
TESTIMONY IN OPPOSITION OF SB 302

Criminal Law - Causing Ingestion of an Abortion-Inducing Drug - Prohibition (Women's Freedom from Coercion Act)

Judiciary Committee

February 5, 2026

Social Work Advocates for Social Change strongly opposes SB 302, which would prohibit what is already illegal – knowingly and willfully causing another to ingest an abortion-inducing drug when the person knows or believes that the other person is pregnant and without consent, through fraud or coercion, or by force or threat of force – **but single out abortion medication in a way that could open the door to attacks on the of reproductive rights and health of Marylanders who may experience pregnancy.**

SB 302 is duplicative and unnecessary. It is already against the law in Maryland to cause someone to take medication against their will. Existing statutes such as Food/Drink Contamination (§3-214), First-Degree Assault (§3-202) and Causing Ingestion of Bodily Fluid (§3-215) already impose significant criminal penalties on anyone who is found to coerce or otherwise cause a person to take medication against their will. It is duplicative and unnecessary to specifically prohibit someone from taking any drug – including one that induces abortion – without consent, through fraud or coercion, or by force or threat of force.

Abortion medications are safe, but SB 302 wrongly treats them as dangerous. Many medications safely used in abortion care, such as mifepristone, are also used for miscarriage management, gynecological care, induction of labor, and emergency situations.¹ This bill stigmatizes standard medical care, seeks to create risk for clinicians using medications for non-abortion purposes, and misrepresents the safety profile of abortion medications.

Bills like SB 302 contribute to pregnancy criminalization. This criminalization is not limited to the aftermath of the overturning of Roe vs Wade in 2022. Upwards of 61 people nationwide between 2000-2020 were investigated for pregnancy outcomes.² And as of 2023, 33 states have passed criminal abortion laws, and sixteen states have made it a felony to perform an abortion at any stage of pregnancy.³ Creating a law that solely punishes the “causing of ingestion of an abortion-inducing drug” will only signal consent to increase in the criminalization of pregnant people in Maryland.

Real survivor-centered policy would address the full spectrum of reproductive coercion. Reproductive coercion is a real issue, such as coercion to continue a pregnancy, coercion to sabotage birth control, or coercion to force someone to remain pregnant.^{4,5} Although these occurrences of coercion are equally serious, SB 302 addresses only one type of reproduction coercion: coerced medical abortion. SB 302 selectively targets only abortion-related situations, reflecting ideology rather than evidence-based intimate partner violence (IPV) policy.



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SB 302 opens the door to efforts that would negatively impact the reproductive health of our communities. **Social Work Advocates for Social Change urges an unfavorable report on SB 302.**

Social Work Advocates for Social Change is a coalition of MSW students at the University of Maryland School of Social Work that seeks to promote equity and justice through public policy, and to engage the communities impacted by public policy in the policymaking process.

¹ Emory University, Rollins School of Public Health. (Dec 13, 2023). Q&A on mifepristone.

<https://sph.emory.edu/news/mifepristone-questions-answers>

² Huss, L., Diaz-Tello, F., & Samari, G. (Oct 30, 2023). Self-managed abortion research: Self-care, criminalized. Lawyering for Reproductive Justice. <https://ifwhenhow.org/resources/selfcare-criminalized/>

³ Human Rights & Gender Justice Clinic–CUNY, et al. (2025). Criminalization and punishment of pregnant people and people who facilitate access to abortion care. https://www.law.cuny.edu/wp-content/uploads/page-assets/academics/clinics/hrgj/projects/criminalization/Shadow-Report-to-UNHRC_US-Criminalization-of-Pregnancy-and-Abortion.pdf

⁴ Muñoz, N., Spencer-Carver, E., Temple, J. R., & Shorey, R. C. (2023). Reproductive coercion among young adults: Prevalence, correlates, and associations with intimate partner violence. *Journal of Interpersonal Violence*, 38(21–22), 10466–10490. <https://pubmed.ncbi.nlm.nih.gov/37198921/>

⁵ PettyJohn ME, Reid TA, Miller E, Bogen KW, McCauley HL. Reproductive coercion, intimate partner violence, and pregnancy risk among adolescent women with a history of foster care involvement. *Child Youth Serv Rev*. 2021 Jan;120:105731. doi: 10.1016/j.childyouth.2020.105731. Epub 2020 Nov 19. PMID: 33716368; PMCID: PMC7945984.