

# LEGISLATIVE *Analysis*

Center for Family and Human Rights

## **Reach Every Mother and Child Act (REACH Act) OF 2021 (S. 1451)**

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This bill, which was previously introduced in the 115<sup>th</sup> and 116<sup>th</sup> Congresses, is promoted as being about:

- a) saving the lives of mothers and children in developing countries,
- b) prioritizing the most successful and cost-effective interventions to meet this goal, by
- c) establishing a coordinator within USAID, creating a reporting requirement, and coordinate with “relevant partner entities” including other governments, multilaterals, NGOs, and others.

However, as written this legislation could end up diverting money away from mothers and babies and toward the international abortion lobby.

- Prior versions of this bill explicitly referenced the 2014 *Acting on the Call (AotC)* framework for maternal and child health at USAID, or set targets based on that framework. While this version omits those references, it nevertheless draws on AotC because it:
  - a) builds on the preexisting maternal and child health strategies in use at USAID, and
  - b) includes “lives saved” targets that are based on the metrics in *AotC* unless otherwise specified.

*AotC* is an Obama-era strategy that sets its targets based on the “Lives Saved Tool,” which creates projections of deaths averted by scaling up groups of interventions based on the context of individual countries. Unfortunately, including family planning in the analysis (like *AotC*) shifts the projected “lives saved” away from preventing cause-specific complications that cause maternal and child deaths and toward (1) averted maternal deaths by preventing pregnancy in the first place (making birth rarer, but not necessarily safer) and (2) preventing child deaths by preventing their existence entirely.

These child “*deaths averted*” by are then counted alongside the lives saved that involve actual survivors,<sup>1</sup> resulting in inflated count of “lives saved.” **Until or unless USAID’s strategy is updated and improved, this bill would take its existing problems and codify them in law. Alternatively, if the bill specified that “lives saved” had to involve preventing cause-specific deaths and, in the case of children, leave actual survivors, it could create the impetus for USAID to change its strategy.**

- Proponents of the Reach Act, including its own sponsors, often omit to mention the fact that it includes family planning. Nevertheless, the estimates in the initial AotC report<sup>2</sup> project that approximately two thirds of maternal deaths averted would be by averting pregnancy and one third of child deaths would be through “demographic impact”—or therapeutic nonexistence. But supporters of the bill insist that part of its purpose is to ensure that the interventions that save the most lives per dollar spent are prioritized. Because preventing pregnancies is less expensive than providing the full range of maternal and child health care, and because the “lives saved” analysis includes lives averted by contraception and abortion, it’s likely that resources allocated by the Reach Act would be diverted away from other interventions and into family planning. In addition, the much-cited “unmet need” for family planning in developing countries is less than 5% of cases,<sup>3</sup> which suggests an increasingly

saturated market. **If this bill is not amended to limit its focus only to *non-contraceptive* interventions, at a minimum its targets should be rewritten to preclude flawed metrics from creating the impression that the solution to maternal and child deaths is fewer mothers and children.**

- It is well known that the dominant discourse in the international family planning movement is pro-abortion, and the leading international family planning groups also promote or provide abortions. To the extent that this bill would build on the metrics of *AotC*, the Reach Act would inevitably funnel funds to organizations based in the U.S. and abroad that promote abortion. Notably, the only organizations registered to lobby on the bill's 2019 version are Planned Parenthood Federation of America and Population Action International.<sup>4</sup> These organizations also lobbied for earlier versions, both in the House and the Senate. **While pro-life members of Congress may have supported the intentions of this bill in good faith, the abortion lobby has no illusions regarding its real potential impact.**

## Endnotes

- 1 For more detailed analysis of this, please see [https://c-fam.org/policy\\_paper/seven-reasons-reach-act-falls-short/](https://c-fam.org/policy_paper/seven-reasons-reach-act-falls-short/) and <https://c-fam.org/definitions/lives-saved-bad-metrics-bad-faith/>
- 2 [http://www.usaid.gov/sites/default/files/documents/1864/USAID\\_ActingOnTheCall\\_2014.pdf](http://www.usaid.gov/sites/default/files/documents/1864/USAID_ActingOnTheCall_2014.pdf)
- 3 Hussain R et al., *Unmet Need for Contraception in Developing Countries: Examining Women's Reasons for Not Using a Method*, New York: Guttmacher Institute, 2016
- 4 <https://www.opensecrets.org/federal-lobbying/bills/summary?id=s1766-116>



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