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# GLOBAL GAG RULE 2020 SYMPOSIUM: FROM ELECTION TO ACTION

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## GLOBAL GAG RULE EXPLAINED

The Global Gag Rule prohibits US global health funding to foreign nongovernmental organizations (NGOs) that provide information, referrals, or services for legal abortion or advocate for the legalization of abortion. This forces NGOs and health providers to choose between receiving critical US global health funds or offering honest, comprehensive sexual and reproductive health care.

Though often conflated with the Helms Amendment, which prohibits the use of US foreign assistance funds for abortion services, the Global Gag Rule and Helms Amendment are two distinct policies that, together, reduce access to critical information and services.

While the Global Gag Rule has been implemented by all Republican presidents since President Reagan, the Trump administration dramatically expanded the policy from applying to family planning funding—approximately \$600 million annually—to all global health spending, about \$9 billion annually.

In March 2019, the Trump administration again expanded the policy by requiring the sub-grantees of foreign NGOs that receive US global health assistance to also certify compliance with the policy, regardless of whether or not they receive US global health assistance.

## IMPACTS

The impacts of the Global Gag Rule are widespread and long-lasting, and have been well documented through real-time, global evidence collection. Additionally, the harms of the policy are felt disproportionately by marginalized communities.

### INCREASED INCIDENCE OF UNSAFE ABORTION

Due to clinic closures, reduction of services, and restrictions on abortion referrals, the policy leads to increased [rates](#) of unsafe abortion and preventable deaths. Documentation shows that, in Kenya, young women have [died](#) as a result of complications from unsafe abortion.

### FRACTURED HEALTHCARE SYSTEMS

The Global Gag Rule undermines decades of work and millions in investment to integrate health systems. The Global Gag Rule has drastically impacted efforts to combat HIV/AIDS. Over a third of [studied PEPFAR](#) partners were forced to alter their services, including outreach, advocacy, and information on sexual and reproductive health care in high-HIV areas, due to the expanded policy.

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## IMPACTS (CONT.)

### REDUCED ACCESS TO CONTRACEPTION

In [Nepal](#) and [Madagascar](#), the Global Gag Rule has led to decreased access to contraception and the termination of outreach services in some areas. In Madagascar, stock outs of contraceptives due to the departure of a non-certifying NGO forced clients to purchase their own contraception at pharmacies. For some women, this meant choosing between paying for contraception or food. As a result of the newly imposed fees, providers report decreased use of contraceptives and increased unintended pregnancy. Similarly, in [Uganda](#), fewer community health workers were engaged by health facilities to provide family planning services as a result of the GGR, which likely decreased access to contraception for women.

### CIVIL SOCIETY CHILLING EFFECT

Fear, confusion, and over implementation of the policy fractures critical civil society partnerships, weakening efforts to provide services and referrals, and engage in advocacy to improve access to sexual and reproductive health care. In Senegal, one NGO chose to halt advocacy to receive US funding, leaving gaps and stalling the work of a safe abortion taskforce it co-founded to support the government's commitments to increasing contraception use and allowing access to abortion in cases of incest, sexual assault, or when there is a risk to the health or life of the pregnant person or to the fetus (all of which are allowable under the GGR).

## LONG-TERM CONSEQUENCES

Evidence shows that previous iterations of the Global Gag Rule will continue to impact sexual and reproductive health and rights even when the policy is not in effect. The impacts on health care access and civil society will persist long after President Biden rescinds the policy. This is why we stand united in calling for a permanent end to the policy through the passage of the Global HER Act.

### IMPLEMENTATION DELAYS

When the Global Gag Rule is rescinded, policy change at the country level is not always immediate. Rescinding the policy must simultaneously include direction for USAID and US missions worldwide to immediately provide guidance on updated US policy and ensure that the Global Gag Rule restrictions are no longer being implemented.

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## LONG-TERM CONSEQUENCES (CONT.)

### HEALTH SYSTEM CAPACITY

When the Global Gag Rule is rescinded, shuttered clinics do not simply re-open. It takes time and resources to rebuild the capacity of the health system and recruit and/or rehire staff. When President Trump took office, for example, health systems were still recovering from President Bush's version of the policy.

### CIVIL SOCIETY PARTNERSHIPS:

Broken civil society partnerships are not repaired simply due to the rescinding of the policy. It takes time and energy to rebuild trust and connections among these critical provider and advocacy networks, and with the potential for the policy to be reinstated in four or eight years, these relationships are often permanently terminated.

### EMBOLDENED ANTI-RIGHTS ACTORS

President Trump's Global Gag Rule strengthened anti-abortion and anti-rights groups worldwide. The entrenchment of these groups has weakened comprehensive sexuality education guidelines in [South Africa](#), increased anti-abortion advocacy in [Kenya](#), and further stigmatized abortion in Nigeria. Re-attracting funding, rebuilding networks, and rehiring staff committed and dedicated to sexual and reproductive health and rights in the policy, legal, and health spaces will be an uphill battle.

### HUMAN COST

Beyond the tangible health, policy, and legal implications of rescinding the Global Gag Rule, is its continued and profound impact on affected individuals. From job loss and stress to losing a loved one to unsafe abortion, the Global Gag Rule has widespread impact on individuals' physical, economic, and psychological well-being--these impacts continue well after the end of the policy and can only be mitigated through permanent, legislative repeal.

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## QUOTES

"We commend President Biden for taking executive action to end the deadly Global Gag Rule, enabling health care providers worldwide to provide honest information and comprehensive services. We urge the administration to ensure that USAID and US missions worldwide immediately communicate this information to their communities and provide guidance on current US policy. Ending the Global Gag Rule through executive action, while necessary, is not sufficient. To advance sexual and reproductive health and rights and truly mitigate the harms of the policy, a permanent, legislative repeal—through the Global HER Act—must be a priority for the new Congress," said **Nina Besser Doorley, IWHC Associate Director of Advocacy and Policy.**

"President Biden's rescission of the Global Gag Rule is a powerful and hopeful step toward progress and the right for all people to have the autonomy to make health decisions for themselves and their families," says **Nabeeha Kazi Hutchins, PAI president and CEO.** "PAI stands ready to partner with the Biden-Harris administration, civil society, local governments and global leaders on the work ahead to rebuild from the damage done to sexual and reproductive health and rights. We also will work alongside champions of health and human rights in the U.S. Congress to permanently repeal the Global Gag Rule. We must ensure that communities across our nation and around the world can exercise their right to sexual and reproductive health, which is fundamental to progress."

"The Global Gag Rule has deeply damaged health outcomes for women and girls, sexual and reproductive health access, and the functioning of already-fragile health systems globally. The data make clear that disintegration of health services caused by this policy have long-term – sometimes lifelong – consequences: for women's sexual and reproductive autonomy, and for those seeking care for preventable illnesses like HIV/AIDS and STIs. What's more, during the COVID-19 pandemic, the havoc wreaked by this policy compromises countries' ability to respond to this global emergency with PPE, testing, and vaccine rollout. The rescission of the GGR is a critical step from the Biden-Harris administration towards truly ensuring sexual and reproductive health justice for all, but this must only be the first step of many..."



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## QUOTES (CONT.)

Dismantling the enduring impacts of the GGR will require a strong commitment from the new administration that takes into account continued research and guidelines from public health experts and advocates. Permanently ending the GGR, overturning the Helms Amendment, and removing Trump-era Title X restrictions are only a few of the evidence-based policy recommendations the United States can implement to create longstanding progress towards health as a human right," said **Terry McGovern, Chair of the Heilbrunn Department of Population and Family Health and Director of the Global Health Justice and Governance Program at Columbia University.**

"The Global Gag Rule (GGR) has always been a horrific policy for women, girls, families, and LGBTQ+ communities around the world. It is neo-colonial in nature and, put simply, prioritizes the U.S. government's power and control of people's bodies over the human rights of autonomy and agency. Trump's expansion of the GGR in 2017 was just another element of his administration's crusade against women and the long-standing international consensus on sexual and reproductive health and rights (SRHR). CHANGE applauds President Joe Biden for keeping his promise to rescind this disastrous policy during his first days in office but the long-lasting impacts of the Global Gag Rule don't just disappear with the signing of an Executive Order. Global health partners must be able to entrust in the U.S. that the worst is over with a proactive statement of policy by the Biden-Harris administration, directives to staff, missions, embassies and implementing partners that they can safely move forward with rescinding the Global Gag Rule, and by ensuring that there are no unnecessary delays in removing the policy from existing agreements. Moreover, the Biden-Harris administration should issue a formal apology to the countries and implementing partners cut off from U.S. global health assistance due to Trump's expanded GGR, which would signal that the GGR is no longer the status quo and that the U.S. empathizes with the residual effects of the previous administration's reversal of countries' progress toward achieving public health goals. We look now to President Biden to emphatically support SRHR for people around the globe, not just to undo the harms of the Trump administration. His administration must make it absolutely clear to all NGOs, multilateral organizations, and governments around the world that the U.S. recognizes and affirms universal access to sexual and reproductive health and rights," said **Serra Sippel, President of CHANGE (The Center for Health and Gender Equity).**

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## QUOTES (CONT.)

"The science is clear. The Global Gag Rule has reduced women's access to contraception, suppressed the availability of accurate health information, and undermined our ability to fight HIV around the world. amfAR commends President Biden's executive action to end the Global Gag Rule as the first of many steps to protect U.S. investments in global health and prioritize science over ideology. Ending HIV requires the full realization of women's sexual and reproductive health and rights that the Global Gag Rule undermines. Permanently ending this policy through legislation should be a priority of this administration and congress," said **Jennifer Sherwood, Public Policy Manager at amfAR.**

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## RELATED RESEARCH

[Crisis in Care: Year Two Impact of Trump's Global Gag Rule](#) (2019), International Women's Health Coalition

[Foreign ideology vs. national priority: impacts of the US Global Gag Rule on Nepal's sexual and reproductive healthcare system](#) (2020), the Center for Research on the Environment, Health, and Population Activities (CREHPA) and the Global Health Justice and Governance Program at the Columbia University Mailman School of Public Health

[Foreign assistance or attack: impact of the expanded Global Gag Rule on sexual and reproductive health and rights in Kenya](#) (2020), African Population and Health Research Centre (APHRC), and the Global Health Justice and Governance Program at the Columbia University Mailman School of Public Health

[The Impacts of the Global Gag Rule on Global Health: A Scoping Review](#) (2019), Constancia Mavodza, Rebecca Goldman, Bergen Cooper

[Investigating the early impact of the Trump Administration's Global Gag Rule on sexual and reproductive health service delivery in Uganda](#) (2020), Margaret Giorgio, Fredrick Makumbi, Simon Peter Sebina Kibira, Suzanne Bell, Selena Anjur-Dietrich and Elizabeth Sully

[Issue Brief: The Expanded Mexico City Policy: Implications for the Global Fund](#) (2020), amfAR

[Reality Check: Year One Impact of Trump's Global Gag Rule](#) (2018), International Women's Health Coalition

[Restrictions on US Global Health Assistance Reduce Key Health Services In Supported Countries](#) (2020), Jennifer Sherwood, Metthea Roemer, Brian Honermann, Austin Jones, Greg Millett, Michele R. Decker

[Slowing progress: the US Global Gag Rule undermines access to contraception in Madagascar](#) (2020), L'Institut National de Santé Publique et Communautaire (INSPC) and the Global Health Justice and Governance Program at the Columbia University Mailman School of Public Health



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## RELATED RESEARCH

[A Powerful Force: U.S. Global Health Assistance and Sexual and Reproductive Health and Rights in Malawi \(2020\)](#), CHANGE

[Trump's Global Gag Rule: Policy and Research Brief \(2020\)](#) CHANGE

[Trump's Global Gag Rule: Data Sheet \(2020\)](#) CHANGE

[Prescribing Chaos in Global Health: The Global Gag Rule from 1984-2018 \(2018\)](#), CHANGE'

[Protecting Life in Global Health Assistance'? Towards a framework for assessing the health systems impact of the expanded Global Gag Rule \(2019\)](#), Marta Schaaf, Emily Maistrellis, Hana Thomas, Bergen Cooper, The GGR Research Working Group

[So Far, So Bad: The Wide Ranging Impacts of the Global Gag Rule Happening Now \(2019\)](#), PAI

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## CONTACTS

### **amfAR**

#### **Press:**

Mary Pavlu: mary.pavlu@amfar.org

#### **Subject matter experts:**

Jennifer Sherwood: jennifer.sherwood@amfar.org

Brian Honermann: brian.honermann@amfar.org

Language: English, French

### **CHANGE**

#### **Press:**

Unbendable Media

Madison Donzis: madison@unbendablemedia.com

Brett Abrams: brett@unbendablemedia.com

Language: English

#### **Subject matter experts:**

Serra Sippel: ssippel@srhrforall.org

Beirne Roose-Snyder: broosesnyder@srhrforall.org

Language: English

### ***International Women's Health Coalition***

Liza Kane-Hartnett

lkane-hartnett@iwhc.org

Expertise: US Foreign Policy; Abortion; Global Gag Rule

Language: English

### ***Global Health Justice and Governance Program at the Columbia University Mailman School of Public Health***

Margaret Kramer

mk4358@cumc.columbia.edu

Expertise: Abortion; Contraception; Global Gag Rule; Domestic Gag Rule

Language: English, French

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## CONTACTS

### ***PAI***

Adrienne Lee [leealee@pai.org](mailto:leealee@pai.org)

Expertise: Global Gag Rule, US Foreign Policy

Language: English

### ***Guttmacher***

Veronika Cernadas

[vcernadas@guttmacher.org](mailto:vcernadas@guttmacher.org)

Expertise: Global Gag Rule

Language: English, French, Spanish