



The Time is Now: Repeal the Global Gag Rule

The Mexico City Policy, commonly referred to as the “global gag rule” (GGR), prohibits funding for safe and legal abortion and prevents people around the world from accessing care. In January 2021, the Biden administration rescinded the GGR, marking the end of a four-year reinstatement of the policy under the Trump administration, during which time, the harmful rule underwent the most severe expansion in history. Though it is a step in right direction, the rescission of the policy by the current administration is not enough. Congress must permanently repeal the GGR and prevent future anti-abortion administrations from easily re-imposing it.

What is the Global Gag Rule?

Historically, the GGR prohibited any foreign non-governmental organizations (NGOs) that received U.S. federal family planning assistance from using funds of their own to provide, counsel, refer, or advocate for abortion services as “a method of family planning.”¹ When in place, it forces providers to choose between much-needed U.S. assistance but severely undermined care, or the ability to provide clients with an accurate and full range of safe and legal reproductive health options but with limited or no funding. First instituted by the Reagan administration in 1984, the policy has been rescinded and reinstated by executive order along party lines ever since – rescinded by Democrats, reinstated by Republicans. The most recent iteration of the GGR under the Trump administration went even further to push the anti-abortion agenda by extending the rule to *all* U.S. global health assistance.

Proponents of the GGR claim that restricting family planning funding to eliminate abortion services will reduce the number of abortions worldwide; that simply is not the case. Research has shown that the policy has led to increases in abortions as the GGR greatly limits individuals’ access to modern contraception and family planning methods due to funding cuts, clinic closures, and fragmented services.² The GGR effectively makes health services less accessible for those who need them the most and is counterproductive to the goals of U.S. foreign assistance.



EXPANSION OF GGR UNDER THE TRUMP ADMINISTRATION

Before the Trump administration’s expansion of the policy, the GGR was a harmful foreign policy that applied to foreign NGOs receiving U.S. family planning funding. Once expanded by President Trump in 2017, the GGR, renamed the Protecting Life in Global Health Assistance (PLGHA), became even more damaging as it applied to all U.S. global health assistance, including funding for HIV under the US President’s Emergency Plan for AIDS Relief (PEPFAR), maternal and child health, malaria, nutrition, global health security, and other programs. The amount of federal funding affected by this policy change increased from roughly \$600 million to \$12 billion USD.³ As if that were not harmful enough, the Trump administration attempted to expand the rule even further to encompass all global health contracts, not just those receiving grant funding, but left office before it was enacted.

“The policy’s impacts not only have been devastating to marginalized communities, but also to health care providers, organizations, and their partnerships, leading to clinic closures, staff layoffs, family planning program cuts, and generally disrupting the public health system.”

— Melvine Ouyo, former Clinic Director, Family Health Options Kenya⁴

LASTING REPERCUSSIONS

Not only did the PLGHA impact all of U.S. global health assistance beyond family planning, but the damage it caused cannot be easily repaired. Despite the rule being rescinded by the Biden administration, many NGOs may not receive funding right away and clinics that closed may not reopen. Those who are the most impacted by the harmful ripple effects of this policy are young people, people of color, LGBTQ+ people, individuals living in rural areas, and other marginalized groups.

The Impact of the Global Gag Rule

As the U.S. is the world’s largest global health donor, the GGR forces many organizations to either turn down U.S. funding and risk closing their doors or comply with the restrictions and be forced to deny accurate and a full range of safe and legal reproductive health options to the people who rely on them for care.⁵ This dilemma imposed upon foreign NGOs creates funding gaps that cause fragmentation of health services, as was evident when the two largest providers of family planning globally, Marie Stopes International (MSI) and International Planned Parenthood Federation (IPPF), had to refuse U.S. funding in order to continue providing comprehensive health care to their patients. This resulted in a combined funding gap of roughly \$160 million during the Trump administration for the two providing organizations.⁶ MSI estimated that the GGR under Trump kept the organization from providing 8 million women with family planning services. Continued U.S. funding to MSI during that time would have prevented an estimated 6 million unintended pregnancies, 1.8 million unsafe abortions, and 20,000 maternal deaths.⁷ The loss of funding barred IPPF from preventing 4.8 million unintended pregnancies, providing 725,000 HIV tests, and treating 525,000 sexually transmitted infections.⁸

The nature of the GGR and its intermittent instatement lead to damage that is far-reaching and long-lasting. While it may be too early to examine the full effects of the GGR under the Trump administration, it is known that while a previous iteration was in effect from 2001-2008, abortion rates increased by 40 percent, modern contraceptive use decreased by 14 percent, and the number of pregnancies increased by 12 percent among women in countries highly exposed to the policy.⁹

During periods when the GGR was in operation, among women in countries affected by the policy, there was a 40% increase in abortions.

The GGR creates a chilling effect on health service delivery and civil society dialogue and advocacy, causes widespread confusion due to lack of clear information and guidance on the policy, and is often over-implemented by recipients of U.S. funding out of fear of not properly complying. The policy is referred to as a “gag” rule for a reason; it contributes to the censorship and blocking of information about abortion, which can cause an environment of distrust of providers among those in need of reproductive health services. It also adds to social stigma surrounding sexual and reproductive health in parts of the world where it is often already highly stigmatized.¹⁰ Additionally, the GGR is bad foreign policy; the unpredictability of U.S. funding based on any given year or presidential administration erodes trust and can harm relationships between the U.S. and recipient foreign NGOs.

A HARMFUL IMPERIALIST LEGACY

The GGR has contributed to the continued disempowerment of people accessing reproductive health care in low- and middle-income countries (LMICs) for decades. The GGR represents ugly vestiges of imperialism that should have no place in U.S. foreign assistance. In many of the countries receiving U.S. foreign assistance that are impacted by this policy, advocates on the ground have fought to legalize abortion over the past few decades; the GGR creates unnecessary barriers to accessing that hard-won care, primarily harming people of color.¹¹ Not being able to access safe abortion services also puts people at a greater disadvantage economically, thus holding back the economic growth and sustainable development of many of these countries.¹² The reproductive health and rights of millions in LMICs should not be dictated by a regressive policy coming from a wealthy nation on the other side of the globe.

“The repeal of the global gag rule is a good first step towards reversing these alarming trends, and must signal a bold shift towards a comprehensive, anti-imperialist and intersectional feminist approach to global health and foreign policy.”

— Erin Williams, Global Fund for Women Program Director, Sexual and Reproductive Health and Rights¹³

A Legislative Solution

While President Biden rescinded the GGR shortly after his inauguration, that simply is not enough. The *Global Health, Empowerment and Rights Act (Global HER Act)* would permanently repeal the GGR, preventing any future administrations from being able to reinstate it.¹⁴ In January 2021, this bill was reintroduced in the House and Senate. Passing the *Global HER Act* is a crucial next step in permanently repealing the GGR, removing eligibility restrictions for recipients of U.S. foreign assistance, ensuring that foreign NGOs can also use their own non-U.S. funds to provide access to safe and legal abortion services, and guaranteeing free speech for foreign NGOs receiving U.S. foreign assistance. It must be passed now.

- 1 Planned Parenthood Action Fund. (2021). *The Global Gag Rule: An Explainer*. <https://www.plannedparenthoodaction.org/communities/planned-parenthood-global/end-global-gag-rule>
- 2 Rios, V. (2019). Crisis in Care: Year two impact of Trump's Global Gag Rule (1–60). Washington, District of Columbia: International Women's Health Coalition. https://31u5ac2nrwj6247cya153vw9-wpengine.netdna-ssl.com/wp-content/uploads/2019/06/IWHC_GGR_Report_2019-WEB_single_pg-2.pdf.
- 3 United States Government Accountability Office. (2020, March). *Global Health Assistance: Awardees' Declinations of U.S. Planned Funding Due to Abortion-Related Restrictions*. <https://www.gao.gov/assets/gao-20-347.pdf>
- 4 Lieberman, A. (2021, January 28). *Biden repeals the “global gag rule,” but next steps will be “huge undertaking.”* Devex. <https://www.devex.com/news/biden-repeals-the-global-gag-rule-but-next-steps-will-be-huge-undertaking-98954>
- 5 Kaiser Family Foundation. (2021, May 10). *Breaking Down the U.S. Global Health Budget by Program Area*. KFF. <https://www.kff.org/global-health-policy/fact-sheet/breaking-down-the-u-s-global-health-budget-by-program-area/#:%7E:text=The%20U.S.%20Government%20is%20the,as%20well%20as%20global%20health>
- 6 Planned Parenthood Global. (2019). *Assessing the Global Gag Rule: Harms to Health, Communities, and Advocacy*. https://www.plannedparenthood.org/uploads/filer_public/81/9d/819d9000-5350-4ea3-b699-1f12d59ec67f/181231-ggr-d09.pdf
- 7 Marie Stopes International. (2020). *The Impact of the Global Gag Rule on Frontline Reproductive Healthcare*. <https://www.msichoice.org/media/3884/msi-briefing-impact-of-the-ggr-on-reproductive-healthcare.pdf>
- 8 The Lancet HIV. (2021). Global Gag Rule must be repealed for good. *The Lancet HIV*, 8(3). [https://doi.org/10.1016/s2352-3018\(21\)00027-8](https://doi.org/10.1016/s2352-3018(21)00027-8)
- 9 Brooks, N., Bendavid, E., & Miller, G. (2019). USA aid policy and induced abortion in sub-Saharan Africa: an analysis of the Mexico City Policy. *The Lancet Global Health*, 7(8). doi: 10.1016/s2214-109x(19)30267-0
- 10 Center for Reproductive Rights. (2017, November). *Factsheet: The Global Gag Rule and Human Rights*. https://reproductiverights.org/sites/default/files/documents/GLP-GGR-FS-0118-Web_2.pdf
- 11 Center for Reproductive Rights. (2021). *The World's Abortion Laws*. <https://maps.reproductiverights.org/worldabortionlaws#accelerating-progress>
- 12 Shahvisi, A. (2018). “Women's Empowerment,” Imperialism, and the Global Gag Rule. *Kohl: A Journal for Body and Gender Research*, 4(Winter), 173–184. <https://doi.org/10.36583/2018040205>
- 13 Crossley, N. (2021, January 28). “Relief and Cautious Optimism”: *Global Fund for Women Joins Gender Justice Leaders around the World in Welcoming the Repeal of the Global Gag Rule*. Global Fund for Women. <https://www.globalfundforwomen.org/biden-repeals-global-gag-rule/>
- 14 Population Connection Action Fund. (2021, March 2). *The Global HER Act*. <https://www.populationconnectionaction.org/the-global-her-act/>

