

# The Abortion-Minded<sup>1</sup> Woman

*Lisa Jacobson*

Life Ed is a Colorado-based non-profit agency that uses mass media to win public opinion to pro-life values, to improve public perception of the pro-life movement and to advertise toll-free help lines, bringing clients into pregnancy resource centers. Heavily research-based, Life Ed has a history of successful mass media campaigns and new insights for effective communications with abortion-minded women.

For the last seven years Life Ed has broadcast statewide continuously on major network and cable stations with great success. Life Ed has contributed over \$3 million in television advertising to the Colorado pregnancy centers.

Primarily Life Ed used the beautiful 30-second messages distributed by LifeMedia of Michigan Right to Life and created by Compass Arts of Grand Rapids.

Success has been measured in two primary ways. For one, over 12,000 phone calls have come into the Colorado pregnancy centers.<sup>2</sup> When the television spots are broadcast during daytime hours, the centers report a sharp increase in client phone calls. When the television campaign began, centers in the larger metropolitan centers reported that client calls doubled, and some even tripled.

Life Ed has a high commitment to research, both with foundational studies to create messages as well as evaluating the campaigns upon completion. Following several years of saturated television advertising with eleven 13-week flights of daytime

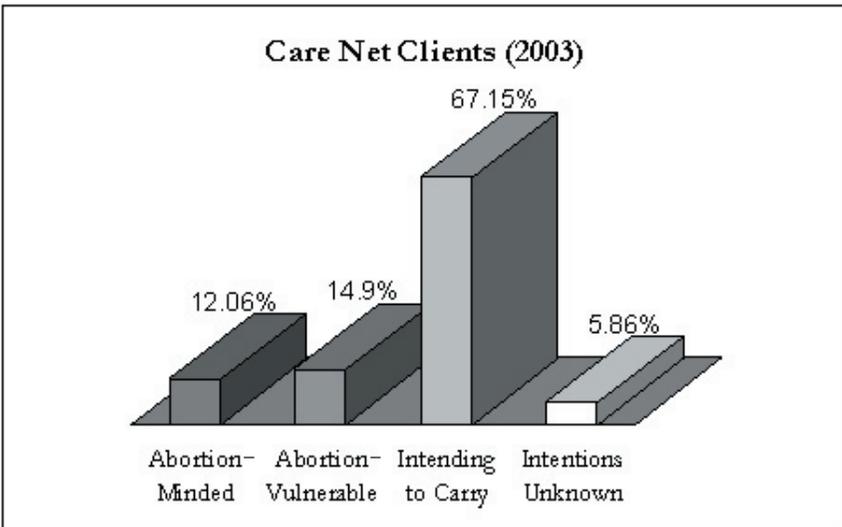


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broadcasting and continuous late-night broadcasting, 15 polls conducted by Wirthlin Worldwide showed public opinion had increased by 31 percent to consistent pro-life positions and 37 percent among women ages 18-34, the primary audience. Life Ed attributes the Colorado success in large measure to the research that backed the television messages, ensuring optimum communications with the public.

### New Research

When evaluation results began to show a plateau, Life Ed turned to ad agency and branding experts Hanon McKendry and Wirthlin Worldwide to conduct fresh research on women's attitudes about their sexuality, unplanned pregnancy, abortion, and sexually transmitted disease. Hanon McKendry was selected because of its proven expertise. In 1998, the agency achieved phenomenal results by combining research and advertising to defeat a ballot initiative in Michigan that would have legalized assisted suicide. Also, a number of the Hanon McKendry staff have been involved with other pro-life efforts, including producing the television ads Life Ed has used previously with great success.



The actual percentages of abortion-minded and abortion-vulnerable clients at Care Net centers are likely higher than percentages above due to variance in reporting methods.

Even with the Colorado media campaign, the results of Life Ed's new study of abortion-minded women were shocking. The primary target audience had changed significantly since the mid-1990s when initial research was conducted.

Life Ed's study was designed with its own research objectives; but several of Life Ed's advisors saw that the findings would be valuable to PRCs, describing women who would be unlikely to come into the PRCs. If abortion-minded women constitute only 12 percent of PRC client volume (according to Care Net 2003 data), what are the barriers preventing other abortion-minded women from coming into centers?

Focus on the Family has published the Life Ed research findings in *Heartlink* magazine, and Care Net requested that Life Ed share the results in greater depth in the *Center of Tomorrow* journal. Insights could apply to marketing ideas as well as considerations for the counseling room.

Following is a synopsis of the structure of the study:

- Participants were carefully screened and selected representing a cross-section of socio-economic and educational backgrounds, women ages 18-34, with a pro-abortion leaning.
- Four focus groups were divided into ages 18-24 (the "younger women") and 25-34 (the "older women"). All were single; some had children.
- Participants generally had a liberal view of sexuality and would react negatively if they became pregnant.
- Because of Colorado's large and growing Hispanic population, and because Colorado Department of Public Health vital statistics data showed Hispanic females had more abortions per capita than non-Hispanics, the study over-sampled Hispanic women. It is noteworthy that, with a few exceptions, the women of Hispanic heritage tested just the same as non-Hispanic women.

As a result of the research, we more fully understand abortion-

minded women, including:

- the dynamics of their personal sexuality;
- the physical, emotional, relational, and mental considerations as they relate to abortion decision-making;
- the needs, willingness, and barriers to reaching out for support and guidance from pro-life organizations; and
- what will positively influence their attitudes and behaviors.

## **New Attitudes**

### *Sexuality*

Our culture has changed dramatically over the prior ten years since women have been studied regarding their views of abortion. Women have expanded - and even torn down - their sexual boundaries. Sexual behaviors once considered taboo are generally accepted. Sex is seen as a pleasurable experience independent of relationships. Sex outside of marriage is viewed as normal, acceptable, healthy, and even sensible; but discretion is valued to avoid recklessness and promiscuity, according to the women's own variable standards.

Women gave a host of reasons for being sexually active, among which are:

- a necessary step for growing up;
- enhancing their self-esteem, feeling wanted, attractive and desirable; and
- solidifying a relationship, expressing their feelings for their partner, and experiencing a greater level of intimacy with another person.

### *Unplanned Pregnancy*

When projecting themselves into an unintended pregnancy scenario, most women described strong reactions that this would be a true dilemma for them, a life-changing event. They were deeply pained with this prospect, and their feelings were overwhelmingly negative.

The women, especially the Hispanics, felt they would let themselves and their parents down if they became pregnant. Women also felt having a baby would keep them from reaching their educational, occupational, and financial goals. Confirming prior research, an unplanned pregnancy would change how they define themselves.

Interestingly, the participants disliked the word “unwanted” to describe pregnancies or babies. As with other research findings, they also disliked the word “crisis.” Words that strongly resonated with them were “decisions” and “options.”

### *Abortion*

The key finding is that women, particularly the younger women, have an abortion plan, even before they become sexually active.

In other words, if we don't reach them before they become pregnant, it's probably too late to influence them to choose life for their children. They take abortion seriously and acknowledge long-lasting, harmful side effects of abortion for women, physical as well as emotional, which is ironic given that they considered themselves pro-choice. Several volunteered that they themselves have had abortions, and many participants knew women who have had abortions; but they thought this was still the best decision for an unplanned pregnancy. They often used statements like, “I'd have one,” or “I'd get one.” Several women expected strong pressure to abort for the sake of their partners or for the relationship.

One point of optimism is that younger women were more open to being influenced against having an abortion.

Highly important for pregnancy centers to know is that women would seek out those people, organizations, or doctors who would support their abortion decision; and their last resort would be to

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get help from counselors or social agencies like pregnancy resource centers. With their strong, independent spirits, the women's first plan is to handle the abortion decision on their own, second to seek help from those close to them, and the last resort would be to seek help from unknown sources, even professionals. Life Ed's findings affirmed, as with other studies year after year, that Planned Parenthood is regarded as a mainstream, trustworthy agency that has women's best interests in mind. Also, women see Planned Parenthood as helping them with numerous health and sexuality issues, not just abortion and contraception services.

### *Adoption*

Confirming what previous studies have shown, the majority of women were adamant they would not relinquish a baby for adoption. They felt the attachment to the child would be too intense and that they would suffer by giving the baby up for adoption. If they were strong enough and had sufficient support and resources to carry a baby to term, they then would have the ability to parent. Very few of the women saw adoption as an act of benevolence on the child's behalf or on behalf of a couple wanting to adopt, unless they had observed this modeled in others.

### *Parenting*

A few of the older women indicated they would choose to parent a child if they were pregnant unexpectedly because of their current financial, professional, and emotional stability. Most, however, did not want to be a single mother.

Some women acknowledged observing another woman in a single parent role with positive outcomes, even though it was a difficult situation. These women were more likely to believe they could do this as well. Many recognized the joy a child can bring, either the women who themselves had children or women commenting on their nieces and nephews.

### *Relationships*

Women no longer see a connection between sexual activity and

committed relationships - marriage or otherwise. Women are very independent, and the younger women particularly would perhaps not even tell the father of the child if they were pregnant and considering abortion.

Trust, however, was a major factor to women when deciding whether to engage in a sexual encounter that had prospects of a future relationship. They wanted partners to be faithful, honest, and disease-free.

Trust meant different things to different women. They measured the trustworthiness of a sexual partner by their instincts, attraction, how comfortable they felt about the man, how open and forthright the man seemed, or the length of time knowing the man, ranging from three dates, to several weeks or months, or a year.

Hispanic women were more trusting of men and, consequently, more hopeful about their current and future relationships.

All women expressed disappointment and betrayal when their partners were unfaithful. In those instances, the women used strong words like being used, abused, trapped, and violated.

### *Values*

Overall, women thought it was better to abort a baby rather than bring the child into a situation that was less than “ideal.” They perceived it would be in the child’s best interest to be aborted, given the women’s lifestyles. A few women admitted outright selfishness and didn’t think this was a negative attitude. As one woman said, it would be better for a baby to be aborted than to live under her care, considering her selfish nature. Several cited their own health issues they would not want to perhaps pass along to a child, such as asthma or rheumatoid arthritis; but none were chronic, untreatable, hereditary, or fatal.

Older women reported they have curtailed sexually libertine

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lifestyles, saying that their past behaviors weren't satisfying, and their priorities have shifted. They are looking for more in their relationships now.

Interestingly, all groups said they still hold aspirations for marriage, "one man to love me unconditionally forever." Even considering the erosion of the institution of marriage, the women's descriptions of their own parents' disastrous marriages, or betrayal by their own former husbands or partners, they still held a romantic vision of marriage. Abstinence educators recognize the motivational value of painting a positive picture of marriage, and this was born out in the Life Ed research.

### *Sexually Transmitted Disease*

The women were, however, very concerned about contracting a sexually transmitted disease. They felt that they had a "back-up" abortion plan if facing an unwanted pregnancy, but STDs were another matter that might not always be under their control. They saw STDs as destructive to their own health and damaging to existing or future relationships.

Pregnancy centers offering STD tests and education to clients are making a wise, strategic move to draw women who might not otherwise come in for other sexual issues like pregnancy or post-abortion counseling. Also, the STD pandemic certainly bears out that sexual promiscuity has other destructive health dynamics than unwanted pregnancy, and women need ministry in light of this. Women who consider themselves pro-choice will be more inclined to visit PRCs if they are perceived as interested in women's total well-being.

PRCs moving in the direction of community abstinence education are also to be commended. The Life Ed research shows that, to prevent the greatest number of abortions, women must be reached long before they are in a position of crisis, and the same holds true for preventing STDs.

### *Attitudes Regarding the Pro-Life Movement*

The instant reaction of women in the study to pro-life people

was immediate distrust. Word association exercises resulted in immediate responses as “bombers,” “fanatics,” “religious,” and “narrow-minded.”

*Attitudes Regarding Pregnancy Resource Centers*

The study’s primary objective was how to best communicate with women, the ultimate decision-makers on abortion. Life Ed has had a long-time relationship with the Colorado pregnancy centers, knowing that educating women through mass media only goes so far. The best way to reduce abortions is to involve women in relationships with those who will lovingly give them all the information and support necessary for women to realize abortion is not in their best interest. It was essential, therefore, to inquire how women feel about pregnancy centers. It was not our intent to criticize other marketing techniques, but this significant body of findings could be of value to PRCs.

One of the strengths unique to Hanon McKendry - and the reason why the agency was selected for this project - is their proprietary methodology with proposition testing. Statistics were presented to the focus groups, all of which were from sources credible to the women, such as university studies, the Centers for Disease Control, the Alan Guttmacher Institute, and NARAL. The propositions were measured for believability so that these could be used in creating the new Life Ed campaign.

Hanon McKendry also tested statements to create invitations for women to come to PRCs. It was interesting that the women studied viewed PRCs with distrust, even not knowing that PRCs are pro-life. The older women were leery of agencies whose advertising was too “touchy-feely” using words like “caring” or “compassionate.” They suspected the agencies of having a hidden agenda and that counselors would judge them and give them biased information. They had established health networks in place and the financial resources to consult with their own physicians, so they would not turn to PRCs just because of free services. They also thought that only poor people needed outside help but not those with careers and sophistication.

The younger women, on the other hand, responded to relational invitations (e.g., “we will listen to you”), and they liked that someone would try and understand and help them, but advertising that sounded clinical turned them off. Obviously market segmentation is necessary with communications.

Overall, women were highly suspicious of pro-life agencies and concluded they were being drawn into situations not open to women’s true needs. They would turn to their own support relationships to reinforce an abortion decision, and their supporters were trusted as truly caring and compassionate. They were quick to stand up and defend their perceived pro-choice position if they felt confronted by pro-life rhetoric.

### **Next Research Steps**

Life Ed knew, in order to reduce abortions, we must speak to women even younger than our previous target audience ages (18-34) and certainly before they were in an unplanned pregnancy. The new target audience was identified as women ages 16-24 and skewing younger (ages 11-15) since younger girls emulate the older. Younger women, ages 16-24, are the most abortion-minded, being less mature, practicing reckless behaviors, and being the least ready to parent a child. They also are more likely to be influenced (still formulating their attitudes and behaviors) are more open to outside help, and are less hardened to pro-life messages. Furthermore, as is well known, abortion advocates and providers target them.

The research did not end with the focus groups, however. After that, Hanon McKendry conducted an in-depth social science study into young American women’s culture, a necessary step to cross check the focus group research findings and expound the information. As a cultural, anthropological discovery exercise, insights were taken from many sources, among which were existing primary research and publications, population and demographics profiles for single females 16-24, abortion data and trends, medical and epidemiological reports, sexuality trend studies, and pop culture communications and websites. Abortion providers and advocacy

groups' communications and strategies were very important to examine also.

Information from this thorough examination was as invaluable as the focus group research. The focus groups analysis observed abortion-minded women, but the Life Ed mass media campaign will reach the public, including young women, regardless of predisposition on abortion values and regardless of their current level of sexual activity. All young women deserve to see the Life Ed marketing because they also are influenced by their milieu. We want to shape many young women's values now, before they adopt cultural norms.

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### *Media Consumption*

Once the target audience was determined, it was important to study media consumption of this demographic group. Television did not place as highly as did other media, like radio, magazines, and the Internet. Mass media is so very powerful, and it is appropriate that the pro-life movement has entered this arena. Misplaced messages, no matter how well crafted, will be ineffective and an unwise use of donor dollars.

When studying marketing to the 11-24 year olds, it is important to recognize that they actually enjoy this; advertising is a form of entertainment. Education or a call-to-action cannot be too overt, however, because media-savvy youth don't want to be told what to do.

### *Cultural Pressures*

It also was important to study cultural influences our target demographic group. With the breakdown of the family, young people are taking their cues for behavior and decision-making from the culture.

Children are prematurely sexualized, exposed to sexual content

at very young ages via the Internet, television, magazines, movies, music, and more. Schools introduce sex education in grade school, distribute condoms beginning in middle school, and provide private, on-site medical clinics for sexual counseling and treatment by high school.

Pornography has infiltrated mainstream America and is now widely available regularly in homes through network and cable TV and the Internet, in retail book and convenience stores, and elsewhere.

### *Behaviors*

Traditional roles of men and women have become blurred; there is a greater sense of equality, interdependence, and uniformity. However, young women are demonstrating their equality by often matching or besting men in behaviors, including sexual promiscuity.

Women are engaging in extreme behaviors including: deep kissing as flirtation, oral sex, countless sexual partners, group sex, sex in public places such as schools and school buses, hook-ups (everything from kissing to intercourse with either no knowledge of the partner or no expectations of a relationship), bi- and homosexuality, friends with benefits (intercourse with no expectations of committed relationships), and sexually stimulating dancing.

### *Spirituality and Morality*

Another significant factor studied was the spirituality of the target audience. Moral relativism and post-modern/post-Christian mindsets leave women with no framework for decision-making. We in the pro-life movement forget how we used to think before Christ transformed our own worldview. PRC counselors have practiced skill sets related to how to speak to clients, but the Life Ed research reveals today's women are changing dramatically and swiftly. Perhaps the following insights could be helpful in counseling settings - insights drawn both from the focus group study and the cultural analysis.

Counselors can establish client relationships more easily if they

are well versed in the foreign culture of today's women. Clients will view counselors to be on their side if they affirm the clients' independence and commitments to their values of freedom, choice and rights. Counselors will use personal language rather than institutional or religious terms. The Life Ed research showed women are still looking for core values of love, respect, acceptance, a sense of purpose and meaning, and peace of mind. Wise counselors will tap into these, not moral imperatives which are not shared by clients. When needed, discussions are grounded in rational thought and use facts. They focus on the situation, not the abortion. Counselors avoid absolutes like "always," "never," and "everyone" as well as emotional exaggerations or trigger words such as "moral," "killing," or "pro-life." They avoid sounding didactic or preachy.

Women, especially the younger set in the Life Ed study, were oblivious to consequences of their actions. Feeling good about a decision was valued above making a wise decision. The Life Ed study revealed women were willing to risk the harmful effects of sexual activity for the perceived benefits. It is difficult to gain women's agreement that they are at risk for unintended pregnancy, abortion, and STDs by frequent sexual activity.

Our culture is jettisoning religion. Absent moral direction, young people are writing their lifestyle scripts from the world around them. Some seek spirituality, although it is largely apart from traditional, orthodox Judeo-Christian values. Spirituality is preferred when unconstrained by moral imperatives. Each woman is doing what she sees as right in her own eyes, although she will respect another viewpoint as "fine for you." Tolerance is valued more highly than biblical precepts which are deemed judgmental, intolerant, narrow-minded, or bigoted. In a counseling setting,

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women are, however, open to the Gospel message, but this should be handled wisely and in the context of relationship, not by rote prescription.

Women are very open to receiving fact-based information, particularly as related to their own physical health. They will quickly disconnect anything they perceive as preachy or manipulative. Presenting factual information to women in their own best interest neutralizes preconceived polarizing arguments about abortion.

Most reacted positively to statistics demonstrating that those who are sexually active are at risk of becoming pregnant or contracting an STD. Statistics seemed to work better among the younger, less experienced women. Statistics must be used judiciously, however. The use of statistics often was negatively associated with the pro-life movement. Some women were surprised by how prevalent abortion was; however, others thought the large numbers made abortion commonplace, socially acceptable, and justifiable.

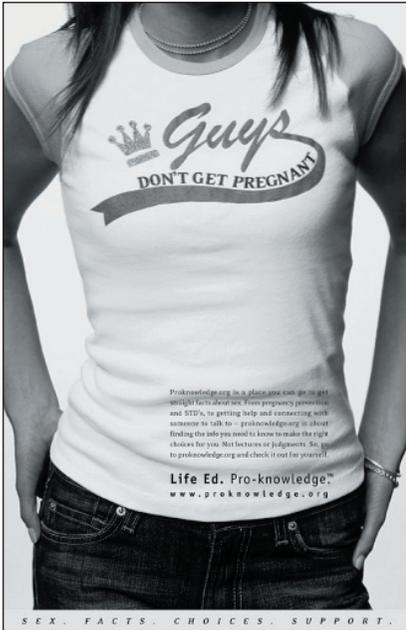
### **Insights; Pro-Active Pro-Life**

- There will always be a need for helping women in crisis pregnancies, even if, by some miracle, legalized abortion was reversed in nations. To prevent the greatest number of abortions, however, the pro-life movement as a whole must embrace the paradigm shift to speak pro-actively into young people's lives rather than waiting until the crises of unwanted pregnancies.
- The best communications with abortion-minded women will only be created by studying their worldview and not assuming we know their mindset. The most insightful findings will result from professional services, not do-it-yourself focus groups or brainstorming with women of a pro-life mindset. It also is critical to research women's media consumption and meet them there. High quality messages must be used to compete with the culture's destructive sexual messaging and to break out of the clutter.

The pro-life movement can no longer speak the messages we want to hear and the messages we think will work.

Particularly with the ready availability of chemical abortifacients like RU 486 and the morning-after pill, the pro-life movement will need to become even more savvy about how to speak to women and draw them into PRCs.

- An ancillary paradigm shift is necessary - donors and the pro-life movement must recognize the large financial investment required for optimum public communications and advertising.
- Use of the Internet is extremely important. The full body of Life Ed research culminated in an award-winning multimedia campaign, Proknowledge®, with outdoor billboards and bus signs, college newspaper print, high school posters, magazines, palm cards, tee shirts, and radio spots. All components point to the website [www.proknowledge.org](http://www.proknowledge.org). On the Proknowledge site young people will find information, advice, and answers about important issues they face daily. Flowing from the research, the campaign and website are designed with an abstinence message without overt pro-life and religious concepts, positioned as informative, non-judgmental, and non-threatening. Young women are an Internet-savvy generation that prefers to turn to the web for information, particularly sexual information. PRC websites with fresh, culturally appropriate content will lend credibility to centers and draw clients.
- Care Net previously has studied abortion-minded women in the throes of unplanned pregnancy, most of which had already visited a Planned Parenthood or abortion clinic. The Life Ed study is another helpful step in understanding women who would not consider coming into PRCs, but further research needs to be conducted with the stated goal of understanding how to draw these women.
- Adoption professionals should be encouraged to educate the public about the benefits of adoption.



The Proknowledge campaign features a series of posters, billboards, and print ads designed to encourage young women to be fully informed about the possible effects of their choices.

<sup>1</sup> Defined by Focus on the Family's Physician Resource Council, the terms "abortion-minded" and "abortion-vulnerable" are used by pregnancy centers to assess the abortion-vulnerability of clients based on stated intentions and other relevant criteria. An "abortion-minded" woman is one who appears to be planning or intending to obtain an abortion. An "abortion-vulnerable" woman is one who by continuing her pregnancy faces obstacles that she may feel incapable of handling or unwilling to experience. The term "abortion-minded" in this article is frequently used to describe a woman who, while not pregnant, would likely plan an abortion if she were.

<sup>2</sup> It must be noted that, in years prior to the creation of the Option Line, it was difficult to determine the percentage of calls attributable to the television advertising, since the pregnancy centers also advertise in other media, and many clients come to the centers because of referrals. Because of the power of mass media, and because of the increase in client calls when the television ad campaign began, it is safely assumed that television advertising was a significant factor. Also, from years before the Option Line, it was difficult to determine the nature of the calls, i.e., client-related, administrative, opinion, etc.