



## Amman Centre for Human Rights Studies – Public Report

# Ending the Global Gag Rule and Promoting the Black Maternal Health Omnibus Act

Organised by:

**United Nations Association Southern New York State**

**Division** - March 5, 2021: 4:00pm EDT



### **Brief Introduction**

The Global Gag Rule is a policy that was introduced by Ronald Reagan in 1984 and it sets conditions on US global health assistance. It says that, as a condition of receiving assistance, that organisation cannot use any of its money to do any activities related to abortion. This includes services, education, referrals for information, and advocacy in support of safe abortion.

The new administration of US President Joe Biden rescinded the Global Gag Rule on January 31st. This event focuses on global and US reproductive health issues, including the Black Maternal Health Omnibus Act of 2021, and impacts of the repeal of the U.S. Global Gag Rule and restoration of funding to UNFPA.

The objective of this public report, which is by no means a transcript, is to inform those who were not present by summarising the core message and information that was shared during the webinar, as interpreted by ACHRS' representative participant(s).

The session was moderated by Dr. Corinne Whitaker  
International Health, Development, and Gender Consultant  
and UNA-SNYS Division Board Member.

### **1<sup>st</sup> speaker**

Padmini (Mini) Murthy

Professor in Division of Health Policy and Management in the Department of Public Health and  
Global Health Director.

Covid has caused challenges for pregnant women due to the lack of access of maternal care. The highest number of births is 20.1 million in India. These countries have high neonatal mortality rates, even before the pandemic. There is a lack of support for mental women which has caused mental stress during pregnancy for women as they carry a physical and mental burden.

The lack and loss of employment globally due to COVID-19 has also caused the loss of health benefits. Meanwhile, the work that women do at home has increased threefold during the pandemic.

In 2020, 320 million girls were using contraception. This increased from 260 million in 2012. A lot of these women have no access to contraception because of the costs. And curfew has affected access. An example of a promising initiative can be found in Pakistan where a young woman founded an app through which women and girls can get their sanitary products during their periods. This shows that people are coming together and working together to find solutions

**2<sup>nd</sup> speaker (video message)**  
Senator Kirsten Gillibrand (NY)

Black women are three times more likely to die from pregnancy-related complications than white women. And we know that institutional racism in our health system is only a part of this crisis. We need to make sure that black moms get appropriate health care.

The Black Maternal Health Monotuous Act of 2021 includes Gillibrand's bill, the 'Moms Matter Act'. Senator Gillibrand is also working on the 'Maternal Care Act' and the 'Moms Act'. She is also supporting Senator Booker's legislation in the 'Mommy's Act'.

Senator Gillibrand has long called for the repeal of the global Gag Rule as she believes that a woman's medical decision should be something between her and her family and her doctor. The domestic gag rule, entitled Title X, that was introduced under Trump and must now also be rescinded.

**3<sup>rd</sup> & 4<sup>th</sup> speakers**  
Former NY State Senator Ruth Hassell-Thompson &  
Dr. Kecia Gaither  
Director of Perinatal Services/Director of Maternal-Fetal Medicine for NYC Health+ Hospitals/Lincoln  
in the Bronx

Black women have been disproportionately affected by maternal death. In the last three decades, the rate of maternal deaths has tripled. The cause remains unclear. Racism and implicit bias factor into the dismal outcomes that are prevalent in 2021. Several legislators have recognised this problem and have come up with the 'Mominibus bill'.

There are twelve factors within this bill that specifically address adverse perinatal outcomes among women of colour. For example, the socio-determinants of health; can a woman get to the doctor's office, can she afford it, is she living in a place that is safe, does she have running water, and so on.

Other examples are to invest in federal programs to address the unique risks for and effects of Covid-19 during and after pregnancy, invest in community-based incentives to reduce levels of and exposure to climate change-related risks for moms and babies, and to promote maternal vaccinations.

This bill is therefore important as it addresses many issues.

**5<sup>th</sup> speaker**  
Chloë Cooney  
Senior Director, Strategy and Programs, Planned Parenthood Global,  
Planned Parenthood Federation of America (PPFA)

The PPFA has fought against the Global Gag Rule ever since it came into place. They took the decision all the way to the supreme court which decided that, although it would have been unconstitutional domestically, the constitution did not extend outside the US and therefore it was approved.

Trump radically expanded it. He extended the policy to all international health assistance. For example, HIV programs, malaria programs, maternal health programs, and even COVID programs were subjected to this policy.

There have been three main consequences. People lost access to health services, civil society has suffered due to polarisation, and it has promoted an anti-rights agenda and the related movement.

Seeing this policy gone for good should be a top priority. It erodes confidence if this issue will come back in the next elections. We also actually need to end the policy, meaning that the programs and the infrastructure must be reset and adjusted.

The Global Gag Rule is more than a policy, it is an ideology. It is a neo-colonial view that looks to exploit foreign aid to coerce poor countries in squashing reproductive rights and women's movements. The purest rebuttal of that is a strong powerful local movement that is driving forward proactive agendas.

**6<sup>th</sup> speaker**

Ann Erb Leoncarvello

Head of the Advocacy Communications Unit of the Humanitarian Office of the UN Population Fund (UNFPA)

The decision taken by Biden's team sends a very strong message of support to women's health and rights and the rights to sexual reproductive health and rights worldwide. We are a sexual and reproductive health agency. The United States is a founding member of the UNFPA. For the past four years the US did not provide any funds to the UNFPA.

The state will now provide the UNFPA with 32.5 million USD. This will support women and girls around the world as it will fund life-saving maternal health care, family-planning services, and programmes to address gender-based violence.

The situation of women in conflict situations is very serious and requires a lot more attention. For example, in Syria we can provide reproductive health kits and lead the rapid response mechanism. We do similar things in Colombia where many Venezuelan refugees are stranded. Yemen is the world's worst humanitarian crisis. There are over a million women who are acutely malnourished as we speak.

We also see that indigenous women have higher needs. We also need to look at LGBTQI and disabled women, black women. These are all women that have special needs and that deserve special attention.

Women know what they need and they know how to lead. The more we can support women's leadership, the better everyone in this world will be. I think that this is a truth that cannot be told enough.