Call for Papers at Stigma Research and Action:

Stigma Research and Action is an open access journal that provides a multi-disciplinary, international forum for the presentation of scholarly research pertaining to prejudice and discrimination that is caused by health conditions, disabilities, or membership in marginalized social or cultural groups.

Special Issue: Abortion Stigma

Guest Editors:

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Recent research has highlighted the complexity of abortion stigma: it operates on multiple levels (individual, community, institutional, structural, and societal), varies by context and geography, and deeply impacts women's experiences of pregnancy and abortion around the world. Studies regularly find evidence of abortion stigma in their investigations of women's abortion experiences, abortion care, and access to healthcare services. However, few investigations have taken on abortion stigma as a motivating research question. In this special issue of *Stigma Research and Action* (SRA), we seek submissions of work that *makes abortion stigma the question*. What happens when we begin with research questions about stigma, its production, reproduction, and consequences? What do we learn by focusing on abortion stigma?

We invite abstracts of 250 words or less by **March 2, 2012**. Abstracts can be submitted to Kate Cockrill at cockrillk@obgyn.ucsf.edu. The special issue editors will review the abstracts and invite the authors of those abstracts that seem promising to submit full manuscripts. Authors will be notified by April 2. Manuscripts of between 3,000 and 6,000 words will be due by June 4, 2012. Papers will be subjected to full peer review following the procedures of SRA. The issue is slated to be published for the 40th anniversary of the Roe v. Wade decision.

We seek both quantitative and qualitative work. Work by graduate students is encouraged. We aim for this special issue to showcase research from a variety of disciplines, with both domestic and international work highlighted.

Topics could include, but are not limited to:

- Variation in stigma based on when, where, and from whom one accesses abortion care (e.g., the effects of gestational age, medical abortion, abortion care in and outside of a health system)
- Variations in perspectives on stigma, from women, providers, and institutions
- Comparisons across geography, provider type, legal status (e.g., nurses' and midwives' attitudes about stigma)
- Evaluations of programs to reduce stigma
- Structural abortion stigma
- Evaluations of tools to measure stigma