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Components of reproductive citizenship: narratives from a restrictive abortion landscape

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ABSTRACT

The global political trend of restricting reproductive rights produces fragmented landscapes and embodied experiences for women navigating shifting terrain. This raises questions concerning the conceptualisation of reproductive citizenship. We develop a theoretical framework inspired by the concept of embodied citizenship with which we analyse the sensing, management and negotiation of reproductive citizenship. We find that women relationally, bodily and geographically (re)negotiate their reproductive citizenship when considering and securing access to abortion. In the context of the Faroe Islands, we highlight the emotional tension and ambivalence in women's narratives as expressions of the constrained reproductive citizenship constructions and the interrelational experiences of threatened belonging in society. This analytical framework may prove useful for researchers wishing to examine the turbulent global reproductive landscape, and the geographic, bodily and relational means through which women seeking care negotiate their citizenship.

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In this article it is the restrictive abortion landscape in the Faroe Islands that is the ethnographic departure for exploring components of reproductive citizenship. Reproductive citizenship as a concept derives from a feminist recognition that inequalities in social and political life are reproduced by gendered practices (Firestone 1970; Chodorow 1999). Different concepts of citizenship or relations have emerged since this recognition. Turner (2008) argues that the concept of reproductive citizenship functions to connect the relationship between reproduction and citizenship. Departing from Turner's argument and the understanding that reproductive desires and behaviours are governed (Lynn and Roberts 2012), we interpret the concept of reproductive citizenship as reproductive enactments. Roseneil et al. (2013) have emphasised the growing body of literature on reproductive citizenship. Other scholars have found the concept productive in analysing claims of reproductive subjects; Amuchástegui and Flores (2013), for instance, found that newly achieved reproductive rights to abortion function as legitimisation to postpone motherhood.

To link reproductive citizenship with the theoretical orientation of embodiment, we need to zoom in on the genealogy of 'embodied citizenship'. While feminist scholars have

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written the lived experience of abortion into notions of citizenship during the last decade (Ho 2009; Amuchástegui 2013; Roseneil et al. 2013; Singer 2018), several scholars have noted the gap between citizenship and bodies as integrated and interrelated terms (Bacchi and Beasley 2002; Beasley and Bacchi 2012; Wiseman 2014; Rasmussen 2021). They argue that existing literature rather speaks into a dichotomy of *citizenship* as public and *bodies* as private (Bacchi and Beasley 2002, 328). Drawing the argument further, feminist scholars treat matters of citizenship as organic matters, as body/landscapes relations, to clarify the interrelational movement of emotions (Davies 2000).

The current study speaks into the concept of citizen bodies as social, fleshy and interrelational (Davies 2000; Beasley and Bacchi 2012; Le; Feuvre and Roseneil 2014; Ahmed 2015). The paper is theoretically built upon earlier studies arguing that citizenship is embodied in people's everyday lives (Bacchi and Beasley 2002; Beasley and Bacchi 2012; Wiseman 2014; Rasmussen 2021).

Although scholars have found the concept of reproductive citizenship to be fruitful in analysing *claims* of reproductive citizenship, our purpose differs slightly. We do not focus on enactments nor claims, understood as verbal, continuous and repetitive, but rather explore the *formation* of reproductive citizenship and how it may be sensed, managed and negotiated: we treat it as something always in process, always taking shape.

The aim is to broaden the understanding, and thus analytical use, of the concept of reproductive citizenship, through a feminist ethnographic approach of embodied everyday experiences of emotions in a restricted reproductive landscape. This is achieved by highlighting how women with an ambivalent or a failed sense of reproductive citizenship manoeuvre – geographically, bodily/emotionally, relationally – the fractured reproductive landscape.

The empirical insight in this paper is from the Faroe Islands, a North Atlantic archipelago consisting of 18 islands covering approx. 1,400 sqm. With their 54,522 inhabitants, they form part of the Danish Kingdom with Home Rule.[1] The political relationship between the Faroes and Denmark states that the Faroes belong to the Danish Kingdom although with Home Rule. This means that the islands are partly self-governed and 'take home' legislation each year. The Abortion Act applicable for the Danish Kingdom was formulated and enacted in Denmark in 1956. It states that a woman can seek an induced abortion[2] in cases where:

(1) The pregnant woman's life or health is in danger. It refers to both the physical and mental health of the woman, not only in present conditions but also in threatening conditions.
(2) The woman has become pregnant under circumstances where her bodily freedom has been trespassed, like rape or incest. The rape or incest must have been reported and the accusations accepted by the police.
(3) The foetus carries or has a high risk of carrying a severe mental or physical disability.
(4) The woman is deemed unfit for nursing a child.

In 1959, the Danish state amended the abortion legislation, removing the fourth reason for granting abortion, as listed below, whereas the Faroese government decided to keep the law from 1956. In 1973 the Danish state further amended their abortion Act, making

it one of the first Nordic countries to put into force an abortion Act on-demand within the 12th week of gestation; as in 1959, the Faroese government decided to keep the legislation from 1956. In July 2018, the Faroese government took over the jurisdiction of family affairs (where the abortion Act is situated) from Danish authorities. The delegation was merely administrative, meaning that no amendments were made to the legislation. Therefore, the legislation from 1956 remains in force, although now under Faroese juridical administration.[3]

In practice, abortion care must be granted by a general practitioner and further approved by a gynaecological obstetrician at the National Hospital, where all abortions (surgical and medical) take place free of charge.[4]

Supporting anthropologist Gaini's (2012) description of child centredness in Faroese culture, the Faroes may be described as heterosexual procreative norm driven. The strong local values of family, or, in other words, the heterosexual procreative moral regimes, are challenged by shifting and variating customs and practices of the western world, creating tensions in the political and social life of the islanders (see for instance Hayfield 2020). From anthropological literature on social life and identity in the Faroes (Gaini 2013), we assumed at the outset of this investigation that having children is a cultural value and that it is an entry to the value of 'full' reproductive citizenship (Bacchi and Beasley 2002; Morison and Ingrid 2019). Faroese reproductive policies state the right to fertility treatments of various kinds, free of personal cost, performed in either Denmark or Iceland[5]; however, the right to refuse motherhood is highly restricted. This enhances the social construction of the woman who reproduces as 'valuable' (Morison and Ingrid 2019, 167).

Gaini argues that the Faroes are in a 'shift – between tradition and late modernity' (Gaini 2009, 2), which supports Simpson's, Blell's, and Hampshire's argument that citizens navigate in a local moral world as well as in a *global* moral world (Simpson, Mwenza, and Kate 2015). Local moral worlds (Kleinman 1992) partly constitute members' reasoning and meaning making, as global trends in abortion politics challenge deeply embedded values and norms in local communities. In the Faroese context, 'outside' trends may challenge moral regimes of motherhood. However, as Simpson, Mwenza, and Kate (2015), together with Inhorn (2015), point to, moral worlds are not simply 'local' in the sense that Kleinman proposed, as moral worlds also consist of 'influences that come from overarching structures of health care, education and welfare, and through which minority groups become, to greater and lesser degrees, woven into the fabric of Western states and economies' (Simpson, Mwenza, and Kate 2015, 48). As empirical material in the present paper reveals, the women manoeuvre in both the local moral world and in globalised reproductive politics and bodily autonomy of their gendered Nordic neighbours.

Despite the commonness of abortion (Wulf 1999; Sedgh et al. 2012) as a reproductive decision worldwide, it is a highly contested matter (Ginsburg 1989). Women all over the world navigate in legal and extra-legal restrictive reproductive landscapes (Silvia De, Mishtal, and Anton 2017). Legal and extra-legal restrictions make both the access and the pathway to abortion care more troubling and affect women's understanding of themselves as moral citizens (Amuchástegui and Flores 2013).

This paper finds itself in a time of turbulence on a global scale (Hermannsdóttir 2023). Poland further restricted access to abortion care in 2021 to only when the

pregnant person's life or health is endangered or when the pregnancy is the result of a criminal act. Moving the gaze further west, the U.S. Supreme Court overturned Roe vs. Wade in 2022, withdrawing abortion as a constitutional right, resulting only a year later in 14 States considerably restricting their abortion legislation. In 2023, Italy's prime minister, Giorgia Meloni, elevated an anti-LGBTQ+ and anti-abortion rhetoric, also posing a threat to already won queer and reproductive rights. However, it is not only restrictions that the global reproductive landscape is experiencing. In 2018, Ireland underwent liberalisations to a historically restrictive and conservative abortion legislation. Likewise, Mexico decriminalised abortion in 2021, which resulted in several States outside Mexico City liberalising their abortion legislation.[6] The global political eruption on abortion and LGBTQ+ rights calls for new analyses that go beyond common understandings of citizenship to investigate what else might be at stake in restricted accesses to abortion care and how we as researchers may analytically explore these political and subjective tensions.

Theoretical and methodological approaches

The current paper is concerned with emotions as an analytical entry to narratives of lived reproductive citizenship and develops a theoretical framework informed by embodied citizenship (Bacchi and Beasley 2002) and body/landscape relations (Davies 2000; Ahmed 2010, 2015). The empirical material is concerned with highly hidden and at times even tacit lived bodily experiences that take no visible bodily shape but are nonetheless embodied. The lived experiences in the empirical material present themselves as morally condemned and *should* not take up any shape or form. One could ask, why work from an embodied perspective when the body is *hidden* in the materiality of the body? A proposed answer lies within the female body being the capsule to lived experiences of abortion and reproductive matters, despite its invisibility to the public/social gaze. Furthermore, it is often an experience actively hidden from others. It is a core point of the current paper to stay attentive to emotions when concerned with 'hidden' issues in people's lives. We take on an ontological understanding of 'citizen bodies' (Bacchi and Beasley 2002; Beasley and Bacchi 2012) as interrelational, lived, and thus in continuous shaping. We stay attentive to emotions that are not necessarily social or public but nonetheless constitute embodied reproductive citizenship. As such, we understand notions of belonging, emotions, bodies and reproductive citizenship to be interconnected.

Our methodological approach underpins our theoretical orientation and understanding of reproductive citizenship. In processing and analysing knowledge from the field, the ethical and epistemological framework is grounded in critical ethnography. By using narrative and life history approaches to analysing knowledge (Hollway and Jefferson 2000; Nielsen 2019), we have endeavoured to give participants a leading role in representing their perspectives, experiences, emotions and imaginations. As this is represented, it may illuminate the self-referential labour of the interlocutor, the historicity of the specific moment, when the researcher was in the field, and the very subjective situations of interviewing. It is further a way of ensuring participants' perspectives, experiences, emotions, and imaginations about the future are represented as richly and widely as possible.

The fieldwork (including interviews, all contact with interlocutors and coding and translation of interviews) was conducted by the first author over two years, whereby the sample has been continuously widened.

A point of saturation was met (Kvale 1996, 101–3) when the sample reached 20 formalised interviews and numerous informal conversations with people about abortion, legislation and societal factors that influence reproductive rights and lived experiences.

Interlocutors were given an information letter in advance of the interview, often as an attachment in the invitation email that was used to communicate with interlocutors to arrange the interview, with some interlocutors this was accomplished through oral information via telephone. At the interviews, which were conducted in Faroese, the interviewer provided oral information about the project and interview setting, and the participants were invited to ask questions. Before commencing the interview, participants and interviewer signed a formal consent. A few participants did not agree to have the interview recorded because they were concerned about the risks of being identified. Turið has chosen the selected portraits from the large sample as representations of a shared, yet distinct, relation between embodiment and emotions, and citizenship and belonging in the whole sample.

Themes of ambivalence in the whole sample emerged early in the coding process (NVivo). At first glance, the ambivalent emotions and silences (at times self-censorship) seemed contradictory and expressions of lack of agency. Through critical reflections on own emotional reactions to the initial themes, it became clear that the narratives were not necessarily contradictions or without agency but rather expressive of tension. This finding led to the ambivalent emotions becoming the analytical exploration. The point was to follow the ambivalent emotions in the material to unfold the complex and entangled relationship between reproductive citizenship, belonging and embodiment.

We have chosen to present two portraits based on their significance in presenting themes and dynamics that are present in the whole sample, even though all stories and cases are unique. The analyses are interwoven into the portraits and are structured thematically into the three key findings. We refer to the interviewer by her first name.

Sensing, managing and negotiating reproductive citizenship

As pointed out in the introduction, the paper reaches its aim by highlighting women's ambivalent emotions with their reproductive citizenship when encountering the restrictive reproductive landscape. We focus on three main themes that we find occur in women's ambivalent or failed sense of reproductive citizenship. These include geographical, embodied and relational matters. They are all matters that are part of sensing, managing and negotiating one's reproductive citizenship and thus belonging, which will be expanded upon in the analyses below.

Ambivalent emotions and negotiations of place- and moral-belonging: Barbara's story

In her late teens, Barbara became pregnant. She had hitherto been convinced that she would choose an abortion if she became pregnant unplanned, but had not reflected further on this,

> I could always just have an abortion, you know. That was not an issue. But then, when I was in the situation, it was completely different.

Barbara had a melancholic smile when she recounted her personal experience with the abortion question, and said,

> I mean, since it is something that lies so deep within us, as Faroese, it has influenced me, you know (. . .) right. I mean (. . .) because in one way or another, I wanted an abortion, back then, but I couldn't! It sounds terrible when you say it (. . .) and it's also shameful to say it, that I wanted an abortion, but I didn't [ed.: have the abortion] (. . .) you know.

Barbara's body language changed when talking about this event. She turned more in toward herself and there were many pauses in her utterances. The passage illuminates what we understand as ambivalent emotions concerning the event of, on the one hand, wanting an abortion, and, on the other hand, experiencing contradictory feelings about abortion and thus not choosing abortion. She feels shame and guilt for wanting an abortion, and she feels shame for not experiencing emotions of moral concerns towards abortion. In the below quote, Barbara is somewhat disappointed or feels guilty toward the person she thought she was,

> I have often thought what life could have been like if I hadn't had my child. I mean, it wasn't my plan. At all. I feel that I had an opportunity, but, at the same time, I didn't. And it's exactly the 'at the same time, I didn't' that probably is [inhales deeply] something that I've been influenced by from the Faroese society. I mean, my mindset has been formed in some way. I mean, in an unconscious way, like it lies within the word (. . .) to take the foetus.[7]

While Barbara's narrative reveals an ambivalence toward the specific event, it also illustrates the *tension* in the women's narratives in terms of a political identity: that of belonging to the nation or culture, with its family values and 'child centric' norms (Gaini 2012; Hayfield 2020), and belonging to 'something else'. This 'something else' is connected to what Barbara perceives as the 'progressive' Faroese citizen who orients her/himself to global trends and behaviours. Throughout Barbara's narrative, this is portrayed as a continuous battle between belonging to a 'progressive' self/citizen and belonging to a Faroese moral self/citizen and fulfilling a full reproductive citizenship. This battle between contradictory belongings exemplifies the ambivalence in women's experiences. Later, at another event, Barbara said,

> If it would have been possible [referring to morally], I wouldn't have had my first-born child.

Ahmed's analytical use of melancholia is concerned with quite different empirical matters than the current material; nonetheless, we argue there is a link to Barbara's narrative and the melancholia described by Ahmed (2010, Ahmed 2015; see also Butler 1997). Ahmed's description of 'ungrievable loss' produces a feeling of shame, which induces a state of melancholia (Ahmed 2015, 155–61). Barbara is grieving a life that she could have had. She is grieving the troubles she has had because of early motherhood. But she is also grieving her imagined self that turned out to be different. This way, the melancholia in Barbara's narrative is not so much a mourning of a loss, but instead a longing (Ahmed 2010, 140). In Barbara's narrative, she is mourning the unapproachable desire and even the loss of the imagined.

Barbara did not come from what she termed a 'typical Faroese family', referring to the close family relations in the Faroe Islands and the role of the older women in the families. Grandmothers are commonly seen as the centre point in the family, the centre that gathers the whole family, from nuclear family to extended family (cousins, uncles, aunts, etc.).

> There is another way of being a mother and grandmother in the Faroe Islands, which isn't the same as elsewhere, you know. And those who don't have *those* mums and grandmothers, they are missing out, kind of. How many do you know who've walked home to their grandmother after school every day?! I mean, I've never had that relationship with my grandmother. And so, I have longed for it. And so, I've thought, I'll make sure I'll be that grandmother (laughs), where you can come every day, and (. . .) you know.

While bodies and citizens are demarcated through restrictive laws, their limitations are also revealed and negotiated through interrelations. The relevance of the place is obvious in its matter of structural and practical obstacles that restrict women's access to abortion care, but something else is also at stake. From a body/landscape relation (Davies 2000), places/landscapes affect the (im)possibilities of experience. While Barbara experiences an 'out of place' (Ahmed 2015, 148) feeling, she navigates via her body and negotiates her very body as a mean to belong, making life trajectories such as 'I'll make sure I'll be that grandmother' (see also Wiseman 2014, chap. 6). Through her imaginations and strive towards a culturally specific 'grandmotherhood' and her own motherhood, she bodily demonstrates and negotiates a reproductive citizenship.

The small size of the islands has great impact on people's interrelatedness and the position(s) people hold (Gaini 2013; Hayfield 2018). Therefore, we also investigate the notion of reproductive citizenship in a *certain place*, with high familiarity and close relational ties. As an interlocutor in Hayfield and Schug's paper said,

> I don't understand Faroese conversations. They always have a central element and that is to talk about or uncover how people are connected to each other or a network. It is like they have a cognitive map of relations. (Hayfield and Schug 2019, 389)

Belonging is thus performed through history and materiality, having a relation to the Faroe Islands. As Gaini (2013, 41) points out, 'family capital is necessary as a means to be accepted as members of the informal collective of individuals, because a person without family would be regarded as a person without attachment to place'. From a critical feminist perspective, this can be analysed in terms of the value of motherhood and the doing of family in the context of belonging to the Faroe Islands. The matter of place is argued in this paper to produce emotions of 'discomfort' (Ahmed 2015, chap. 7) because the bodies in concern do not fulfil the felt expected norms of the society.

Emotions of failed reproductive citizenship and bodily-selfhood transformations: vár's abortion experience

Vár was 18 years old when she had an abortion abroad. During the interview, it was clear to Turið that it was uncomfortable for Vár to talk about the decision and experience in detail. The pregnancy and abortion were experiences that Vár tried to detach herself from in her everyday life. She strived for it to be a *non-event* by not talking about it or

participating in discussions on abortion. When Vár found out she was pregnant, her initial thought was, 'It just had to be gone, gone, gone'. Swiftly, she made an appointment with her general practitioner (GP) to arrange for an abortion. Vár said while laughing,

> I thought. I was in the waiting room. 'How am I going to tell her?' I was nervous that I wasn't going to get it said. That I was going to say something else.

Vár had the same GP for many years and was nervous to tell her about the unplanned pregnancy. It was not because of the possibility of being denied an abortion but rather that it would mean that she would have to deal with the pregnancy. Vár was afraid that she was not going to get it said. She knew she had to say it quickly before she changed her mind and said something else. She told me,

> So, I go in and kind of. . . I just hurried to get it said, 'I'm pregnant and I want an abortion!' Like BOOM.

Vár's silence on the pregnancy and abortion was multiple. One thing was striving, recognised from the whole sample, to keep this a secret, and therefore be silent about the pregnancy and abortion, to protect and maintain one's belonging to society, family and nation (Hermannsdóttir 2022). However, the silence also functioned as a means to bodily detach herself from the reality of the pregnancy and later the abortion, almost bodily rejecting it. The multiple silences can represent a battle between rejecting the bodily transformations she was experiencing and still being forced to face them as they become real when 'asking' for an abortion and *having* the (surgical) procedure.[8]

Vár had managed to tell her GP. Having overcome this, she had to face the second obstacle, to either get the abortion granted or denied. Vár continued,

> And she [the GP] said 'Are you sure?' Then I remember I said something like, 'I'm too young', and then she says 'No, you're in your BEST age. The body is NEVER going to be able to produce children as well as it is right now'. Then I said something like, 'I'm not mentally ready. I can't do it'. But she thought that I should think about it. That it was a big decision. And, uh, she wasn't receptive, really. So, I remember the feeling when I left the doctor's office that this was going to be a battle. A battle that I had to fight if I wanted this done in the Faroes.

Vár decided not to proceed with the 'battle' in the Faroes and arranged an appointment with a GP in Denmark. Vár had to attend school and wait for the next vacation, so a couple of weeks went by until she could travel to Denmark. The GP in Denmark had promised to help her and had said that he 'had helped other Faroese girls before'.

Any citizen with permanent residency in the Faroes has the right to obtain an abortion in the Danish health care system, albeit not for free like it is for citizens with permanent residency in Denmark. There are various ways to go about this, one of which is to move one's permanent address to Denmark,[9] another way is to pay for an abortion in either a private clinic or public hospital and a third way is to search for a physician who will go around the system, in some way. In this case Vár tried the last opportunity. She called a friend (who had permanent residency in Denmark) and asked him to call his general practitioner for help. The GP could send Vár to a gynaecologist at the hospital to perform the abortion procedure, which had to be surgical as she had gone past 9 weeks of gestation.

'In Denmark, no one asked me why I wanted an abortion, nor did anyone try to oppose me'. Vár remembered the relief to have gone to Denmark and get the help she needed without anyone interfering with her choice. Vár said, while exhaling, 'Thank God we have Denmark. Our pillow'. Turið asked her how she felt the abortion landscape was in Denmark, where she had lived for many years, after finishing high school. Vár said,

> I feel it's not even discussed as a topic, like that, in Denmark. It's just a personal matter. In fact, people just say it out loud at the table. I've told many people in Denmark. In Denmark I can mention it without any hassle.

Turið asked Vár, 'So, you don't feel that it's as difficult to say it out loud in Denmark as you do in the Faroes?', to which she replied,

> No, it's something about the Faroe Islands … A need to categorise each other, like … annoying. Argh, I get claustrophobia! Seriously. [She grabs her head and shakes it, and we laugh] Nah, nah, it's not that I regret it [ed.: moving back to the Faroes], I really missed home and now I must deal with the consequences.

The feeling of lacking bodily autonomy is constructed in Vár when she after the abortion moves to Denmark and experiences that abortion is not even a moral issue. Again, the surface of her body is made visible to her as her perception of her embodiment does not 'sink' into the Faroese society's procreative norm (Ahmed 2015, 148).

Obviously emotionally affected, Turið felt an urge to comfort Vár and said, 'Yeah, you've got good people around you', to which Vár replied,

> Yeah, actually, I don't experience the other side. I don't really know who they are but I hear they are there (laughs) you can hear them on the radio but it's not my environment. Not here (referring to her workplace). Not among friends. Not in my family either. But (…)

When Vár speaks of the 'other side', it is something that she *senses* but that she does not recognise as part of her intimate relationships. She speaks of 'others' as someone or something that affect people to *feel* Othering (Ahmed 2015; Mattes and Lang 2020).

> I thought I was the only one in the world, when all this … that's how I felt it. So, I didn't want to tell anyone.

Turið asked Vár, 'the thought of someone knowing about it, how was that? Can you tell me about that?'

> Uh, (exhales) that (…) That people were going to look at me in a certain way. Seeing me like someone who's done something wrong. Or (inhales) reckless, I think maybe. Maybe also because I kind of feel that way. So, I don't want other people to know it, think it or see it. Keep it secret. Yeah.

Vár keeps silent about her abortion experience in the Faroes because she fears people would judge her because of the abortion choice. She also internalises the felt stigma when saying, 'maybe also because I kind of feel that way'. Vár's narrative is expressive of a melancholia of not successfully embodying what she expects to be society's ideal of

womanhood, as having control over her own fertility and doing family and motherhood (Ahmed 2015). It was more so the perceptions of living up to the ideals of womanhood that were in display than the abortion itself.

Vár continues, telling Turið that she feels she had 'robbed' her ex-boyfriend of becoming a father and her mother-in-law of a grandchild.

Like as if I have robbed her of a grandchild.

Vár's imaginations and almost 'fear' of having robbed someone of fatherhood and a grandchild crystallises reproductive citizenship as a relational matter in women's lives. Marshall's (Marshall and Bottomore 1992) concept of citizenship claims that the citizen can obtain rights by fulfilling certain duties. The concept of reproductive citizenship, referred to by Turner (2008), poses certain reproductive duties onto the citizen, and, combining this with sensing dis-belonging, Vár's narrative illustrates this tension of experiencing her reproductive behaviours to be connected to other people's reproductive citizenship. Her abortion choice necessarily *robs* someone else from obtaining their reproductive wishes or duties, portraying that her body was expected to do something in relation to other individuals. The feeling of failed reproductive citizenship is materialised in 'robbing' her ex-partner of becoming a father and her mother-in-law of a grandchild. She expresses a feeling of social expectation of a woman to reproduce to be valued as a full citizen and be a valuable citizen (Bacchi and Beasley 2002).

As such, the sense of failure to embody femininity and expectations of fulfilling duties of reproductive citizenship are via her relations to others and the society.

> I just remember the feeling (. . .) it was at the paediatric ward, so kids were running around. And there were children's cries, and diapers, and I was really determined to get this out of me, and I vomited, and my breasts grew and (. . .) I was really pregnant. Now I know what it's like. Without anyone knowing about it, right. (. . .) And then I remember the nausea was gone, and it was really nice. It was over with. And I knew I was going back to school when I got back. And . . . life could start again, kind of. That feeling was liberating. I sometimes get sad about it (. . .) because I don't have children, if I won't get them, ever. That I was so close and didn't get it. But, at the end of the day, I don't regret it at all. I'm happy I got the opportunity. [to have the abortion]

Vár's experiences of her pregnant body, breasts growing and vomiting, and the initial almost 'rejection' of it, as highlighted above, can be understood as movements between body/landscape relations (Davies 2000). Understanding body/landscape relations as bodies coming into being with landscapes and landscapes likewise coming into being with bodies, and thus as an organic process, Davies frames '(be)longing' as always entailing an aspect of *longing*. The body longs to belong appropriately in a landscape that is constructed in a relationship of bodies and landscapes. It is in this sense that belonging can be understood as a motion. In Vár's case, she is moving in-between such landscapes: feeling her pregnant body without anyone *seeing* it but then to get the abortion and moving again into a different body/landscape relation – one that is not fulfilling the expected duties of reproductive citizenship.

On the geopolitics of reproduction

Given the child-centred norm and heterosexual pro-creative governance in the Faroes, as laid out in the introduction, women's mobility might pose a specific

challenge to the geopolitical identity in the Faroes. While it is out of scope of this paper to identify possible incitements for reproductive governance in the Faroes, it is relevant to discuss the possible effect that women's mobility may have on the geopolitical coherence of the Faroes as self-governed islands. How might women's mobility awaken a haunted geopolitical identity? Considering feminist migration studies, boundaries and borders are not pre-fixed identifications but rather socially constructed and situated in an unequal power-relationship (Silvey 2005, 2006). In this perspective, women's bodies come to symbolise the very boundaries of the nation to which political actors (state institutions, churches, activist agencies, etc.) use legal and extra-legal matters, such as 'legislative controls, moral injunctions, direct coercion, and ethical incitement' (Lynn and Roberts 2012, 243), to produce and monitor abortion (and other reproductive) desires and behaviours. Women's reproductive bodies are, in this way, constructed to symbolise or uphold a national identity (Yuval-Davis 1997; Silvey 2005).

As illuminated in this paper, women in the Faroes make use of their national citizenship rights (which is Danish) to travel to Denmark and obtain abortion care, not only in cases where they are denied access in the Faroes but also as a 'better' option, like Vár did. This mobility is reliant on the pregnant person's capital both in economic, social and emotional terms, hereby also shedding light on the stratification of reproduction in the Faroes (Ginsburg and Rapp 1995). This citizenship claim is not only relevant in cases where women seek abortion care, but also functions as an orientation, a sensing, a management of subject making and thus also citizenship-making, like in Barbara's case. Historically, patients with more complex health issues have been given treatment in the Danish healthcare system, but also elsewhere like Iceland; in practice, this has meant, for example, that some patients must move to Denmark for an unknown amount of time or otherwise travel between the Faroes and Denmark for some health treatment.[10] In 2014, politicians agreed to increase health treatment for patients locally; however, finances, research and plans are yet to materialise, and patients are still moved abroad for health treatment (Shahin 2022; Stórá 2019). Politician Ingilín D. Strøm (2022) has compared the restrictive abortion legislation to the movement of patients abroad,

> Like we previously turned a blind eye and sent people with disabilities away. Like we previously sent homosexuals away. Like we previously sent the mentally ill away, we are today sending women away when they want a safe and legal abortion.

In the above quote, Strøm indicates that a restrictive abortion legislation and politicians' unwillingness to discuss the matter, can be interpreted that the country indirectly forces citizens who defy dominant gendered norms and expectations by their request for abortion to emigrate. The political silence on abortion in general and women's cross-border movements likewise illuminate the borders and boundaries of the society through women's bodies and mobility – an also the limits of gendered citizen bodies (Silvey 2005).

The highlighted ambivalent emotion indicates an orientation, in that it is almost as if the women *test* their reproductive citizenship. However subtle this may be, this orientation contains agency. Although, at risk of ascribing a Western notion of agency onto their abortion mobility, it is important to understand the abortion mobility as 'exile' (Singer 2019), to highlight the unjust and discriminating political reality of reproduction in the Faroes.

What Barbara and Vár's stories also illuminate is that sensations of dis-belonging are not alleviated in travelling to Denmark to exercise abortion rights, nor to orient themselves towards being a 'progressive' citizen. That is, women's reproductive citizenship and sense of belonging are still contested and negotiated *within* the physical borders of the Faroe Islands.

Conclusion

Through staying attentive to the emotional language in women's abortion narratives, we have unfolded the geographical, embodied and relational matters as components of reproductive citizenship. Through merging the organic and emotional understanding of 'social bodies' (Davies 2000; Ahmed 2015) to studies of reproductive citizenship (Morison and Ingrid 2019), we have highlighted the mismatch in body/landscape relations when citizens go against moral regimes.

The empirical analyses give insight into the emotions of dis-belonging and the failed sense of reproductive citizenship and show how they are formed and negotiated geographically, bodily and relationally.

We have, with the developed theoretical framework, highlighted the role of staying attentive to emotions when working with a subject matter that is morally condemned in the local moral world and a 'hidden' lived experience of women's reproductive everyday lives.

While the paper draws on ethnographic insights from the Faroes, where access to abortion care has historically been restrictive and in practice denied to women, the struggles are not restricted to the Faroes. In recent years, we have witnessed not only a shift in reproductive legislation in countries that historically have secured access to reproductive rights such as abortion, but we have also witnessed an intensified anti-abortion rhetoric and activism in the U.S. and Europe (Datta 2021). The restrictions and liberalisations to abortion legislation on a global scale, as outlined in the introduction, reveal a global picture of a vulnerability to reproductive rights. One issue is that women are denied abortion care; however, what the ethnographic insight from the Faroes reveals is the connection between restrictions to abortion care and how this produces ambivalent emotions in women's experience of belonging/reproductive citizenship. In other words, the paper ethnographically reveals that the (global) political reproductive vulnerability is found to produce ambivalence in women's experiences of (place/moral) belonging and reproductive citizenship. The analyses show that women sense, manage and negotiate their reproductive citizenship and belonging geographically, bodily and relationally. Thus, the analytical framework of the paper proposes new ways to examine turbulent and vulnerable reproductive landscapes by staying attentive to what else may be at stake when encountering ambivalent emotions in the ethnographic material. Applying the proposed analytical framework might prove useful in unfolding connections between restrictive reproductive policies and formations of reproductive citizenship and belonging, and thereby examining what else might be at stake. What more concretely was found to be at stake was the entanglement of reproductive citizenship.

Notes

1. The Home Rule Act from 1948 de facto authorises the Faroe government to legislate in all affairs within the Kingdom except matters of defence and foreign policy, the judiciary and matters of fundamental constitutional supremacy. A further agreement was put into effect, with the Take Over Act from 2005, to entail a systematic delegation of laws at request from Danish authorities to Faroe authorities.
2. From hereon, we only refer to induced abortion as abortion, unless otherwise specified.
3. Interestingly, the delegation resulted in elevated public attention to the Act (which historically has been a resilient and silent political topic), widely debated over the following years. A poll on people's abortion opinions in the Faroes (Skaale 2017) revealed that 46% of 532 respondents supported an update of the current abortion law. Of these, 56% supported an abortion law allowing abortion under certain circumstances and 29% supported an abortion law on-demand. In 2022, these numbers had already changed. Here, 78% of 528 respondents supported an update, whereas 54% supported an abortion law on-demand up to the 12th gestation week (Skaale et al. 2022). The changing numbers may indicate an emerging social change.
4. The Faroes have a welfare system like the Nordic countries, with universal healthcare covered by the National Health Insurance, financed through taxation (Pieters 2021).
5. Patients that are prescribed treatment abroad need to meet specific requirements. These consider, for instance, that it is a heterosexual couple with communal domicile for at least 2 years, involuntary childlessness for at least one year, the woman's BMI must be above 18 and below 35, etc. Prescribed treatment without cost is limited to two children if there are no previous children in the relationship. This also means that lesbian couples or single women seeking fertility treatment cannot fulfil the requirements for prescribed treatment free of charge in Denmark or Iceland.
6. Mexico City had already liberalised abortion legislation in 2007.
7. The Faroese online dictionary *Sprotin* translates the English word 'induced abortion' to 'fosturtøka' in Faroese. However, in the Faroes, there are two competing words for 'fosturtøka', the other being 'abort'. The word abortion is a matter of semantics (Birkler 2014, 33–37). Using the word 'fosturtøka' can equally be an expression of one's values, as it can be used to convey a political standpoint. Some use the word to convey their attitudes toward abortion as an immoral act; others use 'fosturtøka' because they strive to use Faroese words instead of 'abort' because they feel it is an internationalisation of Faroese language. 'To take the foetus' is the first author's translation, drawing attention to Barbara's emotions of the meaning of the word.
8. Almost the entire sample except one had surgical abortions as, at the time of their abortions, surgical abortion was the only procedure offered at the National Hospital. The two interlocutors who had gone to Denmark for abortion also had surgical abortions as the abortion procedure was delayed and the pregnancy had passed nine weeks.
9. Since the Faroe Islands national citizenship is in fact Danish, the procedure for attaining permanent residency in Denmark is not tedious. Faroese citizens must apply for a Danish personal registration number and thereafter register an address. This is possible to do within a couple of hours at the citizen centre. However, other issues arise in moving one's permanent address that may problematise such a choice, such as taxation, salary payment or the address of other children.
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Research portals

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