Exploring the use of Twitter and the #ShoutYourAbortion Hashtag in How Women Confront and Challenge Abortion Stigma

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A Thesis

Submitted to the School of Graduate Studies

In Partial Fulfillment of the Requirements for the Degree

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MSW Thesis, B. Allan

MASTER OF SOCIAL WORK

McMaster University

(2021)

Hamilton, Ontario

TITLE: Exploring the use of Twitter and the #ShoutYourAbortion Hashtag in How Women Confront and Challenge Abortion Stigma

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NUMBER OF PAGES: 52

ABSTRACT

Despite the fact that one in three women of reproductive age will have an abortion there continues to be stigma surrounding those who have had abortions. Abortion stigma continues to permeate how women are treated and services are provided. The present study explores the ways in which women use the online social networking site Twitter to engage with the #ShoutYourAbortion hashtag to resist dominant pro-life discourses of abortion and challenge abortion stigma. Through the use of a critical discourse analysis that utilizes feminist standpoint theory, four major discourses were identified as emerging out of the #ShoutYourAbortion hashtag. First, the discourse of resisting and challenging pro-life rhetoric emerged in that women utilized the hashtag to challenge dominant discourses on abortions by sharing their own experiences that contradict pro-life narratives. Second, the discourse of emphasizing the importance of choice and autonomy regarding women's reproductive rights and freedoms was highlighted, and the importance of abortion as a form of healthcare was emphasized. Next, women used discourses that aimed to critique and challenge the abortion industry as a whole. Lastly, women used the hashtag to normalize abortions in an attempt to challenge abortion stigma. This exploratory research provides insights into the utility of engaging with hashtags to resist and challenge dominant discourses, and how women are sharing their experiences in an attempt to change the narratives around abortion.

ACKNOWLEDGEMENTS

The number of people, places, and things that have helped me through this degree and made completing this thesis a reality is truly innumerable.

I'd like to begin by thanking my supervisor Allyson Ion. Your support, encouragement, flexibility, enthusiasm, and feedback have all meant the world to me. You have helped me through this entire process and provided me with the space to make this thesis a reality. Thank you for always being accessible and accommodating. Although we have yet to meet in person due to obtaining my degree during a global pandemic, I am confident that our paths will cross again. Your guidance has enabled me to become a more confident academic, researcher, and practitioner. Thank you for never giving up on me and my ability to complete this thesis. I would also like to thank my second reader, Saara Greene for the time she took out of her very busy schedule to take on this role for me. My basis for pursuing a thesis grounded in feminist research and my personal learning in feminism has been strongly shaped, encouraged, and nurtured by your teachings. Also, a special thank you to Dr. Ann Fudge Schormans; you have always believed in me and nurtured my critical analysis and dedication to disability studies. I wouldn't have been able to do my MSW without you.

To the entire School of Social Work at McMaster University, thank you. Having completed both my undergraduate and graduate degrees through this program has been an absolute privilege and pleasure. I have met so many wonderful people throughout my past four years here who have shaped my university experience. From professors who have become mentors, to the most accommodating administrative staff, to peers who have become life-long friends – thank you all.

I would also like to thank my fiancé (and soon to be husband), Braden. We have been together since I began my university career and you have supported me through all the highs and lows. Thank you for being my support system and my biggest cheerleader. I truly would not have been able to finish this thesis without you. Through my rambling about theory and methodology, you have always listened and provided (when you could) feedback. Thank you for always editing my papers for coherency, and just for being my person. You have always pushed me to follow my dreams and there's nobody else I'd rather do life with! Also, shout out to our furbabies Coco, Grayson, and Sherlock – you were great distractions.

I'd also like to extend a thank you to all my peers in the Critical Analysis and Critical Leadership programs this year. Your insights have been invaluable to the program and in shaping my understandings and assisting in the grounding of often abstract concepts.

Thank you to Parks & Recreation for helping me get through the endless hours of this thesis and degree and inspiring me to always channel my inner Leslie Knope to accomplish this.

Lastly, I would like to thank the teaching team and students in the evening section of Social Work 2A06 for the honour of working with and learning from all of you the past year.

Specifically, I'd like to acknowledge and thank my tutorial students (Sarah, Kayla, Hannah, Abi, Zack, and Lacey). Your dedication to social work and education helped to inspire me and it was truly an honour to be your TA.

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Chapter 1: Introduction

Locating the Researcher

Growing up I was never introduced to the word or concept of 'abortion'. Even in all my sexual education classes that occurred within the public school system, this word was never directly mentioned. Although I learned about the importance of 'safe' sex and using protection to avoid unwanted pregnancies, it was never elaborated upon what the options were for women if an unwanted pregnancy did occur. My first experience of the concept of abortion was when I found myself pregnant at the age of 20. I had just moved across the country with my then boyfriend and with the help of a doctor at a local walk-in clinic I was told I was approximately 19 weeks pregnant. The doctor plainly told me my options: I could either keep the baby or I had approximately one week left until I could 'terminate the pregnancy' (under Alberta provincial law). I was scared and confused. I did not know anyone who had an abortion to whom I could turn for advice. At the time, the man who I was with encouraged me to get an abortion and I agreed, mostly because I knew I was not at all ready to have a child (financially, physically, or emotionally), I was worried about risking becoming a single mother (something I also felt I was not ready for), and the relationship I was in at the time was extremely unhealthy. Using the resources the doctor had given me, I contacted the abortion clinic within one of the city's hospitals and booked my procedure. Since I was already 19 weeks along, I had to get what is called a dilation and evacuation abortion (also referred to as a 'surgical abortion'). This is a twoday procedure in which on the first day the doctor dilates the cervix to widen the pregnancy tissue, and on the second day a procedure is done to remove the pregnancy. Before the procedure I was forced to speak with a counsellor individually and confirm that I was aware of what I was consenting to, if I knew what it entailed, and that I was not being coerced into the procedure. The counsellor was kind and assured me that it was alright to feel whatever I wanted and just wanted to make sure I was making the best decision for myself. After the procedure, I was told that someone may call me in a few weeks to 'check up on me' and was given no further context.

For myself, I felt relief after having abortion. I was confident that I had made the right decision and was ready to move forward. A few weeks after the procedure I did receive a call from what I assume now was a counsellor asking me how I was feeling, if I felt I needed grief counselling or if I was experiencing any symptoms of post-traumatic stress disorder (PTSD). I declined the counselling and did not report experiencing any symptoms of PTSD. What I did feel after my abortion was alone. I did not know anyone else who had an abortion and I felt ashamed to bring it up to anyone. When I tried to broach the subject with friends or family, I felt rejected by those around me and was made to feel guilty about my choice. It was not until around four years later once I entered university when I met someone else who openly spoke about their abortion, did I decide to speak more openly in general about my experience. Once I began speaking more openly around my experience and the fact that I had an abortion was when other women would say, "I had an abortion too" or "I know someone who had an abortion and they felt alone after too". It was when these conversations started happening that I began reflecting on the fact that abortion is a much more common experience than I ever realized. And if it is common, then the feelings I had post-abortion (feeling isolated and stigmatized) were probably also common. This realization laid the groundwork for my thesis and this paper. My goal is to emphasize the importance of amplifying women's lived experiences and making spaces for women's voices to guide the public conversation of how women *actually* feel about their abortions.

Chapter 2: Review of the Literature

Abortion Stigma

Although approximately one in three women of reproductive age will undergo an abortion at some point in their lifetime, it is something that remains secretive and stigmatizing (Purcell, 2015). Despite this, the discussion of abortion as a moral and ethical issue remains popular in dominant discourses and is often debated as a moral or ethical issue that is removed from women's lived experiences, which decontextualizes and dehumanizes abortion (Cockrill & Nack, 2013; Purcell, 2015). However, women's experiences of abortions are shaped by these larger social, cultural, and political debates on the ethics and morals of abortion (Cockrill & Nack, 2013). Kosenko, Winderman and Pugh (2015) define abortion stigma as "messages that other and label something related to abortion as physically, behaviourally, socially, and/or morally deficient" (p. 7). While this is a useful definition, for the purposes of this paper Goffman's conceptualization of stigma will be focused on, which describes stigma as a label that marks a person as 'deviant' in the eyes of society, the devaluing of a person in social interactions, and as having an impact on a person's identity (Cockrill & Nack, 2013).

Norris et al., (2011) state that there are three main groups who are most likely to be affected by abortion stigma: women who have had abortions; abortion care workers; and supporters of women who have abortions. The focus for this paper here is on women who have had abortions and the stigma they face. Expanding on the previous definition of stigma, Goffman also describes three types of stigma: blemishes of character, deformations of the body, and tribal or group identity (Cockrill & Nack, 2013). Abortion stigma falls under two of these categories, as it is often characterized as a sin that stains a woman's moral character

(blemish of character), and as a failure to fulfill gendered norms of what it means to be a 'good' versus 'bad' woman in terms of sexual morality (tribal/group identity) (Cockrill & Nack, 2013). Since abortion is a concealable stigma, often selectively disclosed, it works to contribute to the negative and isolated experiences people have (Cowan, 2017). The experiences of having an abortion is isolating because it is a secret that women are forced to keep and only selectively disclose, and there is no guarantee that others will react positively when this secret is revealed.

Across all literature I reviewed emerged Goffman's concept of stigma management and women trying to engage in concealing their 'spoiled identities' (marked by the stigmas of blemishes of character and group identity stigma) was an important theme emerging in previous research. Women reported feeling forced to not disclose their abortion experiences due to worries about negative reactions from others and forced to conceal it as an act of selfpreservation (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013). In order to mitigate both real and perceived negative consequences associated with abortion stigma, women have to manage personal interactions to control information shared (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013). Most women felt that their stress around abortions was not from the procedure itself, but from the stigma that arose after the experience (Cockrill, Herold, & Kimport, 2015). Stigma shapes expectations and experiences of treatment (before, during, and after procedures) because women indicated some degree of internalization of larger societal discourses and what is appropriate or not in terms of what they 'should' be, aka mothers (Purcell, 2015).

The main issue is that people who have abortions are likely to feel alone and isolated in their experiences, possibly experiencing feelings of shame and guilt as a result of the stigma that

surrounds those who have had voluntary abortions. As outlined in the literature, people are likely to conceal their abortions to protect themselves from negative judgements, but doing so has affected some people's capacities to cope with both the abortion and the stigma surrounding it (Cockhill & Nack, 2013). This conceptualization of stigma fits nicely within Kumar, Hessini, and Mitchell's (2009) definition of abortion stigma as a "negative attribute ascribed to women who seek to terminate a pregnancy that marks them, internally or externally, as inferior to the ideals of womanhood" (as cited in Baird & Millar, 2019, p. 2). Much like Cockrill and Nack (2013) point out, the amount of distress caused by the stigma depends on how salient the stigma is at any given moment in time. At this current moment, North America (specifically Canada and the United States) is undergoing a period of contest over abortion on a scale not witnessed since the 1960s and 1970s (where the push for liberalized abortion laws began) (Baird & Millar, 2020). Situating women's current experiences within this context means that there is a potential that women are experiencing increased distress due to the stigma and feeling the need to conceal their abortions now more than ever.

There are large gaps within the literature when looking at how the stigma surrounding those who have had abortions affects their wellbeing; and here wellbeing refers to not just the experience of having an abortion itself, but of the distress that comes from having to conceal this part of their stigmatized identities. Women have indicated that they want post-abortion support that is not associated with mental health issues, but rather to receive social support from others who understand their lived experiences (LaRoche & Foster, 2017). Although there has been a growing number of more positive abortion stories being represented in popular discourse and social media (LaRoche & Foster, 2017), there remains a misunderstanding of women's lived experiences. Post-abortion care (that is often located within the medical domain of 'helping')

does not reflect these changes either (LaRoche & Foster, 2017). This becomes an issue when in Canada, much of the formal counseling services offered are for-profit, meaning women have to pay for clinical counseling services, which is not feasible for most women (LaRoche & Foster, 2017). Outside of this, most other counselling is offered through anti-choice/anti-abortion services, many of which are religiously affiliated and presented under the guise of "pregnancy crisis centers", and like medical services, tend to focus on loss, stress, and trauma associated with the procedure itself and less around stigma and isolation (LaRoche & Foster, 2017).

Gap Between Public & Private Experiences of Abortion

After reviewing the literature on abortion stigma, the key theme that appeared in all literature was that there are significant gaps in existing research regarding people's actual lived experiences or notions of post-abortion care or exploring the impacts of abortion stigma (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013; Kimport, Peerrucci, & Weitz, 2012; Purcell, 2015).

Currently, most post-abortion care is centered around helping women cope with potential psychological trauma or negative emotions, and perceived loss or grief. There have been few studies that have focused on the private narratives women use to disclose and talk about their abortion experiences and how these narratives are different than public ones. For example, through Cockrill, Herold, and Kimport's (2015) study of a 'book club' space for women to discuss experiences of abortion and dealing with stigma and disclosure, it was found that creating an intimate environment made women feel safe and able to share experiences. This finding is similar to another study that looked at how support Talklines provided women with spaces to discuss their experiences outside of the larger political landscape (Kimport, Perrucci & Weitz, 2012).

The issue of looking at how larger contexts (not just inter-personal, micro-level relationships) affect an individual's decision to both access abortion experiences and disclose their experiences was also something researchers have explored. Women feel comfortable talking about their experiences in specific contexts only because the stigma that exists, and social norms underpinned by larger societal discursive and dominant frameworks, dictate how, if, and when they can talk about their experiences (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013; Kimport, Peerrucci, & Weitz, 2012; Purcell, 2015). Cockrill and Hessini (2014) argue that women who have had abortions can internalize this stigma and contribute to the reproduction of stigma. Women contribute to the reproduction of stigma by stigmatizing others due to their own internalized stigmas. The reproduction of stigma is influenced by discriminatory systems, laws, and policies. Specifically, the authors maintain that these attitudes around abortion and how abortion is defined are produced locally and are then constructed, reproduced, and shaped by the broader context they are embedded within (Cockrill & Hessini, 2014). Regardless of the pre-existing literature, many facets of abortion stigma continue to remain uncovered, including: what exactly can be done to reduce the stigma, have interventions been implemented and evaluated, and what is the role of laws and policies in contributing to this stigma? (Cockrill & Hessini, 2014).

There is also a disconnect between women's lived experiences of abortions and what dominates in popular discourse. Although discourses on abortion are shifting, due to things like more depictions of abortion on television and the use of social media to counteract narratives, there is still considerable limits on completely changing these discourses (Baird & Millar, 2020). This is also representative of the political and legal landscape. In countries such as Canada, the United Kingdom, Australia, and New Zealand where abortion is legal and there is popular

support for liberal access to abortion, many major political parties continue to avoid positions on abortion (Baird & Millar, 2020). Much public health scholarship about abortion that has been produced within these countries can be described as pro-choice because it focuses on women's reproductive choices (Baird & Millar, 2020). However, much of this public health scholarship has often focused on reducing the number of abortions while advocating for safe, legal, and rare abortions. This scholarship can further work to stigmatize and impede access to services because the focus still remains on reducing the number of abortions rather than advocating for increased access for women (Baird & Millar, 2020). The United States continue to be more divisive than others in the Global North, where many states are attempting to repeal laws that offer access to abortion care, decrease funding to services that fund abortion, and restricting what qualifies as an 'abortion' (Baird & Millar, 2020). Minority women, including those of lower socioeconomic status or who live in rural areas, tend to face the biggest barriers in accessing abortion services due to the burdens of the need to travel and the inability to overcome geographical barriers where legality is not an issue, all due to the intersection of race and class (Baird & Millar, 2020). However, even though women fear being stigmatized due to abortions, most women have reported feeling confident in their decisions to have abortions and generally express feelings of relief and gratitude once the procedure is complete because they have had access to safe, legal abortion services that have given them power back over their own bodies (Cappellini, Kravets & Reppel, 2019; Cockrill & Nack, 2013; Kimport, Perrucci & Weitz, 2012; Herold, Kimport & Cockrill, 2015; LaRoche & Foster, 2018; LaRoche & Foster, 2017).

Social Media & Connecting with Others

The internet has provided a way for people to connect and for information to flow beyond geopolitical boundaries (Cappellini, Kravets & Reppel, 2019). The use of hashtags

has become widely popular in to communicate issues and perspectives, in that by one click a user can find breaking news or communicate with dispersed publics during crisis events. Hashtags can also be used to help raise awareness and shape public sentiment around various social issues, events, and ideas (Cappellini, Kravets & Reppel, 2019). The social media platform of Twitter has given women who have had abortions a public platform to share their experiences in an effort to de-stigmatize the topic and create connections with others with similar lived experiences to combat isolation (Kosenko, Winderman & Pugh, 2019). Specifically, the hashtag of #ShoutYourAbortion (SYA here-after) has offered a way for women to easily connect by clicking on or tweeting with the specific hashtag on social media through Twitter.

The SYA hashtag offers a way for women to share their experiences and come together, while helping to further destigmatize abortion on a larger scale. Those who experience abortion stigma signify that they need spaces to talk that are not in mainstream, public realms of society because of the negative messages and discourses that are embedded within those realms (Cockrill, Herold, & Kimport, 2015; Kimport, Perrucci & Weitz, 2012). The main problem is that people who have abortions are likely to feel alone and isolated in their experiences when they have not connected or spoken with others who have a shared experience. As outlined in the literature, people are likely to conceal their abortions to protect themselves from negative judgements, but in doing so, this concealment has affected their ability to cope with both the procedure and the stigma surrounding it (Cockrill, 2014).

The SYA hashtag was originally created by Lindy West and Amelia Bonow for women to share their experiences of having abortions in the United States and to raise awareness and destigmatize the procedure, all within the context of funding cuts to Planned Parenthood in 2015 (Kosenko, Winderman & Pugh, 2019). The hashtag quickly gained momentum, as it relied on the

original premise that "the narrative of those working to defund Planned Parenthood relies on the assumption that abortion is still something to be whispered about" (Kosenko, Widerman & Pugh, 2015, p.1) Using the word 'shout' was a direct opposition to whispering and attempted to make women's stories of abortion public rather than private (Cappellini, Kravets & Reppel, 2019). However, since the beginning, it has been a controversial hashtag and it has been posited that some anti-abortionists and pro-lifers have attempted to co-opt it to spread stigmatizing, antiabortion messages as well as shame and belittle women who have used the SYA hashtag (Kosenko, Winderman & Pugh, 2015). While Twitter has provided a platform for women to connect and share their experiences, it has also become a place where online content that contributes to abortion stigma is spread (Kosenko, Winderman & Pugh, 2015). Since its conception in 2015 (at that time there were thousands of tweets using the hashtag), engagement in the hashtag has declined. On average, the hashtag appears in less than ten tweets per day (Cappellini, Kravets & Reppel, 2019). However, the hashtag continues to offer a way for women to connect and share their stories and remains relevant within the current sociopolitical landscape of pro-life versus pro-choice rhetoric.

Chapter 3: Theoretical Framework

Feminist Standpoint Theory

Feminist standpoint theory can be thought of as the "hallmark theory" of second wave feminism which was influenced by the women's political movements of the 1960s and 1970s. Feminism itself is a broad term which focuses on addressing sexism and focuses on the advocacy of the rights of women (Dumbrill & Yee, 2019). Mainstream privileged discourses (such as positivism) were seen as ignoring and demeaning the voices and knowledge claims of marginalized folks (Brisolara, Seigart & SenGupta, 2014). Feminist standpoint theorists

emphasize the effects of power in the production and validation of knowledge, specifically from the standpoint of women because they have unique experiences and perspectives that differ from the dominant discourse, which is shaped by males within a patriarchal society (Gurung, 2020; Heckman, 1997). The aim of this theory is to understand women's lived experiences with the fundamental essence that all knowledge is socially situated and constructed because people are situated differently in the social world (Brisolara, Seigart & SenGupta, 2014; Kelley & Mann, 1997). The theory aims to provide justification for the truth claims of feminism, while also providing a method with which to analyze reality (Hekman, 1997). Standpoint theory focuses on rooting theory in reality, that is, the material, everyday conditions of those who are oppressed, which focuses on knowledge as situated and perspectival (Hekman, 1997).

There are three main claims to feminist standpoint theory: knowledge is socially situated, meaning one's identities and social location shapes their worldview; marginalized groups are aware of the interplay between their identities and existing power relations working to oppress and marginalize them in their daily lives; and that research should begin with the lives of those marginalized to better understand these power dynamics (Brisolara, Seigart & SenGupta, 2014). Since the theory is grounded in the material conditions of the everyday world as opposed to being abstract in nature, theorists who apply it will acknowledge that women occupy many different standpoints, thus inhabiting many different realities because of intersectionality (Hekman, 1997).

Standpoint theory focuses on situated knowledges, those that are "located in a particular time and place. They are therefore partial. They do not see everything from nowhere, but they do see some things from somewhere" (Hekman, 1997, p. 351). Again,

because women's identities are intersectional, the knowledges produced by different women living these different intersections create epistemologies of these marked subjectivities.

Gurung (2020) posits that standpoint theory is guided by four main theses, beginning with focusing on how research value laden, and how researchers are not neutral in the research process. The argument is that the most accurate views of the world are often through those who have been marginalized and have been traditionally left out of knowledge production because it is related to power and is a political process, and Gurung (2020) asserts that reflexivity is required to achieve this. The next thesis focuses on situated knowledge, which states that women have a distinct way of knowing that is different to men because their social location systemically influences their standpoint. The third thesis is epistemic advantage because since oppressed groups have to endure struggles and pain, they have more of a diverse knowledge (which means more epistemic authority related to this experience of oppression and struggle), and prioritizing women's perspectives can generate fewer partial accounts of their lives. Finally, the last thesis highlights the importance of relations in power in the production of knowledge and aims to learn about how power works from the standpoint of those considered less powerful – in this case, women within the patriarchy (Gurung, 2020). Gurung's (2020) four theses aim to uncover and highlight the importance of power relationships in the process of knowledge production because it is through interrogating and disrupting power arrangements that women can experience liberation for themselves and as a collective.

If the aim of this theory is to understand women's lived experiences, then it becomes important that approaches to inquiry unearth differences in standpoints (Brisolara, Seigart & SenGupta, 2014; Hekman, 1997). Researchers applying a feminist standpoint theory approach

must question categories and assumptions, gather claims to knowledge from people, understand women's experiences of oppression through their own stories and voices, and integrate action with the research (Brisolara, Seigart & SenGupta, 2014; Gurung, 2020).

Research conducted within a feminist standpoint theoretical framework focuses on the fact that since reality is socially constructed, researchers themselves are not objective or neutral (Mann & Kelley, 1997). McClish and Bacon (2002) emphasize that research is shaped by our standpoint and research should be grounded in women's experiences that act as the indicator of 'reality' in which 'hypotheses' can be tested. In terms of discourse analysis, it acknowledges that discourse is not just a reflection of one's viewpoint but is also a rhetorical product consciously created and mediated. Therefore, analyses based in standpoint theory must acknowledge that language, as a part of a system that bolsters the power of the dominant group, is not just a simple channel of communication and that it has the power to destabilize these hegemonic, dominant discourses (McClish & Bacon, 2002). Using feminist standpoint theory means that the historical and social components of texts must be attended to because the context in which texts and language are used and applied matters. There are many different factors (such as cultural assumptions about things like race, class, gender, epistemology, etc.) that influence discourses (McClish & Bacon, 2002).

Research from this theoretical framework also focuses on the effects of power on the production and validation of knowledge (Brisolara, Seigart & SenGupta, 2014). Starting from the lived experiences of women who have had abortion can help to unearth the differences that exist between dominant discourses and women's actual experiences. This allows the researcher to better understand power dynamics and how abortion is experienced and is important because standpoint theory advocates from the integration of action and research

(Brisolara, Seigart & SenGupta, 2014). That is what my thesis aims to do: contribute to the research and discourses on abortions by emphasizing women's experiences and advocating for change in how abortion is spoken about and where the gap lays between dominant discourses and what women are *actually* experiencing.

Chapter 4: Methodology & Methods

In selecting a methodology for this project, I chose to reflect on the reasons why I originally gravitated towards the topic of abortion stigma. Based on my own lived experiences mixed with my practice experience, I realized that there was a gap between what pro-choice discourses dictate women should feel post-abortion (guilty, sad, regretful, shameful) and what women actually experienced post-abortion (stigma and isolation). Specifically, I have observed this gap vis-à-vis visibility on social media and within traditional media sources, legislations, and public health. With this in mind, I naturally gravitated toward a critical discourse analysis (referred to as CDA hereafter). Since I had already identified that I wanted to engage with the #SYA hashtag on the social media platform of Twitter, using a CDA would allow me to understand which discourses are present within the text of twitter and the hashtag itself. Using the #SYA hashtag as a means of navigating dominant discourses around pro-choice versus pro-life made sense in understanding how discourses shape women's experiences of abortion stigma.

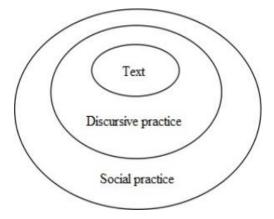
Critical Discourse Analysis

A discourse refers to "written words with overt and hidden meaning" (McGregor, 2003, p.1). Discourses also describe ways of knowing, valuing and experiencing the world (McGregor, 2003). CDA aims to make clear the connections between the use of language and the exercise of power (McGregor, 2003). The words used (or in this case tweeted) are never neutral, they are

used to convey ways of knowing, understanding, and being in the world, all of which is shaped by social, political, and historical conditions (McGregor, 2003). Words carry power because they reflect the interests of those who speak, and dominant discourses spoken by those in power are seen as "truthful", while the words spoken by others (people who are dominated and have power exerted on them) are easily dismissed (McGregor, 2003). Analyzing discourse can help to expose assumptions that are often "invisible" and underlie traditional discourse (McClish & Bacon, 2002). Analyzing women's tweets emphasizes how language is related to power, and therefore this power over language shapes women's decisions-making, attitudes, and actions. Although language is shaped by power, language also has the power to create and unearth new discourses and craft counterarguments (McClish & Bacon, 2002).

With this in mind, I chose to incorporate Fairclough's (1992) three dimensions of discourse (as shown in figure 1 below). Fairclough asserts that within discourse there exists "(i) a language text, spoken or written, (ii) discourse practice (text production and text interpretation), (iii) sociocultural practice" (p. 97). Within my CDA, I attempted to use all three dimensions of this model in working through my analytic process beginning with the written tweets, then identifying the major discourses within the tweets (such as stigma, pushing back against pro-life rhetoric, and normalizing abortion as an aspect of healthcare). Finally, I planned on locating the tweets within the larger sociocultural contexts they exist within to explain how they can be interpreted.

Figure 1



Twitter as a Social Media Platform

Twitter is a social media website on which people can share tweets that are brief messages limited to 290 characters (Gutierrez Alamazor et al., 2020; Logghe et al., 2016). The service itself was created in 2006 and debuted in 2007 in the United States of America (Britannica, 2021). Since this time, Twitter has remained a place where people can get real-time information that is disseminated into 240 characters or less (Britannica, 2021). Tweets can include links, photos, videos, of images; all of which can act as a way to convey further information (Logghe et al., 2016). Users can choose to follow whomever they want and can either set their twitter profiles as public (meaning any user's tweet can be seen by anyone) or private (meaning a user has to request to follow an account to see their tweets) (Logghe et al., 2016). Interactions on twitter occur by retweeting, quoting tweets, liking, or replying to tweets (Logghe et al., 2016). Hashtags (such as the #ShoutYourAbortion hashtag) offer a way for tweets to be readily found within a twitter search (Logghe et al., 2016).

Because twitter works as a space where people can share and interact with a myriad of information at any given time, establishing hashtags can be a way for people to create spaces that relay specific information. As with the SYA hashtag, it was originally created as a way for

women to share their abortion experiences that have often been silenced in other traditional, mainstream media (Kosenko, Winderman & Pugh, 2019).

Although twitter can be used as a space for people to share their unique thoughts, feelings, interpretations, and experiences, it can also be a highly contested space wherein hegemonic views are frequently expressed and reproduced (Yoong, 2019). As is the case with the #SYA hashtag, although it was created as a way for women to share their experiences of abortions in order to raise awareness of funding being cut to abortion services and to destigmatize the procedure itself, it has also been a site where the hashtag has been co-opted to legitimize hegemonic pro-life discourses that are contrary to women's experiences (Kosenko, Winderman & Pugh, 2019).

Implications of Theoretical Frame for Data Analysis

An important goal of feminist standpoint theory is to understand women's lived experiences. McClish and Bacon (2002) claim that an epistemology generated from the standpoint of an oppressed group (women) is more valid than the knowledge of those in dominant, elite groups within society. Using a feminist standpoint theoretical framework within a critical discourse analysis helps to make clear the link between discourses about abortion (e.g. pro-life, pro-choice) and patriarchal views that oppress women's bodily autonomy and choice. Feminist standpoint theory focuses on knowledge as being socially situated and claims that research should begin with the lives of those marginalized to better understand power dynamics that exist between marginalized identities and existing power relations that actively work to oppress them (Brisolara, Seigart & SenGupta, 2014). Critical discourse analysis (CDA) is a research methodology that can help to make clear these claims through the analysis of the

relationship between dominance and discourse (Brisolara, Seigart & SenGupta, 2014; van Dijk, 1993).

Sprague and Greer (1998) outline three points for understanding discourses on abortion: "standpoints organize experience; they vary systematically by class and gender location; and they construct communities in specific ways" (p. 50). Dominant discourses are representative of the dominant standpoint that previous research has been based within, that of economically privileged, white men (Sprague & Greer, 1998). Feminist standpoint theory is an effective theory to use when analyzing tweets regarding abortion and relating it back to discourses because it can be used to uncover other standpoints (that of women) who have been traditionally ignored. These different kinds of lived experience can help in developing different approaches of making sense of the experience of abortion (Sprague & Greer, 1998). There are a variety of standpoints that vary based on gender, class, race, ability, etc., however, they all share similar ontological frameworks that emphasize women's previously ignored experiences. Identity relating to the silencing of women voices becomes the key ontological connector across different standpoints. Since the dominant standpoint that shapes this discourse is that of an elite group (economically privileged, white men), unearthing women's experiences and their standpoints can help to disrupt the dominant discourse and provide more holistic information on the reality of women's experiences (Sprague & Greer, 1998). Discourses on abortion have been relegated to the private and domestic spheres of society, which has disadvantaged women and has allowed the dominant discourse to remain relatively unchanged (Gilbert & Sewpaul, 2014). It also means that women's decisions around abortion are cast as being done in isolation, however, they exist within their contextual, structural, and

material realities (Gilbert & Sewpaul, 2014). The #ShoutYourAbortion hashtag has created a space where people can push back against these discourses being private.

Research Objectives

The general aim of this paper was to answer the question of *What discourses are present in the tweets that women share under the hashtag #ShoutYourAbortion?* Because previous research has demonstrated that women's post-abortion experiences of stigma are not as often spoken about or acknowledged, I also wanted to answer the question of *How can post-abortion care be better suited to meet women's unique needs of stigma and isolation?* Using a critical discourse analysis framework allowed for me to gain a deeper understanding of how the #SYA hashtag is used as a way for women to communicate their experiences from their own perspectives and challenge abortion stigma.

Methods

When collecting my data I followed the requirements of the Tri-Council Policy Statement (2018), which states that research ethics board review is not required for research that uses cybermaterial that is publicly available with uncontrolled access and where there is not an expectation of privacy. Despite not requiring ethics board approval, however, there were still important ethical considerations for my project. When using tweets as a basis for my research, informed consent is an important consideration as even though they are publicly available tweets and twitter accounts, ensuring data anonymization was still important. As a way to provide protections for women who engage with the #SYA hashtag I have not included any usernames of those who have tweeted in subsequent sections of this thesis. This is also in line with my theoretical grounding in feminist standpoint theory because women who have engaged with the #SYA hashtag in terms of sharing their lived experiences are vulnerable to further stigmatization.

To ensure confidentiality and maintain user's privacy I chose to not share their usernames in the following sections of the research and this paper. After collecting my data, I placed all chosen text onto a singular word document and saved it on a password protected computer.

I chose to examine a purposive sample of tweets. I began my search using the 'advanced search' method on twitter so I could customize exactly what I was looking for. I began by typing the term "#ShoutYourAbortion" into the search bar on my Twitter search page (as seen in Image 1 below). I then made sure to specify that I was looking for tweets that were in English. This yielded all publicly available tweets from within this time period. This search yielded over 200 tweets, which was too large a dataset to work with for the scope of this research project and MSW thesis.

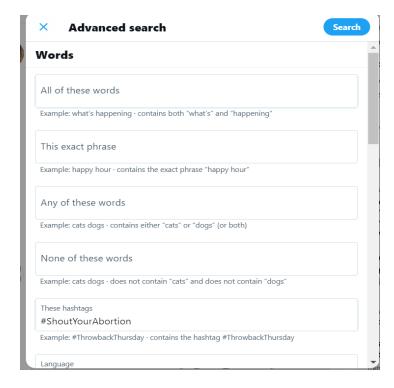


Image 1

I then augmented my process to identify and select the data to be analyzed. I chose to stick to tweets within a specific date range of January 1, 2020, until December 31, 2020 (as seen in Image 2 below). This date range was chosen because it represented an entire calendar year that was closest to the date when I collected my sample of tweets (March 1, 2021). I hoped that sticking to an entire year (2020) would help me to contextualize the discourses within the broader socio-political time period of this year.



Dates							
From							
Month January	\sim	Day 1	\sim	Year 2020	\sim		
Го							
Month December	\sim	Day 31	\sim	Year 2020	\sim		

Hoping to further narrow down my search criteria, I decided to specify that a tweet must have a minimum of 5 'likes' and 5 'retweets' (as seen in Image 3 below). I felt that this allowed me to see tweets that had the most engagement on the platform and were most likely to accurately demonstrate the most salient ways that women expressed discourses related to abortion.

Image 3

Minimum repli	25	
Example: 280 · Twee	ts with at least 280 replies	
Minimum Likes		
5		
Example: 280 · Twee	ts with at least 280 Likes	

I also chose to only include what can thought of as 'original' tweets and not include replies to tweets to maintain a manageable amount of data (as seen in Image 4 below).

Image 4

× Advanced search	Search
Filters	
Replies	
Links	-
Include Tweets with links Only show Tweets with links	

This data collection method yielded a total of 36 tweets. Of this there were 25 tweets that contained images and/or media videos, although this paper will only be focusing on texts produced. However, all 36 tweets were used in the coding process. I began by reading through all of the tweets to familiarize myself with the information and analyze the information of the tweets and what people engaging with the hashtag were trying to express through their words. Specifically, I focused on the various ways women expressed their experiences and pondered how their tweets were linked to larger discourses (such as pro-life, pro-choice, bodily autonomy, stigma, etc.). Using the three dimensions of discourse model (Fairclough, 1992) I coded the tweets (the text itself) using various words that focused on abortion stigma. I did this by going through my word document that contained all the tweets as plain text and highlighted recurring words. My codes included the following words: stigma, feel, safe, right, legal, and healthcare. After locating these codes within the tweets, I looked at the words and themes immediately surrounding the codes to see how they were organized and linked, which provided the groundwork for identifying discourses that were present.

When this was completed, I linked together particular tweets that shared contextual influences, which helped to establish discourses. For example, the word 'right' was mentioned four separate times in four separate tweets. In two of these tweets the word 'safe' was also used. Linking together the contextual influences of 'right' and 'safe' helped me to uncover a larger discourse of how access to safe abortions is related to human (and more specifically women's) rights. Going through this process of linking together particular tweets helped me to uncover the discourses present in the tweets and then link the discourses to larger social practices (Fairclough, 1992). I aimed to include all the discourses I found, and I found these discourses by focusing on the codes I had established. The themes around the codes reflected their underlying discourses, which I came to by reading and re-reading the tweets I included. During this process I also found myself googling what was happening around the world in terms of abortion policies. I did this by doing general searches that looked like "date, abortion policy". This helped me gain a deeper understanding of what was going on in larger societal and social practices that may have influenced people to engage with the #ShoutYourAbortion hashtag at any given time (Fairclough, 1992). Although in my findings analysis I chose not to focus on specific dates when I was generally searching using Google, it helped me to contextualize things such as what was said, or not mentioned, at the DNC (Democratic National Convention) that may have prompted someone to want to tweet using the #ShoutYourAbortion hashtag.

An issue that arose is that by utilizing Twitter as a social media site as a means to collect data, a site that is ultimately a business and that seeks to increase its profits, there is an algorithm which is used to maximize profit by maximizing any single user's engagement (Sehl, 2020). This algorithm ranks tweets based on recency, relevance, and engagement; all of which are done in real time through a series of calculations based on these things (Sehl, 2020). This directly

impacts how the #SYA hashtag is utilized and engaged with, as there are calculations occurring behind the scenes which play a factor in determining which hashtags gain traction and which tweets users see, including how and when certain tweets appear when searched. What this means for my research is that Twitter is complicated terrain and I was making assumptions about the salience or representation of a tweet, which may have also been influenced by artificial intelligence or other technological forces and influences that were not visible or fully understood.

I was hoping to show that through my analysis there are discourses that surround abortion that are being enacted through the #SYA hashtag that are usually relegated to the private and domestic spheres of women's lives. I aimed to make visible these discourses by analyzing the tweets. From my personal experience I expected certain discourses to arise (such as resisting abortion stigma and pro-life rhetoric). My focus was on making these often-silenced discourses visible that challenge how abortion is thought of and spoken about.

Chapter 4: Findings

The #ShoutYourAbortion hashtag has created a virtual space where women can share their experiences of abortion. People can engage with the hashtag on Twitter by either tweeting with the hashtag, 'liking' or 'retweeting' a tweet using the hashtag, or by replying to a tweet that uses the #SYA hashtag. Focusing on women's original tweets that utilize the #ShoutYourAbortion hashtag has uncovered certain discourses that have historically been silenced and marginalized. Women's interaction with the #SYA hashtag illuminated how women are seeking to share their experiences in an effort to combat this silencing. The discourses present in these tweets also provided insights into how women interpret, understand, and talk about their experiences of abortion. The tweets also exposed the ways in which women both resist and take up hegemonic abortion discourse. Women's interactions with the #SYA hashtag illuminated how women are seeking to share their experiences in an effort to combat this silencing.

Through an analysis of the tweets, it became clear that women used the space to challenge and resist pro-life rhetoric by sharing their lived experiences that contradict dominant pro-life narratives (which indicate that women ought to feel sad, regretful, or guilty about getting abortions). Women's resistance to pro-life discourses were apparent in how women asserted that they have a right to feel however they want to feel about their abortions (whether that be relief, sadness, or shame). The discourse of women's bodily autonomy and right to choose was also highlighted within the tweets and helped to resist pro-life rhetoric. Through the emphasis on the rights to choose what happens to their bodies and access to safe, legal abortions, women asserted that abortions are a healthcare necessity and that access to them (including being free from shame, stigma, and guilt) is a human right. Lastly, the discourse of normalizing abortion was also salient in the content of the tweets. The ways that women engaged with the #SYA hashtag highlighted the ways in which abortion as a medical procedure should not be shamed more than any other medical procedure. This also related to abortion stigma and women aiming to normalize experiences of abortion. Furthermore, this points to potential areas of further research that focus on how normalizing abortion can help to combat abortion stigma.

Resisting & Challenging Pro-life Rhetoric

Women engaged with and used the #SYA hashtag to resist and challenge pro-life rhetoric. One tweet emphasized the need to talk about abortion in order to challenge pro-life narratives that appear dominant in abortion discourse:

"Wildly disappointing and w e a k that the word "abortion" wasn't uttered *once* at the DNC. The more y'all refuse to say it, the more folks who WILL say it can control the national abortion narrative. #ShoutYourAbortion".

In this tweet, the user is emphasizing the need to talk about abortion as a way to challenge the "national abortion narrative", which in the United States is a narrative that focuses on pro-life discourses of shame, regret, guilt, and abortion as a moral failing. This is also important in terms of this tweet referring to the DNC, which stands for the Democratic National Convention, which is a political party in America. Another twitter user emphasized how contrary to dominant discourse narratives of women regretting their abortions, there are alternative ways women can and do feel which are silenced:

"New study: when we choose abortion we don't regret it. The takeaway? Trust women. We can and do make the best decisions for ourselves. #ShoutYourAbortion #ProChoice".

Here, the user is focusing on how pro-life discourses push women to feel regret, guilt, or other negative emotions and shares how women can feel what they want, and that it is not always negative. This tweet also reflects how within a patriarchal society that focuses on prolife narratives and values silencing and overpowering women's rights, women can be trusted to make decisions around their autonomy that should be trust and reflected. Historically, women have not been trusted and have been viewed as hysterical and incapable of making decisions for themselves, which has resulted in the hampering of women's voices and experiences; all of which reflect the patriarchy in action. This is echoed in another user's sentiment: "I have absolutely zero regrets about my decision, I do not feel guilty and I hated being pregnant. #ShoutYourAbortion".

Women tended to engage with the SYA hashtag as a way to communicate their experiences that were different from feeling sad, guilty, or regret about their abortion. These experiences ranged from relief to celebration, and these tweets disrupted dominant pregnancy narratives such as pregnancy being something that is meant to be enjoyed, celebrated, and wanted.

As one tweet said:

"Having an abortion saved my life. I was in a relationship with a very unsafe man. I knew that having his child would mean he would be in my life forever. I have an amazing family who would have supported me no matter what, but I knew the danger that I would be putting myself and my child in. I had an abortion and I left him a few months later. #ShoutYourAbortion".

This tweet directly challenges pro-life discourses that emphasize how women should regret their abortion by sharing how having an abortion was a good thing for them, rather than a negative or inherently bad experience. Again, abortion can be seen as more than a bad experience or a regretful decision, and women acknolwedge that it can actually better their lives in other ways, which takes pressure off the narrative that women are meant to reproduce and bear children. Women sharing their lived experiences through the #ShoutYourAbortion also strengthened the claim of feminist standpoint theory that knowledge is socially situated, because women's experiences are being articulated from their specific viewpoints, which differ from other mainstream discourse (Brisolara, Seigart, & SenGupta, 2014). Although the dominant

discourse on abortion focuses on pro-life narratives, women are sharing how their experiences challenged these narratives. Since abortion narratives are often based on claims made by those with power, women's experiences that directly challenge them prove that their knowledge is informed by their various standpoints.

Importance of Choice & Autonomy

A large part of the discourses that aimed to challenge and resist pro-life narratives centered around the importance of choice and autonomy. As noted, pro-life discourses often push women to feel regret, guilt, or other negative emotions. However, many used the SYA hashtag as a way to resist this narrative by asserting their own bodily autonomy in feeling whatever they want, and to assert their agency, self-determination, and empowerment in making choices for themselves and their bodies. This is perfectly captured in the tweet below:

"I let myself cry as hard as I want to. Any one who has had an abortion is allowed to feel whatever they want to feel whether it is happy, relieved, sad, or angry. #ShoutYourAbortion"

Another important part of choice and women's autonomy has to do with framing abortion as a human right. As the tweets below highlight, pro-life rhetoric is dominant within our society and women's bodies are not seen as their own to make decisions about and have control over:

"This is not a debate. This is apparently a wild concept for some folks, but people who get abortions HAVE actually thought about it. Get another hobby. We will never debate you on human rights. #ShoutYourAbortion".

"We the people are having abortions legal or not #ShoutYourAbortion".

Framing abortion as a human right is a major theme that occurs within the bodily autonomy and choice discourse that is visible within the #SYA hashtag and the context of twitter. This relates to the legality surrounding abortion because if access to abortions is a fundamental right, then making it illegal infringes on people's rights. The emphasis is on access to abortions, noting that they have (and will) occur whether it is legal or not.

Challenging the Abortion Industry

As much as the #SYA hashtag has provided a way for women to share their experiences and influence discourses around autonomy and abortion as a human right, it was also engaged with in a way that critiqued abortion services. As shown in the tweet below, not all users of the hashtag aimed to challenge dominant discourses around women's individual experiences, but rather aimed to challenge the larger systems at play that influence these individual experiences:

"#ShoutYourAbortion? Abortion is not an act of power, but despair. And the abortion industry is not a beacon of freedom, it is a money-making industry. Abortion is not "healthcare", because pregnancy is not a disease".

In this tweet, there is the conflation a woman's right to choose what to do with their bodies in terms of pregnancy to that of a disease, which could be used to shame women to not have abortions. However, it can also be argued that there is nuance in this tweet in that at first glance it appears negative, it can also be a critique of the abortion industry in that many women do not have access to free abortions, but rather are forced to pay for them. If abortion is seen as a woman's right and as a part of healthcare, then the procedures should be accessible (in terms of price and access). I think this tweet makes an important critique of forprofit and privatized healthcare and highlights how there is an industry that is profiting off women's reproductive decisions. This can also be seen as taking the control and choice away from women, and can work to further oppress women.

The medicalization of women's reproductive rights, not just in terms of abortions but also in regard to pregnancy is also apparent in the discussion as pregnancy as a disease. With the increase privatization of the American healthcare system, even though pregnancy is seen as a 'natural' process, the ways in which it is organized and responded to in healthcare systems is medicalized and mechanized. The introduction of healthcare as a business can be argued to have taken the 'care' out of healthcare because it has become an industry in itself.

Normalization of Abortion in Challenging Stigma

A large part of challenging dominant pro-life discourses on abortion has to do with challenging how abortion is viewed, felt, experienced, and articulated. This tweet captures how abortion is viewed versus how pregnancy is viewed in mainstream discourses:

"As much as my pregnancy was 'highly desired' so too was my abortion. I think it is morally unacceptable that someone should have to carry a pregnancy they don't want, for whatever reason. #ShoutYourAbortion".

As this tweet highlights, it is important to have safe access to abortion services in the same way it is important to have safe access to pregnancy services. The tweet also aims to normalize that women should have options once they find out they are pregnant, and that abortion is not a moral failure, rather just one of the options available to women. This is also emphasized in normalizing abortion as a legitimate healthcare procedure. The discourse of safe access to abortion services was portrayed from a healthcare lens. When abortion is framed as a

normal, standard healthcare procedure, it removes the moralization that surrounds the procedure, which in turn can help to destigmatize it. Demoralizing abortion as a healthcare procedure can ensure that safe access remains, because legitimizing it as a medical procedure rather than a moral choosing means it remains in the field of healthcare. Without it being a part of healthcare, women would potentially be forced to seek abortions by alternative methods, which are not considered as 'safe' as medically performed abortions. However, this is also nuance here in that even though the normalization and demoralization of abortion can decrease stigma, it can also contribute to the medicalization of pregnancy. The following two tweets emphasizes that women should have a right to abortion services because they are relatively safe procedures on par with other procedures such as a colonoscopy, yet they do not require admitting privileges within a hospital setting.

"Abortion is extremely safe. The risk of complication is lower than from a colonoscopy, wisdom tooth removal or a tonsillectomy, which do not require admitting privileges. The law before #SCOTUS is all about chipping away at Roe, NOT about protecting women. #MyRightMyDecision #ShoutYourAbortion".

"Ending access to abortion does not end abortion. It simply makes it less safe. I remember what America was like before Roe v Wade. Abortion is healthcare. #StandWithPP #ShoutYourAbortion #MyBodyMyChoice".

The two above tweets emphasize the need for the normalization of abortion. As was mentioned within the bodily autonomy and women's rights part of this paper previously, abortion should be a woman's right because women's rights center around having autonomy over their bodies and the freedom to make choices that reflect this autonomy. The

normalization of abortion also helps to reduce the stigma that surrounds abortion. With a focus on abortion as something not to be ashamed of was present within the discourse of normalizing abortion. Women shared their experiences that emphasized the fact that one in three women of reproductive age will have abortions, yet it is still so stigmatized. This is reflected within the two below tweets:

"Beyond tired of the B.S. abortion stigma coming out of #VVS20. For all those tuning in: it's been almost a decade since my abortion, and I've never regretted it. In fact, I'm so grateful for it I wrote a whole article about it! #ShoutYourAbortion".

"People who are old, young, religious, non-religious, parents, single, trans, non-binary, all have abortions. Abortion is not be ashamed of! #YouKnowMe #ShoutYourAbortion #SmashAbortionStigma".

In the above tweets the users are normalizing the fact that anyone can, and do, have abortions. The first tweet also references the hashtag #VVS20, which refers to the Values Voter Summit, which an annual conference held by anti-2SLGBTQIA+, pro-life hate group and is attended by elected and appointed officials (Vasquez, 2019). The user clarifies here that abortion stigma is being perpetuated by pro-life discourses present at the summit. These two tweets were also the only ones to reference the concept of abortion stigma specifically. This is important because part of normalizing abortion comes from showing that people across all intersections of life have abortions.

In summation, these were the three discourses that emerged from the data. By undertaking a critical discourse analysis supported by a feminist standpoint theory, it became clear that the ways women wrote, shared, and understood their abortion experiences shaped the

discourses around abortions. The following section discusses these finding in relationship to academic literature on abortion stigma and its connection to abortion care and discourses that surround abortion.

Chapter 6: Discussion & Conclusions

Discussion

This research paper sought to answer the question of what discourses are present in the tweets that women share under the #ShoutYourAbortion hashtag? Through the use of critical discourse analysis of the #SYA hashtag, three significant discourses emerged that signified how women understood and communicated their abortion experiences. Firstly, women used the hashtag first and foremost to challenge and resist pro-life discourses and narratives. Next, women engaged in discourses that emphasized bodily autonomy and the importance of having the right to make choices surrounding their bodies. Additionally, women used discourses that aimed to critique and challenge the abortion industry as a whole. Lastly, the discourses of normalizing abortions was present as a way to resist abortion stigma. All of these discourses have consequences in what they mean for power and dominance over women's bodies. For example, even though abortion has been legal in Canada since 1988, there still remains the dominance of pro-life discourses and narratives (Long, 2020). Women have established their own discourses which aim to counter the dominant discourse on abortion. This was shown through the #SYA hashtag and analyzing the text embedded within the tweets.

Although there were numerous discourses that arose from the #SYA hashtag, they all shared the common theme of how women's lived experiences of abortions are often debated as abstract moral or ethical issues in dominant discourses, which decontextualizes women's experiences because they fail to account for the material realities of women's actual lives. The

#SYA hashtag revealed that women's discourses on abortion included policies and laws in reference to the #RoeVWade hashtag and on making abortion legal in the United States. There was also reference to the Values Voter Summit, which is attended by elected and appointed officials, where pro-life politicians are portraying abortion as a moral failing, as something that needs to be criminalized and illegal (Vasquez, 2019). References such as these show how women's discourses around their abortions are shaped by larger social, cultural, and political forces (Cockrill & Nack, 2013; Purcell, 2015). Women's lived experiences are not abstract, they are grounded in these larger discourses and impact how women feel and articulate their experiences. There are social, cultural and political forces here, most of which are situated within an American context, which is important to acknowledge due to the polarization of views on abortion. There is ongoing contest over two extremely opposing views (pro-life versus pro-choice) that has not been witnessed since the 1960s and 1970s (Baird & Millar, 2020).

The discourses that emerged in my findings reflected Goffman's conceptualization of stigma in that women identified feeling devalued (through dehumanization) both in social interactions and in the eyes of society (Cockrill & Nack, 2013). They felt their identities were being dictated for them, instead of by them. Previously in this paper abortion stigma was identified as falling under two of Goffman's stigma types: blemishes of character and tribal or group identity (Cockrill & Nack, 2013). How women spoke about their own abortions through twitter emphasized legality, access, safety, and the healthcare of abortions reflects how the current social context is affecting their experiences. With the increased polarization of abortion, women could be interacting with the #SYA hashtag in order to combat the distress they feel around feeling forced to conceal their abortions and this stigmatized part of the

identities (Cockrill & Nack, 2013). Goffman's conceptualization of stigma is still relevant today, however, given the social context of women's abortions and how politicized of an issue it has become, I think that there can be changes made. Women who have had an abortion is no longer merely just a stigmatized identity, but it is also one that is politicized.

The #SYA hashtag also illuminated the fact that even though approximately one in three women of reproductive age will undergo an abortion, it is still something that remains stigmatizing (Purcell, 2015). Women's use of the #SYA hashtag aimed to destigmatize and challenge dominant pro-life discourses of abortion. Goffman's conceptualization of stigma was focused on in this paper, which looks at how stigma works a label to 'other' people and label them 'deviant' in the eyes of society, which can impact a person's identity and can work to devalue a person in social interactions (Cockrill & Nack, 2013). The discourse of normalizing abortion to destigmatize it is important in understanding how women who have had abortions continue to be stigmatized. The finding of this research echoed previous literature that women tended to attribute their stress around abortions to the stigma that arose after the experience, rather than the procedure itself (Cockrill, Herold, & Kimport). In line with this, the discourses that aimed to resist and challenge pro-life rhetoric also worked to decrease abortion stigma. Women engaged with the #SYA hashtag as a way to use their voices and share their experiences around something that is often silenced and dismissed. Traditionally, women have felt unable to disclose their abortion experiences due to both the real and perceived negative consequences associated with abortion stigma (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013).

It is not surprising that the discourses that arose from the #SYA hashtag reflect some degree of internalization of larger societal discourses on what is appropriate to do, say, and feel

about their abortions. As mentioned previously in this paper, the #SYA hashtag arose out of the desire to shape and change dominant pro-life discourses of abortion through the sharing of experiences that contradicted its rhetoric. The #SYA hashtag continues to produce discourses that achieve this.

Limitations & Reflections

Although feminist standpoint theory as a theoretical framework provided a solid groundwork for my thesis research, it does have shortcomings. Feminist standpoint theory can be essentializing in that it claims to represent "women" as a hegemonic term, which we know it is not and again, fails to account for the diversity of women's experiences (Gurung, 2020). When feminism is seen as only unifying around gender, the differences that exist between women are erased (Dumbrill & Yee, 2019). What this meant for my research is that although I was analyzing discourses that emerged from tweets, I am still limited in capturing the diversity of women's experiences. For example, who has access to internet? Who chooses to have a twitter account that is public? Some women may not feel safe to share their experiences online. There was also no demographic information available around who was generating the tweets, so there is no way to fully appreciate their differing standpoints and intersectional, nuanced identities. Thinking around these questions showed how limited these results may be. Every woman's abortion experience is different because every woman is different. Abortions are not limited to a specific class, race, ability, gender, etc. Although I uncovered three major discourses present within the tweets during a specific time span, these are in no way inclusive of all women's experiences due to their different standpoints. Attributing text (and the expression through text) to identity is complicated and although it

captures some voices, intersectional identities influence how women engaged with the #SYA hashtag in terms of what they said versus how they may have actually felt.

Another limitation of this frame is the potential to reinforce discourses of power and privilege. Specifically with feminist standpoint theory, it is important to not center the privileged position but rather to focus on the multiple constructions of all standpoints (Sweet, 2020). In the context of my research this means that in keeping the producers of the tweets anonymous, they were unknown and not visible, meaning they were not understood as complex individuals situated in their specific standpoints. As noted above, there are limitations in who has access to and chooses to be on twitter and who feels empowered in sharing their abortion experiences. Without engaging in reflexivity, a researcher risks reinforcing and recreating oppressions that exist. Even though standpoint theory aims to uncover women's distinct standpoints, there have still been groups of women who have continued to be excluded from the theory (Mann & Kelley, 1997). Since I only had access to publicly available tweets, I may have reinforced only certain discourses on abortion that do not account for multiple standpoints and the intersections of women's identities. This implications of this for my analysis are that by focusing on only 'women', there is the implicit exclusion of transgender and non-binary identities that also have abortions. It also means that the discourses I identified through my CDA approach may not be inclusive of all people's abortion experiences. Although I aimed to address what discourses are present in the tweets that women share under the #SYA hashtag, this may have been too broad in its approach. Many mainstream representations of abortion that challenge pro-life rhetoric and dominant discourses tend to focus on white, cisgender, heterosexual, able-bodied/minded women. There is a similar potential to be said for the tweets included in this research paper, in that they only

portray certain women's experiences and do not account for the multiple standpoints of people's identities, and therefore experiences.

Since reflexivity was important to me as a researcher throughout this experience, I expected more discourses to appear around isolation, based on my own lived experiences. I was conscious about this bias and tried to remain open to all possible discourses that appeared, even ones that would directly challenge or oppose my own lived experience. Because all women are unique and have complex, multi-faceted standpoints, their experiences are informed by such. Although I expected to find more discourses that confirmed my own experiences, I was someone who was able to easily access abortion services, did not have to travel far, and did not worry about facing any legal consequences related to having an abortion. These factors impacted my experience, but many others can have negative experiences whose experiences are drastically opposite to mine.

Choosing to use Twitter as a data collection source also comes with significant limitations. Although on the surface it may seem like this social media site is accessible to all and can accurately capture and portray user's experiences, it only captures a limited number of experiences. For example, only 22% of Americans use Twitter – so the discourses I identified from the #SYA hashtag are not at all comprehensive in terms of women's actual experiences (Alizadeh, 2021). Beyond an American context, demographics of Twitter also show that those who engage with the site tend to be younger, more left-leaning and affluent individuals, so focusing on Twitter alone to collect data means the information garnered can be seen as skewed. Not only this, but according to Alizadeh (2021) "80% of tweets come from the top 10% most active users", meaning that examining the collection of tweets under the #SYA hashtag may not

be representative of different users' opinions, but could be the opinions of a small subset of users that are repeated.

Implications for Social Work & Social Justice

Since women's post-abortion experiences of stigma are not as often spoken about or acknowledged, I also wanted to answer the question research question of how can post-abortion care be better suited to meet women's unique needs of stigma and isolation? In light of my findings, there are various implications for the field of social work and more broadly, social justice. From a social justice standpoint, women's experiences of abortion historically have been silenced, unless they reflected pro-life narratives of regret, shame, and sorrow. And because abortion is a concealable stigma that is often only selectively disclosed, it makes sense that women who had experiences that did not fit into the dominant discourse noted above were isolated in their experiences (Cowan, 2017). The negative experiences of abortion arose from the internalization of stigma, which shaped expectations of experiences of abortion (Purcell, 2015).

For the field of social work, going forward this research can be used in tandem with the existing literature that indicates a need for changes in post-abortion care. Currently, most post-abortion care is offered in the context of if women feel they need grief counselling after their abortions. This does not account for women's actual needs post-abortion, which should be focused on attending to abortion stigma and isolation. In Ontario, there are at least 30,000 abortions performed each year, however, it continues to be surrounded by stigma and shrouded in silence (LaRoche & Foster, 2015). Much like where the roots of the #SYA hashtag began from, social work as a profession can look at these collectivist approaches of women mobilizing/supporting each other and work to implement this grassroots organizing. Social work situated within the medical paradigm of care can look to these collectivities and learn from the

discourses they are using to disrupt, shift, and change abortion services and how abortion is thought about in the field of social work.

As the CDA of the #SYA hashtag revealed, women experience a range of emotions and feelings after an abortion which extends past perceived loss and grief traditional counselling focuses on. The discourses of normalizing abortion to combat stigma and to challenge pro-life narratives both emphasize how women continue to face negative judgement by others when they talk about their abortions, especially in the context of religion, political, and personal beliefs. For example, many women indicated that they felt abortion is a human right, yet it is not treated as such. As one tweet showed, postabortion counselling that is free and most accessible tend to exist within religious and pro-life organizations. Women have indicated that they desire nonjudgmental postabortion care but have difficulty finding and accessing services that offer this (Benyon-Jones, 2017; Cockrill, Herold, & Kimport, 2015; Cockrill & Nack, 2013; Kimport, Peerrucci & Weitz, 2012; LaRoche & Foster, 2015; LaRoche & Foster, 2017; Purcell, 2015). This signals a need for postabortion support resources that are nonpoliticized, nonjudgmental, and nondirective (LaRoche & Foster, 2015).

It is important for the field of social work to acknowledge the needs of women postabortion and should inform their care practices, techniques, and services offer accurately reflect these needs. Consulting the literature on abortion stigma and including those with lived experiences in the formation of this care would be beneficial. According to LaRoche and Foster (2015) there are only a handful of organizations in Ontario that offer nonjudgmental, clientcentered post abortion support services to women. These could also be consulted with in informing postabortion care. Since many women are accessing abortions within medical settings, it would be important to reimagine the postabortion care offered as non-directive and non-

judgmental, with the focus on combatting stigma and isolation. This CDA has revealed that it is essential that these services listen to those with lived experience of having abortions, rather than relying on the pro-life dominant discourses that exist.

Conclusion

The findings from this CDA research paper provide further insight and understanding into the various discourses that are present under the #ShoutYourAbortion hashtag. Women are communicating their abortion experiences in ways that challenge and resist pro-life narratives and other dominant discourses on abortion. In doing so, they have emphasized the existence and reproduction of abortion stigma, with the focus on bodily autonomy and a woman's right to choose. This research has contributed to filling the existing gaps in research and social work practice that do not address the specific needs that became apparent through this CDA. I hope to apply what I have learned through this thesis to my future clinical practice as a social worker.

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