Comment Report

HF 515
A bill for an act creating an alternatives to abortion program, and making an appropriation.

Subcommittee Members: Osmundson-CH, Boden, Wessel-Kroeschell

Date: 02/17/2021
Time: 12:30 PM
Location: RM 19

Name: Emily Sigler

Comment: Please oppose this bill. These CPC facilities are dangerous and these funds should go to actual health care facilities that are not religiously backed where they can fund and assist people who are in need of actual healthcare, not shame and trauma.

Name: Caroline Schoonover

Comment: Growing up in the Des Moines area I saw signs for places like Agape and Birthright in the most neglected, diverse, and poor neighborhoods in the city. As a child I assumed that these places helped out expectant mothers, maybe providing food or baby clothing or medical advice. As an adult I've learned that these "alternative to abortion" programs more accurately called fake clinics provide all of these things, but with harmful and dangerous strings attached. Although Innervisions, Alpha Women's Center, Agape, and Birthright claim to provide medical assistance, they are not licensed health clinics. The "free" ultrasounds they claim to provide as a way to lure poor and desperate pregnant people in to their clinics are not medically professional and can not be used in any real doctor's office. They do not abide by HIPPA and other medical privacy laws. They are fake clinics.Often these "alternative to abortion" programs lie to pregnant women about their options. Many clinics have been known to talk people into keeping pregnancies they cannot take care of or do not want for many reasons despite abortion being fully legal in Iowa. Shame is regularly used as a tactic to convince vulnerable people to stay in abusive relationships "for their child" or cancel an abortion appointment for fear of religious persecution. Once babies are born many people who were promised help from these fake clinics report not getting the financial or material assistance that they were promised. Again, strings are attached to the promises that these clinics make, which no person who is pregnant and seeking help deserves. So often these fake clinics target and harm the most desperately in need of help in our communities through lies, shame, and coercion. I urge the subcommittee to vote against HR 515. The considerable resources being proposed to uphold these harmful institutions and make them overextension of state reproductive policy would be much better put to use serving the direct material needs of the thousands of Iowans who go to bed hungry, cold, sick, or without shelter every night. Again, I urge you to vote against HR 515.

Name: Adam Sparks

Comment: This bill is an underhanded excuse to undermine womens reproductive rights under the guise of helping them. This money should be put toward reputable womens health organizations that give the full scope of their options.

Name: Nicole Rhodes

Comment: This is a wildly inappropriate use of state funds. The irony of pending almost $900,000 to discourage people from accessing safe health care in the middle of a pandemic is disgusting.

Name: Adam Callanan

Comment: Crisis Pregnancy Centers are private institutions that lie to people about their own health. They are dangerous on their own and giving public money to these groups is unacceptable. Iowa needs more healthcare, not fake clinics that hurt and harass pregnant people.

Name: Travis Smith

Comment: I strongly oppose Crisis Pregnancy Centers. Women have the right to competent healthcare and science based guidance. The state should not be supporting religious groups to have state supported fake clinics. This bill is aimed at expanding patriarchy which harms all people women, children and men.

Name: Claire Mraz

Comment: These abortion alternatives are nothing more than coercive organizations mimicking safe and reliable healthcare centers in order to shame pregnant people into continuing pregnancies they do no want. Abortion is a legal medical procedure in Iowa and funding a project that aims to market to and target pregnant people in order to convince them out of their decision to have an abortion is wrong. I strongly oppose HF515 and urge you to stop this legislation from moving forward. Iowans can be trusted to weigh their options and choose appropriately for themselves whether they wish to be pregnant, parent, or neither.

Name: Priscilla Raile

Comment: Oppose the HF 515 bill CPCs shame and mislead pregnant persons to block them from accessing abortion care! Free abortion, on demand, without apology!

Name: Sandy Wilson

Comment: Citizen Engagement is registered IN FAVOR of this bill.

Name: Michael Kitzman

Comment: Crisis Pregnancy Centers are bad for Iowa, bad for women, and just plain bad! Women who seek healthcare should not be bullied. Imagine if you needed your leg amputated and you went to a clinic that made you wait three weeks and watch a movie about how Jesus doesnt like it when we amputate legs. Furthermore, the state should not be sending funding to religious organizations.

Name: Delfina Rose

Comment: This is absolutely terrible for anyone that needs their reproductive rights protected. Nobody should have to be told what is OK for them to do when it comes to their body. As a citizen who could literally die from childbirth because of a syndrome i was born with that does not make my body fit to give birth, abortion is necessary for millions like this and for other reasons. Honestly I shouldnt even be listing reasons to prove it because point blank IT SHOULDNT MATTER. Let people do what they please if it does not affect you in any way. This is one of those things. You will be endangering millions with this.

Name: Jamie Burch Elliott

Comment: Im Jamie Burch Elliott, lobbyist for Planned Parenthood North Central States and Planned Parenthood Advocates of Iowa. We are opposed to HF 515. This bill would spend nearly $880,000 taxpayer dollars on an Alternatives to Abortion program that promotes childbirth in Iowa. The funds would go to Crisis Pregnancy Centers, whose mission is to prevent people from accessing the full range of sexual and reproductive health care options, including abortions. They provide false and misleading information not medical care. These Crisis Pregnancy Centers have a long and documented history of misleading women and mispresenting themselves as legitimate medical providers. CPCs are storefronts that use false information and misleading advertising, along with the offer of free pregnancy tests or other services to lure women into their offices. Their goal is to dissuade women from obtaining an

abortion, often by providing information that is meant to scare or shame them. Investigations in California, Maryland, Massachusetts, Minnesota, Missouri, New York, North Carolina, Texas, and Virginia all have documented CPCs intentionally misleading practices. Many of those investigated gave women inaccurate information, including that birth control and abortion increase the risk of infertility and breast cancer, that condoms are ineffective in reducing pregnancy and the transmission of certain STDs, and that abortion causes mental illnessWhere programs such as this exist, financial oversight of taxpayer funded crisis pregnancy centers is severely lacking. In some states, there is no transparency where the money given to the centers is going or how it is being spent. In Pennsylvania, one PRC faced no repercussions when it lost track of over one million taxpayer dollars. Iowans deserve access to legitimate health care. We can all agree that a woman deserves quality, medically accurate care when shes pregnancy or thinks she might be. Anyone seeking health care services should receive comprehensive, unbiased, medically and factually accurate information. Women facing pregnancy deserve no less. The information and counseling provided by CPCs often put womens health and lives at risk. Even if women seek information voluntarily, it should always be clear to a woman whether she is receiving legitimate medical care or not. A medical provider or counselor should never try to shame someone or pressure then into making a different decisions based on their own personal beliefs.

Name: Frieda Bequeaith

Comment: As a nonprofit youth worker, sexual health educator, alloptions counselor, and a human that can get pregnant I strongly oppose HF515. This bill allocates a huge amount of money to private organizations that harm pregnant people. Crisis Pregnancy Centers (CPCs) are not licensed healthcare facilities. They are not clinics where women can go for healthcare, they do not abide by HIPPA regulations, and they are not staffed with licensed healthcare professionals. Despite this, they present themselves to the community as a resource for healthcare. When I became pregnant at the age of 15, I reached out for help. I researched my options, and I called a number I found online. I now know that number belonged to a Crisis Pregnancy Center. CPCs are religious organizations that pose as healthcare clinics to target vulnerable pregnant people. They lie to, shame, and intentionally mislead people about their healthcare options. This is part of a private agenda to prevent people from seeking abortions, birth control, and having premarital sex. When I interacted with one, they blamed me for the situation I was in and lied to me about the risks of abortion. It left me feeling ashamed, isolated, and led me to believe I could not access a safe abortion without severe consequences.To illustrate the likelihood of my experience: In the city of Des Moines, we have 8 Crisis Pregnancy Centers. In the state of Iowa, we have at least 200 Crisis Pregnancy Centers. Pregnant people deserve access to factbased, nonjudgmental, and compassionate healthcare. CPCs do not provide this. These funds should instead go towards many of the evidencebased healthcare measures that ensure healthy pregnancies. Before advancing this bill, I urge all members of the subcommittee to read NARAL's 2015 report on the harm CPCs cause, attached to this comment. Thank you.

CRISIS PREGNANCY CENTERS LIE:

THE INSIDIOUS THREAT TO REPRODUCTIVE FREEDOM

NARAL Pro-Choice America

CRISIS PREGNANCY CENTERS LIE:

THE INSIDIOUS THREAT TO REPRODUCTIVE FREEDOM

INTRODUCTION

The American anti-choice movement has built thousands of outposts across the country with the sole purpose of preventing women from accessing abortion (through lies and coercion,) and they're hiding in plain sight.

They're called crisis pregnancy centers (CPCs), and behind the doors of what are designed to look like full-service health clinics, ideologically motivated staff members deceive and manipulate women with dangerous misinformation. They consider themselves the foot soldiers of the anti-choice movement.

Anti-choice organizations claim more than 3,500 of these fake clinics are in operation across the country, far outnumbering the ever-dwindling number of abortion clinics.[1] A disturbing number of these anti-choice CPCs receive taxpayer funding to shame and manipulate women who seek medical attention and never get it.[2]

For too long, CPCs have operated in our communities with impunity. In more than 10 states, NARAL affiliates have conducted undercover investigations documenting the scare tactics, lies, and deceptions of CPCs. This report will provide a closer look at these shocking abuses.

We believe every woman in this country deserves accurate, unbiased medical advice, no matter her situation in life. It is time to recognize CPCs for what they are: a grave threat to a woman's right to choose.

CRISIS PREGNANCY CENTERS: THE BIG PICTURE

It can start with a billboard or an ad on a bus: "Pregnant? Scared? Need Help?" A clinic with a neutral-sounding name offers free pregnancy tests and confidential counseling.

A woman seeking an abortion or, at the very least, accurate medical advice about her unintended pregnancy, enters what looks like a typical women's clinic. If she calls to make an appointment and asks about abortion, she is given vague or confusing answers, and told to come to the clinic to discuss in person.

Once she's inside the doors of a CPC, the unsuspecting woman has an experience that's a far cry from what's promised in the misleading ad campaigns or over the phone. CPC representatives unleash a documented pattern of deception, coercion, and misinformation to discourage her from abortion, contraception, and comprehensive, medically accurate counseling.

"I left so confused and feeling awful. I can't stop thinking about how that would have been a terrible way to find out you're pregnant."

The result? One NARAL investigator in Massachusetts described her visit to a CPC as an "intense experience, nerve-racking, emotional." Another said, "I left so confused and feeling awful. I can't stop thinking about how that would have been a terrible way to find out you're pregnant."[3]

CPCs employ a number of tactics to get women in their doors, including strategically placed online and offline advertisements, locations near comprehensive women's health-care clinics, and even state-sanctioned referrals. The promise is always the same: counseling for unintended pregnancy.

While CPCs are cagey and deceitful with the women they target, their umbrella organizations are quite clear about their ideological agenda. These groups provide legal, financial, and personnel support to CPCs across the country in order to further their anti-choice missions.

With over 1,300 CPC affiliates, the National Institute of Family and Life Advocates states plainly on its website that it is "on the front line" of the "cultural battle" over abortion.[4] The organization's vision is to "provide [CPCs] with legal resources and counsel, with the aim of developing a network of life-affirming ministries in every community across the nation in order to achieve an abortion-free America."[5]

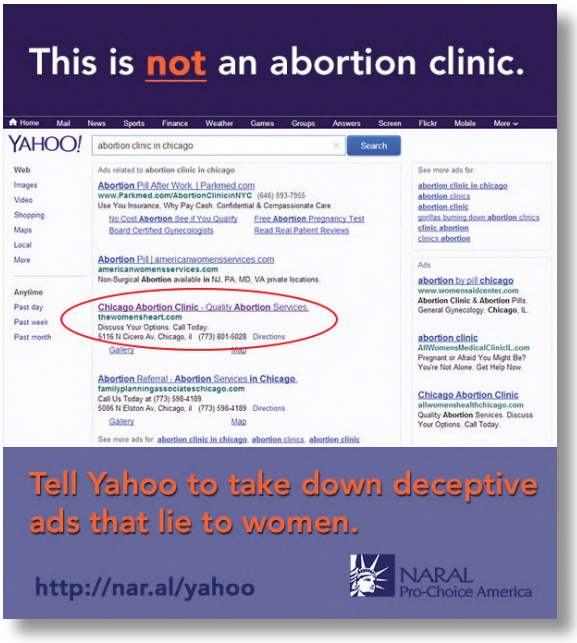
Heartbeat International, formerly called Alternatives to Abortion International, runs a network of 1,800 CPCs in the United States and globally.[6] Like NIFLA, Heartbeat is direct about its mission and ideology on its website: "Heartbeat's life-saving vision is to make abortion unwanted today and unthinkable for future generations."[7]

Care Net has a network of more than 1,100 affiliate CPCs across North America.[8] Its anti-abortion agenda is crystal clear on its website: "Care Net works to end abortion, not primarily through political action but by building a culture where every woman receives all the support she needs to welcome her child and create her own success story."[9]

Likewise, the Family Research Council is blunt about the true purpose of CPCs: "There are sharply rising numbers of women coming to [CPCs] who are not 'at risk' for abortion. These women have decided to carry their children to term and come in for material assistance or other services. … These trends could threaten the primary mission of the centers—to reach women at risk for abortion."[10]

The alarming fact remains that women who go to CPCs have no way of knowing that what looks like a typical women's clinic is in fact operated by anti-choice ideologues intent on convincing them not to choose abortion (or use contraception) through deceit and coercion.

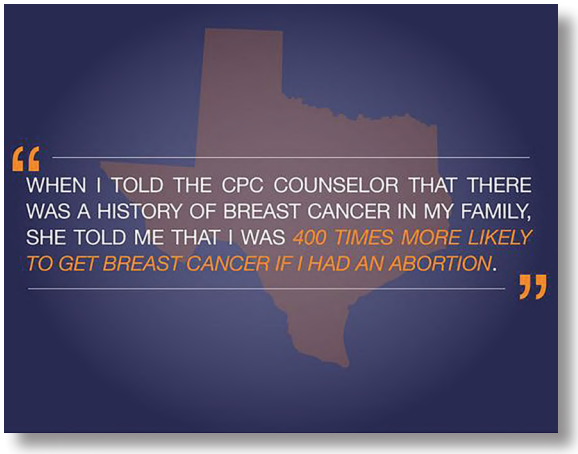
These fake clinics do not willingly disclose their true nature to their "clients," and it's not hard to see why: If women knew that CPCs existed *only* to scare them out of considering their full range of reproductive health-care options, particularly abortion, they would avoid them entirely.



CPCs employ a number of tactics to get women in their doors, including strategically placed online and offline advertisements, and locating near comprehensive women's health-care clinics

HOW CPCs LURE IN CLIENTS

Deception is at the heart of CPCs' strategy to bring what they label "abortion-minded"[11] women through their doors. Every interaction a prospective client has with a CPC is carefully designed to give the impression that the CPC is a health-care clinic that provides comprehensive, medically accurate counseling about all reproductive health-care options.



Deception is at the heart of CPCs' strategy to bring what they label "abortion-minded" women through their doors.

These strategies to lure in unsuspecting women range from ads on buses and billboards to sophisticated online campaigns. To reach their "target" audience of women they feel are vulnerable and "abortion-minded" CPCs purposely place their outdoor advertising near high schools, colleges, and low-income neighborhoods.

A billboard advertising a CPC in Helena, Mont., was located close to a high school. Such placement ensures that most young people in Helena see the advertisement and may be led to falsely believe that the CPC helps women explore all of their options.[12]

CPCs also employ online strategies to target women. All too often, when a woman types the words "abortion clinic" into a search engine, she gets results for CPCs, which use false advertising tactics to lure women to their facilities instead of actual health clinics. CPCs advertise through Google, the most-used online search engine. They take out keyword-based advertising campaigns on search engines and bid on keywords such as "abortion." Women click on the ads believing they're getting information about legitimate health clinics, but instead they're taken to the websites of CPCs. It's a bait-and-switch tactic that's proven highly effective for CPCs to lure in women who believe abortion care is part of the service they will receive or, at least, learn about.

Care Net and Heartbeat International spend more than $18,000 *per month* on pay-per-click advertising campaigns that target women searching for abortion providers and bring them to their websites and call center, Option Line.[13] Care Net and Heartbeat International place bids on more than 100 keywords, including "abortion," "morning-after pill," and "women's health clinics."[14]

Option Line is an international call-in and email center that refers women to the nearest CPC using misleading taglines such as "Pregnant? Need Help? You have options." Option Line self-reports that 450 women contact the center every day and that it has reached 1.6 million women and couples since 2003.[15]

In 2014, NARAL Pro-Choice America launched a campaign to remove CPCs' deceptive advertising from the major search engines, Google and Yahoo. Both companies received extensive documentation about CPCs' deceptive advertising techniques and how these ads violated the companies' truth-in-advertising policies. As a result a significant amount of the identified misleading ads no longer appear when searching for "abortion" or other key terms—two-thirds of these ads were removed from Google. NARAL Pro-Choice America continues to monitor the situation and provide feedback to the search engines to ensure that CPC ads cannot return.

Seventy-five percent of CPCs surveyed in New York City do not identify themselves as anti-abortion on their websites. While 37.5% explicitly state they do not refer women for abortion services, they still claim to be unbiased and provide accurate information.[16] In California, 69% of the CPCs investigated advertise their counseling as unbiased.[17]

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CO-LOCATION STRATEGIES

Another deceitful strategy favored by CPCs is co-locating either near comprehensive health clinics or in medical buildings that give the impression that medically accurate services are available. By locating near clinics that provide comprehensive information and services, CPCs purposefully try to confuse patients into mistakenly entering their deceitful clinics.

One CPC, Problem Pregnancy of Worcester, Mass., was originally on the same floor of the same building as the Planned Parenthood clinic—and cleverly used the same acronym (PP). Planned Parenthood has since moved, but Problem Pregnancy followed, relocating directly across the street.[18]

EMC Frontline Pregnancy Centers, which runs 12 CPCs in New York City, cites its locations next to, in the same building, or within a block of abortion clinics as one of its key accomplishments. From its website: "One of its centers is located across the street from Planned Parenthood, and one is housed in the same building as a Planned Parenthood abortion clinic and a second abortion Mill-Dr. Emily's, and other centers are next door to, or are down the block from other abortion clinics."[19]

Further instances of the co-location strategies of CPCs:

- More than half of the abortion providers in Massachusetts have a CPC nearby—within 10 miles, or, in Boston, within 2 miles.[20]
- Of the 15 comprehensive women's health centers in Ohio, three have a CPC within a block of their location, and one has two different CPCs within a block.[21]
- 11 of the 14 state universities in Ohio have a CPC within 5 miles of the campus.[22]

Of course, it's not just that CPCs intentionally locate near comprehensive women's health clinics. CPCs outnumber abortion clinics, and for a majority of American women, CPCs are easier to access than legitimate reproductive health clinics location wise.[23] [24]

- 95% of Minnesota counties don't have an abortion provider, but there are over 90 CPCs in the state, outnumbering abortion providers by 15-to-1.[25]
- CPCs outnumber abortion providers in North Carolina by 4-to-1.[26]
- In 2012, there were 20 CPCs operating in Montana in contrast to only four abortion providers (one of these was expected to close in 2014).[27]
- Most CPCs in Montana are concentrated in college towns and smaller rural towns with limited resources.[28]
- While 96% of Missouri counties have no abortion provider, CPCs flourish and receive tax credits from the state.[29]
- Comprehensive women's health clinics that provide abortion services are outnumbered by crisis pregnancy centers 7-to-1 in Ohio; 91% of the state's counties have no abortion provider.[30]

INSIDE CPCs: AN OVERVIEW

Many CPCs maintain the illusion that they are legitimate health providers by adopting the look and feel of unbiased, comprehensive clinics. Volunteers who are not licensed medical providers may wear lab coats and require clients to complete paperwork prior to seeing a so-called counselor.

The written materials available in the waiting rooms or handed out by CPC volunteers and staff are usually the first sign that these are not legitimate medical clinics. Seventy percent of CPCs investigated in Massachusetts handed out pamphlets that mischaracterized the risk of abortion.[3] The most common pamphlet, called "Before You Decide," describes heavy bleeding, sepsis, perforation of the uterus, scarring, and death as risks of abortion without indicating their relative likelihood, which is low.[32] This is simply a scare tactic. Contrary to what CPCs claim, a first-trimester abortion is one of the safest medical procedures, with a risk of less than 0.05% of major complications that might require hospital care.[33]

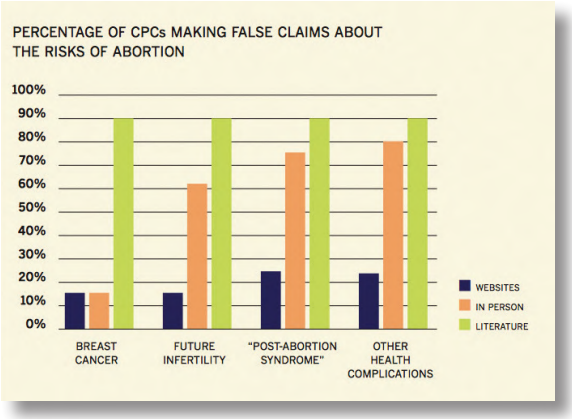
Once a client is inside, CPC volunteers typically employ a combination of well-documented scare tactics to convince her not to have an abortion. These include misinformation and lies about birth control, so-called "post-abortion syndrome," breast cancer, infertility, and more.

CPCs will also attempt to judge and shame their clients—women who came to them in search of accurate medical information about unplanned pregnancies. They administer the same pregnancy tests found in drugstores and provide no further diagnostic information. They often resort to dangerous delay tactics to make getting an abortion more difficult, expensive, or even impossible for their clients.

CPCs pose as legitimate reproductive health centers. They have a track record of outright lying to women and work to dissuade people from exercising the right to choose. They often advertise as if they provide abortion services, drawing people in by promising free reproductive health services, including free pregnancy tests, ultrasounds, and options counseling.

ABORTION RISK LIES

In order to frighten their clients into carrying a pregnancy to term, CPCs have a documented pattern of greatly exaggerating the risks of abortion. Though abortion is less risky than a tonsillectomy[34] CPCs paint a very different and terrifying picture for their clients.



Graph above: A Report on the Lies, Manipulations, and Privacy Violations of Crisis Pregnancy Centers in New York City

"The counselor said that I did not want to get an abortion and kill my baby. She stated that abortions were dangerous, had many side effects, and many women bleed to death on the table. She later commented that many women commit suicide after having an abortion."

An investigator reported that during her visit to a CPC in Montana, "the only information given was on the risks of abortion. The nurse … talked about abortion potentially causing breast cancer. … The other risk focused on was cervix incompetence. She … illustrated on the diagram how [the cervix] could become 'too stretched out' and that could lead to later miscarriages and potentially lead to not being able to have children in the future."[35]

Contrary to these claims, first-trimester abortions pose virtually no long-term risks of such problems as infertility, ectopic pregnancy, miscarriage, or birth defects and exhaustive reviews by panels convened by the U.S. and U.K. governments have concluded that there is no association between abortion and breast cancer.[36]

An investigator in Maryland reported about her experience of CPC staff trying to intimidate her away from abortion, writing that "the counselor said that I did not want to get an abortion and kill my baby. She stated that abortions were dangerous, had many side effects, and many women bleed to death on the table. She later commented that many women commit suicide after having an abortion."[37] This claim is in stark contrast to the truth: Abortion does not increase the likelihood of mental health problems, including depression.[38]

In another report, a CPC volunteer in Ohio painted a gruesome picture of abortion clinics and providers, claiming they weren't licensed, that the clinics were dirty and splattered with blood, and that the doctors only cared about making money. A local provider was called "a butcher."[39]

Further instances of false information about abortion from CPCs:

- 67% of the CPCs investigated in North Carolina gave inaccurate information about the risks of abortion, including that it is strongly associated with infertility, pelvic inflammatory disease, future ectopic pregnancies, future preterm births, excessive bleeding, and death.[40]

- Every single CPC investigated by NARAL Pro-Choice Maryland misrepresented the risks associated with abortion, and 81% of those CPCs distributed literature with false information.[41]

- 85% of the CPCs investigated in California misled women to believe that abortion is both traumatizing and dangerous.[42]

MENTAL HEALTH LIES

A very common scare tactic used by CPCs is to spread the falsehood that abortion has a negative effect on mental health. Women are told, with frightening frequency, that abortion directly results in a fictitious condition called either "post-abortion syndrome" or "post-abortion stress." No medical diagnostic manual recognizes these disorders, and experts agree that abortion does not cause mental health problems for women.[43] As Dr. Robert Blum, the senior author of a 2008 Johns Hopkins University study, put it: "The best research does not support the existence of a 'post-abortion syndrome' similar to post-traumatic stress disorder."[44]

The false assumption that abortion inevitably leads to grief and regret is a recurring theme at CPCs. In Missouri: "[The CPC volunteer] said that you might feel sad every year around the time the baby was supposed to be born, or that you might wince or react negatively when you hear a vacuum or dentist's drill." In actuality, women who are able to obtain an abortion primarily feel relief.[45]

Further examples of mental health misinformation given at CPCs:

- 55% of the CPCs investigated in Massachusetts told investigators that having an abortion would or could lead to negative mental health effects.[46]

- 54% of the CPC websites investigated in Massachusetts asserted that women who have had an abortion report emotional and/or psychological trauma or experience "post-abortion stress."[47]

- 87% of the CPCs investigated in Minnesota advised that abortion will lead to severe mental health problems.[48]

- 65% of CPCs investigated in North Carolina claimed that abortion results in "post-abortion stress."[49]

- 78% of CPCs investigated in Montana claimed that abortion causes serious psychological damage.[50]

BREAST CANCER LIES

Another common inaccuracy spread by CPCs is that abortion causes breast cancer. A 2004 study published in *The Lancet*, a widely respected medical journal, analyzed data from more than 50 other studies and concluded that women do not have an increased risk of breast cancer if they obtain an abortion.[51] Despite this, CPCs regularly trot out this false threat of breast cancer to scare women away from abortions.

One brochure from a CPC in Maryland states that "if you have a family history of breast cancer and have an early abortion at a young age, your chances of getting breast cancer before the age 45 are increased by 800 percent!"[52] And in North Carolina, a CPC staffer cited a nonexistent Australian study in which "every single 18-year-old woman who chose to have an abortion was diagnosed with breast cancer."[53]

CPCs across the country continue to spread the discredited link between abortion and breast cancer:

- 20% of the CPCs investigated in Massachusetts repeated the lie that abortion causes an increased risk of breast cancer, with one CPC telling an investigator that "abortion increases your risk of breast cancer by 100%."[54]
- 73% of the CPCs investigated in Minnesota repeated the false claim that there is a link between abortion and an increased risk of developing breast cancer.[55]
- 67% of CPCs investigated in Montana linked abortion to breast cancer.[56]

INFERTILITY LIES

Another dangerous misconception spread by CPCs is that abortion will result in infertility. This is yet another scare tactic. In fact, first-trimester abortion poses virtually no long-term risk of infertility.[57] Despite this, investigators in Massachusetts were fed lies about women having trouble getting pregnant after an abortion "because sometimes there is scar tissue that stops the egg from being able to implant" and were advised "to keep in mind that this could be your only child."[58]

- 33% of the CPCs investigated in Massachusetts informed investigators that abortion may cause infertility and/or ectopic pregnancy in the future.[59]
- 67% of the CPCs investigated in Minnesota highlighted a link between future infertility and abortion, and over 73% of CPCs investigated suggested a link between abortion and future miscarriages.[60]

FALSE INFORMATION ABOUT BIRTH CONTROL

Women who find themselves seeking pregnancy-related reproductive health care deserve accurate information about and access to birth control. What they'll hear at a CPC is anti-contraception propaganda that is downright irresponsible.

When one investigator in Maryland specifically requested a referral for birth control, a CPC volunteer stated she could not help because birth control is "next to aborting your baby."[61] Nothing could be further from the truth—birth control is not, and never has been, an abortifacient.

In Missouri, CPC volunteers told an investigator that "condoms sometimes have holes and that buying a condom is like buying a bag of balloons and expecting that not one will have a hole in it."[62] This is extremely dangerous misinformation for both men and women. The birth control method recommended by CPCs is abstinence.

In Missouri, CPC volunteers told an investigator that "condoms sometimes have holes and that buying a condom is like buying a bag of balloons and expecting that not one will have a hole in it."

The pattern of anti-contraception bias by CPCs is well-documented:

- 81% of the CPCs investigated in Maryland failed to discuss sexually transmitted infections.[63]
- Of the 15 taxpayer-funded CPCs visited in Minnesota, 67% provided misleading information about birth control and 60% provided inaccurate information about emergency contraception.[64]
- 48% of the CPCs investigated in North Carolina advised women seeking family-planning services that none of the common methods of birth control are effective at preventing pregnancy.[65]
- 89% of CPCs investigated in Montana presented inaccurate information about birth control, including that birth control is the same as abortion, condoms don't work, and birth control leads to breast and cervical cancer.[66]
- 56% of the CPCs investigated in New York City provided no literature about contraception, and the remaining 44% gave inaccurate information about the efficacy and/or risks of contraception.[67]
- 69% of the CPCs investigated in Missouri told women that hormonal birth control increases the risk of infertility, and 92% refused to tell women where they could obtain birth control.[68]

DELAY TACTICS

Whether or not they carry to term, pregnant women need and deserve prompt medical attention. Contrary to all accepted medical practice, CPCs use a number of underhanded and dangerous tactics to delay pregnant women from getting actual medical attention and information. This is a clear strategy to make obtaining an abortion more difficult, more costly, or even impossible—and it comes at the expense of the women's health and safety.

One CPC volunteer in Maryland told an investigator posing as a pregnant woman, "Don't panic. Abortion is legal through all nine months of pregnancy, so you have plenty of time to make a decision."[69] This is most certainly not the case. *Roe v. Wade* protects the right of women to get an abortion only until viability,[70] and 42 states prohibit some abortions after a certain point in pregnancy.[71] At the EMC Frontline Pregnancy Center in the Bronx, N.Y., when an investigator posing as a woman who was 9.3 weeks pregnant asked a staffer how long she had to make a decision, the staffer told her, "in this country you can get an abortion up to nine months" and "you've got time to think about it."[72] This is false: In New York state, abortion is banned after 24 weeks.[73]

Attempting to stop an investigator from accessing abortion care, a volunteer at a Maryland CPC advised that "30% of women naturally miscarry, so there was no point in rushing to get an abortion."

Aside from lying about the time frame to receive abortion care, CPCs also lie to women about the likelihood of miscarriage. Attempting to stop an investigator from accessing abortion care, a volunteer at a Maryland CPC advised that "30% of women naturally miscarry, so there was no point in rushing to get an abortion."[74] That is blatantly false. The American College of Obstetricians and Gynecologists puts the actual number at half that, with about 15% of known pregnancies ending in miscarriage.[75]

Investigators in Massachusetts were told, "just because you are pregnant doesn't mean you'll stay pregnant," and that "the good news" about a positive pregnancy test is that the miscarriage rate is so high. One CPC said that "50% of pregnancies end in miscarriage."[76] In Montana, a CPC explains on its website that pregnant women should come in for an ultrasound to see if they may "miscarry naturally, at which point an abortion is simply an unnecessary expense."[77]

With 18 states imposing abortion restrictions after a certain number of weeks, these delay tactics cloaked as medical facts are designed to make abortion an unobtainable option because women wait too long to access care or believe they will miscarry.

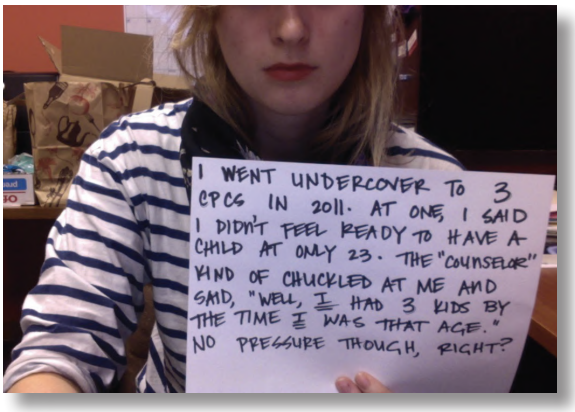
- 53% of the CPCs investigated in Minnesota used delay tactics, including advising waiting a month to take another pregnancy test and suggesting an ultrasound is necessary to determine the viability of the pregnancy—a medical evaluation most CPCs are not qualified to make.[78]

- 24% of the CPCs investigated in North Carolina suggested the possibility of miscarriage as a reason to avoid making an immediate decision on abortion.[79]

CPCs JUDGE AND SHAME WOMEN

To further their goal of convincing women not to have an abortion, CPCs not only use scare tactics, misinformation, and flat-out lies; they also emotionally manipulate, judge, shame, and bully the women who enter their doors. At the exact time a woman is feeling vulnerable and seeking advice without judgment, CPC volunteers pounce on her emotionally.

As a CPC client named Annie in Minnesota put it, "My experience at [the CPC] made me feel as though having this child was the only 'right' thing to do. I left there feeling as though I had really screwed up. … I felt scared and alone after leaving."[80]



Documented throughout many investigations, CPC staffers intentionally refer to the fetus as a "baby" and the woman as a "mom." They use plastic fetal models (often labeled inaccurately) or videos to show development, and refer to abortion as "murder" or "killing."

An investigator in Montana reported, "I felt unprepared for the graphic nature of the video which demonstrated in detail a doctor performing an abortion. It only showed the procedure, not the woman. The movie focuses on showing fingers, toes, arms, and assembling them together at the end while playing horror movie-type music. It was then explained to me by the volunteers that there were entire [jobs] dedicated to assembling and gathering [body] parts in order to not miss any."[81]

At a CPC in Brooklyn, N.Y., a pamphlet declared that "the condom's biggest flaw is that those using it to prevent the conception of another human being are offending God."

Another investigator in North Carolina who posed as a pregnant Jewish woman was given a Bible and told by volunteers at five different CPCs that she would not go to heaven unless she became a Christian.[82] At a CPC in Brooklyn, N.Y., a pamphlet declared that "the condom's biggest flaw is that those using it to prevent the conception of another human being are offending God."[83]

Further examples of the shame and judgment inflicted by CPCs:

- 61% of CPCs investigated in North Carolina pressured women not to have abortions by providing baby items.[84]
- In the New York City investigation, 73% of the CPC staffers referred to the fetus as a "baby" or "unborn child" and to abortion as "killing," and 89% of CPCs did so in their written materials.[85]
- 53% of the investigators in Ohio stated that staffers had a negative reaction to their decision to have an abortion, indicated by open hostility or pressure to change their mind.[86]
- 69% of CPCs investigated in Montana displayed or presented fetal "dolls"—models that are often developmentally incorrect, and used to shame and dissuade women from abortion.[87]
- 83% of the CPCs investigated in Massachusetts either refused outright to provide a referral for abortion services or made investigators so uncomfortable that they felt they couldn't ask for one.[88]

THE RECENT TRANSFORMATION AND SOPHISTICATION OF CPCs

At one point, most CPCs were run by volunteers and operated out of church basements and people's living rooms. For the last decade or more, CPCs have become much more sophisticated in presenting themselves to clients as authentic medical clinics even though they are not. It starts with their co-location strategies in medical buildings and continues with their operating procedures.

In California in 2005, one clinic, the Westside Pregnancy Clinic, had a website prominently featuring a photo of a woman's bare stomach and a dialogue box coming out of it saying, "Don't forget about me." That same clinic today has a website claiming it provides "unbiased, confidential and free medical, educational and support services" for women facing an unplanned pregnancy.[89]

Investigators reported that many CPCs are staffed by volunteers who wear white lab coats, require forms to be filled out, and have replicated the look and feel of a typical medical office.

This disturbing transformation is widespread and further confirms that, without deception, CPCs would not successfully attract vulnerable women looking for reproductive-health information and services.

Most CPCs are not licensed and operate without regulation or oversight, even though they are providing so-called "counseling" for women about pregnancy options, because they are not legitimate reproductive-health clinics. Some CPCs have managed to get licensed but this poses a different danger. This allows CPCs to appear legitimate and further mislead women into thinking they will receive medically-accurate information.

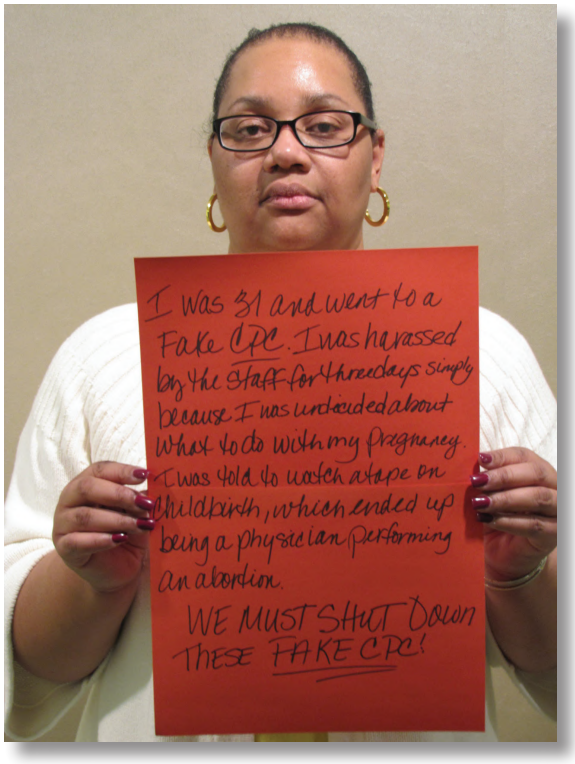
These clinics have clients read their own pregnancy tests (the same ones sold in drugstores) so they're not technically providing medical services. In California, two investigators were alarmed when a CPC insisted that the potentially pregnant patient self-administer her urine test. Because the test never leaves the hands of the patient, the CPC only,[90] appears to provide medical advice, stopping just short of actually practicing medicine without a license.

Despite their lack of licensing as health clinics, CPCs are "medicalizing" their appearance to seem more legitimate. They provide free ultrasounds but do not disclose that the ultrasounds they offer are non-diagnostic and limited in scope. CPC workers who read ultrasounds can't always accurately determine if a woman is pregnant, the gestational age, or if there are any real medical concerns with the fetus. It is dangerous for pregnant women to believe that a series of ultrasound images is appropriate prenatal care, because it is not. Many of these ultrasounds are medically unnecessary. [91]

The use of ultrasounds at CPCs is a strategy developed by the leaders of the anti-choice movement. In the 1980s, former Operation Rescue leader and anti-choice extremist Chris Slattery founded Expectant Mother Care, a New York City-based chain of centers that were the first CPCs to start offering ultrasounds. Today, EMC claims to run nearly a dozen centers in New York City and boasts on its website that it is "on the FrontLines for Life in … The Abortion Capital of America."[92]

HOW CPCs TARGET LOW-INCOME WOMEN AND WOMEN OF COLOR

For some time now, CPCs have particularly targeted low-income women and women of color in urban environments. Formerly called the Urban Initiative, Care Net has been conducting an "underserved outreach" initiative since 2003 that is carefully designed to target African-American and Latina women.[93]



In its own words, Care Net explains that "while there are many areas lacking pregnancy centers, we are first seeking to serve the community with the highest abortion rate—African Americans. The successes and lessons learned in engaging the African American community (albeit a different culture) will be beneficial as we expand our efforts to reach another underserved community—Hispanic women."[94]

Many CPCs, such as those in the Care Net network, advertise in bus shelters, believing it will attract women who may be homeless or low-income. Care Net has bought ad time on BET (Black Entertainment Television) and puts out specific advertisements targeted to the African-American community that compare abortion to slavery.[95] A report from Colorlines.com exposed a plan by CPCs to deliberately set up shop in these communities to go after vulnerable women and deny them the care and honest information they have a right to. These calculated campaigns designed to mislead and deceive women about their health care options have no place in our society.[96]

Crisis pregnancy centers (CPCs) pose as legitimate reproductive health centers. They have a track record of outright lying to women and work to dissuade people from exercising the right to choose.

TAXPAYER FUNDING AND GOVERNMENT PROMOTION OF CPCs

With the help of ideological anti-choice lawmakers, an increasing number of CPCs are receiving taxpayer funding. The public health threat posed by CPCs becomes even more insidious when these fake clinics receive the sheen of authenticity from governments. Nationally, it is estimated that $60 million in federal abstinence and marriage-promotion funds have gone to CPCs.[97]

In addition to state laws redirecting tax dollars to support CPCs, 11 states have "Choose Life" license-plate programs in which the revenue is earmarked for CPCs. These states include Arkansas, Florida, Georgia, Louisiana, Mississippi, North Carolina, Ohio, Oklahoma, South Carolina, Tennessee, and Texas.[98]

Funding from these license plates was going to anti-choice crisis pregnancy centers (CPCs) in North Carolina.

In Minnesota, CPCs receive state dollars through the Positive Alternatives Act, which makes $2.4 million available to CPCs annually. In 2011, 23 of the 31 grantees were CPCs. Eighty-seven percent of taxpayer-funded CPCs investigated in Minnesota gave misleading or outright false information to women seeking medical services.[99]

In Missouri, 10 of the CPCs investigated were eligible for state tax credits. CPCs in the state received a total of $2,756,136.10 in tax-credited donations in 2009-10.[100]

In 2005, lawmakers forced an unprecedented rider onto the Texas state budget that, as of 2011, had diverted $18 million from preventive women's health and family-planning services and funneled it into the Alternatives to Abortion program. The program provides no recommended health services to women seeking care, does nothing to reduce the rate of unintended pregnancies, and gives millions of taxpayer dollars to its primary contractor, the Texas Pregnancy Care Network. CPCs make up 70% of the Texas Pregnancy Care Network, and these CPCs have no confidentiality agreements or oversight.[101]

When state and federal governments are facing significant financial challenges, it is astonishing that resources would be directed to CPCs.

Governments not only provide financial support to CPCs; they also increase CPCs' legitimacy by directing state agencies to refer women to CPCs. For instance, North Carolina passed the misleading Woman's Right to Know Act that requires the state to establish and maintain a registry of organizations providing free ultrasounds to pregnant women. By requiring a state agency to create and maintain this registry, the law establishes a state-sanctioned channel through which women are referred to CPCs.[102]

In Ohio, the Department of Health prominently includes CPCs in its resource guide called "Where to Get Help with Your Pregnancy." This guide is required to be offered to patients at all abortion clinics in the state. In the NARAL Pro-Choice Ohio investigation, only 5% of the CPCs asked about sexual violence and only 4% asked about relationship abuse, which means women facing dangerous situations are not getting professional counseling. Homicide is the second-leading cause of traumatic death for pregnant and recently pregnant women in the U.S.[103]

Further examples of how state governments legitimize CPCs:

- At least 23 states have laws supporting CPCs: Arizona, Arkansas, Florida, Georgia, Kansas, Louisiana, Michigan, Minnesota, Mississippi, Missouri, Nebraska, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Virginia, West Virginia, and Wisconsin.[104]

- At least 11 states fund CPCs directly: Kansas, Louisiana, Michigan, Minnesota, Missouri, North Carolina, North Dakota, Ohio, Pennsylvania, Texas, and Wisconsin.[105]

- 1 state has a law on the books forcing women seeking an abortion to first visit a CPC: South Dakota.[106] Thankfully, this law is unenforceable.

- 20 states refer women to CPCs: Arizona, Arkansas, Florida, Georgia, Kansas, Louisiana, Minnesota, Mississippi, Nebraska, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Texas, Virginia, West Virginia, and Wisconsin.[107]

CONCLUSION

No woman should be subjected to misleading and dangerous medical advice that is not based on scientific evidence. Women will never achieve reproductive freedom until all CPCs are exposed and women are made aware of their rights and understand their medical options.

State	Number of CPCs	Number of Abortion Clinics*	(2011) Guttmacher Clinics	(2011) Guttmacher Providers
Alaska	12	3	4	9
Arizona	44	9	15	17
Arkansas	38	3	3	5
California	167	44	160	512
Colorado	43	15	24	42
Connecticut	28	6	21	41
Delaware	5	3	4	8
District of Columbia	3	4	5	9
Florida	147	41	72	88
Georgia	79	13	19	28
Hawaii	9	3	6	33
Idaho	16	4	2	4
Illinois	89	21	26	37
Indiana	86	7	10	12
Iowa	42	14	17	18
Kansas	52	6	3	3
Kentucky	42	1	2	3
Louisiana	31	1	7	7
Maine	14	3	5	11
Maryland	43	14	21	34
Massachusetts	29	8	12	40
Michigan	95	15	30	41
Minnesota	65	5	7	15
Mississippi	33	0	1	2
Missouri	63	1	4	5
Montana	23	5	7	8
Nebraska	23	3	3	5
Nevada	10	6	8	14
New Hampshire	14	6	5	13
New Jersey	40	4	24	64
New Mexico	21	4	7	12
New York	105	26	94	225
North Carolina	69	8	21	36
North Dakota	7	1	1	1
Ohio	107	11	18	26
Oklahoma	39	9	3	5
Oregon	45	10	15	29
Pennsylvania	117	17	20	47
Rhode Island	4	3	2	4
South Carolina	43	2	3	9
South Dakota	11	1	1	2
Tennessee	42	7	9	14
Texas	167	18	46	62
Utah	7	4	4	9
Vermont	9	3	3	8
Virginia	58	18	21	35
Washington	78	18	32	45
West Virginia	25	2	2	4
Wisconsin	57	4	4	8
Wyoming	11	0	0	3
Totals:	**2460**	**438**	**839**	**1720**

* Indicates unofficial research by NARAL Pro-Choice America in May & June 2014

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Designed by Do Good Design

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NARAL
Pro-Choice America

Name: Connie Ryan

Comment: Please see attached comments.

Interfaith Alliance of Iowa Action Fund
Connie Ryan, executive director
HF515

The Interfaith Alliance of Iowa Action Fund is strongly opposed to HF515.

Let's call this what it is. HF515 uses a lot of words to describe fake pregnancy centers that are designed specifically to mislead women and coerce them into staying pregnant, rather than choose an abortion.

Let's look at the language and phrasing in the explanation of the bill. Contractors shall meet ALL of the requirements in a long list. I will highlight just a few:

- Be a non-profit
- Have a commitment to promoting childbirth as a fundamental part of the contractor's mission
- Utilize proactive targeted digital marketing to reach pregnant women in real time who are in crisis and actively seeking an abortion and employ specific scripting strategies to create conversation with these pregnant women to encourage them to choose an alternative to an abortion by increasing awareness of services and removing obstacles to care

So, let's break that down.

- The focus is on the pregnancy only, and not the woman. Not her as a person or the concerns in her life. Not her medical needs. Not her family needs. Not her economic needs. Not her questions or her preferences.
- The contractor has to be a non-profit but there is no requirement of medical or counseling training or accreditation for its staff. Any non-profit without real healthcare expertise will do.
- And then perhaps the best part is that the contractor must have the ability and include in its plan the ability to stalk pregnant women through digital marketing. It must use "scripted strategies" when engaging women through their stalking methods. Scripted strategies. How is that ok? How is that ok in any sense of healthcare or emotional support?
- Scripted strategies in that conversation designed specifically and solely to convince the women who have been stalked to not have an abortion. That is what is being proposed in this legislation.

The contractor is not required to talk with a woman as a person, understanding her life, her healthcare needs, her concerns. They are not required to counsel her with ethical and sound best practices as generally accepted by those licensed in psychology, social work, or other healthcare professions. The goal is to convince a woman to not have an abortion. Period.

And, Taxpayers will turn over an appropriation of $879,152 to a contractor to mislead, stalk, manipulate, and coerce women into a decision that may or may not be what the want.

Iowans who are pregnant and deciding whether to continue a pregnancy, or not, should be treated with respect, dignity, and served by providers with their best interest in mind, not with a preplanned, scripted agenda.

This legislation is immoral, harmful, misleading, and bad for Iowans. Interfaith Alliance of Iowa Action Fund urges you to oppose HF515.