

118TH CONGRESS
1ST SESSION

H. R. 1723

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

IN THE HOUSE OF REPRESENTATIVES

MARCH 22, 2023

Ms. SCHAKOWSKY (for herself, Ms. LEE of California, Ms. PRESSLEY, Ms. DEGETTE, Mrs. TORRES of California, Ms. STRICKLAND, Mrs. BEATTY, Ms. KAMLAGER-DOVE, Mr. DOGGETT, Mr. KHANNA, Ms. MCCOLLUM, Mr. CONNOLLY, Mr. GRIJALVA, Mr. PANETTA, Mrs. NAPOLITANO, Mr. CLEAVER, Mr. KILMER, Mr. CASTEN, Ms. SCANLON, Ms. ROSS, Mrs. TRAHAN, Ms. CLARKE of New York, Ms. MOORE of Wisconsin, Mr. MORELLE, Mr. POCAN, Mr. AUCHINCLOSS, Ms. GARCIA of Texas, Ms. TLAIB, Mr. GOMEZ, Ms. WILSON of Florida, Ms. BROWNLEY, Ms. JAYAPAL, Ms. VELÁZQUEZ, Ms. CHU, Mr. QUIGLEY, Ms. ADAMS, Mr. ALLRED, Mr. SMITH of Washington, Ms. WILLIAMS of Georgia, Mr. SHERMAN, Mr. HIGGINS of New York, Mr. KILDEE, Ms. TOKUDA, Mrs. FLETCHER, Mr. TAKANO, Mr. COHEN, Mr. TRONE, Mr. HUFFMAN, Mr. COSTA, Ms. BONAMICI, Ms. ESCOBAR, Ms. WASSERMAN SCHULTZ, Mr. SCHIFF, Mr. PETERS, Mr. VEASEY, Mrs. HAYES, Mr. CARTER of Louisiana, Mr. CARTWRIGHT, Mr. CÁRDENAS, Mr. HIMES, Mr. TONKO, Ms. SCHRIER, Mr. GARAMENDI, Ms. SHERRILL, Mr. SWALWELL, Ms. MATSUI, Mr. SARBANES, Ms. JACOBS, Mr. BLUMENAUER, Ms. PORTER, Ms. BLUNT ROCHESTER, Ms. CASTOR of Florida, Mr. RASKIN, Mr. ESPAILLAT, Ms. TITUS, Mr. GARCÍA of Illinois, Ms. MENG, Ms. LOFGREN, Mr. RUPPERSBERGER, Mr. BERA, Mr. DESAULNIER, Mr. EVANS, Mrs. FOUSHEE, Mr. LEVIN, Mr. JOHNSON of Georgia, Mr. CARBAJAL, Ms. STANSBURY, Ms. DELBENE, Ms. UNDERWOOD, Mr. PASCRELL, Ms. KUSTER, Mr. LIEU, Mrs. RAMIREZ, Mr. CASTRO of Texas, Mrs. MCCLELLAN, Mr. LARSEN of Washington, Ms. STEVENS, Ms. BUSH, Mr. STANTON, Ms. DEAN of Pennsylvania, Mr. NADLER, Ms. KELLY of Illinois, Ms. LOIS FRANKEL of Florida, Mr. GOTTHEIMER, Mr. DAVID SCOTT of Georgia, Mr. PAYNE, Ms. BUDZINSKI, Mr. SOTO, Ms. WEXTON, Ms. DELAURO, Mr. BOWMAN, Mr. CROW, Mr. NEGUSE, Mr. CICILLINE, Ms. CROCKETT, Mr. PHILLIPS, Ms. SÁNCHEZ, Ms. LEGER FERNANDEZ, Mrs. CHERFILUS-MCCORMICK, Mr. TORRES of New York, Ms. BARRAGÁN, Ms. BROWN, Mrs. WATSON COLEMAN, Mr. HORSFORD, Mr. CARSON, Mr. PALLONE, Mr. KRISHNAMOORTHY, Ms. ESHOO, Mr. MCGOVERN, Ms.

PETTERSEN, Mr. IVEY, Mrs. MCBATH, Mr. KEATING, Ms. SEWELL, Mr. CASE, Ms. PINGREE, Ms. LEE of Pennsylvania, Mr. RYAN, Mr. SCHNEIDER, Ms. WILD, Ms. JACKSON LEE, Mr. MULLIN, Mr. BEYER, Ms. OMAR, Mr. MOULTON, Ms. CRAIG, Ms. MANNING, Mr. THOMPSON of California, and Mr. FOSTER) 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.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Abortion is Health
5 Care Everywhere Act of 2023”.

6 **SEC. 2. FINDINGS.**

7 Congress makes the following findings:

8 (1) Abortion is a critical component of sexual
9 and reproductive health care and should be acces-
10 sible and affordable for all people.

11 (2) All people have the right to make their own
12 choices about their sexual and reproductive health,
13 and to access quality and affordable sexual and re-
14 productive health care. International agreements
15 have recognized reproductive rights for over 25
16 years, and the 2015 Sustainable Development Goals

1 reiterated the centrality of reproductive rights to
2 gender equality.

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

13 (4) Health system cost is reduced when abor-
14 tion is widely available and integrated with other
15 types of health care.

16 (5) Without access to safe abortion care, people
17 risk their lives to end their pregnancies. At least
18 24,100 people in low- and middle-income countries
19 die every year from complications from unsafe abor-
20 tion.

21 (6) Ninety-seven percent of unsafe abortions
22 occur in developing countries in Africa, Asia, and
23 Latin America. In low- and middle-income countries,
24 the annual cost of post-abortion care for all who
25 need it would be \$4 billion. The majority of this cost

1 is attributed to treating complications from abor-
2 tions provided in unsafe conditions.

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

7 (8) As part of their commitment to prevent un-
8 safe abortions and preventable deaths and ensure all
9 people have access to comprehensive sexual and re-
10 productive health care and can exercise their right to
11 full control over their sexuality and reproduction, de-
12 veloping countries and donor governments must
13 work collaboratively to deploy funding, align policies,
14 and mobilize expertise to make safe abortion services
15 available to those seeking to terminate pregnancies.

16 (9) United States law restricting United States
17 foreign assistance funding from being used to pro-
18 vide safe abortion services has the effect of harming
19 people who seek to terminate their pregnancies in
20 several ways, including by blocking access to services
21 and erecting barriers to providers obtaining the
22 training and equipment needed to deliver care to
23 those in need.

24 (10) Since section 104(f)(1) of the Foreign As-
25 sistance Act of 1961 (22 U.S.C. 2151b(f)(1)) (com-

1 monly referred to as the “Helms amendment”) was
2 enacted in 1973, dozens of governments across the
3 globe have liberalized abortion laws and policies.

4 (11) In countries where the United States sup-
5 ports family planning and reproductive health care
6 and in which abortion is legal on at least some
7 grounds, support for safe abortion could avert over
8 19 million unsafe abortions and 17,000 maternal
9 deaths each year.

10 (12) When abortions are performed in accord-
11 ance with the World Health Organization (WHO)
12 guideline and standards, it is a simple and safe pro-
13 cedure. The most recent WHO abortion guidelines
14 recommend the full decriminalization of abortion
15 and removal of grounds-based restrictions on abor-
16 tion.

17 (13) The *Dobbs v. Jackson Women’s Health*
18 Organization decision goes against the global trend
19 toward expanding access to sexual and reproductive
20 health and rights, including abortion, and negatively
21 impacts abortion access across the United States
22 and globally. The decision has emboldened anti-
23 rights actors, increased abortion stigma, and created
24 new challenges for countries that have relied on the

1 Roe v. Wade decision in the liberalization of their
2 own laws.

3 **SEC. 3. STATEMENT OF POLICY.**

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

6 (1) Safe abortion is a critical component of
7 comprehensive maternal and reproductive health
8 care and should be included as part of foreign assist-
9 ance programs funded by the United States Govern-
10 ment.

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

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

19 **SEC. 4. USE OF FUNDS FOR COMPREHENSIVE REPRODUC-**
20 **TIVE HEALTH CARE SERVICES.**

21 Section 104 of the Foreign Assistance Act of 1961
22 (22 U.S.C. 2151b) is amended—

23 (1) in subsection (f)—

24 (A) by striking paragraph (1); and

1 (B) by redesignating paragraphs (2) and
2 (3) as paragraphs (1) and (2), respectively;
3 (2) by redesignating subsection (g) as sub-
4 section (h); and
5 (3) by inserting after subsection (f), as amend-
6 ed, the following:

7 “(g) USE OF FUNDS FOR COMPREHENSIVE REPRO-
8 DUCTIVE HEALTH CARE SERVICES.—Notwithstanding
9 any other provision of law, funds made available to carry
10 out this part may be used to provide comprehensive repro-
11 ductive health care services, including abortion services,
12 training, and equipment.”.

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