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The United Nations Population Fund (UNFPA): Background and U.S. Funding

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The United Nations Population Fund (UNFPA): Background and U.S. Funding

Background

Established in 1969, the United Nations Population Fund (UNFPA) is the primary U.N. entity addressing population issues. Its overall goal is to ensure reproductive rights for all, including access to sexual and reproductive health services such as voluntary family planning. Headquartered in New York City, UNFPA operates in over 150 countries and supports more than 3,000 staff. It is funded by voluntary contributions from governments and other donors, with expenses totaling \$1.29 billion in 2020.

U.S. Policy and Funding

The United States played a key role in the creation of UNFPA and was initially one of its largest financial donors. In the mid-1980s, President Reagan and some Members of Congress became concerned that UNFPA's country program in the People's Republic of China (PRC) engaged in or provided funding for abortion or coercive family planning programs. In response, Congress enacted what became known as the "Kemp-Kasten" amendment as part of the FY1985 Supplemental Appropriations Act. The measure stated that no funds "may be made available to any organization or program which, as determined by the President, supports or participates in the management of a program of coercive abortion or involuntary sterilization." The amendment has continued to be included in annual appropriations laws, at times resulting in the withholding of U.S. funding from UNFPA. Since the mid-1990s, Congress has also required that no U.S. funding to UNFPA may be used for abortions or for UNFPA's country program in the PRC. Executive branch determinations under Kemp-Kasten have generally fallen along party lines, with Republicans opposing funding and Democrats supporting it. In 2017, President Trump found UNFPA ineligible for U.S. funding, reversing President Obama's 2009 decision to fund the organization. In January 2021, President Biden restored funding to UNFPA. For both FY2021 and FY2022, Congress appropriated \$32.5 million to the organization (for a total of \$65 million over two years). President Biden's FY2023 request includes \$56 for the organization. (The Biden Administration also provided additional FY2021 funding for specific UNFPA humanitarian and health-related activities.)

Congressional Debates and Issues

Congressional perspectives on UNFPA are mixed. Critics of the organization generally focus on its activities in China, maintaining that the United States should not fund an organization that supports, either directly or indirectly, what they view as the PRC government's restrictive and coercive family planning policies. They suggest that even if UNFPA does not knowingly participate in such activities, its collaboration with PRC entities that implement China's family planning policies violates Kemp-Kasten. Supporters maintain that UNFPA does not engage in coercive family planning activities anywhere (which they note has been confirmed by multiple investigations, including one by the George W. Bush Administration) and addresses demand for voluntary family planning services that many view as essential for economic development and improving the overall well-being of women. When assessing these and other related issues, Members of the 117th Congress may consider the following:

- the **timing and justification of Administration Kemp-Kasten determinations**, specifically whether executive branch determinations are delayed and/or lack sufficient justification;
- possible **impacts of U.S. withholdings on U.N. operations**, including to what extent, if any, U.S. funding cuts may affect the status and/or effectiveness of UNFPA operations; and
- the merits of **bilateral versus multilateral population assistance**, with some arguing that multilateral organizations such as UNFPA allow the United States to share costs with other donors, while others contend that bilateral activities may be better aligned with U.S. priorities.

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Introduction

The U.N. Population Fund (UNFPA) is the world’s largest provider of sexual and reproductive health programs and the principal U.N. entity addressing global population issues.¹ In 2020, the organization provided services in over 150 countries and territories, with expenses totaling \$1.29 billion, drawn from voluntary contributions from over 170 entities, including governments, organizations, and individuals.²

Members of Congress have long debated to what extent, if any, the United States should fund UNFPA. Since the mid-1980s, some lawmakers have been concerned that UNFPA’s country program in the People’s Republic of China (PRC) has engaged in or provided funding for abortion or coercive family planning programs. To address these concerns, Congress enacted the “Kemp-Kasten” amendment in annual Department of State, Foreign Operations, and Related Programs (SFOPS) appropriations laws beginning in FY1985. The amendment states that no funds may be made available to any organization or program that, as determined by the President, supports or participates in the management of a program of coercive abortion or involuntary sterilization. Since the mid-1990s, Congress has also required that no U.S. funding to UNFPA may be used for abortions or its program in the PRC.

Administration determinations over whether to fund UNFPA pursuant to the Kemp-Kasten amendment have generally fallen along party lines, with Republicans opposing UNFPA funding and Democrats supporting it. During the past decade, the Obama Administration funded UNFPA, while President Trump declared UNFPA ineligible. President Biden announced in January 2021 that he would restore funding to the organization. Congress appropriated \$32.5 million to UNFPA for FY2021 and \$32.5 million for FY2022, subject to legislative funding restrictions regarding abortion and UNFPA’s China program. For FY2023, President Biden requested \$56 million for UNFPA.

This report provides an overview of UNFPA activities and U.S. funding debates. It does not aim to assess the role or status of family planning and reproductive health activities at the global level or in China. For more information on U.S. international family planning efforts and restrictions, see the following CRS reports:

- CRS Report R46215, *U.S. Bilateral International Family Planning and Reproductive Health Programs: Background and Selected Issues*, by Sara M. Tharakan.
- CRS Report R41360, *Abortion and Family Planning-Related Provisions in U.S. Foreign Assistance Law and Policy*, by Luisa Blanchfield.

For a brief overview of China’s family planning policies, see **Appendix A**.

¹ The U.N. system is made up of interconnected components that include specialized agencies, funds and programs, peacekeeping operations, and the U.N. organization itself. UNFPA, originally called the “U.N. Fund for Population Activities,” is included in the U.N. “funds and programs” group, along with entities such as the U.N. Development Program (UNDP) and U.N. Children’s Fund (UNICEF). For more information, see CRS Report R45206, *U.S. Funding to the United Nations System: Overview and Selected Policy Issues*, by Luisa Blanchfield.

² UNFPA, “Delivering in a Pandemic: Annual Report, 2020.”

UNFPA Overview³

UNFPA is the primary U.N. entity that addresses sexual and reproductive health issues. Since its establishment in 1969, the organization transitioned from focusing mainly on statistical collection and population analysis to providing maternal health and family planning assistance, communication and education, and policy assistance. UNFPA’s work is guided by the International Conference on Population and Development (ICPD) Program of Action, which was agreed to by 179 governments, including the United States, in 1994 in Cairo, Egypt. The ICPD represents a notable departure from previous international approaches to population assistance, which often focused on achieving demographic goals and targets. Specifically, the Program of Action recognizes reproductive health and rights, as well as women’s empowerment and gender equality, as “cornerstones” of global population and development programs. It also emphasizes that individuals and couples are at the heart of development and have the “basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so.” The Program of Action further notes that “in no case should abortion be promoted as a method of family planning.”⁴ (See the **text box** below for more information.)

UNFPA Policy on Abortion

UNFPA states that it does not perform, promote, or fund abortion.⁵ Its policy on abortion centers on two goals, approved by the UNFPA Executive Board: (1) “prevent[ing] recourse to abortion by promoting universal access to voluntary family planning” and (2) “dealing with the consequences of unsafe abortions to save women’s lives.”⁶ UNFPA asserts that it does not promote changes to the legal status of abortion, which are “decision-making processes that are the sovereign preserve of countries.”⁷ Where abortion is legal, it maintains that national health systems should make abortion safe and accessible. Where abortion is illegal, it supports women’s rights to postabortion care and advises on the treatment of postabortion complications, counseling, and family planning.

Operations and Governance

UNFPA is headquartered in New York City and supports six regional offices, two subregional offices, and over 100 country offices worldwide. It has more than 3,000 staff and operates in over 150 countries and territories. UNFPA’s programs and activities focus on achieving three broad goals by 2030:

- **addressing unmet need for family planning** by promoting universal access to quality, integrated sexual and reproductive health services (including contraceptive distribution, maternal health services, and sexual and reproductive health education);

³ Parts of this section were written by Edward J. Collins Chase, Analyst in Foreign Policy.

⁴ Drawn from the ICPD Program of Action, adopted at the ICPD, Cairo, September 5-13, 1994.

⁵ See UNFPA, “Statement on the United States Decision to Again Withhold Funding from UNFPA,” July 15, 2019. Additionally, in 1984, the UNDP Governing Council (now the Executive Board) affirmed “that it is the policy of the Fund [UNFPA] ... not to provide assistance for abortions, abortion services or abortion-related equipment and supplies as a method of family planning” (UNDP Governing Council Decision 85/19, part I, June 1985).

⁶ UNFPA also opposes “any coercive abortion and the discriminatory practice of prenatal sex selection” (UNFPA, “Does UNFPA Support Abortion?” at <https://www.unfpa.org/frequently-asked-questions#acronym>).

⁷ Ibid.

- **preventing maternal death** by strengthening health systems, training health workers, and improving access to reproductive health; and
- **reducing gender-based violence** by working with policymakers, justice systems, health and humanitarian partners, and men and boys.⁸

UNFPA is a subsidiary organ of the U.N. General Assembly and receives policy guidance from both the U.N. General Assembly and the U.N. Economic and Social Council (ECOSOC).⁹ It is governed by a 36-member Executive Board, which addresses administrative, financial, and program-related issues. Board members are elected by ECOSOC based on geographic representation; the United States serves as an Executive Board member.¹⁰ UNFPA is also guided by an Executive Director, currently Dr. Natalia Kanem, who is appointed for a four-year term by the U.N. Secretary-General, in consultation with the Executive Board.

UNFPA participates in the U.N. system through a range of interagency and intergovernmental processes. It contributes to General Assembly and ECOSOC debates and is a member of the U.N. Chief Executives Board (the key coordinating mechanisms for the heads of U.N. agencies). It also participates in overarching U.N. initiatives on gender-based violence, implementation of the Sustainable Development Goals, and Coronavirus Disease 2019 (COVID-19), among others. At the field level, it works closely with other U.N. entities as part of U.N. Country Teams.¹¹

Funding and Programs

UNFPA is funded by voluntary contributions from governments, intergovernmental organizations, the private sector, foundations, and individuals. Donors generally provide two types of funding:

- **core funding** is unrestricted in its use and is generally used to fund key UNFPA activities and programs;
- **noncore** (or “extrabudgetary”) funding is earmarked or restricted to specific activities and purposes, such as UNFPA thematic funds or country or issue-specific programs.¹²

Over the decades, noncore funding has increasingly represented the bulk of UNFPA’s overall budget and expenditures. UNFPA maintains that core contributions reduce transaction costs, provide financial stability, and allow the organization focus on programs that support its core

⁸ U.N. document, *DP/FPA/2017/9, UNFPA Strategic Plan, 2018-2021, July 14, 2017, p. 5.

⁹ The 193-member U.N. General Assembly is the plenary body of the United Nations. ECOSOC is the primary U.N. body for addressing and coordinating economic and social issues; it is composed of 54 U.N. member states elected by the General Assembly. The United States currently serves as a member of ECOSOC.

¹⁰ The Executive Board, which also governs UNDP and the U.N. Office of Project Services, generally meets for two regular sessions and one annual session per year. It was established by General Assembly resolution 48/162 in 1993. Geographic representation includes 8 member states from Africa, 7 from Asia and the Pacific, 4 from Eastern Europe, 5 from Latin America and the Caribbean, and 12 from Western Europe and other countries. Members generally serve three-year terms on a rotating basis, with the exception of the Western European and other States group, which determined its own internal rotation policy. The Executive Board replaced the Governing Council, which was the main governing body for UNFPA from 1973-1993.

¹¹ U.N. Country Teams include all U.N. entities working at the country level on development, humanitarian, and other programs. UNFPA works closely with UNICEF, UNDP, and the World Health Organization.

¹² Examples of thematic funds include UNFPA Supplies, the Maternal and Newborn Health Thematic Fund, the Humanitarian Action Thematic Fund, and the Population Data Thematic Fund.

mission. At the same time, many donors prefer to provide noncore funding to ensure their contributions focus on their policy priorities.¹³

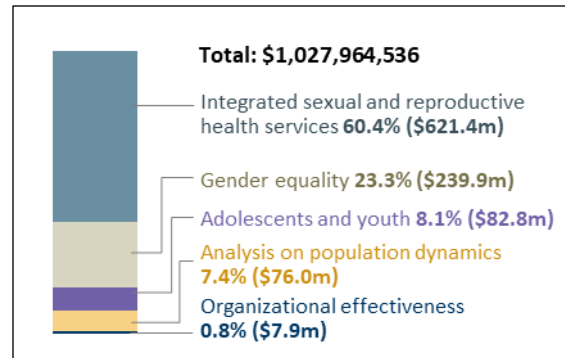
In 2020 (latest available data), UNFPA’s expenses totaled \$1.28 billion. The organization’s overall revenue was \$1.32 billion, with contributions from 96 governments and other donors; of this amount, over 60% (\$811.2 million) was noncore funding. The largest core donors were Germany (\$78.8 million), Sweden (\$65.9 million), and Norway (\$55.1 million). The largest noncore donors were the United Kingdom (\$111.55 million), the Netherlands (\$52.2 million), and the European Commission (\$49.9 million).¹⁴

UNFPA programs are divided into five primary categories (see **Figure 1**).¹⁵ Similar to previous years, the majority of funds in 2020 were allocated toward programs related to integrated sexual and reproductive health services (\$621 million) and gender equality activities (\$240 million).¹⁶ Other key programs include analysis on population dynamics/evidence-based policymaking, improving the overall well-being of adolescents and youth, and enhancing organizational effectiveness.¹⁷

UNFPA supported programs in over 120 countries in 2020, allocating funding to developing regions and states experiencing conflict and humanitarian crises¹⁸ (see **Figure B-1 in Appendix B**).

In 2020, the majority of program funding was spent on global interventions and activities (20%), followed by Arab States (19.2%), East and Southern Africa (18.6%), and West and Central Africa (15.9%).¹⁹ Roughly 20% of UNFPA’s 2020 program expenses went to five countries: Yemen (\$71.7 million), Bangladesh (\$37 million), Turkey (\$33.3 million), Syria

Figure 1. UNFPA Worldwide Program Expenses, 2020



Source: Created by CRS. Data from UNFPA.

¹³ Drawn from U.N. document DP/FPA/2020/9, *United Nations Population Fund Report on the structured funding dialogue 2019-2020*, July 15, 2020.

¹⁴ A further \$271.6 million is donated to noncore resources through the United Nations and International Organization transfers. Drawn from UNFPA, “Delivering in a Pandemic: Annual Report, 2020,” p. 15.

¹⁵ UNFPA Dashboard, “Worldwide Program Expenses, 2020,” at <https://www.unfpa.org/data/transparency-portal>.

¹⁶ Examples of sexual and reproductive health services include delivery of contraceptives and reproductive health kits; HIV and other health-testing services; maternal health services (including antenatal, postnatal and emergency obstetric care); sexual transmitted disease education; and the integration of family planning into broader health services. Gender equality activities include supporting gender equality-related legislation, policy reform, and development; the collection of sex- and age-disaggregated data; and programs addressing gender-based violence and discrimination.

¹⁷ Ibid. Programs on adolescents and youth include sexual and reproductive health education service delivery (e.g., HIV prevention and treatment), youth outreach in marginalized communities, and leadership development.

¹⁸ UNFPA works with the government of each country to develop a five-year program, often referred to as a “cycle.” Each program aims to complement and/or align with broader U.N. development and humanitarian efforts.

¹⁹ UNFPA, “Delivering in a Pandemic: Annual Report, 2020,” p. 14. Global activities and interventions aim to “complement and catalyze” UNFPA’s regional and country programs. They include increasing global awareness and coordination of ICPD and SDG implementation, and addressing issues such as gender-based violence, access to population data, and improving global guidance for sexual and reproductive health needs in crises. For more information, see UNFPA, “Global Interventions Action Plan, 2018-2021,” 2018.

(\$32.9 million), and the Democratic Republic of Congo (\$28.4 million). For UNFPA’s country program in China, total expenses were \$21 million (see the **text box** below).²⁰

UNFPA Country Program in China

UNFPA has been operating in China since 1979. Initially, its activities focused on improving data collection and analysis. Following the adoption of the ICPD Program of Action in 1994 and the conclusion of UNFPA’s third China program cycle (1990-1995), UNFPA and government officials began to discuss significant changes for a fourth agreement that would more closely follow the principles set out in Cairo. This included a comprehensive approach to sexual and reproductive health, particularly quality of care and advocacy for informed choice. In subsequent program cycles, the China program began incorporating national priorities related to youth, urbanization, aging, responding to gender-based violence, and issues related to “distorted sex ratio at birth” as the result of gender-biased sex selection.²¹ UNFPA is now implementing the ninth Country Program (2021-2025), which focuses on sexual and reproductive health (35% of total funding), population dynamics (22%), adolescents and youth (21%), gender equality and women’s empowerment (17%), and program coordination (4%).²²

U.S. Policy: Background and Funding Debates

The United States played a key role in the establishment of UNFPA. From the mid-1960s onward, Congress expressed increased concern over the impact of rapid population growth on development in low-income countries. In 1967, for the first time, Congress amended the Foreign Assistance Act of 1961 to specifically authorize and direct funds for population assistance programs, urging the United States to channel family planning resources through the United Nations and other international organizations.²³ Through the late 1970s and early 1980s, the United States remained a strong supporter of UNFPA and was one of the largest donors, with contributions rising from \$14.2 million in FY1971 (about 50% of UNFPA’s total budget) to \$38.2 million in FY1984 (about 28% of the total budget).²⁴ At the same time, reflecting broader domestic debates, U.S. policymakers increasingly placed conditions on U.S. funding related to abortion and family planning activities globally, including the Helms Amendment in 1973 and the Mexico City Policy in 1984.²⁵

In the mid-1980s, U.S. policy toward UNFPA shifted. In August 1984, governments, including the United States, met in Mexico City for the 2nd U.N. International Conference on Population. At the conference, the Reagan Administration announced that no U.S. funding to UNFPA could be

²⁰ Ibid., p. 9.

²¹ UNFPA, “UNFPA China,” at <https://www.unfpa.org/data/transparency-portal/unfpa-china>, and U.N. document DP/FPA/CPD/CHN/9, *United Nations Population Fund, Country programme document for China*, December 21, 2020. Also see UNFPA, “China Policy Brief: Towards a normal sex ratio at birth in China,” January 2018.

²² U.N. document, DP/FPA/CPD/CHN/9, p. 1.

²³ Some Members believed that such earmarks were necessary because the State Department and USAID had given the issue inadequate attention. (Senate Committee on Foreign Relations. Foreign Assistance Act of 1967; report to accompany S. 1872. S.Rept. 90-499 August 9, 1967, p. 24.)

²⁴ For more detailed historical funding data on UNFPA, see archived CRS Report RL32703, *The U.N. Population Fund: Background and the U.S. Funding Debate*, by Luisa Blanchfield.

²⁵ The Helms Amendment prohibits the use of U.S. funds to perform abortions or to coerce individuals to practice abortions (§104(f)(1) of P.L. 87-195). The Mexico City Policy was established by President Reagan at the 1984 Mexico City Conference on Population. It stated that NGOs that received population assistance from the United States could not actively promote or perform abortion as a family planning method in other countries. The policy has since been applied and rescinded by Republican and Democratic Administrations. In 2017, President Trump expanded and renamed the policy the “Protecting Life in Global Health Assistance” policy. President Biden rescinded the policy in January 2021. For more information and additional legislative conditions, see CRS Report R41360, *Abortion and Family Planning-Related Provisions in U.S. Foreign Assistance Law and Policy*, by Luisa Blanchfield.

used for abortion and called for UNFPA to provide assurances that it was not engaged in, or providing funds for, abortion or coercive family planning programs.²⁶ The Administration's concerns focused primarily on UNFPA activities related to China's coercive family planning practices (see the "Debate over UNFPA's Activities in China" section for more information).

The Kemp-Kasten Amendment

In 1985, reflecting the Reagan Administration's aforementioned concerns, Congress enacted the Kemp-Kasten amendment as part of the FY1985 Supplemental Appropriations Act.²⁷ The measure, introduced by Senator Bob Kasten and Representative Jack Kemp, stated:

None of the funds made available under this Act nor any unobligated balances from prior appropriations Acts may be made available to any organization or program which, as determined by the President, supports or participates in the management of a program of coercive abortion or involuntary sterilization.²⁸

The amendment was created specifically to address concerns related to UNFPA's country program in China. Presidents have not made determinations regarding other organizations.

Congress did not provide details on the meaning of the phrase, "support or participate in the management of a program" in the legislation. However, in the "additional views" section of the House Appropriations Committee Report 99-142, Representative Kemp stated that management of coercive programs may include providing resources to collect and analyze data necessary to the enforcement of such a program; training of the individuals who plan, manage, and carry out such a program; education and publicity about the programs; assistance to the official bodies of government that are charged with developing and implementing such a program; and other such assistance.²⁹

The amendment has been enacted in subsequent annual SFOPS laws since FY1985. Most recently, it was included in the FY2022 SFOPS Appropriations Act.³⁰ Since FY2019 (and in some previous fiscal years), it has included an additional provision requiring that the President report on how and why the determination was made within a certain time period:

any determination made under the previous proviso must be made not later than 6 months after the date of the enactment of this Act, and must be accompanied by the evidence and criteria utilized to make the determination.³¹

Other Related Legislative Conditions

In addition to Kemp-Kasten restrictions, since FY1994 Congress has periodically enacted funding conditions for UNFPA in SFOPS appropriations acts. Section 7057 of the FY2022 SFOPS act requires that

²⁶ "Policy Statement of the United States of America at the United Nations International Conference on Population (Second Session), Mexico City, August 13-16, 1984." The Reagan Administration stated that any unused UNFPA funds would be redirected to other non-UNFPA family planning programs.

²⁷ For a legislative history of how the Kemp-Kasten amendment was conceived, see archived CRS Report RL32703, *The U.N. Population Fund: Background and the U.S. Funding Debate*, by Luisa Blanchfield.

²⁸ S.Amdt. 388 to H.R. 2577 [99th], agreed to on June 20, 1985.

²⁹ H. Rept. 99-142 [99th], Appropriations Committee. Supplemental Appropriations, 1985, May 22, 1985, p. 86.

³⁰ §7057 of Division K of the Consolidated Appropriations Act, 2022 (P.L. 117-103), March 15, 2022.

³¹ *Ibid.*

- funds not made available for UNFPA because of any provision of law shall be transferred to the Global Health Programs account and made available for family planning, maternal, and reproductive health activities;
- none of the funds made available may be used for a country program in China;
- U.S. contributions to UNFPA be kept in an account segregated from other UNFPA accounts and not be commingled with other sums; and
- for UNFPA to receive U.S. funding, it cannot fund abortions.³²

Similar to previous years, the FY2022 SFOPS act requires a report on dollar-for-dollar withholding of funds. Specifically, not later than four months after the enactment of the act, the Secretary of State must submit a report to the committees on appropriations indicating the funds UNFPA is budgeting for a country program in China. If the Secretary's report states that funds will be spent on such a program, then the amount of such funds shall be deducted from the funds made available to UNFPA for the remainder of the fiscal year in which the report is submitted.

Debate over UNFPA's Activities in China

Since Kemp-Kasten was enacted, U.S. policymakers have debated whether or not UNFPA's program in China supports or participates in the management of a program of coercive abortion or involuntary sterilization (see **Appendix A** for an overview of China's family planning policies). Broadly, opponents of UNFPA funding maintain that the United States should not fund an organization that supports, either directly or indirectly, what they view as the PRC government's restrictive and coercive family planning policies. They suggest that even if UNFPA does not directly or knowingly participate in such activities, its partnership and collaboration with PRC entities that implement China's family planning policies violate the Kemp-Kasten amendment. Opponents further argue that U.S. contributions are fungible; any U.S. funding to UNFPA, even if designated for specific purposes, frees up organizational resources for unrelated (and possibly "objectionable") purposes.³³ Some opponents have also questioned whether UNFPA can adequately monitor whether the funding for its China program is being used for designated programs and activities. Others have criticized past statements of support made by UNFPA leaders regarding China's population programs.³⁴

Supporters of U.S. funding note that several onsite investigations, including one by the George W. Bush Administration in 2002, found "no evidence that UNFPA knowingly supported or participated in the management of a program of coercive abortion or involuntary sterilization."³⁵ They also contend that UNFPA has continually been subject to U.S. funding conditions that prohibit funding for abortion or require dollar-for-dollar withholdings from UNFPA's China program, emphasizing that UNFPA is the only international organization subject to such

³² Ibid.

³³ H.Rept. 112-361 [112th], To Prohibit Funding to the United Nations Population Fund, January 17, 2012, p. 7.

³⁴ These views are drawn from a range of sources, including but not limited to H.Rept. 112-361 [112th], To Prohibit Funding to the United Nations Population Fund, January 17, 2012; Senate Hearing 107-515, "U.S. Funding for the U.N. Population Fund: The Effect on Women's Lives," Subcommittee on International Operations and Terrorism, February 27, 2002; "Determination Regarding the Kemp-Kasten Amendment," signed by Secretary of State Mike Pompeo, June 16, 2020; Department of State, "Analysis of determination that Kemp-Kasten Amendment Precludes Further Funding to UNFPA," July 18, 2002; and Heritage Foundation, "Budget Book: Eliminate Funding for the United Nations Population Fund," February 2015.

³⁵ Department of State, "Analysis of determination that Kemp-Kasten Amendment Precludes Further Funding to UNFPA," July 18, 2002.

restrictions. More broadly, some contend that U.S. cuts to UNFPA funding may force the organization to reduce family planning services that prevent millions of abortions each year through education and contraceptive delivery. Some also suggest that UNFPA’s efforts to advance the ICPD Program of Action through its country program in China may play a role in influencing the government to loosen restrictive family planning policies.³⁶

Administration Kemp-Kasten Determinations

Over the decades, Administrations have used different methods and criteria to make Kemp-Kasten determinations, ranging from in-depth investigations in China to broader statements of policy. In general, Administrations appear to agree that UNFPA does not directly engage in coercive abortions or involuntary sterilization as part of its China program; however, there are varying views as to whether UNFPA violates Kemp-Kasten by operating in the country and/or supporting or partnering with Chinese government agencies. Administration determinations have generally fallen along party lines, with Republican Presidents withholding funding under Kemp-Kasten and Democratic Presidents supporting UNFPA funding. The below chronology provides an overview of Presidents’ Kemp-Kasten justifications and statements since 1985.

Table I. Chronology of UNFPA Determinations, 1985 to Present

President (Term Dates)	Kemp-Kasten Justification/Statement
Ronald Reagan (Jan. 1981-Jan. 1989)	The Reagan Administration found UNFPA ineligible for funding under Kemp-Kasten from FY1986 to FY1988. ³⁷ In letters to congressional leaders, officials cited Representative Kemp’s aforementioned interpretation (as set out in his additional views in H.Rept. 99-142) of what characterized the participation of an organization in a coercive abortion program. It concluded that China’s then-“one-child- per-couple policy has resulted in coerced abortion and involuntary sterilization.” ³⁸ The determination was challenged by a nongovernmental organization (NGO) in court, and the determination was upheld. ³⁹
George H.W. Bush (Jan. 1989-Jan. 1993)	President George H.W. Bush continued to withhold funding to UNFPA under Kemp-Kasten from FY1989 to FY1993, appearing to use the same justification as the Reagan Administration. ⁴⁰

³⁶ These perspectives are drawn from a range of sources, including but not limited to “Dissenting Views” of H.Rept. 112-361 [112th], “To Prohibit Funding to the United Nations Population Fund,” January 17, 2012; “U.S. Funding for the U.N. Population Fund: The Effect on Women’s Lives,” Subcommittee on International Operations and Terrorism, February 27, 2002; U.S. Mission to the United Nations, Statement on UNFPA’s 8th Program in China, UNDP/UNFPA Executive Board, August 31-September 1, 2015; UNFPA, “UNFPA Hopes Policy Changes Will Lead to Fulfillment of Chinese Couples’ Rights on Family Size,” October 30, 2015; and Nicole Gaouette, “US aid cuts to UN agency will hurt vulnerable women and children, critics say,” CNN, July 15, 2019.

³⁷ In FY1985, Congress appropriated \$46 million to UNFPA; however, only a portion of these funds (\$36 million) was transferred to the organization as U.S. policy and its support for UNFPA shifted.

³⁸ Letter from USAID Acting Director Peter McPherson to the Senate Appropriations Committee, September 25, 1985.

³⁹ The Population Institute (an NGO) filed suit against the U.S. government in 1986 to block the redirection of UNFPA funds and invalidate the determination (Population Institute v. McPherson, 797 F.2d 1062). In August 1986, the U.S. Court of Appeals for the District of Columbia deferred to the USAID interpretation of Kemp-Kasten because it was a “reasonable reading of an ambiguous provision and did not otherwise conflict with the expressed intention of Congress.”

⁴⁰ “Turmoil in China; U.S. to Withhold U.N. Funds Over China Population Plan,” *New York Times* (Foreign Desk), Late Edition, June 8, 1989. In November 1989, President Bush vetoed the FY1990 foreign aid appropriations bill (H.R. 2939) because it included funding for UNFPA. See “Presidential Veto Message: Bush Vetoes Foreign Aid Over U.N. Family Agency,” CQ Almanac 1989, 45th ed., 41-C-42-C, Congressional Quarterly, 1990.

President (Term Dates)	Kemp-Kasten Justification/Statement
William Clinton (Jan. 1993-Jan. 2001)	The Clinton Administration issued a determination that UNFPA programs in China did not violate the terms of Kemp-Kasten. The policy reversal, which was in effect from FY1994 to FY2001 (with the exception of FY1999), ⁴¹ was based on what the Administration viewed as (1) the ambiguity of the Kemp-Kasten amendment, (2) perceived overreliance by the Reagan and Bush Administrations on the statements by Representative Kemp in interpreting the provision, and (3) the intent of the organization; specifically, the Administration maintained that UNFPA did not “knowingly” or “intentionally” support such practices. ⁴²
George W. Bush (Jan. 2001-Jan. 2009)	The George W. Bush Administration withheld U.S. funding from UNFPA from FY2002 to FY2008 under Kemp-Kasten. As part of the decisionmaking process, the State Department sent an investigative team to China. The team found no evidence that UNFPA had “knowingly supported or participated in the management of a program of coercive abortion or involuntary sterilization.” ⁴³ However, the Administration later determined that “UNFPA’s support of, and involvement in, China’s population-planning activities allows the Chinese government to implement more effectively its program of coercive abortion,” and found it was “not permissible” to fund UNFPA under Kemp-Kasten. ⁴⁴
Barack Obama (Jan. 2009-Jan. 2017)	The Obama Administration issued a statement that restored funding to UNFPA from FY2009 to FY2016. According to Administration officials, the decision highlighted the President’s “strong commitment” to international family planning, women’s health, and global development. ⁴⁵
Donald Trump (Jan. 2017-Jan. 2021)	The Trump Administration withheld funding to UNFPA from FY2017 to FY2020. Its April 2017 Kemp-Kasten determination stated, “while there is no evidence that UNFPA directly engages in coercive abortions or involuntary sterilizations in China, the agency continues to partner with the NHFPC [National Health and Family Planning Commission] on family planning, and thus can be found to support, or participate in the management of China’s coercive policies for purposes of the Kemp-Kasten Amendment.” ⁴⁶
Joseph Biden (Jan. 2021-present)	The Biden Administration resumed U.S. funding to UNFPA beginning in FY2021 and expressed support for UNFPA’s “important work in preventing gender-based violence globally, including efforts to end female genital mutilation and cutting, early and forced marriage, and other practices detrimental to the health of women and girls.” ⁴⁷

⁴¹ In FY1999, it appears the Clinton Administration did not fund UNFPA as the result of a broader agreement with Congress regarding the payment of U.N. arrears. (CSPAN, Transcript of “Helms and Biden on United Nations Reform,” November 18, 1999.)

⁴² These policy views are drawn from letters of USAID Administrator Brian Atwood to Senator Jesse Helms, dated August 6 and September 10, 1993.

⁴³ Department of State “Report of the China UN Population Fund Independent Assessment Team,” May 29, 2002.

⁴⁴ Department of State, “Analysis of determination that Kemp-Kasten Amendment Precludes Further Funding to UNFPA,” July 18, 2002.

⁴⁵ White House, “Statement of President Barack Obama on Rescinding the Mexico City Policy,” January 3, 2009, and “U.S. Government Support for UNFPA,” Department of State Press Statement by Robert Wood, March 24, 2009.

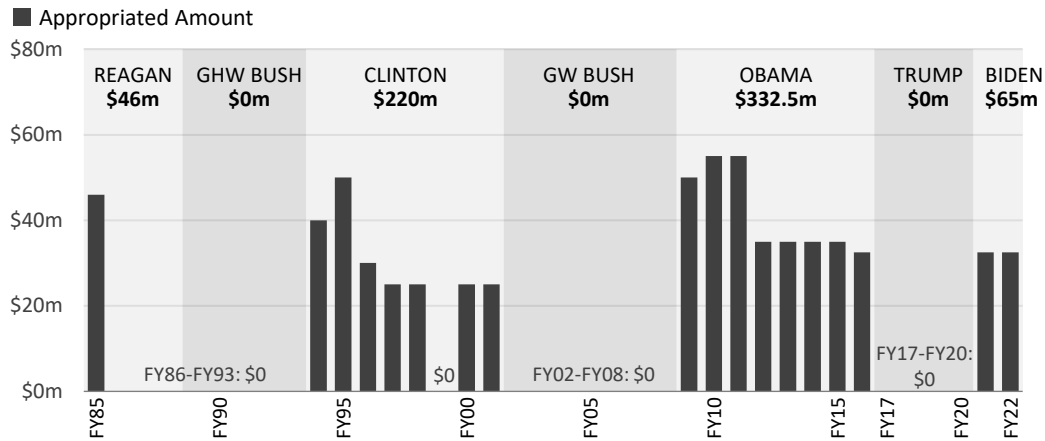
⁴⁶ “Determination Regarding the Kemp-Kasten Amendment,” signed by Thomas Shannon, Under-Secretary for Political Affairs, March 20, 2017. The last determination by the Trump Administration was signed by Secretary of State Mike Pompeo on June 16, 2020.

⁴⁷ “Memorandum on Protecting Women’s Health at Home and Abroad,” The White House, January 28, 2021, and press statement by Antony Blinken, Secretary of State, “Prioritizing Sexual and Reproductive Health and Reproductive Rights in U.S. Foreign Policy,” January 28, 2021.

U.S. Funding

When UNFPA is eligible for funding under the Kemp-Kasten amendment, the United States generally provides core and noncore (“extrabudgetary”) contributions to the organization.⁴⁸ Congress usually appropriates funding to UNFPA’s core budget through a line item in annual SFOPS appropriations bills or in accompanying explanatory statements or reports.⁴⁹ In both FY2021 and FY2022, Congress appropriated \$32.5 million in core funding to UNFPA under the International Organizations & Programs (IO&P) account. (In FY2021, UNFPA also received \$20 million in IO&P funding through the American Rescue Plan Act [ARPA, P.L. 117-2] for COVID-19 response and recovery efforts.⁵⁰) Similar to in previous years, Congress directed that funds not provided to UNFPA be reprogrammed to other global health activities and that if funding is provided, the amount of the UNFPA China Program must be deducted from the U.S. contribution. President Biden’s FY2023 request for UNFPA funding is \$56 million. (See **Table B-1** in **Appendix B** for UNFPA IO&P funding since FY1985 and **Figure 2** below.)

Figure 2. U.S. Core Funding to UNFPA, IO&P Account: FY1985-FY2022
(in current U.S. dollars)



Source: Adapted by CRS based on congressional budget justifications, SFOPS legislation, and other documents.

Notes: Funding levels represent appropriated amounts in the years in which the United States contributed to UNFPA. In some years, Congress appropriated funding to the UNFPA but none was provided due to Kemp-Kasten determinations or actual amounts were lower due to recessions or other withholdings. Figure does not include U.S. extrabudgetary contributions through other SFOPS accounts (see **Table 2**). *FY2021 IO&P funding level does not include an additional \$20 million in IO&P funding to address COVID-19 through ARPA (P.L. 117-2).

⁴⁸ U.S. government and UNFPA-reported levels of U.S. funding may not align due to differences between the U.S. fiscal year (October 1 to September 30) and the U.N. fiscal year (January 1 to December 31).

⁴⁹ There have been some exceptions; for example, during most of the Reagan Administration, Congress did not appropriate funding to UNFPA.

⁵⁰ §10005 of ARPA authorized \$580 million to prevent, prepare for, and respond to COVID-19 through support for the priorities and objectives of the U.N. Global Humanitarian Response Plan COVID-19 through voluntary contributions to international organizations and programs. Also see Department of State, “Fact Sheet: Announcement of ARPA – International Organizations and Programs (IO&P) Funds,” December 21, 2021. According to the department, funding for UNFPA will work to “keep health systems functioning, protect health workers, and mitigate higher rates of maternal and neonatal mortality and morbidity.”

During some years, the United States has also provided noncore (also referred to as “extrabudgetary”) funding for specific UNFPA projects and activities. In general, Congress does not appropriate such funding in legislation; instead, it appropriates a lump sum to specific SFOPS appropriations accounts and the executive branch allocates funding based on U.S. global health, humanitarian, and other foreign policy priorities. For example, U.S. extrabudgetary funding increased during the Obama Administration; from FY2014 through FY2016, the United States obligated over \$70 million to UNFPA through the State Department’s SFOPS Migration and Refugee Assistance account administered by the Bureau of Population, Refugees and Migration (see **Table 2**).

Table 2. U.S. Extrabudgetary Funding to UNFPA, by Account: FY2014-FY2020
(in current U.S. dollars)

Account	2014	2015	2016	2017	2018	2019	2020
MRA	9,370,000	15,586,568	19,706,486	5,750,000	0	0	0
ESF	0	11,461,193	368,433	0	0	0	0
GHP	680,830	4,289,348	50,000	98,163	0	0	0
IDA	673,650	750,000	1,500,000	26,831	0	0	0
AEECA	795,625	0	0	109,766	0	0	0
DF	0	0	599,999	0	0	0	0
<i>Total</i>	<i>11,520,105</i>	<i>32,087,109</i>	<i>22,224,918</i>	<i>5,984,760^a</i>	<i>0</i>	<i>0</i>	<i>0</i>

Source: USAID Foreign Aid Explorer, accessed April 25, 2022.

Notes: FY2021 and FY2022 funding are not included because they are only partially reported. See **Figure 2** and **Table B-1** for IO&P funding. Account acronyms: MRA = Migration and Refugee Assistance; ESF = Economic Support Fund; GHP = Global Health Programs; IDA = International Disaster Assistance; AEECA = Assistance for Europe, Eurasia, and Central Asia; DF = Democracy Fund.

a. Funding was allocated prior to President Trump declaring UNFPA ineligible for U.S. funding in January 2017.

The full level and extent of such FY2021 funding is not yet available; however, the Biden Administration plans to provide extrabudgetary funding for UNFPA programs in the following humanitarian contexts:

- \$2.6 million in response to the Rohingya refugee crisis;
- \$1.2 million in response to the needs of crisis-affected women who have fled Ethiopia’s Tigray region for Sudan;
- \$1.5 million in humanitarian assistance to Afghanistan, focused on returnees and internally displaced persons (IDPs); and
- \$1.3 million in humanitarian assistance in Sudan for a strengthened response to gender-based violence to support IDPs and vulnerable populations.⁵¹

The United States also announced \$5 million for UNFPA Supplies, which provides contraceptives and maternal health medicines to adolescent girls and women.⁵²

⁵¹ State Department, Office of the Spokesperson, “U.S. Engagement with the U.N. Population Fund,” June 7, 2021.

⁵² State Department, Office of the Spokesperson, “Deputy Secretary Sherman’s Meeting with UNFPA Executive Director Kanem,” November 1, 2021.

Issues for Congress

Congressional perspectives on UNFPA funding are mixed and, similar to the executive branch, often fall along party lines. Over the years, some Members have considered legislation making various changes to the Kemp-Kasten amendment or removing the provision from law altogether. Other proposed legislation has expressed support for or opposition to UNFPA more broadly.⁵³ During the 117th Congress, Members may consider the following recurring issues.

Timing and Justification of Administration Determinations

In recent years, some policymakers and observers have expressed concern that Administration determinations under the Kemp-Kasten amendment are delayed and/or lack sufficient justification for the determination.⁵⁴ In an effort to address these issues, since FY2020 annual SFOPS Acts have required that a determination be made within three months and that the executive branch provide the “evidence and criteria” used to make the determination in its justification.⁵⁵ Members may continue to monitor if such requirements are proving effective and adequate for addressing congressional concerns.

Impact of U.S. Withholdings on UNFPA Operations

Some experts and policymakers have expressed concern regarding the impact of U.S. withholdings on UNFPA field operations. In 2017, UNFPA officials stated that the impact of U.S. funding cuts are “direct,” and that work is often scaled back across countries where UNFPA operates, not just the China programs targeted by the withholding policy.⁵⁶ Countries with smaller budgets (such as those in Latin America and Eastern Europe) are particularly vulnerable, as are programs that are traditionally supported by the United States (including those in Middle Eastern countries responding to refugee crises).⁵⁷ Recognizing the possibility of ongoing U.S. cuts, UNFPA expanded its advocacy and outreach efforts to governments and other donors in 2019 and was able to maintain its core budget level despite the U.S. withholding (while also falling short of other funding targets).⁵⁸ More recently, UNFPA faced additional budget shortages from the

⁵³ See, for example, H.R. 3938 [117th], *Support UNFPA Funding Act*, introduced by Rep. Chrissy Houlahan on June 16, 2021, and H.R. 2488 [117th], *No Taxpayer Funding for the U.N. Population Fund*, introduced by Rep. Chip Roy on April 13, 2021.

⁵⁴ See, for instance, H.Rept. 112-361 [112th], “To Prohibit Funding to the United Nations Population Fund,” January 17, 2012, p. 3 (on President Obama’s determinations); and Population Action International, “Pompeo Makes Same Weak Case for Withholding UNFPA Contribution Again,” July 1, 2020 (on President Trump’s determinations).

⁵⁵ See, for example, Letter to Secretary of State Mike Pompeo from Representatives Jackie Speier, Dianne DeGette, Barbara Lee, Nita Lowey, and Lois Frankel, July 26, 2019; and H.Rept. 112-361 [112th], *To Prohibit Funding to the United Nations Population Fund*, January 17, 2012, p. 3.

⁵⁶ UNFPA statements drawn from Amy Lieberman, “UNFPA assess extent and impact of US cuts,” Devex.com, April 18, 2017; Friends of UNFPA, “Ask an Expert: Sarah Craven, Director of UNFPA’s Washington Office”; Nicole Gaouette, “US aid cuts to UN agency will hurt vulnerable women and children, critics say,” CNN, July 15, 2019.

⁵⁷ Ibid. Some U.S. policymakers also expressed concern regarding UNFPA’s 2019 decision to close over 100 facilities for nursing and pregnant mothers in Yemen due to budget cuts. (Letter to Secretary of State Mike Pompeo from Sens. Patty Murray, Jeanne Shaheen, and Jeffrey Merkley, November 12, 2019.)

⁵⁸ See Amy Lieberman, “How UNFPA rebounded from US funding cuts,” Devex.com, July 3, 2019, and “UNFPA Is Thriving as It Praises an American Who Kept US Interest Alive,” *PassBlue*, September 29, 2020.

United Kingdom's April 2021 decision to cut 85% of its UNFPA funding as part of broader reductions in foreign aid.⁵⁹

Bilateral Versus Multilateral Population Assistance Funding

Congressional debates regarding UNFPA often occur against the backdrop of broader discussions regarding the role of multilateral and bilateral funding in U.S. foreign assistance. Some experts contend that U.S. funding to multilateral organizations such as UNFPA are a particularly effective use of family planning and reproductive health resources. They argue that such cooperation allows the U.S. government to share related costs with other governments and organizations, as well as to benefit from the convening power and perception of neutrality that U.N. entities such as UNFPA often enjoy.⁶⁰ On the other hand, some argue that the United States should focus on bilateral family planning and reproductive health activities (see the **text box** below), emphasizing that bilateral approaches may allow for better oversight and alignment with U.S. priorities.⁶¹

U.S. Bilateral Family Planning and Reproductive Health Activities

Since 1965, the United States has been the largest provider of bilateral family planning and reproductive health (FP/RH) funding worldwide. For the past five fiscal years, Congress has appropriated \$575 million annually for FP/RH programs in nearly 40 countries. These activities, which are administered by USAID, focus on providing access to voluntary family planning information, contraceptives, and services. For more information, see CRS Report R46215, *U.S. Bilateral International Family Planning and Reproductive Health Programs: Background and Selected Issues*, by Sara M. Tharakan, and CRS In Focus IF11013, *U.S. Global Family Planning and Reproductive Health Programs: Funding Trends and Issues for Congress*, by Sara M. Tharakan.

Looking Ahead

When assessing U.S. policy and funding for UNFPA in FY2023 and beyond, some Members of Congress might also consider the following issues.

- **U.S. membership on the UNFPA Executive Board.** The United States currently serves as a member of the UNFPA Executive Board, which approves the organization's policies and budgets. Congress may monitor executive branch priorities in this role related to strategic planning, approval of the UNFPA budget, UNFPA's country program in China, and other issues as they arise.
- **UNFPA and the COVID-19 pandemic.** COVID-19 prompted UNFPA to reassess and adjust its activities to meet pandemic-related challenges, including disruptions to family planning and reproductive health services and the secondary impacts on women and girls (such as increased rates of gender-based violence and COVID-related disruption to health care, education, and other social services). Congress may consider tracking UNFPA's efforts to incorporate

⁵⁹ UNFPA, "Statement on UK government funding cuts," April 28, 2021.

⁶⁰ See, for example, "Dissenting Views" of H.Rept. 112-361 [112th], "To Prohibit Funding to the United Nations Population Fund," January 17, 2012, and Guttmacher Institute, "The Support UNFPA Funding Act: Righting a Policy Wrong," October 17, 2019.

⁶¹ For example, see H.Rept. 112-361 [112th], "To Prohibit Funding to the United Nations Population Fund," January 17, 2012; and Remarks by Rep. Chris Smith, "Continued Coercion: China's Two-Child Policy Threatens Human Rights and Prosperity," Heritage Foundation, March 8, 2017.

COVID-19 interventions into its activities and its role in broader U.N. system-wide initiatives to mitigate the short and long-term effects of the pandemic.⁶²

- **UNFPA and U.N. reform.** Congress has long demonstrated an interest in ensuring that U.N. entities operate as efficiently and effectively as possible. Accordingly, some Members may seek to track UNFPA’s role in implementing U.N. system-wide development reforms adopted by the U.N. General Assembly in 2019.⁶³ Congress may also monitor UNFPA-specific reform activities, such as efforts to improve programming processes, strengthen results-based management, and improve human resources through enhanced staff mobility and recruiting.⁶⁴

⁶² The UNFPA Global Response Plan aims to adjust and align UNFPA programs with COVID-19 challenges by coordinating with partners, monitoring pandemic consequences, and reflecting on changing needs and research. For information on broader U.N. efforts, see “United Nations Comprehensive Response to COVID-19 Saving Lives, Protecting Societies, Recovering Better,” updated September 2020.

⁶³ In May 2018, the General Assembly adopted resolution 72/279 to “reposition” the U.N. development system by strengthening the U.N. resident coordinator (leadership) position within U.N. country teams and improving accountability and communication among U.N. officials and host governments.

⁶⁴ Drawn from U.N. document DP/FPA/2021/8, *The UNFPA strategic plan, 2022-2025*, July 14, 2021.

Appendix A. China's Family Planning Policies⁶⁵

China's family planning policies are guided by a national law, the *Population and Family Planning Law of the People's Republic of China*, which first went into effect in 2002 and has been amended twice, in 2015 and 2021.⁶⁶ The law has never explicitly condoned nor prohibited coercive sterilization and abortion, and has referred to contraception as the main means of family planning.⁶⁷ Article 20 states, "Couples of childbearing age independently choose family planning, contraception and birth control measures to prevent and reduce unwanted pregnancies."⁶⁸ Due to the vagueness of the law's provisions and to variations in regulations at the subnational level, its implementation has varied widely across the country. The law has led to many abuses by local officials attempting to enforce its limitations on births, including forced contraceptive use, sterilizations, and abortions, in some cases late-term abortions.⁶⁹ Furthermore, the law has authorized other penalties for violators of the policy, including heavy fines ("social compensation fees") and job-related sanctions, as well as the denial of public health and education benefits to offspring beyond the number of children permitted by the law.⁷⁰

Between 1980 and 2015, the PRC government imposed what became known outside China as a "One-Child Policy," mostly in urban districts, to curb population growth. Many couples in rural areas were allowed to have two children, and ethnic minorities, including ethnic Uyghurs, often were allowed to have two children per couple in urban districts and three in rural areas. The policy led to many human rights abuses, as well as demographic and related problems, especially among the Han Chinese majority,⁷¹ including sex-selective abortions, a skewed gender ratio (more boys than girls),⁷² and an accelerated aging of the total population.⁷³ In response to demographic trends and popular pressure, in 2015, China's National People's Congress (NPC) amended the Population and Family Planning Law to allow all married couples to have two children.⁷⁴

⁶⁵ Written by Thomas Lum, Specialist in Asian Affairs.

⁶⁶ *Population and Family Planning Law of the People's Republic of China*, August 2021 (Chinese language version at <https://flk.npc.gov.cn/detail2.html?ZmY4MDgxODE3YmE5NjVjNDAxN2JiODkyMWQxMzA3N2E%3D>).

⁶⁷ Article 19, *Population and Family Planning Law of the People's Republic of China*, 2001, at <https://www.cecc.gov/resources/legal-provisions/population-and-family-planning-law-of-the-peoples-republic-of-china>; Article 19, *Population and Family Planning Law of the People's Republic of China*, amended December 2015, at <http://www.ilo.org/dyn/natlex/docs/ELECTRONIC/76101/79578/F163106897/CHN76101%20Eng.pdf>.

⁶⁸ *Population and Family Planning Law of the People's Republic of China*, August 2021.

⁶⁹ Calum Macleod, "Forced Abortion in China Prompts Outrage, Calls for Reform," *Washington Post*, June 15, 2012.

⁷⁰ Russell Goldman, "From One Child to Three: How China's Family Planning Policies Have Evolved," *The New York Times*, May 31, 2021; Sui-Lee Wee, "After One-Child Policy, Outrage at China's Offer to Remove IUDs," *The New York Times*, January 7, 2017; "How China's One-Child Policy Led To Forced Abortions, 30 Million Bachelors," *NPR*, February 1, 2016; Maya Wang, "Dispatches: Ending the One-Child Policy Does Not Equal Reproductive Freedom in China," Human Rights Watch, October 29, 2015.

⁷¹ Han Chinese, the majority ethnic group in China, constitute about 91.5% of the country's population.

⁷² China reports a male-to-female ratio of 105 to 100. "China's Latest Census Reports More Balanced Gender Ratio," *Xinhua*, May 11, 2021.

⁷³ The number of women of childbearing age in China began to fall in the mid-2010s. Mu Guangzong, "China's Worrying Decline in Birth Rate: China Daily Columnist," *The Straits Times*, January 24, 2018.

⁷⁴ The law allowed for some variations by province. Wang Xiaodong, "Beijing Residents Face New Fines for Exceeding Quota," *China Daily*, January 8, 2018; Laney Zhang, "China: Two-Child Policy Becomes Law," January 8, 2016, at [China: Two-Child Policy Becomes Law | Library of Congress \(loc.gov\)](http://china: Two-Child Policy Becomes Law | Library of Congress (loc.gov)); Josh Chin, "Chinese Scholars Call for Revision of One-Child Policy," *The Wall Street Journal*, July 6, 2012.

Despite the general relaxation of population control measures since 2016, birth rates in China have continued to decline, as many couples prefer to have one child, largely for economic reasons.⁷⁵ In 2021, the NPC amended the Population and Family Planning Law for a third time, allowing all married couples to have up to three children, and abolishing the social compensation fees or fines assessed on couples having children beyond the legal limit. As in the past, the law leaves the details of implementation to subnational governments.⁷⁶ Overall, coercive family planning practices in China have declined in recent years, although forced terminations of pregnancies still were reported in some PRC provinces in 2021.⁷⁷

In 2017, the PRC government ordered a crackdown on ethnic Uyghur Muslims in the Xinjiang Uyghur Autonomous Region who had violated China's family planning guidelines, which had been not always been strictly enforced in the region. The government detained many Uyghur and other Muslim minority women in "reeducation centers" for violating family planning laws, calling the violations a sign of religious extremism.⁷⁸ PRC official documents from 2019 reportedly revealed plans for a campaign of mass sterilization of women in rural Xinjiang aimed primarily at Uyghur women with three or more children, as well as some with two children. Xinjiang authorities reportedly also have carried out forced abortions among Uyghurs.⁷⁹ The Department of State included coercive sterilizations and abortions performed on Uyghur women in its January 2021 determination that China is committing genocide.⁸⁰

⁷⁵ "China's Births May Fall Below 10 Million Annually in Next Five Years – Expert Quoted," *Reuters*, April 19, 2021.

⁷⁶ Laney Zhang, "China: Three-Child Policy Becomes Law, Social Maintenance Fee Abolished," at [China: Three-Child Policy Becomes Law, Social Maintenance Fee Abolished | Library of Congress \(loc.gov\)](#); Jessie Yeung, Steve George, "China Wants Families to Have Three Children. But Many Women Aren't Convinced," *CNN*, August 25, 2021.

⁷⁷ Department of State, *2021 Country Reports on Human Rights Practices – China*, April 12, 2022.

⁷⁸ Adrian Zenz, "Sterilizations, IUDs, and Mandatory Birth Control: The CCP's Campaign to Suppress Uyghur Birthrates in Xinjiang," Jamestown Foundation, June 2020; "China Cuts Uighur Births with IUDs, Abortion, Sterilization," *Associated Press*, June 29, 2020.

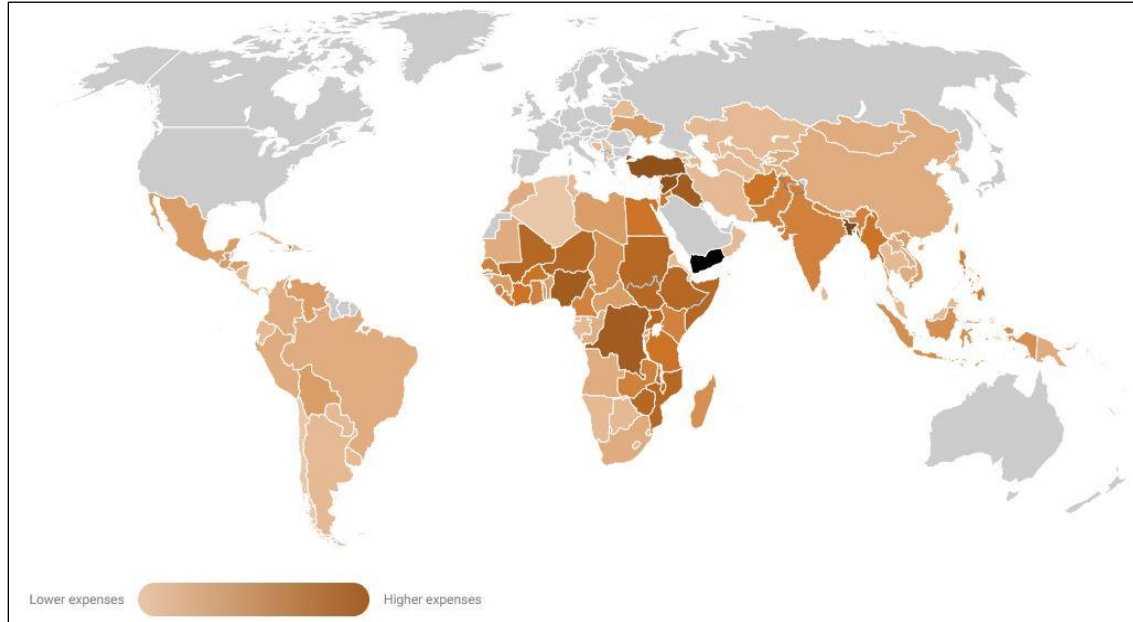
⁷⁹ *Ibid.*

⁸⁰ Department of State, "Determination of the Secretary of State on Atrocities in Xinjiang," January 19, 2021; "Report: China's Birth-Control Policy on Uyghur Women May Amount To 'Genocide,'" *Radio Free Europe/Radio Liberty*, June 29, 2020. For further information on the Uyghurs, see CRS In Focus IF10281, *China Primer: Uyghurs*, by Thomas Lum and Michael A. Weber.

Appendix B. Additional Information

Figure B-1 illustrates UNFPA country programs by location in 2020. Countries with darker values have higher expenses (the highest is Yemen at \$71.7 million), while those with lighter values have lower expenses (the lowest is Chile at \$200,000).

Figure B-1. UNFPA Country Program Locations and Expenses, 2020



Source: UNFPA Data Transparency Portal.

Table B-1 lists UNFPA appropriations and executive branch determinations since FY1985, the first year Kemp-Kasten first became law. In some years, executive branch determinations were made in the middle of the fiscal year (for example in January when a new President took office). This affected actual UNFPA funding amounts if funds had already been obligated under the previous Administration.

Table B-1. UNFPA Appropriations and Executive Branch Determinations: FY1985 to Present

Fiscal Year	President	Determination Yes/No Funding)	Appropriated Amount ^a
1985	Reagan	Yes	\$46,000,000
1986	Reagan	No	\$0
1987	Reagan	No	\$0
1988	Reagan	No	\$0
1989	George H.W. Bush	No	\$0
1990	George H.W. Bush	No	\$0
1991	George H.W. Bush	No	\$0
1992	George H.W. Bush	No	\$0
1993	George H.W. Bush	No	\$0

Fiscal Year	President	Determination Yes/No Funding)	Appropriated Amount ^a
1994	Clinton	Yes	\$40,000,000
1995	Clinton	Yes	\$50,000,000
1996	Clinton	Yes	\$30,000,000
1997	Clinton	Yes	\$25,000,000
1998	Clinton	Yes	\$25,000,000
1999 ^b	Clinton	No	\$0
2000	Clinton	Yes	\$25,000,000
2001	Clinton	Yes	\$25,000,000
2002	George W. Bush	No	\$34,000,000
2003	George W. Bush	No	\$34,000,000
2004	George W. Bush	No	\$34,000,000
2005	George W. Bush	No	\$34,000,000
2006	George W. Bush	No	\$34,000,000
2007	George W. Bush	No	\$34,000,000
2008	George W. Bush	No	\$40,000,000
2009	Obama	Yes	\$50,000,000
2010	Obama	Yes	\$55,000,000
2011	Obama	Yes	\$55,000,000
2012	Obama	Yes	\$35,000,000
2013	Obama	Yes	\$35,000,000
2014	Obama	Yes	\$35,000,000
2015	Obama	Yes	\$35,000,000
2016	Obama	Yes	\$32,500,000
2017	Trump	No	\$32,500,000
2018	Trump	No	\$32,500,000
2019	Trump	No	\$32,500,000
2020	Trump	No	\$32,500,000
2021	Biden	Yes	\$32,500,000
2022	Biden	Yes	\$32,500,000

Source: Annual State-Foreign Operations appropriations bills and executive branch documents and statements.

- a. Amounts represent those specifically appropriated by Congress and do not include rescissions or other withholdings. Executive branch allocations earmarked for specific projects are not included.
- b. In 1997, the controversy over whether to fund UNFPA briefly subsided when UNFPA's program in China expired and new activities did not resume immediately. Nevertheless, despite opposition from the United States, UNFPA reestablished a program in China. In FY 1999, the United States did not fund UNFPA as the result of a broader agreement between the President and Congress on the payment of U.N. arrears.

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