

**OREGON DEPARTMENT OF CORRECTIONS**  
**Operations Division**  
**Health Services Section Policy and Procedure #P-G-10**

SUBJECT: PREGNANCY COUNSELING

POLICY: Access to reproductive health services for incarcerated women will be provided in accordance with community standards. Pregnant inmates shall receive comprehensive counseling and assistance to enable her to make informed decisions regarding her pregnancy, whether she elects to keep the child, use adoption services or have an abortion

REFERENCE: NCCHC Standard P-G-10

PROCEDURE:

A. Perinatal Health Care (Antepartum, Intrapartum and Postpartum)

1. The incarcerated woman who is pregnant and who chooses to continue her pregnancy shall receive obstetric care as soon as the pregnancy is confirmed. Care will be provided by Health Services and through contractual arrangements with community providers and hospitals.
2. Written guidelines describe the medical and support services that will be provided throughout the entire perinatal period, including, but not limited to, prenatal care, prenatal education, transportation, referral to high risk care centers, family planning, follow-up of chronic health care problems and postpartum care.

B. Infant Placement

1. The Human Services Division in conjunction with the correctional counselor assigned to pregnant inmates will assist an incarcerated woman to make an informed decision concerning the placement of a child born to her during incarceration. In all matters, compliance with appropriate Oregon State law is required.

C. Family Planning

1. Family planning, as a part of regular, comprehensive health care, will be offered and available on request. Temporary and permanent sterilization procedures are considered elective and although available, must be paid for by the inmate.
2. Participation in family planning is voluntary. The health care team will provide information and counseling to assist women in making informed decisions with their health care provider regarding contraception prior to release.

## Pregnancy Counseling

3. Women shall be provided information on community family planning resources well in advance of their release in order to assure continuity of care in the community.

### D. Abortion

1. Pregnant inmates may request an abortion in consultation with a health care provider. Pregnant inmates will be given information and counseling concerning the nature, consequences and risks of the procedure, as well as information on alternatives available when making a decision to continue or terminate a pregnancy. Abortions are considered an elective procedure.
2. The following guidelines shall serve as criteria for performance of legal abortions:
  - a. During the first trimester, inmates will be offered the opportunity to request an abortion.
  - b. After the first trimester, the performance of an abortion will be determined by consultation with the contracting medical specialist, on a case-by-case basis.
  - c. After fetal viability, all abortion requests will be denied, except those necessary to protect the inmates' life or health. (Viability varies with each pregnancy and will be determined by the attending physician.)

### 3. Staff/Inmate Therapeutic Relationships

- a. Reproductive health care services, including family planning, pregnancy counseling and abortion services, shall be provided in a non-judgmental fashion regardless of sex, race, religion, age or marital status. Personnel should not withhold service or information from inmates due to their own personal or religious convictions. The confidentiality of encounters and health care records shall be maintained.

Effective Date: \_\_\_\_\_

Revision date: November 2006

Supersedes P&P dated: April 2005