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## The Helms Amendment: You Should Have Been Gone by Now

As the leading provider of global health assistance to low- and middle-income countries, the U.S. government should reduce — not compound — health inequities. Yesterday, Representative Jan Schakowsky (D-IL) introduced the [Abortion is Health Care Everywhere Act](#), legislation to remove the Helms amendment, which prohibits the use of U.S. foreign assistance to provide abortion services in U.S. government-sponsored global health programs. For nearly 50 years, we have allowed this policy to exacerbate the problem of unsafe abortion by putting essential health care out of reach for countless women and girls.

The bill itself is simple and straightforward. It removes the Helms provision from the Foreign Assistance Act and replaces it with proactive language stating that U.S. funding “may be used to provide comprehensive reproductive health care services, including the provision of abortion services, training, and equipment.” In addition, it lays out a statement of policy for the U.S. government that recognizes safe abortion as a critical component of comprehensive maternal and reproductive health care that should be made widely available and integrated with other types of health services. Furthermore, it affirms that the United States should work to end unsafe abortion and promote safe abortion care by providing funding to and collaborating with affected governments and service providers.

The Abortion is Health Care Everywhere Act brings international advocacy efforts around federal funding for abortion firmly in line with those of the domestic reproductive health community. U.S.-based advocates have been diligently working to repeal the [Hyde amendment](#) — the Helms amendment’s domestic analogue in appropriations — which prohibits abortion funding for people who receive care or insurance through the federal government. The movement to end Hyde has gained significant traction, leading to the introduction of the Equal Access to Abortion Coverage in Health Insurance (EACH Woman) Act in 2015. Today, the EACH Woman Act has more than 180 co-sponsors in the House ([H.R. 1692](#)) and 24 co-sponsors in the Senate ([S.758](#)). The work of the domestic reproductive health community has been pivotal in dismantling the perceived political concerns around the use of federal funds for abortion care that have historically justified the Helms and Hyde amendments.

The introduction of the Helms amendment can be traced to the domestic debates over abortion. In 1973, while supporters of abortion rights celebrated the Supreme Court’s decision in *Roe v. Wade*, opponents wasted no time initiating a ceaseless campaign to restrict access to abortion. Their efforts not only focused on limiting the legal right to reproductive autonomy for American women, but also spilled over into the foreign policy realm. Less than a year after *Roe*, newly elected Senator Jesse Helms (R-NC) won a victory for the anti-choice movement by successfully passing an amendment to the Foreign Assistance Act of 1961 prohibiting the use of U.S. foreign assistance funds to provide abortion “as a method of family planning.”

At the time, the U.S. Agency for International Development and others voiced their concerns about the policy “[because of its seemingly imperialistic and hypocritical overtones](#).” However, the policy was eventually normalized, reiterated in the annual Department of State–Foreign Operations appropriations bill and became just one of many boilerplate restrictions on abortion and reproductive health funding. By the time Sen. Helms left office in 2003, it was tacitly accepted by legislators of both parties that U.S. taxpayer funding cannot support abortion, neither at home nor abroad. In fact, too often, pro-choice legislators — while making the case to eliminate harmful restrictions like the Global Gag Rule (GGR) or to increase funding for family planning programs — lean on the prohibition of federal funding for abortion to rebut the concerns of conservative colleagues worried that such efforts would somehow open the flood gates for abortion. It is time for pro-choice legislators to focus on health equity and removing U.S. policy barriers to achieving equity in health care. This will be far more productive than catering to their Republican colleagues, of which only two from the Senate can be considered reliable supporters of family planning and reproductive health care.

The Helms amendment is one of the few remaining federal laws or policies governing abortion funding to omit exceptions. Although the Helms amendment clearly states that U.S. funds cannot be used to provide abortion “as a method of family planning,” it has been interpreted and implemented — by Republican and Democratic administrations alike — as a near-total ban on funding abortion. No exceptions are currently made for a pregnancy that is a result of rape or incest, or endangers a woman’s life, though abortion under these circumstances is not considered a “method of family planning.” These exceptions have otherwise enjoyed bipartisan acceptance, as most politicians have sought to steer clear of the minefield around abortion access for those facing unwanted pregnancies resulting from rape. Republican administrations since Reagan have defined abortions “as a method of family planning” as those performed “when it is for the purpose of spacing births.” It’s worth noting that in the various iterations of the GGR imposed by Presidents Reagan, George H.W. Bush, George W. Bush and Trump, the standard provisions implementing the GGR explicitly state that the restriction “does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest.”

Previously, PAI and other advocates pressured the Obama administration to review its interpretation of the Helms amendment and issue guidance correcting its implementation. This should have been an easy change — and one the president could have made unilaterally — but the Obama administration was unwilling to take the necessary action. The election of President Trump all but assured that a common sense, administrative fix was out of reach for the foreseeable future.

In 2019, the U.S. electorate sent the first pro-choice majority to the House of Representatives. It was against this backdrop that conversations on Capitol Hill began to take shape around the need to repeal the Helms amendment. Encouraged by the domestic efforts to repeal Hyde and bolstered by [recent polling](#) that shows American voters now favor changing federal policy to allow U.S. support for safe abortion care overseas, PAI and other advocates began in-depth conversations with key Congressional champions. There was consensus that given these shifts, it was the right moment to challenge the Helms amendment and embark on a path toward full repeal.

Repealing the Helms amendment will require a long-term, multipronged and multistep strategy. While continuing to build up a strong base of support in the House, advocates will need to turn attention to the Senate, where a companion bill must be introduced — likely during the next Congress. Since the amendment exists as both a permanent statute and in appropriations, Helms must also be removed from future State–Foreign Operations Appropriations bills.

If the Abortion is Health Care Everywhere Act is signed into law, the positive impact on sexual and reproductive health and rights cannot be overstated. For millions of people around the world, it is literally a matter of life or death. It is estimated that every year, [35 million women](#) undergo an [unsafe abortion](#) — a leading cause of global maternal mortality and morbidity. The vast majority of these unsafe procedures take place in low- and middle-income countries where there are significant barriers to accessing abortion care. U.S. foreign policies, like the Helms amendment, should not be an added burden and should certainly not undermine country-led efforts to reduce maternal mortality and bolster reproductive rights by liberalizing national or local abortion laws.

## **PAI RESOURCES ON THE HELMS AMENDMENT**

- [Helms Amendment policy brief](#)
- [Helms Amendment and the Global Gag Rule — What's the Difference?](#)
- [The Ins and Outs of U.S. Abortion-related Restrictions Abroad and at Home](#)