



2022 National Clinic Violence Survey

Conducted by:
FEMINIST MAJORITY FOUNDATION

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**FEMINIST MAJORITY FOUNDATION
NATIONAL CLINIC VIOLENCE SURVEY 2022**

EXECUTIVE SUMMARY

The 2022 National Clinic Violence Survey is the 16th comprehensive nationwide survey of women's health clinics conducted since 1993 by the Feminist Majority Foundation. Conducted in an unprecedented time for providers and abortion clinics across the nation, the survey was first mailed to clinics a month after the devastating *Dobbs v. JWHO* decision that overturned nearly 50-years of a recognized federal constitutional right to abortion in the United States.

Violence Following the Dobbs Decision

38% of clinics reported they noticed an increase in harassment and violence at their facility following the Dobbs decision.

In the weeks and months directly following the *Dobbs* decision, clinics across the country experienced a rash of attacks as extremists became even more emboldened: on July 7th, three extremists invaded, disrupted, and obstructed two clinics in Atlanta, Georgia; on July 13th, six individuals associated with Operation Save America (OSA) blockaded a clinic in Grand Rapids, Michigan. On July 26th, OSA affiliated extremists attempted to invade and did obstruct a clinic in Mt. Juliet, TN. On July 28th, three other individuals associated with OSA invaded the building of, attempted to breach and did obstruct a clinic in Mt. Juliet, TN before traveling and attempting to invade another facility in Nashville, TN. When arrested, one individual was carrying a loaded shotgun. On August 4th, 2022 a man committed arson at a clinic in Kalamazoo, MI.

This year, on January 15th, an individual firebombed a clinic in Peoria, IL causing significant damage; and on May 20th, an extremist with ties to national groups nearly destroyed a future clinic building with vehicular ramming and attempted arson in Danville, Illinois

Violence Reported in 2022 is Second Highest in Over Two Decades

Amidst this chaotic backdrop, the percentage of clinics reporting the most severe types of violence and threats of severe violence increased and remains dangerously high.

Almost a third of clinics surveyed (31%) experienced one or more types of severe violence and threats of violence in 2022. In 1993, the first year of our survey, over 50% of participating clinics experienced severe violence. Following passage of the FACE act in 1994 and enforcement actions by federal and local law enforcement, the percentage of clinics impacted by severe violence decreased to less than 30%, and hovered around 20% before spiking in 2016 to 34%. This increase followed the 2015 release of surreptitiously recorded and deceptively edited propaganda films targeting physicians and clinics, as well as a mass shooting by an extremist at a Colorado Springs CO clinic that killed three individuals and seriously wounded nine others.

The percentage of clinics experiencing severe violence in 2022 is likely much higher than our Survey results suggest. Many of the clinics located in the South and Midwest experiencing the highest levels of violence and harassment over the past few decades were unable to participate in the survey due to state bans forcing their closure or service suspension immediately following the *Dobbs* decision.

A Resurgence in Coordinated Clinic Obstructions and Invasions, Anthrax Hoaxes, and Severe Harassment

Responding clinics reported a significant increase in specific forms of violence and intimidation. **For example, 16.2% reported blockading of clinic entrances versus 9.1% in 2018. Several clinics reported Anthrax hoax letters, and 7.8% of clinics reported being invaded.**

Anti-abortion extremists identified with Red Rose Rescue, Operation Save America, and Progressive Anti-Abortion Uprising coordinated numerous blockades and invasions in 2022 – and continue to do so in 2023 -- as part of an effort to reignite large scale disruptions of reproductive health care services.

Fake Clinics Are Connected to the Proliferation of Violence Against Abortion Facilities

A large percentage of clinics, 67.4%, reported fake clinics or so-called “crisis pregnancy centers” located near their facility. **Clinics located near a CPC are more likely *now than ever before* to experience high levels of violence and harassment. Forty- one percent (41%) of clinics located near a CPC reported high levels of violence and harassment in 2023 compared to 21% in 2018.**

This shows fake clinics not only confuse patients, but they are connected to increased violence and harassment targeting actual reproductive health care providers. Frequently, these deceptive facilities act as staging grounds and surveillance opportunities for anti-abortion protestors.

The War of Attrition: Violence, Harassment, Frivolous Lawsuits, and Targeted Intimidation

Clinics are facing an onslaught of anti-abortion tactics designed to disrupt or eliminate the provision of abortion care. Doctors and staff are targeted with threatening WANTED-style or KILLERS AMONG US posters, flyers, mailers, memes, and social media posts; these materials or posts feature photographs of staff along with their home addresses, places of work or worship, names of family members, and other private information. Protesters target some physicians and staff with protests at their family homes. Extremist groups offer financial “rewards” or cash payouts for clinic staff to quit while simultaneously promoting websites like Abortiondocs.org where doctors and staff are profiled with detailed information about their medical licenses,

practice locations; anti-abortion adherents are encouraged to help gather videos, photographs, and other information on clinic staff.

In addition to these forms of intimidation, legal harassment is on the upswing. Right wing law firms that specialize in aggressively representing anti-abortion extremists are filing a flurry of cases in state and federal court – or intimidating municipalities out of protecting clinics and the communities they serve. These firms include Life Legal Defense Fund, The Thomas More Society, Alliance Defending Freedom, and the American Center for Law & Justice.

Ten percent (10%) of clinics reported physicians or staff being stalked, 22.5% reported harassing phone calls, 28% were targeted with pamphlets and leaflets, 11.6% received harassing emails, 16.3% reported harassing social media posts and the posting of staff and patient photos on the internet, 6.2% reported death threats, 3.9% reported threats to their family members, and 17% reported frivolous lawsuits.

The extremist wing of the anti-abortion movement is engaging in a war of attrition. Relentless harassment and violence impacts security and legal costs for clinics and presents challenges to hiring and retaining staff, especially doctors; clinics must often recruit doctors from outside their region to travel to their clinic at great expense. Additionally, states, counties and municipalities continue to pass restrictive and hostile laws escalating pressure on clinics. As a result, clinics have been forced to close.

Independent clinic closures pose a significant threat to abortion access - an alarming trend that preceded the *Dobbs* decision and has now reached a critical point. Since 2017, the Abortion Care Network (ACN) has identified 133 independent clinics forced to close or stop providing abortion. Anti-abortion harassment and violence, state restrictions, increased costs and other financial barriers are making it difficult for clinics to stay open. **According to ACN, even though online-only clinics have increased since 2020 and there are a handful of brick-and-mortar clinic openings, the overall number of brick and mortar independent clinics in the US has decreased by 35% from 2012 to 2022.**¹ At a time when 14 states have no abortion clinics and women are being forced to travel greater distances and delay care, the paucity of brick-and-mortar independent clinics able to provide surgical abortions, including abortion care after the first trimester, is creating an even more dire health care crisis.

¹ See <https://abortioncarenetwork.org/wp-content/uploads/2022/12/communities-need-clinics-2022.pdf>

Patients, their Companions and Staff Face an Increase in Disruptive Protests while Accessing or Providing Abortion Care in most of the Country

Sixty-nine percent (69%) of responding clinics reported experiencing daily or weekly disruptive protests targeting their facility. This means these facilities, their staff, and their patient communities are experiencing harassment and intimidation as they seek or provide this fundamental health care. This is an increase from 2018, when 62% of responding clinics reported daily or weekly protests.

METHODOLOGY

The National Clinic Violence Survey, which measured the incidence of anti-abortion violence in the first six months of 2022, was mailed to 761 clinics in late July 2022. We added a new question and asked clinics to report on violence and harassment following the *Dobbs* decision.

The survey is the most comprehensive longitudinal study of anti-abortion violence, harassment, and intimidation directed at clinics, patients, and healthcare workers. It includes information provided by abortion providers of various national organizational affiliations, such as the National Abortion Federation (NAF), Planned Parenthood Federation of America (PPFA), and the Abortion Care Network (ACN), as well as independent, unaffiliated clinics.

Providers were mailed the questionnaire and given the option to respond online through an identical survey instrument. A series of three follow-up calls to each clinic were made over the next several months to urge clinics to complete and return the survey. An email containing a link to the survey was also distributed by ACN to their member clinics. As a result of the challenges facing many of the clinics including closure, ongoing legal battles, short-staffing, and overwhelming increase in appointments at clinics in safe states, a total of 129 providers responded to the survey. All respondents were assured that their individual responses would remain confidential.

As a result, there are some limitations to the data that was collected. Notably, most clinic respondents were from states where access was not disrupted or discontinued due to the *Dobbs* Supreme Court decision. As such, clinics that experienced some of the worst harassment and violence in hostile states during the first 6 months of 2022 did not respond to the survey. Due to the nature of these challenging times for clinics and providers and allowing for the constantly changing status of several clinics in a number of states, the period for response and follow-up calls was extended, until December of 2022.

Chart 1

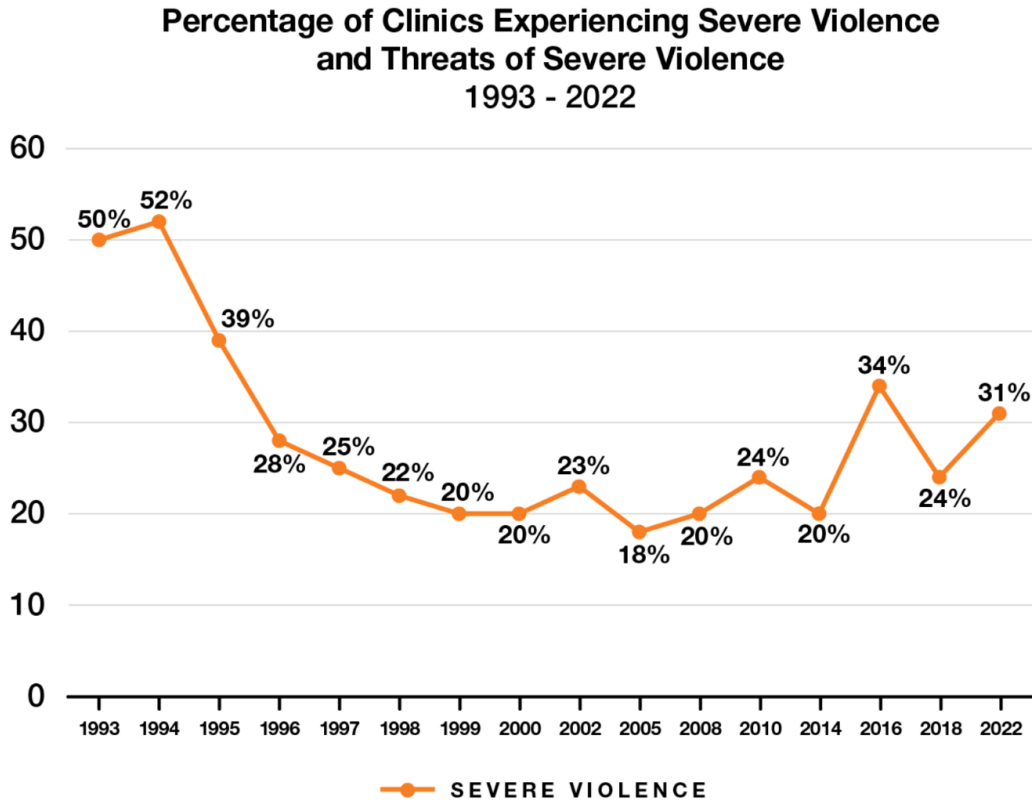


Chart 1 shows the percentage of clinics experiencing severe violence and threats of severe violence. 31% of clinics in 2022 reported experiencing one or more incidents of severe violence or threats of severe violence, the second highest reported since 1996, exceeded only by the 34% of clinics reporting one or more incidents in 2016. Severe violence and threats of severe violence included blocking clinic access, invasions, bombings, arson, chemical attacks, stalking, physical violence, gunfire, bomb threats, death threats, arson threats, as well as other incidences of severe violence. The most common types of severe violence reported in 2022 included blockading of clinic entrances (16.2%), stalking (10%), facility invasion (7.8%), and death threats (6.2%).

Chart 2
**Clinics Experiencing Moderate or High Levels of
 Severe Violence, Threats of Severe Violence, and
 Severe Harassment**
 1993 - 2022

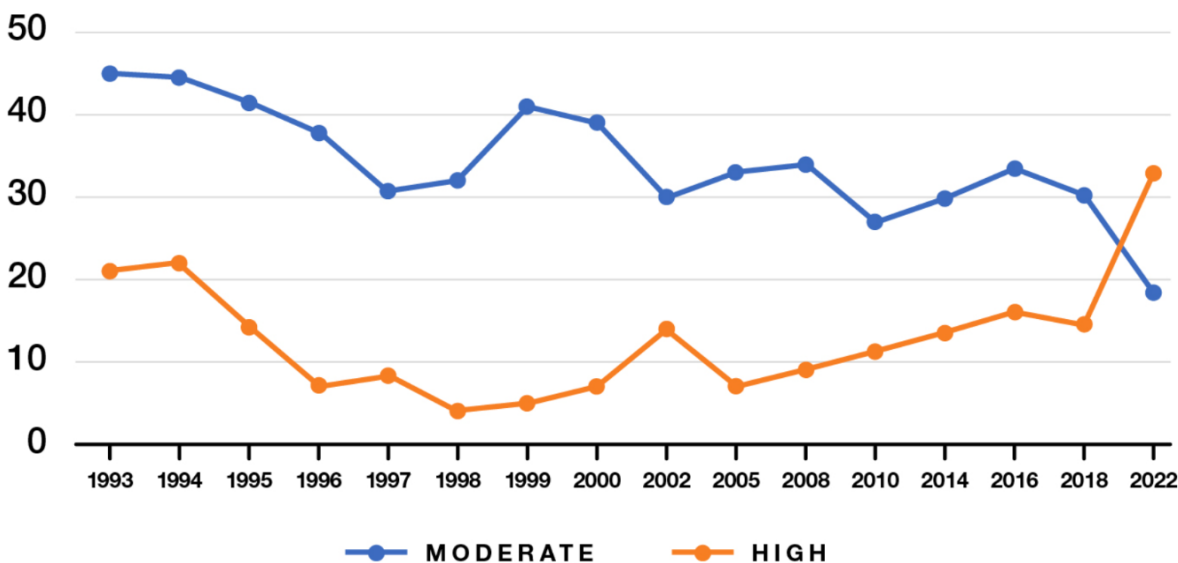


Chart 2 indicates the concentration of severe violence, threats of severe violence, and severe harassment of clinics in 2022. 32.6% of clinics experienced high levels (three or more incidences) of severe violence, threats of severe violence, or severe harassment. This is an increase of over 15 points from the 15% reporting high levels of severe violence in 2018, the last time the survey was conducted. 18.6% experienced moderate levels (1-2 incidences) and 48.8% of clinics did not experience any incidents.

Some clinics described incidents of severe violence and harassment, including one threat of a mass shooting at the clinic, the emergency exits being blocked, and threats to a physician during a clinic invasion. Some of the more common types of violence and harassment include phone calls to the clinic with threatening messages, trespassing into the clinic or onto clinic property, and extreme verbal harassment by anti-abortion protestors.

Chart 3
Percentage of Clinics Experiencing Targeted Threats and
Intimidation Against Doctors and Staff and Percentage
of Clinics Experiencing Severe Violence
2016 - 2022

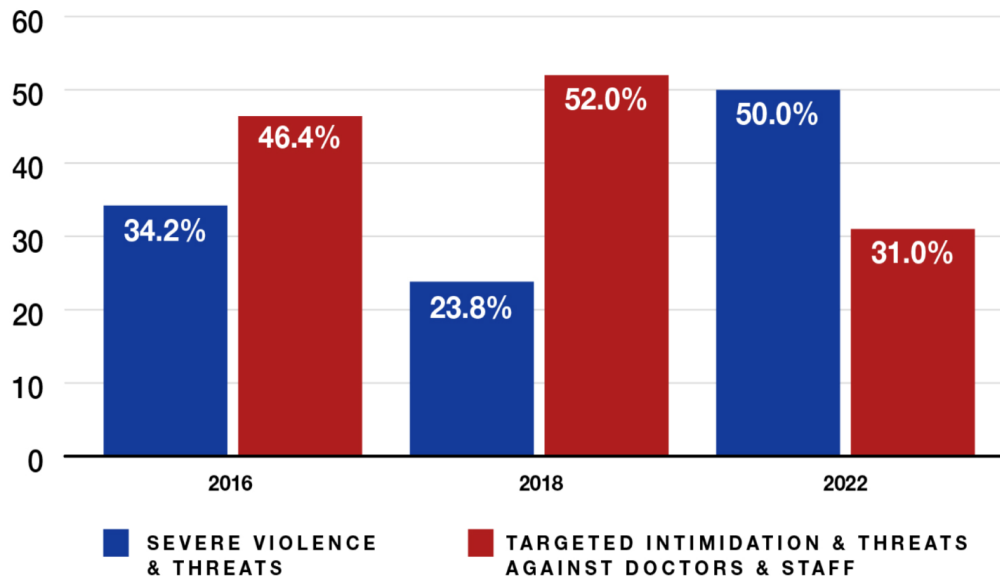


Chart 3 shows that half, 50%, of clinics responding to the survey indicated that their doctors and staff experience targeted intimidation and threats. These percentages have remained relatively consistent since 2014. Targeted threats and intimidation is defined to include twelve variables: death threats, stalking, tracking of activities, vandalism of home or personal property, harassing phone calls, harassing emails/social media posts, pamphlets/leaflets targeting staff and physicians, personal information/pictures posted online, “WANTED” or “UNWANTED” posters, frivolous lawsuits, and threats to family members of staff or physicians.

The most common types of targeted threats and intimidation were pamphlets and leaflets that target staff/physicians, harassing phone calls, harassing social media and website posts, and tracking of staff and physician activities. 28% of all clinics experienced anti-abortion protestors distributing leaflets and pamphlets that target their staff and physicians. 22.5% of all clinics reported harassing phone calls to their clinic. One clinic staff reported having received a harassing text message to their personal phone.

Chart 4

**Percentage of Clinics Experiencing Anti-Abortion Activity
2016 - 2022**

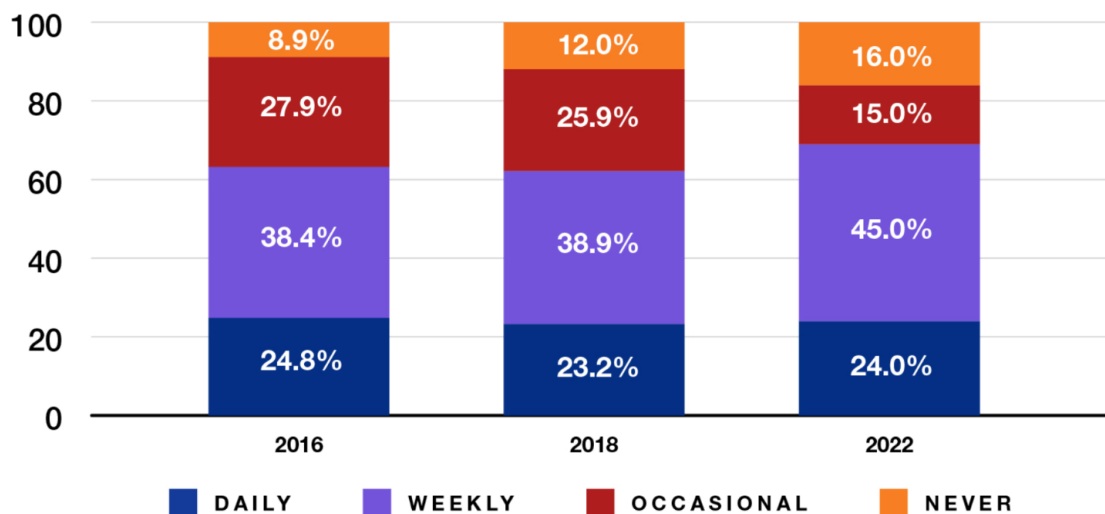
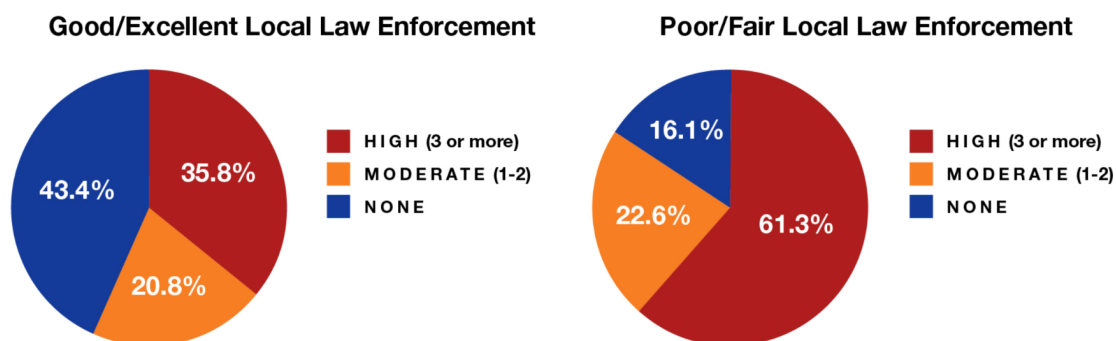


Chart 4 demonstrates that, in 2022, the percentage of clinics experiencing weekly protests increased from 2018, an 18 point increase. Some 69% of clinics reported experiencing daily or weekly disruptive protests, a 7 point increase from 62% in 2018. Daily protests remained relatively constant from 23.2% in 2018 to 24% in 2022. Clinics reported weekly protests increased from 38.9% in 2018 to 45% in 2022.

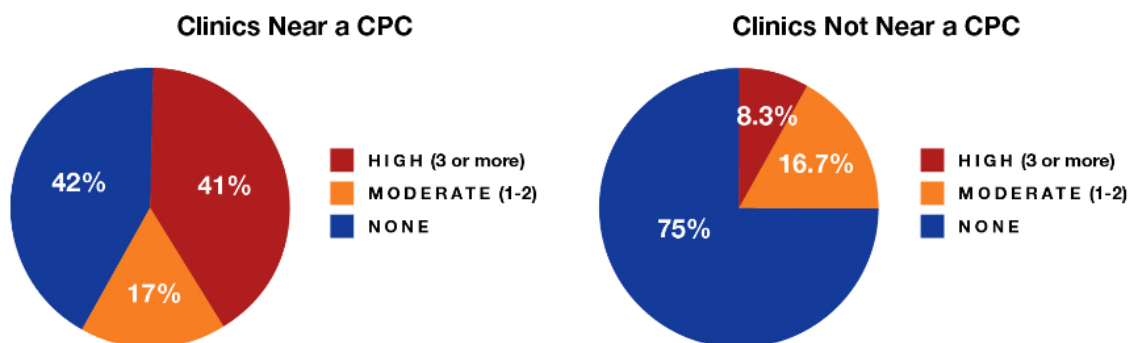
Chart 5



When clinics were asked to rate the quality of their local law enforcement, 24% of clinics that responded to the question rated their relationship as “poor” or “fair.” 41.1% rated their local law enforcement as “excellent” or “good.”

Clinics that reported “poor” or “fair” relationships with law enforcement were nearly twice as likely to experience high levels of reported severe violence at 61.3% compared to just 35.8% when the relationship with law enforcement was “good” or “excellent.” In addition, when the relationship was “good” or “excellent” 43.4% of clinics reported no violence, compared to 16.1% of clinics with a “poor” or “fair” relationship.

Chart 6



Over half of the clinics that responded indicated that they are located near a CPC: 68.2% compared to 18.6% that responded they are not near a CPC (13.2% responded “I don’t know”).

Clinics that are located near a CPC are significantly more likely to experience high levels of severe violence and harassment, 41% compared to clinics not near a CPC (8.3%) and a significant increase from 2018 when 21% of clinics located near a CPC experienced high levels of violence and harassment. CPCs are often used as a staging ground and headquarters for anti-abortion threats and harassment, and are frequently used as a means to surveil the clinic and the movements of staff and patients.