

Equity Forward's Transition Recommendations for a New Administration

This fact sheet lays out Equity Forward's transition recommendations for a new administration. Some of these recommendations were developed in collaboration with coalitions supporting the sexual and reproductive health, rights, and justice movements, as well as the broader human rights sphere and groups working to protect science and evidence-based policymaking. While this list is by no means exhaustive and is intentionally succinct in nature, it highlights a number Equity Forward's key areas of work that urgently need remedying after four years of the Trump Administration.

Protect Science and Evidence Over Political Ideology Across Federal Agencies

Public trust must be restored and safeguarded across federal agencies, from the Department of Health and Human Services (HHS) to the State Department and the U.S. Agency for International Development (USAID). Each federal agency must strengthen scientific integrity policies and create additional procedures to prevent political interference with advice that should be based on public health evidence. Agencies should also improve transparency and safeguards against conflicts of interest for industry-funded research.

Across Federal Agencies, Restore and Enhance Data Collection and Inclusive Policy Language to Advance Equity

To enable work that advances health equity, federal agencies should strengthen data collection to allow for analysis on multiple characteristics and identification of disparities, including by sex assigned at birth, gender identity, sexual orientation, race, ethnicity, national origin, disability status, age, income level, and geographic location. Data collection pertaining to reproductive health access must also be enhanced. Data points that were eliminated including gender inclusive language and data on birth control access and abortion must be restored to critical policies and reports across agencies, such as the State Department's <a href="https://doi.org/10.1007/journal.or

Ensure HHS' Office for Civil Rights Protects Civil Rights for All; Defund and Eliminate Its Conscience and Religious Freedom Division

Recent structural changes and rulemaking in the Office for Civil Rights (OCR) were made based on specious rationale and lacked evidence to warrant the actions taken. HHS should rescind the unwarranted rules and reallocate resources to ensure that enforcement priorities reflect the current definition of discrimination as well as evidence about the form and scope of civil rights problems. This includes rescinding harmful refusal-of-care rules; overturning the present administration's <u>regulation</u> narrowing the Affordable Care Act's Section 1557 non-discrimination clause to exclude define discrimination on the basis abortion, sex stereotyping, and gender identity; and engage in rulemaking using a broad definition of discrimination that aligns with the Supreme Court's <u>Bostock v. Clayton County decision</u>. Finally, in recognition of the lack of evidence demonstrating its necessity and in accordance with <u>federal court findings</u>, dissolve OCR's <u>Conscience and Religious Freedom Division</u>.



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Rescind the Domestic Gag Rule; Restore and Protect the Title X Family Planning Program at HHS

HHS should immediately rescind the <u>domestic gag rule</u> that prevents Title X family planning program grantees from providing <u>ethical</u>, high-quality, evidence-based care. Specifically, this rule change has prohibited providers from making abortion referrals for patients who desire them, and requires referrals for prenatal care regardless of whether patients want to continue their pregnancies. Furthermore, the <u>Title X grantmaking processes</u> should be restored to their 2016 form in which funding decisions were made by an independent review panel of experts rather than HHS Office of Population Affairs (OPA) political appointees.

Ensure National Institutes of Health (NIH) Research Funding Is Based on Merit and Continues Without Unwarranted Interruptions

To support ethical, high-priority research by NIH scientists and well-qualified grantees, NIH must be allowed to ensure an effective, transparent process of reviewing research grants in a manner that promotes scientific rigor and guards against political interference. In 2019, HHS <u>discontinued</u> the funding of future research requiring newly acquired fetal tissue, stating that "promoting the dignity of human life from conception to natural death" drove the decision. NIH senior level scientists <u>protested the restrictions and pledged to continue funding the existing fetal tissue research</u>. NIH should immediately rescind these <u>restrictions</u> on research using human fetal tissue. Protections should be implemented to avoid political appointees' interfering with expert NIH evidence-based policy and grantmaking decisions.

Ensure HHS' Office for Refugee Resettlement (ORR), Immigration and Customs Enforcement (ICE), and State Department Policies Protect Immigrants' Reproductive Health Access and Respect Bodily Autonomy; Investigate Past Abuses

The U.S. government has a long history of targeting Black and Brown peoples' bodies including through medical experimentation and forced hysterectomies. These practices have continued under the current administration, with federal agencies including HHS ORR blocking reproductive health services from migrant teenagers in their care; ICE forcefully sterilizing immigrants who oftentimes do not speak English; and the State Department putting forth xenophobic policies that task border officials with the task of adjudicating the pregnancies of people from majority non-white countries. Not only must these policies be reversed immediately in their entirety, they must be investigated and those who participated in abuse and neglect be held accountable.

Rescind the Global Gag Rule and Restore Reproductive Health Access Through USAID Grantmaking

The State Department must immediately rescind the extremist <u>Mexico City Policy</u>, or Global Gag Rule. The policy, which prohibits NGOs that receive U.S. foreign aid from performing or promoting abortion, has hindered not just access to abortion, <u>birth control</u>, and <u>other family planning services</u>, but a wide range of health care <u>including treatment for HIV/AIDS</u> in countries dependent on U.S. aid.



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Disband the State Department's Commission on Unalienable Rights

The State Department's <u>Commission on Unalienable Rights</u> has worked to nationalize, narrow, and reinterpret internationally agreed upon human rights framework. The harmful positions of this Commission, which have been espoused throughout the State Department and beyond, include prioritizing religious freedom and property rights — at the expense of LGBTQ rights and abortion access, which the Commission instead considers to be "divisive political and social controversies." This Commission must be disbanded in a new administration.