To amend the Foreign Assistance Act of 1961 to authorize the use of funds for comprehensive reproductive health care services, and for other purposes.
WATSON COLEMAN, Mr. WELCH, Ms. WEXTON, Ms. WILD, Ms. WILLIAMS of Georgia, Ms. WILSON of Florida, Mrs. TORRES of California, Ms. PRESSLEY, Ms. LEE of California, Ms. SPEIER, Ms. DEGETTE, and Ms. STRICKLAND) introduced the following bill; which was referred to the Committee on Foreign Affairs

A BILL

To amend the Foreign Assistance Act of 1961 to authorize the use of funds for comprehensive reproductive health care services, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Abortion is Health Care Everywhere Act of 2021”.

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Abortion is a critical component of sexual and reproductive health care and should be accessible and affordable for all people.

(2) All people have the right to make their own choices about their sexual and reproductive health, and to access quality and affordable sexual and reproductive health care. International agreements have recognized reproductive rights for over 25 years, and the 2015 Sustainable Development Goals
reiterated the centrality of reproductive rights to gender equality.

(3) Studies have repeatedly demonstrated that when people, including young women and adolescent girls, gender non-conforming individuals, and transgender men, are able to control their reproductive lives, there are enormous social and economic benefits—not just for the individual and their family, but for entire communities. Countries that prioritize reproductive health, rights, and justice and human rights are more likely to have better overall health throughout.

(4) Health system cost is reduced when abortion is widely available and integrated with other types of health care.

(5) Without access to safe abortion care, people risk their lives to end their pregnancies. At least 24,100 people in low- and middle-income countries die every year from complications from unsafe abortion.

(6) Ninety-seven percent of unsafe abortions occur in developing countries in Africa, Asia, and Latin America. In low- and middle-income countries, the annual cost of post-abortion care for all who need it would be $4 billion. The majority of this cost
is attributed to treating complications from abortions provided in unsafe conditions.

(7) Restricting abortion does not reduce either the need for or number of abortions. Abortion rates are similar in countries where it is highly restricted by law and where it is broadly legal.

(8) When abortions are performed in accordance with World Health Organization (WHO) guidelines and standards, there is minimal risk of severe complications or death.

(9) As part of their commitment to prevent unsafe abortions and preventable deaths and ensure all people have access to comprehensive sexual and reproductive health care and can exercise their right to full control over their sexuality and reproduction, developing countries and donor governments must work collaboratively to deploy funding, align policies, and mobilize expertise to make safe abortion services available to those seeking to terminate pregnancies.

(10) United States law restricting United States foreign assistance funding from being used to provide safe abortion services has the effect of harming people who seek to terminate their pregnancies in several ways, including by blocking access to services and erecting barriers to providers obtaining the
training and equipment needed to deliver care to those in need.

(11) Since section 104(f)(1) of the Foreign Assistance Act of 1961 (22 U.S.C. 2151b(f)(1)) (commonly referred to as the “Helms amendment”) was enacted in 1973, dozens of governments across the globe have liberalized abortion laws and policies.

(12) In countries where the United States supports family planning and reproductive health care and in which abortion is legal on at least some grounds, support for safe abortion could avert over 19 million unsafe abortions and 17,000 maternal deaths each year.

SEC. 3. STATEMENT OF POLICY.

The following shall be the policy of the United States Government:

(1) Safe abortion is a critical component of comprehensive maternal and reproductive health care and should be included as part of foreign assistance programs funded by the United States Government.

(2) Safe abortion is to be made widely available and integrated with other types of health care.

(3) The United States Government should work to end unsafe abortion and promote safe abortion
services by providing funding and collaborating with
affected governments and service providers to pro-
vide training, commodities and equipment, and ac-
cess to safe abortion services.

SEC. 4. USE OF FUNDS FOR COMPREHENSIVE REPRODUCTIVE HEALTH CARE SERVICES.

Section 104 of the Foreign Assistance Act of 1961 (22 U.S.C. 2151b) is amended—
(1) in subsection (f)—
(A) by striking paragraph (1); and
(B) by redesignating paragraphs (2) and (3) as paragraphs (1) and (2), respectively;
(2) by redesignating subsection (g) as sub-
section (h); and
(3) by inserting after subsection (f), as amend-
ed, the following:
“(g) USE OF FUNDS FOR COMPREHENSIVE REPRODUCTIVE HEALTH CARE SERVICES.—Notwithstanding any other provision of law, funds made available to carry out this part may be used to provide comprehensive reproductive health care services, including abortion services, training, and equipment.”.