

“She said abortion could cause breast cancer”

A REPORT ON:

**THE LIES, MANIPULATIONS, AND PRIVACY VIOLATIONS OF
CRISIS PREGNANCY CENTERS IN NEW YORK CITY**



NARAL
Pro-Choice New York Foundation



NATIONAL
INSTITUTE FOR
REPRODUCTIVE
HEALTH

2

BACKGROUND

4

RESEARCH PROCESS

5

LIMITATIONS

6

FINDINGS

15

CONCLUSION

16

APPENDICES

20

END NOTES

INTRODUCTION

Riding the New York City subway, one can't help but notice the posters of young women clustered among the advertisements for immigration attorneys and college courses: "Scared? Confused? We Can Help." "Abortion Alternatives."

These campaigns are the work of crisis pregnancy centers (CPCs), anti-choice organizations that frequently misrepresent themselves as full-service reproductive health centers. Their goal? To use whatever means they can to reach a woman considering abortion and prevent her from going through with that decision.

In 2009, in response to growing concerns about CPCs, the Activist Leadership Circle (volunteers for the NARAL Pro-Choice New York Foundation) decided to conduct an undercover investigation of the CPCs in New York. The purpose of this research was to determine how CPCs advertise themselves and whether or not they provide full options counseling, including complete and accurate information about abortion and contraception. The results, as presented in this report, demonstrate that many CPCs in New York City consistently provide misinformation and seek to manipulate and scare the women who turn to them for care they mistakenly believe to be accurate and unbiased.

BACKGROUND

WHAT ARE CRISIS PREGNANCY CENTERS?

Crisis pregnancy centers are typically non-profit organizations posing as pseudo-medical facilities operated by anti-choice activists that aim to coerce women considering abortion into carrying their pregnancies to term. CPCs often claim to offer the full range of information on reproductive options, but actually use a number of deceptive tactics to discourage women from choosing abortion.

CPCs represent the subtle and manipulative front-lines of the anti-choice movement in America. Beginning with the first CPC, which opened in Hawaii in 1967 after the state decriminalized abortion, CPCs have proliferated across the U.S.¹ Today, CPCs outnumber abortion providers by more than two to one: there are as many as 4,000 CPCs in the United States compared to fewer than 2,000 abortion providers.²

CPCs engage in a number of deceptive practices to achieve their goal of disguising these anti-choice facilities as legitimate medical clinics. CPCs are not, however, medical clinics; they are, for the most part, staffed by anti-choice volunteers rather than trained medical clinicians. Their efforts to deceive women include naming their facilities to sound like legitimate family planning clinics; advertising under the “Abortion” or “Medical” categories in the Yellow Pages; and offering services such as pregnancy tests, biased counseling, and ultrasounds. These practices do not serve the end of offering medical treatment, but rather aim to lend legitimacy to their attempt to dissuade women from choosing abortion.³

The four most prominent national chains of CPCs in the U.S. are Birthright, Care Net, Heartbeat

International, and the National Institute of Family Life Advocates (NIFLA) – all predominately Christian, anti-choice networks with affiliates across the country.⁴ Funding for CPCs varies widely, with many CPCs receiving private funds from donors and organizations with conservative or religious affiliations. In some states, CPCs are supported through state funding and proceeds from state sales of “Choose Life” license plates.⁵ From 1996 until recently, CPCs were eligible for funding through the federal Title V abstinence-only program and the community-based abstinence education program.⁶ Under the Obama administration, all three abstinence-only funding streams were eliminated or allowed to expire, but the health care reform bill passed in the spring of 2010 reinstated \$50 million per year for five years for Title V programs.⁷

CPCs IN NEW YORK STATE

New York is a pro-choice state with better access to abortion than most, and is also home to many CPCs. With over 250 abortion providers, most of whom are concentrated in New York City, the state is considered a hotbed of so-called “abortion vulnerable” women, making it a prime targets for CPCs.⁸

In the 1980s, former Operation Rescue leader Chris

Slattery founded Expectant Mother Care (EMC), a New York City-based chain of centers that were the first CPCs to start offering ultrasounds.⁹ Today, EMC claims to run nearly a dozen centers in New York City and boasts on its website that it is “[o]n the FrontLines for Life in...The Abortion Capital of America.”¹⁰ Other CPCs operating in New York City are affiliated with national CPC chains or are independent organizations.

Expectant Mother Care (EMC) is a chain of CPCs across the city that claims to be fighting “On the Front Lines for Life in...The Abortion Capital of America.”

EMC PREGNANCY CENTERS WEBSITE:
[HTTP://EMCFRONTLINE.ORG/](http://emcfrontline.org/)

Unlike in many states, CPCs in New York largely rely on private funding. Since 2007, New York has rejected federal Title V abstinence-only funding. In 2009, six organizations in New York State received federal community-based abstinence education grants, including one CPC in Long Island.¹¹ And recently, one CPC in Queens received grants of public funding from two separate members of the New York City Council.¹² For the most part, however, they are supported financially by private donors; evangelical and Catholic religious organizations; and corporations such as the Wal-Mart Foundation, Curves Fitness, and Chick-fil-A.¹³

In 2002, former New York State Attorney General Eliot Spitzer launched an investigation into several

CPCs in the state, issuing subpoenas based on concerns that the CPCs’ “advertising and business practices could lead women to believe that the centers provide medical services — including professional pregnancy testing — or that they provide abortions or referrals for abortion when in fact their goal is to persuade women not to consider abortion.”^{14 15} The subpoenas only appear to have resulted in one settlement agreement, between the Office of the Attorney General and Birthright of Victor New York, Inc., a CPC in Ontario County. The agreement required Birthright to:

- clearly inform clients that it does not provide or make referrals for abortion or birth control;
- disclose verbally 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 inform the woman that only a licensed medical provider can confirm a pregnancy and provide medical advice about pregnancy;
- clarify in advertising and consumer contacts that the pregnancy tests the center provides are self-administered; and
- tell people who call or visit the center that it is not a medical facility.¹⁶

Prior to Spitzer’s investigation, previous New York attorneys general had investigated CPCs across the state and, as a result, entered into consent decrees with some CPCs in order to address concerns about false advertising and practicing medicine without a license.¹⁷ While some of these consent decrees may still be valid, most are outdated and no longer applicable to the deceptive and manipulative tactics CPCs currently employ. Moreover, currently there are no municipal, state, or federal laws that specifically regulate CPCs in New York City.

RESEARCH PROCESS

In the first phase of research, trained volunteer investigators gathered information about CPCs throughout the state by analyzing their websites, investigating their funding sources, and conducting “secret shopper” phone calls. After the first phase revealed that New York’s CPCs are heavily concentrated in New York City, it was decided that the second phase of research would focus on this area. Next, volunteer investigators made in-person visits to CPCs in New York City to identify the services they provide and the way they present and discuss abortion and contraception, as well as to collect any pamphlets, brochures, or other materials offered by the CPCs.

The following report summarizes the results of the investigation into CPCs in New York City. It is difficult to determine exactly how many CPCs exist in New York City, since various sources provide different numbers. Based on Internet research, our volunteer investigators identified a total of 16 CPCs in New York City. Of these, volunteer investigators examined 14 unique websites, spoke to eight CPCs on the phone, visited 10 CPCs in person, and corresponded with one via e-mail. (See Appendix 1 for a list of all CPCs investigated.)

WEBSITE ANALYSIS

Each website was analyzed to determine the services and referrals advertised; whether or not the CPC’s anti-abortion agenda was evident or clearly stated; and the accuracy of information provided about abortion, adoption, parenting, and contraception.

PHONE SURVEY

Volunteer investigators, who called anonymously by using *67 to block the incoming phone number, posed as potentially pregnant women seeking

information about the services provided by the CPC. Prior to making the phone calls, all volunteers were trained on how to gather information and what to expect during the call. Immediately after calling the CPCs, they recorded the responses they received and all answers were collected and compiled. (See Appendix 2 for a list of questions asked.)

IN-PERSON VISITS

After participating in trainings on how to gather information and what to expect during the visit, volunteer investigators were dispatched in pairs to CPCs throughout the five boroughs, posing as a pregnant woman and a friend, relative, or parent. In most cases, the volunteer investigator said she had already received a positive result from a home pregnancy test and was interested in meeting with a counselor to discuss her options. At three CPCs, however, the volunteer investigator said she suspected she was pregnant and requested a pregnancy test from the center.

Immediately following each visit, the investigators

completed a survey about their experience and impression of the CPC. (See Appendix 3 for post-visit survey questions.) In lieu of a visit, one investigator had an extended e-mail correspondence with a CPC. For the purposes of this report, the e-mail correspondence was included as an “in-person visit.”

LITERATURE REVIEW

During the in-person visits, volunteer investigators collected all written materials provided by the CPCs. Typically, this included brochures and fact sheets that were available in the waiting room, as well as information given to the investigators by the CPC counselors. Subsequently, the medical accuracy and tone of the materials were analyzed.

A survey of CPC materials designed to deter women from choosing abortion.



LIMITATIONS

The research was conducted by trained volunteers through background research, website analysis, phone investigation, and in-person visits. The results provide clear trends related to CPCs in New York City, but the findings contained herein are not exhaustive. It was difficult to determine exactly how many CPCs exist in New York City. Furthermore, not every CPC had a public website, and we were unable to reach every CPC on the phone or in person. Finally, because none of the volunteer investigators was pregnant, this report contains no insight into how CPCs would respond to a proven pregnancy.

The research project was not intended to uncover whether or not the CPCs investigated for this report are currently in compliance with any prior consent decrees or agreements entered into with former New York State attorneys general. In addition, while a number of the concerns identified in this investigation lend themselves to a legislative remedy, a primary purpose of this report is to educate women and the public at large about the full range of deceptive and manipulative practices used by CPCs in New York City.

*“Is it really necessary
to kill your baby in
order to solve the
problems caused by
your pregnancy?
Is there another way?”*

PAMPHLET CALLED “YOU HAVE A RIGHT
TO KNOW” DISTRIBUTED AT THE BRIDGE
TO LIFE, INC. IN QUEENS

FINDINGS: MISINFORMATION, MANIPULATION, & SCARE TACTICS

TARGETING WOMEN

“Free and confidential services.”¹⁸ “We know exactly how you feel and you’re not alone.”¹⁹

These welcoming sentiments greet visitors to most CPC websites. While the sites vary in terms of how much information they provide — from basic information like hours of operation and location to pages about abortion, adoption, and parenting — nearly all present themselves as hospitable places offering emotional support. Focusing on the negative emotions some women experience with an unintended pregnancy, the websites assure visitors that CPC staff can empathize.

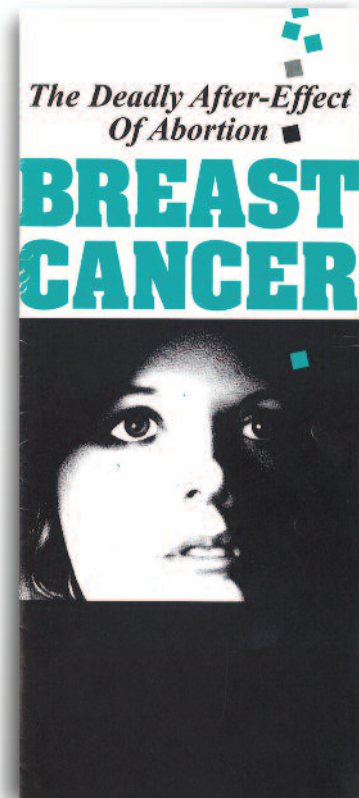
With neutral sounding names like Pregnancy Help, Inc., Pregnancy Resources Services, and Center for Pregnant Women, the CPCs seem to take great pains to conceal their anti-choice agenda; they actively seek to represent themselves as legitimate reproductive health centers. Only 25% of the surveyed CPCs clearly identify themselves as “pro-life” on their websites. Another 37.5% explicitly state that they do not recommend abortion, but still claim to provide unbiased, accurate information about the procedure to women considering it. For example, the Crisis Pregnancy Center of New York’s website states that the Center “does not provide abortions or referrals for abortion but we are committed to offering accurate information about abortion procedures and risks.”²⁰ The remaining 37.5% present themselves as entirely neutral, making it nearly impossible to discern their true anti-choice bias from their websites.

And while CPCs do not refer for abortion, they take pains to couch their

anti-abortion position in terms of concern for women and to distance themselves from the incendiary rhetoric of the anti-choice movement. Many even co-opt the language of the reproductive rights movement; references to “rights,” “choices,” and “informed decisions” abound. The Crisis Pregnancy Center of New York website, for example, states, “You have the legal right to choose the outcome of your pregnancy.”²¹ The Midtown Pregnancy Resource Center assures its potential clients that its services are delivered in “a professional atmosphere without the use of scare tactics or emotional appeals.”²² Pregnancy Help, Inc. promises, “You won’t find any hype, politics, or judgment.”²³

Similarly, most of the CPCs reached on the phone did not advertise their anti-choice views. Volunteer investigators reported that, on the phone, the CPCs were welcoming and seemed eager to get the caller to come in for an appointment. They did not give inaccurate information about abortion over the phone. None mentioned abortion unless asked; once asked, most said they did not recommend or refer for abortion. The majority of CPCs called did not volunteer that they were not a medical clinic until the volunteer investigator explicitly asked if she would be meeting with a doctor or nurse.

In an effort to target women seeking legitimate medical facilities, CPCs often locate themselves near clinics that offer abortion services. EMC Pregnancy Centers makes clear that strategic positioning near a medical



A CPC brochure falsely linking breast cancer to abortion.

CPCs TARGET NEIGHBORHOODS WITH ABORTION PROVIDERS



“She said that pregnancy releases hormones and abortion stops that process, which is harmful. She asked how far along [my friend] was and asked if her breasts felt different or sore. She said that abortion could cause breast cancer.”

VOLUNTEER INVESTIGATOR AT
BRIDGE TO LIFE INC. IN QUEENS

“She said all women who went through with pregnancy were happy and never regret it, whereas women who had abortions were unhappy.”

VOLUNTEER INVESTIGATOR
AT PREGNANCY HELP INC.
IN MANHATTAN

clinic is a calculated tactic, stating on 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.”²⁴ Another eight CPCs in New York City are located within walking distance of a hospital.

Approximately 75% of investigated CPCs fail to disclose their anti-choice agenda on their websites, thereby misleading unsuspecting women who may think they are going to visit a clinic that offers medically accurate and unbiased comprehensive reproductive health information and services.

DECEIVING WOMEN

Not only do CPCs mislead women via deceptive advertising practices, but they also actively foster an impression of medical authority, often by offering free pregnancy tests. Nearly all of the surveyed CPCs offer free pregnancy testing, and this service is often prominently highlighted on their websites. In reality, these tests are self-administered urine tests that are available at any pharmacy, but by claiming to provide, as Pregnancy Resource Services advertises, “medical quality” pregnancy tests, CPCs also attract women in need of free services.²⁵ There is also a growing trend of CPCs providing ultrasounds in order to further deceive women about their credibility as a medical facility that meets medical standards of care, including unbiased counseling.²⁶ Offering ultrasounds is also a strategy to deter women from abortion based on the theory that a woman is less likely to choose to terminate her pregnancy if she is able to view her fetus or listen to the fetal heartbeat. Two of the CPCs visited offered ultrasounds and another said it would refer for one.

Even more alarming, the majority of CPCs visited asked the volunteer investigators to fill out forms that included questions soliciting personal information. For example, the EMC Pregnancy Center in the Bronx asked about relationship status, work information, and even the personal information of the “father of the baby.” However, only three CPC counselors told the volunteer investigator that her information would be kept confidential, and none of them asked the investigator to sign paperwork about confidentiality or HIPAA compliance.

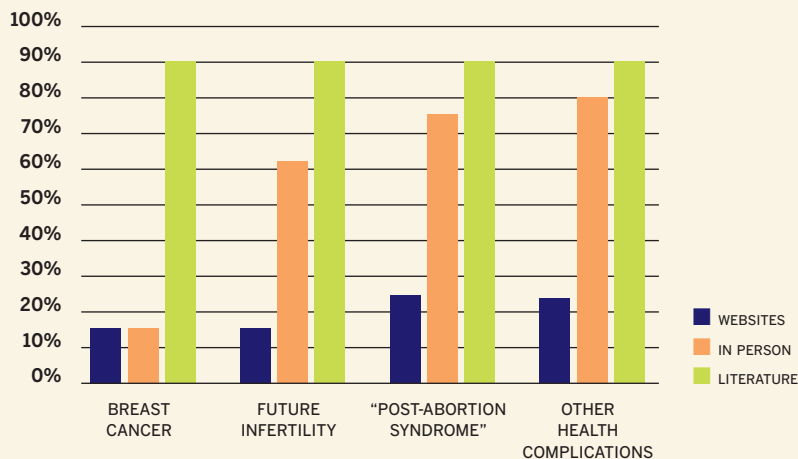
Hiding their anti-abortion agenda and giving the false impression of medical expertise serves the CPCs' dual purpose of confusing, and thereby tricking, women who may be seeking a genuine medical facility, as well as legitimizing the inaccurate information and biased counseling these centers provide.

MISLEADING WOMEN

Nearly every CPC investigated provided misleading — or sometimes entirely false — information about abortion, either through websites, written materials, or counseling sessions. They portrayed abortion as a painful, dangerous procedure that leads to a range of physical and emotional damage: future infertility, higher risk of breast cancer, “post-abortion syndrome,” and other health complications, including sexual dysfunction, infection, cervical scarring, and death.

While the majority of surveyed websites simply encouraged potential clients to come in for an appointment to “get the facts” about the procedure, the CPCs that did mention abortion on their websites provided medically inaccurate information: approximately 13% claimed abortion was linked to breast cancer and future infertility, and 25% warned it could cause “post-abortion syndrome” and other health complications.

PERCENTAGE OF CPCs MAKING FALSE CLAIMS ABOUT THE RISKS OF ABORTION



“She tried to persuade me to keep it by saying that I’m 27 years old and I’m getting really old and I should start considering that because I may not be able to have children again.”

VOLUNTEER INVESTIGATOR
AT EMC PREGNANCY CENTER
IN THE BRONX

“50% of women who have had abortions report experiencing emotional and psychological problems lasting for months or years.”

WEBSITE OF PREGNANCY RESOURCE
SERVICES IN STATEN ISLAND —
[HTTP://WWW.PREGNANCYSTATENISLANDNY.COM/ABORTION-RISKS.HTML](http://www.pregnancystatenislandny.com/abortion-risks.html)

“Adoption allows you to move forward with your life, without the responsibility of parenting, much like abortion. The difference is adoption means life for your unborn child while abortion means death. Choose life.”

WEBSITE OF THE CRISIS PREGNANCY
CENTER OF NEW YORK IN STATEN ISLAND:
[HTTP://WWW.CPCNY.ORG/OPTIONS.HTM](http://www.cpcny.org/options.htm)

CPCs were more likely to misrepresent the risks of abortion during in-person visits. Eighteen percent of CPC counselors claimed abortion led to a higher risk of breast cancer, 64% cited future infertility, 73% mentioned “post-abortion syndrome” or other mental health problems, and 82% overstated the risk of other health complications. In addition, a full 89% of CPCs visited presented all of these false claims as risks of abortion in their written materials.

In reality, abortion is one of the safest and most common surgical procedures performed in the United States. The Guttmacher Institute reports that approximately one third of American women have an abortion by age 45 and less than 0.3% of abortion patients experience a complication that requires hospitalization.²⁷ Studies have repeatedly found no link between abortion and increased risk of breast cancer, future infertility, or mental health problems. The National Cancer Institute concluded that abortion is not correlated with an increased risk for breast cancer, and “post-abortion syndrome” is not recognized by mainstream medical authorities, such as the American Psychological Association (APA) or the American Psychiatric Association.²⁸ Indeed, while women’s experiences with abortion are varied, the APA has found that after an abortion, most women report feeling “relief and happiness.”²⁹

The false information about abortion presented as fact at the CPCs is designed solely to deter women from making the decision to have one.

DELAYING WOMEN’S DECISION-MAKING

The goal of CPCs is to prevent a woman from having an abortion, which is why one of their primary tactics is to make it harder for her to obtain one. Knowing that the further along a woman is in pregnancy the more expensive and inaccessible abortion becomes, CPC staff will try to manipulate a client into delaying a decision. Two CPC websites surveyed inappropriately suggest that a woman may be at risk for a miscarriage and thus might not even have to make a choice at all. For example, Pregnancy Resource Services states on its website, “If your pregnancy is confirmed, we also offer free ultrasound exams to determine if your pregnancy is viable. You may not even need to make this choice as you could be headed toward a natural miscarriage.”³⁰

The counselors at two CPCs were even more overt in their efforts to delay the client’s decision-making — they provided false information



“She shared her personal story of being a single mother and said that if she could do it, I can too. She kept making raising a child sound so easy and reassured me that I can still continue school as many high schools have programs that help teenage mothers and that I can certainly go to college.”

VOLUNTEER INVESTIGATOR AT
CRISIS PREGNANCY CENTER OF
NEW YORK IN STATEN ISLAND

about how long a woman can wait before getting an abortion. For example, when a volunteer investigator posing as a woman who was 9.3 weeks pregnant asked a counselor at the EMC Pregnancy Center in the Bronx how long she had to make a decision, the counselor told her that “in this country you can get an abortion up to nine months” and “you’ve got time to think about it.” In reality, abortion is prohibited after the point of fetal viability unless a woman’s life or health is in danger or if the fetus is not viable.

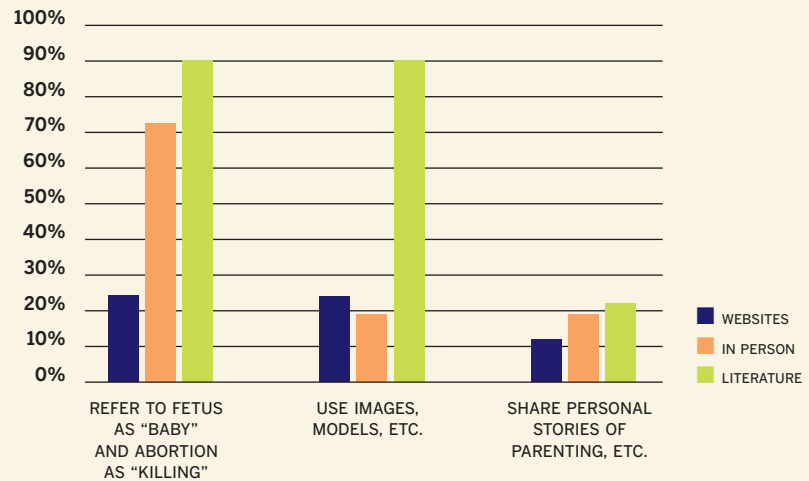
Providing misleading information to delay decision-making is a clear strategy to make abortion more difficult to access. Having an abortion within the first trimester is safer, less expensive, and more accessible than later in pregnancy. In fact, 58% of abortion patients report that they would have preferred to have their abortion earlier but were delayed because of problems or logistical matters.³¹

By deliberately causing women to delay medical care and falsely insisting that it does not matter at what point in pregnancy a woman decides to have an abortion, CPCs are not only being dishonest but also placing an undue burden on the women for whom they claim to be advocating.

“She asked again how far along [I] was and brought over a pamphlet to show pictures of what the fetus looked like at that stage of pregnancy and emphasized how fast the baby develops and how it is a person and a living thing.”

VOLUNTEER INVESTIGATOR AT
BRIDGE TO LIFE, INC. IN QUEENS

PERCENTAGE OF CPCs USING EMOTIONALLY MANIPULATIVE TACTICS



EMOTIONALLY MANIPULATING WOMEN

In addition to attempting to scare women by misrepresenting the risks of abortion, many CPCs also use emotionally manipulative counseling to shame women out of choosing abortion. Although most of the surveyed CPCs describe abortion in medical terms on their websites, in person and in written materials they often used language that revealed their anti-abortion views. When describing the abortion procedure during in-person visits, 73% of the counselors 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.

Many CPCs also show images, models, or videos of fetal development to foster an emotional attachment to the pregnancy. Twenty-five percent of the surveyed CPC websites use such images, 18% of the counselors did so (sometimes while the volunteer investigator was waiting for the results of her pregnancy test), and 89% of CPCs visited included them in their written materials. For example, the AAA Pregnancy Problem Center distributed a pamphlet called “Watch Me Grow!” describing the nine months of pregnancy in a first-person narrative from the perspective of the fetus.

Another common tactic of the CPCs surveyed was to share personal stories about women regretting abortions or successfully parenting or

placing children in adoption. For example, on the Pregnancy Resource Center's website, a woman who had an abortion warns, "Truly if there was one thing I could go back and undo in my life, it would be that abortion."³² Thirteen percent of CPC websites used personal stories, 18% of counselors told these stories in person, and 22% of CPCs visited included these stories in written materials.

In contrast to abortion, most CPCs portrayed adoption and parenting as universally positive, but offered little information on the realities of those options. For example, a counselor at the Crisis Pregnancy Center of New York shared her own story of being a single mother, dismissed the volunteer investigator's concerns about continuing her education, and assured her that "if I could do it, you can too."

Similarly, many CPCs were enthusiastic about the benefits of adoption, but few provided information about the process or the different types of adoption. Many simply lauded adoption as a "loving" or "brave" choice and told personal stories of women who had a positive experience with it.

A lack of neutrality, emotional manipulation, and shaming are not recognized components of the "unbiased options counseling" that CPCs claim to provide. Unfortunately, these coercive tactics are widely used by CPCs to discourage women from choosing abortion. While a legislative remedy may not be appropriate to address these tactics, it is critical that women entering CPCs understand that the counseling they receive will reflect an anti-choice ideology.

IGNORING THE NEEDS OF WOMEN

CPCs claim to be concerned about women facing the challenges of an unintended pregnancy, yet they do little to provide information about contraception and safe sex. Only one CPC website surveyed even mentions contraception, and this was simply to point out its failure rates.³³ During the phone investigation, when asked if they provided birth control or information on where to get birth control, all CPC operators said no. Similarly, all of the CPCs' counselors failed to discuss contraception with the volunteer investigator. A counselor at Maternity Birthcare Services advised the volunteer investigator to "use protection" but did not specify what her options were.

"Simply put, most women who choose abortion are going against their own moral codes, and this explains why they feel guilt afterwards."

PAMPHLET CALLED "HEALING AFTER ABORTION" DISTRIBUTED AT THE MIDTOWN PREGNANCY SUPPORT CENTER IN MANHATTAN

"When I purposefully put my hand on my tummy, she pointed it out and said that it's a mother's nature to protect the baby and implied that I'm showing my desire for this baby subconsciously."

VOLUNTEER INVESTIGATOR AT THE CRISIS PREGNANCY CENTER OF NEW YORK IN STATEN ISLAND

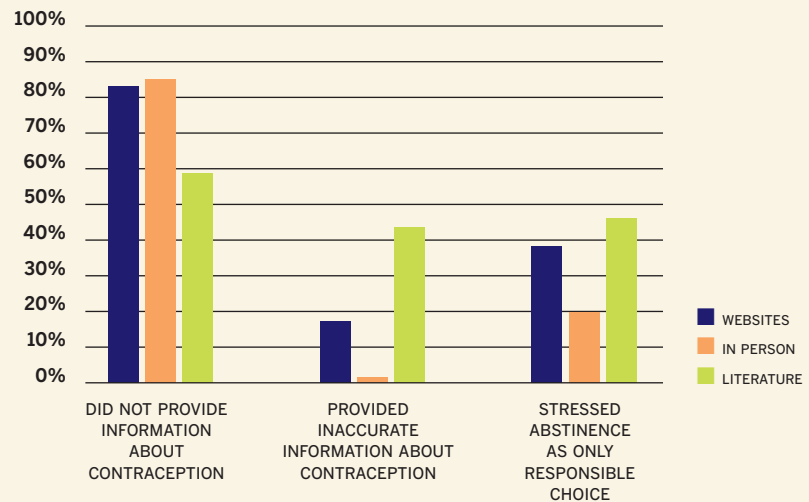
“The condom’s biggest flaw is that those using it to prevent the conception of another human being are offending God.”

PAMPHLET CALLED “THE FLAWED CONDOM: SPOTTING THE BIG HOLES IN CONDOM PROPAGANDA” DISTRIBUTED AT THE EMC PREGNANCY CENTER IN BROOKLYN

“You can decide to be abstinent before you become sexually active, or after. If you’ve already blown it you can still start again. Everyone makes mistakes.”

PAMPHLET CALLED “THE TRUTH ABOUT SEX” DISTRIBUTED AT THE EMC PREGNANCY CENTER IN BROOKLYN

PERCENTAGE OF CPCs PROVIDING LITTLE OR INACCURATE INFORMATION ABOUT CONTRACEPTION



Furthermore, in their written materials and pamphlets, many CPCs actively discouraged the use of various forms of contraception by providing false and misleading information about their effectiveness. While 56% of CPCs visited provided no written literature about contraception, the remaining 44% gave inaccurate information about the efficacy and/or risks of contraception. For example, a few CPCs distributed pamphlets that claim condoms are permeable to HIV and vastly overstate their failure rate.³⁴ Others assert that emergency contraception and other hormonal contraceptives can cause abortion and may have harmful long-term effects.³⁵

In addition to undermining confidence in contraception, many CPCs promote abstinence-only-until-marriage as the only risk-free and responsible choice. Thirty-six percent of surveyed websites refer to abstinence-only-until-marriage as the only effective way to prevent sexually transmitted diseases (STDs) and unintended pregnancies and stress that abstinence until marriage is the only option for a happy, healthy life. Eighteen percent of CPC counselors echoed this view, and 44% of CPCs visited distributed literature advocating abstinence-only-until-marriage.

With a single-minded focus on abstinence, CPCs place ideology over the real needs of their clients and fail to provide a critical preventive service to women who are already sexually active, depriving them of information they need to prevent unintended pregnancies in the future.

CONCLUSION

NARAL Pro-Choice New York Foundation and the National Institute for Reproductive Health believe that the deceptive and manipulative practices of CPCs must be exposed. Women facing unintended pregnancies have a right to accurate, unbiased, and comprehensive information about their full range of options. They deserve to know whether the “options counseling” and information they receive is based on medical fact or anti-choice ideology and whether the facility they are walking into is in fact a health care facility — and therefore required to abide by privacy laws — or simply posing as one. Women deserve the truth so that they can make the best decision about an unintended pregnancy for themselves and their families.

We believe that a woman who visits a CPC when faced with an unintended pregnancy should, at minimum, have the right to know:

- Whether she will, in fact, receive comprehensive options counseling, including information and referrals for abortion and contraception;
- Whether or not she will be meeting with a licensed medical provider and that only a licensed medical provider is qualified to accurately date a pregnancy; and
- That if she gives her private, personal information to the CPC staff it will be treated confidentially.

While not every dishonest practice that our investigation exposed can be remedied through legislation, public education can arm women with the facts about the true agenda of CPCs. Our hope is that this report will also promote public conversation and increase public awareness of the full range of deceptive practices employed by CPCs in New York City.

APPENDIX

APPENDIX 1: LIST OF CPCs INVESTIGATED IN NEW YORK CITY

Name	Location	Website	Researched Funding	Spoke on Phone	Visited In-person
Pregnancy Help, Inc.	233 W. 14th St. New York, NY	http://pregnancyhelpnyc.org/	X	X	X
Midtown Pregnancy Support Center	110 E. 40th St., Suite 706 New York, NY	http://www.mpsc.org/faq.php	X	X	X
Maternity Birthcare Services	1011 1st Ave., 2187 New York, NY	no site	X		X
Sisters of Life	320 E. 66th St. New York, NY	http://sistersoflife.org/	X	X	X (e-mail)
EMC Pregnancy Center	419 Lafayette St. New York, NY	http://emcfrontline.org/	X		X
The Bridge to Life, Inc	23-40 Astoria Blvd. Astoria, NY	http://www.thebridgetolife.org/index.htm	X	X	X
EMC Pregnancy Center	11311 Jamaica Ave. Richmond Hill, NY	http://emcfrontline.org/	X		
EMC Pregnancy Center	195-04 Hillside Ave. Hollis, NY	http://emcfrontline.org/	X		
EMC Pregnancy Center	3765 104th St. Corona, NY	http://emcfrontline.org/	X		
AAA Pregnancy Problem Center	6802 5th Ave. Brooklyn, NY	no site	X	X	X
Center for Pregnant Women	191 Joralemon St., 7th Fl. Brooklyn, NY	http://www.ccbq.org/program.htm	X	X	
EMC Pregnancy Center	44 Court St. Brooklyn, NY	http://emcfrontline.org/	X		X
EMC Pregnancy Center	226A W. 238 St. Bronx, NY	http://emcfrontline.org/	X		
EMC Pregnancy Center	344 E. 149th St., 2nd Fl. Bronx, NY	http://emcfrontline.org/	X		X
Pregnancy Resources Services	15 Treadwell Ave. Staten Island, NY	http://www.pregnancystatenislandny.com/	X	X	X
Crisis Pregnancy Center of New York	38 10th St. Staten Island, NY	http://www.cpcny.org/	X	X	X

APPENDIX 2: PHONE SURVEY QUESTIONS

- Q1** I think I might be pregnant and I don't know what to do. Can you help me? What type of services do you provide? (Note any lack of/mention of abortion.)
- Q2** How long will the appointment take? How long will the results of the pregnancy test take?
- Q3** Will I be meeting with a doctor? Nurse? Physician's assistant?
- Q4** What will the appointment involve? What will the doctor/nurse/PA do?
- Q5** If I'm not pregnant, can I get birth control from you? Can you tell me where I can get birth control?
- Q6** How much will all of this cost?
- Q7** Describe the phone call made to the CPC.

APPENDIX 3: POST-VISIT SURVEY

01 PLEASE DESCRIBE THE CPC:

- 1a Did it feel like a clinic? ☐ Yes ☐ No
- 1b Was it in a building with other medical offices? ☐ Yes ☐ No
- 1c Was it near a hospital? ☐ Yes ☐ No
- 1d Was it near a Planned Parenthood or other women's health center? ☐ Yes ☐ No
- If yes, which one?

02 PLEASE DESCRIBE THE WAITING ROOM EXPERIENCE:

- 2a How long were you left in the waiting room?
- 2b Did the waiting room in the CPC feel like a clinic waiting room? ☐ Yes ☐ No
- If yes, please describe (what kind of decorations, posters, what else was in the room.)
- 2c Did you see any pamphlets or reading material? ☐ Yes ☐ No
- If yes, please describe the material (what kind of magazines and flyers, were they religious, were they health-related?)
- 2d How many people were in the waiting room?
- 2e Describe the other people waiting (approximate age, gender, ethnicity, any other children, couples, general demeanor, e.g. nervous, excited, etc.).

03 HOW MANY STAFF MEMBERS DID YOU COME IN CONTACT WITH AT THE CPC?

04 PRIMARY STAFF PERSON (OPTIONS COUNSELOR):

- 4a Was the person male or female? ☐ Male ☐ Female
- 4b Was the person wearing a medical uniform or lab coat? ☐ Yes ☐ No
- 4c How did this person present him/herself to you?
- ☐ Doctor ☐ Nurse ☐ Volunteer ☐ Clinician ☐ Counselor
- If something other than above, please describe.

05 SECONDARY STAFF PERSON

- 5a Was the person male or female? ☐ Male ☐ Female
- 5b Was the person wearing a medical uniform or lab coat? ☐ Yes ☐ No
- 5c How did this person present him/herself to you?
- ☐ Doctor ☐ Nurse ☐ Volunteer ☐ Clinician ☐ Counselor
- If something other than above, please describe.

06 WERE YOU TOLD THAT YOUR INFORMATION WOULD BE KEPT CONFIDENTIAL?

- ☐ Yes ☐ No

07 DID YOU HAVE TO SIGN PAPERWORK ABOUT CONFIDENTIALITY OR HIPAA?

- ☐ Yes ☐ No

08 DID YOU TAKE A PREGNANCY TEST?

- ☐ Yes ☐ No

- 8a If yes, how long did it take to process your pregnancy test?
- ☐ Less than 5 minutes ☐ About 30 minutes ☐ About 1 hour ☐ More than 1 hour
- If more than 1 hour, about how long?
- 8b Test results ☐ Positive ☐ Negative
- 8c What did you do while they processed the pregnancy test? Did you receive counseling or were you left in the waiting room? Please describe:

09 WERE YOU SHOWN A SLIDE SHOW, VIDEO, FETAL MODELS, OR PHOTOGRAPHS?

- ☐ Yes ☐ No

- If yes, please describe:

10 DID THE STAFF PERSON USE A GESTATIONAL WHEEL TO GIVE YOU AN APPROXIMATE:

- 10a Number of weeks pregnant? ☐ Yes ☐ No
- 10b Date of conception? ☐ Yes ☐ No
- 10c Due date? ☐ Yes ☐ No
- 10d Please elaborate:

11 DID ANYONE TELL YOU THAT THE CPC WOULD PERFORM AN ULTRASOUND IF THE PREGNANCY TEST WAS POSITIVE?

- ☐ Yes, they offered ☐ Yes, when I asked directly
- ☐ No, refused to discuss when asked ☐ No, didn't offer and I didn't ask
- If yes, please explain the reason they gave for providing ultrasounds:

12 DID YOU FEEL PRESSURE FROM THE CPC STAFF TO MAKE A CERTAIN DECISION ABOUT YOUR PREGNANCY?

- ☐ Yes, to have abortion ☐ Yes, to continue pregnancy and parent
- ☐ Yes, to choose adoption ☐ No pressure in any direction

12a When/if you expressed your decision (to have an abortion, keep the baby, etc.), how did they react?

- ☐ Respectfully accepted ☐ Tried to change my mind/persuade
☐ Openly hostile/disapproving of my decision

12b If the staff person tried to convince you to choose a different option, what specifically did they say?

13 DID ANYONE TALK TO YOU ABOUT ABORTION?

- ☐ Yes, they offered ☐ Yes, when I asked directly
☐ No, they didn't offer and I didn't ask ☐ No, refused to discuss when asked

13a If they discussed abortion, did they discuss any of the following issues/risks? (check all that apply)

- ☐ breast cancer ☐ future fertility ☐ sexual dysfunction ☐ fetal pain ☐ medical complications
☐ other risk to fetus ☐ mental health problems ☐ post-abortion stress syndrome
☐ moral judgment/moral issues ☐ religious/spiritual issues

13b Please elaborate on what they discussed.

13c Did they provide fact sheets or other materials on abortion? ☐ Yes ☐ No

13d If they talked to you about abortion, did they describe the abortion process/procedure? ☐ Yes ☐ No

- If yes, how did they describe the abortion process (e.g. what terms did they use? fetus, baby, child, medical terms, names of instruments used, terminate, kill, etc.)?

13e Did they give you any referrals or resources for where to get abortion services?

- ☐ Yes, they offered ☐ Yes, when I asked directly
☐ No, didn't offer and I didn't ask ☐ No, refused to discuss when asked
- If yes, what resources did they give you?
 - If no, what reasons did they give for being unable to refer you/give you resources?

14 DID ANYONE TALK TO YOU ABOUT ADOPTION?

- ☐ Yes, they offered ☐ Yes, when I asked directly
☐ No, didn't offer and I didn't ask ☐ No, refused to discuss when asked

15 DID ANYONE TALK TO YOU ABOUT RESOURCES AND HELP THAT WOULD BE AVAILABLE TO YOU IF YOU CARRIED THE PREGNANCY TO TERM?

- ☐ Yes, they offered ☐ Yes, when I asked directly
☐ No, didn't offer and I didn't ask ☐ No, refused to discuss when asked

15a If yes, what resources did they offer (e.g. maternity/baby clothes, prenatal care, prenatal support, living support, etc.)?

15b Did they discuss any requirements for receiving these resources? ☐ Yes ☐ No

- If yes, what were the requirements?

16 WERE YOU PROMISED ANY SORT OF FINANCIAL ASSISTANCE IF YOU CONTINUED YOUR PREGNANCY?

- ☐ Yes ☐ No

- If yes, how much and what type of assistance?

17 IS THERE ANYTHING ELSE ABOUT YOUR EXPERIENCE (POSITIVE OR NEGATIVE) THAT YOU THINK WE SHOULD KNOW ABOUT? WERE YOU SURPRISED BY ANYTHING THAT OCCURRED? PLEASE PROVIDE DETAILS OF ANY IMPRESSIONS OR FEELINGS.

ENDNOTES

- 1 National Abortion Federation, "Crisis Pregnancy Centers: An Affront to Choice," (Washington DC: National Abortion Federation, February 2006), http://www.prochoice.org/pubs_research/publications/downloads/public_policy/cpc_report.pdf (accessed July 8, 2010).
- 2 Vitoria Lin and Cynthia Dailard, "Crisis Pregnancy Centers Seek to Increase Political Clout, Secure Government Subsidy," *The Guttmacher Report on Public Policy*, vol. 5, no. 2 (May 2002), <http://www.guttmacher.org/pubs/tgr/05/2/gr050204.html> (accessed July 8, 2010).
- 3 National Abortion Federation, "Crisis Pregnancy Centers: An Affront to Choice."
- 4 Legal Momentum, "Crisis Pregnancy Center Profiles," (New York: Legal Momentum) <http://www.legalmomentum.org/assets/pdfs/cpcprofiles.pdf>, (accessed July 8, 2010).
- 5 National Abortion Federation, "Crisis Pregnancy Centers: An Affront to Choice."
- 6 Advocates for Youth and SIECUS, "Toward a Sexually Healthy America: Roadblocks Imposed by the Federal Government's Abstinence-Only-Until-Marriage Education Program," (Washington, DC: Advocates for Youth and SIECUS, 2001) <http://www.naccho.org/topics/HPDP/infectious/hiv/resources/upload/abstinenceonly.pdf> (accessed September 23, 2010).
- 7 Rob Stein, "Health bill restores \$250 million in abstinence-only funding," *The Washington Post*, March 27, 2010, <http://www.washingtonpost.com/wp-dyn/content/article/2010/03/26/AR2010032602457.html> (accessed September 24, 2010).
- 8 Guttmacher Institute, "State Facts About Abortion: New York," (New York: Guttmacher Institute) http://www.guttmacher.org/pubs/sfaa/new_york.html (accessed July 8, 2010).
- 9 National Abortion Federation, "Crisis Pregnancy Centers: An Affront to Choice."
- 10 EMC Pregnancy Centers, Homepage, <http://www.emcfrontline.org/> (accessed July 8, 2010).
- 11 SIECUS, "New York State Profile Fiscal Year 2009," (New York: SIECUS) http://www.siecus.org/_data/global/images/State%20Profile%20FY%2009/NEW%20YORK.pdf (accessed July 13, 2010).
- 12 The Bridge to Life, Inc. received \$3,500 from Councilmember Halloran and \$3,000 from Councilmember Ulrich. (Council Discretionary Allocations, Schedule C, p. 16, <http://council.nyc.gov/html/releases/pdfs/FY2011SkedC.pdf>).
- 13 After conducting research into the funding sources of CPCs in New York State and analyzing the New York State Budget, NARAL Pro-Choice New York Foundation's volunteer investigators found no evidence of state funding for CPCs.
- 14 Press release issued by Office of New York State Attorney General Eliot Spitzer, "Spitzer Reaches Agreement with Upstate Crisis Pregnancy Center," (Feb. 28, 2002), http://www.ag.ny.gov/media_center/2002/feb/feb28c_02.html (accessed July 8, 2010).
- 15 Nancy Tilghman, "Dillon and Spitzer Clash Over Abortion," *The New York Times*, February 24, 2002, <http://www.nytimes.com/2002/02/24/nyregion/dillon-and-spitzer-clash-over-abortion.html> (accessed September 24, 2010).
- 16 Press release issued by Office of New York State Attorney General Eliot Spitzer, "Spitzer Reaches Agreement with Upstate Crisis Pregnancy Center."
- 17 Alan Cooperman, "Abortion Battle: Prenatal Care or Pressure Tactics? 'Crisis Pregnancy Centers' Expand and Draw Criticism," *Washington Post*, February 21, 2002, <http://www.washingtonpost.com/ac2/wp-dyn?pagename=article&contentId=A42118-2002Feb20¬Found=true> (accessed September 24, 2010).
- 18 Pregnancy Resource Services, "Our Services" page, <http://www.pregnancystatenislandny.com/our-services.html> (accessed July 8, 2010).
- 19 Pregnancy Help, Inc., "Consider Your Options" page, <http://pregnancyhelpnyc.org/options/tabid/613/Default.aspx> (accessed July 8, 2010).
- 20 Crisis Pregnancy Center of New York, Homepage, <http://www.cpcny.org/> (accessed July 8, 2010).
- 21 Crisis Pregnancy Center of New York, "Options" page, <http://www.cpcny.org/options.htm> (accessed July 8, 2010).
- 22 Midtown Pregnancy Support Center, "About Us" page, <http://www.mpssc.org/about-us.php> (accessed July 8, 2010).
- 23 Pregnancy Help, Inc., Homepage, <http://pregnancyhelpnyc.org/> (accessed July 8, 2010).
- 24 EMC Pregnancy Centers, Homepage, <http://emcfrontline.org/index.php> (accessed July 8, 2010).
- 25 Pregnancy Resource Services, Homepage, <http://www.pregnancystatenislandny.com/> (accessed July 8, 2010).
- 26 National Abortion Federation, "Crisis Pregnancy Centers: An Affront to Choice."
- 27 Guttmacher Institute, "Facts on Induced Abortion in the United States," (New York: Guttmacher, May, 2010) http://www.guttmacher.org/pubs/fb_induced_abortion.html (accessed July 8, 2010).
- 28 Susan A. Cohen, "Abortion and Mental Health: Myths and Realities," *Guttmacher Policy Review*, vol. 9, no. 3 (Summer 2006), <http://www.guttmacher.org/pubs/gpr/09/3/gpr090308.html> (accessed July 8, 2010).
- 29 Susan A. Cohen, "Abortion and Mental Health: Myths and Realities," *Guttmacher Policy Review*, vol. 9, no. 3 (Summer 2006), <http://www.guttmacher.org/pubs/gpr/09/3/gpr090308.html> (accessed July 8, 2010).
- 30 Pregnancy Resource Services, Homepage, <http://www.pregnancystatenislandny.com/index.html> (accessed July 8, 2010).
- 31 Guttmacher Institute, "Facts on Induced Abortion in the United States."
- 32 Pregnancy Resource Services, "The Test Is Positive" page, <http://www.pregnancystatenislandny.com/positive-test.html> (accessed July 8, 2010).
- 33 Pregnancy Resource Services, "If you are not pregnant" page, <http://www.pregnancystatenislandny.com/negative-test.html> (accessed July 8, 2010).
- 34 E.g., EMC Pregnancy Center in Brooklyn.
- 35 EMC Pregnancy Center in the Bronx and the EMC Pregnancy Center in Brooklyn.

NARAL PRO-CHOICE NEW YORK FOUNDATION works to protect and advance access to the full range of reproductive health care to help women, men and teens stay healthy and safe.

THE NATIONAL INSTITUTE FOR REPRODUCTIVE HEALTH is an innovation institute for state and local organizations working on reproductive health issues. We offer strategic guidance, hands-on support, and funding to help state and local leaders remove barriers to health care, win public battles, and change public policies. Together, we are helping women in communities all across the country gain access to the full range of quality reproductive health care options, the freedom to exercise their reproductive rights, and the opportunity to have healthy pregnancies.

ACKNOWLEDGEMENTS

"She Said Abortion Could Cause Breast Cancer:" A Report on the Lies, Manipulations, and Privacy Violations of Crisis Pregnancy Centers was authored by staff at the NARAL Pro-Choice New York Foundation and National Institute for Reproductive Health. The Report was modeled on *The Truth Revealed*, created by the Maryland NARAL Pro-Choice Fund, January 2008. Primary research was conducted by volunteer members of the Activist Leadership Circle.

470 PARK AVENUE SOUTH, 7TH FLOOR SOUTH, NEW YORK, NY 10016
www.prochoiceeny.org • www.nirhealth.org



NARAL
Pro-Choice New York Foundation



NATIONAL
INSTITUTE FOR
REPRODUCTIVE
HEALTH