

"I Felt Like I Was a Bad Person...Which I'm Not": Stigmatization in Crisis Pregnancy Centers

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CPC staff attempt to influence the reproductive choices of clients through stigmatization. Clients who are considering abortion mitigate this stigmatization through concealment, impression management, and identity distancing.

Key Findings

We interviewed 10 CPC staff members and 12 CPC clients seeking abortion care in Ohio to examine how stigmatization is used to pressure pregnant people away from having an abortion.

CPC Legitimization

CPC staff were aware of criticisms of CPCs, especially those that described them as "fake clinics." Staff members worked toward an image of professional legitimacy to counter these narratives, mimicking the appearance and language of medical spaces.

"I want people in the community to think of the clinic first as – you know, they know what they're talking about...They're professional. They're not that fake clinic..."

CPC Mission

Maintaining this professional image conflicted with the religious and moral values of some CPC staff. For example, one CPC Executive Director characterized the ultrasound room as "where so many miracles happen."

"Our machine has a mission. That mission is to reveal the life within to the woman who is considering abortion...in hopes of confirming life."

One CPC client compared their experience at a CPC to their visit to an abortion and medical clinic:

"They're different, they're completely different because the pregnancy center they're guided for the baby. They don't care about nothing but the baby, if it doesn't involve the baby, they do not care about it..."

What are CPCs?

CPCs are non-profit, anti-abortion organizations that provide material aid to expectant parents and often attract pregnant people to their facilities with the offer of free pregnancy tests and ultrasounds.^{1,2} People intending to have an abortion who attend a CPC are met with resistance, misinformation, and material enticements (such as promises of free baby

supplies) to persuade them not to terminate their pregnancy.³ CPCs present themselves in such a way that people attending may think they are visiting a medical clinic with abortion services, unaware of the center's goal until they arrive.⁴



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Strategies to Mitigate Stigma

We found that CPC clients used two primary mitigation mechanisms to cope with abortion stigmatization:

- 1. Concealment: Pregnant people purposefully hid or minimized their abortion intentions because they feared being denied care.
- 2. Identity Distancing: Pregnant people who experienced stigmatization drew on their identities related to age, motherhood, and religion as a source of fortitude to combat the stigmatization.

Public Health Implications

- When providers consider the needs of their patients seeking (or considering) an abortion, particular care should be taken to understand the process of stigmatization, including its timing, which can begin prior to having an abortion.
- CPC efforts to be seen as legitimate health centers may lead clients to believe they are receiving stigma from medical professionals. This could lead them to expect stigmatization in other healthcare settings or avoid seeking health care at all.
- Prior research shows that CPC attendance in Ohio is not rare. However, CPCs are not licensed healthcare facilities and should not be used in place of medical care.