

PRM Press Guidance
May 15, 2017

**Implementation of Protecting Life in Global Health Assistance
(Formerly known as the “Mexico City Policy”)**

- On January 23, 2017, President Trump reinstated the Presidential Memorandum of January 22, 2001, on the “Mexico City Policy,” and directed the Secretary of State, “in coordination with the Secretary of Health and Human Services, to the extent allowable by law, to implement a plan to extend the requirements of the reinstated Memorandum to global health assistance furnished by all Departments or Agencies.”
- On May 9, 2017, Secretary Tillerson approved a plan to implement the manner in which U.S. Government Departments and Agencies will apply the provisions of the “Mexico City Policy” to grants, cooperative agreements and contracts with foreign non-governmental organizations (NGOs) that receive U.S. funding for global health assistance.
- The expanded policy, now known as “Protecting Life in Global Health Assistance,” implements what the President has made very clear: U.S. taxpayer money should not be used to fund foreign organizations that perform or actively promote abortion as a method of family planning in other nations.
- Protecting Life in Global Health Assistance applies to approximately \$8.8 billion in funds appropriated to the Department of State, the U.S. Agency for International Development (USAID), and the Department of Defense.
- Protecting Life in Global Health Assistance does not reduce the amount of global health assistance the U.S. Government makes available. The United States remains deeply committed to supporting health programs around the world.
- Foreign NGOs that agree not to perform or actively promote abortion as a method of family planning will remain eligible to receive global health assistance through the standard U.S. Government processes that govern the award of federal funds.

Q: What is the “Mexico City Policy”?

- First introduced by President Ronald Reagan in 1984, the “Mexico City Policy” has required foreign NGOs to agree that they will not “perform or actively promote abortion as a method of family planning” as a condition for receiving USAID and Department of State family-planning assistance.
- President Trump’s Presidential Memorandum of January 23, 2017, directs the Secretary of State to implement a plan to extend the policy, now known as Protecting Life in Global Health Assistance, to all global health assistance, provided by any Department or Agency, to the extent allowable by law.

Q: What is the “global health assistance” covered by Protecting Life in Global Health Assistance?

- Under this expanded policy, “global health assistance” includes funding for international health programs, such as those for HIV/AIDS, maternal and child health, malaria, global health security, family planning and reproductive health.

Q: Who must comply with the new policy?

- Protecting Life in Global Health Assistance applies to global health assistance to, or implemented by, foreign NGOs. This includes global health assistance that a U.S. NGO provides to a foreign NGO through a sub-award.
- Each organization will have the opportunity to indicate its agreement to abide by the terms of Protecting Life in Global Health Assistance by accepting the provisions in its award. To continue to receive U.S. taxpayer funding, a foreign organization must agree that it will not “perform or actively promote abortion as a method of family planning” with funding from any source, or provide financial support to any other foreign non-governmental organization that conducts such activities.

Q: Does Protecting Life in Global Health Assistance apply to U.S. NGOs?

- This policy does not apply to U.S. NGOs, but does apply to a foreign NGO to which a U.S. NGO makes a sub-award of global health assistance.

- For the purposes of this policy, a “U.S. NGO” is an organization organized under the laws of the United States, a U.S. State or Territory, the District of Columbia, or the Commonwealth of Puerto Rico.

Q: What funding activities does Protecting Life in Global Health Assistance cover?

- Protecting Life in Global Health Assistance covers the provision of funds, commodities, equipment, or other in-kind global health assistance to a foreign NGO through a grant, contract or cooperative agreement. Affected Departments and Agencies are in the process of taking the necessary administrative and legal steps to apply the policy to these forms of agreements.

Q: How is Protecting Life in Global Health Assistance different from the “Mexico City Policy” established in 1984, and revived in 2001?

- President Trump’s initiative applies to all global health assistance provided by any U.S. Department or Agency, to the extent allowable by law, while the previous “Mexico City Policy” applied only to family-planning assistance funded by USAID and the Department of State.

Q: When does Protecting Life in Global Health Assistance go into effect, and how will it work?

- USAID took steps on March 2, 2017, to reinstate the “Mexico City Policy” with respect to family-planning assistance.
- The State Department is working with an interagency group to adapt USAID’s “Mexico City Policy (March 2017)” standard provision for family-planning assistance to reflect changes needed to extend the provision to global health assistance.
- Beginning May 15, 2017, affected Departments and Agencies will either start the required process for approving a new standard provision, or, where possible, immediately include the provision in (a) all new grants and cooperative agreements that provide global health assistance; and (b) all existing grants and cooperative agreements that provide global health assistance when such agreements are amended to add new funding. Affected Departments and Agencies are also taking the necessary steps to include a similar provision in certain types of contracts for global health assistance.

- Each affected Department and Agency will inform relevant funding recipients of the expanded policy through appropriate channels, such as notices and conference calls.
- Finally, each affected Department and Agency will develop procedures to ensure compliance with the policy, which will include training of U.S. Government staff and funding recipients, and the periodic monitoring of covered funding recipients.

Q: Does Protecting Life in Global Health Assistance provide for any exemptions?

- National and sub-national Governments, public international organizations, and other multilateral entities in which sovereign nations participate are not subject to the requirements of Protecting Life in Global Health Assistance.
- Also excluded is humanitarian assistance, including State Department migration and refugee-assistance activities, USAID disaster and humanitarian-relief activities, and U.S. Department of Defense (DoD) disaster and humanitarian relief.
- This policy does not limit foreign NGOs from treating injuries or illnesses caused by illegal or legal abortions, such as emergency treatment for complications from spontaneous or induced abortion, with U.S. Government or other funds, nor does it prohibit post-abortion care as a condition for receiving U.S. Government funds.
- Protecting Life in Global Health Assistance also does not apply with respect to cases of rape, incest or endangerment of the life of the woman; as such, it does not prohibit foreign NGOs from performing, or referring women for, the termination of pregnancies in cases of rape, incest or endangerment of the life of the woman.
- There is also an exception for passive referrals.
- In consultation with the Secretary of HHS, the Secretary of State may authorize additional, case-by-case exemptions to the policy.

Q: Is research included under Protecting Life in Global Health Assistance?

- The policy covers implementation-science research, operational or programmatic research, surveys, needs assessments and related capacity-building conducted for the purpose of making improvements to global health assistance programs funded by the U.S. Government and implemented through a foreign NGO with a primary purpose or effect of benefiting a foreign country.

Q: Will Protecting Life in Global Health Assistance affect programs like the President's Malaria Initiative (PMI), or the \$6 billion the U.S. Government gives in assistance each year under the President's Emergency Plan for AIDS Relief (PEPFAR)?

- This policy covers all U.S. global health assistance to the extent allowable by law, including funds for PEPFAR and PMI.
- PEPFAR and PMI will continue to implement their life-saving activities through NGO partners around the world that comply with the provisions of Protecting Life in Global Health Assistance.

Q: Is PEPFAR prepared to implement Protecting Life in Global Health Assistance without any interruption in HIV/AIDS service provision?

- Yes, PEPFAR is well-positioned to implement the new policy.
- PEPFAR's sizable partnership base will help it to maintain the continuity of HIV/AIDS service provision as the policy is implemented.
- PEPFAR will have layered, intensive monitoring during implementation of the policy to prevent disruption in its provision of life-saving HIV services, including treatment.

Q: What impact may implementation of Protecting Life in Global Health Assistance have on PEPFAR's DREAMS partnership, which explicitly focuses on adolescent girls and young women?

- PEPFAR is well-positioned to implement the new policy, including with respect to its DREAMS partnership.
- PEPFAR will continue to routinely collect quarterly data on its programs, and closely monitor these data for any impact of the policy on the DREAMS partnership.

Q: How will the Administration monitor Protecting Life in Global Health Assistance in the field?

- U.S. Government Departments and Agencies will work together to develop a plan to engage funding recipients about Protecting Life in Global Health Assistance, and to develop procedures to ensure compliance with it, which will include training of U.S. Government staff and funding recipients and the periodic monitoring of compliance.

Q: Will Protecting Life in Global Health Assistance be evaluated at any point?

- The Department will conduct a comprehensive review of all aspects of the policy's application, which could include compliance, implementation issues, and new information affecting implementation going forward.

Q: Does this mean that U.S. NGOs that implement global health programs are prohibited from providing Federal funding to any foreign NGOs that provide abortion services as a method of family planning, even if the foreign NGOs provide such services with other funding and abortion is legal in the country in which they are located?

- Yes. U.S. NGOs that accept Federal funds for global health assistance may not provide such funding to any foreign NGO that performs or promotes abortion as a method of family planning.

Q: How many NGOs will be affected, and how much money will the Administration be withdrawing from NGOs under this policy?

- Funding previously obligated will not be affected as a result of this policy. Existing agreements will continue to be implemented, and such agreements will

be amended to include the standard provision when funding is added.

- It is important to note that all foreign NGOs will remain eligible to receive global health assistance through the standard U.S. Government processes that govern the award of federal funds. However, to do so, they must indicate their agreement to abide by the terms of Protecting Life in Global Health Assistance by accepting the provisions in their award.
- We cannot speculate on organizations' decisions whether to accept those provisions, and therefore cannot speculate on how many organizations will be affected at this time.
- We look forward to continuing to work with thousands of NGOs to promote global health.

Q: Doesn't this endanger the lives of women and children worldwide?

- No. As the world's largest bilateral donor to global health programs, the United States remains committed to helping women and their children thrive.
- USAID's bilateral maternal and child health program has been working in 25 countries that together account for more than two-thirds of maternal and child deaths worldwide. Since 2008, our work in these 25 priority countries has saved the lives of 4.6 million children and 200,000 women.
- It is also important to note that this policy does not limit foreign NGOs from treating injuries or illnesses caused by illegal or legal abortions, such as emergency treatment for complications from spontaneous or induced abortion, with U.S. Government funds, nor does it prohibit post-abortion care as a condition for receiving U.S. Government funds.
- The policy also does not apply with respect to cases of rape, incest or endangerment of the life of the woman.

Q: What about allegations that these types of policies actually increase the number of abortions performed?

- Protecting Life in Global Health Assistance is designed to ensure that U.S. taxpayer funds do not support foreign organizations that perform or actively

promote abortion as a method of family planning. We plan to monitor its effect.

Q: What will happen to the funding that is not awarded to non-compliant organizations? Will the Administration apply it to women's health programs?

- This change will have no impact on the total amount of U.S. Government funding for global health programs.
- Departments and Agencies will reprogram to other organizations any funding they would have awarded to NGOs that do not agree to the conditions set on the acceptance of U.S. funding under Protecting Life in Global Health Assistance.

Q: Why is the Administration changing the name of the Mexico City Policy?

- To avoid confusion and add clarity we have given the new policy a name that reflects its intent more precisely, which is to ensure U.S. taxpayer funds do not support foreign organizations that perform or actively promote abortion as a method of family planning.

Q: How much global health assistance is the Administration cutting off with this announcement?

- None. Protecting Life in Global Health Assistance does not reduce the amount of global health assistance the U.S. Government makes available.
- Foreign NGOs that agree, as a condition of receiving federal global health assistance funding, that they do not perform or actively promote abortion as a method of family planning, or provide financial support to any other foreign non-governmental organization that conducts such activities, will remain eligible to receive funding through the standard U.S. Government processes that govern the award of Federal funds.
- Departments and Agencies will reprogram to other organizations any funding they would have awarded to NGOs that do not agree to the conditions set on the acceptance of U.S. funding under Protecting Life in Global Health Assistance.

Q: What constitutes "promoting" abortion?

- Active promotion of abortion as a method of family planning includes, for example, abortion counseling, referrals (except for passive referrals), lobbying, and public-information campaigns.
- Referrals for the termination of a pregnancy in cases of rape, incest or endangerment of the life of the woman are not prohibited.

Q: What is a “passive referral”?

- Providers are permitted to respond to a question regarding where a safe, legal abortion may be obtained if the question is specifically asked by a woman who is already pregnant, she clearly states that she has already decided to have a legal abortion, *and* the provider reasonably believes that the ethics of the medical profession in the host country require a response regarding where the procedure is available safely and legally. All of these conditions must apply.

Q: Does Protecting Life in Global Health Assistance prevent women from having an abortion in countries in which the procedure is legal?

- No. Protecting Life in Global Health Assistance does not change any country’s domestic legislation or policies.
- Furthermore, this policy does not prohibit foreign NGOs from performing or referring women for the termination of pregnancies in cases of rape, incest or endangerment of the life of the woman, where permitted.
- There is also an exception for passive referrals.

Q: Prior to the issuance of the Presidential Memorandum of January 23, how much U.S. funding was spent on the provision of abortion as a method of family planning by partners overseas?

- Since 1973, the Helms Amendment has prohibited the use of U.S. foreign assistance funds to pay for the performance of abortion as a method of family planning, or to motivate or coerce any person to practice abortion. The U.S. Government takes this and other related restrictions very seriously, and works with partners to ensure compliance.

Background

When introduced by President Ronald Reagan in 1984, the Mexico City Policy required foreign NGOs to certify that they will not “perform or actively promote abortion as a method of family planning” with private or other funds as a condition for receiving U.S. Government global family planning assistance. The Policy takes its name from the location of the Fourth International Conference on Population, where Assistant Secretary of State for International Organization Affairs Alan Keyes announced it. Before the Policy, foreign NGOs could use funds from non-U.S. taxpayer sources to engage in abortion-related activities, but had to maintain separate accounts for U.S. Government assistance.

In August of 2003, President Bush extended the Mexico City Policy to all population-planning funds, whether furnished by USAID or by other components of the State Department, but exempted the President’s Emergency Plan for AIDS Relief (PEPFAR) and multilateral organizations. President Trump’s Executive Memorandum reinstates the Presidential Memorandum of January 22, 2001, on the Mexico City Policy, and directs the Secretary of State, in coordination with the Secretary of Health and Human Services, to the extent allowable by law, to implement a plan to extend the requirements of the reinstated Memorandum to any global health assistance furnished by all federal Departments or Agencies.

Protecting Life in Global Health Assistance continues the previous policy’s exemption for cases in which a woman’s pregnancy poses a risk to her life, or resulted from incest or rape. It also allows health providers in countries where abortion is permitted to respond to a question about where to obtain a safe, legal abortion from a woman who is already pregnant and clearly states she has decided to have a legal abortion.