

PRESS STATEMENT

For Immediate Release: 4 March 2025

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Illegal termination of 5,800 USAID programs including HIV, TB, malaria, Ebola, and virtually all health assistance will result in countless deaths and will devastate health outcomes in Uganda and around the world

The Trump Administration Must Restore HIV and all Health Assistance Programs Immediately

(Kampala) Civil society reacted today to the elimination by the Trump Administration of 5,800 U.S. taxpayer-funded and Congressionally-approved USAID awards.

On February 26, in response to increasing pressure from the U.S. Courts ordered to restart foreign aid, which has been frozen since January 24, the State Department abruptly announced it was completely terminating 90% of USAID's programs.

In Uganda, it appears only four USAID-funded programs have been spared from termination. Globally, the terminations do not follow any pattern. Many of the programs that had sought and received 'waivers' from the January 24 funding freeze were also terminated, including life saving HIV, tuberculosis, Ebola, and emergency food aid programs.

"This is nothing short of a crime against humanity—with these moves, the U.S. government is attempting to destroy the HIV response and will be responsible for preventable deaths, sickness, and destruction in our communities." said Lillian Mworeko, Executive Director of International Community of Women Living with HIV/AIDS Eastern Africa (ICWEA). HIV treatment for 1.3 million Ugandans had been supported by US government funding. (More about the impact for Uganda of the Stop-Work Order is [here](#).)

[USAID officials leaked internal memos on 2 March estimating](#) the catastrophic human harms from these decisions, including a 40% increase in malaria deaths, 28,000 cases of Ebola, 200,000 new cases of children paralyzed with polio, one million children robbed of treatment for severe malnutrition, and more than 28,000 new cases of Ebola and other infectious diseases every year. (See more [here](#) and [here](#)). In South Africa alone, [scientists predict an end to the PEPFAR program](#) will result in more than 600,000 additional deaths over ten years and 565,000 new infections.

Uganda is currently battling Ebola outbreak, and the USAID-led Ebola response, through Baylor Uganda, UNICEF, IOM and URC, [was defunded and then terminated](#).

A 4-year old Ugandan boy died on Monday from Ebola, and U.S. Ambassador William Popp has linked the ongoing outbreak with termination of USAID funding.

In addition to elimination of many of Uganda's HIV testing, prevention, treatment and care programs, community-led programs supporting vulnerable and stigmatized communities have been killed off.

"1.4 million Ugandans are living with HIV and millions more are at risk of becoming HIV-positive," said Richard Lusimbo of Uganda Key Populations Consortium. "Our progress has come when communities are at the center of Uganda's HIV response. Criminalized Ugandans are at greater risk of HIV acquisition around the world, and community-led responses are essential to ensuring access to quality services; these highly effective programs have also been eliminated with no justification or explanation."

According to activists, virtually eliminating all USAID programs is not only cruel and wasteful and dangerous, it is also illegal; only an act of Congress can close USAID, not the President; funding for these lifesaving health programs was already budgeted for by Congress and cannot be diverted for other purposes by Trump—because Congress has sole authority to appropriate funds.

Civil society groups also demanded that our parliament and president take action. "The health, dignity, and lives of millions of Ugandans hang in the balance, and we urge the Government to act swiftly, decisively, and transparently," said Kenneth Mwehonge of HEPS-Uganda. "We are calling for an emergency supplementary appropriation by Parliament to close the severe gaps and ensure uninterrupted access to evidence-based and human rights-supporting testing, prevention and treatment for HIV, tuberculosis, malaria, mpox, Ebola, and all other health priorities Ugandans are facing. The government must wake up and massively scale up its investment in our health priorities."

*****ENDS*****

Background: Statement of demands by Civil Society Organizations

We, the Civil Society Organisations (CSOs) working on health, human rights, and social justice, together with networks of People Living with HIV (PLHIV) and those affected by HIV in Uganda, recognize and commend the Government of Uganda, through the Ministry of Health, Uganda AIDS Commission and other line ministries, for the ongoing commitment to improving healthcare access, equity, and quality. We also appreciate the role of legislators in ensuring budgetary allocations for the health and well-being of all Ugandans.

We further note the proposed integration of HIV & AIDS, malaria and TB services into routine outpatient and chronic disease care, a necessary step to mitigate the service gaps created by the termination of US-funded healthcare programmes. This integration, if effectively planned and resourced, could help sustain access to essential health services for Millions of People Living with and affected by HIV, pregnant mothers, children, and other vulnerable groups.

However, we express our deep concern over the severe impact of the abrupt cancellation and the freeze of US funding and the sudden termination of contracts with key implementing partners. These partners have long supplemented Uganda's health budget and played a critical role in delivering life-saving services. The resulting service vacuum has and will put the lives of PLHIV, pregnant mothers, children, and other vulnerable populations at immediate risk.

Additionally, the unplanned phase-out of stand-alone HIV and TB clinics and ART facilities, without addressing systemic barriers to care, poses a serious threat to service quality, exacerbated stigma, retention in care, and Uganda's overall progress in the HIV and TB, malaria and other diseases response.

Our Key Demands:

In light of these developments, we **call upon the Government of Uganda** to:

1. Assess and share publicly the immediate and long-term impact of the US funding freeze and the termination of implementing partner support.
2. Develop and share a clear road-map, with timelines and resources, outlining how the government will assume full responsibility for the health sector, with a particular focus on sustaining health services, strengthening community systems, towards achieving universal health coverage (UHC).
3. Immediately establish an Emergency Task Force within the Uganda AIDS Commission, as previously agreed, to coordinate an effective and inclusive national response to the current crisis.
4. Ensure the Ministry of Health prioritizes increased health sector financing in the forthcoming cabinet paper, to cover funding gaps and ensure continued access to life-saving HIV, TB, maternal, and child health services.
5. We urge the government to expedite the establishment of a National Health Insurance Scheme (NHIS) to ensure equitable access to quality healthcare for all Ugandans. As civil society organizations, we are fully committed to supporting the government in this process by providing technical expertise, mobilizing communities, and fostering multi-stakeholder engagement to ensure the successful implementation of the scheme.

6. We urge the government to fast-track the finalization of the HIV Sustainability Roadmap to ensure long-term, sustainable financing and effective response to the HIV epidemic. Accelerating this process will strengthen Uganda's commitment to ending HIV as a public health threat and enhance resource mobilization, efficiency, and accountability in HIV programming.

The **health, dignity, and lives of millions of Ugandans hang in the balance**, and we urge the Government to act swiftly, decisively, and transparently to avert a potential public health crisis. Uganda has made significant progress in combating the HIV epidemic; therefore, this is not the time to lose the gains we have tirelessly worked to sustain.

As **civil society organisations, individuals and networks**, stand ready to support the government in addressing these challenges and ensuring that no one is left behind in Uganda's health response.