

The vote was taken by electronic device, and there were—ayes 213, noes 210, not voting 8, as follows:

[Roll No. 35]

AYES—213

Aderholt	Garbarino	Miller (WV)
Alford	Gill (TX)	Miller-Meeeks
Allen	Gimenez	Mills
Amodei (NV)	Goldman (TX)	Moolenaar
Arrington	Gonzales, Tony	Moore (AL)
Babin	Gooden	Moore (NC)
Bacon	Gosar	Moore (UT)
Baird	Graves	Moore (WV)
Balderson	Griffith	Moran
Barr	Grothman	Murphy
Barrett	Guest	Nehls
Baumgartner	Guthrie	Newhouse
Bean (FL)	Hageman	Norman
Begich	Hamadeh (AZ)	Nunn (IA)
Bentz	Haridopolos	Obernolte
Bergman	Harrigan	Ogles
Bice	Harris (MD)	Onder
Biggs (AZ)	Harris (NC)	Owens
Biggs (SC)	Harshbarger	Palmer
Billirakis	Hern (OK)	Patronis
Boebert	Higgins (LA)	Perry
Bost	Hill (AR)	Pfluger
Brecheen	Hinson	Reschenthaler
Bresnahan	Houchin	Rogers (AL)
Buchanan	Hudson	Rogers (KY)
Burchett	Huizenga	Rose
Burlison	Hurd (CO)	Rouzer
Calvert	Issa	Roy
Cammack	Jack	Rulli
Carey	Jackson (TX)	Rutherford
Carter (GA)	James	Salazar
Carter (TX)	Johnson (LA)	Scalise
Ciscomani	Johnson (SD)	Schmidt
Cline	Jordan	Schweikert
Cloud	Joyce (OH)	Schwo, Austin
Clyde	Joyce (PA)	Self
Cole	Kean	Sessions
Collins	Kelly (MS)	Shreve
Comer	Kelly (PA)	Simpson
Crane	Kennedy (UT)	Smith (MO)
Crank	Kiggans (VA)	Smith (NE)
Crawford	Kiley (CA)	Smith (NJ)
Crenshaw	Kim	Smucker
Davidson	Knott	Spartz
De La Cruz	Kustoff	Stauber
DesJarlais	LaHood	Steil
Diaz-Balart	LaLota	Steube
Donalds	Langworthy	Strong
Downing	Latta	Stutzman
Dunn (FL)	Lawler	Taylor
Edwards	Lee (FL)	Tenney
Ellzey	Letlow	Thompson (PA)
Emmer	Loudermilk	Tiffany
Estes	Lucas	Timmons
Evans (CO)	Luna	Turner (OH)
Ezell	Luttrell	Valadao
Fallon	Mace	Van Drew
Fedorchak	Mackenzie	Van Duynes
Feenstra	Malliotakis	Van Epps
Fine	Maloy	Van Orden
Finstad	Mann	Wagner
Fischbach	Massie	Walberg
Fitzgerald	Mast	Weber (TX)
Fitzpatrick	McCaul	Webster (FL)
Fleischmann	McClain	Westerman
Flood	McCormick	Wied
Fong	McDowell	Williams (TX)
Foxx	McGuire	Wilson (SC)
Franklin, Scott	Messmer	Wittman
Fry	Meuser	Yakym
Fulcher	Miller (IL)	Zinke

NOES—210

Adams	Carson	Craig
Aguilar	Carter (LA)	Crockett
Amo	Case	Crow
Ansari	Casten	Cuellar
Auchincloss	Castor (FL)	Davids (KS)
Balint	Castro (TX)	Davis (IL)
Barragán	Cherfilus-	Davis (NC)
Beatty	McCormick	Dean (PA)
Bell	Chu	DeGette
Bera	Cisneros	DeLauro
Beyer	Clark (MA)	DeBene
Bishop	Clarke (NY)	Deluzio
Bonamici	Cleaver	DeSaulnier
Boyle (PA)	Clyburn	Dexter
Brown	Cohen	Dingell
Brownley	Conaway	Doggett
Budzinski	Correa	Elfreth
Bynum	Costa	Escobar
Carbajal	Courtney	Español

Evans (PA)	Levin	Rivas
Fields	Liccardo	Ross
Figures	Lieu	Ruiz
Fletcher	Lofgren	Ryan
Foster	Lynch	Salinas
Foushee	Magaziner	Sánchez
Frankel, Lois	Mannion	Scanlon
Friedman	Matsui	Schakowsky
Frost	McBath	Schneider
Garamendi	McBride	Scholten
Garcia (CA)	McClain Delaney	Schrier
Garcia (IL)	McClellan	Scott (VA)
Garcia (TX)	McCollum	Scott, David
Gillen	McDonald Rivet	Sewell
Golden (ME)	McGarvey	Sherman
Goldman (NY)	McGovern	Simon
Gomez	McIver	Smith (WA)
Gonzalez, V.	Meeks	Sorensen
Goodlander	Menendez	Soto
Gottheimer	Meng	Stansbury
Gray	Mfume	Stanton
Green, Al (TX)	Min	Stevens
Grijalva	Moore (WI)	Strickland
Harder (CA)	Morelle	Subramanyam
Hayes	Morrison	Suozzi
Himes	Moskowitz	Sykes
Horsford	Moulton	Takano
Houlahan	Mrvan	Thanedar
Hoyer	Mullin	Thompson (CA)
Hoyle (OR)	Nadler	Thompson (MS)
Huffman	Neal	Titus
Ivey	Neguse	Tlaib
Jackson (IL)	Norcross	Tokuda
Jacobs	Ocasio-Cortez	Tonko
Jayapal	Olszewski	Torres (CA)
Jeffries	Omar	Trahan
Johnson (GA)	Pallone	Tran
Johnson (TX)	Panetta	Underwood
Kamlager-Dove	Pappas	Vargas
Kaptur	Pelosi	Vasquez
Keating	Perez	Veasey
Kelly (IL)	Peters	Velázquez
Kennedy (NY)	Petterson	Vindman
Khanna	Pingree	Walkinshaw
Krishnamoorthi	Pocan	Wasserman
Landman	Pou	Schultz
Larsen (WA)	Pressley	Waters
Larson (CT)	Quigley	Watson Coleman
Latimer	Ramirez	Whitesides
Lee (NV)	Randall	Williams (GA)
Lee (PA)	Raskin	Wilson (FL)
Leger Fernandez	Riley (NY)	

NOT VOTING—8

Casar	Miller (OH)	Torres (NY)
Hunt	Stefanik	Womack
McClintock	Swalwell	

□ 1404

So the resolution was agreed to. The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. WOMACK. Mr. Speaker, I was unavoidably absent and unable to vote. Had I been present, I would have voted YEA on Roll Call No. 34 and AYE on Roll Call No. 35.

SUPPORTING PREGNANT AND PARENTING WOMEN AND FAMILIES ACT

Mr. SMITH of Missouri. Mr. Speaker, pursuant to House Resolution 1009, I call up the bill (H.R. 6945) to amend part A of title IV of the Social Security Act to clarify the authority of States to use funds for pregnancy centers, and for other purposes, and ask for its immediate consideration in the House.

The Clerk read the title of the bill. The SPEAKER pro tempore (Mr. LALOTA). Pursuant to House Resolution 1009, the amendment in the nature of a substitute consisting of the text of Rules Committee Print 119-17 is adopted and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 6945

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled.*

SECTION 1. SHORT TITLE.

*This Act may be cited as the "Supporting Pregnant and Parenting Women and Families Act".*

SEC. 2. PROHIBITION ON DISCRIMINATION AGAINST PREGNANCY CENTERS.

*Section 404 of the Social Security Act (42 U.S.C. 604) is amended by adding at the end the following:*

*"(1) USE OF FUNDS FOR PREGNANCY CENTERS.—*

*"(1) IN GENERAL.—Nothing in this part shall be construed to prohibit a State from using a grant made under section 403 to support pregnancy centers.*

*"(2) DEFINITION OF PREGNANCY CENTER.—In paragraph (1), the term 'pregnancy center' means any organization, such as a pregnancy resource center, pregnancy help center or organization, or pregnancy medical center, that—*

*"(A) supports protecting the life of the mother and the unborn child; and*

*"(B) offers resources and services to mothers, fathers, and families, including but not limited to relationship counseling, prenatal and pregnancy education, pregnancy testing, diapers, baby clothes, or other material supports."*

The SPEAKER pro tempore. The bill, as amended, shall be debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Ways and Means or their respective designees.

The gentleman from Missouri (Mr. SMITH) and the gentlewoman from California (Ms. CHU) each will control 30 minutes.

The Chair recognizes the gentleman from Missouri.

□ 1410

GENERAL LEAVE

Mr. SMITH of Missouri. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and submit extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

Mr. SMITH of Missouri. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in favor of the Supporting Pregnant and Parenting Women and Families Act led by Representative FISCHBACH.

What this bill does is really pretty simple. It ensures States will be able to continue to use TANF funds for pregnancy resource centers and the maternal care they provide to pregnant women and moms. That is it, Mr. Speaker.

Pregnancy resource centers offered material support and care to over 2 million women at more than 2,700 locations in 2024 alone, including diapers, prenatal vitamins, parenting classes, and transportation, just to name a few of the many services provided to these mothers.

These services meet the core purposes of TANF. Yet, the Biden administration proposed a regulation to discriminate against the pro-life mission of pregnancy resource centers by forbidding States from using TANF funds for these centers. It was a deliberate attempt to sidestep the law to achieve a partisan political agenda. Nothing, Mr. Speaker, in the TANF statute gave the Biden administration or any other future administration the ability to target pregnancy resource centers.

Following pressure from the Committee on Ways and Means and this Chamber, the Biden administration withdrew the rule in its final days. Think of what would have happened to maternal care in this country. One of the few places women can get care and support would have been closed.

In my home State of Missouri, \$3 out of every \$4 the State gives to pregnancy resource centers comes from TANF, and it is not just Missouri. Women in other States would have had fewer choices for their own care.

That is why we are passing this bill, to give pregnant women and moms a choice about where they receive maternal care and to stop any future administration from taking the same action as the Biden White House.

Democrats will talk until they are blue in the face, Mr. Speaker, about a woman's right to choose, but they oppose this bill, which is all about empowering women to make their own choices.

Why is that, Mr. Speaker? Simply because it doesn't align with their political agenda. The hypocrisy is absolutely stunning, Mr. Speaker. Democrats only believe in choice when it is the choice that their party would make.

Republicans are on the side of pregnant women, moms, and children who choose to get the help they need at one of these centers.

Mr. Speaker, I urge my colleagues to support this bill, and I reserve the balance of my time.

Ms. CHU. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, as families across the country are being crushed by rising costs and stripped of their healthcare, it is shameful that Republicans have chosen to bring a bill to the floor that does nothing to address these crises for pregnant women and families.

Instead, the bill before us today would allow Temporary Assistance for Needy Families, or TANF, dollars to be used to fund so-called crisis pregnancy centers that have a proven track record of intentionally lying to, misleading, and endangering women.

It is no coincidence that this bill is being rushed to the floor this week as Republicans once again prioritize appeasing a national anti-abortion group in town for its annual rally instead of addressing the real crises facing American families.

I want to paint a picture as to what happens to a young woman who sus-

pects that she may be pregnant. She has a mix of emotions. She may have overwhelming fear and anxiety, especially if she has few resources. She goes to what she thinks is a medical center or clinic, and it is called a pregnancy center of some sort.

When she gets there, she is greeted so warmly with open arms. There are people in white coats, who she assumes are medical professionals. They tell her she can get so many things for free: pregnancy tests, ultrasounds, pregnancy counseling, and, after the birth, even free diapers and formula. It all sounds so wonderful to this woman that she says sign me up.

They don't tell this woman that, in order to get these free services, she has to first sit through an ideological or religious indoctrination session in which all the reasons not to have an abortion are given.

They don't tell her that the person administering the ultrasound has no medical credentials, that, in fact, this is not an official ultrasound, and that she could be misdiagnosed.

They don't tell her that half of the personnel in the so-called clinic have no medical credentials at all and, therefore, are not equipped to advise on any medical complications, such as an ectopic pregnancy.

They don't tell her that this is not a medical clinic at all. In fact, because it is not, this woman's privacy is not protected, and her information could be shared with the public.

The real world of the crisis pregnancy centers is exemplified by an OB/GYN in Iowa, who has seen patients who visited these centers and were told that using contraceptives was the same as having an abortion. She has seen patients who suffered miscarriages and ectopic pregnancies because they were misdiagnosed by these anti-abortion centers.

These women were told that their pregnancies were in the early stages or that they were experiencing normal amounts of pain because the staff members they saw were not actual, qualified medical professionals.

As a result, these women ended up in the hospital, needing emergency care and surgery to save their lives.

In Illinois, a woman seeking an abortion was deliberately misled by a fake clinic. She was subjected to graphic videos and told that having an abortion would make her infertile and, ultimately, mentally ill.

Ultimately, she was coerced into carrying a pregnancy to term. After giving birth, she lost her job and health coverage, and the so-called clinic never offered real medical care or follow-up support.

This is why the American Medical Association and the American College of Obstetricians and Gynecologists have raised serious ethical and medical concerns about these clinics.

Now, Republicans want to guarantee that taxpayer dollars through these TANF funds will fund these centers and

that there will be no accountability for these dollars.

Let's first be clear about what TANF is actually supposed to be for. TANF exists to help families experiencing poverty meet their most basic needs and stabilize their lives so parents can work and children can thrive. TANF was never intended to subsidize anti-abortion propaganda or unregulated sham clinics that endanger women's health. Yet, that is exactly what this bill does.

Not only that, it goes beyond the regular TANF program, which requires reporting and accountability. Actually, this bill says that nothing shall be construed to restrict TANF funding for these centers, meaning that funding could not be taken away from them even if the center engages in deceptive practices or even causes a woman's death.

□ 1420

When the Ways and Means Committee marked up this bill last week, Democrats offered commonsense amendments that should have been uncontroversial to anyone who cares about women and families. We simply proposed that TANF funds not go to pregnancy centers that have engaged in deceptive or misleading practices that provide medically inaccurate information or that have endangered the health of a woman seeking care.

We also offered amendments to address the real crisis affecting the TANF program, which is the Trump administration's decision to seek revenge against five Democratic Governors by preventing them from accessing \$10 billion in already appropriated funds for TANF and childcare.

Republicans rejected every one of these amendments.

Clearly, this bill is not about supporting pregnant women and families. It is about shielding deceptive actors, supporting Trump's revenge tactics, and using public funds to advance an extreme anti-abortion agenda.

If Republicans truly cared about pregnant women and families, we would be debating how to undo their \$1 trillion cut to Medicaid, which rips healthcare away from millions of pregnant women, new mothers, and children, and how to help the millions of women seeing their health insurance premiums skyrocket due to months of Republican inaction.

Instead, this bill is merely an attempt to distract from these devastating realities with the ultimate goal of appeasing the anti-abortion advocates parading around Washington this week as countless women suffer and die under extreme Republican abortion bans. Their priorities are clear and profoundly misguided.

I urge my colleagues to vote "no." Mr. Speaker, I reserve the balance of my time.

Mr. SMITH of Missouri. Mr. Speaker, I yield 5 minutes to the gentlewoman from Minnesota (Mrs. FISCHBACH), the sponsor of this bill.

Mrs. FISCHBACH. Mr. Speaker, I thank the chairman for the opportunity to speak. I am so proud to rise today in support of my legislation, H.R. 6945, the Supporting Pregnant and Parenting Women and Families Act.

For too long, previous Democrat administrations have weaponized the Department of Health and Human Services against pregnancy resource centers by attempting to cut off their Temporary Assistance for Needy Families, or TANF, funding. This bill puts a definitive stop to that harassment. It clarifies that these centers fundamentally meet the statutory purposes of TANF by providing essential assistance to children and expectant mothers.

The TANF block grant is built on four specific statutory goals, and States have broad authority to pursue them all.

Let's look at the second goal: to "end the dependence of needy parents on government benefits through work, job preparation, and marriage." Cash assistance alone does not end dependence. It often merely just manages it. Pregnancy resource centers offer the best hope of achieving this goal by providing parenting classes and life skills training to help that mother move from a crisis to self-sufficiency.

Pregnancy centers are the backbone of community-based support. The impact of their work is undeniable.

In 2024 alone, over 2,700 centers aided nearly 3.8 million women, children, and families. These centers provided over \$452 million in total medical care, education, and material goods.

As Democrats continue to attack pregnancy care centers, I have asked them repeatedly if they have ever visited a center, ever bothered to go and see what they are talking about because if they had, they would see the compassion, the support, and love that are present in these facilities. These centers are staffed by trained men and women who guide and support mothers, fathers, children, and families. They are for the families from pregnancy through childbirth and beyond with parenting classes and assistance such as formula, diapers, and whatever else that family may need.

The attempt to strip TANF funding from these centers was never about fiscal responsibility. It was a targeted, ideological attack on organizations that provide a real alternative to abortion.

Democrats say choice, choice, choice over and over, but they try to deny women the choice to choose life.

H.R. 6945 codifies the operations of TANF to ensure this funding stream remains focused on its mission, helping needy families and children, rather than serving as a tool for ideological gatekeeping.

I am incredibly proud of this bill, which protects the most vulnerable among us and ensures that every woman facing adversity has the options, resources, and support she deserves.

Ms. CHU. Mr. Speaker, I would like to point out that the previous speaker said that these clinics have trained staff, but many of these centers pose as clinics, offer incorrect medical advice, and even go so far as to wear scrubs and white coats to appear as though they are trained. Actually, fewer than half of crisis pregnancy centers have a licensed medical professional on staff. Mr. Speaker, 95 percent do not provide prenatal care, and only 1 out of 607 provides contraception, and the facilities are unregulated.

Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. DAVIS).

Mr. DAVIS of Illinois. Mr. Speaker, as we begin 2026 with Trump and Republican policies squeezing workers, spiking costs, tanking job security, the Republican leadership advances this bill to divert money intended for poor children to dangerous anti-abortion centers.

When my home State of Illinois and four other States are facing an illegal reduction of about \$8.9 billion in TANF and SSBG funds due to political retaliation, the Republican leadership chooses to move a bill restricting women's reproductive choices.

If Republicans really wanted to help parents care for their children, they would work with Democrats to ensure that HHS follows the law and immediately releases the childcare funds that HHS is illegally delaying from States across the country.

Illinois receives about \$400 million from the Child Care and Development Fund and another \$500 million from TANF that help low-income working families afford quality childcare.

Disruption to this funding will have substantial, immediate, and destructive consequences to children, families, businesses, and communities.

I am upset but not shocked that the Republican leadership rejected my amendment to this bill that would penalize HHS for illegally withholding payments of TANF, Child Care Entitlement to States, or SSBG funding if the agency fails to pay an amount due to a State within 5 days by requiring the agency to make a monthly payment of the amount due plus interest.

HHS should be held accountable for harming individuals, families, and businesses.

I strongly oppose this bill that tramples on women's rights to choose their own best health interests.

Mr. SMITH of Missouri. Mr. Speaker, I yield 5 minutes to the gentleman from New Jersey (Mr. SMITH), an incredible advocate for the unborn.

Mr. SMITH of New Jersey. Mr. Speaker, I thank the distinguished chairman for yielding and for his leadership. I especially want to thank MICHELLE FISCHBACH for her leadership and compassion by offering and authorizing this legislation to protect pregnancy care centers from discrimination and to ensure that they can continue their important work of assisting families in need.

Mr. Speaker, I was at a New Jersey pregnancy center dinner a few years ago when two women through tears of joy expressed their deep and abiding gratitude for the incredible love, respect, and care that persuaded them to reverse their decision to abort their babies.

They spoke of how desperate, even hopeless, they were. They spoke about the pressure that they were under to abort until they met the director of the pregnancy resource center who reached out to both of them at different times but within about a month in a gentle and nonjudgmental way.

□ 1430

They chose life and thanked God, the director, and the pregnancy resource center for helping them avert the loss of their precious babies' lives.

Then, Mr. Speaker, two teenaged girls took to the podium and spoke about their lives: schools, sports, friends, and their reverence for the sanctity of human life.

Near the end of their remarks, they turned toward the director of the center and thanked her for being there for their moms through those very difficult times and said: If you weren't there for them, we would be dead.

This is coming from two girls standing at the podium, and that has been replicated many, many times throughout the country. There are more than 55 pregnancy care centers in my district. I have been to many of them. They are filled with the most loving, compassionate, and honest people I have ever met.

So I find all the smear that we always hear so objectionable. They are an amazing group of women. They are almost all women, who run these pregnancy care centers.

Consider the story of Jean Marie Davis, a mother and a survivor of human trafficking.

I know a little about human trafficking. I have written five laws on trafficking, including the landmark Trafficking Victims Protection Act of 2000. There is a big, heavy, trauma-informed emphasis on victims, and we have one now pending to further that effort.

This woman, Jean Marie Davis, is a survivor of trafficking who says that her life was saved by a pregnancy care center.

She said: "I was trafficked in 33 States."

She went on: "Even though I was losing weight from the drugs, my belly kept growing, and I soon discovered the pregnancy that would ultimately save my life."

Fighting despair and with only \$1.38 to her name, she had almost no place to turn. She was connected with a woman named Phyllis at a local pregnancy care center.

She says:

The pregnancy center provided me with free resources and support, and then when the child was born to take

care of my son. I was able to realize and pursue dreams I had never imagined.

That is because these people have such compassion, not the smear we hear from the other side. They have compassion, and I am just amazed at that, that the other side says these things about these wonderful people.

Years later she applied, and now she is the executive director of the Branches Pregnancy Resource Center in Vermont. She is giving back. She was given so much by these individuals, and now she is giving back.

Across the U.S., there are more than 2,700 pregnancy centers offering mothers and their precious children an oasis of love, compassion, and care.

One report found that in 2024, \$452 million in free medical care was provided. I have been to these. There are so many nurses at these pregnancy care centers. They do ultrasounds.

Frankly, when the woman does see the baby, it is transformational. Mr. Speaker, you don't get that in a Planned Parenthood clinic at all. They talk about the child being a nonentity and not a human being.

Recognizing the extraordinary care provided at these centers, some States—there are at least six of them, including the distinguished chairman's from Missouri—do provide TANF funding. Biden was in the process of promulgating a rule that would have precluded that.

We can't allow that to happen now or ever. This important legislation—again, I can't thank Michelle enough for it—would ensure that pregnancy centers cannot be excluded or restricted from receiving TANF funding as a result of discrimination and the smear campaign that they suffer.

Hopefully, the Supreme Court will soon render its decision on a very important case coming out of my State, and I do think it will be favorable. These are amazing centers, and we ought to be supporting them, not smearing them.

Ms. CHU. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I wish the previous speaker could have met this Massachusetts woman who sought care at a crisis pregnancy center after a Google advertisement led her to believe it was a legitimate medical facility where she could confirm her pregnancy. At Clear Way, a nurse administered an ultrasound and told the plaintiff that she had a viable intrauterine pregnancy. The nurse was not licensed to diagnose viable pregnancies and did not undertake appropriate medical measures to rule out an ectopic pregnancy.

Rather than referring the patient for immediate medical evaluation, Clear Way staff focused on encouraging her to continue the pregnancy. As a result of the misdiagnosis, this woman's ectopic pregnancy ruptured, causing massive internal bleeding and requiring emergency surgery. She lost a fallopian tube and narrowly avoided death.

Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. SCHNEIDER).

Mr. SCHNEIDER. Mr. Speaker, I include in the RECORD links to three articles. The first is: The American College of Obstetricians and Gynecologists. "Issue Brief: Crisis Pregnancy Centers." <https://schneider.house.gov/sites/evo-subsites/schneider.house.gov/files/evo-media-document/crisis-pregnancy-centers-rep-schneider.pdf>.

The second is from the AMA Journal of Ethics: "Why Crisis Pregnancy Centers Are Legal but Unethical." [https://schneider.house.gov/sites/evo-subsites/schneider.house.gov/files/evo-media-document/why-crisis-pregnancy-centers-are-legal-but-unethical-rep-schneider\\_0.pdf](https://schneider.house.gov/sites/evo-subsites/schneider.house.gov/files/evo-media-document/why-crisis-pregnancy-centers-are-legal-but-unethical-rep-schneider_0.pdf).

The third is an article by a number of doctors from Women's Health Reports: "Truth and Transparency in Crisis Pregnancy Centers." <https://schneider.house.gov/sites/evo-subsites/schneider.house.gov/files/evo-media-document/truth-and-transparency-in-crisis-pregnancy-centers-rep-schneider.pdf>.

Mr. SCHNEIDER. Mr. Speaker, I think it is shameful that my Republican colleagues have brought this bill to the floor to funnel money to so-called crisis pregnancy centers and away from programs that truly help families in need.

My Republican colleagues are saying that these centers help women. In reality, too many of these centers trick women before they even walk in the door.

They advertise themselves as real medical clinics. They are not. They might look like a normal doctor's office with ultrasound machines and employees wearing lab coats, but the coats are for show, and the employees are not medical professionals.

Mr. Speaker, don't be fooled. The primary purpose of these centers is to deceive women, and the organizations promoting these centers are the same organizations advocating for a national abortion ban.

Here is what should concern us all: These centers routinely spread medical misinformation and intentionally cause delays in accessing legitimate healthcare. Their theory is delay long enough and women in crisis are effectively forced to continue their pregnancies.

Now, Mr. Speaker, you will hear my Republican colleagues tout that these centers offer maternal care. They don't. Real maternal care requires real medical professionals who offer real, ethical, and comprehensive health services, who are licensed and regulated, and who don't have a personal bias counter to their patients' medical interest or decisions.

Yet, my Republican colleagues want to divert Federal TANF funding away from families in need and to these clinics instead. This is a disgraceful diversion. If my Republican colleagues were serious about helping children and families in need, let them speak out

against this administration's illegal payment freeze for childcare and child welfare funding.

Right now, as we debate this bill on eligibility for TANF spending, the Trump administration is illegally holding up more than \$10 billion in Federal funding for childcare and family assistance funding, including TANF funds, to States, including my own of Illinois, as well as California, New York, Colorado, and Minnesota.

The administration is illegally withholding payments to States for childcare, foster care, child protective services, and cash assistance to low-income families.

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. CHU. Mr. Speaker, I yield an additional 30 seconds to the gentleman from Illinois.

Mr. SCHNEIDER. They are hiding behind false claims and unauthorized administrative barriers in order to inflict pain on States that the President dislikes.

Let me be clear. These payments are legally required under the law, and this freeze is unlawful.

The administration needs to pay the States what they are owed.

Mr. Speaker, I urge my colleagues to vote "no" on the bill.

Mr. SMITH of Missouri. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. FONG).

Mr. FONG. Mr. Speaker, I rise today in strong support of H.R. 6945, the Supporting Pregnant and Parenting Women and Families Act.

Across our Nation, more than 2,700 pregnancy centers serve nearly 2 million women and families each year. I have seen firsthand my local pregnancy centers in California and the services they provide offering diapers, baby clothes, prenatal education, ultrasounds, housing referrals, and additional real, compassionate support during life's most vulnerable moments.

These services are valued at over \$450 million annually and help families choose stability, self-sufficiency, and hope.

The Temporary Assistance for Needy Families program was created to strengthen families, reduce dependency, and ensure children can be cared for in their own homes.

Pregnancy resource centers, especially in rural communities, clearly advance those goals. However, under the Biden administration, a proposed rule was issued that singled out pregnancy centers and preemptively suggested State spending on these organizations would no longer be allowable.

The Biden rule was never finalized, but there is a need to make sure future administrations do not pursue similar actions. H.R. 6945 ensures fairness. It clarifies that States may continue partnering with pregnancy centers without political interference now and in the future.

Mr. Speaker, this bill stands for mothers, children, and families, and I urge my colleagues to support it.

□ 1440

Ms. CHU. Mr. Speaker, I wish we could think of the woman in Pennsylvania who was pregnant who sought care at what she thought was a medically certified clinic, but during her appointment, the staff told her she had already miscarried and was sent home.

As time went on, though, she continued experiencing pregnancy symptoms, so she later went to a licensed doctor who told her she was still pregnant and that the crisis pregnancy center had given her the wrong information. This misdiagnosis greatly increased her risk of having pregnancy complications.

Mr. Speaker, I yield 2 minutes to the gentleman from California (Mr. THOMPSON).

Mr. THOMPSON of California. Mr. Speaker, I thank the gentlewoman for yielding.

Mr. Speaker, I rise today in opposition to this legislation that prioritizes a partisan agenda over the health, privacy, and autonomy of women.

Most of these so-called pregnancy centers are not licensed medical clinics. What does that mean? It means they can and often do share women's private medical information without their consent. It means they can and often do provide false and misleading medical information about abortion, contraception, and other reproductive health services for women.

In California, my home State, our attorney general was compelled to issue a consumer alert warning the public about deceptive practices employed by these centers.

At a time when access to reproductive healthcare is under attack, our Republican colleagues are advancing a bill that funnels resources to organizations that mislead women rather than provide comprehensive medical care.

Let me repeat: Most of these so-called pregnancy centers are not licensed medical clinics. How can we, in good conscience, send our constituents for healthcare to unlicensed facilities? I urge my colleagues to vote "no" on this measure.

Mr. SMITH of Missouri. Mr. Speaker, I yield 3 minutes to the gentlewoman from South Carolina (Mrs. BIGGS).

Mrs. BIGGS of South Carolina. Mr. Speaker, the proudest title that I carry is one that was given to me some 26 years ago from my son: Mama. I have also been a nurse for more than 30 years. Not only do I have my doctorate in family practice but also in psychiatric mental health.

I have spent my entire life caring for others, especially women and families in crisis. I have listened to their fears, and I have worked to make sure that they weren't facing those moments alone. That is why I rise today in support of H.R. 6945, the Supporting Pregnant and Parenting Women and Families Act.

As thousands gather in Washington for the March for Life, we are reminded that the pro-life cause isn't just about protecting the unborn, but it is about

honoring life at every single stage. That means showing up with real help, not just during the pregnancy, but as families begin the journey of nurturing a child.

Under the Biden administration, there were efforts to block States from partnering with pregnancy centers. This bill pushes back. It protects a State's ability to work with trusted local organizations, centers that offer prenatal care, parenting classes, counseling, and everyday necessities like diapers, formula, and baby clothes.

I have visited centers like this in my own district and seen the compassion that they offer firsthand. These are places where women are met with dignity, not judgment, and where families are supported not just through pregnancy, but long after.

This bill reflects what we believe: that every single life is a gift from God, every mother deserves compassion, and every child deserves a chance because, as Scripture reminds us: "I will praise thee; for I am fearfully and wonderfully made."

Mr. Speaker, I am proud to support this important legislation, and I urge my colleagues to do the same.

Ms. CHU. Mr. Speaker, may I inquire as to how much time is remaining.

The SPEAKER pro tempore. The gentlewoman from California has 12½ minutes remaining.

Ms. CHU. Mr. Speaker, I would like to talk about Kentucky, where a postpartum nurse with 20 years of experience was motivated to volunteer at a crisis pregnancy center. During her training, she learned that the clinic was using expired disinfectants to sanitize ultrasound equipment. Not only that, the kind of disinfectant that the clinic was using was ineffective in targeting human papillomavirus, which causes 90 percent of cervical cancer cases.

The volunteer nurse quit. She filed whistleblower complaints with the State, but nothing was ever done, highlighting the lack of accountability at the centers.

Mr. Speaker, I yield 2½ minutes to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Mr. Speaker, in their incessant drive to impose a national ban on all forms of abortion, Republicans continue to block relief for millions of Americans who are struggling with soaring ObamaCare health insurance premiums. Now, today, they offer this bill to funnel taxpayer dollars to fake health clinics.

To deceive women, these so-called pregnancy crisis centers use medical jargon and dress up in scrubs, yet most of the 2,600 clinics do not have a single licensed medical professional. Instead, they rely on fear and misinformation to discourage vulnerable women as they are trying to make one of the most important healthcare decisions about what is best for them.

Much more shocking than the waste that is promoted through this bill is

the indifference with which so many extremist Republicans have shown to the right to life, the right to life for the mother, the right to life for American women.

I chaired an Austin field hearing last August, and I heard dozens of tragic stories from Texas women like Kaitlyn Kash and Amanda Zurawski, forced to the brink of death before they could receive care for a miscarriage, hemorrhage, or sepsis.

An obstetrician, Dr. Donell Oliver, testified: "Women are dying; families are suffering; and medical professionals' hands are being tied." That is the result of the kind of strict abortion ban Republicans have imposed on Texas women that some here want to impose on all 50 States and all women in our country.

I think the death certificates for so many other women who have been denied treatment for pregnancy complications should really read the truth, which is "Cause of Death: Republican abortion ban."

For every American whose life is threatened by Republican extremist interference, I strongly oppose this bill and urge its rejection.

Mr. SMITH of Missouri. Mr. Speaker, Democrats are fear-mongering today. The majority of pregnancy resource centers have voluntarily signed on to industry standards, a call to commitment of care and competence created by Heartbeat International. These standards set an ethical code where they agree to adopt a transparent and honest service model.

According to a recent report that surveyed 2,750 different pregnancy centers in 2025, there were 4,779 licensed medical professionals on staff, and 5,396 licensed medical professional volunteers.

I include in the RECORD a copy of Heartbeat International's "Our Commitment of Care and Competence."

#### OUR COMMITMENT OF CARE & COMPETENCE

Clients are served without regard to age, race, income, nationality, religious affiliation, disability or other arbitrary circumstances.

Clients are treated with kindness and compassion, in a caring manner.

Clients always receive honest and open answers.

Client information is kept securely and confidentially and only released with the client's signed authorization or as required by law.

Clients receive accurate information about pregnancy, fetal development, lifestyle issues, and related concerns.

We do not offer, recommend, or refer for abortions or abortifacients, or contraceptives. We are committed to offering accurate information about related risks and procedures.

All of our advertising and communications are truthful and honest, and accurately describe the services we offer.

We provide a safe environment by screening and equipping all staff and volunteers interacting with clients.

We are governed by a Board of Directors and operate in accordance with our articles of incorporation, bylaws, and stated purpose and mission.

We comply with applicable legal and regulatory requirements regarding employment, fundraising, financial management, taxation, and public disclosure including the filing of all applicable government reports in a timely manner.

All services are provided in accordance with pertinent and applicable laws. Medical services are provided in accordance with medical standards, under the supervision and direction of a licensed physician (or advanced clinical provider as permitted by law).

All of our staff and volunteers receive appropriate training to uphold these standards.

Mr. SMITH of Missouri. Mr. Speaker, I yield 4 minutes to the gentleman from Indiana (Mr. YAKYM).

Mr. YAKYM. Mr. Speaker, from hearing my Democratic colleagues talk today, it is clear that none of them has ever been to a pregnancy resource center, and they certainly have never used their services.

Mr. Speaker, 17 years ago, my wife, Sallyann, and I found out we were expecting our first child. Sallyann thought she was having some issues with our pregnancy when she was only 7 weeks pregnant. We were young, and we were scared. We didn't have a place to turn until one of her friends suggested that we go to a pregnancy resource center.

We went down to the Women's Care Center in South Bend, where they welcomed us with open and loving arms. They gave her an ultrasound, and for the very first time, we saw our child, who, at that time, was about the size of a peanut. Half of that peanut was a heartbeat. Most importantly, they assured us that our child was okay and would be just fine.

□ 1450

When we went to leave, I had just one question for them: How much do we owe you? They looked at us and they said: Guys, the services that we provide here are free. You can go on your way. They assured us that our baby was healthy, and they gave us such peace of mind.

Here we are, 17 years later, and our daughter Elle is smart. She is beautiful. She is a junior in high school, and we are out looking for colleges. The pregnancy resource center in my community was there for us when we were young and scared, when we had very limited resources, but, unfortunately, if my Democrat colleagues had their way, our healthcare would have been denied.

Why deny the Sallyann Yakym's of the world access to the care that they need? Why deny people like my daughter, Elle, the care to make sure that they are okay?

I wish my friends from the other side of the aisle would simply join me in voting "yes" today on this measure.

Mr. Speaker, I thank my colleague, the gentlewoman from Minnesota (Mrs. FISCHBACH), for the introduction of this bill, and I urge my colleagues to vote "yes."

Ms. CHU. Mr. Speaker, let me say, there is a comprehensive study by the

Alliance for Women's Rights and Gender Equality that studied 607 crisis pregnancy centers across nine States, and they documented a consistent pattern of deception, misinformation, and patient harm.

Nearly two-thirds of the centers promoted patently false or biased medical claims about pregnancy, abortions, contraception, or reproductive health providers, and fewer than half reported having a licensed medical professional on staff.

These are not isolated incidents. These are standard practices for these centers.

Mr. Speaker, I yield 2 minutes to the gentlewoman from Minnesota (Ms. MORRISON).

Ms. MORRISON. Mr. Speaker, I rise in strong opposition to H.R. 6945.

The Supporting Pregnant and Parenting Women and Families Act is yet another Republican betrayal cruelly masked by a misleading title.

After spending the last few weeks threatening access to childcare support and doing literally nothing to help millions of Americans afford their healthcare, Republicans want to direct taxpayer dollars away from helping families afford necessities like food, rent, and childcare to crisis pregnancy centers that prey on vulnerable women seeking legitimate reproductive healthcare.

We have heard today that wonderful, caring people staff these crisis pregnancy centers, and I don't doubt that, but crisis pregnancy centers do not provide medical care, though they imply that they do. Crisis pregnancy centers are unregulated, deceptive, and dangerous.

As an OB/GYN myself for more than 20 years, I have seen far too many patients who have had, at best, confusing and, at worst, life-threatening experiences at crisis pregnancy centers. They don't serve patients. They serve the anti-abortion agenda.

Let me be clear: Every person has the right and deserves the dignity to make their own healthcare decisions, free from intimidation, deception, and coercion. At a time when our country has a shameful maternal and infant mortality crisis and is facing a worsening shortage of obstetricians, the so-called pro-life movement is focused not on helping women or supporting their families or delivering the IVF coverage the President promised; they are focused on denying women their reproductive rights and failing to deliver for American families.

Mr. Speaker, I urge my colleagues to stand for women and families, for dignity and for freedom, and vote "no."

Mr. SMITH of Missouri. Mr. Speaker, holy cow. The things that you hear from the other side in this body could not be so—not truthful—false.

They paint with a broad brush and say the most ridiculous items, saying that pregnancy resource centers do not help anyone. Give me a break. Where I come from, whenever someone says

something useless, we call it hogwash. They are swimming in hogwash on that side of the aisle.

Mr. Speaker, I reserve the balance of my time.

Ms. CHU. Mr. Speaker, well, it is not hogwash to this woman in Georgia. She sought care from an unregulated clinic that offered free ultrasounds and medical advice. She thought that was so great. The ultrasound technician incorrectly informed her that her baby's kidneys were filled with water and that she needed to see a primary care doctor.

The diagnosis was incorrect, but the stress of that misdiagnosis severely impacted the mother. She said: The irony in all this is that they could have caused me to lose a perfectly healthy pregnancy.

Mr. Speaker, I yield 3 minutes to the gentlewoman from Wisconsin (Ms. MOORE).

Ms. MOORE of Wisconsin. Mr. Speaker, I include in the RECORD a news article titled: "Child care providers reporting unnerving stakeouts" by Kristen Taketa.

[From the Union-Tribune, Jan. 21, 2026]

CHILD CARE PROVIDERS REPORTING  
UNNERVING STAKEOUTS  
(By Kristen Taketa)

Some San Diego child care providers say they are being harassed and fear for their safety amid a campaign by conservative activists and the Trump administration over broad but unsubstantiated suggestions of fraud.

Meanwhile, billions of dollars in child care funding is up in the air after the Trump administration last week moved to freeze \$10 billion in funding for social services, including child care and cash assistance for low-income families, in five Democratic-led states until it investigates.

A New York federal judge temporarily halted the freeze on Friday, a day after the five states challenged the freeze in court.

The states called it a politically motivated, "extraordinary and cruel action" and said the administration has shown neither evidence of fraud nor the legal authority to withhold mandated program funding.

The freeze could affect \$5 billion in funding due to California that helps pay for state child care subsidy programs serving more than 300,000 children of low-income families. The subsidies come in the form of vouchers that families use to pay child care providers.

In the past week, conservative activists have been posting on social media the names and phone numbers of child care providers, including in San Diego County, suggesting without evidence that they are benefiting from public funding but not actually providing child care.

Several local providers say that since then, they have begun seeing people loitering outside their homes or sitting in parked cars with cameras, watching them.

One San Diego child care provider whose name and phone number were posted online by a local activist said that ever since then, her phone has been "flooded" with calls, and she has seen people loitering around her home with recording devices. The San Diego Union-Tribune is not identifying her due to safety concerns.

"This has raised serious safety concerns for my family and my business. It's not right!" she wrote in a text message.

The harassment is also racist, providers say—those in San Diego who have been targeted are overwhelmingly of African or Middle Eastern descent.

Samsam Khalif, a Somali American who has been a family child care provider in San Diego for 18 years, was frightened last week when, as she was driving children to her home for a day of child care, she saw two men with a camera sitting in a car outside her home.

She circled the block a few times, but they didn't leave until she got out of her car and walked the children to her home. They drove away, she said, after they saw her with the children.

Khalif said she is so scared that she avoids going out unless she has to go shopping. She reactivated her home security system last week.

The safety concerns are especially acute for family child care providers, who run child care businesses out of their own homes. Some providers have their own children or other family members living at their place of business.

Yessika Magdaleno, a family child care provider of 25 years, said last week she hasn't faced harassment yet but worries she will, considering she is an officer with a child care providers union.

She counseled her young-adult children last week on safety, telling them to look out for anybody who may be watching or following them, and to be ready to call 911 if anyone threatens them.

"You do your work with fear. You don't know who's going to show up at your place, and you have all of these little children in your care," said Magdaleno, who lives in Orange County and is the United Domestic Workers union president for the district that includes San Diego County.

"They're doing things that, as a child care provider, you will never think will happen to you. Because all you're doing is taking care of the children and educating them, right?"

The harassment has drawn attention from local Democratic leaders.

"What the hell are we doing here where children, at day care, might be subjected to extremists showing up at the door of the home that they're receiving care, to investigate whether or not there's actually child care happening?" San Diego City Councilmember Sean Elo-Rivera said at a UDW news conference Thursday. "Child care should be universal and should be affordable for everyone, and it sure as hell should be saved from extremists."

The targeting—plus the potential loss of funding—has shaken an industry in California that has been historically underpaid, understaffed and run almost entirely by women, most of them women of color and many immigrants.

Government subsidies for child care cover only some of the cost of care, despite California's recent additional increases in subsidy rates for providers and funded child care slots.

Child care providers frequently make personal sacrifices to run their businesses, often putting in long days, enlisting family members to work unpaid or forgoing adequate pay and benefits, such as time off for themselves.

In 2024, the median annual wage for a child care worker in California was \$38,220, according to the Bureau of Labor Statistics.

"Child care providers are some of the most hardworking, selfless, incredible humans that are raising our future generation," said Kimberly McDougal, senior vice president at YMCA Childcare Resource Service in San Diego County. "The fact that they're even having to go through this is sad."

Child care leaders now worry that losing funding could force some child care providers to close their doors, which would exacerbate California's child care shortage.

"It's very fragile. Child care providers operate . . . on a very, very razor-thin line,

subsidies being so low," said Max Arias, chair of Child Care Providers United, a union that represents more than 40,000 family child care providers in California.

The harassment comes as the White House targets child care providers and Somali communities, part of a growing conservative focus following years of state and federal investigations into allegations of fraud in Minnesota's child care system and social services, some involving Somali American business owners.

That has culminated in what the Trump administration has called its largest immigration enforcement action, with thousands of officers deployed last month to Minnesota in part to investigate the child care fraud allegations.

That crackdown led to last week's killing of Renee Good by an ICE officer Wednesday.

In early December, Trump shocked observers with his comments during a Cabinet meeting in which he called Somali people "garbage" and said, "They contribute nothing. I don't want them in our country."

Weeks later, a conservative YouTuber named Nick Shirley posted a video in which he recorded Minneapolis Somali-run child care businesses and accused them of fraud, claiming they got public funding but did not serve children.

Afterward, Minnesota investigators visited 10 businesses he identified and found that nine were operating normally; the 10th had not yet opened for the day when officials arrived.

Shirley's video prompted other conservative activists around the country, including in San Diego, to follow his lead.

In San Diego, one proponent of unfounded fraud allegations has been activist Amy Reichert, who founded Restore San Diego in 2020, an organization whose stated goal is to "get the government out of our lives."

In the past week, Reichert has promoted her claims on Fox News and identified by name more than a dozen San Diego County family child care providers on the social media platform X, saying they do not actually serve children.

Her posts contained excerpts from publicly available state reports, with providers' names and phone numbers listed, that noted if there were no children present at the time of their unannounced visits; some reports also noted violations of state regulations, such as missing child or employee records.

Child care providers have called the claims reckless and based on false assumptions. "There are many reasons why children may not be present when an inspector is on-site," said McDougal of YMCA's Childcare Resource Service.

Providers identified on social media said children weren't there at the time of inspection because they serve children after school or at night; others had kids absent due to illness.

Not all children who are enrolled are present in child care at the same time, depending on their families' schedules.

"They (are) just accusing us. And that's lying. And that's wrong for you to put lie(s) out there," Khalif said.

Reichert told the Union-Tribune she had not contacted any of the providers; she said she "didn't want to give any appearance of harassment."

The child care subsidy system has several procedures in place to protect against fraud, McDougal said. Her organization and Child Development Associates are the two nonprofits that administer subsidies to providers in San Diego County.

The nonprofits check providers' enrollment with their licensed capacity, review thousands of monthly attendance sheets, validate signatures and verifications of employment

and eligibility and compare providers' rate sheets to invoices, among other things, McDougal said.

Ms. MOORE of Wisconsin. Mr. Speaker, I rise in opposition to H.R. 6945.

Despite the grandiose title, Supporting Pregnant and Parenting Women and Families Act, this bill carves out—let's keep the main thing to main thing. What it does, it carves out an earmark for an industry with a narrow ideological mission to provide, I guess what I call anti-abortion, but Mr. Chairman over there, he called it pro-life counseling services.

Actually, this just does not fit within the four core purposes of the TANF bill, which is why the Biden administration prohibited this. No more that we provide moneys for abortion counseling, which if you stop and think about it, it would fit more neatly into the core provisions of the TANF bill, and that is to prevent unwanted pregnancies. We don't provide abortion clinics with TANF moneys nor should we provide it to these clinics.

Mr. Speaker, I hear the tortured explanation of how this fits into the core duties of the TANF bill, and I hear them talking about the diapers and the formula and all the wonderful things. The March of Dimes provides all that stuff, too, but we don't provide them with TANF funds.

No. This is a diversion from the already underfunded TANF program which has been flat funded for 30 years at \$16.5 billion and now we have, according to the chairman, millions of women, 2 million, and 7,000 centers that are now going to be able to access TANF dollars.

These TANF dollars were meant not to provide baby wipes and diapers for babies up to 6 months old, but to help a woman navigate her way into the workforce to get job training, to have cash assistance until she can get on her feet, not to provide moneys to stand up this ideological and, quite frankly, religious organization.

That is why I oppose this bill. Mr. Speaker, I am going to later on offer an amendment that would allow States to use TANF dollars, again, not undermining this bill, but adding a section that would allow States to use TANF dollars for security at childcare facilities and to be able to gather evidence of harassment of childcare providers and to give local law enforcement the ability to secure a place for children because one of the core responsibilities of the TANF funding is to provide childcare.

The SPEAKER pro tempore (Mr. SIMPSON). The time of the gentleman has expired.

Ms. CHU. Mr. Speaker, I yield an additional 30 seconds to the gentlewoman from Wisconsin.

Ms. MOORE of Wisconsin. This all comes because there have been vigilantes showing up at childcare centers.

These are people who are not Health Department officials, not auditors showing up and harassing TANF recipients who need childcare as we deny

States' moneys for childcare, but we have vigilantes, right-wingers that are showing up and they are creating safety concerns in our daycares.

Mr. Speaker, I include in the RECORD my amendment.

Ms. Moore of Wisconsin moves to recommend the bill H.R. 6945 to the Committee on Ways and Means with instructions to report the same back to the House forthwith with the following amendment:

Strike all after the enacting clause and insert the following:

**SECTION 1. SHORT TITLE.**

This Act may be cited as the "Supporting Pregnant and Parenting Women and Families Act".

**SEC. 2. PROHIBITION ON DISCRIMINATION AGAINST PREGNANCY CENTERS.**

Section 404 of the Social Security Act (42 U.S.C. 604) is amended by adding at the end the following:

**"(1) USE OF FUNDS FOR PREGNANCY CENTERS.—**

**"(1) IN GENERAL.—**Nothing in this part shall be construed to prohibit a State from using a grant made under section 403 to support pregnancy centers.

**"(2) SAFETY.—**Nothing in this part shall be construed to prohibit a State from using funds from a grant made under section 403 to provide security for child care facilities or to obtain information about harassment of child care facilities for law enforcement purposes.

**"(3) DEFINITION OF PREGNANCY CENTER.—**In paragraph (1), the term 'pregnancy center' means any organization, such as a pregnancy resource center, pregnancy help center or organization, or pregnancy medical center, that—

**"(A)** supports protecting the life of the mother and the unborn child; and

**"(B)** offers resources and services to mothers, fathers, and families, including but not limited to relationship counseling, prenatal and pregnancy education, pregnancy testing, diapers, baby clothes, or other material supports."

□ 1500

Mr. Speaker, let the record reflect that this bill maintains the status quo of funding. Right now, people can use TANF dollars for funding. That is how it has always been. This is just protecting that it continues to do so because the prior President, President Biden, decided to try to eliminate it for the first time in history. We are trying to prevent it so that no future administration can do that. Mr. Speaker, I do want to talk about one individual. We hear all kinds of examples over here.

Let me talk about a 21-year-old named Faith who found out she was pregnant. While driving down the highway, she saw a sign for a pregnancy resource center in Rolla, Missouri, my congressional district.

While sharing her initial visit, Faith said that the center specifically told her: "Anything you need, we will help you get it." She was shunned by her family and pressured by her fiancé to abort their unborn child.

After being shunned, Faith decided to return to the pregnancy resource center in Rolla, Missouri. Through talking with those at the center, Faith realized that she ultimately did want to have her child. She gave birth to her son,

Noah. Now, years later, Faith volunteers at the very center that helped her life and protected her son, Noah.

Mr. Speaker, I reserve the balance of my time.

Ms. CHU. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I would like to clarify that this bill actually allows these funds to be free of any accountability. It actually changes the way in which these TANF funds are being used.

Right now, there has to be accountability if States use TANF funds for the crisis pregnancy centers. What this bill does is, by amending section 404 of the Social Security Act to state that nothing in this part may be construed to restrict TANF funding for pregnancy centers, this bill actually overrides TANF's statutory purposes, reporting requirements, penalty authority, and HHS enforcement provisions.

As a result, any future Federal effort to limit condition or review TANF funding for these crisis pregnancy centers could be challenged as prohibited by this statute.

Even if that center engages in deceptive advertising and does actions that even result in the death of a woman, there would be nothing that could be done about that crisis pregnancy center.

Mr. Speaker, I yield 1 minute to the gentlewoman from Wisconsin (Ms. MOORE).

Ms. MOORE of Wisconsin. Mr. Speaker, I have a motion at the desk. I am closing. I have an amendment at the desk, Mr. Speaker.

As I indicated, my amendment, Mr. Speaker, would be added onto section 2 of the bill and would just enable childcare centers—TANF to fund childcare centers, which are now under siege and really compromising the security of our children.

The SPEAKER pro tempore (Mr. SIMPSON). Is the gentlewoman asking for unanimous consent to insert the text of her amendment?

Ms. MOORE of Wisconsin. Yes, Mr. Speaker, I ask for unanimous consent.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

Mr. SMITH of Missouri. Mr. Speaker, I object.

The SPEAKER pro tempore. Objection is heard.

Mr. SMITH of Missouri. Mr. Speaker, I reserve the balance of my time.

Ms. CHU. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, the truth is abundantly clear. Both the American Medical Association and The American College of Obstetricians and Gynecologists have raised serious ethical and medical concerns about so-called crisis pregnancy centers.

These facilities are unregulated. They have no obligation to provide accurate medical information. They are not subject to HIPAA. They are not required to protect patient confidentiality. Yet, Republicans are deter-

mined to send them Federal taxpayer dollars anyway.

I talked about this very comprehensive report by the Alliance for Women's Rights and Gender Equality, which studied 607 crisis pregnancy centers across 9 States. They documented patients' experiences at the centers.

In one case, a patient seeking abortion care was misled into believing she was too early in pregnancy to receive medical care and was encouraged to delay seeing a licensed provider, despite experiencing symptoms consistent with a pregnancy complication.

In another documented case, a patient was falsely told that abortion would cause infertility and severe mental illness, information that directly contradicted established medical evidence.

Several patients reported being reassured that severe pain or bleeding was normal, only to later require emergency medical intervention when complications were left untreated.

If Republicans truly cared about TANF oversight, they would have spoken out when millions of TANF dollars were stolen from struggling families in Mississippi to build a volleyball stadium and when the Trump administration stepped in to shield the perpetrators from accountability. Instead, they were silent.

The bottom line is simple. Anti-abortion centers that spread misinformation and put women at risk should not receive taxpayer dollars. Certainly, they should not receive taxpayer dollars that are completely unregulated.

If we want to support parents and pregnant women, let's continue helping them. That is why the House should reject this particular bill, and I urge my colleagues to vote "no."

Mr. Speaker, I yield back the balance of my time.

Mr. SMITH of Missouri. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, Democrats will make all kinds of wild and ridiculous claims about pregnancy resource centers. They have tried to twist giving diapers and ultrasounds to moms into some sort of nefarious activity, giving diapers to moms.

The millions of women who have sought and received care at a pregnancy resource center know the truth. I hope every American is watching this debate today on this floor.

Democrats distract and fearmonger because they can't admit that pregnancy resource centers fulfill the purposes of TANF. These centers provide material support and assistance to women in need and reduce dependence on government assistance. They are eligible for State TANF funds, period.

I thank Representative FISCHBACH for her very hard work on this bill. She has been a champion—a champion for women, mothers, and children her entire career. I am glad she once again led the effort this Congress to preserve funding for pregnancy resource centers.

Mr. Speaker, I yield back the balance of my time.

Ms. DELBENE. Mr. Speaker, I have heard story after story of people seeking care from crisis pregnancy centers only to be provided with misleading or deceptive medical information or services that endanger their health.

That is why during last week's markup on this bill, I introduced a responsible amendment that would have prohibited fraudulent centers from receiving TANF funds funded by taxpayer dollars.

Republicans regularly talk about rooting out government waste, fraud, and abuse, but not a single one supported my amendment.

It's clear that Republicans have no interest in addressing fraud if it conflicts with their dogmatic ideology even at the cost of their constituents' health.

Republicans are outraged at the idea of simply holding crisis pregnancy centers to the same medical standards as licensed health facilities.

Why are Republicans willing to categorically turn a blind eye to the countless horror stories happening at these sham health clinics?

It is because for Republicans, when it comes to women's health, accountability isn't required.

This bill defines pregnancy centers as organizations that support "protecting the life of the mother and the unborn child," but Republican's commitment to funneling taxpayer dollars to medical grifters endangers both.

I urge my colleagues to vote No on this irresponsible bill.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 1009, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

#### MOTION TO RECOMMIT

Ms. MOORE of Wisconsin. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Moore of Wisconsin moves to recommit the bill H.R. 6945 to the Committee on Ways and Means.

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the yeas appeared to have it.

Ms. MOORE of Wisconsin. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

□ 1510

#### PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF THE RULE SUBMITTED BY THE BUREAU OF LAND MANAGEMENT RELATING TO PUBLIC LAND ORDER NO. 7917 FOR WITHDRAWAL OF FEDERAL LANDS; COOK, LAKE, AND SAINT LOUIS COUNTIES, MN

Mr. WESTERMAN. Mr. Speaker, pursuant to House Resolution 1009, I call up the joint resolution (H.J. Res. 140) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Bureau of Land Management relating to Public Land Order No. 7917 for Withdrawal of Federal Lands; Cook, Lake, and Saint Louis Counties, MN, and ask for its immediate consideration in the House.

The Clerk read the title of the joint resolution.

The SPEAKER pro tempore. Pursuant to House Resolution 1009, the joint resolution is considered read.

The text of the joint resolution is as follows:

#### H.J. RES. 140

*Resolved by the Senate and House of Representatives of the United States of America in Congress assembled, That Congress disapproves the rule submitted by the Bureau of Land Management of the Department of the Interior relating to Public Land Order No. 7917 for Withdrawal of Federal Lands; Cook, Lake, and Saint Louis Counties, MN (88 Fed. Reg. 6308 (January 31, 2023)), and such rule shall have no force or effect.*

The SPEAKER pro tempore. The joint resolution shall be debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Natural Resources or their respective designees.

The gentleman from Arkansas (Mr. WESTERMAN) and the gentleman from California (Mr. HUFFMAN) each will control 30 minutes.

The Chair recognizes the gentleman from Arkansas (Mr. WESTERMAN).

#### GENERAL LEAVE

Mr. WESTERMAN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on H.J. Res. 140.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arkansas?

There was no objection.

Mr. WESTERMAN. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of this Congressional Review Act resolution, which would overturn the Biden administration's reckless withdrawal of more than 225,000 acres in the Superior National Forest from mineral exploration and development.

Mr. Speaker, at issue is the Duluth Complex in northern Minnesota, one of the largest mineral deposits on the planet, including the world's largest copper-nickel deposit.

The Federal Government routinely granted and renewed mineral leases to these deposits beginning in the 1960s. Decades of planning, exploration, investment, and environmental reviews have gone into the region, and with good reason.

The minerals in the Duluth Complex include copper, nickel, and cobalt. They are the ones that make up the 21st century economy and help it run. They are the essential inputs for telecommunications devices, cutting-edge defense systems, and much more.

As we are all keenly aware, the Chinese Communist Party has a stranglehold on far too many mineral supply chains. Mining in the Duluth Complex was poised to change that. It was going to help usher in a new era of American mineral dominance and create and support thousands of American jobs. It was going to help end our dependence on foreign adversaries and reorder the entire global mineral market, positioning the United States at the center and driving our rivals to the margins.

When President Biden abruptly closed off 225,000 acres of Federal land in the Duluth Complex for mineral development, he threw a future of American abundance, security, and global leadership into chaos. The decision undermined America's economic, military, and strategic interests and those of our allies.

The minerals in the Duluth Complex are called "critical" for a reason. We need them. The whole world needs them. Nations, businesses, militaries, and individual consumers are going to acquire these minerals. The only question is whether they will be mined here in the United States by American workers, protected by American labor laws, and with the strongest environmental standards and most advanced mining techniques, or not.

The Duluth Complex is also home to a world-class helium reserve, which has attracted investment from investors. Specifically, the withdrawal itself locks up roughly 11,000 acres for helium exploration, blocking development of one of the largest and most concentrated helium deposits in the entire world.

Don't let the rhetoric around this issue confuse what is at stake here. The resolution before us today is about more than just one project. There are two options, Mr. Speaker: mineral dominance or mineral dependence. There isn't a third option, and it is long past time for the Federal Government to act like it.

Our global allies rely on America's leadership. If we are to remain a leader in the global economy, then domestic mineral abundance is a strategic necessity, not a political football.

The resolution before us does not mandate projects, mining sites, firms, or schedules. It simply reverses the Biden administration's unilateral short-circuiting of the normal permitting process.