I. **Introduction**

1. This submission sets out concerns over US policies that restrict foreign aid for abortion services, which we urge the Committee against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (“Committee”) consider in its preparation of the list of issues to be examined during review of the United States’ (“US”) periodic report for the 59th Session. These policies systematically deny access to abortion services to girls and women around the world, including war rape victims, resulting in severe physical and mental pain and suffering in contravention of US obligations under the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (“CAT” or “Convention”).

2. The Global Justice Center (“GJC”) is an international human rights organization with consultative status to the United Nations that works to achieve sustainable justice, peace and security by building a global rule of law based on gender equality and universally enforced international human rights laws.

II. **Background Information and Analytic Framework**

*US Abortion Restrictions on Foreign Assistance*

3. The United States Government (“USG”) is the single largest donor to humanitarian aid programs, as well as international family planning and reproductive health programs globally. However, despite this laudable support, these funds come with restrictions that result in serious physical and mental harm to women and girls around the world in contravention of the USG’s obligations under CAT.

4. These restrictions arise from the overly narrow administrative interpretation and implementation of congressionally-imposed restrictions on foreign aid, in particular the Helms Amendment to the Foreign Assistance Act of 1961, which provides that “[n]one of the funds made available to carry this part [Part 1 of the Foreign Assistance Act] may be used to pay for the performance of abortions as a method of family planning or to motivate or coerce any person to practice abortions.”

    The phrase “abortion as a method of family planning” is traditionally interpreted to allow, at a minimum, funding for abortions in cases of rape, incest or life endangerment. While these restrictions are congressionally imposed, their implementation is left to US agencies administering foreign aid, primarily the United States Agency for International Development (“USAID”) and the State Department. The agencies currently interpret these regulations as a complete ban on the provision of abortion services with US aid, which is not limited to situations where “abortion is used as a method of family planning” and includes no exceptions, including those for rape and life endangerment.
5. US funding restrictions not only prevent other countries receiving US aid from administering abortions for rape victims, but also curtail abortion-related speech and medical information for these victims. Specifically, the term “motivate,” as used in the Helms Amendment, is interpreted by the USG to prohibit virtually all public discussion of abortion and applies to “information, education, training, or communication programs” about abortion. The Siljander Amendment prohibits the use of foreign assistance funding to lobby for or against abortion. These restrictions on abortion-related speech prevent the beneficiaries of US aid, including war rape victims, from being fully informed of their reproductive health options and have curtailed abortion-related reforms around the world.

6. Taken together, these restrictions amount to a complete ban on abortion-related services and information and apply to the entirety of US foreign assistance, including funds designated to support victims of torture. This also includes humanitarian aid for war rape survivors in places like Iraq, Syria, Nigeria and Burma, where many war rape victims rely on humanitarian aid to provide them with health care that is otherwise unavailable or difficult to access.

**Denial of Abortion Services to Women and Girls Raped in War**

7. While these restrictions are imposed on all US foreign aid funds, this submission considers the impact of these restrictions on women and girls raped in war through US humanitarian aid. The US, through funding constraints including contract provisions and bi-lateral agreements, restricts the provision of abortion services with its foreign assistance. As a consequence, no projects or organizations are funded that support abortion, resulting in the systematic denial of abortion services in the vast majority of humanitarian medical settings.

8. In today’s conflicts, sexual violence is systematically used against civilians to demoralize, terrorize, destroy, and even alter the ethnic compositions of entire communities. It has been found that the majority, in some cases over 80%, of victims of sexual violence in conflict are children, some as young as 3. Stark examples include Rwanda, where nearly 250,000-500,000 women were raped in one hundred days as a part of the genocide in 1994, and an estimated 20,000 “enfants mauvais souvenirs” (children of bad memories) were born from these rapes. In Bosnia, women were held in rape camps, repeatedly raped until they became pregnant, and purposely confined until it was too late for them to obtain an abortion. Boko Haram has raped hundreds of women and girls, arguably with the intention of impregnating them in order to create a new generation of Islamic militants in Nigeria. During one rescue of victims kidnapped by Boko Haram, at least 214 women and girls were found to be pregnant. These are few instances among countless more ongoing examples that prove rape and forced impregnation during armed conflict is a pervasive and ubiquitous problem.

9. For many women, abortion is a safer option than an unwanted or dangerous pregnancy and the denial of safe abortion services to victims of war rape results in extended and intensified physical and mental suffering.

10. Unwanted pregnancies from rape and the conditions imposed by war—namely malnutrition, anemia, malaria, exposure, stress, infection, disease—increase the risk of maternal mortality. Rape in conflict, especially when committed against children or by gang rape, causes many physical injuries that render pregnancy and childbirth even more
dangerous, such as a ruptured uterus or traumatic fistulas.” Even outside of conflict, where women and girls face increased maternal mortality due to many factors, childbirth is 14 times more likely to lead to death than a safe abortion.

11. Furthermore, war rape victims’ inability to obtain an abortion can also result in severe mental pain and suffering. Pregnancy and being forced to bear the child of a rapist have been found to “prolong the perpetrator’s intrusion, often causing great anguish and shame to the victim.” In addition, where women are denied access to safe abortion services and must instead seek out clandestine or unsafe services, they suffer from additional mental anguish and fear related to the dangers they face due to the “pain of unsafe treatment with uncertain outcomes, no proper aftercare and the possibility of being imprisoned if found out.” Finally, the denial of abortion services deprives women of their decision-making power and can perpetuate a torture victim’s feelings of loss of control, compounding their mental and emotional trauma. Impregnated war rape victims are up to six times more likely to be divorced than those who were not raped and often experience community rejection and physical violence.

12. The USG’s imposition of abortion restrictions on medical care for women and girls raped in war is the subject of increased global concern. In 2016, the European Union passed a budget specifying that their humanitarian aid could not be subject to restrictions from other donor states, due to concerns about the impact of US abortion restrictions on Member State aid. Over the past 5 years, several countries and international bodies have expressed their concerns and recommended that the US change this policy. Despite these efforts alongside a growing global consensus on the imperative to provide safe abortion services to women and girls raped in war, the US anti-abortion policy remains the de facto medical protocol for victims of war rape worldwide. This systematic denial of abortion services to girls and women world-wide, as well as censorship of abortion-related speech, renders the US noncompliant with its obligations under CAT.

III. The Denial of Abortion Services Violates CAT and Prohibitions on Torture, Cruel and Inhuman Treatment

13. This Committee has found that rape and sexual violence constitute forms of torture, and has repeatedly found that access to abortion, at least in certain circumstances, implicates the rights guaranteed by the Convention, including Articles 1, 2, 14 and 16. This Committee has also found that impediments to abortion access, in particular for rape victims, lead to “grave consequences, including unnecessary deaths of women” and that “the situation entails constant exposure to the violation committed against her and causes serious traumatic and stress and a risk of long-lasting psychological problems.” Finally, this Committee has also affirmed that the denial of abortions may amount to torture where there is a blanket ban.

14. As a result, this Committee has found that States parties need to take steps to “prevent acts that put women’s physical and mental health at grave risk and that constitute cruel and inhuman treatment.” This includes an obligation to ensure access to safe abortion services for rape victims, as well as in cases of life and health endangerment, incest and foetal impairment.

15. Furthermore, the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment has found that “highly restrictive abortion laws that prohibit abortions even in cases of incest, rape or foetal impairment or to safeguard the health of
the woman violate women’s rights to be free from torture and ill-treatment.”\textsuperscript{38} The Rapporteur also found that “[s]tates have an affirmative obligation to reform restrictive abortion legislation that perpetuates torture and ill-treatment by denying women safe access and care.”\textsuperscript{39}

IV. The USG Needs to Interpret US Abortion Restrictions, including the Helms Amendment, to be in Compliance with CAT

16. As discussed above, the USG’s current implementation of abortion restrictions on foreign assistance serve to deny abortion services for women and girls around the world, even where permissible under domestic or international law, prolonging their physical and mental trauma and impeding the realization of their rights under CAT. This includes, for example, women raped in war who become pregnant, or women seeking terminations as a result of foetal impairment due to the Zika virus.\textsuperscript{40}

17. A critical first step towards the implementation of the USG’s obligations to prevent torture, cruel and inhuman treatment is interpreting its domestic regulations, including abortion restrictions on foreign assistance, to be in full compliance with CAT. This also requires steps by the USG to ensure that a comprehensive definition of torture and cruel and inhuman treatment in line with the Committee’s recommendations,\textsuperscript{41} which incorporates sexual and reproductive rights in line with CAT, is implemented.

18. This Committee has previously questioned states parties with respect to the imposition of their views on abortion on others.\textsuperscript{42} The USG, through its abortion-related restrictions on services and speech, directly imposes its judgement and views on abortion on women and girls around the world, as well as foreign governments, doctors and aid providers. At its worst, these restrictions take away a woman’s decision making capability on what happens to her own person, and instead substitutes the will of the US government.

19. Furthermore, this Committee has expressed concern over agreements which may hinder the realization of rights under the Convention and recommended that States parties review such agreements, including bilateral agreements with other States.\textsuperscript{43} In the present case, US abortion restrictions on foreign assistance are implemented through agreements with foreign governments, including States parties to CAT, NGOs and international organizations, including the United Nations.\textsuperscript{44}

20. The USG also needs to take steps to ensure that the implementation of these restrictions do not impede other States parties from performing their obligations under CAT, which contravenes the object and purpose of the Convention. For example, this Committee has recommended to Kenya that it take action to ensure that abortion is available in cases of rape and incest,\textsuperscript{45} and more recently, asked for further information about measures that Kenya has taken to ensure that victims of rape and incest have access to abortion services.\textsuperscript{46} Evidence indicates that the application of US abortion restrictions is at least, in part, directly responsible for the continued inaccessibility of abortion services in Kenya and contributed to the withdrawal of guidelines and national standards on abortion by the Kenyan Government.\textsuperscript{47}

21. The USG needs to take immediate steps to rectify overly narrow interpretations of these restrictions, including by: ensuring that exceptions are available at a minimum in cases of rape, incest and life endangerment; reviewing all agreements to ensure that they permit
the provision of abortion-related services and information in line with CAT; and provide grantees with clear guidance on the proper implementation of these restrictions.

V. Conclusion

In light of the breadth of these violations and the findings of this Committee, the USG’s abortion restrictions on foreign assistance plainly contravene the object and purpose of the Convention, rendering the US out of compliance with its obligations. Additionally, US abortion restrictions, which apply to abortion-related speech, as well as services, also interfere with the ability of other State parties to comply with their obligations under CAT. As the information above demonstrates the US’s foreign aid policy not only makes the struggle against torture less effective, but actively contributes to the suffering of rape victims and perpetuates ill-treatment. Accordingly, we urge the Committee request that the USG provide further information with respect to the implementation and impact of its abortion restrictions on foreign assistance, including on rape victims in conflict.

VI. Recommendations

In light of the above facts, we recommend that the Committee request that the US:

- Please provide detailed information regarding the interpretation of US abortion restrictions and steps the USG is taking to guarantee that their aid can be used to provide abortion services, at a minimum, in cases of rape, life endangerment and incest, including humanitarian aid for girls and women raped during armed conflict.
- Please provide an outline of the steps being taken to ensure that US abortion restrictions do not impede the ability of other States parties to CAT from complying with their own obligations under the Convention to ensure access to abortion services.
- Please describe steps the USG will take to create clear guidelines regarding USG abortion restrictions so that organizations and foreign governments know that they can provide information about abortion as well as abortion services to women and girls without jeopardizing their US funding.

2 For example, the guidance issued by the Bush Administration in restoring the Mexico City Policy defined “as a method of family planning” as follows: “Abortion is a method of family planning when it is for the purpose of spacing births. This includes, but is not limited to, abortions performed for the physical or mental health of the mother, but does not include abortions performed if the life of the mother would be endangered if the fetus were carried to term or abortions performed following rape or incest (since abortion under these circumstances is not a family planning act).” United States, Memorandum on Restoration of the Mexico City Policy, 66 Fed. Reg. 17303, 17306 (29 Mar. 2001).


9 Save the Children, Unspeakable Crimes Against Children: Sexual Violence in Conflict (2013), at v, http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ac-432e-9bd0-d91d2eba74a%7D/UNSPEAKABLE_CRIMES_AGAINST_CHILDREN.PDF.

10 Jeffrey Gettleman, Rape Epidemic Raises Trauma of Congo War, NEW YORK TIMES (7 Oct. 2007).


12 Foundation Rwanda, About Us, (http://www.foundationrwanda.org/aboutus.aspx); Sue Montgomery, Rwanda: Families Born of Rape, MONTREAL GAZETTE (April 1, 2014).


14 Adam Nosstiger, Boko Haram Militants Raped Hundreds of Female Captives in Nigeria, NEW YORK TIMES (18 May 2015).


21 Jill Trenchelor, Women Survivors, Lost Children and Traumatized Masculinities: The Phenomena of Rape and War in Eastern Democratic Republic of Congo, DIGITAL COMPREHENSIVE SUMMARIES OF UPPSALA DISSERTATIONS FROM THE FACULTY OF MEDICINE 920 (2013), at 49. See also Id. at 43 (“Many women told of how they were repulsed by their child born of rape, seen as representative of the perpetrator and the trauma endured.”).


23 Id. at 23. See also Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, (Juan E. Méndez), ¶ 31, U.N. Doc. A/HRC/22/53 (1 Feb. 2013).


34 Id. at ¶43.

35 Jasmine Garsd, Should the U.S. Reconsider Its Stand on Foreign Aid for Abortion Clinics, NPR (2 May 2016).


