

ABORTION DECRIMINALIZATION IS PART OF THE LARGER STRUGGLE AGAINST POLICING AND CRIMINALIZATION

How Our Movements Can Organize
in Solidarity With Each Other



Abortion Care Network
WE ARE STRONGER TOGETHER



if
when
how

Lawyering for
Reproductive
Justice



NATIONAL NETWORK OF
ABORTION FUNDS

IC INTERRUPTING
CRIMINALIZATION



what does abortion
criminalization have to do
with movements to end police
violence and criminalization?

EVERYTHING.

The expanding surveillance and criminalization of mutual aid, self-managed care, and bodily autonomy, and the growing attempts to criminalize pregnant people, parents, and health care providers have far-reaching ramifications beyond abortion criminalization that require us to join together to collectively resist!

Hundreds of restrictive bills have been proposed, many passed, including the Texas law ([SB8](#))¹ that not only bans abortion after six weeks, but deputizes civilians to police each other's reproductive decisions. Such laws are just the latest examples in a long history of criminalizing bodily autonomy, especially for Black, Indigenous, migrant, disabled, queer, and trans people, and people with low incomes who will experience the harshest impacts of anti-abortion legislation.

This brief offers an analysis of how our movements are connected, and how to push back against a widening web of criminalization.

A WIDENING NET.

One of the more pernicious aspects of SB8 is that it deputizes community members as agents of the carceral state, by giving individuals the right to sue clinics, providers, or people who assist in helping their loved ones get access to abortion care.

Legislation like SB8 not only shuts down access to clinical care but also contributes to criminalizing people who engage in or assist with self-managed care, with ripple effects for communities that are already experiencing high levels of criminalization and surveillance. Conspiracy charges are already driving mass criminalization and incarceration of [parents](#)², [trans people](#)³, [disabled people](#)⁴, people [who](#)⁵ [use](#)⁶ [drugs](#)⁷, and others [who assist](#)⁸ each other in accessing care. Abortion criminalization is yet another way of increasing the surveillance of our bodies, relationships, autonomy, and mutual aid—widening the net of criminalization, and potentially legitimizing other new forms and means of criminalization. While SB8 uses civil rather than criminal law to deputize civilian police, it nonetheless expands the carceral state by enabling individuals to use the weight of the judicial system against one another.

SITUATING ABORTION CRIMINALIZATION WITHIN A LARGER WEB

Organizers and advocates sometimes fail to consider the criminalization of abortion and reproductive care within larger campaigns against the violence of policing and criminalization. Similarly, organizers sometimes exceptionalize expanding restrictions on abortion and reproductive care as a new or unique type of criminalization, rather than understanding them as a [part of a larger web](#)⁹.

It is important to broaden and deepen our collective analysis of the culture of punishment that makes such criminalizing legislation possible, following the lead of Black and Indigenous women, women of color, and trans reproductive justice activists who have made critical connections between multiple movements. Solidarity among anti-criminalization and reproductive justice organizers is essential to dismantle the culture of carcerality and control, and to prevent more laws targeting people existing at precarious intersections of race, gender, sexuality, disability, class and migration. Communities organizing for gender justice, migrant justice, economic and racial justice, sex workers' rights, disability justice, and other movements for liberation should view abortion criminalization as a site of shared struggle. We can then approach collective organizing against abortion criminalization as an opportunity to upend [carceral logics](#) and the culture of criminalization and punishment that materially impacts all of our movements.



The pervasive culture, policies, and practices of punishment leads to the criminalization of Black, Indigenous, low-income, disabled, migrant, trans and queer people and parents—whether through the criminalization of poverty, drug use, or abortion. Members of these communities are surveilled and criminalized in their communities before, after, and during pregnancy, for both the circumstances and outcomes of pregnancy. And truancy laws and the family regulation system continue to surveil and punish parents after they give birth. The criminalization of sexual, reproductive and economic autonomy is rooted in a long history of racial capitalism and white supremacy in legal, medical, and social systems, which has deemed some people “unfit” and “undeserving” of basic needs like health care and reproductive autonomy.

MEDICAL CARE AS A SITE OF CRIMINALIZATION

There is a long history of criminalization of people seeking access to medical care. For example, medical providers have historically collaborated with law enforcement to police, criminalize or civilly commit disabled people, people with unmet mental health and/or housing needs, and migrants. For many groups who are marginalized, the places we go to seek care instead function as routine sites of surveillance, policing, criminalization, punishment and control. Patients are categorized as “good and bad”, their decision-making as “right or wrong,” their behavior is deemed “compliant or non-compliant,” within systems that aggressively punish non-compliance and disobedience. As a result, people seeking care can often have a warranted distrust of health care providers and institutions, who use their positions of authority to determine individuals’ worthiness of access to resources.

One way medical providers contribute to abortion criminalization is by validating certain types of abortion decisions (e.g. early in pregnancy abortions) over others (e.g. later in pregnancy abortions, or so-called “elective” abortions). Such narratives about “good” and “bad” abortions bolster policies that criminalize the bodily autonomy and reproductive decisions of people whose access to abortion is often already curtailed by parental involvement, societal norms, media messages, and legal barriers.

The criminalization of pregnant people at all stages of pregnancy and birth constrains people's bodily autonomy and reproductive freedom—especially for Black, Indigenous, disabled, trans, and queer people, migrants, people surviving economic violence, and young people.

Although criminalization is often initiated and enforced by providers, the laws that criminalize people seeking care are created at the federal, state and local levels. These include laws that hyper-scrutinize reproduction and limit options for reproductive and family support care. These laws also limit choices across the continuum of pregnancy outcomes. They include a punitive collection of laws called TRAP (Targeted Restrictions on Abortion Providers) laws which restrict access to abortion through costly, severe, and medically unnecessary requirements that are imposed on abortion providers and women's health centers and not other kinds of health facilities. In 2021, over 400 abortion restriction laws, designed to force clinic closures and penalize and criminalize abortion seekers, providers and support people, were introduced into state legislatures.

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NAMING OUR VALUES: CRIMINALIZATION IS ANTITHETICAL TO CARE, HEALTH AND HEALING

Criminalization exists in diametric opposition to [public health principles](#)¹⁰, medical ethics, and healing justice. For communities and families to be healthy and thriving, we have to interrupt criminalization and build additional capacity for mutual aid and community care, and fundamentally change how we understand, provide and access care. Criminalizing people who are managing their own care or assisting others operates at cross purposes to these goals.

Our coalition of advocates, health practitioners, impacted community members, public health experts, and people working across social justice movements is recommitting to the caring intentions of health and public health professions, by refusing to participate in criminalization. This includes criminalization as enacted through ICE and police presence in care spaces; in response to community members with unmet mental health and other needs; participation in the [racist apparatus of mandatory reporting](#)¹¹; obtaining and reporting of medically unnecessary drug and alcohol testing; involvement in the prosecution of overdose, collusion with the [Family Regulation System](#)¹² and more. Resisting the criminalization of reproductive autonomy is a critical site of struggle within a larger landscape of criminalization. Shifting this terrain requires that we organize across our movements.

**#DEFUNDPOLICE INCLUDES REPRODUCTIVE
JUSTICE, AND REPRODUCTIVE JUSTICE
MEANS #DEFUNDPOLICE.**

**IF WE CARE ABOUT CRIMINALIZATION, WE MUST
CARE ABOUT ABORTION CRIMINALIZATION.**

**IF WE CARE ABOUT REPRODUCTIVE JUSTICE,
WE MUST DIVEST FROM THE CARCERAL STATE.**

Abortion criminalization is a
direct consequence of funding the [PIC](#)
instead of communities.

New criminalization laws are a
result of, and lead to more funding
for policing which leads to more
incarceration, and less money for
life-affirming efforts.

WHAT CAN ORGANIZERS AND ADVOCATES DO TO RESIST THE CRIMINALIZATION OF REPRODUCTIVE AUTONOMY?

1

Amplify and lift up the history, framing and demands of the Reproductive Justice (RJ) movement¹³, and an intersectional framework that extends beyond “choice.”

Reproductive Justice leaders and organizations have been organizing at the intersection of bodily autonomy and decriminalization for decades—focusing on human rights, social justice, and the structural changes needed to be able to have children, not have children, and parent children in safe and sustainable communities.

Learn from the analysis and work of reproductive justice organizations like SisterSong, SisterReach, Bold Futures; and organizations fighting for decriminalization like the Drug Policy Alliance, Movement for Family Power, Reframe Health and Justice, and Survived and Punished, in moving this work forward.

2

Divest from mechanisms and sites that criminalize reproductive autonomy; Invest in affirming care, bodily autonomy and reproductive justice.

Communities are made less safe, and families and communities are ripped apart by new laws designed to criminalize them. We draw inspiration here from [abolitionist demands](#)¹⁴ to divest from the things that harm our communities and invest in what will help us thrive. Breaking this cycle of harm requires that we advocate, agitate and organize to redirect resources, including public dollars at federal, state, and local levels, away from harm and towards care. For reproductive autonomy, we need to

DIVEST FROM

Carceral logics

Police at the entry of and/or providing security at healthcare facilities

Restrictions and regulations targeted at specific health treatment or services

Abortion bans of any kind

Policing and incarceration related to pregnancy. (For e.g. If you are a provider, do not call the police or recommend that your staff or patients call the police. Police response is a site of further violence and trauma for those you are helping care for).

The family regulation system

Crisis pregnancy centers¹⁵

INVEST IN

Clinic escorts and community safety programs to ensure that alternatives to police presence are available to de-escalate and disrupt anti-abortion clinic protests

Accessible, voluntary mental health and substance use disorder treatment

Full spectrum doula care, including during the pregnancy and the postpartum period, as well as for people experiencing fetal/infant loss, or miscarriage

Easy access to the range of health services, pharmaceuticals and providers, including midwives and doulas that a pregnant or postpartum person may want

Models of care that provide holistic support, including midwifery care, and support for a full range of options, including self-managed and community-supported care

De-escalation training for staff, community-based resources and networks of care and mutual aid

Universal access to health care, including all aspects of reproductive health care

Universal access to quality, accessible, affordable, sustainable and long-term housing, material resources needed to thrive, human-centered education, living wages, spaces for creativity, connection, culture and community, clean air, water, food and a sustainable climate.

Visit [this resource](#)¹⁶ created by Interrupting Criminalization and the Center for Advancing Innovative Policy (CAIP) for specific Policy Dos and Don'ts for anti-violence advocates, reproductive rights advocates, criminal justice advocates, domestic violence advocates, public health and anti-poverty advocates.

3

Destigmatize abortion

Talk about abortion! Make sure people know their options for getting care and assistance. Make sure they have and feel support, so they don't have to do it alone. Have heart to heart conversations in your, and your organizations' networks of influence. Destigmatizing abortion is necessary to decriminalize it.

Help shift the culture around abortion from stigma, isolation, and shame to love, community, and compassion.

ANOTHER WORLD IS POSSIBLE

Exactly a week after the Texas anti-abortion ban, Mexico's Supreme Court unanimously ruled that [criminalizing abortion is unconstitutional](#)¹⁷, setting a precedent that could lead to legalization of the procedure across the country of about 130 million people—something which would not have happened if not for years of a growing feminist movement and organizing, street protests and building power by activists.

Criminalization of abortion providers, abortion seekers, and their communities does nothing to prevent unplanned pregnancy. Organizing for full decriminalization is the only way forward, while we continue the grassroots work to build and strengthen our capacity for mutual aid and communities of care.

GLOSSARY

Carceral logics: “Carceral logics” refers to the punishment mindset that has crept into nearly every government function, even those seemingly removed from prisons. These logics permeate our bodies, minds, and actions due to the fact that punishment is so ingrained in our culture. [Against Punishment](#) is a curriculum by Project NIA and Interrupting Criminalization that describes how this normalization of punishment happens and how to imagine otherwise.

Carceral state: A term often used to refer to institutions of confinement and surveillance like jails, detention centers, and prisons. Its reach, however, is not limited to the criminal legal system and includes things like child protective services, schools, and health care—all of which are disproportionately used to monitor and police low-income, Black, and Indigenous people and communities of color. (*Abolition For the People*, edited by Colin Kaepernick)

Carceral System: An extensive interconnecting network of both public and private institutions and structures designed for imprisonment, policing, and surveillance based in policies and practices relying on punishment, social control, and criminalization. The carceral system includes prisons and jails; immigrant as well as juvenile detention centers; the courts, probation and parole programs; law enforcement including immigration enforcement agencies; and other types of incarceration (e.g. e-carceration; confinement in schools, hospitals, and homes). (*End Police Violence Collective*)

Crisis Pregnancy Center (CPC): CPCs are anti-abortion counseling centers which operate under the guise of providing medical care and social services, but whose goal is to deceive, shame and pressure people about their reproductive health decisions. The vast majority do not have medical licenses or adhere to any standardized ethics.

Family Regulation System: A term coined by anti-violence advocate Emma Williams, and popularized by the [Movement for Family Power](#) and the ground-breaking scholar Dorothy Roberts, that refers to the “multi-billion-dollar government apparatus that regulates millions of marginalized people through intrusive investigations, monitoring and [forcible removal of children](#)¹⁸ from their homes to be placed in foster care, group homes and “therapeutic” detention facilities”—most often due to allegations of neglect related to poverty which the system does nothing to address.

Healing Justice: A framework that identifies how we can holistically respond to and intervene on generational trauma and violence, and to bring collective practices that can impact and transform the consequences of oppression on our bodies, hearts, and minds. (*Cara Page And The Kindred Healing Justice Collective*)

Prison Industrial Complex: “Prison Industrial Complex” (PIC) is a term we use to describe the overlapping interests of government and industry that use surveillance, policing, and imprisonment as solutions to what are, in actuality, economic, social, and political “problems.” (*Rachel Herzog of Critical Resistance*)

Reproductive Justice: Reproductive Justice is the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities. (*SisterSong Women of Color Reproductive Justice Collective*)

Reproductive rights: A framework largely centered on achieving women’s individualistic reproductive freedom through the legal system which has historically focused largely on the pro-choice and pro-life debate, sex education, and family planning.

TRAP Laws: A class of abortion restrictions that burden providers with requirements regarding their facility, equipment and staffing that are designed to shut down abortion providers and make it more difficult for people to access abortion.

ENDNOTES

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