CORE BRIEF

Crisis Pregnancy Centers in the U.S. and Wisconsin

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People seeking reproductive healthcare need and deserve access to evidence-based, comprehensive medical care and information from qualified professionals. Crisis pregnancy centers (CPCs) are facilities that provide counseling, material resources, and other support to pregnant people. CPCs often present themselves as healthcare clinics but seek to dissuade people from accessing certain types of reproductive healthcare, especially abortion and some contraceptive methods. While CPCs offer important support and resources to some clients facing financial scarcity, many engage in unethical practices, including providing false information about abortion and diverting pregnant people from getting timely, comprehensive care and information. These practices threaten patient rights and reproductive autonomy.

Over 2,500 CPCs exist in the United States, including at least 60 in Wisconsin. Since *Roe v. Wade* was overturned in June 2022, lawmakers in some states, including Wisconsin, have sought to increase public funding of CPCs. In this context, understanding CPC operations and impact is critical. This brief summarizes the available evidence on the services provided at CPCs, the experience of people who seek services at these facilities, the role of law and regulation in CPC operations, and the practices and harms of such centers.

What are crisis pregnancy centers?

Crisis pregnancy centers, often called "pregnancy care centers," "pregnancy resource centers," or "anti-abortion centers," are non-profit, usually faith-based organizations that offer no-cost support to people experiencing unplanned pregnancies. Some CPCs offer limited medical services, but the overwhelming majority are **not licensed as healthcare centers**[1,2] and do not offer prenatal care.[3,4]

Most CPCs are affiliated with national anti-abortion organizations, evangelical Christian networks, or other religious groups.[5,6] While they vary in some respects, the **primary mission of CPCs is to dissuade people from having abortions** by persuading them to parent or seek adoption.[7–9]

Often, CPCs are run by volunteers and **do not have licensed medical providers** on staff.[2] Yet they can be **hard to distinguish from actual reproductive healthcare clinics**. They often look like a clinic from the outside, and many CPCs are deliberately situated next to abortion-providing clinics.[5,10] Most CPCs advertise free medical services such as pregnancy testing and ultrasounds. Not surprisingly, research reveals that CPC clients often think the facilities are legitimate healthcare centers.[11] This confusion exists online as well. CPC websites and social media accounts are difficult to distinguish from those of licensed reproductive healthcare clinics.[12]

What services do crisis pregnancy centers provide?

Most commonly, crisis pregnancy centers offer free urine **pregnancy tests and counseling that emphasizes continuing the pregnancy**.[13] They neither provide nor refer for abortion services,[6,14] and in fact, CPCs' primary mission is to dissuade people from obtaining abortion care.[7–9]

CPCs also regularly provide pregnancy-related **material resources** (such as diapers, formula, clothing, and strollers); pregnancy-related support (such as parenting classes); and **limited medical services** (abdominal ultrasounds in particular).[1,13] Less commonly, CPCs may provide sexually transmitted infection testing[1,13] and scientifically unfounded "abortion pill reversal" services.[13] Very few CPCs offer contraceptive services.[1,15]

CPCs attract clients by offering services and material aid at **no charge**. In exchange for goods, clients must often participate in parenting classes and abstinence seminars.[13,16]

Some CPCs offer a pregnancy verification form, which pregnant people in some areas of the country can use to access state Medicaid insurance or food benefits.[6,16,17]

Research indicates that CPCs target their services to people living on low incomes, racial/ethnic minorities, and youth.[6,18]

How do laws and regulations affect CPCs?

Because crisis pregnancy centers are not medical practices and do not charge for services, they are **not subject to the laws and regulations** that govern doctors' offices and hospitals.[6] In fact, a 2018 US Supreme Court decision struck down a California law that required CPCs to disclose if they were not licensed medical clinics and to post information about services provided. This decision **leaves states with little authority to regulate CPCs**.[19]

CPCs primarily operate on support from private donors. However, **taxpayer funding for CPCs** has been on the rise. Increasingly, some CPCs receive state and federal funding, including TANF (commonly known as welfare)[20] and federal Title X family planning funds.[5] A recent national study documented that states with more state funding for CPCs had more of the facilities.[21]

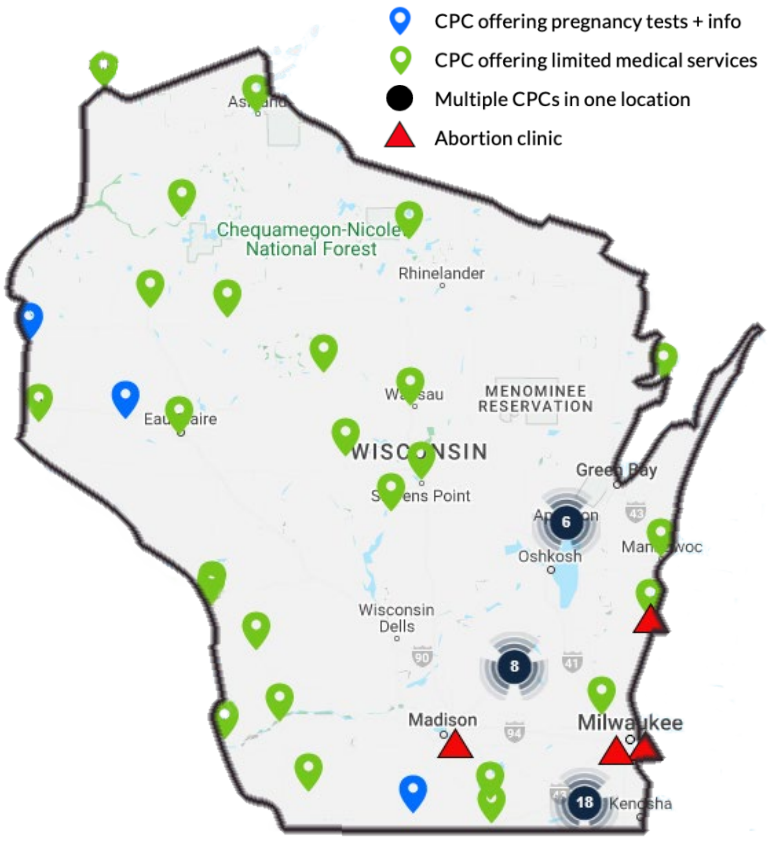
> **In Wisconsin**, state support of CPCs includes funds raised through Choose Life license plates. In 2018, investigative reporting revealed additional state funds directly supported CPCs in Wisconsin,[22] although specific accounting is not publicly available. In 2023, the state legislature proposed a bill directing $1 million in Wisconsin taxpayer funds to CPCs. That bill passed the state Senate in October and is currently before the Assembly for consideration.

How common are crisis pregnancy centers?

CPCs are common and vastly outnumber clinics that provide evidence-based reproductive healthcare services, including abortion care. Researchers at the University of Georgia developed and maintain a comprehensive web-based directory of CPCs.[21] The directory identified over 2,500 CPCs nationwide in 2021, with most located in the South and Midwest. About one-quarter (23%) of facilities offered free pregnancy tests and counseling alone, and three-quarters (77%) also offered limited medical services such as ultrasounds. In comparison, researchers documented around 800 U.S. clinics that provided abortion care in 2020.[23]

> The ratio of CPCs to healthcare clinics that provide abortion is even starker in Wisconsin. The University of Georgia directory identified **60 CPCs in Wisconsin** as of 2021. Of these, 53 offered limited medical services. Located in both rural and urban areas across the state, the CPCs vastly outnumbered clinics that provided abortion care. In 2021, Wisconsin had only four abortion clinics, of which three were in southern Wisconsin. Today, there are just two abortion clinics in the state and no evidence of fewer CPCs.

CPCs and Abortion Clinics in Wisconsin, 2021



Source: crisispregnancycentermap.com

What are people's experiences visiting CPCs?

While research on individuals' lived experiences with crisis pregnancy centers is growing but still limited, available data demonstrates that CPCs are largely **unsuccessful in dissuading pregnant people from obtaining abortion care**. National CPC service data[24] indicate that in 2022, 39% of clients already planned to continue their pregnancy before coming to a CPC. Only 6% changed their minds from intending to have an abortion or being undecided to instead deciding to continue the pregnancy, while 11% did not change their views. (The remainder, 44%, were not pregnant.)

These service data are consistent with recent research, which documents that many CPC clients have **already decided to parent** and visit the center for **free resources and confirmation of their pregnancy**.[11,17,25] Many people do not have enough money to cover their families' basic expenses, and free baby goods can be helpful. One study also found that some clients valued the emotional support they received from CPC staff.[11] These studies indicate that **CPCs help meet some pregnant people's needs that are unmet by existing health and social service programs**, particularly for those lacking financial resources and social support. However, as explained below, medical professionals and researchers argue that these benefits come at a high cost.

What are the harms of crisis pregnancy centers?

Research documents that many crisis pregnancy centers do not protect client confidentiality, misrepresent their services, and mislead clients. These practices are unethical[6] and can undermine pregnant people's health and wellbeing. As a result, major medical organizations advise pregnant people to avoid these centers.[26–28]

No protection of client confidentiality

Since CPCs do not provide licensed medical care, they are not subject to the same regulatory rules and regulations as traditional health facilities. For example, they are not required to adhere to HIPAA standards or uphold client confidentiality, which could lead to violations of client privacy.[6] Some CPCs collect client data that could be, and have been, used for harmful purposes, such as informing anti-abortion lawsuits for the Texas abortion bounty law.[5] Recent investigative reporting documents that CPCs collect large amounts of sensitive client data through in-person counseling, online chat services, and mobile apps.[29] Without confidentiality protections in place, policymakers and healthcare professionals are concerned about how CPCs may misuse these extremely private data.[30]

Misrepresentation of services

Research has shown that CPCs **are, by design, not transparent about what services they provide.** This misrepresentation is misleading.[6] A 2014 analysis of hundreds of CPC websites[1] found that the majority (87%) of sites did not disclose that the CPC was not a medical facility. Another study of CPC websites conducted in 2018 found that less than half (42%) provided notice that they neither provide nor refer for abortion services.[13] Most CPCs fail to disclose that they do not provide all-options, unbiased pregnancy counseling,[6,13] which pregnant people need to make a decision that is best for them. Without transparency about the services provided, the care offered at CPCs is not ethical.[6]

Further, CPCs may **represent themselves as healthcare clinics** offering comprehensive care when, in fact, they do not provide such services.[13,21] Most CPC staff and volunteers are **not licensed medical professionals.**[2] By having nonmedical staff and volunteers wear lab coats and perform ultrasounds, CPCs misrepresent themselves as "real" healthcare clinics even though they are **not licensed to provide medical or health services**.[10,26,28,31]

Provision of biased, misleading information

Research has documented that many crisis pregnancy centers deliver biased, misleading, and inaccurate information that can **delay access to care**. This unethical practice can harm people seeking abortion or prenatal care. For example, some CPCs deliberately mislead clients by reporting **incorrect gestational age** of pregnancy.[5]

Others **downplay the urgency** of confirming the pregnancy by telling clients they have plenty of time to make a decision about their pregnancy[31] or by overstating the risk of miscarriage early in pregnancy.[13,32]

In these cases, abortion seekers do not have an accurate estimate of their gestational age and may delay seeking abortion care.[14,33] Delays in seeking care can lead to needing an abortion later in pregnancy, which is more expensive[34] and harder to obtain[35] than earlier abortions. And while abortion is a very safe medical procedure, the risk of complications increases as a pregnancy advances.[36] Delays can also result in people presenting for care too late to have an abortion under state law, **denying them their reproductive autonomy**.

CPCs' practices can also lead to unfortunate delays in care for those clients wishing to carry their pregnancies to term. Research reveals that obtaining pregnancy confirmation at a CPC can lead to **delayed start of prenatal care and delayed identification of pregnancy complications**.[5,25]

Research has also documented that many CPCs provide **disinformation about the risks of abortion**.[1,13,32] A 2014 analysis of CPC websites in 12 states[1] found mention of scientifically unsubstantiated or disproven associations between abortion and mental health concerns (48% of websites), suicide (22%), breast cancer (20%), and infertility (13%). A separate 2018 analysis of CPC websites in Georgia[13] found that 53% included false or misleading information about abortion, including inaccurate risks of mental health concerns (36%) and breast cancer (8%). Rigorous scientific studies document unequivocally that abortion is not associated with increased breast cancer risk,[37] future infertility,[38] or poor mental health outcomes.[39] When CPCs share disinformation, they undermine clients' decision-making[40] and violate standards for ethical, patient-centered, quality care.[6]

Free **ultrasounds** are a strong enticement to seek CPC services since these scans can be expensive and difficult to obtain early in pregnancy. However, CPC ultrasounds, often provided by unlicensed staff, are frequently non-diagnostic and medically unnecessary.[5,14,26] The scans are also used to dissuade the pregnant person from having an abortion. A recent study[41] found that CPC staff use ultrasounds to convey religious beliefs and arouse emotions. This bias undermines the pregnant person's ability to make the decision that is best for them.

Finally, evidence indicates that some CPCs provide medically inaccurate and misleading information about **contraception** and dismiss the role of condoms in preventing sexually transmitted infections.[15,42] This information contradicts evidence-based standards of care[13] and undermines clients' access to the tools they need for their sexual and reproductive health.

Conclusion

All pregnant people deserve comprehensive information and emotional and material support. However, research documents that crisis pregnancy centers fail to protect client confidentiality, misrepresent their services, and mislead clients.

Particularly for individuals facing financial scarcity and social inequities, CPCs may fill an important gap by providing material goods such as diapers and formula. Not surprisingly, CPCs are often located in low-income communities and market their services to those people most in need of material assistance. However, this assistance is offered at the expense of unregulated, misleading, non-evidence-based services that promote an anti-abortion agenda and undermine pregnant people's health, wellbeing, right to privacy, and autonomy.

Pregnant people in Wisconsin need more support. Still, CPCs and the use of taxpayer funds for these services go against the standards of medical ethics, patient-centered care, and evidence-based medicine.

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