

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON CONSUMER AND  
WORKER PROTECTION

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Tuesday, June 21, 2022  
Start: 10:13 a.m.  
Recess: 11:30 a.m.

HELD AT: Hybrid Hearing, Committee Room,  
250 Broadway, 16th Floor

B E F O R E: Marjorie Velázquez, Chairperson

COUNCIL MEMBERS:

Shaun Abreu  
Erik Bottcher  
Gale A. Brewer  
Julie Menin  
Chi A. Ossé

## A P P E A R A N C E S (CONTINUED)

Steven Ettannani  
Executive Director for External Affairs  
Dept of Consumer and Worker Protection

Michael Tiger  
General Counsel  
Deptm of Consumer and Worker Protection  
MR. TIGER:

Vanessa L. Gibson  
Bronx Borough President

Maryam Mohammed Miller  
Director of Government Relations  
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Danielle Castaldi-Micca

Aviva Zadoff  
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Alexandria Boehm  
Policy Counsel  
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1 COMMITTEE ON CONSUMER AND WORKER PROTECTION 3

2 MR. MEIXLER: Good morning everybody. Welcome to  
3 today's hybrid New York City Council meeting of the  
4 Committee on Consumer Protection. Please place  
5 electronic devices to vibrate or silent. If you wish  
6 to submit testimony, you may send it to  
7 testimony@council.nyc.gov. Again, that's  
8 testimony@council.nyc.gov. Thank you for your  
9 cooperation Chair, we are ready to begin.

10 [GAVEL]

11 CHAIRPERSON VELÁZQUEZ: [inaudible 10 seconds]  
12 Nope? Let's start this all over. All right, let's  
13 do it. Good morning. I am Councilmember Marjorie  
14 Velázquez, Chair of the Committee on Consumer and  
15 Worker Protection, and I'd like to welcome you to our  
16 legislative hearing today on Intro 506 sponsored by  
17 Councilmember Carlina Rivera by request of my own  
18 Bronx Borough President, Vanessa L. Gibson, in  
19 relation to requiring the Department of Consumer and  
20 Worker Protection to report information on pregnancy  
21 services centers in the city, and to implement an  
22 information campaign on such centers.

23 As we are well aware, this past May a draft  
24 opinion of the Supreme Court's plan to strike down  
25 Roe v Wade was leaked to the press. This draft

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2 opinion overturning Roe will and federal  
3 constitutional protections for abortion rights. I  
4 was horrified to read the news of the Supreme Court's  
5 opinion. Basic reproductive rights in a woman's  
6 right to have control over her own body will no  
7 longer be the law of the land in the United States.  
8 This decision is a regression of fundamental  
9 liberties and it is expected that over half of the US  
10 states will prohibit all or virtually all abortions.  
11 An increase in maternal deaths is expected which will  
12 likely be disproportionately impacted to women of  
13 color like myself. There are truly no words that can  
14 describe the horrible consequences of this decision.

15       Thankfully, New York State is where we have a  
16 right to choose and it will not be threatened. In  
17 response to news of the Supreme Court's overturning  
18 of Roe v Wade, the state legislature enacted a  
19 package of legislation to protect abortion rights,  
20 and the City Council is hearing legislation across  
21 numerous Committees to enhance access to reproductive  
22 care. Nonetheless, many New Yorkers are unaware that  
23 there are unlicensed and unregulated centers in New  
24 York that purport to provide reproductive care but  
25 are actually secretly promoting their own anti-choice

2 mission. Pregnancy Service Centers or PSCs provide  
3 free pregnancy testing to patients seeking  
4 reproductive care. Employees working at PSCs, while  
5 not licensed clinicians often wear white coats, and  
6 see women exam rooms to further give the false  
7 appearance that they are legitimate medical  
8 facilities. Many PSCs in New York City also have  
9 names that sound like certified reproductive health  
10 clinics, such as Expectant Mother Care and Pregnancy  
11 Resource Services, and are located across the street  
12 from Planned Parenthoods. This practice makes it  
13 purposely difficult for New Yorkers to recognize  
14 PSCs, which unlike medical providers who treat  
15 pregnant women and are subject to rigorous oversight  
16 by the State Department of Health are not regulated  
17 by the government. Pregnancy Service Centers, while  
18 often alluding to provide comprehensive reproductive  
19 care, engage in deceptive health counseling. PSCs  
20 have been found to suggest a link between abortion  
21 and serious mental health problems despite multiple  
22 studies invalidating this assertion. PSCs cite  
23 debunked medical literature showing an association  
24 between abortion and breast cancer and often portray  
25 abortion -- and I lost my -- as dangerous or even

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2 deadly. PSCs in New York have been known to delay  
3 appointments with clients multiple times in an  
4 attempt to prolong the process past the point by when  
5 a woman can have access to a safe abortion.

6 While abortion is not under attack legislatively  
7 in New York City. PSCs are an insidious industry  
8 seeking to impair New Yorkers access to safe and  
9 quality reproductive care. In 2011, the City Council  
10 enacted Local Law 17 of 2011, which required PSCs to  
11 make a number of disclosures to patients to improve  
12 transparency and accountability of these centers.  
13 The Council's law was challenged however, and a  
14 majority of the mandated disclosures were held to be  
15 in violation of the First Amendment. Given that PSCs  
16 therefore continued to go mostly unregulated. I am  
17 proud that we Our hearing Intro 506, sponsored by  
18 Councilmember Rivera, under the bill, DCWP will be  
19 required to submit a report to the Mayor and the  
20 Speaker of the Council on Pregnancy Service Centers  
21 operating in the city. This report would include  
22 information on the names and locations of the centers  
23 the services they provide, and how they advertise  
24 themselves to the public. DCWP would have to submit  
25 the first report no later than March 15, 2024, and

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2 every five years thereafter. DCWP will be required  
3 to send a voluntary informational survey to Pregnancy  
4 Service Centers in the city to help inform the  
5 report. Perhaps most importantly, the bill will also  
6 require DCWP to implement an informational media  
7 campaign about Pregnancy Service Centers in English  
8 and in Spanish no later than six months after  
9 submitting the first report required by the bill.

10 New Yorkers often do not know that they are  
11 entering a PSC when they walk inside one. The  
12 informational media campaign will therefore educate  
13 New Yorkers about PSCs providing city residents with  
14 essential education and awareness that these centers  
15 are not licensed medical facilities. This bill in  
16 conjunction with the recently signed state bill A5499  
17 / S470 directs the State Commissioner of Health to  
18 study PSCs and it will equip policymakers with key  
19 information on the number of PSCs and the services  
20 that they are providing. I look forward to hearing  
21 from the administration advocates today about this  
22 bill, including ways that can be improved to protect  
23 New Yorkers and ensure all women have access to safe  
24 and quality reproductive care. With that said, I'd  
25 like to thank my central, staff team Senior Counsel

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2 Stephanie Jones, senior polity analyst Noah Meixler -  
3 - I got it right this time, y'all -- and my Chief of  
4 Staff Nick Rolestein, and Deputy Chair Chief of Staff  
5 Alex Anderson for their hard work. I'll now turn it  
6 over to -- oh, sorry, my bad. I forgot to announce  
7 my colleagues that have been joined by Councilmember  
8 Bottcher and Councilmember Menin. And now I'm going  
9 to turn it back to my moderator. Noah.

10 MR. MEIXLER:

11 Thank you, Chair. I am Noah Meixler, Legislative  
12 Policy Analyst at the New York City Council. Before  
13 we begin, I'd like to remind everyone that this is a  
14 hybrid hearing. For members of the public joining  
15 virtually, you will be on mute until you're called on  
16 to testify, at which point you will be unmuted by the  
17 host. Please listen for your name to be called, as I  
18 will periodically be announcing who the next  
19 panelists will be. At this hearing, we will first be  
20 inviting testimony from the Department of Consumer  
21 and Worker Protection followed by members of the  
22 public.

23 At this time, I will administer the affirmation.

24 Members of the Administration please raise your  
25 right hands. Do you affirm to tell the truth, the

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2 whole truth and nothing but the truth before this  
3 Committee and to respond honestly to Councilmember  
4 questions.

5 MEMBERS: I do.

6 MR. MEIXLER: Thank you, you may begin.

7 MR. ETTANNANI: Good morning Chair Velázquez and  
8 members of the Committee on Consumer and Worker  
9 Protection. I'm Steve Ettannani, Executive Director  
10 for External Affairs at the Department of Consumer  
11 and Worker Protection, or DCWP. I'm joined today by  
12 my colleague Michael Tiger, our General Counsel.

13 Thank you for the opportunity to testify today  
14 before the Committee on Introduction 506 relating to  
15 pregnancy services centers, or PSCs. This  
16 administration is fully committed to protecting  
17 access to reproductive health care services for New  
18 Yorkers. Furthermore, we stand alongside our  
19 partners in the Council to ensure access to  
20 reproductive health and abortion is strengthened in  
21 New York City, and that we are a haven for those in  
22 need of safe healthcare options. Advocates describe  
23 quote "crisis pregnancy centers" or quote "pregnancy  
24 resource centers" as facilities that focus on  
25 diverting or preventing people who are or may be

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2 pregnant from accessing medical care including  
3 abortions. According to advocates, these businesses  
4 accomplish this by imitating the advertising of  
5 abortion providing health clinics, locating  
6 themselves near abortion providing health clinics,  
7 providing false information about abortion to  
8 pregnant people, and misleading people about how many  
9 weeks they may have been pregnant. According to the  
10 city's Department of Health and Mental Hygiene, the  
11 above tactics can endanger the health of pregnant  
12 people by leaving them unaware of their reproductive  
13 health options and misinformed about the state and  
14 health of their pregnancy. These tactics also deter  
15 people who are pregnant from accessing legitimate  
16 reproductive healthcare that they otherwise would  
17 have sought out pursuant to Local Law 17 of 2011. A  
18 PSC is legally defined as a business that (one)  
19 appears to be a medical facility or carries out  
20 prenatal care. And (two) is not a licensed medical  
21 facility does not have a licensed medical provider on  
22 site supervising services.

23 DCWP is empowered to inspect PSCs for disclosure  
24 requirements that state they do not have a medical  
25 provider on site and do not provide abortion care,

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2 and that they do not share health and personal  
3 information without a client's consent. DCWP  
4 investigates in response to every complaint that it  
5 receives about PSCs. The agency has worked with  
6 elected officials and the nonprofit sector to  
7 facilitate complaints, identify potential PSCs, and  
8 inspect PSCs for potential violations. Since 2017,  
9 the agency has received 59 complaints alleging  
10 violations of the PSC law, conducted 53 inspections,  
11 and Issue two summonses for illegal activity by a  
12 PSC. Since 2021, we have received two complaints and  
13 subsequent investigations determined that the  
14 facilities fell outside of the scope of the law,  
15 because there were medical professionals supervising  
16 the provided services. Turning to today's  
17 legislation, Introduction 506 would require DCWP, in  
18 partnership with the health department and any other  
19 organization at our discretion, to submit a report on  
20 PSCs operating in New York City. The report would  
21 include information on the locations of PSCs the  
22 services they provide, and the way they advertise  
23 themselves to the public. It would also require the  
24 city to examine the health care needs of pregnant  
25 women the ability of PSCs to meet those needs and the

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2 impact of PSCs on women being able to gain timely  
3 access to healthcare. DCWP would be mandated to  
4 design a survey, which PSCs would voluntarily submit  
5 to inform the report. Following completion of the  
6 report, DCWP in consultation with the Health  
7 Department would be required to implement a media  
8 campaign to raise awareness among women about PSCs.  
9 DCWP is committed to supporting New Yorkers safe and  
10 timely access to all of the reproductive health care  
11 to which they are legally entitled. To that end,  
12 DCWP looks forward to working with the Council as  
13 well as with our sister agency, the Health Department  
14 to ensure that any reporting on PSCs is able to  
15 capture the vital information Yorkers need to be well  
16 informed, and that it works in concert with other  
17 reporting requirements and Council's reproductive  
18 rights legislative practice package.

19 This includes Introduction 465 sponsored by  
20 Councilmember Cabán relating to a report on the  
21 provision of medical services related to reproductive  
22 care. Similarly, we're looking forward to working  
23 with Council to harmonize the media campaign  
24 contemplated by this bill with the ones contemplated  
25 by two other bills in this package. Introduction

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2 478, sponsored by Councilmember Hudson, relating to  
3 an outreach and education campaign on the benefits  
4 and services provided by doulas and midwives, and  
5 Introduction 474 sponsored by Councilmember Hanif  
6 relating to a public information and outreach  
7 campaign regarding safe access to reproductive health  
8 care. We believe it is important that media  
9 campaigns communicate a cohesive message to New  
10 Yorkers regarding reproductive health resources that  
11 are safe and accessible, as well as informed by the  
12 public health professionals at the health department.

13 Again, I would like to thank the Council for  
14 holding today's hearing, and for introducing its  
15 suite of legislation relating to reproductive rights,  
16 that better protecting Yorkers. I look forward to  
17 any questions you may have.

18 CHAIRPERSON VELÁZQUEZ: Thank you for that.  
19 While I gather my questions. Here we go. You had  
20 mentioned the violations. How do I go about  
21 reporting a Pregnancy Service Center and their acts?  
22 Let's say I'm looking for an abortion? And I by  
23 accident, get here? How do I report it?

24 MR. ETTANNANI: Thank you for the question.  
25 There are a myriad of ways that you can file a

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2 complaint with our agency. Of course 311 is one  
3 option. We have a consumer complaint form that you  
4 can fill out that we distribute at outreach events,  
5 and that is found on our website as well. Of course,  
6 Councilmember, we rely on your office, and your  
7 colleagues offices, and the caseworkers that are  
8 hearing from folks on the ground to... to bring  
9 complaints and referrals to us. And of course, we  
10 work with advocacy organizations to bring  
11 complaints... to surface those complaints with our  
12 agency as well.

13 CHAIRPERSON VELÁZQUEZ: So do you proactively  
14 inspect? Or is it only based on complaints?

15 MR. ETTANNANI: Thank you for the question.  
16 Our... Essentially, the underlying statute of this  
17 bill has a very narrow definition of what a Pregnancy  
18 Service Center is. Advocates often speak to crisis  
19 pregnancy centers, for example, that encompass a  
20 wider range of... of centers city wide. For us, and  
21 what's defined in statute, if you do not have a  
22 medical service provider, you are a Pregnancy Service  
23 Center, for example. But if you do, you would fall  
24 outside the scope of the definition under the law.

25

2       So what that means functionally, in terms of our  
3 ability to identify the senators is that it's  
4 extremely hard. We rely on advocates. We rely on  
5 again, your offices and... and constituents in your  
6 districts and what caseworkers are able to surface to  
7 bring complaints to us.

8       CHAIRPERSON VELÁZQUEZ: And so one of the  
9 interesting parts about this... there was... it's  
10 voluntary, right?, that they have to come to you.  
11 And what we need to decide is how are we performing  
12 our own outreach and how we can work in conjunction  
13 with your offices? Is there a plan for that?

14       MR. ETTANNANI: Absolutely. I think I would be  
15 remiss not to mention that this legislative package  
16 that, you know, you and your colleagues have  
17 introduced and that the speaker spoke so eloquently  
18 to in her state of the city represents a unique  
19 opportunity at this time to re-engage with New  
20 Yorkers affirmatively and in very real terms about  
21 the consequences of not knowing your rights (a) and  
22 also about all the misinformation that's out there.  
23 I think this legislation, Intro 506, provides... is  
24 indicative of the right track in terms of an  
25 information and media campaign, and I think a

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2 cohesive message citywide is something that that we  
3 are extremely supportive of.

4 CHAIRPERSON VELÁZQUEZ: Thank you for that. And  
5 so just wanted to get to it: Me, a New Yorker. I  
6 enter a Pregnancy Service Center seeking reproductive  
7 services, right?, and there's no medical provider  
8 within that center. I can file a complaint, right?,  
9 with DCWP, right?, if I feel like I'm a victim? What  
10 is the time period? Is there a time period? Like  
11 immediately? Do I wait a week? You know, can I go  
12 back after like, let's say, I go mistakenly to a PSC,  
13 but then I go to a Planned Parenthood afterwards and  
14 I realize what has happened. Can... Is there a time  
15 line or definitely defined time where I can go back  
16 to you guys or no?

17 MR. ETTANNANI: I'll turn it to my General  
18 Counsel.

19 MR. TIGER: No. You can you can always come to  
20 come to us with a complaint, and this goes across all  
21 the categories of businesses that we investigate, but  
22 something here, especially in a situation where we  
23 understand that women are in fraught situations when  
24 they make trying to make difficult reproductive  
25 health choices. There's certainly not a timeline that

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2 would make a complaint stale, especially on the time  
3 horizon that you're discussing. And I think that we  
4 would welcome to hear from New Yorkers, and hear from  
5 advocates about any... any complaints along those  
6 lines. And I think that would help us fashion our  
7 enforcement strategy.

8 CHAIRPERSON VELÁZQUEZ: Thank you for that. I  
9 know, Governor Hochul just signed the bill mandating  
10 the State Commissioner of Health to conduct a study  
11 on Pregnancy Service Centers. Is DCWP prepared to  
12 partner and utilize this information? And how do you  
13 see that working out?

14 MR. ETTANNANI: Thank you for the question. The  
15 city was supportive of... of the legislation that the  
16 governor recently signed. And I think that we at  
17 DCWP are looking forward to the reporting from the  
18 commissioner of health. I believe there's a  
19 taskforce contemplated with... with other  
20 stakeholders to inform a number of different items  
21 that I think will be extremely beneficial to our  
22 work, as my colleague, Mike Tiger mentioned, that  
23 will inform an enforcement strategy, potentially, and  
24 things of that nature. I know our colleagues at the  
25 Health Department have been tracking that legislation

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2 more closely and can probably speak a little bit more  
3 to the details of the bill than... than us here.

4 CHAIRPERSON VELÁZQUEZ: Thanks. And so do you  
5 have a sense of how many of these centers exist in  
6 the city or which boroughs have the highest  
7 concentrations of these centers?

8 MR. ETTANNANI: Thanks for the question,  
9 Councilmember. So tracking efforts by advocates  
10 estimate approximately 20 businesses across the five  
11 boroughs that provide crisis pregnancy center  
12 services. However, it's likely that many of those  
13 locations fall outside the definition of the  
14 Pregnancy Service Center Law by either providing only  
15 counseling services or having a licensed medical  
16 provider supervising services. You know, for us and  
17 what I was kind of alluding to with... with some of  
18 my prior answers is that this is a very adaptable  
19 constituency, unfortunately. We've encountered  
20 instances where, you know, businesses will bring on a  
21 medical provider so they fall outside of the law.  
22 And for us, it's unsure how many PSCs, as defined in  
23 statute, exist the city. It could very well be zero  
24 right now. So that is... that is kind of the lay of  
25 the land that we're working with.

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2 CHAIRPERSON VELÁZQUEZ: Got it. So Intro 506  
3 requires you all to report information on Pregnancy  
4 Service Centers, including the names, locations, and  
5 services they provide and how they advertise  
6 themselves. Can you describe any challenges you  
7 foresee occurring within the agency to conduct this  
8 study?

9 MR. ETTANNANI: Sure. I think first and  
10 foremost, what I was just mentioned: Identifying  
11 centers that actually fall under the statute  
12 definitionally is a primary concern for us. That  
13 said, I think that there are a number of different  
14 ways that our agency can potentially identify a scope  
15 of businesses that could fall under the definition,  
16 and our staff will identify those, certainly by  
17 working with advocates, utilizing social media, and a  
18 whole host of other resources to ensure that we're  
19 putting that survey out to folks and making sure  
20 that, you know, we're following the law,

21 CHAIRPERSON VELÁZQUEZ: If enacted intro 506  
22 will require DCWP to implement the information  
23 campaign on Pregnancy Service Centers, right? So I  
24 think that's the... that's the key. It's educating  
25 folks, right? But it's (inaudible) in Spanish and

2 English. If the bill is passed, can the  
3 administration commit to producing the campaign in  
4 the city's official 10 languages?

5 MR. ETTANNANI: Thank you for the question,  
6 Councilmember. Language access is... is of a huge  
7 priority for our agency, and has been for... for  
8 quite some time, and certainly under our commissioner  
9 currently.

10 You know, what I alluded to in my testimony today  
11 is that, in addition to language access, having a  
12 cohesive message out there to New Yorkers is  
13 imperative. I think this legislative package is  
14 going to offer a unique opportunity for us to utilize  
15 all apparati of city government, including our public  
16 engagement unit and others to meet New Yorkers where  
17 they are, and of course, that includes meeting them  
18 with, you know, with their language capacities.  
19 That's... that's first... first and foremost  
20 importance.

21 CHAIRPERSON VELÁZQUEZ: And I think my last  
22 question here, is given DCWP's knowledge of legal  
23 barriers that prevent enforcement of laws regulating  
24 PSCs. As you had said, identifying them is the  
25 hardest piece. Do you have any creative ideas on how

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2 the administration can limit PSCs and their impact on  
3 New Yorkers?

4 MR. ETTANNANI: So I think Introduction 506 is  
5 a... a great first step. I think bridging that  
6 information gap that exists with New Yorkers,  
7 potentially is... is so important, especially when  
8 there's misinformation in this space. As always,  
9 we're happy to work with the Council on any  
10 additional ideas and concepts to... to make sure that  
11 we have the best crafted laws to protect reproductive  
12 rights in the city.

13 CHAIRPERSON VELÁZQUEZ: Thank you. I'll turn it  
14 over to Councilmember Menin.

15 COUNCILMEMBER MENIN: Thank you so much. So I  
16 was really interested in this hearing. I was  
17 commissioner when this crisis pregnancy law was first  
18 implemented, so I really appreciated your testimony,  
19 and I fully support Intro 506. I just had a couple  
20 of questions.

21 Has the agency thought about doing a hotline for  
22 complaints, so that... particularly given this  
23 environment that we're in, that might lead to more  
24 people coming forward with issues that they're  
25 having?

2 MR. ETTANNANI: Thank you for the for the  
3 question, Councilmember. We haven't specifically  
4 thought of a hotline for this... for this particular  
5 issue. I will mention that there's already so many  
6 different options for consumers and New Yorkers to  
7 reach us, adding another layer to that could  
8 potentially, you know, confuse folks. But this is,  
9 you know, something that we would consider for sure.

10 COUNCILMEMBER MENIN: Okay. And also, I was  
11 interested in the fact that there are 59 complaints,  
12 53 inspections, and two summons for illegal activity.  
13 So of the other complaints where there wasn't a  
14 summons, what was the nature of those complaints and  
15 the agency's findings?

16 MR. ETTANNANI: Sure, I'll turn it over to Mike  
17 Tiger.

18 MR. TIGER: Yeah, I don't have obviously a  
19 granular of every single complaint, but I think  
20 speaking broadly Councilmember, sometimes the  
21 complaints, when we had talked about 59, many of them  
22 were about single locations. So... so we would say  
23 that there were two summonses that would result in  
24 multiple inspections that there were resulting from  
25 multiple complaints. So there's not a one-to-one

2 tracking between complaint, inspection, and summons,  
3 as far as if you look at location by location.

4       Sometimes they did not... when we did our  
5 investigation, both in house at 42 Broadway from the  
6 General Counsel Division, looking online at what the  
7 sites were, what sort of services the sites were  
8 providing, or when our enforcement team went out in  
9 the field to the actual locations, to determine -- as  
10 my colleague mentioned -- that the location may have  
11 fallen outside of the statutory definition of a  
12 Pregnancy Service Center. Either that there were  
13 only providing counseling services and not did not  
14 actually have the appearance of a licensed medical  
15 facility when we actually went to investigate, or  
16 that they had a licensed medical professional --  
17 which just to... just to remind the Committee does  
18 not necessarily mean a doctor, it can be any licensed  
19 medical professional -- If they're there directly  
20 supervising the services, they fall outside the  
21 definition of the law.

22       And so I can't say again, one for one, every  
23 single complaint that we got, but those are broadly  
24 speaking, were the issues that came up as we were  
25 conducting our investigations.

2 COUNCILMEMBER MENIN: And given all the legal  
3 impediments and the case law on this, which I know  
4 you're so familiar with, are there any creative ideas  
5 that the administration has to try to limit the  
6 effect of these centers on New Yorkers?

7 MR. ETTANNANI: Yeah, I think, as I mentioned to  
8 the Chair, we're more than happy to work with the  
9 Council on... on different concepts and ideas, but I  
10 think those conversations would probably be best to  
11 have with the law department as well as the party  
12 given... given, you know, what you've just mentioned.

13 COUNCILMEMBER MENIN: Okay, great. Thank you so  
14 much.

15 MR. ETTANNANI: Of course.

16 CHAIRPERSON VELÁZQUEZ: Alright. I'll turn it  
17 back to the moderator to public testimony.

18 MR. MEIXLER: Thank you, members of the  
19 administration, and thank you Chair.

20 We will now turn to public testimony. I'd like  
21 to remind everyone that unlike our typical Council  
22 hearings, we will be calling individuals one by one  
23 to testify. We will be limiting each panelist's  
24 speaking time to three minutes. For panelists  
25 joining this hearing virtually once your name is

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2 called, a member of our staff will unmute you and the  
3 Sergeant At Arms will set the three minute timer and  
4 give you the go ahead to begin. Please wait for the  
5 sergeant to announce you may begin before delivering  
6 your testimony. I would like to now welcome the  
7 Bronx, the Bronx Borough President, Honorable Vanessa  
8 L. Gibson to testify. After the Bronx Borough  
9 President, I will next be calling on Maryam Mohammed-  
10 Miller to testify. Bronx Borough President?

11 CHAIRPERSON VELÁZQUEZ: I want to acknowledge  
12 that we've been joined by Councilmember Ossé and  
13 Councilmember Abreu.

14 MR. MEIXLER: My apologies everyone that seems  
15 like we're having some technological difficulties, so  
16 we'll move on to the next panelist and then return  
17 back to the Borough President. So at this time, I  
18 will call on Maryam Mohammed Miller to testify.  
19 After Maryam Mohammed-Miller, I will be calling on  
20 Danielle Castaldi-Micca. Maryam?

21 SERGEANT AT ARMS: Time starts now.

22 MS. MILLER: Thank you. Can you all hear me?

23 MR. MEIXLER: Yes, we can.

24 MS. MILLER: Okay. Thank you. Good morning. My  
25 name is Marissa Mohammed-Miller, and I'm the Director

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2 of Government Relations at Planned Parenthood of  
3 Greater New York. I would like to thank the Chair of  
4 the Committee on Consumer and Worker Protection,  
5 Councilmember Marjorie Velázquez, for holding this  
6 important hearing, as well as Councilmember Carlina  
7 Rivera and other bill sponsors for introducing and  
8 championing Intro 506, legislation that would help  
9 our city have access to comprehensive medically  
10 accurate information and resources to make informed  
11 decisions about their health and their lives.

12       Planned Parenthood of Greater New York is a  
13 trusted provider for sexual reproductive health care  
14 and has offered care to New Yorkers for over 100  
15 years. We aim to provide care to all New Yorkers, no  
16 matter their background. We strongly support Intro  
17 506 that will help the city better understand how  
18 Limited Service Pregnancy Centers or Crisis Pregnancy  
19 Centers function, and their impact on access to  
20 comprehensive, medically accurate health care. For  
21 many years, we have seen the harmful impact of crisis  
22 pregnancy centers or CPCs, and how they've impacted  
23 our patients seeking health care at our health  
24 centers. The bill today would help the city launch a  
25 study to better understand, again, how they operate,

2 as well as requiring the Department of Consumer and  
3 Worker Protection to launch a public education  
4 campaign and raise awareness of CPCs in our  
5 communities. Similar to recent legislation that was  
6 passed on the state levels, the study of CPCs will  
7 help us curb the deceptive and often misleading  
8 tactics they employ to delay and deny an individual's  
9 access to abortion care. We have heard repeatedly  
10 how our patients will mistakenly end up in CPCs, were  
11 lied to harassed and pressured out of seeking  
12 abortion care. As was mentioned earlier, CPCs often  
13 use deceptive tactics to lure people into their  
14 facilities. This includes modeling themselves after  
15 legitimate health care facilities, also having staff  
16 dressed as nursing and providers, and often advertise  
17 themselves as Pregnancy Resource Centers, Pregnancy  
18 Health Centers and offer a limited amount of  
19 healthcare services including pregnancy tests,  
20 ultrasounds and pregnancy counseling. CPCs are often  
21 located near licensed reproductive health care  
22 centers, like Planned Parenthood of Greater New York  
23 in an effort to disorient and confuse patients. In  
24 fact, there are CPCs in the same building as our  
25 Brooklyn Health Center, and a CBC located directly

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2 across the street from our Bronx Health Center.

3 Several years ago, we conducted a survey amongst our  
4 patients who mistakenly ended up in a CPC to better  
5 understand how they were harassed and...

6 SERGEANT AT ARMS: Time expired.

7 MS. MILLER: just to get a better understanding  
8 of their experience, and what we found is that many  
9 individuals were harassed by patients, were given  
10 wrong information about their healthcare options, and  
11 expressed concerns about providing detailed  
12 information, and had concerns about that information  
13 being kept confidential.

14 Just to wrap up, again, we strongly support Intro  
15 506 that will better... help the city better  
16 understand how they operate, the impact on  
17 marginalized communities, and help us all  
18 collectively prepare as we wait... await the decision  
19 from SCOTUS that we all know would completely upend  
20 abortion rights are in our country. We stand ready  
21 to support the Council and executing the provisions  
22 of the bill. stand alongside advocates in doing this  
23 work. Thank you.

24 CHAIRPERSON VELÁZQUEZ: Thank you for your hard  
25 work. And I just have a couple of questions for you.

2 What changes would you suggest be implemented into  
3 Intro 506?

4 MS. MILLER: I think many of the things that were  
5 outlined earlier today, including the hotline,  
6 ensuring that New Yorkers have access to a space  
7 where they can quickly report their experiences if  
8 they do mistakenly end up in a... in one of these  
9 facilities. We definitely support the public  
10 education campaign to grow awareness around the CPCs  
11 and their behavior, and that will strongly suggest  
12 cultural competency be included in that work, that  
13 language access is prominent in developing those  
14 campaigns, that the narratives and then the messaging  
15 developed in those campaigns are targeted to the  
16 communities most impacted. And again, we stand ready  
17 and helping the department and the Council on  
18 developing messaging and tailoring that campaign to  
19 make sure that it's effective.

20 CHAIRPERSON VELÁZQUEZ: And I know you mentioned  
21 it, certainly, because Planned Parenthood offers the  
22 real services, I wanted to know, can you describe the  
23 impact of the Pregnancy Service Centers on New  
24 Yorkers ability to access safe and quality  
25 reproductive care?

2 MS. MILLER: Sure. So as folks mentioned  
3 earlier, again, CPCs operate, that their goal is to  
4 delay and deny an individual's access to abortion  
5 care. We know that obtaining abortion care is  
6 extremely time sensitive. Folks who know they are  
7 pregnant should be able to access healthcare as  
8 quickly as possible, and ensuring that healthcare is  
9 quality is of quality, is medically sound, is  
10 affordable. That is a commitment we have at Planned  
11 Parenthood of Greater New York, ensuring that all  
12 those who come through our doors have access, no  
13 matter where they are in their in their pregnancy.

14 So again, CPCs bar an individual's ability to  
15 make informed decisions over their healthcare  
16 decisions, because oftentimes folks will end up in  
17 the facility. They're again given wrong information  
18 about healthcare services, sometimes they're...  
19 they're given wrong information about where they are  
20 in their pregnancy, how many weeks they are, all  
21 again in an effort to pressure individuals from  
22 changing their mind about seeking abortion care. I  
23 mentioned earlier that we conducted a survey several  
24 years ago, and that was one of the concerns that  
25 folks raised: That they were provided this

2 inaccurate information about where they were in their  
3 pregnancy journey, all the information that we were  
4 trying to obtain regarding sexual health care. And  
5 they were often told to come several times for  
6 different appointments, again, told different  
7 information about their health care options, and  
8 sometimes by the time an individual actually ends up  
9 in an actual abortion provider, depending where they  
10 are in their... in their pregnancy. You know, a  
11 number of things can happen. And you know, there are  
12 studies and we have seen that sometimes an individual  
13 who may... who initially wanted a Medicaid abortion  
14 now has to get a surgical abortion. So there's many  
15 changes and many impacts over an individual's plan on  
16 the types of care that they want to receive because  
17 of the deceptive tactics that they experienced at  
18 these centers.

19 CHAIRPERSON VELÁZQUEZ: Thank you.

20 MR. MEIXLER: Thank you. I will now call on  
21 Danielle Castaldi-Micca to testify, followed by Aviva  
22 Zadoff. Danielle?

23 SERGEANT AT ARMS: Time starts now.

24 MS. CASTALDI-MICCA: Hi. Thank you so much for  
25 hosting this hearing today. Thank you Chair

2 Velázquez, all the Committee members and other  
3 members who are there, Councilmember Rivera for  
4 sponsoring this legislation, and... and borough  
5 president Gibson for requesting it, which is a  
6 real... real dream team. I have prepared written  
7 testimony that I will share, that I'll send to the  
8 Committee staff, but I want to use my time to make  
9 some suggestions to the legislation... to amend the  
10 legislation and to the implementation of it. The  
11 first is actually not a suggestion but more just a  
12 reminder of the consequences of folks being deceived  
13 by these facilities is... is severe, can be fatal.  
14 In the irony of sitting, watching the beginning of  
15 this hearing, while refreshing the Supreme Court to  
16 see if the right to abortion has been overturned at  
17 this very moment, which it has not yet, the irony of  
18 that is not lost on me.

19 So, I hope while we're considering this bill,  
20 that we recognize a couple of things. The first is  
21 that DCWP doesn't need complaints to inspect. Full  
22 disclosure: I was at the City Council and worked on  
23 the Local Law 17 legislation. That was over a decade  
24 ago, and 53 inspections over a decade does not feel  
25 particularly proactive to me. I also have a lot of

2 concerns about the report being done by a voluntary  
3 survey. These are facilities that are generally  
4 built upon deception. So I don't know that assuming  
5 that they will answer a survey truthfully is our best  
6 bet to getting accurate information here. I do think  
7 it's important also that we ask about material goods  
8 that are being provided. One of the arguments that  
9 folks will make in favor of these facilities is that  
10 sometimes there are places where folks can access  
11 things that they might need to continue their  
12 pregnancy, baby clothes, maternity clothes, diapers,  
13 formula. Charitable organizations that provide those  
14 things are doing a public good, but not if those  
15 products come with shame, stigma, medical  
16 misinformation, or ideological bullying.

17 I think we as a city can find a better way to  
18 meet the needs of low income pregnant people. And we  
19 can use this opportunity to understand where those  
20 needs are better. I also recommend that we move up  
21 the final report date to match the state report,  
22 which I believe is due in January 2024. It seems  
23 like the city agencies will likely why not partnering  
24 with State Department of Health on all of these

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2 undertakings, so we might as well get the reports out  
3 at the same time.

4 SERGEANT AT ARMS: Time expired.

5 MS. CASTALDI-MICCA: So I will just add one other  
6 thing is that I was happy to hear that DCWP is  
7 interested in figuring out a broad scope of  
8 businesses that could fall under this category to  
9 study. I think that's exceptionally important. So  
10 I'll pause there.

11 CHAIRPERSON VELÁZQUEZ: And so I think just to  
12 clarify, the changes you would suggest to Intro 506  
13 is matching the state report to January 2024, making  
14 it... removing the survey as involuntary, from  
15 voluntary to mandated... or can you clarify that one?  
16 Sorry.

17 MS. CASTALDI-MICCA: I don't think it should be a  
18 survey.

19 CHAIRPERSON VELÁZQUEZ: What... (crosstalk)

20 MS. CASTALDI-MICCA: I think it should be done  
21 via inspection. I think asking these facilities to  
22 fill out a survey about information that they don't  
23 want to share will not yield an accurate report. And  
24 mandating it won't get us better information either.

25

2 CHAIRPERSON VELÁZQUEZ: Got it. And I know you  
3 mentioned before, but can you highlight the impact  
4 that PSCs have on the ability to access safe and  
5 quality reproductive care?

6 MS. CASTALDI-MICCA: Yeah, absolutely. If  
7 someone is pregnant, all decisions about pregnancy  
8 are time sensitive by the very nature of pregnancy.  
9 When a person becomes pregnant and wants to continue  
10 that pregnancy, accessing timely quality prenatal  
11 care is connected not only to having a healthier  
12 pregnancy, but to reducing both maternal and fetal  
13 death. Every moment that is spent at a non-medical  
14 facility purporting to provide any sort of medical  
15 care is time where accessing that care is delayed and  
16 it can have negative health outcomes.

17 Conversely, if someone is pregnant and does not  
18 want to continue that pregnancy, delays in accessing  
19 abortion unnecessarily increase the procedure's  
20 complexity, it makes it far more expensive, and may  
21 eliminate a person's ability to obtain care  
22 altogether. And I think collectively this body of  
23 the City Council, at least, is extremely aware of all  
24 of the negative impacts of forced pregnancy.

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2 CHAIRPERSON VELÁZQUEZ: Definitely. Thank you so  
3 much for that.

4 MS. CASTALDI-MICCA: Councilmember Velázquez, is  
5 the one thing I will also add is that we are  
6 extremely supportive of the idea of the public  
7 education campaign. And I would like to echo your  
8 call to have it be available in all of the languages  
9 required by the city of New York. We are in a moment  
10 of just oceans of misinformation, and antiabortion  
11 lies, and white supremacy, and the opposite To at  
12 least I think that the city can do is try to reach  
13 those who are most vulnerable: Non-English speakers,  
14 immigrants, young people, and poor people. And that  
15 campaign needs to be in their languages. And it also  
16 needs to be in the media that they consume.

17 CHAIRPERSON VELÁZQUEZ: Thank you so much for  
18 that. I appreciate you.

19 MS. CASTALDI-MICCA: Thank you.

20 MR. MEIXLER: Thank you. I will now call on  
21 Aviva Zaidof to testify, followed by the Bronx  
22 Borough President, The Honorable Vanessa L. Gibson.

23 SERGEANT AT ARMS: Time starts now.

24 MS. ZADOFF: Thank you, Councilmember Rivera for  
25 introducing this bill to the Committee, and thank you

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2 Councilmember Velázquez and the Committee on Consumer  
3 and Worker Protection for convening this hearing  
4 today. My name is Aviva Zadoff and I'm the Director  
5 of Advocacy and Volunteer Engagement at the National  
6 Council of Jewish Women New York. NCJW New York is a  
7 grassroots organization of volunteers and advocates  
8 who turn progressive ideals into action. Inspired by  
9 Jewish values NCJW, New York strives for social  
10 justice by improving the quality of life for women,  
11 children and families, and by safeguarding individual  
12 rights and freedoms.

13 The proposed legislation before you requires the  
14 New York City Department of Consumer and Worker  
15 Protection to report information on Pregnancy Service  
16 Centers in the city and implement an information  
17 campaign on such centers. I come here today to  
18 testify in strong support of this... passage of this  
19 bill. NCJW New York is the lead organization of the  
20 Pro-Truth Coalition. Pro-Truth is a campaign and a  
21 movement to raise awareness and fight the deceptive  
22 and dangerous tactics of fake reproductive health  
23 clinics or crisis pregnancy centers. We believe that  
24 all people have the right to know the truth about  
25 their health and their bodies so we they can make an

2 informed choice. Pro-Truth has identified about two  
3 dozen Pregnancy Service Centers currently operating  
4 here in New York City. These centers actively work  
5 to present themselves as neutral care providers while  
6 all the while working to make it harder for pregnant  
7 people to access the full spectrum of reproductive  
8 healthcare, including abortion. Well, Pregnancy  
9 Service Centers have existed as long as abortion has  
10 been legal, they operate in secrecy with little...  
11 little oversight and few regulations. Much of the  
12 information we have about these centers is based on  
13 the experiences of patients who have been to these  
14 places. While the stories we hear are powerful and  
15 are important part of this picture, we also need to  
16 understand the larger story of what is happening when  
17 it comes to pregnancy resources in the city. This  
18 law and the study that it administers will be an  
19 important step in allowing us to understand the  
20 larger picture of where New Yorkers are receiving  
21 reproductive health care and how these facilities are  
22 operating. We also really appreciate this bill's  
23 creation of a media campaign to inform the public of  
24 pregnancy centers and what they do and do not  
25 provide. One of Pro-Truth's main tenets is to

2 educate the public on pregnancy centers because many  
3 New Yorkers do not know that these places exist or  
4 that they are here in New York City. We strongly  
5 believe that everyone should have the knowledge and  
6 ability to decide where they prefer to receive care.

7       As abortion access becomes more restricted across  
8 this country, we know that pregnancy centers will  
9 play an even larger role in a person's ability to  
10 access care, the barriers that pregnancy centers can  
11 create and the confusion they add to accessing  
12 abortion care is going to become an even larger issue  
13 in a post Roe world. When even more people are  
14 coming to our city in our state to access care, and  
15 the time is even more important in being able to  
16 access the full range of reproductive options. The  
17 National Council of Jewish Women believes that  
18 everyone is entitled to the truth about their body  
19 and about their choices, and that everyone should be  
20 able to receive the highest quality of safe,  
21 accessible and judgment-free reproductive health care  
22 that our city has to offer. We support the Council's  
23 efforts to create a mechanism that will allow us to  
24 see the full picture of where New Yorkers are  
25 receiving care, and what resources these pregnancy

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2 centers are actually offering to their clients. We  
3 asked for the Committee to support making this Intro  
4 506 into law.

5 CHAIRPERSON VELÁZQUEZ: That was like almost  
6 perfect timing, by the way.

7 MS. ZADOFF: I try.

8 CHAIRPERSON VELÁZQUEZ: Super-fast too.  
9 Excellent. I'm going to take notes from you. Thank  
10 you. Thank you for coming. And thank you for  
11 testifying.

12 Just a couple of questions: What changes would  
13 you suggest to be implemented into 506? And can you  
14 just... And I know you mentioned in the testimony,  
15 but can you emphasize and highlight the impact of  
16 Pregnancy Service Centers on the ability to access  
17 safe and quality reproductive care?

18 MS. ZADOFF: Sure, I would echo the comments by  
19 my fellow advocates, talking about the voluntary  
20 nature of this survey given what we know about  
21 Pregnancy Service Centers and their desire to, you  
22 know, obscure the truth and keep officials from  
23 actually being able to know what's happening inside  
24 of them. I also echo what Danielle spoke about in  
25 terms of material goods, and people being...

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2 understanding people's ability to access these goods,  
3 which can be really important and meaningful and  
4 understanding how people are, you know, receiving the  
5 items necessary to you know, raise children and have  
6 a healthy pregnancy.

7 And the second part of your question, as has been  
8 said, we... we understand how important it is for  
9 people to be able to access quality care. Also, I  
10 want to emphasize the ability to access judgment-free  
11 care, and that everyone should be able to, you know,  
12 receive somebody who wants to listen and help them in  
13 whatever... and they decide to go with their  
14 pregnancy. So they shouldn't be judged. They  
15 shouldn't be stigmatized. They shouldn't live in  
16 fear of a decision, and they should receive the care  
17 that will allow them to make choices of their own  
18 decision.

19 CHAIRPERSON VELÁZQUEZ: Thank you. Thank you.

20 MS. ZADOFF: Thank you.

21 MR. MEIXLER: Thank you. I will next call on the  
22 Bronx borough president, the Honorable Vanessa L.  
23 Gibson, followed by Elizabeth Estrada. Bronx Borough  
24 President?

25

2 I think we'll move on again and then circle back  
3 to the Bronx Borough President given the  
4 technology... technology issues. So next, I'll call  
5 on Elizabeth Estrada, followed by Ali Boehm.  
6 Elizabeth?

7 MS. ESTRADA: Hi everyone. Can you all hear me?

8 MR. MEIXLER: Yes, we can.

9 MS. ESTRADA: Awesome. Thank you so much for  
10 holding this hearing. Thank you to the City Council  
11 for holding the hearing and to City Councilmember  
12 Rivera for introducing this bill, and to  
13 Councilmember Velázquez for overseeing this hearing,  
14 and of course, to the Bronx borough president Vanessa  
15 L. Gibson for calling for this hearing to discuss the  
16 harmful impact of fake clinics, aka Crisis Pregnancy  
17 Centers or Pregnancy Service Centers.

18 My name is Elizabeth Estrada. I'm the New York  
19 Field and Advocacy Manager for the Latina Institute  
20 of New York. And at the Latina Institute, we call  
21 them fake clinics, or clínicas falsas in Spanish, but  
22 they're not clinics at all. When our activists have  
23 called to see what services they claim to provide,  
24 they tell us that they won't provide pregnancy tests  
25 for free, and that ultrasounds aren't performed at

2 their emergent mother care location in the Mott Haven  
3 neighborhood of the South Bronx. I've lived in the  
4 Bronx for over seven years, and have visited the  
5 emergent mother care facility a few times and have  
6 observed their deceptive tactics myself. And I've  
7 heard many stories from other New Yorkers across the  
8 city.

9 We also share the experience of having never  
10 witnessed signage to indicate there are no real  
11 medical professionals on staff as well as other  
12 tactics including misleading advertising of free  
13 pregnancy tests, as I mentioned before, or  
14 ultrasounds to lure you into their business and away  
15 from real health care providers. But when entering  
16 their suite, no such resources are provided for free,  
17 only misinformation and lies.

18 Many of these anti-abortion centers locate  
19 themselves near real health care clinics, as many of  
20 my colleagues have mentioned, or public hospitals  
21 that serve mostly black and Latinx communities in low  
22 resource areas, much like EMC, who is located  
23 directly across from Planned Parenthood and down the  
24 block from Lincoln Hospital. These are high-traffic  
25 areas close to social services, which for me is clear

2 is a clear indication that they're targeting folks  
3 with low incomes. They place billboards in Spanish  
4 in immigrant neighborhoods, some buy ads on black  
5 television, and use targeted ads on websites where  
6 they know black and Latinx people are clicking.

7 Crisis Pregnancy Centers locate themselves in  
8 lower resource neighborhoods with communities that  
9 have little to no access to healthcare. Through  
10 strategy strategies like their urban initiative, CPCs  
11 target neighborhoods with large black, Latinx, and  
12 immigrant communities. They locate themselves in  
13 neighborhoods near social services and comprehensive  
14 reproductive health care providers. CPCs place  
15 advertisements in their neighborhoods showing people  
16 of color offering free services or Medicaid  
17 assistance. This misleads our communities and draws  
18 them away from nearby providers and social services  
19 that offer actual comprehensive care, exasperating  
20 barriers, and delaying access to real health care.

21 Nationwide there are about five clinics for every  
22 one abortion clinic, and in New York, that average  
23 doesn't differ with fake clinics outnumbering real  
24 abortion providers across the state. Fake clinics  
25 disproportionately hurt black indigenous people of

2 color and families by adding yet another barrier to  
3 already... to access care. Latinos face language and  
4 cultural barriers that hinder health care access  
5 already, and literacy that can make them be deceived  
6 by fake clinics. So we're here... I'm here to  
7 support Intro 506 and stand committed to supporting  
8 the City Council, as well as our reproductive health  
9 rights and justice advocates across the city to  
10 combat these anti-abortion centers. Thanks so much.

11 CHAIRPERSON VELÁZQUEZ: And thank you for  
12 testifying today. Just as I asked the other folks  
13 testifying, what changes would you suggest to be  
14 implemented into Intro 506? And once again, can you  
15 describe the impact of Pregnancy Service Centers on  
16 New Yorkers abilities to access safe and quality  
17 reproductive care?

18 MS. ESTRADA: Thank you Councilmember, I would  
19 echo everything my colleagues Maryam, Danielle, and  
20 Aviva have suggested. I am a huge proponent of the  
21 hotline. I think anything that makes it easier for  
22 communities with high immigrant, black Latinx  
23 population to simply make a phone call, whereas many  
24 of us may not have necessarily have access to  
25 internet, or a lot of tech literacy, that phone... a

2 hotline would be would make it much more accessible  
3 to leave a complaint or report these harmful centers,  
4 as well as a public education campaign that includes  
5 advocates from each borough working in collaboration  
6 with the City Council, whereas models that perhaps  
7 others coming in from outside of each borough may not  
8 get the message across to their community members,  
9 because they're not part of the community.

10 Um, I would say that the stories that I've heard  
11 are that people are being delayed, held in -- you  
12 know, not forcefully held -- but held in conversation  
13 when entering CPCs and talking mainly about religion,  
14 God, and... and one of our activists who bravely  
15 shared her story with me and a journalist talked  
16 about going into a Crisis Pregnancy Center to receive  
17 a free pregnancy test, but was denied one and asked  
18 to pay \$20. When they finally went into a counseling  
19 room, they... she had just lost her dad, and they  
20 basically exploited that, and try to shame her into  
21 carrying her pregnancy to term because, according to  
22 them, her father would have "wanted her" to carry  
23 this pregnancy.

24 So those are just one of the stories that I've  
25 heard within our community that speak to the shame

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2 and the stigma and the coercion that these anti-  
3 abortion centers, Crisis Pregnancy Centers inflict on  
4 our community.

5 CHAIRPERSON VELÁZQUEZ: Thank you so much.

6 MR. MEIXLER: Thank you. We'll next call an Ali  
7 Boehm to testify. We'll now... We'll unmute  
8 Elizabeth Estrada for questions from Councilmember  
9 Brewer, if Elizabeth Estrada still on.

10 COUNCILMEMBER BREWER: Thank you very much. I  
11 just... I'm late because I was speaking at a  
12 graduation, so I did not hear what the administration  
13 stated. But my staff and I, since 2011, we've been  
14 working on this issue. And we've been to every  
15 center of Manhattan pretending to be pregnant, and  
16 we've seen that there's no information, that there's  
17 no ability. Nobody's done any kind of a review as to  
18 what the law is. And I guess that's what you have  
19 found, and I assume that's what was stated earlier.

20 So my question to follow up on the Chair, is I  
21 believe the center should be closed. I've said that  
22 from the beginning. I know that's not necessarily  
23 legal to do, but I would close them. Because they  
24 are lying, they don't put the information up  
25 correctly, they actually site themselves near family

2 planning or other kinds of high-quality centers that  
3 are appropriate for all of us seeking help for our  
4 bodies.

5       So I guess my question is to follow up on the  
6 Chair, to be really specific. Are any of them  
7 following the law, or any of them getting cited by  
8 the department -- from your experience, I know the  
9 department was here earlier -- but I literally have  
10 been to every one of them. My staff has been to all  
11 of them. And we've been focused on this since 2011.  
12 And we had a bill along those lines. That that's how  
13 it all got started, was from us in 2011.

14       MS. ESTRADA: Thank you. That... that question  
15 is for me, yes?

16       COUNCILMEMBER BREWER: Yes it is.

17       MS. ESTRADA: Thank you so much. Um, you know,  
18 my... What I... What I do know is that in my borough  
19 where I live in the Bronx, the emergent mother care  
20 facility is the one that's biggest and most, you  
21 know, traffic because it's in a high-traffic area.  
22 And I have never seen signage to indicate there are  
23 no medical staff, no actual medical professionals on  
24 staff. However, there are often folks dressed in  
25 white coats or even scrubs. And it's through the,

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2 you know, research that we've done picking up data  
3 from calling or going into the centers, we experience  
4 the same thing that you experienced. And what I'm  
5 hearing you say is that, you know, you've been  
6 working on this far longer than even I have here in  
7 the city. But I think the detriment to these  
8 organizations Danielle has spoken to, it's like, if  
9 you delay, then that means that you often create, you  
10 make care out of people's reach, right? If folks are  
11 going and taking a day off, that means that they have  
12 to figure out another day to come back. Um, and  
13 sometimes that isn't really available to folks,  
14 especially when you know, if families or, you know,  
15 pregnant people are taking a day off from like, an  
16 hourly-wage job. So these are super harmful  
17 organizations that are changing people's lives for  
18 the worst. And we're not really seeing them provide  
19 any actual resource to our community, outside of just  
20 shaming people from the stories that I've heard in  
21 our community. You just go in there and they talk to  
22 you about God. And the thing is, is that they also  
23 have Spanish-speaking folks in there. So not all the  
24 time, but sometimes they have Spanish speaking folks  
25 in a community that is immigrant and Spanish

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2 speaking. So they try to make their, you know, like  
3 deceptive tactics, at least accessible in Spanish.  
4 And Intro 506 would do the opposite to try to really  
5 educate our community about what these deceptive  
6 clinics are doing so they can avoid them and just  
7 access the actual health care that they need.

8 COUNCILMEMBER BREWER: Thank you.

9 MS. ESTRADA: I hope that helps address your  
10 question.

11 COUNCILMEMBER BREWER: Thank you.

12 MR. MEIXLER: Thank you, we will next go to Ali  
13 Baum testify for testimony. Ali?

14 MS. BOEHM: Thank you for having me. My name is  
15 Ali Boehm and I'm a Policy Counsel at the New York  
16 Civil Liberties Union.

17 As this Committee knows decisions about pregnancy  
18 are time sensitive, and everybody deserves access to  
19 timely, comprehensive and accurate health care  
20 information to inform those decisions. Delayed  
21 access to such information can impede the initiation  
22 of prenatal care or access to emergency contraception  
23 or abortion, which can have adverse impacts on a  
24 person's health, push care financially out of reach,  
25 and severely limit a person's Reproductive Health

2 Options. Intro 506 requires the Department of  
3 Consumer and Worker Protection in consultation with  
4 the Department of Health and Mental Hygiene to report  
5 on the unmet health needs facing New Yorkers and the  
6 impact that Pregnancy Service Centers have on the  
7 ability to obtain timely and accurate health  
8 information and services. While the city does have  
9 Local Law 17, which requires Pregnancy Service  
10 Centers to disclose that they are not medical  
11 facilities, this neutral unbiased study will be  
12 integral to developing and supporting other  
13 strategies to support pregnant people in New York  
14 City. Intro 506 also requires the Department to  
15 implement a media campaign to inform New Yorkers  
16 about what Pregnancy Service Centers are, and how to  
17 access comprehensive reproductive health services in  
18 New York City, as well as how to make a complaint if  
19 Pregnancy Service Centers engage in deceptive trade  
20 practices. Particularly as the Supreme Court stands  
21 poised to overturn Roe v. Wade, and we expect New  
22 York City to serve as a beacon for individuals  
23 seeking care, it is more important than ever that the  
24 city informed pregnant people about where and how to  
25 obtain comprehensive reproductive health care within

2 our borders. City Council can and should strengthen  
3 this public education campaign, by requiring that the  
4 campaign be conducted in all city languages. City  
5 Council can further strengthen Intro 506 by expanding  
6 the inquiry to include questions about the ways in  
7 which Pregnancy Service Centers may meet individuals  
8 and families unmet resource needs. Recent studies  
9 and reporting have demonstrated that some people use  
10 Pregnancy Service Centers as a form of conscious  
11 consumption. They are aware that these service  
12 centers exist to prevent abortion, and that many are  
13 evangelical in nature. But they have already decided  
14 to continue a pregnancy and see these service centers  
15 as their only option to receive free or low cost  
16 diapers, baby clothes and other material goods to  
17 support a new child. Inquiring into unmet resource  
18 needs as well as unmet health needs, may lead the  
19 city to other or additional policy solutions.

20 In addition -- and this has been talked about by  
21 previous witnesses -- when Local Law 17 was adopted  
22 in 2011, Pregnancy Service Centers generally did not  
23 have medical providers on staff, although many gave  
24 the impression that they were medical facilities  
25 confusing some consumers. As a result, it made sense

2 to define Pregnancy Service Centers to exclude  
3 facilities where a licensed medical provider is  
4 present to directly provide or directly supervise the  
5 provision of all services that are provided at the  
6 facility. In recent years as others have discussed,  
7 many Pregnancy Service Centers have begun to hire  
8 medical directors and medical staff in order to  
9 escape definitions like New York City's, though they  
10 still do not provide or refer for the full range of  
11 comprehensive reproductive health care services. For  
12 this reason, City Council should consider updating  
13 Local Law 17's definition of Pregnancy Service Center  
14 to include centers with... with medical personnel on  
15 staff that nonetheless do not provide or refer for  
16 the full range of comprehensive reproductive and  
17 sexual health care services.

18 Intro 506 addresses an issue of equitable access  
19 to health care in New York City. Everyone deserves  
20 to receive comprehensive information about their  
21 health care options, and to be connected to qualified  
22 providers to address their healthcare needs.

23 Adequate and early prenatal care timely abortion care  
24 and emergency contraception are critical to reducing  
25 maternal mortality and morbidity rates and

2 disparities. Understanding any gaps in access to  
3 comprehensive reproductive health and sexual health  
4 care services serves an important public health goal  
5 of improving health outcomes for all.

6 Thank you for the opportunity to testify. I will  
7 submit written testimony later and we're happy to  
8 work with City Councilmembers to strengthen Intro  
9 506. And I'm happy to answer questions.

10 CHAIRPERSON VELÁZQUEZ: Thank you for that. And  
11 I turn it to Councilmember Brewer.

12 COUNCILMEMBER BREWER: Thank you very much. I  
13 guess my question is that having done... passed Local  
14 Law 17, can you be even more specific as to how it  
15 could be updated? You mentioned that in your  
16 testimony, number one, and number two, do you think  
17 these centers have a role in New York City?  
18 Obviously, no, I don't. But I didn't know... and how  
19 and how did they get, You know, how do they get  
20 funded is also questionable, in my opinion. I assume  
21 it through DVS insurance measures? But could you  
22 update us on 17? And then if you have any ideas, how  
23 they're funded, I'd be curious. The agency has not  
24 done any kind of oversight yet. So I don't know that

2 they would in the future, even with this law, which I  
3 support, but I'm not sure it would even happen.

4 MS. BOEHM: Sure. So those are great questions.

5 Let me start with how to update Local Law 17. And  
6 you know, I feel like I've said it and a lot of folks  
7 before me have said it, so apologies to the Chair,  
8 because you've now heard it like 10 times, but you  
9 know, a big piece is updating the definition.

10 When you passed Local Law 17, these were centers  
11 that were pretending to be medical providers that had  
12 no medical providers on staff, and so it was really  
13 easy to draw that line. They know that. So now  
14 they're hiring medical providers to you know, maybe  
15 show up a couple days a week, maybe just to use their  
16 license and sort of be on payroll. So then they say  
17 -- and this was a challenge for the department when  
18 they testified -- a lot of folks that they got  
19 complaints about had medical providers on staff, so  
20 they didn't meet Local Law 17 definition. So it was  
21 really important to update that definition. And  
22 we're happy to work with you on what that language  
23 would look like to include facilities that have  
24 medical providers on staff.

2       As far as how these entities are funded. You  
3 know, that is one thing I hope this study will  
4 reveal. One of the things we know is during the  
5 Trump administration when they changed the rules for  
6 Title X, and Planned Parenthoods and other  
7 reproductive health care providers could no longer  
8 qualify, some Pregnancy Service Centers -- I don't  
9 know whether there were any in New York -- received  
10 Title X funding. Obviously that would change with  
11 the current administration. We know that there are  
12 national... nationwide organ umbrella organizations  
13 for Pregnancy Service Centers that do some of the  
14 funding. We know some receive funding through  
15 churches. But this is actually something that I hope  
16 that both the state study and this study will  
17 uncover. And to the extent that the language -- and  
18 I apologize, I have a markup of the language, and I'm  
19 not used to testifying in person anymore, so it's not  
20 with me -- but to the extent that the language  
21 doesn't already capture that, that's another way to  
22 strengthen the study would be to find out that  
23 information.

24       And, you know, Councilmember, I know, you have  
25 great concerns about these centers. We have great

2 concerns about these centers. One of the things that  
3 I think is really wonderful about this study, because  
4 if you do want to do something that is more  
5 regulatory in nature, it is likely to be challenged.  
6 And so having a neutral study that says: "Here are  
7 the problems, here's how we solve them," is going to  
8 be really helpful for making sure that law withstands  
9 scrutiny. And so that neutral study is a good first  
10 step. And I think the answers are going to be  
11 different. If we find out that, for example, New  
12 Yorkers don't have anywhere other than these service  
13 centers to get free diapers, maybe we have a  
14 different policy solution than if we find out that  
15 actually they're not giving out diapers at all.  
16 They're just, you know, as Elizabeth testified,  
17 bringing people in and giving them you know,  
18 evangelical speeches, right? Those are going to lead  
19 to very different solutions.

20 COUNCILMEMBER BREWER: Okay. Thank you.

21 MR. MEIXLER: Thank you. I would like to now  
22 welcome the Bronx Borough President, Honorable  
23 Vanessa L. Gibson.

24 PRESIDENT GIBSON: Thank you so much. Good  
25 morning, everyone. Thank you to our esteemed Chair,

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2 Councilmember Marjorie Velázquez, and all the members  
3 of the New York City Council on the Committee on  
4 Consumer and Worker Protection, as well as our bill  
5 sponsor, Councilmember Carlina Rivera, for convening  
6 today's very important hearing. It's really an honor  
7 to be back with all of you virtually, of course, to  
8 join you to voice my support for Introduction 506.  
9 Thank you to the members of the City Council. As a  
10 former member of the body, I know how important these  
11 hearings are to make sure that our advocates and so  
12 many activists in our communities are able to really  
13 have a voice to effectuate the change that is  
14 necessary to save lives and strengthen our  
15 communities.

16       So for far too long access to reproductive health  
17 services has truly been under attack across this  
18 country, and with the Supreme Court poised this week.  
19 So rule on the future of Roe vs Wade, we know that  
20 this is truly a call to action and attention. It is  
21 critical that the city of New York act swiftly to  
22 ensure that every woman, every birthing individual  
23 has the right to make decisions about their body  
24 without interference coercion or manipulation. That  
25 is why I was proud to introduce this legislation

2 during my time to the Council with your colleague  
3 Councilmember Carlina Rivera to require reporting on  
4 Pregnancy Servicing Centers, because we believe that  
5 many of these facilities that provide services to  
6 pregnant women while having the appearance of a  
7 licensed medical facility, but do not actually have a  
8 license to provide medical or pharmaceutical  
9 services. In the past, many of these facilities have  
10 steered the services that they provided appearing to  
11 be clinics that offer the full range of reproductive  
12 healthcare options, while not actually providing  
13 access to services such as abortion care referrals,  
14 and emergency contraception. In 2010, at that time,  
15 the City Council enacted legislation to regulate our  
16 Pregnancy Service Centers more thoroughly in what is  
17 now known as Local Law 17 of 2011. This bill  
18 required these centers to stay up front, the clients  
19 that they're serving, who was a licensed medical  
20 professional and practitioner, and this legislation  
21 was truly necessary to prevent these centers from  
22 misinforming women seeking reproductive health care  
23 about the services that they were offered. Women  
24 should be able to decide for themselves the very best  
25 options and alternatives when it truly comes to their

2 own bodies without government interference,  
3 manipulation, and deception from these organizations.

4 This bill under consideration today before your  
5 Committee will expand on the legislation by requiring  
6 the Department of Consumer and Worker Protection to  
7 issue regular reports on the operation of Pregnancy  
8 Service Centers in our city, including the  
9 information identifying each center, the services  
10 they offer and associated partners, whether the  
11 centers, enroll women, birthing individuals, benefit  
12 programs, and how they advertise and promote their  
13 services and whether they take public funding.

14 Additionally, the builder will require the agency  
15 to engage in a public awareness campaign, which I  
16 love, to educate the public about Pregnancy Service  
17 Centers, the services they offer, and how to access  
18 reproductive health, including abortion care  
19 services. Women in my borough of the Bronx, and  
20 across this city deserve access to the care that  
21 works best for them and their families, access to  
22 care that is fully transparent about the services  
23 that are provided. Women have the right to control  
24 what happens to their bodies, whether that means  
25 carrying a pregnancy to term or seeking abortion care

2 services. This bill will truly enable our city  
3 government and city residents to get a fuller  
4 understanding of what Pregnancy Service Centers are  
5 all about. With reproductive rights under attack  
6 across this country, I am so grateful to our leaders  
7 at the federal state and local level, my former  
8 colleagues and new colleagues in the City Council who  
9 are taking action to protect our rights, achieving  
10 equity and justice in the system.

11 Thank you for considering this legislation  
12 interim 506. Thank you, Madam Chair, Councilmember  
13 Velázquez. Thank you to the members of the  
14 Committee. And of course, I know how hard the staff  
15 works, so I want to thank the legislative team as  
16 well, and I look forward to working with all of you  
17 to pass Intro 506 and make sure it can be Local Law.

18 Thank you so much for your time today, everyone.

19 MR. MEIXLER: Thank you. At this time, if your  
20 name has not been called and you still wish to  
21 testify, please raise your hand using the zoom raise  
22 hand function.

23 Seeing none, I'll turn it over to the Chair to  
24 gavel out.

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2 CHAIRPERSON VELÁZQUEZ: I want to thank everyone  
3 for showing up either virtually or in person.

4 Thank you. Today was a tough day but I  
5 appreciate you all for turning out and have a great  
6 one.

7 [GAVEL]

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date 07/30/2022