



Protecting Women and Families

Building Support for Safe and Legal Access to Abortion in Kenya

About Us



The **Kenya Legal & Ethical Issues Network on HIV and AIDS (KELIN)** believes in a world where no one lives in fear or oppression; where all have access to decent standards of healthcare and life; a world where everyone is treated with dignity and respect. To achieve this, we engage in long-term human based approach work, build resilience, respond to health violation situations, and seek to address the root cause of health violations through our advocacy work. Our vision is the full enjoyment of health-related human rights for all. Our Mission is to promote and protect health related human rights for all.



Goodwin Simon Strategic Research (GSSR) is a public opinion research firm with special expertise in conducting research on emotionally and socially complex issues. GSSR's cutting-edge approach is built on decades of experience in polling, social and political marketing, and policy analysis and communications, and rooted in the latest research on neuroscience, emotion, psychology, cognitive linguistics, and narrative theory. This unique methodology is used to unpack underlying attitudes and emotional reactions that impact behavior and decision-making. We use this *heartwired* approach to develop effective message frameworks that enable deep attitudinal change and equip activists to accelerate positive social and policy change. Learn more about GSSR's research approach at goodwinsimon.com and heartwiredforchange.com. Amy Simon, James Telesford, Sara Knight, and Justin Adams of GSSR contributed their thought leadership to the development of this messaging guide.

KENYA COMMS HUB

Led by Love Matters Kenya and Well Made Strategy, **Kenya Communications Hub** is a collaborative network of social justice organizations, activists, content creators, journalists and tech enthusiasts that helps build narrative power in Africa through research, training and campaigning. Kenya Comms Hub is focused on bringing actors in Kenya's sexual and reproductive health rights arena to create a shared objective, learn new skills and access the latest audience and digital research. Our hope is that these skills and resources will enable these critical SRHR actors to develop evidence-based narratives and dissemination strategies to reach larger audiences and ultimately increase communications impact.



At **Komons**, we specialize in digital research, generating intelligence about digital ecosystems and fostering knowledge-sharing. As a node within a network, we work at the intersection of technology, social transformation and collective intelligence, supporting, with others, processes that promote a conscious citizenship and social justice. We are currently involved in several projects to reduce social polarization through narrative change and strategic communication.

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Welcome from the Advisory Group

As members of the advisory group, we sought to leverage our individual expertise, and the collective knowledge of the group, to help shape and guide this messaging research. We also sought to ensure the insights and messaging recommendations presented in this guide are both informative and actionable. This way they are practically useful for activists and organizations working to create shifts in how we approach and discuss access to safe and legal abortion care.

We have found the Heartwired research approach used for this work to be compelling. Its multi-disciplinary approach that combines qualitative and quantitative research methods, human psychology, and an exploration of our audience's mindset—including their values, emotions, and experiences—has helped in identifying nuances that typical research methods might overlook.

Throughout this research, we have observed how messaging that is heartwired connects directly with our audience in meaningful ways—and that this has a greater likelihood of inspiring positive action. Importantly, that it's not just about relaying facts, but about telling a story that people can identify with, fostering empathy and understanding.

We are encouraged by this research's potential for real-world impact. Many projects compile research but fall short in application. Here, the focus is on actionable insights that our organizations can implement directly in our advocacy work, providing us with tools to shift public opinion and even policies. By focusing on understanding the values and emotions that are driving our audience, we find ourselves better equipped to tailor communication strategies that can engage them in the digital sphere and develop messaging that is effective at growing support among them.

As some members of the advisory group have begun to integrate the findings of this research into our own work, we have already started to experience more meaningful engagements in community discussions. It has been surprising to see just how powerful it can be to tap into shared human values to foster common ground, especially in persuasive, strategic communications. In many ways, this research underscores that, even with issues that can feel divisive for our audience—including sexuality education and abortion care—there are ways to build bridges between differing perspectives.

Having access to safe and legal abortion care is crucial for protecting the health and wellbeing of women and girls across Kenya. We are hopeful that you find value in this messaging guide, and that it will act as a catalyst for social change—inspiring activists, organizations, and even the media to begin discussing access to safe and legal abortion care in new ways.

List of Advisory Group Members:

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Guide at a Glance



Key Insights on Our Audience's Mindset



Our audience's mental template of abortion, women seeking abortion, and people who provide abortions is deeply flawed. Our audience holds related, but separate, mental templates of abortion generally (e.g., unsafe, a sin, illegal), of the women they imagine are seeking abortion care (e.g., desperate, low self-esteem, victim of abuse), and of the people who provide abortions (e.g., quacks, murderers, causing harm). Mental templates are not always fair or accurate. However, understanding them is important because we must work to disrupt these faulty ideas and replace them with associations that are more accurate, neutral, or positive.



Willingness to hold open, robust discussions. Many people are hesitant to discuss abortion. When they do, the conversation is often dominated by opposition messaging, which can often end or even prevent open conversation. Though abortion is still stigmatized and taboo, and many feel it should not be discussed in public, this research finds that our audience is willing to have open, honest conversations with each other on the topic. This means that many in our audience will be receptive to messaging on the topic and willing to engage on it.



Barriers are real, but opportunities are abundant. Audience mindset barriers to supporting access to abortion in Kenya are prevalent, yet opportunities and bright spots for building support are also plentiful among our early adopter audience. For example, sharing core values, such as protecting women and girls and preventing harm and death, provides opportunities to connect with our audience and grow support. The messaging recommendations provided in this guide are intended to help navigate the messaging barriers and lean into the messaging opportunities uncovered in the research. More research is needed to understand what opportunities there may be to grow support among audiences that may be more opposed to abortion.



Positive generational shifts on family planning and birth control are readily apparent. Generational shifts—changes in attitudes and beliefs in younger generations that are positive and more supportive as compared to older generations—are a potential bright spot. Younger generations express how they have increased knowledge about, and access to, birth control. There are also cultural shifts taking place toward empowerment for women, activism around gender issues, and increased awareness about family planning. While most view these changes as beneficial, some see generational change as directly tied to exposure to Western media and the internet, poor parenting, or moral decay in society. These generational shifts provide messaging openings and show an overall trend toward increased support for access to safe and legal abortion care.*



Family planning is used to promote agency over one's life. Our audience believes that family planning is important, in many ways, to give people control of their life and future. These ways include preventing poverty, ensuring enough financial resources to care for the children they already have, preventing poor quality of life for children, allowing a person to be sexually active without having a lot of children because of it, being able to plan the age at which they have children, preventing pregnancy or children from interfering with life plans such as education, and allowing people to continue to work and pursue professional goals. When safe and legal abortion care is placed within the larger context of family planning, it can help to paint a picture of abortion as preserving one's future and promoting agency over one's life.



Education about family planning is important—but who should be responsible? There is widespread agreement among our audience that children need to be educated about family planning from an early age, and at least as soon as puberty, which is commonly seen as 12 or 13 years old. Our audience believes it is important for both boys and girls to learn about family planning and that boys learning early will help make them more responsible later in life. Many view mothers as the people that are primarily responsible for teaching their daughters and sons about family planning, though some say that fathers should be included and are just as responsible for teaching their sons about family planning. Some among our audience say it is the role of older generations or aunts and uncles to teach children about these issues, though others report that older generations do not discuss sex with younger family members. When telling stories, it is important for the cultural context to match our audience's expectations—in essence, to depict mothers or aunts educating girls and boys, and fathers or uncles educating boys but not girls. This makes the stories we are sharing more credible for our audience.



Positive benefits and negative consequences of legalizing abortion. Before participants in the research are provided supportive messaging about access to safe and legal abortion care, they were asked what they perceive to be the positive benefits and negative consequences of making abortion legal. While many participants readily express the benefits they see of legalizing abortion (e.g., reducing stigma, increased access to safe abortion, reduced maternal mortality, reduced underage pregnancies), they also share negative consequences. Some raise concerns about abortion being used as birth control or about the health effects of having “too many abortions.” This highlights a need for our messaging to remind our audience about the benefits of safe and legal abortion care and show how it helps to prevent harm.



Notable differences by geography and demographics. In general, members of our audience in Nairobi and Kisumu seemed to be more supportive as compared to Nakuru, though it is difficult to disentangle the effects of geography versus demographics and profession. Many health professionals recognize the need for safe and legal abortion care and at the same time express hesitancy about it because it is illegal. They seem to fear legal or social consequences of speaking out in support or providing services and information. Some older adults may more easily recognize that there are gray areas in life, while younger adults may be more likely to think about life in black and white or binary ways. As we develop our messaging, it is helpful to remind our audience that life is complicated and that all kinds of women need access to abortion care for a variety of reasons. Across demographics and geographies, this helps to disrupt the faulty picture that many among our audience currently hold in their minds of the women seeking to terminate their pregnancy. Over time, reducing stigma around abortion and growing public support may also allow more health professionals to speak out publicly without putting themselves at risk.

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* For recommendations on how to engage younger audiences through social media, see the Love Matters campaign at <https://lovemattersafrica.com>



Messaging Recommendations at a Glance



Currently, most Kenyans have a negative emotional reaction to abortion. Most are not aware that safe abortion is possible, and because the topic is heavily stigmatized, there is little opportunity for their flawed understanding of abortion to be challenged. They believe that abortion is unsafe and dangerous, and the depictions they see in the media and hear through shared stories—often of lonely, depressed, desperate women who are at risk—often reinforce those negative depictions. This leads people to feel they are protecting women and girls by preventing access. To equip people to begin to change, it is critical for our messengers, messaging, and the images we use to effectively disrupt the flawed perceptions and beliefs they hold and replace them with ones that are more accurate and positive. This helps them begin to have new, positive emotional reactions and build empathy for women and girls seeking safe and legal termination of pregnancies.

The good news: this research shows that the messaging recommendations presented in this guide, as a collective package, equip our audience with what they need for change to be possible (*see page 18 for more on our audience*). Showing that people can have thoughtful conversations and make thoughtful decisions about abortion, that a woman seeking to terminate her pregnancy can be supported by her family and friends, and that having access to safe abortion protects a woman's health and her future fertility is powerful for our audience. Hearing stories about women coming to a decision in a calm way, feeling relieved about their decision and the outcome, and going on to live a healthy life and potentially have children in the future, effectively calms our audience's concerns and enables them to begin thinking in new ways.

While each of the insights and opportunities is distinct, they are also interconnected—they build on one another and work together.



Disrupt and Replace Our Audience's Flawed Mental Templates

To develop effective messaging, it is critical that we understand, disrupt, and replace our audience's flawed associations and beliefs with more accurate and helpful ones. If we do not, it will be very difficult—sometimes impossible—for our audience to come along with us and become supportive or to be open to hearing and taking in new information that can begin to help repair their broken reasoning chains.

Ways you can achieve this:

- ▶ Create and Maintain an Emotional and Factual Distinction Between Unsafe and Safe Abortion (see page 35)
- ▶ Lift Up a Wide Range of Messengers, Including Men, Women, and People from Different Walks of Life (see page 36)
- ▶ Share the Reasons that Women and Girls May Seek Abortion Care—and That They Carefully Consider Their Decision (see page 38)



Foster Identification Among Our Audience

Identification—the ability to relate to, or to see yourself in someone or something—is essential for persuasive communications. When we are presented with stories or information delivered by people who we feel are like us in some way we tend to be more open to the message they are sharing. When we perceive that a person does not share our values or beliefs, we are much less likely to hear what they have to say. This is important to recognize as we communicate with our audience. If they believe that only “certain kinds of people”—people who are not like them—are supportive of access to safe and legal abortion care, they will be unable to ever imagine themselves as one of those people.

Ways you can achieve this:

- ▶ Show You Share Core Values (see page 40)
- ▶ Situate Women and Girls in the Context of Their Family and Community (see page 46)
- ▶ Tell Journey Stories That Model How Someone Can Move from Being Opposed or Conflicted to Being Supportive (see page 46)
- ▶ Show the Supportive Role Men Can Play (see page 50)
- ▶ Paint a Picture of How a Lack of Access to Safe Abortion Care is Out of Step with Kenya's Role as a Modern Nation (see page 50)



Meet Our Audience's Emotional and Informational Needs

For change to be possible, our messaging must first enable our audience to have a new, different emotional reaction on abortion care. Then, we need to provide them with new information that supports new reasoning. This means our messaging needs to meet both their emotional needs and informational needs. When their needs are met, our audience has a greater capacity to sit with and sort through their feelings (including conflicting feelings), take in new and different information, and begin to change. Importantly, when our audience's needs are not met, change is very difficult and unlikely to happen.

Ways you can achieve this:

- ▶ Show and Explain, Don't Tell and Label (see page 51)
- ▶ Calm Concerns About Safety (see page 52)
- ▶ Describe Benefits to Women and Society of Safe and Legal Termination of Pregnancy (see page 52)
- ▶ Have the Messenger's Emotional Tone Match the Content—and Don't Sound Detached (see page 52)
- ▶ Avoid Discussions of Strong Negative Emotional States (see page 52)
- ▶ Fill Key Knowledge and Information Gaps (see page 52)
- ▶ Avoid Images or Facts that Reinforce Our Audience's Flawed Mental Template (see page 54)



Additional Messaging Considerations



Model Effective Conversations (see page 55). We need to provide our audience with examples and a model of how conversations about termination of pregnancy can happen in positive ways—ways that are not disruptive or damaging and that lead to positive outcomes. To equip our audience for these conversations, our messengers need to show what it would look like if our audience were to believe and behave in the ways that we hope for. This includes showing how the messenger would act, what they might say, how it might feel, and what the end result might be—in ways that feel credible, possible, and consistent with their values and identity.



Paint a Vivid Picture of What You Are For—an Aspirational Vision (see page 56). Giving people something to be for and to engage them, not just something to be against, can be effective and powerful. Painting a positive, aspirational vision of what it will look like for women and their families to have access to safe and legal termination of pregnancies helps to calm our audience's concerns and better equips them to have a new emotional reaction to the issue.



Embed Shared Values in Calls to Action (see page 56). Most among our audience agree that something needs to be done to allow access to safe abortion, and most are eager to take action. Therefore, it is helpful to include a call to action in messaging when possible.



Compelling and Calming Messaging Components. Below are specific messaging components that the research shows are very compelling for our audience or effective at calming their concerns about termination of pregnancy. For more on these and why they are effective, see page 57.

Reinforce the distinction between safe and legal abortion vs. unsafe and illegal abortion.

- Making a clear distinction between legal/safe abortion and illegal/unsafe abortion.
- Termination of pregnancy can be done safely with a trained health practitioner.
- Women should have access to safe and legal termination of pregnancies in the case of rape.
- Highlighting benefits of safe termination of pregnancy.

Highlight the costs to individuals and to society—and the importance of access to health care.

- Treatment of unsafe abortion complications costs our public health system over Ksh 533 million per year.
- Out-of-pocket costs for safe termination of pregnancy can be more than Ksh 20,000.
- Access to comprehensive medical care should be a right that everyone enjoys, regardless of how much money they have. Termination of pregnancy is part of comprehensive medical care.

Lean into our audience's desire to protect their loved ones from shame and stigma—and to support them instead.

- Women should not be stigmatized for seeking abortion care, and they should be treated with dignity and respect.
- Men should be supportive of a woman's decision.
- Men as messengers openly advocating for access to safe and legal termination of pregnancies.
- Modeling how to have supportive conversations about abortion between two people who know each other and have some sort of relationship.
- Specifically, men and women/husbands and wives discussing abortion as part of other family planning methods.

Highlight shared values and traditions—and meet our audience's needs.

- Many women who seek termination of pregnancies are mothers already.
- Every child comes with a plate.*
- Build strong, not big, families.
- "Forced pregnancies" or "forcing a woman to be pregnant."
- "Some girls are too young to carry a pregnancy."
- Acknowledge "traditional thinking."
- Kenya as one of the more "advanced" countries, or a "leading" country in East Africa.
- A woman should be "mentally" or "psychologically" ready to carry and raise a child.
- It is the woman who bears the burden of unplanned pregnancy.
- A woman may not be ready to raise the child.
- Mothers, fathers, women, men, teachers, and activists are compelling messengers.

Encourage our audience to engage in perspective taking and remind them of the complexities of life.

- There are gray areas in life or that life may not always go as planned.
- Asking participants to take a different perspective or place themselves in the shoes of someone in a similar situation.

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* See page 58 for more on this component.



Language Nuances to Consider. As you develop your own messaging, there are a few language nuances to consider based on findings from the research. See page 60 for more details on these nuances.

- **“Termination of pregnancy”** is perceived as neutral and acceptable by our audience, whereas “abortion” carries significant stigma and triggers preconceived ideas and negative associations in our audience’s mind. While younger segments of our audience (teenagers to early 20s) care less about terminology, it is far more important for older segments of our audience (late 20s and beyond).
- Using **“safe and legal”** and **“trained medical professional”** or **“trained healthcare professional”** helps to calm concerns our audience has about the safety of the procedure.
- Referencing termination of pregnancy as **“essential healthcare”** or as part of **“comprehensive healthcare”** is effective—lead with healthcare first, then wrap in abortion as part of that comprehensive healthcare.
- **Embed abortion in the larger context of sexual and reproductive health education** to help with destigmatizing the conversation. This serves an educational purpose by filling critical knowledge gaps. It also connects abortion to a broader set of information their daughters and sons should be receiving to protect themselves and keep them safe.
- The phrase **“an unexpected pregnancy often becomes a forced pregnancy”** without access to termination of pregnancy is extremely impactful for our audience because they recognize the validity of it—that something unexpected can happen and now they’re forced to carry their pregnancy to term because they don’t have access to termination of pregnancy. The feeling of being forced and controlled in this situation feels wrong to our audience.
- **Avoid jargon and insider terminology**—It is important not to shorthand phrases or terms by using an alphabet soup (e.g., SRH, CSE, reproductive health and rights, etc.). Our audience cannot emotionally connect with acronyms—and often does not understand what they stand for.

The following table has additional messaging considerations and language shifts that the research finds makes messaging more effective.

Consider Saying...		Consider Avoiding (or Using Sparingly)...
✓ Doctor/physician/nurse/health professional/medical professional who provides abortion care	✗	Abortion provider
✓ Terminate a pregnancy, end a pregnancy, abortion care	✗	Abortion/abortion services
✓ Potential life/developing human/developing baby/pregnancy	✗	Fetus
✓ Woman’s decision, made together with her doctor and family (or loved ones)	✗	Clinic, abortion clinic
✓ Decision	✗	Woman’s decision (isolated from her social context)
✓ People who want to ban abortion	✗	Pro-life, Anti-choice
✓ Woman, women, people, person	✗	Patient
✓ Medication abortion, medication abortion pills	✗	Medical abortion
✓ Abortion procedure	✗	Surgical abortion



Language and Images to Use—and those to Avoid. Below is a table of language and images we recommend using—and those to avoid. The research finds that the items in the avoid column often reinforce the flawed mental template our audience holds of abortion, women who seek abortion care, and the people who provide abortion. Meanwhile, the items in the *use* column *disrupt* these flawed mental templates and replace them with more positive, helpful images in our audience's mind.

Use	Avoid
✓ Use positive, happy images of women and their families and the men in their lives to show that when women need and have access to safe abortion care they can then live better lives as a result <i>(Note: It is important for positive images to be in the right context—related to happy women and families and couples and not related to someone feeling concerned or scared. For more on this, read the content below this table.)</i>	✗ Using images, illustrations, or depictions of large, pregnant bellies; of babies or fetuses in a woman's belly; or of lonely, sad women
✓ Expand examples to highlight statistics and stories about the diversity of women who seek safe abortion care, including teens and adult women, married women and mothers	✗ Overemphasizing statistics and stories about adolescents or young women while excluding references to women who are already mothers and/or married
✓ Use words such as “end the pregnancy,” “medication abortion,” or “abortion procedure”	✗ Using words or phrases such as “killing,” “aborting a baby,” or “surgical abortion”
✓ Use words or phrases such as “the decision that is right for myself and my family (or you and your family)” or “the decision you have to make is very difficult—I am here to talk and support you”	✗ Using absolute or unequivocal words or phrases such as “made the best decision” or “I will support you no matter what”
✓ Provide affirmative statements of fact about safe and legal abortion (see <i>page 56</i>), while continuing to elevate shared values (see <i>page 40</i>)—values such as caring for and protecting women and girls	✗ Repeating the opposition's “facts” or messaging in order to “myth bust”
✓ Include messengers who <i>support</i> abortion or who express that they are <i>conflicted</i> about the issue	✗ Including messengers who <i>oppose</i> abortion (even to highlight audience mindset)

In addition, our audience often holds mixed emotions about abortion care. When developing messaging, especially short messaging for social platforms, it is important to include some elements that show or acknowledge these mixed emotions. This could mean a messenger expressing some of their own conflicting feelings about abortion or acknowledging that making the decision to seek an abortion can be difficult, while also supporting the decision of a woman who needs abortion care and being there to talk with them about it.

Acknowledging some of these mixed emotions provides opportunities for the more conflicted members among our audience to identify with our messages and messengers, which is helpful for building connection and equipping our audience to become more supportive. If we only show strongly one-sided perspectives in our messages—for example, having all messengers that are only positive toward abortion care and show no conflicting feelings—we risk our audience feeling disconnected from our messaging because they cannot relate to the messenger's perspective.

Continued on next page ➡

Beb, daktari amesema I have to terminate hii pregnancy juu health yangu iko at risk.



Beb, I'm here for you. your health comes first. Let's talk about it and figure out what you need.

⬆ The above is an example of tested campaign messaging that includes a visual. The emotions being displayed by the people in the visual match the context of their conversation. By the man saying "Let's talk about it and figure out what you need," there is both a show of support for the women and an implicit acknowledgement of the situation being difficult.

For messaging that includes photographs or digital images, it is important for the emotions expressed in the visuals to match what is being said in the messaging. For example, if a messenger is expressing concern or says they are scared, the visual should show a person who is concerned or scared, rather than happy or content. If another messenger is expressing how they will be there to support their friend or loved one, the visual should show a person who is showing warmth and concern or providing comfort (e.g., a hand on someone's arm or shoulder). At the same time, it is important to avoid visuals that express extreme emotions—this includes both showing people who are extremely happy or extremely upset. Visuals that show these extreme emotions either don't match the emotional expectations our audience has or can cause them to become emotionally flooded and shut down, making them unavailable to hear our messages.

Emotional Flooding



Emotional flooding is when someone feels so overwhelmed by strong emotions that it shuts down their higher order thinking (see page 22 for more on this). When someone is emotionally flooded, they cannot reflect or calmly consider—they typically withdraw from engaging with the topic while they experience their strong emotions, in part to protect themselves emotionally.



Important Background to Help You Navigate This Guide



Is This Guide for You?



This messaging guide was developed to assist activists and others who are supportive of women having access to safe and legal abortion care in Kenya and those working to increase access to safe and legal termination of pregnancy. We believe this guide will also be useful for Non-Governmental Organizations (NGOs) and communicators trying to engage in more effective conversations about abortion care, for healthcare providers in Kenya looking to better inform their patients about abortion care, and many others in the Sexual Reproductive Health and Rights (SRHR) field.

While this guide offers research-based recommendations on communications and messaging, the intent is not to tell people exactly what to say. The ultimate goal is to help activists and allies build a deeper understanding of what will most effectively engage and move potential supporters. This way we can continue to develop and evolve messaging that is authentic to ourselves and our own goals.

The insights from this research and the recommendations presented in this guide are also relevant to a broad cross-section of activists and allies speaking out in support of access to safe and legal abortion care. This includes strategists, organizers, legal advocates, public educators, faith leaders, healthcare workers and health policy makers, and more. With this messaging guide, we hope to give everyone working passionately on this issue the tools to effectively communicate with potential supporters in ways that will engage them and help to expand our collective networks of activism.

It is important to remember that as human beings, we are all persuaded by emotions, values, moral arguments, and personal motivations. As we identify and engage with people, policymakers, reporters, and others that we know will be critical to reach with our messages, it can be easy to lose sight of a simple fact: they are human beings too.

This guide is designed so that you can:

- Better understand the mindsets of people who feel conflicted about supporting women and girls who need access to safe and legal abortion care;
- Quickly find the information you need to make the research and findings more relevant in your work; and
- Use the guidance and insights to develop and deliver more effective messaging.



In addition to using the values-based messaging we recommend in this guide when communicating with potential supporters, it is also important for us to do so in our correspondence with the media, through legal briefs, at events, and in many other places. Doing so will strengthen our ability to engage with these important audiences—and increase the likelihood that they and others will adopt and use language we know is effective in building support.

The Goals of This Messaging Research



More than one-third of mothers who die every year in Kenya are deaths that occur due to unsafe abortion and unsafe abortion complications. According to the Kenyan government, these women leave behind thousands of motherless children who may not survive due to lack of maternal support and care. The government finds that children who are left motherless due to maternal mortality are up to ten times more likely to die within two years.

To change this dynamic and improve health outcomes for women and their families, it is essential to build and grow space in Kenya that will allow for positive and supportive conversations on access to safe and legal abortion care. To learn how we can best accomplish this, the goals of this research project were to:

- ➊ Understand the mindset of potential supporters around access to abortion in Kenya;
- ➋ Understand effective strategies for normalizing and destigmatizing the public conversation around access to safe and legal abortion care and increase potential supporters' willingness to engage on the topic; and
- ➌ Develop persuasion messaging that would be effective in engaging and building public support (especially online) for safe and legal termination of pregnancy in Kenya.

To achieve this goal, this research project, conducted from 2022-2023, was driven by a core set of objectives:

- ➊ Develop messaging approaches that increase support for access to safe and legal abortion care, and understand how to use these approaches effectively in communications;
- ➋ Develop effective ways to include men in the conversation, since they usually think this is a woman's issue;
- ➌ Incorporate insights and expertise from the project's advisory group into the research and into how the final recommendations are implemented; and
- ➍ Develop and implement a strategic communications campaign.

Change Hypothesis

To design a research methodology best suited for this project, a change hypothesis was first developed. A change hypothesis is a working theory, given all available information, of what a specific path toward achieving our goal might look like. Developing this change hypothesis helps to focus initial pieces of the research. What we learn as the research progresses allows us to test, modify, and strengthen this hypothesis.

Below is the change hypothesis developed for this research:

- ❖ There is broad opposition to abortion access among the general public and the topic is heavily stigmatized, creating a steep hill to climb in terms of building public support for access.
- ❖ To build broad public support for access to safe abortion, we first need to develop a segment of Early Adopters.
- ❖ Early Adopters, many of whom are also local social influencers, can become ambassadors for access to safe abortion within their own social and community circles.
- ❖ Therefore, the message development research is focused on developing persuasive messaging for Early Adopters.
- ❖ As local social influencers, they can then become effective ambassadors—if we equip them with messaging that is persuasive to them, and that they can then use to effectively communicate their views and feelings to their social circles.

What is a social influencer?



When we talk about social influencers in this guide, we are referring to people who actively seek out and share information that can have an influence on their social networks, including their networks that exist in-person or online. See page 18 for more.

The good news is that this research shows we can make significant progress towards our goals when we have a range of credible messengers delivering effective messaging. For example, at the start and end of focus groups, participants in the research were asked to put themselves on a scale between 1 (*Kenyan laws should protect the sanctity of life and unborn babies by prohibiting women from having an abortion*) and 9 (*Kenyan laws should guarantee that women have access to safe and legal abortion, even if some people do not agree with abortion or the decision of a woman to have an abortion*). Before receiving messaging, many placed themselves on the low end of the scale, believing that Kenya should prohibit abortion. After receiving effective messaging and watching messenger videos in support of safe and legal abortion care, most participants moved toward the high end of the scale, now believing that Kenya should guarantee access to safe and legal abortion care.

Below are quotes from two participants who moved significantly along the scale. In each bubble, the quote on top shows what the participant said before receiving messaging. The bottom quote shows what they said after. As you can see, the messaging is very effective, creating a positive shift in their thinking.

Shift from 1 to 9

Before Messaging: Rights of the unborn



Every child at conception has a right to live.



After Messaging: Concern about harms to women and children



To reduce the rate of maternal deaths in Kenya. To reduce the number of neglected children who end up in the streets...It has changed immensely as access to safe and legal termination of pregnancies will help young girls and women to be comfortable undertaking this procedure without prejudice.

—Father, Kisumu



Shift from 5 to 9

Before Messaging: Do not support full access



I don't advocate for abortions. Whilst there are some genuine reasons for one to procure an abortion, e.g., health reasons, a rape case... other cases there might be no valid reasons for one.



After Messaging: Concern about harms to women



Women should be given a right to decide what happens to their bodies. This in turn helps create a strong society where women are given a chance at living a dignified life without the psychological and physical burden of having to carry to term a pregnancy they do not want... With 35% estimated maternal deaths due to unsafe abortions, the government needs to expedite legalization of safe and accessible abortions."

—Mother, Nakuru



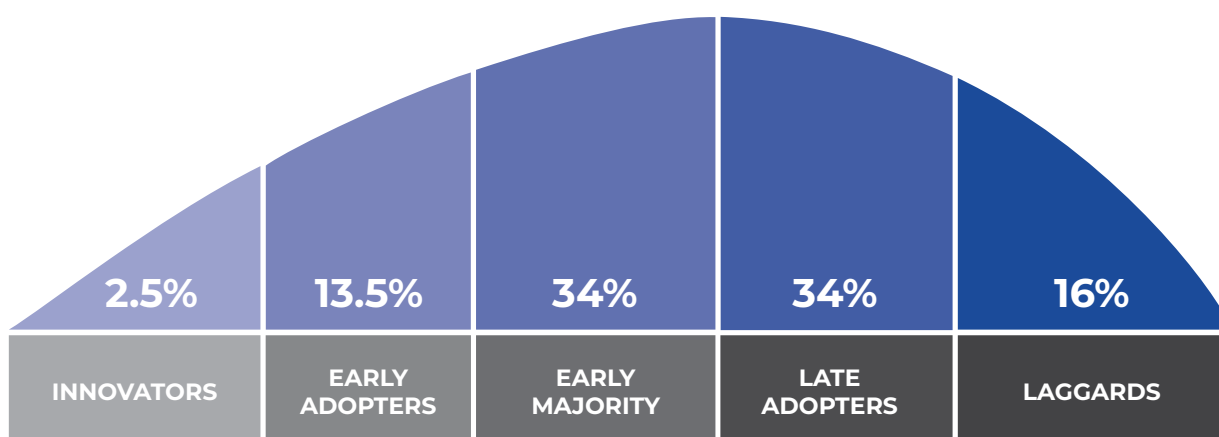
Key Concept:



Diffusion of Innovation

As we consider how to create and foster this change, our research approach was informed in part by the *diffusion of innovation*, a theory first developed by Everett M. Rogers, which explains how ideas gain momentum and spread over time through a specific population or social system.

Rogers' theory helps to inform one model for how social norm change can spread through a community or society. It suggests that the adoption of new ideas or attitudes does not happen simultaneously in a social system. It begins with a small band of innovators—people who are leading breakthrough change in their field of expertise. In this context, you and others who are already engaging in conversations around safe and legal abortion care are the *Innovators*—those who are doing the work now and shaping the vision for the future. As you can see in the graphic below, the innovators make up a relatively small portion of the overall population. While necessary for creating change, they cannot do it alone. Ultimately, to be successful, you must engage a set of potential *Early Adopters* who can help to spread these new ideas or attitudes and begin to build support among an *Early Majority*.



A number of social science researchers have found that those in the early adopter and early majority groups are both different from those who are innovators. These *Early Adopter* and *Early Majority* audiences, who adopt a new idea earlier and influence change among others, also have different characteristics than people who are *Late Adopters*. In our efforts to reframe the discussions and attitudes around safe and legal abortion care, it is important to understand the characteristics and attitudes of early adopters, as well as the early majority, and how they may be different from or similar to those of your existing *base*. By focusing on these audiences, you can help to hasten a tipping point toward broader support.

Later in this guide, we share more about our audience—most of whom are early adopters, with some in the early majority—and the values, lived experiences, beliefs, emotions, and personal identities that shape how they situate and experience topics related to abortion care.



Brief Research Methodology



The findings and evidence-based recommendations presented in this messaging guide are developed from in-depth qualitative research, conducted from 2022 to 2023. This research methodology was intentionally designed to explore our audience's mindset related to abortion care, while also developing and testing messaging strategies in an iterative way to strengthen their effectiveness. Research components include:



Landscape Research: We conducted qualitative landscape research at the outset of this project to inform and guide initial steps. This research was comprised of a media audit and social listening analysis to understand how abortion was being covered in the media, on social media, and discussed by news consumers across Kenya. We conducted a set of messaging audits to look at how supporter and opposition organizations and sexual and reproductive rights organizations currently communicate about abortion care.



Mindset Research: We then conducted qualitative mindset research (20–22 July 2022) among participants holding attitudes that abortion should be allowed in certain or most circumstances, or who were unsure. Potential participants talked with a recruiter who asked them questions and invited them to participate if they held these attitudes. Potential participants were excluded if they said abortion should be completely illegal under all circumstances. Six focus group discussions were conducted in Kisumu, Nairobi, and Nakuru. The different groups studied included young people, parents, and healthcare providers. One male and one female focus group was held in each of the three cities, with 9 participants taking part in each (54 participants total). The language used throughout focus group discussions (English or Kiswahili) varied according to the preference of participants. All participants were paid an incentive to participate.



Persuasion Research: We conducted an online asynchronous focus group among 32 Kenyan residents, ages 18–64, over four days (17–25 January 2023). Participants resided in Kisumu, Nairobi, or Nakuru. In this focus group we tested our audience's reactions to draft persuasion messaging and materials related to access to safe and legal abortion in Kenya and gathered insights to develop a set of recommendations.

For a more in-depth look at our research methodology, see the appendix on page 73.

“Our Audience”—The People We Need to Engage and Persuade to Affect Change



To support our *Early Adopter* strategy, our research focused on identifying and researching groups of social influencers in different local communities across Kenya. The groups we identified were young people, parents, and healthcare providers.

Young men and women were selected as potential early adopters to research because they are more likely to be social influencers and engaged, particularly in online and digital spaces, which is key to the campaign strategy. There are also generational shifts taking place in Kenya—changes in attitudes and beliefs in younger generations that are positive and more supportive as compared to older generations, including more tolerant attitudes toward sexual and reproductive healthcare and rights and access to abortion care. This makes younger generations more likely to be early adopters.

Parents were selected as potential early adopters to research because they feel empathy and caring for their own children and may have a more nuanced understanding of the complicated and unexpected situations a woman or girl and her family may face in life that may lead her to seek an abortion. They can also socially influence their children and other parents on the issue. Healthcare providers were selected as potential early adopters to research because they are more likely to view abortion as a medically necessary procedure and because of that recognize that abortion care can be provided safely and legally. Many may also have lived experiences treating complications from unsafe abortion care and value protecting their patients from such harm.

What is a social influencer?



When we talk about *social influencers* in this guide, we are referring to people who actively seek out and share information that can have an influence on their social networks, including their networks that exist in-person or online.

To be considered a social influencer for our research purposes, participants needed to be engaged in current news events and social issues, doing at least two of the following activities at least weekly:

- Use social media like Facebook, Instagram, or Twitter
- Read the news online
- Look on the internet for information about politics, government, social issues, or public policy
- Share news stories or comment about politics, cultural, or social issues on social media like Facebook, Instagram, or Twitter



They can also socially influence their patients and may have already established ways of doing so.

We also included participants who were of the Christian faith to test the effectiveness of faith-based messaging.

When it comes to their attitudes on abortion, the participants for this research we selected held attitudes that abortion should be legal in *most circumstances* or *limited cases*. One thing to note is that we intentionally

excluded participants who feel that access to abortion in Kenya should be completely illegal in all circumstances, including physical and mental health risks, severe fetal deformities, and rape or incest. This group holds beliefs that are so extreme they are largely unavailable to us.

Please keep in mind that there are diverse segments of people within our audience—diversity in terms of demographics but also different beliefs, attitudes, and experiences.

Key Concept:

The Abortion Continuum and Adjacent Possible



It is helpful to understand how support for access to safe and legal abortion exists on a continuum. On one far end—the most oppositional end—there is a level of violence, or at minimum condemnation, toward the idea of women accessing abortion care. On the other far end—the most supportive end—we see acceptance and affirmation of women as they consider or decide to access abortion care.

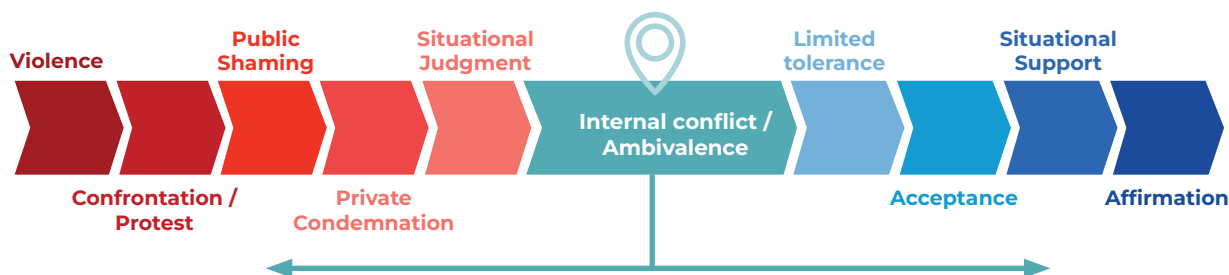
As activists, our work is focused on moving people toward acceptance and affirmation, from wherever they may start—and we have learned that it is quite possible to move people along this spectrum. However, it's not realistic to expect that someone who is currently at the violence and public shaming end of the spectrum will jump all the way to acceptance and affirmation. Reaching and moving people along this spectrum takes deliberate and purposeful work. And most importantly, it takes time.

The step-by-step process to move people along this spectrum is a concept popular science author Steven Johnson calls the *adjacent possible*, which he adapted from evolutionary biologist Stuart Kauffman.

In Johnson's book, *Where Good Ideas Come From*, he notes that while “we have a natural tendency to romanticize breakthrough innovations...[ideas] are, almost inevitably, networks of other ideas” that must evolve gradually, with each new innovation or insight opening up new possibilities that did not exist before.

The concept of the adjacent possible can represent a helpful way for us to consider and explore the pathways toward expanding support for access to abortion care. Understanding our audience's current attitudes and the circle of adjacent possibilities they may be open to and ready for gives us an opportunity to help them take one step—of many—towards the supportive end of the spectrum. It does not mean we accept that intermediate step as an end unto itself, simply that we use each step as an opportunity to expand an ever-greater set of new possibilities.

Continuum of Support for Access to Safe and Legal Abortion





A Heartwired Research Approach: Developing Messaging that Meets Our Audience's Needs and Calms Their Concerns



Advances in the neurological and social sciences have created a paradigm shift in our understanding of how the human brain processes emotion, logic, and primal or gut reactions, and how these elements impact people's decision-making. Researchers have come to realize that human decision-making is largely influenced by how people are *heartwired*—the mind circuits and connections that tie together five important factors: their emotions, identity, values, beliefs, and lived experiences.

In 2017, with support from the David and Lucile Packard Foundation, Goodwin Simon Strategic Research and Wonder: Strategies for Good released a strategy guide called [Heartwired](#) that outlines a new, integrated approach to audience research, storytelling, and persuasion communication. The heartwired research approach centers this new understanding of how people make decisions and why people change, and investigates how the five heartwired factors combine, and often collide, to shape people's attitudes and behaviors.

The Five Heartwired Factors	Why This is Important for Messaging on Abortion
 EMOTIONS: The feelings that human beings have in response to the stimuli within and around us are complex. Our emotions typically drive our behavior and lead us to prioritize certain concerns. Given how we are neurobiologically wired, we tend to make decisions based on emotions and back them up with logic, especially when we feel urgency and need to make a split-second decision, and this all happens on a largely unconscious level.	Emotions provide opportunities to connect with people. When messengers connect with an audience using messaging that matches the feelings that they have—messaging that is emotionally congruent—it can open pathways that enable emotional change within them. At the same time, emotions can be a barrier. When messengers try to communicate with people in a way that is not congruent with their emotions, or they become emotionally flooded by an issue, they may simply shut down and will not be capable of hearing and processing new information. There are times when abortion messaging can inadvertently emotionally flood our audience. For example, the images and words are too vivid and upsetting, or the messaging makes people feel viscerally attacked. This is generally not helpful for our work, which often relies on our audience feeling empathy in order to drive positive behavior change.

The Five Heartwired Factors	Why This is Important for Messaging on Abortion
 IDENTITY: Self-identity is how people see themselves in relation to the world around them. We are all driven to make decisions that align with our sense of self, and when we don't, we experience uncomfortable cognitive dissonance. Every individual's identity incorporates many facets (e.g., gender, race, faith) and traits (e.g., being hard-working, fair-minded, educated). Internal conflict related to behavior change on certain topics is often the result of a tug-of-war between different facets of a person's identity.	Nearly all humans have a deep psychological need to see themselves as fundamentally a good person, and very few want to see themselves as harming others. To develop effective messaging, we need to understand how our audience believes a <i>good person</i> with their identity would behave. Our messaging needs to show our audience how it is possible to support access to abortion care and, at the same time, retain their identity and the sense of themselves as a good person.
 LIVED EXPERIENCES: The events and relationships people experience in their lives combine with the meaning they assign to those experiences to shape their response. The way we interpret and remember events—the narrative we construct around them—is just as important as what actually happened. Exploring and understanding those lived experiences is key to effective messaging strategies that drive behavior change.	As people sit with their internal conflict, sorting through their beliefs and feelings about an issue, they bring their own lived experiences to that internal process. For example, many among our audience have negative experiences (personal or through family and friends) with unsafe abortion methods. Very few have lived experiences with safe abortion care. For messaging to be effective, we need to help disrupt the flawed beliefs our audience holds and replace them with more accurate and neutral or positive beliefs that also make sense in the context of their own lived experiences.
 VALUES: Values are ideals that individuals hold about what is good or bad, right or wrong, important or unimportant, appropriate or inappropriate. Values influence emotional reactions, attitudes, beliefs, and behaviors and are often shared broadly within a culture or community. A person's values help them make meaning in their lives. If those values are contradicted, people experience a sense of dissonance and incongruence, which interferes with their capacity to change attitudes and behaviors.	It is important to identify the Venn diagram of shared values—the places where our audience's values overlap with those of activists. By listening deeply—and with empathy—it is possible to identify these shared values, even while there are many others that activists would disagree with. It is in this space that building effective communications and persuasive messaging on access to safe abortion care—ones that are rooted in shared values—is achievable.
 BELIEFS: Beliefs are ideas that people hold to be true. When we have significant experience with something, our beliefs are deeper and more nuanced. When we have little to no experience, we tend to fill in the knowledge gaps. Whether we have deep or scant knowledge, our beliefs are further shaped by our identity, our lived experience, and our values. In other words, facts alone do not shape beliefs.	Whether an activist agrees or not, their audience's beliefs will remain true for them. To effectively engage them, it is critical to understand how our audience's beliefs interfere with their ability to be supportive of access to safe abortion care and build messaging to implicitly disrupt those beliefs—or else those beliefs remain roadblocks to change.

Understanding how a person is heartwired allows activists to develop messaging that can meet their emotional and informational needs. When their needs are met, that person has a greater capacity to sit with and sort through their feelings (including contradictory or ambivalent feelings), take in new and different information, and begin to change. Importantly, when these needs are not met, change is very difficult and unlikely to happen.

Key Concept:



Upstairs Brain/Downstairs Brain



UPSTAIRS BRAIN

When human beings feel relaxed and comfortable, we tend to rely on our *upstairs brain*—the part of the brain that is responsible for our higher order thinking, reflection, and empathy.

DOWNSTAIRS BRAIN

When something is unfamiliar or uncomfortable for us or when we feel conflicted, the amygdala—sometimes called the *downstairs brain*—kicks into high gear. This is the part of our brain that regulates big negative emotions like fear, anxiety, and anger. Those emotions are like noise that can shut down our ability to hear thoughts from our thinking brain.

When it comes to our audience and abortion, as long as their amygdala is overly triggered, their brain remains unable to process the messages we want them to consider. This interferes with their ability to reflect, reconsider, and ultimately to change behavior—and our audience remains emotionally stuck and conflicted.

For our messaging to be effective with our audience, it must be constructed in ways that help calm their amygdala so they can shift away from fear and anxiety and back into their upstairs brain. This enables them to reflect, feel empathy for others, and make an emotional connection. Ultimately, calming the amygdala enables our audience to become more open and, potentially, supportive of safe and legal abortion care.

Understanding the Mindset of Our Audience



To understand our audience's mindset and their reasoning patterns as they engage on the issue of abortion, we conducted a series of Mindset focus group discussions. These discussions took place with more than 50 participants from Kisumu, Nairobi, and Nakuru who held conflicted views and feelings about abortion care (see [page 73 for a detailed research methodology](#)).

The focus group discussions provided an interactive setting to hear from our audience and a crucial way to explore an initial set of values-based frames, themes, and messages. What we learned from these discussions also allowed us to refine our messaging approaches for later research phases.

What is an Audience Mindset?

To develop effective persuasion communications, it is critical to first understand our audience's mindset. Mindset research provides a window into the life experiences, identities, beliefs, emotions, and values of the people we are trying to reach. It reveals the most powerful points of connection—those that begin with what is fundamentally true for our audience rather than the worldview that we hold as activists who already understand and believe in our issues.

By better understanding our audience's mindset, we can draw on the emotional power that helps change hearts and minds. It allows us to develop messages that fit into their already deeply held values rather than trying to change their core values.

Simply put, it means providing a way that enables our audience to come to the change themselves rather than activists trying to impose change upon them.

Key Insights: Our Audience's Mindset



Willingness to hold open, robust discussions. Many people are hesitant to discuss abortion. When they do, the conversation is often dominated by opposition messaging which can often end or even prevent open conversation. Though abortion is still stigmatized and taboo, our audience is willing to have open, honest conversations with each other on the topic. In focus groups, research participants readily discuss their own lived experiences and attitudes around abortion. Even when expressing oppositional attitudes, nearly all participants remain engaged in the conversation throughout. By the end of the focus groups, there is a sense of connection and community among many participants.

“ I have learned a lot from you guys. I also feel more needs to be done in Kenya to legalise safe abortion. That can only be done by first start[ing the conversation]...we need civic education that will help separate facts from myths. We need to stop misinformation from spreading and we can do that by conducting civic education. ”

– Mother, Nakuru

“ Of course, I will talk to my colleagues at work...[abortion] is a topic I have been talking about in the office and even try to [do] something [supportive] about it. Of course, I will continue saying what I feel about it. ”

– Mother, Nakuru



Barriers are real, but opportunities are abundant. Audience mindset barriers to supporting access to abortion in Kenya are dominant, including negative emotions, flawed mental templates, and broken reasoning chains around abortion. At the same time, there are many opportunities and bright spots for building support. Generational shifts on the issue—change that is positive and more supportive—is one potential bright spot (see page 28 for more on this). Sharing core values, such as protecting women and girls and preventing harm and death, are other opportunities. More research is needed to understand what opportunities there may be to grow support among audiences that may be more opposed to abortion.



Key Concept:

Flawed Mental Templates and Broken Reasoning Chains



A *mental template* is the name given to the combined web of associations and images a person's mind constructs about something—or someone—they encounter in the world. The concept was developed by Dr. Phyllis Watts, a social and clinical psychologist who advises changemakers on the psychological dynamics that prevent progress on tough social issues.

As humans, when we read, listen, watch, or experience things throughout our lives, our mind develops these mental templates as a way to take in and synthesize all this information into short cuts that help bring order and make sense of things for us. This is why, for example, when we read a story about a doctor, we don't have to think about what a doctor is—our mind is automatically primed with images and associations related to doctors that we tap into to help us understand context in the story we are reading.

We also tap into these mental templates to form *reasoning chains*—a way for our mind to link things together and bring some sort of logical order to the things we feel, know, and believe. Ultimately, these reasoning chains help us to reach conclusions or make decisions. For example, if our mental template of doctors is full of positive associations, we may be more open and willing to listen when a doctor discusses the pain of treating patients with lung cancer and asks people to smoke less in order to prevent getting cancer. Because of our positive associations, and the connections the doctor makes between smoking and cancer, we may then decide to stop smoking or convince someone we love to stop.

Of course, the associations and images held in our minds are not always fair or accurate. According to Dr. Watts, people will develop a *flawed mental template* when they are not deeply familiar with something or someone—when they lack either the information or lived experiences needed to form an accurate template in their mind. And without the necessary information at hand, their minds work to make sense of things—to connect the dots—with whatever information they do have, often making flawed leaps of logic to complete a reasoning chain and reach a conclusion. This forms what is known as a *broken reasoning chain*.

When our audience develops a flawed mental template of abortion and the women and girls who may need to seek abortion care, it understandably leads them to form broken reasoning chains that lead them to be less supportive of access to safe and legal abortion care. For example, if our audience perceives people who seek abortion as young, irresponsible, promiscuous, and isolated—and the people who provide abortions as causing harm and enabling sexual promiscuity—their mental templates and reasoning chains are likely to lead them to oppose legalizing access to abortion. Understanding our audience's knowledge gaps gives us the opportunity to be much more effective with our messaging—to provide them with specific narratives, personal experiences, and information that can help them correct their flawed beliefs and to accurately connect the dots.

Fortunately, we do not have to correct every flawed idea or inaccuracy for our audience. We simply need to disrupt these flawed mental templates enough that it allows our audience to begin questioning what they think they know—and to replace those flawed associations with ones that are more positive or neutral. Doing so can enable them to be open to hearing more, thinking about issues in new ways, and creating new emotional reactions.





Our audience's mental template of abortion, women seeking abortion, and people who provide abortions is deeply flawed.

Our audience holds related, but separate, mental templates of abortion (the general issue), of the women they imagine are seeking abortion care, and of the people who provide abortions. Below, we highlight dominant components of our audience's mental templates that we identified in the research. It is important to remember that mental templates are not always fair or accurate and are often reinforced by what our audience absorbs from the media they consume. However, understanding them is important because we must work to disrupt these faulty ideas and replace them with associations that are more accurate, more neutral, or more positive.

To learn more about how the media is communicating about abortion care, and the messaging that both opposition and supportive organizations are using in their communications, see Understanding the Communications Landscape on page 64.

Mental Template Components: Abortion. When it comes to abortion generally, our audience's mental template includes the following components:

- ❖ Unsafe, but perceived as safer when done at a hospital or by a doctor
- ❖ Happens when a woman is depressed, desperate, hiding something
- ❖ Is connected to promoting Western values over traditional culture
- ❖ Ending life or "killing," for some
- ❖ A sin or against God's will
- ❖ Is shameful, needs to be kept secret
- ❖ It is important to ask trusted friends, family for advice
- ❖ It is important to ask husband for help or guidance, out of respect
- ❖ It is important to carefully consider one's decision and be "in the right frame of mind"
- ❖ Most frequently sought by young, reckless girls, rarely by married women
- ❖ Causes infertility or death; mental health problems including depression, shame, regret
- ❖ Is connected to degradation of morality and social media
- ❖ Rampant in Kenya
- ❖ Illegal according to the Kenyan Constitution





Mental Template Components: Women Seeking Abortion. In the following table, we provide components of our audience’s flawed mental template related to the women they imagine are seeking abortion care. We have categorized the components to show how our audience perceives certain aspects of women’s lives, including their mindset when seeking an abortion, their lifestyle, the circumstances they find themselves in, and their motivations for seeking an abortion.

 Mindset	 Lifestyle	 Circumstances	 Motivations
› Interfering with natural cycle of life or the world › Not humble to God’s will › Doesn’t respect sanctity of life › Uneducated about birth control › Selfish and self-interested › Low self-esteem › No shame › Cowardly › Gullible or easily influenced by others › Tormented by decision after the fact, regretful	› Irresponsible/ careless › Promiscuous › Sexually irresponsible › Politically progressive › Unlimited and unencumbered freedom in contrast to other people meeting responsibilities › Lacking parental oversight or guidance › Not raised right, lacking morals	› Young, primarily girls and teens › Desperate › Unstable › Unmarried, not in a serious or committed relationship › Not a parent to other children › Acting alone, isolated from family › Without resources but also has enough financial means to pay for an abortion › Living in rural villages or towns	› Hide illicit behavior, trying to prevent oneself from being exposed › Wanting to continue sinful path without consequence › Elevating individual needs above societal norms › Forced to have an abortion › Rejected or abandoned › Victim of abuse › Afraid of judgment and/or rejection › Looking for easy way out › Shamed › Judged by society

Mental Template Components: People Who Provide Abortions. When it comes to the people who provide abortions, our audience’s mental template includes the following components:

- › Quacks
- › Murderers
- › People causing harm to women and girls
- › Enabling sexual promiscuity



Positive generational shifts on family planning and birth control are readily apparent.

Younger generations note having increased knowledge about, and access to, birth control. While there is an increased desire among parents to have conversations with their children about sex and birth control, the taboo does remain strong among fathers. In addition, there are cultural shifts taking place toward empowerment for women, activism around gender issues, and increased awareness about family planning. While most view these changes as beneficial, some see generational change as directly tied to exposure to media and the internet, poor parenting, or worsening morals in society. Due to the fact that younger generations are exposed to the internet, TV and movies, and ideas about sex at a young age now, there is a sense among our audience that children already know everything about sex from the internet. This is very different from older generations who learned little or nothing about sex. Some among our audience also think younger generations may have a decreased sense of morality about sex, as sex used to be viewed as sacred in some way and now it is much more casual for younger generations.

“People are getting that knowledge from the internet; it can be dirty or safe but it's from there.”

—Young male, Nakuru

“I would say I think our parents... they even never had birth controls. I don't think they had because to them, people were just supposed to give birth, when you just become, in fact, I don't think even most of them enjoyed their adolescence, they were like, as long as you are this, start like this, you are ripe for marriage.”

—Young female, Kisumu

“Actually, there are a lot of changes. The reason why I am saying that is most of the current parents, majority of them, they tend to understand the kind of changes taking place in the entire society in terms of children are learning and they are getting to know a lot of stuff early as compared to previous generations. So, to some extent there are some parents that are coming out openly accepting the changes and taking the changes kind of positively.”

—Male healthcare provider, Kisumu



Family planning is used to promote agency over one's life. Our audience believes that family planning is important, in many ways, to give people control of their life and future. Some note that family planning prevents poverty and not having enough financial resources to care for the baby or for the children they already have. Others note that family planning allows a person to be sexually active—that the reality is sex feels good and people do not want to have a lot of children because of it. So, family planning allows them to do so. Others focus on how family planning lets people plan their lives—that people want to be able to plan the age at which they have children and do not want pregnancy or children to interfere with life plans such as education. Also, that it lets people continue to work—that some professionals, like doctors or teachers, cannot work if they are continuously pregnant. Some note that family planning enables women to continue their education—that it is important for a woman to be able to complete her education and pursue her professional goals.

“I have seen someone just wanting to live more as an individual to be able to do everything that they want.”

—Father, Nairobi

“We are sexually active, and we don't want to get babies. We don't want to pop out babies like we are popping out cash from the ATM. We'll have to take birth control....”

—Young female, Kisumu



Education about family planning is important – but who should be responsible? There is widespread agreement among our audience that children need to be educated about family planning from an early age, and at least as soon as puberty, which is commonly seen as 12 or 13 years old. Our audience believes it is important for both boys and girls to learn about family planning and that boys learning early will help make them more responsible later in life. Several female participants in the research say this education may also improve the current situation where most men think birth control is entirely the responsibility of women. When it comes to who teaches children about family planning, our audience's opinions do differ. Many agree that because children spend so much time with their teachers and their teachers are already responsible for their education, teachers should also be responsible for teaching kids about family planning. Fathers, in particular, do not want to be the ones to educate their children about sex and family planning. Many view mothers as the people that are primarily responsible for teaching their daughters and sons about family planning, though some say that fathers should be included and are just as responsible for teaching their sons. Some among our audience say it is the role of older generations or aunts and uncles to teach children about these issues, though others report that older generations do not discuss sex with younger family members.

“ Yes, to echo what my friend has said about awareness, a number of times—you see when we talk of family planning the notion that we have is it's performed by ladies. But with the general knowledge, it is even performed by men. So I think men too should get informed that even them... they can do it. 👍👍

–Male healthcare provider, Kisumu

“ According to me, the role is supposed to be solely and entirely on teachers. Because they are the ones who stay with the kids for a long time, and they are the ones who have that courage to teach kids those things directly to the point... it is hard for a parent in the current society to sit you down and start talking to you about these things. The way to go is to integrate this stuff in the curriculum to be taught by teachers. 👍👍

–Young male, Nakuru

“ ...nowadays our men, if you tell them to go for family planning they won't go. You are the one who will struggle with the family planning; you will be taking the pills secretly or you will be going for the injection secretly, but the men won't go. So if we start teaching them in school at that age, so they grow up knowing, this family planning should be fifty-fifty. 👍👍

–Mother, Nakuru

When telling stories, it is important for the cultural context to match our audience's expectations—in essence, to depict mothers or aunts educating girls and boys, and fathers or uncles educating boys but not girls. This makes the stories we are sharing more credible for our audience.





Positive benefits and negative consequences of legalizing *abortion*. Before participants in the research are provided supportive messaging about access to safe and legal abortion care, they were asked what they perceive to be the positive benefits and negative consequences of providing such access. While many participants readily express the benefits they see of legalizing abortion, they also share many negative consequences. Of the positive and negative components raised by our audience in the research, the following are noted most:

Positive Benefits	Negative Consequences
➤ Access to safe abortion ➤ Reducing stigma ➤ Reduced maternal mortality ➤ Reduced complications from unsafe abortion ➤ Reduced underage pregnancies ➤ Reduced pregnancies resulting from incest	➤ Remaining societal stigma for seeking an abortion ➤ Avoiding responsibility ➤ Going against God's plan for you—what if God planned for you to have multiple children? ➤ Increasing casual, unprotected, or “aimless” sex, leading to an increase in sexually transmitted diseases ➤ It will be abused by men who will force their partners to have an abortion if they do not want to be with that person long term ➤ Increasing gender-based violence against women ➤ Increasing immorality and promoting promiscuity ➤ It “is basically allowing murder” ➤ Opening up the debate for other issues that go against culture and traditions



Notable differences by geography and demographics. In general, members of our audience in Nairobi and Kisumu seem to be more supportive as compared to Nakuru, though it is difficult to disentangle the effects of geography versus demographics and profession. Many health professionals recognize the need for safe and legal abortion care, and at the same time they express hesitancy about it because it is illegal. They seem to fear legal or social consequences of speaking out in support or providing services and information. Some older adults may more easily recognize that there are gray areas in life, while younger adults may be more likely to think about life in black and white or binary ways.



» Abortion

In addition, because the word abortion is in the Kenyan Constitution and the Constitution was bitterly fought over, many among our audience believe the status of abortion should remain the same in Kenya. Many also identify as “good and law-abiding” Kenyans—and being “good and law-abiding citizens” mean you should follow the law and the constitution.

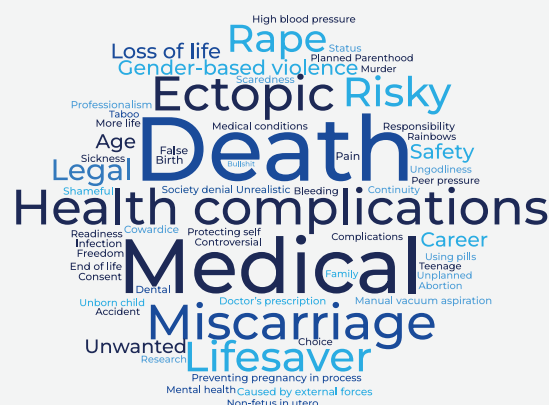


Word cloud of our audience's associations with abortion prior to receiving messaging developed in this research.

Termination of pregnancy is viewed more positively. It is seen as “not so scary” and less harsh. Many among our audience equate it to a medical procedure done by health professionals. This makes it less likely for our audience to think it would be unsafe, as compared to their associations with the word abortion. In addition, termination of pregnancy is more associated with something going wrong with a pregnancy than it is with a woman deciding to have an abortion for non-medical reasons.

An alternative to termination of pregnancy could be ending a pregnancy. While we did not test this phrase in the research, it organically came to mind for some participants when thinking about *termination of pregnancy*.

Please note that while “murder” and “killing” appear prominently in the word cloud for abortion, those words are not prominent in the word cloud for *termination of pregnancy*. This helps to underscore the difference in how the audience perceives the two terms—*abortion* as negative and stigmatized and *termination of pregnancy* as more positive and medical-related. While “death” features prominently in both word clouds, note that our audience is referring to a pregnant woman dying in some cases and a fetus dying in other cases.



Word cloud of our audience's association with termination of pregnancy prior to receiving messaging developed in this research.

Continued on next page 

Lost in Translation

It is important to acknowledge that some activists may prefer not to use the term *termination of pregnancy* because it does not translate well from English. At the same time, when developing proactive messaging for our audience, the research finds that *termination of pregnancy* is a more helpful phrase than abortion because of how much our audience associates abortion with it not being safe.

The goal in using *termination of pregnancy* is that, over time, it may be possible to build a greater understanding that helps to destigmatize the term abortion and make it less taboo. The good news is that after receiving the messaging in this research, our audience's reaction to the term *abortion* does shift in positive ways. This shows that effective messaging—whether it be *termination of pregnancy* or other phrases that activists are using in place of the term *abortion*—can begin to help our audience have a new emotional reaction to abortion, especially as they begin to distinguish between safe and unsafe abortion care.



Word cloud showing how our audience perceives abortion after receiving messaging developed in this research.



Messaging Recommendations



Many among our audience believe that abortion is illegal and dangerous and hurts women and girls. Because of these flawed beliefs, they are initially inclined to be against allowing abortion in Kenya. The good news is that with effective messaging, we can help them understand that there is a distinction between *unsafe* and *safe* abortion.

Showing our audience that safe abortion is possible—and that the harms of unsafe abortion, such as becoming seriously ill or dying, can be prevented—is powerful. Sharing the motivations and reasons that women and girls may seek abortion care, and showing them in the context of their life, family, and community rather than on their own, helps our audience begin to reimagine the picture they have painted of who might need abortion care. Once our audience understands these key ideas, they are able to shift to a desire for a safe termination of pregnancy. By the end of the focus groups, many participants in the research even desire a legal change and other concrete solutions in support of the safety of women and girls.

Ultimately, to generate change in our audience's attitudes, our messaging must first enable our audience to have a new, different emotional reaction on abortion care. Then,

we need to provide them with new information that supports new reasoning. This *emotion first, reasoning second* dynamic enables them to develop and hold onto a new belief or attitude that is more supportive. Over time, having these new attitudes enables them to behave differently and have different, more supportive conversations on abortion.

This research shows that, as a collective package, the messaging recommendations presented in this guide meet our audience's needs and equip them with what they need for change to be possible. While each of the insights and opportunities is distinct, they are also interconnected—they build on one another and work together. For example, the research found that recognizing and disrupting our audience's flawed mental templates can also be an effective way to increase the emotional connection our audience feels with the women and girls who need abortion care. In addition, it can help to lessen concerns about women and girls being at risk. Therefore, applying one messaging insight in your work can, in fact, serve multiple purposes when it comes to meeting our audience's needs.

Key Concept:



Emotions Come First, Not Information

For decades, the work of many social change makers centered around the idea that if you wanted to create positive behavior change, you should first provide our audience with information. The belief was that getting the *right* information in front of our audience would lead them to consider an issue differently, which would lead to changes in their attitude. Ultimately, this attitude change would then lead to changes in behavior.

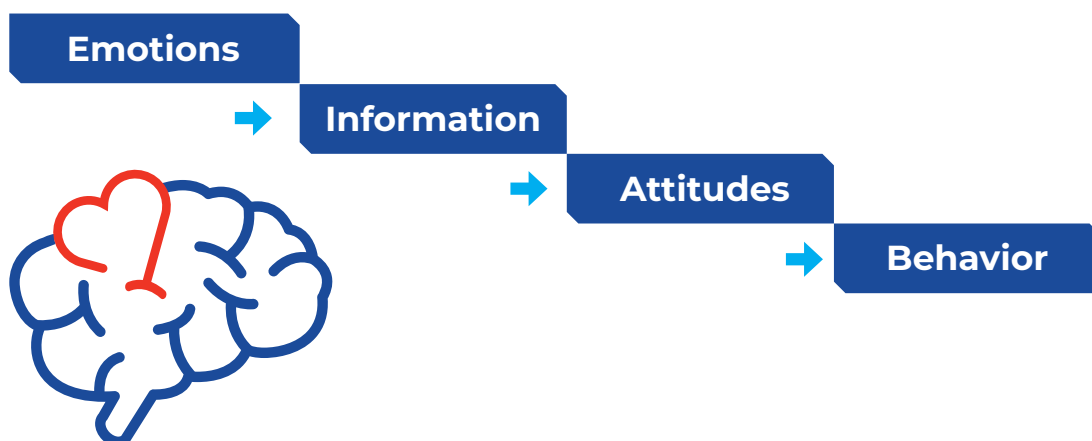
Over time, we have learned that this model is not how human beings change. While many of us pride ourselves on being rational thinkers, human beings are driven primarily by emotion. Our emotional reactions happen first, instinctively, and then our brains quickly provide us with a rationale, with reasoning, for feeling how we feel.

For change to be possible, our messaging must first enable our audience to have a new, different emotional reaction on abortion care. Then, we need

to provide them with new information that supports new reasoning. This *emotion first, reasoning second* dynamic enables them to develop and hold onto a new belief or attitude that is more supportive. Over time, having these new attitudes leads them to be able to behave differently on the topic. For example, someone initially opposed or conflicted on allowing access to safe abortion care may come to show support for activists who speak in favor of policies that support access.

Emotions are therefore vital entry points in creating change. When we connect with our audience using messaging that matches the feelings that they have—messaging that is emotionally congruent—it can open pathways that enable emotional change within them. This emotional change then enables attitude change, which then enables behavior change to occur. Conversely, when we try to communicate with people in a way that is not consistent with their emotions, they simply shut down.

HOW HUMANS CHANGE THEIR BEHAVIOR



Disrupt and Replace Our Audience's Flawed Mental Templates



While this research shows our audience is open and willing to have conversations about abortion, the topic remains severely stigmatized and taboo in Kenya. The little information our audience has received is often incorrect and incomplete. This has caused our audience to develop flawed mental templates of abortion and of the women and girls who seek abortion care—ones that rely on inaccurate associations and beliefs they currently hold. Many also have major gaps in their knowledge that interfere with them forming accurate reasoning chains. Our audience's lack of comfort with discussing abortion, along with their lack of direct lived experiences with safe abortion, means that there is a lack of opportunity in their day-to-day lives to help disrupt their flawed mental templates and help to repair their broken reasoning chains.

To develop effective messaging, it is therefore critical that we understand, disrupt, and replace our audience's flawed associations and beliefs with more accurate and helpful ones. If we do not, it will be very difficult—sometimes impossible—for our audience to come along with us and become supportive or to be open to hearing and taking in new information that can begin to help repair their broken reasoning chains.

The below recommendations provide guidance on how our messaging can effectively disrupt and replace our audience's flawed mental templates, helping them to repair their broken reasoning chains.

See Key Concept:
Flawed Mental Templates and Broken Reasoning Chains on page 25 for more.

Create and Maintain an Emotional and Factual Distinction Between Unsafe and Safe Abortion

Before participants in the research are exposed to messaging, many are unaware of how many women die from unsafe abortion, as well as the distinction between safe and unsafe abortion. After providing this information in messaging, participants note being shocked by the number of women who die every day—and are motivated to alleviate these harms.

The message below, tested in the research, resonated strongly with our audience:

Sadly, without access to safe and legal abortion with a trained health professional, many women seek out unsafe abortion methods. As a result, seven Kenyan women die each day on average from unsafe abortion. This is an important reality of life for us to recognize as we consider our own feelings about abortion. Because women don't have access to legal, safe abortion, far too many of our mothers, wives, daughters, sisters, and friends are dying.

This messaging helps to highlight the harms of unsafe abortion and create both emotional and factual distinctions for our audience between unsafe and illegal abortion, and legal and safe termination of pregnancies. This is important because our audience's own personal lived experiences are largely based on unsafe abortion, and because of that they then perceive all abortion as unsafe.

When developing messaging, it is important to create an emotional connection to the information for our audience by using concrete and vivid language. Messaging is also more effective when it situates termination of pregnancy in the context of healthcare and broader conversations about family planning. The following is another example tested in the research that clearly distinguishes between unsafe and safe abortion care, and situates safe abortion care within the context of healthcare and family planning.

Access to comprehensive medical care should be a right that everyone enjoys, regardless of how much money they have. However, studies show that the cost of safe termination of pregnancy is a critical factor in determining a Kenyan woman's access to the procedure. Those who can afford it can safely terminate their pregnancies and continue their lives. Our friends and family who cannot afford it may delay care, not receive the care they need at all, or seek unsafe methods. They are also more likely to be harassed and threatened with arrest by police officers for seeking the healthcare they need. We should offer those who need our help a warm embrace, not a cold shoulder. We can fix this injustice by making sure all women and girls can safely and legally terminate their pregnancies if they choose to do so.

Lift Up a Wide Range of Messengers, Including Men, Women, and People from Different Walks of Life

To enable our audience to become more supportive, it is essential to disrupt their flawed ideas about who is seeking abortion care and replace them with something more accurate and positive—or at least neutral. This does not require women to tell their own abortion stories. Our messaging can be effective by lifting up a wide range of messengers, including people who know someone who has experienced the harms of unsafe abortion, along with different types of supporters of access to safe abortion.

Medical professionals—specifically, doctors and nurses—are seen as trusted messengers. Their lived experiences and expertise are seen as valuable to someone considering an abortion. Pharmacists, however, are not trusted as messengers. They are viewed more skeptically due to some pharmacists selling unsafe and illegal methods that put women at risk—engaging in what our audience calls “backstreet abortions.” The research shows that teachers, lawyers, activists, young people, and men are very compelling messengers as well (see *the table on page 27 more*).

> For more, see *Foster Identification Among Our Audience* on page 40.

By showing a wide range of messengers, stories, and experiences, we help to not only disrupt and replace our audience’s flawed mental template of the women and girls who seek abortion care, we also help to foster identification with them among our audience. Hearing from people with different backgrounds and discussing their different experiences in seeking an abortion—or supporting someone who needs an abortion—also provides important facts and information to fill knowledge gaps, paint a picture of harm, and foster emotional connection and empathy.

It is important to show women and girls embedded in or featured with their family and communities—with neighbors and friends whenever possible. Seeing these women and girls in familiar contexts can calm the *upstairs brain*, make space for more empathy, and help our audience connect them to people in their own lives, such as a sister or cousin—all important elements in fostering audience identification. It allows for a fuller, more nuanced understanding of their lives that helps to move these women and girls from a general category in the minds of our audience, and instead root them in their own positive lived experiences with women and girls in their family or community—people they like and want to protect from harm. This can happen through imagery, by featuring messengers together with family and community in video and radio communications, or simply by referencing family and community in stories.

> **See Key Concept:** *Upstairs Brain/Downstairs Brain* on page 22 for more.



In the table below, we list various types of messengers that the research found to be effective with our audience, along with an explanation of why the messenger is effective.

Messenger Type	What Makes This Type of Messenger Effective
Medical professionals (specifically, doctors and nurses)	- Seen as trusted messengers and as authoritative experts by our audience, particularly on healthcare matters - Their lived experiences and expertise are seen as valuable to someone considering an abortion; Medical professionals provide important guidance and accurate information and facts to their patients about the safety of abortion and the health risks of unsafe abortion - Believed to be compassionate caregivers; being supportive of access to safe and legal abortion care can underscore the importance of providing women with supportive, nonjudgmental, safe care during an often stigmatized process
Teachers	- Viewed as credible messengers due to their role in imparting knowledge and values to children; they are viewed as educational authorities, particularly on issues related to reproductive health - Perceived to be caring and protective, particularly of children's education, health, and futures; they are also recognized as having a significant influence on students' beliefs and behaviors - They are connected with and deeply integrated into their local communities, which allows them to engage with students, parents, other teachers, and community members
Mothers and fathers	- Mothers and fathers have lived experiences facing important reproductive health and family planning decisions, including considering an abortion; they help remind our audience of the reasons a woman may seek an abortion - Mothers and fathers holding conversations between themselves about family planning, including abortion, helps normalize the topic and model how to hold these conversations within couples - Highlighting family values and the well-being of children connects with the values of our audience members; many in our audience are parents themselves, and seeing themselves reflected in messaging helps foster a sense of identification - They are responsible for protecting their children and equipping children with skills and information to make informed decisions about their health and futures - Can help bridge generational gaps by conveying different information and experiences
People with different backgrounds who have experience in seeking, or supporting someone seeking, an abortion	- Helps to disrupt and replace our audience's flawed mental template of who they imagine the women and girls are who seek abortion care - People with different backgrounds sharing their stories increases the chance our audience will identify with one or more messenger and relate to the experiences described by the messenger - Those with personal experiences are often perceived to be more empathetic and understanding, helping to model a supportive, non-judgmental environment; this includes showing the importance of allowing a woman to make her own decision rather than pushing one's own views and opinions on her
Young people	- Generally young people are viewed as more supportive of access to safe and legal abortion care, partially due to their increased presence on social media - Many in our audience are young people themselves, and seeing themselves reflected in messaging helps foster a sense of identification; including them as messengers helps show them as fighting for their own rights and advocating for a safer future for women in Kenya

Messenger Type	What Makes This Type of Messenger Effective
Men	➤ Men are seen as playing a crucial role in reproductive health and family planning; our audience appreciates seeing men advocating for access to safe and legal abortion care ➤ They are seen as role models that can get other men engaged ➤ They are perceived to be the gatekeepers of power and change in society; without their support, change is perceived to be nearly impossible
Lawyers	➤ They have legal expertise and can speak authoritatively about the current status of abortion in Kenya and what it takes to increase access to safe and legal care; they may also be able to influence policy ➤ Lived experiences advocating for rights of their clients are seen as helpful to our audience in understanding the concrete impact of lack of access to safe and legal abortion care ➤ Believed to be objective and unbiased
Activists	➤ Viewed as passionate, committed, and caring deeply about reproductive rights and the health of women ➤ Can share lived experiences related to people they know who have faced challenges accessing safe and legal care

Share the Reasons that Women and Girls May Seek Abortion Care—and That They Carefully Consider Their Decision

will break. Many are already at—or beyond—that breaking point. They often talk it through with their husbands or boyfriends, and then many make this very personal decision because they know it will allow them to best provide for their families.

When developing messaging and sharing stories, it is important to show our audience that women and girls are carefully considering their decision to terminate their pregnancies. Some effective ways to do this include showing them consulting with friends, medical professionals, and men in their lives, if one is present. Showing that women give careful and thoughtful consideration to their decision, as well as consulting others, helps to calm concerns our audience has around the decision to seek abortion care being rash or emotionally driven.

The messaging example below, tested in the research, describes how many women who are already mothers seek out abortion care, the different considerations they have to make, and that they often talk it through with their husband or boyfriend. Messages like these resonate strongly with our audience.

It might surprise you to learn that many women who seek out abortions are mothers already. As mothers, these women come to their decision to end their pregnancy with an understanding of what it takes to raise, feed, clothe, and educate a child. They know how far their family's budget can stretch—and when it

This information is surprising to many among our audience in a helpful way. It raises questions in their minds about the reasons a married woman would need to seek termination of pregnancy—reasons most have not considered, including not being able to adequately care for children or the family she already has, if she has health complications, or if she is in an abusive relationship. This can help to disrupt the flawed mental template they hold in their mind of who they believe is likely to seek termination of pregnancy. To prevent or overcome skepticism from our audience, it is important to provide a citation or source of the statistic in messaging.

Overall, economic reasons to terminate a pregnancy are the least persuasive for our audience. Our audience perceives poverty and struggling to make ends meet as common—they see so many Kenyans scrambling to make a living, yet also having children and raising them. Therefore, in their minds, financially struggling or citing the high cost of living are not valid reasons to terminate a pregnancy and not effective for our audience.

That said, including *specific* ways in which a woman (or a family) is currently struggling financially, or specific financial circumstances that have led her to decide to terminate her pregnancy, can be effective. This could

include concerns about feeding, clothing, or being able to afford healthcare or an education for a child, especially if the woman is already struggling to do so for herself or the children she already has. The research also finds that financial struggles are more credible for our audience when a woman doesn't have a husband or father in the picture. When a husband or father is in the picture, it can sometimes trigger judgment from our audience around why he isn't providing more support, shifting focus away from feeling empathy for the woman and her situation. If a man is included in a story about financial struggles, we

recommend including details that make it clear for our audience why his financial support is not enough.

The following excerpt, from a piece of content tested in the research, shows an effective way to include economic reasons in messaging. This example is related to family planning and is from the perspective of a husband. It centers concerns such as having enough food and the ability to pay for education as important responsibilities that impact decisions around family planning.

“When I got married, my father told me: remember that every child comes with a plate,” said Ezekiel Cheboi, a manager at a Nairobi café. “As my wife and I consider having another child, we must make sure we can feed the family we have—and right now that is very difficult. So, we wait, and we save. We don’t want to welcome a child into a world with an empty plate.”

“I think it is encouraging to see both women and men thinking and talking—often husbands and wives together—about the responsibilities and consequences of having children,” says Zawadi Marami, who leads a family planning organization in Mombasa. “They want what is best for their family and future children—to protect them, to make sure there will be enough food, to be able to afford schooling. Having these discussions openly is a great thing.”



Foster Identification Among Our Audience



Identification—the ability to relate to, or to see yourself in someone or something—is essential for persuasive communications. As humans, when we are presented with stories or information delivered by people who we feel are like us in some way, who present a shared background or life experience, or who communicate using values that we also share, we tend to be more open to the message they are sharing. On the other hand, when we perceive that a person does not share our values or beliefs, we are much less likely to hear what they have to say or believe it has anything to do with us—no matter how compelling their words may be.

This is important to recognize as we communicate with our audience. If they believe that only “certain kinds of people”—people who are not like them—are supportive of access to safe and legal abortion care, they will be unable to ever imagine themselves as one of those people. Showing a wide range of messengers talking about values and beliefs shared by our audience allows them to connect with the messenger and the message being delivered, providing an opening to become more supportive of access to safe and legal abortion care.

Below are some ways the research finds that messaging can effectively foster identification among our audience.

Show You Share Core Values

As human beings, we are motivated to act and make decisions based on the values that we hold, rooted in what we believe is right or wrong and how we should or should not act. Often times, our inclination as activists is to start or lead our communications with facts about the law or policy or logic—or to even cut right to the actions we want people to take. This approach misses steps that are critical to engage our audience. It puts people in a *head space* that can make them emotionally unavailable, removing one of the most potent tools we have as change makers.

When we fail to lead with and to emphasize the values that we share with our audience, they can feel as if our goals or values are in conflict with certain core values they hold. This leads them to experience our messaging and our goals as inconsistent or in conflict with who they are and what they believe. For example, talking first about the reproductive rights and the Constitution, rather than the importance of family and safety, conveys a sense that the laws protecting people's rights are most important.

For our audience, this may trigger or reinforce concerns they have around the current laws being in place to protect women and girls from harm. It is also a missed opportunity to lead with values that humanize and create connection with our audience.

When we emphasize core shared values in our messaging, we can help our audience to situate the women and girls seeking abortion care in the context of the values and intentions we share. That way they can experience this issue and our goals as in line with, rather than in conflict with, their own values.

It is essential to connect with our audience first before sharing our messages. Lifting up values that our messengers and our audience share—even if they disagree on many others—is a powerful way to do so. This could include values around family, health and well-being, providing care in a time of need, being non-judgmental, accompanying not abandoning, the desire to protect women and children, the desire for safety and prevention of harm, and being a supportive and strong family member. It's also powerful to include aspirational values that connect to Kenya's role as a leader in the region and a modern nation.



In the following table, we expand on several of the values that surfaced during the research. We also share examples of how these values might be expressed and used effectively in messaging.

Shared Value	Ways of Expressing These Values	Examples of These Values Used Effectively in Messaging
Desire for safety and prevention of harm / Protecting mothers and children from harm	➤ Provide statistics and facts on the impact of unsafe and illegal abortion in Kenya ➤ Be concrete about the harms of unsafe abortion on mothers, children, and families ➤ Paint a picture of how safe and legal abortion protects women, children, and families from these harms	<i>"Research shows that...over 2,600 women and girls per year are condemned to death by unsafe abortion in our country. Another 300 of our women and girls are hospitalized every day due to complications from unsafe abortion."</i> <i>"The government finds that children who are left motherless due to maternal mortality are up to ten times more likely to die within two years. Increasing access to safe and legal termination of pregnancies will prevent so much unnecessary suffering and the deaths of our women and children."</i> <i>"Because women don't have access to legal, safe abortion, far too many of our mothers, wives, daughters, sisters and friends are dying."</i>
Equal access to comprehensive healthcare / Fairness	➤ Describe how access to comprehensive healthcare should be equal ➤ Contextualize abortion within access to comprehensive healthcare ➤ Show how access to safe and legal abortion is unequal and harms those who cannot afford it ➤ Highlight the injustice of being forced to carry a rapist's baby	<i>"Access to comprehensive medical care should be a right that everyone enjoys, regardless of how much money they have."</i> <i>"As Kenyans, we all want our children and families to be strong, healthy, and secure. This includes being able to access the healthcare they need when they need it."</i> <i>"This is even worse for women who cannot afford to access the care they need and for women who are forced to carry their rapists' pregnancy."</i> <i>"...studies show that the cost of safe termination of pregnancy is a critical factor in determining a Kenyan woman's access to the procedure. Those who can afford it can safely terminate their pregnancies and continue their lives. Our friends and family who cannot afford it may delay care, not receive the care they need at all, or seek unsafe methods."</i> <i>"Terminating a pregnancy safely with a trained health practitioner at a clinic can cost more than Ksh 20,000 out-of-pocket. This leads many women who cannot afford to terminate their pregnancies and who do not have the budget to care for an additional child to seek unsafe and illegal methods."</i>
Health and well-being	➤ Describe the safety of abortion conducted by trained medical professionals ➤ Discuss the ways in which abortion can preserve the health and well-being of women, save lives, and/or protect them from health complications	<i>"The truth is that when an abortion is provided by a trained health professional it is very safe—it can prevent sickness or death and protect a woman's ability to have children in the future."</i>

Shared Value	Ways of Expressing These Values	Examples of These Values Used Effectively in Messaging
Importance of being informed, having access to accurate information	➤ Highlight the impact of inaccurate and harmful information and sexual reproductive health on the health and well-being of women ➤ Affirm the importance of access to accurate information to protect health and make good decisions about one's health	<i>"When someone is considering an important decision in their life—especially a decision about their health and safety—it is essential that they make that decision based on accurate information, and that there are knowledgeable people who will answer their questions honestly."</i> <i>"We should be providing women and teenage girls with accurate information, not biased misinformation that's designed to manipulate and shame them."</i>
Respect for thoughtful choice	➤ Show how a woman carefully considers her decision to terminate a pregnancy ➤ Include references to discussions with people the woman cares about—including her boyfriend or husband if he is in the picture ➤ Reaffirm that it is up to the woman to decide what is best for her and her family	<i>"They often talk it through with their husbands or boyfriends, and then many make this very personal decision because they know it will allow them to best provide for their families."</i>
Family / Being a supportive and strong family member	➤ Show how a woman makes decisions in the context of her family—including that many women who seek abortion are mothers already ➤ Describe how safe and legal abortion helps protect family members and allows families to stay safe ➤ Demonstrate what it means to be a supportive family member	<i>"Many women seeking an abortion already have children, and their family is already struggling to make ends meet. This kind of decision is something they put much thought into because they recognize what it would mean to bring another child into their home—and they don't want their family to suffer."</i> <i>"It might surprise you to learn that many women who seek out abortions are mothers already. As mothers, these women come to their decision to end their pregnancy with an understanding of what it takes to raise, feed, clothe, and educate a child. They know how far their family's budget can stretch—and when it will break."</i> <i>"If our sisters, our daughters, or even our wives became pregnant, we should want them to feel like they can come to us. That they could talk to us. That we would protect and support them."</i> <i>"A family that is strong has what it needs so that everyone succeeds."</i> <i>"Family should be a safe space, one where we are loved, supported, and protected from harm."</i>

Shared Value	Ways of Expressing These Values	Examples of These Values Used Effectively in Messaging
Open conversations / Parents being able to talk with their children about family planning, sexuality	➤ Acknowledge how difficult these conversations can feel ➤ Normalize and highlight the value of people holding such conversations with narrators who react supportively and positively to such conversations ➤ Describe the reasons these conversations are beneficial ➤ Directly model conversations between different partners, including between men and women and within families ➤ Indirectly have a narrator describe conversations about the consequences of having children and/or the considerations that couples make when family planning ➤ Show what these conversations look like within families	<i>"When I got married, my father told me: remember that every child comes with a plate," said Ezekiel Cheboi, a manager at a Nairobi café. 'As my wife and I consider having another child, we must make sure we can feed the family we have—and right now that is very difficult. So, we wait, and we save. We don't want to welcome a child into a world with an empty plate.'"</i> <i>"I think it is encouraging to see both women and men thinking and talking—often husbands and wives together—about the responsibilities and consequences of having children," says Zawadi Marami, who leads a family planning organization in Mombasa."</i> <i>"We should live in...a world in which men and women are able to talk about family planning and management and make important decisions about their family together with support, trained medical professionals, and counseling."</i> <i>"It is time for families to have more open discussions about family planning, pregnancy, and the shame around seeking an abortion."</i> <i>"These conversations may be difficult, but they can help families stay strong and stay together. Family should be a source of safety and support for all of us."</i>
Should not force women to be pregnant or give birth	➤ Show how a woman who cannot access safe and legal abortion is forced into pregnancy and childbirth ➤ Remind our audience of the harmful impact that such situations can have on the woman and child ➤ Paint a picture of abortion as a way to ensure freedom	<i>"We can prevent the heartache and grief of so many families who lose wives, mothers, and daughters to unsafe abortion by making abortion safe and legal. Forcing women and girls to continue a pregnancy is dangerous."</i> <i>"Forcing a young girl who was raped to remain pregnant subjects her to even more physical and emotional trauma. Forcing a woman who is married to an abusive man who won't consent to an adoption to remain pregnant puts her life—and any child she may have—in danger. Sadly, there are many situations such as these where adoption is not a good or a safe option, and a woman may decide ending her pregnancy is a better decision."</i>
Opportunity / Future potential	➤ Show how a lack of access to safe and legal abortion can disrupt a woman or girl's future life plans ➤ Describe how safe and legal abortion protects and preserves that future potential	<i>"...some families treat their daughters harshly—and may even disown them or kick them out of the house—if they become pregnant before marriage or if they decide to have an abortion. Sadly, this can force young women onto the streets with nothing, where they are homeless and in danger. Some become suicidal. Some are forced into early marriages that interrupt their education and future. This is not good for our families, our society, or our culture."</i>

Shared Value	Ways of Expressing These Values	Examples of These Values Used Effectively in Messaging
Personal responsibility	➤ Talk about abortion as a way to take personal responsibility over one's life ➤ Demonstrate how supporting abortion can help men be responsible for their families ➤ Include conversations about abortion between couples as part of family planning ➤ Highlight considerations women make when deciding whether or not to seek safe and legal abortion	<i>"As Kenyans seek more control over their family size, one option that Dr. Eliud Kamau, a family practice doctor in Eldoret and research director with the World Health Organization, believes is important to discuss is making access to safe and legal abortion care more available."</i> <i>"Challenges like these have led many Kenyan men and women to think long and hard about the right time for them to begin a family and about how many children they feel they can afford to raise and support."</i> <i>"Many men are raised to believe that the responsibility of a father and a husband is to protect and care for his wife and his family. While it may seem a surprise to some, this is why we should support more women having access to safe and legal abortion here in Kenya."</i> <i>"As more men have begun to consider these realities and try to balance them with being responsible husbands and fathers helping to support their families, they have begun to realize that one measure of their success—a strong family—doesn't always mean a large family. Big families come with big responsibilities, more mouths to feed, more backs to clothe, and more minds to educate. Having more children than one can afford could mean pain and suffering for the entire family. That's why more men are learning about family planning and how they can responsibly grow their family when the time is right, and to the size that is right, for them and their wife."</i>
Kenyan culture <i>(continued on next page)</i>	➤ Elevate Kenya's role as a technological and economic hub in East Africa ➤ Show how a lack of access to safe and legal abortion makes Kenya out of step as a leader ➤ Describe experiences everyday Kenyans are facing, including rising costs of living	<i>"Kenya has an extremely high death rate from unsafe abortion compared to other East African countries..."</i> <i>"Kenya is changing, becoming more prosperous and connected each day. With these changes comes more access to education, technology, and new innovations for our nation. At the same time, our country's rapid growth is creating new challenges, including less available land, more expensive housing, and increases in the cost of everyday items."</i> <i>"The Ministry of Health says the average cost of treatment of unsafe abortion complications is between Ksh 5,000 – 10,000. They estimate that the treatment of unsafe abortion complications costs our public health system over Ksh 533 million per year, and predicts these costs will rise dramatically every year. One study found that complications due to unsafe abortion are among the most common ailments and account for the longest hospital stays. When many families are already feeling the pinch of tight budgets and our healthcare system's resources are stretched so thin, we should protect families and save our healthcare resources for fighting diseases by increasing access to safe and legal termination of pregnancies."</i>

Shared Value	Ways of Expressing These Values	Examples of These Values Used Effectively in Messaging
Kenyan culture <i>(continued from previous page)</i>		<i>"Kenya has become a technological and economic center for the East African region. We often lead many other countries. Our leadership may be called into question when we learn that unsafe abortion is estimated to account for 35% of the mothers who die in Kenya each year, whereas in East Africa as a whole, unsafe abortions account for only 18%. In fact, studies show Kenya has the highest incident rate of unsafe abortion in all of Africa. We can close this gap, be proud to lead the region, and save the lives of mothers by providing access to safe and legal termination of pregnancies."</i>
Supporting instead of shaming / Being non-judgmental / Providing care in a time of need	➤ Remind our audience that a woman may be experiencing a difficult time and should be cared for, not further stigmatized during this time ➤ Describe the harmful impact of stigma and judgment ➤ Include references to Christian value of non-judgment ➤ Show what it looks like to express supportive instead of judgmental attitudes	<i>"Life is complicated, and many times we don't show compassion or take the time to put ourselves in other people's shoes. We should live in a country where we face less judgment, less stigma, and less shame regarding abortion."</i> <i>"Sadly, the stigma and shame around a healthcare procedure like termination of pregnancy makes many of our friends and neighbors seek unsafe and illegal backstreet abortions provided by quacks."</i> <i>"Abortion is something many of us consider morally wrong and something we would not choose for ourselves. At the same time, Christ calls on us to be compassionate, so we should make room in our hearts to try and understand the situations of others and why another person may decide they need an abortion."</i> <i>"In the end, we must trust in God. After all, who are we to know someone's life or judge them for needing to have an abortion? He's the judge, not us. Whatever someone else does, whatever their reasons are, that's between them and God."</i> <i>"We need to offer them a warm embrace, not a cold shoulder."</i>



Situate Women and Girls in the Context of Their Family and Community

It is important for our messaging to show women and girls within the context of their families and communities. This helps to create connections between our audience and our messengers, helping to foster identification. Seeing women and girls in these familiar settings helps our audience connect them to people in their own lives. It moves these women and girls away from a general category in the minds of our audience, and instead it roots them in their own positive lived experiences with women and girls in their family or community—such as their sisters or cousins—people they want to protect from harm. This helps to calm our audience's *downstairs brain*, make space for more empathy, and allows for a fuller, more nuanced understanding of their lives. Situating women and girls in the context of their family and community can happen through imagery, such as by featuring messengers together with family and community in photos, video, and radio communications, or simply by referencing family and community in stories.

➤ **See Key Concept:**
*Upstairs Brain/
Downstairs Brain on
page 22 for more.*

It can also be effective to show how important family and community are to women and girls—that having difficult conversations about abortion care can keep women and girls safe, keep families together and strong, and reduce harmful cultural stigma. The following message is an example that was tested in the research and resonates strongly with our audience.

Family should be a safe space, one where we are loved, supported, and protected from harm. However, some families treat their daughters harshly—and may even disown them or kick them out of the house—if they become pregnant before marriage or if they decide to have an abortion. Sadly, this can force young women onto the streets with nothing, where they are homeless and in danger. Some become suicidal. Some are forced into early marriages that interrupt their education and future. This is not good for our families, our society, or our culture. It is time for families to have more open discussions about family planning, pregnancy, and the shame around seeking an abortion. These conversations may be difficult, but they can help families stay strong and stay together. Family should be a source of safety and support for all of us.



Tell Journey Stories That Model How Someone Can Move from Being Opposed or Conflicted to Being Supportive

Many among our audience react positively to journey stories—stories in which a main character changes over the course of the story. When a story shows someone who is initially opposed or has conflicted emotions around abortion changing over time—because of certain experiences in their life—and becoming more supportive, it makes the story more believable and accessible. It makes the issue about real people in their communities, which can be transformative for our audience. These types of stories also serve as a model to others, showing how someone who, like them, was once unaware, unfamiliar, uncomfortable with, or on the other side of this issue came to feel differently and become more supportive.

The following is a transcript of an effective messenger sharing their journey story. This video was tested in the research and resonated strongly with our audience. Alongside the transcript you will find a deconstruction of the content, noting several important insights and details.

▶ Messenger Video: Caroline Oyumbo



My name is Caroline Oyumbo. So, I teach all the children in the primary school. I teach language that is Kiswahili, a bit of English, I do social studies, and also religious education. For me, teaching is a passion. Naturally, I love interacting with the community. And in teaching I am fulfilled. I interact with the young ones, I interact with the middle age, I interact with people of all walks of life because my parents are drawn from all ages.

Caroline begins by talking about her passion for teaching and in doing so, elevating shared values around caring for children, community, and family.

Being a teacher, I interact with people that are going through very difficult times and sometimes I just want to reach out. Some girls are so young to carry pregnancies. I have conversation with quite a lot, especially now that I am more informed. There was a lot of human rights violations around me that got me concerned. As I've said, I'm a teacher—most of these violations were also directed to the children. And I got concerned. I really wanted a safe space for children, especially the girl child that were vulnerable during that time.

Here, Caroline lifts up personal experiences that establish her credibility and her reason for wanting to speak out.

I grew up in a Christian family that believed “no, no, no” to abortion. And it was very painful because I almost lost my mother in the process because she was trying to save a child that almost killed her. And remember, pregnancy also comes with complication. It also comes with a lot of side effects. And this stress will also bring other diseases like hypertension, things like that. And so, I might end up even having health complications as the hypertension, depression, and other things, which maybe I would've done better if I was ready for that child.

Caroline names and normalizes past discomfort with abortion, something that helps build connection with our audience. Then, she provides some details that highlight how there can be complications with pregnancy that can be dangerous—even life threatening.

And then the responsibilities that come with it; if I was not ready for those responsibilities, the people that forced me to carry the pregnancy will not bear the responsibilities for me that is taking care of this child, maybe even the maternal services. They will not be able to pay my bills. And then after that, I'll be left alone with this child. If I was not ready for the child, then that child will be a burden and abandoned, and I can even end up hating the child.

Caroline includes details that help to connect the dots for our audience and show, rather than tell, the harms and consequences of not having access to abortion care.

For the young women, the most important thing to tell them is that the back street one is the unsafe one. What I would really love them to know is that there is safe abortion. It can be done safely by trained medical practitioners, and they still live their life. They will live their life normally, will have their children when they are ready for the children.

Here, Caroline is drawing a clear distinction for our audience between unsafe abortion and safe abortion—showing them that having a safe abortion is possible.

For the men, I believe that they should support because for me to arrive to that decision of abortion, then I must have done a self-introspection.

Continued on next page ➤

And I have seen that there are a lot of negative outcomes that are going to come out of this pregnancy. So, they should support. And interestingly, for the men who fathered children that they were not ready for, they're the ones that support this back street abortion. They support. So, the only thing that we should do is to make it legal so that they support the legal one, not the harmful one.

Caroline discusses the role of men in having access to safe abortion care, something that is important for our audience and resonates strongly.

This child will demand a lot from me, care, protection, education and every other thing. So, when I am ready, then it means that I'm ready for the responsibilities. Therefore, it means I would have prepared for doing what? For having that child. And having a child should be a joyful moment. It should be a satisfactory moment; it should be fulfilling. So when I'm fully prepared for all that and even the challenges that comes with it, then that's it. I'll be very happy. I'll be very happy to have a child.

Caroline ends by elevating shared values, showing hope (not just harm) and painting a picture of what it means to have access to safe and legal abortion care.



Developing Effective Journey Stories



The most effective journey stories are carefully sequenced and constructed. Below, we outline the key sequencing and components that are especially important.

- **Establish credibility and foster identification.** For audiences to connect with the messenger, they must first identify with them. Sharing key details about the person's background—for example, that they are a mother or father, where they live, that they are a person of faith—can be important in helping audiences to situate what the messenger is saying and provide opportunities for identification.
- **Affirm messengers' good intentions.** Many among our audience have a strong impulse to judge and also to feel judged, even implicitly, by our messaging. By establishing upfront that the messenger always tries to treat people fairly, be welcoming and accepting, or understanding others' experiences, we are not only mirroring the emotional experience of our audience, but also minimizing chances that our audience will feel judged or too harshly judge the messenger—both of which can interfere with persuasion. Similarly, by framing the discomfort or anxiety as “initial” or “at first”, we can prevent the audience from seeing the messenger as too rigid or biased.
- **Elevate shared values.** Expressing core shared values that have guided the messenger and ultimately led them to feel differently or see an issue differently helps to foster identification. It also models for our audience how they can put more weight on the values and beliefs that lead them to be supportive rather than those that interfere with support.
- **Mirror or name inner conflict or lack of familiarity or comfort.** It is crucial that the messengers in the stories reflect back the thoughts, conflicts, and emotions of the conflicted audience we are trying to connect with. Being asked to understand an opposing point of view can feel like you are validating it. However, when we do not acknowledge the inner conflict and emotional experience of our audience, they can interpret that conflict as a reason not to change or to be unsupportive. By naming it, we show empathy for our audience and help them to let go of the need to completely resolve their inner conflict in order to be supportive.
- **Model reflection and a journey.** Starting from a place of discomfort, lack of familiarity or inner conflict, we can help guide people through conflicting emotions or feelings of anxiety toward support through social modeling. This includes:
 - ❖ Showing how people who were initially unfamiliar or opposed learned—from friends or neighbors and/or educated themselves—about safe abortion to become aware and more informed. To do so effectively we need to include a precipitating event that led to a change of heart, along with cues that suggest an appropriate passage of time. This helps to convey an emotionally congruent struggle—how the events or moments that lead to a change of heart happened over time and not instantly, all at once.
 - ❖ Rooting people in their lived experiences with women and girls they know and their desire to protect them from harm. We can do this effectively by showing someone who is seeking or has received abortion care talking with their family, friends, or a close neighbor, or referencing their relationships when that is not possible.
 - ❖ Modeling a journey toward support of safe abortion, including cues and message frames that encourage people to step back and reflect, return to their upstairs/thinking brain (*see page 22 for more on the upstairs/downstairs brain*), and reaffirm core values. The way in which the messenger's journey unfolds should recognize that, when there is a higher level of discomfort and a lack of familiarity and inner conflict, it will require a longer period of time and more steps to process one's feelings, thoughts, and the new information they receive. The story also needs to clearly lay out the experiences, thinking, and values that led to a person feeling differently than they did initially. If the journey is too easy, it is not impactful.
- **Affirm positive outcomes.** Finally, helping our audience to see the positive impact of the journey provides important reassurance that, despite lingering doubt, discomfort, or internal conflict, the action we want them to take or position we want them to support ultimately has no serious long-term negative consequence. Even more, it can model how change can bring unexpected and positive outcomes—including stronger relationships and communities, living more in line with one's values, setting an example for one's children, and protecting others from harm.

Show the Supportive Role Men Can Play

The research finds that including men as messengers and in supportive roles is extremely important in engaging our audience and building support. Currently, the opposition is controlling messaging toward men—and it is often toxic and misogynistic. Including men as messengers and in stories tested in this research was surprising—and very persuasive—for our audience. Our audience finds it reassuring and notes they don't often hear men speak up on the issue. It also helps men among our audience to realize that they can be supportive, and models how to do so.

Effective messaging portrays men in a supportive role and avoids being critical or making overgeneralizations about their attitudes. At the same time, effective messaging also shows men being present and part of the conversation rather than being silent or only in the background. This could include a man acknowledging that the decision to terminate a pregnancy can be difficult and that they are willing to be there to talk through it and provide support. The following message, tested in the research, is an effective example of how to include the role of men.

Many men are raised to believe that the responsibility of a father and a husband is to protect and care for his wife and his family. While it may seem a surprise to some, this is why we should support more women having access to safe and legal abortion here in Kenya. Today, we live in a world where our sisters and our daughters face so much shame around unplanned pregnancy and abortion that they are often afraid to go to the people who love them most for help—their own families. Because of this, they may feel the need to keep a pregnancy secret and go alone as they seek an unsafe abortion from an untrained person who uses backstreet, dangerous methods. These unsafe abortion methods threaten the

health and lives of the women in our lives that we love—women that we are responsible to care for and to protect. If our sisters, our daughters, or even our wives became pregnant, we should want them to feel like they can come to us. That they could talk to us. That we would protect and support them.

Paint a Picture of How a Lack of Access to Safe Abortion Care is Out of Step with Kenya's Role as a Modern Nation

Another way we can help foster audience identification is to elevate the shared value of Kenya's role as a modern nation and a leader in the region—the technological hub and an economic center in East Africa. By elevating this shared value, we can then draw a picture of how lack of access to safe abortion is out of step with Kenya's role as a modern nation and leader. For example, sharing that Kenya leads the region in maternal deaths from unsafe abortion is unsettling for our audience. It goes against their value of protecting women and girls—and the value they hold around Kenya's status as a leader. The following message, which was tested in the research, is an example that does this effectively.

Kenya has become a technological and economic center for the East African region. We often lead many other countries. Our leadership may be called into question when we learn that unsafe abortion is estimated to account for 35% of the mothers who die in Kenya each year, whereas in East Africa as a whole, unsafe abortions account for only 18%. In fact, studies show Kenya has the highest incident rate of unsafe abortion in all of Africa. We can close this gap, be proud to lead the region, and save the lives of mothers by providing access to safe and legal termination of pregnancies.



Meet Our Audience's Emotional and Informational Needs



For change to be possible, our messaging must first enable our audience to have a new, different emotional reaction on abortion care. Then, we need to provide them with new information that supports new reasoning. Ultimately, this means our messaging needs to meet both their emotional needs and informational needs.

Understanding how our audience is heartwired allows us to develop messaging to effectively meet these needs. When these needs are met, our audience has a greater capacity to sit with and sort through their feelings (including conflicting feelings), take in new and different information, and begin to change. Importantly, when our audience's needs are not met, change is very difficult and unlikely to happen.

Below are some ways the research finds that messaging can meet our audience's emotional and information needs.

Show and Explain, Don't Tell and Label

As activists and supporters of women's healthcare, we are very aware that unsafe and illegal abortion is harmful and that access to safe and legal abortion saves lives. Oftentimes, our impulse is to simply tell that to our audience. However, our audience doesn't have our base of knowledge and cannot distinguish between the labels safe and unsafe—they hold a flawed belief that all abortion is unsafe. This is why it is so important for our messaging to show the harms of unsafe abortion and explain the benefits of safe abortion.

When developing messaging or sharing stories, it is most powerful to put our audience in the moment by painting a vivid picture of what happened, what was said, what the person felt, and how others reacted. Rather than telling our audience that women are dying from seeking out unsafe abortions or that receiving safe abortion care from a trained professional can save women's lives and their future fertility, describing the differences between the two allows our audience to form a picture in their own minds. This could include explaining the options a woman may weigh as she makes her decision—showing what a woman faces if she is forced to seek an unsafe abortion or, alternatively, if she is able to have a safe abortion. This descriptive approach brings our audience into the

moment, connecting them emotionally with the people in the story and making the harms or potential harms real and concrete.

Rather than telling our audience what conclusions to draw from the situation, helping them to paint this picture in their mind helps them come to their own conclusion—something that further enables them to be open to change.

The following example is an excerpt from a messenger video tested in the research. In this example, the messenger does an effective job, in personal terms, at vividly explaining and showing why there is a need for access to abortion care. The messenger does not use jargon or labels that simply tell our audience about its importance.

We used to have a wall hanging, you know, that says "God is an unseen and unheard guest in every conversation." So that has carried on for many of us, including myself, into our adulthood.

I had my Damascus moment—my proverbial Damascus moment—around abortion where I realized it was an important need and people needed, girls and women needed to be able to access safe abortion, when I started working around gender-based violence.

So now I can say that you may not always agree with life choices that people make, but safe and legal abortion is a need. People need to have the choice of whether to keep a pregnancy or terminate it. You don't need to die because of a decision you've chosen to make.

I had a case where my client, the little girl was 12, she had been prescribed the emergency pill to prevent pregnancy, but it was not available in the hospital's chemist.

The mother was told to go and buy it, but the mother didn't have money. Such instances were so many, but that was the first time I'd seen, I think, a 12- or 11-year-old pregnant. So I kept thinking of this child. What if it was my niece? What did I want done for her? I got pulled into the spaces of safe and legal abortion. I said, ah, there's a solution.

Calm Concerns About Safety

It is important to remember that the vast majority of our audience view abortion as inherently unsafe. This is because many know women who have been harmed or have even died because they were forced to have an unsafe abortion. As such, our messaging needs to help calm our audience's concerns about safety—to show that an abortion can be safe. The following message, tested in the research, is an example that does this effectively.

Supporters cite multiple studies that show how having a safe abortion, provided by a trained professional, can prevent sickness and death, and protect a woman's ability to have children in the future.

Our messaging can calm some of our audience's safety concerns by including language that termination of pregnancy is provided by trained medical professionals, including doctors and nurses. Including trained medical staff helps to calm concerns about safety because our audience feels that doctors and nurses will be there to care for you in the ways you need to be cared for.

Describe Benefits to Women and Society of Safe and Legal Termination of Pregnancy

Talking about the benefits to women—and to society as a whole—of having access to safe and legal termination of pregnancy is also important. Our messaging should describe why this access is a solution to the harms women and girls face with unsafe abortion, and how different the world looks like when women have access to abortion that is safe and legal. The following message, tested in the research, is an example that does this effectively.

[Having access to safe and legal abortion care] will mean just being in charge of yourself. It will mean less women would die from going for unsafe abortions. It will mean... generally overall high standards of health for women without having to go through horrific procedures. Which also means that there are women who will be able to have the number of children that they can manage.

It is also effective for messaging to show the impact of unsafe abortion on families, including the disproportionate impact on low-income families and on children who may be left motherless if their mother is forced to have an unsafe abortion.

Have the Messenger's Emotional Tone Match the Content—and Don't Sound Detached

To meet our audience's emotional needs, it is important to help them build identification with messengers and a connection to the messaging. When a messenger in video or audio comes across as emotionally detached or their emotional tone doesn't match the story they are telling, it can be troubling for our audience. For example, activists sometimes become emotionally numb when re-telling traumatic examples of women or girls who are forced to have unsafe abortions, and these activists may show no emotion when describing a terrible circumstance. Or a messenger who is a lawyer may be so frustrated about legal challenges in accessing safe abortion that they laugh at the absurdity of the current situation when telling their story. These reactions are problematic because our audience cannot read into the messenger's mind to understand these dynamics—they are only seeing or hearing reactions that seem out of place given the story they are being told.

For messengers to deliver their messages effectively, it is important for them to consider the emotional gravity of what they are sharing and to make sure they are expressing an emotional tone that matches their message.

Avoid Discussions of Strong Negative Emotional States

The research finds that when messaging discusses strong negative emotional states, such as describing a woman as feeling depressed because of an unwanted pregnancy, our audience has a negative reaction. They interpret this information as her not in the right mindset to make an accurate decision about whether she should seek an abortion.

Therefore, we recommend avoiding discussions of women feeling depressed, distraught, or being in similar emotional states that could be interpreted as interfering with their decision-making ability.

Fill Key Knowledge and Information Gaps

Our audience has significant gaps in their knowledge and understanding of safe abortion. Therefore, it is important for messaging to incorporate basic information and compelling facts and phrases. This is another effective

way to disrupt our audience's flawed mental template of abortion and the women and girls who need it—providing opportunities that can equip them with what they need to begin to change.

The research shows that participants who shift to become more supportive are often compelled by information that corrects their inaccurate perceptions of the people seeking out abortion care—for example, information that disrupts their flawed mental template of women and girls who seek to terminate their pregnancy as alone,

isolated, and promiscuous. Also, information that helps to calm concerns about safety serves a purpose in filling knowledge and information gaps for our audience.

The following table includes different components of facts with impact, tested in the messaging, that were found to be both effective and surprising to many among our audience. By helping to calm our audience's concerns, it provides an opportunity to help generate a new emotional reaction to safe abortion while also providing information our audience needs to support new thinking.

Component of Fact with Impact	Reason Fact Has Impact
Seven women per day die in Kenya from illegal and unsafe abortion.	Paints a concrete picture of harms to Kenyan women, which our audience values preventing. The specific number is too high to our audience, particularly if deaths can be prevented.
More than one-third of mothers who die every year in Kenya are deaths that occur due to unsafe abortion and unsafe abortion complications.	Contextualizes women within their families and also fosters deep empathy and concern for both children and mothers. The specific percentage of mothers who die remains with our audience over time.
Children who are left motherless due to maternal mortality from unsafe abortion are up to ten times more likely to die within two years.	Connects to audience values around protecting children, women, and families from harm.
Cost of safe and legal termination of pregnancy disproportionately impacts lower income women and families.	Relates to audience values around fairness and ensuring access. Our audience feels it is unfair that “rich” women can afford to easily access care while low-income women may struggle to afford it.
Unwanted pregnancy / unsafe abortion can lead to health complications including physical effects such as death and hypertension and mental health effects such as anxiety and depression.	Surprises many in our audience who did not previously think about other health complications of unwanted pregnancies and who want to avoid such harm.
Outlawing abortion doesn't make women stop seeking termination of pregnancy, so they should be able to do so in a safe manner.	Resonates with the lived experiences of many who know people who have sought unsafe abortion. Our audience believes it is a logical step to protect women from harm by providing access to safe and legal abortion care if they are currently seeking unsafe methods anyway.
Depictions of children harmed, including concrete discussions of age.	Paints a vivid picture of harms and provokes a desire to protect children from these harms.
Young girls being chased from their homes, ending up homeless, increased costs to society.	Places young girls in the context of their families, who most in our audience feel should be supported rather than shunned. Connects with audience values around avoiding harm to young people and reducing costs to everybody.
Quacks conducting backstreet abortions.	Helps to create a distinction between unsafe and illegal methods, and safe and legal methods. Our audience also finds this credible because it overlaps with their lived experiences.

The following are three different messaging examples, tested in the research, that include several of the components noted in the previous table. As you will read, the facts with impact are effectively embedded within the messages—messages that also weave in shared values and paint a picture for our audience that shows, rather than tells them, about the importance of having access to safe and legal abortion care.

More than one-third of mothers who die every year in Kenya are deaths that occur due to unsafe abortion and unsafe abortion complications. That is over 2,000 of our friends, family, and neighbors dying unnecessarily every year. More than seven women dying every single day. According to the Kenyan government, these women leave behind thousands of motherless children who may not survive due to lack of maternal support and care. The government finds that children who are left motherless due to maternal mortality are up to ten times more likely to die within two years. Increasing access to safe and legal termination of pregnancies will prevent so much unnecessary suffering and the deaths of our women and children.

Terminating a pregnancy safely with a trained health practitioner at a clinic can cost more than Ksh 20,000 out-of-pocket. This leads many women who cannot afford to terminate their pregnancies and who do not have the budget to care for an additional child to seek unsafe and illegal methods. Is it moral to bring a child into a world where they will go hungry? Or where they will be abused? Or where they will suffer and have little opportunity for an education or betterment? We can and should ensure a better quality of life in our country and strengthen women and families by increasing access to family planning as well as safe and legal termination of pregnancies.

With so many women having unsafe abortions, there is a huge cost to care for them afterwards, if they do not actually die. The Ministry of Health says the average cost of treatment of unsafe abortion complications is between Ksh 5,000 – 10,000. They estimate that the treatment of unsafe abortion complications costs our public health system over Ksh 533 million per year, and predicts these costs will rise dramatically every year. One study found that complications due to unsafe abortion are among the most common ailments and account for the longest hospital stays. When many families are already feeling the pinch of tight budgets and our healthcare system's resources are stretched so thin, we should protect families and save our healthcare resources for fighting diseases by increasing access to safe and legal termination of pregnancies.

Avoid Images or Facts that Reinforce Our Audience's Flawed Mental Template

When developing messaging, it is very important to avoid using images or facts that may inadvertently reinforce our audience's flawed ideas about abortion and women who seek abortion care. This includes using images of visibly pregnant women, simply the belly of a pregnant woman, or images of a sad woman alone and by herself, that latter evoking a sense that women who seek abortion care are isolated or shunned.

Also avoid *myth busting* that directly repeats the myths you are trying to bust—this actually reinforces these myths in our audience's minds. A more effective entry point and way to myth bust is by providing affirmative statements of fact about safe and legal abortion, elevating shared values (see page 41 for more on shared values) throughout the messaging, and including messengers and details that implicitly challenge the myth in our audience's mind. For example, if our audience believes the myth that it is only young and single girls who are alone and scared that seek abortion care, hearing from a woman who is a mother and who has decided to terminate her pregnancy because she cannot support the children that she already has effectively busts that myth without ever naming it.





Additional Considerations



Model Effective Conversations

It is important to remember that we are trying to help our audience have a new emotional reaction to abortion—one that equips them to change their thinking and behavior at a personal level and in the context of family and friends. The risks and consequences of disrupting those relationships and causing problems are very real for our audience, so they are resistant to any change that may cause problems. That is why we need to provide our audience with examples and a model for how conversations about termination of pregnancy can happen in positive ways—ways that are not disruptive or damaging and that lead to positive outcomes.

To equip our audience for these conversations, our messengers need to show what it would look like if our audience were to believe and behave in the ways that we hope for. This includes showing how the messenger would act, what they might say, how it might feel, and what the end result might be—in ways that feel credible, possible, and consistent with their values and identity. Showing that these conversations, while difficult, can be had in a safe, supportive manner—and that you're not going to be shunned or rejected from your social circles—is powerful for our audience.

Modeling effective conversations between a variety of different pairs—two friends who are women, two friends who are men, a mother and a daughter, a father and a son, for example—provides our audience with an opportunity to see how they too could engage in such a conversation.

Modeling in this way not only equips our audience with the tools to have their own conversations, but it also gives them ideas about the language they could use.

As messengers model effective conversations, it is helpful to include behavioral cues in stories and messaging. Applied psychologist Dr. Phyllis Watts says that behavioral cues use language designed to prompt the listener to think about something in a different way and facilitate the listener moving into more thoughtful reasoning.

Behavioral cues can take many forms, including the following examples:

- When I reflect on it...
- When I step back...
- In the real world...
- I really had to think...
- When I put myself in their shoes...
- I thought about the example I wanted to set...
- When I got some perspective...
- If I was honest with myself...
- I was surprised to learn...

What these have in common is that they greatly enhance the ability of the listener to step back from big emotions, get perspective, reflect, stay in their thinking brain, and draw on behaviors and core values they already believe. They are especially powerful and effective when delivered from a personal perspective—by using an I statement rather than a you statement.



Paint a Vivid Picture of What You Are For—an Aspirational Vision

Giving people something to be for and not just something to be against, can be engaging, effective, and powerful. Our audience rarely—if ever—hears an aspirational vision articulated for what the world could look like when abortion is safe, legal, and accessible. They do not hear about how things could be if abortion was not taboo or stigmatized and existed as part of people's lives and healthcare rather than separated out from it. Painting a positive, aspirational vision of what it will look like for women and their families to have access to safe and legal termination of pregnancies helps to calm our audience's concerns and better equips them to have a new emotional reaction to the issue.

Below is an example of a proactive vision tested in the research. Most research participants find this statement to be either *very* or *extremely* compelling.

As Kenyans, we all want our children and families to be strong, healthy, and secure. This includes being able to access the healthcare they need when they need it. Sadly, the stigma and shame around a healthcare procedure like termination of pregnancy makes many of our friends and neighbors seek unsafe and illegal backstreet abortion provided by quacks. It is no wonder Kenya leads the continent in our mothers seeking unsafe abortion methods—in fact Kenya is the leading country in Africa for the number of unsafe abortions. These quacks use methods that kill thousands of our wives, sisters, and nieces every single year and leave millions of children motherless and dying themselves. This is even worse for women who cannot afford to access the care they need and for women who are forced to carry their rapists' pregnancy.

Instead, we have the power to create a better future where our family and friends feel comfortable coming to us in their time of need instead of feeling more comfort with the backstreet quacks who put their lives in danger. Life is complicated, and many times we don't show compassion or take the time to put ourselves in other people's shoes. We should live in a country where we face less judgment, less stigma, and less shame regarding abortion; where women and girls who are violated are no longer forced to carry the rapists' child. A world in which men and women are able to

talk about family planning and management and make important decisions about their family together with support, trained medical professionals, and counseling. A world in which each baby born is welcomed, loved, and provided for; where babies are born into families who are ready and able to provide for them. A world where our family and friends who are considering an abortion have access to safe and legal care performed by a trained professional so they can stay safe and healthy and alive.

After reading this statement, many participants say they desire a society where people are free to live the way they want and to be free from stigma, including if they choose to seek access to termination of pregnancies. Many also deeply value preventing harm to women and children and agree that termination of pregnancies should be conducted by trained medical staff to avoid the harms associated with unsafe methods. They agree that deaths are avoidable and that access to safe and legal termination of pregnancies can help avoid deaths.

Participants also agree that family should be supportive and that women should be able to feel comfortable turning to family members instead of quacks. For many, the comparison between Kenya and other countries on the issue of unsafe abortion brings “shame” and makes them feel “bad about” their country. They do not want to be associated with these harms.



Embed Shared Values in Calls to Action

Most among our audience agree that something needs to be done to allow access to safe abortion, and most are eager to take action. Therefore, it is helpful to include a call to action in messaging when possible. This allows our audience to feel they can participate in making change, including championing a concrete solution that addresses the harms of illegal and unsafe abortion. For example, the idea of Kenyans calling on the government to change the law resonates with our audience.

If your messaging includes a request for people to do something—a call to action—be sure that it is rooted in shared values, such as family, safety, or care.

> See page 41 for a list and description of shared values that were prominent in this research.

Compelling and Calming Messaging Components



In the table below, we provide specific messaging components that the research shows are very compelling for our audience or effective at calming their concerns about termination of pregnancy. Alongside each component, we provide an explanation for why that information is compelling or calming.

	Component of Compelling or Calming Information	Reason Information is Compelling or Calming
 Reinforce the distinction between safe and legal abortion vs. unsafe and illegal abortion.	Making a clear distinction between legal and safe abortion, and illegal and unsafe abortion.	Disrupts mental templates of all abortion as illegal and unsafe. Helps calm concerns about harm to women from abortions.
	Termination of pregnancy can be done safely with a trained health practitioner.	Calms concerns around “quacks” and re-emphasizes that abortion can be done safely.
	Women should have access to safe and legal termination of pregnancies in the case of rape.	Disrupts mental templates among many in our audience of women as responsible for their pregnancies. Centers the burden of pregnancy on women, including the emotional toll of bearing a rapist's child.
	Highlighting benefits of safe termination of pregnancy.	Shocks those in our audience who express deep concern about the cost of unsafe abortion care to all Kenyans, particularly during a time of rising costs of living.
 Highlight the costs to individuals and to society—and the importance of access to health care.	Treatment of unsafe abortion complications costs our public health system over Ksh 533 million per year.	Shocks those in our audience who express deep concern about the cost of unsafe abortion care to all Kenyans, particularly during a time of rising costs of living.
	Out-of-pocket costs for safe termination of pregnancy can be more than Ksh 20,000.	This is new information and surprising to many who are concerned about impact on women with low income and who want to ensure equal access to healthcare for all.
	Access to comprehensive medical care should be a right that everyone enjoys, regardless of how much money they have. Termination of pregnancy is part of comprehensive medical care.	Centers abortion as a piece of medical care. Our audience values equal access to comprehensive medical care, which they see as guaranteed to them by the Constitution.
 Lean into our audience's desire to protect their loved ones from shame and stigma—and to support them instead. (continued on next page)	Women should not be stigmatized for seeking abortion care and should be treated with dignity and respect.	Evokes our audience's desire to protect women from harm, including additional emotional harm that may come from others for her decision to seek an abortion.

	Component of Compelling or Calming Information	Reason Information is Compelling or Calming
 Lean into our audience's desire to protect their loved ones from shame and stigma—and to support them instead. (continued from previous page)	Men should be supportive of a woman's decision.	Places men as supporters of whatever a woman may decide, instead of as the key decision maker. Our audience wants women to be supported and to be free to make their own decisions.
	Men as messengers openly advocating for access to safe and legal termination of pregnancies.	Helps many in our audience feel that change is possible, as men are the primary policy makers in society. Calms some concerns about societal stigma and the issue being intractable.
	Modeling conversations between people about abortion.	Provides our audience with the tools to hold these conversations on their own. Destigmatizes conversations about abortion and takes some of the "weight" out of the topic.
	Specifically, men and women / husbands and wives discussing abortion as part of other family planning methods.	Helps disrupt mental templates of women who seek abortion as "reckless" or "not in her right mind," and shows women as thoughtful and reflective. Models how men can be supportive of a woman's decision. Inclusion as part of broader family planning methods helps destigmatize abortion.
 Highlight shared values and traditions—and meet our audience's needs. (continued on next page)	Many women who seek termination of pregnancies are mothers already.	Surprises many in our audience who hold mental templates of those who seek abortion care as young, promiscuous, single girls.
	Every child comes with a plate.*	Evokes a desire to make sure each child has enough resources to be cared for properly. Many feel it is immoral to allow children to go hungry or experience the emotional toll of being an unwanted child.
	Build strong, not big, families.	Reminds our audience of their own values around caring for family. They agree that families should only have enough children they can confidently provide for, which strengthens that family.
	"Forced pregnancies" or "forcing a woman to be pregnant."	Encourages almost immediate reactions of a desire for "freedom" and avoiding "control," including being free to live one's life the way one wants.
	"Some girls are too young to carry a pregnancy."	Connects with audience values around preventing emotional and physical harm to young children.
	Acknowledge "traditional thinking."	Mirrors the attitudes many in our audience held while growing up, and models that it is acceptable to shift those attitudes.

* Note: This is the line as it was tested in the research. While many activists read this line as the ability to feed a child being an important consideration for family planning, our audience reads it a bit differently. They perceived it as the responsibility that comes with having more children—that every child needs to be fed and not being able to do so (or putting other children at risk by trying to do so) is an important consideration in the termination of a pregnancy.

	Component of Compelling or Calming Information	Reason Information is Compelling or Calming
Highlight shared values and traditions—and meet our audience's needs. <i>(continued from previous page)</i>	Kenya as one of the more “advanced” countries, or a “leading” country in East Africa.	Taps into audience identities and feelings of pride in Kenya. Many deeply value their position as a leader on many issues in the region, and it brings “shame” to many that the country is behind when it comes to access to safe and legal abortion.
	A woman should be “mentally” or “psychologically” ready to carry and raise a child.	Leads many in our audience to think about the harms that specifically come to young girls when they become pregnant and the desire to protect them from those harms. Many say that a woman needs to be ready regardless of her age, so that the child is loved and the mother can care for it.
	It is the woman who bears the burden of unplanned pregnancy.	Focuses on the needs of women and the emotional and financial burden that an unplanned pregnancy can have on them, leading our audience to want to prevent these burdens.
	A woman may not be ready to raise the child.	Relates to our audience's desire to protect women and children from harm and to ensure a woman is emotionally and financially ready to provide for a child.
	Mothers, fathers, women, men, teachers, and activists are compelling messengers.	Calms audience concerns around societal stigma and helps them see the issue from a variety of perspectives.
Encourage our audience to engage in perspective taking and remind them of the complexities of life.	There are gray areas in life / life may not always go as planned.	Generates empathy among many in our audience who previously did not think about reasons for needing an abortion and who realize after messaging that they may need one themselves or their loved one may need one someday.
	Asking participants to perspective take or place themselves in the shoes of someone in a similar situation.	Builds empathy among those who do not think they will ever need to think about abortion.



Other Important Nuances to Consider, Including What to Use, What to Avoid



Language Nuances to Consider

As you develop your own messaging, there are a few language nuances to consider based on findings from the research.

- Using **“termination of pregnancy” or “ending a pregnancy” rather than “abortion”**: *Termination* is a term that is perceived as neutral and acceptable by our audience, whereas abortion carries significant stigma and triggers preconceived ideas and negative associations in our audience’s mind. When our audience hears *termination of pregnancy*, it makes them think of safety—of the procedure being done in a healthcare setting by medical professionals. It also makes them think that the “reason” for abortion is a valid one. In focus groups, participants also discussed it as ending a pregnancy, which may have similar success as a phrase rather than abortion.

For a younger audience, also consider “flush out” or “kuflush.” The research finds they use these terms to try to avoid the stigma attached to “abortion” and to disguise what they are talking about from older people. Overall, while younger segments of audience (teenagers to early 20s) care less about terminology, it is far more important for older segments of our audience (late 20s and beyond).

- Using **“safe and legal” and “trained medical professional” or “trained healthcare professional”** helps to calm concerns our audience has about the safety of the procedure.
- Referencing termination of pregnancy as **“essential healthcare”** or as part of **“comprehensive healthcare”** is effective—lead with healthcare first, then wrap in abortion as part of that comprehensive healthcare.
- **Embed abortion in the larger context of sexual and reproductive health education** to help with destigmatizing the conversation. This serves an educational purpose by filling critical knowledge gaps. It also connects abortion to a broader set of information their daughters and sons should be receiving to protect themselves and keep them safe.
- The phrase **“an unexpected pregnancy often becomes a forced pregnancy”** without access to termination of pregnancy is extremely impactful for our audience because they recognize the validity of it—that something unexpected can happen and now they’re forced to carry their pregnancy to term because they don’t have access to termination of pregnancy. The feeling of being forced and controlled in this situation feels wrong to our audience.
- **Avoid jargon and insider terminology**—It is important not to shorthand phrases or terms by using an alphabet soup (e.g., SRH, CSE, reproductive health and rights, etc.). Our audience cannot emotionally connect with acronyms—and often does not understand what they stand for.

Lost in Translation?

It is important to acknowledge that some activists may prefer not to use the term *termination of pregnancy* because it does not translate well from English. At the same time, when developing proactive messaging for our audience, the research finds that *termination of pregnancy* is a more helpful phrase than *abortion* because of how much our audience associates *abortion* with it not being safe.

The goal in using *termination of pregnancy* is that, over time, it may be possible to build a greater understanding that helps to destigmatize the term *abortion* and make it less taboo. The good news is that after receiving the messaging in this research, our audience’s reaction to the term *abortion* does shift in positive ways. This shows that effective messaging—whether it be *termination of pregnancy* or other phrases that activists are using in place of the term *abortion*—can begin to help our audience have a new emotional reaction to abortion, especially as they begin to distinguish between safe and unsafe *abortion* care.

For more information on language nuances, see the Guide at a Glance on page 10.



Putting it All Together: The Anatomy of a Story



Storytelling is a powerful tool for change. At the same time, not all stories are created equal. When the goal of storytelling is persuasion, our research revealed that components, sequencing, and the messenger matter a great deal in whether a story has transformative power or falls flat. As such, it is important to sequence narratives in certain ways to increase their persuasive impact.

Below you will find the sequence of key components to include in messenger stories to make them more effective. Please note that messages and messengers should also weave in language that evokes shared values throughout (see *page 36 for more on messengers* and *page 40 for more on shared values to include*). It is also important for impact that the narratives be authentic to the messenger who is sharing their story.

- ❖ **Lead with shared values**, like family, safety, opportunity, and responsibility; continue to weave shared values in throughout (see *page 40*)
- ❖ **Lift up experiences that establish messengers' credibility and reason for speaking out** (see *page 49*)
- ❖ **Name and normalize unfamiliarity or past discomfort** (see *page 49*)
- ❖ **Disrupt flawed mental templates** of abortion, including who seeks care and reaffirming that abortion can be done safely (see *page 35*)
- ❖ **Show—don't tell about—the harms** of lack of access to safe, legal care (see *page 51*)
- ❖ **Explicitly connect the dots** between key concepts or facts (see *page 52*)
- ❖ **Show hope, not just harm, and paint a picture of the solution** (see *page 52*)



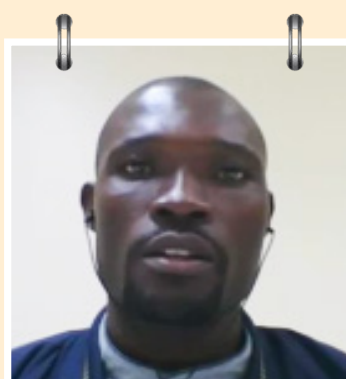
Additional Effective Messenger: Deconstructing Research-Tested Content



The following is an additional transcript of an effective messenger video that was tested in the research. As you will read, the messenger's story puts into action many of the recommendations found in this guide. Alongside the transcript, you will find a deconstruction of the content, noting several important insights and details.

We are extremely grateful to the activists and organizations who referred us to and helped connect us with potential messengers for this research project.

▶ Messenger Video: Martin Lunalo



My name is Martin Lunalo. I was born and raised in Kakamega County. I work with a reproductive health services organization where I'm the executive director in the organization. What we do is that we work around issues to do with access to comprehensive sexual reproductive health services within our public and private health facilities. I'm married, I'm a father of a daughter, seven years old.

Martin begins by sharing personal details that help to build credibility, identity, and connection among our audience, including that he is a father.

I think for me a family is a unit of bringing ideas together that has an end goal that is positive towards your growth. It's positive towards your generations to come. I think responsibilities come with it. Seeking advice from us as parents. Asking what's good and what's bad. Watching television and asking you about their sexual health and how they can access it. So, you need to prepare them as a family member to be prepared for the same.

Martin is elevating shared values around family, responsibility, and parents being able to talk with their children about family planning and sexual health.

When I moved to Nakuru County in the year 2014, I started volunteering as a community health volunteer within the Ministry of Health, and one of my responsibilities as a community health volunteer by then was to go around and do what we call disease surveillance within the households.

Here, Martin is sharing experiences that establish his credibility and reason for speaking out.

I was managing around 300 households by then; most of the key issues I could come across was young people who are pregnant. And as a result of that they were sent away from home by parents in the name of their birth morals.

Continued on next page ➤

And this made it to be a very high issue of stigma and discrimination that led to some girls committing suicides, others running away from home, getting married early because there's nowhere they can go.

As a result of that they become economically unstable. That brings in the issue of not being able to sustain your family. As a result of that, people will start begging on the streets for meals. And that really made me to think this is not the right direction we need to go with our girls and boys.

I went through a training on access to safe abortion, legal abortion, access to contraceptives, how we can use information on contraception to reduce teenage pregnancies. The first thing I asked men whether they can be comfortable for their daughters to get raped or defiled and get pregnant and whether, if they're married, if their wives are raped and get pregnant, what they can do?

And all these questions you can guess the answers, that it brings them back to rethink, and put themselves in that woman's shoe. That assuming this my wife who has been raped and she's pregnant, how will we be looking at that child that will be born? It's my daughter who is yet to study, who is dropping out of school because of this.

If men get the right information at the right place and moving these men from the red zone of misinformation about the safe abortion topics and subject matter in this country, shifting their mindset, it'll help our national executives to allocate resources within our public health facilities and cultivate a good attitude to our health providers to give these services to members of the public who are in need of it.

These details help to show, rather than tell, the harms of not having access to safe and legal abortion care.

By sharing that he went through a training program, it signals that Martin was unfamiliar with safe abortion care and sought to learn more. He also is lifting up the role of men in the conversation.

By noting that the men began to rethink their position on abortion, it signals for our audience that they, too, can learn more and begin to rethink their own positions.

Martin ends by connecting the dots from harm to hope. He once again highlights the role of men and elevates shared values around equal access to comprehensive healthcare.



Understanding the Communications Landscape



Media Audit and Social Listening Analysis

The research team conducted an audit of newspaper coverage in Kenya between 2021 April – 2022 April to better understand the current nature, positioning, content, and tone of the media and public online conversation on topics related to access to abortion. In total, we reviewed 953 articles on topics related to abortion and 2,723 Tweets and Facebook posts for in-depth social listening analysis on the topic. The findings from this audit and analysis helped the research team to identify messaging opportunities and potential barriers to further explore in later research.



Key Insights

Coverage is primarily driven by events and focus on legal battles. In media outlets, coverage of abortion is primarily driven by events, including reactions to abortion-related news items around the world (e.g., the U.S., Latin America, Europe). It is also often focused on legal battles related to the right for women to have an abortion. Also frequently found in coverage are opinion pieces—some supportive and some in opposition—as well as first-hand narratives about experiences with abortion. On occasion there are also stories or coverage of reports on research and statistics, tabloid gossip about celebrities, reports of Western influence through social media campaigns, and the framing of abortion as healthcare. Rarely appearing or

missing completely in coverage is information on public opinion on abortion or the discussion of abortion related to Kenyan culture.

Conversations about abortion often take place in the context of broader sexual and reproductive health rights discussions. The discussion of abortion in media outlets is often secondary to other issues, such as contraception and sexual health education. Social media engagement in response to articles contains a wider variety of perspectives both in support of and in opposition to abortion in Kenya. While the conversation in media outlets is often more informational than on social media, the conversation on social media is often more emotional and personal than in media outlets.

There are inconsistent reports of the legal status of abortion in Kenya. Some articles accurately report the instances under which abortion is legal. Other articles make the blanket claim that all abortion is illegal in Kenya, with some articles even quoting supportive activists sharing incorrect information. While quotes from opposition messengers often highlight alternatives to abortion (e.g., adoption), quotes from supportive messengers frequently do not include information about how to access safe and legal abortion care or provide accurate facts to counter opposition misinformation.

Supporter and opposition outlets often compete for the same message frames. There are several message frames that both the opposition and supporters compete over, including:

To learn more about message frames, see page 68.

Message Frame	Supporter	vs.	Opposition
Rights frame	women's rights	vs.	men's rights; the rights of "unborn" or "pre-born" children
Concern for life frame	women's lives	vs.	"unborn" or "pre-born" children's lives
Harm and safety frame	harm of <u>unsafe</u> abortion	vs.	harm of <u>all</u> abortion
Legal frame	abortion is legal under certain circumstances	vs.	all abortion is illegal

Types of messengers found in media coverage vary, with legal experts and elected officials notably absent. The table below shows the most frequent opposition and supporter messengers present in media coverage. Notably, legal experts and elected or public officials are rarely heard from in coverage. It is also important to note that this table simply lists the types of opposition messengers that appear in media—this does not imply supporters should avoid these messenger types. To effectively build identification with our audience and enable them to become more supportive, it is essential to lift up a wide range of messengers and people from all walks of life (*see page 36 for more on this*). This could mean work is needed to reclaim some of these opposition messenger types to speak as supporters.

Opposition Messengers	Supportive Messengers
➤ Faith-based activists + individuals ➤ Journalists ➤ Medical professionals, psychologists ➤ Medical researchers + scientists ➤ Men + women who regret having an abortion	➤ Youth activists ➤ Sexual and reproductive health rights (SRHR) activists ➤ SRHR researchers ➤ Journalists ➤ Medical professionals ➤ Women who experienced abortion care

Men are prominent as messengers for the opposition and lacking as supportive messengers. Male messengers, including scientists, researchers, and medical professionals, are frequently included as opposition messengers. However, male messengers rarely appear as supporter messengers. Discussions by male opposition messengers are often visceral, discussing the moral and emotional case for not seeking abortion. Discussions by male supporters, when they appear, are often more factual, including statistics on maternal mortality due to unsafe abortion and information on safe abortion.

People of faith are prominent as messengers for the opposition and missing as supportive messengers. Christian and Muslim faith-based messengers, including clergy members, are frequently included as opposition messengers. Discussions by these faith-based opposition messengers often appeal to religious values. Meanwhile, faith-based messengers never appear as supporter messengers, and no articles include supporters appealing to religious values.

Articles often focus on negative emotional experiences. Both the opposition and supporters focus on negative emotional experiences related to abortion. While the opposition suggests that women and men experience feelings of regret and depression after an abortion, supporters center the negative emotional experiences of women who are forced to bring an unwanted pregnancy to term, along with the physical harms of having an unsafe abortion. Supporters rarely mention any positive emotional benefits associated with access to safe abortion, such as being able to continue one's education, being able to have a family when the time is right and you are able to provide for it, less poverty, etc.





Organizational Messaging Analysis

The research team conducted messaging analysis on seven supporter organizations and five opposition organizations, exploring how these organizations communicate about abortion in the context of their own work, through their organizations' websites, and on social media. This work is important to identify potential barriers and messaging opportunities that may be present so we can explore them further as part of our research. This research also gives the research team insight into the tools and platforms that organizations use to engage and communicate with their supporters.



Key Insights:

Opponent Messaging

Strikingly clear and consistent messaging across opposition organizations. Similar values and message frames are used across all opposition organizations, with social media campaigns pushing out similar hashtags, messages, and types of videos. Women and girls seeking abortion care are pointed to the same types of resources—all of them being anti-abortion.

Messaging focuses on core values. The opposition's messaging focuses primarily on core values. The values most frequently elevated in their messaging include:

- Sanctity of family
- Sanctity of life
- Caring for women and girls and babies
- Respect for men's rights, opinions, masculinity, role in their family, and feelings
- Being a "good" and "moral" Christian
- Being a "good" and "moral" Kenyan
- Respect for Kenyan laws; being law abiding

Organizations spread misinformation about abortion in Kenya. Opposition organizations readily provide inaccurate information about the legal status of abortion in Kenya, stating that all abortions are illegal. They also demonize abortion service providers as providing "illegal" services "on demand," and they claim abortion providers are advertising their "illegal abortion" services. These organizations present statistics as if all abortion care is harmful and do not distinguish between unsafe and safe abortion care.

Centers abortion as "murder" rather than healthcare. Opposition organizations put emphasis on the urgency and importance of "saving unborn children/babies,"

with some opposition messaging equating abortion to historical atrocities like slavery and the Holocaust. These organizations argue that abortion facilitates "lethal discrimination" and claim that people arguing to include abortion as part of healthcare are spreading "abortionist propaganda."

Frames messaging as caring and supportive overall.

Opposition organizations focus their messaging on "protecting" men and women from the negative emotional impact of abortion, implying that abortion leads to emotional trauma—trauma that men and women need to be saved from. These organizations also argue that women and girls who seek an abortion need to be protected from the physical harm of abortion, promising that women who reject abortion and give birth will be offered support and resources.

Specifically makes space for—and appeals to—men.

Opposition organizations often discuss the role of men in Kenyan society and connect the issue of abortion to the issue of men's rights. They highlight the importance and value of masculinity, explicitly stating that those who promote access to abortion ignore the voices and feelings of men.

Includes voices of women who have had an abortion and regretted it.

Women who regret having abortion are elevated as messengers by the opposition. These messengers share stories of emotional harm, depression, regret, lack of agency, and loss. The organizations then offer counseling support services to those who have experienced these negative effects and use messaging that focuses on caring for and loving both the mother and the baby.

Promotes concrete alternatives to abortion. Opposition organizations promote what they claim are alternatives to abortion that take the safety and care of women and girls into account. These supposed alternatives include crisis pregnancy centers, counseling hotlines, and in-person counseling. They also highlight adoption resources. These alternatives are framed as ensuring the right to life and safety for both the baby and the woman.

Looks to restrictions on abortion access in the U.S. as an example of "common sense" and moral policy.

Even prior to the June 2022 U.S. Supreme Court ruling that overturned *Roe v. Wade* and the constitutional right for women to have access to abortion care, the opposition points to what they see as positive examples of change in the U.S. This includes former President Trump overturning the "Mexico City Policy," which banned NGOs from receiving U.S. support if they did any work related to performing or promoting abortion care. The opposition's messaging argues that if a Western democracy can implement these policies, Kenya should follow suit. These policies are framed as "progress" in the right direction.

Uses consistent, clearly branded merchandise and social media campaigns. Organizations consistently use hashtags like #LifeWeek, #RightSideOfHistory, and #Womb2Tomb, among others, across merchandise and on social media. They sell t-shirts, hoodies, coffee mugs, and other items with opposition messaging and encourage a broad audience to get involved, with explicit attempts to recruit people to “spread the pro-life message.” These efforts aim to foster connections among younger audiences, asking them to contact each other and show up at the same marches and rallies.

Images often reinforce flawed mental templates of those who seek abortion. Images the opposition organizations use are often of visibly pregnant women with large round bellies, women in isolation and separate from family and community, women looking sad as opposed to feeling positive, and men appearing sad.



Key Insights:

Supporter Messaging

Primarily focused on sexual reproductive rights and supporting women’s agency. Supporter organizations have less abortion-specific language across their websites and socials than the opposition. These organizations often say that Kenyan culture and religion should not play a role in controlling women’s bodies and their agency and argue that men in power should have little or no role in making decisions on behalf of women. They also state that women should be allowed to make their own decisions regarding their own healthcare and bodies.

Messaging focuses on audience values. The core values that the supporter organizations most frequently elevate in messaging include:

- Caring for women, girls, and families
- Respect for privacy
- Fairness
- Respect for women’s rights, bodily autonomy, and agency
- Concern for even greater harms to women in rural areas, low-income women, and those with little or no education
- Importance of health and safety

Positions safe abortion as healthcare. Supporters note that abortion is a life-saving procedure, rather than a life-ending one. They argue that healthcare decisions—including abortion—should be private and made between patients and doctors. They also distinguish between access to safe and legal abortion as being beneficial, while being forced to seek unsafe and illegal abortion as harmful.

Highlights harm is from unsafe and illegal abortion.

Supporters point to a lack of credible information and education about conception and contraception as part of the problem, along with violence against women in response to seeking or receiving abortion care. The focus of their messaging is often on the harms of unsafe and illegal abortion, but they do not often provide details about benefits of safe abortion as an alternative—just that unsafe abortion is harmful. Activists also sometimes forget to specifically note they are talking about *unsafe and illegal* abortion when they highlight harms, even though they intend to. This can be confusing for our audience who do not currently draw a distinction between safe and unsafe abortion care.

Argues that criminalization of abortion disproportionately impacts women who are already marginalized. Organizations argue that women with fewer economic resources are more likely to be imprisoned due to an abortion—and that they are also more likely to receive longer prison sentences than wealthier women. This imprisonment disproportionately impacts lower income families and is fundamentally unfair.

Calls out the harms of “alternatives” offered by opposition. Supporter organizations argue that crisis pregnancy centers promote misinformation and harm women, particularly those who have experienced sexual violence. They say that crisis centers amplify stigmatization that further prevents women from seeking the care they need and invade women’s privacy—by tracking teen pregnancies through apps, for example.

Images often reinforce flawed mental templates of those who seek abortion. Images supporter organizations use often include images of visibly pregnant women with large round bellies, women in isolation and separate from family and community, women looking sad as opposed to feeling positive. Meanwhile, they exclude images of men or family.





What is a message frame?



A message frame is a tool used in communications to quickly create a context or a framework for an issue—one that helps to shape how someone will take in and process information. A message frame allows the communicator to take the same set of information and to organize, prioritize and structure it so that audiences will receive and consider it in different ways.

For example, clear cutting a forest for firewood. Supporters of clear cutting sometimes use *harvesting wood for sustainable energy* as a message frame to discuss this issue, evoking positive emotions and visions of protecting people by ensuring they have ways to cook and stay warm. Alternatively, opponents of clear cutting sometimes use *destroying natural forests to gain short-term profits that cause long-term pain for people and communities* as a message frame. This evokes negative emotions and visions of irresponsible people destroying land and forests to make quick money—even if it puts the community's future at risk.

Depending on the frame used, an audience can perceive identical messages or information very differently. For example, within a *harvesting wood for sustainable energy* frame, you can talk about a large supply of inexpensive firewood and evoke associations with success and progress. However, talking about a

large supply of inexpensive firewood within a *destroying natural forests to gain short-term profits that cause long-term pain for people and communities* frame evokes associations with mass deforestation that causes flooding and pollutes drinking water for the sake of cheap firewood.

.....

We have found that the most effective and persuasive message frames will:

- Focus and guide how people think about an issue in the way we want them to;
 - Build on shared values and be communicated through values-based messages;
 - Be rooted in common cultural stories and myths; and
 - Be established and reinforced through repetition.
-

It is important to note that facts alone fail to create a message frame. By first providing a message frame, we create the necessary context or a framework for those facts to exist within. That makes the important facts we provide to our audience more easily understood and more powerful.



Dominant Messaging Frames Used by Organizations and Found in Media Coverage

	Opposition Organization Message Frames	Supporter Organization Message Frames
Frequent	➤ Abortion is illegal. ➤ Abortion is murder and it kills babies. ➤ Abortion goes against biblical teachings. ➤ Pre-born children deserve to be protected too. ➤ Women, men, and families are negatively impacted by the trauma of abortion. ➤ There are resources and healthy alternatives to abortion that preserve the right to life for the mother and the baby.	➤ Lack of access to abortion disproportionately impacts the most marginalized women and girls. ➤ Unsafe abortion is the cause of harm to large numbers of women each year. ➤ Abortion is healthcare. ➤ Abortion is a right that ensures women have full autonomy. ➤ Access to abortion should not be dictated by Kenyan culture, men in power, or religion.
Less Frequent	➤ Human rights begin in the womb, and rights should be protected at all stages of life. ➤ The United States is a positive example of “progress” on pro-life issues. ➤ Abortion facilitates sex for pleasure, which is a sin.	➤ Forcing a victim of sexual violence to carry a rapist’s baby is wrong and traumatizing. ➤ The root causes of unsafe abortion need to be addressed, including lack of information and sexual violence. ➤ Abortion is not used as birth control.

	Opposition Media Message Frames	Supporter Media Message Frames
Frequent	➤ Restrictions on abortion help “preserve many lives” and their future potential. ➤ Men often have negative experiences when a woman decides to have an abortion. ➤ Women who have an abortion later regret it. ➤ Mothers and young girls are responsible for the rise in unplanned pregnancies and abortions. ➤ Kenyan culture is facilitating “gender-selective abortion” that is eliminating women.	➤ Unsafe abortion threatens the health and lives of women and girls. ➤ Widespread misinformation about abortion leads to unsafe abortion. ➤ Access to accurate information about abortion helps safeguard women, girls, and their futures. ➤ Survivors of sexual assault should have access to safe, legal abortion. ➤ Many types of women seek abortion care—and their experiences of safe, legal abortion can be positive.





Messaging Checklist: Questions to Consider

- ☐ How can I start and frame my message using shared values such as health, family, caring for others, protecting women?
- ☐ How am I establishing my credibility as someone speaking about abortion care?
- ☐ What am I sharing about myself and my life experiences that fosters shared humanity and that situates myself within my family, friends, and community?
- ☐ How will I describe my personal motivations for speaking up about safe and legal abortion care?
- ☐ How can I describe my journey in coming to support abortion care? What are the important milestones and steps along the way? What experiences/values led to the decisions I made?
- ☐ How will I paint a picture of the process when a woman seeks abortion care? What stories or short descriptions can help to show rather than tell what happens and disrupt faulty beliefs about abortion care and the women seeking abortion care?
- ☐ What details can I include to help contextualize abortion care as part of healthcare and women's healthcare more broadly?
- ☐ What details can I include to show that abortion isn't inherently unsafe, but rather that illegal abortion creates conditions that make it unsafe?
- ☐ How can I mirror/normalize conflicting feelings on abortion care?
- ☐ How can I model holding the tension of opposites and allow for nuance?
- ☐ How will I explain why I am speaking on this issue or policy from my experience and why I am doing so now?
- ☐ How will I close my story using shared values?
- ☐ What will my call to action be in the closing of my message?

Worksheet: Developing Values-Based Messaging

To prepare for your practice interview, and to help organize your own messaging for future content, use this worksheet. Keep in mind the needs of your audience. For example, look at the components of the flawed mental templates our audience holds about abortion care. As you develop your messaging, ask yourself: which components of these flawed mental templates am I disrupting, and how? What else does my audience need to hear to help them manage their complex and conflicting feelings?

Instructions: *Develop a few sentences for each of the message categories below.*

- 1. As you develop this messaging, who is your target audience? What is the purpose of this communication? What change are you asking your audience to support?**

Audience: _____

Purpose: _____

- 2. Shared Values + Audience Identification:** How would you describe yourself, your experience, or your values to build connection with the audience? What values can you share that would provide an opportunity for those who don't know anyone to feel connected with this issue? (*Examples: Safety, protection of women and girls, health, family, caring for others, faith, open communication, being informed*)

- 3. Fill Knowledge Gaps:** What brief details of abortion care can you share that will help calm audience concerns? What details or brief stories can you tell that underscore the challenges and hardships of how the system is currently set up?

- 4. Make It Local:** What stories can you tell that help your audience understand that women and girls who seek safe and legal abortion are part of communities across Kenya? What details can you include to show community connections and support for women and girls who seek safe and legal abortion care?

- 5. Share Stories of Happiness:** What are the ways in which life continues after safe and legal abortion care? What are some stories that show women and girls happy and thriving after a safe and legal abortion?

- 6. Paint a Picture of Solutions:** How would you like to see Kenyan policy change to better support women and girls seeking safe and legal abortion care? What is the change you seek to make and how does it connect to shared values your audience may hold?

Exercise: Draft Your Own Tweet

Audience: _____

Write a Tweet (280 characters or less!)—targeted for your audience above—designed to increase support for access to safe and legal abortion in Kenya.

Compose new Tweet

What's happening?








Tweet



Landscape

Media Audit and Social Listening:

Goals:

- › To understand the current nature, positioning, content, and tone of the media and public online conversation on topics related to access to abortion in Kenya.
- › To identify potential barriers and messaging opportunities to increase support for access to abortion in Kenya.
- › To develop preliminary messaging hypotheses to explore and test in the Mindset and Persuasion audience research phases.

Reviewed 953 articles on topics related to abortion in Kenya and 2,723 Tweets and Facebook posts for in-depth social listening analysis on the topic, between April 2021–April 2022. Sources included:

- | | |
|-----------------------------------|-------------------------------|
| › Advance Africa | › Kenyacurrent |
| › Africa 24 Media | › Kenyan Business Feed |
| › Africa Business News | › Kenyan News Trends |
| › African Comb Books* | › Kenyan Times |
| › African Scholarships 2021/2022* | › Kenyans.co.ke |
| › Afritech Media | › Khusoko |
| › Amecea News Blog* | › Maudhui House |
| › Aptantech* | › Mediasetafrica |
| › ArtMatters.Info* | › Metropolis TV |
| › Biashara Digest | › Mpasho |
| › Business Daily Africa | › nairobiwire |
| › Capital FM | › Nation Africa |
| › CGTN Africa | › Newscheckz |
| › Citizen Digital | › PD Online |
| › Citizen TV | › PRSK - PRNewswire |
| › Classic 105 FM | › Pulselive.co.ke |
| › Construction Review Online* | › Radio Taifa |
| › Crossover | › RMS Radio |
| › Daily Nation | › ScienceAfrica |
| › Diaspora Messenger | › Soko Directory |
| › Ebru Television | › Standard Digital News Kenya |
| › Femme Hub* | › Taifa Leo |
| › Ghafla!Kenya | › TechMoran* |
| › Ghetto Radio 89.5 FM | › The East African |
| › Goal.com (KE) | › The Exchange |
| › Hapa Kenya | › The Standard |
| › Hustle Magazine | › The Star, Kenya |
| › K24 TV | › The Times |
| › Kahawa Tungu | › Tuko |
| › Kenya Broadcasting Corporation | › upesinews |
| › Kenya Country Development | › Youth Village Kenya |
| › Kenya Today | |

* Indicates source is a small, independently owned outlet (e.g., personal blog).

Structural Messaging Analysis:

➤ Goals:

- To understand the ways in which activists and opponents currently communicate about access to abortion in Kenya.
- To identify potential barriers and messaging opportunities to increase support for access to abortion in Kenya.
- To develop preliminary messaging hypotheses to test during the next phases of research, the Mindset and Persuasion audience research.

➤ This messaging analysis includes review of the websites and social media presence of the following organizations:

➤ Opposition:

- ▶ CitizenGo Kenya/Ann Kioko
- ▶ Pearls & Treasures Trust
- ▶ Kenya Christian Professionals Forum (KCPF)
- ▶ Empowered Youth Coalition (EYC)-Africa/Tobias Nauruki
- ▶ National Council of Churches of Kenya

➤ Support:

- ▶ KELIN
- ▶ Kenya SRHR Alliance
- ▶ Reproductive Health Network Kenya
- ▶ NAYA Kenya
- ▶ Auntie Jane's Hotline
- ▶ Zamara Foundation
- ▶ AYARHEP



Mindset

➤ Goals:

- To understand the audience mindset around access to abortion in Kenya.
- To identify potential barriers and messaging opportunities to increase support for access to abortion in Kenya.
- To develop hypotheses about what kinds of Persuasion messaging may be most effective to test during the next phase of research.

➤ Six in-person, two-hour synchronous focus group discussions were conducted among 54 participants in Nairobi (20 July), Nakuru (21 July), and Kisumu (22 July) among:

- Female healthcare providers (Nairobi), including a mix of ages and types of healthcare provided
- Male healthcare providers (Kisumu), including a mix of ages and types of healthcare provided
- Mothers (Nakuru), ages 20-39, including Christians and a mix of income level
- Fathers (Nairobi), ages 20-39, including Christians and a mix of income level
- Young women (Kisumu), university educated, ages 18-25, including Christians and a mix of income level
- Young men (Nakuru), university educated, ages 18-25, including Christians and a mix of income level

➤ Gender-matched Kenyan moderators facilitated the discussions in Swahili and English to ensure cultural competency and reduce social desirability bias. Tested print materials were also provided in Swahili and English.

➤ Findings are based on in-depth qualitative, not quantitative research. As such, any numeric data presented here is suggestive only and is not statistically generalizable to larger populations.



Persuasion

➤ **Goals:**

- Test messaging designed to increase support for safe and legal access to abortion; messaging was developed based on the preceding Landscape and Mindset research.
- Identify potential barriers and messaging opportunities to increase support for access to safe and legal termination of pregnancies.
- Test messengers and the kinds of messaging they can most effectively deliver.
- Understand the impact of specific language and messages, checking for backlash.
- Develop messaging recommendations for an online digital messaging campaign.

➤ **A four-day, asynchronous online focus group among 32 adults from Kisumu, Nairobi, and Nakuru from 17 January – 25 January 2023; discussion is written**

- This Persuasion focus group tests messaging developed based on findings from 2022 Landscape research and a series of in-person Mindset focus groups conducted in July 2022
- Participants included:
 - 16 women, 16 men; 11 healthcare providers; 11 mothers and fathers; 10 young adults
 - 23 Protestant (4 Born Again), 9 Catholic
 - Participants consider themselves frequent social media users
- Moderators were Kenyan and fluent in English, Kiswahili, and Luo, so participants could respond to prompts in any language.
- Excluded participants who feel that access to abortion in Kenya should be completely illegal in all circumstances, including physical and mental health risks, severe fetal deformities, and rape or incest.
- *Findings for all focus groups are based on in-depth qualitative, not quantitative, research; as such, any numeric data presented here is suggestive only and is not statistically generalizable to larger populations.*

Dominant Messaging Frames Found in Social Listening Analysis

Opposition Frames	Supporter Frames
➤ Abortion is an attack on male rights and masculinity (#MasculinitySaturday). ➤ Abortion is illegal. ➤ Abortion harms the health of women, leading to increased risk for depression, breast cancer, and infertility. ➤ All abortions are unsafe. ➤ Alternatives to abortion exist, like adoption, so abortion is unnecessary. ➤ Abortion is a sin that goes against Christian principles. ➤ People should take responsibility for having unprotected sex and the consequences that may follow. ➤ It is younger, irresponsible women who seek abortions; they will grow out of it. ➤ Feminists are misleading; you do not have to abort your children and undermine your husband's ambitions. ➤ Women have abortions because they believe they can find a "better man" to be in a relationship with.	➤ Abortion saves the lives of women. ➤ Abortion is healthcare. ➤ Unsafe abortion is the result of lack of access to accurate information. ➤ Abortion is a reproductive right. ➤ Abortion restrictions are akin to a "war on women." ➤ Being forced to carry an unwanted pregnancy to term damages maternal mental health. ➤ Restrictions on access to abortion lead to unsafe abortion; restrictions do not remove the need for abortion care. ➤ Abortion reduces teenage pregnancies and motherhood. ➤ Married women with children have the highest rate of abortion—not young, single women and girls. ➤ Private choices between consenting adults should not be "policed." ➤ Until unsafe abortion is eradicated, providers need to be trained in comprehensive post-abortion care. ➤ Far-right groups and non-Kenyan actors paid Kenyan social media influencers to spread disinformation. ➤ Anti-abortion activists are hypocrites; they are the first ones to seek abortion care when needed.

Protecting Women and Families

Building Support for Safe and Legal
Access to Abortion in Kenya

kelinkkenya.org