

# FROM HARM TO HOPE

Advancing gender equality, SRHR and global alliances under the weight of US foreign policy

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### 1. INTRODUCTION

This report is a follow-on to the report Global Impacts of Project 2025: how the blueprint for the next Republican administration may impact US foreign and development policy on SRHR and gender equality<sup>1</sup>, released in September 2024 by the Swedish Association for Sexuality Education (RFSU).

The objective of this new report is to help make sense of the chaos that has ensued and the onslaught against global sexual and reproductive health and rights (SRHR), women's rights, and LGBTQI+ rights since the inauguration of President Donald Trump in January 2025 and the rapid and brutal implementation of Project 2025. It outlines potential future actions from the administration and makes recommendations for how to defend and advance SRHR<sup>2</sup> and strengthen national ownership in a rapidly shifting geopolitical landscape.

In the current context, it is important not to lose sight of the tremendous global support for advancing SRHR and gender equality in the three decades since the International Conference on Population and Development (ICPD) in 1994. While not without setbacks, these commitments have been backed in parallel by huge advances in global commitment to SRHR as a fundamental human right.<sup>3,4</sup>

While US support has fluctuated based on political leadership, particularly regarding abortion-related funding restrictions, the US government has historically played a leading role in advancing global health, the HIV response and SRHR. Providing US\$66 billion in foreign assistance in 2023 (US\$12.4 billion of which was allocated to global health), it was the largest global funder and the largest provider of technical assistance by a significant margin.<sup>5</sup> This high-value position meant the US government was central to achieving many health and SRHR outcomes, and it had enormous influence on many UN agencies and in many lower- and middle-income countries (LMIC). Many countries, UN agencies, and international NGOs were highly dependent on US government funding, the scale of which is only now being fully understood.

While the actions of the US government are hitting particularly hard, other major global health donors such as the UK, Sweden, Switzerland, Germany, Finland, Belgium, the Netherlands, Italy, and the European Union have made major cuts in their official development assistance (ODA), including for global health. As a consequence, ODA is seen by national stakeholders in LMICs as less reliable and predictable overall.

The dependency on US foreign assistance is now being leveraged by President Trump as a political advantage. In his first 50 days in office, President Trump has signed over 100 executive orders (EOs) shaking the geo-political order to its core. The volte-face removal of support for foreign assistance has resulted in the termination of over 83% of US Government aid commitments, a constitutional overreach that has resulted in unimaginable hardship.<sup>6,7</sup>

As well as dismantling USAID and US foreign assistance, additional threats to abortion access, bodily autonomy, gender equality, and SRHR has come via the administration's anti-rights executive actions. Among these are the **Geneva Consensus Declaration**, the **Mexico City Policy** (also known as the Global Gag Rule), and new actions such as dismantling support for **diversity**, **equity and inclusion (DEI)**, which aim to undermine support for the Sustainable Development Goals and people facing multiple and intersecting forms of discrimination and disadvantage. This is in addition to withdrawing from the World Health Organisation (WHO), UNESCO and the Human Rights Council. Withdrawing and terminating large-scale commitments to these UN entities is designed to hobble global health governance and important normative work on sexual and reproductive health and rights.

In doing so, the Trump administration, in alliance with the global Christian extreme right, aims to invest and build a new global order based on conservative, religious values centred on a hetero-normative family structure and 'traditional' sex-based 'gender' norms.<sup>8</sup>

The sheer volume, sweeping extent, and rapid implementation of these executive actions have succeeded in 'flooding the zone'. Flooding the zone is a media strategy designed to overwhelm the opposition with scale, depth, and urgency. It is a tactic to manipulate and control people by bombarding them with so much information that public discourse is fragmented, making it difficult to analyse and respond critically.

The world is facing the biggest risk to global health and SRHR in decades. The financial gaps are too big to be filled, and many of the systems for development assistance need to change to be relevant going forward. But there are still many things that the international community can focus on to contain some of the most devastating immediate impacts while at the same time establishing new approaches. These are ways of working that strengthen national ownership, leadership, and movements in the global south, and reverse the power imbalances between the actors in the global north and south, while recognizing the influence of other partners such as China.<sup>9</sup>

While the US government's actions may have ushered in a post-aid world, we must unite under a 'bigger tent' to defend human rights, rebuild trust, and reinvigorate global solidarity. This report provides recommendations aimed at **mitigating**, **advocating**, **reformulating** and **financing** new ways of working in defence of SRHR, gender equality, and the rights of the LGBTQI+ community.

### 2. THE RAPID IMPLEMENTATION OF PROJECT 2025

"WHEN SOMEONE SHOWS YOU WHO THEY ARE, BELIEVE THEM." MAYA ANGELOU, 2008

#### 2.1. PROJECT 2025

Project 2025 is the brainchild of the Heritage Foundation, an influential American right-wing think tank working with a broad coalition of ultra-conservative and Christian nationalist groups. In 2024, they made public their policy plans if Donald Trump won the presidential election. These plans were detailed in the 'policy pillar' of Project 2025, namely a 920-page policy promise titled Mandate for Leadership. The Mandate maps out sweeping reforms that are anti-democratic, with detailed plans for cutting foreign assistance, restricting USAID, the removal of a political career civil service and putting far-right political partisans in their place. It has a central focus on 'fetal personhood' and 'heteronormative' family structure. It proposes dismantling diversity, equity and inclusion (DEI) programmes, ensuring that the UN complies with American foreign policy aims, and recommending withdrawal from key UN agencies and bodies. Concerning safe abortion, the Mandate mentions abortion 199 times. It lays out plans for a massive expansion of the Mexico City Policy (also known as the Global Gag Rule) and recommitting the US government to the Geneva Consensus Declaration (GCD).

The first RFSU report outlined key approaches that a future Republican administration would use to dismantle the existing international and foreign policy system.<sup>10</sup> These were broadly described as:

- Dismantling the administrative state and politicising the civil services

   and it singles out USAID as the pilot case.
- 2. Centralising additional power in the hands of the president through reliance on executive actions and restructuring federal agencies.
- 3. Co-opting the narrative and misinformation on human rights.
- **4.** Breaking down the rules-based multilateral order as well as the architecture that supports the channelling of official development assistance, and silencing dissenting voices.
- 5. Building a new international system with faith-based and private sector actors at its core, the implementation of the Geneva Consensus Declaration and the expansion of the Mexico City Policy (also known as the Global Gag Rule).<sup>11</sup>

Despite disavowing Project 2025 during his election campaign, the Trump administration has appointed 18 of its architects to influential positions in the government. Russell Vought, appointed as the Director of the Office of Management and Budget (OMB), a critical government position, was Project 2025's key architect.

Project 2025 was designed to be implemented from day one, and all five approaches listed above have already been unleashed. However, the actions over the last two months cannot be explained solely by the Project. Project 2025 should not be seen as a 'stand-alone' initiative but rather an integral part of the wider global anti-gender and anti-SRHR movements. Its architects are intimately linked with transnational anti-rights movements. The Alliance for Defending Freedom, for example, has provided support for far-right, anti-rights movements in Europe. 13,14,15 The focus on eliminating support for diversity, equity and inclusion (DEI) programmes and restoring 'merit-based opportunity' (sic) can be traced to racist approaches at the core of conservative evangelical activism and the growing power of groups such as the New Apostolic Reformation (NAR) who believe they are waging a battle for control of the United States. 16,17

# 2.2 THE EXECUTIVE ORDERS AND THEIR IMPACT ON SRHR, GENDER EQUALITY AND LGBTQI+ RIGHTS

Of the more than 100 executive orders (EOs), at least nine directly impact multilateralism and foreign assistance and target actions against SRHR (with a particular focus on abortion), gender equality, gender identity, and DEI specifically. Despite never being debated or agreed upon in Congress, these EOs are considered and implemented as American foreign policy.

# THEMATICALLY, FOUR EXECUTIVE ORDERS HAVE GRAVE DIRECT IMPACTS ON SRHR:

- Attacking gender and promoting a new concept of 'gender ideology' (20 January) <u>Defending Women from Gender Ideology Extremism And Restoring Biological Truth To The Federal Government.</u>
  This EO will have a profound negative effect on women and LGBTQI communities. In addition to being an attack on the transgender community, it states that biological sex is determined at conception. Doing so may also signal at what stage the administration believes 'life' begins. The term 'gender ideology' itself is not rooted in academic gender studies; instead, it was constructed as a political tool by religious and conservative actors in the 1990s to resist gender as a social construct and the gender equality positioning in the ICPD Programme of Action. It has been challenging to counter because 'gender' is being framed as a 'Western imposition' that threatens traditional family values and national sovereignty.
- Eliminate diversity, equity and inclusion (DEI) Programming (20 January) Ending Radical and Wasteful Government DEI Programs and Preferencing. This EO states that DEI policies conflict with US policies and that special measures designed to promote equality and equal opportunity are discriminatory. The EO aims to eliminate "all forms of discrimination" (sic) and create equal opportunities for all, which should be based solely on hard work and merit.
- Reinstating the Global Gag Rule <u>Presidential Memorandum the</u> reinstatement of the Mexico City Policy (24 January)

Rejoining the Geneva Consensus Declaration (GCD) – Press
 Statement by the Secretary of State: Renewed Membership in the Geneva Consensus Declaration on Promoting Women's Health and Strengthening the Family (24 January)

STRATEGIC AND OPERATIONAL EXECUTIVE ORDERS THAT UNDERMINE THE FOUNDATIONS OF FOREIGN ASSISTANCE, MULTILATERALISM AND RISK AUGMENTING HUMAN RIGHTS VIOLATIONS INCLUDE:

- America First America First Policy Directive to the Secretary of State (20 January) - directive to put core American interests first in foreign policy.
- Dismantling foreign assistance Presidential Action Reevaluating and Realigning United States Foreign Aid (20 January). This granted a 90-day pause to assess all current grants in line with US foreign policy. This has now concluded, and grants have been terminated.
- Withdrawing from WHO and thereby undermining science, evidence, and international cooperation in health – Presidential Action – Withdrawing the United States from the World Health Organisation. This will be operational within a year. Currently, US officials are not participating in any governance or technical dialogue.
- Withdrawing and undermining the rules-based multilateral order Withdrawing the United States from and Ending Funding to Certain United Nations organisations and Reviewing United States Support to All International Organisations. This EO states that within 180 days (in August 2025) the government will conclude a review of all international intergovernmental organisations of which the US is a member or provides any type of funding or other support, and all conventions and treaties. This could include the UN Charter itself. UNRWA (relief for Palestine), UNHCR (refugee and humanitarian), and UNESCO (leading work on comprehensive sexuality education (CSE)) are singled out for scrutiny.
- Threats to human rights defenders Radical Transparency about Wasteful Spending, 18 February. This is a 'stealth EO' that could easily be overlooked given its innocuous title. It focuses on programmes that do not promote the interests of the American people and the subsidisation of "ideological projects overseas". This EO calls for the release and publication of the complete details of every terminated programme. This could mean the massive release of privileged information, including information on projects that support LGBTQI+ rights in many countries, giving anti-rights groups tools to attack organisations working for human rights and social justice.

### 3. IMMEDIATE IMPACTS

With these executive orders and the subsequent actions, the US Government has made clear its intention to leverage its financial and diplomatic might to dismantle the existing architecture for multilateralism and foreign assistance. In the chaos and gaping chasm of needs that have been created, it is essential not to lose sight of the targeted attack on abortion rights and marginalised communities and the reversal of support for SRHR. This has already started through the administration's opposition to agreements in multilateral processes, its removal of financial support to key UN organisations and the termination of ODA in low- and middle-income countries (LMICs). Special attention has been focused on eroding commitment for safe abortion, for LGBTQI+ communities and any other community facing multiple and intersecting forms of discrimination (such as persons living with disabilities).

#### **IMPACTS ON FOREIGN ASSISTANCE**

Of the actions since January 2025, the most egregious and immediate impacts have been felt by the dismantling of US foreign assistance. The White House completed its <u>review of existing foreign assistance</u> projects on 26 February. In the aftermath, not much was left. While exact figures are difficult to ascertain, a reported 83% of USAID projects have been terminated, amounting to between 5,200 and 5,800 out of 6,200 projects, with another 2,700 projects at the State Department. In addition, it is reported that only a skeletal staff of 294 employees at USAID have been retained to run the waiver system and complex humanitarian programmes. The final phase of the '90-day review' is to redesign the US international assistance architecture, and is underway. The future of hallmark programmes with bipartisan support, such as the President's Emergency Plan for AIDS Relief (PEPFAR), hangs in the balance.

The shutdown of USAID has led to layoffs around the world, among the US INGOs that implemented the project, in the UN, which was heavily reliant on US support, and most importantly, in LMICs themselves, where the lay-off of thousands of health workers have been reported.

The 'pause' and subsequent cancellation of grants have had devastating impacts, largely due to how they were implemented. While some waivers were granted for 'lifesaving' efforts such as HIV treatment and food aid, the system has been chaotic. With most USAID staff dismissed and the payment system closed, it is unclear how many waivers are operational. Additionally, waivers for HIV treatment and prevention were permitted, though pre-exposure prophylaxis (PrEP) has been authorised only for pregnant and breastfeeding women, not for key populations (gay men, sex workers, people who inject drugs, trans people, etc.). Family planning services were also not permitted under the waivers, which also explicitly prohibited DEI activities. As a result, stand-alone clinics for key populations remain closed. Such actions around DEI are designed to create a wedge in the solidarity among the wider SRHR community and force us to choose services for one community over another.

The full human costs are not yet known. New data emerges every day, and the legacy of this 'policy' decision will be felt for decades. These actions were designed to do maximum harm to the world's poorest and most vulnerable people. The inhumanity is hard to comprehend. The Gutt-macher Institute estimates a full 90-day pause would leave approximately 11.7 million people without family planning services, thereby triggering an estimated 4.2 million unintended pregnancies and thousands of preventable maternal deaths in 2025 alone. Put another way, the FY 2024 US\$ 607.5 million in family planning assistance averted approximately 17.1 million unintended pregnancies, 5.2 million unsafe abortions, and helped avert 34,000 maternal deaths. Family planning saves lives. 26

#### COUNTRY IMPACTS: KENYA

In addition to aggregate harm due to a lack of SRHR and HIV services, health systems are on the verge of collapse.

- Over 35,000 health workers lost their jobs.
- 150 health clinics have closed.
- The health sector received the largest share of US government funding and will lose US\$ <u>275.5m annually.</u> Already <u>borrowing US\$ 3.5m a day,</u> the current crisis is set to exacerbate Kenya's debt.
- Already experiencing wide youth unrest as a result of corruption, this situation could lead to further unrest and demands for change.

Source: Adinda, Over 35,000 jobs lost, 150 clinics shut down as USAID freeze hits Kenya, the Eastleigh Voice, 13 February 2025.

## CIVIL SOCIETY IMPACTS: INTERNATIONAL PLANNED PARENTHOOD FEDERATION (IPPF)<sup>27</sup>

The estimated funding cancelled, or at risk for IPPF, the world's largest SRHR organisation, is US\$ 85 million. Over the next four years, IPPF projects that the cuts in funding will lead to 8.5 million people being denied access to essential SRHR services and over 3800 more maternal deaths.<sup>28</sup>

Seventy-two Member Associations (MAs) report 156 projects that have been shut down or are at risk of being cut down. The cuts among IPPF's MAs spread across various donor sources, including 74 UNFPA projects that have been or are at risk of being cut. This highlights the compounding effect of US cuts to multilateral agencies – more MAs are impacted by the cuts to UNFPA than by direct losses of US foreign assistance. Much of the UNFPA-funded work now at risk is in conflict-affected, fragile, and humanitarian settings such as Afghanistan, meaning services are cut for some

of the most vulnerable populations in the world. These projects provide sexual and reproductive health services for millions of women and youth across all regions. Member associations in Afghanistan, Burkina Faso, Cameroon, Côte d'Ivoire, Kenya, Liberia, Mozambique, Niger, Pakistan and Togo are among the hardest hit as these IPPF MAs are based in previous USAID focus countries.

IPPF Togo (ATBEF) alone estimates a loss of US\$ 8 million across two multi-year projects with USAID and UNFPA, representing over 50% of ATBEF's annual budget for 2025. An estimated 230,000 clients are losing access to services as 60% of ATBEF's SRH services are affected.

#### THE US PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF (PEPFAR)

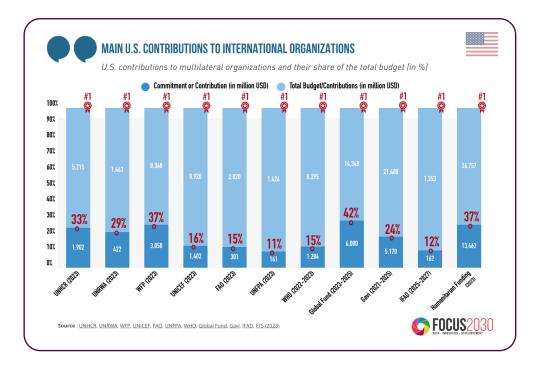
More than 70% of the funds allocated to the fight against HIV worldwide come from PEPFAR<sup>29</sup>, the world's (previously) largest source of funding for the global HIV response. Outcomes for HIV prevention and treatment are grave. Figures produced by the Centre for Global Development and the New York Times estimated 1,650,000 people could die within a year without American foreign aid for the HIV response, and devastating stories are being reported of the deaths of children living with HIV in South Sudan since treatment has stopped.<sup>30</sup> A study published by amfAR, the Foundation for AIDS Research, warns that the number of new HIV infections among infants could rise to 1,471 per day of suspension of activities.<sup>31</sup>

Despite stated waivers for humanitarian food aid, the impact on countries such as Sudan, Bangladesh (Cox's Bazar), and Ethiopia has been devastating. In 2024, nearly 16 million Ethiopians <u>relied on donated grain</u>, and food rations have been cut in half.

Not all countries are affected equally within this context. The Center for Global Development found that 26 LMICs, with a combined total population of 1.38 billion people, are both highly exposed to US global health aid cuts and highly fiscally constrained, meaning they are least able to adequately respond.<sup>32</sup>

#### **IMPACTS ON THE UNITED NATIONS**

The impacts on funding for UN funds and programmes have been enormous.<sup>33</sup> The UN is heavily dependent on US government funding, particularly for a number of agencies working in Global Health (see figure below).



In addition to the figures in the chart, UNAIDS has an estimated 48% of its resources from the US government, and UNFPA is facing severe cuts, particularly in its humanitarian programming (see text box).

As the cuts take hold, it becomes increasingly hard to fathom how the UN system became so dependent on, and vulnerable to, the shifting policies of a single member state. Not only is the delivery of services severely affected, but there is also the risk that UN agencies will compromise their human rights obligations for gender equality or DEI to keep funds flowing to save lives. These are complex and unimaginably difficult decisions.

#### **IMPACTS ON UNFPA**

- Termination of all funding agreements with the US, 43 grants worth US\$ 330 million providing critical maternal health care, protection from GBV and other life-saving care.
- 25 countries affected, including Afghanistan, where maternal health and wider services have been halted for nine million women and in Occupied Palestine, where eight mobile obstetric units and 40 safe spaces for women and girls and the supply of medicines to 80 health facilities have been halted.

Source: UNFPA, April 2025

The policies and actions of the second Trump administration have provided tacit approval to authoritarian regimes to pursue anti-rights agendas, particularly concerning abortion and SRHR. By aligning with and supporting international declarations that oppose abortion rights, reinstating restrictive funding policies, and signalling domestic tolerance for anti-abortion activism, the administration has contributed to a global environment where the rollback of reproductive rights is increasing, as demonstrated in its close alliance with President Javier Milei of Argentina.

### 4. WHAT COMES NEXT?

In a leaked plan on US foreign aid reform that was circulated by Trump aides, it is stated that "Aid should not be philanthropic in nature but must advance our direct national security, strategic and commercial interests." 34

While nothing is predictable in this administration, there are sufficient signals that it will not be content with rewiring only the US government's official development assistance. To put in place plans for a new world order, the US administration needs to have full influence over LMICs, crippling their economies and health systems to pave the way for future foreign assistance built on conditions and concessions. US government foreign assistance has shrunk dramatically, and it is expected to stay at a much lower level. What emerges going forward will be tied to full compliance with the new US America First foreign policy objectives as outlined in the executive orders. There can be no doubt about this. The core tenet of a future aid architecture is "whether it will make America safer, stronger and more prosperous."

Questionnaires distributed by the US Department of State to recipients of current and recently terminated foreign assistance, including the UN, ask respondents how their programmes serve American foreign policy interests, whether they promote gender ideology or diversity, equity and inclusion or climate justice programming, whether they are compliant with the Mexico City Policy and whether they strengthen US supply chains and access to rare earth, among other things. 35,36,37 There are several key normative areas where the US government will attempt to exert influence, and there are a number of operational strategies that will be used to accomplish this.

#### **NORMATIVE AREAS RELATED TO SRHR:**

- 1. INTENSIFIED ANTI-ABORTION AND ANTI-GENDER POLICY ACTIONS THROUGH ATTEMPTS TO WEAKEN NORMATIVE STANDARDS AND GLOBAL AGREEMENTS.
  - The Geneva Consensus Declaration (GCD) could be a major foreign policy tool. On 24 January, Donald Trump recommitted his administration to the GCD<sup>38</sup> on Promoting Women's Health and Strengthening the Family. In doing so, the GCD became part of what this administration considers American foreign policy and, because of that, it could be positioned as a major foreign policy tool and condition in bilateral negotiations with LMIC governments. It is important to remember that the GCD is not a UN multilateral agreement, but it tries to position itself as one. It has a 'UN-like' official seal, and this one-page document's language is captivating; it reaffirms human rights and universal health coverage and quotes key UN declarations. It is only when you read it carefully that you begin to understand its meaning and that it is vehemently anti-choice. With purportedly 39 governments currently as signatories (including some countries

where the legal right to abortion is enshrined,<sup>39</sup> the architects of the GCD invoke the rhetorically potent phrase 'ideological colonialism' to critique the growing global advances on sexual and reproductive health and rights, which are in fact a defense of pluralism and rights. In reality, it is the declaration's signatories who are advancing a rigid ideological agenda by seeking to enforce a narrow, often religiously rooted worldview on a diverse global community. The GCD has been established to create a transnational alliance united under the guise of protecting national sovereignty and family values, along with opposition to abortion and LGBTQI+ rights. The power of this transnational movement would be to get signatories to work as a block in multilateral negotiations and to block service access in their countries.

- The Women's Optimal Health Framework (WOHF), developed by the Institute for Women's Health (IWH) is positioned as the programmatic arm of the GCD. This programme is often referred to as **'Protego'**, which is a Latin term meaning 'to defend' or 'to protect'. The Protego Framework has no basis in the normative standards and evidence supported by the World Health Organisation, UNFPA, or leading research bodies. It is anti-abortion, anti-CSE and promotes a heteronormative family structure.<sup>40</sup> Valerie Huber, a senior appointee in Trump's first administration, is also the President and CEO of the IWH. She is a leading contributor to Project 2025's Mandate for Leadership, and the architect of the Geneva Consensus Declaration and Protego.<sup>41</sup> Similar language and concepts are used throughout these three influential anti-SRHR documents. Huber states that they have been working through the Protego model to help countries implement the commitments they made in the GCD, so countries have the skills and resources.<sup>42</sup> Huber is known for promoting abstinence-focused sex education and 'natural' contraceptive methods and has spearheaded programmes that led to the closure of some evidence-based family planning programmes. 43,44 Project 2025's Mandate also targets comprehensive sexuality education (CSE). This evidence-based intervention has long been a lightning rod for anti-rights groups as it brings together core thematic issues of adolescents, families, the role of the state, and LGBTQI+ rights and bodily autonomy. The approach to attacking CSE is based on creating paranoia and fearmongering.<sup>45</sup>
- LMICs may be asked to sign up to the GCD in exchange for US ODA. Given the GCD's position in American foreign policy and the US government's use of transactional and conditional foreign assistance, it is highly probable that governments in LMICs would be asked to sign up to the GCD in exchange for foreign assistance.
- The Mexico City Policy (Global Gag Rule) will likely be expanded, in line with Project 2025. This means extending it to all foreign assistance (including humanitarian), to US entities that receive US government money, and to public interest organisations such as the UN and the Global Fund and as a condition on governments that received direct bilateral assistance. For countries such as Ethiopia, Mozambique, and Ukraine that are highly dependent on US foreign

assistance and have relatively liberal abortion laws, this insistence would have a devastating impact on maternal mortality and unintended pregnancies, not to mention on a country's sovereignty by pressuring it to work against its own laws and policies. Failure to sign, however, risks losing all other forms of assistance, including food aid. The harms of the GGR extend well beyond safe abortion and would shrink civic space and dialogue. The global scale of its harm will depend on the amount of US foreign assistance going forward.<sup>46</sup>

- Linkages between anti-rights movements and pronatalist movements may intensify. This approach would be consistent with growing pronatalist intentions among many Republican figures and Elon Musk, who encourage higher birth rates and reinforce traditional family structures. The US government's future assistance is likely to restrict access to family planning and abortion, approaches that strip women of choice and bodily autonomy and treat their bodies as birthing vessels.<sup>47</sup>
- 2. ATTACKS ON MULTILATERALISM AND ITS FRAMEWORKS THE SDGS, GENDER EQUALITY AND DIVERSITY, EQUITY AND INCLUSION (DEI).
  - Using Gender framed as 'gender ideology' and DEI as a lever to unravel global solidarity for the Sustainable Development Goals and paving the way for a new world order. In March, the US government formally withdrew its support for the UN's Sustainable Development Goals (SDGs) during a United Nations General Assembly meeting, citing the SDGs' inconsistency with American foreign policy.<sup>48</sup> In putting its foreign policy first, the US government hopes other countries will also put their interests first, undermining the entire system. Advancing opposition to DEI is also central to advancing the US government's objectives. 49,50 The proponents of anti-DEI measures say that it undermines the tradition of American values of hard work, excellence and individual achievement and shuts people out because of their race, sex and ability. This is a classic and purposeful appropriation of human rights. In the US Explanation of Position on the CSW political declaration, it is stated that: "Although framed in neutral language, the 2030 Agenda and the SDGs advance a program of soft global governance that is inconsistent with US sovereignty and adverse to the rights and interests of Americans."51
  - Anti-DEI measures aim to eliminate the central tenet of the Sustainable Development Goals to "Leave no one behind."
    Being purposeful in terms of equity and gender is essential to realising this vision, reaching 'last mile populations', and achieving Universal Health Coverage. Insisting the UN abandon DEI would also violate the United Nations International Covenant on Economic, Social, and Cultural Rights (ICESCR), which requires that rights be exercised without discrimination based on race, sex,

language, religion, or other status. The United Nations Economic and Social Council (ECOSOC) plays a key role in monitoring and advancing economic, social, and cultural rights. Any sustained pushback against DEI, especially legal and political restrictions, would indicate a weakening of national commitments to these global goals. Let us not forget that this administration will still be in place when the proposals for the post-2030 agenda are being designed. The UN system itself and its charter are at a major inflection point.

• Prevent consensus on key resolutions and declarations. The tools of multilateralism are multifaceted. In the first few months of this US administration, multiple attempts were made to prevent political declarations from passing by consensus, most recently the effort to stop the passage of the Political Declaration at the Commission on the Status of Women. As an example, in the US Explanation of Position on the CSW political declaration, it is stated that:

"However, several aspects of the text make it impossible for the United States to support the Declaration. These include, but are not limited to 'Language to Protect Women and Girls'. It is the policy of the United States to use clear and accurate language that recognises women are biologically female and men are biologically male. It is important to acknowledge the biological reality of sex to support the needs and perspectives of women and girls. We are disappointed the Political Declaration did not focus on the needs and perspectives of women and girls through precise terminology." 52

While the US administration failed to stop consensus at the CSW (largely because it is not a current Commission member), it is a member of the Commission on Population and Development (CPD). This will make these negotiations particularly difficult. The main contested areas lie in seeking the removal of terms such as gender responsiveness, gender parity, multiple and intersecting forms of discrimination, diversity, equity and inclusion, and undermining global consensus. United Nations resolutions are formal expressions of the opinion or will of United Nations organs. While resolutions are often non-binding in nature, a UN resolution can still profoundly impact, guide, and influence national policies and legislations that may be binding. They can shape advocacy and support civil society efforts to call on governments to enact reforms. They can also strengthen funding and development programmes, and have been used to enhance regional and multilateral cooperation. Resolutions passed by consensus with strong agreements on gender equality, SRHR, and DEI are more substantive. Opposition organisations such as <u>C-FAM</u> have actively pushed to block consensus resolutions. Stopping consensus is a key element of US foreign policy going forward.

- Aggressive action by the executive boards of key UN agencies and programmes. Throughout February and March, the US government called votes and disrupted the Boards of UNICEF, UNWomen, and the World Food Programme (WFP), seeking the removal of language on gender and DEI. Even UNICEF country programme documents, usually passed by consensus, went to vote. WFP was sent a letter by the US administration instructing it to end work on gender ideology and to stop promoting diversity, equity and inclusion in its programmes, focusing instead on merit. 53 The irony of asking a programme that delivers food assistance to the most vulnerable people to do so without considering equity or inclusion cannot be lost on many people. This year, both UNFPA and UNAIDS will be presenting their new strategic plans to their executive boards for approval, and the US government sits on both their boards.
- Defunding of UN funds and programmes and withdrawing from key charters. While the US government already announced its withdrawal from WHO, other withdrawals and/or defunding should be anticipated, following the 180-day review of all organisations, funds and programmes as well as charters, treaties and conventions announced in the executive order. Given the immense dependency on the US government, a wider overhaul of the UN system could be called for.

# 3. EVIDENCE IS UNDER ATTACK AND A BATTLEGROUND FOR SRHR AND GENDER EQUALITY.

 Evidence itself is under siege – from its generation and dissemination to its integrity and legitimacy. For those committed to SRHR, gender equality, and human rights, this is not a technical concern; it is a frontline struggle. Actions of the US administration have instructed the National Institutes of Health (NIH) to terminate research grants that fund active scientific projects studying transgender populations, gender identity, diversity, equity and inclusion (DEI) in the scientific workforce, and environmental justice.<sup>54</sup> Similarly, scientists at the Center for Disease Control (CDC) have been instructed to withdraw or retract articles from medical journals on the same lines, and content from CDC and NIH websites has been removed, and grants to US universities have been terminated.<sup>55</sup> Already, the Protego framework exemplifies how anti-rights agendas are embedding themselves in national development policy under the guise of neutrality. Meanwhile, the US government may use the architecture of the CDC and NIH to fund and scale up its own 'evidence base' of anti-gender research and flood the zone with this work. This is not just a threat to SRHR. It is a systemic attack on the legitimacy of global technical and normative standards.

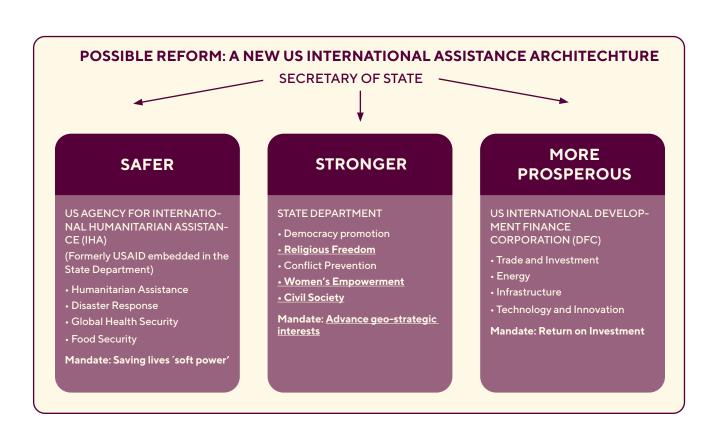
4. CONTAINING 'THOUGHT' AND DEVELOPMENT ASSISTANCE THROUGH OTHER US CHANNELS AND INFLUENCING THE ODA OF OTHER COUNTRIES.

• There may be further attempts to limit funding from US philanthropic organisations. Philanthropic organisations play a tremendous role in direct service support and opening civic space and thought. They have over US\$ 900 billion in assets. Recent US legislative and executive actions have raised concerns within the not-for-profit sector that the administration might try to limit the influence of foundations by challenging the tax-exempt status of organisations not aligned with the administration's policies. The fear is based on the very broad language in a November 2024 House bill focused on terrorism. Furthermore, through the DEI executive order, the president could order for investigations of diversity, equity and inclusion programmes targeted at larger philanthropies. 56

#### **OPERATIONAL APPROACHES**

- 1. Overall, budgets for international assistance are expected to decline, and future aid will be targeted at countries that benefit US foreign policy. Budgets for SRHR, including contraception and family planning services, are likely to be zeroed out, consistent with pronatalist approaches. This ends long-standing bipartisan support for family planning, of which the US government was the world's largest funder, at US\$ 607.5 million in 2024.<sup>57</sup>
- 2. Assistance will become conditional and transactional. Evidence of this is already apparent through this administration's actions in Ukraine, as documented in Project 2025, and numerous statements by Secretary of State Rubio and President Trump. The leaked State Department document clearly speaks of the intention to adopt a transactional assistance model, ultimately benefiting the American economy and providing geopolitical leverage.
- 3. Weaken recipient countries. In the case of many national governments in the global south, the sudden termination of foreign assistance has weakened many countries' health systems, bringing them to breaking point and potentially positioning countries to accept any condition for the resumption of aid.<sup>58</sup> While PEPFAR may continue, it is likely to be in a vastly different form, with conditions that go against the evidence and fundamental human rights, and risk splintering the community.
- **4. Attacks.** Furthermore, the implementation of the executive order on 'radical transparency' could lead to the massive release of privileged information, including information on projects that support LGBTQI+ rights in many countries, giving anti-rights groups tools to attack organisations working for human rights and social justice.

- 5. Intense focus on investments to advance US private sector interest. This is a central component of Project 2025 and the proposed new architecture. Meetings between the US administration and the Africa Centres for Disease Control and Prevention (Africa CDC) have already taken place, which have been characterised as 'treating health as a business' and identifying private sector opportunities in the local manufacturing of medicines, digitalisation of health records, and the electrification of clinics.<sup>59</sup>
- 6. A new structure for foreign assistance focused on making America safer, stronger and more prosperous. A leaked document from the State Department (see figure below) suggests the possible operational structure. Notable in this structure is the promotion of stronger religious freedoms, women's empowerment and civil society. These dimensions should be read in line with the executive orders and noted that they are positioned under state departments as investments to "Advance geo-strategic interests," not under the pillar to save lives.



### 5. WHERE DO WE GO FROM HERE?

The current crisis, marked by the withdrawal of the world's largest donor, is not just a funding gap. It is a rupture in trust and a stress test for human rights and the entire architecture of global solidarity. Global shifts are challenging long-standing norms of cooperation and assistance and human rights, shining a light on both power imbalances and structural challenges. But amid this uncertainty, we must hold resolute: the rights and choices of women, girls, and gender-diverse people are not negotiable. What must change is how we realise and deliver on them.

# REBUILDING TRUST BY REIMAGINING GLOBAL SOLIDARITY AND 'AID'

Trust, once broken, is hard-won. Rebuilding it will require more than emergency stopgap financing. It demands a reimagining of global solidarity and the design and delivery of Official Development Assistance (ODA) not as a north-to-south transfer, but as a collective platform for solidarity, justice, and shared responsibility. The centralisation of global health's financial power, political power, and normative technical leadership in a few places in the 'global north' works against the strategic interests of governments and civil society in the global south. OThe current global health model, despite a decade of pronouncement of 'ownership from the global south', is rooted in donor priorities, bureaucratic targets and the siloed responses, misalignment between external funding and national plans. Meanwhile feminist, LGBTQI+ and SRHR movements have been left exposed, fragmented, and underfunded. These critiques are not new, but the consequences are more visible than ever.

Development assistance, both official and through other actors, is one small piece of a larger puzzle. Going forward, to be relevant, it must be strategically harmonised with domestic funding, trade policy, debt relief efforts, philanthropy, and private sector investments, among others. National ownership and leadership must be at the centre of and drive the dialogue. Strong and vibrant civil society movements and parliaments can hold governments accountable for delivering SRHR and protecting human rights. The principle of subsidiarity is key.

#### SRHR IS NOT A SECTOR. IT'S A FOUNDATION.

In a world shaped by escalating crises – climate breakdown, conflict, pandemics, and democratic backsliding – ODA is at a crossroads. This is more evident than in the realm of SRHR. Often seen as a subsector within the global health or gender portfolio, recent events clearly show that SRHR underpins human security and global stability and should sit at the heart of our collective resilience.

Recent efforts by the US government to dismantle SRHR programming, while simultaneously rolling back human rights and legal protections, have revealed what has long been true: SRHR is not peripheral – it is foundational. At stake is not only access to health services, but the broader fight for democratic accountability and the legitimacy of international cooperation.

## RECLAIMING EVIDENCE: A STRATEGIC FRONT IN THE FIGHT FOR SRHR

A new battleground is emerging in evidence itself. The fight over what constitutes legitimate knowledge and how it is used is now a central front in efforts to undermine SRHR and gender equality. Research contracts have been cancelled, datasets deleted, peer-reviewed publications withdrawn by the US administration, and human rights agreements deliberately distorted. The aim to delegitimise the scientific foundations of public health; inclusion and human rights must be countered. The SRHR community now faces an urgent need to protect the integrity of evidence while addressing structural imbalances in whose knowledge counts. The scientific and policy advocacy communities have the challenge to respond with coordination, strategy, and shared infrastructure, including the inclusion of feminist, decolonial, and community-led knowledge, and ensuring that evidence remains a tool for accountability, not a weapon of political suppression.

The future of SRHR requires a bold, coordinated strategy that addresses immediate threats and fills critical gaps while laying the groundwork for long-term transformation. This report proposes action across three fronts: mitigate, advocate, and formulate and finance – each grounded in human rights, global solidarity, leadership from the global south, and long-term sustainability.

### 6. RECOMMENDATIONS

#### A) MITIGATE: FOUR URGENT COLLECTIVE ACTIONS

- Find the gap, close the gap: Collectively, find the gap and mobilise a harmonised response to fill critical financing and service gaps in the hardest-hit countries, especially those highly dependent on US funding and with constrained fiscal space. The Team Europe Initiative on SRHR in sub-Saharan Africa can, for instance, be a suitable mechanism for the EU and its member states to align better, strengthen each other's SRHR programmes, and allocate additional funding to SRHR in the short term.
- Simplify, streamline and reprogramme: Cut through complexity by simplifying existing project processes, reporting burdens, and funding channels. National and local actors need breathing space and flexibility, not red tape. Enable governments and CSOs to rapidly adapt existing funding (e.g. ODA, GFF, Global Fund, Gavi) to emerging needs.
- Navigate waiver complexities: Build technical capacity of local civil society and LMIC governments to navigate the US waivers system, especially where life-saving HIV and SRHR services are being affected.
- Keep rights at the centre, even in the immediate actions to get services and funding to flow: Maintain an uncompromising focus on human rights. Ensure funding and action for inclusive laws, policies, and services for the most marginalised key populations, adolescents, and LGBTQI+ people. This is especially true where services are under threat or politically controversial.

# B) ADVOCATE: FOUR ACTIONS FOR EVIDENCE-BASED ADVOCACY FOR HUMAN RIGHTS

- Create a trusted, coordinated data and response ecosystem: Break down silos and bring to life a coordinated early warning and response system national, regional, and global to track risks to SRHR and support agile, evidence-informed policy responses. This is one of the central pillars of resistance to counter the flood the zone approach.
- Protect and reclaim evidence: Work proactively to dismantle the Geneva Consensus Declaration and its implementing framework (WOHF aka Protego) and counter the misuse of data and science in anti-rights agendas. This includes dismantling pronatalist, anti-abortion, and anti-CSE narratives with credible, values-based data, and opening diplomatic channels to countries and civil society so they are informed and empowered and refuse to sign the Geneva Consensus Declaration and the Global Gag Rule.
- Fund power, not projects support movements and south–south networks of resistance: One of the biggest risks of these executive orders is their objective to shrink civic space in LMICs. To counter this, amplifying feminist, SRHR and LGBTQI+ movements in the global south is of utmost importance. These movements are resilient. They support and protect communities and local CSOs working for SRHR, LGBTQI+ and gender equality to claim their rights and advocate for prioritising domestic resources. A big-tent approach that connects movements (across gender equality, global health, SRHR, climate, HIV, LGBTQI+ rights, minority rights and social justice) is essential to counter divide-and-conquer tactics.
- Defend multilateralism and hold institutions accountable: Work actively to hold the line on critical progress made so far to push the agenda forward for SRHR, gender equality and human rights, including in processes like the Commission on Population and Development (CPD), the Commission on the Status of Women (CSW), the High-Level Political Forum (HLPF), the Human Rights Council (HRC), and the United Nations General Assembly (UNGA). Continue to push UN institutions to uphold human rights norms in funding, governance, and diplomacy.

# C) FORMULATE AND FINANCE: FOUR ACTIONS FOR SUSTAINABILITY FOR HEALTH AND SRHR

- Transfer power: The over-centralization of political power, funding and technical authority in a handful of northern capitals disempowers the actors who must lead change. Subsidiarity must be the new organising principle.
- Transition from goals to investment in national strategies: The current global health financing architecture needs to change. The old aid rhetoric of goals and targets set in global centres should be abandoned and shifted towards investment approaches aligned to country plans and budgets. The Lusaka Agenda provides an entry point for improving the global health financing architecture and promoting harmonisation, sustainability, and alignment.
- Domestic and innovative financing for health and SRHR: Countries financing of their basic health services on the path towards universal health coverage (UHC) is essential to ensure national ownership and accountability.

Significant efficiency gains can be realised through radical integration of services oriented towards primary health care and breaking down of silos tied to financing for specific disease programmes. Improved taxation systems, reprioritisation of domestic resources towards health, ensuring the equitable and efficient use of health resources, and the local private sector and support for debt relief may be viable paths, but need to be interrogated in terms of how much of the national budgets are truly invested in SRHR and equity. Opportunities also lie in innovative financing through engagement with the local private sector and the use of impact bonds. The aim is to build sustainable financing ecosystems to achieve SDG targets 3.7 and 5.6.

• Leaving no one behind. A major cause of people being left behind is persistent forms of discrimination, including multiple and intersecting forms of discrimination. Innovative models that ensure sustained access to SRHR services, legal protections, and community-based interventions for key populations and marginalised groups must be supported.

### 7. CONCLUSION

While responding to the immediate threats posed by the US government requires funding to address essential immediate gaps, this is not a moment for reform at the margins. It calls for transformational change in how we conceptualise development, deliver ODA, and support human rights. The future of SRHR must be about redistributing power, rebuilding trust, grounding action in justice, ensuring civic space is open and thriving, and that services are available to all those who need them.

It is in all our interests to support countries in building systems that protect and empower the most vulnerable and affirm sexual and reproductive health and rights as essential, non-negotiable, and at the centre of sustainable development.

Success will not come from fixing broken aid pipelines alone. It will come from co-creating new forms of global solidarity that are bold, intersectional, and unapologetically feminist.

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