



A love letter from the  
inroads cohorts, with lessons  
and collective wisdom  
for a world without  
abortion stigma

2022

**inroads**

Dear stigma-busters,  
This is a letter,  
from the tender, brave  
and love-filled  
gatherings of the  
inroads' workshop  
cohorts. A message  
filled with metaphors  
and collective wisdom.

The missive is an  
invitation to engage  
with the sharings of  
these cohorts: that offer  
reflections for caring  
spaces, equitable  
processes, authentic  
engagement and fearless  
approaches towards  
a world without  
abortion stigma....

The metaphors may at first  
glance appear contrary,  
however, we encourage  
you to find the co-  
existence in them (the  
"BOTH/AND"), that the  
work of abortion  
stigma-busting must be  
one of breaking  
binaries and creating  
transformative processes.





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# WHO WE ARE

The International Network for the Reduction of Abortion Discrimination and Stigma (inroads) is a global network and community of practice dedicated to learning, skill-sharing, and making sustainable and measurable changes to reduce abortion stigma and its discriminatory outcomes locally and across the globe.

We envision a world where abortion care is centered around the needs, experiences, and leadership of those who have abortions, and where stigma, fear, and misinformation about abortion can be eradicated through collective culture change to eliminate abortion stigma.

We work towards freedom for past, present, and future abortion seekers by funding movements and strengthening connections within the global community of abortion advocates, artists, scholars, activists, journalists, community workers, and providers.

# WHAT ARE THE INROADS COHORTS?

Over the course of inroads' history, groups of members have gathered, exchanged ideas and practices, and built strength and strategies around abortion stigma. When the Spacious Solidarity Dialogues concluded in 2021, virtual gatherings continued due to second COVID waves and lockdowns, there was a sense of a need of deeper-dives into global abortion stigma movement and stigma-busting practices.

From 2022 onwards, inroads staff facilitated the coming together of member-led spaces around issues of intersectional stigma faced by diverse communities that often get pushed to the sidelines of conversations and decision-making spaces. Due to a scarcity, urgency and either/or mindset even within our abortion movements, abortion stigma faced by LGBTQIA+, disabled and other socially excluded groups often takes the backseat ; it is thought to take up too much space and to not be 'a majority issue', which not only is untrue but also in turn excludes the voices of those most impacted by abortion stigma.

INTRODUCTION

The inroads cohorts therefore intentionally center and resource the voices and experiences of disabled people, queer communities, self-managed abortion accompanantes, doulas and hotline workers. As imagined, each of these cohorts is a diverse, multi-identified and multi-experienced group of people.

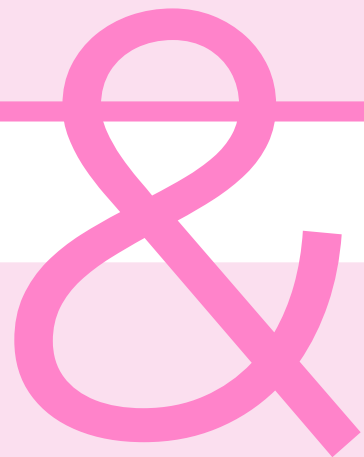
The inroads 'workshop' cohorts are spaces where compensated member-facilitators guide other member-participants through a series of activities, experiences and workshops over the course of a few days or weeks. There is an open-call for facilitators, and facilitators engage with each other over several months to plan out these important spaces and learn from each other in the process. The inroads' 'fellowship' cohorts, on the other hand, are a process where members apply to be fellows, co-create projects and are accompanied by member-advisors. Fellows and advisors are compensated, and honoured for their contributions to the space.

The hope is that through these intimate, deep-dive, collective spaces, we can strengthen the global movement walking to end abortion stigma, towards a future where abortion is normal, a healthcare procedure and everyone can assign the valence or significance to their abortion in the way that they feel to be right.



## UPROOTING

If abortion stigma is rooted like an invasive tree, we can't just pull at the leaves, we must cut the tree down.






## SOWING




We must sow the seeds of the interconnected networks and communities of care we need to bust these intersectional forms of stigma.

# the collective wisdom of the DISABILITY AND ABORTIONS COHORT

## DISABILITY JUSTICE

-  Disability is a social justice issue and not a biomedical issue. Working on busting stigma in ableism is a collective and continuous journey/ process we need to undertake.
-  Disability Justice is also justice for HIV, sex workers, queer, and trans people.
-  Ensure that the autonomy, agency, and attitude of those with disabilities are heard, seen, and hold their rightful place in dismantling stigma.

## CONTEXTS AND EXPERIENCES

-  Disabled people face "Othering" - negative attitudes, shame, sinfulness, weakness, inferiority, ideas of us not being sexually active, not having pleasure, lack of capacity, and maturity.
-  We face lack of confidentiality, abuse, discrimination, control of sexuality, and alone-ness.
-  Internalized stigmas- Due to stigma, many Disabled people do not want to identify as Disabled or continue to operate with an ableist mindset.



# IN CURRENT TIMES, WHO'S VOICE IS CENTERED WHEN TALKING ABOUT DISABILITY AND ABORTION?



Usually, activists/organizations working on disability who do not support abortion or repro justice OR groups working on abortion rights who do not have Disabled people in leadership or access needs for us (no interpretation, etc.).



Church / State / Family members--- who usually work in a discriminatory manner.

## ACCESS



When access, for eg. Interpretation, Sign Language, Reasonable Accommodation, Inclusive Budgeting, Disabled friendly IEC material (in braille, for screen readers, etc., is provided, it needs to be non-stigmatizing, not a favor, anti-patriarchy, reach to people with disabilities, needs to be affordable and needs to be genuinely inclusive.




Beyond access, disabled people need to be in Leadership: Organisations who support disability justice should hire Disabled people in their staff and on their Boards.



We need more training, education, knowledge, funding, and brave sharing spaces on Repro Justice for Disabled People.

An illustration of a woman with dark skin, wearing a blue top and patterned blue pants, holding a blue megaphone. She is positioned in the upper right corner of the page, with a beam of light extending from the megaphone towards the first text box.

## DISABILITY AND THE LAW

 Fetal abnormality clauses in the law are used by anti-abortion groups to argue and create a false narrative that disabled people are anti-abortion (linking abortion and eugenics). This is not true and creates divisions in our movements.

 Even with abortion laws that "legalize" abortion, there are still many access challenges for Disabled people and other marginalized groups.

An illustration of a woman with dark skin, wearing a blue top and patterned blue pants, holding a blue megaphone. She is positioned in the lower left corner of the page, with a beam of light extending from the megaphone towards the second text box.

## DECISION-MAKING, CONSENT, AND DISABILITY

People with disabilities can make their own decisions. Yet, they are often faced with substitute decision-making methods, where someone else speaks/decides for them instead of supported choices. The work of facilitating/accompanying a Disabled person's decision regarding their reproductive rights and abortions needs to be supportive.

## BODILY AUTONOMY

- Stigma maintains the binary between body and mind and immediately labels non-normal bodies/minds as messy.
- Disabled people's bodily autonomy is stigmatized with negative attitudes: Disabled people who can be pregnant are not seen as "good parents" and even more when they are "single parents", They are either seen as sexually over-active/out of control, Disabled people who get pregnant are told to have abortions.
- Service providers, trained in often discriminatory medical education systems, are often stigmatizing or could face stigma themselves if they provide abortions, especially to Disabled people/HIV/ sex workers.

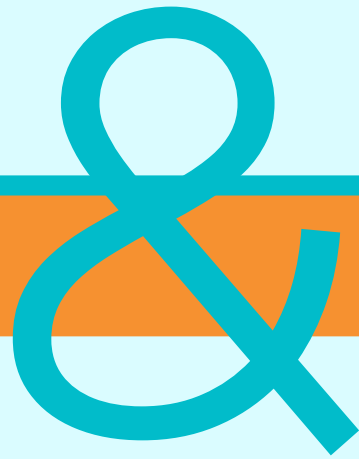
## DISABILITY AND INTERSECTING STIGMAS

- There are so many intersecting barriers for Disabled people and people living with HIV when accessing abortion. People living with HIV, due to high stigma, may have an increased psychological burden leading to other vulnerabilities. Some people living with HIV, who have access to ARV treatment, may reject disabled status and carry self-stigma towards disability.
- People who use Drugs (for example, psychotropic medication for people with psychological illness) or people with HIV (on ARV) are often encouraged not to have medical abortions. There is stigma, and some of it emerges from not having proper medical management information of these intersecting disabilities, which prevents these people from accessing abortions.



## SPACE

We who have abortions don't just want a seat at a table, or a short-term rental of Space. We should have ownership and our voices should lead and be centered.



## BOUNDARIES

Along with ownership, we need boundaries, that are fluid, adapting and shifting, to center our safety, comfort, and needs as well as those of the people we support. Care does not move in one direction; just as we care for others, we also need to receive care.

# the collective wisdom of the ACCOMPANIMENT AND ABORTIONS COHORT

## ACCOMPANIMENT AND SELF-MANAGED ABORTIONS (SMA)



Medical abortion is the most recommended procedure in the early stages of pregnancy for being safe and non-invasive.



Self-managed abortion could mean having the abortion in the comfort of one's home and surrounded by trusted companions.



A companion could be a traditional birth attendants, acompañantes, doulas, friends, neighbours, partners. This work is political: No one should feel alone during an abortion.

## ACCOMPANIMENT IN ABORTION WORK



A soft space to land in hard times: feminist companionship



The ability to:

- Speak freely about abortion.
- Make the abortion experience a loving one.
- Affirm that abortion is not a "bad" decision, but instead a very conscious one.
- To know that the pregnant individual is the only one who can decide what to do for their body.

## FEMINIST-COMPANIONSHIP SUPERPOWERS



Networks! Consisting of acompañantes, doulas, therapists, people with cars, people with homes, pharmacists, friends, and more.



A feminist internet, i.e. the inroads umbrella that empowers, supports, and grows our network.



The inspiration of knowing our shared feminist histories & Openness and tenderness in sharing our lived experiences.

# An abortion companion's guide to dismantling the five levels of abortion stigma



## MASS MEDIA AND CULTURE

We use and interact with media on a daily basis. Acompañantes need to be-aware of media that stigmatizes self-managed abortion through misinformation.

## LEGAL

- Abortion is the only simple medical procedure that has its own set of laws. Abortion laws, in this way, often replicate abortion stigma by implicitly creating stigma within their very existence.
- These laws restrict who gets access, and those who are entitled to refuse abortion to people who do not fall within the scope of legal provisions (eg. age, gestational sizes, mandatory waiting periods, spousal consent).
- Acompañantes should view abortion in the context of love and people: not through the lens of control and power.



## INSTITUTIONAL

Often an abortion is only considered "valid" if it is provided by institutional services. The medicalization of abortion and keeping it within the sphere of medical care is very much connected to stigma.

## COMMUNITY

Need to keep in mind those who are most vulnerable, who don't even make it to seeking services, such as young people, LGBTQIA+ populations.

## INDIVIDUAL

- Has to do with our own thoughts, attitudes, and our own abortion experiences: It is important to realize that abortion companions are not free from abortion stigma, and that it is a process of getting rid of certain thoughts, attitudes, and approaches that we may implicitly hold.
- It is not only about changing the reality around us, but changing our own selves.

## WHAT ARE BOUNDARIES?

- They are not a way of keeping others out, but a way of shoring ourselves up. Just as much about making space for our own safety, comfort, and needs as well as those of the people we support and the folks with.
- Not necessarily fixed, but in constant communication and self-negotiation.
- The first and fundamental expression of self-love: Becoming flexible and malleable, while standing firm in our values and boundaries.

## HOW CAN SELF-EXPLORATION AND REFLECTION HELP US BECOME BETTER SUPPORT PEOPLE?

- The more grounded we are in our own needs, beliefs, and selves, the more capacity we have to support others with theirs.
- Looking at ourselves clearly makes us realize if something invades us in the moment, such as a fear or a bias.
- Supporting ourselves is just as important within the abortion support process. We can't pour from an empty cup.
- Avoiding burnout by receiving the care that we need and having a community of care directly connected to the work that we do.



# HEALTHY BOUNDARIES IN COMPANIONSHIP WORK LOOK LIKE

- ♥ Being clear about our values
- ♥ Being comfortable saying and hearing what our values are
- ♥ Being clear about when a support relationship has come to an end
- ♥ Not giving out personal contact details
- ♥ Not being 'on-call' 24/7
- ♥ Not overpromising on the perfect abortion
- ♥ Having and showing a healthy level of empathy





## DE-SANITIZING

Folks of marginalized histories have to often sanitize their identities to appear acceptable and deserving of respect. In pandemics of sanitization, de-sanitizing is a metaphorical process, which allows for authentic sharing and engagement.






## ABUNDANCE






In lockdowns of distance and rigidity, spaciousness and abundance are antidotes to stigma. We imagine a world where everyone loves, lives, aborts, births, grows with dignity and in the way they wish to.

# the collective wisdom of the QUEER ABORTIONS COHORT

## QUEER STIGMA, ABORTION STIGMA, AND LIBERATION








-  Stigma towards queer bodies and abortions share common root causes, such as the invention of the gender binary. The policing of these norms occur in ways that concentrate power.
-  Queer liberation and abortion justice could share a common agenda and vision – the right to bodily autonomy: to decide how we embody our lives, how we use these bodies, how we move through the world as a body to people and make decisions for ourselves, with our personal and collective freedom of expression.
-  Trans-exclusionary feminism has no place in any of our shared liberations!

## THE STRUCTURES THAT LIMIT BUT TREMBLE

-  Fear: There is a lot of unfounded fear from some folks who feel that funding/advocacy/the table is not big enough to include all folks who have abortions. This fear leads to disappearing or invisibilising a lot of folks at different intersections of our communities.
-  Reductiveness is the idea that we are supposed to be doing certain things due to the capacity of our body parts. Eg. Thinking that people with uteruses MUST reproduce/have children, creating many limits for trans and non binary folks.
-  Majority/Minority: Many times, the argument that the "majority" of folks are cis/het is used as a valid cloak for discomfort/ avoidance for doing better for non cis/het folks.
-  Capitalism: Queerness and abortion freedoms threaten the link between reproduction and production in the labour market and disrupt the myth of the nuclear family.
-  Binaries: The project of our lives is to figure out who we are, beyond idealised binary roles, as well as to respect and get curious about each other in this way.



## LANGUAGE AND INCLUSIVITY

-  A lot of repro groups say "women and girls" without specifying if they are referring to cis or trans folks.
-  Very strict gender binary language and iconography often exists, based on the usage of biomedical language.
-  Choice-based language often does not take into account how "access" is really the issue and is shaped by many intersecting identities.
-  Trans, non-binary, and gender non-conforming people are often tagged on with an awkward asterisk as an afterthought. When large, entrenched orgs DO mention trans/NB/gnc folks, it feels like they're doing it for them, not for us. They're doing it so that they can give the appearance of inclusivity - not because they're functioning inclusively internally.
-  While the gender binary may not be so evident in our mother tongues, we are often confronted when English as a second/non-native language forces us to navigate the gender binary in everyday communications.
-  Words mean things. It should not be considered "messy" or "untidy" or an effort to add or subtract words in order to be more inclusive from our current norms of communication.
-  The current framing often doesn't create spaciousness around abortion experiences. Similarly, there are few spaces that centre queer experiences and care when talking about abortions.

## WISE COMPASSION

- It is important, as queer folks, to acknowledge the feelings towards actions, thoughts, and memories of abortion experiences.
- Wise compassion offers a pathway of channeling our energies to better serve us and our activism.
- Shame and fear, tools of colonialism, are used as tools of isolation.
- Discernment is very important in wise compassion, where boundaries are important and tended to in recognition.
- The connection between rage and tenderness is important and can even be tender itself. It is also sometimes a joy to feel/share rage with our chosen family.

## EMBODIMENT

- Oftentimes, abortions and queer abortions are seen as a political issue.
- The purely political lens of abortions leaves less space for us to feel safe - in all senses of the word - emotionally, physically, in our bodies, and unseen. This is compounded even more for queer folk, especially those who may be more masc-presenting, because they are often not seen as needing care.
- Embodiment in the spaces our bodies occupy, as spiritual, social, sensual beings. Embodiment is in the body, but our energies are much wider. We can't manifest by ourselves, so it is important that embodiment be a communal/collective process.
- Embodiment is an innate feeling of knowing. Experiences of embodiment can even be confrontational in their depth.
- To be queer is to expand our capacity of wholeness in a very fractured world. Abortion, when held with tenderness and in safety, can also support this experience of being ourselves, seeing ourselves and each other, by being closer to ourselves.

# arts And zine-Making

- Zines have always been a political-cultural tool for communal learning and teaching as a practice, especially among queer and trans folks
- Zines was a way of democratizing print-making, expression and ideas of art. They have been about community-organizing and liberation
- Zines exist as a critique and satire of existing modes of content production, publication, and life on a larger scale
- Zines are used to disseminate information, knowing that humans are prone to listen to a story, and to expand methods and formats of communication, using art & journalism
- Zines very deliberately share in all fullness, that people might feel almost confronted with your ideas and what you have to say. Zines resist the sanitization of queer identities and all marginalized identities when we are told to behave “less” marginalized by society’s restrictions

# With love, The Facilitators



**ADITI**



**ALEX**



**AMANDA**



**CARLY**



**DANIELA**



**EMMA**



**ESMA**



**GLADYS**



**GVANTSA**



**IKA**



**JAKKI**



**KAROLINA**



LILIAN



MARIANA



MEDEA



MELISSA



MITRA



NATALIE



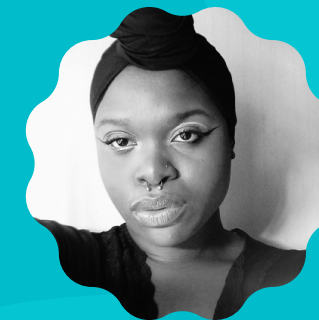
NAOMI



NOHELIA



PHYLIS



SAINT



SANDRA



SHANTAE



SHIKARI



STEFANY



VANE



ZACHI

and all inroads member participants





# GRATITUDE

Our deep gratitude goes to all the magical co-creators building solidarity spaces to strengthen our collective power, to the funders and donors that believe in our community work, and to all the inroads members committed to understanding, challenging, and dismantling abortion stigma to build a healthier, safer, and more just world.

Together we are creating a future where we have the tools to transform systemic, legal, medical, and interpersonal levels of stigma so that people can be free to experience abortion on their own terms.

## RESOURCES FROM THE COHORTS

- [Stigma at the Intersections: Abortion, Disability, and HIV Cohort \(October 2021\)](#)
- [Accompanying Abortions: Busting Stigma in Practice Cohort \(November 2021\)](#)
- [Queer Abortions Cohort \(March 2022\)](#)
- [Read more about our ongoing Artists Busting Abortion Stigma Cohort \(July-October 2022\)](#)

## JOIN US!

**All the powerful ways you can stay connected & support the movement!**

[Join](#) | If you are an individual or group working on abortion access and stigma reduction, apply to be part of a free global network that provides opportunities and resources to help learn, connect, collaborate, gather, and fund stigma-busting efforts worldwide.

[Donate](#) | Every donation allows us to nurture a network of over 2000 abortion advocates and community organizations working on busting abortion stigma in 119

[Stay informed](#) | Subscribe to our mailing list to receive stigma-busting updates every month!



## CREDITS

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## ABOUT INROADS

The International Network for the Reduction of Abortion Discrimination and Stigma (inroads) was launched in 2014 to provide needed and critical community space for those working on abortion stigma-busting efforts. Rooted in a commitment to end abortion stigma and create a world that bends toward care and reproductive justice, inroads works towards freedom for past, present, and future abortion seekers by funding movements and strengthening connections within the global community of abortion advocates, artists, scholars, activists, journalists, community workers, and providers. We envision a world where abortion care is centered around the needs, experiences, leadership, and requirements of those who have them.



**inroads**

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