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Influence of woman's circumstances and ideology on abortion acceptance

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Abstract
The impact of variables such as ideological profile or type of abortion on the acceptance of voluntary termination of pregnancy (VTP) has been extensively studied and supported. In contrast, the influence of the woman's circumstances has received less attention. The aim of this study is analyze, in a community sample of Chilean adults, the effect of the ideological configuration of the participants (religious involvement and political identification with the right wing) and three woman's circumstances requesting the abortion (socioeconomic status, marital status and the partner's agreement) on the acceptance of VTP due to danger to the woman's life, fetal non-viability, and rape. This study used two multivariate between-subject experimental design. The sample consists of 613 participants - mean age 37.14 years (SD = 15.30). The ideological profile of the participants is the variable with the greatest explanatory power, but its presence does not cancel out the effect of the contextual variables. Thus, ideologically conservative profiles are less accepting of abortion. The effect of contextual variables on greater acceptance of traumatic abortion when the woman is a precariuos situation is limited. However, when the mother is in a less unfavourable situation and her partner does not agree with the abortion, there is an effect towards less acceptance. The most important woman's circumstances is the partner's opinion. The implications of including the woman's context in questioning strategies and the coercive implications of giving weight to the partner's consent are discussed.

Keywords Induced abortion · Acceptance of abortion · Ideological profile · Socio-economic status · Marital status · Partner agreement

Introduction

In recent years, the legislative debate on abortion has resurfaced around the world (Osborne et al., 2022). Until September 2017, Chile was one of the few countries that prohibited the induced abortion or voluntary termination of pregnancy (VTP) under any circumstance (Maira et al., 2019). That year, Law 21.030 decriminalized abortion for three reasons: danger to the woman's life, fetal non-viability, and pregnancy due to rape (Congreso Nacional de Chile, 2017, 14 september). Although public opposition to this law has remained between 25 and 30%, support for free abortion - that is, legalising abortion in all circumstances - has increased, reaching 54% in 2023 (IPSOS, 2018, 2020, 2023). Thus, Chilean society is currently polarized: while one sector advocates for free abortion, another sector considers abortion a crime comparable to murder (Kozlowska et al., 2016; Pérez et al., 2020). These polar positions are identified by the dichotomous terminology pro-choice versus anti-choice or pro-life (Hans & Kimberly, 2014; Hess & Rueb, 2005; Jozkowski et al., 2018; Rye & Underhill, 2020; Shields, 2011). The pro-choice position, held by those with more progressive values, supports access to abortion services in all circumstances. The anti-choice position, held by religious and politically conservative groups with a traditional view of values, opposes abortion in all circumstances.

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Accordingly, religious commitment and political identification with the right have been identified as the most influential variables on opinion on VTP (Adair et al., 2024; Adamczyk et al., 2020; Hans & Kimberly, 2014; Hout et al., 2022; Jozkowski et al., 2018; Mosley et al., 2020; Osborne et al., 2022; Pérez et al., 2020, 2022a, 2022b). Given their proven theoretical and empirical links (Caprara et al., 2018), these two variables can be conceived as an ideological configuration (Carvacho, 2010) relevant to the acceptance or rejection of VTP, a notion included in this study. Nevertheless, these two extreme positions encompass numerous intermediate positions (Hans & Kimberly, 2014; Jozkowski et al., 2018; Rye & Underhill, 2020; Shields, 2011). Surveys of the US population suggest that opinion on VTP, is stable, but mostly situational (Jelen & Wilcox, 2003; Osborne et al., 2022; Rye & Underhill, 2020), i.e., the level of acceptance varies according to the situation of women facing VTP (main reason for requesting the abortion, personal circumstances, weeks of pregnancy, etc.).

Nevertheless, surveys on reproductive autonomy use the labels "pro-life" and "pro-choice", forcing people to choose between the two positions. As in other countries, in Chile, these surveys usually use a single question without context, thus avoiding the diversity of situations related to VTP that may influence opinion (Pulso Ciudadano, 2021) or several broad questions without context (IPSOS, 2020, 2023), thus obtaining a general attitude measure (Adamczyk et al., 2020; Hans & Kimberly, 2014; Jelen & Wilcox, 2003; Jozkowski et al., 2018). These query strategies, i.e., single-item or multi-item non-situational surveys, are limited because they fail to distinguish opinions according to different circumstances (Hans & Kimberly, 2014; Rye & Underhill, 2020), exaggerate polarization (Shields, 2011), and simplify a complex phenomenon (Jozkowski et al., 2018; Osborne et al., 2022).

Reasons for requesting an abortion and the woman's circumstances: their influence on the acceptance of VTP

Although women often have multiple reasons for seeking an abortion (Biggs et al., 2013; Klann & Wong, 2020), individuals' attitudes toward VTP are more favourable when the decision is related to medical or traumatic issues, such as women's health, development of fetal abnormalities, or rape. In contrast, attitudes are less favourable when the decision is related to so-called 'choice abortions'. For example, not wanting to have children at the time, having a low socioeconomic status, or having too many children (Cheng et al., 2024; Crawford et al., 2021; Hans & Kimberly, 2014; Hill et al., 2004; Jozkowski et al., 2021; Osborne et al., 2022; Perez et al., 2020). The situations that shape so-called "traumatic abortions" (Osborne et al., 2022), are included in the legislation of some countries that conditionally accept VTP (Huneeus et al., 2020). This is the case in Chile (Congreso Nacional de Chile, 2017, 14 september).

Psychosocially, greater acceptance of traumatic abortion is explained by the high level of suffering involved; observing the distress of others generates empathic concern and discomfort. Whether to alleviate one's own or another's pain, observing the suffering of others leads us to develop helping behaviors (Batson et al., 2007), which here into a greater acceptance of abortion policies specific to these circumstances. Furthermore, from a gender perspective, the pursuit of abortion implies the rejection of traditional gender norms about sexuality and motherhood, and thus the defiance of feminine nature. For example, female sexuality should only be for procreation; or women have an innate instinct to care for the vulnerable (Chalmers et al., 2024; Kumer et al., 2009; Wu et al., 2023). In this regard, the literature shows that such beliefs are entreched in Chilean society (Díaz-Gutiérrez et al., 2022; Pérez et al., 2020, 2022a, 2022b). However, the search for VTP on the grounds of danger to the woman's life or fetal non-viability is not entirely or necessarily based on a rejection of gender mandates, since these are situations in which the survival of the woman or the fetus is threatened. On the other hand, the request for an abortion because of rape is subject to conditioning factors derived from rape culture, such as victim blaming or the trivialisation of sexual aggression. Nevertheless, unwanted pregnancy is the result of a loss of control over one's sexual freedom and not of sexual behaviour that is considered irresponsible according to a traditional view of gender (Casas et al., 2022). As a result, traumatic abortions are more accepted than elective abortions, where the woman's will can be interpreted as a conscious challenge to traditional gender norms and thus to the patriarchal system. (Hill et al., 2004; Forna, 2012; Osborne et al., 2022; Vivas, 2020).

In addition, women must face the cultural, community, and personal components of an abortion as well, not just the medical aspect. Donoso (2016) highlights the injustice of public policies on abortion when they are based on absolute moral principles that ignore the context of those affected. These circumstantial factors influence attitudes and may qualify the acceptance of abortions requested for traumatic reasons (Hans & Kimberly, 2014; Jozkowski et al., 2018), even if these factors are not stated as part of the reason for requesting the VTP.

The literature on the identification of circumstantial variables affecting abortion acceptance is scarce (Adamczyk et al., 2020). Partner bonding status, circumstances that led to pregnancy, family planning issues, financial conditions, the male partner's opinion, difficulties in balancing work and

family, or the woman's age are some of them (Biggs et al., 2013; Hans & Kimberly, 2014; Jozkowski et al., 2018). The present study focuses on three: the woman's socioeconomic status (SES), her marital status (MS), and her partner's agreement with VTP (PA).

Adequate SES is a relevant factor in exercising positive parenting and avoiding the development of maternal depression and chronic stress symptoms, as well as behavioral, physical, and psychological problems in children (Ayoub & Bachir, 2023; Bahk et al., 2015; Evans & Kim, 2012; Kim et al., 2019). Furthermore, the denial of abortion is a violation of distributive justice since, as women with economic resources have a greater chance of accessing a safe abortion under conditions of illegality (Donoso, 2016; Huneeus et al., 2020). For all these reasons, empathy and acceptance of abortion should be greater when the woman is at a low socioeconomic level (Mosley et al., 2020). Indeed, Socioeconomic reasons are legitimate grounds for access to legal abortion in some countries that accept abortion only in certain circumstances, such as Finland, Japan, Belize, or Taiwan (Osborne et al., 2022).

Female single parenthood has been stigmatized for not fulfilling the hegemonic model of the traditional family (Liong, 2014; Salvo & Gonzálvez, 2015). Thus, the lack of a partner relationship and/or family stability, the cultural narrative of the "ideal" mother defined among others as married, influences women's decision to become pregnant (Klann & Wong, 2020; Santelli et al., 2006). There are also higher levels of poverty and parenting difficulties (Vivas, 2020). Olhaberry and Farkas (2012) showed that maternal stress levels were elevated among poor Chilean mothers who experienced parenting without a partner. Jozkowski et al. (2018) noted that those in favor of pro-abortion policies recognize the financial burden of unplanned parenthood and the need for support in coping with parenting, such as having a partner.

Finally, we highlight the male partner´s agreement with VTP as a relevant circumstantial variable affecting opinion on abortion. Jones (2006) found that those who oppose abortion advocate greater male involvement in decision-making. Indeed, some policies require partners to be notified of their intention to have an abortion in order to access safe and legal abortion (O'Connor-Terry et al., 2019). Hans and Kimberly (2014) in a factorial survey study using vignettes showed that regardless of the woman's decision, participants felt that the male partner should have more influence on the decision if he disagreed with the VTP. Furthermore, some participants considered the partner's opinion important even when there was a risk to the woman's health or the fetus.

Objectives and hypotheses

The general objective of this study is to analyze, in a community sample of Chilean adults, the effect of the participant's ideological configuration (religious involvement and political identification with the right wing - RI/PIR) and three woman's circumstances requesting the abortion (socioeconomic status - SES, marital status – MS - and the partner's agreement - PA) on the acceptance of VTP on traumatic grounds (danger to the woman's life, fetal nonviability, and rape). Two specific objectives emerge: (1) to compare the level of acceptance of abortion on each of the three grounds when information about the woman´s circumstances is included versus when it is not included, and (2) to determine, on each ground, the influence of the participant's RI-PIR configuration and the woman's SES and MS and the PA, on the acceptance of VTP.

Based on the literature review, we hypothesize that abortion acceptability will vary when participants are given circumstantial information about the woman compared to when they are not given any additional information (Hypothesis 1a); that abortion acceptability will be higher when the woman's circumstances are more adverse (low SES and single) and her partner agrees with the VTP than when other circumstances are reported (Hypothesis 1b); and that abortion acceptance is lower when woman's circumstances are less adverse (high SES and married) and her partner disagrees with the abortion than when other circumstances are reported (Hypothesis 1c). Finally, we hypothesize that RI/PIR configuration, SES, MS, and PA will impact opinion such that acceptance of traumatic abortion will be higher when the ideological configuration is less conservative (Hypothesis 2a); when woman is from a low SES than if she is from a high SES (Hypothesis 2b); when the woman is single than if she is married (Hypothesis 2c); and when the partner agrees with abortion than if he disagrees (Hypothesis 2d). No hypotheses were formulated regarding on the interactions between RI/PIR, SES, MS, and PA.

Method

Design

To achieve Specific Objective 1, a multivariate between-subject experimental design 2 (socioeconomic level of the woman applying for VTP: high and low) x 2 (marital status of the applicant: single, married) x 2 (acceptance of the VTP by the applicant's partner: accepts, refuses) was used, including a control group (without circumstantial information). The nine groups included from 67 to 72 participants (see Table 2), with no significant differences in their sizes,

$\chi^2(8)=0.277$, $p=1.000$. The three independent variables were manipulated (see Table 1). The dependent variable was each participant's level of acceptance of VTP for each of the three grounds for traumatic abortion legalized in Chile: danger to the mother's life (Ground 1), fetal non-viability (Ground 2), and rape (Ground 3). Specific Objective 2 was achieved using the same experimental design as before with two modifications: the control group was omitted, and a fourth independent variable, not manipulated, was added, consisting of four ideological profiles derived through cluster analysis of the variables IR and IPD (see below in *Instruments* how these profiles were derived). The members of the four profiles were distributed across the nine groups in a non-significantly different way, $\chi^2(24)=8.980$, $p=.998$.

Participants

Both sample selection and data collection were implemented by Netquest, a company that provides online survey data (www.netquest.com) under ISO 20252:2019 standards. A purposive sample was obtained from an electronic database (online panel; Porter et al., 2018) of potential participants whose sociodemographic profiles were known, willing to collaborate in online studies. The inclusion criteria were Chilean nationality, age equal to or older than 18 years, acceptance of informed consent, and responding to all survey items. The exclusion criteria, all based on low response quality, were answering too quickly and not passing various security filters. To ensure intergroup equivalence, the sampling and assignment of participants to the nine groups was done seeking both to equalize the size (n) and to balance the internal distribution of the groups regarding sex, age, and socioeconomic level. In addition, care was taken to ensure that the distribution according to the geographic area in each group was comparable to that of the national population (north = 15%, center = 60%, and south = 25%; National Institute of Statistics, 2018). The sample included 613 participants (see Table 2) with a mean age of 37.14 years (SD = 15.30), close to the country's population mean of 35.8 years (Instituto Nacional de Estadística, 2018). 33.9% ($n=208$) belong to the lower level: D, disadvantaged. In Chile, most people in this category are vendors, farmers or skilled workers; and thelevel E, poverty. The majority are unskilled workers, vendors and labourers. 32.8% ($n=201$) belong to the middle level: C2, typical middle class, and C3, lower middle class. In both cases, most of them are salesmen, farmers or skilled workers. 33.3% ($n=204$) belong to the upper level: AB, upper class; C1a, affluent middle class; and C1b, emerging middle class. In all three cases, the majority are business managers or high-level professionals, although at the C1a level there is also a high representation of technicians and mid-level professionals.

Instruments

The instrument battery, previously modified according to an online pilot study ($n=67$), included the following scales, all answered in a 5-points Likert scale format ranging from 1 (strongly disagree) to 5 (strongly agree):

Ad hoc sociodemographic questionnaire

Information on gender, nationality, belonging to an indigenous group, rural or urban residence, left-right political orientation, and marital status was collected. Netquest provided data on sex, age, SES, and geographic area.

Political identification with the right

This variable, understood as the chronic prominence and subjective importance individuals give to belonging to this political orientation, was measured using the centrality component of the Multicomponent Model of In-group Identity (Leach et al., 2008). It consists of three items: "I often think about the fact that I am right-wing", "The fact that I am right-wing is an important part of my identity", and "Being right-wing is an important part of how I see myself". In this study, all three items showed acceptable discrimination power (corrected item-total correlation greater than 0.3, with no skewness or kurtosis). An exploratory factor analysis based on unweighted least squares (KMO = 0.72 and significant Barlett's sphericity) proved that these three items form a unidimensional scale that explains 80% of the variance, with factor weights equal to or greater than 0.78. The

Table 1 Combination of manipulated variables (SES, MS and PA) by the eight experimental groups and the three grounds of abortion

	Marital status, Single				Marital status, Married			
	SES, Low		SES, High		SES, Low		SES, High	
	partner agreed	partner disagree	partner agreed	partner disagree	partner agreed	partner disagree	partner agreed	partner disagree
Danger to the woman's life	EG 1	EG 3	EG 2	EG 4	EG 5	EG 7	EG 6	EG 8
Fetal non-viability	EG 8	EG 6	EG 7	EG 5	EG 4	EG 2	EG 3	EG 1
Pregnancy due to rape	EG 5	EG 7	EG 6	EG 8	EG 1	EG 3	EG 2	EG 4

SES socioeconomic status; *EG* experimental group (from 1 to 8). The control group (CG) is not included in this table

Table 2 Descriptive data of participants by group (eight experimental and one control)

Sociodemographic variables		Total (*n*=613)		Group 1 (*n*=68)		Group 2 (*n*=67)		Group 3 (*n*=68)		Group 4 (*n*=72)		Group 5 (*n*=68)		Group 6 (*n*=68)		Group 7 (*n*=67)		Group 8 (*n*=68)		Control (*n*=67)	
		n	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%
Gender	Female	298	48.6	35	51.5	32	47.8	31	45.6	33	45.8	35	51.5	31	45.6	33	49.3	35	51.5	33	49.3
	Male	315	51.4	33	48.5	35	52.2	37	54.4	39	54.2	33	48.5	37	54.4	34	50.7	33	48.5	34	50.7
Age	Between 18 and 30	310	50.6	34	50.0	34	50.7	36	52.9	37	51.4	35	51.5	32	47.1	31	46.3	37	54.4	34	50.7
	31 years or more	303	49.4	34	50.0	33	49.3	32	47.1	35	48.6	33	48.5	36	52.9	36	53.7	31	45.6	33	49.3
Socioeconomic level*	High (AB. C1a and C1b)	204	33.3	21	30.9	23	34.3	20	29.4	23	31.9	24	35.3	25	36.8	22	32.8	26	38.2	20	29.9
	Medium (C2 and C3)	201	32.8	21	30.9	21	31.4	26	38.2	22	30.6	23	33.8	20	29.4	23	34.4	20	29.4	25	37.3
	Low (D and E)	208	33.9	26	38.2	23	34.3	22	32.4	27	37.5	21	30.9	23	33.8	22	32.8	22	32.4	22	32.8
Geographic region	North	97	15.8	11	16.2	10	14.9	10	14.7	11	15.3	10	14.7	11	16.2	13	19.4	11	16.2	10	15.0
	Centre	357	58.2	42	61.8	37	55.2	38	55.9	45	62.5	42	61.8	40	58.8	38	56.7	39	57.3	36	53.7
	South	159	26.0	15	22.0	20	29.9	20	29.4	16	22.2	16	23.5	17	25.0	16	23.9	18	26.5	21	31.3
Marital status	Single	329	54.2	35	51.5	37	56.0	36	53.7	32	45.1	40	59.7	39	57.4	34	50.7	39	58.2	37	55.2
	Married	138	22.7	16	23.5	11	16.7	13	19.4	18	25.3	20	29.9	13	19.0	18	26.9	13	19.4	16	23.9
	Separated/divorced	103	17.0	13	19.1	13	19.7	13	19.4	14	19.7	5	7.5	8	11.8	14	20.9	13	19.4	10	14.9
	Widower	37	6.1	4	5.9	5	7.6	5	7.5	7	9.9	2	2.9	8	11.8	1	1.5	2	3.0	4	6.0
Residence	Urban	547	89.2	56	82.4	59	88.1	60	88.2	63	87.5	62	91.2	58	85.3	62	92.5	65	95.6	62	92.5
	Rural	66	10.8	12	17.6	8	11.9	8	11.8	9	12.5	6	8.8	10	14.7	5	7.5	3	4.4	5	7.5
Indigenous groups	None	510	83.7	53	77.9	53	79.1	62	91.2	51	70.8	58	85.3	59	86.8	55	82.1	64	94.1	55	82.1
	Mapuche	78	12.8	9	13.2	12	17.9	4	5.9	16	22.2	7	10.3	7	10.3	8	11.9	4	5.9	11	16.4
	Other	21	3.5	6	8.9	2	3.0	2	2.9	5	7.0	3	4.4	2	2.9	4	6.0	--	--	1	1.5
Political orientation	Left	140	22.8	17	25.0	15	22.4	16	23.6	14	19.5	17	25.0	15	22.0	15	22.4	20	29.4	11	16.4
	Neither left nor right-wing	403	65.8	42	61.8	44	65.7	43	63.2	52	72.2	41	60.3	45	66.2	45	67.2	42	61.8	49	73.1
	Right	70	11.4	9	13.2	8	11.9	9	13.2	6	8.3	10	14.7	8	11.8	7	10.4	6	8.8	7	10.5

-- items do not record responses; * socioeconomic level according to the *Asociación de Investigadores de Mercado y Opinión Pública de Chile*; For some variables the total number of cases differs from the group size due to missing responses

scale presented excellent internal consistency (Ω = 0.95) and evidence of construct validity by correlating positively and significantly, as expected, with the three factors of the Universal Religious Involvement Scale (see below): Intrinsic Orientation, $r = .27$; Personal Extrinsic Orientation, $r = .24$; Social Extrinsic Orientation, $r = .28$, $ps < 0.001$.

Universal religious involvement scale (I-E 12)

The Chilean adaptation of this scale for children and adolescents (Flores et al., 2020) and for university students (Carrasco, 2012), was used. In agreement with Carrasco (2012); Pérez et al. (2022b) obtained, on a community population, a trifactorial structure (intrinsic orientation -I-, six items; social extrinsic -SE-, three items; and personal extrinsic -PE-, three items) with an acceptable internal consistency. The present study also achieved adequate internal consistency using McDonald's omega coefficient (I = 0.92; SE = 0.89; PE = 0.86). The higher the score, the greater the salience of the religion social category compared to others, making it a central value in personal identity (I); the greater the social gain in terms of interpersonal relationships and status (SE); and the greater the personal benefit in protection and comfort (PE).

Vignettes on women's circumstances who decides to access VTP

This material designed specifically for this research, measures the level of agreement with traumatic abortions. For this purpose, eight vignettes were constructed, each describing a woman who decides to terminate her pregnancy for a different reason. In addition, each vignette provided information on the woman's SES, MS, and PA, representing one of the eight experimental conditions (see Table 1) formed according to the combination of the levels of the three dichotomous independent variables 2 (SES: high, low) x 2 (MS: single, married) x 2 (PA: agreement or disagreement with abortion), in each of the three grounds for abortion. For example, the vignette text for Experimental Group 1 (EG1) (with a woman of low SES, single, and whose partner accepts abortion) in Ground 1 was "Angela, a woman, single, of low socioeconomic status from the Araucanía region, recently found out that she was pregnant. During her last visit to the doctor, he told her that the pregnancy was risky for her health, so Angela is considering a voluntary abortion, and her partner agrees. Each description was followed by the question, "Do you agree with the woman in the story having a VTP?", followed by five response options (from 1 = "strongly disagree" to 5 = "strongly agree"). In addition, a ninth vignette was included, in which the participants were asked about their level of acceptance of VTP on each ground in an abstract way, i.e., without any circumstantial information about the VTP applicant.

Procedure

After signing the informed consent approved by the Scientific Ethics Committee of the Universidad de La Frontera, participants completed the battery online, which lasted an average of 15 min. The consent form does not contain any information that could influence your answers. The participants first answered the sociodemographic questionnaire, and then the "Vignettes on women's circumstances who decides to access VTP". Each group, except the control group, was exposed, in each ground, to a different combination of values of the three independent variables (see Table 1). In each group the grounds were always presented in the same order: danger to the woman's life, fetal nonviability, and pregnancy due to rape. Subsequently, participants then completed the rest of the scales included in the instruments section.

Data analysis

In a preliminary inquiry, using chi-squared tests or one-way ANOVAs, we examined whether the nine groups in the experiment were equivalent in terms of 10 sociodemographic or psychosocial variables. To achieve Specific Objective 1, Dunnett's test was used, comparing each experimental group with the control group according to the levels of acceptance of the VTP (Hypothesis 1a). In addition, to test Hypotheses 1b and 1c for each ground, we performed a planned contrast analysis of the acceptance of VTP between the experimental group hypothesized as extreme versus the set of the remaining experimental groups, excluding the control group.

Finally, to answer Specific Objective 2 and its hypotheses (2a, 2b, 2c, and 2d), a between-subject four-way ANOVA was performed for each ground with a 2 (socioeconomic level: low, high) x 2 (marital status: single, married) x 2 (partner's agreement on abortion: agree, disagree) x 4 (ideological profiles) design. The dependent variable was the acceptance of VTP. Finally, one-way ANOVAs were used to analyze simple effects on significant interactions.

Results

Preliminary analyses

Chi-squared tests showed no significant differences among the nine groups regarding gender, marital status, urban or rural residence, geographic region, belonging to indigenous

Table 3 Descriptive statistics of religious involvement and political identification with the right by ideological profile Religious involvement (IR)/Political identification with the right (PIR)

Ideological profiles	*N*	Religious involvement		Political identification with the right	
		M	SD	M	SD
Profile 1. Low religious involvement / low political identification with the right	162	14.45	3.29	3.29	0.56
Profile 2. Low religious involvement / high political identification with the right	106	17.02	4.58	8.27	1.74
Profile 3. High religious involvement / low political identification with the right	154	33.59	7.45	3.52	0.91
Profile 4. High religious involvement / high political identification with the right	191	37.38	6.72	9.01	1.89

groups, and left-right political orientation. Likewise, one-way ANOVAs showed that the nine groups did not differ significantly according to age, socioeconomic level, religious involvement, or political identification with the right. These results support the equivalence of the groups on these 10 sociodemographic and psychosocial variables.

To construct an indicator of ideological configuration, the scores for political identification with the right and religious involvement were subjected to a two-stage cluster analysis, retaining four subgroups (ideological profiles) of participants. Table 3 describes these clusters according to whether the group mean was above or below the total sample mean on religious involvement ($M = 26.85$) and political identification with the right ($M = 5.99$). These four clusters can be ordered from a lower (Profile 1) to a higher (Profile 4) level of conservatism. When comparing the intermediate positions, Profile 2 is relatively less conservative than Profile 3 since, in Chile, there are right-wing sectors that are liberal on sexual and reproductive rights but conservative on other issues, sectors that would make up Profile 2.

Effects of circumstantial information on the acceptance of VTP

Receiving versus not receiving information

Table 4 shows the means and standard deviations of VTP acceptance levels obtained in each experimental condition and for each ground. For Ground 1, two experimental groups differed significantly from the control group: EG4, $t\,(604) = -3.24$, $p = .004$, $d = 0.26$, and EG8, $t\,(604) = -3.38$, $p = .003$, $d = 0.27$. Specifically, in the case of the woman's life being at risk, both single pregnant women of high SES and without partner agreement (GE4) and married women of high SES and without partner agreement (EG8) had lower mean acceptance of VTP than the mean shown by those who did not receive circumstantial information (control group - CG).

Regarding Ground 2, EG1, $t\,(604) = -3.12$, $p = .006$, $d = 0.254$, and EG6, $t(604) = -2.59$, $p = .030$, $d = 0.21$, showed significantly lower means than the control group. Thus, when VTP is linked to fetal non-viability, both married pregnant women with high SES and no partner agreement (EG1) and unmarried pregnant women with low SES and no partner agreement (EG6) have lower acceptance of VTP.

For Ground 3, neither experimental group showed significant differences compared to the control group. Thus, providing contextual information does not seem to affect the acceptance of VTP when the pregnancy is the result of rape.

This set of results provides partial support for Hypothesis 1a.

Table 4 Descriptive statistics of the level of acceptance of induced abortion according to experimental conditions and causes of abortion

Grounds		Experimental Conditions								
		Marital status, Single				Marital status, Married				
		SES, Low		SES, High		SES, Low		SES, High		
		partner agreed	partner disagree	partner agreed	partner disagree	partner agreed	partner disagree	partner agreed	partner disagree	
1	Group	EG1	EG3	EG2	EG4	EG5	EG7	EG6	EG8	CG
	M	3.94	3.82	4.09	3.62	4.01	4.10	3.91	3.58	4.26
	SD	1.11	1.32	1.06	1.20	1.16	1.04	1.25	1.23	1.05
2	Group	EG8	EG6	EG7	EG5	EG4	EG2	EG3	EG1	GC
	M	4.13	3.85	4.37	3.95	4.06	4.17	4.05	3.75	4.35
	SD	1.17	1.31	0.98	1.19	1.11	1.08	1.06	1.23	0.96
3	Group	EG5	EG7	EG6	EG8	EG1	EG3	EG2	EG4	GC
	M	4.23	4.32	4.22	4.118	4.14	4.30	4.31	3.97	4.29
	SD	1.19	1.09	1.15	1.11	1.11	1.06	1.11	1.19	1.14

SES socioeconomic status; Ground 1 = danger to the woman's life; Ground 2 = fetal non-viability; Ground 3 = pregnancy due to rape; *EG* experimental group (from 1 to 8); *CG* control group; Range (all groups) = 1–5

Extreme circumstantial information

Rejecting Hypothesis 1b, on none of the grounds did the average acceptance of VTP generated by the single, low SES, and partner-agreement combination differ significantly from the average produced by the set of the other seven combinations. In contrast, confirming Hypothesis 1c, the average acceptance of VTP provided by the married, high SES, and no partner agreement combination was significantly lower than the average delivered by the set of the other seven combinations, for each of the three grounds. For Ground 1, the averages of EG8 and the remaining seven EGs were, respectively, 3.588 (SD=1.237) and 3.92 (SD=1.77), $t(604) = -2.25$, p=.01, d=0.18. For Ground 2, the averages of EG1 and the other EGs were 3.75 (SD=1.23) and 4.08 (SD=1.14), $t(604) = -2.31$, p=.01, d=0.18. Finally, for Ground 3, the averages of EG4 and the remaining EGs were 3.97 (SD=1.19) and 4.239 (SD=1.11), $t(604) = -1.86$, p=.03, d=0.15.

Effects of the participant's ideological profile and the woman's circumstances

For Ground 1 (women's life at risk), the ANOVA revealed a significant main effect of ideological profiles, $F(3.51)=29.89$, $p<.001$, $\eta^2_p=0.14$. This effect adopted a significant downward linear trend F_{linear} (1, 542)=87.18, $p<.001$, $\eta^2 p = 0.139$, i.e., the levels of acceptance of VTP linearly decreased as the conservatism of the profiles increased: Profile 1 (-PIR/-RI: M=4.40, SD=1.05), Profile 2 (+PIR/-RI: M=4.20, SD=0.88), Profile 3 (-PIR/+RI: M=3.87, SD=1.17), and Profile 4 (+PIR/+RI: M=3.27, SD=1.18). There was also, for Ground 1, a significant main effect of partner agreement, $F(1, 514)=4.28$, p=.039, $\eta^2_p=0.008$; i.e., when the partner agreed there was greater acceptance of VTP (M=3.89, SD=1.15) than when the partner disagreed (M=3.78, SD=1.21).

For Ground 2 (fetal non-viability), the ANOVA indicated two significant main effects and two significant double interactive effects. Specifically, a main effect of ideological profiles emerged, $F(3, 514)=29.59$, $p<.001$, $\eta^2_p=0.147$, explainable by a significant downward linear trend, $F_{linear}(1, 542)=87.48$, $p<.001$, $\eta^2_p=0.140$, very similar to that observed for Ground 1: Profile 1 (M=4.59, SD=0.86), Profile 2 (M=4.35, SD=0.86), Profile 3 (M=3.91, SD=1.23), and Profile 4 (M=3.51, SD=1.20). However, as shown below, this main effect of ideological profiles was mediated by the woman's MS. The other main effect was of partner agreement, $F(1, 514)=6–51$, p=.011, $\eta^2_p=0.013$, with greater acceptance of the VTP when the partner agreed (M=4.15, SD=1.08) than when he disagreed (M=3.93, SD=1.21).

The two double interactions involved MS: in one case, with SES, $F(1, 514)=4.00$, $p<.046$, $\eta^2_p=0.008$, and in the other, with ideological profiles, $F(3, 514)=2.65$, p=.048, $\eta^2_p=0.015$. A simple effect analysis showed that in the first interaction (see Fig. 1), when the pregnant woman belonged to the high SES, being married generated a significantly lower acceptance of VTP (M=3.90, SD=1.16) than when she was single (M=4.16, SD=1.10), $F(1, 542)=3.39$, p=.050, $\eta^2=0.006$. When the pregnant woman was of low SES, there were no significant differences by marital status. In the second double interaction, only in the least conservative participants (Profile 1: -PIR/-RI) did marital status affect the acceptance of VTP; specifically, when the pregnant woman was single such acceptance was significantly

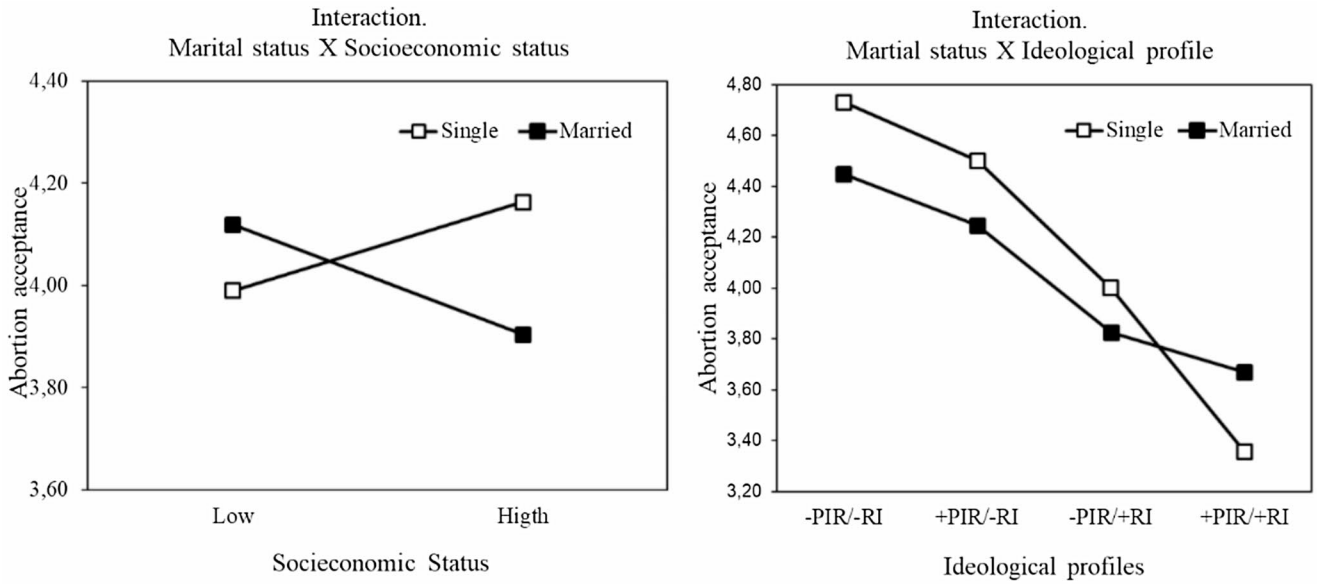

Fig. 1 Between-subject ANOVA interaction for the ground 2 (fetal non-viability)

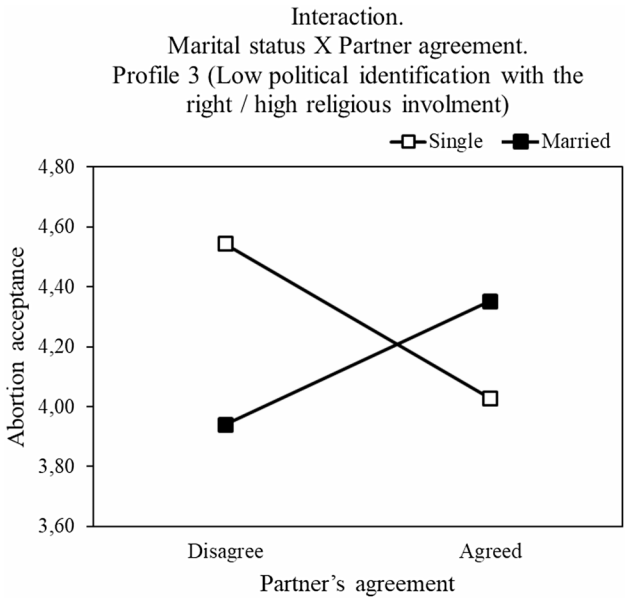

Fig. 2 Between-subject ANOVA interaction for the ground 3 (pregnancy due to rape)

higher (M=4.73, SD=0.70) than when she was married (M=4.44, SD=0.99), $F(1, 142)=3.82$, $p=.005$, $\eta^2=0.026$ (see Fig. 1). In the other profiles, no significant differences were detected according to marital status, although in the most conservative profile (Profile 4: +PIR/+RI), this comparison reached a level close to significance ($p=.09$).

On Ground 3 (rape), there was a significant main effect of profiles, $F(3, 514)=27.39$, $p<.001$, $\eta^2_p=0.138$, noting the same significant downward linear trend, $F_{linear}(1, 542)=76.92$, $p<.001$, $\eta^2_p=0.124$, as indicated for Grounds 1 and 2. The levels of VTP acceptance in the profiles were: Profile 1 (M=4.69, SD=0.87), Profile 2 (M=4.41, SD=0.88), Profile 3 (M=4.21, SD=1.08), and Profile 4 (M=3.65, SD=1.24). However, this main effect was relativized by a significant three-way interaction that involved marital status, partner agreement and ideological profiles, $F(3, 514)=2.82$, $p=.038$, $\eta^2_p=0.016$. It was found that only in the profile in which RI prevailed over PIR (i.e., Profile 3 -PIR/+RI) did a significant marital status x partner agreement interaction occur, $F(1, 135)=6.56$, $p=.011$, $\eta^2_p=0.046$ (see Fig. 2). Simple effect analyses of the latter interaction in Profile 3 indicated that, when the partner disagree, being single generated significantly greater acceptance of the VTP (M=4.54, SD=0.70) than being married (M=3.94, SD=1.25), $F(1, 67)=6.10$, $p=.016$, $\eta^2_p=0.083$. When the partner agreed, the marital status of the pregnant woman did not affect the acceptance of VTP.

Discussion

Opinions on VTP are complex and vary according to multiple variables. The influence of the ideological profile of those expressing an opinion or the reason women give for seeking an abortion on the acceptability of VTP has been studied extensively. In contrast, the impact of women's circumstantial has received less attention, although it is relevant to a deeper understanding of VTP acceptance. In this study, we sought to analyze, in a community sample of Chilean adults, how personal factors of a woman requesting the VTP and the participants´ ideological profile influence the acceptance of VTP for traumatic reasons (danger to the woman's life, fetal non-viability, and rape).

With regard to specific objective 1, the results show that the acceptance of VTP decreased when circumstantial information about the woman was provided compared to when it was not, but only in cases of risk to the woman's life and fetal non-viability. These findings partially support hypothesis 1a and contribute to the evidence for the existence of situationists with regard to VTP, i.e., segments of the population that do not have a polarised and absolute opinion on abortion, but have different opinions depending on the abortion situation and the circumstances of the woman (Jelen & Wilcox, 2003; Osborne et al., 2022; Rye & Underhill, 2020; Shields, 2011), and which Rye and Underhill (2020) identify as the majority in contrast to polarised anti-choice and pro-choice groups.

Furthermore, the analyses refute hypothesis 1b and confirm hypothesis 1c. Although there is literature and legislation on abortion that posits greater acceptance of abortion when the woman is in precarious circumstances (Huneeus et al., 2020; Jozkowski et al., 2018; Norris et al., 2011; Osborne et al., 2022), including of context about the woman only makes a difference when circumstances are less adverse (high SES, married) and the couple disagrees about VTP. This raises the question of whether the introduction of circumstantial challenges to inherently traumatic events leads to increased empathy and, thus, greater acceptance of VTP (Batson et al., 2007). As a possible explanation, we propose a belief in a just world (Lerner & Miller, 1978), which attributes what happens to us to personal choices. Thus, the adversities experienced are perceived as deserved and fair.

On the other hand, sufficient SES favors the exercise of positive parenting and reduces depressive symptoms, maternal stress, and disorders in children (Ayoub & Bachir, 2023; Bahk et al., 2015; Evans & Kim, 2012; Hilmiana & Alviani, 2023; Kim et al., 2019). In addition, having a solid relationship and a committed father figure are important considerations when considering motherhood (Finer et al., 2005). The guarantee of these living conditions shows a penalizing effect in the description of the woman, such as

a high SES, married, and with a partner who disagrees with VTP. That is, the participants disapprove of VTP more when the woman's conditions predict a favorable scenario for parenting (Hans & Kimberly, 2014; Hess & Rueb, 2005; Jelen & Wilcox, 2003), even when she faces a traumatic situation (danger to the woman's life, fetal non-viability, or rape).

Specific objective 2 examined the impact of the participant's ideological profile and the woman's SES, MS and PA on the acceptance of VTP on the three grounds. The ideological profiles show a linear influence for each ground, confirming our hypothesis 2a: the greater the conservatism, the lower the acceptance. This is due to the fact that ideological conservatives defend the beginning of life at fertilization, equate VTP with murder (Crawford et al., 2021; Pérez et al., 2020), and interpret abortion as a disruptive behavior that challenges traditional expectations (Adair et al., 2024; Chalmers et al., 2024; Kumar et al., 2009; Ramos, 2016; Wu et al., 2023). Moreover, the profiles explain more variance in VTP acceptance than the other variables studied, confirming that ideological conservatism is a relevant variable in explaining VTP acceptance (Adamczyk et al., 2020; Alveal-Álamos et al., 2022; Bahr & Marcos, 2003; Cutler et al., 2021; Hout et al., 2022; Jozkowski et al., 2018; Mosley et al., 2020; Osborne et al., 2022; Patev et al., 2019; Pérez et al., 2020, 2022a, 2022b), although this does not negate the impact of the woman's circumstances.

Similarly, we reject Hypotheses 2b and 2c, as we found no differences between low and high SES and between being single and married (MS) in the level of acceptance of VTP. However, we found three moderating effects which will be explained below and which qualify the interpretation of the results that rejected hypothesis 1b: under some conditions, a greater acceptance of abortion in cases of fetal non-viability and rape is possible when the woman is unmarried.

First, we note that none of these moderating effects occurred in the case of life-threatening danger to the woman. This traumatic abortion is the most socially accepted (Osborne et al., 2022). In Chile, it was legalized as a therapeutic abortion between 1931 and 1989 (Maira et al., 2019), and subsequently continued to be practiced despite its prohibition (Alveal-Álamos et al., 2022). On the other hand, abortions requested due to fetal non-viability or rape are still controversial due, for example, due to doubts about the legitimacy of the medical situations that establish fetal non-viability or distrust of the testimony of the raped woman, which does not correspond to the perfect victim profile (Alveal-Álamos et al., 2022; Casas et al., 2022; Pérez et al., 2020). Thus, the absence of moderators, which does not occur in the other two cases, seems to be explained by the generalized social tolerance of abortion on the grounds that the woman's life is in danger.

The acceptance of abortion due to fetal non-viability is higher among less conservative participants when the woman is unmarried, possibly due to their lower inclination towards VTP policies based on moral criteria (Donoso, 2016; Hout et al., 2022). In contrast, the acceptance of VTP due to fetal non-viability is higher for the whole sample when the woman is single and has a high SES. This result leads us to consider the possibility of selective empathic activation among women of high SES. Once again, we revisit the belief in a just world (Lerner & Miller, 1978) as an explanation. Single and low SES women who defy gender mandates by requesting VTP in the case of fetal non-viability would get what they deserve, so they would not impact participants' acceptance of VTP. In contrast, single but high SES women belong to a segment favored by personal dispositions that make them worthy of greater empathy and compassion (Lane, 2001) in the face of the potential consequences of female single parenthood and its stigma: loneliness, abandonment, dishonor and poverty (Vivas, 2020).

Third, in the case of rape, the relationship between MS and acceptance of VTP was moderated by the interaction between PA and profiles: being single increases acceptance of VTP for rape when the partner disagrees with abortion for profile 3 (religious participants, but with low-moderate identification with the right). Here, we found several points that require careful analysis. It must be taken into account that Chile has a conservative identity tradition, which has a strong influence on the formulation of public policies related to the family (Kozlowska et al., 2016). For example, Chile was the last country in Latin America to legalize divorce in 2004, and civil unions were not legalized until 2015 (Jelin, 2014; Troncoso & Stutzin, 2019). In this sociocultural context, it is to be expected that people with high levels of religious involvement would be very aware of the potential consequences of the stigma of single motherhood and would perceive it as an unfair burden in cases of rape. This is because the pregnancy is not the result of a transgression of traditional norms about sexuality (Kumar et al., 2009), nor is it the result of "female irresponsibility" (Hill et al., 2004). At the same time, Profile 3 participants may have fewer absolute normative and moral restrictions on abortion due to their low-moderate political identification with the right. Consequently, despite their high religious commitment, a situationist view on abortion is to be expected (Hill et al., 2004; Rye & Underhill, 2020). Finally, in this case, the partner's opposition to the abortion is interpreted as adversity. As a non-parent, his opinion may be perceived as coercive rather than a legitimate expression of parenthood.

Finally, we observed that hypothesis 2d is partially accepted, as there is greater acceptance of VTP when the partner agrees with abortion for grounds 1 and 2, but

not ground 3. Thus, the partner's opinion only becomes important for the participants when the partner is also the father. From a gender perspective, this finding makes sense because of the historical infantilization of women as a form of domination: women would not have sufficient capacity to decide wisely or appropriately and would need others - family members, partners, or professionals - to do so correctly (Deaux & Kite, 1993). This implies the questioning of a woman's self-determination over her own body, even when her life is in danger (Hans & Kimberly, 2014). Indeed, partner consent to abortion has been shown to reduce the social stigma associated with seeking an abortion (Altshuler et al., 2016; Nagy & Rigó, 2021; Vandamme et al., 2017).

Implications

The value of this study lies in the fact that there is little previous scientific literature that has examined the influence of a woman's circumstances on her acceptance of abortion. With this work we have been able to show that a woman's circumstances can shape people's opinions and that this influence is not cancelled out by ideological profile. Surveys that use a single or several but overly broad questions that force identification with a polar position (anti-choice versus pro-choice) simplify a complex phenomenon by excluding possible intermediate opinions (Hans & Kimberly, 2014; Jozkowski et al., 2018; Osborne et al., 2022; Rye & Underhill, 2020; Shields, 2011), and render invisible the "situational majority" identified by Rye and Underhill (2020). According to Donoso (2016), the results presented here challenge the design of public policies on abortion based on absolute and moral criteria, as they do not reflect the situational sensitivity of the population: if the woman's circumstances change, the acceptance of VTP may change. In terms of interpersonal dynamics, and taking into account the prejudices of health professionals and the general public towards women seeking VTP (Alveal-Álamos et al., 2022; Casas et al., 2022; Montero et al., 2022; Pérez et al., 2020), this study shows that women in the same pregnancy situation may be judged differently depending on their circumstances. Finally, we should not overlook the coercive implications of given weight to the partner's opinion in a decision that directly affects the woman's body. This leads us to wonder about the extent of the usurpation of women's reproductive rights, considering this usurpation as coercive violence in intimate relationships (Chibber et al., 2014; Moore et al., 2010).

Limitations and future research

There are several limitations to this study. First, the instruments were completed online. Thus, the sample included only participants with internet access and sufficient digital literacy, which is likely to under-represent segments with less digital connectivity and/or lower resources or education levels. Second, the use of vignettes may not have accurately captured opinions in a real-word context. Third, results may vary depending on the inclusion of other variables, for example, such as the woman's gestational age (Crawford et al., 2021), the participants' childbearing experience (Clarke et al., 2023), or psychological variables, such as cognitive complexity, empathy for the woman versus the fetus or embryo, or locus of control (Hill et al., 2004; Cheng et al., 2024). Future studies should consider including participants with less or no access to the internet, more challenging vignettes that present more realistic scenarios, and new variables that may influence VTP acceptability. In addition, it would be interesting to look more closely at the role that the community assigns to the male partner in the decision about VTP.

Conclusions

This study highlights the importance of the circumstances of the woman requesting the abortion in the social acceptance of traumatic abortions. While the effect to greater acceptance is limited and restricted to certain situations and ideological profiles, the effects of less acceptance are found when the woman is in a less adverse situation (high SES and married) and has a partner who disagrees with abortion. The partner's opinion emerges as the most important circumstantial variable among those studied. However, its effect is limited to cases where the woman's life is in danger and the fetus is not viable. Thus, the participants question the acceptability of abortion if a potential biological parent opposes the the woman's decision, even if she is at risk of dying.

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Data availability The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request and after relevant ethical approval.

Declarations

Informed consent The studies involving human participants were reviewed and approved by Comité Ético Científico de la Universidad de

La Frontera. The patients/participants provided their written informed consent to participate in this study.

Conflicts of interest The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Research involving human participants and/or animals This research required the voluntary, anonymous and confidential participation of human subjects. This study did not endanger the physical or mental safety of any person.

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