

In October, the Biden HHS proposed a rule change to a program called Temporary Assistance to Needy Families (TANF). TANF is a federal program that provides time-limited assistance to families who cannot currently meet their needs. The federal government provides grants to states to run the program. According to the <a href="HHS website">HHS website</a>, "States carry out their own programs and decide on things like: Design of program; Type and amount of assistance payments, range of services provided, and rules for determining who qualifies for benefits."

While programs have to meet certain standards, states have long had flexibility to run TANF programs. At least five states (OH, PA, IN, MO, and LA) have made pregnancy help centers that otherwise meet the overall program goals and guidelines eligible to apply for TANF funds, often because they provide material resources and help develop necessary life skills.

While the rule makes several notable program changes that deserve scrutiny, one particular change calls out "crisis pregnancy centers or pregnancy resource centers" <u>claiming</u> that they "likely do not meet the reasonable person standard because the connection to preventing and reducing out-of-wedlock pregnancies is tenuous or non-existent."

It is evident to anyone who does not carry a political vendetta that many pregnancy centers are ideal examples of <u>programs</u> that provide temporary assistance to families in need. But even setting aside the well-documented positive impact of pregnancy help centers to help build strong and healthy families, this rule change is very problematic for several reasons.

- 1. It disrupts the long-held practice of allowing states the flexibility to carry out their own programs and make their own decisions on things like design of program, type of assistance, range of services, and beneficiary rules the very things that HHS cites as instrumental to the program. This is a strong-arm tactic threatening states that chose to partner with pregnancy help centers that they could be subjected to audits and other defenses of the state program. It has an intentionally chilling effect on future states partnering with pregnancy help centers.
- 2. It creates an administrative burden on pregnancy resource centers and other TANF participants at the whim of Washington bureaucrats, effectively putting both the participants and the granting states on notice that they must prepare to defend themselves to federal employees. Many centers are small non-profits who could be forced to hire expensive attorneys and accountants. This shifts focus and funds away from the goal and purpose of providing necessary resources to those in need.
- 3. This is impermissible viewpoint discrimination that singles out organizations that express a pro-life viewpoint. This is unlawful. This proposed rule would hand an inappropriate amount of power to a federal employee to determine whether an organization is a proper partner based on nothing more than the favor of disfavor of the current political administration.
- 4. It is a blatant attack on Ohio's Program.

This transparent action is a continuation of the Biden administration's attack on anyone who doesn't support unrestricted abortion on demand. Pregnancy resource centers provide women and families with actual, life-affirming choices and support, which threatens the abortion industry and its political allies.

The proposed rule should be strongly opposed as written, the life-saving work of pregnancy resource centers should be celebrated, and Ohio should be able to direct its own programs and funding.



Ohio Partners with some pregnancy centers through discretionary TANF (Temporary Assistance for Needy Families) dollars. This funding allows pregnancy centers across the state to increase their capacity to provide comprehensive counseling, mentoring, and support throughout the entire pregnancy and for up to one year following the birth of the baby.

Organizations that provide services for pregnant women (and parents or other relatives caring for children twelve months of age or younger) that both promote childbirth, parenting, and alternatives to abortion, and meet one or more of the four purposes of the Temporary Assistance for Needy Families (TANF) block grant are eligible to apply. They provide parenting classes, referrals for access to prenatal care and other medical and mental health or addiction support services, as well as material needs through the first year of their babies' lives.

In order to qualify for the program, an organization must be a private, not-for-profit entity, whose primary purpose is to promote childbirth, rather than abortion, through counseling and other services, including parenting and adoption support. The organization must provide services to pregnant women and parents or other relatives caring for children twelve months of age or younger, including clothing, counseling, diapers, food, furniture, health care, parenting classes, postpartum recovery, shelter, and any other supportive services, programs, or related outreach, and programs have to be provided at no charge. Participating entities cannot be involved in or associated with any abortion activities, including providing abortion counseling or referrals to abortion clinics, performing abortion-related medical procedures, or engaging in pro-abortion advertising. Finally, they cannot discriminate in its provision of services on the basis of race, religion, color, age, marital status, national origin, disability, or gender.

Ohio has more than 182 pregnancy help organizations – 52 of which are pregnancy resource centers, 89 medical centers, 12 maternity homes, and 29 other supportive services. Not all pregnancy help organizations qualify or have chosen to apply for TANF dollars.

This is just a small investment that Governor DeWine and the Ohio Legislature have made to champion children and families in our most recent budget, which includes: \$16 million to childcare, \$32 million for early childhood education, \$26M in maternal and infant care, \$60 million in foster care, and \$100+ million in Help Me Grow – nearly a 20% increase.

Many of these programs create opportunities for funding with nonprofits that are directly assisting pregnant women and young families who need help and support.

Pregnancy centers have a life-affirming mission, but it is grounded in a genuine desire to help build strong families and support those who need material assistance and community.

Central Ohio pregnancy centers serve thousands of women each year. Many of them are repeat clients, and most of them just need help, referrals, or support and friendship. This is a political narrative that is resulting in acts of violence against pregnancy centers and churches, and it deprives women of alternatives to abortion.

## **Other Important Points**

• Pregnancy Centers require reporting back to the state to demonstrate community impact. After seeing a positive impact on women and children, the governor and the legislature invested in their work to strengthen families, increase healthy pregnancy outcomes, and reduce infant mortality risks.



- Pregnancy Centers have exponentially increased the number of women and children served, invested in wrap-around services and family empowerment, and increased ability to help those with limited English proficiency. These are long-term investments to strengthen families and combat poverty.
- Working with prenatal clinics and OBGYNs, pregnancy centers combat the risks of infant mortality especially pre-term birth and low birth weight.
- More than 98% of those who sought help from a pregnancy center report that they would come back or refer a friend for help.
- Targeting pregnancy help centers highlights the hypocrisy of hyper-partisan abortion advocates who are systematically working to defund and defame programs that offer women alternatives to abortion and help families who want to choose life.
- Pregnancy help centers and other community supportive programs show the long-term commitment of the pro-life movement to help women facing unexpected pregnancies, create stable family environments, and combat infant mortality.