Fiona Bloomer, Claire Pierson and Sylvia Estrada Claudio. Reimagining Global Abortion Politics: A Social Justice Perspective. Bristol, UK: Policy Press, 2020. ISBN:

978-1447340454

Reimagining Global Abortion Politics is an interdisciplinary, feminist interrogation of abortion politics, highlighting how local abortion struggles influence, link with and are shaped by broader (trans)national politics and movements. Offering an overview of the key debates and tensions (safety, legality, and biomedicalisation) in abortion-related policy, research, and activism, it makes a clear and impassioned case for centring the needs and realities of women in reproductive health policies and laws.

Bloomer, Pierson, and Estrada Claudio locate themselves and the book in Reproductive Justice (RJ) [1]. RJ, theory and praxis grounded in US Black feminist approaches, critiques "choice" frames in abortion and reproductive health rights as limiting. RJ encompasses not just the right to contraception and abortion, but the right to have children, and the right to parent and raise families in conditions of one's one choosing. It grounds a social justice approach to reproduction, requiring an interrogation of power and politics- a theme that runs through the book.

The politicisation of abortion is the book's central organising theme: a grappling with abortion histories, movements and counter movements, and the shifting nature of laws, policies and discourses that shape access to care. Bloomer et al., structure the book around key, interrelated themes: criminalisation, biomedicalisation, abortion discourses, international interventions, activism, and RJ. Framing abortion within these interlocking dimensions, the authors use case studies from the Global South and the Global North to interrogate how these deeply personal experiences encounter and are intertwined with the public- and are a matter of public and social policy.

Tracing abortion criminalisation, Bloomer et al., demonstrate how restrictive laws can result in an increase in unsafe abortion, alongside an ever-present threat of criminalisation (of abortion-seekers, their companions, and providers). The case studies of Uruguay and the Republic of Ireland are powerful reflections of how restrictive laws and their impacts are stratified, particularly affecting women who are made vulnerable by socio-economic and structural inequities. For example, before the "Repeal the 8th" referendum, Irish women seeking abortion care travelled to the UK or Europe, which carried a significant financial burden due to cost of travel, accommodation, treatment, loss of pay if requiring time off, or other costs. Those who cannot afford this or are migrants or asylum seekers- requiring additional visas or have travel restrictions, navigate additional barriers in order to access care. Despite legalisation of abortion in Ireland, some women still continue to travel for abortion care [2].

While the book engages with how abortion came to be criminalised and tied to religious positions in Western societies, it overlooks how these laws are part of an enduring colonial legacy. The British Offences Against the Persons Act (OAPA) criminalises abortion in England and Wales (apart from exceptions under the 1967 Abortion Act), for example, remains on the books in several countries including England, The Gambia, Malawi and Jamaica. Exploring the OAPA further in the case studies would have offered additional reflections on how criminalisation became institutionalised in many countries, entrenching anti-abortion laws over time and its links – if any- with colonialism.

The authors' interrogation of the biomedicalisation of abortion, particularly medical abortion (the use of pharmacological drugs to induce abortion), offers an excellent primer on how medical abortion has transformed the abortion landscape, raising new issues and debates. Through the lens of medical abortion, the authors demonstrate how such technology and science- framed as holding immense potential for women's reproductive freedoms- are politicised, influencing State's political positions and priorities (e.g., appeasing an antiabortion lobby), commercial motivations, and knowledge production, all affecting the creation of laws, policies and guidelines.

Bloomer et al., make a strong case for the use of abortion telemedicine and its potential for making abortion more accessible- a particularly prescient observation. During the COVID-19 pandemic, abortion and reproductive health services were constrained by lockdown regulations or travel restrictions. In response, the UK government temporarily allowed medical abortion access via telemedicine and "pills by post", which was extremely effective and well-received-reporting shorter wait times and increased patient satisfaction [3].

Bloomer et al.'s call for abortion telemedicine is set within the continued lack of access to a spectrum of quality abortion care. Their argument mainly focuses on settings where abortion remains restricted. Yet, medical abortion use proliferates even in countries with liberal abortion laws – for example, in India where abortion is available under broad grounds, 73% of all abortions are estimated to be medical abortions occurring outside of healthcare facilities. Engaging further with the nuances of medical abortion, telemedicine, and self-management – and the questions of legality and safety that it raises- would have offered additional understandings of the failures of a biomedical-centred model and its impact on not just access or service provision, but also laws and policies.

The authors reflect on how feminist networks that provide and enable abortion access across borders [and legality] bear the burden and responsibility of criminality. An extremely important point, especially as restrictive abortion laws do not remove the need for abortion and only create more unsafe conditions, and feminist collectives and groups step in where the State has failed. This would have been an opportune moment to reflect further on the immense work of these local and transnational feminist groups to offer alternate models to biomedicalisation, ones that centre a feminist ethics of care- and would have linked well with the book's sections on activism and criminalisation. Greater engagement with race, class, ethnicity, age, and colonialism- amongst other factors- and their interactions with the politics of abortion, safety, reproduction and activism would have more fully demonstrated the potential of RJ as both theory and praxis, lending further weight to the Bloomer et al.'s arguments.

While Social Policy as a discipline has not traditionally directly engaged with abortion and reproductive health policies, the book demonstrates that these policies are mired in questions of access, resources, citizenship, empowerment and education [amongst others]- all key areas of interrogation in the discipline. The book demonstrates how abortion and reproductive health sit at the intersections of social welfare policies and questions of inequalities. It pushes social policy researchers to consider the unintentional impacts of social policies on reproductive health and rights. A recent example of this is in the UK context, where women report that the "two-child benefit cap" influenced their decision to terminate a pregnancy; particularly heighted by job insecurity and precarity during the COVID-19 pandemic. This reveals the unintended consequences of social policies, the overlooking of reproductive rights and justice, and the multiple areas it intersects with (e.g., gender, jobs, financial stability).

Reimagining Global Abortion Politics is a valuable resource for researchers, activists, scholars, and feminists interested in global abortion and reproduction-related politics and policies. It offers an overview of the main debates and tensions (safety, legality, biomedicalisation), key theoretical frameworks, and a clear case for centring the needs and lives of women in the quest of reproductive freedoms. For those working on or researching a range of social inequities in the Global South or Global North, it offers a compelling argument for considering the impact or influence (even unintentionally) of social policies on abortion and reproduction. In the Introduction, Sylvia Estrada Claudio reflects:

[...] political integrity lies not just in refusing to strip our issues of the contexts in which we live, but also in recognising the contexts of others. It is by recognising the convergences and divergences, the parallels that will never meet or the separations that may eventually become unifying that we are best able to forge our strategies (6)

This reflection on the importance of contextualising and localising abortion-politicisations, understandings, strategies, policy formulations- whilst remaining attentive to the convergences and divergences in approaches transnationally is a demonstration of what the book sets out to do and offers a compelling vision for future abortion policy and research. It calls for social policy to engage in these convergences and divergences to understand abortion and reproductive health as mired in inequalities and inequities, and as key areas of inquiry for the discipline.

References

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