

No. 12-1168

IN THE
Supreme Court of the United States

—
ELEANOR McCULLEN,
JEAN ZARRELLA, GREGORY A. SMITH, ERIC CADIN,
CYRIL SHEA, MARK BASHOUR, AND NANCY CLARK,
Petitioners,

v.

MARTHA COAKLEY,
ATTORNEY GENERAL FOR THE
COMMONWEALTH OF MASSACHUSETTS, *et al.*,
Respondents.

—
ON WRIT OF CERTIORARI TO THE
UNITED STATES COURT OF APPEALS
FOR THE FIRST CIRCUIT

—
**BRIEF OF AMICI CURIAE PLANNED PARENTHOOD
LEAGUE OF MASSACHUSETTS AND PLANNED
PARENTHOOD FEDERATION OF AMERICA IN
SUPPORT OF RESPONDENTS**

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INTEREST OF *AMICI CURIAE*¹

This brief is submitted by the Planned Parenthood League of Massachusetts (“PPLM”) and the Planned Parenthood Federation of America (“PPFA”) as *amici curiae* in support of Respondents. PPLM operates the three reproductive health care facilities in Boston, Worcester, and Springfield that are the subject of petitioners’ as-applied challenge.

Amici urge the Court to affirm the judgment of the Court of Appeals and uphold Chapter 266, Section 120E1/2 of the Massachusetts General Laws (“Public Safety Act” or “Act”). The Act protects the public as well as patients, staff, and volunteers of reproductive health care facilities (“Facilities”), including PPLM’s. As detailed below, the Act followed thirty years of violent protests and patient harassment. Previous legislation, criminal prosecution, and injunctions all failed to keep the peace at PPLM’s Facilities. *Amici* support the rights of protesters to be present and communicate their messages, but they also seek to ensure the safety of PPLM’s patients and staff and maintain access to PPLM’s health centers.

Founded in 1928, PPLM provides sexual and reproductive health services and education

¹ The parties have consented to the filing of this brief, and their written consents have been lodged with the Clerk of the Court. No counsel for a party authored this brief in whole or in part, and no person other than *amici curiae* made any monetary contribution intended to fund the preparation or submission of this brief.

throughout Massachusetts. PPLM receives more than 50,000 patient visits annually throughout the state. Ten percent of PPLM's patients are men.

The majority of patient visits to the three Facilities at issue here are for preventative health care, including routine gynecological care, testing and treatment for sexually transmitted diseases, and cancer screenings. The Facilities in question also provide abortion services, including medically necessary surgical procedures for women who have suffered miscarriages. PPLM operates four other health centers that do not provide abortion services.

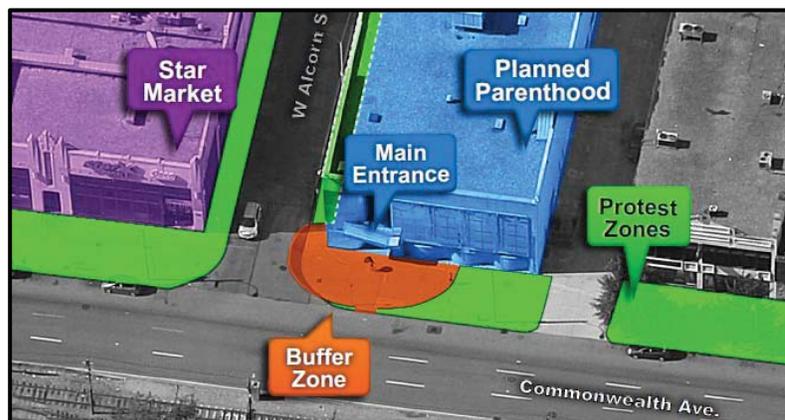
PPFA is a national organization. Its mission is to provide comprehensive reproductive and complementary health care services and education, to provide educational programs relating to reproductive and sexual health, and to advocate for public policies to ensure access to health services. PPFA has 69 local affiliates, one of which is PPLM. PPFA affiliates operate over 700 health care centers throughout the country. One out of every five women in the United States has received care from Planned Parenthood. Several Planned Parenthood centers in addition to PPLM's have been also subjected to violent and obstructive conduct that has prompted the enactment of regulations that seek to balance public safety with the rights of protesters around the country.

STATEMENT OF FACTS

I. The Boston, Worcester, and Springfield Facilities

PPLM operates the three Reproductive Health Care Facilities (“Facilities”) that petitioners target in their challenge to the 2007 “Act Relative to Public Safety” (the “Public Safety Act”). As discussed in Section II below, PPLM’s Boston, Worcester, and Springfield Facilities were subject to violence and congestion in the years preceding the Act. To assist the Court in visualizing these locations, *amici* have attached graphics showing the buffer zones in relation to the buildings, streets, private property and sidewalks at each location. *See* Appendix (“Appx.”) at 8a-10a.

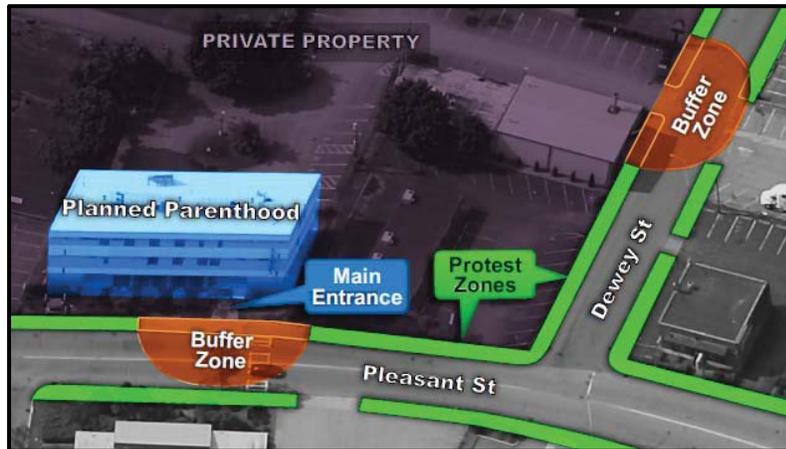
Boston Facility: Front Entrance



The Boston Facility, *see* Appx. at 8a (full graphic), is located at 1055 Commonwealth Avenue, J.A. 293, in a densely populated retail shopping

district. Commonwealth Avenue is a two-way street, with subway tracks running down the center and multiple travel lanes on each side. The sidewalk is approximately 25 feet wide. J.A. 294. A busy supermarket is immediately across a side street, Alcorn Street, and the neighborhood is on the edge of the Boston University campus. All patients and many employees enter through the front entrance of the Boston Facility on Commonwealth Avenue, which is recessed about twelve feet from the front of the building. J.A. 293-94. The Facility also has a rear garage entrance not used by patients. *Id.* Both entrances have buffer zones indicated by painted arcs and signs.

Worcester Facility



Since 2009, PPLM's Worcester Facility, *see* Appx. at 9a (full graphic), has been located in downtown Worcester. Its front door is approximately fifty feet from the sidewalk and is accessed from the street by a walkway passing through two fences located about

40 feet from the door. J.A. 295. There is also a driveway entrance on a side street. Both entrances are protected by marked and posted buffer zones. *Id.*

Springfield Facility



PPLM's Springfield Facility, *see* Appx. at 10a (full graphic), is housed in a three-building medical complex situated among parking lots. Several unrelated medical businesses are housed in the same complex. J.A. 297. The doorways of the Facility are several hundred feet from public roads. *Id.* Of the five driveway entrances to the surrounding parking areas, all have painted lines but only two are posted

under the statute. J.A. 297-98; M.G.L. ch. 266, § 120E1/2(c).

II. The Decades-Long History of Violence and Harassment At PPLM's Facilities

This case arises against a backdrop of decades of harassment, intimidation, obstruction, and violence directed at staff, patients, and volunteers at PPLM's Facilities. Those seeking to prevent individual patients from entering PPLM's Facilities have posed an ongoing risk to the safety of PPLM staff, members of the general public who must traverse the streets and sidewalks on which PPLM's Facilities are located, and patients, the majority of whom are seeking routine preventive health care and not abortion services.

A. Violent and Obstructive Behavior Before Enactment of the 2000 Buffer Zone Law

In the late 1980s, PPLM became one of the earliest targets of invasions and blockades by Operation Rescue, an organization dedicated to curtailing access to abortion. Hundreds of Operation Rescue protesters physically blockaded PPLM's Facilities, including one then located in Brookline, Massachusetts, a town adjacent to Boston. (PPLM's Boston Facility is the successor to the Brookline Facility.) Protesters lay on the ground in front of Facility entrances and entered them to block examination rooms. They chained themselves to each other, to doors, and to fixtures inside operating rooms. Operation Rescue once sent 75 decoys to one

Facility in an attempt to draw police away from the nearby entrance to another. *See PPLM v. Operation Rescue*, 550 N.E.2d 1361, 1363-64 (Mass. 1990); *PPLM v Blake*, 631 N.E.2d 985, 989 (Mass. 1994). On several occasions, the Brookline Police were forced to arrest up to 200 protesters. *See, e.g., Sara Rimer, Brookline Shows Fervor In Keeping Clinics Open*, N.Y. Times, Jan. 3, 1995, at A12.

In October 1991, PPLM obtained a permanent injunction against Operation Rescue, William Cotter and others. *See Operation Rescue*, 550 N.E.2d at 1371 (affirming preliminary injunction); *Blake*, 631 N.E.2d at 994 (affirming permanent injunction). Massachusetts courts also issued injunctions prohibiting specific individuals from engaging in violent harassment and intimidation at the Facilities. *See, e.g., PPLM v. Bell*, 677 N.E.2d 204 (Mass. 1997) (affirming 1994 injunction); *Commonwealth v. Manning*, 673 N.E.2d 73 (Mass. App. Ct. 1996) (affirming conviction for violating 1991 injunction); *Commonwealth v. Filos*, 649 N.E.2d 1085 (Mass. 1995) (affirming conviction for violating 1991 injunction); *Commonwealth v. Cotter*, 612 N.E.2d 1145 (Mass. 1993) (affirming conviction for violating 1990 injunction); *Commonwealth v. Brogan*, 612 N.E.2d 656 (Mass. 1993) (affirming conviction for violating 1990 injunction); *see also PPLM v. Operation Rescue*, No. 89-2487-F (Mass. Super. Ct. Oct. 17, 1991) (permanent injunction enjoining 66 individuals and three entities).

On December 30, 1994, John Salvi went on a shooting rampage in two Facilities in Brookline. Salvi killed a PPLM employee, Shannon Lowney,

and an employee of another abortion provider, and injured five other people. J.A. 57-59; *see also* Beth Daley, *Shootings Renew Women's Anxiety*, Boston Globe, Jan. 1, 1995, at 1. The protesters outside PPLM's Brookline Facility had labeled twenty-five-year-old Lowney – the receptionist and Spanish translator at the center – “Public Enemy #1” because she was the person who opened the doors each day. J.A. 58. *See* National Abortion Federation, History of Clinic Violence, <http://www.prochoice.org/about-abortion/violence/murders.asp> (last visited Nov. 20, 2013) (describing history of murders and shootings at Facilities).

After the issuance of a permanent injunction against Operation Rescue, the protesters modified their tactics, initiating a campaign of harassment targeted at anyone entering or leaving the Facilities. Protesters would stand “shoulder to shoulder” verbally abusing patients. They would “walk[] in front of them thrusting literature or graphic pictures in their face.” J.A. 14, 15. One staff member recalled an instance where three protesters stood in a row, blocking the entrance and forcing the staff member to “squeeze between them” to enter the building. J.A. 16-17.

Protesters also harassed the companions of patients, including children and elderly people. Protesters in Boston once “engulfed” a taxi that had pulled up at the curb, trapping a young woman and her grandfather inside. J.A. 21-22. When the two managed to extricate themselves from the cab, the protesters shoved the grandfather, who walked with a cane. J.A. 21-22.

This incident was not the only time when patients or staff who arrived at the Boston Facility by car were subjected to harassment and obstruction. Protesters surrounded the car of PPLM's medical director, screaming out her name, calling her a murderer, and targeting her with an explicit death threat. J.A. 12.

The situation was no better at PPLM's Worcester Facility, where protesters vandalized the Facility, smashed windows, threatened patients and staff arriving at the Facility, and made bomb threats. Protesters punched and surrounded cars and blocked access to the garage card reader. J.A. 18-20. They blockaded the driveway, obstructing access to the parking lot and impeding the flow of traffic. J.A. 18. This activity caused at least one accident. J.A. 19. The Worcester Police repeatedly removed blockading protesters from the facility's driveway. J.A. 18-19.

The Springfield Facility has also been a target of aggressive protest. The Springfield Facility, which shares a building with other medical providers, is surrounded by private parking lots. J.A. 197, 297. In the 1990s, protesters intruded into the parking lot to prevent staff and patients from entering the building. They also stood in the driveway, attempting to drop pamphlets through the open windows of moving cars.

The harassment and abuse of patients outside of PPLM's Facilities caused patients to experience stress, anxiety, and fear. J.A. 15, 23-24, 86. There is abundant evidence in the medical literature that a patient subjected to emotional stress right before

surgery is at risk for increased physical pain or other complications. *See, e.g.*, Guy H. Montgomery, et al., *Presurgery Psychological Factors Predict Pain, Nausea, and Fatigue One Week After Breast Cancer Surgery*, 39(6) *J. Pain & Symptom Mgmt.* 1043 (2010); Paula M. Trief, et al., *A Prospective Study of Psychological Predictors of Lumbar Surgery Outcome*, 25(20) *Spine* 2616 (2000); Aleksander Perski et al., *Emotional Distress before Coronary Bypass Grafting Limits the Benefits of Surgery*, 136(3), *Am. Heart J.* 510 (1998). These risks are especially acute for patients who are already distressed and grieving following miscarriages of wanted pregnancies.

B. Enactment of the 2000 Buffer Zone Law

In response to the widespread violence, harassment, and intimidation at the Facilities, the Massachusetts legislature held hearings on a bill to establish a buffer zone around Facility entrances and driveways. *See An Act Relative to Reproductive Health Care Facilities*, S.148, 181st Gen. Ct. (Mass. 2000); *Buffer Zones: Havens for Women or Impediments to Free Speech?*, State House News Service (“SHNS”), April 15, 1999. Witnesses testified about the violent and aggressive protests that plagued the Facilities, “the emotional and physical vulnerability of women seeking to avail themselves of abortion services,” and “the deleterious effects of overly aggressive demonstrations on patients and providers alike.” *McCullen v. Coakley* (“*McCullen I*”), 573 F. Supp.2d 382, 387 (D. Mass. 2008); *see* J.A. 12-24 (excerpts of the written testimony submitted to the committee).

Law enforcement officers testified that existing criminal laws were inadequate to maintain the peace around the Facilities. *See, e.g.*, SHNS, April 15, 1999.

The bill that advanced out of committee received broad bipartisan support in the legislature, including from legislators who opposed abortion but backed the measure as a matter of public safety in what had become “war zones.” *See* Massachusetts House Journal Supp., 181st Gen. Ct. (July 28, 2000) (passing 107-48); Massachusetts Senate Journal, 181st Gen. Ct. (February 29, 2000) (passing 27-12); Letter from Representative Angelo, et al., to Thomas Finneran Speaker of the Massachusetts House of Representatives (June 29, 2000), http://www.massnews.com/past_issues/2000/7_July/julbu2.htm (last visited Nov. 20, 2013) (noting that bill was supported by House members opposed to legal abortion). The bill had the support of the Massachusetts Attorney General, several district attorneys and police chiefs, SEIU Local 285, the Massachusetts Nurses Association, the Massachusetts Medical Society, and several dozen other community organizations, as well as “80% of Massachusetts residents.” *Id.*

After passage of the Act Relative to Reproductive Health Care Facilities (the “2000 Act”), Republican Governor Paul Cellucci signed it into law. Mass. St. 2000, ch. 217. The 2000 Act created an 18-foot fixed buffer zone around entrances to the Facilities. Within the zones, no person could “knowingly approach another person or occupied motor vehicle within six feet of such person or vehicle, unless such

other person or occupant of the vehicle consent[ed].”
Id.

A group of three protesters (including one of the petitioners here) unsuccessfully challenged the constitutionality of the 2000 Act. *McGuire v. Reilly* (“*McGuire I*”), 260 F.3d 36 (1st Cir. 2001) *McGuire v. Reilly* (“*McGuire II*”), 386 F.3d 45 (1st Cir. 2004), *cert. denied*, 544 U.S. 974 (2005).

C. Protests After Enactment of the 2000 Buffer Zone Law

After the 2000 Act took effect, protesters again modified their tactics. Instead of “approach[ing]” patients and staff in violation of the statute, they simply stood as a body near the Facility entrances and did not move, requiring patients and staff to pass by or through a knot of protesters to enter. Thus, aggressive, intimidating, and obstructive protests continued. *See* J.A. 73, 99, 123.

At the Boston Facility, protesters and counter-protesters (supporting the right to choose abortions) gathered outside the Facility’s entrance on the second Saturday of each month. J.A. 27. Those seeking to discourage abortions would focus on identifying prospective patients and then “dog them” until they reached the buffer zone. J.A. 28-29. They sought to “prevent people from entering the clinic” and “antagonize[d] everybody coming in.” J.A. 72, 86-87. Four protesters stood on the curb so that patients could not exit vehicles that had pulled up to the street entrance. J.A. 86. Inside the buffer zone, the protesters positioned themselves and their signs

to impede people attempting to enter the facility. J.A. 44, 123-24. Protesters inside the buffer zone and within six feet of patients screamed at patients through megaphones, but without ever “approach[ing].” J.A. 96.

One group of pro-choice counter-protesters, the “Pink Group,” pushed and shoved others inside the buffer zone to get a good position. J.A. 123. At times, the jockeying among protesters and counter-protesters inside the buffer zone culminated in fist fights. *See* Michele McPhee, *Abortion Clinics Lack Real Buffer*, Boston Herald, Jan. 15, 2007, at 4.

Protesters attempted to force literature into the hands of unwilling recipients. J.A. 44. Other protesters at the Boston Facility wore Boston Police Department hats and shirts and stationed themselves, carrying clipboards, at the garage entrance. J.A. 98, 124. They demanded contact information from people trying to get into the building. J.A. 62. These protesters persisted in this intimidating and deceptive conduct despite several arrests. J.A. 71.

When it rained, “umbrella wars” erupted, with protesters using umbrellas to “knock [volunteer patient] escorts out of the way.” J.A. 44-45, 85. Protesters spit at escorts while they were assisting patients to the Facility entrance. J.A. 44. The area in front of the pedestrian entrance of the Boston Facility was still a free-for-all. J.A. 69. “[M]ale companions of the patients [would] enter into verbal confrontations” with the protesters, and protesters

and patient companions jostled each other. J.A. 123, 127.

At the Worcester Facility, one protester would stand in the middle of the driveway to block cars from entering the parking lot. J.A. 99. Protesters at the Springfield Facility also blocked cars from entering the Facility's parking lots. J.A. 118-19. PPLM continued to spend over \$300,000 each year on security across its Facilities to keep patients, staff, and volunteers safe. J.A. 60-61.

Because the 2000 Act prohibited only "knowing[] approach[es]," the police encountered obstacles to enforcement. *See* J.A. 69, 96, 126. The police commander in charge of the area in which the Boston Facility was located testified that "what an approach is is very hard to determine Basically, it turns us into basically something like ... a basketball referee down there, where we're watching feet, we're watching hands." J.A. 67. Protesters found that they could violate the law with impunity. As a result, patients, staff, and passersby confronted the same safety risks outside of Facility entrances and driveways as they had before the law was enacted. J.A. 96.

D. Enactment of the 2007 Public Safety Act

In 2007, legislators introduced Senate Bill 1353, "An Act Relative to Public Safety," to create a fixed buffer zone within a 35-foot radius from the entrance to a Facility. The Legislature's Joint Committee on Public Safety and Homeland Security received

testimony from police that the 2000 Act had not succeeded in stopping threatening and obstructive tactics. Boston Police Captain William D. Evans testified, for example, that police had “tried everything,” and that the only thing that would keep patients safe was “to establish a fixed zone” because “[t]hat way there’s no watching feet, watching hands, and allowing protesters up in their face.” J.A. 69-70.

“An Act Relative to Public Safety at Reproductive Health Care Facilities” (“Public Safety Act” or “Act”) passed with bipartisan support – including from legislators opposed to abortion – on November 8, 2007. *See, e.g.*, Massachusetts House Journal Supp., 185th Gen. Ct. (Nov. 1, 2007) (identifying 122 legislators who voted for Act and 28 who voted against). *Compare id. with* Appx. at 4a-7a (excerpts and key from NARAL Legislative District Analysis analyzing views of members of Massachusetts House; showing that 14 supporters of the Act opposed abortion while 15 had “mixed” views”). *See* Chapter 155 of the Acts of 2007 (codified as amended at M.G.L. ch. 266, § 120E1/2 (2007)).

E. Success of the Public Safety Act

The Public Safety Act has succeeded where earlier efforts failed. Protests and communication outside the Facilities continue, but no longer at the expense of public safety and Facility access. For example, the “atmosphere outside the [Boston] clinic has been much more orderly,” with “fewer confrontations between protesters and people walking to the clinic.” J.A. 126.

Protesters are still present at all three PPLM Facilities. In Boston, protesters are present daily. Petitioners continue to distribute flyers and other literature. J.A. 181. On the second Saturday of each month, thirty to forty protesters congregate outside the Boston Facility. J.A. 191. Any patient entering the Facility must pass by the protesters standing at the perimeter of the buffer zone.

In Worcester and Springfield, most patients still arrive by car and enter private parking areas through driveways. But protesters, including petitioners Shea, Clark, and Bashour, continue to speak, pray, and hold signs at the parking lot fences, along the street, and opposite the driveways. In addition to several year-round “regulars,” as many as 100 people gather outside the Worcester Facility for the semi-annual “40 Days for Life” protests. J.A. 229-30. Petitioner Shea identified twenty people who protest at the Springfield Facility. J.A. 206-13. Patients sometimes walk from the parking lot to the protesters to speak or receive literature. J.A. 213, 223-24, 227, 256.

“Sidewalk counsel[ors]” such as petitioners, Pet.Br. at 9, continue to work alongside more aggressive and intimidating protesters, supplementing the tactics of other protesters with public prayer and what they characterize as “peaceful,” “gentle” and “quiet” communications with patients. *See, e.g.*, Pet.Br. at i, 11, 40, 51; J.A. 133.

The Public Safety Act has not prevented petitioners from conveying their messages to patients. Petitioner McCullen testified that, during

the three-and-one-half years after the current law went into effect, she persuaded eighty women not to terminate their pregnancies. J.A. 148. Petitioner McCullen works with William Cotter of Operation Rescue, reporting to him when she has successful interactions with prospective patients. J.A. 142. Petitioner Cadin estimated that during this same period, he persuaded more than ten women not to have an abortion. J.A. 172. Petitioners Clark and Bashour testified that their activities at the Worcester Facility had dissuaded approximately ten women from abortions. J.A. 227, 230, 255, 261.

Each petitioner believes that she or he has a unique message or approach and would like to stand very near to a Facility's entrance to convey that message most effectively. J.A. 133, 163, 176, 189, 200, 217. All seek to be in close proximity to patients, including, in petitioner McCullen's case, to "put her arms around" patients. J.A. 146. In addition to Ms. McCullen's own efforts, other protesters – whom she described as "disruptive," "over the top," and "counterproductive" – continue to be present. J.A. 149-50.

Without the Act, petitioners, along with colleagues they deem "disruptive," *id.*, would again be competing for the space immediately outside Facility entrances and driveways, preventing safe access.

III. The Use of Escorts at the Boston Facility

Many patients are accompanied to PPLM Facilities by spouses, children, parents, or friends.

Some of these companions have entered into physical conflict with protesters while trying to shield patients. J.A. 95-96, 127. In the fall of 1988, PPLM began asking volunteer escorts to help patients and their companions find their way past the gauntlet of protesters to the entrance of the Brookline (now Boston) Facility on busy Saturdays.

PPLM uses escorts only at the Boston Facility, and only on Saturday mornings. C.A.App. 490.²

Escorts receive training in how to assist patients to enter and exit the Facility safely. *See, e.g.*, Appx. 1a-3a (excerpts from escort training Powerpoint presentation). Escorts are trained to stand outside the buffer zone. When a prospective patient asks for or seems to need assistance, an escort greets her and asks whether she would like to be escorted. If the patient requests assistance, the escorts will typically bring her to the edge of the buffer zone or, if further assistance is needed, accompany the patient to the door of the building, open the door, and return to the area outside the buffer zone.

PPLM emphasizes that not all patients need or want escorts. *See id.* at 1a-3a; *cf.* J.A. 103 (PPLM's security contractor never personally observed an escort accompany a patient through the buffer zone). If the patient declines assistance, the escorts do not interact further with her. Escorts are prohibited from interrupting any conversation between a

² "C.A.App." refers to the Joint Appendix filed in the First Circuit in *McCullen v. Coakley* ("*McCullen II*"), 708 F.3d 1 (1st Cir. 2013).

patient and a protester. Appx. at 2a. Their training is designed to ensure that they respect each patient's choices about whether and how to enter the building.

Escorts are trained not to engage with protesters or discuss protesters' comments with any patient. *Id.* They are also prohibited from taking or asking to take away leaflets, flyers, or other material from any patient who wants to retain such materials. *Id.* They are not permitted to express views about abortion, nor can they attempt to counsel a patient concerning an abortion decision. *Id.* Nor, in any event, could escorts assume that the patients they are assisting are contemplating abortion; as noted above, *supra*, p.2, the majority of Facility patients are there to receive preventive health services such as routine gynecological care and cancer screenings.

Petitioners attempt to cast PPLM's escorts as abortion advocates or counter-protesters. This characterization of the escorts is inconsistent with the purpose of the escorts, the training that PPLM provides for them, and PPLM's knowledge of what actually happens outside of the Boston Facility. *See, e.g.,* C.A.App. 490 (role of escorts is to assist patients into buffer zone).

SUMMARY OF ARGUMENT

Decades of violence and obstruction of entrances by protesters at Facilities in Massachusetts persisted notwithstanding arrests, convictions, injunctions, and previous legislative action. The Massachusetts legislature concluded that the best way to ensure public safety and access to the

Facilities, while respecting the First Amendment rights of opponents of abortion, was simply to create a relatively small space in front of the entrances where people may not enter or congregate. The challenged Public Safety Act passed in 2007 with bipartisan support, including the support of legislators opposed to abortion. There is no evidence that the legislature hoped to, or did, quell abortion-related protests.

The Public Safety Act's prohibition on entry into a fixed 35-foot area surrounding Facility entrances during business hours is not a novel regulation. Prohibitions on congregating in front of certain buildings are commonplace. Government office buildings, including, for example Congress and this Court, often limit activity in the areas surrounding their entrances.

The petitioners in this case make two arguments against the content-neutrality of this law. First, they contend that the act is invalid because it only protects the entrances to reproductive health care facilities. But it is precisely those Facilities – and only those Facilities – where the problem existed. It would have made no sense for the legislature to limit entering or congregating in an area in front of every office building or every medical office in the Commonwealth. This law is narrowly tailored to deal precisely with the core public safety problem that existed. The fact that it is not unnecessarily broad is a virtue, not a vice.

The petitioners' second objection is to one of the Public Safety Act's exceptions, which permits

“employees or agents of such facility acting within the scope of their employment” to enter the proscribed area. But with any rules limiting access to areas in front of building entrances, some logistical exemptions are necessary. This exception permits, for example, the clearing of snow from the sidewalk. There is nothing unusual or suspicious about this exception, which is similar to those found in other buffer zone regulations.

Nor does the “employee or agent” exemption have the practical effect of favoring speech on one side of the abortion debate. Petitioners place great emphasis on the use of volunteer escorts who assist patients attempting to access the Boston Facility. These escorts – *who are used only at one location and only on Saturday mornings* – do not invalidate this law. The escorts are specifically instructed not to advocate any message within the buffer zone. If they did, such advocacy would not be within the scope of their employment, as required by the exemption.

Petitioners also argue that the Public Safety Act is not narrowly tailored and fails to leave open alternative channels of communication. Yet the buffer zone instituted by the Act is precisely tailored to address the core problem of blockaded or congested entrances to the Facilities. The Public Safety Act has not limited petitioners’ speech in any way except to require that it (like other pedestrian activities) not occur right at the entrances of the Facilities. Outside that small area, petitioners can and do engage in all activities that they engaged in before. When patients are approached, the willing

listeners among them can and do stay to listen, while unwilling listeners proceed to enter the Facility. The First Amendment does not preclude this commonsense regulation.

ARGUMENT

I. **The Act is a Content-Neutral Regulation of Conduct that Addresses a Long-Standing Public Safety Problem.**

For decades prior to enactment of the Public Safety Act, Massachusetts was plagued by violence, intimidation, and harassment outside the Facilities. An earlier buffer zone law, other general laws, and particularized injunctions all failed to address this critical problem.

Massachusetts responded with the bipartisan Public Safety Act, supported by state law enforcement personnel and by legislators on both sides of the abortion issue. The Act provides that, during business hours:

No person shall knowingly enter or remain on a public way or sidewalk adjacent to a reproductive health care facility within a radius of 35 feet of any portion of an entrance, exit or driveway of a reproductive health care facility

M.G.L. ch. 266, § 120E1/2 (2007). On its face, the Act is neutral as to speech; consistent with its public safety purpose, it prohibits congregation, not speech, outside Facility entrances. *Cf. Hill v. Colorado*, 530 U.S. 703, 747-48 (2000) (Scalia, J., dissenting)

(statute is content-based because it singles out oral protest, education and counseling for prohibition within buffer zone).

It is true that as a consequence of the Act's prohibition on congregation outside Facility entrances, the time and place in which people may protest outside the Facilities are incidentally affected. But the Act does not regulate any method of protest or any particular message, whether conveyed by petitioners or by pro-choice protesters like the Pink Group. Because the prohibition is "directed at ... abusive practices and not at any particular message, idea, or form of speech, the regulation is a content-neutral rule." *See Int'l Soc'y for Krishna Consciousness, Inc. v. Lee*, 505 U.S. 672, 706 (1992) (Kennedy, J., concurring) *citing Ward v. Rock Against Racism*, 491 U.S. 781, 791 (1989).

Petitioners challenge the content-neutrality of the Act on two grounds: it applies only to reproductive health care facilities, and it includes an exception for employees and agents. Pet.Br. at 22-32. As shown below, petitioners' challenges are without merit.

A. The Act's Limitation to Reproductive Health Care Facilities is a Neutral and Appropriate Response to the Problem of Obstructed Access to These Facilities.

Petitioners argue that the Act is content-based because it applies only to these Facilities, while the legislature's stated interests in avoiding violence and obstruction apply to every building in

Massachusetts. Pet.Br. at 24. This ignores the historical reality in Massachusetts, as well as the nature of the Act. Only Facilities such as PPLM's have been plagued by violence and obstruction of access despite injunctions, arrests, and prior legislation.

The legislature responded to these problems by enacting a narrowly tailored buffer zone. The Act regulates obstructive and dangerous conduct, clearing doorways and driveways for safe passage. It applies only to the Facilities because the problem and the risk to public safety addressed by the Act are only presented in these locations. Were other locations to become targets for the kinds of harassment routinely deployed at the Facilities in question, the legislature should and no doubt would respond accordingly. Nobody should have to endure the threats and harassment that were commonplace at the Facilities prior to enactment of the Public Safety Act.

There is no evidence that Massachusetts selectively permits blockades of other buildings, nor is there any evidence that the Act was motivated by animus toward abortion-related speech. On the contrary, during the legislative process, the Act enjoyed bipartisan support, including from legislators who *oppose* abortion. *Supra*, p. 15. The legislature heard evidence that both anti-abortion protesters and pro-choice counter-protesters were creating problems, and the Act applies equally to all, including counter-protesters such as the "Pink Group." *Supra*, p. 13.

A statute is content-neutral when, as here, it has its origins in a legislative purpose that does not arise from disagreement with the underlying message of particular speech and advances interests unconnected to expressive content. Here, the legislature was concerned with public safety and access to private medical facilities. *Ward*, 491 U.S. at 791. The situation is similar to that in *Ward*, where noise regulations only at a specific park, and not other parks, were justified by that park's proximity to residential areas. *Id.* at 792. Similarly, after the City of Renton determined that adult movie theaters were associated with increased crime, its zoning ordinance governing the location of adult theaters, and no other theaters or buildings, passed constitutional muster. *City of Renton v. Playtime Theatres, Inc.*, 475 U.S. 41, 47-50 (1986). When the Town of Brookfield sought to regulate picketing in residential neighborhoods after receiving complaints, it did not also regulate picketing in front of businesses or government buildings. That ordinance, like the other regulations, did not violate the First Amendment. *Frisby v. Schultz*, 487 U.S. 474, 482-88 (1988).

A statute's constitutionality does not depend upon a showing that the particular conduct being regulated has no association with a particular subject or opinion. *See Ward*, 491 U.S. at 791. In addressing the public safety problems arising from protest outside Facilities, the Act may affect those who wish to protest outside such Facilities. But there is no First Amendment violation in regulating the places where the public may congregate, nor is there discrimination in focusing the legislative

response on the only locations where this public safety issue has arisen. *See Madsen v. Women's Health Ctr.*, 512 U.S. 753, 762-63 (1994) (upholding buffer zone injunction despite impact on abortion-related protest); *Ward*, 491 U.S. at 791 (“A regulation that serves purposes unrelated to the content of expression is deemed neutral, even if it has an incidental effect on some speakers or messages but not others.”).

B. The Statutory Exemptions are Logistically Necessary for a Fixed Buffer Zone of General Applicability.

This Court’s precedent establishes that a law of general applicability such as the Public Safety Act is less likely to impair free speech than individually tailored injunctions. *Madsen*, 512 U.S. 753, 769-70 (1994) (upholding injunction imposing 36-foot buffer zone around entire property line of facility providing abortions). But it is obvious that a generally applicable buffer zone will lead to nonsensical results unless it includes certain exceptions. Patients and staff must be able to get into and out of the building. Police officers, firefighters, and utility workers must have access to perform their functions. Pedestrians traversing the sidewalk past a Facility must be allowed through the buffer zone. And employees and agents of a Facility must perform tasks essential to the functioning of the Facility, such as maintaining the entryway, clearing trash, and removing snow and ice.

Unsurprisingly, these are exactly the exceptions set forth in the Act, which exempts from the bar on presence within a buffer zone the following:

- (1) persons entering or leaving such facility;
- (2) employees or agents of such facility acting within the scope of their employment;
- (3) law enforcement, ambulance, firefighting, construction, utilities, public works and other municipal agents acting within the scope of their employment; and
- (4) persons using the public sidewalk or street right-of-way adjacent to such facility solely for the purpose of reaching a destination other than such facility.

Mass. Gen. Laws c. 266, §120E1/2(b)(1)-(4).

Petitioners' facial challenge relies heavily on the exception for "employees or agents" (Subsection (b)(2)). But that exception is entirely unremarkable – indeed, it is a foregone conclusion – in the context of a generally applicable bar on presence in or near a Facility entrance. Employees must be able to perform such routine but critical functions as shoveling snow and making repairs. There is simply no evidence that the legislature included the employee exemption to favor one side of a debate, rather than for this obvious and practical reason.

Petitioners' logic also proves too much. Petitioners do not challenge the exemption allowing those entering a Facility to cross the buffer zone

(Subsection (b)(1)), even though people voluntarily entering the building – to obtain health services themselves, or to accompany patients – may hold views opposed to petitioners’. Both exceptions serve “purposes unrelated to the content of expression” and must be “deemed neutral,” even though they may have “an incidental effect on some speakers or messages but not others.” *Ward*, 491 U.S. at 791.

There is nothing unusual about the employee exception in the Public Safety Act. Regulations that restrict unfettered public access to certain places commonly permit employees and agents of the protected entities to conduct activities in areas from which others are excluded. *See, e.g.*, 40 U.S.C. § 6131 (limiting only “public” travel and occupancy of Supreme Court grounds); 40 U.S.C. § 5103 (same, U.S. Capitol Grounds). Several of the time, place, and manner regulations that keep the peace on this Court’s grounds apply only to the public and not to Court employees or others with official business. For example, this Court’s Building Regulation Seven, which curtails “demonstration” on the Court’s grounds, permits “[t]he Supreme Court [to] ... make exceptions to this regulation for activities related to its official functions.” *Supreme Court Building Regulations*, Regulation Seven available at <http://www.supremecourt.gov/publicinfo/buildingregulations.aspx>. And the Marshal may close the grounds of the Court entirely “to the general public” – even while admitting first responders, maintenance workers, and Court employees. *Id.*, Regulation Two. Regulations like these are not content-based.

Employee exceptions are a logical and practical necessity of generally applicable buffer zones. A ruling invalidating the Act because of the employee exception would cast all such generally applicable restrictions into doubt.

C. The Use of Escorts at One Facility Does Not Render the Act Unconstitutional As Applied.

Petitioners' criticism of PPLM's use of escorts – who are present only at the Boston Facility, and only on Saturday mornings – does not provide a reason to invalidate the Act. Petitioners' argument amounts to an as-applied challenge to the content-neutrality of the employee-and-agent exception: petitioners argue that the exception allows PPLM's volunteer escorts a privileged position to broadcast their viewpoint within the buffer zone. But that argument does not stand up to factual or legal scrutiny.

As detailed below, there is simply no evidence of content-based discrimination within the buffer zone. The guidance of the Massachusetts Attorney General specifically forbids such discrimination, explaining that subsection (2) of the Act does not permit Facility employees or agents to “express their views about abortion or to engage in any other partisan speech within the buffer zone.” J.A. 90-94. Even without that guidance, however, petitioners have not shown, and the court below did not find, the requisite “pattern of unlawful favoritism.” *See Thomas v. Chicago Park Dist.*, 534 U.S. 316, 325 (2002).

Contrary to petitioners' suggestion, there is nothing nefarious about the escorts who assist patients seeking to enter the Boston Facility on Saturday mornings for a variety of services, including cancer screenings and routine gynecological care. The entrance to that Facility is located on a busy sidewalk directly next to a supermarket, and is recessed approximately twelve feet into the building. *See Appx. at 8a.* Particularly on weekends, with many shoppers and other pedestrians passing by, the Facility entrance can be difficult to locate.

On Saturday mornings in Boston, the escorts function like ushers in a theater: they help people figure out where to go and keep foot traffic moving.

PPLM's escorts are trained not to engage in any form of advocacy. Thus, they do not:

- Interrupt people willingly talking to protesters;
- Force conversation with patients or counsel patients;
- Express any views about abortion or engage in partisan speech;
- Take from patients literature protesters have handed them; or
- Respond to protestors in any way.

Appx. at 2a. Any advocacy within or without the buffer zone is outside the scope of the escorts' duties and contrary to their training.

Notably, PPLM's escorts are stationed *outside* the buffer zone, in an area not regulated by the Act. J.A. 103. They traverse the buffer zone only when a patient requests or seems to need help.³ In this sense, they perform the same function as the family members, partners, and friends who accompany some patients to the Facilities; they enter the buffer zone briefly at the patient's request, and only at the patient's request.

Outside the buffer zone, escorts are on equal footing with petitioners, except that petitioners are there to engage in expressive activity, while the escorts are trained not to do so. Escorts make contact with patients only to see if they would like assistance. A patient approaching the buffer zone is free to engage in face-to-face conversation with petitioners and turn away from PPLM's Facility, or

³ Petitioners concede in their declarations that the initial contact between escort and patient occurs *outside* the zone; that is where the patient decides whether she wants assistance from an escort or not. *See, e.g.*, J.A.189-90 (averring that escorts "approach the person *outside* the zone and then walk with the person past the buffer line and up to the door of the clinic") (emphasis added); J.A. 166 (alleging that escorts approach *outside* the zone); J.A. 178 (same). In contrast, Petitioners' brief goes well beyond the support found in the record in claiming that the Facilities "regularly station escorts in the exclusion zones." Pet.Br. at 14. The assertion that the practice occurs, or is in any way regular, is wholly unsupported by the citation that petitioners provide for this claim: a single photograph.

to request the assistance of an escort and enter it, or, of course, to enter the Facility on her own. It is entirely the patient's choice to enter the buffer zone or, after entering, to change her mind and leave it. The activities outside the buffer zone, as well as the patient's choice whether or not to proceed through it to the Facility, are entirely unregulated by the Public Safety Act.

Petitioners have made a handful of specific claims of misconduct by escorts, alleging that escorts have prevented petitioners from "placing literature near the hands of potential recipients," or made improper statements to patients. Pet.Br. at 28. Any such activity by escorts would be contrary to their training. And though petitioners do not specify where such conduct is alleged to have occurred, they almost certainly are complaining of activity outside the buffer zone, the only area where petitioners would be in a position to hand literature to patients. Activity *outside* the buffer zone does not bear on the constitutionality of the Public Safety Act.⁴

⁴ Should the Court find that the transient presence of escorts in the buffer zone at the Boston Facility on Saturday mornings offends the First Amendment, the second exemption should be interpreted to exclude escorts so as to uphold the Act, consistent with the longstanding principle that favors interpreting a statute in a manner that preserves its constitutionality. *See Frisby*, 487 U.S. at 483 (interpreting anti-picketing ordinance to apply solely to picketing in front of a particular residence).

II. The Act is Narrowly Tailored to Protect Important State Interests.

Petitioners concede “the general legitimacy of the state interest in protecting public safety and preventing obstruction, intimidation, or harassment.” Pet.Br. at 35; *see also Schenck v. Pro-Choice Network of W.N.Y.*, 519 U.S. 357, 376 (1997). The buffer zone at issue here is precisely tailored to achieve this interest.

This Court need not speculate whether this interest would be achieved “less effectively” without the Act. *Ward*, 491 U.S. at 799. As the record demonstrates, Massachusetts conducted that experiment before enacting the 2000 buffer zone law. *See* Facts, Section II.A. Both before and after the enactment of the prior statute, the Facilities were blockaded and patients, staff, and volunteers at the Facilities were intimidated and harassed. Even when no active blockades were in process, Facility entrances were blocked or congested by a jostling mob of protesters. *Id.* Sections II.A and II.C. The prior statute could not be enforced effectively; the police found that it converted them into referees, “watching feet, watching hands” in a small, crowded area around Facility entrances without the benefit of instant replay. J.A. 67-70. The Act must be judged against the threats, intimidation, harassment, and obstruction that occurred before its enactment.

Petitioners do not propose any alternative means of protecting Facility entrances that has not already failed in practice. Nor is it relevant that petitioners themselves disclaim any intent to engage in violent

or harassing behavior. Because petitioners, together with other protesters, all want to stand in or near the doorways and driveways of PPLM's Facilities, Pet.Br. at 11-13, the public safety issue arises from violent and non-violent protesters alike.

Petitioners argue that the Commonwealth's interest in public safety is adequately served by criminal prohibitions against harassment, blockading, or intimidation, or by individual injunctions against "persistent offenders." Pet.Br. at 36. As shown above, however, *supra*, p.7, countless injunctions and criminal prosecutions failed to resolve the problem of blockaded entrances. Moreover, a state may enact regulations to *prevent* harm. *Cf. Ohralik v. Ohio State Bar Ass'n.*, 436 U.S. 447, 458-59 (1978) (upholding "prophylactic measures whose objective is the prevention of harm before it occurs" against First Amendment challenge); *Burson v. Freeman*, 504 U.S. 191, 206-07 (1992) ("undetected or less than blatant acts" may cause the harm the state seeks to prevent "before remedial action can be taken"); *Heffron v. Int'l Society for Krishna Consciousness*, 452 U.S. 640, 654 (1981) (rejecting argument that a state's interest in avoiding congestion in fairgrounds could be served by requiring regulation through "less restrictive means, such as penalizing disorder or disruption").

While a time, place, or manner regulation must be "narrowly tailored," it need not be "the least restrictive or least intrusive means" of serving a legitimate governmental interest. *Ward*, 491 U.S. at 798. Thus in *Heffron*, this Court rejected petitioners'

argument that confining them to a booth was too restrictive. 452 U.S. at 653.

And once it is established that a buffer zone serves an important interest, its precise dimensions do not raise constitutional questions. As a plurality of the Court observed in *Burson*, 504 U.S. at 210, “[r]educing the [100-foot] boundary to 25 feet ... is a difference only in degree, not a less restrictive alternative in kind [I]t takes approximately 15 seconds to walk 75 feet.” It takes even fewer seconds to walk the 35-foot zone around the entrances to the Facilities here. The Act is a carefully considered and narrowly drawn response to a critical public safety problem, and that is enough to ensure its validity under this Court’s precedent.

III. The Act Leaves Open Adequate Alternative Channels of Communication.

The Public Safety Act leaves petitioners with ample alternative channels of communication. Petitioners remain free to engage in whatever forms of expression they choose – including face-to-face contact and quiet conversation – outside the limited 35-foot perimeter around Facility entrances. And even after patients have declined conversation with petitioners and have entered the zone, petitioners are able to communicate with those patients for the final few seconds of their approach to Facility entrances.

Outside the buffer zone, of course, petitioners remain free to communicate with anyone they please in any manner they wish. Protesters can – and do –

Speak quietly or with megaphones, distribute leaflets and handbills, carry signs and symbols, pray, and dress in costume. J.A. 126, 141-42, 149-50, 159, 181, 184, 194, 205-13, 215, 225, 229, 263-64, 288-90, 300, 303-06, 309. Petitioners complain that they are not permitted to speak in conversational tones with willing listeners, but that simply is not true. Nothing in the Act precludes petitioners from approaching patients outside the buffer zone and inviting them to engage in one-on-one conversation. And nothing in the Act precludes patients from accepting that invitation and engaging in “friendly, gentle” conversation with petitioners. Pet.Br. at 11. Whether petitioners are able to persuade patients to discuss their health needs and choices with them is entirely up to the patients; nothing in the Public Safety Act makes that decision for them or prevents any willing listener from engaging with petitioners in petitioners’ preferred manner.

Even unwilling listeners are fully reachable. Patients do not parachute into the buffer zone – they must cross the line establishing the zone. And until a person crosses that line, the Act has no effect; petitioners may approach patients at close quarters and speak to them however they wish. It is no fault of the law when the protesters’ targets elect to cross the buffer zone line.

Even then, petitioners can continue to communicate with unwilling listeners using signs, costumes, vocalization, and amplification, all readily seen or understood from inside the buffer zone. The Act prohibits only the physical act of following a patient all the way to a Facility door. *See Schenck*,

519 U.S. at 380-31 (upholding injunction provision that prohibited sidewalk counselors from following and crowding patients all the way to clinic door). This prohibition restricts only the proximity of communication, and for only about the last seven seconds before a patient enters the Facility. *See Burson*, 504 U.S. at 210 (approving buffer zone of 75 feet around polling places as affecting only last 15 seconds before entry). In any event, as this Court has observed, “no one has a right to press even ‘good’ ideas on an unwilling recipient.” *Hill v. Colorado*, 530 U.S. 703, 716-18 (2000) (collecting cases) *quoting Rowan v. U.S. Post Office Dep’t*, 397 U.S. 728, 738 (1970).

Petitioners’ specific arguments regarding the Worcester and Springfield Facilities, which are reached by cars entering private parking lots, are unavailing. Before passage of the Act, protesters in Worcester and Springfield blockaded Facility driveways, approached moving cars in an effort to distribute literature, and otherwise obstructed access to Facility parking lots. *Supra*, pp. 9, 14; J.A. 99, 118-19. The interaction of protesters on foot and patients in moving cars created an obvious and critical safety risk; as in *Schenck*, the legislature could conclude that the Act was necessary “because of the dangerous situation created by the interaction between cars and protesters.” 519 U.S. at 376.

As applied in Worcester and Springfield, the Act merely prohibits petitioners from obstructing access to driveways and approaching cars at close proximity. Nothing prevents petitioners from broadcasting their message in numerous ways along

the substantial remaining stretches of sidewalk that abut the Facilities and line the roads by which the Facilities are approached. *See* Appx. at 9a, 10a. And indeed, at both locations, protesters carry signs, sing and chant loudly, use sound amplification devices, and distribute literature. J.A. 205-13, 215, 225, 229, 235-38, 263-64.

Petitioners' own testimony shows that they have enjoyed substantial success in reaching listeners at all three of PPLM's Facilities and delivering their messages persuasively. Petitioner McCullen testified that in the first three and a half years after the passage of the Act, she dissuaded approximately eighty women from abortion. J.A. 147-49. Other Boston protesters also reported success in their efforts. J.A. 172. In Worcester and Springfield, some patients arriving by car walked out of the parking lot and to the protesters to speak or receive literature. J.A. 213, 223-24, 227, 256. Some of the petitioners also testified that they or others had succeeded in dissuading several women in Worcester from having abortions. J.A. 227, 230, 256, 260-61, 265.

Despite the demonstrated adequacy of alternative channels of communication, petitioners insist that the First Amendment entitles them to more – in essence, to the most effective method of reaching the maximum number of possible listeners. But that argument is foreclosed by this Court's precedents. *See, e.g., Ward*, 491 U.S. at 802 (adequate alternatives existed even though restrictions prevented use of the most effective sound amplification equipment and reduced the potential

audience); *Renton*, 475 U.S. at 53-54 (alternative channels of communication were adequate, even though adult movie theaters were entirely foreclosed from operating in 95% of the city). The First Amendment “does not guarantee the right to communicate one’s view at all times and places or in any manner that may be desired.” *Heffron*, 452 U.S. at 647. Petitioners can say anything they want, in any manner they want, as long as they stay 35 feet away from Facility entrances. *See Frisby*, 487 U.S. at 483 (ordinance banning picketing targeted at residences left adequate alternative channels of communication because it still “permit[ted] the more general dissemination of a message”).

CONCLUSION

Amici respectfully urge the Court to affirm the judgment of the Court of Appeals for the First Circuit.

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1a

**PLANNED PARENT LEAGUE OF
MASSACHUSETTS CLINIC ESCORT TRAINING,
POWERPOINT PRESENTATION**

PPLM

Clinic Escort Training

* * *

Remember . . .

- Escorting is not for everyone. **It is imperative that Escorts remain calm and non-confrontational at all times.** If you are unable to follow these protocols, please let us know. There are many other ways for you to volunteer or become involved with PPLM.

* * *

Patients and Companions

- Each woman's reaction to having an abortion is different.
- Do not try to counsel patients.
- Do not be surprised or offended if a patient reacts negatively.
- Focus on patients, but be prepared to assist companions as well.

* * *

Clinic Escorts and Protesters

- Do not respond to the protesters in any way. If you find yourself feeling confrontational, take a minute inside.
- Never make physical contact with protesters.
- Do not interrupt people willingly talking to protesters.
- Do not discuss protesters with patients, staff, or other Escorts while on duty.
- If a protester acts illegally, let the Escort Captain know immediately.

* * *

DO NOT:

- Block entrances by gathering with other escorts.
- Force conversation with a patient or attempt to counsel a patient.
- Touch a patient, unless she gives you permission.
- Express any views about abortion or engage in partisan speech.
- Take anti-choice literature from a patient.
- Talk to the media.
- Acknowledge that you know a patient that you recognize from elsewhere, or acknowledge a

3a

patient you later encounter unless she approaches you first.

- Greet an escort by name.

**MASSACHUSETTS HOUSE MEMBERS WHO
VOTED FOR THE PUBLIC SAFETY ACT AND DO
NOT HAVE A PRO-CHOICE VOTING RECORD –
Excerpts from Legislative District Analysis prepared
by NARAL Pro-Choice Massachusetts**

Legislative District Analysis, 2007-2008 Session

MASSACHUSETTS HOUSE

<u>District</u>	<u>Representatives</u>	<u>+Pro/ - Anti</u>	<u>Party</u>
<u>Town</u>			
6th Worcester Charlton	Geraldo Alicea	O	D
	* * *		
1st Bristol Mansfield	Fred Barrows	–	R
17th Worcester East Worcester	John Binienda	–	D
	* * *		
31st Middlesex Winchester	Paul Casey	O	D
	* * *		
11th Plymouth Brockton	Geraldine Creedon	–	D
	* * *		
3rd Worcester Fitchburg	Stephen DiNatale	–	D
	* * *		
1st Worcester Holden	Lewis Evangelidis	O	R
	* * *		

5a

10th Essex Lynn	Robert Fennell	O	D
10th Worcester Milford	John Fernandes	O	D
	* * *		
16th Middlesex Lowell	Thomas Golden	–	D
	* * *		
13th Norfolk Needham	Lida Harkins	O	D
4th Essex Ipswich	Bradford Hill	O	R
	* * *		
20th Middlesex North Reading	Bradley Jones	O	R
	* * *		
9th Plymouth Brockton	Thomas Kennedy	–	D
	* * *		
11th Bristol New Bedford	Robert Koczera	–	D
	* * *		
8th Worcester Webster	Paul Kujawski	–	D
	* * *		
16th Essex Lawrence	William Lantigua	–	D
4th Middlesex Marlborough	Stephen LeDuc	O	D
	* * *		
18th Middlesex Lowell	Kevin Murphy	O	D

6a

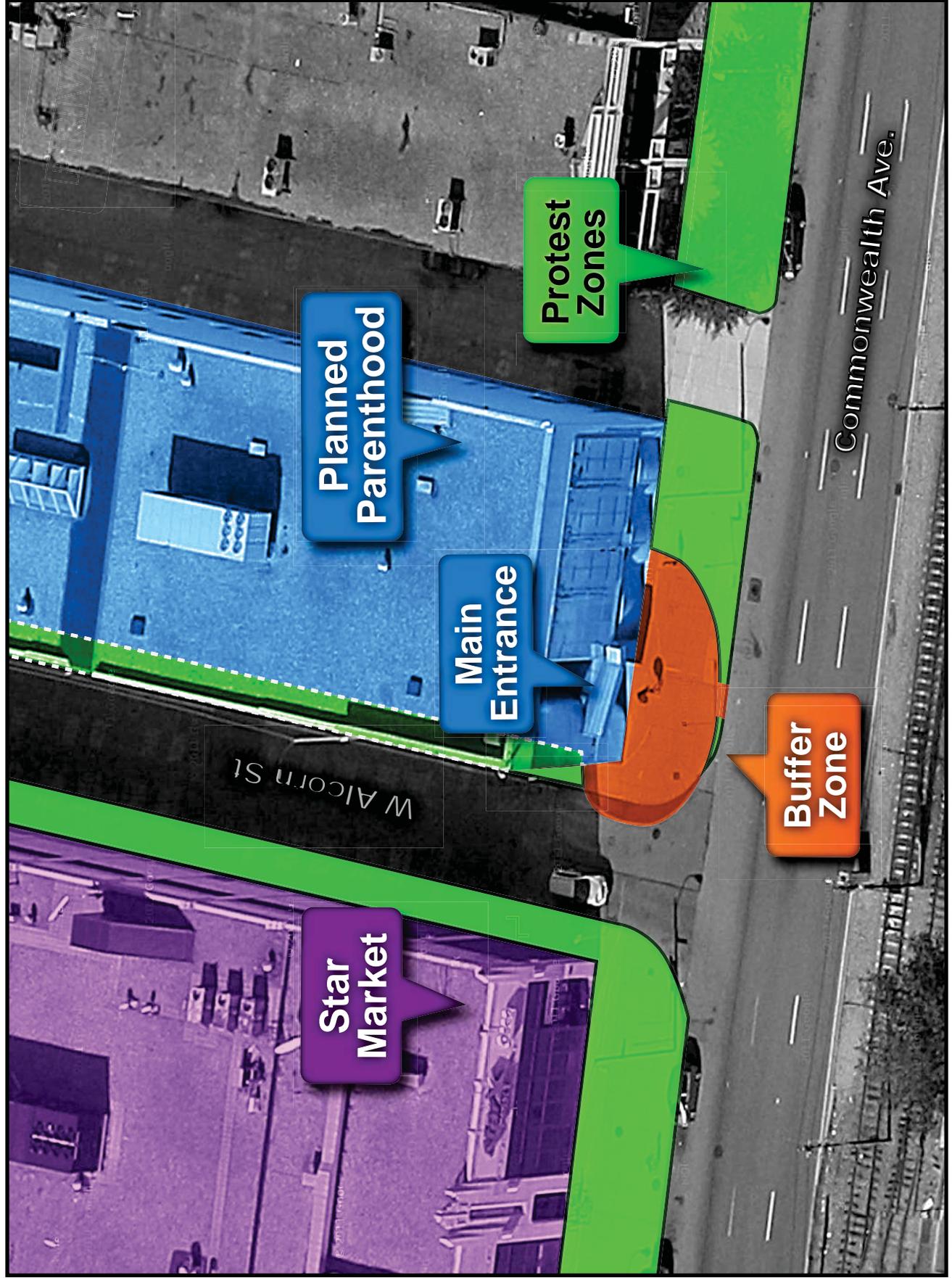
17th Middlesex Lowell	David Nangle	–	D
	* * *		
5th Plymouth Hanover	Robert Nyman	–	D
	* * *		
15th Worcester Worcester	Vincent Pedone	O	D
	* * *		
7th Hampden Ludlow	Thomas Petrolati	–	D
	* * *		
8th Bristol Westport	Michael Rodrigues	–	D
	* * *		
12th Norfolk Norwood	John Rogers	–	D
	* * *		
9th Middlesex Waltham	Tom Stanley	O	D
	* * *		
26th Middlesex Cambridge	Timothy Toomey, Jr.	O	D
	* * *		
5th Essex Gloucester	Anthony Verga	O	D
8th Hampden Chicopee	Joseph Wagner	O	D
	* * *		

7a

<u>Key and Count</u>	<u>House</u>
+ Pro-Choice Legislator	88
- Anti-Choice Legislator	40
O Mixed Legislator	20
? No Response	11
N/A Vacant Seat	1
Total Number of Legislators	<hr/> 160

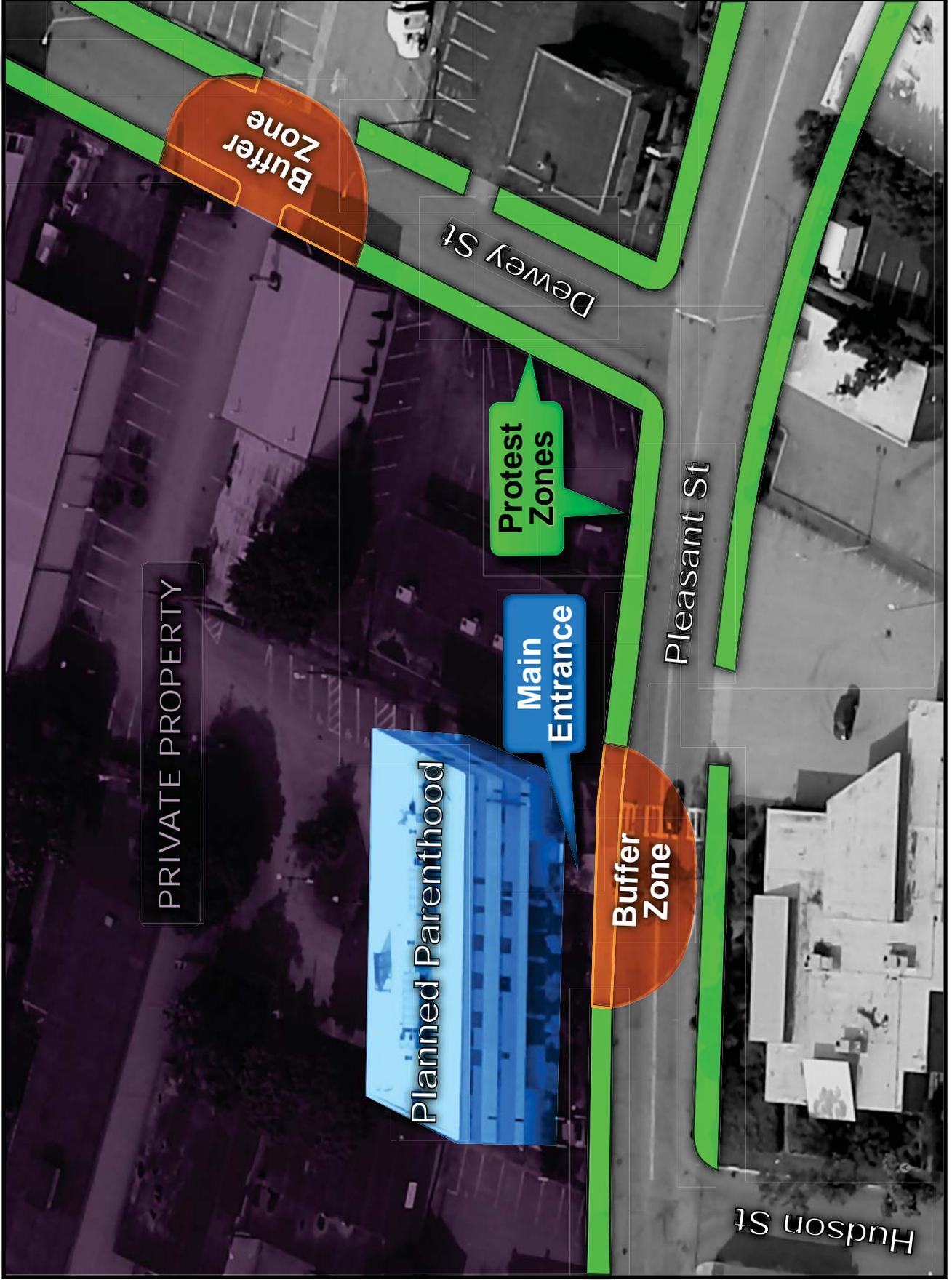
PPLM Boston Facility: Front Entrance
1055 Commonwealth Ave. Boston, MA

8a



PPLM Worcester Facility
470 Pleasant St. Worcester, MA

9a



PPLM Springfield Facility
3550 Main St. Springfield, MA

10a

