

# U.S. abortion restrictions harm women's health at **home** and **abroad**.

Wherever they live, regardless of their economic status, women need comprehensive reproductive health services, including abortion.

However, U.S. policies restrict federal funding for legal abortion care, through the Hyde Amendment in the United States and the Helms Amendment on U.S. foreign aid. These policies, here and abroad, unfairly penalize women for being poor.



Tens of millions of women around the world rely on U.S.-funded programs for their reproductive health care, but the **HELMS AMENDMENT** restricts access to safe, legal abortion information and services within these programs.



Nearly 1 in 7 women of reproductive age rely on Medicaid. And because of the **HYDE AMENDMENT**, 1 in 4 Medicaid-eligible women with an unwanted pregnancy are forced to carry the pregnancy to term.

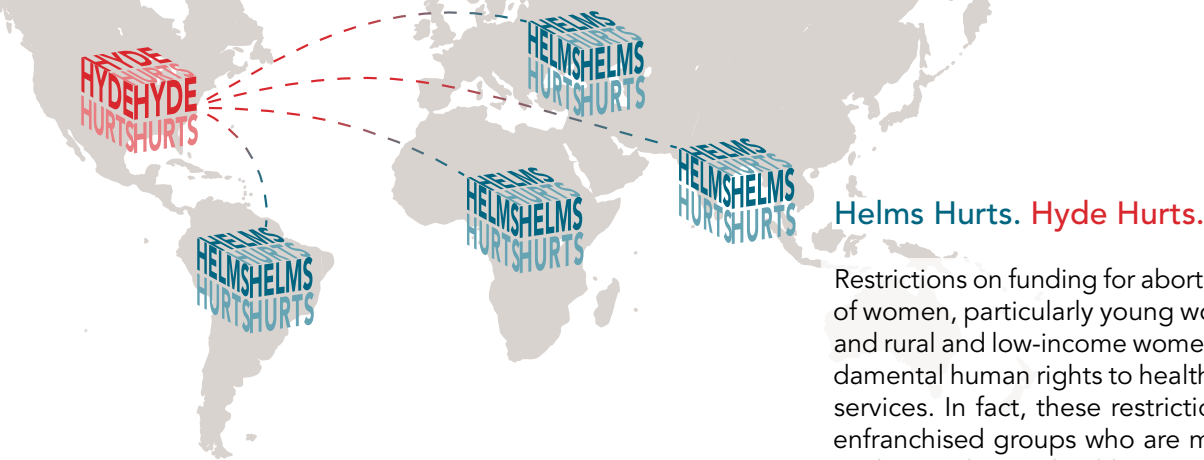
## The Helms Amendment

The Helms Amendment, passed in 1973, applies far-reaching federal funding restrictions on abortion overseas. Tens of millions of women around the world receive reproductive health care through U.S.-funded programs, but the Helms Amendment restricts access to safe, legal abortion information and services within these programs.

The United States plays a leading role in combatting poverty and improving the health and status of women and girls around the world. But a lack of access to safe abortion care continues to harm women and contributes each year to 47,000 deaths, and millions more serious injuries, from unsafe abortions.

## The Hyde Amendment

The Hyde Amendment, passed in 1976, denies abortion care to women in the United States who receive Medicaid, except in cases when the pregnancy is life-threatening, or is the result of rape or incest. **More than 9 million (nearly 1 in 7) women of reproductive age (15–44) rely on Medicaid, and because of the Hyde Amendment, one in four women with an unwanted pregnancy are forced to carry the pregnancy to term.**



## Helms Hurts. Hyde Hurts.

Restrictions on funding for abortion threaten the health of women, particularly young women, women of color, and rural and low-income women, and violate their fundamental human rights to health-care information and services. In fact, these restrictions unfairly target disenfranchised groups who are more likely to seek out vital reproductive health services through the public health system.

Restrictions on federal funding for abortion—whether domestically or through U.S. foreign assistance—create a system in which access to safe, legal abortion services depends on socio-economic status, race/ethnicity and geography.

### HELMES

“The impact [of these restrictions is that] services are delayed for the woman...women are not getting the information they need when and how they need it, and at points where they need it... It’s a great shame. Personally, I don’t think it fosters the comprehensive approach to reproductive health that I would love to give every single one of our clients, which is what they deserve. But I can’t do that.”

— Program Director of an international reproductive health organization in Ghana, where abortion is legal.

SOURCE↑: USAID-funded NGO Country Director. Interview on 3/28/11.

### HYDE

“The Hyde Amendment in particular puts women in the most dire of situations. They have to choose between paying their rent or being pregnant, feeding their children or being pregnant, pawning their car or being pregnant. The Hyde Amendment has the ability to destroy lives, the lives of women who it restricts from obtaining abortions they need, the families of the women who it hurts, the spouses, children, sisters, parents and everyone’s lives who are touched by the women we know.”

— Dr. LeRoy Carhart, from “Reproductive Rights in the 21<sup>st</sup> Century: The Effects of the Hyde Amendment,” RH Reality Check on September 2, 2010.

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