



Legislative Affairs
One Whitehall Street
New York, NY 10004
212-607-3300
www.nyclu.org

**Testimony of Allie Bohm
On Behalf of the New York Civil Liberties Union
Before the New York City Council Committee on Consumer and Worker
Protection Regarding Intro 506, by CM Rivera, in Relation to Requiring the
Department of Consumer and Worker Protection to Report Information on
Pregnancy Services Centers in the City and Implement an Information
Campaign on Such Centers**

June 21, 2022

The New York Civil Liberties Union (NYCLU) is grateful for the opportunity to submit the following testimony regarding Intro 506, in relation to requiring the department of consumer and worker protection to report information on pregnancy services centers in the City and implement an information campaign on such centers. The NYCLU, the New York State affiliate of the American Civil Liberties Union, is a not-for-profit, nonpartisan organization with eight offices across the state and over 180,000 members and supporters. The NYCLU defends and promotes the fundamental principles and values embodied in the Bill of Rights, the U.S. Constitution, and the New York Constitution through an integrated program of litigation, legislative advocacy, public education, and community organizing.

Decisions about pregnancy are time sensitive, and everyone deserves access to timely, comprehensive, and accurate health care information to inform those decisions. Delayed access to such information can impede the initiation of prenatal care or access to emergency contraception or abortion, which can have an adverse impact on a person's health, push care financially out of reach, and severely limiting a person's reproductive health options.

Int. 506 requires the department of consumer and worker protection, in consultation with the department of health and mental hygiene, to report on the unmet health needs facing pregnant New Yorkers and the impact that pregnancy services centers have on the ability to obtain timely and accurate health information and services. While the City does have local law 17, which requires pregnancy services centers disclose that they are not medical facilities,¹ this neutral, unbiased study will be integral to developing and supporting other strategies to support pregnant people in New York City.

¹ Administrative Code of City of NY § 20-816.

Int. 506 also requires the department to implement a media campaign to inform New Yorkers about what pregnancy services centers are and how to access comprehensive reproductive health care in New York City, as well as how to make a complaint if pregnancy services centers engage in deceptive trade practices. Particularly as the U.S. Supreme Court stands poised to overturn *Roe v. Wade*, and we expect New York City to serve as a beacon for individuals seeking care, it is more important than ever that the City inform pregnant people about where and how to obtain comprehensive reproductive health care within our borders. City Council can strengthen Int. 506's media campaign by requiring that it be conducted in all City languages and not merely English and Spanish, as well as by working with community members and leaders in the neighborhoods pregnancy services centers most frequently target to craft messages and select messengers best designed to reach those communities.²

City Council can further improve Int. 506 by expanding the inquiry to include questions about the ways in which pregnancy services centers may meet individuals' and families' unmet resource needs. Recent studies and reporting have demonstrated that some people use pregnancy services centers as a form of conscious consumption – they are aware that these centers exist to prevent abortion and that many are evangelical in nature, but they have already decided to continue a pregnancy and see these centers as their only option to receive free or low-cost diapers, baby clothes, and other material goods to support a new child.³ Inquiring into unmet resource needs, as well as unmet health needs, may lead the City to other or additional solutions.

Relatedly, City Council should ensure that the report identifies racial and socioeconomic disparities in who pregnancy services centers target while making sure that the final report protects the privacy of any individuals seeking services or resources at such centers.

In addition, when local law 17 was adopted in 2011, pregnancy services centers generally did not have medical providers on staff – although many gave the impression that they were medical facilities, confusing some consumers.⁴ As a result, it made sense to define pregnancy services centers to exclude facilities “where a licensed medical provider is present to directly provide or directly supervise the provision of all services . . . that are provided at the facility.”⁵ In recent years, however, many pregnancy services centers have begun to hire

² Cf. Ashley Southall, *Police Face Backlash Over Virus Rules. Enter 'Violence Interrupters.'*, N.Y. TIMES, May 22, 2020, <https://www.nytimes.com/2020/05/22/nyregion/Coronavirus-social-distancing-violence-interrupters.html>.

³ E.g. Elizabeth Dias, *Baby Food, Bassinets and Talk of Salvation: Inside an Evangelical Pregnancy Center*, N.Y. TIMES, Aug. 23, 2019, <https://www.nytimes.com/2019/08/23/us/abortion-evangelical-pregnancy-center.html>.

⁴ See generally NYCLU, TESTIMONY BEFORE THE NEW YORK CITY COUNCIL COMMITTEE ON WOMEN'S ISSUES REGARDING LIMITED SERVICE PREGNANCY CENTER ACT (INT. NO. 371) (2010).

⁵ Administrative Code of City of NY § 20-815.

medical directors and medical staff⁶ in order to escape definitions like New York City's – though they still do not provide or refer for the full range of comprehensive reproductive and sexual health care services. For this reason, City Council should consider updating local law 17's definition of pregnancy services center to include centers with medical personnel on staff that nonetheless do not provide or refer for the full range of comprehensive reproductive and sexual health care services.

Int. 506 contemplates that the department will receive the information needed for the report through a voluntary survey distributed to pregnancy services centers in the City. Because pregnancy services centers are unlikely to respond to such a survey, this approach must be coupled with other methods of learning about pregnancy services centers, including inspections and collaboration with experts.

Int. 506 address an issue of equitable access to quality health care in New York City. Everyone deserves to receive comprehensive information about their health care options and to be connected to qualified providers to address their health care needs. Adequate and early prenatal care, timely abortion care, and emergency contraception are critical to reducing maternal mortality and morbidity rates and disparities. Understanding any gaps in access to comprehensive reproductive and sexual health care services serves an important public health goal of improving health outcomes for all.

The NYCLU thanks the Committee for the opportunity to provide testimony and for their consideration of this critically important issue.

⁶ See generally Gino Fanelli, *Pregnancy resource centers: Healthcare or religious propaganda?*, ROCHESTER CITY NEWSPAPER, May 16, 2022, <https://www.rochestercitynewspaper.com/rochester/new-york-lawmakers-question-the-role-of-pregnancy-resource-centers/Content?oid=14628810>.