

ACTION ALERT:

Abortion Advocates Seek to Sway Trump on Mexico City Policy with Faulty Arguments

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International abortion advocates report that they are trying to convince the incoming Trump administration not reinstate the 1984 Mexico City Policy. Their arguments are false and it is essential that they be refuted and the merits of Policy be understood, especially by the incoming administration. The Policy proved highly effective during the administration of George W. Bush. It directed funding toward the real needs of women and children and away from controversial, unnecessary, and unwanted interventions such as abortion. Health workers in developing countries reported that maternal and child health programs benefited directly due to the Mexico City Policy.

The Policy requires that grantees of U.S. foreign aid for family planning do not perform or actively promote abortions. It was rescinded under Democratic administrations and reinstated by Republicans. This has led some to characterize it as a “political football,” but in fact it is a very effective tool, based upon sound American values and faith in human potential.

MCP Will Improve, Not Reduce, Care for Poor Women and Children

It is telling that abortion activists are worried about the reinstatement of the policy and its effect on their bottom line. Suzanne Ehlers, president and CEO of Population Action International (PAI), [said](#) she was “operating under the assumption that it will be reinstated if not on Trump’s first day in office, then on his second day in office.” PAI was founded in the late 1960s with the purpose of generating public support for taxpayer-funded population control programs abroad.

Chloë Cooney, director of global advocacy at Planned Parenthood Federation of America, [rang](#) an alarmist tone recently, saying, “You see clinics close suddenly because the funding that they were relying on disappears.”

In fact, this is what President Reagan had in mind when he wrote the original Policy memorandum in 1984.

According to former Reagan staffer Bill Gribbin, Reagan sought to build a wall between abortion and U.S. presence in developing countries. He believed the association harmed American prestige. In fact, UN delegates frequently tell us this is the case today. The Obama administration’s ardent promotion of controversial social policies has isolated the U.S. in the policy debates at the UN and negatively affected the U.S. brand in the delegates’ home countries.

Virtually all mainstream media reports cover this story in hyperbolic, zero-sum terms. Mark Goldberg, managing editor of UN News, is typical: “One of the first foreign policy moves of President elect Donald Trump may be to eliminate access to healthcare for some of the poorest women on the planet.”

The reality is that not a single clinic would have to close, and groups insistent on remaining in the abortion business can use alternative funds, as they have in the past. This means that the groups that would be hardest hit by the policy are those that are primarily abortion groups and not maternal and child health providers. The media has quoted experts projecting that Marie Stopes and Ipas would be significantly affected. These groups have boasted that they perform abortions even where illegal. That is why these are exactly the groups that the Policy was meant to affect, so that genuine maternal and health care organizations would benefit.

MCP Will Channel Aid to Where It's Needed Most

Whereas activists argue that the Policy would curtail funding to family planning, this was not the case when the Policy was in place. U.S. funding remained the highest in the world. It is nearly \$700M today, and that only includes the family planning account under USAID. Millions more dollars are being spent on family planning through accounts such as PEPFAR, and humanitarian grants from the State Department (mainly Democracy, Human Rights and Labor and Population, Refugees and Migration). It is virtually impossible to know how much money is flowing to family planning simply because it has now permeated U.S. foreign assistance programs.

MCP Does Not Increase Incidence of Abortion

Abortion advocates are citing two 2011 studies which attempted to link the policy to a curtailment of family planning and, thus, to higher abortion rates. Both of these have been [discredited](#) for having significant flaws in data and methodology. The fact that these are the only two studies the groups have cited, including a mention by Sen. Jeanne Shaheen at the Senate Foreign Relations Committee this year, demonstrates how little evidence opponents of the Policy are able to muster.

MCP Does Not Violate Rights

The policy gained the derogatory name “Global Gag Rule” because the requirement that grantees not advocate for abortion was viewed by abortion groups as a violation of free speech, equal protection, and due process. The Center for Reproductive Law and Policy (now the Center for Reproductive Rights) sued President George W. Bush in 2002 and lost. In her 2002 ruling, now-Supreme Court associate justice Sonia Sotomayor found that the government “is free to favor the anti-abortion position over the pro-choice position” with public funds.

That the “gag rule” moniker was dismissed by a pro-choice now-Supreme Court justice should put this argument to rest once and for all.

Reducing Population Does Not Make America Safer

Feminists are not confident that equating abortion to women's rights will work as it has under the Obama administration. They take a hostile view: “This incoming president has made clear that he does not respect women,” Beth Schlachter, executive director of Family Planning 2020 (FP2020) told NBC News. Instead, Schlachter says she appeals to population control and security arguments and asserts that stable, wealthy countries are less vulnerable to extremist movements.

In fact, the opposite is true. Experts have [documented](#) how falling fertility is [destabilizing](#) international

politics. After decades of studying war and conflict in the developing world, security experts have never found a decisive link between high fertility rates and violent extremism. The 9/11 attackers, ISIS and al Qaeda leaders, for example, hail from wealthy and developed countries, not poor, underdeveloped countries. “Youth bulges” have not been proven to be the cause of cross-border conflict. That said, groups like PAI still hold sway in the security field, and therefore outdated theories about population and security can still be seen in the U.S. National Security Strategy and security documents from the National Intelligence Council and Department of Defense.

Reducing Population Does not Make America More Prosperous

PAI’s Ehlers hopes that economic arguments will also work. “There is no other intervention that is so low-hanging if you are looking to build markets around the world. If that doesn’t appeal to Mr. Markets, Mr. CEO, I don’t know what would,” Ehlers said.

Ronald Reagan had the opposite view and that is one of the primary reasons he wrote the Mexico City Policy memorandum in the first place, according Bill Gribbin. Reagan saw the same principles behind the energizing of the American economy and the bucking of the population control establishment, deeply entrenched in his own party.

President Reagan wrote in the policy memorandum that “people are the ultimate resource” and for “many nations, population growth has been an essential element in economic progress”. He recognized that government programs aimed at controlling population, while intended to be voluntary, represented overbearing intrusion of government into the private lives of the ordinary men and women he so greatly admired.

To Reagan, “abortion and ‘economic statism’ appeared as conjoined evils,” Gribbin [said](#). “Both of them rooted in a negative view of what individuals and families can accomplish for themselves and contribute to the common good.”

Abortion groups now permeate the family planning apparatus of many developing countries—MCP is an effective tool for limiting the harm they are doing

One reason MCP is more necessary now than ever before is that in the last eight years, abortion advocates have infiltrated the health care systems and agitated for liberalized abortion laws in many developing countries where abortion is restricted or banned altogether. This was done under the rubric of “post-abortion care.” The stratagem has been very effective —so much so that due to more liberalized laws, international abortion groups are doing away with the mask of “post-abortion care” altogether.

A leading consortium of advocates for “post-abortion care” (PAC) [announced](#) their intention to transition to campaigning for “comprehensive abortion care” (CAC). Years of US funding has allowed them to gain a foothold in most African countries where they agitate to change abortion laws and create more channels to obtain abortions even endangering women’s health by guiding women to self-induce where no emergency care is readily available to deal with complications, and train unskilled medical workers to use reusable plastic “manual vacuum aspirators” in areas without sanitation to stop the spread of infection.

Post-Abortion Care consortium members include International Planned Parenthood Federation (IPPF),

Pathfinder, Population Council, EngenderHealth and Ipas. They use their perch from within countries to lobby government officials and health workers. They gain credibility by being [equipped](#) with the World Health organization's guidance document—which tells activists how to mainstream abortion into family planning programs and overcome moral and cultural resistance.

Global Family Planning Has Reached “Market Saturation”—But Maternal and Child Health Need More Investment

Another change since 1984 is that the justification for global family planning spending has been undermined by two major events. First, fertility rates are falling all over the world, even in the developing world. Second, the world has reached market saturation for contraception.

The Guttmacher Institute reports that only about 5% of women in the developing world characterized as having an “unmet need” for family planning cite lack of access as the reason they aren't using it. At the same time, they report that women's knowledge of family planning is now nearly universal. Taken together, this demonstrates that the family planning movement has succeeded in saturating the market for its products and services—despite its claims that they lack funding to “enable access” to contraceptives.

It is clear that the use of such terms as “unmet need” as a proxy for access to or actual demand for family planning has resulted in a vast disconnect between the actual desire for contraceptives among women in the developing world and the strident claims made by family planning groups in New York and Washington. It is necessary to reassess the justification for U.S. family planning spending to ensure that it is aligned with the provision of access where it is lacking. Otherwise, there is a danger that U.S. funds will be wasted fueling oversaturated markets, or worse, enabling coercive practices driven by quotas, benchmarks, and ethically-questionable incentive programs.

President Reagan saw this in 1984, on the eve of the UN Conference on Population in Mexico City, and that is the reason he directed the delegation to reject population alarmism and why he established the Mexico City Policy.

The reasons for its reinstatement have never been greater. The Policy has been shown to help improve women's and children's lives, shut off the spigot to the already bloated international abortion industry, improve American prestige, foster a human capital approach to energizing economies through faith in the individual person, in families and a respect for local communities, their mores and values. The Policy represents the best principles of U.S. foreign aid policy and it improves lives for those most in need.



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