No exceptions

Documenting the abortion experiences of US Peace Corps Volunteers

Background

Since its creation in 1961 by President John F. Kennedy, more than 215,000 Americans have served in the US Peace Corps in 139 countries. Currently 63% of Peace Corps Volunteers are women, over 90% are single, and the average age at the initiation of service is 28. Volunteers typically serve in-country for two years, with the possibility of a third year extension, after a rigorous selection process and a three month pre-service training. Peace Corps Volunteers receive their health care free of charge while in service; most services are provided in-country, and when necessary Volunteers also receive health care services through regional medical facilities or in Washington, DC after medical evacuation.

Since 1979 US federal appropriations bills have restricted the coverage of abortion for Peace Corps Volunteers. There are no exceptions to the coverage ban and abortion care is not covered under any circumstance. Other groups who receive health care through US federal funding streams, including Medicaid recipients, federal employees and their dependents enrolled in the Federal Employees Health Benefits program, residents of the District of Columbia, women who receive health services through Indian Health Services, and women in federal prisons, receive abortion coverage in cases when the pregnancy threatens the life of the woman or is the result of rape or incest. In December 2012, these same coverage benefits were extended to military personnel and their dependents. However, for Peace Corps Volunteers abortion services are not covered even in these narrow circumstances.

As Peace Corps Volunteers often serve in countries where abortion is legally restricted, receive stipends that are minimal, and are at risk of sexual assault, these restrictions may be especially devastating. However, no published literature currently exists that explores the opinions, perceptions, or experiences of Peace Corps Volunteers with respect to reproductive health services and abortion care. Our study aimed to address this gap.

Study objectives

- Document the reproductive health and abortion experiences of returned Peace Corps Volunteers (RPCVs);
- Explore RPCVs' current knowledge of the abortion funding restrictions as well as the information provided about the policy at time of service;
- Understand better RPCVs' opinions about the funding restrictions and efforts to expand coverage in cases of life endangerment, rape, and incest; and
- Identify ways in which reproductive health services could be improved.

Methods

All RPCVs who served in the US Peace Corps between 1979 and 2013 (inclusive) were eligible to participate in our study during the summer of 2013. We recruited participants though social media, listservs, and a study website and conducted interviews by telephone and via Skype. We audio-recorded interviews with participant consent; each participant received a \$20 gift certificate to Amazon.com. Our interviews averaged 60 minutes in length and covered a range of issues including the participant's background and Peace Corps service, experiences (if any) with abortion, sexual violence, and other reproductive health issues, and knowledge of and opinions about the federal funding restrictions on abortion coverage. We analyzed interviews for content and themes and received ethics approval to conduct the study from the Health Sciences and Sciences Research Ethics Board at the University of Ottawa.

Findings

Participant characteristics

During the two-month study period we conducted in-depth, open-ended interviews with **433 RPCVs**. Eighty-three percent of participants identified as women (n= 362) and the majority were in their 20s and unmarried when they served. Participants originated from 47 US states and Washington, DC and entered the Peace Corps throughout the eligibility period. Our participants served in 83 different countries, reflective of all regions in which the Peace Corps operates.

Reported abortion & sexual violence experiences

Of the 362 women who participated in our study, 18 (5.0%) reported a personal abortion experience while in service. Twenty-seven of our 433 participants (6.2%) reported on at least one abortion experience of someone else. Thirty-two women (8.8%) reported at least one personal experience of rape or sexual assault. Moreover, 140 participants (32.3%) reported on the rape or sexual assault experience of someone else. Although there were cases in which several participants talked about the same event, over the course of the study we heard about at least 43 different abortion experiences and 125 different sexual assault and rape experiences.

The process by which women obtain an abortion when in service has changed over the last 35 years. Currently, if a Volunteer becomes pregnant while in the Peace Corps she is medically evacuated to the US before the end of her first trimester. If the Volunteer chooses to continue her pregnancy, she ends her service and returns to her home of record, and her pre-natal and delivery care will be covered. However, if the Volunteer wants to have an abortion, she is medically evacuated to Washington, DC to speak with a counselor about her options. If she chooses to terminate the pregnancy, she is required to pay for the procedure herself and remains in DC for about a month, after which she can resume her service.

The majority of our study participants who had abortions learned about the policy only after they became pregnant. Women reported that it was difficult to cover the cost of the abortion given their small stipends; this was particularly challenging for women who did not want to disclose the abortion to family members or did not have a partner who could afford to pay for the abortion. Although women who were able to return to service after an abortion generally expressed relief at being able to do so, the length away concerned some of our participants, both with respect to their projects and confidentiality. Finally, lack of social support also emerged as a major theme, as most of the women with whom we spoke went through the abortion process alone. These overarching dynamics shaped some women's decisions to obtain abortion care in-country, outside of the Peace Corps. These abortions ranged from legal and safe to illegal and decidedly unsafe.

The abortion experiences of rape survivors: Policy as punishment

Of the 18 women who described their own personal abortion experiences, three women became pregnant as a result of rape or sexual violence. Survivors of sexual violence who participated in our study repeatedly described the ban on covering abortion care in cases of rape as unfair, punitive, and reflective of a broader culture of victim-blaming. Moreover, the requirement that a rape survivor pay out-of-pocket for her abortion raised issues regarding disclosure, with respect to both the abortion itself and the event that precipitated the need.

RPCVs' opinions regarding the current restrictions on abortion coverage & efforts to lift the "no exceptions" ban

Over 97% of our participants (n=421) disagreed or strongly disagreed with the current policy. Further, there was near
universal support among our participants for expanding abortion coverage in cases that involve life endangerment, rape,
or incest. Nearly 98% of participants expressed support or strong support for the passage of the Peace Corps Equity Act,
a bill that would reconcile abortion coverage for Volunteers with all other groups receiving health care through federal
schemes, including employees of the Peace Corps. However, the majority of our participants stated this is only a first step
and expressed strong support for policies that would treat abortion as any other health service and be covered
accordingly.

Discussion & recommendations

The Peace Corps is a storied institution that has shaped the lives and perspectives of generations of Americans. RPCVs who participated in our study overwhelming described their experience in the Peace Corps as transformative, positive, and inspiring. Yet for 35 years, the "no exceptions" policy has required women serving in the US Peace Corps to pay out-of-pocket for abortion care, even in cases of life endangerment, rape, and incest. In addition to making a significant difference in the lives of women who would be eligible for funded care, extending federal funding for abortion in these narrow circumstances sends an important message about the value of those who incur risks and make sacrifices to join the Peace Corps and represent the US abroad. Our findings highlight several priorities for policy reform:

- Lift the "no exceptions" policy on abortion coverage for Peace Corps Volunteers. Whether through the appropriations process or other legislative efforts, the time has come to lift the funding ban on abortion coverage for Peace Corps Volunteers.
- Better inform Volunteers about the policy in advance of need and further explore ways in which to fortify Peace Corps policies that streamline abortion care for those who are medically evacuated to the US.
- Identify ways in which to link Peace Corps Volunteers who are unable to pay for an abortion with available abortion funds, and consider mechanisms to increase access to safer abortion care for women while serving in-country.
- Ensure that Peace Corps Volunteers have access to a full range of contraceptive methods, including long-acting reversible contraceptives such as the intra-uterine device, and emergency contraception.

Acknowledgements

This project was funded by a grant from the HRA Pharma Company's Foundation as well as general research and infrastructural grants that provide support for the efforts of members of the study team. The conclusions and opinions expressed in this publication are those of the individual researchers and do not necessarily represent the views of the funder or the investigators' institutions. For more information about this study or to obtain a copy of the full report, please contact Dr. Angel Foster: angel.foster@uottawa.ca.





