

Moral dilemmas and abortion decision-making: Lessons learnt from abortion research in England and Wales

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Abstract:

This paper scrutinizes the concepts of moral reasoning and personal reasoning, problematising the binary model by looking at young women's pregnancy decision-making. Data from two UK empirical studies are subjected to theoretically driven qualitative secondary analysis, and illustrative cases show how complex decision-making is characterised by an intertwining of the personal and the moral, and is thus best understood by drawing on moral relativism.

Key words: abortion , moral dilemmas , reproductive control , moral agency , decision-making

Introduction

This paper argues that complicating binary theories of moral and personal reasoning might improve understandings of complex decision-making. It does this through critically examining the theories in relation to young women's decision-making when faced with an unintended and unwanted pregnancy. Previous work on moral reasoning and abortion decision-making has tended to dichotomise the processes into either moral reasoning or instrumental/personal reasoning (Smetana, 1982). In other words, women's decision-making narratives are centred on their judgement of abortion as a moral issue of life, or as a personal issue of autonomy and self-determination. This paper will argue that, although this may reflect the trajectories for some women, in other cases a complex individualised and intertwined relationship between these two processes of reasoning is evident. This is important to understand as the research studies also indicate that when women's reasoning processes contain contradictory judgements they found decision-making more difficult. In this paper I will be drawing on qualitative secondary analysis (QSA) of two empirical studies, led by myself, in order to explore and develop thinking on these issues.

Internationally, research has shown how different morals and values have a role to play in abortion decision-making (Lie, Robson, & May, 2008). Comparative analysis has shown how the emotional effects of abortion are also influenced by socio-cultural value systems, so that women's cultural affiliations and beliefs have an impact on their emotional experiences and post-abortion feelings (Bennett, 2001; Kero, Hogberg, & Lalos, 2004; Lafaurie, Grossman, Troncoso, Billings, & Chavez, 2005; Remennick & Hetsroni, 2001). Increasingly this relationship has been analysed through the lens of abortion stigma (Cockrill & Nack, 2013; Kumar, Hessini, & Mitchell, 2009) in work that shows how a cultural understanding of abortion as somehow morally wrong can affect women who have an abortion (Kimport, Foster, & Weitz, 2011). Other work has highlighted the centrality of moral reasoning in young women's reproductive decision-making (Alldred & David, 2010; Knight, Chase, & Aggleton, 2006). A broad range of research has thus shown how a context of moral disapproval may impact negatively upon women's individual abortion decision-making and experiences. In the UK this has been shown to be particularly pertinent in Northern Ireland (Boyle, 2000; Boyle & McEvoy, 1998).

In England and Wales abortion is regulated by the 1967 Abortion Act which placed abortion in the hands of the medical profession, ostensibly as a public health measure to stop illegal abortions (Sheldon, 1997). Abortion is permitted up to 24 weeks in specific circumstances; and after 24 weeks in very limited circumstances. It remains politically and morally controversial (Furedi, 2016), and subject to regular attempts by those opposed to abortion to introduce restrictions (Lee, 2013), and generate negative media stories on abortion (Ekland and Purewal 2017; Lee 2017). These challenges to current abortion provision, alongside the frequently expressed assumption that abortion is inherently undesirable, have contributed to what has been termed 'the awfulisation of abortion' (Hadley, 1996) and 'abortion negativity' (Lee, Clements, Ingham, & Stone, 2004). Some UK researchers have also theorised this negativity through the study of abortion-related stigma, and its effect on women seeking an abortion (Astbury-Ward, Parry, & Carnwell, 2012; Hoggart, 2017; Purcell, 2014). The political and policy context for the research discussed here is thus one in which abortion is often framed as necessary though undesirable, and imbued with moral uncertainties (Furedi, 2014, 2016; Greasley 2017).

Individual women thereby navigate through a range of - often conflicting - social norms, values and moralities concerning abortion. Their own views on the (im)morality of abortion can significantly affect their journey, and the extent to which they feel comfortable about their exercise of reproductive control. Recently, work has also started to focus on what could be viewed as moral dilemmas, and to explore women's own moral views on abortion as an influence on both their decision-making, and post-abortion emotions (Cockrill & Nack, 2013; Kimport et al., 2011).

Moral psychology traditionally proposes that morals have a positive role in ensuring individuals make the best decision for themselves (Arpaly, 2003), but what happens when the 'best' decision clashes with their own view on the (im)morality of abortion? This question relates to a complex relationship between women's individualised concerns to realise their vision for their future selves (personal reasoning and self-realisation) and individually articulated moral reasoning on abortion. Path-breaking work in moral psychology (Gilligan & Belenky, 1980; Smetana, 1982) examined the role of moral reasoning and of personal reasoning in pregnancy decision-making and this work will be revisited here. Judith Smetana (1982) showed a relationship whereby those women who considered

abortion a moral issue of life were more likely to continue their pregnancies, and those who considered abortion a personal issue were more likely to seek an abortion. Smetana further argues that moral and personal modes of thought remain distinct even whilst being interwoven in decision-making. This paper will examine this claim through an analysis of what has been described as the 'justificatory labour' that women draw upon whilst explaining their decision making (Chiweshe, Mavuso, & Macleod, 2017). It thus develops previous work on internalised abortion stigma (Hoggart, 2017), to interrogate further the moral domain.

Methodology

This paper is based on qualitative secondary analysis (QSA) of data from two qualitative research projects undertaken between 2008 and 2014. Both projects were concerned with the abortion decision-making processes and reproductive behaviour of pregnant young women. Taken together, they are suitable for QSA synthesis as they shared a focus on young women's retrospective explanations and understandings of the different pathways they had followed in relation to sexual activity, to becoming pregnant, pregnancy decision-making, and post-abortion emotions and behaviour. In total, forty-seven young women, from a broad range of ethnic groups and family backgrounds, were interviewed. The first study was based in London and comprised ten interviews with young women who had terminated pregnancies (aged 16-19 at time of abortion). Two were teenage mothers. The second study included women from England and Wales: thirty-seven qualitative interviews were conducted with young women who had terminated pregnancies (aged 16-24 at the time of termination). Fifteen of these women had experienced more than one unintended pregnancy, nine had experienced more than one abortion, and eleven were mothers.

In each of the studies participants were recruited with the help of service providers who asked young women who met the inclusion criteria if they would like to participate in a research study. They then obtained written consent, from those who were interested, to pass contact details onto the research teams. The researchers then explained the study to potential participants, and made arrangements for an interview if the women were still interested. Written informed consent was taken at the time of the interview. There was some attrition at each stage of the process, with a total combined attrition of approximately 60%. The interviews were recorded, with the participants' permission, and the transcripts

were anonymised. NHS Research Ethics Committee approval was obtained for each study, and both were subject to independent scrutiny by project advisory groups. Pseudonyms are used in all publications.

These participants were not recruited as a representative sample, but as a diverse sample suitable for qualitative research. We aimed to explore a range of views in depth, and continued recruiting to the projects until we were confident that we had appropriately rich data. In both the studies, the data were analysed independently by two researchers, in three stages. Firstly we each read a selection of the transcripts, noting emerging themes that formed the basis for a jointly agreed coding frame. Secondly, new codes and memos were developed whilst the qualitative software programme NVivo was being used to code the transcripts. Finally, both researchers undertook a second systematic reading of the data, one concentrating on the broken down NVivo data, and the other re-reading the original transcripts. Overall, in the original research projects we thereby adopted a largely descriptive, data-driven form of thematic analysis (Braun & Clarke, 2006, 2013). Research reports have been published for the projects (Bury, Hoggart & Newton, 2014; Hoggart & Phillips, 2010; Hoggart, Newton & Bury 2015),

as have a number of papers [Hoggart, 2017; Hoggart and Phillips, 2011; Hoggart, Newton and Bury, 2016).

The analysis for this paper was driven by the following research questions: how do women explain what has influenced their decision-making? And, how do they draw on personal and moral reasoning in this process. For this paper the data from the two studies has been drawn together, the transcripts re-read, and selected NVivo codes re-coded. Thematic analysis was again adopted though in this case moving to a top-down analysis guided by theoretical concepts (Braun & Clarke, 2013) related to personal reasoning and moral reasoning, and guided by a contextualist perspective. Theoretical thematic analysis works well within a contextualist framework because it can analyse experiences, realities and reasonings as described by participants; and then the researcher can analyse the ways in which they, as researchers, understand and interpret these reasonings.

The paper now analyses the experiences, views and reasonings of the young women who participated in these studies, examining themes from their justificatory labour. First, themes

related to abortion as a personal issue (personal reasoning) are examined. This is followed by an examination of how the personal and the moral may be intertwined in young women's own narratives.

Results

Abortion as a personal issue: personal reasoning and reproductive autonomy

The majority of the young women interviewed described becoming unintentionally pregnant as a 'shock. Some had been using contraception, others had thought they may be infertile, whilst others were simply 'taking chances' [add references]. Their miscalculation of their own pregnancy risk, or fatalism, had led them to finding themselves in a situation in which they had to engage in complex decision-making quickly. As individuals they were aware that their decision would profoundly affect their own future lives, as well as the lives of those around them. Their immediate decision-making was thereby influenced by the vision they had of their own futures, within their own personal contexts. Although one strong theme was the wish for autonomous decision-making, most women's justificatory labour included noteworthy references to the views and opinions of significant others in their lives, as with the participant below. She was not thinking about her pregnancy in isolation but in reference to her overall position within her family and other personal relationships.

I'm not ready for a baby because I was thinking about my education ... if I drop out of college what am I going to do, how am I going to look after the baby because my mum's going to throw me out, I'm too young, you know and I was thinking what if the boy he says now he's going to be there for me but what if he just goes and finds someone else. (Nuru, abortion study one, black African, aged 19)

Nuru is here projecting herself forward, and imagining a number of different futures for herself, evident through the number of questions she raises in the course of this extract: what? How? What if? Nuru was planning to go to University and study to become a social worker, and she made a conscious decision not to tell her mother that she had been pregnant and had an abortion. Our interpretation of Nuru's story as a whole was that, although clearly influenced by her assessment of what her mother and her boyfriend may think and do, she felt this was fundamentally her own decision based on personal reasoning.

Her justificatory labour is focused on her own personal context, and what might be negative about her own personal future were she to proceed with the pregnancy.

Similarly, when Yasmeen is asked why she decided to have an abortion she very much focuses on her own future and her own personal circumstances. She made her decision as soon as she knew she was pregnant:

I had to think about myself, I had to do my studies and I just didn't want to be a disappointment to anyone. [...] be a disappointment to myself as well, 'cause I'm only 16 and I think that's very young, just very young.

Yasmeen wanted to finish college, and then go on to University. Although she did say on several occasions during the course of the interview that she did not 'believe in abortion', she also talked about being so certain that she made the right decision that she has no doubts or regrets:

I don't doubt myself. I mean I didn't doubt myself in the first place anyway and I still don't. I was just relieved that it was over and done with for my own sake. (Yasmeen, abortion study 1, black African, 16).

Yasmeen had plans for her future which precluded becoming a young mother. Her narrative shows how difficult it is to identify autonomous decision-making, as throughout the interview she simultaneously talks about having an abortion 'for my own sake' and 'having no choice'. The blend of these two seemingly contradictory narratives illustrates not only how difficult it is to isolate personal reasoning, but also how prioritising self-realisation – for Yasmeen - allows her to feel comfortable with her decision despite her personal feelings that abortion is 'wrong'.

Leah also described feeling comfortable with her decision:

I just felt normal. It was really weird. I didn't feel like I'd had anything done and I was waiting for the pain, and the emotions, and everything to come, and they just never have. I don't know if it is because I think I knew in myself from day one what my decision was going to be, so I had prepared myself. (Leah, abortion study 2, white British, 19).

Leah had been very clear on her decision to have an abortion. She suggests that this may have influenced her post-abortion feelings. Ahla had similar feelings and she too was

comfortable with the decision she made. When she is asked how she felt emotionally after her abortion she responds:

I was okay, I was fine. I didn't really think about it too much because I was comfortable with the decision, I made it for myself because I was studying, I'd just had a baby, I was studying and I was doing my driving license, my driving test at the time so I had a lot of things to occupy my mind. I didn't really think about it. (Ahla, abortion study 2, mixed race, 22).

Within these women's narratives, justificatory labour was centred on an ideal of autonomous decision making, with respect to the choice for or against abortion. Leah and Ahla had been equally certain about their previous decisions to proceed with an unintended pregnancy. Strong statements in favour of bodily autonomy and the exercise of personal reasoning and personal agency in individual decision-making, however, represented an ideal, and, we understood that it was an ideal that was far from universally achieved. Other respondents experienced compromised personal reasoning, and thereby compromised autonomy. One central theme that we identified in the young women's narratives was the variability in the extent to which they felt they were able to exercise personal autonomy in their decision-making, whilst simultaneously, and almost universally, asserting an abstract right to make their own decisions. One of the ways in which personal choice and autonomy was constrained, already seen in Yasmeen's narrative, was through worries about abortion morality.

Young women's views about the morality of abortion, and how they interpreted and understood the impact of these views on their own decision-making, varied significantly.

Personal reasoning and moral reasoning tensions

This section examines the women's different moral standpoints on abortion, and analyses how the commonly held assumption that 'abortion is wrong' was variously articulated by the women. Our analysis indicates that, although only one of a complex web of influences on abortion decision-making, subjective understandings on the morality – or immorality – of abortion were particularly important for the young women and disrupted their justificatory reasoning. Some of the young women spoke about their own ambivalence, expressing a strong 'horrible but necessary' theme, when explaining their own decision-making.

'It's a horrible thing to do but I think it was the best thing' (Juliet, abortion study 1, white British, 19)

'It's a horrible thing because I don't like killing it, because when my neighbour told me about how they die, it's like they put a pipe in you and they suck it out, that's how I feel bad about it, all bits and pieces come out. That's not nice'. (Aisha, abortion study 1, Asian, 17)

This theme indicates that for some young women, at least, moral considerations are disturbing their personal reasoning. Our interpretation was that, in such instances, women may not feel morally comfortable about the decision they have made, even when they feel it is the 'right' decision for them.

Juliet, for example, had at first wanted to continue her pregnancy. However, she describes how she became convinced by everyone around her that 'the time was not right', and then became able to articulate this for her own reasons.

For a while I decided that I was going to keep it just because I was really scared of having an abortion and we didn't want to do it. I don't know, I didn't want to live with knowing that I'd done that, I just really didn't want to have an abortion, so I decided that, and even though everyone around me was saying that they thought it was better to have an abortion I don't think they pressured me, they didn't want to pressure me but it did feel like pressure at the time just 'cause it felt like everyone was saying 'have the abortion then you can do this, this and this, and if you don't then you're going to have to do this, the second option'. I was like obviously I know it's not going to be great and I know it's going to be really crappy and I'm not going to have money and whatever, but also there would be some good bits of it. I don't know, just slowly I think I decided that I didn't actually want that and that even though it would be hard having the abortion it wouldn't be forever, whereas having a baby it would have been forever. (Juliet, abortion study 1, white British, 19)

Later in her interview Juliet spoke of how she did not want to struggle financially, and wanted a reliable income before she had children. She did, however, experience moral qualms and continued to express ambivalence about her decision: *'I really don't want it to happen again, and in my head if I ever do get pregnant there's no way that I'd have an abortion again'.* Our interpretation of Juliet's reasoning was that the source of her regret

was not the abortion itself, but finding herself in a position in which she had to make a decision she was not entirely comfortable with.

Jennifer (abortion study 2, white British, 22) described abortion as a taboo subject, and had found a second abortion more difficult than her first:

I sort of left this one a little longer because I really didn't know what to do because when I had my first abortion I really said in my head, I didn't want to do that again ... Because it is horrific. And I just really wasn't happy doing it. So then when the second time, I was, I don't know, I'd sort of left it a little while because I was so, like I didn't want to deal with it ... after having the second one, it was worse for my body and it was worse for how I thought because I was a lot more emotional and a lot more upset when I was, when it was going through, so I think the second one for me was a lot worse.

For such individual women, multiple and conflictual imperatives were evident and decision-making was correspondingly stressful. We interpreted these processes as indicators of individual reasoning not only being shaped by their immediate circumstances, but being disrupted by their own values and beliefs. The extent to which women voiced views in which abortion was perceived as morally wrong in some way, thus drawing on a moral consideration of life narrative, appeared to affect their own feelings about their abortion, specifically the extent to which they were able to resist feeling they had transgressed morally. In this endeavour protective discourses were also drawn upon, the most evident being the assertion of a model of 'good motherhood', as expressed by Juliet. Women's understanding of abortion as morally wrong was also contested when they experienced support from family and friends and non-judgemental attitudes from health professionals. They were exercising moral reasoning yet in different ways that went beyond moral considerations of life. They were assuming the responsibility for their choices, whilst simultaneously considering the dynamics between their personal trajectory and significant others, including a potential child. Patterns in these data suggest that when the women struggled with this process, they were more likely to express feelings of ambivalence. In this context, the exercise of moral agency is best understood as exercising agency in harmony with individual moral views; and best conceptualised as a continuum – or a spectrum - with

a number of, often intertwined, issues serving to locate women's position on that continuum.

Discussion

Research has shown that young women who become pregnant when they do not want to be are generally shocked; and often dismayed and scared. They mainly then think very seriously about the decision they have to make, and they may also take a while to reach their decision (Ingham, Lee, Clements, & Stone, 2008). This was also evident in the studies discussed here. One of the most important findings in these studies, discussed elsewhere (Hoggart 2017) is the extent to which attitudes, understanding and beliefs about abortion appeared to influence feelings around the decision made. The data, however, also show individual dilemmas and complex moral reasoning set within personal contexts that influence women's choices. Voicing these dilemmas was a central component of much of the young women's justificatory labour. They seemed concerned to give voice to complexity and express their ambivalence.

In many cases a narrative of abortion as in some ways immoral is evident, but this is balanced against what are expressed as other adverse outcomes. In other words abortion is viewed negatively as 'the lesser of two evils', and thus the young women find themselves acting in a way that can be conceptualised as a moral relativism.

This paper has focused on different modes of reasoning in pregnancy decision-making. Women's personal attitudes towards abortion varied widely. The differences ranged from viewing abortion as morally wrong to a pragmatic acceptance of abortion as a personal solution to the problem of an unwanted pregnancy. The two modes of reasoning (moral reasoning and of personal reasoning) as intersecting was a central theme to our analysis of the data. Additionally, our analysis suggests that those young women who did see abortion as a moral issue of life, but also drew on personal reasoning in order to realise their future vision for themselves found their decision-making more challenging than those who were not troubled in this way. The point has been made before: when abortions take place within a context of moral disapproval and possible stigmatisation this is likely to impact negatively upon women's decision-making and experiences (Boyle, 2000; Cockrill & Nack, 2013; Kumar et al., 2009). This research has shown not only the complexity of the emotions that can be

felt, but also that these may be conflicting. Both relief and regret may be experienced as young women try to reconcile their own moral views on abortion, their moral subjectivities, with conflicting imperatives.

The analysis has implications for conceptualising the complex relationship between women's wishes to prioritise their own vision for their future selves (personal reasoning and self-realisation) and individually articulated moral positionings on abortion. This symbiotic relationship is fluid, depending on individual circumstances and personal views. With respect to abortion decision-making, our interpretation of the data has indicated that those women whose justificatory narratives exhibited moral confidence seemed to find the process less fraught than those who expressed ambivalence. A broad concept of moral agency is necessary in order to capture women's subjective sense of the extent to which they exercise reproductive autonomy within their own moral framework. Women's justificatory labour exhibits moral agency when they are able to describe acting for themselves, on the basis of their personal reasoning, for their own self-realisation, whilst not contravening their own moral frameworks. Women articulated compromised moral agency when they felt their abortion decision clashed with their own moral framing of abortion. This paper has shown how the personal and the moral may be intertwined in young women's own narratives, and that a binary model of decision-making does not adequately represent these processes. In this difficult area, complex decision-making is profoundly influenced by individual moral understandings, intertwined with considerations of personal autonomy, and is thus best understood by drawing on moral relativism.

- Allred, P., & David, M. (2010). 'what's important at the end of the day?' Young mothers' values and policy presumptions. In S. Duncan, R. Edwards, & C. Alexander (Eds.), *Teenage parenthood: what's the problem?* (pp. 24-46). London: the Tufnell Press.
- Arpaly, N. (2003). *Unprincipled virtue: an inquiry into moral agency*. Oxford, New York: Oxford University Press.
- Astbury-Ward, E., Parry, O., & Carnwell, R. (2012). Stigma, abortion and disclosure - findings from a qualitative study. *J Sex Med*, 9, 3137-3147.
- Bennett, L. R. (2001). Single women's experiences of premarital pregnancy and induced abortion in Lombok, Eastern Indonesia. *Reproductive Health Matters*, 9(17), 37-43.
- Boyle, M. (2000). The experience of abortion: a contextualist view. In J. M. Ussher (Ed.), *Women's health: contemporary international perspectives*. Leicester.: BPS Books.
- Boyle, M., & McEvoy, J. (1998). Putting abortion in its social context: Northern Irish women's experiences of abortion in England. *Health*, 2(3), 283-304.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3, 77-101.
- Braun, V., & Clarke, V. (2013). *Successful qualitative research*: Sage Publications.
- Bury, L., Hoggart, L. and Newton, V.L. (2014) *"I thought I was protected" Abortion, contraceptive uptake and use among young women: a quantitative survey*. Open University Research Report.
- Chiweshe, M., Mavuso, J., & Macleod, C. (2017). Reproductive justice in context: South African and Zimbabwean women's narratives of their abortion decision. *Feminism and Psychology*, 27(2), 203-224.
- Cockrill, K., & Nack, A. (2013). "I'm Not That Type Of Person": Managing The Stigma Of Having An Abortion. *Deviant Behavior*, 34(12), 973-990.
- Eklund, L. & Purewal, N. (2017) The bio-politics of population control and sex-selective abortion in China and India, *Feminism & Psychology*, 27(1) 34–55.
- Furedi, A. (2016). *The moral case for abortion*. London: Palgrave Macmillan.
- Gilligan, C., & Belenky, M. R. (1980). A naturalistic study of abortion decisions. In R. Selma & R. Yando (Eds.), *Clinical-developmental psychology*. San Francisco: Jossey-Bass.
- Greasley, K. (2017) *Arguments about abortion: personhood, morality, and the law*. Oxford: Oxford University Press.
- Hadley, J. (1996). *Abortion: between freedom and necessity*. London: Virago.
- Hoggart, L. (2017) 'Internalised abortion stigma: young women's strategies of resistance and rejection', *Feminism and Psychology*, 27(2) 186–202.
- Hoggart, L., Newton, V. and Bury, L. (2016) 'Repeat Abortion', a phrase to be avoided? Qualitative insights into labelling and stigma', *Journal for Family Planning and Reproductive Healthcare*, 43, 1, 26-30.
- Hoggart, L., Newton, V.L. and Bury, L. (2015) *"How could this happen to me?" Young women's experiences of unintended pregnancies: A qualitative study*. Open University Research Report.
- Hoggart, L. and Phillips, J. (2011) 'Teenage pregnancies that end in abortion: what can they tell us about contraceptive risk-taking?' *Journal of Family Planning and Reproductive Health Care*, 37 pp. 97-102.
2010. Hoggart, L. and Phillips, J. *Young People in London: abortion and repeat abortion research report*. Government Office for London.
- Ingham, R., Lee, E., Clements, S. J., & Stone, N. (2008). Reasons for second trimester abortions in England and Wales. *Reproductive Health Matters*, 16(31 Suppl), 18-29.

- Kero, A., Hogberg, U., & Lalos, A. (2004). Wellbeing and mental growth - long-term effects of legal abortion. *Social Science & Medicine*, *58*(12), 2559-2569. doi:10.1016/j.socscimed.2003.09.004
- Kimport, K., Foster, K., & Weitz, T. A. (2011). Social sources of women's emotional difficulty after abortion: lessons from women's abortion narratives. *Perspectives on sexual and reproductive health*, *43*(2), 103-109.
- Knight, A., Chase, E., & Aggleton, P. (2006). 'Someone of your own to love': experiences of being looked after as influences on teenage pregnancy. *Children and Society*, *20*(5), 391-403.
- Kumar, A., Hessini, L., & Mitchell, E. M. H. (2009). Conceptualising abortion stigma. *Culture Health & Sexuality*, *11*(6), 625-639. doi:10.1080/13691050902842741
- Lafaurie, M. M., Grossman, D., Troncoso, E., Billings, D. L., & Chavez, S. (2005). Women's perspectives on medical abortion in Mexico, Colombia, Ecuador and Peru: A qualitative study. *Reproductive Health Matters*, *13*(26), 75-83.
- Lee, E. (2013). Whither abortion policy in Britain? *Journal of family planning and reproductive health care*, *39*, 5-8.
- Lee, E. (2017). Constructing abortion as a social problem: "Sex selection" and the British abortion debate. *Feminism & Psychology*, *27*(1) 15–33.
- Lee, E., Clements, S., Ingham, R., & Stone, N. (2004). *A matter of choice? Explaining national variation in teenage abortion and motherhood*. York: Joseph Rowntree Foundation.
- Lie, M. L. S., Robson, S. C., & May, C. R. (2008). Experiences of abortion: a narrative review of qualitative studies. *BMC Health Services Research*, *8*, 150.
- Purcell, C. (2014). The Sociology of Women's Abortion Experiences: Recent Research and Future Directions *Sociology Compass*, *9*, 7, 585-596.
- Remennick, L. I., & Hetsroni, A. (2001). Public attitudes towards abortion in Israel: a research note. *Social Science Quarterly*, *82*(2), 420-431.
- Sheldon, S. (1997). *Beyond control: medical power and abortion law*. London: Pluto Press.
- Smetana, J., G. (1982). *Concepts of self and morality: women's reasoning about abortion*. New York: Praeger Publishers.