Two articles on health - re cuts to HIV help in South Africa and State Dept TB focus.
Devex, 4 Mar 2026

Clinics close, lives unravel

South Africa bears the world's largest HIV burden, and U.S. foreign aid cuts have ripped through its response to the disease, forcing clinics to close and leaving thousands of vulnerable patients scrambling for care.

At ground level, that crisis now plays out one phone call at a time. By mid-morning, **Lungani Sithole** has already made dozens of calls — checking whether former patients are still on treatment, and sometimes whether they're still alive.

"Any wrong move I do now, or any wrong attitude that I portray, could unleash the mental thread that's keeping that person together," says Sithole, who has been a peer educator at South African HIV clinic OUT LGBT Well-Being since 2019.

U.S. aid cuts and a standoff with the Trump administration have halted all subsidies to the country, which got $450 million from USAID for its HIV response in 2024. The impact was immediate: **OUT LGBT Well-Being** was forced to shutter services for 10,000 patients. Nationwide, more than 15,000 HIV workers were affected, and services for over 222,000 people were disrupted, writes my colleague Elissa Miolene.

Now, government facilities are trying to absorb the shock. Last summer, South Africa **announced a stopgap payment of $47 million** to address the funding shortfalls left by USAID, with more contributed by various philanthropies and China.

"There is no way we are going to allow the world's biggest HIV/AIDS program to collapse," said the country's health minister, **Aaron Motsoaledi**, in July. "Never."

Read: After US aid cuts, South Africa's HIV response strains to hold the line

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TB determined

With USAID's closure, the Trump administration abruptly cut off many HIV/AIDS treatments last year, although it has since put out an "America First" global health strategy that has preserved some money for fighting the disease.

But the administration has also set its eyes on another killer: tuberculosis. In fact, it's **vowing to find "the next lenacapavir" — but this time, for TB** instead of HIV. As you may recall, lenacapavir is the breakthrough twice-yearly injectable HIV prevention drug.

At a congressional hearing yesterday, the State Department's top health official suggested that TB will continue to top the agency's health agenda in the years ahead, especially as part of the bilateral health compacts that the U.S. has signed with over 20 countries, most of them in Africa.

"We're thinking, alongside these [memorandums of understanding] that we're signing with governments, how do we set aside [money] for innovations?" said **Jeffrey Graham**, the senior bureau official for the State Department's Bureau of Global Health Security and Diplomacy. "A scalable, innovative invention that not only can change the course of an epidemic, but also for us, as stewards of taxpayer dollars in the U.S., that can help us move away from being forever donors."

On that note, **Graham said U.S. contributions come with caveats** — specifically that recipient governments need to invest in their own health systems.

"Countries need to take the lead," Graham said, arguing that this should include nations with a high burden of TB, which the World Health Organization estimates kills 1.2 million people every year.

"Donor support has been very effective over the decades, but at some point, governments whose citizens these are have to take responsibility for the lives in their own countries," Graham added. "We are trying to accelerate that transition in a responsible way."

Read: State Department eyes tuberculosis breakthroughs
