

2009 ANNUAL REPORT

All the news that no one else can print.

Break It Down: Stig·ma·ti·za·tion

People often talk about abortion stigma like the two words go together. Where there is one, the other must naturally follow. Right? Wrong. Shame and secrecy, and the stigma that creates them, are not the natural product of any decision to terminate a pregnancy. They are not unavoidable, and they are often in contradiction with other emotions a woman is feeling: relief, hope, empowerment, perhaps even some pride.

Nearly 50 million women have had legal abortions in the 36 years since Roe v. Wade. Nearly 50 million women with lives, families, jobs, friends, hopes, dreams, and reasons for ending a pregnancy. One in three American women will have an abortion in her lifetime. Abortion is a normal and necessary part of their reproductive lives. Why should there be

stigma associated with such a common experience?

Abortion stigma is the product of deliberate effort, a process of stigmatization. It's a big word, a bit unwieldy, but important to say and sort through.

Stigmatization is practiced visibly by protesters holding signs and shouting at women on their way into clinics, but it is carried out more insidiously through the kind of rhetoric that co-opts the word "life" or claims women who have abortions are selfish or unnatural. Once entrenched, stigmatization is fueled by secrecy and perpetuated by doctors and hospitals that don't offer information about women's options, by misinformative sex ed programs, even by well-meaning supporters who call abortion a "necessary evil."



One in three American women will have an abortion in her lifetime.

Stigmatization has an impact – on women making real life decisions, on medical providers who shy away from providing abortion, and on laws restricting access to care.

Stigmatization is fed by stereotypes and mis-truths. At Preterm we know from daily experience the truth of women's complex lives and thoughtful decisions.

Stigmatization can be halted. The poet Muriel Rukeyser wrote, "If one woman told the truth about her life, the world would split open." She may have been overly optimistic about the power of one voice. But how about 50 million?

stigma n. (plural stigmas, stigmata)

1. *archaic* : a scar left by a hot iron; a brand. 2. A mark of infamy or disgrace; sign of moral blemish; stain or reproach caused by dishonorable conduct; reproachful characterization. 3. an identifying mark or characteristic; a specific diagnostic sign of a disease.

stigmatization n.

1. the developing of or being identified as possessing stigma or stigmata. 2. the act or process of negatively labeling or characterizing another as disgraceful or ignominious.

True Stories: What Preterm Patients Say

"I want to let women know that it's not selfish to put yourself first. If you're not happy, you can't make a baby happy."

"I am a mother of 5, and my youngest is 6 months old. I never ever thought I'd be here. I have a loving husband and a good job. This should qualify me to not need this, right? Not. ... I've been a mother since I hit high school, and I've been through so much learning to be a woman. Unfortunately, my children were dragged along for the ride. Now that I'm older, I owe them a mother who has the time and patience for them and myself, as well as my husband."

"I'm here with my 16-year-old daughter. I had her when I was 17, and I wouldn't want her to go through the same struggles that I went through. I love her so much. I can forgive her, but I will never forget & neither will she, because she is hurting just as much as I am ... I'm only 33. I can't be a grandmother, and at 16 she can't be a mother. She's still my baby. I wish only the best for her."

"I have a chronic illness. When I found out I was pregnant, I struggled to make the 'right' decision – I was directed to specialists to find out the risks of carrying this baby. Unfortunately no specialists were of any help, which led me to this very hard decision. I weighed all of my options and truly feel abortion is the BEST decision for everyone involved, my kids included."

"Wow. I am 18 and this is my second pregnancy. I have a gorgeous daughter who is only 9 months. I live in my own apartment, pay bills, and this is my senior year. I am raising my 8-year-old brother as well. I have goals and dreams. I am an all honor student. And having a 3rd child is not possible for me right now. Doing it all on my own."

Direct Perspective

By Chrissie France
Executive Director

I'm continually amazed at the gratitude that women express because we treat them with kindness, dignity, and respect. I'm proud that we give them



such good care, but I'm also dismayed that so many of them seem genuinely surprised.

"I never got the feeling that I was being looked down on. In my situation, that is an incredible feeling... I did not feel like just another girl, I felt like they personally cared about me, my health, and my dignity. ... Words can't describe my gratitude." – a Preterm patient

What is going on in the lives of women that kind and compassionate care is so unexpected?

I believe that there's a combination of factors involved. Too often and in too many areas of our lives, women aren't treated as valuable and important people who deserve dignity and respect. And too many women have come to mistrust the medical world as a place where they have no power, if it is even accessible to them at all. They've simply never encountered a healthcare provider who takes the time to listen and to see them as whole people. But more than this, when the medical care they're seeking is abortion, women carry with them the weight of the negative stereotypes that permeate our society.

I recently had a conversation with Jamie, a Preterm veteran retiring after 34 years, about how she's glad that women no longer arrive at the clinic fearing illegal abortion and the squalor
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2009: The Year In Review

■ We celebrated our 35th anniversary with a "Thirty-Something Celebration," in collaboration with two sister organizations, the Cleveland Rape Crisis Center and Hard Hatted Women.

■ We partnered with Spence-Chapin, an open adoption agency located in New York, to offer complete adoption services to our clients who want to consider this option.

■ Abortion clinics and supporters throughout the country mourned the loss of respected colleague Dr. George Tiller, who was murdered on May 31, 2009.

■ Hundreds of protesters picketed at Preterm as part of the national "40 Days for Life" campaign.

■ Ohio lawmakers continued to pass anti-abortion legislation, including a law that requires clinics to post signs stating that women cannot be coerced into having abortions.

■ We grew greener by leaps and bounds, installing a reflective roof, energy-efficient boiler and chiller, dual-flush toilets, low-flow faucets, and waiting room recycling centers, implementing environmentally

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More online: Read & Share Abortion Stories, Analyze Stigmatization, Make a Donation
www.preterm.org/report.php

PRETERM-CLINIC PROFILE

In March 2009, Preterm celebrated its 35th anniversary of providing safe, compassionate, high-quality care to the women of Northeast Ohio. We're the largest independent abortion clinic in Ohio, with a staff of 44 skilled and caring professionals.

Clients Served

In the fiscal year ending June 30, 2009, Preterm performed 5,432 abortions, a 9% increase over the previous year. Of those, 584 (10.7%) were medication abortions, 3,748 (69%) were first trimester surgical abortions, and 1,100 (20.3%) were second trimester abortions.

Preterm also provided emergency contraception to 288 women and performed 1,577 walk-in pregnancy tests. The total number of clients we served was 7,880 in 15,551 total clinic visits.

Abortion Funding

Preterm remains committed to providing financial assistance to clients in need. In this difficult financial climate we see more women struggling to meet their families' basic needs, let alone pay for abortion services. Ohio bans Medicaid coverage for abortion, increasing the financial barriers for low-income women to access the care they need.

In the fiscal year ending June 30, 2009, 4,998 women, 92% of our patients, received assistance in the form of subsidies and grants. Preterm provided a total of \$857,322 in financial assistance. This high level of support was made possible by an anonymous



The Preterm staff

grant to the National Abortion Federation's Justice Fund and many individuals and foundations who supported Preterm's Access Fund. We are thankful for their generosity.

Patient Profile

At Preterm we serve women in their teens to their forties, from across the spectrum of race, economic status, family size, religion and political persuasion, each with her own unique story and reason for being here. Of the clients we served this year, 65% had at least one child, 79% had completed high school or beyond, 92% had no insurance to cover their services, and 7% were minors (under 18).

INCOME & EXPENSES	
for fiscal year ending June 30, 2009	
Income	
Fees for medical services	\$1,944,692
Annual contributions & grants*	1,203,983
Other	16,317
	\$3,164,992
Expenses	
Clinic	\$2,553,450
Education & advocacy	31,922
Administration	129,824
Development	134,999
	\$2,850,195
*Includes \$312,296 in capital campaign contributions to Preterm's green transformation	

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2009: The Year In Review

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sustainable operations, and beginning the process of becoming LEED-EB certified.

■ We shared our knowledge at a workshop on greening an abortion practice at the national Abortion Care Network conference, and we helped envision the future at the Sustainable Cleveland 2019 Summit.

■ We opened more lines of communication with our supporters and the community with a new Preterm Facebook page (Facebook.com/Preterm.Cleveland) and regular e-newsletters.

■ We educated 57 medical residents, who came to Preterm to learn about quality abortion care.

■ We updated our mission statement to represent our commitment to the broader reproductive justice movement (see below).

Mission Statement

Preterm advances women's health and reproductive justice by providing safe, respectful and accessible abortion care.

Direct Perspective

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that implied, as they did in the early days. But we agreed that a sense of stigma, the direct result of a sustained campaign by anti-abortion groups, has taken its place.

"I can't even express how compassionate the staff was throughout the whole experience. They treat you with such respect and are extremely informative. I never felt alone during the entire time. I actually cried because of how nice it was to have everyone be so caring." – a Preterm patient

Today's young women have grown up hearing, subtly and not so subtly, that abortion is shameful, and so they come here expecting us to reinforce their sense of shame. When their experience turns out to be just the opposite – when we see them as good women doing the best they can and sit with them and listen without judgment to their stories – they're caught off guard. Perhaps they're thankful as much for the bad they've avoided as for the good they've received.

It is my hope that the women whose lives we touch leave Preterm armed with a sense of their own goodness. I hope that they start to believe that kindness, dignity, and respect are their due. I hope that this sense of empowerment filters through them to the other women in their lives, and that one by one they can say, "I had an abortion, and I am good," and other women will hear it and know the same is true for them.

This is the way we will change the world, one good woman at a time.

Thank You

Our deepest gratitude to the 310 individuals, foundations and organizations who supported our work with contributions to our Access Fund for indigent patients, our general operating fund, and our capital campaign.



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www.preterm.org Facebook.com/Preterm.Cleveland

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