



SC Coalition Against Domestic Violence and Sexual Assault
Statement of Opposition to H. 3537
House Judiciary Committee: Constitutional Laws
January 14, 2026

As you deliberate today on H.3537, we ask you to carefully consider the rights of survivors of both domestic violence and sexual assault. We ask you to consider their right to live a life that is free from further trauma, free from further risk of physical harm and free from the risk of being murdered by their abuser.

Access to reliable methods of contraception that cannot be sabotaged by an abusive partner is essential to safety of victims in violent relationships. In South Carolina, 42.3% of women experience intimate partner violence, sexual violence or stalking in their lifetime. People living in abusive relationships often do not have the autonomy to make decisions for themselves, including the decision to have sexual intercourse or to get pregnant. A nationally representative survey found that an estimated 10.3 million U.S. women reported having a partner who tried to get them pregnant against their will or refused to use contraception¹, with a heightened prevalence among victims of intimate partner violence.² This is commonly referred to as reproductive coercion.

Once someone in an abusive relationship becomes pregnant, the violence frequently escalates. In fact, more than 320,000 pregnant women are abused by their partner each year, and the odds of experiencing such abuse increases by 10% for each pregnancy. This leads to the alarming reality that homicide is now one of the leading causes of death during pregnancy.³

By defining life as beginning at fertilization, any action that interrupts implantation could put someone at risk of being charged with murder. We believe this bill, as written, will impact the availability of the IUD, the only form of reliable, long-lasting and reversible contraception that cannot be sabotaged by an abusive partner. Limiting access to reliable forms of contraception increases the likelihood that victims will be forced to remain in the relationship and raise children in an increasingly abusive environment; thus, continuing the cycle of violence.

¹ Black et al., The National Intimate Partner and Sexual Violence Survey, 2010 Summary Report.

² The Hotline & If/When/How, Reproductive Coercion and Abuse Report, 2024. << [reproductive-coercion-and-abuse-report-final.pdf](#) >>

³ Wallace, Maeve PhD; Gillispie-Bell, Veronica MD; Cruz, Kiara MPH; Davis, Kelly MPA; Vilda, Dovile PhD. *Homicide During Pregnancy and the Postpartum Period in the United States, 2018-2019.*

Obstetrics & Gynecology: November 2021 - Volume 138 - Issue 5 - p 762-769

doi: 10.1097/AOG.0000000000004567

<<https://journals.lww.com/greenjournal/Abstract/2021/11000/Homicide_During_Pregnancy_and_the_Postpartum.10.aspx>>

Access to Emergency Contraception after a sexual assault According to the South Carolina Sexual Assault Protocol issued by the Office of the SC Attorney General, the “standard of care is to discuss [with] and offer emergency contraception”⁴ to a woman in the immediate aftermath of a violent sexual assault. The provisions of this bill would result in a fundamental change to the standard of care currently provided to victims of rape. Emergency contraception does not cause or result in an abortion.⁵ The purpose of emergency contraception is to prevent pregnancy, and if used within 5 days after an assault, it can be 81% to 99% effective depending on the timing and method chosen. Multiple recent polls indicate that emergency contraception is widely popular and that voters from across the political spectrum oppose efforts to restrict access to it and to equate emergency contraception with abortion.⁶

The two types of emergency contraception recommended to women in the aftermath of a sexual assault by a male perpetrator are⁷:

- 1) ***emergency contraceptive pills*** - including both progestin pills (such as Plan B One Step©) and ulipristal acetate pills (such as ella©), which prevent pregnancy by delaying ovulation, and
- 2) ***intrauterine devices (“IUDs”)***, including both copper IUDs and hormonal IUDs, which primarily prevent pregnancy by making it harder for the sperm to fertilize the egg, but in some cases may also prevent pregnancy by delaying ovulation or by making it harder for the egg to implant on the uterine wall.⁸

⁴ Office of the South Carolina Attorney General, *Sexual Assault Protocol: For the Investigation, Prosecution and Judgment of Sexual Assault, 2nd Edition* (2015), p. 17. 23, << <https://www.scag.gov/wp-content/uploads/2011/03/2015-Sexual-Assault-Protocol-00696163xD2C78.pdf> >>

⁵ American College of Obstetricians and Gynecologists, *Emergency contraception*, 2019, << <https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2015/09/emergency-contraception> >>

⁶ Mary Cousens, Navigator Research, *Four in Five Americans Support Legislation Protecting Access to Contraception*, June 2024, << <https://navigatorresearch.org/four-in-five-americans-support-legislation-protecting-access-to-contraception/> >>, Contraceptive Access, *Public Opinion on Contraception & IVF, New poll on contraception & IVF*, January 2025, << <https://www.contraceptiveaccess.org/new-poll-on-contraception-and-ivf> >>; Bellweather Research, *Strong bipartisan support exists for ensuring access to all contraceptives*, January 2025, << <https://static1.squarespace.com/static/65b13a752b313749e91c3737/t/678932c10c538b7b97211aad/1737044673451/CAI+National+survey+memo.pdf> >>

⁷ Haeger KO, Lamme J, Cleland K., *State of emergency contraception in the U.S., 2018*. *Contracept Reprod Med.* Sept 2018,. << <https://pmc.ncbi.nlm.nih.gov/articles/PMC6123910/> >>; KFF, *Emergency Contraception*, January 2025, << <https://www.kff.org/womens-health-policy/emergency-contraception/> >>

⁸ Turok D et al., *Levonorgestrel vs. copper intrauterine devices for emergency contraception*, *New England Journal of Medicine*, 2021, 384(4):335–344, << <https://www.nejm.org/doi/full/10.1056/NEJMoa2022141> >>; National Institute of Child Health & Human Development, *Science Update: Hormonal IUD as effective as a copper IUD at emergency*

The language proposed in this bill would make the use of an IUD in this circumstance impossible without risk of criminal charges to a victim or medical professional.

Rape & Incest Exceptions provided under the current abortion law will be lost. Rape is a violent crime that removes all choice and control over a victim's body and can result in unplanned and unwanted pregnancy that may tether the victim permanently to their rapist. The SLED Crimebook reports that 2,016 women reported sexual battery to law enforcement in 2023⁹. Rape crisis centers responded to 3,536 new primary survivors of sexual assault. We know these are undercounts of the true scope of the number of rapes and sexual assaults as the National Sexual and Intimate Partner Violence Survey (NISVS) estimates that 29.1% of women in South Carolina have been raped at least once during their life¹⁰ and the Bureau of Justice Statistics estimates that only 24% of sexual assault victimizations are reported to law enforcement.¹¹ These statistics are more than data points, they are women's lives that have been irreparably changed as a result of rape.

SCCADVASA maintains its long-standing objections to any measure that unreasonably limits survivors access to critical healthcare and safety options, especially in the immediate aftermath of a violent and intimate assault or ongoing violence by a male perpetrator that may result in an unwanted pregnancy, as the provisions of this bill identified above would further do.

*contraception and with less discomfort, NICHD-funded study suggests Device may also be more effective than morning after pill at emergency contraception, February 4, 2021, <<
<https://www.nichd.nih.gov/newsroom/news/020421-levonorgestrel> >>*

⁹ SLED, *Crime in South Carolina, Annual Report, 2023 - Crime in South Carolina (101524).pdf*

¹⁰ NISVS 2016-2017 [Reports and Publications |Violence Prevention|Injury Center|CDC](#)

¹¹ U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, *Criminal Victimization, 2024.*