Activists Disrupt Global AIDS Conference to Protest Trump's Attack on HIV Funding

New data show Trump and Rubio caused severe deterioration in HIV programs and cut treatment for children, according to Health GAP.

July 27, 2026 By Health GAP

Activists Disrupt U.S. Global AIDS Coordinator Jeff Graham at International AIDS Conference, Protesting Trump's Chokehold on Congressionally Appropriated HIV Funding, Mass Closure of Key Population Programs, and Attacks on Transparent Oversight of PEPFAR Programs

New Data Show Trump and Rubio Responsible for Severe Deterioration in Program Outcomes, Including HIV Treatment Cut for 77,163 Children, 42% Reduction in PrEP Enrollment, Closure of 1700 PEPFAR HIV Treatment Sites, and More

Rio de Janeiro — Activists from directly impacted countries today [July 26] disrupted Senior State Department Official Jeff Graham, the acting US Global AIDS Coordinator responsible for PEPFAR [the U.S. President's Emergency Plan for AIDS Relief] and the Bureau of Global Health Security and Diplomacy (GHSD). Graham is the head of the U.S. government delegation to the 26th International AIDS Conference, the largest scientific conference on HIV in the world, opening today in Rio de Janeiro amidst turmoil caused by the Trump Administration's unprecedented attacks on HIV funding, science, and the human rights of people most affected by HIV. Graham was speaking during a session organized by the U.S. government at the AIDS Conference.

"The U.S. government must be held accountable for the ongoing, global public health emergency they are causing," said Anele Yawa of South Africa's Treatment Action Campaign. "No matter what the U.S. says in conference halls, we must believe the people served by PEPFAR, believe the data, and demand the U.S. reverse course."

"Erasing decades of progress and accountability to people with HIV and key populations is an outrage, and we must not allow it to continue on our watch," said Asia Russell of Health GAP.

The "America First Global Health Strategy," which programs most HIV and global health funding through bilateral Memoranda of Understanding (MOU) that shift control to governments and rapidly wind down PEPFAR programs whether or not they are ready, was the focus of Graham's

session. In sharp contrast to transparent and data-driven PEPFAR programming during prior Republican and Democratic administrations, Trump's MOUs have been marked by secret negotiations, sharp funding cuts, refusal to meaningfully engage independent civil society, and onerous and corrupt conditionalities, such as threatening to withhold HIV funding unless non-health related policy demands such as U.S. access to mineral wealth were granted.

As a result, MOUs are stalled or stopped in Ghana, Zimbabwe, South Africa, and Zambia, comprising one-third of people living with HIV worldwide. Zambia's Minister of Foreign Affairs, Mulambo Haimbe, has publicly rebuked the approach. By concentrating power between governments that often reject the human rights of people most affected by HIV, and removing independent, data-driven monitoring, activists point out that Trump's approach forecloses PEPFAR's ability to rapidly identify and address program failure in partnership with countries, a crucial factor in PEPFAR's decades of impact. Meanwhile, the Trump administration's expenditure of PEPFAR's funding has slowed to a snail's pace, in defiance of the will of Congress, forcing clinics already reeling from 2025 funding freezes to fire staff, cut corners, and slow or stop enrolling people.

"We defeat HIV with ambitious programs, transparent data, accountability to communities, and human rights," said Charles King, CEO of Housing Works. "Arm twisting and coercion make us all less safe—this shameful approach must stop."

New data released during the AIDS2026 conference reveal deterioration across treatment and prevention that Trump's approach is causing, particularly for key populations, children and people with advanced HIV disease: following closure of 1,700 treatment sites and other massive disruptions reported by PEPFAR funding recipients, HIV testing, diagnosis, treatment, and clinical care for adults, adolescents and children have seriously deteriorated or declined, including a 42% drop in PrEP enrollment and a 12.4% reduction in children on HIV treatment representing a 45% in treatment for HIV positive children in South Africa alone.

In addition to ongoing harms, new policy decisions by the State Department will further undermine progress, according to activists. For example, State's abrupt cessation of a massive procurement and supply chain management contract responsible for delivering life-saving HIV and malaria commodities across dozens of countries is set to take effect October 1, 2026, with virtually no handover plan, creating the unprecedented risk of deadly stock outs and shortages.

In addition, the State Department is quietly eliminating CDC's role as a major PEPFAR implementer, essentially duplicating Trump's decimation of USAID in 2025, but targeting CDC's PEPFAR role instead. State does not have the capacity or expertise to duplicate CDC's role; CDC currently supports treatment for more than 14 million people with HIV and uses its PEPFAR role to perform vital global health security work reaching pandemics beyond HIV. This work would end on October 1 unless Congress intervenes to stop implementation of State's policy.

This press statement was originally published July 26, 2026, by Health GAP. An international advocacy organization, Health GAP is dedicated to ensuring that all people living with HIV have

access to life-saving medicines, that there is sufficient funding to ensure access, and that treatment programs deliver quality care.

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