

Issue

23

January

2017

Triumph

misinformation?

Shaping stigma:

An analysis of mainstream

print and online news coverage of abortion, 2014–2015

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Access to abortion is fundamental to women and couples' right to self-determination: the right to shape their own reproductive lives and to decide freely if, when and how to have children. In addition, there are well-documented societal benefits when people are able to plan when and whether to have children, such as greater educational attainment, ability to care for other dependents, and increased earning power.¹ It is through access to contraception and safe, legal abortion that women,* their partners, their families and their communities may enjoy their basic rights and reach such benefits.¹

Abortion is one of the most common and safe medical procedures in the United States^{2, 3}: By age 45, nearly one-third of all women in the United States will have had an abortion.⁴ Nearly half of all pregnancies in the U.S. each year are unintended, and four out of 10 of those end in abortion.⁵ Low-income women and women of color are more likely to have abortions than white, high-income women, largely because they experience higher rates of unintended pregnancy and poorer access to contraception.^{6, 7} Research also shows that the majority of Americans support at least some level of access to abortion.⁸

* For the purposes of this report, we use the word(s) "women/woman" in our discussion of how abortion appears in the news. This usage is not meant to exclude people who need and access abortion services but who do not identify as women, such as transgender, genderqueer and gender non-conforming individuals. However, because mainstream news reports on abortion as a cisgender women's issue, the findings and suggestions outlined in this report are in direct relation to this framework.

Hidden behind these facts about abortion is the context in which decisions about abortion are made. Abortion, like all medical decisions, is inherently private, and, therefore, the circumstances around abortion decisions are not typically part of our public conversation. A variety of factors related to families, relationships, communities and economic conditions may play into decisions about when and whether to have children. At the same time, abortion is a highly politicized and controversial issue, and decisions about abortion are portrayed differently in the public sphere than other health or family planning decisions. Adding to an already complex and personal decision, lawmakers across the country have proposed and passed a slew of restrictions on the procedure in recent years,⁹ which affects how and whether women can access abortion at all.

Both women who have abortions and abortion care providers experience stigma in a number of ways, with profound implications for them on a personal level and for our public discourse about the issue.^{10, 11} In fact, almost all those attached to abortion can face stigma, including the journalists who write about it, either in the form of editorial pressure or backlash from their readers.

If abortion is one of the most common and safe medical procedures in the United States,²⁻⁵ why is it still so shrouded in shame, stigma, and controversy? There are many factors, certainly. We suspect one of them is media coverage. In this *Issue*, we examine news coverage of abortion to determine how it might reflect and reinforce stigma.

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Why abortion stigma

The word stigma is used to describe how individual behaviors, attributes or identities can be discrediting for the individual overall, reducing “an individual from a whole person to a tainted, discounted one.”¹² Research has documented how stigma is connected to a number of public health issues, such as mental health, obesity and HIV.¹³

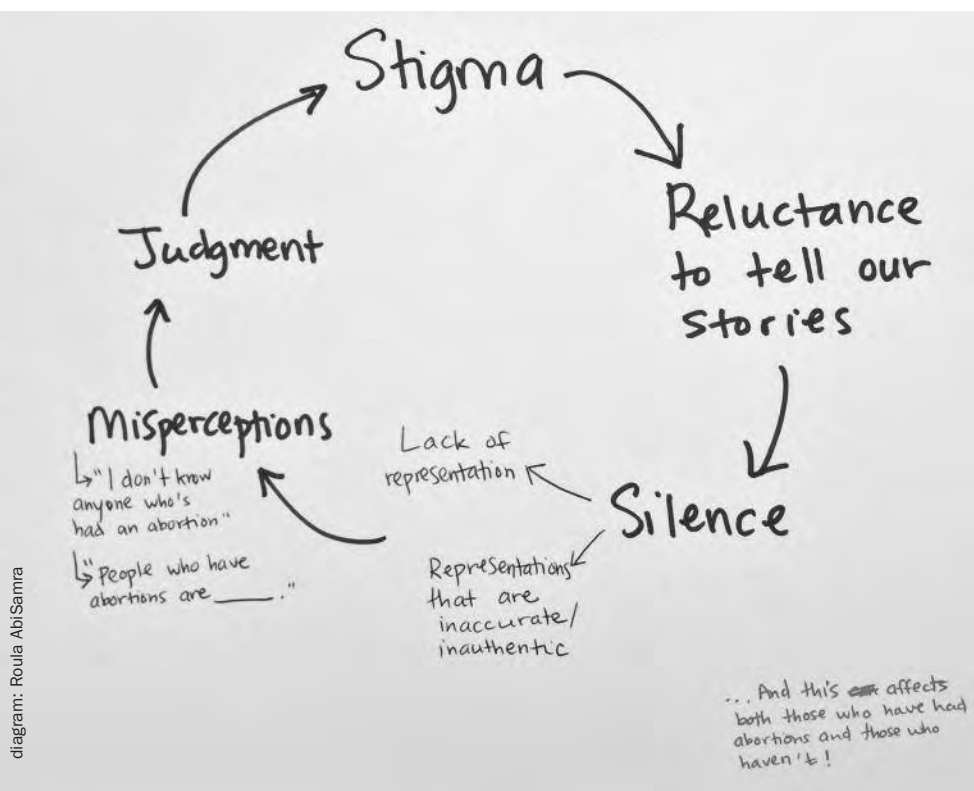
Abortion stigma is a “shared understanding that abortion is morally wrong and/or socially unacceptable.”¹⁰ Like other kinds of stigma, abortion stigma causes some individuals to be labeled as different, associated with negative stereotypes and subjected to status loss, interpersonal negativity and legal discrimination.¹⁴ Women who seek abortion can be shamed and marginalized, and abortion providers are harassed, threatened, and some have even been attacked or killed.¹¹

Fear of judgment (one manifestation of abortion stigma) can prevent people from sharing their abortion experiences with loved ones and others and perpetuates a “mutually reinforcing cycle of silence” in which this exceedingly common and safe procedure comes to be viewed as unusual and deviant.¹⁵ This cycle manifests similarly for abortion providers in what is known as the “legitimacy paradox” — a phenomenon in which providers’ own self-protective silence and self-censorship contributes to the perpetuation of stereotypes of abortion providers as dirty and outside of mainstream medicine.¹⁶

Abortion stigma goes beyond the individual: Women who have abortions and abortion providers not only are subject to interpersonal ostracism but also are targeted by onerous regulation. Structural stigma reverberates throughout society — it’s embodied in laws and policies, present in institutional and community norms, and reinforced in interpersonal communications and in various aspects of the public discourse, such as the popular and news media.^{10, 15} Previous analyses of issues such as mental health and HIV in the news have shown that the media perpetuate stigma by reinforcing negative stereotypes and misperceptions, and by including unsubstantiated judgments and opinion-based condemnations.^{13, 17}

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We wanted to know how the public discourse in mainstream U.S. print and online news portrays abortion, how it comports with the facts about abortion, and how it may reinforce and perpetuate stigma about abortion.



Why the news

News coverage is an important part of the public conversation about public health issues such as abortion. The news sets the agenda for *what* issues people think about and *how* they think about them.¹⁸⁻²¹ News coverage influences both how the public and policymakers perceive an issue and what they think should be done about it. Journalists, editors and op-ed contributors make decisions on a daily basis, consciously or unconsciously, about how to frame issues like abortion.

“Framing” refers to how an issue is portrayed and understood and involves emphasizing certain aspects of an issue to the exclusion of others.²² Frames shape the parameters of public debates by promoting particular definitions of a problem, its causes, its moral aspects and its possible solutions.²² Aspects of framing include the language that’s used, whose perspectives are included or left out, what types of information are highlighted, and the potential solutions that are discussed.

The ways that journalists and their sources frame abortion in news stories can serve either to reduce or reinforce stigma around the issue. As an example, studies about news on mental illness have found that mental illness often appears in the news in conjunction with a report of a dangerous crime or event committed by a person with mental illness.^{17, 23} The news coverage of mental illness may itself be both a reflection and a source of stigma, reinforcing public perceptions of a link between mental illness and dangerousness.

Very little research on how abortion stigma appears in U.S. news coverage has been published in recent years. One study of abortion in the three leading U.S. newspapers found that abortion is covered as a political issue more than a health issue, that women experiencing abortion are rarely present in the public record, and that, to the extent they are mentioned, women are framed as potential victims of abortion as often as they are seen as its beneficiaries.²⁴



A handful of international studies have examined stigma in news coverage of abortion. An analysis of abortion newspaper coverage in Great Britain, for example, found that abortion was presented using predominantly negative language. Furthermore, very little coverage offered alternative framings of abortion as positive or morally valid, and the voices of women who had sought abortion were either absent or marginalized.²⁵ A study analyzing news coverage of abortion in Uganda, where the procedure is illegal, documented the influence of the Catholic Church on media framing, including the dominance of narratives about the sanctity of life and the emotional and physical “agony” suffered by women who underwent abortion.²⁶

Researchers have also analyzed American film and television plotlines that include abortion and found that they disproportionately feature young, white characters and over-represent the risks of abortion, with nearly one in 10 characters who undergo abortions dying as a result of the procedure.^{27, 28} However, it is not known whether these fictional trends are reflected in news reports of abortion.

In this *Issue*, Berkeley Media Studies group partnered with the Sea Change Program to explore how abortion stigma appears in mainstream print and online news and to consider the implications of these portrayals for reproductive health, rights and justice advocates. We also consider implications for journalists interested in telling stories that broaden the narrative around abortion in ways that affirm the range of individuals’ reproductive experiences and reduce shame and stigma.



What we did

We selected 16 news outlets for our sample based on newspaper circulation and online readership data. We opted for these dual criteria because while newspapers continue to drive the agenda for national and local policy debates^{29, 30} and remain a key source of information for the majority of news consumers,³¹ Americans are increasingly accessing the news online.³² We first consulted Pew's 2013 State of the Media report's list of the top 25 national circulating papers. We selected the top 11 papers with the highest print circulation (except for The Wall Street Journal, which we excluded because of its focus on business news).

In order to identify the top news sources by online readership, we referred to the list of the top 24 mainstream media news sources in the U.S. compiled by Media Cloud, a project of the Berkman Center for Internet and Society at Harvard University and the Center for Civic Media at MIT. This list is based on Google Ad Planner data about the number of unique monthly visitors to news outlets' websites. After excluding international news outlets (BBC, etc.) and news outlets mainly focused on financial or technology news, we found five additional news outlets for which archives were publicly available. For a full list of the news sources we included, see the Appendix.

Based on a review of the literature about abortion stigma, and with input from experts in the field, we developed a comprehensive coding instrument to capture the range of ways in which abortion stigma could appear in the news. We set out to analyze the news about abortion through two lenses:

What do we see in the coverage that reflects and/or reinforces stigma?

What do we not see in the coverage, and how do these omissions reflect and/or reinforce stigma?

What do we see?

Based on previous research and conceptual work on abortion stigma, and an analysis of a small sub-set of our sample, we identified five categories or themes of stigmatizing language that might appear in news coverage. These stigma themes manifest either through the explicit perpetuation of myths and stereotypes or through the unspoken implications of certain arguments and representations.

Personifying the embryo or fetus:

Language that humanizes the fetus or embryo and makes invisible the woman sustaining the pregnancy can be stigmatizing.^{11, 15} These representations include language such as “unborn children” or refer to abortion as murder or killing, painting the picture of a fetus as an independent human being. Such portrayals erase the pregnant woman from view, marginalizing her experience. In many cases these portrayals do not directly state that women are murderers, but the unstated implication is that abortion is socially and morally unacceptable, and that by ending a pregnancy, she (along with the abortion provider) takes on the heavily stigmatized identities of murderer, killer and/or sinner. Personifying a fetus is not necessarily stigmatizing in itself. Rather, the language included in this category uses the personification of the fetus as a mechanism to implicate women and providers in murder or other immoral behavior.

Discrediting abortion providers:

Descriptions of abortion providers as dirty, profiteering, unscrupulous or murderous are also stigmatizing. These portrayals directly attack abortion providers, separate them from other health providers and ascribe negative attributes to them.¹⁵

Framing abortion as dangerous:

Statements explicitly or implicitly describing abortion as unregulated and risky can be stigmatizing by contributing to the misperception that abortion is dangerous. These include the idea that restrictions on abortion providers will protect women’s health and safety. While these types of statements do not directly attack abortion providers, they indirectly discredit providers by implying that they regularly put their patients at risk and, consequently, serve to marginalize abortion from other forms of health care.^{11, 33}

Framing abortion as emotionally and psychologically harmful:

Statements or quotations that portray the emotional experience of abortion as exclusively negative, traumatic and damaging can be stigmatizing. These statements imply that guilt, shame and regret are universal responses to the procedure, and that women will perpetually mourn the loss of the pregnancy.¹⁵ This framing of the issue stigmatizes women by portraying them as unwitting victims who lack the ability to make moral choices. In addition, these portrayals imply that women “need motherhood at all times, under all circumstances” and that shame is the only appropriate response to abortion.¹⁵

Assigning negative motivations to women who have abortions:

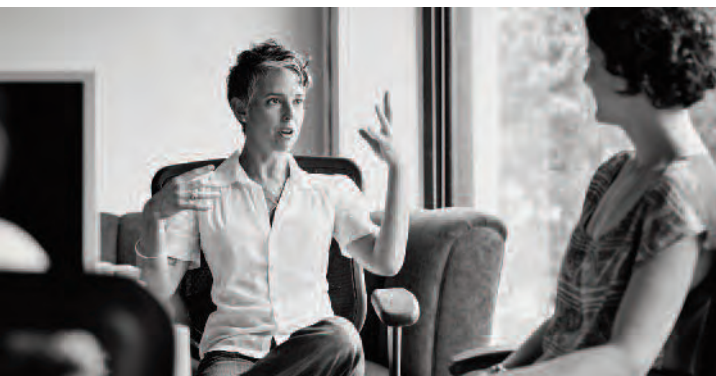
Statements or quotations that assign negative motivations to women who have abortions, most notably accusations of selfishness or irresponsibility, can contribute to stigma. These statements serve to judge and shame women for violating two central norms of femininity: sexual purity and the “nurturing mother.”¹¹



What do we not see?

In addition to identifying these categories of stigmatizing language, we also identified aspects of news coverage whose absence could reflect or reinforce stigma. These included first-person accounts of abortion, information about the public health and social context around abortion, and coverage of innovation or breakthroughs in clinical care or other areas. If personal stories, for example, are absent, it may reinforce stigma by perpetuating the idea that abortion is unusual or by allowing myths and stereotypes to go unchallenged. However, these stories may be absent as a result of stigma in the larger community because people who have personal experiences with abortion may fear harassment or other negative consequences of sharing their stories publicly.

Before coding the full sample, we used an iterative process and statistical test³⁴ to ensure that coders' agreement was not occurring by chance. We achieved an acceptable reliability measure of $>.8$ for each coding variable.



What we found

We identified 2,856 articles that mentioned abortion or related terms at least three times in our selected news sources from 2014-2015. We selected a random, scientific sample of 10% of the identified articles for in-depth analysis. After we eliminated articles that mentioned abortion or abortion-related language only in passing, we had 263 articles to analyze that substantively discussed the issue.

The majority of these were straight news (62%); the rest were opinion pieces such as blogs (13%), op-eds (9%), columns (6%), letters to the editor (6%) or unsigned editorials (4%).

What were articles about?

The majority (51%) of stories on abortion covered court battles over state or federal laws, legislative debates or abortion as an issue in electoral campaigns. Abortion was most often in the news because of **policies to restrict abortion rights**, debates about proposed laws, or legal battles to block policies that had been passed (35% of articles). These were primarily state laws, of which the most frequent news driver was court battles concerning Texas' 2013 HB 2 omnibus abortion bill, which imposed a number of restrictions on abortion providers and was eventually overturned by the Supreme Court in 2016. Other anti-abortion rights policies included federal bills, such as the 2015 Pain Capable Unborn Child Act and the No Taxpayer Funding for Abortion Act, both of which stalled in the Senate, and abortion amendments attached to a 2015 human trafficking bill.

News coverage of **policies to protect abortion rights** (7%) chiefly involved legal challenges to buffer zone laws, which dictate that abortion protesters cannot be within a certain proximity to abortion clinics. Abortion brought up in the context of **elections and political campaigns** constituted an additional 10% of articles.

Coverage of the Center for Medical Progress' **fraudulent Planned Parenthood sting videos** was another leading news hook after their release in the summer of 2015, comprising 20% of articles in our sample.

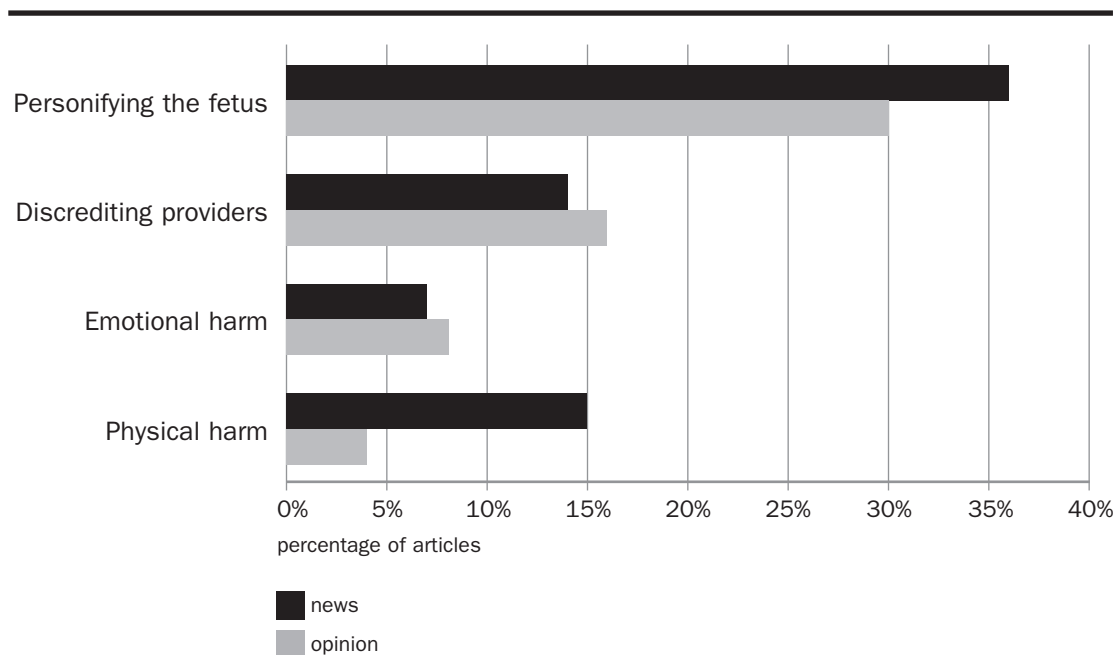
The remainder of stories (29%) focused on a myriad of topics, including the 2015 Colorado Planned Parenthood shooting; Pope Francis' visit to the United States; criminal and civil court cases involving women accusing their partners of forcing them to have abortions or being charged for self-inducing abortions; and pop culture events like the release of the film "Obvious Child," which centered around a woman's abortion experience. Few articles were in the news because of the release of an abortion-related report or survey (3% of articles).

Abortion was most often in the news because of policies to restrict abortion rights.

Stigma: What we see

We saw four main categories of stigma that were most common in the news coverage in our sample: 1) coverage that personified the embryo or fetus and made invisible the woman sustaining the pregnancy; 2) coverage that directly discredited abortion providers by characterizing them as murderous, unscrupulous or profiteering; 3) coverage that framed abortion as dangerous; and 4) coverage that framed abortion as emotionally and psychologically harmful. We also looked for coverage that assigned negative motivations to women who have abortions or labeled them as selfish or irresponsible, but instances of these statements were rare.

**Stigma themes present in U.S. newspaper and online news about abortion, 2014-2015
(n=263)**



Half of the stories in our sample contained at least one of these examples of stigmatizing language. Furthermore, the more times a news article mentioned abortion, the more likely it was to contain a stigmatizing quote or statement. Sixty-three percent of articles that mentioned abortion more than five times contained stigmatizing quotes or statements, as did 89% of articles that mentioned abortion more than 10 times. Among opinion coverage, stigmatizing quotes or statements were most prevalent in stories that opposed abortion rights, but 25% of opinion pieces that supported abortion rights also contained stigmatizing language. Many of these stigmatizing statements were quotes or attributions from elected officials and anti-abortion rights advocates, although a third of that language came directly from the pro-abortion rights authors of the opinion pieces themselves.

The most common of these themes was the personification of the fetus, with the implication that women and/or abortion providers were engaging in murder, killing or other immoral behavior.¹¹ This type of language was present in just over a third of articles in our sample (36% of news articles, 30% of opinion articles). This framing of the fetus as an independent person — and the resulting moral judgment about abortion — can be seen in statements such as those made by Cardinal Francis George, who was quoted in a 2014 New York Times story: “The common good can never be adequately incarnated in any society when those waiting to be born can be legally killed at will.”³⁵ Arguments and language referring to the sentient humanity of a fetus were captured in this theme, as exemplified by statements made by Fordham University professor Charles Camosy, who wrote about the “dignity and value” of “[p]renatal children” in an op-ed for the Los Angeles Times.³⁶

Statements that directly discredited providers by accusing them of using abortion to make money or referring to them as murderers or otherwise immoral actors appeared in 15% of articles. These statements appeared with roughly equal frequency in news and opinion articles, and were most frequently tied to the Center for Medical Progress’ fraudulent Planned Parenthood videos. Quoted in The New York Times in September 2015, New Jersey Governor Chris Christie stated, for example, “[Planned Parenthood] is engaged in the ‘systematic murder of children in the womb’ in order to sell body parts.”³⁷

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stigmatizing quote or statement.*

Despite being one of the safest medical procedures, more than one-tenth of articles framed abortion as dangerous, implicitly or explicitly evoking the idea that abortion is unsafe or risky for women's health. This type of stigmatizing language appeared more often in news stories than opinion stories (15% of news stories, 4% of opinion stories). These statements appeared in over half of news stories about Texas law HB 2 and in 79% of all articles about state laws calling for increased regulation of abortion facilities and providers. In a 2014 CNN.com piece reporting on the federal appeals court upholding of HB 2, Lauren Bean, a spokeswoman for the Texas Attorney General's office, states, for example, "This decision is a vindication of the careful deliberation by the Texas legislature to craft a law to protect the health and safety of Texas women."³⁸

Rhetoric that framed abortion as emotionally and psychologically harmful was present in 7% of articles. These portrayals do not comport with research, which indicates that while some women have mixed or negative feelings, many also report relief or other positive emotions following the procedure.^{39, 40} Furthermore, the vast majority of women who have an abortion report feeling that the decision was right for them, both immediately following the procedure and in the years following.³⁹ News and opinion stories that mentioned women's emotional experience of abortion tended to emphasize negative emotional and psychological effects, as in a Los Angeles Times piece in which Pope Francis is quoted saying, "I have met so many women who bear in their heart the scar of this agonizing and painful decision."⁴¹

We also coded for language that assigned negative motivations to women that have abortions, such as statements implying that women who have abortions are selfish or irresponsible, but these types of arguments were rare, appearing in only 1% of articles.

Impact of the Center for Medical Progress videos

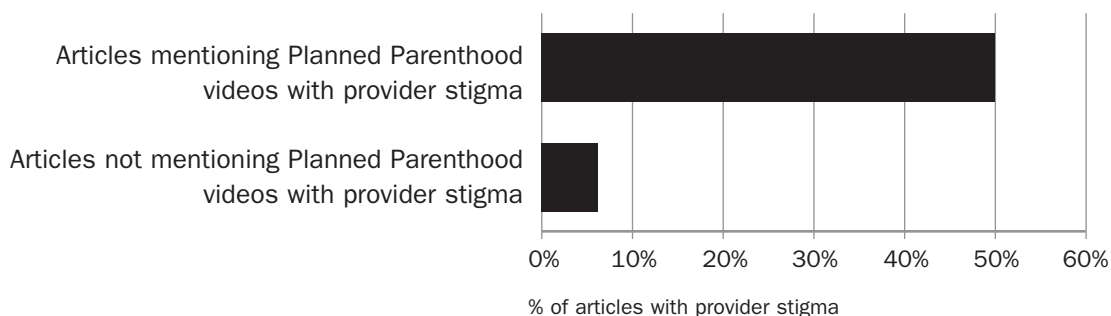
In 2015, an anti-abortion organization called the Center for Medical Progress released several videos of secretly recorded conversations with Planned Parenthood providers, obtained when activists from the Center for Medical Progress posed as representatives of a fictional company interested in obtaining donated fetal tissue for research. Examining fetal tissue is a common practice that enables researchers to investigate a range of infectious and chronic diseases. Fetal tissue is donated, and money exchanged between providers of abortion and researchers to cover the costs of procuring and preparing the tissue.^{42, 43}

The videos — which were found to have been deceptively edited and fraudulent by 12 separate state investigations and four congressional inquiries — purported to show Planned Parenthood officials negotiating the sale of fetal tissue, a practice which is illegal.⁴⁴

Anti-abortion rights advocates used the media attention generated by the videos to promote an anti-abortion policy agenda, one primarily concerned with stripping Planned Parenthood of Medicaid funding for sexual and reproductive health services. Senator Rand Paul exemplified this exploitation in a July 2015 CNN article: “Whether it’s against the law or not, my goodness, I think everybody in America is horrified by this, and they don’t want their tax dollars going to this group.”⁴⁵

This campaign by the Center for Medical Progress was very effective at increasing the volume of news and opinion coverage of abortion, negatively changing the discourse about abortion and amplifying language and themes that stigmatize abortion providers. Half of the articles that mentioned the Center for Medical Progress videos contained language that directly discredited providers, versus only 6% of other articles. Before the release of the videos, 7% of articles in our sample contained language or themes that stigmatized abortion providers. However, after the release of the Center for Medical Progress videos, articles containing this type of stigma jumped to 28%. Stigmatizing language and arguments that elevated the fetus and made the woman invisible, or that discussed abortion harming women physically or emotionally, did not substantially increase during that time.

How many articles about the Planned Parenthood videos contained abortion stigma against abortion providers vs. those not about the videos, in U.S. news about abortion, 2014–2015?



There was also a divide between how abortion rights opponents and supporters used values-based messages about the issue, and this divide persisted across news and opinion articles. In articles about the videos, abortion rights opponents used strongly worded appeals that evoked deeply held values about good and evil, killing, punishing bad actors and protecting the innocent. Abortion rights opponents framed abortion providers as unscrupulous, profiteering murderers (60%) and the procedure itself as murder (27%) or as an immoral practice (11%). A typical impassioned argument came from Arkansas Governor Mike Huckabee, quoted on CNN saying, "Harvesting human organs to be sold like brake pads for a Buick is beyond barbaric. It's immoral, grotesque, & evil."⁴⁶

In contrast to these strongly worded appeals to values, abortion rights supporters' statements were largely defensive; they made few arguments that would destigmatize abortion or tie it to commonly held values. Instead, they focused on debunking the false claims made by the Center for Medical Progress, characterizing them as deceitful and misleading (40% of arguments), as when a Planned Parenthood spokesperson said, "This campaign by anti-abortion extremists is nothing less than a fraud, intended to deceive the public with patently false claims."⁴⁷

Abortion rights supporters also used defensive arguments that critiqued specific proposed policies, arguing that cutting Medicaid funds to Planned Parenthood would reduce access to other, non-abortion health services (29%). They sometimes asserted that access to abortion was a right (11%). However, statements appealing to other values that support abortion rights and arguments that specifically describe the benefits/importance of abortion access were almost entirely absent in coverage of the videos. These types of statements were not frequently seen in coverage overall, but were even less common in coverage of the videos. Statements that explicitly speak to the morality or value of abortion itself, for example, were almost completely absent, and statements framing abortion as a responsible or moral choice were far less common in articles about the Center for Medical Progress videos than in other coverage.

Furthermore, pro-abortion rights advocates and elected officials often countered attempts to remove Planned Parenthood's Medicaid funding by highlighting the range of health services that Planned Parenthood provides and pointing out that federal tax dollars do not pay for abortion. For example, a San Jose Mercury News editorial argued, "[N]ot a penny of federal money awarded to Planned Parenthood pays for abortions, which represent only 3 percent of its work. Tax dollars support pregnancy testing, prenatal care, pediatrics and adult primary health care, STD testing and treatment, and HIV testing and cancer screening."⁴⁸ While these facts are important, this framing of the issue might have the unfortunate effect of perpetuating abortion stigma by framing abortion as separate from the needed health services offered at Planned Parenthood. The choice to avoid talking about abortion in their response could be seen as an example of the aforementioned legitimacy paradox, where silence and self-censorship on the part of abortion providers (as a result of stigma) contribute to the perpetuation of abortion stigma. It also puts Planned Parenthood on the defensive, thus elevating the opposing frame.

Stigma: What we don't see

In addition to examining stigmatizing language and themes in news coverage, we also identified information and story elements that have the potential to reduce stigma about abortion, including 1) information about the public health and social context for abortion and 2) personal accounts from women and men about their abortion experiences.

Information about abortion

Abortion is a very common medical procedure,³ but few opinion pieces and even fewer news stories noted this fact (1% of news stories, 6% of opinion stories). In addition, we know that media representation mainly portrays abortion as a procedure only obtained by childless, young women,²⁸ and news coverage may work to reinforce this misconception: Almost none of the coverage mentioned that most women who have abortions are mothers (0% of news stories, 1% of opinion stories), and that most are not teenagers (1% of news stories, 1% of opinion stories).⁴⁹

What percentage of news and opinion articles in mainstream print and online news coverage included public health information about abortion in U.S. news, 2014-2015? (n=263)

Public health information about abortion	News	Opinion
The safety of abortion	2%	8%
Abortion as a part of normal reproductive healthcare	1%	2%
Public support for abortion	0%	7%
Prevalence of abortion	1%	6%
Most women who have abortions are not teens	1%	1%
Most women who have abortions are mothers	0%	1%
Historical presence of abortion	0%	1%

Abortion is also one of the safest medical procedures, particularly early in a pregnancy, when most abortions occur.⁵⁰ However, only 2% of news articles and 8% of opinion articles mentioned that abortion is safe or cited research or statistics to that effect. Policies to restrict abortion based on alleged health risks were a prominent subject of news coverage in our sample, but they rarely included information about the safety of abortion. For example, among news stories about state-level policies to restrict abortion, most of which targeted abortion providers based on the premise of increasing the safety of the procedure, only 7% of news articles contained any factual statements about the safety of the procedure as currently practiced. Opinion articles about these policies were much more likely to include facts or information about the safety of abortion (19% of articles). Abortion was also only discussed as a part of reproductive health care in a handful of articles, most of which profiled or were written by doctors who perform the procedure.

Public polling indicates that the majority of Americans support at least some level of abortion rights and have for decades.⁸ However, the level of public support for abortion access was mentioned in none of the news articles in our sample, and only 7% of opinion articles. Similarly, the historical and enduring presence of abortion in the U.S. was never mentioned in news articles and appeared in only 1% of opinion articles.

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Personal abortion stories

Our analysis found that individual stories about someone having an abortion were present in only 8% of the articles in our sample. In less than 3% of all articles (9 articles) did a woman disclose her abortion experience using her full name. Out of these nine women who shared their abortion experience, five were obtained for reasons far from the norm.⁵¹ Two women disclosed their abortions in the context of lawsuits, alleging that their partners had forced them to have abortions. Two had abortions for health reasons, and one was due to rape. These accounts, while important for increasing the amount of women's real abortion experiences featured in the news, are not representative of the most common reasons why most women decide to have abortions: because having a baby would interfere with the woman's education or work goals, because of financial inability to provide for a child, or because another child would inhibit them from caring for children they already have.⁵¹

The majority of women who disclosed their abortions in the news were public figures, such as politicians (n=3), actresses (n=1) and organizational leaders (n=1), and these women were overwhelmingly older and white. Most disclosures from public figures involved statistically rare circumstance for abortion, such as for medical reasons or rape. A 2014 Los Angeles Times piece detailing Wendy Davis' memoir recounts that "[m]edical diagnoses and her belief that the fetus was already suffering led Davis and her then-husband to abort the pregnancy."⁵²

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Everyday women disclosing their abortion experiences were even more rare. We found only two such stories — less than 1% of our sample — in which women who were not public figures used their full name and disclosed that they had had or were seeking an abortion. Personal narratives from women of color were completely absent from the news.

Also rare were women describing positive emotions that are common after abortion, such as feelings of relief and confidence about their decision.^{39, 40} In one of the few examples of this, in a letter to the editor published in *The New York Times*, Cally Gottlieb King of Wooster, Ohio, disclosed an abortion she had in the 1970s: “As a young woman who ineffectively used birth control resulting in an unwanted and frighteningly unsupported pregnancy, I am happy I was able to end the pregnancy at an early stage.”³⁵ In an article published in *The Huffington Post*, Planned Parenthood president Cecile Richards states: “It [abortion] was the right decision for me and my husband, and it wasn’t a difficult decision.”⁵³

Several of the women who disclosed their abortions mentioned their reluctance to share their story, a possible signal of perceived stigma. Actress Swoosie Kurtz, while being interviewed by HuffPost Live, mentions that her abortion was the one thing she never told her mother, saying “I just couldn’t. I don’t know why. I just couldn’t at that point.”⁵⁴ Similarly, Cecile Richards recalls, “Before becoming president of Planned Parenthood I hadn’t really talked about it beyond family and close friends.”⁵³



Summary

Our analysis suggests that current mainstream news coverage presents a picture of abortion in the United States that reinforces and reflects stigma in several ways. We found that abortion was most often in the news because of court battles over state or federal laws, legislative debates or electoral campaigns during which abortion was debated. Consequently, abortion emerged as a controversial, highly politicized issue distant from the realm of public health and the daily lives of millions of women and their families.

Empirical information about abortion could have helped frame abortion as a health care issue, but it was virtually absent from news coverage. This absence also reinforced stigmatizing frames by leaving readers to (mistakenly) think that abortion is dangerous, rare, not a part of normal reproductive health care, and only something undertaken by childless women and teens. Although one of the main tenets of news reporting is presenting a whole-sale and unbiased account of the facts, such information about abortion was rarely provided in news articles. Instead, the majority of factual abortion information appeared in opinion articles, suggesting that abortion rights advocates may know they have work to do in correcting the record.

Explicitly stigmatizing language regularly appeared in the news, which was dominated by arguments and language that referred to abortion as murder; characterized it as harmful to women; and that described abortion providers and advocates as murderous, unscrupulous and profiteering. In fact, the more in-depth coverage of abortion was, the more likely it was to include stigmatizing language. In the case of the Center for Medical Progress' Planned Parenthood videos, the anti-abortion rights movement was particularly effective at staging a media campaign that allowed them to leverage abortion stigma in the news.

When women share their personal experience of abortion, they help to destigmatize and renormalize the process. However, the news rarely contained abortion stories from everyday women, and when stories did appear, they rarely focused on the reasons why people most commonly seek abortion.⁵¹ This absence creates a vacuum that enables individuals and interest groups who lack personal experience with the issue to control the discourse. The absence of real-life abortion stories could also foster stigma by reinforcing the false assumption that abortion is rare. The tendency of news coverage to over-emphasize abortion undertaken for rare or tragic reasons also misrepresents the experiences of the majority of women who have abortions. Women who have abortions for the most common reasons may then inaccurately assume their experience is unusual, and in thinking so, may then participate in the mutually reinforcing cycle of silence. Furthermore, we found few instances of women describing positive experiences with abortion, such as their experiences of relief or acceptance after the procedure. This may be due to societal expectations that dictate that only sad or regretful reactions to abortion be considered valid.

Our findings lay the foundation for an ongoing effort to eliminate the stigma surrounding abortion. With an eye toward filling the gaps in the public discourse, we present recommendations for advocates and journalists to aid them in creating and sustaining a future in which abortion is seen by the public and policymakers — and presented in the news media — as a normal part of reproductive health care and family life.

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renormalize the process.*

Recommendations for advocates

To reduce abortion stigma in news coverage, advocates will have to find ways to tell timely, compelling stories about abortion through the lens of public health and lived experiences. Our analysis of abortion stigma in the news suggests several ways for advocates to help reporters tell stories about abortion to create and sustain a discourse that minimizes stigma. In these recommendations, we do not attempt to provide a detailed blueprint for advocates' communications strategies on this issue; rather, we provide a framework that advocates can use as they work together to develop media strategies to reduce stigma.

Specifically, advocates can:

Create news that counters stigma and widens the frame.

The videos released by the Center for Medical Progress illustrated the power of generating media coverage to shift the discourse around abortion and advance a policy agenda. How can abortion rights advocates leverage that power to instead create news that reduces stigma? Abortion rights supporters won't be deceitful and unscrupulous to generate news attention. Instead, they must do the hard work of media advocacy, including finding novel ways to create news and "piggyback" on breaking news, in ways that minimize stigma, elevate reproductive justice and expand the range of stories about abortion.

Advocates can release studies, create community events, give awards or find other newsworthy ways to bring attention to reproductive health, rights and justice, and the need for reproductive freedom. If something good is happening, reporters need to know about that, too. Our study found only two articles, for example, that were in the news because an organization supportive of abortion rights had released

a report or the results of a survey, which signals a missed opportunity for advocates to frame the debate and take control of the discourse. In addition, advocates might create mechanisms that provide opportunities for regular and sustained coverage of abortion, such as annual reports or celebrations on topics that invite women to tell their stories and be counted among the millions who have exercised their reproductive rights. There are examples of this from other fields, as when the Annie E. Casey Foundation developed Kids Count, which creates annual opportunities for news about children's policy issues nationally and in every state.⁵⁵

Even when the news about abortion is problematic, advocates can take advantage of the groundswell of media attention to shift the conversation. They must be ready to piggyback off of the attention and respond to current stories with strong, timely comments and actions that move the conversation away from stigmatizing frames toward narratives that reinforce the public health context of abortion, humanize women's individual choices and connect to shared values.

Throughout all their efforts, advocates should make sure that coverage reflects the lived experience of those who have undergone or been personally affected by abortion, so that the discourse is not dominated by people and interest groups who lack personal experience with the issue. Advocates should support people who have had abortions in sharing their abortion stories. They can do this by providing media training, safety recommendations and by following up with storytellers after they've shared their story and connecting them to emotional support resources.⁵⁶ They can also help train these storytellers to widen the frame, connecting their personal narrative to the experiences of others and to larger societal structures that stigmatize and constrain abortion and reproductive freedom.



Connect abortion rights with shared values.

No matter how important the policy or solid the data, communicating about only facts and figures is almost sure to lose audiences — and unfortunately, much of the discourse around the fight to protect abortion rights tends to center on the nuts and bolts of policy decisions and scientific data. To help people connect with the issue of abortion access and why it matters, advocates need to voice shared values and link them to abortion. These can be values in the context of the individual, such as agency and self-determination. Or they can be values illustrating that when women and their partners can decide if, when and how to have children, it strengthens families and communities. Abortion decisions don't take place in a vacuum; women and their partners make reproductive decisions in the context of community and family life, considering, for example, their ability to support and care for their children and many other personal factors. Expressing these sorts of values will help people connect the facts about abortion with broader issues like health, family and community — the rich fabric of people's lives that should be fully supported. This may be easier to do when advocates are able to proactively generate news coverage, rather than when they respond to attacks on abortion access.

Message testing could be one way to investigate different approaches for tying abortion access to shared values. While many organizations already undertake message testing to promote support for abortion access, there are opportunities to heighten this work, to develop messages that specifically counter abortion stigma and to get better at message consistency across organizations. Abortion rights groups should ask themselves the following questions when considering how to scale up their message testing efforts:

- 1** Have they shared their intent to test messages, their methodology and the results with groups that are working toward common goals?
- 2** Are they considering their messages from a shared frame?
- 3** Is countering stigma a shared goal? If so, how can the messages be reconsidered through the lens of reducing stigma?
- 4** Are they providing training in incorporating the lessons from message testing into their materials and into responses to questions from journalists and policymakers?

Build relationships with journalists.

It will be easier to get accurate information to journalists if they already know advocates. It's important to build relationships with reporters, producers, bloggers and other media professionals so they come to see advocates as a valued source of information about abortion access and reproductive justice. Journalists can incorporate diverse perspectives on abortion into their stories only if they are familiar with a range of advocates, their resources and their networks. If advocates become trusted sources, reporters have somewhere to go for data and information when they have a story to tell about abortion issues.

Advocates can also connect journalists with sources whose experiences are often left out of the narrative, such as, for example, people who are willing to talk about their personal experience with abortion.

To build and sustain relationships with journalists over time, advocates can:

Connect with journalists on social media.

Contacting journalists over Twitter, for example, has become an effective method of developing and maintaining relationships, as journalists increasingly rely on social media platforms to get ideas for stories and to make connections with possible sources. Follow the reporter you are interested in and then send a private message to let them know you have story ideas and information.

Position yourself as a go-to source.

Journalists work under tight deadlines. Developing a reputation for being able to provide timely and well-prepared comments will aid in developing strong relationships with reporters. Give them your mobile number. Be available and quick to respond.

Give feedback.

Another way to build relationships with journalists is to provide consistent feedback on their reporting, particularly when you feel that they have done something well. They often hear from people who don't like their stories but rarely from those who do like them. Let reporters know when they hit the mark with a comprehensive piece or a fresh angle.

Provide reporters with accurate information about abortion.

The news rarely includes accurate data about the public health context for abortion. We seldom saw, for example, data on the prevalence and safety of abortion or the characteristics of women who seek abortions. This public health context is critical for helping the public and policymakers understand the realities of what abortion is and why access to abortion matters. When this context is absent from news stories, it creates a vacuum that can be filled with incorrect or stigmatizing information from the opposition. Despite the popular saying, data don't speak for themselves: Facts and figures need to be framed in the context of values to help make them meaningful. However, once a values-based frame has been cued, data can help reinforce the argument.

It's imperative, then, that advocates provide journalists with accurate, up-to-date facts about the realities of abortion — and that they present that information in a concise, clear format that is easy for reporters to incorporate into their stories. When information is outdated, it loses its news value, so providing the most current data and alerting reporters to changes will increase the likelihood that reporters can use it in stories.

The first step in being able to provide accurate information is, as discussed above, building solid relationships with reporters. Advocates may also wish to consider broader strategies to educate journalists about the issue of abortion and the impact of media portrayals on abortion stigma, such as developing relationships with journalists who are just beginning their careers through connections with journalism schools, sponsoring fellowships or developing curricula and guidelines for reporting on stigmatized issues, such as abortion. Advocates could also convene journalists for policy or research updates that have implications for stigma, or for other educational opportunities. A regular “reporters’ breakfast” can be a forum for delivering new information and deepening relationships.

Avoid reinforcing anti-abortion arguments.

In his book “Don’t Think of an Elephant,” cognitive linguist George Lakoff points out that invoking an elephant — even if only to tell someone “Don’t think of an elephant!” — makes the listener immediately think of one. The implications for framing and communicating effectively are clear: When we raise our opposition’s arguments, even if only to refute them, we unintentionally create barriers to conveying our own messages.

News about abortion contains many such “elephant triggers.”⁵⁷ We found one-quarter of opinion pieces in support of abortion rights either reiterated opposition frames, as when Huffington Post contributor Peter Van Buren characterized anti-abortion rights advocates’ goals as “attempts to grant legal personhood to unborn children” in a piece arguing for safe and legal abortion in Mississippi.⁵⁸ Other articles included language that framed abortion as a universally difficult or damaging process. For example, a letter to the editor published in the San Jose Mercury News in support of a woman’s right to choose calls that choice a “heartbreaking decision.”^{59, 60} Women have a range of emotional responses to abortion, but they are not all evident in news coverage.^{39, 40} When abortion rights supporters and others only discuss the negative or mixed emotions that can accompany abortion, they obscure the experiences of the majority of women who experience relief, confidence that their decision was right for them, and other positive and affirming experiences. The prevalence of these triggers is perhaps not surprising, since pro-choice advocates often find themselves in a defensive or reactive position when talking with reporters. Regardless, advocates should avoid the elephant trigger trap so they don’t unintentionally reinforce opposition frames.

Recommendations for journalists

Our analysis suggests many reasons for optimism: The news about abortion is largely free of language that explicitly shames women or implies that abortion is a selfish act. However, there remain a number of ways for journalists to expand the coverage and tell more complete and accurate stories that minimize abortion stigma. Specifically, reporters can:

Provide public health and social context about abortion and the range of people affected.

Stories about abortion in the news rarely include basic public health information about abortion. Therefore, the public and policymakers may misunderstand abortion's frequency and safety. Reporters can improve understanding of abortion by including accurate, timely data about, for example, the prevalence and safety of abortion and the public's support of abortion. The more these facts are repeated and validated, the better the public and policymakers will understand the issue, and the lower the potential will be for confusion or promulgation of harmful misinformation.

Reporters should also expand abortion coverage so the public and policymakers understand the demographics of women who get abortions. Current coverage tends to focus on the experiences of white communities and young women, but women of color are more likely to have abortions than white women, and the majority of women who get abortions are adult mothers, not teenagers.⁶¹ If one's only source of information about abortion came from news coverage, it's likely that person would have a very distorted view of the issue. Only when the public and policymakers are aware of the range of people affected by abortion can they begin to understand the full impact of anti-abortion rights policies and rhetoric.

Elevate the experiences of women and their partners who have experienced abortion.

One way to bring the realities of abortion to the fore and reduce the stigma that surrounds it is to include the stories of women who have had abortions. These “authentic voices” provide invaluable contributions to the public narrative around abortion and reproductive justice. The fact that abortion is stigmatized may well keep women shy of reporters so it can be challenging to find and interview these sources, which may explain their relative absence from the coverage. Reporters could connect with medical providers, reproductive justice groups or advocacy organizations to find willing authentic voices. These groups can often quickly connect reporters with diverse sources, such as women (including women of color) who have experienced abortions. Organizations that specialize in developing, training and supporting abortion storytellers, such as Advocates for Youth and We Testify, are especially valuable resources for connecting journalists with women who have had abortions.

When speaking with these sources, journalists can ask questions that bring to light aspects of the abortion experience that are currently not present in news coverage. Stigma itself should be a legitimate part of news stories. When reporting on the impact of abortion policies (such as ultrasound viewing, buffer laws or fetal burial policies), it could be valuable to ask women questions about how the policies affected their experience, including experiences of shame, judgment and ostracism. Reporters might also investigate stigma by comparing the experiences in places with different levels of access to abortion.

Include abortion in stories about women’s health and health care.

Abortion is not just a political and moral issue — it is also a health issue. However, it’s easy for the public and policy makers to lose sight of that fact when abortion is only covered in the news because of policy or court battles. To tell a complete story about abortion, journalists should report on abortion not just as a political and moral issue, but also as an issue of public health and health care. In our sample, we found no examples of articles primarily discussing abortion as a health care issue or discussing clinical aspects of abortion care, such as new innovations or breakthroughs. Abortion is linked to many issues in women’s health, such as contraception, sexuality and pregnancy. When journalists make those connections clear, it will provide a more complete picture of U.S. women’s reproductive health and health care.

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Appendix: News Sources

CNN.com^A

MSNBC.com^A

The Huffington Post^A

Newsweek^A

San Francisco Chronicle^A

The Boston Globe^A

USA Today^{A, B}

The New York Times^{A, B}

Los Angeles Times^{A, B}

New York Daily News^{A, B}

The New York Post^{A, B}

The Washington Post^B

San Jose Mercury News^B

Chicago-Sun Times^B

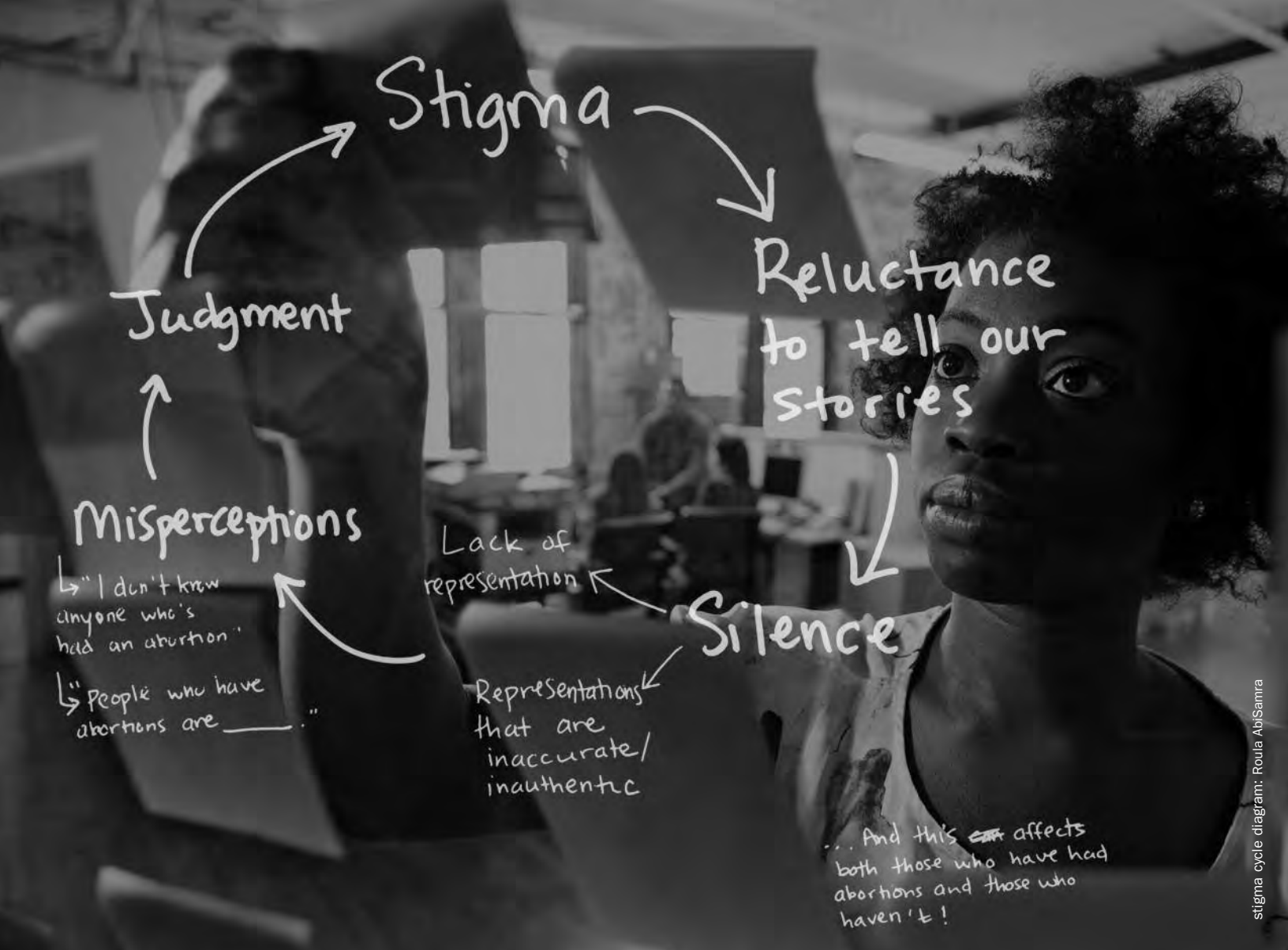
Denver Post^B

Chicago Tribune^B

Dallas Morning News^B

^A Media Cloud Top 24 Mainstream Media News Sources

^B Pew Top 25 Circulating Papers 2013



Issue 23 was written by Laura Nixon, MPH; Lillian Seklir; Pamela Mejia, MS MPH; Kate Cockrill, MPH; Steph Herold, MPH; Katie Woodruff, MPH DrPH (c); and Lori Dorfman, DrPH.

We thank a generous anonymous foundation for funding this *Issue*. We also thank Lauren Himiak, Leeza Arbatman, Karra Gardin, Alysha Aziz, Shona Hilton and Fernando Quintero for their invaluable input and contributions to the development of this *Issue*. Thanks also to Heather Gehlert, MJ, for her feedback and edits.

Issue is edited by Lori Dorfman.

Issue is published by
Berkeley Media Studies Group
2130 Center Street, Suite 302
Berkeley, CA 94704
510.204.9700 voice
510.204.9710 fax
www.bmsg.org
@BMSG

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a project of the Public Health Institute