this activity?*

*Where would you have been standing if you had been representing yourself in this activity rather than someone else?*

*What did you learn from this activity about working with different groups of young people?*



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#### Instructions

1. Ask participants to stand shoulder to shoulder in a straight line. Position the line in the room so that participants will be able to step forward as well as backward. If the room is too small, ask participants to form a circle instead. Once the circle is formed, have them step back until they will be able to move forward as well as backward when the activity begins.

#### NOTE TO FACILITATORS

Work with a straight line or a circle, depending on the space you are in. Having participants work in a circle adds visual impact at the end of the activity, when participants see that most privileged people are closer to one another and tend to have more access to one another, more communication and networking opportunities, than less privileged people. Working in a straight line gives participants a stronger visual sense of how far ahead, or behind, they are compared with other individuals.



2. Walk with the basket full of role description slips along the participant line or circle, and allow each participant to take out one slip of paper. Ask participants to look at their own slip of paper, but not at anyone else's. Ask them not to tell anyone else what is written on their slip of paper.

#### NOTE TO FACILITATORS

You can modify the role descriptions to better suit your participants and/or event. Make sure the revised role descriptions still have characteristics that allow everyone to move forward or backward. There are 20 role descriptions for this activity. If you have more than 20 participants, you can make two copies of all the role descriptions, or you can add more role descriptions.



3. Tell participants that for this activity they will become the person who is described on the slip of paper they hold. Ask participants to read their own slip again, and then ask them:

*In your new identity that you now hold, how do you look?*

*What are you wearing?*

*What does it look like where you are right now?*

*What are you doing?*

(Give participants several seconds to envision and embody their new identity.)

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4. Tell participants that you are going to read a series of instructions which they should follow according to the new identity on their slips. Say:

*We are supposedly born equal, with the same opportunities to create satisfying lives for ourselves and our families. This activity helps us look at the realities of privilege, and of the advantages and disadvantages that affect our ability to have happy and successful lives.*

*Please follow these instructions, based on your new identity.*

5. Read the following statements one at a time, giving all participants sufficient time to follow your instructions.

- *If you are a man, take one step forward.*
- *If you are a woman, take one step backward.*
- *If you are illiterate and don't know how to read, take one step backward.*
- *If you have a high school education or attend high school, take one step forward.*
- *If you live in a rural area, take one step backward.*
- *If you have a university education or attend university, take one step forward.*
- *If you were born into a poor family, take one step backward.*
- *If you have experienced sexual abuse or gender-based violence, take one step backward.*
- *If you were born into a middle class family or have parents who are professionals, take one step forward.*
- *If you have a disability, take one step backward.*
- *If you know your HIV status, take one step forward.*
- *If you have been displaced from or forced to leave your home, take one step backward.*
- *If you are forced to exchange sex for money or other things, take one step backward.*
- *If you have a secret that you don't want to tell anyone, take one step backward.*
- *If you are HIV positive, take one step backward.*
- *If you are a peer educator, take one step forward.*
- *If you are discriminated against based on your sexuality and sexual orientation, take one step backward.*



#### NOTE TO FACILITATORS

The following statements are more complex in terms of social values. You can choose whether to include them. If you include these statements, allow the participants to decide whether they should move forward or backward.

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- *If you have paid employment, decide whether to take one step forward or backward.*
  - *If you have more than one child to care for, decide whether to take one step forward or backward.*
  - *If you are married, decide whether to take one step forward or backward.*
  - *If you have had an abortion, decide whether to take one step forward or backward.*
  - *If there is anything on your paper not yet mentioned that makes you feel good about yourself, take one step forward.*
  - *If there is anything on your paper not yet mentioned that makes you feel bad about yourself, take one step backward.*
6. After all statements have been read, invite participants to look around the room and notice where they are standing in relation to others. Ask participants what they see.
7. Ask the following discussion questions and invite responses:
- You all started in the same place. How does it feel to be standing where you are?*
- How do you feel about where you are standing, in relation to others?*
- How do you feel about where others are standing, in relation to you?*
- Participants who answer should reveal their identity to the others.
8. For participants who have not already shared their identities, ask them to do so now. When everyone has shared their identities, ask:
- Who are the people who had the most opportunities to move forward?*
- Is there anyone who only had opportunities to move backward?*
9. Ask participants to raise their hands if they moved in response to the last six instructions, which allowed participants to choose whether to move forward or backward. Ask them to describe whether they moved forward or backward in response to the questions, and why. Point out that in different circumstances the same factors can be experienced as an advantage or disadvantage.
10. While participants remain in their locations, point out that although they all started in the same place on the line or in the circle, and although we may be taught to believe that all people are created equal, in reality many factors influence the opportunities, successes, problems, and outcomes we experience in our lives. Because of social structures, including class and gender structures, some of us enjoy privileges that others don't enjoy. Point out how easy it can be at times to 'blame the victim' for an unhappy life situation, when in fact many other factors may be influencing that person's situation.

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11. Explain that this activity can help to remind us that youth are not a homogenous group. Life experiences and opportunities or disadvantages create huge differences among various youth populations in terms of needs and desires, and interventions that are relevant to their circumstances. Remind participants that when we work or advocate for young people, we have to keep their differences in mind to make sure that we address the needs and opportunities of specific youth populations.
12. Invite participants to sit down in the same place where they have been standing, or to move quickly to chairs if this is more comfortable. Distribute notepads or journals and pens. Post the paper with three questions you have prepared on the wall and ask participants to write their answers to these questions in their journals. Invite participants to take 10 minutes to write privately their feelings about this experience.
  - *How did you feel in the role of the person you were portraying in this activity?*
  - *Where would you have been standing if you had been representing yourself in this activity rather than someone else?*
  - *What did you learn from this activity about working with different groups of young people?*



#### NOTE TO FACILITATORS

You can spend more time on this activity if you wish, by extending the writing time period, and adding questions for participants to answer as they write. Or you can use this awareness activity as an introduction to lengthier conversations or activities about social barriers, gender differences and gender based discrimination, or the factors that create privilege and those that create stigma and discrimination.

Activity adapted from: Ipas. 2008. *Advo.kit*. Chapel Hill, NC: Ipas.  
Available at <http://www.ipas.org/Publications/Advokit.aspx>

Cut all the role descriptions into individual slips.

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You are a young woman aged 13.  
You come from a poor family in a rural area.  
You were married to an older man at age 11.  
He will not let you continue going to school.

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You are a young man aged 18. You have just learned  
that your 16-year-old girlfriend is pregnant.  
Neither of you feels ready to become parents.  
You haven't told your parents or her parents.

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You are a 17-year-old unmarried woman.  
You attend high school and were doing very well academically,  
but then your classmates found out that you have a same sex partner  
from another school. Some young men from your school raped you to  
"teach you to be with men," and your other classmates are calling you names.

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You are a 20-year-old man who is illiterate and HIV-positive.  
You have kept your HIV status secret since you don't  
know how to tell anyone about it. You are not even  
sure how to tell your fiancée, whom you really love.

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## Privilege Walk Role Descriptions

Cut all the role descriptions into individual slips.

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You are a 19-year-old woman who finished high school with honors. Your parents have just chosen a husband for you and said that you may not attend university.

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You are a 17-year-old man with a mental disability and no education. Your parents cannot afford the care you need and are considering placing you in a government institution where you will be sterilized.

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You are a 22-year-old wife and mother of three young children. Your husband died recently, and you think he might have been HIV-positive. You are too scared to get tested to find out your own HIV status. You think you will have to exchange sex for money soon to feed your children since you have no other source of income.

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You are a 21-year-old married man, from a middle class family. You and your wife want to have two children, but first you both want to complete your graduate degrees.

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Cut all the role descriptions into individual slips.

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You are a 12-year-old girl born to poor parents who sent you to the home of a middle-class married couple to be a domestic servant. The husband of this family has been coming to your room and sexually abusing you.

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You are a 20-year-old man, and a bright law student. You work part-time in a law office downtown. The salary you earn helps with your college tuition.

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You are the 18-year-old daughter of a physician. You know that on occasion your father has quietly performed abortions. You admire your father and plan to attend medical school after finishing high school.

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You are a 19-year-old urban male student who has visited sex workers with friends. You've just had an HIV test and you tested positive.

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## Privilege Walk Role Descriptions

Cut all the role descriptions into individual slips.

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You are a 20-year-old female university student in the capitol city. You are a peer educator in a group that raises awareness about HIV/AIDS and sexual violence.

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You are an adolescent male peer educator who believes that women should be respected and be able to make sexual and reproductive health choices.

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You are a young woman from an urban area who is in wheelchair because of a physical disability. You are struggling financially, and are trying to get your high school diploma.

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You are a 19-year-old gay man; you have been in a loving relationship with your boyfriend for three years, but have told no one else about this relationship. It is becoming harder to keep your secret from your family.

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Cut all the role descriptions into individual slips.

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You are a 16-year-old woman in a rural town whose boyfriend forced you to have sex; as a result you got pregnant. Your mother took you for a clandestine abortion. You bled heavily, but survived.

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You are a 20-year-old woman, living in an urban slum area. You love your husband, but you have not been able to conceive. Your husband has started calling you a bad wife, and has threatened to leave you or take a second wife.

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You are a young woman who was forced to flee her village because of a civil war. You work in a factory in the capital. Your days are long, and you make very little money. You want to learn how to read and write, and go to school.

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You are a 15-year-old young man who forced a young woman in your rural town to have sex with you. Feeling too ashamed to stay in town, you fled to a beach community, where you live by selling sex to male tourists.

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# ACTIVITY 5

## Positive Improvisation

This activity is inspired by improvisation techniques commonly used in sexual and reproductive health and rights trainings and community outreach. By enacting a scenario, first with negative outcomes and then with positive outcomes, participants will explore different abortion experiences as if they were their own. This activity will also show participants how changes to individual behaviors can lead to more positive outcomes for other people.

### Objectives

By the end of this activity, participants will be able to:

- Identify different experiences that women have with abortion;
- Recognize the influence one person's actions can have on someone's abortion experience.

### Materials

- Three microphones that participants can move around (if the venue demands this).

### Timeline

- 5 minutes to introduce activity
- 30 minutes to carry out the activity (three scenarios)
- 15 minutes discussion

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**50 minutes total**

### Advance preparation

- Review the scenarios carefully, and select three to use in this activity. You can include fewer or more scenarios depending on how much time you have available.

### Instructions

1. Tell participants that this activity will give them the opportunity to explore different experiences that women have with abortion through drama. Each experience will be enacted with both negative and positive outcomes.
2. Read one scenario and the roles needed for the scenario. Invite three participants to enact the scenario with a negative outcome.



#### **NOTE TO FACILITATORS**

If participants are confused about how to enact the scenario, you can share a scenario that you will not use, and read the example of a negative outcome. You may find that participants draw inspiration from real events in their lives too. If this happens, instruct participants not to use real names or identifying characteristics. Participants may enact the scenario differently from the examples.

## ACTIVITY 5

### Positive Improvisation

3. Tell the same participants that they are going to re-enact the same scenario again. Instruct them to change only their own individual actions to ensure a positive outcome this time. Invite audience members to say "Stop" and change places with any of the participants in the scenario if they think they can contribute to a more positive outcome.

Depending on how positive the outcome is, you can ask participants to re-enact the same scenario again, trying to get an even more positive outcome. Encourage participants to think of outcomes where the woman herself is empowered, not only those people supporting her.

4. Once the first scenario is re-enacted with both a negative and a positive outcome, ask participants who enacted the scenario how it felt to play the different roles:

*How did it feel to play the woman who wants or needs an abortion but cannot get support?*

*How did it feel to contribute to a negative outcome?*

*How did it feel to play the woman who wants or needs an abortion and does get support?*

*How did it feel to contribute to a positive outcome?*

*If you felt anything differently between the two outcomes, why do you think that is?*

5. Repeat steps 2 – 4 for each additional scenario.

#### NOTE TO FACILITATORS

Encourage participants to keep each version of a scenario to less than five minutes. This will ensure that the audience does not grow restless and that more participants get an opportunity to participate in the enactments. Enacting three scenarios, twice each (one negative outcome, and one positive), should not take more than 30 minutes. Be prepared with additional scenarios if participants enact them quickly.



# ACTIVITY 5

## Positive Improvisation

6. After all the scenarios have been enacted with both negative and positive outcomes, ask all participants to reflect on the activity. Possible questions include:

*What did you learn from the scenarios about women's experiences with abortion?*

*What does it take to transform a negative experience into a positive one?*

*What did you learn from the scenarios, about people's individual capacity and responsibility to ensure that women have positive experiences with abortion?*

*Does anyone have any other reflections that they want to share about this activity?*

7. Conclude the exercise by telling participants that as individuals of a community, or within our profession, we can serve as gatekeepers or supporters of women who need and want safe abortion care. Social support improves women's access to safe abortion, and leads to more positive experiences for them. Strong social support can save women's lives and improves their sexual and reproductive health. Thank participants for their contributions.

Activity inspired by: The Youth Peer Education Network (Y-PEER). 2005. *Theatre-Based Techniques for Youth Peer Education: a Training Manual*. New York: United Nations Population Fund. <http://www.fhi.org/NR/rdonlyres/ephz233yvpsqhohjn67zfov5wz65q3ozwwgq3vkuvqcmkntapgzwy64jahjkor2vpgwh4rhlaa/theatrefull1enyt.pdf>

## Scenario 1

**A young woman, who became pregnant by accident with her boyfriend, wants to terminate her pregnancy with help from a friend who works in a pharmacy.**

**ROLES:** Young woman, friend who works in a pharmacy, pharmacy supervisor

**EXAMPLE OF NEGATIVE OUTCOME:** When the young woman asks her friend for help the friend is reluctant to provide any. S/he thinks abortion is wrong and does not want to jeopardize the job in the pharmacy; s/he is also not sure what drug to use. Eventually the friend agrees to ask the pharmacy supervisor. The supervisor gets very angry and threatens to tell the police or the young woman's parents if she does not leave immediately.

**EXAMPLE OF POSITIVE OUTCOME:** The young woman knows what drugs to use, and asks her friend to help her get it from the pharmacy. The friend knows about the drug too, and agrees to help the young woman. They both talk to the pharmacy supervisor who tells them both more about the drug and how to take it safely. The friend offers to stay with the young woman after she has taken the drugs to make sure she is okay.

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## Scenario 2

**A young married woman is trying to obtain safe abortion care at a local health clinic where she sometimes gets contraceptives.**

**ROLES:** Young married woman, receptionist, provider

**EXAMPLE OF A NEGATIVE OUTCOME:** When the young woman enters the clinic, the receptionist is verbally abusive towards her and does not protect her privacy. The young woman becomes increasingly uncomfortable and scared. The provider is judgmental and assumes the young woman has been unfaithful or is a bad wife since her husband is not there. The provider denies the young woman safe abortion care because of her age and because her husband is not present.

**EXAMPLE OF A POSITIVE OUTCOME:** The receptionist is respectful of the young woman, and checks her in quickly and discreetly. The young woman feels comfortable being in the clinic. The provider is not judgmental, affirms the young woman's decision to seek safe care in the clinic, and invites her to discuss her options.

## Positive Improvisation Scenarios

### Scenario 3

**A woman is telling her husband that before they met she had an abortion; while they are talking their daughter walks in the room and overhears them.**

**ROLES:** Woman, husband, daughter

**EXAMPLE OF NEGATIVE OUTCOME:** The husband gets very angry, and threatens his wife with divorce or “worse.” The woman feels unable to explain why it was the right choice for her at that time. The daughter tries to ask her parents what abortion is, but the father says never to talk about such a dirty thing. The daughter gets scared and walks away thinking that abortion must be something truly terrible.

**EXAMPLE OF POSITIVE OUTCOME:** While a little upset at first, the husband changes his mind when the woman explains why it was the right choice for her back then. The husband then asks if his wife is okay, and thanks her for trusting him with such a secret. When the daughter walks in and asks what abortion is, her parents explain together that it is a medical procedure that women, sometimes just like her mom, choose to have or must have when they are not ready to be parents yet.

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### Scenario 4

**A young woman is pregnant from abuse by her uncle, and is reaching out to her parents for support in getting an abortion and protection from her uncle.**

**ROLES:** Young woman, mother, father

**EXAMPLE OF NEGATIVE OUTCOME:** The young woman struggles to tell her parents what has happened and why she thinks she’s pregnant. While her mother seems shocked and sad, the father says that he does not believe her, and accuses her of seducing her uncle. They ask her to leave their house. The young woman pleads with them, but to no avail.

**EXAMPLE OF POSITIVE OUTCOME:** The young woman tells her parents what happened with her uncle and that she thinks she is pregnant from the abuse. She tells her parents that she is pregnant she really needs their help. The father offers his support, but is uncertain about an abortion. The young woman explains it would be very detrimental to her to be forced to be a mother. After a family discussion, both parents agree to help the young woman to a safe clinic. The father also promises to go see the uncle the very next day.

## Scenario 5

**An unmarried young woman is trying to end her unwanted pregnancy with support from her friend and a health-care provider.**

**ROLES:** Young unmarried woman, friend, provider

**EXAMPLE OF A NEGATIVE OUTCOME:** The young woman does not know what to do or what her options are. She is very scared. The friend has heard there is an abortion provider in town, but that sometimes s/he treats young women very badly. The friend offers to accompany the young woman to the clinic. At the clinic, the provider is rude. S/he does not let the friend come with the young woman into the counseling room. The provider says the abortion will be much more expensive because the young woman is unmarried. The young woman gets too scared and decides to leave without having a safe abortion.

**EXAMPLE OF A POSITIVE OUTCOME:** The young woman knows what her options are and has identified the provider she wants to go to. She asks her friend to accompany her for support and they go to the provider together. The provider asks if the young woman wants to be accompanied by her friend, and respects her decision. The young woman gets a safe abortion.

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## Scenario 6

**A young woman who has had an abortion becomes the subject of hurtful gossiping and bullying in her school. She seeks help from her teacher.**

**ROLES:** Young woman, teacher, school principal

**EXAMPLE OF NEGATIVE OUTCOME:** The young woman tells her teacher about the bullying and asks if the teacher can help it stop. The teacher asks if the young woman has in fact had an abortion. When the young woman admits to having had an abortion, the teacher explains that this school is not a place for girls like her, and drags the young woman off to the principal's office where s/he and the principal decide to expel the young woman.

**EXAMPLE OF POSITIVE OUTCOME:** The young woman tells her teacher about the bullying and asks if the teacher can help it stop. The teacher promises to help her but explains s/he needs the assistance of the principal. They go to the principal's office together. The principal at first wants to expel the young girl. But the young girl asserts her right to an education, and the teacher suggests that this is a good opportunity to increase information about gender equality and sexuality education in the school. Together they convince the principal to reprimand the students responsible for the bullying.

## Resources

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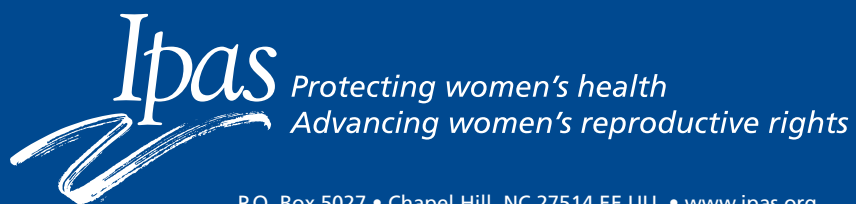
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