

THE HELMS AMENDMENT UNDERCUTS LIFE-SAVING REPRODUCTIVE HEALTH CARE

In the last three decades, the governments of more than 40 countries have changed their laws to allow for greater access to abortion, driven by the recognition that access to abortion is a human right and that safe abortion care is essential to protecting people's health and well-being.

Prior to 2002, abortion was illegal in Nepal. Women were imprisoned, half of all hospital admissions were due to complications from clandestine abortions, and hundreds of women died each year. Nepal's legal framework now supports abortion access. The country liberalized its abortion law in 2002 and the right to safe motherhood and reproductive health was guaranteed by the 2015 Constitution. In 2018 the Right to Safe Motherhood and Reproductive Health Act further ensured that women and girls in Nepal have the right to access safe, legal abortion free of charge at public health facilities. Access to legal abortion services has led to a steep decline in maternal mortality in Nepal, which fell from 580 maternal deaths per 100,000 live births in 1995 to 190 per 100,000 in 2013.

However, barriers remain to obtaining safe and legal procedures in Nepal, including lack of awareness of the legal status of abortion, lack of services, lack of transportation to approved facilities, harmful gender norms that hinder women's decision-making autonomy, and abortion-related stigma.

For six decades, the U.S. government has provided funding to expand reproductive health care in Nepal, but because of the Helms Amendment, the U.S. government is sitting on the sidelines—and in some cases undercutting this life-saving work—as Nepal works to reduce maternal mortality due to unsafe abortion.

Due in great part to U.S. funding restrictions like the Helms Amendment, Nepal's reproductive health care provision is fragmented and needlessly inefficient. These policies have led to perverse situations where abortion services were not provided at all, or took place in labor and delivery rooms, because USAID will not permit the use of spaces designated for postabortion care (care for complications from unsafe abortion) to be used for abortion services. The artificial separation of a critical continuum of reproductive and sexual health services harms people's health and lives.



photo © Two Parrot Productions





Helms Amendment Curtails Programs that Save Women's Lives in Nepal

Safe, legal abortion is available in Nepal, but according to a [2017 study](#) from Nepal's Center for Research on Environment Health and Population Activities (CREHPA) and Guttmacher, over half of women are still getting unsafe abortions. But why? Abortion is often out of reach for many women in remote areas. For example, women in the mountainous Mugu District, 560 miles from Kathmandu, have difficulty accessing health care, including reproductive health care, due to the remoteness of the area, the lack of skilled health workers and the general lack of infrastructure.

Women from relatively well-to-do families can travel to urban areas for abortion care, but many women turn to unsafe methods to terminate their pregnancies, such as using medicinal herbs or traditional practices, says Parash P. Phuyal, a senior advisor with Ipas Nepal.

Accurate information on abortion, safe services and integrated care are not widely available or accessible, due to the Helms Amendment.

One local NGO representative told researchers from the Center for Research on Environment,

Health, and Population Activities (CREHPA) and the Heilbrunn Department of Population and Family Health at the Columbia University Mailman School of Public Health that they were unable to receive U.S. funds for cervical cancer services because they could not separate abortion services in their facility. "It is not possible to have separate staffs and space for each service we offer."

Several providers shared similar experiences with the CREHPA-Columbia Mailman research team:

"...Services providers who were trained and paid by USAID were not allowed to have interactions with us [abortion providers]."

"I was instructed to avoid being involved in abortion-related activities; however, this facility focuses on integrated delivery of services. Due to this, I used to experience difficulties while offering counseling to the clients as I was unable to display...materials where information about abortion was mentioned, along with family planning information."



photos © Ipas Nepal



THE HELMS AMENDMENT:

- Reduces the availability of safe, legal abortion; women increasingly seek unsafe abortion alternatives
- Denies health-care providers life-saving equipment and training
- Censors critical health information; NGO and government avoidance of providing abortion-related information and counseling
- Creates stigma which negatively impacts women’s health-care seeking behavior and, in extreme cases, may result in reprisals against service providers
- Limits programs that offer integrated health care such as HIV, malaria, immunizations and reproductive health care — particularly important in rural and poor urban settings
- Limits feasibility of multi-donor programming, which can be more efficient and effective
- Isolates NGOs working on safe abortion

CALL TO ACTION ++++++

As the largest government funder of family planning and reproductive health services, the United States plays a vital role in improving public health around the world. Congress should repeal the Helms Amendment immediately. It should be replaced with the **Abortion is Health Care Everywhere Act**, a policy that supports access to quality, comprehensive sexual and reproductive health care for all people and provide funding for critical safe abortion services worldwide.

Note: We use the terms “women, girls and, at times, the gender-neutral “people”; to refer to those who have had—or may someday have—an abortion. We seek to acknowledge the full range of gender identities held by people who have abortions. While abortion stigma affects everyone, we name women, girls, gender non-conforming, and people who are pregnant—rather than exclusively using gender-neutral language—to recognize that abortion stigma is rooted in female sexuality and contributes to gender inequity and oppression.

Ipas Partners for
Reproductive Justice

P.O. Box 9990 • Chapel Hill, NC 27515 USA • 1.919.967.7052 • www.ipas.org