

THE GLOBAL GAG RULE & CONTRACEPTIVE SUPPLIES

The Global Gag Rule bars U.S. family planning assistance to foreign nongovernmental organizations (NGOs) who, with their own, non-U.S. funds, engage in abortion-related activities in their country. NGOs refusing to abide by these restrictions lose vital U.S. family planning funds and technical assistance.

Organizations that do not sign the Global Gag Rule also lose access to U.S.-donated contraceptives, including condoms.* Modern contraceptives are fundamental to enabling women and men to prevent unwanted pregnancy, protect themselves from HIV/AIDS, and avoid unsafe abortion — a leading cause of maternal injury, illness, and death in the developing world.

GROWING SUPPLY CRISIS

Around the world, demand for contraceptives and condoms has never been higher — due to population growth, rising popularity and use of family planning services, increasing prevalence of HIV infection, and the largest-ever cohort of young people moving into their reproductive years — and yet funding for contraceptives has not kept up. The Global Gag Rule exacerbates this growing shortfall in reproductive health supplies at a time when they are desperately needed for contraception and HIV/AIDS prevention.



The loss of U.S.-donated contraceptives to key family planning NGOs overseas, because they rejected the Global Gag Rule restrictions, has sparked a crisis within a crisis.

Developing countries are highly dependent on donors for supplies. The U.S. Agency for International Development (USAID) and the UN Population Fund (UNFPA) are the largest donors of contraceptives, including condoms, to the developing world. USAID is the most important single donor, procuring and delivering more than one-third of all donated supplies — an amount worth about U.S. \$75 million per year.† Developing country governments are shouldering an increasing share of contraceptive supplies, but many poor countries cannot keep up with the growing demand.

Donors provided just over 950 million condoms in 2000 — less than one-eighth of the number needed to achieve the kind of access required to significantly reduce HIV infection and prevalence rates in developing countries and Eastern Europe.¹ Moreover, waning donor commitment and poor overall coordination are serious problems. Most developing country NGOs, private sector initiatives, and public sector providers are simply unable to obtain the best international prices for contraceptive supplies because their orders are relatively small (when compared to the bulk quantities procured by USAID or UNFPA).

**ACCESS
DENIED**

U.S. RESTRICTIONS ON INTERNATIONAL FAMILY PLANNING

FAMILY PLANNING PROVIDERS STARVED OF CONTRACEPTIVES, CONDOMS[†]

Against this backdrop, the gag rule makes the precarious supplies situation worse. Many NGOs that objected to the policy restrictions have had their once-steady supply of USAID-donated contraceptives vanish. Contraceptives are not fungible, since clinics have never been able to purchase their own contraceptives and, therefore, no funds are freed up by this loss of supplies. Their clinics are running dangerously low and, in some cases, their stock of the more popular methods, such as Depo-Provera, is nearly exhausted. Women will now have fewer options from which to choose, or none at all.

- **By 2002, the Global Gag Rule had ended shipments of USAID-donated contraceptives to 16 developing countries:** Burundi, Cape Verde, Chad, Comoros, Gabon, Gambia, Lesotho, Mauritius, Sierra Leone, Solomon Islands, Sri Lanka, Swaziland, Tonga, Vanuatu, Western Samoa and Yemen. The local family planning associations (FPAs) in each of these countries, affiliates of International Planned Parenthood Federation, declined to sign the policy. They were the only recipients of USAID contraceptives in their respective countries. Several of these countries have not received USAID supplies for the last three years because of the Global Gag Rule.
- **Leading family planning agencies in another 13 countries are unable to receive USAID contraceptives because of their refusal to abide by the restrictions.** The FPAs in Bangladesh, Benin, Cameroon, Ivory Coast, Ethiopia, Mozambique, Dominican Republic, Nicaragua, Togo, Uganda, Nepal, Zambia and Zimbabwe were major recipients of USAID supplies. At a time when these countries are grappling with HIV/AIDS and other sexually transmitted infections, as well as high rates of maternal death from unsafe abortion, the Global Gag Rule is withholding life-saving reproductive health supplies from millions of women and men who rely on these family planning providers for contraceptives.

CRISIS WITHIN A CRISIS

The Global Gag Rule has worsened existing shortages of contraceptives, including condoms. By stopping the flow of supplies to key family planning NGOs, couples are left vulnerable to disease and without the means to determine how many children to have and when. Contraceptives can save lives by preventing unwanted pregnancies and, in the case of barrier methods, sexually transmitted infections such as HIV/AIDS.

The effects of the Global Gag Rule prove that health care policy that puts ideology before sound public health practices has a tremendous impact on service delivery. With so many lives at stake, the United States cannot afford to alienate, disparage, or leave out any provider or group of providers that is able to deliver cost-effective and comprehensive reproductive health services, including HIV/AIDS prevention.

* The Global Gag Rule does not technically apply to HIV/AIDS funds from USAID, yet it is hampering HIV prevention efforts. When family planning organizations refuse to accept the terms of the gag rule, STI prevention services (including HIV) and condom supplies that they routinely provide are undermined because of the loss of USAID family planning assistance.

† This figure includes supplies purchased through both USAID's Population and HIV/AIDS accounts in FY2002.

‡ Specifically contraceptives, including condoms, shipped by USAID as part of the family planning assistance program. The Global Gag Rule does not apply to condoms procured with HIV/AIDS funds.

1. UNFPA. 2002. Database on Donor Support for Contraceptives and Logistics Management. New York: UNFPA.

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The Global Gag Rule Impact Project is a collaborative research effort led by Population Action International in partnership with Ipas and Planned Parenthood Federation of America and with assistance in gathering the evidence of impact in the field from EngenderHealth and Pathfinder International.

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