

AUBURN UNIVERSITY REPRODUCTIVE HEALTH POLICY & PROCEDURES

I. POLICY STATEMENT

The [Auburn University Policy on Sexual and Gender-Based Misconduct and Other Forms of Interpersonal Violence](#) states that:

“Auburn University is an institution built upon honor, integrity, trust, and respect. Consistent with these values, the University is committed to providing a safe and non-discriminatory learning, living, and working environment for all members of the University community.”

It is the goal of Auburn University to provide an environment that does not adversely affect employee/student reproductive health or the health of a developing fetus. The University recognizes the joint responsibility of the employee/student and management for reproductive health protection and recognizes that education is the cornerstone of an effective program. The well-being of students, employees and their offspring; the desire to reduce reproductive risks and the associated suffering and grief it brings to the family are the reasons that the University has established this Reproductive Health Policy.

Policy Foundation

The Department of Education’s (DOE) regulations implementing Title IX of the Education Amendments of 1972, a college or university “shall not discriminate against any student, or exclude any student from its education program or activity, including any class or extracurricular activity, on the basis of such student’s pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom.” This directive has been highlighted recently in a [Dear Colleague Letter](#) from OCR, and a 30 page “pamphlet” from DOE entitled [“Supporting the Academic Success of Pregnant and Parenting Students.”](#)

Under the [Pregnancy Discrimination Act](#), an amendment of Title VII of the Civil Rights Act of 1964, states that “women affected by pregnancy, childbirth, or related medical conditions shall be treated the same for all employment related purposes, including the receipt of benefits under the fringe benefits programs, as other persons not so affected but similar in their ability or inability to work.”

II. POLICY PRINCIPLES

The objective of the Reproductive Health Policy is to protect the health of employees and students from occupational exposures to substances (chemical, biological, radiological, or physical) known or suspected of being reproductive or developmental hazards. Reproductive or developmental hazards may affect the reproductive health of women or men or the ability of couples to have healthy children, causing problems such as infertility, miscarriage, and birth defects.

Most areas within the University occupied by students and employees pose no threat to reproductive health. Some University facilities; however, contain chemical, biological, radiological, or physical hazards known to cause birth defects or other reproductive harm. As a result there are certain risks associated with higher education and research which are unavoidable, possibly not even known. Such risks may extend from possible chemical exposure in laboratories to physical injury inflicted by animals.

The University recognizes that decisions about the welfare of future children must be left to the parents who conceive, bear, support and raise them rather than to employers who hire them or the institutions who educate them.

Control of employee and student exposures will be consistent with existing University student and personnel policies as well as the above mentioned acts. Assuring protection from exposures to reproductive hazards requires full cooperation of the employee or student with the University and with Risk Management & Safety (RMS).

III. EFFECTIVE DATE

Revised March 13, 2017.

IV. POLICY APPLICABILITY

This policy applies to all students, faculty and staff.

V. POLICY MANAGEMENT

Responsible Office: Risk Management and Safety

Responsible Executive: Executive Director of Risk Management and Safety

Responsible Officer: Associate Director, Safety & Health

VI. DEFINITIONS

1. Reproductive Hazards – agents that cause chromosomal damage (mutagens) and/or substances with lethal or teratogenic (malformation) effects on fetuses.
 - a. Teratogens – may affect the conceptus at any stage of its development, from fertilization to birth, although damage is most likely during the first trimester of pregnancy.
 - b. Mutagens – can affect conceptus development, or prevent fertilization entirely by damaging the egg or sperm.
2. Hazard Assessment – a process that is intended to provide students or employees with information about potential reproductive health issues associated with their work environment as well as recommended control measures so that they can make an informed decision about their continued work or learning activities with their personal physician.
3. Hazard Mitigation - the sustained effort to reduce or eliminate the risks associated with exposure to reproductive hazards.

VII. POLICY PROCEDURES

A. Notification to the University

1. The University cannot mandate that an employee or student provide notification of a pregnancy or planned pregnancy, however, the University assumes the very conservative position that it is in everyone's best interest to not take chances with human life under these circumstances.

2. It is strongly recommended that employees and students do provide notification to their supervisor or advisor so appropriate steps of hazard mitigation can be offered to ensure the health of both parent and child.

B. Requesting a Hazard Assessment

1. The University acknowledges that some individuals may initially choose to keep their pregnancy status confidential.
2. If an employee or student wishes to take advantage of this policy, he or she should inform their supervisor or advisor and contact RMS for a hazard assessment as soon as possible after determining or contemplating pregnancy.
3. Participation in a hazard assessment is voluntary.
4. The goal of the hazard assessment will be to identify, manage and communicate potential reproductive risks.
5. The hazard assessment includes identification of reproductive hazards and exposure control methods, such as engineering or administrative controls, and personal protective equipment.
6. All hazard assessment information will be provided to the student or employee in writing.

C. Consulting a Physician

1. The University strongly recommends that a physician be consulted.
2. The University recognizes that the decision whether to consult a physician is left to the individual.
3. If the individual has no physician, then any decisions as to how to proceed are left to the individual.
4. After reviewing the hazard assessment, the physician may contact the individual's supervisor, advisor, or RMS for additional information.
5. Based upon the information provided, the physician may discuss with the individual the advisability of, and make recommendations for, participating in the anticipated activities.
6. Ultimately, it is the final decision of the individual as to whether or not to continue in the activity.

D. Reassignment of Activities

1. Should the employee or student determine that it best to avoid the activities then it is the responsibility of the employee or student to communicate their needs to their supervisor or advisor as soon as possible in order for risk-reduction to begin when it can be most effective, and to determine if additional modifications are necessary.
2. Should the individual decide against such participation then the options are as follows:

a. Students

- Have the option of sitting out of school for the term of the pregnancy or period anticipating pregnancy, or selecting other activities within the curriculum which are acceptable to the student.
- No loss of status (within the control of the University) will result from this absence from school.

b. Employees

- If concerns exist, they should be brought to the attention of the supervisor so that other, more acceptable arrangements can be made.
- The supervisor will provide alternative activities for the term of the pregnancy, or period anticipating pregnancy, which minimizes hazards to the individual or the fetus and is acceptable to the employee.
- No loss of status or reduction of pay or benefits will be associated with this reassignment.
- The physician and the supervisor may communicate, if the individual consents, to assure that reassignments are acceptable.

VIII. SANCTIONS

Addressing Policy Non-Compliance: If an employee or student feels that he/she is not being given the reasonable consideration described above, then the matter should be brought to the attention of the [Title IX Office](#).

IX. EXCLUSIONS

None.

X. INTERPRETATION

The policy shall be interpreted by the Office of Risk Management and Safety.