Policy Briefing: The Impact of the Global Gag Rule

Introduction

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of 134 Member Associations working with and for communities and individuals in 145 countries, with another 26 Partners working in a further 21 countries. We champion sexual and reproductive health and rights for all, and fight against gender-based power inequalities that mean many people face barriers deciding if, when or with whom to have sex, form relationships, or create a family. We advocate for a world in which love and sexuality are recognized both as natural and precious aspects of life and as fundamental human rights.

Because of our commitment to provide quality healthcare to all, including providing access to abortion care, we are directly affected by the United States (US) government’s ‘Protecting Life in Global Health Assistance’ policy, also known as the ‘Mexico City Policy’ or the ‘Global Gag Rule’. This policy denies women access to care, silences civil society organizations and gets in between women and their healthcare providers.

As long as the Global Gag Rule is in place, IPPF and its Member Associations will not accept US funding that would restrict its commitment to providing the highest quality of healthcare to all. We care for all women, men, children, and young people around the world and recognize their right to lead safe and dignified reproductive lives, free from harm and discrimination. The Global Gag Rule restricts and limits reproductive freedoms, and forces women through pregnancy through promoting a refusal of abortion care.

What is the Global Gag Rule?

The Global Gag Rule is an Executive Order, signed by the President of the United States of America. The latest iteration of the policy was brought into force on 23 January 2017 by President Donald Trump. It applies to all foreign NGOs receiving US funding and technical assistance and could potentially affect up to US$7.7 billion in 2018 alone. If an organization

1 In this briefing we use the term ‘Global Gag Rule’.
receives family planning or other global health funding\(^3\) from the US government (including from USAID) then they are banned from:\(^4\)

- providing abortions
- counseling women that abortion may be an option for them
- advocating for abortion, for example advocating to governments for increased access to abortion care or more progressive legislation
- referring women to other organizations that provide abortions

Organizations are forbidden from engaging in these activities with funds from any sources; accepting even $1 of US government funding means that the whole organization must comply with these regressive and extreme rules.

IPPF stands to lose up to $100 million in life-saving support over the course of the policy, while Marie Stopes International estimates an organizational funding loss of $30 million per year due to the Global Gag Rule.\(^5\) The impact of this lost funding will be felt most on the ground. However, the effects of policies such as the Global Gag Rule go beyond financial implications. The Global Gag Rule has a ripple effect on provision of care, advocacy and global policy attitudes. It instills fear in organizations and causes them to self-censor. Worry over potentially losing US funding or damaging relationships with donors means that they may over-restrict their activities to ensure compliance and create a chilling effect in partnerships and networks. The Global Gag Rule means that medical staff get fired, HIV and family planning programmes get closed, and women, girls and their families are shut out of care. With clinics closing, the hard-won trust between healthcare providers and the communities they serve has been broken. Fewer people will be able to access healthcare, thus rates of sexually transmitted infections including HIV, unsafe abortion and preventable deaths may rise.

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\(^3\) Some exceptions apply. See The Mexico City Policy: An Explainer; Kaiser Family Foundation.


Political and Financial Support: A troubled landscape lies ahead

The Global Gag Rule has come at a very difficult time for funding for family planning, denting an already struggling sector. Although funding increased in 2017 to $1.27 billion, even after accounting for inflation and currency fluctuations, it was the first increase after two years of declines and has not returned to the peak level of $1.43 billion in 2014. Despite its regressive and extreme policy position on reproductive freedom, the US was still the largest bilateral donor to family planning in 2017, providing 38% of total bilateral funding. The UK provided 22% of bilateral funding, and thus was the second largest donor, followed by the Netherlands (15%), Sweden (9%) and Canada (5%). Even with the modest increases in 2017, funding for contraceptive healthcare is at crisis levels. In lower- and middle-income countries, governments (donor and domestic) only cover 18% of the costs of contraception and women and their families are forced to fill the gap, shouldering up to 82% of the burden.

Impact on the Ground

Despite the efforts of donor governments who have gathered together to fight the impact of the radical and extreme US government position, especially through initiatives such as SheDecides, the impact of the Global Gag Rule has been sudden, shocking and dangerous. It has resulted in funding cuts for 31 IPPF Member Associations across Sub-Saharan Africa, South Asia and Central and South America, with some having lost up to 70% of their annual income. Nurses and other medical professionals have been laid off, clinics have been shut and individuals are being turned away from care. The Family Guidance Association of Ethiopia has lost $8 million in funding, compromising its once-robust national healthcare network. Rural Botswanans have lost access to healthcare as a result of the Botswana Family Welfare Association being stripped of nearly 70% of its annual operating budget. The impact isn’t limited to certain regions. The Afghan Family Guidance Association, already struggling to rebuild basic healthcare networks after years of conflict, has had

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7 Ibid.
to end youth programs and outreach work, while Member Associations in Guatemala, Honduras and Colombia are no longer able to run Zika prevention and care projects, leaving pregnant women without advice and support.

**Conclusion**

IPPF’s fight for reproductive justice will not be threatened as a result of the domestic whims of the US government. Now, more than ever, we will stand with our Member Associations, partners and allies to ensure that every individual is able to live and to love freely, without barriers or repression.

Governments at all levels must increase funding for sexual and reproductive health, including for abortion, to ensure that every individual has access to the lifesaving care they need, and to reduce the impact of the Global Gag Rule on communities. We also encourage governments and leaders at all levels to support grassroots advocacy and ensure that the voices of those most affected by this policy—especially young people, marginalized women and girls, the hard to reach, and key populations—are not silenced.

We encourage the media, leaders and decision makers to stand up and speak out against this regressive policy, and the ability of the US government to dictate to other countries what care their citizens are entitled to.

Finally, we must continue our fight for gender equality and recognize that we will not achieve it without the realization of sexual and reproductive health and rights. For women, men and their families to lead healthy lives and to be free to participate in social, economic and political life, they need universal access to quality services, information, and education. The Global Gag Rule attempts to silence women, hurt communities and undermine their care. We must stand together to resist this attack and fight for reproductive freedom for all.
Spotlight on the Chilling Effect: Zambia

As a direct result of the Global Gag Rule, two projects critical to HIV care and transmission prevention have been completely shut at the Planned Parenthood Association of Zambia (PPAZ). The Open Doors Project had secured five-year PEPFAR funding to reach out to key populations, including sex workers, men who have sex with men and transgender individuals, to provide HIV care. Not only did Open Doors gain trust among hard to reach and stigmatised populations, they also integrated health and human rights to reach some of the most vulnerable groups in Zambia. Through static clinics and community outreach activities, Open Doors created a safe harbour for key populations to access HIV testing and linkages for treatment, sexual and reproductive healthcare and social behavioural change. Two years into the program, site teams of clinicians, outreach staff and volunteers were dismantled, closing accessible integrated healthcare facilities specifically for key populations.

The Zambia Community HIV Prevention Project (Z-CHPP) was only able to be implemented for two of its planned five years in Chongwe and Livingstone Districts. In Livingstone, the PPAZ health facility and volunteer network were leveraged to support Z-CHPP activities. In Chongwe, PPAZ built upon past relationships with district health authorities to provide additional prevention services. With PPAZ no longer a part of the project, relationships between PPAZ, district officials, community members, project staff and volunteers have broken down and people are left without care.

The Executive Director of PPAZ, Nang’andu J.H Kamwale sums up the devastating impact of the Global Gag Rule: “We had built trusting relationships with key populations who need access to HIV care, but now we are unable to meet their healthcare needs. We have lost our respected status with other healthcare partners as our clinics have closed and we have fewer commodities available. Our local networks have been broken down”

The Global Gag Rule doesn’t just cut services: it breaks trust, destroys relationships and hurts whole communities
Spotlight on Cutting Services and Ending Innovation: Uganda

Reproductive Health Uganda (RHU) has been changing the lives of individuals across the country through bridging the gap between care, advocacy and evidence. However, because of the Global Gag Rule, projects have been closed, innovation is ending, and clinics are closing. RHU had been working hard to increase women’s access to contraception through a pilot project to popularize Sayana Press, an injectable, low dose contraceptive, that can be administered by trained community health workers rather than nurses. Because of the Global Gag Rule, this project to bring affordable family planning closer to clients was terminated early, meaning those women who were introduced to it may now be turned away. Over 150 community health workers who provided voluntary family planning services, including Sayana Press, to thousands of women and men are no longer working with RHU.

Quality research has also suffered. RHU’s participation in the Evidence Project, building the research base for social accountability, was cancelled a full six months early. They were collaborating with Population Council to document best practice and scientific approaches to improve health outcomes for all. It was expected to bring ground-breaking results for RHU and other health providers worldwide, changing practice and care for the better. However, RHU was forced to pull out because of the change in US policy and the introduction of the Global Gag Rule.

The Global Gag Rule has also silenced advocacy and stifled debate in Uganda. Two RHU advocacy projects designed to create a more open environment and to build political support for sexual and reproductive health were also cut. The Rights Based Approach and Advocacy for Better Health projects, which made national advances in comprehensive sexuality education and access to modern family planning have been cancelled.

When you cut access to care, development of research and advocacy, you cut access to human rights