

# Impact of the Trump Administration's Global Gag Rule on Sexual and Reproductive Health in Ethiopia



The Trump administration's "global gag rule," though now defunct, is likely to have lasting effects on sexual and reproductive health in Ethiopia. From May 2017 to January 2021, the policy prohibited US global health funding for non-US NGOs that provide abortion services; offer abortion information, counseling or referrals; or advocate abortion liberalization. In May 2019, the administration expanded the policy to restrict funding to only those NGOs whose subgrantees also complied with the terms of the policy (whether or not the subgrantees received US funding). Though the policy allowed US support for NGOs using non-US funds to provide abortion in cases of rape, incest or a threat to the pregnant woman's life, lack of clarity on this point likely led to restrictions on even these services. Versions of the global gag rule have been repeatedly instated by US presidents from the Republican party and rescinded by Democratic presidents since 1984.

This fact sheet presents findings from a longitudinal study assessing the impacts of the recent global gag rule on sexual and reproductive health in Ethiopia. The study measured service delivery and outcomes between 2017—just before full implementation of the policy—and early 2020. The data come from 361 health facilities that provide family planning services and a community-based panel of 4,909 women of reproductive age (15–49). The study covered Addis Ababa, Afar, Amhara, Oromia, SNNPR and Tigray—regions that, together, account for more than 90% of the country's population.

## Family planning service provision and outcomes suffered in Ethiopia under the recent global gag rule, while abortion services improved

NGO operations	Family planning services	Reproductive health outcomes	Abortion services
Disruption of partnerships Programs ended or scaled back	Decrease in mobile outreach visits to provide family planning in public facilities  Decrease in availability of contraceptive care	Decrease in modern contraceptive use  Increase in births	Increase in coverage of safe abortion care in public facilities  Increase in safe abortions provided  Decrease in post-abortion complications treated

### Impact on NGOs

- Many organizations in Ethiopia complied with the terms of the Trump administration's gag rule to avoid losing US funding. The policy's restrictions disrupted their partnerships and reduced the scope of services they could provide.
- Some NGOs refused to stop their abortion-related activities and lost US funding as a result. By 2019, changes to services at two large NGOs that lost funding included:
  - > Cutting youth program operations in 18 of 24 woredas (districts)
  - > Scaling back a mobile outreach program that provides long-acting reversible contraceptive (LARC) methods and permanent contraceptive methods in rural areas
  - > Ending a program that provided technical support to public health facilities

### Impact on family planning services

The availability of certain family planning services declined between 2017 and 2020.

- The estimated proportion of health facilities offering family planning through community health volunteers fell from 30% to 24%.
- The share of facilities offering mobile outreach visits for provision of LARCs and permanent contraceptive methods fell from 21% to 8%.
- The share of facilities offering integrated family planning and post-abortion care fell from 77% to 73%.
- The share of facilities reporting stockouts of contraceptive methods rose from 53% to 59%.

### Impact on reproductive health

Declines in family planning service provision after the gag rule came into effect reversed critical recent gains in sexual and reproductive health.

The following changes took place between mid-2018 and early 2020:

- Modern contraceptive use, which had increased in recent years, began to decrease.
- This decline was larger in areas where NGOs had scaled back their services due to loss of US funding than in areas where there had not been funding-related service reductions.
- Births, which had declined in recent years, increased: The proportion of surveyed women giving birth in the previous 12 months rose from 14% to 16%.

### Impact on abortion services

Ethiopia revised and expanded its abortion law in 2005 to make abortion legal on broad grounds and has since made considerable efforts to improve the availability of safe abortion and postabortion care. The Ethiopian health system and NGOs that support it managed to both protect and expand abortion services while the Trump administration's gag rule was in effect. Between 2018 and 2020:

- The proportion of public health facilities with the capability to provide safe abortion care rose from 67% to 83%, as more facilities were able to provide medication abortion.
- The number of safe abortions provided in health facilities increased by almost 10%. Postabortion care cases decreased by 7%, possibly indicating that fewer women were in need of care for complications of unsafe abortion.

### Recommendations

The government of Ethiopia has made substantial progress in meeting women's sexual and reproductive health needs over the past several decades, and findings suggest the most recent iteration of the US global gag rule disrupted and rolled back some of these gains. Critical actions are needed to ensure that if the gag rule is reinstated by a future US administration, Ethiopian sovereignty over its health services is protected.

- Proactive policies should be considered in Ethiopia to ensure that both the public and private sector, as well as civil society organizations, can continue to provide sexual and reproductive health services, and that the sexual and reproductive rights of Ethiopian women are respected.
- The US Congress should permanently repeal the global gag rule to ensure that this policy cannot continue to erode the sexual and reproductive health and rights of women in Ethiopia and around the world.
- If the gag rule is reinstated, the Ethiopian government, civil society and international NGOs should work to ensure that all Ethiopian NGOs are informed about the harmful effects this policy can have and the services that NGOs complying with the policy remain eligible to provide.
- The Ethiopian government should work to diversify and expand funding for sexual and reproductive health services in order to reduce reliance on US funding. This includes increasing domestic funding for family planning, incorporating family planning into universal health coverage and diversifying the donor pool supporting family planning in Ethiopia.

### Source

The information in this fact sheet is from Sully EA, Shiferaw S, Assefa S, Bell SO and Giorgio M, Impact of the Trump administration's expanded global gag rule policy on family planning service provision in Ethiopia, *Studies in Family Planning*, 2022, 53(2):339-359, <https://doi.org/10.1111/sifp.12196>, and from currently unpublished data from the same study.

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