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USAID-Funded Clinical Trials Affected by the Trump Administration's Stop- Work Order

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* Screenshot from clinicaltrials.gov in February 2025.

Executive Summary

In January 2025 the Trump administration's stop-work order and funding freeze shut down the U.S. Agency for International Development (USAID). In an egregious violation of clinical research ethics, USAID-funded clinical trials were abruptly halted, jeopardizing the health of trial participants and the integrity of the research.

The full effects of the stop-work order cannot be documented. Public records about USAID-funded projects have been deleted, and the affected researchers are reluctant to or have been prohibited from fully discussing the impacts.

Using information from clinicaltrials.gov (maintained by the National Library of Medicine) and the International Clinical Trials Registry Platform (maintained by the World Health Organization), this report documents 32 clinical trials that were likely affected by the funding freeze. The trials were conducted in 25 countries and affected as many as 94,150 participants.

More than half of the trials (17 of 32) were specifically researching the world's deadliest infectious diseases: human immunodeficiency virus (HIV) infection, tuberculosis, and malaria. Other areas of research were child health, development and nutrition programs, cholera, mental and behavioral disorders, reproductive/maternal health, and water quality. The trials were conducted predominantly in Africa (13 countries) and in Asia (nine countries).

We confirmed that 13 of the 32 trials were affected. No contact persons were willing to provide information without a grant of anonymity. For eight of these trials, anonymized survey responses provide additional information about the consequences of the funding freeze. Seven of these trials were affected before participants were enrolled or after data analysis was complete; one trial reported minor patient safety issues. The information in this report was last updated on May 21, 2025.

The pernicious effects of the Trump administration's stop-work order for USAID-funded clinical trials should be a wake-up call to Congress and future administrations. The ethical conduct of clinical trials is an obligation, not a choice, for researchers, research institutions, and funders. The Trump administration must provide assurances that researchers or institutions who continued to fulfil

their ethical obligations towards trial participants will not face repercussions.¹ Although we hope that Trump administration officials will learn from the egregious mistake of abruptly halting USAID-funded clinical trials, we are not confident that they will.

Introduction

On January 26, 2025, the Trump administration, based on an earlier executive order,² paused all funding for foreign assistance programs by or through the State Department and the U.S. Agency for International Development (USAID).³ The pause claimed to allow for a “review of all foreign assistance programs to ensure they are efficient and consistent with U.S. foreign policy under the America First agenda.”⁴ The pause included a stop-work order that affected USAID-funded clinical trials.⁵

The home page of USAID’s website is no longer functioning. A snapshot from January 19, 2025, on the Internet Archive⁶ states that the agency’s goal is to provide “humanitarian assistance, reduce poverty, strengthen democratic governance, advance economic opportunities, and help achieve progress beyond programs.” Since President John F. Kennedy established USAID in 1961, the agency has funded numerous humanitarian programs, including programs providing food and medicine, projects, and clinical trials.⁷

¹ Stat. The abrupt end of USAID-funded clinical trials is profoundly unethical. February 16, 2025. <https://www.statnews.com/2025/02/16/usaids-shutdown-stop-work-order-clinical-trials-ethics/>. Accessed June 5, 2025.

² The White House. Revaluating and realigning United States foreign aid. January 20, 2025. <https://www.whitehouse.gov/presidential-actions/2025/01/reevaluating-and-realigning-united-states-foreign-aid/>. Accessed June 5, 2025.

³ U.S. Department of State. Implementing the President’s executive order on reevaluating and realigning United States foreign aid. January 26, 2025. <https://www.state.gov/implementing-the-presidents-executive-order-on-reevaluating-and-realigning-united-states-foreign-aid/>. Accessed June 5, 2025.

⁴ *Ibid.*

⁵ House Foreign Affairs Committee. House Foreign Affairs Committee Democrats and House Armed Services urge end to stop work order on U.S. foreign assistance. February 11, 2025. <https://democrats-foreignaffairs.house.gov/2025/2/house-armed-services-committee-and-house-foreign-affairs-committee-urge-end-to-stop-work-order-on-u-s-foreign-assistance>. Accessed June 5, 2025.

⁶ Internet Archive. Wayback Machine. Search term “<https://www.usaid.gov/>,” snapshot for January 19, 2025. <https://web.archive.org/web/20250119150200/https://www.usaid.gov/>. Accessed June 5, 2025.

⁷ Science. Researchers face impossible decisions as U.S. aid freeze halts clinical trials. February 13, 2025. <https://www.science.org/content/article/researchers-face-impossible-decisions-u-s-aid-freeze-halts-clinical-trials>. Accessed June 5, 2025.

It is impossible to fully document the far-reaching and devastating effects of the funding freeze and stop-work order on USAID-funded clinical trials, such as the number of individuals harmed or put at risk of harm. One reason is that the stop-work order prohibited federal agencies and researchers from speaking about it.⁸ Moreover, many public records about USAID-funded projects and research have been deleted and are no longer available on the agency's website. As of February 23, 2025, USAID's website stated that almost all USAID personnel "will be placed on administrative leave globally."⁹

Abandoning ongoing clinical trials is an egregious violation of clinical research ethics¹⁰ and defies common sense. Therefore, Public Citizen's Health Research Group sought to learn what we could about the effects of the funding freeze and stop-work order on trials that were partially or solely funded by USAID. We aimed to 1) document all potentially affected clinical trials through information available on publicly accessible databases, and 2) based on anonymized survey responses, provide additional information about the consequences of the funding freeze for individual trials.

Methods

In February 2025 we searched for ongoing or recently completed clinical trials that received funding from USAID on two online databases for clinical research studies: clinicaltrials.gov, which is maintained by the National Library of Medicine, and the [International Clinical Trials Registry Platform](https://ictrp.org/) (ICTRP), maintained by the World Health Organization.

On clinicaltrials.gov we searched for the keyword "USAID" with the additional search criteria that a) the last update of the trial was posted no earlier than January 1, 2023 and b) the study was completed no earlier than January 1, 2023. With these search parameters we retrieved 29 results. We excluded three trials because USAID was not listed as sponsor or collaborator. The "study status" of the remaining 26 trials were listed as active not recruiting, completed, enrolling by invitation, not yet recruiting, recruiting, terminated, or unknown.

⁸ *The New York Times*. Abandoned in the middle of clinical trials, because of a Trump order. February 6, 2025. <https://www.nytimes.com/2025/02/06/health/usaaid-clinical-trials-funding-trump.html>. Accessed June 5, 2025.

⁹ United States Agency for International Development (USAID). Notification of administrative leave. February 23, 2025. <https://www.usaid.gov/>. Accessed June 5, 2025.

¹⁰ Bachynski K, McKee M. Abandoning research participants is an unconscionable betrayal. *BMJ*. 2025 Feb 12;388:r289.

On the ICTRP a keyword search for "USAID" without additional search criteria returned 22 results. We excluded 12 trials. Eleven were excluded either because the last update of the database entry was before January 1, 2023 (unlike clinicaltrials.gov, the ICTRP does not consistently provide study completion dates) or because USAID was not listed as sponsor or collaborator. One additional trial was listed in both databases and was thus excluded from the ICTRP results. The "recruitment status" of the remaining 10 trials was listed as active not recruiting, recruiting, or completed (unlike clinicaltrials.gov, the ICTRP does not provide information on study status).

Between February 11, 2025, and March 26, 2025, we reached out via email to a contact person for each of 37 trials, 36 of which were identified through our search criteria and one additional trial that was not identified through our search criteria despite being listed on clinicaltrials.gov. We included this trial because the contact person for another trial we had identified was also involved with this trial and confirmed that it was affected by the funding freeze.

By email, we asked all contact persons to confirm whether the trial had been affected by the Trump Administration's executive order and, if so, to provide additional information about the trial, the phase of the trial that was affected, and patient safety issues. The questions are listed in the Appendix. Unless a trial contact person explicitly agreed to be identified by name, answers were considered anonymous and not linked to specific trials.

The information in this report from clinicaltrials.gov and the ICTRP was last updated on May 21, 2025.

Results

We received responses from 16 of the 37 trials. Most contact persons specifically mentioned concerns about protecting their identity; no contact person agreed to be identified by name. Eight contact persons provided full answers to our questions; three provided incomplete information.

Contact persons for five trials said that their trial was not affected by the funding freeze. For three trials, the contact person stated that the study was not affected because it was already completed and either published or accepted for publication. Two contact persons responded that their trial was not directly

funded by USAID and was either already completed or proceeding as planned. We excluded these five trials from this report.

Table 1 lists the 32 trials that were likely affected by the funding freeze, including the name of the trial, the study location or locations, and the actual or estimated enrollment. The name of each trial links directly to the listing on the trial’s registry, which includes additional details such as the type of trial, the type of intervention, and when enrollment started.

Although some of the research areas are overlapping, we identified eight broad categories: child health, development, and nutrition programs (6 trials); cholera (1 trial); HIV/AIDS (11 trials); malaria (3 trials); mental and behavioral disorders (1 trial); reproductive/maternal health (6 trials); tuberculosis (3 trials); and water quality (1 trial). Of the 32 trials, 17 involved research on human immunodeficiency virus (HIV), tuberculosis, or malaria, which are among the world’s deadliest infectious diseases.¹¹

Table 1. Thirty-Two USAID-Funded Clinical Trials Likely Affected by the Trump Administration’s Stop-Work Order

Study Title	Study Location	Enrollment
Child Health, Development, and Nutrition Programs		
Augmented Infant Resuscitator (AIR): Transitioning a Novel Behavior Change Innovation to Drive Newborn Ventilation Skills Enhancement	USA	250
Evaluation of a Comprehensive School Health Programme in Zambia	Zambia	28,700
Ifaa Effectiveness Evaluation on Food Security and Nutrition	Ethiopia	3,317
Improve Child Outcomes Through Caregiving in Cambodia	Cambodia, USA	3,500
Peanut-based School Meals in Rural Ghana to Improve Attendance and Retention (PEANUT-SMART)	Ghana	5,500
Supporting Optimal Infant, Young Child and Maternal Nutrition and Health in Jordan: An Evaluation of the CHN Program	Jordan	1,145
Cholera		
Testing a Scalable Model of the Cholera Hospital-Based Intervention for 7 Days (CHoBI7)	Bangladesh	1,600

¹¹ Makam P, Matsa R. "Big three" infectious diseases: Tuberculosis, malaria and HIV/AIDS. *Curr Top Med Chem.* 2021;21(31):2779-2799.

HIV/AIDS		
The CATALYST Study	Kenya, Lesotho, South Africa, Uganda, Zimbabwe	6,069
Eswatini Ring Study: Increasing PrEP Options for Women	Eswatini	904
HIV Self-testing and Linkage to Care among the Youth in Zambia: A Demonstration Project Implemented by EQUIP	Zambia	5,353
HPV-Based Screen-and-Treat Demonstration Project in Lilongwe	Malawi	1,250
Identification and Treatment of Cervical Abnormalities in Perú Through Integration of Pocket Colposcopy and Telemedicine	Peru	503
MATRIX-002: Trial to Assess Acceptability and Safety of Two Placebo Vaginal Films	Kenya, South Africa, USA, Zimbabwe	100
PathToScale: An Implementation Evaluation	Malawi	9,900
Project Engage: Oral PrEP Acceptability	South Africa, Zimbabwe	330
Safety and PK Multi-dose Study of TAF/EVG Vaginal Insert	Kenya, South Africa, USA	60
Study to Evaluate the Feasibility of Community-based Test and Treat Strategies Among Men Who Have Sex With Men and Transgender Women to Increase the Uptake of HIV Testing and Treatment Services in Thailand	Thailand	6,000
Trial to Assess Acceptability and Safety of Two Placebo Intravaginal Rings (MATRIX-003)	South Africa, USA, Zimbabwe	93
Malaria		
Assessing the Impact of Group ANC on IPTp uptake in Benin and the Feasibility and Acceptability of Pregnant Women as a Sentinel Surveillance Population	Benin	2,539
In Vivo Efficacy of Artemether-Lumefantrine, Amodiaquine-Artesunate, Dihydroartemisinin-Piperaquine, and Pironaridine-Artesunate in Mozambique (MEFL-IV)	Mozambique	870
Malaria Therapeutic Efficacy Study, Rwanda	Rwanda	528
Mental and Behavioral Disorders		
The Effect of Tele-Support Psychotherapy Delivered by Trained Lay Health Workers for Depression Treatment among Youth in Kampala District during the Covid-19 Pandemic	Uganda	300

Reproductive/Maternal Health		
Assessing Preference for 3 Female Condoms: A Comparative Evaluation of the PATH Woman's Condom, FC2 and the Reddy 6	South Africa	170
Effectiveness of a combined approach towards Improving Utilization of Adolescent Sexual Reproductive Health Services in Kisumu and Kakamega Counties, Kenya.	Kenya	2,840
Efficacy of Mother's Time in Ethiopia	Ethiopia	328
Evaluating the Efficacy of Using a Digital Consumption Management Tool for Family Planning in Zambia	Zambia	2,523
Impact of Contraceptives on Cervico-Vaginal Mucosa (UMPALA)	Kenya, USA	112
Maternal health improvement among fishing communities in Uganda through capacity strengthening of community health workers	Uganda	486
Tuberculosis		
Bedaquiline Roll-out Evidence in Contacts and People Living with HIV to Prevent TB (BREACH-TB)	Peru, South Africa	2,530
Program for Rifampicin-Resistant Disease with Stratified Medicine for Tuberculosis (PRISM-TB)	Peru, Philippines, Republic of Moldova, Mongolia, South Africa, Vietnam	690
Shortened Regimen for Drug-susceptible TB in Children (SMILE-TB)	India, Indonesia, Mozambique, South Africa, Uganda, Zambia	860
Water Quality		
Evaluating a Water Quality Assurance Fund Intervention in Ghana and Kenya	Ghana, Kenya	4,800

The information in Table 1 from clinicaltrials.gov and the International Clinical Trials Registry Platform was last updated on May 21, 2025.

We identified trials conducted across five continents in 25 countries, predominantly in Africa (13 countries) and in Asia (nine countries). In Africa, these countries included Benin, Eswatini (Swaziland), Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mozambique, Rwanda, South Africa, Uganda, Zambia, and Zimbabwe; in Asia, the countries were Bangladesh, Cambodia, India, Indonesia, Jordan, Mongolia, Philippines, Thailand and Vietnam. Other countries included

the Republic of Moldova (Europe), the United States (North America), and Peru (South America).

Table 2 shows the study sites. The most frequently mentioned sites for the 32 trials were South Africa (9 times); Kenya and the United States (6 times each); and Uganda, Zambia, and Zimbabwe (4 times each).

Table 2. Study Sites Listed for the 32 USAID-Funded Clinical Trials

Country	# of Times Mentioned Across Trials
Africa	
Benin	1
Eswatini (Swaziland)	1
Ethiopia	2
Ghana	2
Kenya	6
Lesotho	1
Malawi	2
Mozambique	2
Rwanda	1
South Africa	9
Uganda	4
Zambia	4
Zimbabwe	4
Asia	
Bangladesh	1
Cambodia	1
India	1
Indonesia	1
Jordan	1
Mongolia	1
Philippines	1
Thailand	1
Vietnam	1
Europe	
Republic of Moldova	1
North America	
USA	6
South America	
Peru	3

The information in Table 2 from clinicaltrials.gov and the International Clinical Trials Registry Platform was last updated on May 21, 2025.

Based on information in the clinical trial registries, we estimated that the funding freeze may have affected up to 94,150 participants. Half of the trials (16) had an actual or expected enrollment of about 1,000 participants or fewer, with the smallest trial planning on enrolling only about 60 people. The other half of the trials had an actual or estimated enrollment of more than 1,000 participants, with the largest trial planning to enroll 28,700 participants.

Based on email or phone responses to our survey or study status entries, we confirmed that 13 trials were directly affected by the funding freeze. Below, the responses to the survey questions from the contact persons for the eight trials that provided full responses are summarized. The incomplete responses from three trials are not included. Responses are lightly edited.

Question 1: Was USAID the sole funder of the trial or were there other funders that will allow the research to continue?

USAID was the sole funder of five of the eight clinical trials and a partial funder of the other three. However, one of the partially funded trials was more than 80% funded by USAID, making the continuation of the trial dependent on the agency. Although this trial secured some additional internal university funding and the other funder was flexible with the use of their funds, it only had enough money to continue the trial for a few months.

Another trial partially funded by USAID was able to obtain additional short-term funding from the other funder but was uncertain of their ability to continue the trial for a longer period.

Question 2: At what phase was the trial affected?

Two of the eight trials were in the start-up phase and had either just begun enrollment or planned to start enrollment soon.

Five trials said that the funding freeze disrupted their project in the trial completion phase. Four trials were in the process of data analysis/data cleaning and preparing a manuscript for publication. Although one trial had submitted a manuscript to a journal, the publication of additional reports was affected because the manuscripts had not been finalized or approved by USAID. One trial

was stopped during data collection, when all participants were enrolled and under observation.

Question 3: Has the funding freeze caused any patient safety issues? If so, what are these patient safety issues?

None of the seven trials that had just started enrollment or were analyzing data reported patient safety issues. One trial had been granted a humanitarian waiver that allowed the researchers to continue to care for the participants who were already enrolled.

The trial that was stopped when all participants were enrolled reported some safety concerns. The fear that the project, which included providing food in schools, would be cancelled caused some mobbing at study sites, when participants were trying to grab and secure food. No serious injuries were reported.

Question 4: If USAID funding was restored, would the trial be able to continue?

All eight trials stated that if USAID funding were restored, their trials should be able to continue. For example, one trial stated that if funding had been restored by May 1, 2025, the project could have continued because the interruption would have been brief. Otherwise, the project would need to be cancelled.

Another trial had laid off some staff members. Even if funding were fully restored, the trial would not be able to resume where it had been stopped.

Another trial mentioned concern about an executive order directed specifically at South Africa.^{12,13} The trial was worried that it might not be able to continue in South Africa and might have to identify other countries for study sites. South Africa has a well-developed clinical research infrastructure, and this trial already had most of the necessary regulatory and ethical approvals in place.

¹² The White House. Addressing egregious actions of the Republic of South Africa. February 7, 2025. <https://www.whitehouse.gov/presidential-actions/2025/02/addressing-egregious-actions-of-the-republic-of-south-africa/>. Accessed June 5, 2025.

¹³ Reuters. South African scientists were testing a promising HIV vaccine. Then came Trump's aid cuts. February 18, 2025. <https://www.reuters.com/business/healthcare-pharmaceuticals/trumps-aid-cuts-stop-south-african-hiv-vaccine-trials-their-tracks-2025-02-18/>. Accessed June 5, 2025.

Even for trials for which all data had been collected and analyzed, the funding freeze could jeopardize the publication of the results. One trial stated that publications could only continue if the stop-work order was lifted. Without official USAID sign-off, the trial was uncertain if a report could be published.

Question 5: If the trial would be able to continue, how would the trial be affected by the period during which it was shut down?

One trial had other funding sources that it could rely on. Six trials said the funding freeze would have effects, even if funding were continued. The effects included wasted work time or money (two trials) and delays (three trials). One trial worried that their project would be delayed because data analysis was handled by subcontractors who might have already moved on to other projects. Another trial mentioned that some staff were already laid off, as reported under Question 4.

One trial said that the funding freeze had a direct effect on the reputation and credibility of the trial itself. Another trial said that the project could only continue as planned if the pause wasn't longer than 90 days and if the original funding was maintained.

Question 6: Is there additional information you can share about how the trial has been affected by the funding freeze?

One trial said that the cruel way in which USAID was dismantled was unimaginable. This trial said that sharing the study results was very important because participants had specifically agreed to participate so that any knowledge gained could be used for decision making. The trial felt that making the results available was something it owed participants and the community, as well as to the U.S. taxpayers who funded the trial.

Another trial stated that the funding freeze had a negative effect on data analysis, specifically by disrupting the ability to publish and disseminate results. Moreover, because of the funding freeze some biological specimens were missing and could not be delivered as agreed.

Another trial had been working closely with advocacy groups in the countries where the trial was conducted. Because of the funding freeze, these groups

were distraught. The trust necessary for conducting research in community groups and building relationships had been destroyed.

Another trial was to last four years. Only about a third of the funds had been disbursed, however, because of federal budget delays.

Limitations

This report has important limitations. First, as discussed above, we could only confirm that 13 of the 32 trials listed in Table 1 were affected by the funding freeze. The cutoff date we used for identifying trials (January 1, 2023, for study completion or posted study update) might have incorrectly included or excluded some trials. Moreover, what is considered “study completion” may differ not only between the two databases we used but also between different studies (e.g. completed enrollment, completed data analysis, or completed and published). For example, some of the trials that responded reported that their trial was still ongoing despite having been posted as “completed.” Others reported that they were not affected because the trial was already completed.

Second, we could not account for inaccurate, incomplete, or out-of-date information in the trial registry listings, including the information about study sites and enrollment numbers. We may have been unable to identify some USAID-funded studies because they were not listed in either of the trial registries. For example, some trials not included in the registries were reported in the news media as being USAID funded and affected by the stop-work order. We did not include trials that we could not identify through the registries.

Third, only eight trials provided additional information about how their trial was affected by the stop-work order. As seven of these eight trials were affected before participants were enrolled or after data analysis was complete, we identified few patient safety issues.

Discussion

The Trump administration's stop-work order for USAID-funded clinical trials caused entirely avoidable problems, which are part of the broader international humanitarian crisis triggered by the halt to USAID funding. The consequences of

the stop-work order continue to unfold. There is ongoing litigation that seeks to reverse some of the Trump administration's actions related to USAID.^{14,15,16}

The sudden, medically uncalled-for suspension of clinical trials is a serious violation of research ethics. Ethical principles to “safeguard the safety, dignity, and rights of people involved in medical research”¹⁷ are defined in the World Medical Association Declaration of Helsinki.¹⁸ Physicians and research institutions in the United States have long followed the Declaration of Helsinki.¹⁹ The Trump administration's actions are incompatible with the declaration, which states that “[n]o national or international ethical, legal or regulatory requirement should reduce or eliminate any of the protections for research participants set forth in this Declaration.”²⁰ More broadly, the shutdown of USAID-funded trials may undermine trust in the federal government as a sponsor of medical research.²¹

Clinical researchers, research institutions, and funders are bound by professional codes and federal regulations to abide by ethical principles for conducting research.²² There are strict rules in place for who can suspend or terminate a trial and when. In situations where a clinical trial must be stopped, the rules require

¹⁴ Scientific American. USAID funding saved millions of children's lives. Recent cuts put it in jeopardy. March 17, 2025. <https://www.scientificamerican.com/article/usa-id-funding-saved-millions-of-childrens-lives-recent-cuts-put-it-in/>. Accessed June 5, 2025.

¹⁵ Public Citizen. Court decision reinforces constitutional principles, but does not relieve humanitarian crisis. March 10, 2025. <https://www.citizen.org/news/court-decision-reinforces-constitutional-principles-but-does-not-relieve-humanitarian-crisis/>. Accessed June 5, 2025.

¹⁶ Public Citizen. Government Employee Unions and Oxfam America seek court ruling to stop USAID shutdown. April 21, 2025. <https://www.citizen.org/news/government-employee-unions-and-oxfam-america-seek-court-ruling-to-stop-usaid-shutdown/>. Accessed June 5, 2025.

¹⁷ Bachynski K, McKee M. Abandoning research participants is an unconscionable betrayal. *BMJ*. 2025 Feb 12;388:r289.

¹⁸ World Medical Association. WMA declaration of Helsinki -Ethical principles for medical research involving human participants. <https://www.wma.net/policies-post/wma-declaration-of-helsinki/>. Accessed June 5, 2025.

¹⁹ *The New York Times*. Abandoned in the middle of clinical trials, because of a Trump order. February 6, 2025. <https://www.nytimes.com/2025/02/06/health/usa-id-clinical-trials-funding-trump.html>. Accessed June 5, 2025.

²⁰ World Medical Association. WMA declaration of Helsinki -Ethical principles for medical research involving human participants. <https://www.wma.net/policies-post/wma-declaration-of-helsinki/>. Accessed June 5, 2025.

²¹ Public Citizen. Steinbrook R. Outrage of the month: The shocking abandonment of ongoing USAID-funded clinical trials. March 1, 2025. <https://www.citizen.org/article/outrage-of-the-month-the-shocking-abandonment-of-ongoing-usaid-funded-clinical-trials/>. Accessed June 5, 2025.

²² *Stat*. The abrupt end of USAID-funded clinical trials is profoundly unethical. February 16, 2025. <https://www.statnews.com/2025/02/16/usa-id-shutdown-stop-work-order-clinical-trials-ethics/>. Accessed June 5, 2025.

explaining the reasons to the volunteers and ensuring that “participants receive adequate follow-up and alternate therapy/treatments for their condition.”²³ This did not happen after the stop-work order was issued for USAID-funded clinical trials. Thus, researchers were unable to safeguard the welfare of participants and could not uphold their ethical obligations to the participants without explicitly violating the stop-work order.²⁴

Researchers had to renege on essential health services that were promised to participants or had to leave them without access to the study treatment or an adequate alternative treatment option.^{25, 26} For example, in some cases, withdrawing treatment abruptly can lead to the emergence of drug-resistant strains of infectious diseases, such as HIV,²⁷ putting participants at risk and increasing the risk that drug-resistant strains will broadly emerge in local communities and globally.

Because the trials were abruptly terminated, the ability to advance knowledge and provide building blocks for future research was lost. Contributing to generalized scientific knowledge is an important reason why participants volunteer for clinical research. Even if some of the trials and their findings can be salvaged, abandoning trials in midcourse undermines trust in medical research.

Furthermore, clinical trials of new drugs, vaccines, and medical devices are designed to frequently monitor participants for adverse events to ensure that the medical product under investigation is safe and that the trial can be stopped in a timely fashion if necessary. The stop-work order for USAID-funded trials left participants in clinical trials at risk of no longer being monitored for adverse

²³ National Institute of Allergy and Infectious Diseases. Division of AIDS (DAIDS) site clinical operations and research essentials (SCORE) manual: Premature termination or suspension of a clinical trial.

<https://www.niaid.nih.gov/sites/default/files/score-premature-termination-or-suspension-of-clinical-trial.pdf>. Accessed June 5, 2025.

²⁴ *The New York Times*. Abandoned in the middle of clinical trials, because of a Trump order. February 6, 2025. <https://www.nytimes.com/2025/02/06/health/usaaid-clinical-trials-funding-trump.html>. Accessed June 5, 2025.

²⁵ *Stat*. The abrupt end of USAID-funded clinical trials is profoundly unethical. February 16, 2025. <https://www.statnews.com/2025/02/16/usaaid-shutdown-stop-work-order-clinical-trials-ethics/>. Accessed June 5, 2025.

²⁶ *Science*. Researchers face impossible decisions as U.S. aid freeze halts clinical trials. February 13, 2025. <https://www.science.org/content/article/researchers-face-impossible-decisions-u-s-aid-freeze-halts-clinical-trials>. Accessed June 5, 2025.

²⁷ *The New York Times*. Abandoned in the middle of clinical trials, because of a Trump order. February 6, 2025. <https://www.nytimes.com/2025/02/06/health/usaaid-clinical-trials-funding-trump.html>. Accessed June 5, 2025.

events, as required by the rules of clinical research.^{28,29} Blood and other biological samples could not be processed, data could not be analyzed, and findings could not be shared with other researchers or policy makers, which were often requirements of the clinical-trial protocol.³⁰

The full effects of the stop-work order are difficult to assess, both because the USAID website no longer provides any information about funded projects and because the order prohibited affected projects and researchers from providing information about the impacts. The information in clinical trial registries and shared by researchers in the news media is only partially verifiable. Despite repeated and diligent efforts, we were only able to obtain full information about the effects of the stop-work order for one-quarter (eight) of the 32 clinical trials that we identified as likely affected. Notably, even for these eight trials, none of the contact persons were willing to provide information without a grant of anonymity. For three-quarters of the trials (24 trials), full information about the effects of the stop-work order remains unavailable.

The pernicious effects of the Trump administration's stop-work order for USAID-funded clinical trials should be a wake-up call for Congress and future administrations. The ethical conduct of clinical trials is an obligation for researchers, research institutions, and funders, not a choice. The Trump administration must provide assurances that researchers or institutions that continued to fulfil their ethical obligations towards trial participants orders will not face repercussions.³¹ Although we hope that Trump administration officials will learn from the egregious mistake of abruptly halting USAID-funded clinical trials, we are not confident that they will.³²

²⁸ *Ibid.*

²⁹ *Science*. Researchers face impossible decisions as U.S. aid freeze halts clinical trials. February 13, 2025. <https://www.science.org/content/article/researchers-face-impossible-decisions-u-s-aid-freeze-halts-clinical-trials>. Accessed June 5, 2025.

³⁰ *The New York Times*. Abandoned in the middle of clinical trials, because of a Trump order. February 6, 2025. <https://www.nytimes.com/2025/02/06/health/usaids-clinical-trials-funding-trump.html>. Accessed June 5, 2025.

³¹ *Stat*. The abrupt end of USAID-funded clinical trials is profoundly unethical. February 16, 2025. <https://www.statnews.com/2025/02/16/usaids-shutdown-stop-work-order-clinical-trials-ethics/>. Accessed June 5, 2025.

³² *The New York Times*. Trump Administration Highlights: Cuts of 10,000 Jobs at Health Agency Reflect Kennedy's and Trump's Priorities. March 27, 2025. <https://www.nytimes.com/live/2025/03/27/us/trump-news>. Accessed June 5, 2025.

Appendix

Questions Sent to the Contact Organization or Person for Each Clinical Trial

Could you please let us know if this trial was funded by USAID and, if so, if the trial was affected by the recent USAID shutdown in any way? If your trial was affected, we would also appreciate any details you can share.

- 1) Was USAID the sole funder of your trial or are there other funders that will allow the research to continue?
- 2) At what phase was this trial affected?
 - a. Before enrollment of participants
 - b. During enrollment of participants
 - c. Trial completion
 - d. Data analysis
 - e. Reporting and publication of findings
 - f. Other
- 3) Has the funding freeze caused any patient safety issues. If so, what are these patient safety issues?
- 4) If USAID-funding was restored, would this trial be able to continue?
- 5) If the trial would be able to continue, how would the trial be affected by the period during which it was shut down?
- 6) Is there additional information you can share about how this trial has been affected by the funding freeze?