

Global Health and Development Under Attack

US President Donald Trump has unleashed an unprecedented assault on global health and development. Exiting the World Health Organization (WHO) and the dismantling of USAID is a disastrous turning point for the millions of people reliant on essential programmes fighting HIV, malaria and polio, to name but a few. Equally concerning is the apparent willingness of other countries, including the UK, to follow suit in making drastic cuts to aid budgets. The Netherlands meanwhile has also taken an axe to development cooperation, cutting 2.4 billion euros and demanding that all programmes are directly in the Dutch national interest.

All these things have one thing in common, they are painfully short-sighted, failing to recognise that ending support for the most vulnerable, apart from being morally indefensible, is an act of [economic](#) and social self-sabotage on a global scale. The actions of the US and others will increase the risk of pandemics, sow unrest and insecurity, drive populations from their homes and ultimately lead to a less safe world for us all.

Below, members of the Health International team delve deeper into some of the consequences.

Angharad Wells, SRHR Programme Officer

Sexual and Reproductive Health and Rights (SRHR) are among the most critically affected areas under the current assault on global health and development. The US aid freeze and deep cuts by the Netherlands to development aid threaten women's rights and gender equality. Organisations strengthening and providing family planning and sex education face financial uncertainty, undoing years of progress.

The US retreat from global health leadership has already denied over five million women and girls' access to contraceptive care—a figure rising every day, with devastating consequences ([Guttmacher Institute](#)).

Beyond funding cuts, the shift away from a rights-based approach fuels gender inequality and weakens health systems. Through our [SHARP](#) and [Solutions](#) programmes in the Great Lakes Region of Africa, we have seen firsthand how vital it is for adolescents to access SRH services and commodities. Without them the risks are early pregnancies, high maternal mortality, unsafe abortions, and rising rates of sexually transmitted infections, including HIV/AIDS.

The projected impact of these cuts is alarming. If 11.7 million women and girls lose

access to contraception in 2025, 4.2 million will face unintended pregnancies, and 8,340 will die from pregnancy complications (source: [Guttmacher Institute](#)). These setbacks strengthen SRHR opposition worldwide, fueling restrictive policies and reduced care access. As authoritarianism and economic instability grow, defending SRHR is more urgent than ever.

Jaume Vidal, Senior Policy Advisor

The announcements coming out of the US have reverberated throughout the global health ecosystem. They have disrupted existing processes and jeopardised prevailing achievements. To properly assess the impact (and damage) of the US Government's actions, we must consider some of the features that frame relationships in global health.

US agencies and US-funded research institutions are major providers of expertise on a wide range of critical areas: from epidemic surveillance and pharmaceutical regulation to drug development and antimicrobial resistance. Many global and national organisations depend on this expertise to function. This in turn exposes a dependency on government and private entities almost entirely based in the US, compounded by the failure of other high-income countries to fill the financial gap. For example, the fact that PEPFAR has for over two decades secured life-saving treatments for millions in many of countries without any apparent back-up or alternative resources in place is deeply concerning in itself.

The US stepping away from the WHO, and with it the negotiations of a pandemic treaty, is a very clear message to the international community that the US government is willing to disassociate itself of global health governance. This withdrawal, while traumatic, should stimulate the emergence of a new kind of leadership with greater involvement of the Global South.