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[00:00:00] **Speaker 1** It's a lot of stuff. And Steve, I am rolling. Whenever you're ready. Okay.

[00:00:04] **Speaker 2** Okay. How am I presenting? Okay.

[00:00:06] **Speaker 1** So this is what the image images.

[00:00:08] **Speaker 2** Hey, look at that. Okay.

[00:00:10] **Speaker 1** Yeah, that's good.

[00:00:12] **Speaker 2** The things you can do now. Okay. Am I sounding okay?

[00:00:15] **Speaker 1** Yep. You're sounding good.

[00:00:16] **Speaker 2** Okay.

[00:00:17] **Speaker 1** That's what that little chitchat about.

[00:00:19] **Speaker 2** How you were doing it all along. You're good.

[00:00:21] **Speaker 1** We've done this before, so we have it for the camera. Can you tell us your name and title, please?

[00:00:27] **Speaker 2** Do you want me looking at you? Yes. Okay. Right here. Sarah Finger, Executive Director, Wisconsin Alliance for Women's Health. You need me to spell it right? Okay.

[00:00:36] **Speaker 1** You're good. Describe your organization and the work you do.

[00:00:40] **Speaker 2** At the end of the day, our organization is working to ensure that policy happens with women rather than to them. We, on an everyday basis, are monitoring policy threats and opportunities to women's health, safety and economic security, and how we work to help ensure that policies happening with us are not to us. Is that we work to inform, involve and inspire everyday people to be effective advocates for positive change.

[00:01:06] **Speaker 1** How do you do that work?

[00:01:08] **Speaker 2** By monitoring policy threats and opportunities, especially at the state legislative level. We're able to kind of be that point of reference for people that care about women's health, safety and economic security, but don't have the time to be monitoring what's all happening in our state capitol in Washington, D.C. and other policy environments. And so we're here we're kind of an advocacy do list service. We're here helping to navigate where policy is being made and to help people plug into it, because democracy is not a spectator sport. Yet we estimate less than 7% of people in our state can identify who their state legislators are. So there is a huge disconnect between the people and the policymakers, and we're here to bridge that gap.

[00:01:54] **Speaker 1** So how would you describe the state of women's health here in Wisconsin right now?

[00:01:57] **Speaker 2** Let's say women's health. So I've been doing this for 20 years. I started this work in 2004, and it's been a fascinating journey, watching how politicized, demonized, stigmatized policies around women's health have become over the last couple of decades. I would say that in Wisconsin we can look at the state as a whole and look at some of our national rankings, which are often whitewashed, because if you look at us as a state, we do have statistics that show that we're doing okay in terms of women's health outcomes. But when you drill down and look at specific communities of color, we have been the worst, if not one of the top three worst in the nation when it comes to health care, disparities around maternal health, mental health, cancer, reproductive health care. When it comes to black, Latinx and indigenous women.

[00:02:52] **Speaker 1** A year ago, the Supreme Court did overturn Roe versus Wade in their jobs decision. What are your thoughts on that?

[00:02:58] **Speaker 2** That was I wasn't surprised at what the Supreme Court did. This has been a strategic, very dedicated move for decades on the part of the so-called pro-life movement. So this was very much anticipated by those of us who are following policies related to women's health and reproductive health care over the last couple decades. So when it happened last year, we were we were ready for the implications because abortion wasn't readily accessible any ways, even with Roe being law of the land. There were still incredible hurdles, policy initiated, hurdles that made it really hard for individuals seeking comprehensive reproductive health care and abortion services to actually access them. I have access to a Lamborghini, but I can't afford one and I can't get to one. So the idea that something is legal doesn't necessarily mean that it's accessible, affordable, and there's the same quality of care for everybody getting that service. And so, yeah, we're seeing a devastating reaction right now to the fact that abortion is not legal in Wisconsin because of an 1849 law, an 1849 law that was put into the books that still hasn't been repealed and was triggered the minute the Supreme Court decision came down. And so now we're facing the fact that abortion is not legal in Wisconsin, and we are really in a desperate situation to try and figure out how to triage individuals in need to states that are still providing comprehensive reproductive health care.

[00:04:35] **Speaker 1** What do you think should happen with the law on the books with that 1849 abortion ban law?

[00:04:40] **Speaker 2** We need to repeal that 1849 law. I know there's a lot of court cases right now. I know there's a lot of discussion about legitimacy of the 1849 law, considering they also passed a 20 week abortion ban in the last decade. They've been playing games with women's health for a long time, the so-called. Pro-Life leadership in the state legislature and in organizations in the state. They have been part of this movement to put up hurdle after hurdle after hurdle to regulate and overregulate and underfund, de-fund comprehensive reproductive health care in the state. And so we definitely need to recognize that an 1849 law is no longer, I think, relevant in a 2023 day and age. We need to repeal that law and we need to look at evidence based policy and information so that we can actually make a law in Wisconsin, have it on the books in our own state, no matter what happens nationally to ensure that kind of access to comprehensive reproductive health care.

[00:05:42] **Speaker 1** There are a number, dozens of so-called pregnancy resource centers and crisis pregnancy centers. How would you describe those centers?

[00:05:52] **Speaker 2** And these so-called pregnancy crisis centers are really fake clinics. They're presenting as legitimate health care centers, which they're not. I was researching and found that a manicurist or a tattoo artist has to get more licensing requirements than a volunteer does at a one of these so-called crisis pregnancy centers. It is unbelievable that there is a 3 to 1 ratio of these fake centers to legitimate abortion clinics in this country. So there is no shortage of these fake centers, and they're politically motivated by typically faith based groups whose sole purpose is to prevent abortions. So they existed long before the Supreme Court overturned Roe. And they've always been preying on vulnerable individuals who find themselves with an unintended pregnancy. Now, you have a place in a time of crisis where abortion is not legal in the state. People are scared about access to full comprehensive reproductive health care services and suddenly see a billboard that offers you free pregnancy testing, free ultrasound, free services. And people are simply not aware that these are not legitimate licensed health care facilities. And so as I look at what crisis pregnancy centers are doing right now, they're undermining the well-being of not only the individual pregnant, but the newborn or the baby. And we there are people who are dealing with major disparities and poor health outcomes related to pregnancy and postpartum, who cannot afford delays in proper health care and access to information. And these centers are simply creating the kind of barriers and delays, intentional delays that some of these women can't afford. Sorry, I'm going on a tangent with that.

[00:08:02] **Speaker 1** That's good. I'm going to wait for the siren fire truck to keep moving.

[00:08:07] **Speaker 2** Oh, it is short lived. Wait for the trains to come through. Okay.

[00:08:15] **Speaker 1** Regarding the numbers, why are these pregnancy resource centers in these crisis pregnancy centers? Why are they thriving?

[00:08:22] **Speaker 2** I think the crisis pregnancy center model has has been thriving across the country for decades because there's no shortage of private funding going to support these politically motivated centers. And they, in addition to a lot of private funding, these centers have been successful in actually getting taxpayer funded dollars. And through programs like Title ten, Title five, legitimate family planning programs administered by Health and Human Services in Washington, D.C.. So it's infuriating at a time when so-called pro-life leaders have successfully defunded and underfunded, legitimate family planning clinics all across the country, especially in Wisconsin. And you've seen those clinics close because of the argument. They don't want taxpayer dollars going towards evidence based, comprehensive reproductive health care. Now, we actually have taxpayer dollars infused into these centers who are lying and deceiving individuals at their most vulnerable time in life. And so I don't know, again, what all goes into this kind of massive playbook that puts these kind of deceptive or deceiving deceptive centers in communities all across this country. But there is no shortage of them. And they continue to successfully manipulate individuals and communities all across the state.

[00:09:56] **Speaker 1** You've said deceitful, you said manipulative. How do they manipulate women who come to the centers?

[00:10:01] **Speaker 2** So there's a billboard that's been up in my neighborhood in Fitchburg, and it says, right on top, first Care clinic has clinic right in the name. And then they have a bunch of women looking happy and supported. And then in small letters, it even says accredited Women's Clinic. And so they're presenting as a legitimate health care center, and they're offering free pregnancy testing and support for your pregnancy. Now, doesn't that look good to someone who is in a place maybe under-insured, uninsured, not expecting a pregnancy? That's probably really appealing to those individuals, seeing the word clinic, seeing the word accredited, seeing free seeing pregnancy. And so they're luring people in to call their hotlines to go to their centers. And once they're in those doors, they have a captive audience and they have the chance to really dissuade anyone from ever considering even terminating that pregnancy. And so even once you're in the door, you've already been misled into getting through those doors. Right. And once you're in there in terms of the counseling that these non licensed medical they're not medical professionals, they're volunteers. And the kind of information that they're giving is often actually full of lies. They have studies that are showing how these websites and the centers themselves are talking about falsely claiming that abortion will increase your mental health challenges. They're falsely indicating that you can abortions will lead to breast cancer or infertility. And these are all lies. And the American Medical Association, who is a predominant leader in terms of health care in this country, and the providers and the American Congress of Obstetricians and Gynecologists both have briefs warning people about the dangers and the unethical behavior of these fake clinics, recognizing they're a danger to patients all across this country.

[00:12:04] **Speaker 1** There is a package of bills and brace them both. Senator Quinn has put this legislation forward. Part of it provides a considerable amount, $1 million per year for these pregnancy research centers. What are your thoughts on that?

[00:12:21] **Speaker 2** Well, the embraced on both agenda is hard. Let's start over. It's incredibly hard for me to take the embrace them together agenda seriously. I've been in this work for 20 years. I've been on the front lines of tackling these maternal and child health disparities in our state. And these so-called pro-life individuals and legislators have been nowhere in coalition with us. And the Perinatal Association and the OB-GYNs and the March of Dimes and the Foundation for Black Women's Wellness. We've all collectively tried to tackle the maternal and child health crisis that we've been facing in Wisconsin for over three decades. And now in 2023, you start seeing Republican legislators wearing their pro-life badge, try to embrace them both, when really our state legislature has been traditionally pro and biblical cord when led by a Republican majority. They're not investing in the long term infrastructure that needs to support these individuals who had an unintended pregnancy and are bringing a child into the world. And so I just have a really hard time taking this initiative seriously, knowing that they have not authentically engaged in this conversation about supporting them both as our organization has for two decades. What is infuriating is that hidden within this agenda, this embrace that both agenda is earmarked funds to go and support these fake clinics so they continue to prey upon vulnerable individuals. And I'm sorry, but if there is even $1 of taxpayer funded money going towards to support these fake clinics who are not licensed, who are not they're not regulated, they're not accredited, and they don't have to follow HIPA regulations. They don't have to protect your privacy and your confidentiality. Why are we even considering putting a single dollar towards these fake clinics in our state or anywhere in this country at a time when we really need to be investing those funds into comprehensive evidence based health care and information?

[00:14:37] **Speaker 1** You've mentioned that these centers that I've read, they provide ultrasounds. Some say that they employ nurses. They're not medically certified in any way.

[00:14:48] **Speaker 2** No. These these fake ultrasound machine, you can buy them and then you can get trained on how to use them. So I will say that when my I had a daughter first and then we were expecting our second and last child. And so there's these boutiques that you can go and get ultrasounds and get recordings of them. So instead of waiting for the 20 week appointment with your physician, you can go to these boutiques and there are people who are trained to provide ultrasounds. And it was for the fact that I could find out the gender of the second child. I wasn't getting a medical diagnosis. I wasn't getting anything else. I had my daughter there in this room so she could see what was her brother on the screen and. And yeah, there are people that can get access to ultrasounds and they can do that. But framing it as a medical provider, doing an ultrasound versus a boutique, you know, having you get a glimpse into what's going on through your pregnancy, that's very different. I myself have a blood clotting disorder factor five. And so I never depended on that boutique to provide me medical care. I specifically went and saw their services so that I could, you know, again, find out what we were having for a second child and prepare. The idea that anybody, whether you have any kind of medical condition or not, pregnancy is dangerous. And I want to know. I wanted to know while I was pregnant with both of my children, I wanted to know that I had access to the comprehensive information and services that were evidence based that would actually help me as a pregnant person and for the future of my unborn child. Now, these places that set themselves up to look like clinics and centers are not providing health care professionals, licensed health care professionals on staff there. They're often volunteers who have been trained to use ultrasound machines, but they're not trained on how to do diagnosis and see if there's any kind of complication. They don't have procedures in place to triage someone who is in a place of distress. And so if that were me going into one of these fake centers, knowing that that false sense of security that there is here ultram or ultrasound machine right here, here's someone in a white coat with a stethoscope, it gives you the sense that you are being provided that kind of comprehensive, not just care in that moment, but prenatal care in a sense, and then to not. Yeah, the fact that that ultrasound itself makes it seem more legitimate than it ever is.

[00:17:31] **Speaker 1** How has the Dobbs decision you think affected these centers?

[00:17:34] **Speaker 2** Is it interestingly enough, right after the Dobbs decision last year, I was invited to to give a talk and talk about abortion access in Wisconsin. And a woman from a local crisis pregnancy center was invited to go be on a panel with me. And I remember the question. It's like we have completely flipped access to reproductive health care on its head after Dobbs decision. There is a lot of misinformation out there and people are scared. So now you have a situation where people are on high alert knowing that abortion has been made illegal in Wisconsin and there are still unintended pregnancies. And so at a time when people are desperate for information, desperate for access to health care, desperate for access to services, these crisis pregnancy centers, these fake clinics are purposely advertising in places where people will turn to them thinking they're getting the kind of health evidence based health care they need and deserve, and they're not. So I remember talking to this person Co-presenting with me and saying, What are you going to do now to to handle this influx of individuals coming in? And what are you going to do to help them if there's a complication? What are you going to do to help them plan and prevent or space their next pregnancy? What are you going to do to actually support that family once that in biblical court has been cut in terms of housing and food and just basic necessities, education, employment, all those things, What these centers are ill prepared. It's like the dog that caught the bus. These centers have always wanted abortion to be illegal and to prevent abortion. They got their way and now they continue to prey upon the circumstance and manipulate individuals who are in a place of crisis because of the Supreme Court decision.

[00:19:44] **Speaker 1** Have you ever been in any of these?

[00:19:46] **Speaker 2** Yes. Yes. I've had.

[00:19:48] **Speaker 1** Experience.

[00:19:48] **Speaker 2** Like I had a chance to tour a facility in central Wisconsin. They again, these so-called fake centers are presenting themselves as legitimate. So going through their doors. It's friendly. It looks like it could be a health care clinic. But basically, in sitting down with staff, it became very evident that these are not licensed health care professionals working inside these clinics. And there are a lot of evidence of manipulation. One of the first things you see when you go into some of these clinics are pictures or actual models of what they consider to be fetuses and gestational age parts of a pregnancy. Right away, they are manipulating an individual's emotion by really focusing on the unborn child versus the individual, the woman or the pregnant person in front of them. And so that was really obvious right away when I walked into one of these centers. There is your ultrasound machine, there is some models there, some propaganda. And then when you start talking to them, it became very clear that they're not interested in helping that individual be on that pregnancy. I had asked like, you know, are you connecting people to contraceptive access so that after this pregnancy they can plan space and prevent another unintended pregnancy? And they said, no, we don't believe in birth control, and we were not going to support that. And then what really concerns me? Well, there's a lot of things that concern me about these fake centers. But the center I had gone into has, like this baby boutique. And again, you're preying upon individuals who are scared, who may not have the resources and are not necessarily, again, ready to be going through with a pregnancy and having a child. And so there is this this bribery that happens at these centers where in exchange for coming and giving a talk to some of our funders or a fund at a fundraiser, or if you take this Bible study class, we're going to give you baby books and we're going to help you use that to buy diapers and to buy formula and to, you know, maybe get some stuff for prenatal care, like vitamins. Again, where is the long term commitment to these individuals that they're conning when they entice them into these doors and refuse to provide them evidence based health care and information? It's it's really disturbing because, again, these these centers are everywhere. And I would guess that 90% of people in the state and in this country have no idea that they're not legitimate health care centers.

[00:22:50] **Speaker 1** How should these pregnancy resource centers be operated? Instead, Should there be regulation?

[00:22:56] **Speaker 2** So if they're not licensed medical centers in health care, you know, you can't license it the same way you would any other legitimate health care center. But in terms of consumer protection, you know, there's been a real challenge trying to hold these fake centers accountable because of the First Amendment. And so I can appreciate anybody existing in this world. Do you have the right to to approach a business or to speak again, your version of your truth to the First Amendment? But what about the patient rights? What about consumer rights? There should be transparency and there should be regulations that make sure these places that are positioning themselves so well online and in person that people know these are not legitimate health care centers. We need to figure out a way to either educate the public or to regulate these centers in a way that makes sure that people aren't getting duped, that people aren't getting manipulated because they're successfully manipulating and lying to people for four generations still, and now they're going mobile anyways. Let me start that over. What did you ask again?

[00:24:10] **Speaker 1** How should these.

[00:24:11] **Speaker 2** Oh, how should they be regulated? We can't regulate them the same way that we do legitimate health care centers because they're not they're not legitimate health care centers. But in terms of consumer protections, consumers walking into those centers deserve to know what they're actually going to get and what they're not going to get. And so, one, we should figure out a way to make sure there's consumer protections. And two, not a single taxpayer funded dollar should go to these centers who, again, are manipulating and lying to women.

[00:24:43] **Speaker 1** A couple of the websites that I've gone to on these for these centers have said that they offer abortion reversal. What is that?

[00:24:51] **Speaker 2** That is not a thing. In some states now, they're actually looking at cracking down on these centers, offering these abortion reversals, these so called abortion reversals, which are not a thing. A lot of people have turned to medication, abortion, and there are these fake centers who are putting together cocktails of hormones and giving them to individuals walking through their doors, telling them that they can reverse an abortion, which is not a thing. It is that is that is not a medical procedure or care or protocol. And the American Medical Association and Obstetricians and Gynecologists and other health care experts will be the first to tell you you cannot reverse a medicaid abortion. Medicaid. Not Medicaid. Medication. Abortion. Sorry. You want me to do that again?

[00:25:41] **Speaker 1** Yeah. Let me just start all the way over.

[00:25:44] **Speaker 2** Sorry.

[00:25:44] **Speaker 1** Some of these centers are offering what, on their website, something called an abortion reversal. What is that?

[00:25:51] **Speaker 2** So a lot of people have turned to medication, abortion, which is safe and legal in some states. And these so-called fake centers, these crisis pregnancy centers, are telling people that they can reverse a medication abortion, which they can't. And so, again, a non licensed entity, non-medical, non accredited health care, fake health care center is advertising this chance to reverse a medication abortion, which you cannot do. And they're putting together cocktails of hormones again as an unlicensed facility and duping individuals into believing that they can reverse a medication abortion. If I have to talk to a health care professional specifically about that.

[00:26:35] **Speaker 1** But yeah, yeah, I'm curious.

[00:26:38] **Speaker 2** I saw that in Colorado. They're trying to regulate that because that's a problem in Colorado. I haven't seen it here in. What? Have you seen it here? Yeah. Great.

[00:26:50] **Speaker 1** Mortality in pregnancy. Pregnancy can be very complicated. Serious thing for a woman and her body. Tell me, how does that fold into how these centers operate?

[00:27:03] **Speaker 2** Pregnancy is complicated. Pregnancy is more dangerous than abortion. I've gone through two pregnancies myself. High risk pregnancy with factor five blood clotting disorder. I the minute I thought I was pregnant, I went to get a confirmation of the pregnancy test because I had to take injections every single day, nine months of the pregnancy and postpartum for three months to make sure that I didn't get a blood clot and I didn't miscarry or I didn't have a stroke and die myself. We cannot take for granted how again complicated and dangerous pregnancies can be. And we just saw from the American Medical Association, their journal JAMA just put out a report talking about how US maternal mortality has doubled between 1999 and 2019. In Wisconsin alone, we have black women dying five times the rate of white women while pregnant or within their first year postpartum. We have a crisis going on in the country where we have women dying from pregnancies and specifically women of color are dying from their pregnancies. So at a time when we're recognizing this crisis that we have in the United States, one of the most developed nations in the world, that we have a maternal mortality and morbidity rate. And what we do in this country is scary. And we haven't even begun to look at the data. During the pandemic, the report that just came out goes up to 2019. So we know I mean, if anything, the pandemic showed us really starkly the disparities that exist in so many areas, especially around bipoc communities, communities of color. So knowing what we know about how dangerous pregnancy can be, we need to be doing everything we can to connect a pregnant person with evidence based health care, information and services as soon as possible. And these fake centers are luring people in and delaying what these individuals need in terms of timely evidence based health care and information. So we we if we're going to take this issue seriously, we're going to embrace them both at a state legislative level. We have got to actually recognize this crisis that we have in Wisconsin, these persistent disparities that have plagued communities of color over for over three decades in our state.

[00:29:46] **Speaker 1** I think we hit everything that I needed to ask about. I forget that now.

[00:29:51] **Speaker 2** I'm trying to kind of know.

[00:29:53] **Speaker 1** Is there anything that I didn't ask about that you think is important? Um.

[00:30:01] **Speaker 2** I think I gave you, but I don't know if I give them to you in good soundbites.

[00:30:05] **Speaker 1** Um, we've done this before, you know, We'll talk for 20 minutes and use two sentences.

[00:30:10] **Speaker 2** So I know. And then I kind of, like, put together my right soundbite. I don't think so.

[00:30:17] **Speaker 1** Covered a lot of ground.

[00:30:18] **Speaker 2** We did. Um, I just hope I did it in a succinct way for you to grab a soundbite.

[00:30:24] **Speaker 1** That was great.

[00:30:24] **Speaker 2** Okay, then we're good.

[00:30:27] **Speaker 1** We should do a room tone. We should do room tone. We get to do this other awkward thing now where we sit here quietly.

[00:30:32] **Speaker 2** Pretty dark, too. In here. Okay.

[00:30:34] **Speaker 1** And script tone. Starting now.