Senator Boxer and distinguished members of the Senate Foreign Relations Committee, it is a great honor and privilege to speak before you this morning about the impact the Bush administration’s global gag rule is having on the women of my country, Nepal. I would like to ask to have my extended remarks entered for the record.

I am the director general of the Family Planning Association of Nepal, the FPAN, the oldest and the largest reproductive health and family planning non-governmental organization in Nepal. FPAN provides comprehensive reproductive health care services, education and counseling to the needy in clinics throughout the country. The FPAN is a member of the International Planned Parenthood Federation [IPPF] and is known for its strong commitment to the Nepal national family planning program—and for its role to protect the health and rights of women in Nepal.

For nearly 30 years the FPAN has received generous support from the U.S. Government to help provide vital reproductive health care services. We are tremendously grateful for this support. We have enjoyed a long and productive friendship and working relationship with USAID as we all work toward a common cause, to improve the health and lives of women in my country.

I am testifying before you today because the FPAN has recently made the difficult and painful decision to refuse USAID family planning funds because of the global gag rule restrictions. This was by no means an easy decision. It will lead to the loss of almost $250,000 in U.S. funds and it will have a major impact on our ability to continue to operate reproductive health clinics in Nepal’s three most densely populated areas, Kathmandu, Chitwan, and Sunsari. This may not sound like a lot of money in U.S. terms, but in Nepal it means we will likely have to close one or all of these clinics, discontinuing critical services to thousands of needy women.

Why did we make this decision? Because, as a health care provider, the FPAN is part of a growing movement in Nepal, led by our own government and overwhelmingly supported by physicians, to begin to address the shockingly high maternal mortality rate in Nepal. Nepal has one of the highest maternal mortality rates in the world and much of it is due to unsafe abortion.

It is estimated that six women die every day in Nepal due to unsafe abortions performed by unskilled providers. Many, many more women suffer serious physical injury and chronic disability. In addition, Nepal has one of the most punitive abortion laws in the world. Women are imprisoned for having abortions and there is no exception, not even for rape, incest or life of the woman.

Government officials at the Nepalese Ministry of Health have themselves concluded that liberalizing abortion should be the first step toward preventing the existing high level of maternal mortality and morbidity in my country. The Ministry’s advocacy plan to decriminalize abortion called for the formation of a network of non-governmental organizations to address the problem.

In response, the Family Planning Association of Nepal spear-headed an advocacy effort joined by a coalition of medical professionals, health non-governmental organizations, human rights advocates, women’s groups and journalists to raise awareness and introduce legislation on this issue. The campaign favors legalizing abortion under certain conditions and improved access to safer services.

Yet, the global gag rule policy would disqualify us from participating in this public awareness campaign if we continued to receive U.S. family planning assistance. Under the conditions of the policy, we cannot engage in any advocacy effort to legalize abortion, even if it is with our non-U.S. money and at the behest of our own government.
This is the challenge: Do I listen to my own government that has asked FPAN to help save women’s lives or do I listen to the U.S. Government? Were we to accept the restricted U.S. funds, I would be prevented from speaking in my own country to my own government about a health care crisis I know firsthand, but, by rejecting U.S. funds, I put our clinics, clinics addressing that same health care crisis, in very real jeopardy.

It is an untenable situation. But, we simply could not stand by and watch countless women suffer and die without doing everything we could to prevent this misery. There is agreement in Nepal that women need access to safer abortion services and laws that don’t incarcerate women for having an abortion. We must work to make that happen.

On Tuesday I left my home to travel 36 hours to arrive in your beautiful city, and I left a very different world behind to get here. Where I come from, the per capita annual income is $220, compared to over $21,000 in the United States. Only 30 percent of women can read. They are generally married by the time they turn 18, and few will have their childbirth attended by trained health professional.

It is hard, then, to understand how U.S. lawmakers are so easily able to implement such a far-reaching and damaging policy when the differences between our countries are so vast and the realities that women in Nepal face are so unimaginable.

Perhaps the example of one young girl in my country can help illustrate the situation in Nepal and explain to you why our advocacy efforts are so important to us that we have given up our U.S. funding. Four years ago Min Min Lama was living peacefully in her home in the mountains of Nepal. Like many other teenage girls of 13 in Nepal, Min Min didn’t go to school. She stayed at home helping her stepmother with household chores.

But early in 1997 when nobody was home a relative raped her. Terrified and ashamed, Min Min tried to hide her torment from her strict Hindu family. She tried to forget the trauma, but it wasn’t long before another relative realized she was pregnant. Min Min’s relatives arranged for an illegal abortion, despite the fact that abortion is illegal in Nepal and that the illegal abortion could have killed Min Min.

She survived, but her trauma was only beginning. After the abortion her sister-in-law reported the abortion to the police and Min Min was arrested. She was taken to the central jail in Nepal’s capital, Kathmandu. Her crime? Abortion.

Min Min’s relatives were not punished for the rape or the abortion. Instead, at the age of 13 Min Min was sentenced to 20 years in jail. Her family abandoned her and the only visitors she had were charity workers, one of whom contacted FPAN. The FPAN started a campaign to help Min Min and to begin to change the laws regarding abortion. As a result, Min Min’s sentence was reduced to 12 years.

But the FPAN and others kept on fighting for her cause, telling people across the world about her plight. Finally, on 21 September 1999, Min Min was released after 2 years in prison. She is now working at FPAN and living in Kathmandu.

Min Min was one of the lucky girls in Nepal and, although her ending is happy, there are a lot of girls and women with sadder tales to tell. One in five women are currently imprisoned in Nepal for the same reason. Is there any justification for stalling even one more day? How can the FPAN, which fought so hard for Min Min, turn its back on these other women and all of the women who die or are injured daily due to unsafe abortion?

As I have stated, the decision to reject the USAID funding was a difficult one, and I fear for the future of our clinics, but, as you can see, ours was an impossible decision. Whatever we decide, the women of Nepal suffer. And we are by no means the only ones forced to make this decision. Our colleagues all over the world face this same agonizing decision.

I would like to thank the Senate Foreign Relations Committee for allowing me this opportunity to speak out on behalf of Min Min Lama, the women of Nepal, the 78,000 women who die from unsafe abortions every year, and the countless women around the world who lack access to desperately needed reproductive health care services. I urge you to do whatever you can to make sure this destructive policy does not continue to harm the women of Nepal and other women around the world. Thank you.