California State Findings

- The Alliance Study identified 179 crisis pregnancy centers in California. The number of CPCs in California is 20% higher than the number of abortion care clinics (179 to 144).

CPCs in California Get Public Funding

Unlike some other states in the Alliance Study, California does not permit state contracts with CPCs. But some CPCs in California still receive state funding, and some secured new federal funding during the Trump administration.

In 2019, the California-based Obria CPC network was awarded funding under Title X, a federal program to fund family planning services for low-income people, despite the fact that Obria clinics do not dispense contraception. Obria distributed Title X dollars to 15 CPCs in its California network before withdrawing from the Title X program in April 2021. In addition, nine CPCs in California are documented as billing California’s Medicaid system, Medi-Cal, for services provided, and receiving reimbursement through the state.

Most Common Services Offered by CPCs in California

The services provided by California’s CPCs align with data from other Study states. Most common services are pregnancy testing (90.5%), free/earned infant and maternity goods (83.2%), lay counseling (82.1%), and “non-diagnostic” ultrasounds (58.1%).

“NON-DIAGNOSTIC” ULTRASOUNDS OFFERED BY OVER 1/2 OF CALIFORNIA CPCs ARE NOT RECOGNIZED BY MEDICAL PROFESSIONALS AS A MEDICAL SERVICE. Also known as “keepsake” or “souvenir” ultrasounds, they cannot determine gestational age, study placenta or amniotic fluid, or detect fetal abnormality, ectopic pregnancy, or fetal distress. It is unclear whether those performing CPC ultrasounds are trained to do so or to recognize any issues with a pregnancy. This CPC practice offers no medical benefit to the pregnant person or fetus, but may give pregnant people a false sense of security, and delay their search for legitimate prenatal care.

CPCs in California Promote False & Biased Medical Claims

The majority of CPCs in California (65.9%) make false or biased medical claims, especially about pregnancy and abortion. The Alliance Study defined as false or biased any medical claim that is untrue or unsubstantiated, misstated or selectively cited to factual information, or used gratuitous or graphic language instead of clinical terms. The proportion of California CPCs making false claims about abortion is higher (43.6%) than the average across all Study states (31.8%). Examples of false CPC claims include that abortion is associated with pre-term birth and can lead to “increased promiscuity,” and that women suffer guilt, depression, and risk of substance abuse from “post abortion syndrome.”

CPCs in California also make deceptive and misleading claims on their websites, including that abortion providers are profit-driven exploiters of pregnant people, that CPCs provide unbiased services because their services are free, and that CPCs provide full information to support a pregnant person’s choice; some deceptively use “choice” or “options” in their names.
CPCs in California Promote “Abortion Pill Reversal”

Close to 40% of CPCs in California promote “abortion pill reversal” (APR), the injecting or prescribing of high-dose progesterone for pregnant people who have taken the first medicine in the two-step protocol for medication abortion. The claim behind APR is that a medication abortion can be reversed—junk science that is opposed by medical experts and harmful to pregnant people. The American College of Obstetricians and Gynecologists calls APR “unethical” and “not based on science.” This rogue practice has been called “unproven and experimental” in *The New England Journal of Medicine* because neither the safety nor effectiveness of APR has been proven in clinic trials.  

CPCs that promote “abortion pill reversal” refer clients to this website run by global anti-abortion group Heartbeat International (HBI). As you can see, CPCs advertise APR with marketing that suggests it is a legitimate medical service, though all recognized medical experts oppose the practice as untested and unethical. Almost 40% of California CPCs promote this unregulated experimentation on pregnant people.

Most CPCs in California Do Not Provide Medical Care

Only about 10% of California-based CPCs provide prenatal care, and only one of the 179 CPCs in California provides contraceptive care. Twenty CPCs (11.2%) promote “fertility awareness” or “abstinence only” programming. The majority of California CPCs offer no STI-related services (69.8%), no well-person care (89.9%), and no prenatal care (89.9%) or prenatal care referrals (52.5%).

CPCs in California Lack Licensed Medical Professionals

While many CPCs present themselves as medical offices, only one-quarter (25.1%) of California CPCs indicate they have a physician and only one-third (32.4%) indicate they have a registered nurse affiliated with their staff.

CPCs & the Maternal Mortality Crisis in California

Overall, California has been a leader in reducing maternal mortality. In 2018, California had one of the lowest maternal mortality rates in the country at 4 out of 100,000 live births, which was nearly half the 2013 rate of 7.3 per live births. However, maternal mortality continues to disproportionately affect Black mothers in California, who had a mortality rate of 26.4 out of 100,000 live births between 2011 and 2013—nearly four times the state’s average. California must continue to address persistent racial disparities by investing in policy and programmatic solutions. CPC volunteers and staff without medical training who give pregnant people false and deceptive information directly undermine California’s ability to reduce maternal mortality rates.

Recommendations

The California Legislature and state agencies should seek to prohibit CPCs from stating or disseminating false or deceptive information about pregnancy-related services and prohibit the administration of, and referral for, “abortion pill reversal.” The Legislature should also consider amending the state consumer protection statute to apply to providers of pregnancy-related services without regard to payment and explore the possibility of barring any state funding going to CPCs.

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3. For more information contact info@cwlc.org.