

# TRUMP'S GLOBAL GAG RULE AND SENEGAL

## CONTEXT

Senegal is a small country in the African Sahel located on the coast of West Africa with a population of 15.3 million. The majority—more than 52 percent—are young people under the age of 20.<sup>1,2</sup> As of 2015, approximately 44 percent of the population lives in the capital city of Dakar and other urban centers, while the rest of the population lives in rural areas, where accessing lifesaving health services, information and supplies is often difficult.<sup>3</sup> Nearly half of Senegal's population lives in poverty; this is particularly pronounced in rural communities, where two out of every three individuals lives in poverty.<sup>4</sup>

In recent years, the country has made significant progress in expanding contraceptive use and knowledge, and in reducing the number of maternal deaths. This, in part, can be attributed to an increase in both donor funds and government support for maternal and reproductive health programs. In 2011, Senegal joined



eight other countries in pledging to reach an additional 2.2 million family planning users as part of the Ouagadougou Partnership.<sup>5</sup> Recently, Senegal has also had a growing focus on achieving universal health coverage through the promotion of community-based health insurance.<sup>6</sup>

Despite this progress, Senegal continues to face challenges meeting the health needs of its population. Much of this is due to inadequate staffing of medical professionals and inaccessible facilities, particularly outside of Dakar and other large cities.<sup>7</sup> Additionally, the country's draconian abortion policies, which make safe abortion services virtually nonexistent and result in high levels of complications, hamper progress on improving health outcomes for women and girls.<sup>8</sup> Trump's Global Gag Rule threatens to dismantle the progress that's been made and worsen the issues Senegal faces. Any reduction in health funding, providers or advocacy could have severe negative impacts on the health system and ultimately, the health and lives of women, girls and their communities.

## WHAT IS THE GLOBAL GAG RULE?

On January 23, 2017, President Trump signed a presidential memorandum imposing the Global Gag Rule, requiring that foreign NGOs receiving U.S. health assistance certify that the organization does not use its own non-U.S. funds to provide abortion services, counsel or refer for abortion, or advocate for the liberalization of abortion as a condition to receive U.S. funding. The Trump-Pence administration's Global Gag Rule goes further than any previous Republican administration, massively expanding this harmful policy to not only implicate family planning funds, but all global health assistance. This policy will be extremely detrimental to countries like Senegal that receive large amounts of U.S. global health assistance.

**TABLE 1: GLOBAL HEALTH FUNDING IN SENEGAL - 2015<sup>12</sup>**

2015 OBLIGATIONS						
	NON-U.S. NGO	OTHER NGO*	NON-U.S. ENTERPRISE	OTHER ENTERPRISE	OTHER ACTORS**	TOTAL
FP	2,421,000	2,742,864	579,000	2,018,009	-	7,760,873
HIV	-	3,895,000	-	300,000	110	4,195,110
MCH	424,000	2,558,038	200,000	1,985,460	-	5,167,498
Other Global Health Programs ***	4,991,854	5,612,943	-	9,456,553	6,677,000	26,738,350
<b>TOTAL</b>	<b>7,836,854</b>	<b>14,808,845</b>	<b>779,000</b>	<b>13,760,023</b>	<b>6,677,110</b>	<b>43,861,832</b>

\* Other NGO represents both USAID distinguished US NGOs and International NGOs. International NGOs are defined as either having an international coordinating body, or a diverse network of country offices in the field. Although U.S. NGOs are not subject to the Global Gag Rule, any local partners they sub-grant to must comply with the Global Gag Rule.

\*\* Other Health implementers include governments, public universities and multilaterals that are not affected by the Global Gag Rule.

\*\*\* This includes: general health, malaria, nutrition, other public health threats, pandemic influenza and other emerging threats, tuberculosis and water supply and sanitation.

## GLOBAL HEALTH MONEY RECEIVED

Senegal received more than \$43.8 million in U.S. global health assistance obligated in fiscal year 2015. Over \$37 million of these funds went to at least 29 global and local organizations to implement global health programs, including 18 organizations working on family planning (FP), maternal and child health care (MCH) and STI and HIV prevention and care (see Table 1). U.S.-supported family planning programs in Senegal largely focus on health system strengthening, social marketing and contraceptive support.<sup>9</sup> These

programs and organizations have been critical to the improvements seen in health outcomes for women and their families, as well as efforts to strengthen Senegal's overall health system.

Although the Global Gag Rule only applies to foreign NGOs, U.S. organizations receiving funds are required to certify that their local partners are compliant with the policy—a process that could delay disbursement of funds and take valuable time and resources away from serving clients.<sup>10</sup> Trump's Global Gag Rule places more than \$9.5 million of NGO funding for sexual and reproductive health (SRH) programs in Senegal at risk of being lost, delayed or diverted

to other organizations willing to comply with the policy (see Table 1). The remaining organizations may not be located in the same communities, may not provide the same set or quality of services, or may simply be unable to absorb and effectively utilize a massive influx of funding and new clients. This means that some communities, particularly those in rural and other already hard-to-reach settings, could experience a reduction or complete loss of important SRH services.<sup>11</sup>

## POLICY ENVIRONMENT

With U.S. money and support, Senegal has been able to expand the reach of family planning

**TABLE 2: SENEGAL SEXUAL AND REPRODUCTIVE HEALTH POLICIES AND GLOBAL GAG RULE IMPLICATIONS**

Policy Name	Policy Year	Description	Global Gag Rule Implications
<b>Criminal Code of Senegal: Article 305<sup>25</sup></b>	1977	Declares abortion illegal in all cases but to save the life of the mother.	Any attempts to liberalize this law by civil society organizations in Senegal will now be more difficult under the Global Gag Rule, due to the chilling of the advocacy environment and restrictions on the advocacy of organizations receiving U.S. health assistance.
<b>FP2020 Commitment<sup>26</sup></b>	2012	Committed to reaching an additional 350,000 married women.	The Global Gag Rule prevents some of the most effective and respected family planning providers from receiving the funds and supplies needed to realize this commitment.
<b>Senegal National Family Planning Action Plan 2012-2015<sup>27</sup></b>	2012	This policy lays out Senegal's goal to increase the contraceptive prevalence rate from 12 to 27 percent (for married women) in 2015 and 45 percent in 2020.	With possible gaps in family planning programs due to restrictions from the Global Gag Rule, governments will be required to make important resource decisions that could be detrimental to achieving the family planning goals.

services and contraceptives. The Senegalese government initially expressed commitment to family planning priorities when USAID- and UNFPA-supported projects were implemented in Senegal in the 1980s.<sup>13</sup> Shortly thereafter, the Senegalese Government adopted its first family planning-related policy, the Declaration of Population Policy.<sup>14</sup> With support from the U.S. government, Senegal has continued to place an increased focus on decreasing the unmet need for contraception and increasing access to a full range of contraceptive methods.<sup>15</sup> However, Trump's Global Gag Rule places some of this progress in danger as organizations that have helped to create the supportive policy environment, including the Senegalese Association of Family Welfare (ASBEF), an International Planned Parenthood Federation affiliate, could lose important advocacy resources.<sup>16</sup>

Furthermore, organizations that refuse to accept the Global Gag Rule will now likely call upon the Senegalese government to fill the gaps in programs and commodities to ensure that women using contraceptives will be able to access them. Most of Senegal's family

planning resources comes from international donors, and any possible disruption in these resources would require the Senegalese government to make important resource allocation decisions.<sup>17</sup> As Trump's expanded Global Gag Rule includes all of global health assistance, the government will likely face even more requests to fill resource gaps from a larger number of organizations. This could require Senegalese policymakers to make difficult decisions about which areas of healthcare to focus limited resources on. Ultimately, Trump's Global Gag Rule will undermine overall progress on health and efforts toward achieving the country's reproductive health goals, including the targets defined in the National Family Planning Action Plan and FP2020 commitments (see Table 2).

Senegal has some of the most restrictive abortion policies in the world. Abortions in Senegal are only allowed in cases where the life of the pregnant woman or girl is in danger, and only after she endures an onerous process which requires three doctors to testify that the procedure is medically necessary.<sup>18,19</sup> Currently,

abortion is prohibited in cases of rape or incest. This violates the Maputo Protocol (also known as the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa), which outlines the rights of women with regard to politics, physical and reproductive health, ratified by Senegal in 2005.<sup>20</sup> These harsh abortion laws have forced women to seek out unsanitary or unsafe abortions, and in desperate cases women have resorted to infanticide.<sup>21,22</sup> Advocacy organizations in Senegal have been working to reform these laws so that options for safe abortion are available, particularly in scenarios such as pregnancy resulting from rape.<sup>23,24</sup> Trump's Global Gag Rule may require some organizations to halt their advocacy efforts, while the work of other civil society organizations advocating for the liberalization of these laws and increased access to safe abortion services for women will likely be dampened by the constricted advocacy environment.

## CONTRACEPTIVE SECURITY

Senegal has seen a steady increase in the contraceptive prevalence rate since the launch of the Ouagadougou Partnership in 2011.<sup>28</sup> Currently, 15.6 percent of all women are using some form of modern contraception, with injectables being the most popular method.<sup>29</sup> In 2015, 90 percent of contraceptives in Senegal were provided by USAID, largely to local NGOs.<sup>30</sup> Two of the largest contraceptive providers receiving significant U.S. funding in Senegal are ADEMAS and Marie Stopes International Senegal (MSI Senegal).<sup>31</sup> ADEMAS, a local Senegalese social marketing organization that works with the commercial sector to distribute and supply contraceptive products, will most likely sign the Global Gag Rule and therefore have to certify that they do not provide any abortion counseling

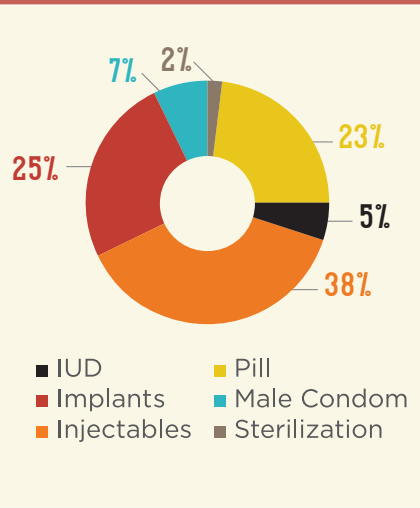


or advocacy. This could delay the release of any new funds and impact future contracts.<sup>32,33,34</sup> A delay in funding could hinder its outreach work, and could lead to stockouts of some methods for a period of time, leading to possible community distrust of ADEMAs as a reliable source of contraceptives. Marie Stopes International Senegal (MSI Senegal) will not sign the Global Gag Rule, making them ineligible for any financial or in-kind contraceptive support from the U.S. government. MSI Senegal supports multiple clinics in Senegal—all of which could lose significant funding and resources under the Global Gag Rule.<sup>35</sup> Without USAID support, MSI Senegal may be required to use its limited resources to purchase supplies from social marketing agencies and cut other essential family planning services.

With MSI Senegal ineligible for global health assistance, much smaller organizations with less capacity and reach will most likely receive financial and in-kind support for contraceptives from the U.S. government. However, with limited capacity to absorb such an influx in resources, these organizations could face logistical challenges, resulting in an increase in stockouts at clinics and among community-based distributors. Additionally, some of these providers cannot or may choose not to provide the full method-mix due to lack of training in a particular method, cost, or religious or other beliefs. All of these scenarios limit women's access to the contraceptive methods of their choice. Reductions in access to contraceptive services could dramatically increase unmet need, which currently stands at 25 percent among married women.<sup>36</sup> These challenges could have long-term effects, with the possibility of women developing a deep distrust in the ability of clinics to provide desired contraceptives or other services.

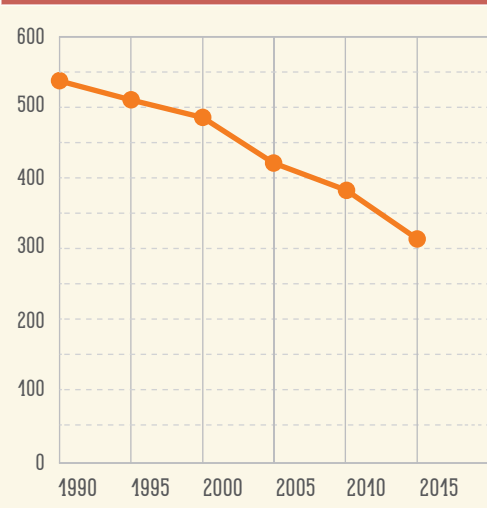


**GRAPH 1: MODERN METHOD USED BY TYPE<sup>38</sup>**



In Senegal, 15 percent more women in urban settings use a modern contraceptive method than in rural areas. From 1992 to 2014, Senegal saw a marked increase in the number of rural poor women accessing modern contraceptives.<sup>37</sup> Some of this success is due to outreach and provision of services by local NGOs who will now be subject to the Global Gag Rule. Those who do not sign the Global Gag Rule will have their U.S. funds eliminated, and may have to limit services in some rural and hard-to-reach locations. Others may limit the full spectrum of their services due to misapplication or

**GRAPH 2: MATERNAL MORTALITY RATIO PER 100,000 LIVE BIRTHS<sup>48</sup>**



over-interpretation of the policy. Implementation of the policy could therefore derail the recent successes that Senegal has seen in contraceptive outreach to rural areas, particularly as women in hard-to-reach areas will find it more difficult to access services and may determine that the barriers are not worth the benefits that modern methods provide.

## MATERNAL HEALTHCARE

Although the fertility rate in Senegal remains high at 5.3 children per woman, the country has cut its maternal mortality

ratio from 530 to 320 deaths per 100,000 live births since 1990.<sup>39,40</sup> This is due in part to the many programs USAID has helped to fund. Since 2012, USAID has worked with Senegal to implement the use of lifesaving interventions such as misoprostol (to treat post-partum hemorrhage) and chlorhexidine, an antiseptic (to prevent newborn sepsis), as well as establish hundreds of health huts (basic community-level facilities staffed by a community health worker) throughout the country.<sup>41</sup> Additionally, the U.S. has been a strong supporter of Senegal's efforts to achieve universal health coverage through community-based health insurance models and integrated health services protecting women and children free of charge.<sup>42</sup> Under Trump's Global Gag Rule, these services and support could be severely threatened as supplies may be less accessible and organizations who reject the policy may have to reduce programming in the wake

of decreased funding.

Efforts to further decrease maternal mortality in Senegal are hampered by the nation's extremely restrictive abortion law, which has led to high rates of unsafe abortion. An estimated 63 percent of abortion procedures in Senegal are carried out by untrained individuals or by the women themselves.<sup>43</sup> More than half of the abortion procedures result in complications requiring medical care.<sup>44</sup> Although post-abortion care (PAC) is legally allowed in Senegal, confusion and fear over the country's laws, combined with a lack of provider training and supplies, means that many women—particularly low-income women—are unlikely to receive necessary PAC services.<sup>45</sup> Trump's Global Gag Rule does not prohibit U.S. funds to be used for PAC, however the policy is likely to add further confusion and fear about the provision of PAC due to the overall chilling effect it has on the delivery of

reproductive health services. Past implementation of the Global Gag Rule has shown that any existing advocacy efforts to liberalize Senegal's abortion laws will also be stifled, hampering efforts to decrease maternal deaths and injuries caused by unsafe abortions.<sup>46,47</sup>

## HIV

Senegal's adult HIV prevalence rate remains low at less than one percent, although prevalence rates among certain high-risk groups such as commercial sex workers are considerably higher (18 percent).<sup>49</sup> Prevalence rates also vary by gender, with women having a higher prevalence (0.8 percent) than their male counterparts (0.5 percent).<sup>50</sup> USAID has been an important partner in Senegal, having helped to significantly increase access to testing and counseling services throughout the country and to provide 8,000 people living with HIV with medical care and other



services, including psychosocial support and nutrition.<sup>51</sup>

Additionally, the U.S. has provided integrated services and provider trainings to address the unique needs of those co-infected with HIV and tuberculosis.

Trump's Global Gag Rule will implicate all HIV assistance provided by the United States, potentially hampering the advancements already made. HIV prevention efforts through the distribution of condoms may be scaled back as commodity providers lose funding or experience delays in shipments of condoms.

## INTEGRATED SERVICES

The integration of services has been crucial to increasing access to health services in Senegal, particularly at the community level. The country has developed a minimum package of services aimed at mothers and children that can be offered together such as prenatal care, prevention of mother-to-child transmission of HIV, vaccines, breastfeeding information, and treatment of

diarrhea and malaria.<sup>52</sup> In addition, a fuller package of integrated services, including monitoring adherence with HIV treatment, treatment for severe malnutrition and treatment for post-partum hemorrhage, is being scaled up. Contraceptives (both pills and injectables) have been successfully integrated into this package in many communities in Senegal.<sup>53</sup> However, this progress has not been equal across the country and integration of family planning information and services into maternal and child health services, including post-partum care, remains limited in some areas.<sup>54</sup>

Integrated health services help providers meet the multiple health needs of clients in a more effective and equitable way and allow clients, particularly women, to access a variety of services at one time and place. The focus on the integration of services has also led to important structural changes within the health system, including improved and comprehensive training for providers, task-shifting to community health workers, and switching to a "push model"

for providing family planning and other commodities, which ensures that commodities are regularly delivered to community health posts to limit potential stockouts.<sup>55</sup>

With Trump's Global Gag Rule in place, any progress toward ensuring that family planning is integrated into maternal and child health services, including immunization and postnatal services, could be threatened as some organizations will give up U.S. funding altogether. Meanwhile, others willing to accept the conditions of Trump's Global Gag Rule may try to separate themselves from the provision of family planning and other reproductive health services, as observed in other countries during the past iteration of the Global Gag Rule.<sup>56</sup> Lack of integrated services will make it more difficult for many people to access comprehensive health services in their communities, as seeking the same range of services would involve multiple, sometimes long trips to see different providers—if the services are provided elsewhere at all.

## CONCLUSION

After the recent years of progress made on improving the health of women, girls and their families, Senegal stands to be significantly impacted by Trump's expanded Global Gag Rule. We can anticipate the health impacts to encompass many more programs than under previous iterations of the policy, and family planning—the sector receiving the most U.S. assistance in Senegal—is already coming under fire. Organizations refusing to accept the Global Gag Rule will need to rely on the Senegalese government to fill gaps in programs and commodities. However, with Trump's Global Gag Rule further straining Senegal's health system by including all health sectors, this could require policymakers to make difficult decisions about which areas of healthcare to focus limited resources. The impacts of Trump's Global Gag Rule will likely be disproportionately felt by the poorest women and girls or those living in rural areas.