

US exit would leave global HIV response with a void to fill



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Within moments of reassuming the office of US President, Donald Trump began to sign a slew of executive orders that have plunged health care in the USA, global health programmes around the world, and health research into uncertainty and chaos. The orders touch many facets of health and science, and HIV has been hit particularly hard, with stop-work orders stalling activities of the President's Emergency Plan for AIDS Relief (PEPFAR) and diktats issued to the Centers for Disease Control and Prevention (CDC) and National Institutes of Health (NIH) to curtail research into key populations.

PEPFAR, which supports HIV programmes in resource-limited countries, is one of the most successful global health initiatives in history, having saved more than 26 million lives worldwide. The initiative is currently responsible for 90% of global initiations of pre-exposure prophylaxis (PrEP), and it has been instrumental in developing health systems in resource-limited settings, with influences far beyond the realm of HIV. Following the Reevaluating and Realigning United States Foreign Aid Executive Order signed by Trump on Jan 20, 2025, the State Department issued a stop-work order for all foreign aid efforts, including PEPFAR, which took effect on Jan 24, 2025. Clinics shuttered and antiretroviral drugs sat on shelves rather than being given to the people who need them. A waiver issued on Feb 1 made clear that treatment and prevention of vertical transmission activities could continue, but much damage was already done. And the waiver does not allow the resumption of PrEP services.

The intention to move away from donor funding to domestic funding for HIV programmes has been on the cards for years, and countries have been making moves to do this. In a recent edition of *The Lancet Voice* discussing the impact of Trump's first few weeks in office, Gavin Yamey (Director of the Centre for Policy Impact in Global Health at the Duke Global Health Initiative) explained that change to global health service provision requires gradual transition. Many reforms are already in progress to ensure resilience of the global HIV response: a shift to domestic funding and integration of HIV services with general medical services or programmes to combat other chronic diseases. But such reforms take time, and a precipitous disruption will not work in their favour. There does not need to be a conflict between the USA reducing its

international aid budget and smooth transition to greater domestic funding. Trump has chosen to make one.

Trump's attacks on global health do not just hit essential services in the fight against HIV. Reinstatement of the Mexico City Policy prevents US aid funding organisations that provide abortion services. In an attack on so-called "woke science", government-employed scientists have been instructed to remove themselves from research related to transgender health. The global HIV response relies on acknowledging the vulnerabilities of key populations and treating all people with fairness and respect. HIV research that is unable to recognise gender diversity is a denial of reality and anti-science.

Some politicians, activists, and civil society groups were primed for the onslaught against aid, health, and research, and they rapidly mounted challenges to the executive orders, which have stalled some of the changes and tempered others. But it is part of the Trump administration strategy to release policy as a bewildering deluge to overwhelm thorough legal and political scrutiny.

The US decision to throw global health organisations into turmoil is nothing but cruel: at one time almost unbelievable but totally predictable. More responsible nations must now take steps to fill the void created by an unreliable partner. Others must show Trump what leadership looks like. It is essential that vital services for vulnerable people are stabilised and reinstated to allow a gradual transition to funding not reliant on a single international donor. Trump will say that proves his point and chalk it up as a success. But the world knows that his petty and vindictive actions have diminished the USA, weakened its position on the world stage, and united others with compassion, integrity, and a sense of justice.

As a journal dedicated to HIV, a virus that disproportionately affects marginalised populations and people reliant on international aid, we stand with the communities that we serve: health researchers, programme implementers, and people affected by HIV. As our parent journal asserted in their recent editorial, we will look to hold the US Government to account, we will chronicle the effects on these catastrophic policies on the global HIV response and we call on other governments to work with global health organisations to fill the void created by the US's precipitous withdrawal. ■ *The Lancet HIV*

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405: 439

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405: 452–53

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