

The Carceral Health Context and it's Implications on the Provider- Patient Relationship: A Case Study of OB/GYN Care in California Women's Prisons

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BACKGROUND

- There is a longstanding history of medical negligence in California jails and prisons leading to excess morbidity and mortality¹⁻⁴
- Reproductive care in California jails and prisons has been notoriously harmful with reports of prison officials routinely denying prenatal care⁵⁻⁹
- There is limited research on the institutional and structural factors impacting medical care and informed consent in jails and prison

AIM:

- To understand how the carceral healthcare context interacts with patients and providers to influence care, decision-making, and relationships in reproductive care

METHODS

- Part of a larger community-based ethnographic study on reproductive health and justice in California prisons
- Open-ended interviews with formerly incarcerated individuals who received reproductive/gynecological care in California women's prisons
- Semi-structured interviews with healthcare providers who serve this population
- Interview transcripts were transcribed, coded and analyzed using Constructivist Grounded Theory¹⁰

RESULTS

- Demographic table: see QR code
- The carceral healthcare context affects both patients (formerly incarcerated) and providers in unique ways that negatively impact the clinical encounter by prioritizing the goals of the jail/prison over those of healthcare (see figure 1)
- Within reproductive care this included but was not limited to:
 - Limited contraception options based on cost, prison sentence, or laws
 - Shackling during sensitive gynecological exams or postpartum for security concerns
 - The significant and intrusive roles that correctional officers (COs) play in the delivery of ob/gyn care:
 - I.e. Patient transport, medical gatekeeper, medical staff
 - Unclear expectations of rights, choices and autonomy regarding reproductive care for patients

DISCUSSION

- We set out to understand how the carceral healthcare context shapes patients, providers, and their interactions, using reproductive care as a case study
- The carceral system limited providers' ability to deliver care due to the prioritization of the goals of the jail/prison over that of healthcare
- For patients, these structural factors worked to restrict agency and autonomy while also eroding trust

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REFERENCES: See QR code

Prisons foster a medical environment that reduces choice & autonomy for patients

