HEART-TO-HEART
ABORTION CONVERSATIONS
A TOOLKIT FOR SMALL GROUPS AND ACTION SPACES

“May we remember that if love isn’t central to our movements, not many will be able to stay and not many will want to join. Including ourselves.”

— Chani Nicholas

WE ARE ABORTION FUNDS

The National Network of Abortion Funds (NNAF) builds power with members to remove financial and logistical barriers to abortion access by centering people who have abortions and organizing at the intersections of racial, economic, and reproductive justice. We envision a world where every reproductive decision, including abortion, takes place in thriving communities that are safe, peaceful, and affordable. We believe a world where all people have the power and resources to care for and affirm their bodies, identities, and health for themselves and their families—in all areas of their lives is possible. As we shift the conversation about abortion, it will become a real option, accessible without shame or judgment.

Our movement to build power and make abortion access possible needs to inspire, resonate with, and activate our communities towards change. To do this, we are building up the leadership and organizing capacity of our members, particularly those most
impacted by reproductive injustice, to engage our communities in strategic ways that will realize our vision of abortion access.

PURPOSE OF HEART-TO-HEART ABORTION CONVERSATIONS

We believe dialogue, storytelling, and intentional conversations are powerful tools to organize and strengthen our movement. We hope these conversations will serve as a catalyst to grow your leadership, deepen connections, and make abortion access a reality. This guide will support you to hold a small group gathering, house party, or action space where you can invite your friends, family, and acquaintances into meaningful conversations about abortion, issues that relate to abortion, and why you support abortion funds. Participants will be supported to do some learning about abortion and their own values, to identify people in their lives they could have important conversations with, and to prepare for these conversations.

WHAT'S IN THIS DOCUMENT
Political Context of the Moment

With passage of SB 8 in TX, the 15 week ban in Mississippi, the impending SCOTUS hearings and the pandemic, 2021 has faced us with unimaginable loss, uncertainty, and overwhelming change.

On September 1, 2021, SB 8 went into effect in Texas. This vicious new law makes abortion funds, providers, and in fact anyone who helps someone seek an abortion after six weeks in the state vulnerable to a civil lawsuit with minimum damages of $10,000. 85% of abortions in Texas happen after six weeks, where people are already forced to endure myriad obstacles, like 24 hour waiting periods and mandatory ultrasounds.
Now, the Supreme Court has refused to block this unprecedented Texas abortion law, making this the first time a state has successfully banned abortion early in pregnancy since Roe v. Wade. Organized anti-abortion forces have made it their intent to render abortion access nearly impossible by incentivizing harassment, surveillance, and financial threat, and the Supreme Court has condoned it.

This law is also part of an organized effort to shut down abortion funds and practical support organizations, because together we are making abortion increasingly accessible in the face of immense restrictions. As you read this, funds and clinics in Texas and across the network are collaborating, rushing to support callers to rebook appointments and coordinate out-of-state trips with distances up to 20 times longer. Abortion funds have the expertise and connections to assist callers as they navigate barriers that have increased exponentially. Texas funds, and abortion funds all across the network, need your support as they are digging even deeper in a time they are already meeting unprecedented requests.

Funds have been moving with agency and deliberate care for our people. They have been on the frontlines seeing people safely to and from their abortion procedures, driving people from the clinic to back to the border, to their homes, to hotel rooms, providing emotional support that helps people understand that the barriers they experience are an injustice and not their fault all while navigating a rapidly changing legal and political climate and sustaining our clinics and our funds. IT’S A LOT!!

They have been holding down late night calls, long rides, and complicated strategy meetings: giving our callers what they need most in this time and choosing to make care more possible in the most trying circumstances. They have been filling the gap when our government fails us.

We remain steadfast in our collective power as we continue to journey into uncharted waters. We won't stop until our communities’ needs are met. Heart-to-Heart is a way for us
to continue to build collective power through de-stigmatizing compassion and to center our humanity back in the conversations around the legality and accessibility of abortion.

ROLE OF THE FACILITATOR

As a facilitator, you will be co-creating a space with participants to:

- Connect with our values around abortion access.
- Listen and speak honestly to themselves and each other.
- Build trust across differences.
- Explore and affirm a range of viewpoints on abortion access.
- Explore a range of possibilities, action ideas, and solutions to address abortion in access and reproductive injustice.
- Understand how our work connects to a larger vision of liberation.

Heart-to-Heart Abortion Conversations invite you to share deeply about your values and thoughts about abortion access. Having a “heart-to-heart” also means listening just as deeply to the thoughts and feelings others. By tapping into love and empathy, speaking from our values, and seeking to understand and really hear others, we will be able to connect and build relationships, even when we don’t agree on everything about abortion.

In this guide, you will find outlined suggestions for how to facilitate these conversations and meet the goals stated above. Feel free to tailor our suggestions to your needs and your audience. Before engaging in facilitating a Heart-to-Heart Conversation, we encourage you to reflect on the following questions and invitations to support you in getting prepared to hold this space and bring your full self to the conversation.

- **What are your values, personal beliefs, and stereotypes about abortion?** It’s important for you to launch into the conversation understanding your value-set and use it as a point-of-reference in your conversations.
● **Know your purpose and intentions for holding this conversation.** Do you want to raise awareness, build certain skills, change attitudes, grow community, etc? The clearer you are, the more successful your conversation will be. Also make sure your goals are in alignment with our overall purpose of these conversation spaces.

● **What are your strengths, growth edges, and triggers as a facilitator?** Where do you need facilitation support? Who and how can you ask for support?

● **Know your content.** As a facilitator, while you do not need to be an expert on the topic, you should be well-versed in the topics and themes centered in the conversation. Which ideas in this guide raise questions for you? Where might you need to grow your knowledge and clarify your values about abortion access?

● **Carve enough time to prepare, practice, and personalize what you will share.** Preparation helps to build trust and confidence in oneself and makes you a trustworthy facilitator with participants.

**Know your audience.** What do you know about their views about abortion? What systemic factors impact or limit their understanding and access to abortion? What do you need to prepare based on what you know about your audience?
BEFORE YOU BEGIN
Start by preparing your knowledge, reflecting, and clarifying your own values about abortion access. Then create your plan for your gathering with a sample facilitation outline, which can serve as a stand-alone set of activities, or it can be integrated into a broader program, then plug in pieces from the next sections of the toolkit.

BUILD YOUR KNOWLEDGE AND CLARIFY YOUR OWN VALUES ABOUT ABORTION ACCESS
Abortion is a common medical procedure sought by people of all racial, income, religious, and geographic demographics. People of all genders, sexual orientations, abilities, and immigration statuses need access to abortion, every single day. Here are some baseline statistics from Guttmacher; please see more at We Testify, along with
testimonials from abortion storytellers whose leadership is changing cultural and media narratives about abortion:

- One of four cisgender women will have an abortion by age 45. While we don't have statistical data on trans and non-binary people, we do know they have abortions and seek competent and compassionate abortion care. We all deserve abortion care that is affirming of our gender identity.

- Despite stigmatizing myths about “teens” obtaining a disproportionate number of abortions, the majority (57%) of abortions are obtained by people aged 20-29.

- The majority of people who have abortions are people of color, due to disproportionate lack of access to comprehensive reproductive health care and contraception access. In the United States, Black people obtain 30% of all abortions, while Latinx people obtain 25% and people of other races account for 9%. White people account for 36% of abortions. We must lift up the leadership of people of color when talking about abortion access and experiences.

- People of faith have abortions. In 2014, 17% of abortion patients identified as mainline Protestant, 13% as evangelical Protestant, and 24% as Catholic. Nearly 10% of people having abortions reported another religious affiliation, and 38% reported no specific religious affiliation. Practicing one's faith and need for abortion aren't mutually exclusive.

- Abortion is often a parenting decision — over 60% of people who have abortions are already parenting a child, and a third have two or more children.

- Because of a lack of support systems for families in our country, many people having abortions (75%) say they are unable to afford a child. Almost 70% of people obtaining abortions have an income that is under 200% of the federal poverty level, $10,830. Low wages, bans on and lack of insurance coverage, and costs associated with traveling long distances for an abortion makes obtaining it that much harder. Ninety percent of counties in the United States don’t have an abortion provider as of 2014, and as clinics are closing at an alarming rate, accessing an abortion is becoming increasingly more difficult. Six states have only one clinic in the entire state, while the number of anti-choice pregnancy centers, “Crisis Pregnancy Centers” (CPC's) are booming, leaving people seeking abortions without accurate medical information, support for their decision, and access to care.
These experiences, which funds hear every day on the phone, are the reason why one core part of NNAF’s political and cultural agenda is to overturn the Hyde Amendment. The Hyde Amendment is a discriminatory piece of budget legislation passed each year that bans federal funding of abortion. It has one job: to restrict insurance from covering abortion care for people who are on Medicaid or who receive their insurance through the federal government. Abortion is the only medical procedure that has ever been banned from Medicaid, even though other reproductive health care needs are covered, including birth control and sterilization. Currently, nearly one in seven women of reproductive age (15-44) are insured through Medicaid.

NNAF’s political and cultural agenda alongside abortion funds is to also ensure living wages and worker protections; end criminalization of pregnancy, miscarriage, and abortion; end family caps in welfare policies; repeal parental involvement laws; increase accessibility of medication abortion; and eliminate public funding of crisis pregnancy centers.

UNDERSTANDING INTERSECTIONALITY & REPRODUCTIVE JUSTICE

As a facilitator in this campaign, you will be joining us in shifting and expanding the conversation about abortion to include an intersectional lens. This will allow for conversation about how our lives reflect a set of multi-level experiences and identities; and one that understands a person’s ability to self determine their own reproductive destiny is impacted by reproductive oppressions connected to race, class, gender, ability, sexual orientation, body ability, immigration status, criminalization status, and other complex and compounding oppressions. We are all affected by a country ravaged by inequity. Prior to holding this conversation, we invite you to explore and interrogate the ways you have been socialized within an oppressive culture to center dominant social groups based on gender, class, age, sexuality, religion, or a combination of these and more. How might this impact how you hold this conversation and whose voices you listen to?

At NNAF, we approach our work through a Reproductive Justice framework, with clear commitments to intersectionality and anti-racism. Reproductive Justice is a framework
and approach started and led by women of color, specifically Black women from SisterSong. It is an invitation and a call to action beyond the gender equality, abortion rights, or pro-choice frameworks that often do not account for the many ways institutions, cultural norms, and systems of oppression exert control over people’s decisions about their lives, bodies, and families, especially for people of color and people disproportionately affected by legacies of economic injustice. SisterSong defines Reproductive Justice as “an intersectional theoretical analysis defined by the human rights framework applicable to everyone, and based on concepts of intersectionality and the practice of self-help. It is also a base-building strategy for our movement that requires multi-issue, cross-sector collaborations. It also offers a different perspective on human rights violations that challenge us in controlling our bodies and determining the destiny of our families and communities.”

We understand liberation and humanity, particularly for those who are marginalized, are impacted by white supremacy and anti-Black racism. When we imagine freedom, we look beyond how the most privileged among us navigate systems safely and move us all towards a world that dismantles harmful systems and lifts up and centers the most marginalized among us. Kimberlé Crenshaw, scholar and civil rights activist who coined the term intersectionality, once described intersectionality as being “an analytic sensibility” and “a way of thinking about identity and its relationship to power.” She also articulated how intersectionality helps us increase attentiveness to “identity-based blind spots when it comes to aspects of unequal power dynamics we don’t ourselves experience.”

If you are looking for additional resources to support your Heart-to-Heart Conversations, contact our Organizing team at membership@abortionfunds.org.

Explore the readings and viewings linked in the “Activity Adaptations and Additional Resources” section for more.
HOW TO FACILITATE A SMALL GROUP WORKSHOP ON HEART-TO-HEART CONVERSATIONS

HOST A SPACE TO GET THE CONVERSATION STARTED!
As you’re preparing to host a space to talk about abortion access, you can select activities in advance based on your competency, the people you are inviting, and what you know about their perspectives on abortion access. If there are varying perspectives, focus on building empathy and sharing values and life experiences before digging straight into abortion. If everyone is a strong supporter of abortion access, use the space as time to practice having conversations with people in their lives who may not be as supportive! This kind of small-group discussion is an opportunity to build ongoing relationships with abortion access champions, so make sure there are ways to follow up. Do your best to support participants in taking next steps after the workshop. For example, the ActionSpace toolkit prompts folks to name commitments for next year and take action on the spot, so make sure to consider the last activity on this list in your planning!

Suggested Agenda for Heart-to-Heart Abortion Conversations
This sample facilitation outline can serve as a stand-alone set of activities, or it can be integrated into a bigger program.

The total recommended time is 2 hrs, 25 min (or 90 minutes, not including opening, group agreements, and moving to action/closing, which are already incorporated into the ActionSpace). We recognize that this is a relatively long session, and we promise that it is worth it to devote the time to ground folks in relationships and learning well. AND we have a suggested shorter adaptation that is especially appropriate for a group of folks who are already abortion access champions. You can reference the shorter version here.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Time</th>
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<tr>
<td>A. Grounding and getting to know each other!</td>
<td>20 minutes</td>
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A. **Grounding and Getting to Know Each Other**

Do a welcome to help ground folks with a few words about why you’re coming together and your own interest in holding this conversation. Depending on the group and time, ask participants to share why this conversation might be important to them and what they are hoping to get out of Heart-to-Heart Conversations.

Include an icebreaker or getting-to-know-you activity. These are important to build trust and connection among folks in the room, and warm people up to bringing their own experiences into conversations about abortion. Below is an example empathy builder, with an additional option in the resources section.

**Empathy Builder: Share a Fun Fact (15 mins)**

**MATERIALS NEEDED:** pieces of paper, pens, container to collect paper

Start by passing around pieces of paper and pens, and ask each person to write down something about themselves that no one else in the group knows about them. Then draw the pieces of paper out of a container randomly and ask the group to guess who shared each fact! Provide the statistic that in any group of people, approximately 1 in 3 people who can get pregnant have had an abortion at some point in their lives. That means that everyone loves someone who’s had an abortion, whether they know it or not!
B. Establish Group Agreements
This helps create a space where folks feel safer and more supported so speak, share, and learn from one another. (See sample group agreements in the NNAF ActionSpace toolkit resources section).

C. Building Understanding About Abortion, Access, and Experience

Reflection Activity: Pregnancy Decision-Making (45 minutes)

This activity has been adapted from a toolkit called We Are Brave: Race, Money, and Abortion Access by Western States Center, Forward Together, and All* Above All and is designed to build shared understanding and analysis about the political and cultural contexts that shapes people’s access to abortion.

Guide the group through the following thoughtful, introspective conversation:

SAY: “Think about one of the most important decisions you can make in your life – do I want to be a parent? This one decision can have serious economic, social, emotional, and physical consequences for you. What would you have [or had to have had] to consider or reflect on before you could make that decision? What are all the things that go into making that one decision?”

- Who are all the people in your life whom you might consult regarding this decision?
- What would shape your values and options?
- What are all the circumstances, questions, considerations, or consequences (economic, social, cultural, etc.) that count in your decision-making?”

WRITE their responses in a concentric circle diagram (above right).
SAY: “If we change the question [...] to ‘Should I continue a pregnancy?’ what would change?”

- Where do you have relative privilege, access, and solid support? Where do you struggle with access or support?
- In your community, what social justice issues do you know of that could affect a person’s circumstances to parent as they choose or access an abortion they need?
- What surfaces for you as you reflect on all of these questions? What questions and insights might be valuable in the Heart-to-Heart conversations you plan to have?”

To close the debrief, consider what information or messaging would be supportive of your group to deepen their understanding of the factors and dynamics — including political and institutional — that shape people’s decision-making about pregnancy and abortion. You may want to review some of the facts and statistics in the “BUILD YOUR KNOWLEDGE” or background in “UNDERSTANDING INTERSECTIONALITY” sections above, or watch and discuss a video together (see “Additional reflection and education activities,” below).

D. Getting Ready for Heart-to-Heart Conversations (do both of these activities)

The following two sections support participants to 1) Think about people in their lives they could have conversations with and do a little goal-setting and prioritizing, and 2) Prep and practice for a conversation.

Practice Space Part 1: Setting Conversation Goals (Realistically) (20 min)

**Say to group:** Because we’re here to support each other in having great Heart-to-Hearts about abortion with people we care about, we can have a conversation together about what it means to move people to new perspectives on abortion — realistically!

**Who are your people, and what are your dreams for conversations with them?**
Who do you wish to invite into conversation? What do you understand about where
they’re at (and what assumptions about them do you need to check?) Where do you want to move them or what do you want to happen?

The goal of these conversations is NOT to move someone from angry about abortion to a full supporter. You may want to move them from opposed to tolerant or just to open the door to conversation and be able to end the conversation without too much debate while the relationship remains strong.

Who is an example of a person who might not become a supporter right away, but who you might want to have an empathetic conversation with? As a group, let’s see if we can help set a realistic goal for talking with that person!

Guidance you can share with the group:

- **If the person you’re talking with is in a space of transition** or unsure about how they relate to the issue of abortion access, set a goal in advance for how you’d like the conversation to end. Will they respond to you listening and showing empathy as they ask questions? You can connect them with information and offer to be there for them with an open mind and heart as they explore more.

- **If the person you’re talking with is strongly opposed to abortion**, set a goal before you start for how you’d like the conversation to end. What’s the most important part of the conversation to you? Do you want to show them that they can ask questions about abortion access safely? Do you want to show that you are a source of information and invite them to question one of their viewpoints? Do you just want to be able to say the word “abortion” in their presence? Be realistic, authentic, and willing to end the conversation without requiring them to share your perspective. You don’t have to change their mind overnight.

- **If you’re talking with someone who already supports abortion access**, you can move them into action for funds, as well as to connect their abortion support more
deeply with racial, economic, and reproductive justice. They may join you in supporting abortion funds!

**SPECTRUM OF VIEWS ON ABORTION**

![Diagram of the spectrum of views on abortion.]

Diagram created as part of a Culture Change Strategy Group convening with Sea Change, January 2017.

**Practice Space Part 2: Acting Out Courageous Conversations Together (25 min activity)**

If everyone in the room supports abortion access, then it can be helpful to use the space to practice having courageous conversations with each other. You can have everyone pair up and practice together, or for a more advanced version, do a fishbowl where two people are in the middle of a circle, acting out the conversation.

To begin, instruct the group either to pair up or ask for two volunteers to sit or stand in the center of the group.

**Say to the group:** Who in your life do you want to have a courageous conversation with? Describe this person to your partner. What is that person’s perspective on abortion, if you know it? What do they value most? What concerns do they have? What identities impact their ability to engage authentically and respectfully? Also
what you want out of the conversation? For example, do you want to move them from disgust to tolerance when talking about abortion?

Do you want to tell them about your abortion? Do you want to build trust with them and show that you can listen to each other through difficult topics? Then choose how you’d like to start the conversation and begin empathetically. Listen to them. For the partner, try to tune in to how the person you’re pretending to be feels and answer from that perspective without mocking their perspective through the way you act it out. Take 5 minutes and then switch to the other partner. After each partner has gone through a practice round, take a moment to individually reflect on the following questions.

- How did that practice round go?
- Where did you feel successful?
- Where could you grow?
- What support or additional resources do you need? Where might you need to practice more?

After both partners have shared, we’ll come back as a group and debrief.

Some conversational tools you can use to guide the group through this process:

- **Give folks space to do their own talking**, processing, and come into their own analysis. Refrain from shutting a person down because they don’t have the perfect language or frameworks. They may not have read or been exposed to the same media and information as you, and that’s ok!

- **Manage your defensiveness**. It’s common to feel defensive and want to protect our work and people who call for funding, but starting out in a defensive stance might be counterproductive. You never have to “tolerate” an opinion you disagree with or believe is harmful, but you can think about what responses might be best in advance.
● Frame the discussion with values and experiences they care deeply about. **Focus on the values you share** as you begin.

● No matter who you’re speaking with, it’s important to **ask for consent** before you begin. You can say something like:

  ○ “You may not know this, but I’m part of a community that supports abortion access and abortion funds. Something that many of us have committed to is to talk with people in our lives about abortion, and I was curious about [ask the person a question about their perspective]. Would you be open to talking about this with me?”

  ○ “With everything going on lately, I’ve been thinking a lot about why abortion access matters. And I realized I don’t know much about your thoughts about [insert question]. Can we talk about it?”

  ○ “Our friendship/relationship is so important in my life. Sometimes I worry that because we don’t share the same views about abortion that we can’t talk about it at all. I’d love to have a conversation with you if you’re willing.”

● **Start with agreements** if you’re worried about the conversation getting heated, like not to interrupt each other, not to yell or shout, and not to leave the room.

● **Listen closely.** Regardless of who you’re talking to, we all appreciate the feeling that we are being heard, even while in disagreement.

● **Invite future conversations!** Even if you’re not satisfied with the immediate result of the conversation, you may be surprised with the longer term effects, so think about how you might be able to end the conversation in a way that keeps the door open.

● **Take care of yourself!** Engaging in these conversations, especially with someone who has different views from you, can potentially be triggering, uncomfortable, and a lot of hard work. Reflect on what you need to do before, during and afterwards to care for yourself physically, emotionally, and spiritually. If you are not able to continue the conversation, you can end it at anytime by saying, “Thank you for having a conversation with me. I’d like to end it now. Maybe we can talk more in the future.”

● After the conversation, **offer gratitude to yourself and your conversation partners** for showing up and engaging as courageously as they could.
Here is an article sourced from the collective wisdom of abortion fund leaders on how to talk with your family and friends about abortion! You can share with the group.

E. Continue with Call to Action

One of the many things that participants can commit to is to “Have Heart-to-Heart abortion conversations with people in my life — now or in a network-wide campaign in 2021!” You can emphasize this and suggest that they specify how many, with whom, and how (e.g. wearing their Everyone Loves Someone... Shirt, posting on Twitter, taking a selfie together, reaching out through emails, inviting folks for dinner, etc.)

APPENDIX: Activity Adaptations and Additional Resources

Heart-to-Heart: Policy Conversation Starters for Small Group Guides

For many years, anti-abortion advocates have steadily and incrementally chipped away at access to abortion, targeting the access from multiple angles.

Drawing on our network's heart-forward values of Intersectionality, Compassion, Collective Power, and Autonomy — what feels misaligned as you look through the lens of our network values at these anti-abortion strategies?

- Putting medically unnecessary restrictions on providers and their facilities
- Politicians telling doctors how they can and cannot perform surgical abortions even when there is no medical basis for restriction (ex. banning on “dilation and extraction,” despite being medically proven as one of the safest forms of surgical abortion in the second trimester and endorsed by the American College of Obstetricians and Gynecologists)
- Putting a blanket ban on people insured through Medicaid, the Bureau of Prisons, the Indian Health Service, the Peace Corps, the US Military, or other agencies of the federal government, from using that insurance to pay for their abortion

1 For more information, see: https://rewire.news/legislative-tracker/law-topic/dilation-and-evacuation-bans/
● Restricting the agency of people seeking abortion by deciding for them what are acceptable *reasons they can want to have an abortion* (ex. so-called “race-selective,” “sex-selective” and disability reason based bans)

● **Forcing young people (under 18) to involve their parents** in their decision to have an abortion, even if it may be unsafe for them to do so.

● **Forcing providers to state certain things to people seeking abortion even when those statements are scientifically unproven** (ex. forcing providers to say that abortion causes breast cancer, or that abortion can be “reversed”)

● Attempting to force people seeking abortion to **get the consent of the person with whom they became pregnant** before being allowed to actually have their abortion

● Forcing pregnant people to **wait a certain amount of time so they can think about whether they really want to have an abortion** (even if they are completely clear about their decision)

● Protecting the right of anti-abortion facilities (and the right of states to fund those facilities) to **falsely pose as medical clinics and discourage pregnant people from having abortions using emotionally manipulative tactics** such as showing “patients” ultrasounds and offering free diapers and children’s toys

● Not allowing a person who has **no physical means of meeting with an abortion provider in person** (ex. they are located in an abortion desert, navigating a violent relationship or family household, they lack funds for transportation or childcare) from obtaining care via telemedicine with a licensed medical provider.

Now let’s take a second look.

● Choose one of these scenarios and brainstorm 1-2 things you would offer, one to one, to a person navigating one of these restrictions.

● Who would you ask for support in offering that community care?

● What barriers, if any, do you imagine you may confront as you provide that care?

● What would make you feel empowered and powerful as you offer that care?

● Synthesis
○ Each of your answers to these questions can form the basis for a radical demand to shift policy, narratives, and existing arrangements of power and bring alignment between people’s real lives and the structures they navigate.

○ What other shifts would bring such alignment in the lives of your communities and callers?

Alternative Shorter Time Period (most appropriate for a group of abortion access champions)

We understand that you may not have 90-145 minutes to facilitate this entire section. We have designed this curriculum this way because it is so important to build intentional spaces for relationship- and trust-building, for folks to deepen their own understanding of abortion access in the context of Reproductive Justice values, and for folks to debrief and discuss with each other.

Here’s how you can do it in a program that lasts an hour or less. The best audience for this shorter version is a group of participants who themselves are already abortion access supporters, with relatively strong understanding of intersectionality and reproductive justice.

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<thead>
<tr>
<th>Topic</th>
<th>Adjustment</th>
<th>Adjusted time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Grounding and group agreements</strong></td>
<td>Offer a welcome, quick icebreaker, agenda overview, and group agreements</td>
<td>15-20 min</td>
</tr>
<tr>
<td><strong>B. Building understanding about abortion, access, and experience</strong></td>
<td>Prepare some talking points to ground the conversation, pulling in messages from the “Before you begin” section and reflection/education activities that you feel are best suited for your audience.</td>
<td>5 min</td>
</tr>
</tbody>
</table>
| **C. Getting ready for Heart-to-Heart Conversations** | **Options:**  
1. Run these sections as described (45 min) | 25-45 min     |
2. You could do Part 1 (Setting Conversation Goals) in 5 minutes, suggesting that participants focus on people who are likely to be supporters or in transition. Then Do Part 2 (Acting Out Conversations) fully. (25 min)

3. Or you can do Part 1 fully, still encouraging participants to start with likely supporters or folks in transition. Then have a brief group discussion about questions that folks have or tips for each other instead of Part 2. (25 min)

Either way, send folks home with homework:

- “Deepen your own reflection and learning using resources in this guide (give them suggestions)
- Continue mapping your contacts and setting goals AND/OR practicing on your own, as needed (or make a plan with a buddy here to practice together!)

| D. Moving to Action and Closing | Run this as indicated in the ActionSpace toolkit, but a bit more quickly | 15 min |

**Alternative Empathy Builder: I Am From Poem (30 min)**

*Adapted from Dr. Beverly Tatum*
Using paper and pen, ask everyone to spend a few minutes jotting down details about their lives in the form of this poem. Then ask everyone to read their poems out loud, saying “I am from” before the four details they provide in each stanza.

**Say to the group:** We all come from beautiful communities, diverse families, and rich histories. These experiences inform how we experience the world and what feels like home for each of us. Often, people in positions of power and privilege tell us that our histories, familiarities, and joys aren’t valued as much as those in the dominant culture, and we are forced to compartmentalize or suppress them.

This activity is a four stanza poem designed to bring our deeper selves into the room to ground us in who we are and the communities that run through our veins. The poem has four stanzas, and each stanza has four lines, each beginning with “I am from...” Complete each stanza based on the descriptors listed below and then share your truth with the community.

**Stanza One:** write down four familiar sights, sounds, and smells of where you are from

**Stanza Two:** write down four familiar foods

**Stanza Three:** write down four family sayings

**Stanza Four:** write down four names of your loved ones

**Alternative Reflection Activity:**

**Choose one or some of these videos to watch and discuss**

- [Reproductive Rights vs. Reproductive Health vs. Reproductive Justice](#)
  - [Additional PDF from Forward Together (previously Asian Communities for Reproductive Justice)](#)
- [Kimberlé Crenshaw’s TED talk on intersectionality](#)
- [Dorothy Roberts’ TED talk on health disparities and race-based medicine](#)
- 2014 NNAF video on how abortion funds help remove barriers to abortion access
- NNAF’s Political Education glossary

Ask the following questions after watching:

- Name at least one key step that should individually and collectively be taken to ensure that groups of people do not fall through the cracks of our movements?
- What is one of the biggest distinctions between reproductive rights and health, and Reproductive Justice?
- Identify some examples of how race-based medicine still exists today. What do these disparities lead to?
- Do you think that religion and science can exist in harmony? Why or why not?
- What are abortion funds’ practical role in the realization of true Reproductive Justice?

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