

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF OHIO
WESTERN DIVISION

PRETERM-CLEVELAND, INC.,	:	Case No. 1:18-cv-109
et al.,	:	
	:	
Plaintiffs,	:	Judge; Susan J. Dlott
	:	
vs.	:	
	:	
LANCE HIMES, et al.,	:	<u>DECLARATION OF CHRISSE</u>
	:	<u>FRANCE IN SUPPORT OF</u>
	:	<u>PLAINTIFFS' MOTION FOR A</u>
Defendants.	:	<u>TEMPORARY RESTRAINING</u>
	:	<u>ORDER AND/OR</u>
	:	<u>PRELIMINARY INJUNCTION</u>
	:	

I, Chrise France, pursuant to 28 U.S.C. §1746, declare under penalty of perjury that the following is true and correct:

1. I have read the complaint in this action and verify that all of the facts regarding Preterm are true based either on my personal knowledge or my personal investigation of those facts.
2. I am the Executive Director of Preterm-Cleveland (“Preterm”), which is a plaintiff in this case. I have held this position since 1999.
3. Preterm, a nonprofit corporation organized under the laws of the State of Ohio, has operated a health care clinic in Cleveland, Ohio since 1974. Preterm provides a range of reproductive health services, including family planning services; pregnancy testing; testing and treatment for sexually transmitted diseases; and medical and surgical abortion services. Preterm provides surgical abortions through 21 weeks, 6 days of pregnancy as dated from the first day of the woman’s last menstrual period (“LMP”), and medication abortions through 70 days LMP.

4. As Executive Director, I am ultimately responsible for Preterm's administrative, financial, and clinical operations. Preterm's Chief Financial Officer, Director of Counseling, Director of Clinical Services, Director of Development and Communications, Facilities Coordinator, and Administrative Assistant all report directly to me. Part of my job as Executive Director includes working with my staff and legal counsel to assess the impact of new legislation on Preterm's ability to continue to provide compassionate and high-quality services to our patients. I am familiar with the services we provide and the patients we treat. This declaration is based upon my personal knowledge and knowledge I have acquired in the course of my duties with Preterm. If called and sworn as a witness, I could and would testify competently thereto.

5. In my experience, women decide to have an abortion for many different reasons—usually more than one at a time. For example, some women have abortions because they conclude (based on any number of factors) that it is not the right time in their lives to have a child or to add to their family, or because they do not want to parent at all. Some patients seek abortions after becoming pregnant as a result of rape, or when an underlying medical condition makes continuing a pregnancy dangerous to their health or life. And some patients seek abortions after receiving a fetal diagnosis.

6. Preterm strongly supports a woman's right to make the best decision for her and her family. Our mission is to "advance reproductive health and justice by providing safe, respectful and accessible abortion and sexual health care." In advancing this mission, we work to create a nonjudgmental environment. Our website informs visitors: "We support your choices. We respect your privacy. We're committed to your safety. We trust our patients. Our patients trust Preterm."

7. As part of my role as Executive Director, I am familiar with our clinical protocols and patient counseling procedures. When a patient first calls the clinic seeking an abortion, she is asked several specific questions about her medical history. She is also informed that she must make two appointments—the first for education and informed consent, and the second for the procedure.

8. Women who are seeking abortion due to a fetal diagnosis usually mention this during their initial phone contact. Preterm offers a special program for these women, who are often struggling with difficult emotions around terminating a wanted pregnancy. We advertise this program on our website, and it is known to some of the physicians who refer patients to us. Participation in this program is indicated with a special sheet in the woman's chart.

9. At a patient's first visit to the clinic, she will meet with one of our trained patient advocates for a patient education session. Preterm engages in a non-directive discussion with all women, which means that the patient's wishes and concerns should guide the process and she should not be pushed toward any particular option. This discussion will usually begin by asking the woman an open-ended question like, "What brought you here today?" and asking whether she has considered her other options, such as continuing the pregnancy to term and parenting or placing the child for adoption. Our goal is not to judge the woman's reasons, but to create a safe environment for her to ask questions and to talk about her decision, to the extent she wants to. The purpose of the session is also for us to ensure that her decision is voluntary and informed. If the discussion reveals that a woman is uncertain about her decision, or that she is being coerced or at risk of being coerced, Preterm will not proceed with the abortion.

10. Often, but not always, a patient will disclose her reasons for the abortion during the patient education session. This includes patients who are seeking abortion due to a Down

syndrome diagnosis, as well as other fetal anomaly diagnoses. Ultimately, our goal to provide every woman with any help she might need to reach a decision about her pregnancy and to honor her decision once it is made, recognizing that the woman herself is best able to judge what is right for her and her family. For some women, the right decision will be to parent a child with Down syndrome; for others, it will be making an adoption plan; and for others, the right decision will be terminating the pregnancy.

11. Even though it is a small minority of the patients we see, based on past experience, I am certain that some women will continue to seek abortions at Preterm because of a diagnosis, screening test, and/or some other reason to believe there is fetal Down syndrome.

12. If H.B. 214 takes effect, in order to avoid criminal penalties, civil suits, and disciplinary sanctions against Preterm, as well as against its physicians, Preterm will cease providing abortions to these patients. We will have no choice but to turn them away and refer them out of state. Given that the majority of our patients are low-income, I am very concerned that some of these patients will not be able to afford a multiple-day trip out-of-state to get the abortion, and that some may go to extreme measures to raise the money they need, endangering themselves and their families. I fear that, in their desperation, others may resort to unsafe providers or methods of ending their pregnancy.

/s/ *Chrisse France*

Chrisse France

Date Signed: February 15, 2018