

THE INS AND OUTS OF U.S. ABORTION-RELATED RESTRICTIONS ABROAD AND AT HOME

POLICY	WHAT IS IT? ¹	STATUTORY OR EXECUTIVE BRANCH POLICY	IN FORCE	HOW IT IMPACTS SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AROUND THE WORLD
HELMS AMENDMENT	Restricts the use of U.S. foreign assistance “to pay for the performance of abortion as a method of family planning or to motivate or coerce any person to practice abortions.”	Foreign Assistance Act of 1961 (FAA) and appropriations (SFOPS)	1973-present	Prevents the United States from being able to provide safe abortion services as part of its global health programs. As such, the United States cannot adequately address maternal mortality as a result of unsafe abortion around the world. ² Does not restrict the provision of counseling or information on abortion where legal.
GLOBAL GAG RULE	As a condition of eligibility to receive U.S. global health assistance, a non-U.S. nongovernmental organization must certify that it will not perform, counsel or refer patients on abortion care or advocate for the liberalization of abortion laws in its own country, even if these activities are provided with private, non-U.S. funds.	Presidential memorandum	1984-1993 (Reagan and Bush) 2001-2009 (Bush) 2017-2021 (Trump)	Cuts off funding and supplies to some of the most trusted and experienced health care providers, interferes in health care providers’ relationships with their clients and stifles advocacy efforts. Expanded by the Trump administration, this policy disrupted contraceptive uptake and health services, stalled efforts to improve health outcomes, placed administrative burdens that derailed the efficacy of U.S. investments and negatively impacted health systems. It disproportionately impacts at-risk communities, including adolescents and youth, people living with HIV/AIDS, rural communities, LGBTQI+ individuals and sex workers. ³
KEMP-KASTEN AMENDMENT	No U.S. funds may be made available to “any organization or program which, as determined by the president of the United States, supports or participates in the management of a program of coercive abortion or involuntary sterilization.”	Appropriations (SFOPS)	1985-present	Though framed broadly, this amendment was intended to and has been specifically used by Republican administrations as a pretext to defund the United Nations Population Fund (UNFPA), based on repeatedly disproven claims about UNFPA’s work in China and alleged support for the country’s coercive population control policies. As such, during the four years of the Trump administration, the United States did not fund UNFPA’s vital work to end the unmet need for family planning, preventable maternal mortality and harmful practices like gender-based violence, child marriage and female genital mutilation. UNFPA also provides lifesaving sexual and reproductive health care and coordination around the response to gender-based violence in humanitarian crises. ⁴
SILJANDER AMENDMENT	Prohibits the use of U.S. foreign assistance “to lobby for or against abortion.”	Appropriations (SFOPS)	1981-present	The United States is unable to support the work of organizations or governments seeking to address unsafe abortion through the liberalization of laws or policies, even when those efforts are based on human rights and sound public health evidence. In 2019, the Department of State used accusations of Siljander violations to reduce funding to the Organization of American States. ⁵

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HYDE AMENDMENT	Prohibits federal funds from being used to pay for abortion, except in cases of rape, incest or life endangerment. The measure primarily restricts federal Medicaid coverage. ⁶	Mostly appropriations (Labor, HHS, FSGG, CJS, DHS and others)	1976-present	<p>The following groups receiving health insurance through federally funded programs are denied abortion coverage under this policy:</p> <ul style="list-style-type: none"> • Medicaid, Medicare and Children’s Health Insurance Program enrollees; • Federal employees and their dependents; • Peace Corps Volunteers; • Native Americans; • People in federal prisons and detention centers, including those detained for immigration purposes; • Military personnel, veterans and their dependents; and • Low-income people in Washington, D.C. <p>Half of reproductive-age women enrolled in Medicaid and subject to abortion coverage restrictions are women of color.⁷</p>

This chart includes several key abortion-related provisions but is not a complete list.

1 Congressional Research Service. (2022, July 15). Abortion and Family Planning-Related Provisions in U.S. Foreign Assistance Law and Policy. <https://fas.org/sgp/crs/row/R41360.pdf>

2 Ipas. (2020). How U.S. Foreign Policy BLOCKS Access to Safe Abortion Overseas. https://www.ipas.org/wp-content/uploads/2020/06/Helms-factsheet-HLMFCTE22_LR.pdf

3 PAI. (2019, November 25). So Far So Bad: The Wide Ranging Impacts of the Global Gag Rule Happening Now. <https://pai.org/resources/so-far-so-bad-the-wide-ranging-impacts-of-the-global-gag-rule-happening-now>

4 PAI. (2019, February 13). Why the United States Should Restore Funding for the United Nations Population Fund. <https://pai.org/resources/restore-funding-for-unfpa>

5 PAI. (2019, March 28). Pompeo Whacks OAS Contribution, Escalating Administration’s Crackdown on Reproductive Rights. <https://pai.org/resources/pompeo-whacks-oas-contribution-escalating-administrations-crackdown-on-reproductive-rights>

6 All* Above All. (n.d.). The Equal Access to Abortion Coverage in Health Insurance (EACH) Act: Groundbreaking Legislation for Reproductive Justice. <https://allaboveall.org/resource/each-act-fact-sheet/>

7 Donovan, M.K. (2017, January 5). In Real Life: Federal Restrictions on Abortion Coverage and the Women They Impact. *Guttmacher Policy Review* 20. https://www.guttmacher.org/sites/default/files/article_files/gpr2000116.pdf