End Notes & References


6. For information, contact Gender Justice: info@genderjustice.org.


8. Wormer, “Mapping Deception.”


13. Kimport, Dockray, and Dodson, "What Women Seek," 170; Kimport, “Pregnant Women’s Reasons,” 51–52. “Officially, the movement claims 20 percent of the women who visit a CPC are considering abortion, indicating most visitors to a CPC are not the target client (Freeman 2008; Glessner 2002). A closer look at the data aggregated by the movement suggest even this low number is optimistic.” Kelly, “Evangelical Underdogs,” 423.


17. As NARAL Pro-Choice Maryland explains: “The abortion reversal theory is grounded in . . . the idea that people regret their abortion. However, empirical data from the Turnaway Study, a longitudinal study comparing the outcomes of people who were able to get the abortion care they needed versus those who were denied care, shows this to be false. More than 95% of people stand by their abortion decision. It is morally and medically unethical to tell people they’ll be able to reverse a process that they cannot undo.” The Myth of Abortion Reversal,” NARAL Pro-Choice Maryland, accessed September 29, 2021, https://prochoicemd.org/myth-abortion-reversal.


23. The National Institute of Family and Life Advocates (NIFLA) states: “When pregnancy centers convert to medical clinic status, they experience many benefits including an increase in total number of patients seen, an increase in the number of abortion-minded patients seen, and a dramatic increase in the percentage of clients seen who choose life. Medical clinics report improved credibility within their community which results in an increase of donors.” “The Life Choice Project (TLC),” National Institute of Family and Life Advocates, accessed September 29, 2021, https://membership.nifla.org/the-life-choice-project.asp.


Kimberly Kelly states: “Officially, the movement claims 20 percent of the women who visit a CPC are considering abortion, indicating most visitors to a CPC are not the target client. A closer look at the data aggregated by the movement suggest even this low number is optimistic.” Kelly, “Evangelical Underdogs,” 423.


Katherine Stewart, “How Fringe Christian Nationalists Made Abortion a Central Political Issue,” Literary Hub, June 12, 2020, https://lithub.com/how-fringe-christian-nationalists-made-abortion-a-central-political-issue/?fbclid=IwAR25cM0x0Q-mj3Zecc1V038KDAdzILcr1BVk6O7j6Orw0dWIDfcX7vzZY.


Kelly, “Evangelical Underdogs,” 423. Katrina Kimport notes that “both scholarly investigation and analyses of data generated by the centers themselves find that most new clients at pregnancy resource centers are pregnant women who are not considering abortion—that is, these clients are not only or mainly considering abortion…. [I]n practice, these centers regularly provide services to pregnant women who plan to continue their pregnancies.”


Kimberly Kelly explains that “[t]his evangelical movement is not particularly successful in meeting its stated goals of preventing abortion, promoting traditional gender roles and families, and converting clients to evangelical Christianity. Paradoxically, however, the movement experienced explosive growth in the last twenty years and increased from 600 to 2,300 or more evangelical centers, increased funding for local centers as well as national organizations, expanded services, and extensive media coverage from pro-life, Christian, and mainstream media and politicians.” Kelly, “Evangelical Underdogs,” 420.

Floridians for Reproductive Freedom, “Florida Pregnancy Care Network Subcontractors.”

Wormer, “Mapping Deception.”

For information, contact Gender Justice info@genderjustice.us.


Wormer, “Mapping Deception.”


Najmabadi and Astudillo, “An Anti-abortion Program Will Receive $100 Million.”


A STUDY OF THE CRISIS PREGNANCY CENTER INDUSTRY IN NINE STATES


60 Privacy International, “A Documentation of Data Exploitation.”


63 Swartzendruber and Lambert, “A Web-Based Geolocated Directory.”


66 Care Net indicates that “most pregnancy centers offer cost-free consultations with licensed medical professionals.” Gleason, “Pregnancy Centers.”

67 NIFLA states: “When pregnancy centers convert to medical clinic status, they experience many benefits including an increase in total number of patients seen, an increase in the number of abortion-minded patients seen, and a dramatic increase in the percentage of clients seen who choose life. Medical clinics report improved credibility within their community which results in an increase of donors.” National Institute of Family and Life Advocates, “The Life Choice Project.”

68 Heartbeat International, “Are We a Medical Clinic?”

69 McGraw, “Judge Bars Anti-abortion Centers.”


74 Kelly, “Evangelical Underdogs,” 422.


77 Hussey, “Crisis Pregnancy Centers,” 996.

78 National Institute of Family and Life Advocates, “Medical Clinic Conversion.”


84 Heartbeat International, “Are We a Medical Clinic?”


96 Kelly and Gochanour, "Racial Reconciliation," 431-432.


105 American College of Obstetricians and Gynecologists, “Facts Are Important.”


109 Ibid. 158.

110 Ibid. 164.


113 Abortion Pill Reversal, “The Abortion Pill Reversal Team.”


115 Ibid. 8 states (Arkansas, Idaho, Kentucky, Louisiana, Nebraska, South Dakota, Utah, and West Virginia) compel abortion providers to tell patients that a medication abortion can be reversed. Similar laws in Indiana, North Dakota, Oklahoma, and Tennessee are enjoined from enforcement, as of September 1, 2021.


123 Jaime Winfree and Andrea Swartzendruber, “Is a Crisis Pregnancy Center Teaching Sex Ed at Your Kid’s School? The Faux Clinics Don’t Just Set Up Shop Next to Abortion Clinics. They’re also in Schools Teaching Abstinence-only Sex Ed.,” The Huffington Post, April 24, 2018, https://www.huffpost.com/entry/opinion-winfree-swartzendruber-crisis-pregnancy-sex-ed_n_5ade8087e4b0b2e81132895d.


126 For information contact Southwest Women’s Law Center, info@swlc.org.


Bean et al., “Pregnancy Centers Stand,” 39.

As of the most recently-published information available online, 69 of the CPCs in California were licensed as “community clinics” or “free clinics” and required to submit reports to the state Department of Health Care Access and Information (https://hc.ca.gov/data-and-reports/healthcare-utility/) on the number of FTE physicians and registered nurses on their staff. Of the 69 CPCs submitting utilization reports, one had a physician on staff, 29 had one or more full-time registered nurses, 30 had a part-time registered nurse, and nine had no physician or registered nurse on staff. For more information, contact California Women’s Law Center at info@cwlc.org.

For more information, contact Gender Justice, info@genderjustice.us and Women’s Law Project, info@womenslawproject.org.


Norris, “You Could Die.”


Foster, “The Turnaway Study.”


Kimport, Dockray, and Dodson, “What Women Seek,” 170; Kimport, “Pregnant Women’s Reasons,” 51-52. “Officially, the movement claims 20 percent of the women who visit a CPC are considering abortion, indicating most visitors to a CPC are not the target client (Freeman 2008; Glessner 2002). A closer look at the data aggregated by the movement suggest even this low number is optimistic.” Kelly, “Evangelical Underdogs,” 423.


Swartzendruber and Lambert, “A Web-Based Geolocated Directory.”


Floridians for Reproductive Freedom, “Florida Pregnancy Care Network Subcontractors.”


163 For information contact California Women’s Law Center, info@cwlc.org.


166 Bryant and Swartz, “Legal but Unethical,” 270.


168 Narasimhan and Pleasants.


177 Stories Marketing, “Client Marketing Strategies.”


179 Cartwright et al., “Identifying National Availability.”


181 Dodge et al., “Quality of Information Available.”


188 Privacy International “Exploiting Data.”

189 Privacy International “Exploiting Data.”


192 Privacy International “Exploiting Data.”


194 California Assembly Bill 775, Reproductive FACT Act, October 9, 2015: https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160AB775.


196 Bryant and Swartz, “Legal but Unethical.”

197 Swartzendruber et al., “Crisis Pregnancy Centers,” 566.
