

CAN YOU KEEP A SECRET?:

Navigating secrecy in qualitative
empirical abortion research

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The LSE logo consists of the letters 'LSE' in white, bold, sans-serif font, centered within a solid red square.

TENSIONS IN ABORTION RESEARCH

There is an inherent tension in conducting abortion research:

- i. navigating secrecy to recruit participants who have terminated a pregnancy,
- ii. maintaining and securing that secrecy, whilst
- iii. avoiding inadvertently stigmatising abortion further by privileging secrecy.



POWER & ABORTION RESEARCH

- ❖ Other qualitative health research- e.g. HIV, has also managed secrecy, stigma, and power
- ❖ Abortion research contends with the gendered, episodic, hidden nature of abortion, and the particularity of abortion stigma

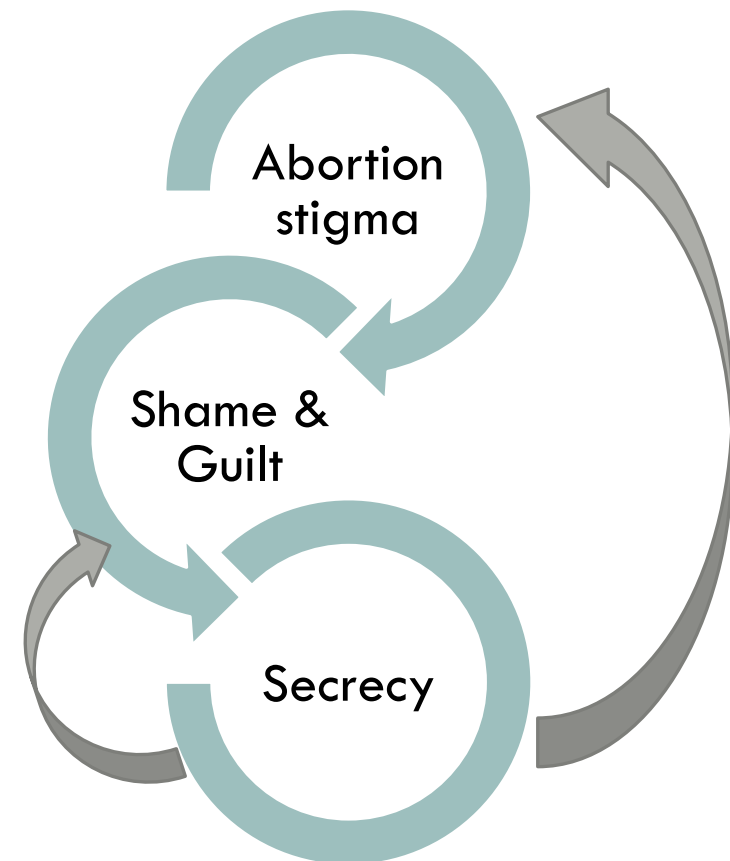


Door with anti-sex selective abortion posters, at a primary health centre

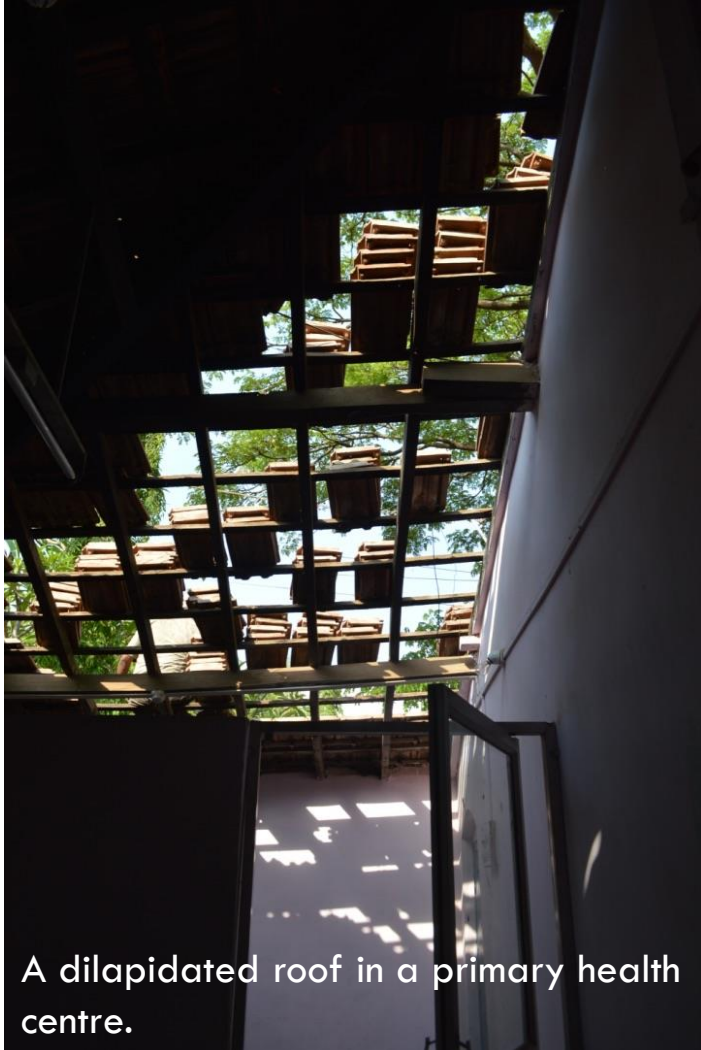
LINKING ABORTION STIGMA & SECRECY

Abortion stigma: a negative attribute ascribed to women seeking abortion, marks them (internally or externally) as inferior to ideals of womanhood

Secrecy: fundamentally social phenomenon, attribute of relationships constructed, negotiated, and maintained by intentional social actors



WHAT'S TRUST GOT TO DO WITH IT?

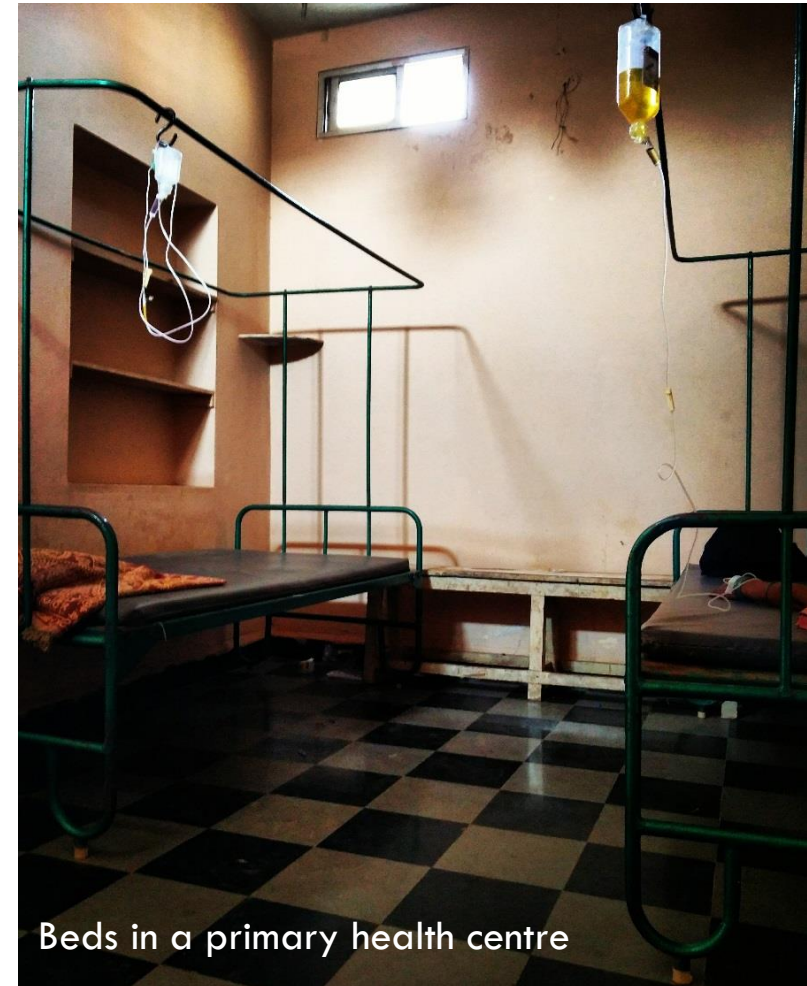


A dilapidated roof in a primary health centre.

- ❖ Researcher roles- affective (sympathetic vs unsympathetic) and cognitive (naive vs informed)
- ❖ Trust-building: implies understanding of context and of common notions governing relationships.
- ❖ So, how do you build trust?

IN PRACTICE...

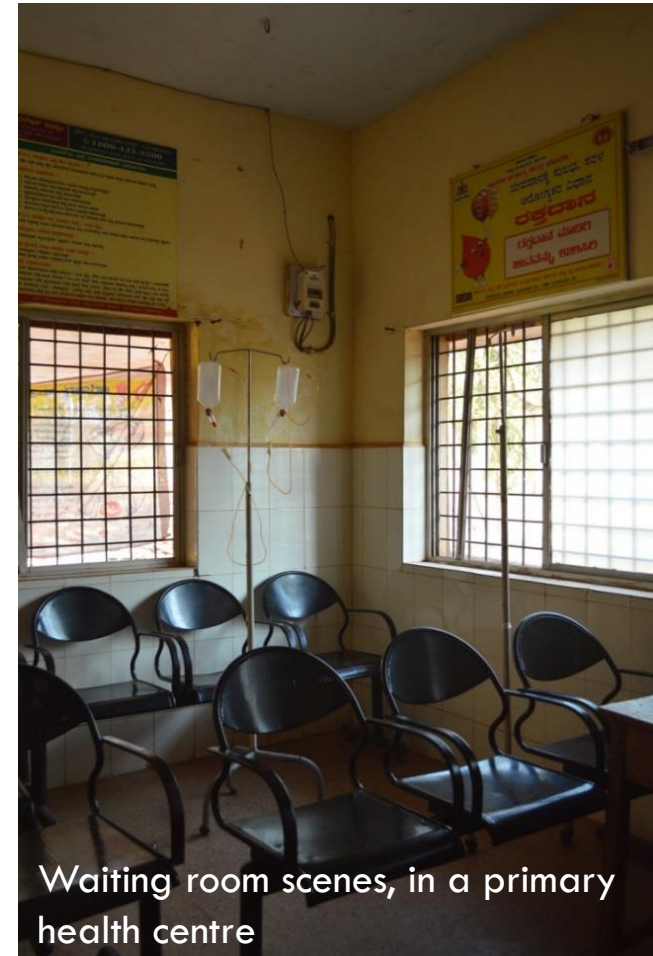
- ❖ Silence & secrecy in recruitment
 - ❖ Timing
- ❖ The spaces to speak
 - ❖ Sites
 - ❖ Centring agency
- ❖ Safeguarding secrecy...
 - ❖ In recruitment
 - ❖ Data management



Beds in a primary health centre

IN PRACTICE...

- ❖ Listening as a methodological tool?
(ref: Dr Mirna Guha)
- ❖ Reflexivity
 - ❖ insider/outsider
 - ❖ the different selves



Waiting room scenes, in a primary health centre

SPEAKING SECRETS

- ❖ Feminist imperative to 'voice'
- ❖ Speaking as relief

My heart feels lighter after talking to you- I didn't speak about it [after the procedure] until you came.



CONCLUSION

- ❖ The impact of stigma and secrecy must be explicitly accounted for in abortion research design
- ❖ Trust-building in abortion research requires a careful understanding of power & position
- ❖ Towards a feminist ethics of research design
 - ❖ A reflexivity of discomfort
 - ❖ Understanding and accounting for the emotional

I heard
abortion and
reproductive
justice is a
baa-sic right!



QUESTIONS/COMMENTS?
THANK YOU.

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