

Latest ban on U.S. global health funding ignores science, researchers say

February 27 2017, by Ruthann Richter

In a commentary published Feb. 22 in *The New England Journal of Medicine*, two School of Medicine scientists make a case for lifting the ban on U.S. aid to international groups that support abortion-related activities, saying the policy harms women and ultimately could hurt the country's economic and security interests abroad. They argue that scientific evidence, not ideology, should guide policymaking in global health.

The so-called Mexico City policy bans funding to nongovernmental organizations that provide abortion counseling or referrals. The policy, initiated by President Reagan in 1984 during a United Nations conference in Mexico City, was reinstated by the Trump administration in January.

"The reinstatement of the Mexico City policy is a stark example of 'evidence-free' policy making that ignores the best scientific data, resulting in a policy that harms [global health](#) and, ultimately, the American people," wrote Nathan Lo, an MD-PhD student, and Michele Barry, MD, a professor of medicine.

Barry, director of the Stanford Center for Innovation in Global Health, had worked with the Obama administration to lift the restrictions in 2009. She said she was particularly disheartened to see the Trump administration take the policy one step further, banning funding to groups that promote maternal and child health, as well as HIV prevention efforts.

"It's very unfortunate to see all that good work unraveled," Barry said. "It not only impacts reproductive services, but the health of women and their children."

In the commentary, the authors note that even when U.S. aid is provided to groups supporting abortion-related activities, the money is not used to directly pay for abortion services. Rather, the funds are used for reproductive counseling, education and contraception. Without health and reproductive services, more women suffer pregnancy-related complications and engage in unsafe sex, putting them at risk of contracting HIV, the authors say.

In addition, a 2011 Stanford study found that women living in countries most affected by the ban had 2.6 times the odds of having an abortion compared with those in countries not affected by the policy. This means the [policy](#) has the opposite of its intended effect.

More information: Nathan C. Lo et al. The Perils of Trumping Science in Global Health—The Mexico City Policy and Beyond, *New England Journal of Medicine* (2017). [DOI: 10.1056/NEJMp1701294](https://doi.org/10.1056/NEJMp1701294)

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