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Contested Authorities over Life Politics

Religious-Secular Tensions in Abortion Debates in Germany, Turkey, and Israel

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Abstract

Conflicts between religious and secular discourses, norms, actors, and institutions are differently shaped across the Middle East and Europe in accordance with their specific socio-legal contexts. While current scholarship has often studied this tension by focusing on religious rituals, the authors shed new light on the way religion and secularism shape the everyday making of life politics by way of a three-country comparison of abortion debates in Germany, Turkey, and Israel. Through face-to-face interviews with stakeholders involved in interpreting secular abortion law, the authors analyze how social actors in three predominantly monotheistic countries and socio-political

circumstances construe secular abortion laws differently in practice. The authors show that, contrary to common belief, contestations over abortion do not neatly divide between religious and secular authority, but they create gray zones of negotiation. Articulated through specific historical, political, and religious circumstances, such gray zones involve everyday decisions on human authority in determining abortion practices and differing understandings of women's bodies.

Keywords

secular – religion – authority – abortion – life politics

1 Introduction

How do nation-states negotiate between secular and religious authorities when implementing laws that regulate life and death, such as abortion laws? In order to answer this question, we compare three countries with secular abortion laws and different religious contexts to understand the interaction between legal and religious reasoning in each case. We particularly focus on the ways in which the secular law moves through (regulated) religious interpretation to create abortion practice. This is a salient issue to show that secular law is “authoritative but incomplete” (Wilson 2013, 8). Secular law’s “incompleteness” create spaces for religious authorities to frame their claims within the specific socio-political context of the country, especially when it comes to regulating life politics, such as abortion, reproductive technologies and euthanasia among others. Our approach shows that key stakeholders (medical staff, abortion consultants, religious clergy and other country-specific social actors) do not merely implement laws; they rather negotiate them within everyday practice, thereby affecting legal outcomes and public opinion as well as developing country-specific social structures in each country.

We look at three socio-legal contexts by comparing three countries with secular abortion laws and different religious contexts: Germany, Turkey, and Israel. Our country cases have secular laws towards abortion, which permits abortion until twelve weeks in voluntary abortion cases. In addition, approximately more than 90 percent of voluntary abortions are performed by public or private hospitals in each country. Although secular law and modern medical practices are in place in each country, the regulation of abortion is highly dissimilar in everyday practice. This is due to a) differences between nation-states; b) differences within nation-states. The first one shows how the formal

regulation is different in each country, and the second is about discretion and the different institutions that are relevant to implementation or operationalization of abortion. In our country cases, we show the different historical and contextual development of abortion law and then, drawing from our interviews in each country, we show how social actors and institutions construe abortion regulations differently within the unique context of their country's configuration of religion and secularity.

We chose Germany, Turkey and Israel because of their complicated and strong secular-religious tensions. Facing a rather restrictive legal situation, Germany's abortion counselors favor women's self-determination over deeply ingrained demands by the Christian Church in the abortion law and its current debate, while Turkish government authorities *de facto* banned abortion in the name of current Turkish-Islamic politics. The Israeli case stands in-between both country cases, giving room for secular-religious negotiations while favoring a pro-natalist policy. Each country shows how secular-religious tensions play a significant role in affecting abortion regulation.

We conducted thirty face-to-face interviews in Germany, Turkey, and Israel during 2016 and 2017 with medical staff, abortion consultants, religious authorities, and civil society organizations. Most interviews were conducted in the language of the country, and lasted 45 to 90 minutes. We show that in each country, these social actors strongly interpret abortion law while simultaneously negotiating the tension between secular law and their country's specific religious tradition within the current socio-political context (also see Sanger 2016 on power dynamics in interpreting the abortion law). These distinctions become apparent only through a comparative analysis of abortion practice and regulation across these three countries.

Our analytical framework brings together interdisciplinary concepts and methods from sociology, anthropology and religious studies. Drawing on Didier Fassin's concept of *life politics* (2009), by analyzing abortion as a system of everyday practices we reveal the ways in which social actors' moral reasoning and ethical evaluation – their life politics – give specific value and meaning to human life and thus affect the regulation of abortion at the level of practice. Here, we uniquely bring together two conceptual frameworks: Talal Asad's conception of the terms *religious* and *secular* as fluid and overlapping binaries (Asad 2003) and Didier Fassin's notion of *life politics* as the value and meaning given to human life. We argue that abortion practices in these three secular states are shaped by the discursive power relations between different social actors, such as medical staff, abortion consultants and religious authorities. By interviewing ten social actors who influence abortion practice in each country, we are able to demonstrate that, as instances of the struggle over reproductive politics, these discursive power relations on abortion

are negotiated at the everyday level within an ever-changing field of secular-religious tension.

In the following, we start with a brief background to secular-religious tensions in life politics, specifically in abortion practices, before discussing our methodology. Next, we turn first to Germany and then to Turkey and to Israel to give an overview of legal and socio-political context to abortion. In each section, we analyze how political actors in each country define abortion, focusing both on actions of established institutions and interventions from non-governmental organizations. We end our analysis of each country's approach to abortion by outlining how secular-religious tensions lead to different practices of secular law in each country.

1.1 *Secular-Religious Tensions, Life Politics and Abortion*

While designing this research and writing its results, we have been inspired by sociologist Myra Marx Ferree and her colleagues' comparative analysis on abortion (Ferree 2002), Didier Fassin's concept of life politics and anthropologist Talal Assad's conceptualization of secular and religious tensions. Focusing their comparative analysis on the political conflict over abortion in the United States and Germany, Myra Marx Ferree and her colleagues show how journalists, civil society actors, and political party-members battle over social values and the constitutional grounds upon which abortion debates take place. Using the case of abortion, Ferree et al. make explicit the discursive power relations that pertain between various actors in Germany and the US. Abortion is stretched between religious and secular poles and therefore belongs to both realms and to none simultaneously. This push-and-pull tension makes abortion an interesting case for multilevel analysis.

Our analysis is multilevel because of its micro-level approach by carrying out an everyday-analysis of how social actors negotiate abortion law, and its macro-level approach within which we delineate national-level law and discourse. Drawing from interviews with social actors, we show how contested authorities negotiate abortion practices on an everyday level in hospitals, abortion consultation meetings, non-governmental organizations, telephone hotlines and religious clergy's offices. On a national level and discourse, we also show that religion, relegated to the private realm in secular discourses in Germany, is on the contrary legitimately public in countries such as Israel and Turkey, which are under socio-political pressure due to "demographic anxiety" (Steinfeld 2015) and ethno-religious conflicts (Turkish government with Kurdish minority within its borders and Israeli state authorities with Palestinians). Abortion debates in these countries reveal how fluid the religious-secular binaries are within social actors' interpretations of abortion law, and how they are held in tension due to the conflictual socio-political context in each country.

The non-binary tension between religion and secularity has been quantitatively analyzed in the context of science in the US. In their 2015 article, Timothy O'Brien and Shiri Noy demonstrate that political divisions related to science and religion have their roots in both cultural and epistemological differences, but that they do not map onto simplistic models of scientific versus religious ways of interpreting the world. While Jose Casanova argues that the role of religion in society has been transformed (2011) and Jürgen Habermas posits a post-secular society in which religion is incorporated into secularism (2008), many scholars have begun to interrogate the complexity of such boundaries, asking whether specific nodal cases such as medicine should be viewed as exclusively secular, or whether they can also accommodate and incorporate religion (Lavi 2017). Departing from this normative binary of religion and secularity, anthropologist Talal Asad defines the secular as a concept that "brings together certain behaviors, knowledges, and sensibilities in modern life" (2003, 25). Such an approach can be observed in Jotkowitz, Agbaria and Glick's interpretation of medical ethics in Israel (2017). The medical ethicists argue that Israel has a unique interpretation of secular law in negotiation with halacha (Jewish religious law), which accommodates Jewish and Muslim traditions as well as human rights. We argue that Israel is not unique; other countries such as Germany and Turkey, two countries with secular abortion laws, interpret the law from the perspective of socio-political context as well as their religious traditions. Such interpretations can be felt and seen in everyday practices. In countries such as Germany, Turkey, and Israel, secular law and deeply ingrained religious practices coexist at the everyday level in tension with one another.

While Germany, Turkey, and Israel are ostensibly secular states with monotheistic religious traditions, each country has its own understanding of the relationship between secularity, religion, and state law. We have chosen these three countries because of the religious effects on the otherwise secular regulation of abortion. We are not saying these countries are similar because they all have secular abortion law. Instead, we bring in a nuanced approach. In none of these countries can one simply contrast the secular state with religious authority, because the particular variety of secularism in each country was shaped not only by social, historical, and political forces, but also by the nature of the religion itself. Judaism, Islam, and Christianity all have their particular approach to questions concerning women's bodies, family law, and life. Hence, our three-way comparison reveals much that is new in understanding the contest over authority in the case of abortion.

1.2 *The Socio-Legal Context in Germany, Israel and Turkey*

Germany, Israel and Turkey have secular abortion laws where voluntary abortion is principally permitted up to twelve weeks. In Germany, *abortion on demand* is regulated in the Criminal Code and is hence illegal, although not punishable if certain requirements are met within the first twelve weeks of a pregnancy. Germany's specificity is that religious authorities on abortion practice (in this study, abortion consultants working in social welfare institutions which are connected to the Church or to religiously and politically independent NGOs, such as *Diakonie* for the Protestant Church, *Caritas* for the Catholic Church, or non-denominational *Pro Familia*) prioritize secular discourses on women's authority over their own bodies. This adoption of a non-adversarial approach to abortion politics *in practice* serves to soften the tension between the religious and the secular, in a climate in which fundamentalist Christians (such as the so called *Lebensschützer*, protectors of life) gain strength in public discourse. Law scholar Noya Rimalt argues that the constitutional resolution of the abortion issue in Germany balanced women's needs and rights and the rights of the fetus (2017). Therefore, it is not surprising that the abortion consultants whom we interviewed stick to this "balancing act" rather than imposing their own religious denominations. Life politics in Germany reveal itself in rural-urban and Catholic-Evangelical differences, as our analysis will show. In Israel, we see how pro-natalist religious authorities seek to strictly regulate abortion for the majority Jewish population from within medical institutions and beyond, according to Jewish halachic law. As such, life politics in Israel reveal a constant negotiation of abortion law between medical and religious authorities, and social workers in the abortion committees or social activists representing civil society organizations (Ivry 2013; Steinfeld 2015). In Turkey, abortion is *de facto* difficult to obtain, although it is legal. Religious authorities seek to maintain existing secular abortion laws so as to avoid politicizing the abortion debate, preferring instead to use neoliberal incentives and informal religious systems (*fatwa*) in abortion prevention. While Turkey may be on its way to banning abortion outright, Germany and Israel take more lenient positions which nevertheless differ. Israel stands out in its liberal treatment of late abortions, in part based on Jewish halachic law which rules that the fetus becomes a person only at birth (Birenbaum-Carmeli and Carmeli 2010; Rimon-Zarfaty et al. 2011). Despite this, Israel set a limit on the practice of late abortions in 2006, bringing it closer to the European and American medical standard of viability. Moreover, pregnancy termination committees in Israel must approve each abortion, leading some women to seek abortion options outside the legal route via private medical

practices. Similarly, in Turkey, due to the *de facto* abortion ban, a new form of mobility known as “abortion tourism” is creating an offshore economy in Northern Cyprus.

2 Methods

To understand how religious and secular authority negotiate abortion regulation in everyday practice, we conducted a discourse analysis of abortion law in each of the three countries. We then turned to social actors in abortion decision-making – medical staff, abortion consultants, representatives from civil society organizations, and religious authorities – so as to understand how such authority functions at the everyday level. In each country, we conducted ten face-to-face, semi-structured interviews with these social actors who influence, interpret or intervene with abortion in everyday practice (see Appendix). We chose these key stakeholders as interviewees due to their involvement in the abortion practice as medical staff in secular or religious hospitals; their involvement as secular or religious civil society organizations’ representatives; their roles as abortion consultants in secular or religious institutions and their public statements in news outlets on abortion. Due to the different structuring of abortion services in each country, the interviewees’ profiles differ slightly. We analyzed transcribed interviews by constantly being in dialogue with the three theoretical frameworks above (Ferree 2002; Fassin 2009; and Asad 2003). We first deductively identified the main themes in the interviews, focusing on secular-religious tensions, life politics and references to abortion law. Then we inductively re-analyzed the interviews to pay attention to the themes that the interviewees brought up, such as chronological details or country-specific practices.

2.1 *Germany: Secular Practice at the Intersection of Christian Fundamentalism, Politics and the Medical*

Abortions are illegal in Germany, although they are not subject to prosecution if certain requirements are met within the first 12 weeks of a pregnancy: confirmation of a medical (bodily or mental impairment) or criminal indication (rape), as well as a mandatory abortion counseling (termed pregnancy conflict counseling, *Schwangerschaftskonfliktberatung*) which is ambivalently legally defined to be open and unbiased *as well as* serving the protection of the “unborn life” (Section 218 and 219 of the Criminal Code). Consequently, the stigma of abortions being a criminal offence prevails and structures abortion debates and practices in Germany. Legislation criminalizes patients and

doctors, resulting in tangible ramifications in terms of accessing abortions and mandatory abortion counseling in rural and/or Catholic areas. In this situation, the ostensibly secular abortion law is subject to both secular and religious interpretation, especially in abortion counseling services. Everyday life politics of abortion counseling illustrates how abortion being treated as an injustice with impunity leads to an unclear status – often referred to in our interviews as a “temporary solution” or “compromise”. As we will show, this initial situation makes it possible for religious, secular and in-between social actors to influence and remake German abortion debates.

A recent controversy illustrates this ambivalent climate in the German abortion debate. In November 2017, German gynecologist Kristina Hänel has been sentenced a 6000€ fine for informing about abortion services on her website. The basis for her charge is section 219a of the Criminal Code, regulating “advertising for termination of pregnancy”. Section 219a states that “whosoever publicly”, for “material gain”, or in a “grossly inappropriate manner, offers, announces or commends” their own or others’ abortion services “shall be liable to imprisonment not exceeding two years or a fine” (Section 219a Criminal Code). In its 2017 decision, the district court of Gießen interpreted factual information about abortion services as a way of “advertising”. Pro-life activists (such as the fundamentalist Christian group *Lebensschützer*, see below) increasingly use section 219a to intimidate gynecologists or clinics informing about their services by pressing charges on basis of section 219a. This creates a paradoxical situation, in which abortions can *de jure* be conducted (within the scope of Section 218 of the Criminal Code), but abortion practitioners are hindered to legally inform about their services, which in turn leads to difficulties for women seeking a clinic or gynecologist to terminate their pregnancy (Hecht 2018).

Such ambivalence evolving around abortion legislation has a history in Germany. Throughout the law’s historical and political development, the protections established in the German Basic Law on the right to human life and women’s rights to self-determination over their own bodies has led to tension between the religious and the secular. After World War II, West Germany adopted an abortion law dating back to 1870, which made abortion unlawful under section 218 of the Criminal Code. Abortion became a central, politically mobilizing issue in the 1970s when feminist and other groups demanded its repeal (Kamenitsa 2001). In 1975, a federal constitutional court ruling declared that the constitutional protections to human life enshrined in the Basic Law applied equally to the protection of “unborn life.” We interpret this protection as it was prioritizing “unborn life” over a woman’s right to self-determination. Minkenberg suggests that in using this argument, “the court

referred to a passage in the German constitution which can be traced back to the German churches' prominent role in drafting part of the Basic Law as far as their interests were concerned in 1948-49" (Minkenbergh 2003, 211). Hence, the role of the church was already present in the 1975 ruling on abortion (Rimalt 2017).¹

Abortion became the "most emotional issue" of reunification in Germany (Jarausch 1994, 172). The German newspaper *Der Spiegel* wrote on May 14, 1990 that "the fight over abortion is dividing the nation just before its reunification" (*Der Spiegel* 1990). A compromise between Western and Eastern abortion regimes had to be reached due to the rather liberal practice of abortion in the former German Democratic Republic (GDR), which was in stark contrast to the West German status quo. In 1972, the GDR had adopted a law permitting abortion on demand within the first trimester of pregnancy (Kommers 1994). The ensuing debate ended with the current German federal law, enacted several years after Germany's reunification in 1995, which ruled abortion unlawful (Section 218, Criminal Code), but permitted its request given certain conditions, including mandatory counseling within the first twelve weeks after conception and a three-day period between counseling and performance of the abortion (see "Exception to liability for abortion," Section 218a, Criminal Code). However, after German unification, inner-German differences are still reflected in people's attitudes towards abortion in former East and West Germany: Stöbel-Richter and Brähler (2005) show that in 2000, 70% of East German respondents find abortion a less serious matter or not serious at all, while only 38% of West German respondents were sharing this opinion.

A pro-life attitude places great emphasis on the life of fetuses and embryos – called the "unborn child" in the legal text – and can be attributed to Germany's murderous eugenic past during the Holocaust (Hashiloni-Dolev 2007, please also see footnote 1). The dominant Christian Democratic discourse on abortion, eventually reflected in Germany's Unification Treaty, condemned the "immoral East German state for 'promoting' abortion, and elevated the protection of unborn life to a central hallmark of the new Germany" (Wuerth 1997, 4).

As a result of these historical and social developments, Germany now maintains one of the strictest bioethic laws worldwide, not only regulating

1 However, in a previous scholarly review of this paper, a reviewer argued that this cannot only be traced to Christian Church influence, but the Holocaust's influence on the law. Furthermore, the reviewer argued that this is a secular but also humanistic rationale of the law, which can be found in the 1993 ruling on abortion, which outlined the constitutional framework for the current abortion legislation.

abortion, but also applying to prenatal diagnosis or reproductive technologies. Fetuses and embryos are constitutionally protected by the Basic Law, considered as human life and are thus “entitled to the same right to life and dignity that all persons have” (Robertson 2004, 195). In this context, medical practitioners act as legal gatekeepers and government-approved abortion agencies as interpreters of the law (Hashiloni-Dolev 2007; Petersen 1999). The compulsory counseling by social workers or church representatives gives the major German churches the opportunity to be involved in everyday abortion decision-making (Minkenberg 2003). And although many scholars and healthcare authorities argue that unbiased psychosocial counseling is widely available and well accepted (Rohde, Woopen and Gembruch 2008), there are serious divisions between the different agencies that provide such counseling.

Another obstacle to accessing abortions in Germany lies in the matter of whether a clinic or gynecologist will provide abortion as a service (Bruhn 2017).

TABLE 1 Berlin based counseling agencies included in our sample

Name	Denomination
Pro Familia	Non-denominational Pro Familia self-describes as the leading non-governmental service and consumer organization for sexual and reproductive health and rights in Germany. The organization is politically and religiously independent. Pro Familia was founded in 1952 and is member of the International Planned Parenthood Federation (IPPF).
Family Planning Center Balance	Non-denominational The Family Planning Centre Balance is part of Familienplanungszentrum Berlin e.V., a non-profit, politically and religiously independent registered association founded in 1992. This association emerged out of the “round table on women’s affair” which was part of the political activities in the GDR before unification. Their aim is to provide integrative counseling and care in the fields of family planning and sexuality. This approach is described to be “currently unique” in former East German federal states.
donum vitae	Catholic / mixed donum vitae (<i>Gift of Life</i>) is an independent “civil-legal” registered association, founded in 1999 by Catholic Christians

TABLE 1 Berlin based counseling agencies included in our sample (cont.)

Name	Denomination
Immanuel Beratung	<p>after the Catholic Church resigned from offering abortion counseling. As opposed to other Catholic organizations, donum vitae issues the so-called counseling certificate which is needed to legally receive an abortion. donum vitae also works together with other Christians and people who generally approve of their values and aims.</p> <p>Protestant</p> <p>Immanuel Beratung is a service of Beratung + Leben GmbH (<i>Counseling + Life GmbH</i>), which is part of the NGO Immanuel Diakonie. Immanuel Diakonie began its activities after 1945 and is part of the Evangelical-Free Church community Berlin-Schöneberg. Their guiding principle is “for life’s sake” (<i>Dem Leben zuliebe</i>).</p>
Diakoniewerk Simeon	<p>Protestant</p> <p>Diakoniewerk Simeon is a “social, non-profit service” and part of the Evangelical Church. Diakoniewerk Simeon is affiliated to Diakoniewerk Simeon, which was founded in 2011 by a fusion of two other NGOs. Their guiding principle is “for people – from people – with people” (<i>Für Menschen – von Menschen – mit Menschen</i>).</p>

Note: The governmental website familienplanung.de (provided by the *Federal Centre for Health Education*) offers a search engine for counseling service centers in your close vicinity by postal code and city. A drop down menu opens and you can choose between Protestant, Catholic or non-denominational counseling service centers. We interviewed abortion counselors from the biggest state-approved counseling centers available in Berlin.

A counselor at Pro Familia, a non-denominational family planning and abortion counseling agency, points out that Catholic clinics have strict guidelines not to provide abortions. This presents accessibility problems in predominantly Catholic rural areas such as Bavaria, a subject brought up by nearly every counselor and gynecologist we interviewed in Berlin. Due to the paucity of clinics and counseling agencies present in rural areas, women must travel to larger cities to obtain abortion services. The reasons for this lack of abortion infrastructure are rooted in religious arguments, a conservative social climate, and in medical staff’s refusal to provide abortions. In urban centers, a social

climate which stigmatizes abortion is also prevalent (Carol and Milewski 2018). One of the most influential and militant anti-abortion groups active in Germany's urban centers is the group *Lebensschützer*, Protectors of Life. Most activists in the Protectors of Life movement are religious, typically Catholic or Protestant Christians (Achtelik 2015).

Despite the heterogeneity of opinion within faith-based groups – amidst Protestant denominations, within the Catholic Church, and especially among religious practitioners in counseling – our interviews show that strong ethical and moral framings come to bear on abortion counselors' questions and beliefs during counseling services. Our interviewees noted an ambivalence on the topic of abortion among all parties – among women seeking abortions through clinics or agencies, counselors working in faith-based organizations, and medical staff practitioners providing abortion services in clinics. It may seem interesting, however, that for both secular *and* faith-based counselors, this ambivalence is never converted into an overtly anti-abortion stance. An abortion consultant in the Catholic organization *donum vitae*, whom we interviewed in Berlin, said that “the life of the woman has more weight than that of the unborn child. Because I get the feeling that the child exists only through the woman, and I think that she also has a right to decide.” Similarly, one of the Protestant counselors we interviewed went so far as to explain why, in accordance with the Protestant Church's approach to human life, the rights of a woman should be placed above religion.

But we have, so to speak, very straightforward guidelines for why the church – the Evangelical Church – does pregnancy conflict counseling ... One can do it only *with* the woman, not against her. One cannot make a distinction between the woman's psychological and emotional situation and an unborn child in favor of one side. What does it mean here in this context to protect life?

ABORTION CONSULTANT, Diakoniewerk Simeon

Here, consultants' approach challenges the law, which puts the “unborn life” as priority² (Rimalt 2017). Due to the precarious legal situation of abortion in Germany, Section 218 and 219 of the Criminal Code, and the social stigma that surrounds it, both medical staff and counselors see a need for a more professional and medically informed approach to the regulation and performance of

2 This may not be as surprising when a woman's life is in danger, then of course, her life would be prioritized.

abortion, and for less moral, ethical, and religious reasoning. In our interviews, medical staff emphasized the fact that clear, evidence-based guidelines are missing for medical doctors who refuse abortion due to their religious beliefs, therefore pointing out to a disconnect between secular law and faith-based performing people and institutions (doctors or clinics). A gynecologist pointed out to this gray area in her interview:

I do have this or that [religious] opinion about [abortion]. But in my function as the medical doctor, I react professionally. I say, 'In Germany it is like this, and there is a legal situation, and my medical responsibility is such.'

GYNECOLOGIST, Family Planning Center Balance, Christian

In that vein, gynecologists and women's health activists have consistently pointed out that in medical training at German universities, abortion is being treated rather peripherally. Medical students learn how to describe the principles of terminating a pregnancy and how to justify an abortion ethically and legally, yet there is usually no training in actual methods. This is remarkable for one of the most common surgical procedures in gynecology (Riese and Voss 2018).

The case of abortion in Germany illustrates the very ambivalent entanglement of "the secular" and "the religious" in everyday practices of life politics, as well as the fluidity of the categories "secular" and "religious" themselves. German abortion law is spelled out in secular terms, yet can historically as well as currently be traced back to a strong Christian influence. Especially fundamentalist groups such as the *Lebensschützer* dominate the German debate. Regarding a recent position paper of the German government concerning Section 219 of the Criminal Code, gynecologist Kristina Hänel noted that "in this paper, the *Lebensschützer* ideology has been enforced. Therefore, this is not a compromise but rather a concession to a religious minority: a radical fundamentalist group within Christians" (quoted in Riese 2018). However, our findings in interviews with abortion counselors and gynecologists (both faith-based and non-denominational), indicate that a woman's right to self-determination is being stressed and placed above the rights of the "unborn life", which is inscribed in German legal texts (e.g. Basic Law, Section 219 Criminal Code, Unification Treaty). Hence, the way German abortion law moves through (state regulated) religious and secular institutions actually produces a much more secular *practice* of abortion. This illustrates the importance of focusing on life politics of everyday practices. However, as we

have shown, these findings do not minimize the issues of accessibility, abortion on demand actually being illegal, and the strong pro-life arguments structuring the discourse in Germany. Rather, we see a gray area, which exactly due to its ambivalence enables religious, secular, and medical categories to become fluid, and vulnerable to fundamentalist interpretations.

2.2 *Turkey: "Abortion is Murder, each Abortion is Uludere"*

Abortion debates in Turkey are discussed and shaped in-between the religious and the secular. Founded in 1923 by Kemal Atatürk on secular principles, the Turkish state historically remained secular by tightly controlling religious practices in the public sphere (Özyürek 2006). Since the foundation, this tight state control on what is regarded as religious and secular has been shaped by demographic, economic and political needs and presented in a time-to-time ethnicized nationalist frame (Mutluer 2016, 2019). Therefore, this state-defined and controlled relation between the religious and the secular has played a central role in the Turkish abortion debates, shaping the discourses on women's rights and women's reproductive capacities (Ünal and Cindoğlu 2013; Mutluer 2016, 2019; Korkman 2016).

In the 1920s, during the foundation era of the secular Turkish Republic, abortion was banned and justified as a necessary measure to "protect the nation and Turkishness" (Kubilay 2014). In the 1960's the annual population growth reached 2% and the 1963 Law on Population Planning allowed for the first time the use of contraceptives and legalized abortion for health reasons. In 1983, after the 1980 coup, voluntary abortion was legalized and permitted up to the tenth week of pregnancy (Population Planning Law 1983). In the late 1990s, the wind of the EU accession process created an atmosphere of relative freedom and it was in such an atmosphere that the AKP (Justice and Development Party) came to power in 2002 as a self-proclaimed representative of the conservative democratic identity. The same year, the women's movement also managed to get the parliament to amend the Civil Law and Penal Code in favor of empowering women, such as introducing stricter penalties in the cases of honor crimes and increasing the age of marriage from 15 to 18. This atmosphere of relative freedom lasted until about 2007, when the AKP was elected to its second term in power. Since then, politicians and supporters of AKP have started to endeavor to put an end to the constitutional supremacy of secularism in Turkey and have threatened liberal values essential for secular authority, including gender equality (Bakıner 2017). Debates on reproduction and abortion have become one of the main topics of AKP 's agenda. It was in March 7th, 2008 when Prime Minister Recep Tayyip Erdoğan demanded for

the first from women to have at least three babies as it is crucial for the continuation of the Turkish nation (Hürriyet Newspaper 2008). In the same year GEBLIZ, a monitoring program for pregnancies and infants, was introduced as a pilot study in Istanbul. Although monitoring women throughout the pregnancy and post-natal monitoring of babies helped to decrease the numbers of women and infant mortality, the way it has been applied is questionable in terms of protecting women's right to privacy. Women's permission for the monitoring is not asked and their data is directly sent to the Ministry of Health.

Although AKP and its leader Erdoğan have continued to refer to the abortion issue in their debates, the turning point that puts a new frame to the issue is Erdoğan's speech on the 26th of May 2012. In the Fifth International Parliamentarians' Conference on the implementation of UNFPA's International Conference on Population and Development Programme of Action, then Prime Minister Erdoğan once more emphasized that every woman should have three children and "abortion is murder. Each abortion is Uludere" (Radikal Newspaper 2012). Uludere is the Turkified name of the Kurdish village Roboski where the Turkish Airforce bombed and killed 34 civilian Kurds. Thus, with such an equation of abortion with state-led killings in a Kurdish village, one more time the Turkish nationalistic approach on demography, citizenship and reproduction was confirmed (Mutluer 2019).

After Erdoğan's speech at UNFPA, legal regulations and medical ethics surrounding abortion became controversial throughout Turkish society. Although abortion has been officially permitted up to ten weeks since 1983, following Erdoğan's speech it became effectively banned, particularly in state-owned hospitals. In 2014, the Turkish Society of Obstetrics and Gynecology sent out a press release claiming that state hospitals had effectively abolished abortions without any legal basis for doing so (Hürriyet Daily News 2014). The feminist organization Mor Çatı (Purple Roof) conducted a telephone survey with 37 state hospitals, asking whether they provide abortion (Mor Çatı 2015). Only three of the 37 hospitals surveyed reported abortion being practiced in their hospital. In our interview with a representative from Mor Çatı, she argued that both *de facto* ban on abortion and GEBLIZ system are prone to corruption given current political pressure on women's reproductive rights. In 2012, Mor Çatı publicly revealed cases in which medical staff attempted to convince women to change their minds about having an abortion. In our interview, the representative called this a "serious violence by the state."

In our interviews with religious authorities and medical staff in Turkey, we see two trends. The first, similar to that in Germany, is an exhortation to protect human life. Religious authorities and medical practitioners argue that abortion should not be practiced in Turkey because the fetus is a living being

from the moment the heartbeat can be detected. The second trend, specific to Turkish discourses on abortion, is that both religious and secular authorities and medical staff seek to avoid further politicization of the debate and therefore refrain from pursuing changes to existing secular abortion laws.

As the head of the Association for Women Practitioners in Medicine, Gülhan Cengiz is a well-known medical doctor in Turkey. She is often in the media, explaining women's health-related issues, especially for a Muslim religious audience. In our interview with her, she explained that she advise women not to have abortion. She said that many women decide against abortion when they see the aborted fetuses. Being an anti-abortion gynecologist, Cengiz nevertheless came out in 2012 against abolishing the existing abortion law, preferring to keep the law as it is. Rather than changing abortion law, Turkish political authorities and anti-abortion medical staff prefer that abortion be regulated through the issuing of Islamic *fetva* (fatwa) or by implementing neoliberal economic incentive systems aimed at curtailing abortion initiatives.

A retired religious counselor (*vaiz*) at the Alo Fetva (Hello, Fatwa) religious advice hotline, Nevin Meriç, said in her interview that she also finds the change of abortion law unnecessary. Meriç said that she believes that abortion is religiously unacceptable. She reported abiding by the *ilmihal* (catechism summarizing religious doctrine) from the ISAM (Islamic Research Center) and the *ulema* (religious scholars). Meriç's comments highlight the existence of an informal religious regulation system that functions parallel to the official secular legal system, and which is extremely effective due to its one-on-one contact with people through telephone lines, Islamic publications, anti-abortion medical staff, and religious abortion counselors. President Erdoğan's public speeches against abortion also function in the same way, providing information on and lending authority to various fatwas. Because abortion is regulated via informal channels, often at personal and grassroots level, there is no immediate need to change the current abortion law to a more restrictive one.

In addition to the micro-level of regulating abortion through informal religious networks – such as telephone lines, Islamic publications, anti-abortion medical staff, and religious abortion counselors – on a macro-level the Turkish healthcare system is also regulated via neoliberal economics (Ozbay et al. 2016), via a point or credit system through which doctors are able to maintain their public reputation and charge higher rates. In this system, doctors and health officials have ambiguous knowledge whether the performance of an abortion is awarded credit points, or not. In our interviews, few medical staff argued that abortion does not have awarding points, while others argued there is a credit point for performing abortion for doctors. In the related legal documents, performing abortion has credit points as awards to the

doctors. But this gray area of the publicizing of ambiguous information about abortion provides ground for some gynecologists to avoid its practice. In this neoliberal way (award system for medical practices), abortion can be regulated via a rewarding or not-rewarding point-system to doctors, which serves to control doctors' behavior towards abortion-seeking women.

Alternatively, women who seek abortion reach out to other regional life politics, which are countries with flexible abortion regulations and private hospitals that perform unregistered abortions. The Turkish part Northern Cyprus is the primary offshore area performing abortions for Turkish women who cannot terminate their pregnancies within the legal time restrictions, or who fear religious or social pressure. Known as abortion tourism, an unknown number of women travel from Turkey to Northern Cyprus looking for abortions performed in private clinics. A new abortion law is currently under discussion in Northern Cyprus, with a possible pregnancy termination period of 20 weeks after conception, two months longer than the Turkish abortion legal limit.

Most recently, medical staff and policy makers in Turkey have debated the adoption of a mandatory counseling service similar to the German system. Muhtar Çokar is a retired emergency room physician, a medical ethics expert at the Istanbul University Medical School, and the executive director for the Human Resource Development Foundation which specializes in reproductive health rights. In our interview, Çokar came out against abortion counseling in Turkey due to the assumption that the services would be dominated by Islamic organizations.

There is discussion of changing the regulation of abortions that are medically necessary. In this discussion, as I have heard some policy makers have it, they want to introduce counseling. In Germany, they have something similar. Certain organizations would have the responsibility to provide counseling before the termination of a pregnancy. But this [system] has come under criticism in Germany because these organizations may be dominated by the church. I think they want to do the same here in Turkey.

MUHTAR ÇOKAR

In this way, Turkish policy makers appear to look to Germany as a medical model in order to establish mandatory abortion counseling, but in a severely politicized context. While this politicized context swings mainly from religious to secular between mainstream conservatives' anti-abortion and mainstream feminists' pro-abortion debates, there is also a cross-cutting consensus between some religious and secular women in opposing the changes in the law.

For instance, since the idea of an anti-abortion law was introduced in Turkey, AKP member of the parliament Nursuna Memecan has been very vocal in voicing her opposition, arguing that such an amendment would not prevent the practice of abortion but would put many women's lives in danger. Religious Muslim women writers, such as Fatma Bostan Ünsal and Nihal Bengisu Karaca also criticized the idea of amendment to the abortion law (Kubilay 2014). In the same period, a group of feminists who are against the changes in the abortion law argued that this issue should not be discussed within the narrow confines of the pro-life, pro-abortion binary opposition in Turkey, as the Turkish case has multiple life politics which are difficult to negotiate under the current political tension (Direk 2012; Bora 2012).

2.3 *Israel: Negotiation of Halachic Ruling with Medical Technologies and Institutions*

In comparison to Germany and Turkey, the prioritization of religion in Israel is a *sine qua non*, despite secular abortion laws. Meira Weiss has demonstrated the importance of religion in Jewish Israeli lives by pointing out that “[h]owever secular the everyday life of many Israelis may be, they are still subject to the rule of the *halacha* in their rites of passage – all of which have carnal aspects ...” (2002, 88). This strong emphasis on religion is visible in Israeli law making. Because family law in Israel is bifurcated between civil and religious courts, with civil statutes pertaining to religious court rulings only where relevant, religious law regulates every aspect of Israeli corporeal life – marriage and divorce, male circumcision, death, and burial are all regulated by and for the state primarily through religious institutional apparatuses.

Abortion is widely available in Israel, yet legally restricted and monitored through abortion committees whose responsibility it is to authorize them. In line with Steinfeld's “demographic anxiety” argument, this regulatory power on abortion through committees is designed to increase the Jewish population. In our interview with Sharon Orshalimy, a family planning counsellor, sexual health policy researcher, abortion activist and sexual educator, she refers to abortion as a form of state-sponsored pro-natalism.

Israel is a pro-natalist country ... so it encourages having babies as much as possible ... The national narrative is that ... we have to have majority of Jews ... And the other narrative is that we lost all these people in the Holocaust, so we have to make up for all the people we lost ... It's also a policing of women's bodies.

SHARON ORSHALIMY

In this pro-natalist frame, women are clearly defined as being responsible not only for the bearing of their own children, but also as “bearer[s] of the nation” (Yuval-Davis 1997). The Israeli state preserved that role for women through the establishment of gendered laws where the maternal role was both emphasized and advanced (Berkovitz 1997).

Until the 1970s, abortion was prohibited in Israel due to the inheritance of former British laws. Under the British Mandate for Palestine law, abortion was prohibited under the penal code. The punishment for women who aborted without fatal risk was seven years’ imprisonment, with 14 years for the doctor who performed the procedure (Amir 2015; Rimalt 2016). In practice, however, no doctor was ever accused of performing an abortion, and abortions were carried out in clinics and private locations throughout urban centers (Shochetman 1999). Heated debate preceded the legalization of abortion in both the public arena and in the Knesset. According to Yael Yishai (1993b), abortion was viewed as the culprit of a diminished birth rate and was therefore considered to be an unwelcome political goal.

In January 1977, despite strong rabbinical opposition, the Israeli Knesset passed a law legalizing abortion, but did not provide for abortion on demand (Penal Law of 1977, Interruption of Pregnancy). The law permitted termination of a pregnancy after receipt of approval by a three-member committee, comprised of two doctors – one of them a gynecologist – and a social worker. One of the committee members had to be a woman, usually a social worker. Reasons for which a legal abortion could be obtained included: a) if the woman is under 17 or over 40 years of age; b) if the pregnancy had resulted from incest, rape, or had been conceived out of wedlock; c) if the fetus was likely to have a physical or mental defect; d) if the continuation of the pregnancy was likely to threaten the woman’s life or cause her physical or mental harm; and e) if the pregnancy would likely result in harm to the woman’s social or economic situation. In 1979, the latter clause which allowed abortion for vaguely defined “social reasons,” was repealed (Yishai 1993a, 214). Since a health-basket reform in 2014, the state pays for legal abortions for women from 20 to 33 years of age (as well as under 19 and over 40), regardless of circumstance. The absence of termination time-limits further enables women to abort up to full gestation (Steinfeld 2015). The latest attempt to change the law came in 2016 from two members of the Knesset, a religious Muslim and an Orthodox Jew. Their goal to legalize the presence of a religious figure in the committees was received with unanimous disdain by members of the Knesset committee for the advancement of women’s status to which it was assigned, and was taken off the agenda.

Similar to the German case, in Israel abortions are *de jure* illegal, but *de facto* permitted under certain conditions (Steinfeld 2015). The state plays what Yishai has termed an “intrusive role” with regard to abortion, limiting “individual discretion but ... committed to implementing authorized (that is, legal) abortions” (1993a, 210). However, Steinfeld argues that some aspects of this intrusive approach are “surprisingly progressive for a pro-natalist state with a politically powerful Orthodox minority” (Steinfeld 2015, 14). More than 90 percent of all abortion applications are approved by the committees, and doctors are rarely prosecuted for the large number of abortions carried out illegally.³

With the waves of immigration from African and Asian countries upon the establishment of the state of Israel, the issue of socioeconomic access to abortion services has come to the fore. Today, while women from high socioeconomic backgrounds are able to afford abortions in private clinics, women with lower socioeconomic backgrounds are compelled to seek abortions in public hospitals where costs are lower or where abortions are performed free of charge. In 2011, Israel’s Women’s Network estimated the number of illegal abortions in Israel to be around 4.5 to 6 thousand annually (Globes 2019). Illegal abortion will be conducted without the approval of a committee and thus unregulated by the Ministry of Health. The state report for the Ministry of Health from 2016 suggested that as of 2013, approximately 48 percent of legal abortions are performed in private hospitals and clinics where women are charged more for a faster procedure (state comptroller annual report 2016). In 2015, there were almost 20 thousand applications to pregnancy termination committees; of these, 99.5 percent were approved (CBS 2017). Steinfeld argues that because committees interfere with women’s access to abortion in unpredictable ways due to their inconsistent composition and meeting times, many affluent women turn to private hospitals for faster and more unimpeded access to abortion (2015).

In our interviews, Prof. Rav Avraham Steinberg, director of the Medical Ethics Unit at Shaare Zedek Hospital, emphasized how the approach of keeping an “easy hand on the trigger” is problematic in the case of abortions. He pointed to the difficulty of coming to a decision grounded in Jewish *halachic* law for couples requesting a ruling in cases of fetal maldevelopment and cited the lack of sufficient data on the probability of disability severity after birth.

3 Abortion committees liberally interpret the law, although the law is restrictive and legislative history indicates that abortion committees should control and limit the number of abortions.

Steinberg is here referencing the high rate of abortions performed upon discovery of fetal defects. Steinberg suggested that it is difficult to rule according to *halacha* when committees permit early and late-term abortions due to fetal defects, sometimes based on partial genetic or medical information, and often without inquiring as to the nature of the defect and the probability of disability. While the issue is less problematic during the first 40 days of pregnancy, when the fetus is considered under halachic law to be “mere water” (*mi'ya be'alma*, from Aramaic, the language of the Rabbinical scriptures), rulings become more challenging throughout the rest of the pregnancy.

As Rabbi David Stav of the *Tzohar* organization, which aims at helping secular Jews in Israel in Jewish-Halachic issues, explained concerning abortions,

The technology that discovers pregnancy after one week ... is excellent for us ... The fact that it's only a few days makes the matter *halachically* much easier ... On the other hand, the story with probabilities is just killing us ... That is perhaps the biggest problem worrying us.

DAVID STAV

This problem can be best understood in light of the Jewish non-gradual status of the fetus during pregnancy. The fetus is not considered a life in its own right until the 40th day. After 40 days, it acquires some status, but its principal characteristic lies in its in-between-ness – it is not yet considered to be a person but could already be one. Interestingly, both rabbis interviewed touched on the problem of new forms of knowledge brought about by advanced pregnancy tests and diagnosis which complicate *halachic* decision-making.

A similar stance critical of the committees, but from a different point of view, was expressed by an interviewee from the anti-abortion NGO Efrat. Established at the beginning of the 1980s, the NGO was first named “Efrat, The Right to Live.” Following criticism, the name was changed to “Efrat, Association for the Encouragement of Childbirth among the Jewish People.” Efrat’s stated purpose is “encouraging childbirth and preventing unnecessary abortions”, in that it resembles American pro-life organizations. Along the way, Efrat was supported by the national rabbinical establishment. Each year, when the weekly Sabbath reading is taken from the section of the bible entitled Shemot, a letter to the public is issued by the rabbis relating the story to Efrat. In the story of Shemot, the Pharaoh commands the Hebrews to throw their male offspring into the Nile, and many of them are then saved by Hebrew midwives. In the rabbinical open letter, the saving of Jewish life by Efrat members is related to that of the midwives. In an interview with Ruth Tidhar, Efrat spokeswoman and social worker, she explained why an abolition of the committees would be a good thing and in favor of women’s rights.

We were invited to a committee in the Knesset a couple of months ago, [and we said that] committees are completely unnecessary ... The law is as liberal as it could possibly be ... You could say that everyone gets permission.

RUTH TIDHAR

Yet, as is the case in Germany, we see a strong emphasis on the framing of counseling within the secular discourse of women's rights. In an interview given to channel 7, a Jewish – Orthodox news channel, Efrat's director, Dr. Eli Shussheim, emphasizes the right of a woman to choose.

It is a pregnant woman's right, when she is considering an abortion, to decide with full understanding and knowledge ... And to be aware of the complications that might appear as a result ... Efrat does not decide for the woman ... We give her knowledge and leave the decision in her hands.

ELI SHUSSHEIM

In Efrat's stance, a use of liberal discourses on women's rights and personal responsibility is not challenged because the organization is upholding the national-religious role of women as "bearers of the nation" at the same time. In fact, similar with pro-life American initiatives Efrat is seeking to make mandatory for a woman to be exposed to pro-life material. Furthermore, since Efrat re-labeled itself as a supportive rather than cohesive organization, it is interesting to see how this discourse of personal responsibility and the right over one's body is directed towards a group of women which is already marginal in the Jewish-Israeli society: poor and marginalized Jewish women. The various legal proposals set forward by members of the Knesset since 2001 are characterized by this liberal discourse, which makes a distinction between "wanted" and "unwanted" fetuses and between women who are expected to become mothers and those who can be excluded from this demand by reason of being unhealthy, too young, too old, or for other demographic concerns (Amir 2015).

While abortion committees in Israel are certainly not religious per se, there is a negotiation between religious and secular authority. Within the Israeli context, the committees may at times mirror the operational infrastructure of *halachic* rulings. For example, even though it is illegal to do so, three religious public hospitals refuse to house abortion committees. Avraham Steinberg, a well-known rabbinical authority in medical issues in Israel, pointed out that hospitals cannot perform abortion when it is against their *halachic raison d'être*:

It is illegal, but that is the halachic policy of the hospital ... Here, they demand an official marriage certificate ... If she is single or known in public, then the child will be kosher [if the mother is Jewish]. What do I care if she is married according to halacha or not? ... Pregnancy termination is much more serious, because it's killing. You can't come to a hospital thinking that this is murder and tell them 'You must murder.'

AVRAHAM STEINBERG

In sum, abortion law in Israel reflects the negotiation of *halachic* ruling with medical technologies and institutions⁴ (Ivry 2013). Abortion is decided on a case-by-case basis through abortion committees, where secular and religious authorities negotiate with each other. Still, Noya Morag-Levine argues that this system “retained the norms and logic of the traditional religious process” (1998, 232). Therefore, the authoritative character of the halachic rule is reflected in the regulative structure being applied in life politics. The negotiation between secular and religious authorities in order to create case-by-case decision-making on abortion crystallizes in the 1993 speech of the Knesset member Avraham Shapira, member of the ultra-orthodox party *Yahadut Hatorah*. He said that “[t]he multiplicity of abortions in Israel is not a religious subject ... The subject is totally within the domain of health and education, and ought to be viewed as a first order national priority” (cited in Morag-Levine 1998, 232). Therefore, pointing out life politics between secular law and *halachic* authority within the current socio-political context in Israel, where the secular-national ideology of high Jewish fertility rates – interpellating women’s bodies – is colliding with the Jewish-halachic authoritative mechanism.

3 Conclusion

In comparing three countries with secular abortion laws but differing social institutions, we have seen how life politics are created in the tension between secular and religious. The implementation of abortion law in practice is affected by the moral reasoning and ethical evaluation of abortion practitioners – medical staff, abortion consultants, and religious authorities in

4 In a previous scholarly review of this article, the reviewer argued that the religious authorities have no standing on abortion committees whatsoever. The reviewer argued that our depiction, of negotiation between religious and secular authorities in abortion committees, is not an accurate description of the process. However our interviews, the scholarly literature as well as the media reporting show that the religious authorities at times attempt to influence abortion committees decisions and law-making on abortion in general.

everyday negotiations. In Germany, abortion consultants who work in religious or religiously independent organizations have adopted a secular discourse concerning women's authority over their own bodies and demand a more professional and medically informed approach to the regulation and performance of abortion, as well as for less moral, ethical, and religious reasoning. This secular rhetoric is deployed differently in rural areas and among more conservative groups, but there seems to be a general agreement that secular law *in practice* takes precedence over the demands of the Christian Church. However, historically and in current debates, abortion law *in the books* is clearly influenced by a more pro-life stance, in which the balancing act between a woman's right to self-determination and the rights of an embryo or fetus are decided in favor of the latter. In Turkey, religious-secular tensions center strongly around abortion politics. Because the Turkish healthcare system is regulated via neoliberal economic incentives which prevent abortion in practice, Islamic religious authorities are under no pressure to change the secular Turkish laws on abortion. Instead, life politics appear in secular-religious tensions, such as regulation on micro-levels (religious telephone hotlines, abortion consultants, anti-abortion medical staff), and macro-levels (neoliberal incentives in medical system). This secular-religious tension in Turkey led to the *de facto* abortion ban in Turkish state/public hospitals, creating instead an offshore abortion practice in Northern Cyprus. In Israel, secular-religious authorities negotiate with each other, but the current sociopolitical concerns and national priorities are at stake. This cross-country comparison shows how secular-religious tensions are creating abortion practices within sociopolitical contexts: Germany's counselors *in practice* prioritizing women's determination over their own body while Turkey *de facto* banning abortion practices due to Turkish-Islamic ideology connected to neoliberal economy; and Israel standing in-between both country cases – while there is room for negotiation possible within secular-religious tensions, abortion practice is publicly condoned due to the pro-natalist policy of the Israeli state authorities.

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Appendix

Interviews: Note that not all interviews are specifically cited in this paper due to space reasons, but were used for background information.

Germany

Most names have been protected: counselor, Pro Familia; counselor, Pro Familia; counselor, Donum Vitae Berlin (Catholic); counselor, Beratung + Leben GmbH – Family Counseling Pankow (Protestant); counselor, Diakoniewerk Simeon (Protestant); gynecologist, Family Planning Center Balance; gynecologist, Pro Familia Berlin; public relations officer, Family Planning Center Balance (Christian); Dr. Ulrike Busch, sociologist researching family planning, Pro Familia Berlin.

Turkey

All names have been retained due to public recognition of the interviewees: Medical Ethics and History, Marmara University, Istanbul; Faculty of Law, Istanbul Medeniyet University; Turkish Gynecology and Obstetrics Association; NGO platform “Abortion is a Right, The Choice Belongs to Women”; Purple Roof, women’s NGO; Human Resources Development Foundation; Department of Public Health, Medical Faculty, Istanbul University; Turkish Family Planning Association (TAV); Alo Fetva; Life Association; Association for Women Practitioners in Medicine.

Israel

Some names have been protected: Ruth Tidhar, spokeswoman and chief social worker, Efrat; Dinah Shalev, manager of the counseling center at Ladaat Livchor Nachon (Choose Well); Prof Rav Avraham Steinberg, MD, Director of Medical Ethics Unit Shaare Tzedek Hospital. Co-director of the National Bioethics Council; Rav David Stav, Head of Rabbinical management in “Tzohar”, Rabbinical establishment that aims to provide accessibility to Jewish-religious services to the secular Jewish-Israeli population; fertility doctor who participates in committees, Large public Hospital; Aliza Lavi, Knesset member involved in fertility issues and abortion; Dr. Yechiel Michael Barilan, researcher in bioethics, biolaw, and medical humanities, Department of Medical Education, Tel Aviv University; Dr. Ronit Irshai, Lecturer at the Gender Studies Program, Bar Ilan University, research fellow at the Shalom Hartman institute in Jerusalem; Sharon Orshalimy, head of counseling center, “Delet Ptucha” (open door), the Israeli association for family planning. She is also an educator for healthy sexuality and sexual abuse prevention among youth. Social worker, committee member in one of the large hospitals, central area in Israel.