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Representations of the subject 'woman' and the politics of abortion: an analysis of South African newspaper articles from 1978 to 2005

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Abstract

A key element in cultural and gender power relations surrounding abortion is how women who undergo an abortion are represented in public talk. We analyse how women were named and positioned, and the attendant constructions of abortion, in South African newspaper articles on abortion from 1978 to 2005, a period during which there were radical political and legislative shifts. The name 'woman' was the most frequently used (70% of articles) followed by 'girl/teenager/child' (25%), 'mother' (25%), 'patient' (11%) and 'minor' (6%). The subject positionings enabled by these names were dynamic and complex, and were interweaved with the localised, historical politics of abortion. The 'innocent mother' and the bifurcated 'patient' (woman/foetus) positionings were invoked in earlier epochs to promote abortion under medical conditions. The 'dangerous mother' and woman as 'patient' positionings were used more frequently under liberal abortion legislation to oppose and to advocate for abortion respectively. The positioning of the 'girl/teenager/child' as dependent and vulnerable was used in contradictory ways, both to oppose abortion and to argue for a liberalisation of restrictive legislation, depending on the attendant construction of abortion. The neutral naming of 'woman' was, at times, linked to the liberal imaginary of 'choice'.

Keywords: Abortion, media, representations, South Africa

Introduction

The politics of abortion may be defined as the configuration of cultural and gendered power relations that discussions, practices and legislation with respect to abortion bring to the fore. As such, the politics of abortion has a long and complicated history. Abortion has been constructed in multiple ways, depending on the location and time in which the debate is occurring. For example, a key contestation in the Western world, which emerged in the late 1960s, has been between the ‘pro-choice’ and ‘pro-life’ positions (Luker 1985). However, recently there have been changes in the terms of this contestation. In particular, arguments for the restriction of abortion have been justified through appeal to gender-based rather than foetal-focused arguments (Siegel 2007), and the term post-abortion syndrome (PAS) has been utilised to describe abortion as fundamentally traumatic (Hopkins, Reicher and Saleem 1996).

Currently, much abortion activism is conducted under the rubric of ‘human rights’, with an emphasis on people having ‘the right to control their own bodies, their sexuality and their reproductive capacity’ (Klugman and Budlender 2001, x). In developing countries, abortion has been constructed by health agencies as a key public health issue because of high maternal mortality rates (World Health Organisation 2007). In some post-Soviet countries, the term ‘abortion culture’ refers to abortion being seen as ‘a “normal” way of dealing with medical and socioeconomic hardships in personal and family life’ (Karpov and Kaumläriäinen 2005, 13), although in countries like Poland the criminalisation of abortion has severely restricted access (Girard and Nowicka 2002).

Fundamental to the politics of abortion is the manner in which women who undergo a termination of pregnancy are represented (Smyth 2002). For example, within the ‘choice’ rhetoric, women are depicted as rational and autonomous beings, able to exercise agency in decision-making regarding the outcome of a pregnancy. The ‘pro-life’ discourse, on the other

hand, allows space for women to be seen as murderers. Within the narrative of PAS women are positioned as victims in need of protection and care (Lee 2002).

In this paper, we unpack the historical change in how women have been represented in relation to abortion in South African newspapers by analysing how these women are named and discursively positioned in articles on abortion and the attendant constructions and politics of abortion. South Africa provides a particularly pertinent space for this kind of study owing to substantial shifts in the politics of abortion over the last decades. We have chosen newspapers as the source of data as the media plays a central role in framing public discussion on abortion (Rohlinger 2006) and in reproducing and defining women as subjects of a particular kind (Rakow and Wackwitz 2004).

We begin by briefly outlining the theoretical tenets underpinning our understanding of naming and positioning the subject. We then discuss changes in abortion legislation in South Africa and present the methodology used, a mixed method content and discursive positioning analysis.

Naming and positioning the subject

The act of naming a subject is not neutral. How the subject, 'woman', is named emphasises certain features of the woman at the expense of others. Names reveal particular assumptions about the subject whilst simultaneously concealing others (Butler 1999). These names (e.g. 'mother') indicate to us particular characteristics of the subject by drawing attention to certain aspects (e.g. caring relationship with a child) whilst foreclosing or delimiting other aspects of that subject-hood (e.g. wage-earner or professional).

The act of naming does not, however, fix the subject. Names do not imply unitary or invariant subject positions. For example, the subject 'mother' may be conceptualised in many contradictory ways, including as self-sacrificing and nurturing, and as responsible for a range

of social ills due to the manner in which she rears her children (Burman 2008). Naming thus produces delimited subject positions, which nevertheless may change over time or across different sites.

Creating subject positions through naming in text is a practice of representation that assists in providing socially recognised subject locations that people may occupy or be ascribed. The practice of naming and positioning the subject is a social process undertaken by collectives as well as individuals that requires the named person to take up (or alternatively resist) particular subject positions (Davies and Harré 1999). By being positioned, subjects are placed in certain relations with one another, as for example the ‘mother’ implies ‘child’ and ‘doctor’ implies ‘patient’.

These historically and context specific ways of talking that designate subject positions for people to occupy draw on familiar story-lines or sets of conventional expectations (Davies and Harré 1999). For example, the naming of the doctor and patient draws on certain expectations around, and creates certain subject positions concerning, how each should act and speak (Tan and Moghaddam 1999). The naming of the doctor serves to position such a person as having legitimate authority and expertise to speak on the patient’s illness: to diagnose, to treat and to prescribe medicine. The naming of the patient creates a subject position from which a person may narrate symptoms but may only guess about the illness. If the patient makes a diagnosis and the doctor disagrees, then the patient has exceeded the boundary of what is allowed in the patient position (Phillips and Jørgenson 2002).

Background: Abortion legislation in South Africa

In 1975 the Apartheid regime adopted the Abortion and Sterilization Act (Act No. 2 of 1975). Under this Act, abortion was legal under very restrictive circumstances (serious risk to the woman’s life, or mental or physical health; risk of foetal mental or physical defect;

pregnancy resulting from rape, incest or sexual intercourse with a ‘mentally defective’ female). This legislation formed part of the Apartheid state’s attempts to ‘buttress racist heteropatriarchal apartheid culture’ (Klausen 2010, 39), which sought to regulate reproductive sexuality through, *inter alia*, prohibiting inter-racial sex, promoting motherhood for white women (Klausen 2010) and simultaneously restricting population growth amongst blacks through extensive contraceptive promotion and, at times, enforcement (Klugman 1990). Although the legislation rested on anxieties concerning premarital (hetero)sexual activity amongst white women (Klausen 2010), white women received the vast majority of the just over 1000 abortions performed per year owing to the stringent procedures required to access a legal abortion (Cope 1993).

With the transition to democracy, and an increased emphasis on gender issues, civil society and the new political leadership mobilised in support of a revision of abortion legislation. Although most health and human rights activists argued for a liberalisation of legislation based on a combination of women’s rights and public health arguments, some still referred to population control and the rights of doctors to decide when an abortion should be performed (Klugman and Varkey 2001). Soon after the first democratic elections of 1994, the Choice on Termination of Pregnancy (CTOP) Act (No. 92 of 1996) was passed. Abortion may now be legally performed upon request during the first 12 weeks of pregnancy. Thereafter, abortions may be performed under certain conditions, including if the pregnancy will affect the women’s social and economic status. Minors do not require parental consent to request an abortion although they must be advised by a health service provider to consult a trusted adult. Since implementation in 1997 to the end of 2010, over 1 million legal terminations of pregnancy have been performed (Health Systems Trust, 2011).

As would be expected, the introduction of the CTOP Act has not been without controversy. A pro-life alliance, headed by the Christian Lawyers’ Association (CLA), has

taken legal action on three occasions with regard to this Act, firstly arguing that the CTOP Act was inconsistent with the Constitution, secondly challenging the clause specifying that minors do not need parental consent for an abortion, and thirdly contending that insufficient consultation was engaged in when an amendment seeking to extend services was introduced. In the first two cases the court found for the defendant and upheld the Act and the particular clause. In the third case, the government was instructed to engage in further public participation as required by the Constitution. The amendment, which came into effect in 2008 after public participation was effected, means that registered nurses as well as midwives may perform terminations of pregnancy up to the 12th week of pregnancy (Harries 2009).

Method

In this paper we focus on how women presenting for abortion are named and positioned in South African newspapers in the period 1978 to 2005. Specifically we ask the questions, ‘What names and associated subject positionings are used to represent women considering and presenting for abortion?’ ‘How have these namings and subject positionings changed over time?’, and ‘What constructions of, and political positions regarding, abortion do these namings and subject positions draw on and allow?’

To answer these questions, we used a combination of content analysis and discursive positioning analysis. Content analysis is a widely used methodology that enables the transformation of verbal documents into quantitative data (Neuendorf 2002). The content analytic aspect allowed us to reveal patterns of naming and to track the changes in how women were named over time. Statistical analysis of these patterns consisted of frequency counts converted to percentages.

This was supplemented by a discursive positioning analysis (Davies and Harré 1999) to allow for qualitative analysis of the positionings that such naming allows, and for

qualitative analysis of changes in the positionings over time. The discursive positioning analysis drew on Parker's (1990) definition of discourse as a coherent system of statements that contains subjects of a particular kind. This analysis requires the researchers to ask how the woman is interactively positioned as a subject within the text of the article (van Langenhove and Harré 1999).

Data were collected from the South African Media Archives located at the University of the Free State (<http://www.samedia.uovs.ac.za>). This archive consists of more than three million newspaper reports, magazine and journal articles as well as periodicals. The sampling frame was delimited by using the Media Monitoring Project (MMP) definition of 'newspaper': printed in a recognisable newsprint format; published daily or weekly by independent publishing houses; and easily available at newsagents. To fulfil the criterion of comprehensiveness, only those newspapers which had published at least 30 articles on abortion over a 28-year period were included. This resulted in a sampling frame of 2972 articles, written in English and Afrikaans, appearing in 25 publications (*Beeld; Die Burger; Business Day; Cape Argus; Cape Times; Citizen; City Press; Daily Dispatch; Daily News; The Herald; Hoofstad; Pretoria News; Rand Daily Mail; Rapport; Saturday Star; Sowetan; Star; Sunday Independent ; Sunday Times; Sunday Tribune; Vaderland; Volksblad; Weekend Argus; Mail & Guardian (formerly The Weekly Mail); Witness*). African language articles are not part of the archive and therefore not included in the sample, although some of the newspapers featured (e.g. *City Press* and *Sowetan*) have a mainly black readership. In addition, few African language newspapers exist, with only one existing over the period studied in this research.

Media scholars have highlighted the changes that the media has undergone over the last forty years. Under Apartheid the media were tightly controlled by the National Party government, which used the states of emergency, 'warnings' to newspapers and the Bureau

of Information to restrict press freedom (Tomaselli and Louw 1989). Despite an opening up of the media after the transition to democracy, difficulties in terms of how women are represented and portrayed have been noted. Women are often absent or portrayed in simplistic ways (Rabe 2002) and they are less likely be interviewed and asked for an opinion than men (Lowe-Morna 2006). For example, Global Media Monitoring Project (2005) revealed that women were the focus or subjects of news stories for less than a quarter (23%) of all news stories published in South Africa. As official spokespeople they constituted 16% of the overall total and as expert commentators they comprised 20% of the total.

The time frame 1978 to 2005 was divided into four-year clusters for ease of analysis. These even-sized clusters or epochs conveniently represent particular historical periods, as illustrated in Table 1.

<Insert Table 1 here>

The articles analysed were not evenly distributed over the 28 year period, with some epochs seeing little coverage and others substantial coverage. Table 2 presents the percentage of articles in the total frame appearing in each epoch.

<Insert Table 2 here>

Almost half the number of articles on abortion over the 28 year period appeared in Epoch 5 during which time the CTOP Act was initially debated and then passed. Skerjdal (1997) argues that the abortion debate in South Africa was read as a signifier of change from the Apartheid past to the democratic future, and thus attracted significant attention. In

addition, activists who promoted the new legislation actively engaged with the media (Klugman and Varkey 2001).

All articles were placed on a grid stratified by publication and epoch. A random sample of 10% of the total articles was taken from each cell of the grid. The numbers within each cell had to be rounded up or down within a range of ten units so as to extract complete articles. 300 articles were used for the analysis.

The 'naming categories' were decided upon after a thorough joint reading of the data set. Five naming categories emerged in this process: 'girl/teenager/child', 'mother', 'patient', 'woman', and 'minor'. The composite 'girl/teenager/child' naming category was decided upon as these terms were frequently used in conjunction (e.g. teenage girl), and each implies a developmental status. The name 'minor' was not included in this category, owing to its legal, rather than developmental, meaning. Articles were then analysed for the presence or absence of each of the naming categories.

Initially, categorisations that included descriptors (for example, 'the black woman') were anticipated. However, the categorisation of articles in terms of descriptors of differentiation was complicated by the fact that a range of descriptors, such as 'poor', 'wealthy', 'rural', 'urban', 'disadvantaged' 'less affluent', 'white', 'black', 'non-white', 'African' were often used. These race, class and location descriptors were, for the most part, attached to the name woman, rather than 'girl', 'teenager', 'mother' or 'patient', and are thus discussed briefly in the results section in relation to the name 'woman' only. We acknowledge the central role that race and the attendant disadvantages have played in sexual and reproductive politics in South Africa, and the construction of women along axes of differentiation (race, class and location) in the newspaper articles used in this study will be the subject of a different paper.

The coding of each newspaper article was effected by two researchers. Initially correspondence in the two sets of coding was 89.7%. After closer inspection and discussion, 100% consensus was reached.

Naming categories

Names were used in 80% of articles across all epochs. In some cases a single naming category, and in others a combination of naming categories, were used. These are illustrated in Table 3.

<Insert Table 3 here>

In 20% of the articles women are not referred to directly by means of a name. Abortion is discussed in these articles in a range of ways. Discussions about legislation constitute just less than half of the articles. The rest featured issues such as medical insurance for abortion, the provision of abortifacients by pharmaceutical companies, the rights of nurses and doctors to object to performing abortion on moral grounds, the so-called population explosion, and films, exhibitions, and court cases involving illegal abortions. As such the person most directly affected by debates about abortion, viz. the woman presenting for a termination of pregnancy, is absent or erased from these kinds of discussion.

The name 'minor' was the least frequently used (6.3% of articles) and appeared only in Epochs 5 (9.2%), 6 (2.6%) and 7 (13.9%). Although it was mostly used to refer to the legal status of a person (particularly in relation to the CTOP Act clause allowing minors to request abortion without parental consent), it was also used in a similar fashion to the name 'girl/teenager/child' discussed below.

Use of the name ‘girl/teenager/child’

The percentage of articles in the complete data set in which the name ‘girl/teenager/child’ is used is 25.3%. Thus, a quarter of all articles refer to the woman presenting for an abortion using a name that conjures images of dependence, vulnerability and lack of capacity, a reading reinforced by dominant Developmental Psychology theories in which girls, children and teenagers are normalised as dependent, immature, irrational and less competent than women (Burman 2008).

The lowest proportion (19.1%) of articles using the name ‘girl’, ‘teenager’ or ‘child’ occurs in the Epoch 5, during the time of debate concerning the legalisation of abortion and the passing of the Act. This was also the epoch in which the most articles about abortion appeared and during which activists, using health and women’s rights arguments, actively engaged with the media (Klugman and Varkey 2001).

The name ‘girl/teenager/child’ was used in contradictory ways in relation to the politics of abortion. On the one hand, it was used to argue for a liberalisation of abortion legislation, as indicated in the extract below. This only occurred in the earlier epochs.

Public sentiment would appear to be one of sympathy for the 20-year-old Free State girl in the middle of an abortion storm. Several people have criticized the abortion act saying if it wasn’t so restrictive the girl would not be going through the agony she is now (Garbett, Harding and Dyer 1980).

An abortion was recommended on psychiatric grounds under the Abortion and Sterilization Act for the woman discussed in the above extract. Her parents opposed the abortion and, owing to the length of time taken to decide on the case, an abortion could no longer be performed. In the extract, the use of the name ‘girl’ lends weight to the argument that the reader should feel sympathy and that some measure of protection (in the form of more liberal legislation) is required. Abortion itself is depicted as a benign act that resolves unwanted pregnancies.

On the one other hand, during later epochs especially, the names, ‘girl’, ‘teenager’ or ‘child’ were used to bolster opposition to abortion, as illustrated in the following extracts.

Abortion deals with the product of lack of knowledge and it would seem a far better thing to have children taught at primary level about sex than to have young girls rushing off for abortion (Horler 1990).

Young girls scarcely more than children themselves – often too young to drive – are to be empowered to murder their babies without even having to consult their parents. (Nash 1996)

In the first of these extracts, the assumption that girls, by virtue of their age, are less informed and less responsible than older women is used to support the claim that they are more likely to act impulsively, as implied in the statement ‘rushing off for abortion’. Addressing lack of knowledge is thus presented as the solution to abortion, with the implication that this is the sole factor in sexual relations that lead to an unwanted pregnancy. Abortion itself is constructed as an irrational act that is ‘rushed’ into and that results from lack of knowledge. In the second extract above, the age at which young people may attain a driving licence is used to draw attention to a traditional benchmark of adulthood. By association the immaturity of the girl is emphasised. The word ‘empowered’ is used ironically to highlight the ridiculousness of considering young women capable of independent agency. It is precisely this assumption (viz. young women’s inability to make an adequately informed decision) that has underpinned parental consent laws in some states of the USA (Adler, Ozer and Tschann 2003). Abortion itself is constructed as murder, a serious matter that should not be allowed at all, let alone for young women.

The name ‘girl’/’teenager’/’child’ was also used to oppose the CTOP Act’s parental consent clause.

In support of their claim that it will always be in the best interests of the girl to consult with her parent or guardian, the CLA says that during pregnancy a woman is emotionally vulnerable as a result of hormonal fluctuations in her body and physical changes in outward appearance. A CLA spokesperson says their concern is that minors do not always have the mental capacity to make correct decisions and that in a

matter as serious as abortion, which has both medical and psychological ramifications, the best interests of the child will be served if this decision is made without the support and consent of a parent or guardian (Meeson 2003).

In this extract, emotional vulnerability and the lack of ‘mental capacity’ of the individual girl requires action by others, positioned implicitly as rational, emotionally stable and capable, in the ‘best interests’ of the ‘child’. This lack of capacity of the part of the girl is paired with an unequivocal statement about the consequences of abortion, which, it is implied, can only be understood by adults. There has been much (fairly vociferous) debate in the literature on the medical and psychological consequences of legal abortion. Many of the studies suffer from methodological flaws, as indicated by the recent American Psychological Association’s review, in which it is asserted that there is not sufficient evidence to support the claim that an observed association between abortion history and mental health was caused by the abortion per se, as opposed to other factors (Major et al 2008). In stressing the medical and psychological consequences, the CLA spokesperson is deploying the recent anti-abortion women-centred tactic which constructs abortion as traumatic rather than as foetal murder and positions anti-abortion activists as caring and concerned rather than anti women’s rights (Hopkins, Reicher and Saleem 1996).

The emphasis on immaturity, vulnerability and lack of capacity in relation to girls, teenagers or children allowed for the emergence of two distinct positionings. The first is as somebody in need of understanding, care and support. The second is to position her as the pathologised other.

The first, which was used to oppose as well as to defend liberal abortion laws, is illustrated in some of the extracts above and in the following abstract below.

What strikes one from the news report about this 19-year-old girl [who self-aborted and buried the foetus in a nearby forest] is how very alone she was, living in a community that noticed her pregnancy but did not support her, probably ignorant of safe sex practice or that she had a legal right to an early abortion (Clemishaw 2002).

Both the first and the last of the abstracts cited evoke sympathy for the young women as restrictive abortion legislation, and an uncaring community and ignorance led to their not being able to access an abortion, which in turn led to their suffering ‘agony’ and ‘loneliness’. In the extract above, the young woman was prosecuted as a result of performing an abortion herself. In both cases, the vulnerability of the young women is emphasised, which implies a need for care and protection. This kind of care and protection is evidenced in the fourth extract although here it is used to advocate for more restrictive legislation.

The second manner in which the developmental status of the ‘girl/teenager/child’ is dealt with is to position her as the pathologised other. Unsurprisingly, this positioning is only used to oppose abortion.

[translated from Afrikaans] There are young girls who get pregnant then work in a sly manner to obtain an abortion by circumventing the law (*Hoofstad* 1979).

When all young girls start to kill their unborn babies will they make good women in the future? Who will be prepared to marry an abortionist? (*Sowetan* 1996).

In the first of the above extracts the young woman is depicted as deviously obtaining an abortion. She is portrayed as having agency in the sense that she goes to ‘work’ to circumvent the law. In the second, the woman within the ‘girl’ is described as being perverted through abortion. Such a woman is tainted as a wife and good woman. Implicitly, women who are willing to take on the mantle of the maternal and to submit to the desires of men are constructed as the ideal. The pathologising of young women in these extracts is paired with a depiction of abortion as an immoral, irresponsible and murderous act.

Table 4 summarises the various positionings and associated constructions and political positions enabled associated with the name ‘girl/teenager/child’. It highlights the variability in manner in which this name is used.

<Insert Table 4 here>

Use of the name ‘mother’

The percentage of articles overall in which the naming category ‘mother’ was used is 25.3%. The name mother was used proportionately more frequently in Epochs 1 (38.45%) and 2 (29.41%) and less frequently in Epochs 6 (15.78%) and 7 (22.22%). Although the earlier articles do not refer directly to ‘white mothers’, it is possible that the higher usage of this name is related to the racially based pro-natalism of the Apartheid regime, with newspapers being aimed chiefly at a white readership. Given the dominant sexual and reproductive health and rights approach of the post-Apartheid government, the emphasis on the maternal seems to have lost ground and a lower percentage of articles referred to women contemplating or undergoing an abortion as mother in the later epochs.

Referring to a woman who is pregnant, but has not borne a child, as a mother draws on what Meyers (2001) calls matrigyno-idolatry, viz. discourses that promote the imperative of procreation as the only route to womanhood and femininity. In this, women become defined by their reproductive capacity and ‘maternal instinct’ or their ‘biological drive’ towards conceiving, bearing and nurturing children, as seen below.

Our daughter will be persuaded to agree to have the baby. She might even decide to keep it herself because she is developing a natural motherly instinct (Norton 1980).

The destruction of human life in the womb has grave consequences not just for the unborn child but also for the mother (Graham 2004)

The first of these extracts refers to the same woman spoken about in extract 1, albeit in a different newspaper. She moves from being referred to as a ‘girl’ in extract 1 to being referred to as a ‘mother’ here. In this extract the development of a ‘natural motherly instinct’ is seen as inevitable following a pregnancy. Once this instinct takes root, the woman is powerless to resist the inevitable course of bearing and caring for the child. The use of the

words 'unborn child/baby' imposes the subjectivity of motherhood on the woman along with all the accompanying culturally constructed responsibilities, including protection of the young. The foetus and woman are fixed in a relationship which is made to seem the inevitable outcome of all pregnancies (Ruhl 2002). Abortion implicitly fractures the maternal relationship and thus the potential for care and support.

These representations of the foetus as an 'unborn baby' and woman as 'mother' draw on the dominant trend in developmental psychology of treating mothering as a dyadic relationship (Burman 2008). This focus forefronts the mother-child interaction while obscuring broader micro- and macro-level power relations – power relations that have been shown through research to be key features of pregnancy and mothering (Kruger 2006). In South Africa, for example, Frizelle and Kell (2010, 26) indicates how 'race, class, sexual orientation and gender intersect with dominant ideologies of motherhood to inform the experiences of [their sample of] sub-urban, middle-class women negotiating, within a complex set of relationships, what it is to be a mother'.

The use of the name mother allowed for two distinct positionings. The first is as the 'innocent mother' who, as a result of medical or psychiatric illness, cannot be held responsible for needing an abortion. The second is as the 'dangerous mother' who poses a threat to her 'baby'. The first of these featured more strongly in the earlier epochs in which arguments were made for there being special circumstances under which abortion could be seen as justified. The following extracts provide examples.

As Medea points out, if there are medical difficulties, the present legislation apparently makes adequate provision to safeguard the mother's life (Konya 1979).

[translated from Afrikaans] The only time in which there can be talk of therapy, is when an abortion is performed in the interests of the mother's well-being (*Die Burger* 1982).

In these extracts the mother is not vilified. She is pardoned for not fulfilling the mandate to become a mother once pregnant as there are extenuating circumstances such as ‘medical difficulties’ and the need for ‘therapy’. Abortion is still constructed as disrupting the maternal relationship, but this must be tolerated in medical circumstances.

In later epochs, when the debate turned towards the legalisation of abortion, the ‘innocent mother’ positioning faded and was replaced by the ‘dangerous mother’ positioning as evidenced in the following extract.

[translated from Afrikaans] An innocent human life in the ‘protection’ of his mother’s body does not have the right to life. When it has come this far, then a woman’s womb has become the most dangerous place on earth (Bingle and Gaum 1995).

Here, the assumption of the mother as protector and provider is used to position the body of a woman who has an abortion as the ‘most dangerous place on earth’. The ‘dangerous mother’ position appears here in conjunction with a construction of foetal personhood and of abortion as murder.

Table 5 summarises the positionings discussed above.

<insert Table 5 here>

Use of the name ‘patient’

Women were referred to as patients relatively infrequently in the articles (10.9% of all articles). The name patient was used proportionately more frequently (16.3%) in Epoch 5 when advocates for the CTOP Act stressed the public health implications of restrictive abortion legislation.

The use of the name ‘patient’ constructs abortion as a medical procedure and the woman as in need of medical assistance. This construction was complicated in the earlier epochs, however. Qualitative analysis revealed that in these epochs, the woman as patient

was pitted against the foetus as patient. This bifurcation of the pregnant body led to some (minimal) discussion on the doctor's role, as evidenced below.

[translated from Afrikaans] 'It is important that each doctor realises that with a pregnant woman he has two patients: mother and child' ... The mother and foetus/child has an equal right to life. The role of the doctor is to relieve the suffering of the parents and child, but not to act as executioner (*Die Burger* 1982).

Here, the pitting of the 'mother-as-patient' against the 'foetus-as-patient' provides a dilemma for the doctor as healer in the context of abortion. The relief of suffering is depicted as legitimate, but not abortion, which is equated with execution.

In later epochs, the bifurcation of the woman's body into two patients falls away, and instead the woman becomes a patient suffering from incomplete abortion or is a legitimate Termination of Pregnancy patient, as evidenced in the extracts below.

A large number of patients, approximately 20 a week, are admitted with incomplete abortions (Underhill 1996).

The film showed how nurses made patients clean up after themselves and refused them help even when they called out for it (*Cape Argus* 2002).

The extent and consequences of incomplete abortion during the time of the restrictive Abortion and Sterilization Act were a key public reproductive health concern (Jewkes et al 2002) and were used by activist groups to lobby for the legalisation of abortion. In the first of the above accounts, reference is made to women admitted to a hospital following incomplete abortion. The film referred to in the second account was screened by an investigative news programme called *Carte Blanche* in which poor conditions in a Termination of Pregnancy clinic were exposed. The women are presented in this extract as legitimate health users (patients) who should receive adequate health care, and abortion is constructed as medical event that should be performed under safe and contained conditions. Table 6 summarises the 'patient' positionings and attendant constructions of abortion.

<Insert Table 6 here>

Use of the name ‘woman’

The naming category ‘woman’ is present in 69.6% of all articles analysed, either exclusively or in combination with other indicators. This is unsurprising as it is the most neutral way of referring to women facing the possibility of an unwanted pregnancy and abortion. However, the use of the generic term woman potentially glosses over the vastly different contexts in which women live, as highlighted by postcolonial feminists (Spivak 1988), and in which they make reproductive decisions.

The new legislation makes it possible for any pregnant woman to demand an abortion without strings attached. More significantly she has the power to decide for herself on matters affecting her body and health. Regardless of her age and marital status she does not need the permission of a partner or parent to have a safe legal abortion, nor does she have to inform either (Salie 1997).

In this extract, women are constructed as homogeneous (‘any pregnant woman’ may ‘demand an abortion without strings attached’). Their circumstances are depicted as being completely transformed by a change in abortion legislation. A woman now has the ‘power to decide’; she is able to ‘demand’ abortion and does not need ‘permission’ to have an abortion. There is no acknowledgement of the range of factors which may affect the woman’s ability to access abortion services: whether she lives in an urban or rural area, gendered power relations within the family, religious milieu of her community, access to TOP services etc. The implication is that the legislation not only conceptualises a woman as a fully autonomous citizen, but also removes all obstacles which threatened her autonomy before. This reflects the findings made by Rabe (2002), who indicates that representations of women in the South African media frequently remove them from their contexts and deny the realities of their everyday experience.

Where differentiation between women was made in the articles, it was most frequently around race. The use of clear racial descriptors such as 'black' or 'white' appeared in 14.3% of all articles published over 28 years, although, as stated above, other words such as 'poor', 'rural', 'disadvantaged' also appeared. These descriptors were used in the newspaper articles and by activists to emphasise racial, class- and location-based differentiation in access to services, both prior to the CTOP Act (Cope 1993) and after its implementation (Varkey, Fonn and Ketlhapile 2000) and, as such, provide a more contextually relevant positioning of women.

Conclusion

This research has shown that the subject positionings enabled by the naming of women presenting for abortion are dynamic and complex, and are intricately interweaved with the localised politics of abortion of the moment. Thus we saw how the name 'mother' and 'patient' were invoked in very different ways in the earlier epochs compared to the later epochs studied in this research, with certain positionings (the 'innocent mother' and the bifurcated 'patient') being deployed under restrictive abortion access and others (the 'dangerous' mother and woman as 'patient') being used more frequently under liberal abortion legislation. We saw how particular subject positionings may be used in contradictory ways, both to oppose abortion and to argue for a liberalisation of restrictive legislation. This use depends on the attendant construction of abortion. Thus, the construction of abortion as murder and of 'girls' as immature and irrational provides space for advocacy to restrict abortion. On the other hand, the construction of abortion as a benign act that solves an unwanted pregnancy and of girls as immature and vulnerable suggest arguments for liberalising abortion laws. When abortion is viewed as an immoral act or murder and young

women seeking an abortion as the pathologised other, severe restrictions on abortion are suggested.

The positionings deployed with respect to women presenting for abortion simultaneously draw on and reproduce cultural constructions of the subjectivity of the reproductive woman. The use of the name 'mother' reinforces matrigyno-idolatory discourses that promote the imperative of procreation for women and casts women who terminate a pregnancy as disrupting this natural process. The positioning of the 'girl/teenager/child' as dependent, vulnerable and lacking capacity allows for deployment of discourses of care and protection and, contradictorily, of othering, both of which are embedded in an understanding that youth and decision-making regarding reproduction are mutually exclusive. The patient positioning constructs the reproductive woman as a health care user who requires adequate reproductive health care.

While the names 'mother', 'patient', 'girl' provide delimited, albeit contradictory, subject positions, the name 'woman' or 'minor' promise a certain level of neutrality. The naming of 'woman', however, is frequently linked to the liberal imaginary of 'choice', in which the individual is depicted as rationally deciding on a course of action and exercising control over her body (Ruhl 2002). In this, the social inequities that have direct implications in terms of women's reproductive lives and their ability to 'choose' are glossed over. The depiction of the woman in these terms is enabled in the post-Apartheid context by the emphasis on human rights implied in the Constitution. The name 'minor', used only in the post-Apartheid context, also promises neutral reference. Often, however, it was used as a direct substitute for 'girl'/'teenager'/'child'.

Naming and positioning the subject serves as a powerful tool in the politics of abortion. As women's bodies are the fulcrum around which debates and controversies regarding abortion revolve, the subject positionings that are publicly deployed concerning

women presenting for abortion and the attendant constructions of abortion have fundamental implications in how debates, legislation, and practices surrounding abortion unfold.

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