



apjtm.org



Perspective

Asian Pacific Journal of Tropical Medicine

doi: 10.4103/apjtm.apjtm_113_25

HIV care services and the executive orders of the United States on USAID: Insights from the Philippines

Rowalt Alibudbud 

Department of Sociology and Behavioral Sciences, De La Salle University, Manila, Philippines

In January 2025, the United States issued executive orders that could potentially curtail lesbian, gay, bisexual, transgender, queer, and other sexual and gender minorities (LGBTQ+) rights and federal aid to developing countries, such as public health programs under the United States Agency for International Development (USAID)[1,2]. In the Philippines, USAID has played an important role in funding and supporting initiatives to address the country's local HIV epidemic[2,3].

The Philippines is one of the countries with a high burden of HIV, with cases continuing to rise[4]. This increase can be partly attributed to stigma and limited access to HIV healthcare services and treatment[4–6]. To address this, USAID has implemented various strategies in collaboration with its local partners. These include integrating telehealth consultations for HIV healthcare providers, expanding HIV awareness programs, strengthening screening services beyond healthcare facilities to include schools and workplaces, and increasing the availability of pre-exposure prophylaxis (PrEP) and other lifesaving treatments through partnerships with local commercial drugstores[2,3]. Therefore, it becomes imperative to address the repercussions of the challenges that the executive orders and the limited funding of the USAID in the Philippines can bring.

Addressing the potential challenges stemming from these executive orders on HIV programs in the Philippines necessitates a multisectoral approach between governments, non-government organizations, businesses, and local communities. First, funding limitations and diversification of financial aid sources must be addressed. Therefore, the Philippine's Department of Health (DOH), the private sector, and philanthropic organizations can step in to support existing HIV programs. Likewise, HIV healthcare providers and program managers can also collaborate with pharmaceutical companies, local businesses, and non-government organizations to help sustain services like PrEP distribution and

HIV screening. To further encourage the participation of private companies and stakeholders, they can be incentivized by providing tax incentives and government grants when they contribute to funding HIV programs. In addition, local stakeholders from civic society organizations and the DOH can consider strengthening their partnerships with other international development agencies and funders, including the Global Fund, UNAIDS, the World Health Organization, and other partner countries, to help offset potential funding losses.

Second, strengthening local HIV programs is imperative. Philippine policymakers, government executives, advocates, and healthcare workers can craft and implement policies that safeguard and strengthen existing HIV programs, helping ensure their continuity even if U.S. funding is reduced. Likewise, private corporations and government agencies can support local organizations to scale up community-based HIV programs, such as mobile testing clinics, peer education, and harm reduction services. Furthermore, integrating HIV services into general and primary healthcare, such as routine health services like annual medical examinations, can reduce stigma and improve accessibility.

Third, HIV services and programs can be expanded through digital and community-based platforms, leveraging the widespread popularity of social media and online platforms, particularly

 To whom correspondence may be addressed. E-mail: rowalt.alibudbud@dlsu.edu.ph

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non Commercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: reprints@medknow.com

©2025 *Asian Pacific Journal of Tropical Medicine* Produced by Wolters Kluwer-Medknow.

How to cite this article: Alibudbud R. HIV care services and the executive orders of the United States on USAID: Insights from the Philippines. *Asian Pac J Trop Med* 2025; 18(4): 147-148.

Article history: Received 7 March 2025
Accepted 14 March 2025

Revision 12 March 2025
Available online 19 March 2025

among young people in the Philippines[7]. For example, telehealth consultations can be expanded to bridge gaps in HIV care, especially in remote areas. Since there is an increasing cases of HIV among the young, HIV awareness can be strengthened through leveraging social media platforms and influencers to help normalize discussions about HIV and reduce stigma. In addition, government and private stakeholders can enhance grassroots movements and community-based services supporting at-risk populations by providing additional educational, human, and financial resources.

Lastly, legal protection is also crucial since the HIV epidemic in the Philippines affects vulnerable and key populations, including LGBTQ+ people, such as gay and bisexual men and transgender people. Therefore, it is essential to advocate for anti-discrimination laws that can help protect LGBTQ+ people from discrimination and marginalization, safeguarding their rights and healthcare access. This is especially crucial in the Philippines, where no national policy currently exists to provide such protection[8]. Likewise, strengthening local LGBTQ+ advocacy groups is ever more essential to ensure that affected communities have a voice in policymaking and program implementation.

Overall, while potential funding limitations stemming from the executive orders in the United States present challenges for countries supported by the United States, proactive advocacy, diversified funding, and community-driven efforts can help sustain and expand HIV programs in these countries, as exemplified in the Philippines. The key is multisectoral collaboration between the government, non-government organizations, private businesses, and local communities to ensure that critical HIV services are accessible to those in need.

Conflict of interest statement

I declare no competing interest.

Funding

The author received no extramural funding for the study.

References

- [1] Alibudbud R. LGBTQ+ rights and health: A shifting landscape. *Lancet* 2025; S0140-6736(25)00267-3. doi: 10.1016/S0140-6736(25)00267-3. [Epub ahead of print].
- [2] Soriano JP. *Philippines to seek clarification on US aid freeze*. *Philippines: GMA Integrated News*. [Online]. Available from: <https://www.gmanetwork.com/news/topstories/nation/936075/philippines-clarification-us-aid-freeze/story/>. [Accessed on 12 February 2025].
- [3] Rocamora JA. *US funding to help improve HIV care in PH*. *Philippines: Philippine News Agency*. [Online]. Available from: <https://www.pna.gov.ph/index.php/articles/1238826>. [Accessed on 27 November 2024].
- [4] Gangcuangco LMA, Eustaquio PC. The state of the HIV epidemic in the Philippines: Progress and challenges in 2023. *Trop Med Infect Dis* 2023; **8**(5): 258. doi: 10.3390/tropicalmed8050258.
- [5] Alibudbud RC. Addressing the needs and rights of sex workers for HIV healthcare services in the Philippines. *Asian Pac J Trop Med* 2023; **16**(8): 335-336.
- [6] Alibudbud RC. A perspective on utilizing the minority stress model for HIV and mental health care for men who have sex with men. *Asian Pac J Trop Med* 2024; **17**(8): 333-334.
- [7] Alibudbud R. Googling "mental health" after mental health legislation and during the COVID-19 pandemic: An infodemiological study of public interest in mental health in the Philippines. *J Ment Health* 2022; **31**(4): 568-575. doi: 10.1080/09638237.2022.2091757.
- [8] Abesamis LEA, Alibudbud R. From the bathroom to a national discussion of LGBTQ+ rights: A case of discrimination in the Philippines. *J Lesbian Stud* 2024; **28**(1): 84-99. doi: 10.1080/10894160.2023.2251775.

Publisher's note

The Publisher of the *Journal* remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Edited by Zhang Q, Lei Y, Pan Y