

# COUNTRY IN FOCUS: ROMANIA

## IMPACT

The Global Gag Rule has contributed to an artificial separation of family planning from abortion in a country where abortion is legal and common, making it more difficult for women to obtain contraceptive information and services to prevent repeat abortions.

The Global Gag Rule causes resentment toward the United States and its development assistance policies.

The Global Gag Rule prevents Romanian nongovernmental organizations (NGOs) receiving U.S. family planning aid from combining family planning counseling with abortion services, effectively separating the two practices. Abortion is widespread among Romanian women, who have historically relied on it as a method of fertility control in the absence of accurate information and better alternatives. Repeat abortions are not uncommon. Hence, the challenge for family planning providers is to get family planning information and counseling to a woman immediately after she has an abortion. The Global Gag Rule renders this virtually impossible. Romanian NGOs receiving U.S. assistance are unable to link in any way with abortion services. These NGOs are trying to advance family planning and gradually persuade a younger generation of Romanian women and physicians to use modern contraception. Their success will be limited, however, until and unless they are able to reach women post-abortion.

## ROMANIA - A COUNTRY SNAPSHOT

Romania is among the least affluent countries in Europe with a per capita GDP of U.S. \$1,695 and annual health care spending of \$71 per person. Life expectancy at birth is relatively low compared with its Western European neighbors, at 68 years for men and 75 for women. These low numbers reflect a relatively high infant mortality rate and a weak health care system.

**Reproductive Health:** In 1989, Romania emerged from an era where access to abortion and contraception was heavily restricted. Nonetheless, the incidence of illegal, unsafe abortion was staggering. Maternal mortality rates were equally high as a result. Abortion was legalized in 1989 along with contraception; however, abortion continues to be the primary method of fertility control for most women. Women in Romania have on average 2.2 abortions during their reproductive years, but only 1.3 children. Although contraceptive use has doubled in the past ten years, only 30 percent of couples use a modern method, with condoms being the most popular.

**Financial Incentives:** Current abortion techniques in Romania are outdated and consequently less safe. Abortion, however, is perceived there as having a cleansing effect, whereas mistrust of hormonal methods of contraception is widespread (they are typically viewed as causing weight gain and cancer). In addition, abortion costs less for women than contraception; and, although abortion is a relatively brief procedure, hospitals can bill the social insurance for an entire day of hospitalization. Abortion services help to fund a very weak health care system.



ACCESS  
DENIED

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# U.S. ASSISTANCE

Romania has a new reproductive health program funded jointly by the U.S. Agency for International Development (USAID) and the U.N. Population Fund (UNFPA) that focuses on three elements:

- 1) altering medical norms to allow general practitioners to dispense family planning methods after short training;
- 2) a large supply of free or no-cost family planning methods; and
- 3) a public education campaign to increase demand for family planning methods.

The goal of this USAID program is to increase Romanian couples' trust and use of modern contraception and help women avoid abortion. USAID successfully encouraged the Romanian government to place contraceptives on the list of subsidized drugs so they are now covered by the social insurance, giving contraception greater financial appeal.

USAID's primary local partner is the Societatea de Educatie Contraceptiva si Sexuala (SECS), an affiliate of International Planned Parenthood Federation (IPPF). SECS agreed to the terms of the Global Gag Rule because they could not realistically continue without U.S. assistance. Due to the gag rule restrictions, however, even SECS cannot work with abortion providers to train them in post-abortion contraceptive counseling and use, nor provide them with U.S.-donated contraceptives.

## CONSEQUENCES OF THE GLOBAL GAG RULE

The effects of the Global Gag Rule prove that health care policy that puts ideology before sound public health practices has a tremendous impact on service delivery.

- **Failure to integrate family planning with abortion services**, limiting women's exposure to family planning methods in a culture where abortion rates are high.
- **Inability of NGOs to lobby for safer equipment**, training and medical procedures for abortions.
- **Export of a U.S. political argument overseas**, negatively impacting a reproductive health infrastructure that is culturally not aligned with Global Gag Rule policies.

Since reliance on abortion in Romania is the key problem, family planning services need to be linked to, not divorced from, abortion services. The effects of the Global Gag Rule prove that health care policy that puts ideology before sound public health practices has a tremendous impact on service delivery. With so many lives at stake, the United States cannot afford to alienate, disparage, or leave out any provider or group of providers that is able to deliver cost-effective and comprehensive reproductive health services, including family planning.

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The Global Gag Rule Impact Project is a collaborative research effort led by Population Action International in partnership with Ipas and Planned Parenthood Federation of America and with assistance in gathering the evidence of impact in the field from EngenderHealth and Pathfinder International.

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