

Spatial Analyses of Crisis Pregnancy Centers and Abortion Facilities in the United States, 2021: Pre-Dobbs Cross-Sectional Study

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Spatial Analyses of Crisis Pregnancy Centers and Abortion Facilities in the United States, 2021: Pre-Dobbs Cross-Sectional Study

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Abstract

Background: Crisis pregnancy centers (CPCs) are religious non-profit organizations that have a primary mission of diverting people from having abortions. For decades, one tactic used by CPCs has been to locate near abortion facilities. Despite medical groups' warnings that CPCs do not adhere to medical and ethical standards and pose risks to individual and public health, government support for CPCs has significantly increased over the past decade.

Objective: This study aimed to map CPCs, abortion facilities, and geographic areas in the United States (US) categorized into four zones defined by their proximity to CPCs and abortion facilities in 2021. We also sought to describe the number and percentage of reproductive-aged women living in each zone and the proximity of CPCs to abortion facilities.

Methods: Using 2021 data from CPC Map and the Advancing New Standards in Reproductive Health (ANSIRH) Abortion Facility Database, we determined the ratio of CPCs to abortion facilities. Using these sources and Census data, we categorized and mapped US block groups into four distinct zones based on the locations of block group centroids within 15-mile radii of CPCs and abortion facilities: 1) no presence, 2) CPC only, 3) abortion facility only, and 4) dual presence. We used summary statistics to calculate the number and percentage of block groups and reproductive-aged (15-49 years) women living in each zone. We also calculated distances and drive times from abortion facilities to the nearest CPC. All analyses were conducted nationally and by region, division, and state. We used chi-square statistics to test for differences by region and division in the number of block groups and women classified to each zone.

Results: Nationally, the ratio of CPCs to abortion facilities was 3.4, and 55% of block groups were categorized in the "dual presence" zone, 27% as "CPC only," and 0.8% in the "abortion facility only" zone. Most (60%) reproductive-aged women lived in a "dual presence" zone, 26% in a "CPC only", and 0.8% lived in an "abortion facility only" zone. We detected statistically significant variations ($p < 0.001$) in the number of block groups and women classified as living in each zone by region and division. Nationally, the median distance from abortion facilities to the nearest CPC was 2 miles, and the median drive time was 5.5 minutes. Minimum drive times were <1 minute in all but 11 states.

Conclusions: The findings suggest that CPCs' tactic of locating near abortion facilities was largely realized before the 2022 US Supreme Court decision that overturned the federal right to abortion. Research on CPCs' locations and tactics should continue given the dynamic abortion policy landscape and risks posed by CPCs. Tailored programming to raise awareness about CPCs and help people identify and access safe sources of healthcare may mitigate harm.

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Original Paper

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Abstract

Background: Crisis pregnancy centers (CPCs) are religious non-profit organizations with a primary mission of diverting people from having abortions. One CPC tactic has been to locate near abortion facilities. Despite medical groups' warnings that CPCs do not adhere to medical and ethical standards and pose risks, government support for CPCs has significantly increased.

Objective: We aimed to map CPCs, abortion facilities, and geographic areas in the United States (US) into four zones based on their proximity to CPCs and abortion facilities. We also sought to describe the number and percentage of reproductive-aged women living in each zone and the proximity of CPCs to abortion facilities.

Methods: Using 2021 data from CPC Map and the Advancing New Standards in Reproductive Health (ANSIRH) Abortion Facility Database, we determined the ratio of CPCs to abortion facilities. Along with Census data, we categorized and mapped US block groups into four distinct zones based on locations of block group centroids within 15-mile radii of CPCs and abortion facilities: 1) no presence, 2) CPC only, 3) abortion facility only, and 4) dual presence. We calculated the number and percentage of block groups and reproductive-aged (15-49 years) women living in each zone. We also calculated driving distances and drive times from abortion facilities to the nearest CPC and mapped abortion facilities in close proximity to CPCs. All analyses were conducted nationally and by region, division, and state.

Results: Nationally, the ratio of CPCs to abortion facilities was 3.4, and 54.9% of block groups were categorized in the "dual presence" zone, 26.6% as "CPC only," and 0.8% in the "abortion facility only" zone. Most (59.7%) reproductive-aged women lived in a "dual presence" zone, 26.1% in a "CPC only," and 0.8% lived in an "abortion facility only" zone. There were variations in the number of block groups and women classified as living in each zone by region, division, and state. Nationally, the median distance from abortion facilities to the nearest CPC was 2 miles, and the median drive time was 5.5 minutes. Minimum drive times were <1 minute in all but 11 states. The percentages of abortion facilities with a CPC within 0.25 and 0.25 miles, one mile, and three miles were 14.2%, 22.6%, 36.1%, and 66.3%, respectively.

Conclusions: The findings suggest that CPCs' tactic of locating near abortion facilities was largely realized before the 2022 US Supreme Court decision that overturned the federal right to abortion. Research on CPCs' locations and tactics should continue given the dynamic abortion policy landscape and risks posed by CPCs. Tailored programming to raise awareness about CPCs and help people identify and access safe sources of healthcare may mitigate harm. Increased regulation of CPCs and government divestment may also mitigate CPC harms.

Keywords: crisis pregnancy center; abortion, induced; reproductive health; policy; access to information; internet; directory; geographic information system; spatial analyses

Introduction

Crisis pregnancy centers (CPCs) are grassroots organizations within the anti-abortion movement that hold themselves out as providing “alternatives to abortion” [1-3]. The centers are religious non-profit organizations that frequently mimic medical clinics and even abortion facilities to reach their anti-abortion, anti-contraception, anti-comprehensive sex education, and evangelical goals [4-6]. CPCs particularly target young people, people of color, and people living in low-income households [5, 6]. These communities disproportionately experience barriers to healthcare, are disproportionately burdened by unintended pregnancy and other adverse sexual and reproductive health outcomes, and experience among the highest abortion rates [7-9]. Although, increasingly, CPCs provide limited medical services, they are not medical centers and are not regulated as such [5, 6, 10]. They frequently provide inaccurate health information in support of their goals and do not adhere to national medical and ethical practice standards [5, 6, 10]. Major public health and medicine organizations warn that CPCs pose risks to individual, family, and public health [5].

CPCs risk harm by prioritizing their own goals over client needs, failing to adhere to standard medical and ethical practices, failing to promote informed consent, using deceptive advertising, and enacting stigma [5, 6, 11]. Evidence also shows that CPCs delay abortion care, which risks individual health [12]. However, government funding and support for CPCs increased substantially in the decade before and in the years since the *Dobbs v Jackson Women's Health Organization* decision, which overturned *Roe v Wade* and the federal right to abortion in the United States (US) [13, 14].

Over the decades and across the US, CPCs and their affiliate organizations have made clear their goals to “compete” with abortion facilities [1, 15]. Opening and locating near abortion facilities to attract people considering and seeking abortion has been a key strategy encouraged by the umbrella organizations with which CPCs affiliate, such as Heartbeat International (formally called “Alternatives to Abortion International”), at least since the 1990s [1]. In the early 1990s, abortion facilities were primarily located in large cities, and CPCs mainly operated in mid-size cities, towns, and rural areas [1]. Abortion facilities continue to be concentrated in urban areas in the US [16]. Although there have been many anecdotal reports of CPCs locating near abortion facilities to engage with and unwittingly attract people seeking abortion care, to date, a dearth of studies has directly examined the locations of CPCs around abortion facilities.

CPCs operated in every state pre-*Dobbs* [4]. Many of the states that have banned or severely restricted abortion since the *Dobbs* decision have continued to fund or increased funding for CPCs (e.g., Alabama, Florida, Indiana, Iowa, Louisiana, Mississippi, Tennessee, West Virginia) [14, 17-26], whereas other states where abortion remains legal or that have moved to protect abortion access have sought to regulate CPCs, have issued consumer warning alerts, or de-funded CPCs (e.g., California, Colorado, Illinois, Massachusetts, New Jersey, Pennsylvania) [27-38].

Studies show that closer proximity to abortion facilities is associated with increased abortion rates [39]. Similarly, proximity to CPCs is associated with an increased likelihood of visiting CPCs for services [12]. Understanding CPC locations and to what extent, how close, and where CPCs were located to abortion facilities pre-*Dobbs* may serve as a useful baseline for evaluating CPCs' impact and identifying CPCs' strategies and tactics post-*Dobbs* and may provide a more comprehensive understanding of the extent to which CPCs integrated within the geographic landscape of reproductive health services. Better understanding about where CPCs locate relative to abortion facilities may also identify areas where tailored programming is needed to increase awareness about CPCs, including their objectives and tactics, among reproductive-aged people, particularly communities that CPCs target. Examining relative locations of CPCs and abortion facilities may also

be useful for investigating and explaining sexual and reproductive health outcomes.

The objective of this study was to describe the location of CPCs in the US relative to abortion facilities in 2021, the year prior to the *Dobbs* decision. Specifically, we mapped four distinct geographic zones based on their location within 15-mile radii of CPCs and abortion facilities, where: 1) neither CPCs and abortion facilities operated, 2) only CPCs operated, 3) only abortion facilities operated, and 4) both CPCs and abortion facilities operated. We also aimed to describe the number and proportion of women of reproductive age who resided in each zone and to examine distances and drive times from abortion facilities to the nearest CPC and the number and percentage of abortion facilities for which the nearest CPC was located within 0.25, 0.5, one, and three driving miles.

Methods

Data Sources

Data about the locations of CPCs in 2021 were obtained from CPC Map [40], an online geocoded directory of all of the CPCs operating in the US [4]. CPC Map identifies the brick-and-mortar locations of CPCs that provide free pregnancy testing. It excludes mobile CPC vans, adoption agencies, maternity homes, thrift stores, and offices that are affiliated with CPCs but do not provide free pregnancy testing [4]. CPC Map was launched in 2018 and a major update was released in August 2021, just 10 months before the *Dobbs* decision. To create the 2021 dataset, we reviewed all of the websites for CPCs included in the 2018 dataset to confirm address and contact information, identify new centers, identify centers that were no longer operating and confirm services offered. We also used systematic internet searches to identify potential new centers and assessed eligibility. We called centers that did not have accessible websites and those with incomplete online information. In 2021, 2,546 CPCs were included in the CPC Map database.

Data about the locations of abortion facilities in 2021 were obtained from Advancing New Standards in Reproductive Health's (ANSIRH's) Abortion Facility Database [41]. The ANSIRH database provides location information for all abortion facilities in the US that publicly advertise abortion services online and includes facilities that provided abortion care at any time during the year [41]. The database was developed using systematic internet searches and calls to facilities with incomplete or unclear information [42]. For the current analysis, we included brick-and-mortar facilities that were open and active. We excluded abortion facilities that exclusively offered telehealth services and a single facility without address information. A total of 757 abortion facilities were included in the current analysis.

Census block groups were established based on 2021 cartographic boundaries published by the US Census Bureau [43]. Data about the number of women of reproductive age were obtained from 2020 US Census Demographic and Housing Characteristics [44]. We selected block group as the unit of analysis because US census data are available by both age and sex and practicalities of producing national estimates.

Ethical Considerations

Both CPC Map and ANSIRH Abortion Facility database were developed using publicly available data. The authors developed and maintain CPC Map and received approval to access the abortion data. All CPCs and abortion facilities are de-identified.

Statistical Analysis

First, we calculated the ratio of abortion facilities nationally and by region, division, and state and mapped the geolocations of CPCs and abortion facilities [45]. Next, using ArcGIS Online (Esri, Inc.), we generated a 15-mile driving distance buffer zone for each CPC and abortion facility using the

Generate Travel Areas tool with default settings for traffic and time of day. Then, we identified the geometric center of each census block group using the Find Centroids tool in and assigned entire block groups to distinct zones based on block group centroids' locations relative to each buffer zone.

We categorized block groups into one of four zones based on driving distances from CPCs and abortion facilities to block group centroids. Block groups outside a 15-mile driving distance radius of a CPC or abortion facility were categorized as being in a "no presence" zone. Block groups within a 15-mile radius of an abortion facility only were categorized as being in an "abortion facility only" zone. Block groups within a 15-mile radius of a CPC only were categorized as being in a "CPC only" zone. Block groups that were within a 15-mile radius of a CPC and abortion facility were categorized as being in a "dual presence" zone.

We defined zones using a 15-mile driving radius based on prior research. A 2017 study that used county-level analyses reported that the median distance to the nearest abortion facility for reproductive-aged women in the US was almost 11 miles in 2014 [16]. County-level analyses have since been shown to result in relatively large underestimates of abortion access [46]. Another published study that used data from the 2014 Abortion Patient Survey reported that abortion patients traveled a median of 15.7 miles to an abortion facility [47]. We opted for larger (15 miles) rather than smaller (11 miles) zones given the large difference in the number of CPCs compared to abortion facilities. We expected a smaller zone to yield more extreme results solely based on the relative number of CPCs and abortion facilities.

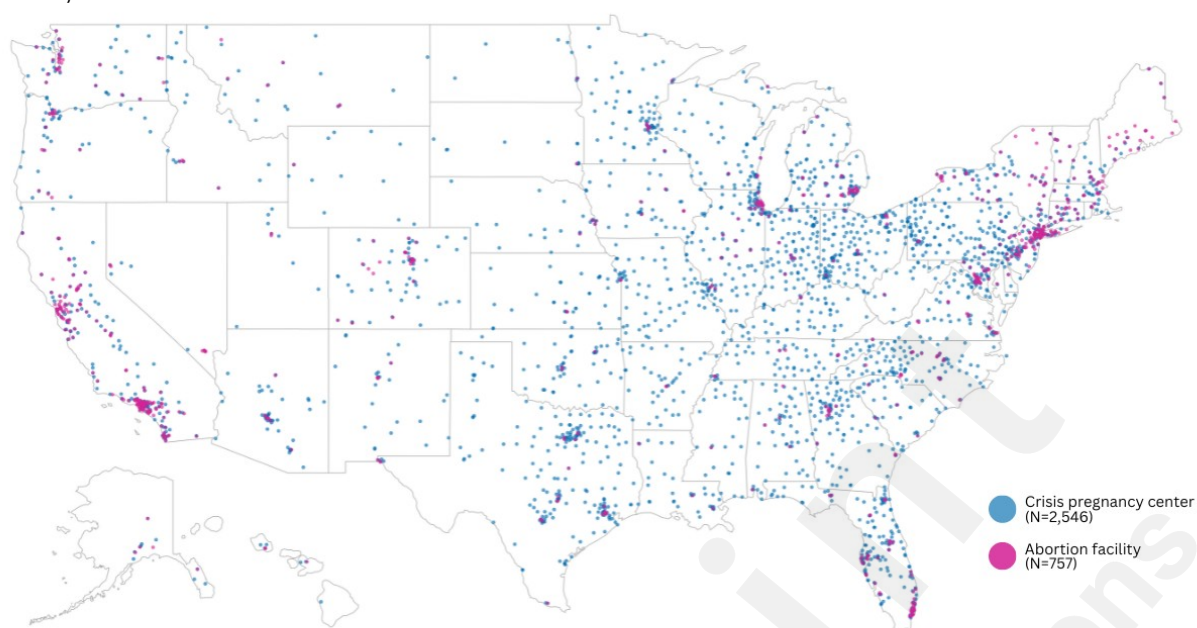
We used summary statistics to examine the number and percentage of women of reproductive age (15-49 years) living in each zone and the number and percentage of abortion facilities for which the nearest CPC was located within 0.25, 0.5, 1, and 3 driving miles. Spatial analyses were conducted with ArcGIS Online (Esri Inc.). Other descriptive statistics were prepared with R Statistical Software (v4.3.1; R Core Team 2023). All analyses were conducted nationally and by region, division, and state.

Results

Ratio of CPCs to Abortion Facilities

Multiple CPCs and at least one abortion facility were operating in every state in 2021 (Figure 1). Nationally, the ratio of CPCs to abortion facilities in 2021 was 3.4 (Table 1). By region, the ratio was lowest in the West and highest in the Midwest. By division, the ratio ranged from 1.2 in two divisions to >10.0 in three. In only three states and the District of Columbia (DC) was the ratio of CPCs to abortion facilities <1. The ratio was 1.0 in a single state and >15.0 in six.

Figure 1. Crisis pregnancy centers (CPCs) and brick-and-mortar abortion facilities in the United States, 2021.



Sources: Crisis Pregnancy Center Map (CPC Map); Advancing New Standards in Reproductive Health (ANSIRH) Abortion Facility Database

Table 1. Number of crisis pregnancy centers (CPCs) and ratio of CPCs to abortion facilities, in the United States and by region, division, and state, 2021.

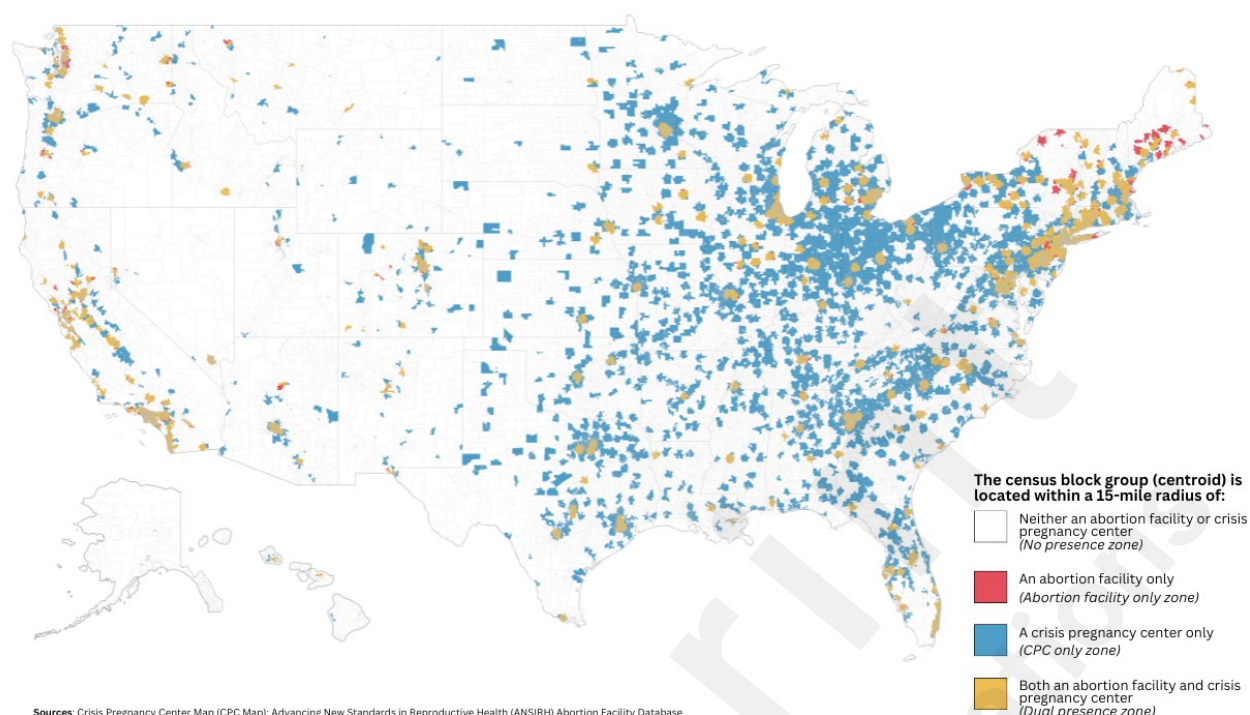
	Number of CPCs	Ratio of CPCs to Abortion Facilities
United States	2,546	3.4
Northeast	375	1.8
New England	84	1.2
Connecticut	20	1.3
Maine	11	0.6
Massachusetts	29	1.6
New Hampshire	14	2.3
Rhode Island	3	1.5
Vermont	7	1.2
Middle Atlantic	291	2.0
New Jersey	39	1.0
New York	92	1.1
Pennsylvania	160	10.0
Midwest	745	7.6
East North Central	480	6.4
Illinois	97	3.6
Indiana	96	13.7
Michigan	105	3.8
Ohio	124	13.8
Wisconsin	58	14.5
West North Central	265	11.5
Iowa	43	7.2
Kansas	38	9.5
Minnesota	73	10.4
Missouri	73	73.0
Nebraska	20	6.7
North Dakota	7	7.0
South Dakota	11	11.0
South	994	5.7

South Atlantic	481	3.7
Delaware	5	2.5
District of Columbia	2	0.5
Florida	151	2.7
Georgia	88	6.3
Maryland	40	2.0
North Carolina	89	5.6
South Carolina	35	11.7
Virginia	54	3.6
West Virginia	17	17.0
East South Central	196	13.1
Alabama	52	10.4
Kentucky	55	27.5
Mississippi	29	29.0
Tennessee	60	8.6
West South Central	317	10.6
Arkansas	40	20.0
Louisiana	32	10.7
Oklahoma	47	15.7
Texas	198	9.0
West	432	1.6
Mountain	185	3.1
Arizona	47	5.9
Colorado	51	2.1
Idaho	19	4.8
Montana	17	2.8
Nevada	7	0.8
New Mexico	24	4.8
Utah	8	4.0
Wyoming	12	12.0
Pacific	247	1.2
Alaska	10	2.0
California	148	0.9
Hawaii	6	2.0
Oregon	38	2.9
Washington	45	1.6

Block Groups By Zone

We mapped block groups by zone (Figure 2) and determined the number and percentage of block groups categorized into each zone nationally and by region, division, and state (Table 2). Over half of block groups in the US were within 15 miles of both a CPC and an abortion facility and categorized in the “dual presence” zone. Over one-quarter were in the “CPC only” zone. Less than one-fifth were categorized in the “no presence” zone. Less than 1% of block groups nationally were categorized in the “abortion facility only” zone.

Figure 2. United States Census block groups within crisis pregnancy center (CPC) and abortion facility presence zones, 2021.



By region, nearly three-fourths of block groups in the Northeast and West were categorized in the “dual presence” zone, whereas less than half in the Midwest and South were. Over one-third of block groups in the Midwest and South were categorized in the “CPC only” zone as compared to 15.8% in the Northeast and 11.9% in the West. The South had the highest and the Northeast the lowest percentage of block groups categorized into the “no presence” zone. The Northeast and West had >1.0% of block groups categorized in the “abortion facility only” zone, whereas the percentage was 0.1% in both the South and Midwest.

By division, the percentage of block groups categorized in the “dual presence” zone ranged from 27.2% to 78.9%. The percentage was <50% in only three divisions. Block groups categorized as “CPC only” ranged from 7.5% to over one-third in four divisions. Block groups categorized in the “no presence” zone ranged from 7.9% to nearly one-third in two divisions. The percentage categorized as “abortion facility only” was <1% in most divisions.

In only two states was the percentage of block groups in the “dual presence” zone <10%; the percentage was >75% in six states and DC. The percentage categorized as “CPC only” ranged from 5% or less in two states and DC to >50% in four states. The percentage assigned to the “no presence” zone ranged from <10% in DC and seven states to >50% in four. The percentage categorized in the “abortion facility only” zone was <1% in 42 states and DC.

Table 2. Number and percentage of block groups in the United States categorized by their location within a 15-mile radius of a crisis pregnancy center (CPC) and abortion facility, 2021.

	Block Groups Outside Of A 15-Mile Radius Of Both A CPC And An Abortion Facility (No Presence Zone) # (%)	Block Groups Within A 15-Mile Radius Of An Abortion Facility Only (Abortion Facility Only Zone) # (%)	Block Groups Within A 15-Mile Radius Of A CPC Only (CPC Only Zone) # (%)	Block Groups Within a 15-Mile Radius Of Both A CPC And Abortion Facility (Dual Presence Zone) # (%)
United States	42,447 (17.7)	1,926 (0.8)	63,679 (26.6)	131,410 (54.9)
Northeast	4,423 (10.0)	670 (1.5)	6,985 (15.8)	32,037 (72.6)
New England	1,844 (16.3)	293 (2.6)	1,660 (14.6)	7,544 (66.5)
Connecticut	172 (6.3)	21 (0.8)	111 (4.1)	2,408 (88.8)
Maine	436 (37.0)	154 (13.1)	120 (10.2)	468 (39.7)
Massachusetts	564 (11.0)	62 (1.2)	1,109 (21.7)	3,377 (66.1)
New Hampshire	244 (24.5)	49 (4.9)	199 (20.0)	504 (50.6)
Rhode Island	137 (17.3)	0 (0.0)	69 (8.7)	585 (74.0)
Vermont	291 (52.7)	7 (1.3)	52 (9.4)	202 (36.6)
Middle Atlantic	2,579 (7.9)	377 (1.2)	5,325 (16.2)	24,493 (74.7)
New Jersey	270 (4.1)	62 (0.9)	386 (5.9)	5,875 (89.1)
New York	1,429 (8.9)	314 (2.0)	1,077 (6.7)	13,189 (82.4)
Pennsylvania	880 (8.7)	1 (0.0)	3,862 (38.0)	5,429 (53.4)
Midwest	10,453 (18.8)	51 (0.1)	19,911 (35.8)	25,129 (45.2)
East North Central	4,992 (13.3)	41 (0.1)	13,735 (36.5)	18,904 (50.2)
Illinois	1,192 (12.0)	8 (0.1)	2,299 (23.2)	6,397 (64.6)
Indiana	620 (11.7)	0 (0.0)	2,697 (51.0)	1,970 (37.3)
Michigan	1,202 (14.4)	22 (0.3)	2,216 (26.6)	4,904 (58.8)
Ohio	737 (7.8)	11 (0.1)	4,483 (47.4)	4,236 (44.7)
Wisconsin	1,241 (26.5)	0 (0.0)	2,040 (43.6)	1,397 (29.9)
West North Central	5,461 (30.6)	10 (0.1)	6,176 (34.6)	6,225 (34.8)
Iowa	1,130 (41.8)	7 (0.3)	909 (33.6)	657 (24.3)
Kansas	712 (28.9)	0 (0.0)	853 (34.7)	896 (36.4)
Minnesota	1,113 (23.7)	2 (0.0)	1,288 (27.4)	2,300 (48.9)
Missouri	1,202 (23.9)	1 (0.0)	2,579 (51.3)	1,249 (24.8)
Nebraska	521 (31.6)	0 (0.0)	279 (16.9)	848 (51.5)
North Dakota	380 (60.1)	0 (0.0)	129 (20.4)	123 (19.5)
South Dakota	403 (58.1)	0 (0.0)	139 (20.0)	152 (21.9)
South	19,352 (22.2)	112 (0.1)	30,551 (35.0)	37,302 (42.7)
South Atlantic	7,971 (18.0)	79 (0.2)	13,768 (31.1)	22,409 (50.7)
Delaware	126 (17.9)	0 (0.0)	142 (20.2)	435 (61.9)
District of Columbia	0 (0.0)	0 (0.0)	0 (0.0)	571 (100.0)
Florida	1,367 (10.2)	26 (0.2)	3,466 (26.0)	8,491 (63.6)
Georgia	1,303 (17.5)	3 (0.0)	2,912 (39.1)	3,223 (43.3)
Maryland	315 (7.7)	4 (0.1)	607 (14.9)	3,143 (77.2)
North Carolina	1,713 (24.2)	26 (0.4)	2,750 (38.8)	2,603 (36.7)
South Carolina	1,032 (30.3)	4 (0.1)	1,465 (43.0)	906 (26.6)
Virginia	1,275 (21.4)	16 (0.3)	1,767 (29.7)	2,897 (48.6)

West Virginia	840 (51.3)	0 (0.0)	659 (40.2)	140 (8.5)
East South Central	4,566 (31.5)	31 (0.2)	5,971 (41.2)	3,942 (27.2)
Alabama	1,149 (29.3)	7 (0.2)	1,397 (35.6)	1,371 (34.9)
Kentucky	1,161 (32.4)	0 (0.0)	1,623 (45.3)	797 (22.3)
Mississippi	1,157 (47.4)	0 (0.0)	985 (40.3)	301 (12.3)
Tennessee	1,099 (24.1)	24 (0.5)	1,966 (43.1)	1,473 (32.3)
West South Central	6,815 (23.8)	2 (0.0)	10,812 (37.8)	10,951 (38.3)
Arkansas	864 (37.7)	0 (0.0)	1,157 (50.4)	273 (11.9)
Louisiana	1,407 (32.8)	2 (0.0)	1,518 (35.4)	1,358 (31.7)
Oklahoma	1,056 (31.3)	0 (0.0)	944 (28.0)	1,374 (40.7)
Texas	3,488 (18.7)	0 (0.0)	7,193 (38.6)	7,946 (42.7)
West Mountain	8,219 (15.7)	1,093 (2.1)	6,323 (11.9)	36,942 (70.4)
Arizona	4,286 (25.1)	210 (1.2)	3,566 (20.9)	9,007 (52.8)
Colorado	979 (20.5)	1 (0.0)	1,039 (21.8)	2,754 (57.7)
Idaho	585 (14.4)	27 (0.7)	644 (15.9)	2,802 (69.0)
Montana	477 (37.1)	1 (0.1)	336 (26.2)	470 (36.6)
Nevada	423 (47.0)	8 (0.9)	169 (18.8)	300 (33.3)
Utah	283 (14.4)	57 (2.9)	98 (5.0)	1,525 (77.7)
New Mexico	485 (30.0)	5 (0.3)	571 (35.4)	553 (34.3)
Wyoming	845 (41.8)	111 (5.5)	469 (23.2)	595 (29.5)
Pacific	209 (45.7)	0 (0.0)	240 (52.5)	8 (1.8)
Alaska	3,933 (11.1)	883 (2.5)	2,666 (7.5)	27,935 (78.9)
California	214 (42.5)	1 (0.2)	50 (9.9)	239 (47.4)
Hawaii	1,941 (7.6)	408 (1.6)	1,376 (5.4)	21,860 (85.4)
Oregon	310 (29.3)	6 (0.6)	197 (18.6)	545 (51.5)
Washington	581 (19.6)	28 (0.9)	623 (21.0)	1,731 (58.4)
	887 (16.7)	440 (8.3)	420 (7.9)	3,560 (67.1)

Reproductive-Aged Women Living In Each Zone

We calculated the number and proportion of reproductive-aged women categorized as living within each zone in 2021, nationally and by region, division, and state (Table 3). Nationally, most (59.7%) women aged 15-49 years lived in the “dual presence” zone, and over one-quarter lived in a “CPC only” zone. Less than one in seven lived in a “no presence zone” and only 0.8% lived in an “abortion facility only” area.

Over three-quarters of women lived in a “dual presence” zone in the Northeast and West regions, whereas less than half did in the Midwest and South. Over one-third of women in the Midwest and South lived in a “CPC only” zone; the percentage was <15.0% in Northeast and West. The percentage of women who lived in a “no presence” zone ranged from 7.2% in the Northeast to 16.7% in the South. The percentage of women who lived in an “abortion facility only” zone was 0.1% both in the Midwest and South, 1.3% in the Northeast, and 2.2% in the West.

The percentage of women living in a “dual presence” zone by division ranged from 29.4% to 82.9%. The majority of women lived in a “dual presence” zone in all but three divisions. The percentage of women who lived in a “CPC only” zone ranged from 6.6% to 44.5%. Less than 10.0% of women of reproductive age lived in a “no presence” zone in the three divisions and >20.0% did in the East South Central, Mountain, and West North Central divisions. The percentage of women who lived in an “abortion facility only” zone ranged from 0% to 2.1%.

By state, the percentage of reproductive-aged women who lived in a “dual presence” zone ranged from 2.0% to 100%. In 21 states and DC, more than half of women lived in a “dual presence” zone. The percentage who lived in a “CPC only” zone was <5% in four states and DC and >50% in four states. The percentage who lived in a “no presence” zone ranged from 0% to >45% in four states. The percentage who lived in an “abortion facility only” zone ranged from 0.0% in DC and 21 states

to 12.0%. The percentage was >1% in only eight states.

Table 3. Number and percentage of women aged 15-49 years in the United States residing within a 15-mile radius of a crisis pregnancy center (CPC) and abortion facility, 2021.

	Women Who Lived Outside Of A 15-Mile Radius Of Both A CPC And An Abortion Facility (No Presence Zone) # (%)	Women Who Lived Within A 15-Mile Radius Of An Abortion Facility Only (Abortion Facility Only Zone) # (%)	Women Who Lived Within A 15-Mile Radius Of A CPC Only (CPC Only Zone) # (%)	Women Who Lived Within a 15-Mile Radius Of Both A CPC And Abortion Facility (Dual Presence Zone) # (%)
United States	10,109,943 (13.4)	625,403 (0.8)	19,696,572 (26.1)	45,150,110 (59.7)
Northeast	947,254 (7.2)	171,165 (1.3)	1,864,296 (14.2)	10,101,787 (77.2)
New England	418,360 (12.3)	69,712 (2.1)	500,179 (14.7)	2,411,200 (70.9)
Connecticut	38,058 (4.8)	5,213 (0.7)	24,129 (3.0)	732,584 (91.6)
Maine	84,900 (30.7)	33,073 (12.0)	33,227 (12.0)	125,187 (45.3)
Massachusetts	136,601 (8.3)	17,087 (1.0)	356,943 (21.7)	1,136,257 (69.0)
New Hampshire	54,946 (18.9)	12,845 (4.4)	52,418 (18.1)	169,856 (58.6)
Rhode Island	42,411 (16.9)	0 (0.0)	21,861 (8.7)	186,074 (74.3)
Vermont	61,444 (45.3)	1,494 (1.1)	11,601 (8.5)	61,242 (45.1)
Middle Atlantic	528,894 (5.5)	101,453 (1.0)	1,364,117 (14.1)	7,690,587 (79.4)
New Jersey	73,272 (3.5)	18,762 (0.9)	94,911 (4.5)	1,920,326 (91.1)
New York	270,709 (5.7)	82,432 (1.7)	270,750 (5.7)	4,129,864 (86.9)
Pennsylvania	184,913 (6.5)	259 (0.0)	998,456 (35.4)	1,640,397 (58.1)
Midwest	2,149,730 (14.1)	15,622 (0.1)	5,474,481 (35.9)	7,618,288 (49.9)
East North Central	1,044,280 (9.9)	11,670 (0.1)	3,671,594 (34.9)	5,781,054 (55.0)
Illinois	227,612 (7.7)	1,455 (0.0)	616,053 (20.9)	2,103,928 (71.3)
Indiana	138,446 (9.1)	0 (0.0)	724,692 (47.8)	651,722 (43.0)
Michigan	233,766 (10.6)	6,182 (0.3)	561,663 (25.6)	1,395,184 (63.5)
Ohio	168,383 (6.5)	4,033 (0.2)	1,203,655 (46.6)	1,206,096 (46.7)
Wisconsin	276,073 (21.8)	0 (0.0)	565,531 (44.7)	424,124 (33.5)
West North Central	276,073 (21.8)	0 (0.0)	1,802,887 (38.0)	1,837,234 (38.7)
Iowa	219,739 (32.0)	2,786 (0.4)	246,640 (36.0)	216,656 (31.6)
Kansas	142,549 (22.1)	0 (0.0)	243,669 (37.7)	259,394 (40.2)
Minnesota	218,902 (17.3)	914 (0.1)	371,688 (29.4)	672,825 (53.2)
Missouri	243,814 (17.9)	252 (0.0)	783,798 (57.6)	332,663 (24.5)
Nebraska	103,262 (23.7)	0 (0.0)	72,719 (16.7)	259,122 (59.6)
North Dakota	87,715 (51.2)	0 (0.0)	39,423 (23.0)	44,340 (25.9)
South Dakota	89,469 (47.9)	0 (0.0)	44,950 (24.1)	42,234 (28.0)
South	4,823,254 (16.7)	39,766 (0.1)	10,386,971 (35.9)	13,709,252 (47.3)
South Atlantic	2,004,962 (13.4)	26,694 (0.2)	4,586,992 (30.7)	8,301,860 (55.6)
Delaware	22,371 (10.4)	0 (0.0)	48,440 (22.5)	144,011 (67.0)
District of Columbia	0 (0.0)	0 (0.0)	0 (0.0)	215,054 (100.0)
Florida	371,060 (8.1)	6,793 (0.1)	1,124,675 (24.5)	3,087,436 (67.3)
Georgia	343,125 (13.3)	1,254 (0.0)	1,021,499 (39.7)	1,209,071 (47.0)
Maryland	82,860 (5.8)	1,106 (0.1)	214,229 (14.9)	1,140,822 (79.3)
North Carolina	438,613 (18.4)	10,955 (0.5)	855,600 (35.8)	1,083,256 (45.4)
South Carolina	256,293 (22.7)	2,880 (0.3)	500,719 (44.4)	367,944 (32.6)
Virginia	315,680 (15.8)	3,706 (0.2)	657,469 (32.9)	1,022,109 (51.1)

West Virginia	174,960 (47.1)	0 (0.0)	164,361 (44.2)	32,167 (8.7)
East South Central	1,129,365 (25.8)	12,411 (0.3)	1,949,048 (44.5)	1,288,215 (29.4)
Alabama	274,439 (24.1)	3,413 (0.3)	438,581 (38.5)	422,444 (37.1)
Kentucky	260,112 (26.1)	0 (0.0)	503,657 (50.6)	231,357 (23.2)
Mississippi	273,673 (40.9)	0 (0.0)	296,536 (44.3)	99,264 (14.8)
Tennessee	321,141 (20.4)	8,998 (0.6)	710,274 (45.1)	535,150 (34.0)
West South Central	1,688,927 (17.5)	661 (0.0)	3,850,931 (39.9)	4,119,177 (42.6)
Arkansas	186,313 (27.9)	0 (0.0)	390,339 (58.4)	91,256 (13.7)
Louisiana	307,130 (28.8)	661 (0.1)	365,725 (34.3)	391,470 (36.8)
Oklahoma	230,365 (26.0)	0 (0.0)	266,693 (30.1)	388,664 (43.9)
Texas	965,119 (13.7)	0 (0.0)	2,828,174 (40.2)	3,247,787 (46.1)
West	2,189,705 (12.0)	398,850 (2.2)	1,970,824 (10.8)	13,720,783 (75.1)
Mountain	1,168,835 (20.6)	96,521 (1.7)	1,133,533 (20.0)	3,265,353 (57.6)
Arizona	252,530 (16.1)	84 (0.0)	324,918 (20.7)	991,101 (63.2)
Colorado	148,348 (10.9)	9,539 (0.7)	189,189 (13.9)	1,016,400 (74.5)
Idaho	120,393 (29.6)	203 (0.0)	117,425 (28.9)	168,308 (41.4)
Montana	82,674 (36.7)	2,156 (1.0)	51,220 (22.7)	89,403 (39.7)
Nevada	71,733 (10.1)	25,553 (3.6)	26,522 (3.7)	584,440 (82.5)
New Mexico	108,859 (23.7)	1,002 (0.2)	163,615 (35.6)	185,682 (40.4)
Utah	334,264 (41.2)	57,984 (7.2)	190,754 (23.5)	227,594 (28.1)
Wyoming	50,034 (40.9)	0 (0.0)	69,890 (57.1)	2,425 (2.0)
Pacific	1,020,870 (8.1)	302,329 (2.4)	837,291 (6.6)	10,455,430 (82.9)
Alaska	64,376 (39.1)	340 (0.2)	21,500 (13.1)	78,409 (47.6)
California	523,724 (5.6)	140,404 (1.5)	449,947 (4.8)	8,295,997 (88.2)
Hawaii	90,187 (29.1)	1,765 (0.6)	66,925 (21.6)	150,775 (48.7)
Oregon	119,257 (12.4)	7,410 (0.8)	184,859 (19.3)	646,589 (67.5)
Washington	223,326 (12.6)	152,410 (8.6)	114,060 (6.4)	1,283,660 (72.4)

Driving Distance and Drive Times From Abortion Facilities To The Nearest CPC

We calculated the minimum, mean, median, and maximum driving distances (Table 4) and drive times (Table 5) from abortion facilities to the nearest CPC, nationally and by region, division, and state. We also calculated the number and percentage of abortion facilities for which the nearest CPC was within 0.25, 0.5, 1, and 3 driving miles (Table 4) and mapped the locations of abortion facilities based on driving time to the nearest CPC (Figure 3). Nationally, the minimum driving distance was 0.001 miles (approximately 5 feet) and the maximum was 119.9 miles. The mean was 3.8 miles and median 2.1 miles. The nearest CPC was located within 0.25 miles of approximately one in seven abortion facilities, within 0.5 miles of about one-quarter, within one mile for over one-third, and within three miles for two-thirds of abortion facilities in the US. The minimum drive time was 0.004 minutes (<1 second) and the maximum 122.1 minutes, with a mean of 7.8 minutes and median of 5.5 minutes.

In each of the four regions, minimum driving distances were <0.02 miles and minimum drive times were <0.05 minutes or <3 seconds. Median driving distances ranged from 1.6 to 2.7 miles. Maximum driving distances ranged from 7.2 to 119.9 miles. The percentage of abortion facilities with a CPC located within 0.25 and three driving miles ranged from 9.6% and 55.1% in the West to 22.4% and 76.5% in the Midwest, respectively. Median drive times ranged from 3.9 to 6.8 minutes, and maximum drive times ranged from 17.2 to 122.1 minutes.

By division, minimum driving distances were <0.1 miles, and minimum drive times were <0.4 minutes or <24 seconds. Median driving distances were <1 mile in three divisions and <2.5 miles in all divisions except the Pacific. Maximum driving distances ranged from <10 miles in five divisions to >90 miles in two. The percentage of abortion facilities with a CPC located within 0.25 driving miles ranged from 7.4% to 34.8%. The percentage with a CPC within three miles ranged from 5.6% to 95.7%. Median drive times ranged from 2.1 to 7.3 minutes. Maximum drive times ranged from 9.9 to 121.5 minutes.

By state, minimum driving distances from abortion facilities to the nearest CPC were <0.01 mile or <52.8 feet in four states. Only DC and five states had minimum driving distances >0.5 miles. The greatest minimum driving distance was 2.4 miles. Median driving distances ranged from 0.07 miles to 10.8 miles. Median driving distances were <0.5 miles in eleven states and >3.0 miles in two. Maximum driving distances were <1.0 mile in 10 states and >13.0 miles in 11. Minimum drive times from abortion facilities to the nearest CPC ranged from 0.01 minutes or <1 second to 6.3 minutes. Minimum drive times were >1.0 minute in only 13 states and DC. Median drive times ranged from 0.3 minutes to 19.1 minutes. Median drive times were <2.0 minutes in 11 states. Median drive times were >9 minutes in only two states and DC. Maximum drive times ranged from 0.9 minutes to 122.1 minutes. Maximum drive times were <5.0 minutes in fourteen states, between 5.0 and <15.0 minutes in 21 states and DC, between 15 and 30 minutes in 10 states, and >30 minutes in five states.

The percentage of abortion facilities for which the nearest CPC was located within 0.25 miles ranged from 0% in 14 states to 100% in a single state. The percentage for which the nearest CPC was located within 0.5 miles ranged from 0% in five states and DC to 100% in four states. The percentage with a CPC within one mile ranged from 0% in one state and DC to 100% in nine states. All states and DC had at least one abortion facility with a CPC located within three miles, and the nearest CPC was located within 3 miles of 100% of abortion facilities in 20 states.

Table 4. Driving distance in miles from abortion facilities to the nearest crisis pregnancy center (CPC) in the United States, 2021.

	Driving Distance to Nearest CPC (Miles)				Driving Distance to Nearest CPC (n, %)			
	Minimum	Median	Mean	Maximum	<= 0.25 Miles	<= 0.50 Miles	<= 1 Mile	<= 3 Miles
United States	0.001	2.069	3.812	119.936	107 (14.1)	171 (22.6)	273 (36.1)	502 (66.3)
Northeast	0.001	1.660	5.243	90.758	24 (11.3)	42 (19.8)	82 (38.7)	149 (70.3)
New England	0.060	1.240	7.741	90.758	5 (7.4)	12 (17.6)	29 (42.6)	49 (72.1)
Connecticut	0.083	1.049	2.169	8.717	2 (12.5)	3 (18.8)	8 (50.0)	12 (75.0)
Maine	0.394	10.826	20.857	90.758	0 (0.0)	1 (5.0)	4 (20.0)	8 (40.0)
Massachusetts	0.060	1.309	2.709	13.499	1 (5.6)	3 (16.7)	8 (44.4)	16 (88.9)
New Hampshire	0.069	1.273	3.340	14.825	1 (16.7)	3 (50.0)	3 (50.0)	5 (83.3)
Rhode Island	0.925	1.061	1.061	1.197	0 (0.0)	0 (0.0)	1 (50.0)	2 (100.0)
Vermont	0.134	0.550	0.605	1.146	1 (16.7)	2 (33.3)	5 (83.3)	6 (100.0)
Middle Atlantic	0.001	1.782	4.064	59.742	19 (13.2)	30 (20.8)	53 (36.8)	100 (69.4)
New Jersey	0.002	2.227	3.458	13.373	2 (4.9)	8 (19.5)	11 (26.8)	24 (58.5)
New York	0.001	1.974	4.831	59.742	11 (12.6)	14 (16.1)	30 (34.5)	62 (71.3)
Pennsylvania	0.081	0.473	1.445	7.779	6 (37.5)	8 (50.0)	12 (75.0)	14 (87.5)
Midwest	0.015	1.582	1.952	7.239	22 (22.4)	36 (36.7)	45 (45.9)	75 (76.5)
East North Central	0.015	1.854	2.219	7.239	14 (18.7)	25 (33.3)	29 (38.7)	53 (70.7)
Illinois	0.076	1.854	2.205	5.901	1 (3.7)	6 (22.2)	9 (33.3)	20 (74.1)
Indiana	0.028	0.290	0.451	2.000	3 (42.9)	6 (85.7)	6 (85.7)	7 (100.0)
Michigan	0.015	2.470	2.804	7.239	6 (21.4)	8 (28.6)	8 (28.6)	17 (60.7)
Ohio	0.046	2.718	2.498	6.702	3 (33.3)	3 (33.3)	3 (33.3)	5 (55.6)
Wisconsin	0.052	0.522	0.681	1.626	1 (25.0)	2 (50.0)	3 (75.0)	4 (100.0)
West North Central	0.039	0.554	1.082	3.804	8 (34.8)	11 (47.8)	16 (69.6)	22 (95.7)
Iowa	0.041	0.853	1.072	2.688	1 (16.7)	2 (33.3)	4 (66.7)	6 (100.0)
Kansas	0.070	0.318	0.315	0.554	2 (50.0)	3 (75.0)	4 (100.0)	4 (100.0)
Minnesota	0.069	2.137	1.765	3.804	3 (42.9)	3 (42.9)	3 (42.9)	6 (85.7)
Missouri	0.471	0.471	0.471	0.471	0 (0.0)	1 (100.0)	1 (100.0)	1 (100.0)
Nebraska	0.039	0.425	0.459	0.912	2 (66.7)	2 (66.7)	3 (100.0)	3 (100.0)
North Dakota	0.610	0.610	0.610	0.610	0 (0.0)	0 (0.0)	1 (100.0)	1 (100.0)
South Dakota	2.387	2.387	2.387	2.387	0 (0.0)	0 (0.0)	0 (0.0)	1 (100.0)
South	0.004	1.697	2.102	9.286	35 (20.0)	51 (29.1)	72 (41.1)	128 (73.1)

South Atlantic	0.004	2.221	2.293	9.286	27 (20.8)	34 (26.2)	45 (34.6)	88 (67.7)
Delaware	0.042	0.869	0.869	1.697	1 (50.0)	1 (50.0)	1 (50.0)	2 (100.0)
District of Columbia	1.027	1.890	2.034	3.329	0 (0.0)	0 (0.0)	0 (0.0)	3 (75.0)
Florida	0.004	2.586	2.405	5.735	10 (18.2)	13 (23.6)	17 (30.9)	34 (61.8)
Georgia	0.035	1.090	1.938	7.411	6 (42.9)	6 (42.9)	7 (50.0)	11 (78.6)
Maryland	0.029	2.218	2.574	9.286	4 (20.0)	5 (25.0)	5 (25.0)	13 (65.0)
North Carolina	0.158	1.457	2.163	8.259	3 (18.8)	4 (25.0)	7 (43.8)	12 (75.0)
South Carolina	0.024	0.166	0.224	0.483	2 (66.7)	2 (66.7)	3 (100.0)	3 (100.0)
Virginia	0.222	2.723	2.779	5.794	1 (6.7)	2 (13.3)	4 (26.7)	9 (60.0)
West Virginia	0.351	0.351	0.351	0.351	0 (0.0)	1 (100.0)	1 (100.0)	1 (100.0)
East South Central	0.053	0.956	1.676	7.246	3 (20.0)	6 (40.0)	9 (60.0)	13 (86.7)
Alabama	0.092	0.966	1.839	5.199	1 (20.0)	2 (40.0)	3 (60.0)	4 (80.0)
Kentucky	0.272	0.438	0.438	0.603	0 (0.0)	1 (50.0)	2 (100.0)	2 (100.0)
Mississippi	0.070	0.070	0.070	0.070	1 (100.0)	1 (100.0)	1 (100.0)	1 (100.0)
Tennessee	0.053	1.507	2.143	7.246	1 (14.3)	2 (28.6)	3 (42.9)	6 (85.7)
West South Central	0.035	0.828	1.488	7.997	5 (16.7)	11 (36.7)	18 (60.0)	27 (90.0)
Arkansas	0.049	0.483	0.483	0.917	1 (50.0)	1 (50.0)	2 (100.0)	2 (100.0)
Louisiana	0.148	0.694	0.777	1.488	1 (33.3)	1 (33.3)	2 (66.7)	3 (100.0)
Oklahoma	0.466	0.582	1.242	2.680	0 (0.0)	1 (33.3)	2 (66.7)	3 (100.0)
Texas	0.035	0.899	1.710	7.997	3 (13.6)	8 (36.4)	12 (54.5)	19 (86.4)
West Mountain	0.009	2.745	4.467	119.936	26 (9.6)	42 (15.4)	74 (27.2)	150 (55.1)
Arizona	0.184	1.896	1.693	3.328	0 (0.0)	2 (25.0)	2 (25.0)	7 (87.5)
Colorado	0.085	2.744	6.633	40.578	3 (12.5)	4 (16.7)	5 (20.8)	14 (58.3)
Idaho	0.433	2.109	2.565	5.612	0 (0.0)	1 (25.0)	1 (25.0)	3 (75.0)
Montana	0.205	1.750	3.429	13.501	1 (16.7)	1 (16.7)	3 (50.0)	5 (83.3)
Nevada	0.097	1.951	2.645	6.670	1 (11.1)	1 (11.1)	1 (11.1)	6 (66.7)
New Mexico	0.137	2.979	2.296	3.957	1 (20.0)	1 (20.0)	2 (40.0)	3 (60.0)
Utah	0.858	2.927	2.927	4.996	0 (0.0)	0 (0.0)	1 (50.0)	1 (50.0)
Wyoming	0.339	0.339	0.339	0.339	0 (0.0)	1 (100.0)	1 (100.0)	1 (100.0)
Pacific	0.009	2.845	4.554	119.936	20 (9.4)	31 (14.6)	58 (27.2)	110 (51.6)
Alaska	0.194	2.520	26.786	119.936	1 (20.0)	2 (40.0)	2 (40.0)	3 (60.0)
California	0.027	2.987	3.946	50.663	13 (7.9)	20 (12.2)	42 (25.6)	83 (50.6)
Hawaii	0.833	1.953	1.817	2.666	0 (0.0)	0 (0.0)	1 (33.3)	3 (100.0)
Oregon	0.015	4.094	4.418	16.805	1 (7.7)	2 (15.4)	3 (23.1)	5 (38.5)
Washington	0.009	1.689	4.503	15.836	5 (17.9)	7 (25.0)	10 (35.7)	16 (57.1)

Figure 3. Locations of abortion facilities based on driving distance to the nearest crisis pregnancy center (CPC), United States 2021.

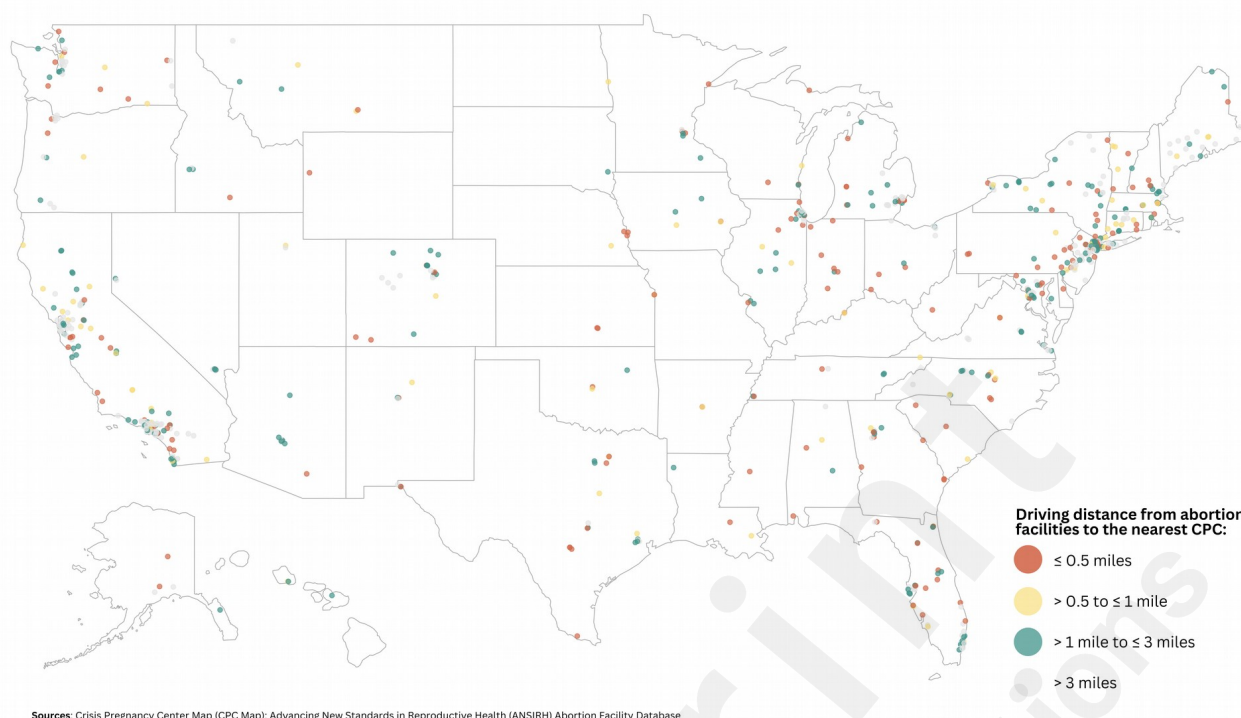


Table 5. Driving times in minutes from abortion facilities to the nearest crisis pregnancy center (CPC) in the United States, 2021.

	Drive-Time To The Nearest CPC (Minutes)			
	Minimum	Median	Mean	Maximum
United States	0.004	5.528	7.772	122.058
Northeast	0.004	5.776	10.113	117.400
New England	0.285	4.517	12.784	117.400
Connecticut	0.364	3.559	5.283	12.630
Maine	1.087	19.075	30.216	117.400
Massachusetts	0.285	4.402	6.818	27.511
New Hampshire	0.363	3.873	6.108	20.231
Rhode Island	3.798	4.207	4.207	4.616
Vermont	0.658	2.144	2.111	3.808
Middle Atlantic	0.004	6.242	8.852	78.524
New Jersey	0.010	7.031	7.997	20.127
New York	0.004	6.523	10.127	78.524
Pennsylvania	0.526	2.540	4.112	13.736
Midwest	0.049	3.859	4.762	17.508
East North Central	0.049	4.716	5.262	17.508
Illinois	0.557	4.977	6.027	17.508
Indiana	0.049	0.984	1.335	4.623
Michigan	0.086	5.794	5.829	15.880
Ohio	0.252	7.093	5.550	11.279
Wisconsin	0.165	1.749	2.348	5.730
West North Central	0.089	2.139	3.133	9.886
Iowa	0.277	2.417	3.051	6.930
Kansas	0.594	1.177	1.157	1.680
Minnesota	0.442	6.308	4.772	9.886
Missouri	2.400	2.400	2.400	2.400
Nebraska	0.089	2.139	1.695	2.857
North Dakota	1.960	1.960	1.960	1.960
South Dakota	6.276	6.276	6.276	6.276

South	0.037	4.607	5.062	17.155
South Atlantic	0.037	5.491	5.548	17.155
Delaware	0.152	3.814	3.814	7.475
District of Columbia	5.340	9.547	9.263	12.617
Florida	0.037	6.108	5.576	13.998
Georgia	0.212	2.507	4.533	14.283
Maryland	0.155	5.268	6.180	15.795
North Carolina	0.227	4.217	5.403	17.155
South Carolina	0.232	0.718	0.605	0.865
Virginia	0.889	7.023	6.192	11.198
West Virginia	1.615	1.615	1.615	1.615
East South Central	0.262	2.669	4.176	14.319
Alabama	0.406	4.123	4.556	10.554
Kentucky	1.586	1.935	1.935	2.284
Mississippi	0.320	0.320	0.320	0.320
Tennessee	0.262	4.366	5.096	14.319
West South Central	0.174	2.416	3.398	10.895
Arkansas	0.316	1.446	1.446	2.575
Louisiana	0.825	2.722	2.319	3.410
Oklahoma	1.264	1.633	3.191	6.676
Texas	0.174	2.416	3.751	10.895
West	0.035	6.816	8.775	122.058
Mountain	0.390	5.566	7.482	48.780
Arizona	1.145	4.261	3.935	7.051
Colorado	0.684	6.499	10.438	48.780
Idaho	1.628	4.917	6.266	13.601
Montana	0.390	4.984	6.074	17.317
Nevada	0.860	5.807	6.414	12.101
New Mexico	1.033	6.087	5.351	8.776
Utah	3.084	6.224	6.224	9.363
Wyoming	0.983	0.983	0.983	0.983
Pacific	0.035	7.291	9.133	122.058
Alaska	0.702	4.625	28.956	122.058
California	0.050	7.460	8.578	67.039
Hawaii	2.642	5.982	5.358	7.451
Oregon	0.064	9.347	9.768	22.432
Washington	0.035	4.499	8.957	26.951

Discussion

Principal Results

This study aimed to examine the geographic landscape of CPCs and abortion facilities in the US in 2021 and is the first to directly examine CPC locations relative to abortion facilities. We found that the ratio of CPCs to abortion facilities in the US was 3.4 in 2021, similar to the ratio of 3.2 which we reported using the same datasets in 2018 [4]. The number of CPCs was similar in 2018 (pre-COVID-19) and 2021 (active COVID-19 pandemic). Although new centers opened after 2018 and prior to the pandemic and some CPCs benefited from federal government support programs during the pandemic, such as the Paycheck Protection Program [48], and continued to operate during the early years of the pandemic, others closed [49]. The extent to which CPCs re-opened after the height of the pandemic is currently being studied. Consistent with our 2018 results [4], ratios of CPCs to abortion facilities were highest in the South and Midwest regions and the West North Central, East South Central, and West South Central divisions. Similarly, Missouri, Kentucky, Mississippi, and Wisconsin had the highest ratios and California, DC, Maine, Nevada, and New Jersey had the lowest in both 2018 [4] and 2021. In our 2018 analyses [4], we reported that an increasing number of CPCs per state was associated with an increased likelihood of the introduction

of legislation to ban all or most abortions [4]. Notably, abortion is currently completely banned in all six states where the ratio of CPCs to abortion facilities was >15.0 in 2021. In addition, the ratio was >7.0 in 13 of the 14 states that currently completely ban abortion.

Nationally, more than half (55%) of block groups were within 15 miles of a CPC and an abortion facility. More than one-quarter (27%) were categorized in the “CPC only” zone, meaning that 82% of all block groups in the US were located within 15 miles of a CPC in 2021. The percentage of block groups within 15 miles of both a CPC and an abortion facility was highest (at least 70%) in the Northeast and West regions and the Middle Atlantic and Pacific divisions, where the number of abortion facilities was highest. Although almost two-thirds (64%) of all abortion facilities nationally were located in the Northeast and West regions and nearly half (47%) in the Middle Atlantic and Pacific divisions [50], $<3\%$ block groups in each of these areas were categorized as “abortion facility only” zones. Differences by region and division may be due to differences in urbanicity and population centers. In all regions, divisions, and all but five states there were more block groups within a 15-mile radius of a CPC than outside of that distance. In 20 states and DC, $>50\%$ of block groups were categorized as being within 15 miles of both a CPC and an abortion facility (“dual presence” zone).

Nationally, 60% of women of reproductive age, 45.2 million women, lived within 15 miles of both a CPC and an abortion facility, and 26%, nearly 19.7 million, lived within 15 miles of a CPC only. Less than 15% of women of reproductive age in the US lived more than 15 miles from a CPC. In contrast, less than one-third lived within 15 miles of an abortion facility, and $<1\%$, approximately 625,000 women, lived within 15 miles of an abortion facility only. In all regions, divisions, and states, except North Dakota, more women lived within a 15-mile radius of a CPC than outside of that distance.

CPCs were located exceptionally close to abortion facilities in the US in 2021. In all regions, divisions, and 34 states, the minimum distance from an abortion facility to the nearest CPC was <0.1 miles or <528 feet. The median distance was 2 miles nationally and <2 miles in all regions except the West, all but three divisions, and 33 states and DC. Median drive time to the nearest CPC was 5.5 minutes nationally and <5 miles in two of four regions, all but four divisions, and 31 states. Nationally, the nearest CPC was within three miles of the majority of abortion facilities and the nearest CPC was within 0.5 miles of approximately one-quarter of all abortion facilities.

Limitations

This study is subject to several limitations. In general, spatial analyses that utilize the smallest feasible geographic unit available better limit bias and increase precision. This study utilized block groups given for feasibility reasons. Although Census blocks are the smallest geographic unit for which age and sex data were available, such analyses are computationally- and resource-intensive at the national level. Block groups may result in small underestimates of abortion accessibility relative to census blocks but are much more precise than county-level analyses and facilitated examination of the number and percentage of women of reproductive age living in each zone in the current study [46]. Further, selection of different driving distances to define each zone and catchment area of reproductive-aged women could influence the findings. We opted to define buffer zones based on a 15-mile radius from CPCs and abortion facilities based on prior research on median distances to abortion facilities nationally in the US and given the relative number of CPCs as compared to abortion facilities. In addition, misclassification of CPCs and abortion facilities could be possible given that the two national data sources did not continuously collect data in 2021. Lastly, the current study does not account for density of CPCs and abortion facilities, number of staff or volunteers, types of services offered, volume and types of or potential targets of advertising, or other factors that may influence individual decision-making about health-seeking. Despite limitations, the study offers significant strengths, including: utilization of scientifically rigorous national data sources; analyses unrestricted to state boundaries, in line with behaviors of people seeking health services; advanced spatial methods that produced estimates of driving distances and drive times; and novel approaches to examine an under-studied health topic of critical

importance.

Comparison with Prior Work

Although other researchers have examined geographical access to abortion facilities in the US [12, 16], distances patients travel to obtain abortion care nationally [47], and compared categorizations of drive times to abortion facilities and CPCs [51], this is the first study to directly examine relative geographic access to CPCs and abortion facilities using the lens of CPCs' long-standing geographic tactic of locating near abortion facilities. In addition, this is the first published study to report the proximity of CPCs to abortion facilities nationally.

Only one previous study has examined populations in proximity to CPCs and abortion facilities [51]. The study utilized a CPC database that included shelters, thrift shops, adoption agencies, and administrative offices that did not offer pregnancy testing and information designed to influence pregnancy options toward childbirth. The study also compared relative distances to the nearest CPC and abortion facility based on 30- and 60-mile drive time categorizations for the total US population, including all genders, children, and seniors. The current study utilized a public health approach, concentrating on centers that most directly aimed to attract people seeking or considering abortion care; it was limited to anti-abortion "pregnancy centers" that offered free pregnancy testing (e.g., excluded thrift stores and administration offices) and excluded adoption agencies and maternity homes [51]. Thus, findings from this study are presumed to be both more precise and conservative than previous research.

Conclusions

Despite their risks to individual, family, and public health, this study's findings suggest that, prior to the *Dobbs* decision, CPCs' tactic of locating near abortion facilities was largely realized, and the centers were "positioned" to attempt to intercept people considering and seeking abortion, given their relative numbers and locations, and close proximity to abortion facilities. Estimates have likely changed drastically since the *Dobbs* decision as some states banned or severely restricted abortion and increased funding for CPCs and other states have passed protections and expanded abortion access. The number and locations of CPCs post-*Dobbs* are currently being studied. It is possible but remains to be seen if CPCs proliferated in the states that increased funding for the centers and proliferated in states where abortion remains legal and protected.

Research shows that many people seek sources of sexual and reproductive healthcare online, including abortion [52]. The vast majority (>96%) of CPCs advertise to potential clients online [53]. Currently, some states direct people seeking abortion to CPCs through mandated counseling. The federal government provides referrals to CPCs through its online HIV and sexually transmitted infection (STI) service locators powered by the Centers for Disease Control and Prevention's (CDC's) contract with the National Prevention Information Network (NPIN) [53]. Given CPCs' health risk and the vast majority of women in the US reside within 15 miles of a CPC, location-aware digital tools, such as Yelp, which currently identifies CPCs, and tools with location-based filters, such as CPC Map [4], created with a primary goal of helping people seeking health services identify CPCs, and can be valuable for assisting people looking for safe, quality sexual and reproductive healthcare identify the centers. In addition, public health and medical professionals and advocates should make themselves aware of CPCs operating in their areas and help educate the public and patients about CPCs and their potential harms and where to find safe, quality sources of care and information [5]. Tailored programming to raise awareness about CPCs based on geography may help people avoid healthcare delays and adverse outcomes.

CPCs continue to operate largely unregulated [6]. Identical federal legislation to regulate CPCs from providing inaccurate health information and engaging in deceptive advertising was introduced into the House and Senate in 2022 but has not been passed [54, 55]. Efforts to regulate CPCs at the state level have not been entirely successful. For example, a law passed in California to require

CPC post signage was overturned by the US Supreme Court, and the state of Illinois agreed not to enforce a law that imposed fines for CPCs providing misleading health information after a federal judge ruled in favor of CPCs' First Amendment free speech rights [56, 57]. Connecticut in 2021 and Vermont in 2023 passed laws barring CPCs from engaging in false and misleading advertising [30, 38]. Some cities have passed local ordinances to regulate CPCs and to prevent them from locating in their areas and have made zoning decisions to prevent CPCs from locating near abortion facilities [58-60].

Given few currently available regulatory strategies and increased funding for CPCs in many states since *Dobbs*, to minimize harm, public health and medical professionals, advocates, researchers, funders, and government officials should prioritize: 1) raising awareness about CPCs, including awareness about local CPCs and safe sources of healthcare; 2) urging governments to refrain from supporting, referring to, and funding CPCs; 3) urging government regulation of CPCs; and 4) identifying CPCs' strategies and tactics, especially post-*Dobbs* -- in addition to facilitating, providing, and advocating for safe, respectful, accessible, appropriate, and effective sexual and reproductive healthcare for all.

Conflicts of Interest

None declared

Abbreviations

CDC: Centers for Disease Control and Prevention

CPC: Crisis Pregnancy Center

DC: District of Columbia

HIV: Human Immunodeficiency Virus

NPIN: National Prevention Information Network

STI: Sexually transmitted infection

US: United States

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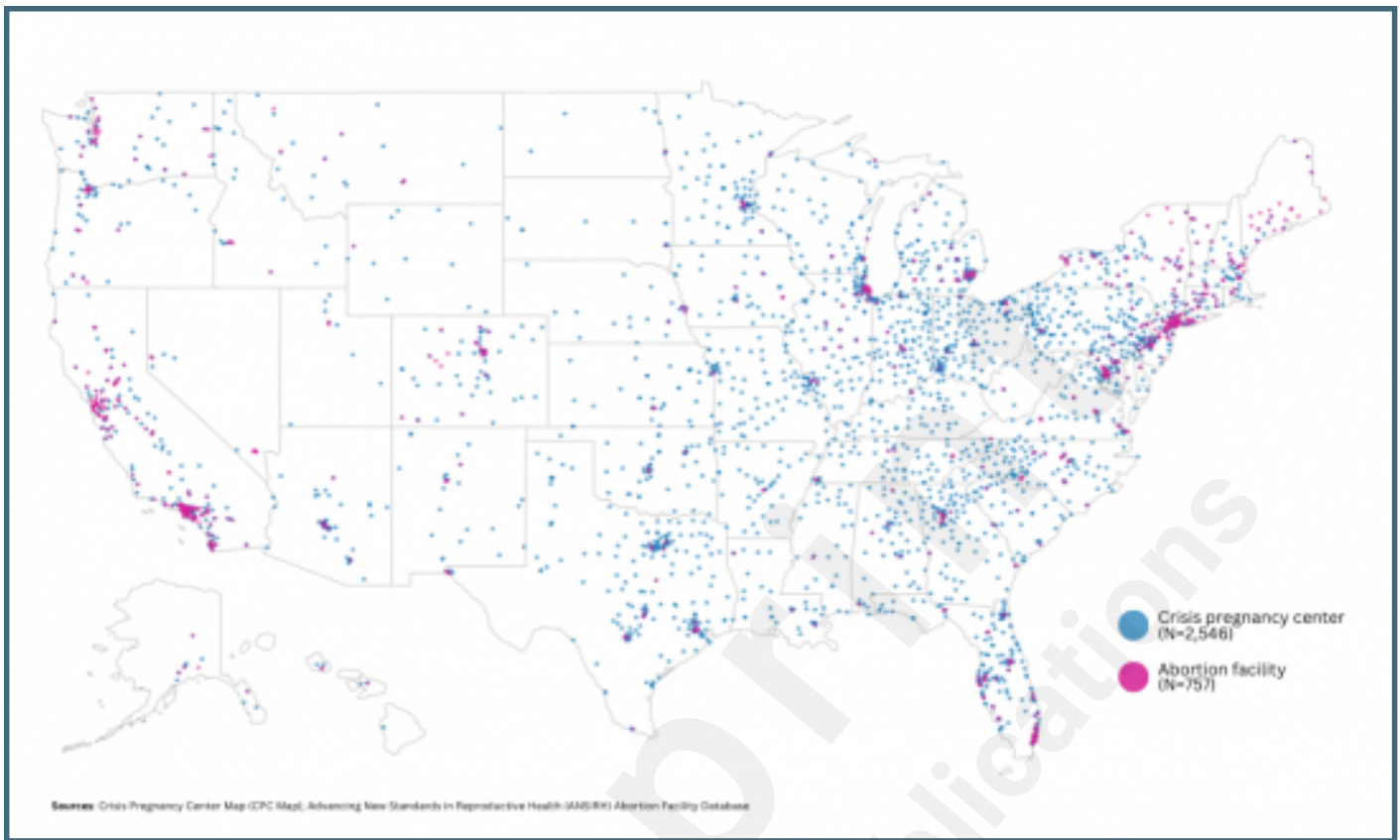
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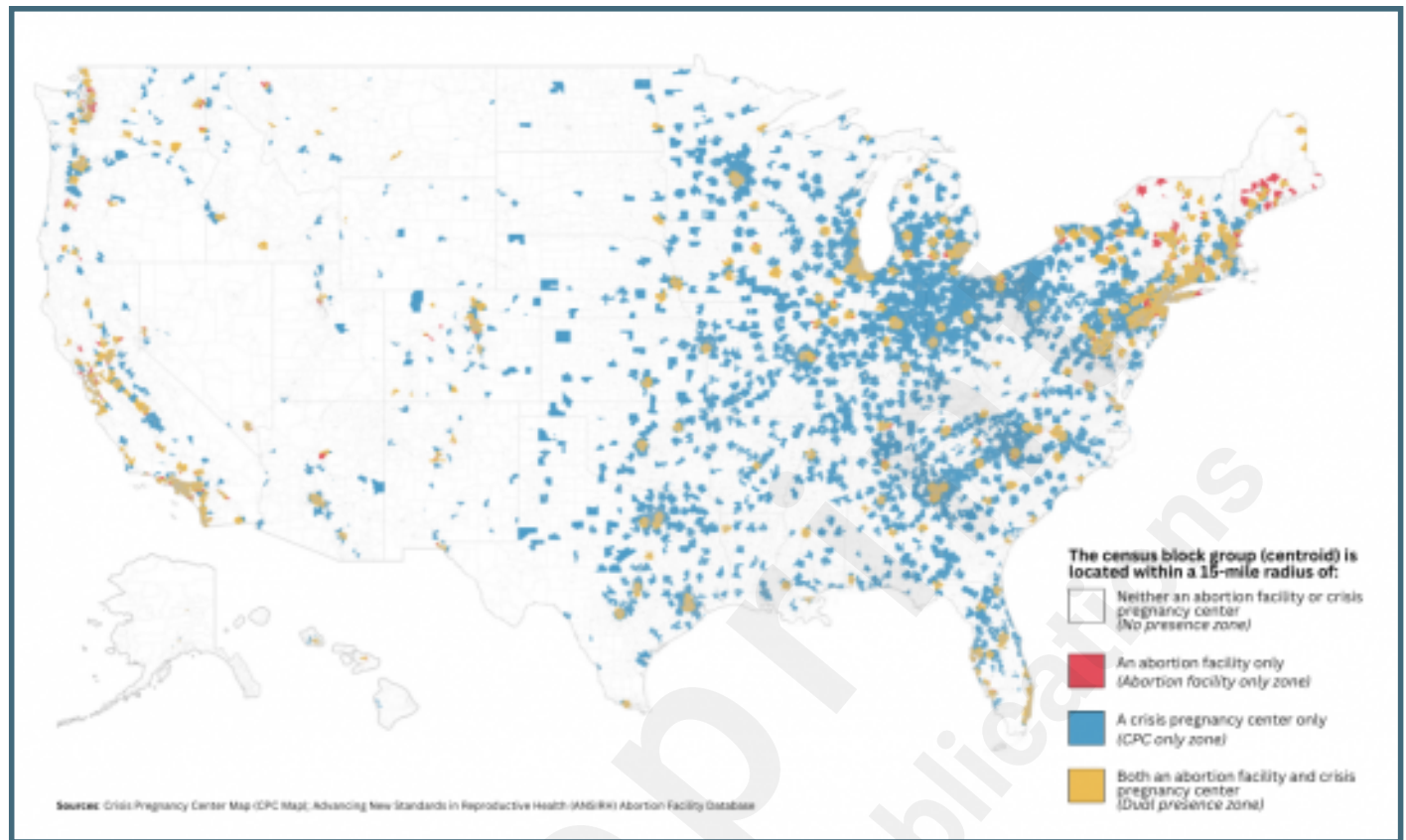
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Figures

Crisis pregnancy centers (CPCs) and abortion facilities in the United States, 2021.



United States Census block groups within crisis pregnancy center (CPC) and abortion facility presence zones, 2021.



Locations of abortion facilities based on driving distance to the nearest crisis pregnancy center (CPC), United States 2021.

