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The University of Dublin

Teen sluts don't grieve:

How the politics of abortion healthcare contributes to higher adolescent female morbidity, and shapes the bereavement experience across the lifespan

DDD17: Politics and Death

Utrecht University

Dr Caroline Lloyd

Date 27/08/25

Background

- **The World Health Organization that an estimated nine million 15 to 19 year olds experience a perinatal death every year globally.**
- **No estimates for girls under 15 years old.**
- **Whilst pregnancy in adolescence confers higher medical risks, females aged younger than 15 are of particular concern because they experience higher pregnancy related morbidity, are at higher risk of experiencing foetal deaths, and perinatal deaths.**
- **These are **estimates** compiled from a variety of disparate sources from countries. We know from research, including Murphy Tighe that there is prevalence of hidden pregnancies, particularly with young people. In countries where abortion is illegal, higher rates of female mortality and infanticide.**

Research Design

Bio-psycho-social framework (Bronfenbrenner, 1986)



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graph TD; A[Bio-psycho-social framework (Bronfenbrenner, 1986)] --> B[Phase One  
Questionnaire mapped to the bioecological framework, included the Perinatal Grief Intensity Scale (Hutti et al., 1998) and open ended questions (n = 23)]; B --> C[Phase Two  
Semi-structured interviews analysed utilising Thematic Analysis (Braun & Clarke, 2006) (n = 6)];
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Phase One

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Phase Two

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Historical landscape

- *Whilst abortion has been highly politicised during this century, prior to the mid to late nineteenth century, procuring an abortion did not have the social, political, or legal issues that occur today (Featherstone, 2008).*
- *Lloyd, 2022. p. 30*



Defining Stigma

Goffman (1963)

“an attribute that extensively discredits an individual, reducing him or her from a whole and usual person to a tainted, discounted one” (p. 63)



Social Environment Themes

(Chrono, Exo, Macro-systems)

“Pregnant adolescent girls are stigmatised”

- *Girls are to blame*
- *“Damaging” males*

Patriarchy, as a social system of male dominance directed at women was evidenced throughout my research

Slut, slag, whore, school bike and then punished for having an abortion/being pregnant despite sexual violence, specifically rape (14)



Mortality in Uganda (as a country example)

Afiya – 31 – two abortions at 15 and 16

*-women are forced to give birth and bury the newborn babies in shallow graves
and you can hear them crying until they die*

*-girls and women are forced to attempt illegal abortions – coathangers and
other implements, herbal concoctions are common – girls ending up in hospital
is common and she talked about how several of her school friends died this way*



Higher Female mortality within the US since Roe V Wade was overturned in 2022

A report by the Gender Equity Policy Institute found that **maternal deaths** per 100,000 live births in abortion-ban states **rose by 5%**, while **in states where abortion remained accessible, it decreased by 21%** (Gemmill et al., 2025)

Women in abortion-ban states face a nearly **double risk of dying during pregnancy, childbirth, or shortly after giving birth** compared to women in states without bans (BMJ, 2025)

The overturning of Roe v. Wade has led to more births, particularly in states with existing poor maternal and child health outcomes, contributing to **higher rates of infant mortality** (Gemmill et al., 2025)

These increased risks are expected to **disproportionately affect women in marginalised communities**, including Black and Hispanic individuals (Gemmill et al., 2025)

Grief response to abortion

*Within countries such as Japan, Thailand, and China **all deaths** from conception to neonatal **are publicly recognised**, irrespective of whether they are induced or uninduced (Florida, 1991). In Japan a Buddhist ceremony is performed for the Mizuko (水子) to facilitate the passing of the soul and comfort the bereaved “parent” (Smith, 1988). However, whilst the emotional responses to biological deaths (i.e. miscarriage, stillbirth, and neonatal deaths) have been widely researched and acknowledged in Euro-Western and colonial cultures, empirical data investigating grief responses to abortion have largely been ignored (Lee, 2003).*

Lloyd, 2022. p. 92





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Empirical data

Lloyd & Hutti, 2024:

Perinatal Grief
Intensity Scale

Grief was measured and present across the lifespan after **abortion** as well as miscarriage; the mode of death for adolescents was irrelevant, **the impact was similar:**

Support for the adoption of the Perinatal Grief Intensity Scale to identify women in need of follow-up for grief intensity after an adolescent miscarried or terminated pregnancy is evident. The results of this study have demonstrated that grief can resurge or appear in adult females as they respond to events across the lifespan, including further reproductive experiences. Therefore, there is a compulsion for health care professionals to identify women at risk of intensive grief responses due to previous contributory events



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Sarah Olson

@ReadMoreScience

If you have an abortion, there's a stigma.

If you have a baby outside of marriage or as a teen, there's a stigma.

If you get married and don't have babies, there's a stigma.

It's almost like it's not about the babies, it's about judging women and controlling their decisions..

01:53 · 19/05/2019 · Twitter for Android

- 1. Pregnant adolescent females have higher medical risks for morbidity, perinatal deaths, and stillbirths**
- 2. Females are stigmatised for getting pregnant and are stigmatised for having abortions**
- 3. Misogyny feeds stigmatisation, sexual violence, female blaming, and subsequently removal of healthcare**
- 4. There can be a bereavement impact both at the time and/or across the lifespan after abortion**

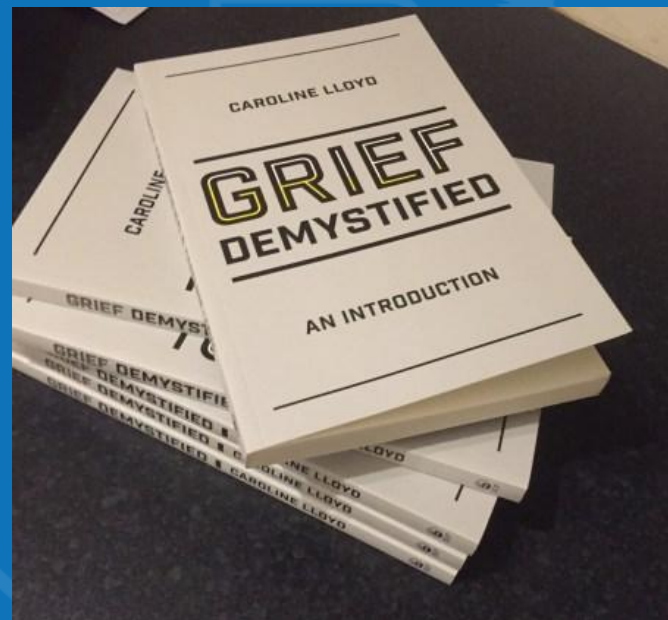


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Thank you
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