Reproductive Justice in the Library:

Working with library colleagues to protect the privacy and reproductive rights of staff and patrons

Revised by Library Freedom Project in 2024

This document is aimed primarily at library workers who want to assist people in seeking information about reproductive care. It is meant to help library workers understand the risks related to this kind of information seeking, and help mitigate those risks. While it is intended for library workers, the advice in this document may be helpful to all people seeking this information. This document addresses the following:

- **Assessing Risk**
- **Privacy at the Library**
- **Recognizing Where Colleagues Stand**
- **Addressing Concerns, Questions, and Perspectives of Colleagues**
- **Example Scenarios**
- **Terminology**

Assessing Risk

In the United States, seeking reproductive care information can be very risky. Most of the risk correlates directly to the legality of reproductive care in each state. The Guttmacher Institute maintains the most comprehensive information on reproductive care access and laws across the country, including this interactive map of policies, state by state: https://states.guttmacher.org/policies/

In addition to geographic location, compounding risk factors include race, gender, sexual orientation, age, class, and ability status. The risks to seeking reproductive care are greater for marginalized people, especially those who hold more than one marginalized identity, as these people are more likely to be targeted by law enforcement, clinic protestors, or other malicious actors. Anyone who can become pregnant is at risk, as are people who are willing to aid or abet others seeking reproductive care. Those who donate to abortion clinics or funds also face some risk. Those who are in the highest risk geographic locations, where abortion has been made fully illegal, may also face some risk in seeking other health care, especially anything to do with reproduction, miscarriage, menstruation, birth control, etc.

While it can be challenging to determine someone's precise level of risk, those people who fall into more than two of the above categories should consider themselves higher risk. We have tried to make the advice in this document broadly applicable to all those at risk.

How Data Can be Exploited

Seeking information about reproductive care creates data that can be exploited. This data can include personally identifying information like name, address, health data, and may lead to other information like workplace, family information, or immigration status. Good privacy practices can help avoid situations like the ones below (or at least minimize their potential harm), which are some of the possible ways that someone's data could be exploited:

Law enforcement targets a specific person suspected of seeking reproductive care, and subpoenas their library records, including internet usage or security camera footage.	Law enforcement targets the library itself for suspicion of aiding and abetting reproductive care seekers.	Malicious library staff reveals information about a specific patron, patrons, or colleagues to law enforcement or anti-choice groups.

Legal Obligations

Information-*seeking* about reproductive care is not a crime. However, because of restrictions to abortion access, seeking information about reproductive care may be used to show evidence of criminal activity. At least one state legislature is considering a bill that would criminalize *sharing* information about how to receive abortion care. Consult the Guttmacher Institute for up-to-date information on the status of laws in your state. The Repro Legal Defense Fund and ACLU are good resources if you, a patron, or other contact run into trouble.

Privacy at the Library

Privacy Best Practices	
Data minimization	• The practice of reducing the overall amount of data collection in the library, and of assessing library services to ensure that they are not collecting data needlessly. • This is one of the most important privacy best practices for libraries. If the sensitive data is not kept, then it can't be exploited.
Data deletion	• The library should have a privacy policy addressing data deletion. Data should be permanently deleted on a regular schedule, ideally on a timeframe of days or weeks. • Particular care should be taken to make sure that sensitive data is part of this regular deletion schedule. This includes security camera footage where it exists, patron checkout histories, search histories, chat and other online reference queries, and browser histories. • If you offer tech lending, such as laptops and hotspots, all data history and patron files should be wiped as soon as the device is returned.
Data access	• Library leadership should be aware of who has access to sensitive patron records, such as search history and checkout history. Can all library staff view this information? Municipal IT? Library consortium? School administrators at school libraries? • Access to this patron information should be limited to as few staff as possible. • Staff with access to this patron information should be trained on library policy about data disclosure to law enforcement. All law enforcement enquiries should be directed to a single point of contact, whether that is the library director or consortium administrator. • All law enforcement enquiries should be directed to a single point of contact, whether that is the library director or consortium administrator. • Access standards should be addressed in the library's privacy policy.
Avoiding third parties and data sharing	• Third party services—vendors—may share patron data in ways that create more risk for reproductive information seekers. Most third party services have broad policies about privacy and data sharing that allow them to sell or grant access to data to other third parties. • The library should choose vendors with strict privacy protection, should be aware of any data sharing agreements in its third party contracts and their policies, inform patrons of the differences between the library itself and third parties, and limit its relationships with third parties.
Encryption (and its limitations)	• It's a security best practice to use strong encryption for transmitting and storing data. However, encrypted data can still be requested by law enforcement warrants or subpoenas, so encrypted data can still pose a risk against certain adversaries. • Data minimization is preferable to storing lots of encrypted sensitive data.

Privacy Best Practices, cont.

Privacy at the reference desk	- All reference interactions deserve privacy. The layout and location of the reference desk should be optimized for allowing sensitive conversations to take place between the librarian and patron. - If feasible, offer the option of having sensitive conversations in a more private area. - Reference desk workers should maintain awareness of privacy in their reference transactions, including who may be able to hear the conversation or see the computer screen. This should also be included in new staff training.
Data storage	Sensitive patron data should be stored according to industry best practices. Strong encryption should be in place, as well as other data stewardship practices like software updates and anti-malware.

Software and Tools for Privacy

Libraries can offer privacy-enhancing technology on public computers, as well as offer privacy resources and classes for patrons seeking information about reproductive care.

Browsers	- Tor Browser - Tor Browser for Mobile
Browser Extensions and Ad Blockers	- Privacy Badger - HTTPS Everywhere
Privacy Policy Tools	- ALA Library Privacy Checklists - LFP Privacy Policy Template

Other Threats to Consider

Physical threats to security/privacy	- Library security cameras - Ideologically unaligned colleagues or patrons - Parents seeking info on their children's information habits - Staff conversations
Digital threats to security/privacy	- Malware - Phishing - Software in the library that is inadvertently tracking - Overdue materials - Data breaches/data leakage - Platforms used for reference questions (Facebook messenger, website chat widget, third party services)

How to Recognize Where Colleagues Stand

This guide has been adapted from the Bullseye method in *Secrets of a Successful Organizer* by Alexandra Bradbury, Mark Brenner, and Jane Slaughter (pp. 14–15). You can find this book and learn more about the original method at https://labornotes.org.

Placing Colleagues on the Spectrum of Direct Action

When talking to colleagues and gaining support for necessary action on reproductive privacy, it can be helpful to visualize your colleagues along a spectrum of involvement and support. You will inevitably find that you have colleagues along all these lines within your workplace and identifying them early on can help make your efforts more successful. (You can find a similar approach to this spectrum in *Secrets of a Successful Organizer.*) Take a look at some of the ways this can apply to work on reproductive justice at the intersection of privacy below.

Aside from folks you recognize as "Hostile," all members of these circles can be leveraged towards a shared goal. You can have conversations to move folks from outer to inner rings, you can leverage the positionality of each to accomplish specific tasks, etc.

Core Group	These folks may already be doing work around reproductive privacy/justice work either in or out of the library; are currently working with you on initiatives or have brought up initiatives of their own; in meetings, these are the folks who are pushing for action – not just asking questions
Activists	These folks have been vocal about their support for reproductive privacy/justice work either in or out of the library (e.g., donating to orgs, attending protests, sharing info on social media); they may be asking questions in meetings but not necessarily defining or pushing for action; what differentiates an activist is that they want and are able to take action but need direction
Supporters	These folks seem interested in any efforts to support reproductive privacy/justice and privacy efforts in and out of the library; they aren't vocal about it but they remain engaged during discussions; will follow lead but won't take responsibility for any direct action
Disengaged	These are folks who don't see the connection between the library and reproductive privacy/justice; they are not engaged in conversations around direct action and express no interest in being involved; they aren't against efforts, they just don't express interest in being involved; folks in this ring may have concerns about personal/job security but, again, they do not express hostility towards proposed direct action
Hostile	These are the people who vocally are against connecting the library to reproductive privacy/justice either because they feel it is not the library's place or because they are anti-abortion; these individuals will likely never sway towards direct action and may even pose a threat to any action you initiate

Addressing Concerns, Questions, and Perspectives of Colleagues

The following talking points are not exhaustive but are meant to serve as a starting point.

When speaking with those who think this is unrelated to library work

This would be great if it were true; many people in this community lack access to the resources and legal protections needed to exercise autonomy in their reproductive and healthcare decisions.

If you're in a place where risks are low and speaking openly/supporting abortion seekers is presumed safe:

- Many people's rights have changed, and a lot of people know that. People may be worried about sharing information here, even if there are legal protections in this state. Patrons might not know that it's safe to ask.
- People might be helping others whose abortion seeking is higher-risk and worried about disclosing that they or someone else is breaking the law in another state.
- People in higher-risk places might come here for information, especially near state borders or in large library systems with wide reaching online programming.
- You may come in contact with people who are returning to higher risk areas, so you still need to be cognizant of the realities people are living under. This is why discretion remains so important: any oversights or liberties you take with information that is shared with you may be traced to you or people you are in contact with. If/when things change in your low-risk state, you do not want to be easily identified as a source of information.

If you're in a place where risks to info sharing/other helping are high:

- We might never find out about patrons' concerns because they might be scared to ask. The majority of library workers in the US are cishet and white. Minoritized patrons who need help the most may be reluctant to disclose their needs to library workers from demographic groups other than their own, so you are not getting the question (at least directly).
- People do not know who to trust and may be unaware of all of the things that compromise their safety, either outside or inside the library (e.g., camera footage, computer footprint, voice assistants). Risks created by the library are the library's responsibility to address.
- People in safer situations are sharing this information online and in other venues, but not all of our patrons have the means to find it. *See below for ways to act, including safety accommodation.

When speaking with those who are unaware of the risks

Connect them with resources and tools on how to severely reduce digital footprint? Encourage people to be careful what they name the files (be generic, non-descriptive), think carefully about which software is being used to create these documents, and consider renaming downloaded files to make them harder to trace.

Patrons probably aren't sure of risks of asking questions either! If info workers aren't sure of the information landscape, we should assume that it is also a gap for patrons.

The Guttmacher Institute maintains an updated map with information on the abortion-related laws in each state.

When speaking with those who do know the risks and are wary

First, you should be confident that this colleague isn't going to report you for sharing this information if that puts your job/freedom at risk! Limit your discussions of high-risk work to your Core Group.

If we take action, we have backup:
- Stated position of your employer (this is tougher if your library/system will not back you up)
- There are also other sources of support!
- Colleagues elsewhere can take on some of the risk (for instance, by printing zines and sending them to us so they aren't connected to our accounts in the printer).

Discuss what happens in case of bad faith actors:
- You get reported, and your boss/system doesn't back you up. What supports are there?
- You get reported, and the law doesn't back you up. What supports are there?

When speaking with those who want to take action but aren't sure how

Offer direct digital literacy/privacy instruction for abortion seekers.
- Safety accommodation: if you can't teach it openly, consider focusing on adjacent topics like domestic violence and stalking, or on data protection and minimization.

Tuck information into books/other materials on relevant subjects
- Safety accommodation: have colleagues in safer locations print those materials and send them to you (ask them to include contacts specific to your area, and arrange via Signal).
- Safety accommodation: do this in a part of the library that isn't surveilled by cameras, and reshelve materials yourself.
- Post information about private browsing near computers.

Reach out to abortion access experts in your area, such as Jane collectives, for ideas specific to your location. What support do they need? What are your meeting room policies? Can you provide unmonitored meeting spaces?
- Safety accommodation: use Signal to communicate, and use Tor to find their contact information or use Signal to ask someone out of state to do it for you

If it's safe, place flyers or other materials in spaces beyond the library in places that are aligned with supporting abortion access or are heavily visited where it is difficult to pinpoint daily visitors
- Things to be aware of as you do this: Note any security cameras in the area, leave your cell phone/GPS at home, wear concealing clothing (mask, hat, or gloves), and keep flyers unmarked.

When speaking with those whose position you aren't sure of

It's important to avoid making assumptions about someone's position on this matter. One approach to this conversation is to ask questions or provide information that gives people a chance to engage without directly asking their opinions on reproductive justice, as this could be a sensitive area or could potentially be seen as confrontational.

Example Scenarios
The Intersection of Reproductive Justice, Library Workers, and Patrons

Scenario	What would you do?
Your state or library system implements a gag order, legal or otherwise, on sharing information about abortion with patrons.	
Library staff create a display of books about reproductive issues that provokes backlash (or display about another topic that includes books about abortion).	
"Secret shopper" type questions about abortion at the reference desk are surreptitiously recorded and shared on social media, similar to first amendment audits.	
Your municipality, state, locality, or school attempts to ban books that reference abortion.	
Your state has passed legislation to block websites that share information about how to obtain an abortion.	
Law enforcement tries to access patron records, chat or email records, videos of computer users, etc.	
Board of Directors, Town Council, School Board, etc. attempt to restrict what staff can say or purchase.	
Information about staff or patron actions is leaked to anti-abortion groups or law enforcement by another staff member.	
A staff member needs to access abortion services, get time off, travel etc. What are your leave policies—do you need a doctor's note? What does employer-provided insurance cover and exclude?	
A patron wants to use library computers without speaking to a staff member, registering, logging in, or having their results filtered. Is all session information purged after the session? Are there privacy screens on computers?	
Patrons ask remote questions, for example a question over chat, email, or Facebook messenger about the abortion laws in your state. How often are chat records and reference email purged? Are they fully purged or recoverable?	
Your library has smart speakers in the library.	

Terminology

Abortifacient: A drug, device, or herb that can cause an abortion.

Abortion funds: Organizations that help people pay for an abortion and may also offer help with transportation and other resources.

Aiding and abetting: Some state laws may create liability for a person who "aids or abets" (assists in some way) the performance of an illegal abortion. Texas' SB 8, for example, defines "aiding and abetting" to include "paying for or reimbursing the costs of an abortion through insurance or otherwise."

Aspiration abortion: A medical procedure that uses gentle suction to empty the uterus. Can be used to terminate a pregnancy up to about 16 weeks or in cases of early miscarriage. Also called "in-clinic abortion".

Crisis pregnancy centers (CPCs): Organizations whose primary purpose is to prevent people from having abortions. Most CPCs are affiliated with evangelical religious organizations that oppose abortions and contraception. They are frequently criticized for spreading misinformation and not being transparent about their missions. Also known as "pregnancy care clinics", "pregnancy resource centers", and "fake women's health centers." Learn more at CrisisPregnancyCenterMap.com

Dilation and evacuation abortion (D&E): A procedure that involves dilating the cervix and removing pregnancy tissue with forceps or suction. Usually performed after 14 weeks.

Ectopic pregnancy: A pregnancy that develops outside the uterus, often in a fallopian tube ("tubal pregnancy"). Ectopic pregnancies do not survive since fertilized eggs can't grow outside of the uterus. These pregnancies are rare and life-threatening.

Emergency contraception: A safe and effective method of preventing pregnancy up to 5 days after unprotected sex by preventing ovulation. It does not induce abortion. This can include the "morning after pill" and certain IUDs.

Gestational limits: Restrictions or prohibitions on abortion after a specific point in a pregnancy. There may be some exceptions to protect the life or health of the patient.

Heartbeat bill: A form of abortion restriction that bans abortion as early as 6 weeks into pregnancy, when proponents say a "fetal heartbeat" can be detected and before most people know they are pregnant.

Induction abortion: A rare procedure that uses medications to induce labor and delivery of the fetus in later stages of pregnancy.

Jane Collective: An underground organization that provided health education and access to safe abortions. Officially known as the Abortion Counseling Service of Women's Liberation, it started in Chicago and operated in the time before Roe when abortion was illegal.

Judicial bypass: When a judge orders that a minor does not need to parental involvement to receive an abortion. This may be an option for teens who can't tell their parents or guardians about a pregnancy but can be difficult to obtain.

Medication abortion: A method of terminating a pregnancy that typically involves taking two medicines, mifepristone and misoprostol. Also known as a "medical abortion" or an "abortion with pills".

Parental involvement: A requirement that one or both parents must be notified ("parental notification") or give permission ("parental consent") for a minor to do something, such as obtaining an abortion.

Refusal law: A law that allows individual health care providers or institutions to decline to provide or pay for specific services, including contraception and abortion care.

State-mandated counseling: Required counseling before receiving an abortion, which often includes medically inaccurate information about side effects.

Trigger law: A law that does not go into effect when it is passed but can be enforced when something else changes - for example, anti-abortion laws were passed previously in some states and were not enforced until after Roe v. Wade was overturned.

Trimesters: The three stages of pregnancy that are marked by different fetal developments:
- First trimester: 1–12 weeks
- Second trimester: 13–28 weeks
- Third trimester: 29–40 weeks

Viability: The ability of a fetus to survive outside the uterus. There is no specific marker or consensus of viability since all pregnancies are different and many factors can impact fetal development. Viability is generally believed to be reached between weeks 24 and 28 of gestation.

Waiting period: The specific time (typically 24 hours) that someone may be required to wait between receiving counseling and obtaining an abortion.

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