2025 NIH Grant Terminations Targeted Health Equity and Gender Identity

Research by and for LGBTQ, Black and Latino communities were most likely to lose funding.

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In early 2025, Trump administration officials began terminating active grants at the National Institutes of Health (NIH), the world's largest public funder of biomedical and behavioral research, canceling a total of 2,291 grants and withdrawing $2.45 billion in research funding. A new study in The Lancet Regional Health found that women, LGBTQ people and members of racial minorities had higher odds of losing their research funding. Projects focused on health equity and gender identity were disproportionately defunded.

"These grant terminations didn't just disrupt specific research projects—they also disrupted the careers of many scientists who study the health of marginalized communities," said senior study author Rebecca Fielding-Miller, PhD, s in a press release. "When funding for these topics disappears, the researchers with the deepest expertise in them are often the ones most directly affected."

The NIH is the government agency primarily responsible for funding biomedical and behavioral research. With a $48 billion budget, NIH funds over 60,000 grants each year, directly supporting more than 300,000 researchers at over 2,500 institutions. In 2025, the Trump administration canceled or suspended more than 7,800 research grants. A previous study established that early-career researchers and women were disproportionately impacted by funding cuts.

Researchers from Universities in California, North Carolina, Georgia and Maryland surveyed more than 2,000 principal investigators whose NIH grants were terminated between January 20 and May 30, 2025. Nearly half (941 people) responded to the survey, where they reported their race, ethnicity, gender identity/sexual orientation, socioeconomic background, career stage and whether they identified as Jewish. The survey also asked participants to state what reason the NIH gave for terminating their grant; possible reasons included targeted termination (based on research topic), equity termination, gender-related termination or institutional termination.

Most grants (73.1%) were terminated for equity-related reasons. Black, Indigenous and people of color (BIPOC) who identified as women or transgender/nonbinary were three times more likely to have an equity-related termination than white cisgender men, and BIPOC cisgender men were almost twice as likely to lose funding compared with their white counterparts.

Women, Latinos, Black people, American Indians/Alaska Natives and Native Hawaiians/Pacific Islanders were more likely to receive targeted terminations. Among gender-related terminations, 60% identified as sexual and gender minorities. A fifth of investigators affected by institutional grant terminations, which were tied to alleged antisemitism, identified as Jewish.

“When funding disruptions disproportionately affect researchers who focus on health disparities, the consequences go far beyond individual careers,” Fielding-Miller said. “They also shape which scientific questions get asked and whose health ultimately receives attention.”

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