NAVIGATING ABORTION AND RETURNING TO PHYSICAL ACTIVITY

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1. INTRODUCTION

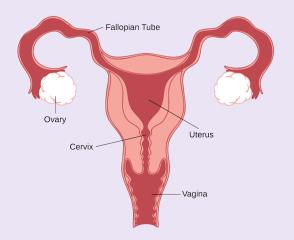
Who wrote this and who is this for?

Hello, we hope this guide finds you well. If you are reading this, you may currently be experiencing an unexpected, unwanted or uncertain pregnancy. We invite you to take a few moments to take some deep breaths, connect to your feet with the ground and use this time to slow down. Be sure that you have options that can help you come to a decision that is right for you. You are not alone, and 1 in 3 people with wombs will experience this situation at least once in their lives.

This guide was designed by dance artists and movement practitioners **Amarnah Ufuoma Cleopatra** and **Stefania Pinato**, and is specifically for dancers and movement practitioners. We wrote this guide to help people navigate the process of abortion/pregnancy endings and understand how to safely return to physical activity as we found that there was not enough information catered to highly physical people. This document aims to provide comprehensive information and support to ensure both your physical, mental and emotional wellbeing.

We may consider here that the word 'abortion' may mean different things to different people, according to their values, belief systems, culture and social background. There is not a right or wrong way of interpreting this term. In this guide we sometimes refer to abortion as Pregnancy Ending. Your specific situation might feel perhaps more like a miscarriage, a loss, a desired pregnancy that occurred at the wrong time, or an unwanted pregnancy resulting from an unwanted sexual encounter. No matter the words you use to describe it, we hope these tools can provide guidance and additional support of where to seek help and reassurance.

REPRODUCTIVE SYSTEM DIAGRAM



Ovaries — There are 2 ovaries, 1 on each side of the uterus where female hormones (oestrogen and progesterone) are produced, and eggs are stored to mature. Every month, an egg is released. This is called ovulation.

Fallopian tubes — these are 2 thin tubes that connect the ovaries to the uterus, allowing the egg to travel to the uterus.

Uterus (the womb) — the lining of the uterus thickens with blood and other substances every month. If pregnancy occurs, the fertilised egg will implant in the uterus and grow into a foetus and then a baby. If it does not, this lining flows out of the body. This is known as menstruation or your period.

Cervix — this is the lower part of the uterus, that connects the uterus to the vagina.

Vagina — this is a muscular tube connecting the cervix to the outside of the body.

The development of this guide went hand in hand with the development of our dance theatre piece called WOMB PARTY. The piece explores and expresses both of our personal experiences in and around abortion and aims to be a starting point for a considered yet candid conversation about how people experience abortion, to help destigmatize the topic and advocate for a future with stigma-free reproductive autonomy. This guide is an extension of WOMB PARTY, and we hope that you find it useful and feel solidarity if this resonates with your personal experience.



WHAT IS THE LAW ON ABORTION?



Under the Abortion Act 1967, abortion is legal in Great Britain (England, Scotland and Wales) up to the 24th week of a pregnancy. An abortion can be done after 24 weeks only in very limited circumstances – for example, if the pregnant person's life is at risk, if there is a risk of very serious permanent physical or mental harm or if the future child would be born with a severe disability.

Most abortions (88%) are carried out before 10 weeks of pregnancy, and 98-99"% of abortions are carried out before 20 weeks of pregnancy.

In the UK, abortions are legal but have not been decriminalised. They are legal under certain circumstances, but people who have abortions outside of these circumstances can be and still are subject to criminal penalties. This isn't to scare you, it's just so you are aware that although it is currently accessible in the UK, we mustn't take it for granted.

For more information about Abortion and your rights, follow this link to <u>Understanding Rights and Access for Pregnancy Endings in the UK.</u>

2. UNDERSTANDING ABORTION

This section briefly outlines where you can access abortion healthcare and signposts places to seek out advice.

An abortion is choosing to end a pregnancy so that it doesn't result in the birth of a child. This is also referred to as a termination of pregnancy. The pregnancy is ended either by taking medicines (pills) or having a surgical procedure.

Pregnancy duration (how many weeks pregnant you are) is dated from the FIRST day of your LAST period. It is important to know this because this is the standard method used in healthcare to calculate pregnancy duration to know which abortion treatments are available to you. This means that in the first 2 weeks of your cycle (from the first day of your bleed), you are not actually pregnant – your body is preparing for ovulation (releasing an egg from one of your ovaries).

DECIDING TO HAVE AN ABORTION

The decision to have an abortion is yours alone. Some people may feel certain about their decision, while others may find it difficult to make a decision.

All pregnant people requesting an abortion can discuss their options with, and receive support from, a trained counsellor provided by the abortion provider if they wish.

Impartial information and support are available from:

- Your GP or another doctor at your GP practice
- A counselling service at your local abortion service (NHS, BPAS, MSI Reproductive Choices UK, NUPAS)
- Sexual Health Services (including <u>Brook</u> for under-25s
- Abortion Talk

You may also want to speak to your partner, friends or family, but you do not have to. They do not have a say in your decision, however, you will probably find solace and solidarity in sharing your situation (we did!).

If you're under 16, your parents do not usually need to be told. The doctor or nurse may encourage you to tell a parent, carer or other adult you trust, but they will not make you. The thought of telling a parent might feel scary, but from our experience, you might in fact be pleasantly surprised by their response and take comfort in their support.

Please note that there are organisations, usually known as crisis pregnancy centres, that offer counselling around pregnancy. They do not refer people for abortion, and may not offer balanced or accurate advice. More info about these centres and how to avoid them can be found here.



3. HOW TO GET AN ABORTION

This section signposts to abortion providers in the UK and breaks down in more detail the different types of abortion.

Abortions can only be carried out under the care of an NHS hospital or a licensed clinic, and are usually available free of charge on the NHS.

Migrants who are not entitled to free NHS services do have to pay for abortions. This can include: migrants on a visitor's visa, migrants who have not paid the Immigration Health Surcharge - IHS and undocumented migrants. Costs for private abortions vary depending on the stage of pregnancy and the method used to carry out the procedure.

You can self-refer by contacting an abortion provider directly:

- British Pregnancy Advisory Service (BPAS),
- MSI Reproductive Choices UK,
- The National Unplanned Pregnancy Advisory Service (NUPAS),
- Or your local <u>NHS abortion service</u>.

If you're less than 10 weeks pregnant, you may be able to have a medical abortion at home. If you are eligible and meet the safety criteria, the abortion medication can either be collected by you from a clinic or posted to your home address after a phone or face-to-face consultation.

Do not buy abortion pills online.

In the UK, it is illegal to use abortion pills purchased online and you can be prosecuted for doing so. The Abortion Act of 1967 requires the consent and signatures from two doctors for someone to have a legal abortion. Moreover, you will not

know if the abortion pills bought online are genuine. For more information about this, follow this link to the frequently asked questions on MSI Choices.

CHOOSING THE RIGHT OPTION

If you decide to end your pregnancy, you will have a discussion with a healthcare provider to determine the most suitable method based on your health, stage of pregnancy, and personal preferences. They are there to offer you information but the choice is yours to make.

The section below outlines the abortion options in detail.

TYPES OF ABORTION

 Medical Abortion (pill): Involves taking medication to end a pregnancy.

'Abortion pill' is the common name for using two different medicines to end a pregnancy

First, you take a medication called mifepristone, which blocks progesterone, the hormone needed for pregnancy to keep developing.

Then you take the second medication, misoprostol, 24 to 48 hours later. This medication makes the womb contract, causing cramping and bleeding, which leads to the expulsion of the pregnancy.

Very few people experience some cramping and bleeding after the first medication, but usually the main cramping and heavy bleeding happens 2-4 hours after the second medication, but it could happen earlier or later than this.

We're going to get to the point here so you know what to expect. 1 in 10 people will experience some or all of the following side effects of misoprostol: nausea, vomiting, dizziness, possible diarrhoea or cold or hot flushes. These are known side effects of misoprostol and will not stop the process/pill from working. You will cramp, and cramps hurt. Some compare it to heavy period pains, others refer to it as labour contractions. Don't worry, you will also be offered pain medication to take as a preventative measure (we will give you other suggestions of things to help alleviate the pain in Sections 4 and 5).

After the abortion is complete and the pregnancy has passed, the bleeding and pain should noticeably reduce. Light bleeding or spotting and mild cramping may continue for two to three weeks.

More info can be found here.

• **Surgical Abortion:** A procedure to remove the pregnancy from the uterus.

A surgical abortion takes place at the clinic and involves the pregnancy being removed through your cervix and vagina by a doctor.

The procedure for a surgical abortion can differ depending on how many weeks pregnant you are, and so the amount of time you will spend in the clinic will be different too.

A surgical abortion may be done with local anaesthetic (to numb the cervix), conscious sedation (where you're relaxed but awake), deep sedation or general anaesthetic (where you're asleep).

There are 2 methods of surgical abortion:

- 1. Vacuum or suction aspiration
 This can be used up to 14/15 weeks of pregnancy. More information can be found here.
- 2. Dilatation and evacuation (D&E)
 This is used from 14 weeks of pregnancy. More info can be found here.

RISKS OF AN ABORTION

We can assure you that abortion is a common and safe procedure. Although you will likely experience discomfort and pain following your abortion, ongoing medical complications are rare and unlikely. (*More information about *Preparing for an Abortion* will be covered in Section 4 and information about *Immediate Aftercare* will be covered in more detail in Section 5) If you are worried or concerned about the risks of abortion, you can find more information here:

https://www.nhs.uk/conditions/abortion/ https://www.nhsinform.scot/tests-andtreatments/non-surgical-procedures/ abortion/after-an-abortion/

PLEASE NOTE:

- There is no evidence to suggest that having an abortion will affect your chances of becoming pregnant again and having normal pregnancies in the future.
- You may be able to get pregnant immediately after an abortion. You should use contraception if you do not want to get pregnant.
- There is no evidence to suggest that abortions lead to risk of breast or any other cancer or long-lasting mental health disorders.

4. PREPARING FOR AN ABORTION

This section breaks down some emotional and practical ways you can prepare for an abortion.

EMOTIONAL PREPARATION

The days and weeks leading up to an abortion can be filled with intense and conflicting emotions. Everyone's experience is different, and you may feel happy and relieved as well as sad, confused or angry all at once. You may also feel nothing as people process emotions differently, or it may take longer for you to process your emotions. There is no blanket rule for what you may be going through, and regardless of how you feel, be sure to know that you are not alone; there are people around you who will want to be there for you (friends, family, a counsellor, teacher). If you do feel alone, know that abortion is very common (1 in 3 people with wombs will experience at least one in their lifetime) and reading other people's abortion stories could help you feel seen and find solidarity. (*Resources of where to read abortion stories are in Section 10) Talking to someone close to you or a counsellor can be a good way to process your feelings and talk through your emotions. Journaling can also be a really helpful tool to process more privately.

We experienced our abortions at very different ages and times in our lives. Amarnah's Surgical abortion was when she was 16, Stefania's Medical abortion was when she was 28. Stefania found so much comfort in talking to Amarnah as she had been through it before. Amarnah found talking about her abortion to Stefania, years after, a very cathartic experience. In fact, it was that conversation that sparked the idea of this project; had it not

EXAMPLE JOURNALING PROMPTS



You could write about...

- Free writing just writing without think and allowing the words to flow out through your hand
- Your feelings
- Where you are sensing or feeling your emotions in your body
- What you need in your life right now to feel good
- Plans, ideas or dreams for the future.
- Where you feel most happy or relaxed?
- A letter to yourself reflecting on your strengths and things you're proud of

been down to our joint bravery to share something that felt very stigmatised at the time, this document would not be here.

Public opinion on abortion has drastically shifted over the past 15 years, however, there can still be some internalised shame or stigma associated with this very common and safe procedure. The first records of abortion methods were found on a papyrus from the Egyptian era with the use of herbs, vaginal douches and suppositories. Over time abortion methods have been developed so that they are a very safe and simple physical procedure.

For many people it can be a clean cut decision, but if you are unsure, don't feel rushed to make a decision. Know that you are not doing anything wrong by choosing what is best for you. Things happen, please try to not be too hard on yourself.

As an artist, you may already have things within your personal practice that help you process your feelings. Whether it's a straightforward decision or if it feels more complex or challenging, you could dance, paint, sing, or do anything else you need to let your emotions flow through and out of you in a safe and intentional way. It doesn't need to be pretty or "good", it's not about what it looks like.

ABORTION DOULAS

Abortion doulas exist, and you may come across the term 'Full Spectrum Doulas.' These doulas support individuals through a range of reproductive experiences, including birth, abortion, miscarriage, and stillbirth. They are individuals who can offer guidance and support, helping you plan and prepare for your abortion while providing practical, emotional, and physical assistance. Doulas can accompany you to an abortion clinic, but they may not be able to accompany you during the procedure itself. They can also offer virtual and/or in-person support at your home. They can also provide aftercare and debriefs. It's an added level of care outside of the actual medical care where they attune to whatever the patients' needs are, to make them as comfortable as possible during the process. That can look like making sure they're warm enough or making sure that they have food or drinks or just whatever is going to make them feel supported. This also looks like some level of physical support with breathing or visualisation exercises, to help take the patient's mind off any pain or discomfort that they may be experiencing (*More information on how to manage pain

and discomfort below). Many offer this service on a sliding scale basis. For more information on how to find a Doula, <u>click</u> <u>here</u>.

PRACTICAL PREPARATIONS

Medical abortion (pill)

If you are having a medical abortion, legally it has to take place in your own home. We suggest having someone with you or, as a minimum, having someone on call in case you want to have company or need assistance.

As we previously mentioned in <u>Section</u> 3, you will experience pain. Some people say it's similar to period cramps, others say it is much stronger and compare it to labour contractions. Over-the-counter pain medication, like ibuprofen, can help, therefore, having some on hand to use during your abortion is a good idea (Your Doctor will also tell you this, and Stefania found it helpful using some). Heat pads or a hot water bottle really help to alleviate cramps too.

You might want to consider the comfort of your space. You could make it cosy by using cushions, blankets, candles and lamps. Using calming scents such as lavender or bergamot, from a diffuser or incense could also help calm your nervous system. Many people have said that gentle movement and breathwork helped them cope with the pain, such as undulating spine and pelvic movements, being on all fours, rocking, swaying and deep breathing. Consider how you respond to pain and as an embodied individual put things into place that may assist you. Here is a link to breathing exercises that can help to alleviate pain. If you are experiencing stress, here is a link to an NHS page that offers a range of calming breathing techniques to help calm your

nervous system. The Breathing App (free) is also a great tool for breathing exercises.

The day of your abortion it's best to use maxi pads as it can be easier to track your bleeding.

Surgical abortion (in clinic)

If you are having a surgical abortion and undergo general anesthetic, an adult escort will be required to take you home afterwards. From experience, it is quite discombobulating having general anaesthetic and you might feel vulnerable after your procedure, so having that familiar face or grounding person could help regulate your emotions. You should not drive a vehicle or operate heavy machinery until 24 hours after having a general anaesthetic, so getting a lift or taking a taxi is highly recommended. Most people would rather avoid public transport after an abortion, but if you have no choice, we really suggest having someone to accompany you.

You will likely experience discomfort and/or pain following your surgical abortion. Most people will experience some bleeding and cramping afterwards – it can be constant or can come and go, and it may last up to two weeks. Bleeding will be similar to a heavy period and may contain small blood clots, so make sure you have sanitary products. You can speak to your medical advisor about which pain medication is best for you at your appointment, but it's likely they'll recommend over-the-counter medications. Heat pads or a hot water bottle really help to alleviate cramps.

Wear comfy and loose clothing to your appointment to maximise comfort after your procedure. You may want to prepare your space for when you return home in advance by tidying and changing your sheets for example. You can also refer to the section above in Medical Abortion
Preparations if you would like more suggestions on preparing your space for a cosy environment.

USEFUL TIPS FOR BOTH

Do a food shop beforehand, ensuring you have food that is nourishing and doesn't require a long time to prepare. It is likely that you will feel too tired to cook in the first couple of days following your abortion, so prepping meals in advance or asking your immediate community for support is advised. You could ask someone to pop over with food deliveries or ask them to order a take-away for you. Please make sure you are hydrated before, during and after your abortion by drinking plenty of water (nutrition will be discussed more in Section 6: Recovery and Self-care). If you have children, you may want to arrange childcare for the day of your abortion.



5. IMMEDIATE AFTERCARE

In this section, we explain in detail, using visual descriptions of what to expect after your abortion.

MEDICAL ABORTION (pill)

The physical experience of a pregnancy ending varies from person to person. Many people experience strong cramps, heavy bleeding and see small and larger blood clots and clumps of tissue on their pad. The pregnancy itself is very small - at 6 weeks, the embryo is about the size of a pea (about ¼ of an inch), so you may not see it when it comes out. However, depending on the length of the pregnancy, a small pregnancy sac with some tissue around it may be visible (white or grey in colour). Please note that later pregnancies of 8 or 9 weeks will pass an embryo that is approximately the size of a kidney bean (2/2.5cm). Some people find this distressing and others find it cathartic to see and handle as a way of saying goodbye.

Most people complete the passing of the pregnancy within 4 hours of taking misoprostol (the second set of pills) and almost all will be completed by 24 hours, so we highly suggest booking time off work or your studies. Even if it passes within 24 hours, try to give yourself a few extra days for your body and your mind to decompress, process and potentially grieve. Although for many dancers, the act of dancing can be a huge way to process things, feel free to do this but on your terms and in a space that doesn't demand or have expectations. Be mindful that your body is healing, so if you experience any pain or fatigue, please prioritise rest. From our experience we wouldn't suggest going to a dance class, rehearsal, performance, workshop or audition until you feel your body has physically recovered, we would suggest 3 - 5 days minimum.

After the abortion is complete and the pregnancy has passed, the bleeding and pain should noticeably reduce. On the day of your abortion, use period pads to monitor how much you are bleeding and if you experience heavy bleeding, soaking more than 2 maxi-size pads per hour for 2 hours in a row, then please seek urgent medical advice. There could be many reasons for this, and a health professional will be able to advise you based on your situation. Light bleeding or spotting and mild cramping may continue for up to two to three weeks

Symptoms of nausea, vomiting and tiredness usually stop within 3 days of an abortion. Sore breasts may take 7 to 10 days to disappear as the hormones in your body adapt.

SURGICAL ABORTION (in clinic)

As previously mentioned in <u>Section 4</u>, you will be taking some sort of anaesthetic for a surgical pregnancy ending.

During a surgical abortion with local anesthesia, the doctor will inject a numbing medication into or around your cervix (the opening of the womb). You may also be given oral pain relief. While this won't completely eliminate pain, it should help reduce it. A nurse will be by your side throughout the procedure to offer support and reassurance. Generally do not need an escort to go home after having local anesthesia for a surgical abortion. You can usually leave the clinic or hospital once the recovery staff have determined you are ready for discharge, which is sooner than after a general anesthetic.

If you have **general anesthetic**, there is a chance you may feel drowsy and experience nausea or vomiting. It can cause you to laugh, to say nonsensical things and may even feel euphoric. When you wake up it is likely you won't have sensed any time passing, and you may feel differently from the way you felt before, which may seem like a second ago. It was very discombobulating and disorientating for Amarnah because she fell asleep laughing and woke up crying. After the abortion, you will begin your recovery on a shared ward supported by nursing staff. You will be offered light refreshments and have clinical checks to ensure you are fit and well to go home that same day. It is also recommended by healthcare professionals that someone accompany you home and stay with you for 24 hours. If anaesthetised, you are not allowed to drive yourself home.



There is an increased risk of deep vein thrombosis (DVT - blood clots developing in the legs) if you sit still for too long, so it is not advised to have a long journey on the day of your procedure. If it is unavoidable, then make sure you take time to walk during any long flights or train journeys.

IMPORTANT INFORMATION FOR BOTH

Do feel able to have sex when you feel ready. Please remember that fertility returns quickly after an abortion, so you may wish to consider starting a method of contraception.

Your first period will usually return between four to eight weeks following a successful abortion. It is not uncommon for your first few periods to be heavier and last longer than usual.

For further information on Do's and Don'ts after an abortion, <u>click here</u>.

More info about abortion aftercare can be found here: https://www.bpas.org/abortion-care/aftercare-support/

6. RECOVERY AND SELF-CARE

In this section, we will suggest practical ways you can be kind to yourself following your pregnancy ending to aid your recovery.

Regardless of whether you have a medical or surgical abortion, if you can, it is good to give yourself some time to physically and emotionally recover. The physical recovery is usually between 1 - 5 days, depending on the type of abortion, anaesthetic and each individual. However, the emotional recovery may take longer. Choosing to end a pregnancy can be an easy choice for many, but some may find it harder to decide. The most common emotion after an abortion is relief but some people can experience guilt and shame too, but we believe that no matter how you are feeling, you can take time to prioritise your needs, and you deserve to rest. Just because the decision to have an abortion may come quickly and easily to you, it doesn't mean that the emotional recovery will be the same, and it may take days, weeks, months or even years to process - and vice versa.

REST AND SELF-CARE

• Prioritise rest and self-care for the first few days. Self-care looks different to everyone. It's a way of prioritising your own needs and taking care of yourself the way that you would treat someone you love very much. Some examples of self care are: unplugging from technology, listening to music, prioritising rest and comfort, acknowledging the small acts that you do for yourself, crying, listening to your body, journaling, saying "no", being outside, cuddling animals, drinking enough water, getting enough sleep, doing nothing, meditation, tarot cards,

- taking a walk, spending time with people you love, laughing with others, or being quiet in company. It is the self-awareness and recognition that rest and recovery are important processes to be embraced without guilt and/or shame.
- Bathing You can take a bath or shower as normal but it is advised to have someone around to keep an eye on you, in case you feel drowsy or light-headed. Another option is allowing your feet or hands to soak in warm water, as it can bring relief not only to that area, but to our whole body. It may even help a tense mind to relax.
- Telling your story for some of us, talking about our abortions can be a way to find support, healing and solidarity. Some of us prefer to keep our stories & our decisions private. Remember it's your story and your decision to keep close or to share. Here are some organisations and charities where you can find other people's stories and share yours if you wish: Shout Your Abortion, My Body My Life, We Testify, 2 Plus Abortions
- Emotional Recovery Feelings of loss and grief might be experienced as a result. Take time, be kind and compassionate to yourself and be assured that how you are feeling will change, transform and shift. It's important to get professional help if managing emotions becomes difficult or if unhealthy behaviours and patterns start to show up.

NUTRITION

It's important to ensure your body is getting enough energy to recover. Your body is working hard to heal, so you may need to eat a bit more food than normal, even if you're resting a lot.

- Iron-rich food Having an abortion can cause blood loss, which might lower your iron levels. It's important to restore your iron to avoid anemia and help with recovery. Foods that are high in iron include red meat, chicken, fish, and spinach. Eating these with vitamin C-rich foods like oranges can help your body absorb the iron better. You may want to use a supplement e.g. Spatone
- High Protein Adding protein to your meals can help your body heal faster. Think about including lean meats, eggs, dairy, beans, and nuts. If you're vegetarian or vegan, quinoa, tofu, and tempeh are great options for protein.
- Omega-3 Fatty Acids These are found in fatty fish like salmon and trout, walnuts, and flaxseeds and have anti-inflammatory properties that can help with your recovery. They are also important for brain health and emotional well-being.
- Whole Grains These are important for keeping your digestion healthy and avoiding constipation, especially if you're taking pain medications or have changed your diet after an abortion. Good options include whole grains like brown rice, oatmeal, and whole wheat bread.
- Calcium-Rich Foods This helps make your bones stronger. Foods like milk, cheese, and yogurt are good sources of calcium, and you can also get calcium from non-dairy options like almonds, broccoli, and tofu.

- Fruits And Vegetables These foods are full of vitamins, minerals, and fiber, which help you recover quickly. They also contain antioxidants that support your body in reducing swelling and healing.
- Hydration Staying hydrated is really important for your health and helps your body heal. Water is the best choice, but you can also drink herbal teas and natural fruit juices. Try to limit caffeine and alcohol, as they can make you dehydrated.

Suggestions drawn from:

https://achoiceforwomensa.com/what-to-eat-after-abortion-for-fast-recovery/https://www.132healthwise.com/food-you-should-eat-after-an-abortion.php

Things to avoid:

- Caffeine: It can cause dehydration, increase heart rate, and irritate the stomach, leading to discomfort.
 Caffeine can also disrupt sleep and interfere with hormonal fluctuations, hindering the healing process.
- Food that causes inflammation:
 Foods that promote inflammation, like processed foods or those high in sugar, can worsen any inflammation in the body. Since your body is recovering from a medical procedure, reducing inflammation can help support healing and comfort.
- Acidic food: It can irritate your digestive system and cause additional pain, making recovery more uncomfortable
- Alcohol: It can interfere with healing, weaken the immune system, disrupt sleep, and interact negatively with medications.

Tobacco and Recreational drugs: Smoking and recreational drugs can slow down the body's natural healing process. Nicotine, for example, reduces blood flow and can interfere with the oxygen and nutrients reaching the healing tissues, potentially leading to longer recovery times or complications.

Taking care of your body with a balanced, nutrient-rich diet is one of the best ways to ensure a faster and smoother recovery. Remember, each individual's recovery journey is unique, and it's always a good idea to consult with a healthcare provider for personalised dietary advice postabortion.

MEAL IDEAS:

- Chicken/tofu soup with vegetables.
 Recipe suggestion
- Grains salad (quinoa, barley, spelt, bulgur, brown rice) with vegetables and a source of protein. Recipe suggestion (Tip: You can purchase ready-cooked bags of mixed grains in most supermarkets)
- Pancakes or Crepes with cheese and spinach. <u>Recipe suggestion</u>
- Stonebaked pizza (take away) <u>Uber</u>
 <u>Eats / Deliveroo / Just Eat</u>
- Steak with New Potatoes and Broccoli (Bean patty if vegetarian) Recipe suggestion



7. RETURNING TO DANCING AND PHYSICAL ACTIVITY

In this section, we suggest ways to approach returning to dance training, rehearsals and performing.

As you know by now from the previous information in this guide, after an abortion, you'll likely experience some side effects like bleeding, cramping, and emotional changes. These side effects will impact your ability to engage in physical activity and it is important to manage your expectations. While most people can return to their regular daily activities within a day or two of an abortion, things like dancing and performing include intense exercise and focus, which will take a little more time to return back to usual.

Most people will choose to take **two days to fully rest** and recover before gradually reverting back to their typical activity levels. From our experience, we would recommend considering **3 - 5 days of rest** and then to gradually build in physical activity.

It's important to listen to your body and give it what it needs during this time. Even if you are feeling like your normal self, it is best to avoid intense workouts in the week following your abortion. This is because increased activity can worsen side effects such as bleeding and cramping. Additionally, some side effects like breast tenderness and swelling can persist for as much as two weeks.

If you still want to be active in the week following an abortion, opt for lower-impact exercises like walking, yoga, or stretching. But avoid overly strenuous exercise and movements that could put strain on your recovering body like running, HIIT or weight training.

Once you feel you have given your body adequate time to rest and recover after an abortion, and you are feeling better, you can start going back to your physical activity. Recognise what 'feeling better' means to you as this will be unique to each person. Remember what we said in Section 6: Rest and Self-care, be kind and compassionate with yourself - we know as dancers that we can be hard on ourselves and have high expectations and strong determination. This is a moment we would recommend patience and softness and taking time to recognise your emotional wellness as well as physical wellbeing. Starting off slow and gradually building up to your normal physical activity levels is the best approach. If you experience any pain or bleeding while exercising, stop and prioritise rest.

RETURNING TO DANCE TRAINING AFTER AN ABORTION

If you are in dance training, watching classes in the week following your abortion could be an option. Once you feel ready to move again, start gradually and take it easy. For example: in a ballet class, start by doing the barre, keeping the leg height low, and see how you feel for a day or two before building up to the centre exercises and to jumping the following week. Similarly, for a contemporary class, start with the warm-up exercises and gradually build up to the final sequence. Abdominal conditioning exercises are something you

will want to avoid for 1 or 2 weeks following your abortion. Listen to your body and pay attention to any signs of pain or fatigue. Take breaks and avoid pushing yourself too hard too soon.

For more information about exercise:

- NIKE <u>A gentle guide to moving your body after pregnancy loss</u>
- She Moves <u>Returning to exercise after</u> <u>miscarriage/pregnancy loss</u>

Ask for help from a qualified practitioner/ physical therapist like a physio or osteopath, to help put in place a 'coming back to moving-plan', and how to modify exercises to gradually build up your strength and stamina.

RETURNING TO REHEARSALS AND PERFORMING AFTER AN ABORTION

Returning to work as a professional dancer/ performer might be a bit trickier because of work/performance commitments, and it might involve some negotiation or conversations with your employer. If you are going back to a research and development or creation phase there is more scope for you to watch for a couple of days and gradually return, and to take it easy and mark the material until you are ready to do it fully.

If you are going back into performing, depending on how physically or emotionally demanding the piece is (i.e. type of exertion, elevation, range of motion the body is required to exert, how much muscular tension, strength and stamina is needed, if there are high impact movements, weight bearing or contact, the subject matter, emotional engagement) you will probably need to modify some of the movement material or consider resting or observing for some of the performances.

If possible, depending on your pregnancy duration and your work schedule, you could consider booking your abortion at a time when there is less pressure or demand at your workplace.

Our experience suggests that you should avoid committing to any auditions, performances or anything mentally and physically demanding and potentially stressful if you can avoid it, for at least a week after your abortion - regardless of which abortion method. Of course, it is your choice, but we suggest the week following should be about prioritising things that will make you feel good and avoiding things that demand too much from you, whether that be physical, mental or emotional.

FOR BOTH

If your abortion or miscarriage happens in the first trimester, there may not be the need for much pelvic physio input. Although, if it's from the second trimester onwards, you can seek assistance from a pelvic health physio with specialist training in ante/post-partum care that understands the changes of pregnancy from a hormonal and musculoskeletal perspective.

Most pelvic health physios are used to seeing people who have experienced an abortion or a miscarriage. Clinics can schedule appointments so that you aren't sitting in a waiting area with new parents and their newborns - so it's worth mentioning at the time of booking if you would rather avoid finding yourself in that situation.

You can find pelvic health physios in the <u>POGP directory</u> by typing in your postcode.

8. LONG-TERM WELLBEING

In this section, we suggest ways you can support yourself or seek support in the weeks, months or years following your pregnancy ending.

EMOTIONAL & MENTAL HEALTH

Often, the decision to end a pregnancy is complex. There are many factors to consider, there are many feelings, and it can affect the individual and other people around the person. There can be a lot to think about! Sometimes it doesn't take long to know what is right for our lives, other times it's a longer process and it can be a challenging decision. If you have already had abortions in the past, your experiences of them and how you feel about them might be different from each other.

As we've said already, but we can't stress enough, how people experience abortions (from the decision-making process, through the procedure and the after-care) is unique to the individual and can vary hugely. Some people may experience happiness or relief, whereas others may experience sadness, loss, grief and guilt. Different and contrasting feelings might be experienced at the same time. Each experience is unique to the person, we believe there is no right or wrong way to feel. (Resources are available in Section 10 below)

We suggested self-care activities in Section 6: Recovery and self-care, but remember you can always use these ideas at any point in your post-abortion timeline. There were also suggestions in Section 4: Preparing for an Abortion, which may inspire you at a later date. Remember you are an artist, and you have many mediums at your disposal that you could utilise as a means of processing, reflecting or releasing your experience.

SUPPORT NETWORKS

After an abortion, emotions can fluctuate from day to day, week to week, and they may come up years later. Here's a list of tools or activities that may help you experience a sense of catharsis or help you move on:

- Talking to a close friend, partner or family member about your feelings
- Seeking professional support from a counsellor or therapist. Most abortion providers like <u>MSI</u>, <u>BPAS</u> and <u>NUPAS</u> offer aftercare counselling at any time after your abortion. There are also charity organisations that offer talk lines and online chats like: <u>Abortion</u> <u>Talk</u>, <u>Safe2chose</u>, <u>DOPO</u>, <u>ARC</u> and <u>Samaritans</u>.
- Journaling
- Writing a letter or poem to the discontinued pregnancy
- Lighting a candle
- Finding a way that works for you to say goodbye for a sense of closure
- Have a good cry
- · Get together with friends
- · Being out in nature
- Read other people's stories to find solidarity
- Breathwork, meditation and/or yoga
- Have a dance in your bedroom (or the club)
- · Being kind and patient with yourself
- Make a dance piece about it (like we did!)

9. CONCLUSION & THANK YOUS

In this section, we wrap up the whole guide and give thanks to all those who helped us make it happen.

The idea to compile this document came about after realising how much more information was needed to be shared amongst the dance and performance industry about abortion and returning to work or training. Most of the information available about post abortion care is for people who are less physical and less embodied than dancers, and so when referring to "returning to work" or "back to your usual activities" there is a gap between what work and usual activities are for highly physical people who use their bodies in a similar way to athletes. We reached out to One Dance UK to see if they could help us distribute this publication specific to dancers and embodied practitioners. We sought out help from Doctors for Choice UK and Abortion Talk as professionals in reproductive healthcare to validate and fact-check our work to make sure this publication is factually accurate and safe to distribute. We passed this document amongst our community of dance-specific Psychologists, GPs, Osteopaths, Doulas and other dancers to have as many perspectives involved to help us make a resource that connects with as many people as possible.

We are very thankful to Doctors for Choice UK, Abortion Talk, Adi'yah Collective and One Dance UK for not only being project partners for WOMB PARTY, our dance theatre piece, but also for sharing their knowledge, validating the accuracy of this guide and helping us make all of this happen. We are thankful to all those who came before us to pave the way to be able to make this document accurate and heartfelt.

We want to thank the Arts Council England for supporting us to make this guide and distribute it amongst the dance and performing arts industry.

Special thanks to Erin Sanchez, Nicky Ellis and Irina Roncaglia for giving their personal time to give notes and feedback from their respective professions.

This guide was hugely inspired by DIY Doula Self-care Zine made by The Doula Project. Please check it out for more support and ideas on how to ease any anxiety or stress when facing the possibility of ending a pregnancy.

We hope this guide has provided some useful information to help support you or anyone you know through a present or future abortion. Wherever you are in your journey, we hope you move forward in safety and with the support you need to feel ok, worthy and loved.

Abortion is a human right. Abortions save lives. Abortion is healthcare.



10. RESOURCES AND SUPPORT

ABORTION PROVIDERS IN THE UK

- BPAS BRITISH PREGNANCY ADVISORY SERVICE
- NHS National Health Service UK -Abortion
- MSI REPRODUCTIVE CHOICES Mary Stopes International
- NUPAS National Unplanned Pregnancy Advisory Service

All the abortion providers above offer free post-abortion counselling if you have had your treatment through their clinics.

SUPPORT AND HELPLINES

- Abortion Talk
- Brook young people's information service (for those under 25 years old)
- REFUGE National Domestic Abuse Helpline
- <u>Samaritans</u>
- Pelvic Obstetric & Gynecological Physiotherapy - Directory

RESOURCES

Websites

Abortion Care - Royal College of
Obstetricians and Gynaecologists
Abortion Doula DIY Self-care for before,
during and after your abortion
Ad'iyah - Reproductive Justice Collective
(support for Muslim folk during pregnancy
endings)

Hello Clue - What to expect in the days after an abortion

MSI Reproductive Choices - <u>Abortion and your rights</u>

NIKE - <u>A gentle guide to moving your body</u> after pregnancy loss

Pregnancy options - <u>Abortion resolution</u> <u>workbook</u>

Rachael Kuik - <u>Pelvic Physiotherapist</u>
She Moves - <u>Returning to exercise after miscarriage/pregnancy loss</u>
Spark and Co - <u>Understanding Rights and Access for Pregnancy Endings in the UK</u>
The Doula Project - <u>Abortion Doula DIY</u>
Self-care for before, during and after your

We Testify - <u>Abortion explained: Queer and</u> trans justice

We are Dopo - https://www.wearedopo.com/home

Leaflets

abortion

MSI Choices **Medical** Abortion Treatment and Aftercare Booklet MSI Choices **Surgical** Abortion Treatment and Aftercare Booklet

Abortion Stories

BBC Woman's Hour Abortion Stories
MSI Abortion Stories From Our Clients
My Body My Life: real stories of abortion, a
travelling exhibition
Shout Your Abortion
2 Plus Abortions

Books

A Necessary Kindness by Juno Carey
Honouring the loss by India Elyn
My Mum Had an Abortion by Beezus B.
Murphy
Shout your abortion edited by Emilia
Bonow and Emily Nokes