



NARAL
Pro-Choice America

The Truth about Crisis Pregnancy Centers

“The patient’s right to self-decision can be effectively exercised only if the patient possesses enough information to enable an intelligent choice.”¹

Anyone seeking health-care services should receive comprehensive, unbiased, medically and factually accurate information. Women facing unintended pregnancy deserve no less. When women are fully informed, they are better able to make responsible and appropriate decisions about their reproductive health. Mindful of this, the anti-choice movement has for years tried to restrict, control, and manipulate the information doctors give women facing unplanned pregnancies. Unable to shut down legitimate public-health clinics, their most recent strategy is instead to build a network across the country of anti-choice organizations, some of them posing as comprehensive health-care clinics – so-called “crisis pregnancy centers” (CPCs).

While some CPCs may provide appropriate support and information to women facing unintended pregnancies, many do not. Unfortunately, reports indicate that many CPCs intentionally misinform and mislead women seeking pregnancy-related information with the intention of dissuading them from exercising their right to choose.² In fact, some CPCs may force women seeking objective health-care information to watch anti-abortion films, slide shows, photographs, and hear lectures³. Some may also refuse to provide information about or referrals for birth control.⁴ These practices block women from making fully informed choices about their reproductive health and may endanger women’s health by delaying access to legitimate health-care services.

Today, there are CPCs in every state and dozens of countries overseas.⁵ Many are supported by one of three major umbrella organizations: the National Institute of Family and Life Advocates (NIFLA), Care Net, and Heartbeat International. These three groups provide technical assistance and other support to CPCs including training, legal advice, organizational development, and financial assistance. Among them, these organizations boast more than 2,300 partner and affiliate CPCs; the total number of CPCs across the country is estimated to be more than 4,000.⁶ Although such centers are still largely unlicensed, many have developed in sophistication to such a degree that they now offer certain limited medical services. There are approximately 700 CPCs that have converted to medical centers, and more than 55 percent of the NIFLA-affiliated centers are limited ultrasound providers.⁷ In the CPC setting, however, ultrasound is generally not used as a diagnostic tool, but as another means of persuasion.

Crisis Pregnancy Centers Use Misleading Tactics to Entice Women

CPCs often mislead women into believing that they provide a full range of reproductive-health services. They do so by using questionable advertising tactics and providing dishonest or evasive answers when women call to inquire about their services. One of the most potent tools that CPCs have at their disposal is the Option Line, a joint venture between Care Net and Heartbeat International that operates as a 24-hour call center and web tool that transfers or refers women to the nearest CPC. During its first month in operation, the Option Line received approximately 2,000 calls and since then has added instant messaging and email capabilities to its arsenal. Its operators boast that the service receives about 16,000 calls a month⁸ and more than one million contacts since 2003⁹.

The current *Option Line Handbook* stresses to volunteers that “while [they] are on the phone, [their] objective is to schedule an appointment” so that women will come to the center. While the guidelines advise volunteers to give clients only factual information, the handbook pressures them to keep the client interested and provide responses, whether or not the volunteer is equipped to do so, by reminding them that “callers are looking for fast answers and may turn elsewhere if they do not get them.”¹⁰

- CPCs may list themselves in phonebooks under the headings “abortion,” “abortion alternatives,” “abortion services,” “family-planning information centers” or “women’s organizations” even though the only “abortion service” they provide is anti-abortion coercion.¹¹ A study of CPC listings on two popular online search directories, SuperPages.com and YellowPages.com, found that CPCs often advertise as if they provide abortion services or counseling.¹² Further, a web search revealed that many CPCs listed by Option Line advertised under headings that could lead women to believe that they provide the full range of reproductive-health services, including abortion care and contraception.¹³
- CPCs may also choose names similar to those of legitimate reproductive-health clinics that provide abortion services and locate themselves near those clinics to confuse women and lure them into their center.
 - For example, in Minnesota, Robbinsdale Women’s Center, an anti-choice pregnancy center that counsels women against abortion is located across the street from the Robbinsdale Clinic, P.A., which offers a range of medical care from licensed medical providers, including abortion services. According to the *St. Paul Pioneer Press*, several women who accidentally went to the center instead of the clinic complained that the center tried to deceive them. One woman even filed a complaint with the Minnesota attorney general: “In trying to find the Robbinsdale Clinic, I mistakenly went into the women’s clinic across the street. When I told them my name and appointment, they had me take a seat and had a counselor talk to me about anti-abortion. At which time I learned I didn’t have an

appointment there at all. They then said they did not know of [the facility that provided abortions].”¹⁴

- A documentary film called *12th & Delaware* features the director of a crisis pregnancy center in Florida conducting a volunteer training. While displaying a PowerPoint slide that reads “attract the client” she tells volunteers: “Clearly our competition is the abortion clinic. We are actually on opposite sides of the street...They’re not always sure who they’re calling anyway. They don’t know if they’re calling us or the abortion clinic.”¹⁵
- While CPCs may falsely suggest that they provide a full range of reproductive-health services, they clearly do not. Some centers do not have any medically trained or medically supervised personnel on staff at all.¹⁶ Even in the cases of centers that are overseen by medical professionals, there are no regulations in place to ensure that women will receive medically accurate information and services that meet an appropriate standard of care with respect to all of the women’s reproductive-health options.
 - In July 2006, Rep. Henry Waxman (D-CA) released a study which found that crisis pregnancy centers often mislead and misinform teenagers about the medical risks of abortion. Investigators posing as pregnant 17-year olds seeking medical counseling called more than two dozen CPCs that receive federal funding. The report found that 87 percent of these CPCs provided either false or misleading information about the health effects of abortion. Specifically, several center employees told the women that abortion increases the risk of breast cancer, despite the overwhelming medical consensus that no such link exists. In addition, callers were incorrectly told that abortion could cause “permanent damage” that would affect their future ability to bear children. Finally, many centers continued to advance the myth of “post-abortion syndrome,” even though scientific evidence shows that abortion does not cause significant long-term psychological harm.¹⁷
 - Investigations in California, Maryland, New York, North Carolina, Texas, and Virginia¹⁸ all have documented CPCs’ intentionally misleading practices. Many of those investigated gave women inaccurate information, including that hormonal 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-health problems.
- Misled by CPC ads, some women call to inquire about available services and prices. When presented with such inquiries, the staff at CPCs may evade the question or lie outright in order to attract the woman into the center.

- In 2002, a University of Maryland student posing as a woman worried that she was pregnant called a crisis pregnancy center and made an appointment at the center's office. During the call, she asked "if they knew anything about abortion." She said that they "blew [the question] off. They just said, 'Come in and we'll figure it out.'" Once at the CPC, the student mentioned that she might want to consider abortion care. At that point, the volunteer said "Oh, you don't want to do that. You'll mess up your body." The student indicated that the woman was "really trying to scare me into not having [an abortion] as an option."¹⁹
- In the *12th & Delaware* documentary, the CPC director Anne trains volunteers in the telephone script she uses to divert questions from potential clients and lure them into the center:

If you don't hook her right away, she hangs up on you. When she calls and she says "Do you do abortions?" I say "Are you calling for yourself or are you calling for your friend?" ...and we engage in conversation. Because if she calls and says "Do you do abortions?" and I say "No," click. [here Anne pantomimes hanging up the phone receiver]

I'm trying to get her in the door. Take control of the conversation...I don't mind the criticisms of taking control. "That doesn't sound fair." Well too bad!²⁰

In some cases, CPCs' deceitful or misleading practices have been so outrageous that courts and government agencies have intervened on the public's behalf.

- In 2002, then-New York Attorney General Eliot Spitzer issued subpoenas to a number of CPCs based on concerns that their advertising and business practices could lead women to believe that the centers provided medical services—including professional pregnancy testing— or that they provided abortion services or referrals.²¹ Spitzer eventually reached an agreement with one of the CPCs requiring it to: (1) tell people who call or visit the center that the center is not a medical facility; (2) clarify in advertising and consumer contacts that the pregnancy tests the CPC provides are self-administered or over-the-counter tests; (3) disclose orally and in writing—before providing a pregnancy test or counseling about pregnancy—that the center is not a licensed medical provider qualified to diagnose or accurately date pregnancy; and (4) clearly inform people who inquire about abortion care or birth control that it does not provide those services or make referrals for them.²²
- In June 2004, the Center for Reproductive Rights filed suit against a Louisiana resident on behalf of three women, a medical facility, one of its physicians, and his patients, alleging that the CPC used false advertising, trademark infringement, fraud, and various

forms of criminal and emotional manipulation to intentionally interfere with women's constitutional right to choose.²³ According to the Center, the defendant lured women to him by "co-opting the name of a well-known medical provider," and by falsely advertising that he provided abortion referral services. The Center also alleged that, rather than providing these services, the defendant promised to connect women with doctors in private practice for a bargain, then claimed to set up appointments and repeatedly "re-scheduled" them. During this time, he discussed the women's medical conditions with them, wrongly advising them that the longer they waited for abortion care, the less risk there would be to their health, with the intention of preventing women from having an abortion while the procedure is legal.²⁴

- In August 2004, a federal district court issued a preliminary injunction preventing this defendant from using the name of the medical provider or any other name that would be confusingly similar, including renewing or initiating yellow pages or other directory assistance listings. The injunction also required that the defendant refrain from holding himself out as a provider of medical services, promising to make referrals for abortion care or offering financial assistance for those services, in advertising, orally, or otherwise.²⁵

Women Suffer Intimidation, Anti-Choice Propaganda, and Misinformation at Some Crisis Pregnancy Centers

Once women are enticed into crisis pregnancy centers, they may be subjected to a variety of coercive and offensive tactics intended to prevent them from exercising their right to choose.

- Women may be forced to watch shocking films, slide shows or pictures, designed to scare vulnerable women into carrying pregnancies to term.
 - One volunteer at a CPC states that to shake the complacency of women seeking abortion care, she pulls out a big, color photo of a fetus with closed eyes and a smile. She then flips to another full-page color picture: fetuses in a trash bin. Sometimes she takes [the pregnant women] into a tiny chapel to pray before a marble altar.²⁶
 - An Arizona man unwittingly took his 16-year-old daughter to a CPC after she had been raped. After being shown "brutal footage" including pictures of dismembered fetuses, the man claimed that, "they just emotionally raped her. . . . They are advocates for the unborn, and to hell with the troubled person. They had an ax to grind, and just terrorized her."²⁷
 - According to a 2002 report by the Center for Reproductive Rights, a woman at a "pregnancy help center" was told that she "had the devil inside her" and was

then “bombarded with graphic images of disfigured babies and aborted fetuses.”²⁸

- In an effort to scare women away from considering abortion care, some CPCs provide false propaganda about the “consequences” of abortion - including false claims that abortion causes breast cancer, sterility, and psychological damage.²⁹
 - In a *New York Times* op-ed, one woman described of her experience at a CPC in Cedar Rapids, Iowa: “the ‘counseling’ that I received included the following: I was cautioned that abortions caused breast cancer...I was warned that I would inevitably suffer from post-abortion stress syndrome... I was told that I would not hear this information from doctors, because doctors make money performing abortions and would lie about the procedure’s risks.”³⁰

CPCs’ Deceptive Tactics Can Jeopardize Women’s Health and Safety

- In one scene featured in the *12th & Delaware* documentary, a counselor details the alleged “risks” of abortion to a young woman named Widline. In reality, safe, legal abortion carries a mortality risk of 0.0006 percent.³¹ Frightened by the counselor’s claims, Widline decides against abortion care; however, over the course of her pregnancy, she “tries everything in [her] powers” to self-induce abortion, from drinking vinegar to lifting heavy objects. While thankfully these measures are not as extreme or as dangerous as some to which she might have resorted, it is clear that Widline has been driven away from safe medical care because of the lies and coercive tactics of the volunteers at the crisis pregnancy center. We last see her at seven months pregnant as she is tearfully preparing for motherhood.³²
- Upon visiting the legitimate reproductive-health provider across the street from the CPC in *12th & Delaware*, a woman learns that she is several weeks further along in her pregnancy than the ultrasound operator at the CPC had told her. The director of the health clinic states that it is not a rare practice for CPCs to misinform women of the dates of their pregnancies in an effort to cause clients to delay seeking care until it is too late to obtain an abortion.³³ This manipulative tactic increases the likelihood that a woman will access abortion later in her pregnancy when services are more expensive, more complicated, and more difficult to obtain.³⁴ It can also result in delayed access to appropriate prenatal care if a woman ultimately carries her pregnancy to term.³⁵
- In a singular quest to convince women not to choose abortion, anti-choice advocates at crisis pregnancy centers may even advise women to take measures that are dangerous to their health and safety. In *12th & Delaware* a young mother of two tells a CPC counselor that she is considering abortion because her boyfriend is abusive and she needs to do what is best for her children. The counselor protests, arguing “for all you know, the

baby changes him.”³⁶ Suggesting a woman remain in an abusive relationship reveals that, to this counselor, women’s health and safety are hardly even afterthoughts.

Crisis Pregnancy Centers Target Low-Income Women and Women of Color Who are Among the Most Vulnerable to the Lure of Free “Services”

Care Net, which touts itself as “the largest network of pregnancy centers in North America,” has begun expanding its reach even further. According to the organization’s website, “[r]ecognizing that over 70% of the nation’s abortion clinics are located in minority neighborhoods, Care Net is strategically planting new pregnancy centers in these urban communities in order to provide needed abortion alternatives and pregnancy support services.”³⁷ In 2003, Care Net launched its Urban Initiative and established 15 new centers in 13 cities.³⁸ In 2009, the initiative was renamed the Underserved Outreach Initiative. Regardless of the name of the campaign, the goal is clear: to target African-American and Hispanic women.³⁹

Heartbeat International, too, has launched a campaign to target women of color. Having identified Miami as a city with the “neediest neighborhoods,” it has rolled out a project to pursue women of color aggressively and purposefully. Describing its CPC operators as “virtue capitalists,” Heartbeat Miami’s website outlines the campaign—to “open multiple centers in key neighborhoods, equip them with ultrasound, and inspire and raise the local support, staff and volunteers needed for long-term operations.” It boasts, “this highly aggressive, heavily funded approach to starting multiple centers has never been done before.”⁴⁰

Through a combination of targeted marketing campaigns, training, and community partnerships, both organizations are making significant inroads in the inner cities and to women of color. This new focus is of particular concern when one considers that the rate of unplanned pregnancy among African-American women, particularly among teens, far outpaces that of other groups— 51 percent of African-American teen girls will become pregnant at least once before they turn 20. (In comparison, 19 percent of non-Latina white teen girls will become pregnant before that same age.⁴¹) Further, African-American women are more than twice as likely to get late or no prenatal care as non-Latina white women, and are three times more likely to die from pregnancy-related complications.⁴² These daunting statistics speak to the need for more reproductive-health information and resources in that community, not a proliferation of anti-choice propaganda that selectively edits a wide range of health-care options.

Crisis Pregnancy Centers and Their Proponents are Well-Funded and Organized

Recently, the crisis pregnancy center movement and its supporters have furthered their efforts by seeking—and often receiving—state or federal funding. Funding may come in the form of direct allocations or tax credits in state budgets, through the establishment of “choose life” license plates (the revenues of which are used to fund CPCs), the donation of special equipment, or even through federal “abstinence-only” programs. Ironically, some of the staunchest defenders of CPCs in Congress also have been some of the most outspoken

proponents of gutting funding for programs that support prenatal services and a range of other health-care for low-income women and their families.

- In 2009, Rep. Michele Bachmann (R-MN) introduced the Positive Alternatives Act (H.R.636),⁴³ which would amend the Social Security Act to permit TANF funds to be used for “alternatives-to-abortion” services, presumably CPCs.
- In 2009, Sen. John Ensign (R-NV) offered an amendment to the National Service bill (H.R.1388)⁴⁴ that would have made CPCs explicitly eligible for federal funding under a new program, the Nonprofit Capacity Building Program. The amendment failed 41-56 in a floor vote. During its consideration, Sen. Ensign spoke in the amendment’s support and Sen. Barbara Mikulski (D-MD) spoke in its opposition.
- In 2011, Rep. Cliff Stearns (R-FL) reintroduced the Informed Choice Act (H.R.165), which would create a grant program for CPCs to purchase ultrasound equipment at taxpayers’ expense⁴⁵.

State legislators also lend support to CPCs by directing taxpayer funding their way. In 2011, three states—North Carolina, Texas, and Utah—enacted legislation to fund CPCs through the sale of anti-choice license plates.⁴⁶ Additionally, 14 of the 24 states where “Choose Life” license plates already are available donate a portion of the proceeds raised from their sale to specific anti-choice organizations that include CPCs—Alabama, Arizona, Delaware, Hawaii, Kentucky, Maryland, Massachusetts, Missouri Montana, New Jersey, Pennsylvania, South Carolina, Tennessee, Texas, and Virginia.⁴⁷

CPCs are Courting Anti-Choice Lawmakers at All Levels of Government

In addition to their patronage of anti-choice lawmakers in Congress, organizations like NIFLA and the Alliance Defense Fund have launched efforts to promote CPCs in state legislatures by encouraging CPCs to court local elected officials and partner with politically savvy, national-level anti-choice groups. One of the new tactics being employed to prime the pump for future funding is to invite state legislators to visit the CPCs and later approach them to introduce a resolution honoring the work of “pregnancy resource centers.” Following the passage of two such measures in Oklahoma and Virginia in 2010, Americans United for Life (AUL) teamed up with Care Net to conduct a briefing at its national conference featuring AUL’s model “Joint Resolution Honoring Pregnancy Care Centers,” which it promised to “aggressively pursu[e]” in other states during the 2011 legislative session.⁴⁸ These resolutions – like the false advertising in which some CPCs engage – are intended to create the impression that CPCs are part of the mainstream medical community.

In an alarming example of CPCs making inroads with anti-choice lawmakers, in March 2011, South Dakota’s anti-choice Gov. Dennis Daugaard signed into law a first-of-its-kind mandate that a woman seeking abortion care first submit to an in-person lecture at a CPC.⁴⁹ In addition

to requiring “counseling,” the law also includes an unprecedented 72-hour waiting period before care, forcing women to make a total of three separate trips, which in a rural state like South Dakota can be nearly impossible. Pro-choice groups immediately challenged the law. Thankfully, the judge issued a preliminary injunction while the case is litigated,⁵⁰ but this pioneering legislative success is another indicator that CPC activists are on the political offensive.

Pro-Choice Lawmakers Take Action

Thankfully, pro-choice lawmakers have taken proactive steps to curb CPCs’ deceptive practices. One approach has been to stop these centers from advertising falsely that they offer abortion services or medical care. For example, Rep. Carolyn Maloney (D-NY) and Sen. Bob Menendez (D-NJ) introduced the Stop Deceptive Advertising for Women’s Services Act, which would grant the Federal Trade Commission (FTC) the authority to sanction CPCs that use deceptive advertising practices to mislead women into believing they offer comprehensive reproductive-health care. The FTC would have the power to enforce violations of their rules put forth to prevent unfair or deceptive practices on the part of CPCs.⁵¹

Local lawmakers also have stepped up efforts to combat deceptive practices by CPCs. In October 2011, the San Francisco Board of Supervisors passed an ordinance—the first of its kind on the state level—to strengthen the city’s power to hold CPCs accountable for deceptive advertising practices. Mirroring the federal Maloney-Menendez bill, the Pregnancy Information Disclosure and Protection Ordinance would give the city attorney increased authority to hold CPCs accountable for false or misleading advertising.

Four municipalities—Baltimore, Maryland, Montgomery County, Maryland, Austin, Texas, and New York City—have passed ordinances requiring CPCs to post signage indicating the limited nature of their services. Unfortunately, but not surprisingly, the ordinances are in various stages of litigation. If CPC defenders really do believe that women deserve full information about their medical options, then they should have no objection to a sign requiring disclosure about the nature of a CPC’s services.

Conclusion

Crisis pregnancy centers continue their campaign to misinform women about abortion and to dissuade women from exercising their right to choose. While there are centers that do not deceive women or attempt to coerce them into making choices against their will, many CPCs continue to use deceptive and intimidating practices in order to prevent women from accessing the full range of reproductive-health options. Women are entitled to accurate, comprehensive and unbiased medical information with which they can make their own decisions.

The government should support legitimate, comprehensive reproductive-health clinics, rather than centers whose goals are to prevent women from exercising their constitutionally protected right to choose.

January 1, 2012

Notes:

¹ Council on Ethical and Judicial Affairs, American Medical Association (AMA), Informed Consent, Ethical Opinion E-8.08, CODE OF MEDICAL ETHICS, at <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion808.shtml>.

² United States House of Representatives Committee On Government Reform, *False and Misleading Health Information Provided by Federally Funded Pregnancy Resource Centers* (2006), at <http://reform.democrats.house.gov/Documents/20060717101140-30092.pdf> (last visited Oct. 25, 2011).

³ 12TH & DELAWARE (Home Box Office 2010).

⁴ Planned Parenthood of America, Inc. (PPFA), *Anti-Abortion Counseling Centers: A Consumer's Alert to Deception, Harassment, and Medical Malpractice* (2002).

⁵ Family Research Council, *A Passion to Serve, A Vision for Life: Pregnancy Resource Center Service Report 2009*, Family Research Council (2009).

⁶ 12TH & DELAWARE (Home Box Office 2010).

⁷ Family Research Council, *A Passion to Serve, A Vision for Life: Pregnancy Resource Center Service Report 2009*, Family Research Council (2009).

⁸ Heartbeat International and Care Net, *Option Line Handbook*, 2007.

⁹ Care Net, *About Care Net*, at <https://www.care-net.org/aboutus/index.php> (last visited October 25, 2011).

¹⁰ Heartbeat International and Care Net, *Option Line Handbook*, 2007.

¹¹ Planned Parenthood of America, Inc. (PPFA), *Anti-Abortion Counseling Centers: A Consumer's Alert to Deception, Harassment, and Medical Malpractice* (2002).

¹² Press Release, NARAL Pro-Choice America, *66,608 Americans Call on Yellowpages.com and Superpages.com to Stop Allowing Deceptive Anti-Abortion Ads*, (July 6, 2010) at http://www.prochoiceamerica.org/media/press-releases/2010/pr07062010_cpc-sp-yp.html (last visited Oct. 25, 2011).

¹³ For example, a sidebar advertisement on Encyclopedia.com with the heading "Las Vegas Abortion" led to the homepage for First Choice Pregnancy Services, an organization that, in its FAQs tells women that "you can avoid the pain and cost of a surgical abortion. First Choice Pregnancy Services is not here to sell you a surgical abortion. So come in today to see if you are a candidate for natural pregnancy termination." See First Choice Pregnancy Services, *Abortion*, at [http://firstchoicelv.org/abortion.html?gclid=CK-5pt6VqZ0CFZJM5QodzReMiw](http://firstchoicelv.org/abortion.html?gclid=CK-5pt6VqZ0CFZJM5QodzReMiw;); (last visited Oct. 24, 2011).

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- ¹⁴ Rachel E. Stassen-Berger, *More Than a Street Divides Clinic, Center*, ST. PAUL PIONEER PRESS, Apr. 10, 2005.
- ¹⁵ 12TH & DELAWARE (Home Box Office 2010).
- ¹⁶ Planned Parenthood of America, Inc. (PPFA), *Anti-Abortion Counseling Centers: A Consumer's Alert to Deception, Harassment, and Medical Malpractice* (2002).
- ¹⁷ United States House of Representatives Committee On Government Reform, *False and Misleading Health Information Provided by Federally Funded Pregnancy Resource Centers* (2006), at <http://democrats.oversight.house.gov/images/stories/documents/20060717101140-30092.pdf> (last visited Oct. 25, 2011).
- ¹⁸ NARAL Pro-Choice America Foundation, *Unmasking Fake Clinics, The Truth About Crisis Pregnancy Centers in California* (2010); NARAL Pro-Choice Virginia (2010); *Crisis Pregnancy Centers Revealed* (2010); NARAL Pro-Choice New York Foundation and National Institute for Reproductive Health, *She Said Abortion Could Cause Breast Cancer*(2010); NARAL Pro-Choice Texas, *Taxpayer-Financed Crisis Pregnancy Centers in Texas: A Hidden Threat to Women's Health in 2008* (2008), at <http://www.prochoicetexas.org/assets/files/hiddenthreattowomenshealth2008.pdf> (last visited Oct. 27, 2011); NARAL Pro-Choice North Carolina Foundation; *The Truth Revealed: North Carolina's Crisis Pregnancy Centers* (2011) at http://www.prochoicenc.org/assets/bin/pdfs/2011NARAL_CPCReport_V05_web.pdf (last visited Oct. 31, 2011); NARAL Pro-Choice Maryland Fund; *Maryland Crisis Pregnancy Center Investigations: The Truth Revealed* (2008), at <http://www.prochoicemaryland.org/assets/files/crisispregnancycenterreport.pdf> (last visited Oct. 24, 2011).
- ¹⁹ Kate Shatzkin, *Inquiry Sought for Pregnancy Crisis Sites. Group Claims Counsel Offered at Centers Based on Opposition to Abortion*, BALTIMORE SUN, Aug. 17, 2002.
- ²⁰ 12TH & DELAWARE (Home Box Office 2010).
- ²¹ Press Release, Office of New York Attorney General Eliot Spitzer, *Spitzer Reaches Agreement with Upstate Crisis Pregnancy Center* (February 28, 2002), at http://www.ag.ny.gov/media_center/2002/feb/feb28c_02.html (last visited on Oct. 26, 2011).
- ²² Press Release, Office of New York Attorney General Eliot Spitzer, *Spitzer Reaches Agreement with Upstate Crisis Pregnancy Center* (February 28, 2002), at http://www.ag.ny.gov/media_center/2002/feb/feb28c_02.html, (last visited on Oct. 25, 2011).
- ²³ Center for Reproductive Rights, *Louisiana Man Sued for Faking Abortion Services*, June 7, 2004, at <http://reproductiverights.org/en/press-room/louisiana-man-sued-for-faking-abortion-services> (last visited on Oct. 26, 2011).
- ²⁴ Center for Reproductive Rights, *Louisiana Man Sued for Faking Abortion Services*, June 7, 2004, at <http://reproductiverights.org/en/press-room/louisiana-man-sued-for-faking-abortion-services>.
- ²⁵ *Choice Inc. of Texas v. Graham*, No. 04-1581 (E.D.La. Aug. 4, 2004) (preliminary injunction issued).
- ²⁶ Alan Cooperman, *Abortion Battle: Prenatal Care or Pressure Tactics?*, WASH. POST, February 21, 2002, at A01.
- ²⁷ Martin Van Der Werf, *Some Abortion Centers Bogus Counseling is 'One-Sided,' Panel Told*, ARIZ. REPUBLIC, Sept. 21, 1991, at A1.

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- ²⁸ Center for Reproductive Rights, *Crisis Pregnancy Centers Seek Public Funds and Legitimacy*, 11 REPROD. FREEDOM NEWS, July/Aug. 2002, at 3.
- ²⁹ Center for Reproductive Rights, *Crisis Pregnancy Centers Seek Public Funds and Legitimacy*, 11 REPROD. FREEDOM NEWS, July/Aug. 2002, at 4.
- ³⁰ Katie Stack, *When I Needed Help, I Got Propaganda*, NEW YORK TIMES, Oct. 5, 2011.
- ³¹ Of women less than 13 weeks pregnant who obtain surgical abortions, 97 percent report no complications; 2.5% have minor complications that can be handled at the medical office or abortion facility; and less than .5 percent have more serious complications that require some additional surgical procedure and/or hospitalization. National Abortion Federation, *Abortion Facts*, (2006), at http://www.prochoice.org/about_abortion/facts/index.html (last viewed Oct. 25, 2011).
- ³² 12TH & DELAWARE (Home Box Office 2010).
- ³³ 12TH & DELAWARE (Home Box Office 2010).
- ³⁴ National Institutes of Health, U.S. Library of Medicine, *Abortion--surgical: MedlinePlus Medical Encyclopedia* (2009), at <http://www.nlm.nih.gov/medlineplus/ency/article/002912.htm> (last visited Oct. 27, 2010).
- ³⁵ 12TH & DELAWARE (Home Box Office 2010)
- ³⁶ 12TH & DELAWARE (Home Box Office 2010).
- ³⁷ Care Net, *Our Work*, at <http://www.care-net.org/ourwork/> (last visited Oct. 29, 2010).
- ³⁸ Care Net, *Underserved Outreach* at <http://www.care-net.org/ourwork/program.php?id=1> (last visited Oct. 15, 2009).
- ³⁹ Care Net, *Underserved Outreach* at <http://www.care-net.org/ourwork/program.php?id=1> (last visited Oct. 25, 2011). “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.”
- ⁴⁰ Heartbeat of Miami, *About Us* at <http://www.heartbeatofmiami.org/about/> (last visited Nov. 1, 2010).
- ⁴¹ National Campaign to Prevent Teen and Unplanned Pregnancy, *Policy Brief: Racial and Ethnic Disparities in Teen Pregnancy* (July 2010) at http://www.thenationalcampaign.org/resources/pdf/Briefly_PolicyBrief_RacialEthnicDisparities.pdf (last visited Oct. 26, 2011).
- ⁴² Kauthar B. Umar, M.A., *Maternal Mortality, African Americans Remain at Higher Risk*, U.S. Department of Health and Human Services Closing the Gap, Maternal Health, February 2004.
- ⁴³ H.R.636, 111th Cong., (2009)
- ⁴⁴ H.R. 1388, 111th Cong., (2009)
- ⁴⁵ H.R.165, 112th Cong., (2011)
- ⁴⁶ The Alan Guttmacher Institute, *State Legislation Enacted in 2011 Related to Reproductive Health* at <http://www.guttmacher.org/statecenter/updates/2011newlaws.pdf> (last visited Oct. 2011)
- ⁴⁷ The Alan Guttmacher Institute, *State Policies In Brief: ‘Choose Life’ License Plates* (Oct.24, 2011), at http://www.guttmacher.org/statecenter/spibs/spib_CLLP.pdf (last visited Oct. 24, 2011)

⁴⁸ Press Release. *AUL Trains Pregnancy Center Directors to Combat Pro-Abortion Assault*. NH INSIDER (Sept. 16, 2010) at <http://www.nhinsider.com/press-releases/2010/9/16/aul-defending-pregnancy-centers.html> (last visited Oct. 28, 2010).

⁴⁹ South Dakota H.B. 1217, 2011 Leg. Reg. Sess. (S.D. 2011)

⁵⁰ *Planned Parenthood of MN, ND, SD v. Duggard Choice Inc. of Texas v. Graham*, (preliminary injunction issued)

⁵¹ H.R.2543, 112th Cong., (2011); S.1374, 112th Cong., (2011).