

How the Global Gag Rule

Undermines U.S. Foreign Policy and Harms Women's Health

Family planning opponents in the U.S. Congress and White House have long sought to place burdensome restrictions on U.S. family planning and reproductive health assistance. One such restriction is the Mexico City Policy, known to its opponents as the Global Gag Rule, which has proven detrimental to America's foreign policy objectives, to family planning programs in developing countries, and to women's health.

What is the Global Gag Rule

The Global Gag Rule denies foreign organizations receiving U.S. family planning assistance the right to use their own non-U.S. funds to provide information, referrals or services for legal abortion or advocate for the legalization of abortion in their country. The Gag Rule originally was imposed by the Reagan administration at the 1984 United Nations International Conference on Population in Mexico City. It was rescinded in 1993 by President Clinton, then reinstated in 2001 by President George W. Bush on his first business day in office.

In January 2009, President Obama again rescinded the Gag Rule, but serious concerns remain about the prospect of a future President who is hostile to family planning reinstating the policy. While family planning assistance can now be provided to the organizations best situated to deliver services on the ground, the typical five-year term of U.S. government-funded projects extend past the next Presidential election—hence leaving organizations affected by the Gag Rule

(and the communities they serve) vulnerable to an immediate cut-off of funding from future administrations hostile to family planning. It is this uncertainty that has led to reluctance on the part of some nongovernmental partners and U.S. government officials to enter into agreements with organizations that might be deemed ineligible for funding in the future.

For those foreign organizations that refused to comply with the Gag Rule when it was in force in the past, the price was not just monetary. In addition to forfeiting financial assistance from the United States Agency for International Development (USAID), these organizations lost valuable technical assistance and U.S.-donated contraceptives, including condoms—two critical aspects of USAID's family planning program. With 225 million women worldwide who want but lack access to modern contraception,¹ the Gag Rule further hurts an already-dire situation. No other donor can match the U.S.'s longstanding leadership and technical expertise on family planning to easily fill the void left by the withdrawal of and restrictions on U.S. assistance.

The Gag Rule is obstructive and unwarranted

U.S. family planning assistance funds family planning, not abortion. Existing U.S. law and policy prohibits U.S. funding for abortions overseas. Since 1973, the Helms amendment to the Foreign Assistance Act has banned the use of U.S. funds for abortion services; using U.S. funds for biomedical



research and lobbying on abortion has been prohibited since 1981.

The Gag Rule would be unconstitutional in the United States. A number of court decisions have established that it would be unconstitutional to make the eligibility of a U.S.-based organization for federal funds contingent on the organization's willingness to surrender the right to use its own funds to exercise free speech and participate in the political process.

The Gag Rule undermines U.S. efforts to promote democracy around the world. It is called a "gag" rule because it stifles public debate on abortion-related issues, requiring private organizations overseas to choose between continuing their non-U.S. funded efforts to change public policy around abortion in their countries, and receiving U.S. family planning funds. Restricting their freedom to engage in public policy debates undermines a central tenet of U.S. foreign policy—the promotion of democracy abroad—and its core principle of free and open debate.

The Gag Rule restricts foreign organizations from engaging in activities that are legal in their own countries and in the United States. U.S. law currently preserves the right to safe and legal abortion services. Many of the same countries receiving USAID family planning assistance also permit abortion for reasons other than to save the life of the woman, rape or incest. Indeed, the global trend is toward laws that support more comprehensive access to reproductive health services.

When the Gag Rule is in place, local providers in developing countries must disregard laws set in place by their governments and comply with the restrictive U.S. policies if they choose to accept U.S. funds. This restriction on the activities of foreign partner organizations would run counter to the Global Health Initiative's and foreign assistance reform emphases on country ownership.

The Global Gag Rule harms women's health

The Gag Rule forced closures and cutbacks by leading family planning groups. Family planning providers that declined U.S. funding while the Gag Rule was in place were forced to close clinics, cut services, and increase fees. They were unable to obtain donated contraceptives to meet the needs of the communities that they served. In a number of countries, established health care referral networks collapsed while the Gag Rule was in place, as key family planning providers downsized and struggled to cope with budget cuts and rapidly declining stocks of contraceptive supplies.

The Gag Rule has adversely affected the supply of contraceptives and condoms. Shortly after the reinstatement of the Gag Rule in 2001, shipments of U.S.-donated condoms and contraceptives completely ceased to 16 developing countries, primarily in Africa. Moreover, family planning providers in another 16 countries—mostly in Africa—lost access to condoms and contraceptives as a result of their refusal to accept the Gag Rule restrictions. Even though the Gag Rule was rescinded in 2009, some of these same organizations that were affected by the imposition of the Global Gag Rule have yet to fully resume family planning services with U.S. government assistance, due to



fears that their funding will once again be cut off under a future administration hostile to family planning.

The Gag Rule restricts open communication between women and their trusted health care providers. Prohibiting organizations from providing information, counseling, and referrals on abortion hurts their ability to provide comprehensive health care needed or requested by their community and undermines trust between providers and patients. The principles of informed consent demand that health care providers not withhold information on services that are available and/or legal in that country, or that could prevent injury or even save a woman's life.

Access to family planning makes a difference in women's lives

Family planning is a basic health care service. Family planning is a vital part of basic health care services and family planning clinics often serve as the entry point for women to access the entire health system.

The Gag Rule negatively impacts other U.S. global health priorities within the Global Health Initiative, including HIV/AIDS prevention and maternal and child health, and runs counter to foreign assistance reform efforts to increase the cost-effectiveness and sustainability of development programs.

HIV-Prevention. Family planning providers have developed the expertise, services, and information to counsel individuals about safer sex, help individuals avoid high-risk behaviors, and screen for and treat sexually transmitted infections (STIs),

including HIV. Although it applied only to family planning funds, the Gag Rule prevented the United States from working with some of the most effective front-line partners serving two of the populations at greatest risk of STIs, including HIV/AIDS—women and youth.

Maternal and Child Health. Every year, hundreds of thousands of women die in pregnancy or childbirth;² 99 percent of these deaths occur in the developing world and the vast majority are preventable. Fully satisfying the unmet need for modern contraception of 225 million women would avert an additional 52 million unintended pregnancies and 70,000 maternal deaths. Increasing the availability of prenatal care, trained birth attendants and family planning services is essential to helping women time and space their births and making pregnancy and childbirth safer for women and their babies.³

Access to family planning helps reduce abortion and deaths caused by unsafe abortion. Regardless of whether abortions are legal, women in desperate situations still seek them out. As a result, abortions performed under unsafe conditions remain a major public health concern. Approximately 22,000 women die each year from unsafe abortion complications, many of them leaving young children behind. Many more women, about 8.4 million, suffer serious illness or injury.⁴ Many more suffer serious illness or injury. Expanding access to family planning can help prevent unplanned pregnancies and reduce such tragedies.

GGR2015.03

Sources

1. **Guttmacher Institute.** (2014). *Adding It Up: The costs and Benefits of Investing in Sexual and Reproductive Health*. Retrieved from <https://www.guttmacher.org/pubs/AddingItUp2014.html>

2 - 4. Ibid

PAI
pai.org

1300 19th Street NW, Suite 200
Washington, DC 20036-1624 USA
PHONE: (202) 557-3400
EMAIL: info@pai.org