

ABANDONING AMERICANS TO DISEASE:

The Trump Administration's Reckless Crusade is
Harming America's Health

COMMITTEE DEMOCRATIC STAFF REPORT

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM
U.S. HOUSE OF REPRESENTATIVES

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For months, Oversight Democrats have been investigating the Trump Administration's systematic and sweeping attack on our public health infrastructure. Today's report, "Abandoning Americans to Disease: The Trump Administration's Reckless Crusade is Harming America's Health," details the findings from our comprehensive review of thousands of pieces of evidence and interviews with over 80 officials, experts, and researchers both inside and outside the government.

The facts speak for themselves. RFK Jr. and the Trump administration have pursued dangerous policies with catastrophic impacts. We document how they have undermined access to vaccines, slashed critical research, gutted food assistance for thousands of children, and have stripped away health care from millions of people. They have also betrayed the promises that RFK Jr. made to his supporters. Healthy, nutritious food is less affordable and less accessible to those who need it most. Big polluters and corporate interests have been allowed to harm the American people.

The fight for our public health is personal for me. I was Mayor of Long Beach through the worst of COVID-19. We learned hard lessons. My mom was a frontline healthcare worker, assisting nurses and doctors—and a proud SEIU member. That summer of 2020, my mom got COVID and passed away. My stepfather then got COVID and also died. My mom would have been the first in line for the vaccine that would have saved her life. But now we are watching conspiracy theorists undermine lifesaving vaccines while attacking the fabric of our public health system.

The disaster that RFK Jr. and Donald Trump are fueling isn't visible every day. But COVID-19 showed how an invisible threat can become a catastrophe in an instant. Millions of people will feel the impact of these policies. Their actions will make the American people sicker. Innocent people will die waiting for cures which RFK Jr. prevented or delayed. Others will die waiting for treatment. Others will get sicker.

This report is a critical step to unmask a growing crisis and to hold wrongdoing accountable.

Sincerely,



Robert Garcia
Ranking Member

EXECUTIVE SUMMARY

Every American knows someone suffering from disease or injury, or is suffering themselves. We know that Americans of all ages, from our kids to our seniors, are developing chronic diseases at much higher rates than in other wealthy countries. We also know our health and safety depend on a wide range of other protections, including from violence, hazardous pollution, and infectious disease. Many Americans put their faith in Donald Trump to Make America Healthy Again, trusting his alliance with Robert F. Kennedy, Jr., to lead them into a brighter future. Americans wanted this to be a future where they had improved access to healthy, whole foods free of contamination; where their health was prioritized over corporate profits; and where they could hope for new innovations and discoveries to support longer lives free from devastating diseases.

Oversight Democrats believe it is critical to build on the world class public health infrastructure and safeguards we have in this country to provide stronger protections against threats to Americans' health. But since stepping into office in 2025, President Trump and his Administration have gutted these safeguards and infrastructure while breaking their promises to Make America Healthy Again repeatedly, and with alarming indifference.

To get a more comprehensive picture of the Trump Administration's effects on Americans' health, Oversight Democrats investigated how its actions have held up to its Make America Healthy Again promises. This investigation involved interviews with more than 80 sources, including current and former senior public health officials and federal employees, scientists, researchers, health care providers, advocates, parents, and other individuals impacted by the Administration's actions.

Oversight Democrats found that the Trump Administration's sweeping dismantling of health programs, policies, and infrastructure far outweigh any benefits from other Administration policies. The result has been a methodical elimination of the safeguards that have quietly protected and advanced Americans' health for years, leaving us newly vulnerable to threats as diverse as foodborne illness, increased violence, exposure to pesticides and chemicals, and diseases long considered eradicated in this country.

Across more than 100 case studies, Committee Democrats found that the Trump Administration's actions are often in direct contradiction to its MAHA messaging. Committee Democrats also found that the Trump Administration has repeatedly sacrificed glaringly obvious opportunities to preserve or advance the health of all Americans in order to achieve comparatively minor, short-lived cost savings or political wins.

When comparing across case studies, it became clear that in many cases, the Trump Administration is following an especially dangerous pattern: the Trump Administration is 1) increasing risk to Americans' health; 2) reducing treatment options for Americans once they do become sick or injured; and 3) eliminating data collection so that the harms of their actions are harder to track. For example, the public is receiving fewer critical warnings about disease outbreaks at the same time that the Trump Administration is driving more disease outbreaks and cutting funding for research into new treatments and more effective responses.

**AS ONE FORMER FEDERAL EMPLOYEE
AND PUBLIC HEALTH EXPERT
WARNED, “WE WON’T KNOW ABOUT
IT, BUT WE WILL ALL BE SICKER.”**



From imposing the effects of an anti-vaccine agenda on all Americans, to canceling scientific research and needlessly delaying medicines and treatments, to dismantling the programs that keep Americans safe in their daily lives, to increasing food insecurity and kicking millions of Americans off their health insurance, the Trump Administration is making Americans less healthy and less safe. Meanwhile, corporate polluters and large agribusiness food corporations will be allowed to continue policies proven to harm public health on a large scale. The evidence is clear: the Trump Administration is not making Americans healthier—it is abandoning Americans to disease.

KEY FINDINGS

1. MEDICINE AND TREATMENT

- A. **The Trump Administration gutted America’s health research infrastructure by terminating or suspending more than \$16 billion being used to fight diseases like cancer, Alzheimer’s, and diabetes. Despite litigation and court orders which forced the Administration to restore funding, more than \$1.1 billion in research funding remains canceled.**
- B. **The Trump Administration has undermined the research that fights chronic and deadly diseases while simultaneously pursuing policies that increase Americans’ risk of developing these diseases.**
- C. **The Trump Administration has allowed vaccine misinformation to destroy promising new mRNA treatments.**
- D. **The Trump Administration is ceding the brightest minds in research and future medical breakthroughs to other countries.**

2. SAFETY, TRACKING, AND ACCESS

- A. **The Trump Administration is dismantling public health programs that protect Americans from major health threats, including some of the very diseases Secretary Kennedy has promised to fight.**
- B. **The Trump Administration is putting wealth and profit over Americans' access to clean water and safe, healthy food.**
- C. **The Trump Administration is rolling back or dismantling federal programs that ensure Americans have access to health care.**

3. VACCINES

- A. **The Trump Administration has restricted, delayed, and complicated access to vaccines for millions of Americans, including by politicizing a key vaccine advisory committee.**
- B. **The Trump Administration's attacks on childhood vaccines raise risks of serious illness and needless death for children.**
- C. **The Trump Administration increased risks of illness, hospitalization, and long-term chronic disease by taking away COVID-19 vaccines from people trying to keep their families safe.**
- D. **The Trump Administration pushed out respected scientists, canceled lifesaving vaccine research, and censored evidence that demonstrates vaccines are safe.**

METHODOLOGY

Since October 2025, Committee Democrats have investigated the effects of the Trump Administration on public health, including the Administration's cuts to scientific research, efforts to dismantle public health and science agencies, and changes to vaccine policies. During the course of the investigation, Committee Democrats spoke with more than 80 current and former senior public health officials and federal employees, scientists, researchers, health care providers, advocates, parents, and other individuals who were present or personally affected as the Trump Administration implemented its upheaval. All individuals were selected for their unique vantage point of the Trump Administration's actions and for their significant experience in public health, science, research, or the federal government.

INTRODUCTION

For decades, the United States has had one of the most successful and robust scientific research and medical innovation systems in the world, responsible for groundbreaking discoveries and approaches to public health that have saved and improved millions of lives.¹ At the same time, studies consistently find that the United States spends more on health care than other countries but experiences worse health outcomes, with Americans dying three years earlier on average than people in similarly-positioned countries.² A 2025 study found a generalized decline in children’s health over the past 17 years, with U.S. children nearly twice as likely to die than children in other high-income countries, more likely to have chronic health issues, and more likely to be diagnosed with conditions like anxiety, depression, eating disorders, and obesity.³

An effective approach to “Making America Healthy Again” would involve building on America’s world-class research and innovation system while meaningfully addressing the drivers of poor health. The Trump Administration has done the opposite, disrupting and politicizing American research and innovation while making the drivers of poor health worse, including cutting Americans’ access to safe and healthy food, affordable health care, vaccines, and programs that reduce health hazards.

The Trump Administration’s approach is striking considering its broad campaign promise to “Make America Healthy Again.” The Make America Healthy Again (MAHA) movement of the Robert F. Kennedy, Jr., and then Donald Trump presidential campaigns was formalized on February 13, 2025, through an executive order that created a “MAHA Commission” (the Commission) and tasked the Commission with developing a MAHA strategy.⁴

The Commission’s first report, published on May 22, 2025, states, among other things, that ultra-processed foods and pesticides are linked to negative health outcomes, including childhood diseases and chronic disease.⁵ Its second report, the MAHA Strategy, published on

¹ Delfino S, Larson A, Haines D, Grell R., *World-Class Innovation, but at What Cost? A Brief Examination of the American Healthcare System*, Cureus (June 3, 2023) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC10317843/>).

² The Commonwealth Fund, *U.S. Health Care from a Global Perspective, 2026* (May 28, 2026) (online at www.commonwealthfund.org/publications/issue-briefs/2026/may/us-health-care-global-perspective-2026).

³ *New Research Reveals Alarming Decline in U.S. Children’s Health*, UCLA Health (July 7, 2025) (online at www.uclahealth.org/news/release/new-research-reveals-alarming-decline-us-childrens-health).

⁴ *Establishing the President’s Make America Health Again Commission*, The White House (Feb. 13, 2025) (online at www.whitehouse.gov/presidential-actions/2025/02/establishing-the-presidents-make-america-healthy-again-commission/).

⁵ *Read the Full “Make America Healthy Again” Report*, New York Times (May 22, 2025) (online at www.nytimes.com/interactive/2025/05/22/us/maha-master-docdocx.html).

September 9, 2025,⁶ does not propose any direct changes to ultra-processed foods or pesticides, and even describes EPA’s existing pesticide review processes as “robust.”⁷

The Trump Administration has yet to show any concrete results that address any of these legitimate concerns, and has instead largely implemented policies and gutted programs in a manner that severely threatens Americans’ health.⁸ Based on the findings chronicled throughout this report, it is clear that the Trump Administration has broken its promises to all Americans and made the country sicker, not healthier.

⁶ *Read the Full “Make America Healthy Again” Report*, New York Times (May 22, 2025) (online at www.nytimes.com/interactive/2025/05/22/us/maha-master-docdocx.html); MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

⁷ *The New MAHA Report Lacks Teeth, Experts Say*, TIME (Sept. 9, 2025) (online at <https://time.com/7315789/maha-report-strategy-plan-rfk-jr/>).

⁸ *Study Finds Children in U.S. Became Increasingly Unhealthy Over Past 17 Years*, PBS (July 7, 2025) (online at www.pbs.org/newshour/health/study-finds-children-in-u-s-became-increasingly-unhealthy-over-past-17-years).

CHAPTER 1

MEDICINE AND TREATMENT

OVERVIEW

Since President Trump resumed office in January 2025, the Trump Administration has repeatedly attacked the progress being made in developing new treatments, medicines, and cures for chronic disease, diabetes, cancer, Alzheimer's, and other devastating and common diseases that affect millions of Americans.

Among other things, the Trump Administration has canceled and disrupted successful scientific research that was already helping people suffering from chronic and serious conditions; allowed political ideology and bias to dictate scientific grants and research; pushed scientists conducting research in the fields of health and medicine out of academia, the government, and even the country; and created chaos and uncertainty for patients, doctors, and researchers through an onslaught of arbitrary and haphazard cuts and changes.

Oversight Democrats' investigation found:

- A. The Trump Administration gutted America's health research infrastructure by terminating or suspending more than \$16 billion being used to fight diseases like cancer, Alzheimer's, and diabetes. Despite litigation and court orders which forced the Administration to restore funding, more than \$1.1 billion in research funding remains canceled.**
- B. The Trump Administration has undermined the research that fights chronic and deadly diseases while simultaneously pursuing policies that increase Americans' risk of developing these diseases.**
- C. The Trump Administration has allowed vaccine misinformation to destroy promising new mRNA treatments.**
- D. The Trump Administration is ceding the brightest minds in research and future medical breakthroughs to other countries.**

This chapter documents just some of the many ways that the Trump Administration's haphazard and dangerous approach to cutting grant funding and destroying ongoing scientific research is making it less likely that we find new treatments, and even cures, for critical diseases.

I. BACKGROUND

For years, the United States has been the largest funder of biomedical research in the world.⁹ This, along with decades of investment in education, research, people, and institutions, helped to build the robust scientific infrastructure that existed in the United States as of January 2025. Federal agencies including the National Institutes of Health (NIH), the Environmental Protection Agency (EPA), the National Oceanic and Atmospheric Administration (NOAA), and the National Science Foundation (NSF), have funded some of the most consequential research ever done, both by government scientists in government labs and at research institutions across the country like major universities and hospital systems. This system of science and medical research—built from the time, effort, and labor of scientific experts, including many international students and scientists—has flourished because of consistent year-over-year investments by the federal government.¹⁰

Through this system, federal investments help people live longer and healthier lives, reduce future health care spending by improving medical treatments, support the U.S. economy and create jobs, and uphold U.S. leadership on the global stage.¹¹ Federal investments allowed us to map the human genome, develop the capacity for gene editing, create lifesaving cancer treatments, and eradicate smallpox, to name just a few of the world-changing innovations made possible by the responsible use of taxpayer dollars to advance American science and medicine.¹²

⁹ National Institutes of Health, *Grants and Funding* (Jan. 21, 2025) (online at www.nih.gov/grants-funding) (accessed Nov. 25, 2025).

¹⁰ ACT for NIH, *Medical Research Saves Lives* (accessed Dec. 12, 2025) (online at www.actfor.nih.org/whats-at-stake/); *International Talent: Essential to America's Innovation Economy and National Security*, Association of American Universities (Jan. 5, 2026) (online at www.aau.edu/key-issues/international-talent-essential-americas-innovation-economy-and-national-security).

¹¹ *Science Under Threat in the United States: NIH is a Sound Investment for the US Taxpayer*, eLife, (Mar. 25, 2025) (online at <https://elifesciences.org/articles/106710>); ACT for NIH, *Medical Research Saves Lives* (online at www.actfor.nih.org/whats-at-stake/) (accessed Dec. 12, 2025).

¹² National Human Genome Research Institute, National Institutes of Health, *Fact Sheet: Human Genome Project*, (June 13, 2024) (online at www.genome.gov/about-genomics/educational-resources/fact-sheets/human-genome-project); David Fajardo-Ortiz, Stefan Hornbostel, Maywa Montenegro de Wit, Annie Shattuck, *Funding CRISPR: Understanding the Role of Government and Philanthropic Institutions in Supporting Academic Research Within the CRISPR Innovation System*, Quantitative Science Studies (June 22, 2022) (online at <https://direct.mit.edu/qss/article/3/2/443/110371/Funding-CRISPR-Understanding-the-role-of>); Rebecca Siegel, Kimberly Miller, Hannah Fuchs, Ahmedin Jemal, *Cancer Statistics, 2022, CA: A Cancer Journal for Clinicians* (Jan. 12, 2022) (online at <https://acsjournals.onlinelibrary.wiley.com/doi/full/10.3322/caac.21708>); *9 Federally Funded Scientific Breakthroughs That Changed Everything*, New York Times (May 16, 2025) (online at www.nytimes.com/2025/05/16/science/federally-funded-science-breakthroughs.html); David J. Sencer CDC Museum Public Health Academy, *Fact Sheet: Smallpox Eradication* (online at www.cdc.gov/museum/pdf/cdc-m-pha-stem-lesson-smallpox-eradication-lesson.pdf) (accessed Nov. 25, 2025).

NIH research funding has long had a positive economic impact, driving more than \$800 billion in economic activity and supporting more than 3.7 million jobs over the past ten years.¹³

Federal funding plays a critical role in advancing foundational or “basic” scientific research, which works to understand the underlying mechanisms of disease and identify promising areas of study.¹⁴ This early-stage work is essential for discovering new drugs, and new treatments, vaccines, and medicines could not be discovered without it. A recent study found that NIH funding contributed in some way to 354 of 356 drugs—over 99%—approved between 2010 and 2019.¹⁵

II. FINDINGS

A. **The Trump Administration gutted America’s health research infrastructure by terminating or suspending more than \$16 billion being used to fight diseases like cancer, Alzheimer’s, and diabetes. Despite litigation and court orders which forced the Administration to restore funding, more than \$1.1 billion in research funding remains canceled.**

In just one year, the foundation underlying the United States’ world-changing research and innovation ecosystem was irretrievably broken by the Trump Administration. Researchers reported to Committee Democrats that, from January 2025 through April 2026, the Trump Administration terminated, suspended, or otherwise disrupted at least 7,464 federal grants resulting in \$16 billion in lost or disrupted funding for scientific research.¹⁶ These terminations, suspensions, and disruptions were motivated not by concerns of scientific integrity, but by partisan culture war talking points, retribution campaigns against academic institutions, and a “chainsaw” approach to recklessly cutting grants the Trump Administration claimed “no longer effectuate[d] agency priorities.”¹⁷ Some federal grants for scientific research were delayed because of the Trump Administration’s early 2025 wholesale freeze on all communications and review panels, which prevented federal agencies from considering grant renewal applications, reviewing new grant proposals, and even communicating with researchers about existing grants

¹³ *UMR Releases Annual NIH Economic Impact Report: 2026 Update*, United for Medical Research (Mar. 10, 2026) (online at www.unitedformedicalresearch.org/statements/umr-releases-annual-nih-economic-impact-report-2026-update/).

¹⁴ Ashley J. Stevens et al., *The Role of Public-Sector Research in the Discovery of Drugs and Vaccines*, *New England Journal of Medicine* (Feb. 10, 2011) (online at www.nejm.org/doi/full/10.1056/NEJMsa1008268).

¹⁵ Ekaterina Galkina Cleary et al. *Comparison of Research Spending on New Drug Approvals by the National Institutes of Health vs the Pharmaceutical Industry, 2010-2019*, *JAMA Health Forum* (Apr. 28, 2023) (online at <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2804378>).

¹⁶ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

¹⁷ *These 5 Words Have Killed Millions in Grants and Advanced Trump’s Agenda*, *Washington Post* (Mar. 27, 2025) (online at www.washingtonpost.com/science/2025/03/27/trump-federal-grants-research-cuts/); *DOGE Takes a Chainsaw to Federally Funded Scientific Research*, *The Nation* (Feb. 28, 2025) (online at www.thenation.com/article/politics/doge-chain-saw-federally-funded-scientific-research/).

and research projects.¹⁸ Many more grants were randomly disrupted or canceled with little or no explanation given.¹⁹

One way that the Trump Administration reportedly identified research and grants for cancelation was by searching grant applications for common words it deemed to be politicized. The terms that the Administration used for such searches were so broad as to include words like “historically,” or “women.”²⁰ By searching for terms as a method to screen grants, many grants were flagged for happening to include certain words—for example, “accessibility” in the context of data accessibility rather than diversity, equity, or inclusion, or terms like “transcription” and “biodiversity” being flagged simply because those words contained within them words the Administration was searching for, such as “trans” and “diversity,” respectively.²¹ In December 2025, the Trump Administration released official guidance directing NIH staff to use an automated tool to scan for words that the Administration claims are “misaligned” with President Trump’s priorities.²² This guidance formalized the Trump Administration’s months-long injection of a blatantly political agenda into the nonpolitical world of scientific research; a unified grant screen tool is now in use across NIH.²³

Out of fear of losing funding, some scientists have changed the wording of their grant proposals to prioritize arbitrary adjectives over an accurate summation of their work. This not only sacrifices clarity and scientific rigor, but also unnecessarily weaves politics into the scientific process.²⁴ Decision-making regarding grants, which was routinely conducted by expert career scientists, has been increasingly taken over by unqualified political leaders. As a result,

¹⁸ *Freeze on NIH Grant Reviews Leaves Scientists Confused and Frustrated*, The Scientist (Jan. 27, 2025) (online at www.the-scientist.com/freeze-on-nih-grant-reviews-leaves-scientists-confused-and-frustrated-72501).

¹⁹ *These 5 Words Have Killed Millions in Grants and Advanced Trump’s Agenda*, Washington Post (Mar. 27, 2025) (online at www.washingtonpost.com/science/2025/03/27/trump-federal-grants-research-cuts/).

²⁰ *These 197 Terms May Trigger Reviews of Your NIH, NSF Grant Proposals*, Forbes (Mar. 15, 2025) (online at www.forbes.com/sites/brucelee/2025/03/15/these-197-terms-may-trigger-reviews-of-your-nih-nsf-grant-proposals).

²¹ *Here Are the Words Putting Science in the Crosshairs of Trump’s Orders*, Washington Post (Feb. 4, 2025) (online at www.washingtonpost.com/science/2025/02/04/national-science-foundation-trump-executive-orders-words/).

²² *NIH Pauses New Funding for Grants That Include “Health Equity,” “Structural Racism,” Pending Review*, NOTUS (Dec. 15, 2025) (online at www.notus.org/health-science/nih-funding-grants-review-terms-text-analysis-tool-health-equity-racism).

²³ *NIH Specifies How Grant Reviewers Should Ensure Alignment with Trump Priorities*, Stat News (Dec. 15, 2025) (online at www.statnews.com/2025/12/15/nih-specifies-how-grant-reviewers-should-ensure-alignment-with-trump-priorities/).

²⁴ *Scientists Had to Change More than 700 Grant Titles to Receive NIH Funding. Health Disparities Researchers Fear What’s Next*, Stat News (Oct. 29, 2025) (online at www.statnews.com/2025/10/29/nih-banned-words-analysis-grant-title-changes).

the nonpolitical career program officers, who work with scientists applying for grants and grant recipients, have been limited in their ability to protect scientific integrity.²⁵

The exact number of grants canceled or disrupted in the second Trump Administration may never be known because of the haphazard and chaotic way the Trump Administration made these decisions, with NIH officials not knowing exactly how many grants were being terminated or why. One NIH official described the cancellations in March 2025 as, “they’re just going in and picking random grants to terminate.”²⁶ We do know that as of April 2026, at least 5,468 NIH grants had been terminated or suspended with over \$450 million in funds still lost. At NSF, at least 1,996 grants had been terminated or suspended with over \$690 million in funds still lost, even as grants have been ordered restored by the courts.²⁷ As of late 2025, 383 clinical trials testing treatments for conditions such as cancer, HIV/AIDS, mental or behavioral health conditions, substance abuse, and chronic diseases had lost grant funding as a result, with more than 74,000 patients directly impacted.²⁸

NIH has long had robust processes in place to assess the quality of proposed and ongoing research in order to ensure that the research it funds is promising and high quality. Before the Trump Administration, NIH regularly reviewed the research it funded through required progress reports and consistent oversight by NIH program managers tasked with overseeing grants and research. This oversight was conducted methodically and carefully, and NIH did not regularly cancel or disrupt research in the midst of a project because it would waste the time and energy of scientists and the taxpayer money supporting that research. This type of unilateral cancellation and disruption was so rare that there were fewer than five such terminations from 2012 through 2024. In 2025, there were thousands.²⁹

²⁵ *Trump Executive Order Seeks to Centralize Control of Grantmaking Under Political Appointees*, Stat News (Aug. 8, 2025) (online at www.statnews.com/2025/08/08/trump-executive-order-disrupts-science-lawsuits-expected).

²⁶ *NIH's Grant Terminations Are "Utter and Complete Chaos"*, The Atlantic (Mar. 14, 2025) (online at www.theatlantic.com/health/archive/2025/03/nih-grant-terminations/682039/).

²⁷ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026); *US Science After a Year of Trump*, Nature (Jan. 20, 2026) (online at www.nature.com/immersive/d41586-026-00088-9/index.html); Beth Faiman, *The Impact of Federal Funding Cuts on Research, Practice, and Patient Care*, Journal of the Advanced Practitioner in Oncology, National Library of Medicine (July 1, 2025) (online at <https://pubmed.ncbi.nlm.nih.gov/articles/PMC12322968/>); *NIH Will Reinstate 900 Grants in Response to Court Order*, Science (June 26, 2025) (online at www.science.org/content/article/nih-will-reinstate-900-grants-response-court-order).

²⁸ *NIH Cuts Affected Over 74,000 Patients Enrolled in Experiments, Report Finds*, PBS News (Nov. 17, 2025) (online at www.pbs.org/newshour/health/nih-cuts-affected-over-74000-patients-enrolled-in-experiments-report-finds); Vishal Patel et al. *Clinical Trials Affected by Research Grant Terminations at the National Institutes of Health*, JAMA Internal Medicine (Nov. 17, 2025) (online at <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2840939>).

²⁹ *Trump's NIH Axed Research Grants Even After a Judge Blocked the Cuts, Internal Records Show*, ProPublica (May 7, 2025) (online at www.propublica.org/article/trump-nih-cuts-transgender-research-grants).

Many immensely consequential findings are not obviously promising until later in a study, or result from research initially designed to understand something entirely different.³⁰ Clinical trials were canceled, data from studies was lost, lab animals were sacrificed, and researchers left the scientific field altogether. Even where researchers can be rehired and delayed studies can be restarted, scientists and institutions can no longer trust federal investments or rely on federal infrastructure.³¹ The long-term impacts of these decisions are incalculable.

If scientists cannot rely on federal support and stability for their research, fewer new therapies will make it to market and Americans will pay the price. They will be denied the benefits of new technology, including more time with their loved ones, a better quality of life, and the hope that innovation holds for so many. The nonpartisan Congressional Budget Office (CBO) estimates that additional NIH funding cuts the Trump Administration has proposed would sharply reduce the number of new drugs available to Americans in the coming decades.³²

B. The Trump Administration has undermined the research that fights chronic and deadly diseases while simultaneously pursuing policies that increase Americans' risk of developing these diseases.

While Secretary Kennedy and the Trump Administration claim to be addressing longstanding issues like chronic disease, cancer, and Alzheimer's, the evidence shows that in just one year, they have repeatedly gutted promising research into treatments for exactly these conditions. They have delayed or closed the door to these treatments at the same time that the Trump Administration has taken action to increase Americans' risk of developing these illnesses, many of which are chronic conditions.

This finding is particularly alarming as addressing chronic disease is an important goal that has widespread support, including within the MAHA movement. Chronic disease is the primary cause of death and disability in the United States, with an estimated 129 million people

³⁰ *How a Smaller NIH Could Have Hindered Medical Research*, Inside Higher Ed (Sept. 30, 2025) (online at www.insidehighered.com/news/government/science-research-policy/2025/09/30/researchers-map-out-possible-impacts-smaller-nih).

³¹ Vishal Patel et al. *Clinical Trials Affected by Research Grant Terminations at the National Institutes of Health*, JAMA Internal Medicine (Nov. 17, 2025) (online at <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2840939>); *Science Shattered*, ProPublica (June 12, 2025) (online at <https://projects.propublica.org/nih-cuts-research-lost-trump/>); *Lab Animals Face Being Euthanized as Trump Cuts Research*, New York Times (Apr. 29, 2025) (online at www.nytimes.com/2025/04/29/science/trump-research-animals-euthanasia.html);

³² Letter from Director Phillip L. Swagel, Congressional Budget Office, to Ranking Member Jeff Merkley, Senate Committee on the Budget, Ranking member Bernard Sanders, Senate Committee on Health, Education, Labor and Pensions, Ranking Member Frank Pallone, House Committee on Energy and Commerce, Ranking Member Brendan F. Boyle, House Committee on the Budget (July 18, 2025) (online at www.budget.senate.gov/imo/media/doc/cbo_fda_nih_letter_071825.pdf).

suffering from at least one major chronic disease and which is the “leading driver” of the nation’s \$4.9 trillion in annual health care costs.³³

As part of its MAHA strategy, the Trump Administration announced it was launching an Initiative on Chronic Disease. This Initiative is organized through NIH and is ostensibly intended to “leverage and align existing NIH research projects, improve NIH coordination on chronic disease research, and generate actionable results for diseases arising in childhood and adulthood.”³⁴ However, instead of following through on these promises, the Trump Administration and Secretary Kennedy have terminated, suspended, or otherwise disrupted research funding into chronic and deadly diseases, including at least 593 grants providing over \$1.4 billion in research funding,³⁵ and fired the expert scientists that work on these issues in the federal government.

1. DIABETES

Diabetes is the seventh leading cause of death in the U.S. and over 40 million Americans are living with diabetes with an estimated 1.5 million newly diagnosed every year.³⁶ Diabetes has also been shown to increase the risk of getting Alzheimer’s disease, as those with type 1 diabetes have three times the risk for Alzheimer’s as those without diabetes, and those with type 2 diabetes have double the risk.³⁷ While the association is clear, more research is needed to better understand the connection and solutions to help prevent cognitive decline.³⁸

What the Trump Administration Has Said: The May 2025 and September 2025 MAHA reports both highlighted diabetes and its increasing prevalence among children, as well as the importance of access to healthy and affordable food to reduce rates of chronic disease.³⁹

³³ *Chronic Disease Prevalence in the US: Sociodemographic and Geographic Variations by Zip Code Tabulation Area*, Preventing Chronic Disease, Centers for Disease Control and Prevention (Feb. 29, 2024) (online at www.cdc.gov/pcd/issues/2024/23_0267.htm); Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

³⁴ *Id.*

³⁵ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

³⁶ American Diabetes Association, *Statistics About Diabetes* (online at <https://diabetes.org/about-diabetes/statistics/about-diabetes>) (accessed Apr. 14, 2026).

³⁷ *Both Type 1 and Type 2 Diabetes Linked to Increased Dementia Risk*, Inside Precision Medicine (Mar. 18, 2026) (online at www.insideprecisionmedicine.com/topics/patient-care/both-type-1-and-type-2-diabetes-linked-to-increased-dementia-risk/).

³⁸ *Diabetes Increases the Risk of Getting Alzheimer’s Disease*, UHealth Today (Jan. 5, 2026) (online at www.uhealth.org/today/diabetes-increases-risk-of-alzheimers-disease/).

³⁹ MAHA Commission, *The MAHA Report* (May 22, 2025) (www.whitehouse.gov/wp-content/uploads/2025/05/MAHA-Report-The-White-House.pdf); MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at

What the Trump Administration Has Done: Disrupted funding for 141 grants providing more than \$400 million for diabetes research.⁴⁰ This included canceled funding for a decades-long, highly successful program researching diabetes outcomes and treatment, while driving up the cost of healthy foods and pursuing deep cuts to the food assistance programs many parents need to afford them.⁴¹

Case Study: In March 2025, NIH canceled funding for the nationwide Diabetes Prevention Program (DPP), likely because the funding was managed by Columbia University—an institution that the Trump Administration has singled out for political reasons.⁴² For the last 30 years, DPP has gathered valuable data by tracking patients with diabetes and prediabetes, greatly advancing understanding and treatment of the disease.⁴³ While the Trump Administration finally restored the federal research funding to revive the landmark diabetes study in summer 2025, the unexpected and unnecessary four-month halt in funding set back the latest phase of research: exploring potential connections between diabetes and dementia, including Alzheimer’s disease.⁴⁴ When asked about the months-long suspension in DPP funding in a Senate Appropriations Committee hearing, Secretary Kennedy stated, “I have no idea why that study was paused.”⁴⁵

One diabetes researcher involved in DPP reported to Committee Democrats that it took a substantial period of time to restart the study, reengage participants, and make up for the lost time—a process which was still ongoing as of April 2026. The abrupt nature of the cancellation meant that a significant number of appointments with study participants had to be canceled, including difficult-to-coordinate brain imaging appointments, with researchers unable to talk to participants to explain the reason for the cancellations. Several clinics lost staff when employees

www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf); *Kennedy, in His Own Words: Flu, Diabetes, Autism and More*, New York Times (Jan. 28, 2025) (online at www.nytimes.com/2025/01/28/health/rfk-jr-vaccines-autism-video.html).

⁴⁰ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

⁴¹ *Surge in Wholesale Prices is a Warning*, Axios (Mar. 18, 2026) (online at www.axios.com/2026/03/18/inflation-ppi-prices-vegetables); National WIC Association, *Press Release: National WIC Association Denounces Trump’s Proposed Cuts to WIC’s Fruit and Vegetable Benefits* (Apr. 3, 2026) (online at www.nwica.org/press-releases/national-wic-association-denounces-trumps-proposed-cuts-to-wics-fruit-and-vegetable-benefits); *Opinion: What SNAP “Reform” Really Means to Me and My Children*, USA Today (Apr. 1, 2026) (online at www.usatoday.com/story/opinion/voices/2026/04/01/snap-reforms-food-cuts-my-kids/89297652007/).

⁴² *Trump Administration Cancels Crucial Funding for Diabetes Prevention Program*, AJMC (Mar. 18, 2025) (online at www.ajmc.com/view/trump-administration-cancels-crucial-funding-for-diabetes-prevention-program).

⁴³ *NIH Cancels Funding for Landmark Diabetes Study at a Time of Focus on Chronic Disease*, Stat News (Mar. 17, 2025) (www.statnews.com/2025/03/17/trump-cuts-columbia-university-nih-cancels-diabetes-prevention-program-study).

⁴⁴ Information provided to Committee Democrats.

⁴⁵ YouTube, *Shaheen Questions RFK Jr. On HHS Budget, Refuses to Commit to Funding for Opioid Epidemic Response* (online at www.youtube.com/watch?v=FASxpC0WZWk) (accessed Dec. 9, 2025).

could not be maintained with other funding. This put a significant strain on the clinics and researchers doing this work and delayed interventions that could improve the lives of diabetics. The loss of staff meant that when funding was restored, staff had to be rehired and retrained.⁴⁶

Case Study: The Trump Administration worked with Congressional Republicans to enact steep cuts to the Supplemental Nutrition Assistance Program (SNAP) and health care through the One Big Beautiful Bill Act (OBBBA). These cuts are projected to result in 2.4 million people losing food assistance and 10 million people losing their health insurance by 2034, while the wealthiest Americans are instead expected to enjoy an additional \$13,600 annually in tax cuts.⁴⁷ On top of these cuts, the Trump Administration’s budget for fiscal year 2027 proposes to cut fruit and vegetable benefits for low-income breastfeeding mothers from \$54 to \$13 per month, and for low-income young children from \$27 to \$10 per month.⁴⁸ With Americans already struggling to afford healthy food as prices continue to increase due to President Trump’s tariffs and war with Iran,⁴⁹ these policy decisions stand in stark contrast to the MAHA promise of reducing chronic disease through improved access to healthy food.

2. HEALTH THREATS FROM CHEMICAL EXPOSURE

What the Trump Administration Has Said: The September 2025 MAHA report raised concerns that chronic disease may be linked to environmental health risks and exposure to chemicals.⁵⁰ The report states:

The U.S. government is committed to fostering radical transparency and gold-standard science to better understand the potential cumulative impacts of environmental exposures. We must understand and ameliorate any potential links between cumulative chemical exposure and childhood chronic disease.⁵¹

⁴⁶ Information provided to Committee Democrats.

⁴⁷ *2.4 Million People Expected to Lose Food Stamps After Trump Agenda Law Broadened Work Requirements, CBO Says*, CNN (Aug. 11, 2025) (online at www.cnn.com/2025/08/11/politics/food-stamps-work-requirements-trump-bill).

⁴⁸ Food Research & Action Center, *President’s Budget Calls for Cuts to Fruits, Vegetables Benefit for Mothers and Children in WIC* (Apr. 10, 2026) (online at <https://frac.org/blog/presidents-budget-calls-for-cuts-to-fruits-vegetables-benefit-for-mothers-and-children-in-wic>).

⁴⁹ *Your Produce Bill is About to Get Pricey as the Iran War Jacks Up U.S. Food Costs*, Business Insider (Apr. 4, 2026) (online at www.businessinsider.com/grocery-produce-prices-rising-oil-soars-during-war-with-iran-2026-4).

⁵⁰ MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

⁵¹ *Id.*

Indeed, research has shown that environmental factors, much more than genetics, are the best predictor of chronic disease development.⁵²

What the Trump Administration Has Done: Disrupted approximately 198 grants providing \$189.9 million for research at EPA.⁵³ Canceled research and support for environmental hazard responses meant to address the health impacts of toxic exposures while allowing for higher levels of chemicals and pollutants in the environment.⁵⁴

Case Study: One researcher reported to Committee Democrats that their research was cited in one of the MAHA reports just weeks after the sudden termination of their EPA grant on the health impact of exposures to different endocrine disrupting chemicals, including those found in personal care products, pesticides, and industrial chemicals. The researcher's team was two years into their three-year EPA grant in May 2025 when they received an immediate termination notice. After learning that their research was cited by the Administration, their institution filed a formal appeal of the termination. This appeal was denied months later and EPA told them that the research no longer effectuated the priorities of the agency.⁵⁵

When asked about the impact this termination had on their research, the researcher said: “[T]his is years of people in my lab’s lives, dozens of experiments, and months of work that suddenly there is no support for. It makes it really difficult to finish those [studies] so they are in publishable form.”⁵⁶ They continued, “They may be saving a couple months’ worth of costs, but ultimately,

⁵² National Institute of Environmental Health Sciences, *Environment Strongly Influences Chronic Disease Development* (online at www.niehs.nih.gov/news/factor/2025/4/feature/environment-predicts-chronic-disease) (accessed Apr. 13, 2026)

⁵³ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

⁵⁴ *Trump Set to Gut U.S. Climate Change Policy and Environmental Regulations*, *White House Official Says*, PBS News (Feb. 10, 2026) (online at www.pbs.org/newshour/politics/trump-set-to-gut-u-s-climate-change-policy-and-environmental-regulations-white-house-official-says); *In Game-Changing Climate Rollback, E.P.A. Aims to Kill a Bedrock Scientific Finding*, *New York Times* (July 29, 2025) (online at www.nytimes.com/2025/07/29/climate/epa-endangerment-finding-repeal-proposal.html); *Trump Exempts More Than 100 Polluters from Environmental Standards*, *The Hill* (July 18, 2025) (online at <https://thehill.com/policy/energy-environment/5408714-trump-epa-polluters-environmental-standards-clean-air-act>).

⁵⁵ Information provided to Committee Democrats.

⁵⁶ Information provided to Committee Democrats.

**“THEY THREW AWAY TWO YEARS
OF GOVERNMENT MONEY THAT
WAS SPENT ON THIS RESEARCH
THAT WILL NOT BE FINISHED.”⁵⁷**



Case Study: Another researcher, an ecotoxicologist, attended an April 2025 conference on chemicals and plastics at which Secretary Kennedy gave the keynote address. During his address, Secretary Kennedy cited the researcher’s study into the prevalence of microplastics in seafood. Yet just hours earlier, that researcher had learned that an EPA grant which funded their continuing work had been terminated because the research supposedly “no longer effectuate[d] agency priorities.” This grant cancellation meant that the researcher was unable to build on the kind of research that Secretary Kennedy had just cited publicly, advancing understanding of the long-term impacts of pesticide exposure on reproduction of fish and its significant implications for wildlife and the food supply.⁵⁸

Case Study: In July 2025, the Trump Administration announced it was closing EPA’s scientific research arm—the Office of Research and Development—which employed thousands of expert chemists, biologists, toxicologists, and other scientists.⁵⁹ This office was responsible for providing the best available science to support agency decision-making free from political interference and to advance understanding of new environmental threats in need of regulation to protect Americans’ health, such as toxic chemicals and water pollution.⁶⁰ The Office’s research led to regulations to protect Americans’ health by safeguarding air and water from pollution.⁶¹ In addition to conducting research, staff also provided technical assistance in response to environmental disasters such as the lead drinking water crisis in Flint, Michigan, and the toxic

⁵⁷ Information provided to Committee Democrats.

⁵⁸ *Research Cuts Conflict with MAHA’s Stated Goals*, NPR (June 3, 2025) (online at www-s4.npr.org/2025/06/03/nx-s1-5414544/research-cuts-conflict-with-mahas-stated-goals).

⁵⁹ *EPA Eliminates Research and Development Office, Begins Layoffs*, AP (July 19, 2025) (online at <https://apnews.com/article/epa-zeldin-trump-reorganization-science-research-acf0ad3a649f940e138b2a917169405f>).

⁶⁰ *Trump Administration Shuts Down EPA’s Scientific Research Arm*, NPR (July 20, 2025) (online at www.npr.org/2025/07/20/nx-s1-5474320/trump-epa-scientific-research-zeldin).

⁶¹ *How the Trump Administration Ended Independent Science at the EPA*, New York Times (Apr. 27, 2026) (online at www.nytimes.com/2026/04/27/climate/epa-science-trump-cuts.html).

chemical train derailment in East Palestine, Ohio.⁶² As of April 2026, the office’s more than 1,500 experts have been fired, pushed out, relocated, or reassigned to roles where their research can no longer follow the science or the best interest of the health of American people, but is now required to “align with agency and administration priorities.”⁶³ Without this office, EPA will not be able to continue to conduct research into the health effects of human exposure to pollutants and ultimately better respond to serious health hazards caused by emergencies.⁶⁴

3. CANCER

The United States has long been a leader in cancer research. Patients have benefited from decades of sustained investment since President Richard Nixon signed the National Cancer Act of 1971, which committed billions of dollars to cancer research and jump-started the nation’s “war on cancer.” The five-year cancer-survival rate in the United States has increased almost 20% since the 1970s, and a recent study found that every \$326 invested in cancer research extends a human life by a year. The U.S. cancer research system relies on scientists at research universities and cancer centers whose work is in large part funded by the federal government, primarily through NIH and its National Cancer Institute (NCI). NCI partners with hospitals and universities to deliver cancer treatments to communities across the country, translating research and promising discoveries into new treatments for patients.⁶⁵ Cancer research is particularly complex because cancer is not one disease but many, with hundreds of subtypes of potentially infinite variations. Despite this complexity, investments made into cancer research have paid dividends, and since 1991, 4.5 million fewer people have died of cancer than would have without these investments.⁶⁶

What the Trump Administration Has Said: The White House has said it is “committed to driving innovation to prevent and treat childhood diseases,” including pediatric cancer.⁶⁷

⁶² *Potential EPA Cuts Could Have Big Impact at N.C. Campus*, Spectrum News (Mar. 24, 2025) (online at <https://spectrumlocalnews.com/nc/charlotte/news/2025/03/24/epa-office-of-research-zeldin>); *Former Top EPA Official Warns of Dire Consequences of Planned Purge at the Agency’s Science Office*, Inside Climate News (Mar. 18, 2025) (online at <https://insideclimatenews.org/news/18032025/former-epa-official-consequences-of-planned-science-office-purge>).

⁶³ *How the Trump Administration Ended Independent Science at the EPA*, New York Times (Apr. 27, 2026) (online at www.nytimes.com/2026/04/27/climate/epa-science-trump-cuts.html).

⁶⁴ *Id.*

⁶⁵ National Cancer Institute, *NCI-Designated Cancer Centers* (online at www.cancer.gov/research/infrastructure/cancer-centers) (accessed Apr. 20, 2026).

⁶⁶ American Cancer Society, *Cancer Facts & Figures 2025*, (online at www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2025/2025-cancer-facts-and-figures-acs.pdf) (accessed June 15, 2026).

⁶⁷ The White House, *Unlocking Cures for Pediatric Cancer with Artificial Intelligence* (Sept. 30, 2025) (online at www.whitehouse.gov/presidential-actions/2025/09/unlocking-cures-for-pediatric-cancer-with-artificial-intelligence/).

Secretary Kennedy has said that “fighting pediatric cancer” is one of MAHA’s top five wins for the year.⁶⁸

What the Trump Administration Has Done: Disrupted 647 grants providing more than \$1.7 billion in funding for cancer research.⁶⁹ Conducted an “ongoing dismantling of the cancer research system” in the United States, including canceling research and clinical trials to find treatment for pediatric brain cancer.⁷⁰

Case Study: NIH closed the Pediatric Brain Tumor Consortium that brought together 16 of the best universities and institutions in North America to try to find cures and treatments for pediatric brain cancer. In the summer of 2025, the Consortium learned that after more than 25 years of operation, it would not be given the opportunity to apply for a funding renewal from NIH.⁷¹ A pediatric oncologist and one of the Consortium’s leaders reported to Committee Democrats that the Consortium was forced to redirect all of its remaining resources to ensuring the children enrolled in active studies would be able to continue receiving treatment even as their clinical trials were canceled. Several studies were stopped prematurely without reaching a conclusion and those terminated studies will never be reopened—a loss for science.⁷²

While some trials were transferred to other institutions, there will be approximately a year of delay for those trials and their patients. In some cases, the trials could already have been completed in the course of the year delay, and some children will now never get the chance to enroll because their condition will have worsened to the point of no longer being eligible for the specific trial, or they will have passed away.⁷³

Pediatric brain cancer research accounts for a small percentage of federal research dollars and the Consortium received only part of this total—approximately \$4 million a year. After the public learned of the Consortium’s closing, private donors offered to fund its work in place of the federal funds the Consortium had been receiving. One of the Consortium’s leaders reported to Committee Democrats that the Trump Administration refused to accept this alternative, leaving the Consortium in a position where it would have to recreate a version of the Consortium completely independent of NCI in order to continue its research.⁷⁴

⁶⁸ Secretary Kennedy, (@SecKennedy), X (Dec. 4, 2025) (online at <https://x.com/SecKennedy/status/1996648919175172565/photo/1>).

⁶⁹ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

⁷⁰ *Trump Is Shutting Down the War on Cancer*, New York Times (Sept. 14, 2025) (online at www.nytimes.com/2025/09/14/magazine/cancer-research-grants-funds-trump.html).

⁷¹ *Pediatric Brain Cancer Group to Lose Federal Funding*, New York Times (Aug. 28, 2025) (online at www.nytimes.com/2025/08/28/well/pediatric-brain-cancer-trial-group.html).

⁷² Information provided to Committee Democrats.

⁷³ Information provided to Committee Democrats.

⁷⁴ Information provided to Committee Democrats.

In closing the Consortium, NIH stated that NCI would “strengthen” the Pediatric Early Phase Clinical Trials Network (PEP-CTN) and support early phase clinical trials for children with brain tumors in place of the Consortium. However, as of spring 2026, according to multiple oncologists, PEP-CTN has not received supplemental funding to take on the additional work.⁷⁵ A pediatric neuro-oncologist who previously worked with the Consortium reported to Committee Democrats that PEP-CTN is not a true replacement for the Consortium, as PEP-CTN’s focus is spread across many types of cancers. They believed the Consortium was successful because it was able to bring together many different types of doctors and researchers focused specifically on pediatric brain tumors. They shared that losing the Consortium means losing a consistent avenue for early phase research to reach patients for these very rare pediatric cancers.⁷⁶

Case Study: One researcher who had been working to develop a novel approach to treating glioblastoma, a deadly form of brain cancer, had their research funding canceled in the middle of their grant term in April 2025, because it originated from a program designed to strengthen the research pipeline by increasing diversity among early-career researchers in the biomedical workforce. The researcher reported to Committee Democrats that the cancellation notice came via a document stating that the Trump Administration’s funding priorities had shifted and it was no longer interested in funding “unscientific work” related to gender ideology. The researcher appealed this decision, as their brain cancer research was unrelated to gender, but the Trump Administration denied the appeal.⁷⁷

When the researcher resubmitted the grant application for this research, NIH provided positive feedback and requests for additional data. However, without the funds from the grant that the Trump Administration canceled, the lab lacks the funding to do the new experiments required to collect the requested data, and thus the research remained stalled as of April 2026. The researcher has had to lean on the support of grants from other, non-governmental sources to maintain personnel and be able to continue to support and pay graduate students in their lab. The researcher shared that even if they are able to secure new funding, “this means losing momentum” and “at the human level, when you are diagnosed with glioblastoma, life expectancy is somewhere between nine and 18 months, that represents a number of people’s lives.”⁷⁸ While glioblastoma is a relatively rare cancer, affecting approximately 3 in 100,000 people, it is the

⁷⁵ National Cancer Institute, *Pediatric Early Phase Clinical Trials Networks* (online at <https://dctd.cancer.gov/research/networks/pediatric>) (accessed April 26, 2026).

⁷⁶ Information provided to Committee Democrats.

⁷⁷ Information provided to Committee Democrats.

⁷⁸ Information provided to Committee Democrats.

most common type of brain cancer⁷⁹ and long-term survival is uncommon with under 10% of patients surviving more than five years past diagnosis.⁸⁰

Case Study: One researcher at a university laboratory had their promising pediatric cancer research stymied and slowed down because of the Trump Administration’s disruptions to grants and research at NIH. The researcher reported to Committee Democrats that because their research program does not have enough funding, they are unable to build on their successful research into drug delivery methods and conduct research on therapeutic questions, which would be the next step towards new treatments for pediatric cancer patients. Even the discretionary funding their lab received through their institution—a benefit that many researchers do not have access to—has been frozen or cut as the disruptions at NIH cause significant uncertainty around the school’s financial future.⁸¹

These funding cuts mean that the lab lacks the funds to collect data in order to submit new grant applications or respond to requests from grant reviewers, so getting new funding is nearly impossible. The data the lab does have from previous experiments is promising, but without data that shows the potential for the therapeutic work, NIH will not approve a grant to study it. Therapeutic studies are notoriously expensive, and without the funds to spend on collecting the data needed to land a new grant or even a renewal, the researcher and their lab are in a self-perpetuating cycle. Without cutting edge data, they are left relying on older data for grant applications, and thus not able to focus on the most innovative and promising pediatric cancer research. The researcher explained, “My intended job as a scientist is to design experiments, train the next generation of scientists, interpret data, and communicate my results, and I’m spending all my time writing grants and trying to understand the changing regulations.”⁸² This means that the funds that previously went to their research—much of it federal funds—are essentially being wasted and taxpayers are not getting the return on the original investment made in their work as they are not able to put the research they’ve already done into practice to help people.

Because of the disruptions to their research, and with no end to the uncertainty in sight, the researcher has pivoted away from pediatric cancer research—an especially expensive area of research—to topics they believe are more likely to be funded and are more affordable.⁸³ This is a loss for pediatric cancer research and a loss for scientific progress. Having to pursue work that is safer and more affordable instead of building on years of promising research suppresses innovation.

⁷⁹ Moffit Cancer Center, *Glioblastoma Causes & Risk Factors* (online at www.moffitt.org/cancers/glioblastoma/diagnosis/causes/) (accessed Apr. 14, 2026).

⁸⁰ Mayo Clinic, *Glioblastoma: Survival Rates* (online at www.mayoclinic.org/diseases-conditions/glioblastoma/survival-rates/gnc-20596050) (accessed Apr. 14, 2026).

⁸¹ Information provided to Committee Democrats.

⁸² Information provided to Committee Democrats.

⁸³ Information provided to Committee Democrats.

Case Study: Another cancer researcher reported to Committee Democrats a similar concern in which cuts, uncertainty, and delays regarding future grant funding meant that taxpayers aren't getting a return on investment for the federal funding that has already been dedicated to their work. They described the current landscape of scientific research funding as “perpetual uncertainty” and “constant purgatory.”⁸⁴ Additionally, the delays mean lost time, momentum, and infrastructure for research, with the researcher emphasizing that “what this government has burned in time is more damaging than the money.”⁸⁵

One parent who lost their child to a brain tumor and is now a community advocate shared with Committee Democrats that children with pediatric brain tumors “don't have the luxury of time,” and that losing access to clinical trials for this community means “leaving our kids to die.”⁸⁶ Jonathan Eric Agin, the Executive Director of PREP4Gold and a parent who lost his child to pediatric cancer, shared with Committee Democrats that “the information that is being disseminated to families is not necessarily cohesive, it's brought upon by confusion in the research community, researchers are scrambling on how to maintain their laboratories, [and] it's been rough because of the climate of confusion.”⁸⁷

4. ALZHEIMER'S DISEASE

Alzheimer's disease is the most common form of dementia in older adults. Nearly 7 million Americans are living with Alzheimer's today and it is the seventh leading cause of death in the United States. Alzheimer's is the most expensive disease in the nation and identifying treatments to delay the onset of the disease by even five years could result in billions of dollars in savings for Medicare and Medicaid.⁸⁸ Recent research has made progress on preventing and treating Alzheimer's disease—for example, NIH-funded research led to the creation of a blood test that can help speed up an Alzheimer's diagnosis, which can mean earlier treatment to slow the progression of the disease.⁸⁹

⁸⁴ Information provided to Committee Democrats.

⁸⁵ Information provided to Committee Democrats.

⁸⁶ Information provided to Committee Democrats.

⁸⁷ Information provided to Committee Democrats.

⁸⁸ ACT for NIH, *Alzheimer's Disease Fact Sheet* (online at www.actfor.nih.org/wp-content/uploads/2024/11/ACT-for-NIH_AlzheimersDisease_One-Pager_Nov2024.pdf) (accessed Dec. 12, 2025).

⁸⁹ National Institutes of Health, *Accurate Blood Test for Alzheimer's Disease* (Aug. 13, 2024) (online at www.nih.gov/news-events/nih-research-matters/accurate-blood-test-alzheimer-s-disease).

What the Trump Administration Has Said: According to the White House, the Trump Administration is committed to “accelerating the research and innovation needed to prevent, treat, and cure Alzheimer’s disease.”⁹⁰

What the Trump Administration Has Done: Disrupted almost 400 grants providing over \$1.4 billion for Alzheimer’s and dementia research.⁹¹

Case Study: Alzheimer’s Disease Research Centers (Research Centers) are congressionally directed interdisciplinary research hubs that develop new methods of preventing, diagnosing, and treating Alzheimer’s disease and related dementias for supporting caregivers.⁹² In 2025, many Research Centers across the country experienced significant funding disruptions because of the Trump Administration’s grant terminations and months-long delays in grant renewals.⁹³ One major Research Center reported to Committee Democrats that the Trump Administration froze its federal funding from March to mid-July 2025, forcing it to draw from non-federal funding intended for other research.⁹⁴ Despite the eventual restoration of federal funding, these disruptions created massive uncertainty for Research Centers, forcing them to pause longitudinal studies and clinical trials that cannot easily be restarted. Research Centers have also been unable to support younger researchers in pursuing new projects—often critical for career development—causing them to leave academia or pursue opportunities in other countries. In addition to lost time and resources, the uncertainty has created a loss of trust among study participants, particularly those who are members of communities that have historically been excluded from research.⁹⁵

Case Study: One Research Center director reported to Committee Democrats that the Trump Administration’s funding disruptions and the resulting uncertainty are preventing researchers from pursuing new research projects on promising developments in understanding and treating Alzheimer’s, which could leave the field without new diagnostics, treatments, or even a sufficient research workforce in the future.⁹⁶ Another Research Center director expressed similar sentiments in a media interview: “Disruptions delay discovery. We would hate to have people succumb to an illness that could have been treated or prevented, had the research continued. ...

⁹⁰ The White House, *Presidential Message on National Alzheimer’s Disease Awareness Month* (Nov. 4, 2025) (online at www.whitehouse.gov/briefings-statements/2025/11/presidential-message-on-national-alzheimers-disease-awareness-month/).

⁹¹ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

⁹² Alzheimers.gov, *Alzheimer’s Disease Research Centers: National Research Centers, Local Resources* (online at www.alzheimers.gov/taking-action/national-research-centers) (accessed Dec. 17, 2025).

⁹³ *Lifesaving Alzheimer’s Research Delayed by Trump Funding Cuts*, Scientific American (Apr. 18, 2025) (online at www.scientificamerican.com/article/lifesaving-alzheimers-research-delayed-by-trump-funding-cuts).

⁹⁴ Information provided to Committee Democrats.

⁹⁵ Information provided to Committee Democrats.

⁹⁶ Information provided to Committee Democrats.

Dementia is killing hundreds of thousands of people. We would like to prevent that from happening, but the more barriers that are put up, the longer it's going to take us to get there.”⁹⁷

5. HIV/AIDS

Over a million people in the United States live with HIV and about 13% of those individuals are unaware of it. Annual infections have decreased substantially, by more than two-thirds since the HIV epidemic of the 1980s. HIV prevention has continued to improve, with an estimated decline in new HIV infections of 12% just between 2018 and 2022.⁹⁸ Still, approximately 30,000 people in the United States acquired HIV in 2022, the most recent year for which there is data available.

Globally, nearly 41 million people are living with HIV, including 1.4 million children.⁹⁹ The President's Emergency Plan for AIDS Relief (PEPFAR) was first authorized under President George W. Bush in 2003 with bipartisan support and is credited with saving 26 million lives worldwide.¹⁰⁰ PEPFAR represented the largest commitment by a single nation to address a single disease, providing HIV testing services for more than 80 million people in fiscal year 2024 alone and supporting lifesaving antiretroviral therapy.¹⁰¹

What the Trump Administration Has Said: The Trump Administration has touted the success of federal programs in fighting AIDS and saving millions of lives. Trump has also touted the Administration's role in rolling out novel HIV treatment.¹⁰²

What the Trump Administration Has Done: Disrupted at least 367 grants impacting nearly \$2.5 billion in funding for HIV/AIDS research,¹⁰³ including canceling or delaying billions of dollars in CDC grants for HIV prevention and terminating hundreds of millions of dollars of

⁹⁷ *Lifesaving Alzheimer's Research Delayed by Trump Funding Cuts*, Scientific American (Apr. 18, 2025) (online at www.scientificamerican.com/article/lifesaving-alzheimers-research-delayed-by-trump-funding-cuts).

⁹⁸ HIV.gov, *U.S. Statistics* (online at www.hiv.gov/hiv-basics/overview/data-and-trends/statistics) (accessed Apr. 15, 2026).

⁹⁹ HIV.gov, *Global Statistics* (online at www.hiv.gov/hiv-basics/overview/data-and-trends/global-statistics) (accessed Apr. 15, 2026).

¹⁰⁰ KFF, *The Trump Administration's Foreign Aid Review: Status of PEPFAR* (Oct. 16, 2025) (online at www.kff.org/global-health-policy/fact-sheet/the-trump-administrations-foreign-aid-review-status-of-pepfar/).

¹⁰¹ HIV.gov, *PEPFAR* (online at www.hiv.gov/federal-response/pepfar-global-aids/pepfar) (accessed Apr. 15, 2026).

¹⁰² See e.g. *America First Global Health Strategy*, Department of State (Sept. 2025) (online at www.state.gov/wp-content/uploads/2025/09/America-First-Global-Health-Strategy-Report.pdf).

¹⁰³ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

research to find a vaccine to prevent new HIV infections.¹⁰⁴ Blocked evidence-based avenues for preventing HIV transmission. Left HIV and AIDS clinics across the United States struggling to retain employees and care for patients during lapses in funding. HIV service providers and research advocates shared with Committee Democrats that the Trump Administration's decision to cut thousands of public health jobs also put promising new HIV treatments on hold, including a possible HIV vaccine.¹⁰⁵

Case Study: NIH canceled funding for a \$258 million, seven-year grant aimed at developing an HIV vaccine, giving researchers just six months to wrap up their work. This promising new vaccine would have used neutralizing antibodies to prevent HIV infection.¹⁰⁶

Case Study: The Trump Administration delayed \$20 million in HIV prevention funding for Los Angeles County as part of a nationwide freeze that risked causing a projected 143,000 additional HIV infections and 127,000 unnecessary AIDS-related deaths within five years.¹⁰⁷ Local providers shared with Committee Democrats that the delay forced health care providers to cancel contracts, reduce services, and stop providing care.¹⁰⁸ CDC restored grant funding on June 26, 2025, following pressure from advocates, public health experts, and House Democrats.¹⁰⁹ However, patients suffered for months as the funding delays caused many health care providers to stop providing preventive care, including services that support a range of HIV prevention initiatives such as expanding access to the HIV prevention drug PrEP.¹¹⁰

Case Study: One nonprofit HIV health care provider in North Carolina reported to Committee Democrats that PrEP and HIV prevention tools are vital because without them, costs to treat the illness skyrocket. Emergency care for one unmedicated HIV positive individual with co-infections can range from \$30,000 to \$50,000 annually.¹¹¹

¹⁰⁴ *Rep. Garcia of Long Beach Asks RFK Jr. To Explain Targeting of HIV/AIDS Funding for Cuts*, Los Angeles Times (July 17, 2025) (online at www.latimes.com/politics/story/2025-07-17/rep-garcia-demands-rfk-jr-explain-systematic-cuts-to-hiv-aids-funding-at-home-and-abroad).

¹⁰⁵ Information provided to Committee Democrats.

¹⁰⁶ *A Promising New HIV Vaccine Was Set to Start Trials. Then Came Trump's Latest Cuts*, NPR (June 10, 2025) (online at www.npr.org/sections/goats-and-soda/2025/06/10/g-s1-71561/hiv-vaccine-trump-cuts).

¹⁰⁷ *Trump Administration Restores Funds for HIV Prevention Following Outcry*, Los Angeles Times (June 27, 2025) (online at www.latimes.com/science/story/2025-06-27/trump-hiv-cuts-restored-funding-surpasses).

¹⁰⁸ Information provided to Committee Democrats.

¹⁰⁹ *Trump Administration Restores Funds for HIV Prevention Following Outcry*, Los Angeles Times (June 27, 2025) (online at www.latimes.com/science/story/2025-06-27/trump-hiv-cuts-restored-funding-surpasses).

¹¹⁰ Information provided to Committee Democrats.

¹¹¹ Information provided to Committee Democrats

Case Study: HIV service providers in the Midwest and Southern United States reported to Committee Democrats that clinics committed to providing PrEP at low or no cost are closing their doors because of a range of federal funding cuts, including cuts to the Title X program which provides federal funding for affordable preventive health services. In states where such clinics are no longer able to operate, many HIV clinics are now a sole provider of sexually transmitted infection testing or PrEP prescriptions.¹¹²

One HIV and AIDS policy analyst reported to Committee Democrats that “once you start implementing cuts, it’s almost impossible to reverse course quickly. Workers begin to move on when their jobs aren’t secure. This affects patient care.”¹¹³ A Midwest HIV health care provider explained that:

[F]ederal funding is what helped us clamp down on [the] HIV epidemic and federal funding is what helped HIV turn from a death-sentence to a manageable disease and reduced the prevalence of the virus. Now, we hear that the [Trump Administration] doesn’t want to fund HIV research because the [transmission] numbers went down. That’s very dangerous, because without federal funds, infections will increase.¹¹⁴

Case Study: A nonprofit advocacy organization dedicated to ending the HIV epidemic in the United States anticipates that ongoing cuts to Medicaid passed by congressional Republicans and signed into law by President Trump will make it harder for patients to access routine preventative care that mitigates the risk of contracting HIV. Clinical providers reported concern that, without funding for preventative services, new HIV infections will surge across the United States. Already, physicians are seeing an uptick in new Hepatitis C and other co-infections closely linked to increased rates of HIV transmission.¹¹⁵ The advocacy organization reported to Committee Democrats that approximately 90% of all HIV prevention funding comes from the federal government, so Republican threats to eliminate core CDC funding would completely dismantle the nation’s HIV prevention infrastructure.¹¹⁶ They also reported that patients are already experiencing delays accessing HIV testing, leading to delayed diagnoses and higher likelihoods of developing AIDS.¹¹⁷

Case Study: A nonprofit advocacy organization reported to Committee Democrats that Trump Administration attacks on efforts to ensure equal access to health care are hurting the communities most affected by HIV and AIDS, as such cuts mean the communities that most

¹¹² Information provided to Committee Democrats

¹¹³ Information provided to Committee Democrats.

¹¹⁴ Information provided to Committee Democrats.

¹¹⁵ Information provided to Committee Democrats.

¹¹⁶ Information provided to Committee Democrats.

¹¹⁷ Information provided to Committee Democrats.

need the funding to combat HIV and AIDS are the first to lose it.¹¹⁸ Cuts to federal HIV prevention funding could lead to more than 143,000 additional HIV cases in the United States within five years and about 127,000 additional deaths from HIV and AIDS-related causes.¹¹⁹

Case Study: The Trump Administration cut funding and support for evidence-based public health approaches that it describes as “Biden-era policies that were misguided,” such as harm reduction, which works to mitigate the risk of injection drug users contracting HIV.¹²⁰ On July 24, 2025, Trump signed an executive order to block funding for harm reduction programs like syringe exchanges.¹²¹ Harm reduction programs have proved effective at limiting the spread of HIV as the United States continues to battle the opioid epidemic. For example, intravenous drug use is responsible for more than a third of HIV cases and syringe access programs protect individuals from contracting HIV as a result of needle sharing. Those participating in syringe access programs are 5 times more likely to enter addiction treatment compared to others.¹²²

6. CLINICAL TRIALS

Clinical trials are an essential part of developing new medications and treatments and are the primary way researchers ensure a drug or treatment is safe and effective.¹²³ For rare diseases or illnesses and those with fewer treatment options available—like many kinds of cancer—enrolling in a clinical trial might be the only way someone can receive treatment. For these patients who may have no other option, participating in a clinical trial can be their last hope for treatment and potential recovery. For many, losing access to a clinical trial can be a death sentence.

What the Trump Administration Has Said: NIH Director Jay Bhattacharya has claimed that “no clinical trial has been delayed, nor has any participant been dropped from any clinical trial.”¹²⁴

¹¹⁸ Information provided to Committee Democrats.

¹¹⁹ *Trump Once Promised to End HIV in America. His Deep Funding Cuts are Rolling Back Progress in the South*, CBS News (June 3, 2025) (online at www.cbsnews.com/news/trump-end-hiv-in-america-funding-cuts/).

¹²⁰ Department of Health and Human Services, *Press Release: Secretary Kennedy Announces \$100 Million Investment in Great American Recovery* (Feb. 2, 2026) (online at www.hhs.gov/press-room/secretary-kennedy-announces-100-million-investment-great-american-recovery.html).

¹²¹ *New Executive Order Could Thwart Efforts to End HIV*, Forbes (July 30, 2025) (online at www.forbes.com/sites/davewessner/2025/07/30/new-executive-order-could-thwart-efforts-to-end-hiv/).

¹²² Recovery Research Institute, *Harm Reduction* (online at www.recoveryanswers.org/resource/drug-and-alcohol-harm-reduction/) (accessed Apr. 15, 2026); See e.g., American Journal of Preventive Medicine, *Syringe Services Programs’ Role in Ending the HIV Epidemic in the U.S.: Why We Cannot Do It Without Them* (Nov. 2021) (online at www.sciencedirect.com/science/article/pii/S0749379721003895).

¹²³ National Institutes of Health: National Institute on Aging, *What Are Clinical Trials and Studies?* (online at www.nia.nih.gov/health/clinical-trials-and-studies/what-are-clinical-trials-and-studies) (accessed Dec. 15, 2025).

¹²⁴ *After NIH Staffing Cuts, Cancer Patient in Clinical Trial Worries She May Lose Critical Time*, CNN Health (May 14, 2025) (online at www.cnn.com/2025/05/14/health/cancer-trial-nih-cuts/); “*When is Cancer*

What the Trump Administration Has Done: Disrupted clinical trials, meaning patients have not been able to get care and research into new treatments has been stalled.

A study examining NIH grant terminations for ongoing clinical trials found that at least 383 clinical trials received some level of funding from grants that were disrupted by the Trump Administration between February 28 and August 15, 2025.¹²⁵ These included clinical trials for medical interventions that show promise in fighting cancer, diabetes, HIV, Alzheimer's, and suicide, improving cancer detection, and providing better care to patients.¹²⁶

Case Study: One brain cancer researcher had expected to begin signing up affected children for a new trial of a potential treatment for glioblastoma when they found out that the trial would not be funded. There was a lot of excitement about the trial among researchers and families, as the science was promising and researchers had received a score that would typically result in receiving funding. The potential treatment was based on years of promising research funded by the federal government, including the Department of Defense.¹²⁷

The life expectancy of patients with glioblastoma is less than 18 months, so every day that a clinical trial is delayed is a matter of life and death.¹²⁸ As the researcher emphasized, "brain cancer doesn't discriminate" and children will continue to be diagnosed with this incurable cancer, starting the ticking clock on how long they have left with their families. They reported to Committee Democrats that without this funding, the trial is now in perpetual limbo and "the uncertainty has been crippling."¹²⁹

According to the researcher, the government is the biggest driver of innovation in the field of childhood brain cancer, even though such funding makes up only a small amount of the government's research budget. Research needs consistent and reliable federal funding to allow

Political?" Medical Researchers, Patients Decry Trump Admin's Layoffs, Budget Cuts, CBS News (June 29, 2025) (online at www.cbsnews.com/news/when-is-cancer-political-medical-researchers-patients-decry-trump-admins-layoffs-budget-cuts).

¹²⁵ Vishal Patel et al. *Clinical Trials Affected by Research Grant Terminations at the National Institutes of Health*, JAMA Internal Medicine (Nov. 17, 2025) (online at <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2840939>).

¹²⁶ *Halted NIH Clinical Trials List Reveals Slashed Treatments for Cancer, COVID and Minority Health*, Scientific American (Nov. 20, 2025) (online at www.scientificamerican.com/article/halted-nih-clinical-trials-list-reveals-slashed-treatments-for-cancer-covid).

¹²⁷ Information provided to Committee Democrats.

¹²⁸ Mayo Clinic, *Glioblastoma: Survival Rates* (online at www.mayoclinic.org/diseases-conditions/glioblastoma/survival-rates/gnc-20596050) (accessed Apr. 14, 2026).

¹²⁹ Information provided to Committee Democrats.

the best research to proceed to clinical trials in a timely manner to maintain momentum and losing that consistency has a “chilling effect on our innovation.”¹³⁰

Case Study: Researchers at NIH are studying how to utilize prenatal blood tests to reveal previously undetected cancers in pregnant women. The IDENTIFY study focuses on pregnant women who receive inconclusive results in response to their non-invasive prenatal test (NIPT), a common blood test done during pregnancy.¹³¹ Research has shown a link between inconclusive NIPT results and cancer, and the IDENTIFY study has results that have shown that about 50% of women with an inconclusive NIPT have cancer. For women with no symptoms or mild symptoms that can be explained away by pregnancy, the IDENTIFY study has made it possible for them to be diagnosed earlier when their cancer is more treatable, potentially saving their life as well as the life of their baby.¹³²

The IDENTIFY study has been lifesaving for pregnant women and their children. More work remains, but the study’s future is in limbo after the lab’s principal investigator (PI) was fired as part of the Trump Administration’s purging of NIH Institute Directors.¹³³ Typically, when a PI leaves an institution or is pushed out, the lab closes and the projects are unable to continue. Whether the study will be able to continue in the next fiscal year remained unclear as of April 2026. Its termination would leave scientific questions unanswered and pregnant women and their babies at greater risk.¹³⁴

The Trump Administration’s reckless termination of clinical trials raises serious concerns about waste of taxpayer dollars and abandonment of patients.¹³⁵ And for the patients and families who were depending on a clinical trial, even a few weeks’ delay can be significant, especially for someone living with a disease like late-stage cancer or who has run out of treatment options and

¹³⁰ Information provided to Committee Democrats.

¹³¹ National Human Genome Research Institute, *IDENTIFY Study* (online at www.genome.gov/Clinical-Research/Current-NHGRI-Clinical-Studies/IDENTIFY-Study) (accessed May 7, 2026).

¹³² *A Routine Test During Pregnancy Caught My Cancer and Saved My Life*, Philadelphia Inquirer (Apr. 15, 2026) (online at www.inquirer.com/health/expert-opinions/prenatal-blood-test-cancer-diagnosis-treatment-pregnancy-20260415.html).

¹³³ *Exclusive: After Months in Limbo, Four NIH Institute Directors Fired*, Science (Oct. 2, 2025) (online at www.science.org/content/article/after-months-limbo-four-nih-institute-directors-fired).

¹³⁴ *A Routine Test During Pregnancy Caught My Cancer and Saved My Life*, Philadelphia Inquirer (Apr. 15, 2026) (online at www.inquirer.com/health/expert-opinions/prenatal-blood-test-cancer-diagnosis-treatment-pregnancy-20260415.html).

¹³⁵ Vishal Patel et al. *Clinical Trials Affected by Research Grant Terminations at the National Institutes of Health*, JAMA Internal Medicine (Nov. 17, 2025) (online at <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2840939>).

has no other hope.¹³⁶ Even if research funds are eventually reinstated, the disruptions mean that there continues to be an “environment of residual uncertainty,” as Jeff Allen of Friends of Cancer Research, a cancer research advocacy organization, reported to Committee Democrats.¹³⁷

7. PUTTING POLITICIANS IN CHARGE OF SCIENCE

Scientific funding in the United States has long been granted based on rigorous and scientific metrics evaluated by career scientists. Under the Trump Administration, these decisions have increasingly been made by political appointees who are guided by ideology rather than facts.¹³⁸

What the Trump Administration Has Said: The Trump Administration has said it is “restoring gold standard science,” ensuring that “federally funded research is transparent, rigorous, and impactful,” and restoring “faith in the scientific enterprise and institutions.”¹³⁹

What the Trump Administration Has Done: Installed more than a dozen political appointees at NIH, which historically has had only two political appointees, including its director. Functions long conducted by career employees at NIH have now been taken over by Trump appointees, following an executive order issued by President Trump that gave new powers to appointees to oversee grants at grantmaking agencies across the government.¹⁴⁰

Having so many political appointees at NIH has not only injected politics into the agency but also added approval layers and restrictions that slow down the agency’s work. For example, a political appointee at HHS must now approve any work mentioning mRNA research—an unprecedented change.¹⁴¹ Under the Trump Administration, funding decisions are being led by political appointees, and those previously made by experts have been reversed by appointees for

¹³⁶ Information provided to Committee Democrats.

¹³⁷ Information provided to Committee Democrats.

¹³⁸ *Trump Order Aims to Politicize Decisions on Federal Science Grants*, Science (Aug. 8, 2025) (online at www.science.org/content/article/trump-order-aims-politicize-decisions-federal-science-grants).

¹³⁹ The White House, *Executive Order Restoring Gold Standard Science* (May 23, 2025) (online at www.whitehouse.gov/presidential-actions/2025/05/restoring-gold-standard-science).

¹⁴⁰ The White House, *Improving Oversight of Federal Grantmaking* (Aug. 7, 2025) (online at www.whitehouse.gov/presidential-actions/2025/08/improving-oversight-of-federal-grantmaking/); *Changes at NIH Give Political Appointees Greater Power To Fund or Block Research*, KFF Health News (Sept. 3, 2025) (online at <https://kffhealthnews.org/news/article/nih-grants-trump-political-appointees-agenda-alignment-peer-review/>); *Trump Executive Order Seeks to Centralize Control of Grantmaking Under Political Appointees*, Stat News (Aug. 8, 2025) (online at www.statnews.com/2025/08/08/trump-executive-order-disrupts-science-lawsuits-expected/).

¹⁴¹ *Scientists Say NIH Officials Told Them to Scrub mRNA References on Grants*, KFF Health News (Mar. 16, 2025) (online at <https://kffhealthnews.org/news/article/nih-grants-mrna-vaccines-trump-administration-hhs-rfk/>).

not effectuating agency priorities. This has included promising research, near-completed research, and research that could have saved the lives of children with terminal cancer.¹⁴²

Despite its unpopularity, the Trump Administration is attempting to make permanent this politicized version of our scientific research system. NIH has added language to new grant agreements that would allow the Administration to cancel any grant at any time for any reason.¹⁴³ This would make it essentially impossible for grantees to challenge any future grant terminations and would permanently bake political interference into the scientific funding process.

The Trump Administration has gone even further to make political interference permanent with the issuance of a proposed rule on May 29, 2026, that would make significant changes to how research grants are awarded and managed. The proposed rule expands agencies' power to terminate grants, deprioritizes peer review, and formally gives political appointees—rather than nonpolitical career scientists or program officers—control over all research grants.¹⁴⁴ Under the proposed rule, senior political appointees would be required to review every discretionary grant before it is awarded to ensure it aligns with the Administration's priorities.¹⁴⁵

Additionally, delays in funding research have continued to plague the Trump Administration in 2026, with NIH months behind schedule in distributing funds to grantees.¹⁴⁶ Even as Congress rebuffs the Administration's attempts to gut funding for scientific research by continuing to fund NIH at similar or even higher levels than previous years,¹⁴⁷ the Trump Administration is still the one with the power to get the money out the door to researchers and grantees.

¹⁴² See e.g. *Institutionalizing Politicized Science*, Science (May 8, 2025) (online at www.science.org/doi/10.1126/science.ady6128); *These 5 Words Have Killed Millions in Grants and Advanced Trump's Agenda*, Washington Post (Mar. 27, 2025) (online at www.washingtonpost.com/science/2025/03/27/trump-federal-grants-research-cuts/).

¹⁴³ National Institutes of Health, *Updated Terms and Conditions of Award – Termination and Compliance with Court Orders: NOT-OD-26-009* (Nov. 18, 2025) (online at <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-26-009.html>).

¹⁴⁴ *White House Proposes Vast Overhaul of US Science Funding: What You Need to Know*, Nature (June 3, 2026) (online at www.nature.com/articles/d41586-026-01779-z).

¹⁴⁵ Elizabeth Ginexi (@elizabethginexi), *Summary of Key Changes in OMB's Proposed Federal Financial Assistance Rule*, Substack (May 28, 2026) (online at <https://substack.com/@elizabethginexi/p-199685587>).

¹⁴⁶ *Trump Administration Funding Delays Worry NIH Grant Recipients*, Bloomberg Law (Mar. 3, 2026) (online at <https://news.bloomberglaw.com/health-law-and-business/trump-administration-funding-delays-worry-nih-grant-recipients-23>).

¹⁴⁷ *Trump Tried to Gut Science Research Funding. Courts and Congress Have Rebuffed Him*, NBC News (Feb. 4, 2026) (online at www.nbcnews.com/science/science-news/trump-science-research-funding-cuts-congress-rebuffed-rcna256793).

Case Study: In October 2025, NIH Director Jay Bhattacharya named Dr. Kyle Walsh—an associate professor of neurosurgery and a close personal friend of Vice President J.D. Vance—to be the new director of the National Institute of Environmental Health Sciences. This announcement took place in the middle of a hiring freeze and without any job announcement, search committee, interviews, or reference checks—a sharp departure from the standard process in which NIH institute director candidates go through comprehensive screening and vetting. Dr. Walsh did not have a relevant research background or any experience leading a major research institute, raising concern about cronyism and the potential for other influential NIH positions to be given to unqualified individuals simply because they have a personal connection to the White House.¹⁴⁸

C. The Trump Administration has allowed vaccine misinformation to destroy promising new mRNA treatments.

Researchers began to develop a foundational understanding of mRNA technology and its potential applications in medicine in the 1960s. These nearly-six decades of research into mRNA technology allowed the United States to develop, test, and deploy vaccines for COVID-19 in record time—within only a year of the first case being identified in the United States.¹⁴⁹ That timeline allowed vaccines to get to people sooner and researchers estimate that the development and deployment of vaccines in the United States prevented more than 18 million additional hospitalizations and more than 3 million additional deaths by the end of just 2022.¹⁵⁰

There are many promising uses for mRNA technology beyond the COVID-19 vaccines, and these decades of research are poised to begin paying off across the medical field. For example, researchers are working to design mRNA therapies to treat cancer because of mRNA’s ability to precisely target certain cells within the body. To roll back investment or fail to invest further in mRNA research would mean squandering decades of research and promising new advances.¹⁵¹

Yet in August 2025, Secretary Kennedy canceled \$500 million in funding for mRNA vaccine research and development, citing previously discredited claims and alleged public distrust of the technology—distrust that the Secretary himself has stoked by amplifying

¹⁴⁸ *Close Friend of JD Vance Skirts Normal Channels to Take Over NIH Environmental Health Institute*, Inside Climate News (Oct. 21, 2025) (online at <https://insideclimatenews.org/news/21102025/jd-vance-friend-kyle-walsh-takes-over-nih-environmental-health>).

¹⁴⁹ NIH National Institute of Allergy and Infectious Diseases, *Decades in the Making: mRNA COVID-19 Vaccines* (online at www.niaid.nih.gov/diseases-conditions/decades-making-mrna-covid-19-vaccines) (accessed Nov. 26, 2025).

¹⁵⁰ *Two Years of U.S. COVID-19 Vaccines Have Prevented Millions of Hospitalizations and Deaths*, Commonwealth Fund (Dec. 13, 2022) (online at www.commonwealthfund.org/blog/2022/two-years-covid-vaccines-prevented-millions-deaths-hospitalizations).

¹⁵¹ *Operation Warp Speed Aimed at Covid and Hit Cancer*, Wall Street Journal (Nov. 5, 2025) (online at www.wsj.com/opinion/operation-warp-speed-aimed-at-covid-and-hit-cancer-eaf0eff3).

misinformation.¹⁵² According to Dr. Jeff Collier, a biomedical engineering professor, canceling even this relatively small percentage of mRNA research chills other investment in the technology and threatens to deter additional investment by research institutions and pharmaceutical companies.¹⁵³ It appears that Secretary Kennedy may not allow the Food and Drug Administration (FDA) or the Centers for Disease Control and Prevention (CDC) to approve future treatments that use mRNA technology given his scientifically-unfounded attacks on the technology to date.¹⁵⁴

Case Study: The Trump Administration caused confusion and uncertainty with their decision to no longer review a promising Moderna mRNA flu vaccine despite late-stage trials showing efficacy and then reversing their decision again by announcing they would review vaccine after all. These reversals came with no clarification on why the regulatory agency changed course.¹⁵⁵ These contradictory decisions mean financial uncertainty for researchers and companies. As Dr. Collier explained to Committee Democrats, “You put all this money in and RFK Jr. says you can’t approve it.”¹⁵⁶

D. The Trump Administration is ceding the brightest minds in research and future medical breakthroughs to other countries.

Beyond robbing society of new treatments and cures for chronic or debilitating diseases that any American may one day face, the politicization of science and public health hurts all Americans by diminishing the country’s standing on the world stage and creating a leadership gap that other countries are racing to fill.¹⁵⁷ One former long-time senior leader at NIH put this in

¹⁵² KFF, *KFF Tracking Poll on Health Information and Trust: Vaccine Safety and Trust* (May 6, 2025) (online at www.kff.org/health-information-trust/kff-tracking-poll-on-health-information-and-trust-vaccine-safety-and-trust/); Jay Bhattacharya’s *Anti-Science Turn: Undermining mRNA Vaccines and U.S. Health Security*, *Global Biodefense* (Aug. 18, 2025) (online at <https://globalbiodefense.com/2025/08/18/jay-bhattacharya-mrna-vaccine-cuts-health-security/>); *HHS Cites List of Studies as Scientific Justification for Cancellation of mRNA Vaccine Contracts*, *Stat News* (Aug. 8, 2025) (online at www.statnews.com/2025/08/08/kennedy-scientific-justification-mrna-vaccines/); *Kennedy’s Case Against mRNA Vaccines Collapses Under His Own Evidence*, *Stat News* (Aug. 13, 2025) (online at www.statnews.com/2025/08/13/rfk-jr-mrna-vaccine-research-science-papers-justification-misreading/).

¹⁵³ Information provided to Committee Democrats.

¹⁵⁴ *How RFK JR. ’s mRNA Crackdown Affects Vaccinemaking and Future Pandemics*, *Washington Post* (Aug. 6, 2025) (online at www.washingtonpost.com/health/2025/08/06/rfk-jr-mrna-vaccine-criticism/).

¹⁵⁵ *Id.*

University of Minnesota Center for Infectious Disease Research & Policy, *Double-Reverse: FDA Now Says It Will Review Moderna’s mRNA Flu Vaccine* (Feb. 18, 2026) (online at www.cidrap.umn.edu/influenza-vaccines/double-reverse-fda-now-says-it-will-review-moderna-s-mrna-flu-vaccine).

¹⁵⁶ Information provided to Committee Democrats.

¹⁵⁷ National Security Commission on Emerging Biotechnology, *Press Release: New Analysis: Urgent Policy Action Needed to Maintain U.S. Global Leadership over China in Biotech Innovation* (Dec. 19, 2025) (online at

perspective, describing how for decades no matter what party or political leadership was in charge, they were committed to competing in biomedical research, especially with China. Now, the Trump Administration has turned over the keys of biomedical research, voluntarily ceding progress and the next generation of scientists.¹⁵⁸

The United States' leadership in science and technology is in part because of the amount of federal funding that flowed into academic institutions and scientific research, making it possible for universities to educate the next generation of scientists while driving innovation.¹⁵⁹ This leadership has attracted top talent from across the globe, which in turn has helped educational institutions and U.S. private industry flourish, with many major American tech companies and almost half of Fortune 500 companies having been founded by immigrants or their children.¹⁶⁰ Undermining the educational institutions that draw bright minds to the United States, educate scientists, and conduct much of the research that people and industry rely on will disincentivize scientists from conducting their work in the U.S., diminishing American excellence and certainly not putting America first.¹⁶¹

The cuts and chaos unleashed by the Trump Administration against scientific researchers are already causing a significant “brain drain,” as early-career researchers are choosing to forego opportunities in the United States for opportunities abroad where government investments and funding are more stable. In a poll conducted by the science journal *Nature*, over 1,200 scientists—more than three-quarters of the total respondents—indicated that they were considering leaving the U.S. following the Trump Administration's attacks on scientific research in 2025.¹⁶²

Case Study: One American researcher, a recent PhD graduate from a top U.S. school, reported to Committee Democrats that they chose to pursue their postdoctoral research at a university in Sweden, rather than stay in the U.S., in large part because they saw Swedish research funding as more stable.¹⁶³

www.biotech.senate.gov/press-releases/new-analysis-urgent-policy-action-needed-to-maintain-u-s-global-leadership-over-china-in-biotech-innovation/).

¹⁵⁸ Information provided to Committee Democrats.

¹⁵⁹ *America's Formula for Greatness Is Under Threat*, New York Times (Nov. 15, 2025) (online at www.nytimes.com/2025/11/15/opinion/education-trade-immigration-decline-trump.html).

¹⁶⁰ *Nearly Half of Fortune 500 Companies in 2025 Were Founded by Immigrants or Their Children*, American Immigration Council (Aug. 20, 2025) (online at www.americanimmigrationcouncil.org/report/fortune-500-companies-founded-by-immigrants-2025).

¹⁶¹ *America's Formula for Greatness Is Under Threat*, New York Times (Nov. 15, 2025) (online at www.nytimes.com/2025/11/15/opinion/education-trade-immigration-decline-trump.html).

¹⁶² *75% of US Scientists Who Answered Nature Poll Consider Leaving*, *Nature* (Mar. 27, 2025) (online at www.nature.com/articles/d41586-025-00938-y).

¹⁶³ Information provided to Committee Democrats.

Many of the grants administered by NIH and NSF were essential to the training of young scientists and researchers. From the beginning of the second Trump Administration through the end of April 2026, the Administration disrupted over 2,000 grants, impacting over \$2 billion that prioritized training and development.¹⁶⁴ The funding disruptions and uncertainty that institutions experienced in 2025 have also led some universities to reduce or pause PhD admissions. This has limited opportunities for prospective researchers in Democratic and Republican-leaning states alike, including the University of Massachusetts Chan Medical School, West Virginia University, and Iowa State University.¹⁶⁵ In many cases, students who had been accepted into programs were subsequently informed that their admissions were rescinded, deterring them from pursuing research careers at all.¹⁶⁶

Several established researchers and professors reported to Committee Democrats that many of their students and early-career researchers are reconsidering pursuing scientific research as a career path due to increasing funding instability and politicization. They shared that while receiving grant funding for scientific research has never been an easy feat, constantly shifting and now politicized requirements have made research an increasingly uncertain career path, incentivizing students and researchers to look elsewhere for opportunities.¹⁶⁷ One researcher reported to Committee Democrats that researchers early in their career working to establish themselves have been among the most affected by the chaos and shifting landscape, sharing that

¹⁶⁴ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

¹⁶⁵ *U.S. Universities Curtail PhD Admissions Amid Trump Science Funding Cuts*, Nature News (Feb. 27, 2025) (online at www.nature.com/articles/d41586-025-00608-z); *UMass Medical School Rescinds PhD Program Offers Amid Uncertainty Over Federal Funds*, WBUR (Mar. 13, 2025) (online at www.wbur.org/news/2025/03/13/umass-biomedical-school-phd-program-federal-funds); *WVU Research Program Limits Admissions Due to Federal Cuts*, 5 WDTV (Mar. 5, 2025) (online at www.wdtv.com/2025/03/05/wvu-research-program-limits-admissions-due-federal-cuts); *Iowa State University Rescinds Some Admission Offers for Graduate Students*, Iowa Capital Dispatch (Mar. 7, 2025) (online at <https://iowacapitaldispatch.com/2025/03/07/iowa-state-university-rescinds-some-admission-offers-for-graduate-students>).

¹⁶⁶ *How Uncertainty Around Cuts to Scientific Research is Impacting the Future Biomedical Research Workforce*, AAMC News (Apr. 16, 2025) (online at www.aamc.org/news/how-uncertainty-around-cuts-scientific-research-impacting-future-biomedical-research-workforce).

¹⁶⁷ Information provided to Committee Democrats.

“WE ARE LOSING A GENERATION OF SCIENTISTS... YOU DON’T GET THAT BACK.”¹⁶⁸



In addition to the impact on early-career researchers, the cuts to research have also had a disproportionate impact on women and those from underrepresented backgrounds. Women were more likely to lose their grants earlier in the research process and earlier in their careers due to the Trump Administration’s actions. Recovering from the loss of a major grant is harder for those earlier in their careers when researchers have fewer other funding sources to rely on.¹⁶⁹ The Trump Administration also eliminated programs like the NIH F31 diversity fellowship and the MOSAIC program, which supported researchers from marginalized and underrepresented backgrounds, including first-generation college students and those from conservative rural communities.¹⁷⁰

In its attempts to remove anything related to “DEI” from the federal government, the Trump Administration also cancelled grants supporting research projects wholly unrelated to DEI by targeting grant programs that supported early-career researchers from under-represented backgrounds. For example, one researcher, who had benefitted from these programs as a result of growing up in a rural area, lost their grant supporting research into diabetes.¹⁷¹ Reducing support for early-career scientists and researchers weakens U.S. global leadership and will result in fewer home-grown innovations, both now and for decades to come.¹⁷²

¹⁶⁸ Information provided to Committee Democrats.

¹⁶⁹ *Women and Early-Career Researchers Hit Hardest by NIH Grant Cancellations*, C&EN (Mar. 24, 2026) (online at <https://cen.acs.org/policy/research-funding/Women-early-career-researchers-hit/104/web/2026/03>).

¹⁷⁰ *I’m One of the Ph.D. Students Caught Up in the Cancellation of “Diversity” Grants. I’m Heartbroken*, Stat News (Sept. 5, 2025) (online at www.statnews.com/2025/09/05/nih-f31-diversity-grant-applications-supreme-court-ruling-heartbreak).

¹⁷¹ *As a Diversity Grant Dies, Young Scientists Fear It Will Haunt Their Careers*, NPR (Apr. 28, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/28/nx-s1-5375917/as-a-diversity-grant-dies-young-scientists-fear-it-will-haunt-their-careers).

¹⁷² *NIH Budget Cuts Threaten the Future of Biomedical Research – and the Young Scientists Behind It*, Los Angeles Times (July 6, 2025) (online at www.latimes.com/science/story/2025-07-06/nih-budget-cuts-threaten-the-future-of-medical-research-and-young-scientists).

III. CONCLUSION

The Trump Administration claims it wants to “reinvigorat[e] America’s scientific enterprise to ensure our Nation remains the global leader in discovery and innovation.”¹⁷³ But this stated goal is incompatible with the Trump Administration’s reckless destruction of science, medicine, and American innovation. Since taking office in January 2025, the Trump Administration has terminated thousands of scientific research grants for not advancing the Administration’s radical political goals. Some of these funding cancellations were overturned as a result of litigation and court orders, while many others were not, leaving researchers with unfinished work, taxpayer funds wasted, and lifesaving treatments out of reach.

For research where funds have been unfrozen or restored, it remains unclear how many researchers and institutions have actually received those funds. As of April 2026, over 2,600 grants remain canceled or frozen with over \$1.1 billion still lost.¹⁷⁴ Without the federal funding that has sustained scientific research and made the U.S. a global leader, many researchers are left with essentially no path forward, and all of us will suffer without the innovations that could have grown from their research.¹⁷⁵

Political attacks on science and health continue to affect the health of Americans. In December 2025, HHS canceled millions of dollars in grant funding allocated to the American Academy of Pediatrics (AAP), apparently because the AAP has been a vocal critic of Secretary Kennedy and his reckless attacks on childhood vaccines. Secretary Kennedy and the Trump Administration claim to care about children, autism, and chronic disease, yet the grant that HHS rescinded from AAP supported programs that worked to reduce sudden infant deaths, improve adolescent health, prevent fetal alcohol syndrome, and identify autism early. According to an HHS spokesperson, the grants are no longer aligned with the Department’s mission or priorities.¹⁷⁶

The people relying on critical advancements in science and medicine to treat common and devastating conditions that are making America sick—including chronic disease, cancer, and Alzheimer’s—will feel the effects of these funding cuts most immediately. But the Trump Administration’s reckless destruction of public health, science, and medicine will ultimately impact us all.

¹⁷³ The White House, *Presidential Message on National Alzheimer’s Disease Awareness Month* (Nov. 4, 2025) (online at www.whitehouse.gov/briefings-statements/2025/11/presidential-message-on-national-alzheimers-disease-awareness-month/).

¹⁷⁴ Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (prepared May 1, 2026).

¹⁷⁵ Brennan Center for Justice, *Harms of the Federal Funding Freeze on Science* (Nov. 10, 2025) (online at www.brennancenter.org/our-work/research-reports/harms-federal-funding-freeze-science).

¹⁷⁶ *American Academy of Pediatrics Loses HHS Funding After Criticizing RFK Jr.*; Washington Post (Dec. 17, 2025) (online at www.washingtonpost.com/health/2025/12/17/aap-hhs-funding-rfk/).

CHAPTER 2

SAFETY, TRACKING AND ACCESS

OVERVIEW

When the government operates as it should, most Americans have no reason to be familiar with the full scope of federal workers and programs that must function behind the scenes to keep Americans healthy and safe. But as the Trump Administration dismantles these programs, recklessly firing—and in some cases then attempting to rehire—the federal employees that protect Americans from disease and death, the consequences of losing these critical services are increasingly evident.

Among other things, the Trump Administration has disrupted the programs that keep our food supply safe, dismantled the offices that track diseases and fund violence prevention, canceled grants and programs that help those with addiction, gutted the office that helps people trying to grow their family, and made it more difficult for doctors to care for patients.

Oversight Democrats' investigation found:

- A. **The Trump Administration is dismantling public health programs that protect Americans from major health threats, including some of the very diseases Secretary Kennedy has promised to fight.**
- B. **The Trump Administration is putting wealth and profit over Americans' access to clean water and safe, healthy food.**
- C. **The Trump Administration is rolling back or dismantling federal programs that ensure Americans have access to health care.**

This chapter documents just some of the many ways the Trump Administration's haphazard and dangerous approach to remaking the federal government is destroying essential government functions that keep Americans safe and prioritizing corporate profits over Americans' health.

I. BACKGROUND

The federal government performs many functions that keep people safe from illness and disease, such as tracking foodborne illnesses, tracking infectious disease spread, assisting people suffering from addiction or experiencing domestic violence, and providing access to family planning resources for low-income individuals. If the federal government does not provide these services, Americans will suffer without them; private industry will not pick up the work of providing vital—but unprofitable—services to people across the nation.

A complex network of federal agencies form the federal government’s public health infrastructure, including the Department of Health and Human Services (HHS) and its divisions: the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the Food and Drug Administration (FDA), the Agency for Healthcare Research and Quality (AHRQ), the Indian Health Service (IHS), the Office of Populations Affairs (OPA), Substance Abuse and Mental Health Administration (SAMHSA), the Department of Veterans Affairs (VA), and the Military Health System (MHS). Other federal departments that play vital roles in public health include the Department of Agriculture (USDA) and the Environmental Protection Agency (EPA).

CDC has long played a vital role in all areas of public health. This includes not just tracking and preventing infectious diseases, but also funding state and local health departments, researching and protecting the nation from injury and violence, and fighting illness in communities. As discussed in Chapter 1, NIH has funded countless essential research projects that have revolutionized science and technology as well as led health research, coordination, and analysis that the rest of the government relies on. AHRQ conducts clinician education that helps improve patient safety and health outcomes. USDA and FDA keep our food safe, and FDA also ensures our medicines and drugs are scientifically sound and safe. IHS provides health care to American Indian and Alaska Native communities. SAMHSA fights the ongoing substance abuse crisis, employing behavioral health best practices in the fight against addiction. EPA works to make our environment safe, protecting Americans from pollutants, unsafe chemicals, and predatory corporations.

These programs and functions help keep Americans safe from all manner of illness, injury, and disease and are essential to protecting and improving our health. There are always new innovations to be made, new findings to discover, and improvements to make. Destroying the infrastructure that allows for this progress does not make America better—it kneecaps public health and abandons Americans to disease.

II. FINDINGS

A. **The Trump Administration is dismantling public health programs that protect Americans from major health threats, including some of the very diseases Secretary Kennedy has promised to fight.**

1. CHRONIC DISEASE

Chronic disease is the primary cause of death and disability in the United States and the “leading driver” of the nation’s \$4.9 trillion in annual health care costs, with an estimated 129 million people suffering from at least one major chronic disease.¹⁷⁷ CDC’s National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) works to prevent and manage chronic disease by supporting healthy behaviors and preventive medical care that address the key risk behaviors that lead to preventable chronic diseases. These behaviors include tobacco use, poor nutrition, physical inactivity, and excessive alcohol use, which contribute to some of the most dangerous and common chronic diseases such as heart disease, high blood pressure, and obesity.¹⁷⁸

NCCDPHP is responsible for increasing the use of successful interventions designed to improve Americans’ health.¹⁷⁹ NCCDPHP has improved the health of millions of Americans and reduced the likelihood of them developing chronic disease, including by helping 1 million smokers quit smoking because of the *Tips* campaign, helping 2.7 million people bring their blood pressure under control with their cardiovascular health programs, enrolling hundreds of thousands of people in a lifestyle change program to prevent diabetes, screening 6.5 million women for breast cancer and detecting hundreds of thousands of cases of breast cancer early, and providing 700,000 people with improved cardiovascular care through the *Million Hearts* program.¹⁸⁰

What the Trump Administration Has Said: As discussed in Chapter 1, the MAHA movement has long targeted chronic disease as an important area for improving health outcomes.

¹⁷⁷ *Chronic Disease Prevalence in the US: Sociodemographic and Geographic Variations by Zip Code Tabulation Area*, Preventing Chronic Disease, Centers for Disease Control and Prevention (Feb. 29, 2024) (online at www.cdc.gov/pcd/issues/2024/23_0267.htm); Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

¹⁷⁸ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

¹⁷⁹ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

¹⁸⁰ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *Our Impact on Chronic Diseases and Risk Behaviors* (online at www.cdc.gov/nccdphp/impact/index.html) (accessed Apr. 26, 2026); Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

On February 13, 2025, President Trump signed Executive Order 13212, which directed the MAHA Commission to present a strategy to the President that “shall address appropriately restructuring the Federal Government’s response to the childhood chronic disease crisis, including by ending Federal practices that exacerbate the health crisis or unsuccessfully attempt to address it, and by adding powerful new solutions that will end childhood chronic disease.”¹⁸¹

What the Trump Administration Has Done: Cut federal programs addressing chronic disease and chronic pain in communities across the country.

Case Study: The Trump Administration has cut, chaotically terminated and then restored, or placed in a perpetual holding pattern, funding and staff affecting 45% of NCCDPHP’s branches. Two such divisions, the Division of Oral Health and the Division of Population Health, have largely been eliminated with most employees terminated, and employees in the Division of Reproductive Health and the Office on Smoking and Health have been placed on seemingly perpetual administrative leave as a result of pending litigation surrounding their terminations.¹⁸²

Among other things, the Division of Oral Health led “school sealant” programs which provided dental sealants to students in school using mobile dental equipment to protect low-income children from cavities, which are the most prevalent chronic disease among children.¹⁸³ It also developed infection prevention and control guidance for dental practices, and analyzed data to help state health departments track their oral health status and more efficiently utilize their resources.¹⁸⁴ Support from CDC allowed Missouri to serve over 14,000 children with school-based oral health care and Durham, North Carolina, to complete more than 5,000 dental appointments and screen more than 9,000 children during the 2024-2025 school year.¹⁸⁵ Without these programs or sufficient resources and expert support for them, fewer low-income children would receive dental care. Oral health is deeply tied to chronic disease, and proactive dental care can help prevent chronic diseases like diabetes, arthritis, and cardiovascular diseases by reducing

¹⁸¹ MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

¹⁸² National Public Health Coalition, *CDC Data Project* (online at www.cdcdataport.org/units-rifs) (accessed Jan. 14, 2026).

¹⁸³ Centers for Disease Control and Prevention, National Institute of Dental and Craniofacial Research, *Dental Caries (Tooth Decay)* (Nov. 2022) (online at www.nidcr.nih.gov/research/data-statistics/dental-caries).

¹⁸⁴ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About the Division of Oral Health* (Aug. 7, 2024) (online at www.cdc.gov/nccdpdp/divisions-offices/about-the-division-of-oral-health.html).

¹⁸⁵ Missouri Department of Health and Senior Services Office of Dental Health, *School-Based Oral Health Programs: Dental Sealants By the Numbers* (online at <https://health.mo.gov/living/families/oralhealth/pdf/dental-sealants-school-based-oral-health-programs.pdf>) (accessed Apr. 27, 2026); Durham County Department of Public Health (@DurhamHealthNC), Facebook (Apr. 7, 2026) (online at www.facebook.com/DurhamHealthNC/posts/todays-publichealthweek-spotlight-our-dental-division-sees-children-and-pregnant/1438204844986272/).

the risk of oral diseases that contribute to inflammation, microbial dysbiosis, and immune dysregulation.¹⁸⁶

The Trump Administration proposed eliminating NCCDPHP altogether in its fiscal year 2026 budget proposal.¹⁸⁷ The proposed elimination of NCCDPHP is in direct contrast to MAHA’s goal of “revers[ing] the chronic disease epidemic in America.”¹⁸⁸

The gutting of CDC staff who helped administer NCCDPHP programs makes these programs more vulnerable to abuse, according to one former CDC staff member, as fewer staff are now responsible for overseeing the more than \$1.1 billion that NCCDPHP awards to state, local, territorial, tribal and nonprofit partners¹⁸⁹ through grants, cooperative agreements, and contracts. As subject matter experts are pushed out or fired, CDC employees who pick up the work are less likely to be versed in the nuances of the Center’s detailed and complicated programs, making it more difficult to catch irregularities and protect against potential waste, fraud, and abuse.¹⁹⁰

These drastic cuts to NCCDPHP affect not only the federal programs that CDC administers, but also state and local public health departments. More than 75% of the NCCDPHP budget is allocated to funding state, local, territorial, and tribal partners working to prevent chronic diseases in their communities.¹⁹¹ Additionally, state and local health departments cannot afford to have a suite of scientific experts on staff, so they typically rely on expert CDC staff for support. Cutting NCCDPHP staff means that even when federal money does reach state and local partners to fight chronic diseases, those health departments can no longer rely on CDC employees for expertise and support in administering local programs. A former CDC senior

¹⁸⁶ Fu, D., Shu, X., Zhou, G., Ji, M., Liao, G., & Zou, L., *Connection Between Oral Health and Chronic Diseases*. MedComm (Jan. 14, 2025) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC11731113/>).

¹⁸⁷ U.S. Department of Health and Human Services, *Fiscal Year 2026 Budget in Brief* (online at www.hhs.gov/sites/default/files/fy-2026-budget-in-brief.pdf) (accessed June 15, 2026); *MAHA Report Calls for Fighting Chronic Disease, but Trump and Kennedy Have Yanked Funding*, KFF Health News (July 2, 2025) (online at <https://kffhealthnews.org/news/article/maha-make-america-healthy-again-report-chronic-disease-rfk-trump-funding-cuts/>); S. 2587, 119th Cong. (2025); S. 4942, 118th Cong. (2024).

¹⁸⁸ YouTube, *Secretary Kennedy Delivers Welcoming Remarks to HHS Staff* (online at www.youtube.com/watch?v=o-BCMG198Yc) (accessed June 15, 2026).

¹⁸⁹ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *NCCDPHP Budget* (online at www.cdc.gov/nccdphp/budget-funding/index.html) (accessed Apr. 27, 2026).

¹⁹⁰ Information provided to Committee Democrats.

CDC Data Project, *Destroyed CDC Centers and Divisions: National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)* (online at www.cdcdatapoint.org/read-the-report#report-section-4-1) (accessed Jan. 14, 2025).

¹⁹¹ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, *About Us* (May 14, 2026) (online at www.cdc.gov/nccdphp/about/index.html).

leader reported to Committee Democrats that they and other colleagues have received outreach from state and local health department staffers looking for guidance and support that they are no longer receiving from CDC.¹⁹²

Case Study: In spring 2025, Secretary Kennedy closed NIH’s Office of Pain Policy and Planning (OPPP), a unit dedicated to coordinating pain-related research across the federal government, when all of the office’s federal employees were fired as part of the reduction in force and the four remaining contractors were reassigned to other offices.¹⁹³ More than 50 million U.S. adults experience chronic pain, with more than 17 million experiencing high-impact chronic pain, which is pain that lasts more than 3 months and severely impacts activity.¹⁹⁴ Chronic pain is a very expensive chronic health problem for the United States and is among the chief causes of long-term disability.¹⁹⁵ Addressing chronic pain is both a health and economic imperative, and OPPP was responsible for ensuring there is coordination on the issue across NIH as research into pain can be found in almost every NIH institute.

OPPP’s work included coordinating research among NIH Institutes and other agencies, as well as publishing resources for researchers and caregivers, leading community engagement for caregivers and patients, analyzing the research landscape, making research data easily accessible, developing training for the next generation of researchers, and planning an annual symposium for scientists and care providers to network and learn. One former NIH senior leader shared with Committee Democrats that by eliminating this office, the Trump Administration is making research coordination more difficult, making the research that is still occurring less efficient, and hurting the future of multi-disciplinary pain research.¹⁹⁶

Interagency coordination is especially important amid the ongoing opioid crisis. OPPP has played a large role in coordinating the Helping to End Addiction Long-Term (HEAL) Initiative, an NIH-wide effort to address the opioid crisis by developing new addiction treatments, pain medicines, and other interventions meant to reduce drug-related harms. The HEAL Data Ecosystem, a novel program that worked with researchers to share their data and support collaboration, went from multiple full-time staff running the program to one part-time

¹⁹² Information provided to Committee Democrats.

¹⁹³ Information provided to Committee Democrats.

¹⁹⁴ Centers for Disease Control and Prevention, *Morbidity and Mortality Weekly Report (MMWR): Chronic Pain Among Adults — United States, 2019–2021* (Apr. 14, 2023) (online at www.cdc.gov/mmwr/volumes/72/wr/mm7215a1.htm); NIH National Center for Complementary and Integrative Health, *Prevalence and Profile of High Impact Chronic Pain* (online at www.nccih.nih.gov/research/research-results/prevalence-and-profile-of-high-impact-chronic-pain) (accessed Mar. 31, 2026).

¹⁹⁵ *Unique Pain Research Office Eliminated in HHS Purge*, Stat News (Apr. 8, 2025) (online at www.statnews.com/2025/04/08/nih-layoffs-include-entire-division-devoted-to-chronic-pain/).

¹⁹⁶ Information provided to Committee Democrats.

staffer struggling to keep the project operational. This loss makes it harder for scientists to share their findings and to leverage the findings of their colleagues for future innovation.¹⁹⁷

One former NIH senior leader shared with Committee Democrats that OPDP's gutting is impacting the future of pain clinical trials. OPDP supported clinical trial opportunities run as a part of HEAL, and without OPDP those trials have been significantly delayed, with trials that had originally been expected to launch in 2025 now delayed until at least 2028.¹⁹⁸ The cuts to OPDP coupled with the Trump Administration's slashing of SAMHSA personnel and programming discussed below, will have major impacts on prevention and treatment of chronic pain and substance abuse.¹⁹⁹

2. ADDICTION AND SUBSTANCE ABUSE

SAMHSA is the federal agency responsible for supporting mental health and substance abuse treatment and prevention services. The agency provides funding and support to states and local communities for education and training, prevention programs, early intervention programs, and treatment services. These grants fund mental health programs and addiction-related services by allowing states and local areas to direct resources to where their communities need it most. For example, for rural areas that don't receive much funding for substance abuse or recovery treatment, SAMHSA grants can be a lifeline that allows communities to directly fund initiatives they need, such as in Missouri where SAMHSA funds supported an addiction recovery center.²⁰⁰

SAMHSA itself also provides evidence-based guidance and resources which are utilized by physicians and treatment centers across the country, improving quality of care and providing consistency in the administration of substance abuse prevention grants across states and local communities.²⁰¹ SAMHSA also conducts and funds an array of data projects and research that are critical to understanding and responding to addiction and substance abuse across the U.S. population. This includes the Annual National Survey on Drug Use and Health, which shows that, as of 2024, 23.4% of American adults had some form of mental illness and 16.8% of

¹⁹⁷ Information provided to Committee Democrats.

¹⁹⁸ Information provided to Committee Democrats.

¹⁹⁹ *Addiction, Mental Health Agency Eviscerated Under Trump*, Roll Call (Nov. 6, 2025) (online at <https://rollcall.com/2025/11/06/addiction-mental-health-agency-eviscerated-under-trump>); *Trump Cuts Have Decimated the Federal Addiction and Mental Health Agency*, Stat News (Oct. 30, 2025) (online at www.statnews.com/2025/10/30/samhsa-grant-cuts-staff-reductions-impact-analyzed).

²⁰⁰ *How Cuts to the Nation's Main Mental Health Agency Could Impact Americans*, NPR (June 1, 2025) (online at www.npr.org/2025/06/01/nx-s1-5388969/how-cuts-to-the-nations-main-mental-health-agency-could-impact-americans).

²⁰¹ Congressional Research Service, *Substance Abuse and Mental Health Services Administration (SAMHSA): Overview of the Agency and Major Programs* (June 23, 2020) (R46426) (online at www.congress.gov/crs-product/R46426).

American adolescents and adults had a substance abuse disorder in the year leading up to the survey.²⁰²

What the Trump Administration Has Said: President Trump signed an Executive Order that described substance use disorder as “a crisis that touches families in every community and neighborhood in our Nation,” emphasized the need to advance “a national effort to prioritize addiction treatment and recovery,” and established the “White House Great American Recovery Initiative,” co-chaired by Secretary Kennedy.²⁰³

What the Trump Administration Has Done: Attempted to eliminate SAMHSA, whose mission is helping those affected by, or at risk for, mental health and substance abuse conditions.²⁰⁴

In 2025, Secretary Kennedy attempted to eliminate the agency entirely and move it into a new “Administration for a Healthy America,” before a federal judge ordered that this reorganization be put on hold.²⁰⁵ Ultimately, over the course of 2025, the Trump Administration reduced SAMHSA’s staff by more than half, cut \$350 million in SAMHSA funding for addiction and overdose prevention programs, and eliminated \$1.7 billion in block grant funding to state health departments which fund community mental health services and substance use prevention, treatment, and recovery.²⁰⁶

Behavioral health organizations have expressed concerns about the impacts of these actions on their work to reduce overdose deaths, as their funding, points of contact, and expert project officers at the agency have disappeared.²⁰⁷ As one former SAMHSA senior leader shared with Committee Democrats, many of the most successful substance abuse programs and

²⁰² *Press Release: SAMHSA Releases Annual National Survey on Drug Use and Health*, Substance Abuse and Mental Health Services Administration (July 28, 2025) (online at www.samhsa.gov/newsroom/press-announcements/20250728/samhsa-releases-annual-national-survey-on-drug-use-and-health).

²⁰³ The White House, *Addressing Addiction Through the Great American Recovery Initiative* (Jan. 29, 2026) (online at www.whitehouse.gov/presidential-actions/2026/01/addressing-addiction-through-the-great-american-recovery-initiative).

²⁰⁴ Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, *About Us* (online at www.samhsa.gov/about) (accessed Jan. 30, 2026).

²⁰⁵ *Progress on Overdose Deaths Could Be Jeopardized by Federal Cuts, Critics Say*, Stateline (Nov. 18, 2025) (online at <https://stateline.org/2025/11/18/progress-on-overdose-deaths-could-be-jeopardized-by-federal-cuts-critics-say>).

²⁰⁶ *Trump Cuts Have Decimated the Federal Addiction and Mental Health Agency*, Stat News (Oct. 30, 2025) (online at www.statnews.com/2025/10/30/samhsa-grant-cuts-staff-reductions-impact-analyzed).

²⁰⁷ *Progress on Overdose Deaths Could Be Jeopardized by Federal Cuts, Critics Say*, Stateline (Nov. 18, 2025) (online at <https://stateline.org/2025/11/18/progress-on-overdose-deaths-could-be-jeopardized-by-federal-cuts-critics-say>).

interventions are done at the local level using federal funds, yet the Trump Administration proposed a budget in 2025 to gut that funding. The Administration’s budget plans also sought to eliminate substance abuse programs that support pregnant and postpartum women.²⁰⁸

Case Study: The National Mental Health and Substance Use Policy Laboratory (Policy Lab), a statutorily required office, was gutted by the Trump Administration during the spring 2025 reductions in force, according to one former SAMHSA senior leader.²⁰⁹ The Policy Lab’s responsibilities include ensuring that evidence-based technical assistance and training gets to SAMHSA grantees in the field, meaning individuals receiving mental health care through a SAMHSA grantee receive better and more consistent care. Promoting evidence-based practices, such as ensuring the right medications are used to treat a disorder, results in better individual-level and population-level outcomes.²¹⁰

Case Study: The Trump Administration’s reductions in force in October 2025 affected project officers who oversaw SAMHSA’s grants planning and block grants. A former senior leader at SAMHSA reported to Committee Democrats that the loss of these experts would impact programs. These are experts in their fields who manage complex programs and significant amounts of federal funding and whose work cannot be easily done by someone without the right expertise and experience. Losing project officers and overburdening remaining staff increases the potential for waste, fraud, and abuse, as there will be less oversight, due diligence, and review of federal funding.²¹¹

Case Study: In January 2026, the Trump Administration abruptly cancelled hundreds of SAMHSA grants to non-profit health services organizations estimated to total \$2 billion.²¹² Many of these organizations depend on federal funding to provide care to people experiencing mental illness, substance use disorders, and homelessness.²¹³ The letters received by grantees explained only that SAMHSA may terminate an award if it “no longer effectuates the program goals or agency priorities,” and that the agency was prioritizing resources to “address the rising rates of

²⁰⁸ U.S. Department of Health and Human Services, Fiscal Year 2026 Budget in Brief (on file with Committee Democrats).

²⁰⁹ Information provided to Committee Democrats; Government Accountability Office, *Behavioral Health: Activities of the National Mental Health and Substance Use Policy Laboratory* (May 16, 2024) (GAO-24-106760) (online at www.gao.gov/products/gao-24-106760); Substance Abuse and Mental Health Administration, *National Mental Health and Substance Use Policy Laboratory* (online at www.samhsa.gov/about/offices-centers/nmhsupl) (accessed Feb. 23, 2026).

²¹⁰ Government Accountability Office, *Behavioral Health: Activities of the National Mental Health and Substance Use Policy Laboratory* (May 16, 2024) (GAO-24-106760) (online at www.gao.gov/products/gao-24-106760).

²¹¹ Information provided to Committee Democrats.

²¹² *Trump Administration Sends Letter Wiping Out Addiction, Mental Health Grants*, NPR (Jan. 14, 2025) (online at www.npr.org/2026/01/14/nx-s1-5677104/trump-administration-letter-terminating-addiction-mental-health-grants).

²¹³ *Id.*

mental illness and substance abuse conditions, overdose, and suicide and their connections to chronic diseases, homelessness, and other challenges our Nation’s communities face.”²¹⁴ These stated priorities were the same issues that many of the grantees had been using their funding to address. Less than a day later, following a public outcry and pushback from stakeholders and congressional offices, the Administration reversed the grant cancelations.²¹⁵ While funding was restored, these terminations created unnecessary chaos, demoralized public health workers, and made clear to organizations and staff that their funding might be pulled at any time.²¹⁶

Case Study: In April 2025, Secretary Kennedy gutted the SAMHSA team which oversaw the National Survey on Drug Use and Health.²¹⁷ This survey tracks mental health problems and substance abuse in households across the country and is a vital tool for researchers, health care providers, and lawmakers to assess behavioral health. A former SAMHSA senior leader reported to Committee Democrats that while the data collection is conducted by a nonprofit and has continued, with no federal employees left in the office to oversee the survey, that work has had to be spread out among other SAMHSA staff and as with many other government agencies, federal employees are having to take on work outside of their expertise and do the same work or more but with significantly fewer people and resources.²¹⁸

3. INJURY AND VIOLENCE PREVENTION

Injuries and violence are among the leading causes of death in the United States. For example, motor vehicle crashes are the leading cause of death for those ages 1 to 75 and drowning is the number one cause of death for children ages 1 to 4.²¹⁹ HHS by law has to work with public and private health agencies to reduce injury, expand the workforce qualified to conduct health research and evaluations, and support and fund research and training related to preventing and rehabilitating injuries.²²⁰

²¹⁴ *SAMHSA Terminates \$2 Billion Grant Funding, Quickly Rescinds Terminations*, California State Association of Counties (Jan. 15, 2026) (online at www.counties.org/news-and-media-article/samhsa-terminates-2-billion-grant-funding-quickly-rescinds-terminations/).

²¹⁵ *H.H.S. Reverses Decision to Cut \$2 Billion for Mental Health and Addiction Services*, New York Times (Jan. 14, 2026) (online at www.nytimes.com/2026/01/14/health/samhsa-funding-cuts.html).

²¹⁶ *24 Hours of Chaos as Mental Health Grants Are Slashed Then Restored*, NPR (Jan. 15, 2026) (online at www.npr.org/2026/01/15/nx-s1-5677711/mental-health-addiction-grants-cut-then-restored).

²¹⁷ *They’ve Tracked Americans’ Drug Use for Decades. Trump and Secretary Kennedy Fired Them*, NPR (May 29, 2025) (online at www.npr.org/sections/shots-health-news/2025/05/29/nx-s1-5407849/samhsa-nsduh-trump-rfk-jr-hhs-cuts).

²¹⁸ Information provided to Committee Democrats

²¹⁹ Centers for Disease Control and Prevention, Injury Center, *About the Division of Injury Prevention* (Aug. 27, 2024) (online at www.cdc.gov/injury/divisions-offices/about-division-of-injury-prevention.html).

²²⁰ 42 USC § 280b-0; 42 USC § 242b.

What the Trump Administration Has Said: President Trump has spoken frequently about the need to protect Americans from violence and shootings.²²¹ Secretary Kennedy has talked of his commitment to making Americans healthier,²²² and Trump has promised to protect women, even against their wishes.²²³

What the Trump Administration Has Done: Gutted the parts of HHS actually focused on improving Americans' safety, such as the Injury Center, and made it more difficult to address causes of serious harm including motor vehicle crashes, drowning, sexual assault, and gun violence.

Case Study: Within the Injury Center, the Trump Administration fired the majority of the scientists and program staff of the Division of Injury Prevention (DIP), as well as the entire Program Implementation and Evaluation Branch and Applied Science Branch.²²⁴ Before they were fired, staff at the Injury Center were planning to release updated guidance on diagnosing traumatic brain injury in children.²²⁵ They were also studying data on suicides and changes in how people are injured during car crashes. With the gutting of DIP, experts expect us to lose an entire field of research that has made enormous strides in helping people live healthier, longer, and safer lives. One injury and violence prevention nonprofit leader commenting on the changes stated, “We will not know what is killing us and that’s very scary.”²²⁶

Case Study: Within the Injury Center, the Division of Violence Prevention (DVP) funds research, programs, and opportunities designed to prevent violence in the United States.²²⁷ In April 2025, the Trump Administration fired a significant portion of its staff, including the Field

²²¹ White House, *President Trump Is Delivering on His Campaign Promise to Make D.C. Safe Again* (Aug. 12, 2025) (online at www.whitehouse.gov/releases/2025/08/president-trump-is-delivering-on-his-campaign-promise-to-make-d-c-safe-again/).

²²² U.S. Department of Health and Human Services, *RFK Jr. I’m Fighting Chronic Disease, Slashing Unhealthy Fat at HHS* (Apr. 10, 2025) (online at www.hhs.gov/press-room/ny-post-kennedy-op-ed-slashing-unhealthy-fat-hhs.html).

²²³ *Trump Says He Will Protect Women “Whether They Like It or Not”*, 19th News (Oct. 31, 2024) (online at <https://19thnews.org/2024/10/trump-rally-protector-women/>).

²²⁴ Centers for Disease Control and Prevention, Injury Center, *About the Division of Injury Prevention* (Aug. 27, 2024) (online at www.cdc.gov/injury/divisions-offices/about-division-of-injury-prevention.html); *With CDC Injury Prevention Team Gutted, “We Will Not Know What is Killing Us”*, NPR (Apr. 21, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/21/nx-s1-5371519/cdc-hhs-injury-prevention-federal-layoffs).

²²⁵ *With CDC Injury Prevention Team Gutted, “We Will Not Know What is Killing Us”*, NPR (Apr. 21, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/21/nx-s1-5371519/cdc-hhs-injury-prevention-federal-layoffs).

²²⁶ *Id.*

²²⁷ Centers for Disease Control and Prevention, Injury Center, *About the Division of Violence Prevention* (online at www.cdc.gov/injury/divisions-offices/about-division-of-violence-prevention.html) (accessed Dec. 4, 2025).

Epidemiology and Prevention Branch and the Violence Prevention Practice and Translation Branch.²²⁸ These teams were conducting research on important health and safety issues, including child abuse and maltreatment, rape prevention and education, and domestic violence.²²⁹ The majority of the Injury Center’s funding is directed to state health departments, research centers at universities, and community organizations.²³⁰ One former DVP employee reported to Committee Democrats that, although DVP funds are still being awarded, the Trump Administration’s elimination of the staff who managed these grants means that the funded projects no longer have adequate program management and are not guided by necessary subject matter expertise, making it significantly harder for them to be successful.²³¹ This risks an increase in violence, injuries, and accidents as programs that were working on reducing rates of domestic violence and other health and safety issues will lack the support, funding, and expertise they need to remain effective as trends change.

Case Study: On April 1, 2025, the Trump Administration enacted severe reductions in force at HHS, essentially eliminating the Drowning Prevention Program.²³² This was in direct contravention of Congress, which had funded and directed CDC to implement proven drowning prevention programs and support state drowning surveillance efforts.²³³ According to one former CDC leader, with the program’s entire staff laid off in 2025, this work will not continue.

Case Study: The Injury Center also works to prevent sexual violence, which is inflicted on nearly half of women and more than 1 in 6 men in their lifetimes.²³⁴ As part of the April 2025 reductions in force, and on the first day of Sexual Assault Awareness Month, the Trump Administration fired almost all of the federal workers at CDC who worked on sexual violence prevention.²³⁵ Teams focused on supporting state and local programs that prevent domestic

²²⁸ Information provided to Committee staff; National Public Health Coalition, *CDC Data Project* (2025) (online at www.cdcdataport.org/units-rifs) (accessed Jan. 23, 2026).

²²⁹ *With CDC Injury Prevention Team Gutted, “We Will Not Know What is Killing Us”*, NPR (Apr. 21, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/21/nx-s1-5371519/cdc-hhs-injury-prevention-federal-layoffs).

²³⁰ *Id.*

²³¹ Information provided to Committee staff; *With CDC Injury Prevention Team Gutted, “We Will Not Know What is Killing Us”*, NPR (Apr. 21, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/21/nx-s1-5371519/cdc-hhs-injury-prevention-federal-layoffs).

²³² Information provided to Committee Democrats; See *Drowning Prevention Program Comes to a Halt at CDC*, NPR (Aug. 27, 2025) (online at www.npr.org/sections/shots-health-news/2025/08/27/nx-s1-5509976/drowning-prevention-program-halt-cdc); 42 USC § 280b-0.

²³³ Senate Appropriations FY2024 Report

²³⁴ Centers for Disease Control and Prevention, *About Sexual Violence* (Dec. 17, 2025) (online at www.cdc.gov/sexual-violence/about/index.html).

²³⁵ *HHS Guts Sexual Violence Prevention Division, Leaving Local Efforts Adrift*, NPR (Apr. 8, 2025) (online at www.npr.org/2025/04/08/nx-s1-5349529/hhs-layoffs-sexual-assault-rape-prevention).

violence and sexual assault were eliminated, as well as teams that conducted research into sexual assault prevention strategies.

According to one former CDC senior leader, the Division of Violence Prevention as a whole went from over 200 employees to approximately 80, losing about two thirds of the staff, with the Rape Prevention and Education Program going from approximately 30 full-time staff members to two.²³⁶ One program the Rape Prevention and Education Program funded at the state level was a bystander intervention program in Kentucky high schools, which a 5-year study found to decrease not only sexual violence but also other forms of interpersonal violence and victimization.²³⁷ The work of managing the Rape Prevention and Education Program's grants, as well as supporting state and local programs like hot-spot mapping and safety monitoring, establishing and applying school and workplace policies, and ensuring women have adequate support in the workplace, is still statutorily required and being funded by Congress,²³⁸ but in practice has significantly fewer resources, risking its effectiveness.

Case Study: The Dating Matters program for teens, which was an evidence-based violence prevention program focused on reducing emotional, physical, and sexual dating violence among youth, helped prevent teen dating violence and was shown in a randomized controlled trial to be effective.²³⁹ The Trump Administration cut the staff responsible for implementing the program down to just one remaining communications staff member, with no subject matter experts to help state and local communities implement the tools and prevention programs.²⁴⁰

The sexual violence prevention programs that were funded through the Injury Center continue to receive funding at the state and local levels, but without guidance from so many of the experts that oversaw those funds, program employees report that it is nearly impossible to effectively run them.²⁴¹ The lack of expert staff also means no technical assistance for states and local communities to help with implementation and evaluation, or to develop and update existing tools and materials, including for dating violence and intimate partner violence prevention programs.²⁴²

²³⁶ Information provided to Committee Democrats.

²³⁷ National Alliance to End Sexual Violence, *Rape Prevention & Education Program (RPE)* (online at <https://endsexualviolence.org/wp-content/uploads/2025/04/2025-Rape-Prevention-Education-RPE-Fact-Sheet.pdf>) (accessed Apr. 27, 2026).

²³⁸ 42 USC § 280b-1b; 42 USC § 280b-4; 42 USC § 280b-1a.

²³⁹ Implementation Research and Practice, *The Dating Matters® Toolkit: Approaches to Increase Adoption, Implementation, and Maintenance of a Comprehensive Violence Prevention Model* (May 2020) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC9380423/>).

²⁴⁰ Information provided to Committee Democrats.

²⁴¹ Information provided to Committee Democrats; *HHS Guts Sexual Violence Prevention Division, Leaving Local Efforts Adrift*, NPR (Apr. 8, 2025) (online at www.npr.org/2025/04/08/nx-s1-5349529/hhs-layoffs-sexual-assault-rape-prevention).

²⁴² Information provided to Committee Democrats.

4. INFECTIOUS DISEASE MONITORING AND RESPONSE

The federal government conducts surveillance, monitoring, and notification for outbreaks of infectious disease. As a national organization that can synthesize and analyze data from a wide variety of sources and locations, CDC performs essential infectious disease outbreak surveillance and monitoring. HHS also has preparedness responsibilities, and USDA plays a role in infectious diseases related to animals and agriculture.²⁴³

Diseases and outbreaks don't stop at city, state, or national borders, and many of the early warnings and detection that CDC has accomplished over past decades came as a result of analysis by CDC experts. As one former CDC senior leader described to Committee Democrats, states don't have the ability to replace the expertise of CDC and the federal government.²⁴⁴ Much of the public health data the government utilizes to create policy, and researchers use to study health outcomes, is possible because of CDC.

What the Trump Administration Has Said: Secretary Kennedy has stated, “The path forward is clear: ‘Restore CDC’s focus on infectious disease.’”²⁴⁵

What the Trump Administration Has Done: Gutted CDC and allowed outbreaks of infectious diseases like measles and avian flu to spread without adequate safeguards at the same time that it is increasing the risk of infectious disease by pushing an anti-vaccine agenda.

Case Study: In part due to anti-vaccine rhetoric and policies pushed by Secretary Kennedy and the Trump Administration, the United States has been experiencing a historic rise in measles cases, with 2,288 confirmed cases in 2025 and three deaths—two children and one adult—resulting from 48 outbreaks.²⁴⁶ This is the highest number of measles cases in the country in any single year since 1991.²⁴⁷ Individuals who get measles are at risk of seizures, deafness, blindness, and lung damage, and remain at risk even long after recovery.²⁴⁸

²⁴³ FoodSafety.gov, *About FoodSafety.gov* (online at www.foodsafety.gov/about) (accessed May 1, 2026).

²⁴⁴ Information provided to Committee Democrats.

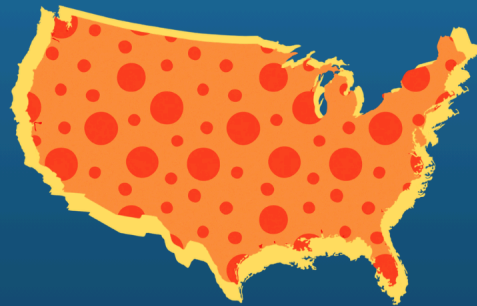
²⁴⁵ *Robert F. Kennedy Jr.: We’re Restoring Public Trust in CDC*, Wall Street Journal (Sept. 2, 2025) (online at www.wsj.com/opinion/robert-f-kennedy-jr-were-restoring-public-trust-in-the-cdc-6f26c176).

²⁴⁶ Centers for Disease Control and Prevention, *Measles Cases and Outbreaks* (online at www.cdc.gov/measles/data-research/index.html) (accessed Apr. 27, 2026); *U.S. May Be Reverting to a Time When Measles Deaths Were Not Very Rare, Experts Warn*, Stat News (Apr. 6, 2026) (online at www.statnews.com/2025/04/06/measles-third-death-new-normal/); See *Measles Is Back. What Comes Next Will Be Worse.*, New York Times (Apr. 25, 2026) (online at www.nytimes.com/2026/04/25/opinion/measles-vaccines-rfk-jr.html).

²⁴⁷ *Measles Tracker: Follow Cases, Outbreaks and Vaccination Rates Across the U.S.*, NBC News (Jan. 30, 2026) (online at www.nbcnews.com/data-graphics/track-measles-outbreak-cases-us-map-rcna198932).

²⁴⁸ National Foundation for Infectious Diseases, *Frequently Asked Questions About Measles* (accessed Apr. 27, 2026) (online at www.nfid.org/resource/frequently-asked-questions-about-measles/).

**THE UNITED STATES IS NOW AT
RISK OF LOSING ITS MEASLES-
ELIMINATION STATUS**



which occurs after 12 months of continuous transmission and is determined by internal CDC and external expert review and verified by the World Health Organization.²⁴⁹

The Trump Administration’s response to this crisis has drawn criticism from public health experts for breaking with scientific best practices.²⁵⁰ In particular, Secretary Kennedy has undermined public health communication by downplaying the severity of these outbreaks, using inconsistent messaging regarding the benefits of vaccination, and promoting—without evidence—the use of vitamin A as a treatment for measles.²⁵¹ These actions, which include downplaying the severity of the outbreaks by calling associated deaths the “cost of doing business” as stated by one of Secretary Kennedy’s appointees at CDC, lead to significant confusion for the public.²⁵² Previously, outbreaks of this type and severity would have included more messaging to the public on how people can protect themselves, including through CDC’s Health Alert Network, but that messaging has been limited during the Trump Administration.²⁵³

²⁴⁹ *While Scientists Race to Study Spread of Measles in US, Kennedy Unravels Hard-Won Gains*, KFF Health News (Dec. 5, 2025) (online at <https://kffhealthnews.org/news/article/measles-virus-outbreak-spread-genomic-analysis-elimination-status-cdc-rfk-us>); KFF, *Measles Elimination Status: What It Is and How the U.S. Could Lose It* (Apr. 7, 2026) (online at www.kff.org/other-health/measles-elimination-status-what-it-is-and-how-the-u-s-could-lose-it/).

²⁵⁰ *“He Needs to Do Much More”*: *RFK Jr.’s Measles Response Under Scrutiny*, Politico (Mar. 6, 2025) (online at www.politico.com/news/2025/03/05/rfk-measles-scrutiny-00214952); *Experts Give Kennedy Low Marks as Measles Outbreak Tests Him*, The Hill (Mar. 13, 2025) (online at <https://thehill.com/policy/healthcare/5191976-measles-outbreak-kennedy-response>).

²⁵¹ *In Visit to Texas, RFK Jr. Said Autism, Diabetes Deserve More Attention Than Measles*, Texas Tribune (Apr. 29, 2025) (online at www.texastribune.org/2025/04/29/texas-measles-robert-kennedy-autism); *“He Needs to Do Much More”*: *RFK Jr.’s Measles Response Under Scrutiny*, Politico (Mar. 6, 2025) (online at www.politico.com/news/2025/03/05/rfk-measles-scrutiny-00214952).

²⁵² *Trump Administration is Failing to Address Spread of Measles, Experts Say*, The Guardian (Mar. 5, 2026) (online at www.theguardian.com/us-news/2026/mar/05/trump-administration-measles).

²⁵³ *A Drop in CDC Health Alerts Leaves Doctors “Flying Blind”*, NPR (Feb. 6, 2026) (online at www.npr.org/2026/02/06/nx-s1-5689923/drop-in-cdc-health-alerts-hans).

Case Study: In March 2025, while Texas public health departments were responding to a measles outbreak in Lubbock, the Trump Administration clawed back more than \$11 billion in funding from state and local health departments.²⁵⁴ As a result, one of the largest counties in the state had to cancel more than 50 vaccination clinics and lay off 21 public health workers.²⁵⁵ In West Texas, where a 6-year-old girl died of measles, this funding was being used for an epidemiologist who was directly responding to the ongoing measles threat.²⁵⁶ In Dallas, the funding was being used to equip a biolaboratory that supports more testing for pathogens, including measles. According to state public health officials, the Trump Administration cuts directly impacted their ability to combat the spread of measles and other health threats.²⁵⁷

Case Study: In April 2025, Secretary Kennedy largely eliminated the National Institute for Occupational Safety and Health (NIOSH) during a wave of firings at HHS. At that time, CDC had sent experts from NIOSH to Texas to assist hospitals in correcting ventilation issues and lowering measles infection risk.²⁵⁸ It took until early 2026 for NIOSH employees to be reinstated. This means that the office was dramatically understaffed and unable to fulfill its critical functions for nearly a year.²⁵⁹ One former senior CDC leader told Committee Democrats that many NIOSH employees who will now have the opportunity to return to their old jobs are choosing to stay in new jobs or to not return because of the uncertainty they experienced in 2025.²⁶⁰

Case Study: In October 2025, the Trump Administration laid off hundreds of scientists at HHS, including the top two leaders of the federal measles response team.²⁶¹ Just days later, the Trump Administration frantically worked to rescind many of the mistaken layoffs, claiming they had occurred because of a procedural lapse. Although the measles team was reinstated, the chaos created confusion and uncertainty and left experts worried about the long-term stability of their

²⁵⁴ *Health Officials Say Federal Cuts Will Hurt Texas' Measles Response*, Texas Tribune (Mar. 26, 2025) (online at www.texastribune.org/2025/03/26/texas-measles-public-health-funding-cut/).

²⁵⁵ *Dozens of Free Measles Vaccine Clinics Close in Texas as Federal Funding is Cut*, NBC News (Apr. 1, 2025) (online at www.nbcnews.com/health/health-news/texas-measles-outbreak-dallas-vaccines-hhs-funding-cuts-rcna199144).

²⁵⁶ *Health Officials Say Federal Cuts Will Hurt Texas' Measles Response*, Texas Tribune (Mar. 26, 2025) (online at www.texastribune.org/2025/03/26/texas-measles-public-health-funding-cut/).

²⁵⁷ *Id.*

²⁵⁸ *CDC Scraps Plan to Help Texas Schools Curb Measles Over Layoffs, Employee Says*, CBS News (Apr. 18, 2025) (online at www.cbsnews.com/news/cdc-scraps-plan-to-help-texas-schools-curb-measles-more-layoffs-loom).

²⁵⁹ See *NIOSH RIF Reversal is a Public Health Win, but Not Without Challenges*, The Scientist (Feb. 19, 2026) (online at www.the-scientist.com/niosh-rif-reversal-is-a-public-health-win-but-not-without-challenges-74102).

²⁶⁰ Information provided to Committee Democrats.

²⁶¹ *Trump Administration Is Bringing Back Scores of C.D.C. Experts Fired in Error*, New York Times (Oct. 11, 2025) (online at www.nytimes.com/2025/10/11/health/cdc-layoffs-measles.html).

jobs and the potential impact on public health.²⁶² Even for public health employees whose jobs were not affected, the layoffs left a sense of fear that anyone may be fired at any time, pushing highly-skilled and in-demand employees to pursue jobs outside of the government and further depleting the government's public health workforce and institutional knowledge. Without those employees, public health programs are suffering as there are fewer and fewer knowledgeable staff left to administer them, ultimately resulting in worse health outcomes for Americans and communities.

Case Study: In October 2025, during a government shutdown, the Trump Administration fired all four staff members of CDC's National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) Prion and Public Health Office (PPHO).²⁶³ The office was created as a result of the mid-1990s spread of "mad cow disease" to monitor the country for human adaptations of this family of rare, always fatal neurologic diseases that have no known treatment.²⁶⁴ More than 500 people in the United States die annually from such diseases and this number can be expected to increase as the age of the U.S. population increases.²⁶⁵ While the bipartisan deal to end what was then the longest government shutdown in U.S. history resulted in the four PPHO staff members being reinstated, the gutting of the office disrupted its work, and additional layoffs in 2026 are still possible.²⁶⁶

Case Study: CDC, along with the now shuttered U.S. Agency for International Development (USAID), have been crucial to addressing large-scale outbreaks, such as an emerging Ebola outbreak in Guinea in 2021. The Trump Administration's decision to pull back USAID investments in disease surveillance and cut programs monitoring emerging infectious diseases mean that "the U.S. has lost its ability to robustly track and contain diseases of epidemic and pandemic threat, such as bird flu, Ebola, and Marburg, before they spread internationally and potentially hit the homeland."

As of May 2026, a deadly outbreak of Ebola in the Democratic Republic of the Congo and Uganda is spreading rapidly due to a lack of available tests, funding, and other public health resources in part brought about by the elimination of USAID. The rapid spread of the virus is

²⁶² *Id.*

²⁶³ University of Minnesota Center for Infectious Disease Research & Policy, *While No One Was Watching: Tenuous Status of CDC Prion Unit, Risk of CWD to People Worry Scientists* (Nov. 21, 2025) (online at www.cidrap.umn.edu/chronic-wasting-disease/while-no-one-was-watching-tenuous-status-cdc-prion-unit-risk-cwd-people).

²⁶⁴ Centers for Disease Control and Prevention, *Prion and Public Health Office, Division of High Consequence Pathogens and Pathology* (online at www.cdc.gov/ncezid/divisions-offices/about-dhcpp.html) (accessed Jan. 14, 2026).

²⁶⁵ University of Minnesota Center for Infectious Disease Research & Policy, *While No One Was Watching: Tenuous Status of CDC Prion Unit, Risk of CWD to People Worry Scientists* (Nov. 21, 2025) (online at www.cidrap.umn.edu/chronic-wasting-disease/while-no-one-was-watching-tenuous-status-cdc-prion-unit-risk-cwd-people).

²⁶⁶ *Id.*

directly linked to a failure to test, track, isolate and treat sick patients, which was previously possible in a war-torn, economically volatile region thanks to USAID and humanitarian assistance programs that are no longer operational. Funds allocated by Congress for detecting and tracing disease outbreaks were gutted with the dismantling of USAID, allowing the virus to spread for weeks undetected. A grant funding local health systems in the region—that could have mitigated the spread of Ebola—was terminated by the Trump Administration. Rural pharmacies and other local clinics that were previously mobilized to track disease have been shuttered.

Under the Trump Administration, the risk of Ebola becoming the next pandemic is significantly higher because foreign aid cuts have blocked lifesaving tools and medical personnel from containing the spread of the virus. After eviscerating public health infrastructure and USAID funding to prevent outbreaks abroad, the Trump Administration is now begging CDC staff to volunteer to screen passengers in U.S. airports for any potential signs of Ebola reaching our shores.²⁶⁷

B. The Trump Administration is putting wealth and profit over Americans' access to clean water and safe, healthy food.

1. ACCESS TO HEALTHY FOOD

What the Trump Administration Has Said: Secretary Kennedy promised to increase access to healthy, local food, and to fight food dyes, food additives, and ultra-processed foods.²⁶⁸ The September 2025 MAHA report attributes the rise in childhood chronic disease in part to the fact that children are not consuming a sufficient amount of fruits and vegetables.²⁶⁹ President Trump's FDA Commissioner Marty Makary has said, "We've got to stop and ask ourselves, should we be focusing more on school lunch programs, not just putting every kid on Ozempic?"²⁷⁰

What the Trump Administration Has Done: Cut programs designed to increase access to food and fresh produce and support small farmers. Abandoned commitments to remove food

²⁶⁷ Democratic Staff, Committee on Oversight and Government Reform, *People Are Already Dying, And More Will Die: Interim Staff Analysis* (June 4, 2026) (online at https://oversightdemocrats.house.gov/imo/media/doc/usaid_report.pdf).

²⁶⁸ *Inside RFK Jr.'s Conflicted Attempt to Rid America of Junk Food*, The Guardian (July 8, 2025) (online at www.theguardian.com/environment/2025/jul/08/rfk-jr-junk-food).

²⁶⁹ MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

²⁷⁰ *Trump's FDA Chief Suggests Diabetics Should Take Cooking Classes Under MAHA Agenda*, The Independent (May 29, 2025) (online at www.independent.co.uk/news/world/americas/us-politics/fda-maha-diabetes-cooking-b2757678.html).

dyes from products and even loosened labeling requirements for products that present health risks.²⁷¹

Case Study: The Trump Administration has cut more than \$1 billion in funding aimed at helping schools and food banks purchase from local farmers.²⁷² This includes \$660 million in funds for the Local Food for Schools program, which includes funds for schools and childcare centers to buy locally grown and produced food, as well as the entire Local Food Purchase Assistance Cooperative Agreement Program, which supported food banks in accessing healthy and nutritious foods and beverages.²⁷³ Both the Local Food for Schools Program and the Local Food Purchase Assistance Program not only ensured Americans across the country have access to fresh, local ingredients, but also supported small and mid-sized local and regional farmers.²⁷⁴

Case Study: The Supplemental Nutrition Assistance Program (SNAP) provides low-income individuals with benefits that can be used to purchase certain foods through state assistance agencies.²⁷⁵ CBO projected that President Trump's signature legislation passed in July 2025, the OBBBA, will cut food assistance for all 40 million SNAP participants, including 1 in 5 children.²⁷⁶ SNAP has been shown to improve health outcomes and lower health care costs, and cuts to SNAP will likely increase food insecurity and reliance on ultra-processed, calorie-dense foods, which risks driving higher rates of obesity, diabetes, and cardiovascular disease.²⁷⁷ Within

²⁷¹ See e.g. *Anger as Trump FDA Retreats from Plan to Ban Artificial Colors in Food*, The Guardian (Feb. 20, 2026) (online at www.theguardian.com/us-news/2026/feb/20/fda-artificial-colors-food).

²⁷² *Trump Freezes \$1 Billion in Food Aid Given to Local Schools and Food Banks to Help Low-Income Families*, The Independent (Mar. 11, 2025) (online at www.independent.co.uk/news/world/americas/us-politics/usda-cancels-funding-food-banks-schools-trump-b2713125.html).

²⁷³ *Id.*; *USDA Cancels \$1B in Local Food Purchasing for Schools, Food Banks*, Politico (Mar. 10, 2025) (online at www.politico.com/news/2025/03/10/usda-cancels-local-food-purchasing-for-schools-food-banks-00222796); Department of Agriculture, *Local Food Purchase Assistance Cooperative Agreement Program* (online at www.ams.usda.gov/selling-food-to-usda/lfpacap) (accessed Mar. 28, 2026).

²⁷⁴ *USDA Ended its Local Food Programs. A Look at How Farmers, Schools and Food Banks are Coping*, NPR (Apr. 14, 2025) (online at www.stlpr.org/2025-04-14/usda-local-food-purchasing-programs).

²⁷⁵ Department of Agriculture, *Supplemental Nutrition Assistance Program* (online at www.fns.usda.gov/snap) (accessed May 1, 2026); Department of Agriculture, *A Short History of SNAP* (Aug. 2015) (online at www.fns.usda.gov/snap/history).

²⁷⁶ Center on Budget and Policy Priorities, *By the Numbers: Harmful Republican Megabill Takes Food Assistance Away from Millions of People* (Aug. 14, 2025) (online at www.cbpp.org/research/food-assistance/by-the-numbers-harmful-republican-megabill-takes-food-assistance-away-from).

²⁷⁷ Harvard T.H. Chan School of Public Health, *SNAP Funding Cuts Threaten Food Security, Health* (Aug. 21, 2025) (online at <https://hsph.harvard.edu/news/snap-funding-cuts-threaten-food-security-health/>); Center on Budget and Policy Priorities, *SNAP Is Linked With Improved Health Outcomes and Lower Health Care Costs* (Dec. 14, 2022) (online at www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-health-outcomes-and-lower-health-care-costs).

just ten months of enactment of President Trump’s bill, more than 700,000 children had lost access to SNAP benefits, which also makes it harder for those children to qualify for free school meals and other food assistance.²⁷⁸

While cutting federal programs like SNAP that help millions of Americans meet their basic needs, the OBBBA cut taxes for the wealthiest 10% of households by more than \$14,700 per year and taxes for the wealthiest 1% by more than \$50,000 per year. Overall, the OBBBA cut taxes for the richest 10% of Americans by \$2.3 trillion over the next decade. Within that, the top 1% benefitted from \$1 trillion in tax breaks.²⁷⁹ These cuts, combined with rising costs, make it harder for people to feed their families and risk the health of those receiving nutrition assistance.²⁸⁰

Case Study: The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides food assistance—including infant formula—and other resources such as breastfeeding counseling and immunization screening to low-income pregnant and postpartum women, infants, and children up to age five. The Trump Administration has proposed a significant reduction of the fruit and vegetable component of WIC’s food benefits, estimated to result in the loss of over \$1 billion in fruit and vegetable benefits.²⁸¹ In June 2026, House Republicans passed legislation which would cut \$141 million in funding for WIC, impacting the over 5 million children and pregnant and postpartum women who are enrolled in the program.²⁸²

Case Study: The removal of artificial dyes from food is a priority of the MAHA movement and Secretary Kennedy has made it part of his platform as HHS Secretary, even claiming that his agency has “gotten rid of” synthetic dyes.²⁸³ However, instead of making any major changes to the food industry, the Trump Administration and Secretary Kennedy have pursued only superficial changes, appearing to take action for MAHA supporters while avoiding any significant negative impact to the bottom line of food corporations and the agribusiness industry.

); *When SNAP Benefits Run Out, “People Can Die,” Say Health Experts*, Stat News (Oct. 27, 2025) (online at www.statnews.com/2025/10/27/snap-benefits-cut-off-nov-1-government-shutdown/).

²⁷⁸ Center on Budget and Policy Priorities, *Sharp Drop in Number of Children Receiving SNAP Food Assistance Under New Federal Law* (May 27, 2026) (online at www.cbpp.org/blog/sharp-drop-in-number-of-children-receiving-snap-food-assistance-under-new-federal-law).

²⁷⁹ Center for American Progress, *7 Ways the Big Beautiful Bill Cuts Taxes for the Rich* (Nov. 20, 2025) (online at www.americanprogress.org/article/7-ways-the-big-beautiful-bill-cuts-taxes-for-the-rich).

²⁸⁰ National Women’s Law Center, *The Big Ugly Bill Is Making Families Go Hungry* (May 29, 2026) (online at <https://nwlc.org/resource/the-big-ugly-bill-is-making-families-go-hungry/>).

²⁸¹ Center on Budget and Policy Priorities, *Trump Budget Would Slash WIC Fruit and Vegetable Benefits for Millions* (June 3, 2025) (online at www.cbpp.org/blog/trump-budget-would-slash-wic-fruit-and-vegetable-benefits-for-millions).

²⁸² *House Bill Rolls Back Food Aid for Pregnant Women, Children*, New York Times (June 4, 2026) (online at www.washingtonpost.com/politics/2026/06/04/house-bill-rolls-back-food-aid-pregnant-women-children/).

²⁸³ *Kennedy Touts Food Dye Crackdown as a Midterm Win, But Big Holdouts Remain*, Politico (Apr. 14, 2026) (online at www.politico.com/news/2026/04/14/kennedy-food-dye-holdouts-remain-00869768).

Rather than implementing mandatory protections for how food products are grown, manufactured, and marketed, the Trump Administration has secured only voluntary commitments from some food companies to remove certain food dyes from their products. These voluntary commitments include the dairy industry's effort to remove several dyes from their ice cream and frozen dairy desserts by the end of 2027.²⁸⁴ While this negligible step is unlikely to have much impact on children's health,²⁸⁵ the voluntary nature of these commitments and lack of regulatory requirements mean that corporations are not required to maintain even these incremental changes and are free to give them up as soon as they are no longer politically expedient.

Case Study: The Trump Administration made it easier for corporations to claim their products contain “no artificial colors” by loosening labeling requirements to only require the label on products with petroleum-based dyes. However, not all potentially dangerous additives are petroleum-based, and this would allow products to be labeled as containing “no artificial colors” even when they contain potentially dangerous additives like titanium dioxide. Instead of removing dyes and dangerous additives, this change makes it easier for corporations to include them and cause confusion for consumers about what is in their food.²⁸⁶

2. FOODBORNE ILLNESS

What the Trump Administration Has Said: Secretary Kennedy has claimed that something in the food supply is “poisoning” the American people, referring to ultra-processed foods and food dyes.²⁸⁷

What the Trump Administration Has Done: Put the food supply at greater risk of poisoning Americans by cutting food safety staff by approximately a third, impacting the government's ability to conduct food inspections and disease monitoring programs. One former senior CDC leader reported to Committee Democrats that these changes are

²⁸⁴ International Dairy Foods Association, *IDFA Ice Cream Commitment* (online at www.idfa.org/idfa-ice-cream-commitment) (accessed June 15, 2025).

²⁸⁵ *The MAHA Trend in Groceries Will Backfire*, The Atlantic (Aug. 23, 2025) (online at www.theatlantic.com/health/archive/2025/08/maha-washing-food-health/683989/).

²⁸⁶ See e.g. *Anger as Trump FDA Retreats from Plan to Ban Artificial Colors in Food*, Guardian (Feb. 20, 2026) (online at www.theguardian.com/us-news/2026/feb/20/fda-artificial-colors-food).

²⁸⁷ *RFK Jr. Says Something in Food Supply Is “Poisoning” Americans*, Wall Street Journal (Jan. 29, 2026) (online at www.wsj.com/livecoverage/trump-cabinet-confirmation-hearings/card/rfk-jr-says-something-in-food-supply-is-poisoning-americans-s0K4d0NoqJBdXgRhYG5m).

²⁸⁸ Information provided to Committee Democrats.

**ONE FORMER SENIOR CDC LEADER
REPORTED TO COMMITTEE DEMOCRATS
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LIFE.”¹⁶⁸**



Americans generally take for granted that their food is safe. This has not always been the case and is only possible today because of the passage of several landmark laws and the ongoing work of multiple government agencies. This includes USDA which monitors meat and poultry, FDA which oversees the rest of the food supply, and CDC which tracks foodborne diseases, investigates outbreaks, and identifies trends. CDC and FDA both have responsibilities communicating with the public when a foodborne illness has broken out and a recall has been issued.²⁸⁹

Case Study: In early 2025, HHS fired approximately 170 employees in FDA’s Office of Inspections and Investigations.²⁹⁰ Already a short-staffed office, FDA employed only 443 food safety inspectors in 2024, far short of the 1,500 inspectors the agency estimated it would need to inspect its jurisdiction of 36,600 food facilities in the United States and abroad.²⁹¹ Further cutting the number of FDA inspectors has made it even more difficult for FDA to fulfill its responsibility of inspecting every food processing facility in its jurisdiction.²⁹² For example, as of November 2025, FDA was reportedly on track to perform the lowest annual number of inspections of imported food since 2011, outside of the COVID-19 pandemic. With the number of inspectors

²⁸⁹ See Institute of Medicine (US) and National Research Council (US) Committee on the Review of the Use of Scientific Criteria and Performance Standards for Safe Food, *Scientific Criteria to Ensure Safe Food* (online at www.ncbi.nlm.nih.gov/books/NBK221553/); Government Accountability Office, *Food Safety: Further Action Needed to Implement Foodborne Illness Prevention Law and Assess Its Results* (Jan. 7, 2026) (GAO-26-107394) (online at www.gao.gov/products/gao-26-107394)

²⁹⁰ *FDA Planning for Fewer Food and Drug Inspections Due to Layoffs, Officials Say*, CBS News (Apr. 3, 2025) (online at www.cbsnews.com/news/fda-food-drug-inspections-layoffs/); *Food Safety Jeopardized by Onslaught of Funding and Staff Cuts*, New York Times (Mar. 19, 2025) (online at www.nytimes.com/2025/03/19/health/food-safety-trump-fda-cutbacks-deadly-outbreaks.html); *American Food Safety Could Be Headed for a Breakdown*, Stat News (Dec. 22, 2025) (online at www.statnews.com/2025/12/22/american-food-safety-funding-cuts-foodnet/).

²⁹¹ *Food Safety Jeopardized by Onslaught of Funding and Staff Cuts*, New York Times (Mar. 19, 2025) (online at www.nytimes.com/2025/03/19/health/food-safety-trump-fda-cutbacks-deadly-outbreaks.html).

²⁹² See e.g. Government Accountability Office, *Drug Safety: FDA Should Implement Strategies to Retain Its Inspection Workforce* (Nov. 13, 2024) (GAO-25-106775) (online at www.gao.gov/products/gao-25-106775).

now at a historic low, there is less oversight of our food.²⁹³ This is particularly concerning because the Trump Administration also cut ties with the World Health Organization and its Food Safety Authorities Network, blinding CDC to international food-related emergencies.²⁹⁴

Case Study: CDC’s Foodborne Diseases Active Surveillance Network (FoodNet) tracks the prevalence of foodborne illnesses in the United States.²⁹⁵ In July 2025, the Trump Administration quietly reduced the number of pathogens FoodNet is required to monitor from eight to two because of budget issues, making it optional for the states that participate in FoodNet to track *Campylobacter*, *Cyclospora*, *Listeria*, *Shigella*, *Vibrio* and *Yersinia*. Reducing the scope of FoodNet’s monitoring poses risks to consumers, especially more vulnerable populations like infants and children, who are more likely to experience a life-threatening infection from a foodborne illness.²⁹⁶

Case Study: CDC’s PulseNet is a laboratory network that analyzes and tracks instances of foodborne illness across the country, allowing investigators to identify the source of outbreaks and alert the public sooner.²⁹⁷ It has been shown to prevent a quarter of a million cases of foodborne disease a year, saving the economy a half a billion dollars annually.²⁹⁸ It has also saved the country hundreds of millions of dollars in medical and productivity costs.²⁹⁹ Outbreak detection through PulseNet has become increasingly difficult since Secretary Kennedy’s layoffs and restructuring of CDC, which included firing approximately 35% of the staff working on outbreak detection. Additionally, one former CDC senior leader reported to the Committee that travel restrictions put in place by the Trump Administration have prevented staff from

²⁹³ L. Hannah Gould, Jennifer Kline, Caitlin Monahan, Katherine Vierk, *Outbreaks of Disease Associated with Food Imported into the United States 1996-2014*, Emerging Infectious Diseases (Mar. 2017) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC5382743/>); *Foreign Food Safety Inspections Hit Historic Low After Trump Cuts*, ProPublica (Nov. 6. 2025) (online at www.propublica.org/article/foreign-food-safety-inspections-historic-low-fda).

²⁹⁴ Information provided to Committee Democrats.

²⁹⁵ Centers for Disease Control and Prevention, Foodborne Diseases Active Surveillance Network, *About FoodNet* (Sept. 4, 2024) (online at www.cdc.gov/foodnet/about/index.html).

²⁹⁶ *CDC Dramatically Scales Back Program That Tracks Food Poisoning Infections*, AP (Aug. 27, 2025) (online at <https://apnews.com/article/cdc-foodnet-surveillance-a6a8270540de89797e3b50b3eb2a4f11>); Centers for Disease Control and Prevention, *People at Increased Risk for Food Poisoning* (Jan. 31, 2025) (online at www.cdc.gov/food-safety/risk-factors/index.html).

²⁹⁷ Centers for Disease Control and Prevention, PulseNet, *About PulseNet*, (online at www.cdc.gov/pulsenet/hcp/about/index.html) (accessed Jan. 29, 2026); Information provided to Committee Democrats.

²⁹⁸ Information provided to Committee Democrats.

²⁹⁹ Robert L. Scharff PhD, JD, et. al, *An Economic Evaluation of PulseNet: A Network for Foodborne Disease Surveillance*, American Journal of Preventive Medicine (May 2016) (online at www.sciencedirect.com/science/article/pii/S0749379715006108); Information provided to Committee Democrats.

conducting site visits or the regional meetings necessary for PulseNet’s cross-country collaboration.³⁰⁰

Food safety work at the state and local level is typically funded by federal block grants, which have been dramatically cut by the Trump Administration over the past year. These block grants support state and local jurisdictions that provide updates to CDC, which CDC then incorporates into its tracking through PulseNet.³⁰¹ One former senior leader of CDC reported to Committee Democrats: “If PulseNet went down, you would see the number of outbreaks reduced to zero. We won’t know about it, but we will all be sicker.”³⁰²

Case Study: Prior to the Trump Administration, CDC distributed an array of newsletters on the status of different diseases to clinicians and laboratories. Under the Trump Administration, some of these newsletters went silent. Additionally, CDC’s Health Alert Network, which sent alerts about disease outbreaks to health professionals, went silent in March 2025 before beginning to publish again in September.³⁰³ In that time, cases of measles, listeria, salmonella, Hepatitis A, and Hepatitis C spread throughout the United States due in part to the Trump Administration’s policies and changes.³⁰⁴ The public is receiving fewer critical warnings about disease outbreaks at the same time that the Trump Administration is driving disease outbreaks. The Health Alert Network issued only six alerts in 2025, compared to dozens in other years. These alerts provide situational awareness for clinicians and hospitals and help them screen and treat patients better. According to one public health professional who spoke to National Public Radio, “We’re absolutely flying blind.”³⁰⁵

Case Study: In April 2025, USDA withdrew a proposed regulation that would have lowered the acceptable level of *salmonella* in raw poultry and created a sampling and verification process to identify adulterated products. This regulation would have helped prevent *salmonella* contamination which is one of the leading causes of foodborne illnesses in the United States with an estimated 1.35 million infections and over 400 deaths annually.³⁰⁶ The Trump Administration

³⁰⁰ Information provided to Committee Democrats

³⁰¹ Centers for Disease Control and Prevention, *PulseNet: Outbreak Detection* (online at www.cdc.gov/pulsenet/hcp/about/outbreak-detection.html) (accessed May 1, 2026); *CDC’s PulseNet Significantly Reduces Incidence, Impact of Foodborne Illness*, Healio (Mar. 21, 2026) (online at www.healio.com/news/infectious-disease/20160321/cdc-pulsenet-significantly-reduces-incidence-impact-of-foodborne-illness).

³⁰² Information provided to Committee Democrats.

³⁰³ Centers for Disease Control and Prevention, *Health Alert Network (HAN)* (online at www.cdc.gov/han/php/about/index.html) (accessed May 1, 2026).

³⁰⁴ *Diseases Are Spreading. CDC Isn’t Warning the Public Like it Was Months Ago*, NPR (May 21, 2025) (online at www.npr.org/2025/05/21/nx-s1-5387723/cdc-communications-cuts-social-media-public-health).

³⁰⁵ *A Drop in CDC Health Alerts Leaves Doctors “Flying Blind”*, NPR (Feb. 6, 2026) (online at www.npr.org/2026/02/06/nx-s1-5689923/drop-in-cdc-health-alerts-hans).

³⁰⁶ *Id.*

has also increased meat processing speeds, reduced worker safety reporting requirements, and pushed out staff at USDA Food Safety and Inspection Service.³⁰⁷

Notably, the poultry processing company Pilgrim's Pride, which would have had to institute new and costly procedures if the rule went into effect, donated \$5 million to President Trump's inauguration. This constituted the largest single donation to his inauguration, and was greater than the combined donations of Amazon, Meta, and Apple. President Trump's USDA Under Secretary for Food Safety also has financial interests in the agriculture industry and was previously known for her success at "blocking attempts by other regulators to improve health and safety conditions in meatpacking plants."³⁰⁸

3. POLLUTION AND CONTAMINATION

What the Trump Administration Has Said: The May 2025 MAHA Report states that under the Trump Administration, the federal government will have a "renewed focus on fearless gold-standard science throughout the federal government . . . to understand and reduce the cumulative chemical load on our children." It specifically names exposure to pesticides and per- and polyfluoroalkyl substances (PFAS), commonly referred to as "forever chemicals," as particularly dangerous for children.³⁰⁹ It also directs EPA and NIH to study air quality impacts on children's health.³¹⁰

What the Trump Administration Has Done: Gutted EPA, weakened protections against pollutants like pesticides and PFAS, declared glyphosate-based herbicides a national security imperative, and fought to secure immunity for agribusiness against claims that such herbicides cause cancer.³¹¹

University of Minnesota Center for Infectious Disease Research & Policy, *USDA Withdraws Proposal to Reduce Salmonella in Poultry* (Apr. 25, 2025) (online at www.cidrap.umn.edu/foodborne-disease/usda-withdraws-proposal-reduce-salmonella-poultry).

³⁰⁷ *Trump's Biggest Inaugural Donor Benefits from Policy Changes that Raise Worker Safety Concerns*, Colorado Newslines (Jan. 15, 2026) (online at <https://coloradonewslines.com/2026/01/15/trump-donor-benefits-from-policy-changes>).

³⁰⁸ *Texas Tech Professor with Close Ties to Big Ag Nominated by Trump to Regulate the Industry*, Texas Observer (May 9, 2018) (online at www.texasobserver.org/texas-tech-professor-with-close-ties-ag-industry-nominated-trump-regulate).

³⁰⁹ MAHA Commission, *The MAHA Report* (May 22, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/05/MAHA-Report-The-White-House.pdf).

³¹⁰ MAHA Commission, *Strategy Report: Make Our Children Healthy Again* (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

³¹¹ *How Biotech Giant Bayer Landed a Win that Made MAHA Furious*, Politico (Mar. 20, 2026) (online at www.politico.com/news/2026/03/20/how-biotech-giant-bayer-landed-a-win-that-made-maha-furious-00838045).

Case Study: Research raises concerns that pesticide exposure may have adverse health effects.³¹² During a Senate Appropriations Committee hearing in May 2025, Secretary Kennedy reversed his commitment to protect consumers from the herbicide glyphosate, which he had fought against for years as an environmental lawyer,³¹³ saying: “There’s a million farmers who rely on glyphosate... We are not going to do anything to jeopardize that business model.”³¹⁴

Glyphosate is the active ingredient in Roundup, an herbicide developed by Monsanto and now owned by Bayer, whose safety has long been contested. Limiting exposure to the herbicide has been a major priority for environmentalists and the MAHA community.³¹⁵ Despite these widespread concerns and his past promises, Secretary Kennedy has supported the Trump Administration’s Executive Order to boost production of glyphosate-based herbicides and efforts to grant immunity to companies producing it.³¹⁶ The Trump Administration has also now sided with glyphosate-producer Bayer in the Supreme Court case *Monsanto v. Durnell* which will determine whether companies can be held liable under state law for failing to warn consumers about the potential dangers of a pesticide. This is one of many cases of individuals trying to hold Bayer accountable for not warning consumers of alleged cancer risks, and if the Trump Administration and Bayer are successful in their case, it would mean that the thousands of people concerned they have been harmed by glyphosate would not have recourse and would not be able to hold the company responsible.³¹⁷

Case Study: PFAS exposure has been linked to cancer and other serious health problems, and in April 2024, the Biden Administration’s EPA announced its conclusion that even minimal

³¹² *Are Pesticides in Your Food Harmful?*, TIME (June 5, 2025) (online at <https://time.com/7291075/are-pesticides-dangerous-maha-glyphosate-atrazine/>).

³¹³ *RFK Jr. Fought Pesticides for Years. Now He’s Backing Their Production*, AP (Feb. 23, 2026) (online at <https://apnews.com/article/maha-glyphosate-rfk-kennedy-trump-pesticides-3d23d4771dba743a976543ca6cfa69d9>).

³¹⁴ Senate Committee on Appropriations, Subcommittee on Labor, Health and Human Services, Education, and Related Agencies, *Hearing on A Review of the President’s Fiscal Year 2026 Budget Request for the Department of Health and Human Services* (May 20, 2025) (online at www.appropriations.senate.gov/hearings/a-review-of-the-presidents-fiscal-year-2026-budget-request-for-the-department-of-health-and-human-services).

³¹⁵ *MAHA’s Perfect Villain*, The Atlantic (Apr. 27, 2026) (online at www.theatlantic.com/health/2026/04/maha-glyphosate-rally/686972/).

³¹⁶ The White House, *Promoting the National Defense by Ensuring an Adequate Supply of Elemental Phosphorus and Glyphosate-Based Herbicides* (Feb. 18, 2026) (online at www.whitehouse.gov/presidential-actions/2026/02/promoting-the-national-defense-by-ensuring-an-adequate-supply-of-elemental-phosphorus-and-glyphosate-based-herbicides); “I will always tell the American people the truth.” Secretary Kennedy (@SecKennedy) X, (Feb. 22, 2026) (online at <https://x.com/SecKennedy/status/2025760500793909389>).

³¹⁷ *Supreme Court Hears Bayer Roundup Liability Case with Billions at Stake*, C&EN (Apr. 28, 2026) (online at <https://cen.acs.org/environment/pesticides/monsanto-durnell-supreme-court-roundup-glyphosate/104/web/2026/04>).

exposure to certain types of PFAS it had studied can be dangerous.³¹⁸ Despite these well-documented hazards, the Trump Administration rescinded federal drinking water limits for four types of PFAS and delayed the timeline for enforcement of two other types of PFAS until 2031.³¹⁹ As a result, millions of Americans will continue to be exposed to PFAS.

Case Study: In November 2025, the Trump Administration approved two new PFAS-containing pesticides for use on common vegetables like lettuce, broccoli, and potatoes, and announced plans to approve four more pesticides containing PFAS.³²⁰

Case Study: The Trump Administration cancelled \$15 million in funding for PFAS research, claiming that the research was not aligned with agency priorities.³²¹ This means the Trump Administration is making it harder to understand the effects of PFAS contamination and exposure at the same time that it's increasing Americans' risks from this contamination and exposure.

Case Study: Under the leadership of former chemical industry officials, the Trump Administration has proposed to nearly double the level of exposure considered safe for the chemical formaldehyde, which is known to cause cancer and serious respiratory problems.³²² The chemical industry has long lobbied for more lenient regulations, which would ease the manufacture and use of formaldehyde in automotive products, building materials, textiles, and other sectors.³²³

³¹⁸ Environmental Protection Agency, *Press Release: Biden-Harris Administration Finalizes First-Ever National Drinking Water Standard to Protect 100M People from PFAS Pollution* (Apr. 10, 2024) (online at www.epa.gov/newsreleases/biden-harris-administration-finalizes-first-ever-national-drinking-water-standard).

³¹⁹ *The Environmental Protection Agency Delays Limits on PFAS in Drinking Water*, NPR (May 14, 2025) (online at www.npr.org/sections/shots-health-news/2025/05/14/nx-s1-5398061/the-environmental-protection-agency-delays-limits-on-pfas-in-drinking-water); *E.P.A. to End Some Limits on "Forever Chemicals" in Drinking Water*, New York Times (May 18, 2026) (online at www.nytimes.com/2026/05/18/climate/epa-forever-chemicals-pfas-drinking-water.html).

³²⁰ *EPA Just Approved New "Forever Chemical" Pesticides for Use on Food*, Washington Post (Nov. 22, 2025) (online at www.washingtonpost.com/climate-environment/2025/11/22/forever-chemicals-pesticides).

³²¹ *Trump's First EPA Promised to Crack Down on Forever Chemicals. His Second EPA is Pulling Back*, ProPublica (July 2, 2025) (online at www.propublica.org/article/trump-epa-pfas-drinking-water).

³²² *Starting With Formaldehyde, Trump Administration Reassesses Chemical Risks*, New York Times (Dec. 10, 2025) (online at www.nytimes.com/2025/12/10/climate/starting-with-formaldehyde-trump-administration-reassesses-chemical-risks.html).

³²³ *Under Former Chemical Industry Insiders, Trump EPA Nearly Doubles Amount of Formaldehyde Considered Safe to Inhale*, ProPublica (Dec. 8, 2025) (online at www.propublica.org/article/epa-formaldehyde-risk-assessment).

Case Study: In February 2026, the Trump Administration reapproved the weedkiller dicamba, which has been linked to cancer.³²⁴ Notably, EPA’s deputy assistant secretary for pesticides, who was previously an industry lobbyist that advocated against pesticide regulation, was not required to recuse himself from the decision about dicamba or other pesticide regulations.³²⁵

Case Study: In February 2026, the Trump Administration issued a final rule revoking the Endangerment Finding, a 2009 scientific determination that EPA has used as the basis for regulating greenhouse gas emissions.³²⁶ Repealing the Endangerment Finding eliminates EPA’s authority to regulate greenhouse gas emissions, resulting in higher levels of pollution from cars, trucks, and oil and gas operations.³²⁷ This increase in pollution may lead to up to 58,000 additional premature deaths and will also have economic impacts, with removal of fuel economy and emissions standards increasing gas prices and putting hundreds of thousands of clean energy jobs at risk.³²⁸

Case Study: In early 2025, the Trump Administration arbitrarily exempted more than 100 facilities, including chemical manufacturers and coal plants, from air quality regulations required by the Clean Air Act. These limits were aimed at reducing cancer risks and were expected to reduce the risk of cancer for those who lived within six miles of a chemical plant by 96%.³²⁹

³²⁴ *Trump Admin Reapproves Cancer-Tied Pesticide Targeted by MAHA*, E&E News (Feb. 6, 2026) (online at www.eenews.net/articles/trump-admin-reapproves-cancer-tied-pesticide-targeted-by-maha).

³²⁵ *Farm Industry Lobbyist, MAHA Critic to Head EPA Pesticides Office*, E&E News (June 27, 2025) (online at www.eenews.net/articles/farm-industry-lobbyist-maha-critic-to-head-epa-pesticides-office); *How EPA Ethics Officials Cleared Former Industry Insiders for Regulatory Roles*, Washington Post (Jan. 20, 2026) (online at www.washingtonpost.com/climate-environment/2026/01/19/epa-dicamba-formaldehyde-threshold-ethics).

³²⁶ *Trump Set to Gut U.S. Climate Change Policy and Environmental Regulations*, White House Official Says, PBS News (Feb. 10, 2026) (online at www.pbs.org/newshour/politics/trump-set-to-gut-u-s-climate-change-policy-and-environmental-regulations-white-house-official-says); Environmental Protection Agency, *Rescission of the Greenhouse Gas Endangerment Finding and Motor Vehicle Greenhouse Gas Emission Standards Under the Clean Air Act*, 91 Fed. Reg. 7686 (Feb. 18, 2026) (final rule).

³²⁷ Center for American Progress, *The Trump Administration’s Assault on Environmental Protections Will Give Polluters a Free Pass While Causing Millions of Asthma Attacks* (June 3, 2025) (online at www.americanprogress.org/article/the-trump-administrations-assault-on-environmental-protections-will-give-polluters-a-free-pass-while-causing-millions-of-asthma-attacks); *In Game-Changing Climate Rollback, E.P.A. Aims to Kill a Bedrock Scientific Finding*, New York Times (July 29, 2025) (online at www.nytimes.com/2025/07/29/climate/epa-endangerment-finding-repeal-proposal.html).

³²⁸ *Four Consequences of Revoking the Endangerment and Vehicle Rules*, Forbes (Feb. 12, 2026) (online at www.forbes.com/sites/margooge/2026/02/12/four-consequences-of-revoking-the-endangerment-and-vehicle-rules).

³²⁹ *Trump Exempts More Than 100 Polluters from Environmental Standards*, The Hill (July 18, 2025) (online at <https://thehill.com/policy/energy-environment/5408714-trump-epa-polluters-environmental-standards-clean-air-act>).

These changes increase profits for polluting industries while putting Americans at risk and exacerbating health issues, such as asthma, in children and other vulnerable populations.³³⁰

Case Study: In April 2025, Secretary Kennedy cut the entire Lead Poisoning Prevention and Surveillance Branch within CDC’s National Center for Environmental Health.³³¹ Millions of children are at risk of lead poisoning in the United States, with over 4 million children living in homes with lead paint as of 2019 and almost 600,000 children suffering from elevated blood lead levels in 2016.³³² Gutting the entire Branch meant that state and local public health officials were no longer able to get assistance from CDC in lead poisoning prevention programs, including improving blood lead testing, surveillance, providing services to those exposed to lead, and efforts to target populations at higher risk.³³³ These cuts also impacted researchers, public health authorities, and other federal departments’ access to data on blood lead levels in children, which was funded and compiled by the office.³³⁴

Case Study: The Administration is continuing to scale back enforcement of environmental laws. Compared to the Biden Administration, and even President Trump’s first term, the current Administration has been pursuing significantly fewer civil lawsuits against polluters.³³⁵ It has also pushed out EPA regional office employees in charge of enforcing environmental regulations, making it more difficult to protect the public from air and water pollution and limiting EPA’s bandwidth to address emerging contaminants like microplastics and PFAS.³³⁶ EPA also cancelled millions of dollars of grants and contracts that funded work to address the impacts of pollution

³³⁰ Center for American Progress, *The Trump Administration’s Assault on Environmental Protections Will Give Polluters a Free Pass While Causing Millions of Asthma Attacks* (June 3, 2025) (online at www.americanprogress.org/article/the-trump-administrations-assault-on-environmental-protections-will-give-polluters-a-free-pass-while-causing-millions-of-asthma-attacks).

³³¹ *A City Responding to a Lead Crisis in Schools Reached out to CDC for Help. The Agency’s Lead Experts Were Just Fired*, CNN (Apr. 3, 2025) (online at www.cnn.com/2025/04/02/health/milwaukee-lead-crisis-schools-cdc-cuts). See e.g. *CDC Division Responsible for Asthma Control and Lead Poisoning Prevention Effectively Eliminated*, Stat News (Apr. 4, 2025) (online at www.statnews.com/2025/04/04/cdc-asthma-control-lead-poisoning-environmental-health/).

³³² David E. Jacobs, Mary Jean Brown, *Childhood Lead Poisoning 1970-2022: Charting Progress and Needed Reforms*, J Public Health Manag Pract. (Nov. 22, 2022) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC9897265/>).

³³³ Centers for Disease Control and Prevention, *Childhood Lead Poisoning Prevention, State and Local Programs* (online at www.cdc.gov/lead-prevention/success-stories-by-state/index.html) (accessed Apr. 27, 2026).

³³⁴ *RFK Jr.’s Cuts to CDC Lead Poisoning Team Bring Efforts to Help Tribes, Health Departments to a Standstill*, CBS News (Apr. 8, 2025) (online at www.cbsnews.com/news/rfk-jr-hhs-layoffs-cdc-lead-poisoning).

³³⁵ *How Trump Officials Have Transformed EPA to Weaken Enforcement*, Washington Post (Nov. 7, 2025) (online at www.washingtonpost.com/climate-environment/2025/11/07/epa-environment-enforcement-deregulation).

³³⁶ See e.g., Crain’s Chicago Business, *Commentary: Trump’s EPA Cuts to Chicago Headquarters Put Us All in Danger* (Aug. 11, 2025) (online at www.chicagobusiness.com/elevate/epa-staff-cuts-endanger-all-chicago-region-opinion).

on the health of vulnerable individuals.³³⁷ These cancellations included projects to prevent lead poisoning in children, improve air quality monitoring, and install wastewater treatment systems needed to prevent parasitic diseases.³³⁸

Since President Trump returned to office, EPA has lost more than 4,000 employees.³³⁹ The Trump Administration has particularly targeted EPA staff whose work related to environmental justice or equity, which included addressing pollution that disproportionately affects communities of color and low-income communities, cutting approximately 300 of these employees.³⁴⁰ In March 2025, Administrator Zeldin also announced the elimination of all of EPA's offices of environmental justice, weakening protections for low-income and minority communities located near polluting industrial facilities.³⁴¹

C. The Trump Administration is rolling back or dismantling federal programs that ensure Americans have access to health care.

1. REDUCING ACCESS TO CARE

Through President Trump's signature legislation, the OBBBA, the Trump Administration locked in drastic cuts to Medicaid that are driving up healthcare and costs for Americans to pay for a tax cut for the wealthy. An estimated 10 million people will lose their health coverage by 2034 due to the law's cuts to Medicaid and the Affordable Care Act (ACA) marketplace.³⁴² More

³³⁷ *Trump Has Canceled Environmental Justice Grants. Here's What Communities Are Losing.*, Stateline (Apr. 14, 2025) (online at <https://stateline.org/2025/04/14/trump-has-canceled-environmental-justice-grants-heres-what-communities-are-losing>).

³³⁸ *Id.*

³³⁹ *EPA Hits 40-Year Lows in Staffing After Trump Targets Its Public Health Experts*, Inside Climate News (Mar. 6, 2026) (online at <https://insideclimatenews.org/news/06032026/trump-epa-staffing-lows>).

³⁴⁰ Environmental Protection Agency, *EPA Announces Reduction in Force, Reorganization Efforts to Save Taxpayers Nearly Three-Quarters of a Billion Dollars* (July 18, 2025) (online at www.epa.gov/newsreleases/epa-announces-reduction-force-reorganization-efforts-save-taxpayers-nearly-three); See e.g., *Trump Asked EPA Employees to Snitch on Colleagues Working on DEI Initiatives. They Declined.*, ProPublica (May 16, 2026) (online at www.propublica.org/article/epa-diversity-initiatives-trump).

³⁴¹ *E.P.A. Plans to Close All Environmental Justice Offices*, New York Times (Mar. 11, 2025) (www.nytimes.com/2025/03/11/climate/epa-closure-environmental-justice-offices.html); *EPA Eliminating Environmental Justice Jobs*, CBS News (Mar. 12, 2025) (online at www.cbsnews.com/news/epa-eliminating-environmental-justice-jobs-dei); *Trump Administration Cuts Environmental Justice Programs at EPA, DOJ*, Reuters (Feb. 6, 2025) (online at www.reuters.com/world/us/trump-administration-cuts-environmental-justice-programs-epa-doj-sources-say-2025-02-06).

³⁴² Center on Budget and Policy Priorities, *By the Numbers: Harmful Republican Megabill Will Take Health Coverage Away from Millions of People and Raise Families' Costs* (Aug 27, 2025) (online at www.cbpp.org/research/health/by-the-numbers-harmful-republican-megabill-will-take-health-coverage-away-from).

than 4 million additional people are projected to lose health coverage because President Trump and Congressional Republicans refused to extend ACA premium tax credits.

Case Study: The OBBBA is contributing to negative impacts on hospitals and the ability for people to get care in under-resourced areas. Under the OBBBA, Medicaid spending is estimated to decline by over \$130 billion over 10 years.³⁴³ When rural hospitals disproportionately rely on Medicaid for funding, this kind of reduction will put the survival of rural hospitals at risk.³⁴⁴

2. FERTILITY AND FAMILY PLANNING

The center of the U.S. government's work on reproductive health care, fertility, and family planning is HHS's Office of Population Affairs (OPA). OPA supports high-quality clinical services, evidence-based and innovative programs, rigorous research, and community engagement.³⁴⁵ This includes clinical care and family planning services funded through Title X as well as teen pregnancy prevention programs.³⁴⁶ In addition, CDC's Division of Reproductive Health has historically been dedicated to promoting healthy pregnancies, supporting maternal and child health programs, and assisting reproductive technology, such as in vitro fertilization (IVF).³⁴⁷

Title X is the congressionally mandated family planning program that funds a network of public and private nonprofit health and community-based clinics that provide access to family planning care for millions of low-income or uninsured individuals. This care helps people to avoid pregnancy through access to contraception, and to achieve pregnancy through basic infertility services and other preconception services.³⁴⁸ Many clinics also provide preventive health services such as cancer screenings, wellness exams, and sexually transmitted infection

³⁴³ KFF, *How Might Federal Medicaid Cuts in the Enacted Reconciliation Package Affect Rural Areas?* (July 24, 2025) (online at www.kff.org/medicaid/how-might-federal-medicaid-cuts-in-the-enacted-reconciliation-package-affect-rural-areas/).

³⁴⁴ Melanie Yates, Peter Yun, *The One Big Beautiful Bill: A Looming Crisis for Health Equity and Emergency Medicine*, *The Western Journal of Emergency Medicine* (Dec. 20, 2025) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC12815498/>).

³⁴⁵ Department of Health and Human Services, Office of the Assistant Secretary for Health (OASH), Office of Population Affairs (OPA), Mission, *Mission* (online at <https://opa.hhs.gov/about/mission>) (accessed Jan. 5, 2025).

³⁴⁶ Department of Health and Human Services, Office of the Assistant Secretary for Health (OASH), Office of Population Affairs (OPA), Mission, *Mission* (online at <https://opa.hhs.gov/about/mission>) (accessed Jan. 5, 2025).

³⁴⁷ Centers for Disease Control and Prevention National Center for Chronic Disease Prevention and Health Promotion, *About the Division of Reproductive Health* (May 15, 2024) (online at www.cdc.gov/nccdphp/divisions-offices/about-the-division-of-reproductive-health.html).

³⁴⁸ Department of Health and Human Services, Office of Population Affairs, *Title X Family Planning Program* (online at <https://opa.hhs.gov/sites/default/files/2025-08/title-x-family-planning-program-2025.pdf>) (accessed Jan. 27, 2026).

(STI) testing and treatment.³⁴⁹ These are essential services for low-income and uninsured families.

What the Trump Administration Has Said: During his second presidential campaign, President Trump promised to make IVF treatments free.³⁵⁰ In February 2025, President Trump issued Executive Order 14216 with the stated goal of making IVF more affordable and accessible. In July 2025, the Trump Administration announced that it would expand the focus of OPA’s work and use Title X funds to ramp up efforts to help people trying to conceive.³⁵¹

What the Trump Administration Has Done: Failed to meaningfully reduce the cost of IVF;³⁵² gutted the work of OPA and CDC’s Division of Reproductive Health; froze Title X funding for months, causing clinics to close and Americans to lose care;³⁵³ proposed eliminating Title X altogether; initiated plans to shift Title X funds from addressing the needs of Americans to instead focus on “natural family planning methods”³⁵⁴ and “holistic” treatments—not IVF—to address infertility.³⁵⁵

³⁴⁹ Department of Health and Human Services, Office of Population Affairs, *Title X Service Grants* (online at <https://opa.hhs.gov/grant-programs/title-x-service-grants>) (accessed Jan. 21, 2026); Department of Health and Human Services, Office of Population Affairs, *What are Title X Family Planning Clinics, and Where Can You Find One?* (July 2024) (online at <https://opa.hhs.gov/about/news/e-updates/what-are-title-x-family-planning-clinics-and-where-can-you-find-one>).

³⁵⁰ *Trump Says He’ll Support Free IVF Treatments in a Second Term*, NPR (Aug. 30, 2024) (online at www.npr.org/2024/08/30/nx-s1-5094454/trump-tells-town-hall-crowd-that-he-supports-free-ivf-treatments).

³⁵¹ *Under Trump, a New Focus for a Birth Control Program: Helping Women Get Pregnant*, New York Times (July 18, 2025) (online at www.nytimes.com/2025/07/18/us/politics/under-trump-a-new-focus-for-a-birth-control-program-helping-women-get-pregnant.html); Exec. Order No. 14216, 90 Fed. Reg. 10451 (Feb. 18, 2025).

³⁵² *Fertility Treatment Given Special Emphasis as Trump Rx Site Goes Live*, The Guardian (Feb. 16, 2026) (online at www.theguardian.com/us-news/2026/feb/16/trump-rx-fertility-ivf).

³⁵³ *Clinics Begin Closing as Trump Admin Continues Freeze on Family Planning Funds*, Politico (Apr. 22, 2025) (online at www.politico.com/news/2025/04/22/clinics-begin-closing-as-trump-admin-continues-freeze-on-family-planning-funds-00302504).

³⁵⁴ *Trump Admin Moves Title X Family Planning Program Away from Contraception, Toward Conception*, Politico (Apr. 3, 2026) (online at www.politico.com/news/2026/04/03/trump-admin-moves-title-x-family-planning-program-away-from-contraception-towards-conception-00858913).

³⁵⁵ *Under Trump, a New Focus for a Birth Control Program: Helping Women Get Pregnant*, New York Times (July 18, 2025) (online at www.nytimes.com/2025/07/18/us/politics/under-trump-a-new-focus-for-a-birth-control-program-helping-women-get-pregnant.html).

Case Study: In April 2025, the Administration froze Title X funding. For some clinics, this freeze lasted up to eight months.³⁵⁶ For government and community-funded clinics, the loss of funding and resulting uncertainty meant they were unable to continue operating, and some clinics were forced to close.³⁵⁷ The low-income and uninsured individuals who relied on these clinics now have limited access to these critical health care services, including services related to reproductive health care and infertility.³⁵⁸

Case Study: In April 2025, the Trump Administration fired the team that worked on IVF at CDC, as well as the Assisted Reproductive Technology Surveillance team and the majority of employees in the Division of Reproductive Health, despite some of the work being statutorily required.³⁵⁹ The Assisted Reproductive Technology Surveillance team collected and reported data regarding fertility clinic success rates, including reporting on the certification of embryo laboratories.³⁶⁰ Eliminating these offices leaves people trying to conceive with less information and, according to experts, will “make it more dangerous to be pregnant in the United States.”³⁶¹

Case Study: In October 2025, during a government shutdown, the Trump Administration laid off all but one employee at OPA.³⁶² The one employee not fired was a member of the

³⁵⁶ *Lawsuit Dismissed After Trump Admin Quietly Restored Tens of Millions to Planned Parenthood*, Politico (Jan. 13, 2026) (online at www.politico.com/news/2026/01/13/lawsuit-dismissed-after-trump-admin-quietly-restored-tens-of-millions-to-planned-parenthood-00723369).

³⁵⁷ *Clinics Begin Closing as Trump Admin Continues Freeze on Family Planning Funds*, Politico (Apr. 22, 2025) (online at www.politico.com/news/2025/04/22/clinics-begin-closing-as-trump-admin-continues-freeze-on-family-planning-funds-00302504); KFF, *Title X Grantees and Clinics Affected by the Trump Administration’s Funding Freeze* (Apr. 15, 2025) (online at www.kff.org/womens-health-policy/title-x-grantees-and-clinics-affected-by-the-trump-administrations-funding-freeze/).

³⁵⁸ *The Quiet Collapse of America’s Reproductive Health Safety Net*, CBS News (Oct. 30, 2025) (online at www.cbsnews.com/news/reproductive-health-trump-administration-hhs-cuts/).

³⁵⁹ *CDC’s IVF Team Gutted Even as Trump Calls Himself the “Fertilization President”*, NBC News Apr. 2, 2025) (online at www.nbcnews.com/health/health-news/cdc-ivf-team-gutted-even-trump-calls-fertilization-president-rcna199261); Pub. L. No. 102-493 (1992).

³⁶⁰ Centers for Disease Control and Prevention, *National ART Surveillance System* (online at www.cdc.gov/art/php/nass/index.html) (accessed Apr. 7, 2026).

³⁶¹ Center for American Progress, *The Trump Administration Is Endangering Women’s Reproductive Health* (July 21, 2025) (online at www.americanprogress.org/article/the-trump-administration-is-endangering-womens-reproductive-health/).

³⁶² *Trump Administration Decimates Birth Control Office in Layoffs*, New York Times (Oct. 15, 2025) (online at www.nytimes.com/2025/10/15/us/politics/trump-birth-control-layoffs.html); *Trump Administration Lays Off Staff of HHS Office of Population Affairs*, Pennsylvania Independent (Oct. 20, 2025) (online at https://pennsylvaniaindependent.com/reproductive_rights/trump-administration-lays-off-staff-of-hhs-office-of-population-affairs/).

The Trump Administration reduced IHS staff through its Deferred Resignation Program and Early Retirement programs, the government-wide hiring freeze instituted in January 2025, and through decisions to close offices and cut staff.³⁶⁹ While the hiring freeze has lifted for doctors and nurses and IHS has even launched a new hiring effort, IHS still faces delays and backlogs when attempting to onboard new hires, which mean it continues to experience significant staffing issues.³⁷⁰ Increased provider vacancies as a result of the Trump Administration’s gutting of the public health workforce, on top of long-term staffing issues at IHS, have real impacts on patient care and have resulted in several outpatient clinics having to reduce the number of patients they can see, as well as reduced hours at urgent care facilities.³⁷¹ The Trump Administration’s cuts to IHS staff have resulted in an even higher provider vacancy rate than in the past and, as one IHS clinician reported to Committee Democrats, created a culture of “fear and anxiety that permeated all of what we did.”³⁷²

Case Study: Under the Trump Administration, IHS instituted new contracting requirements, including a new requirement that every contract—including contracts with hospitals—must be approved by IHS leadership and then a political appointee at HHS, IHS’s parent agency. These new review and approval steps come with no metrics or timeframes and are outside of HHS’s typical contracting and acquisitions processes.³⁷³ One IHS staffer shared with Committee Democrats that in one case, delayed contract approval meant a necessary specialist was not present in the hospital’s labor and delivery ward, causing a woman in labor to be transferred by helicopter to another hospital. Not only did this transfer unnecessarily endanger both mother and baby, but it meant she had to give birth further outside of her tribal homeland.³⁷⁴

³⁶⁹ *Early Retirements, Other Cuts Slash Indian Health Service Workforce*, ICT (Oct. 30, 2025) (online at <https://ictnews.org/news/doge-early-retirement-offers-slash-indian-health-service-workforce/>); Letter from Committees on Appropriations Subcommittee on Interior, Environment, and Related Agencies, to Acting Secretary Dorothy Fink (Feb. 10, 2025) (online at <https://www.merkley.senate.gov/wp-content/uploads/25.02.10-LTR-IHS-Staffing.pdf>).

³⁷⁰ Information shared with Committee Democrats.; *Indian Health Service Launches Largest Hiring Effort in Agency History*, Indian Health Service (Jan. 29, 2026) (online at www.ihs.gov/newsroom/pressreleases/2026-press-releases/indian-health-service-launches-largest-hiring-effort-in-agency-history/); See *Many American Indians Put Their Faith in RFK Jr. They’re Starting to Lose It.*, Politico (July 17, 2025) (online at <https://www.politico.com/news/2025/07/16/rfk-american-indians-native-americans-health-care-00458181>).

³⁷¹ Information shared with Committee Democrats; *Indian Health Service: Agency Faces Ongoing Challenges Filling Provider Vacancies* (GAO-18-580) Aug. 15, 2018 (online at www.gao.gov/products/gao-18-580).

³⁷² Information shared with Committee Democrats.

³⁷³ *HHS Efficiency Review Blamed for Delaying Patient Care at Indian Health Service*, Stat News (July 15, 2025) (online at www.statnews.com/2025/07/15/indian-health-service-new-contract-review-process-bottleneck-to-care/).

³⁷⁴ Information provided to Committee Democrats.

4. QUALITY AND SAFETY OF HEALTH CARE DELIVERY

What the Trump Administration Has Said: Secretary Kennedy has repeatedly criticized the American health care system, calling it a “sick care system” and condemning certain health insurer practices, such as prior authorizations, that can make it more difficult for people to access medications and necessary care.³⁷⁵

What the Trump Administration Has Done: Made it more difficult for health care providers to deliver critical, evidence-based care to people across the country.

Case Study: The Agency for Healthcare Research and Quality (AHRQ) is the division within HHS which conducts and funds research into improving the quality and safety of health care.³⁷⁶ Since the Trump Administration fired or pushed out most of its employees in 2025, AHRQ’s work has ground to a halt, including the approval of new grants, despite its statutory mission and congressionally appropriated funds waiting to be awarded.³⁷⁷ According to one former AHRQ senior leader, without adequate staff, AHRQ cannot complete their work and appropriated funds will continue to not go out the door despite congressional intent.³⁷⁸

As a result, AHRQ has not funded any new grants, including Institutional Training Programs (T32) grants which support early career researchers, since before the staff was gutted in April 2025 and has funded only a handful continuation awards for ongoing research as of the end of April 2026.³⁷⁹ In comparison, by the end of April in fiscal year 2024, AHRQ had approved 171 new grants and 149 renewals. Not funding continuation awards, including for grants which were in the middle of their project periods, means that in practice these grants were abruptly canceled. According to one former AHRQ senior leader, this means that AHRQ has effectively ended its research education program.³⁸⁰ In addition, AHRQ canceled nearly all of its existing funding announcements, and early and new ones have not been posted, resulting in no

³⁷⁵ *Kennedy’s Methodical 2-Decade Quest to Dismantle Vaccine Policy*, New York Times (Dec. 4, 2025) (online at www.nytimes.com/2025/12/04/us/politics/rfk-vaccines-hhs-trump.html).

³⁷⁶ USA.gov, *Agency for Healthcare Research and Quality (AHRQ)* (online at www.usa.gov/agencies/agency-for-healthcare-research-and-quality) (accessed Apr. 7, 2026).

³⁷⁷ *Staff Cuts are Undermining Federal Research on How to Make Health Care Better*, Stat News (Aug. 13, 2025) (online at www.statnews.com/2025/08/13/federal-health-research-agency-ahrq-incapacitated-by-cuts/); Pub. L. No. 106-129 (1999).

³⁷⁸ Information provided to Committee Democrats.

³⁷⁹ Information provided to Committee Democrats; *“Nobody Answers”*: *The Unraveling of a Patient Care Research Agency*, Roll Call (Apr. 7, 2026) (online at <https://rollcall.com/2026/04/07/nobody-answers-the-unraveling-of-a-patient-care-research-agency/>); Grant Witness, *Grant Witness* (online at <https://grant-witness.us/>) (accessed on Apr. 28, 2026).

³⁸⁰ Information provided to Committee Democrats.

ability for researchers to apply for new grants, despite money appropriated by Congress to fund them.³⁸¹

Case Study: Until March 2025, AHRQ administered the Patient Safety Network, known as PSNet. PSNet was a national web-based resource which kept clinicians and health care providers updated on patient safety literature, news, and research, and provided continuing education on issues relevant to patient safety.³⁸² In spring 2025, the contract to administer PSNet ended and despite the renewal and granting of other new contracts, including communications contracts, PSNet’s contract and work was allowed to lapse. PSNet’s website has remained frozen in time since March 2025. This is despite the clear alignment of PSNet’s mission with AHRQ’s supposed renewed focus under the Trump Administration on “evidence that improves how health care is delivered.”³⁸³

III. CONCLUSION

The government operates countless programs that keep Americans safe. Federal employees work across the country to not only protect Americans from disease and threats, but also to run programs that help improve people’s health. Many of the Trump Administration’s Make America Healthy Again goals aligned with things federal employees were already doing, including working to address chronic disease, reducing pesticides in the environment, and making food safer. Instead of building on those robust programs staffed with experts, the Trump Administration fired those experts and gutted the very offices and programs that aligned with their stated promises. With the gutting of the government’s public health and science agencies, much of the work that helped keep Americans safe and healthier has ground to a halt. Public health also relies on a complex network of federal, state, city, local, and territorial agencies, organizations, and funding mechanisms, and with the loss of key people and programs across that network, there will also be fewer training opportunities for the next generation of public health professionals.

Many of the losses to the nation’s public health infrastructure will not be visible to the public until it is too late to reverse them. The same way that terminated or suspended scientific research can be difficult or even impossible to restart, many public health functions, normally flying under the radar quietly protecting Americans from disease and other dangers, will be incredibly difficult to resume now that they have been dismantled. Programs and offices that relied on federal scientists with decades of experience and institutional knowledge—now lying dormant after staff were fired or pushed out—cannot be restarted with the push of a button or even the hiring of a new employee. Additionally, many of the impacts will not be fully felt for

³⁸¹ “*Nobody Answers*”: *The Unraveling of a Patient Care Research Agency*, Roll Call (Apr. 7, 2026) (online at <https://rollcall.com/2026/04/07/nobody-answers-the-unraveling-of-a-patient-care-research-agency/>).

³⁸² Department of Health and Human Services, Agency for Healthcare Research and Quality, *About PSNet* (online at <https://psnet.ahrq.gov/about-psnet>) (accessed Feb. 4, 2026).

³⁸³ Information provided to Committee Democrats; *After Decade of Drift, Trump Returns Health Agency to Core Mission*, Newsweek (Jan. 13, 2026) (online at www.newsweek.com/after-decade-of-drift-trump-returns-health-agency-to-core-mission-opinion-11353614).

years, as new research findings stop appearing, diseases run rampant through communities that were once equipped to address them, and health care is of worse quality, harder to access, and even more expensive.

CHAPTER 3

VACCINES

OVERVIEW

Vaccines are one of the most important public health innovations of the modern era, saving millions of lives every year. Despite the critical role vaccines play in keeping children healthy and allowing people to live longer, happier lives, Secretary Kennedy has long advocated against vaccines and worked to undermine the public’s trust in their safety and effectiveness.³⁸⁴ President Trump empowered Secretary Kennedy to force this dangerous anti-vaccine agenda on all Americans, providing false information and misleading statements about vaccines to the public and making it more difficult for parents trying to protect their children. As noted by President Trump’s former Surgeon General, Dr. Jerome Adams, these changes to vaccine policy have “restricted access to a vital tool for saving lives,” and could create “a confusing and inequitable system that limits choice—hardly the ‘medical freedom’ Secretary Kennedy claims to champion.”³⁸⁵

Oversight Democrats’ investigation found:

- A. The Trump Administration has restricted, delayed, and complicated access to vaccines for millions of Americans, including by politicizing a key vaccine advisory committee.**
- B. The Trump Administration’s attacks on childhood vaccines raise risks of serious illness and needless death for children.**
- C. The Trump Administration increased risks of illness, hospitalization, and long-term chronic disease by taking away COVID-19 vaccines from people trying to keep their families safe.**
- D. The Trump Administration pushed out respected scientists, canceled lifesaving vaccine research, and censored evidence that demonstrates vaccines are safe.**

This chapter documents some of the many ways the Trump Administration is politicizing vaccines and making it more difficult for families to access safe and routine vaccinations, putting Americans’ health at risk and making the country sicker.

³⁸⁴ See, e.g., *How Robert F. Kennedy, Jr., Distorted Vaccine Science*, Scientific American (Jan. 11, 2017) (online at www.scientificamerican.com/article/how-robert-f-kennedy-jr-distorted-vaccine-science1/).

³⁸⁵ *Trump’s First Surgeon General: RFK Jr. Purging CDC Advisory Committee Will Put Lives at Risk*, TIME (June 10, 2025) (online at time.com/7292898/rfk-jr-cdc-advisory-committee-purge-risk-jerome-adams-essay/).

I. BACKGROUND

Globally, childhood vaccination prevents about 4 million deaths annually.³⁸⁶ In the U.S., for the approximately 117 million children born between 1994 and 2023, CDC estimated that routine childhood vaccinations are preventing approximately 508 million cases of illness, approximately 32 million hospitalizations, and more than 1.1 million deaths.³⁸⁷

For more than 20 years, Secretary Kennedy has promoted misleading and inaccurate claims that vaccines routinely cause injuries and are more dangerous than the deadly, debilitating diseases they prevent.³⁸⁸ He has repeatedly spread lies about vaccine safety, including falsely stating that “there’s no vaccine that is safe and effective,” calling pediatric vaccines “a holocaust,” and falsely telling Congress that of vaccines children receive, “none of them have been safety tested.”³⁸⁹ In reality, there are multiple systems that ensure vaccines are safe and effective, including clinical trials before vaccines are approved and continued monitoring by the government, researchers, and public health professionals after licensing.³⁹⁰

Secretary Kennedy and his CDC have incorrectly stated that most vaccines have not been tested against a placebo and thus we do not fully understand their risks. An HHS spokesperson has said that none of the pediatric vaccines recommended for children have been tested against an inert placebo and the then-acting CDC Director, Jim O’Neill, has cited a need for placebo-controlled trials for vaccines. In fact, these claims from the nation’s public health leaders are misleading and showcase a dangerous misconception regarding placebos. These claims narrowly define placebos in order to strategically ignore the many clinical trials conducted with valid placebos. In addition, the focus on conducting new clinical trials on these long recommended vaccines ignores the ethical implications of withholding vaccinations from people at risk, as well as the many safety studies and immense amount of data—including population-level studies with millions of people—that help determine vaccine safety better than any one single study ever could.³⁹¹

³⁸⁶ Centers for Disease Control and Prevention, *Fast Facts on Global Immunization* (Sept. 19, 2024) (online at www.cdc.gov/global-immunization/fast-facts/index.html).

³⁸⁷ Centers for Disease Control and Prevention, *Health and Economic Benefits of Routine Childhood Immunizations in the Era of the Vaccines for Children Program—United States, 1994-2023* (Aug. 8, 2024) (online at www.cdc.gov/mmwr/volumes/73/wr/mm7331a2.htm).

³⁸⁸ See, e.g., *How Robert F. Kennedy, Jr., Distorted Vaccine Science* (Jan. 11, 2017) (online at www.scientificamerican.com/article/how-robert-f-kennedy-jr-distorted-vaccine-science1/).

³⁸⁹ *Despite Kennedy’s Claims, Vaccines Have Been Tested in Placebo-Controlled Studies*, CNN (June 6, 2025) (online at www.cnn.com/2025/06/05/health/vaccine-placebo-studies-kennedy); Protect Our Care, *Fact Check: RFK Jr. Continues Gaslighting Senators at Senate HELP Committee Hearing* (Jan. 30, 2025) (online at www.protectourcare.org/fact-check-rfk-jr-continues-gaslighting-senators-at-senate-help-committee-hearing/).

³⁹⁰ Johns Hopkins Bloomberg School of Public Health, *The Science of Vaccine Safety in the U.S.* (Feb. 21, 2025) (online at <https://publichealth.jhu.edu/2025/how-the-us-ensures-vaccine-safety>).

³⁹¹ *The Persistent Misleading Claim that Vaccines Aren’t Properly Tested for Safety*, FactCheck.org (Apr. 27, 2026) (online at <https://www.factcheck.org/2026/04/the-persistent-misleading-claim-that-vaccines-arent-properly-tested-for-safety/>).

In 2021, RFK Jr.'s Twitter account was identified as being responsible for 13% of all reshares of vaccine misinformation on the platform, making him the largest “superspreader” of dangerous, unsubstantiated claims.³⁹² Since becoming HHS Secretary, he has sown distrust in vaccines from the highest levels of government and dismantled the scientific body that makes U.S. vaccine recommendations. In doing so, Secretary Kennedy and the Trump Administration have once again acted against the interest of the American people, misleading parents who are trying to make informed decisions to keep their children safe and unnecessarily exposing the population to disease.

Sowing distrust in vaccines is dangerous not only for those who choose not to be vaccinated, but also for those who come in contact with them—especially those who *cannot* be vaccinated. For example, immunocompromised individuals, people undergoing chemotherapy treatments, and newborn babies are often unable to receive adequate protection from vaccination. These vulnerable individuals rely on those who *can* be vaccinated to do so in order to limit the spread of serious illness and disease.³⁹³

II. FINDINGS

A. **The Trump Administration has restricted, delayed, and complicated access to vaccines for millions of Americans, including by politicizing a key vaccine advisory committee.**

In order to be confirmed as HHS Secretary, Secretary Kennedy told the U.S. Senate that he “support[s] vaccines” and the childhood vaccine schedule, that he would not undermine vaccine funding, and that CDC would continue to make clear that vaccines do not cause autism.³⁹⁴ Yet Secretary Kennedy has repeatedly used his position as HHS Secretary to undermine the country’s vaccine infrastructure and make it more difficult for people to get vaccines they want for themselves and their children.³⁹⁵

www.factcheck.org/2026/04/the-persistent-misleading-claim-that-vaccines-arent-properly-tested-for-safety/); *The Trump Administration Says Some Approved Childhood Vaccines Need Better Studies. Scientists Disagree.*, Science (Jan. 8, 2026) (online at www.science.org/content/article/trump-administration-says-some-approved-childhood-vaccines-need-better-studies).

³⁹² *Robert F. Kennedy Jr. Has a Long Record of Promoting Anti-Vaccine Views*, AP (Nov. 14, 2024) (online at <https://apnews.com/article/robert-f-kennedy-vaccines-trump-rfkjr-7f8dcb25de76a5a70710d22bbc63f6fa>).

³⁹³ Columbia University Mailman School of Public Health, *The Relationship Between Vaccines and Herd Immunity* (Apr. 9, 2021) (online at www.publichealth.columbia.edu/news/relationship-between-vaccines-herd-immunity).

³⁹⁴ *RFK Jr. Made Promises in Order to Become Health Secretary. He’s Broken Many of Them.*, KFF Health News (Feb. 13, 2026) (online at <https://kffhealthnews.org/news/article/rfk-jr-robert-kennedy-vaccines-broken-promises-senators-cassidy/>).

³⁹⁵ *How RFK Jr. Is Influencing America’s Vaccine Playbook*, U.S. News (May 6, 2026) (online at www.usnews.com/news/health-news/articles/calling-the-shots-tracking-robert-f-kennedy-jr-s-moves-on-vaccines).

One of the most influential advisory committees within HHS is CDC’s Advisory Committee on Immunization Practices (ACIP). Historically, ACIP has served as a trusted, science-driven body comprised of medical and public health experts. ACIP has traditionally held public meetings at least three times per year at which they “review findings and discuss vaccine research and scientific data related to vaccine effectiveness and safety, clinical trial results, and manufacturer’s labeling or package insert information.”³⁹⁶ Based on this evaluation of vaccine safety and efficacy, ACIP is supposed to develop recommendations on the use of vaccines, including who should receive a vaccine and the number and frequency of doses. These recommendations are then used by CDC to develop immunization schedules for adults and children.³⁹⁷ Individuals appointed to ACIP typically serve overlapping terms that are not tied to specific presidential administrations.³⁹⁸

ACIP and CDC’s recommendations are critical for ensuring that Americans have access to lifesaving vaccines because insurance companies, including government insurance programs, are required to cover vaccines that CDC recommends.³⁹⁹ This includes the Vaccines for Children (VFC) program, which provides vaccines at no cost to uninsured children, Medicaid-eligible or Medicaid-enrolled children, and American Indian or Alaska Native children.⁴⁰⁰

What the Trump Administration Has Said: In order to be confirmed as HHS Secretary, Secretary Kennedy promised Senate HELP Committee Chairman Bill Cassidy that he would “maintain the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices’ recommendations without changes.”⁴⁰¹

What the Trump Administration Has Done: Fired all existing ACIP members and replaced them with handpicked anti-vaccine activists and skeptics.

³⁹⁶ Centers for Disease Control and Prevention, *Role of the Advisory Committee on Immunization Practices in CDC’s Vaccine Recommendations* (Sept. 17, 2024) (previously online at www.cdc.gov/acip/about/role-in-vaccine-recommendations.html) (on file with the Committee).

³⁹⁷ Centers for Disease Control and Prevention, *General Committee-Related Information* (Aug. 12, 2025) (online at www.cdc.gov/acip/about/index.html); Centers for Disease Control and Prevention, *Role of the Advisory Committee on Immunization Practices in CDC’s Vaccine Recommendations* (Sept. 17, 2024) (previously online at www.cdc.gov/acip/about/role-in-vaccine-recommendations.html) (on file with the Committee).

³⁹⁸ Centers for Disease Control and Prevention, *Advisory Committee on Immunization Practices Policies and Procedures* (June 2022) (online at www.cdc.gov/acip/downloads/Policies-Procedures-508.pdf).

³⁹⁹ *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html).

⁴⁰⁰ Centers for Disease Control and Prevention, *About the Vaccines for Children (VFC) Program* (Sept. 30, 2025) (online at www.cdc.gov/vaccines-for-children/about/index.html); Centers for Disease Control and Prevention, *Vaccines for Children (VFC) Program Eligibility* (Sept. 30, 2025) (online at www.cdc.gov/vaccines-for-children/hcp/program-eligibility/index.html).

⁴⁰¹ *RFK Jr. Made Promises in Order to Become Health Secretary. He’s Broken Many of Them.*, KFF Health News (Feb. 13, 2026) (online at <https://kffhealthnews.org/news/article/rfk-jr-robert-kennedy-vaccines-broken-promises-senators-cassidy/>).

Shortly after Secretary Kennedy was confirmed as HHS Secretary, CDC cancelled the ACIP meeting scheduled for February 26 to 28, 2025. The body was reportedly set to discuss respiratory syncytial virus (RSV) and flu vaccines, as well as vaccination protocols for several emerging illnesses.⁴⁰² When the meeting was eventually held in April 2025, it omitted an originally planned vote on flu vaccines and included new Trump Administration political appointees—notably Dr. Tracy Høeg who questioned the safety and effectiveness of multiple vaccines.⁴⁰³ Then acting as FDA’s liaison at ACIP, she later became the Acting Director of FDA’s Center for Drug Evaluation and Research (CDER) before being fired in May 2026 after the resignation of FDA Commissioner Dr. Marty Makary.⁴⁰⁴

Less than two months later, on June 9, 2025, Secretary Kennedy fired all 17 ACIP members.⁴⁰⁵ Members of ACIP reportedly learned of their dismissal through an opinion piece written by Secretary Kennedy published in the Wall Street Journal.⁴⁰⁶ Notably, this op-ed substantially misrepresented ACIP’s membership and how it operates.⁴⁰⁷ Secretary Kennedy’s op-ed claimed that ACIP members had received substantial funding from pharmaceutical companies; in reality, ACIP members and their immediate family are screened for major conflicts of interest, including employment by or board membership at a vaccine manufacturer or holding a patent on a vaccine or related product.⁴⁰⁸ It also cited a misleading claim about the

⁴⁰² Federal Registry, *Advisory Committee on Immunization Practices; Cancellation of Meeting* (Mar. 5, 2025) (online at www.federalregister.gov/documents/2025/03/05/2025-03486/advisory-committee-on-immunization-practices-cancellation-of-meeting); University of Minnesota Center for Infectious Disease Research and Policy, *Scheduled Meeting of CDC Vaccine Advisers Postponed* (Feb. 20, 2025) (online at www.cidrap.umn.edu/adult-non-flu-vaccines/scheduled-meeting-cdc-vaccine-advisers-postponed).

⁴⁰³ *After Delays, First Vaccine Advisory Meeting Under RFK Jr. is Underway*, NPR (Apr. 15, 2025) (online at www.npr.org/sections/shots-health-news/2025/04/15/nx-s1-5364677/cdc-acip-vaccines-meeting-rfk); Katelyn Jetelina (@Yourlocalepidemiologist), *What’s Happening in U.S. Vaccine Policy?*, Substack (Apr. 17, 2025) (online at <https://yourlocalepidemiologist.substack.com/p/whats-happening-in-us-vaccine-policy>); Food and Drug Administration, *FDA Organization: Tracy Beth Høeg M.D., Ph.D.* (online at www.fda.gov/about-fda/fda-organization/tracy-hoeg) (accessed May 1, 2026).

⁴⁰⁴ *Top Drug Regulator Is Fired from the F.D.A.*, New York Times (May 15, 2026) (online at www.nytimes.com/2026/05/15/us/politics/fda-drug-regulator-fired.html).

⁴⁰⁵ *RFK Jr.: HHS Moves to Restore Public Trust in Vaccines*, Wall Street Journal (June 9, 2025) (online at www.wsj.com/opinion/rfk-jr-hhs-moves-to-restore-public-trust-in-vaccines-45495112); See e.g., *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html).

⁴⁰⁶ *RFK Jr. To Fire All Members of CDC’s Vaccine Advisory Committee*, Politico (June 9, 2025) (online at www.politico.com/news/2025/06/09/rfk-jr-to-fire-all-members-of-the-cdcs-vaccine-advisory-committee-00395235).

⁴⁰⁷ *RFK Jr. To Fire All Members of CDC’s Vaccine Advisory Committee*, Politico (June 9, 2025) (online at www.politico.com/news/2025/06/09/rfk-jr-to-fire-all-members-of-the-cdcs-vaccine-advisory-committee-00395235); *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html).

⁴⁰⁸ *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html); Centers for Disease Control and Prevention,

number of financial disclosure forms filed by ACIP members that were found to have errors and did not explain that those errors were not significant financial conflicts, but rather missing dates or information entered into the wrong section.⁴⁰⁹

The fired ACIP members spoke out after their dismissal, writing:

As former ACIP members, we are deeply concerned that these destabilizing decisions, made without clear rationale, may roll back the achievements of US immunization policy, impact people’s access to lifesaving vaccines, and ultimately put US families at risk of dangerous and preventable illnesses.⁴¹⁰

The American Academy of Pediatrics’ (AAP) Committee on Infectious Disease chair, Dr. Sean O’Leary, described this mass termination as “an unmitigated public health disaster.”⁴¹¹ Former CDC Director Dr. Thomas R. Frieden noted that the change in ACIP membership could lead to vaccines no longer being recommended, in which case “millions of people could lose access, pay more for vaccines and for preventable illnesses, and children will be at greater risk of diseases we haven’t faced in decades.”⁴¹²

After dismissing all of ACIP’s existing members, Secretary Kennedy replaced them with less qualified individuals, many of whom have a track record of anti-vaccination rhetoric.⁴¹³ At the June 2025 ACIP meeting, the first with these new members of the Committee, ACIP platformed non-experts and longtime anti-vaccine activists, announced it would reevaluate vaccines available to children and long found to be safe, and voted not to approve some flu vaccines based on long-debunked misinformation.⁴¹⁴

Role of the Advisory Committee on Immunization Practices in CDC’s Vaccine Recommendations (Sept. 17, 2024) (previously online at www.cdc.gov/acip/about/role-in-vaccine-recommendations.html) (on file with the Committee); *RFK Jr. Says Federal Vaccine Advisers are Beholden to Industry. The Evidence Does Not Support Him*, Science (Mar. 7, 2025) (online at www.science.org/content/article/rfk-jr-says-federal-vaccine-advisers-are-beholden-industry-evidence-does-not-support).

⁴⁰⁹ *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html).

⁴¹⁰ *Fired ACIP Members Speak Out About Abrupt Termination*, AAP News (June 16, 2025) (online at <https://publications.aap.org/aapnews/news/32408/Fired-ACIP-members-speak-out-about-abrupt?autologincheck=redirected>).

⁴¹¹ *Kennedy Removes All C.D.C. Vaccine Panel Experts*, New York Times (June 9, 2025) (online at www.nytimes.com/2025/06/09/health/rfk-jr-cdc-vaccine-panel.html).

⁴¹² *Id.*

⁴¹³ *Kennedy’s New CDC Panel Includes Members Who Have Criticized Vaccines and Spread Misinformation*, AP (June 12, 2025) (online at <https://apnews.com/article/cdc-acip-vaccine-committee-9f58e1f004075b081718ff078de88d76>).

⁴¹⁴ *First Meeting of New CDC Vaccine Panel Reveals Policy Chaos Sown by RFK Jr*, The Guardian (June 25, 2025) (online at www.theguardian.com/us-news/2025/jun/25/cdc-vaccine-panel-rfk-acip); *First Meeting of New*

One of the non-experts and longtime anti-vaccine activists platformed at the meeting was Lyn Redwood, the former president of Secretary Kennedy’s anti-vaccine organization, Children’s Health Defense (CHD). In her presentation to the Committee, Ms. Redwood shared inaccurate information regarding vaccine ingredients and referenced studies that do not exist.⁴¹⁵ At the same time, a document with “detailed peer-reviewed literature” showing “no association” between autism and prenatal exposure to flu vaccines containing thimerosal was reportedly removed from the meeting materials because it was not “authorized by the Office of the Secretary.”⁴¹⁶ This blatant political interference led AAP to not participate in the meeting in their liaison role. Following the meeting, Dr. O’Leary said: “This meeting showcased an ACIP that has drifted so far from its long-standing focus on science, evidence and public health. When that focus returns, we will, too.”⁴¹⁷

In its subsequent fall and winter 2025 meetings, ACIP continued to undermine the lifesaving protections of vaccines by voting to limit access to vaccines and by continuing to elevate anti-vaccine ideologues.⁴¹⁸ In one example, Aaron Siri, who worked with Secretary Kennedy on anti-vaccine lawsuits for years and who recently filed a petition to withdraw or suspend the use of the polio vaccine, provided a lengthy presentation at ACIP’s winter 2025 meeting on alleged adverse events from routine vaccines and a supposed link between vaccines and autism.⁴¹⁹ Senate HELP Committee Chairman Cassidy denounced Mr. Siri’s participation in

CDC Vaccine Panel Reveals Policy Chaos Sown by RFK Jr., The Guardian (June 25, 2025) (online at www.theguardian.com/us-news/2025/jun/25/cdc-vaccine-panel-rfk-acip).

⁴¹⁵ *First Meeting of New CDC Vaccine Panel Reveals Policy Chaos Sown by RFK Jr.*, The Guardian (June 25, 2025) (online at www.theguardian.com/us-news/2025/jun/25/cdc-vaccine-panel-rfk-acip); *Kennedy’s New Advisers Rescind Recommendations for Some Flu Vaccines*, New York Times (June 26, 2025) (online at www.nytimes.com/2025/06/26/health/rfk-jr-vaccines-acip-cdc.html). Presentations at ACIP meetings are typically made by CDC staff members, not outside participants.

⁴¹⁶ Jeremy Faust, MD (@Insidemedicine), *Chaos at CDC’s Vaccine Meeting. One Member Resigns. Some Scientific Materials Not Vetted by Agency Experts. American Academy of Pediatrics Boycotts*, Substack (June 25, 2025) (online at insidemedicine.substack.com/p/chaos-at-cdcs-vaccine-meeting-one); “*I’m Not Quite Sure How to Respond to This Presentation*”, The Atlantic (June 27, 2025) (online at www.theatlantic.com/health/archive/2025/06/rfk-acip-american-vaccine-policy/683364/); *Anti-Vaccine Activist Presents Data to Kennedy’s Reshaped CDC Advisory Panel*, NBC News (June 26, 2025) (online at www.nbcnews.com/health/health-news/anti-vaccine-activist-presents-data-rfk-jrs-reshaped-cdc-advisory-pane-rcna215201).

⁴¹⁷ *Anti-Vaccine Activist Presents Data to Kennedy’s Reshaped CDC Advisory Panel*, NBC News (June 26, 2025) (online at www.nbcnews.com/health/health-news/anti-vaccine-activist-presents-data-rfk-jrs-reshaped-cdc-advisory-pane-rcna215201).

⁴¹⁸ See e.g., *Under RFK Jr., CDC Provides a Megaphone to the Anti-Vaccine Movement*, Washington Post (online at www.washingtonpost.com/health/2025/12/06/cdc-acip-anti-vaccine-rhetoric/).

⁴¹⁹ *Kennedy’s Ties to Ally Leading Vaccine Lawsuits Raise Ethical Concerns*, New York Times (Oct. 3, 2025) (online at www.nytimes.com/2025/10/03/health/kennedy-aaron-siri-vaccines-lawsuits.html); *Lawyer with Ties to Kennedy Sparks Outcry Over Vaccine Misinformation at CDC Advisory Meeting*, NBC News (Dec. 5, 2025) (online at www.nbcnews.com/health/kids-health/lawyer-rfk-jr-vaccine-misinformation-cdc-panel-rcna247607).

the ACIP meeting, writing on X: “Aaron Siri is a trial attorney who makes his living suing vaccine manufacturers. He is presenting as if an expert on childhood vaccines. The ACIP is totally discredited. They are not protecting children.”⁴²⁰

B. The Trump Administration’s attacks on childhood vaccines raise risks of serious illness and needless death for children.

What the Trump Administration Has Said: Secretary Kennedy promised Congress that as Secretary he would not do anything that “makes it difficult or discourages people from taking” vaccines.⁴²¹

What the Trump Administration Has Done: Continued to sow doubt and spread lies to concerned parents about the safety of the measles vaccine, exacerbating the worst measles crisis in the United States in more than 30 years.

Case Study: Measles can cause brain inflammation, vision loss, and miscarriage, and in rare cases can result in a lethal brain disease that can claim the life of a child years after the measles infection appears to clear up.⁴²² 2025 saw the highest rate of annual measles cases in the United States since 1991 with 2,288 confirmed cases, compared to 285 in 2024 and just 59 in 2023.⁴²³ As this deadly trend was unfolding, Secretary Kennedy repeatedly advised parents to “do your own research” on vaccine safety at the same time that he shared misinformation about the safety of the measles vaccine on popular news shows with millions of viewers.⁴²⁴ In a single interview on Fox News in March 2025, Secretary Kennedy falsely claimed that the measles vaccine causes “deaths every year,” that it causes “all the illnesses” of contracting measles, and that the climbing measles case count was due in significant part to the declining protectiveness of the measles vaccine over time.⁴²⁵

⁴²⁰ University of Minnesota Center for Infectious Disease Research and Policy, *Relatively Calm Afternoon ACIP Session Still Cauldron of “Misinformation, Disinformation, and Information Taken Out of Context”* (Dec. 5, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/relatively-calm-afternoon-acip-session-still-cauldron-misinformation).

⁴²¹ *Cassidy Got Pledges from Kennedy on Vaccines. They Haven’t Stuck.*, New York Times (Nov. 21, 2025) (online at www.nytimes.com/2025/11/21/us/politics/cassidy-cdc-vaccines-autism.html).

⁴²² *Measles is Making a Comeback. Can We Stop It?*, Harvard Health Publishing (Mar. 9, 2026) (online at www.health.harvard.edu/blog/measles-is-making-a-comeback-can-we-stop-it-202503063091).

⁴²³ Centers for Disease Control and Prevention, *Measles Cases and Outbreaks* (June 12, 2026) (online at www.cdc.gov/measles/data-research/index.html).

⁴²⁴ *Kennedy Advises New Parents to “Do Your Own Research” on Vaccines*, New York Times (Apr. 25, 2025) (online at www.nytimes.com/2025/04/29/us/politics/kennedy-vaccines-research.html); *We Will Make Sure Anyone Who Wants a Vaccine Can Get One, Says HHS Secretary*, Fox News (Mar. 11, 2025) (online at www.foxnews.com/video/6369907937112); *Here are the Cable News Ratings for March 2025*, AdWeek (Apr. 2, 2025) (online at www.adweek.com/tvnewser/cable-news-ratings-for-march-2025/).

⁴²⁵ *Secretary Kennedy Misleads About Measles Vaccine in Hannity Interview*, FactCheck.org (Mar. 21, 2025) (online at www.factcheck.org/2025/03/rfk-jr-misleads-about-measles-vaccine-in-hannity-interview/).

The confusion and fear driven by Secretary Kennedy’s vaccine misinformation has life-and-death consequences. A six-year-old girl died of measles in February 2025 and an eight-year-old girl died of measles in April 2025, several weeks after Secretary Kennedy’s Fox News interview.⁴²⁶

ONE STUDY ESTIMATES THAT A 1% REDUCTION IN MEASLES VACCINATION RATES IN CHILDREN MAY RESULT IN 17,000 PREVENTABLE MEASLES INFECTIONS, 4,000 PREVENTABLE HOSPITALIZATIONS, AND 36 PREVENTABLE DEATHS ANNUALLY.⁴²⁷

2026 is now on track to surpass 2025 in annual measles cases, with 1,842 confirmed infections and 25 outbreaks as of May 2026.⁴²⁸

Only after the deaths of two children did Secretary Kennedy acknowledge in April 2026 at a congressional hearing that the measles vaccine is “safe and effective,” and state, “We have advised every child to get the M.M.R. (measles, mumps, and rubella vaccine).”⁴²⁹

What the Trump Administration Has Said: Secretary Kennedy stated at a Senate hearing, “I support the childhood [vaccine] schedule.”⁴³⁰ Additionally, as discussed previously, Chairman

⁴²⁶ *First Death in West Texas Measles Outbreak is Unvaccinated Child*, Texas Tribune (Feb. 26, 2025) (online at www.texastribune.org/2025/02/26/texas-measles-death/); *A Second Texas Child Has Died from Measles, RFK Jr. Visits*, Texas Tribune (Apr. 6, 2025) (online at www.texastribune.org/2025/04/06/measles-texas-outbreak-death-unvaccinated/).

⁴²⁷ American Academy of Pediatrics, *Report: Declining Measles Vaccination Could Cost \$7.8 billion by 2030* (Mar. 2, 2026) (online at <https://publications.aap.org/aapnews/news/34515/Report-Declining-measles-vaccination-could-cost-7>).

⁴²⁸ *Tracking U.S. Measles 2026: 1,700 Cases Put Elimination Status at Risk*, U.S. News (May 8, 2026) (online at www.usnews.com/news/health-news/articles/tracking-the-2026-u-s-measles-outbreaks).

⁴²⁹ *Kennedy Says His Department Advises All Children to Get Measles Vaccine*, New York Times (Apr. 22, 2026) (online at www.nytimes.com/2026/04/22/us/politics/kennedy-measles-vaccine.html).

⁴³⁰ *RFK Jr. Made Promises in Order to Become Health Secretary. He’s Broken Many of Them.*, KFF Health News (Feb. 13, 2026) (online at <https://kffhealthnews.org/health-industry/rfk-jr-robert-kennedy-vaccines-broken-promises-senators-cassidy/>).

Cassidy stated that Secretary Kennedy had promised him that, if confirmed, he would maintain the ACIP’s existing vaccine recommendations “without changes.”⁴³¹

What the Trump Administration Has Done: Made changes to the childhood vaccine schedule based on pseudoscience and outdated and false anti-vaccine claims, misleading parents who are trying to protect their children from real threats. Threatened the availability of routine childhood vaccines that have long been shown to be safe and undermined the protections they provide across American communities by making parents afraid to get their children vaccinated.

Secretary Kennedy’s hand-picked ACIP began making changes to the childhood vaccine schedule in 2025.⁴³² In early January 2026, Secretary Kennedy went even further and unveiled an overhaul of the schedule without even the pretense of ACIP consideration of the changes, recommending vaccines for only 11 diseases compared to the 17 that were previously recommended.⁴³³ The new schedule only recommends vaccines to protect against Hepatitis A, Hepatitis B, and meningitis for high-risk groups; for all other children, the schedule recommends “shared clinical decision-making” with a health care provider. Further, the new schedule recommends only “shared clinical decision-making” when it comes to vaccines to protect against rotavirus, COVID-19, and flu—Secretary Kennedy’s CDC does not even recommend these vaccines for high-risk groups.⁴³⁴

Limiting the number of people for whom safe and effective vaccines are recommended has serious implications for vaccine access. Not only are many parents now confused about which vaccines they can and should get for their children, but removing vaccines from the list of universally recommended pediatric immunizations means that insurance is no longer required to cover these vaccines for all children whose parents wish to pursue vaccination.

⁴³¹ *Cassidy Got Pledges from Kennedy on Vaccines. They Haven’t Stuck.*, New York Times (Nov. 21, 2025) (online at www.nytimes.com/2025/11/21/us/politics/cassidy-cdc-vaccines-autism.html).

⁴³² Centers for Disease Control and Prevention, *Press Release: CDC Immunization Schedule Adopts Individual-Based Decision-Making for COVID-19 and Standalone Vaccination for Chickenpox in Toddlers* (Oct. 6, 2025) (online at www.cdc.gov/media/releases/2025/cdc-immunization-schedule-adopts-individual-based-decision.html).

⁴³³ See *What You Need to Know About the Updated Childhood Vaccine Schedule*, Association of American Medical Colleges (Mar. 3, 2026) (online at www.aamc.org/news/what-you-need-know-about-updated-childhood-vaccination-schedule). The diseases for which vaccine recommendations were downgraded include hepatitis B, hepatitis A, rotavirus, COVID-19, influenza, and meningococcal ACWY.

⁴³⁴ Katelyn Jetelina (@Yourlocalepidemiologist), *A Unilateral Change to Childhood Vaccines: What It Means for You*, Substack (Jan. 6, 2026) (online at <https://yourlocalepidemiologist.substack.com/p/a-unilateral-change-to-childhood>).

Case Study: In September 2025, ACIP voted to not recommend the combined measles, mumps, rubella, and varicella (MMRV) shot to children under 4.⁴³⁵ In September 2025, President Trump posted an urgent directive to “pregnant women” to “BREAK UP THE MMR SHOT INTO THREE TOTALLY SEPARATE SHOTS (NOT MIXED!),”⁴³⁶ despite no evidence that doing so would result in better health outcomes and no availability in the U.S. of a three-shot option. Children would need multiple additional doctor visits and six separate needle sticks (compared with two needle sticks currently) to receive full MMR protection.⁴³⁷ For vaccines that are provided in a series of shots rather than a combined option, the additional steps required to complete the full vaccination series create issues for people and families who may face barriers accessing health care, transportation, and the ability to take time off of work, and has been shown to lead to missed doses and increased disease vulnerability.⁴³⁸

Despite the risks, then-Acting Director O’Neill called on vaccine manufacturers to begin work on breaking the MMR vaccine into three separate vaccines. It would reportedly take years for these new vaccines to be developed, tested, and reviewed before they would be available to the public—time and resources that could instead be spent on scientific breakthroughs to meaningfully improve or save American lives. In the meantime, the President of the United States and the Acting CDC Director have sent powerful—and deeply erroneous—messages to concerned parents that the only vaccines currently available in the United States to protect against measles, mumps, and rubella are concerning or unsafe in some way. Measles, the complications of which have been discussed previously, resulted in hundreds of child deaths per year before the vaccine was available. Mumps can cause brain swelling, infertility, and deafness. Rubella can cause miscarriage, stillbirth, and severe birth defects that can result in lifelong physical and intellectual disability. Experts warn that these devastating illnesses “can quickly return” if vaccination rates continue to fall.⁴³⁹

Case Study: In December 2025, ACIP voted to remove its existing recommendation that all infants receive a vaccine against hepatitis B at birth.⁴⁴⁰ As a result of ACIP’s decision,

⁴³⁵ American Academy of Pediatrics, *AAP Breaks from Federal Vaccine Panel, Continues to Recommend MMRV Vaccine for Children Under 4* (Sept. 19, 2025) (online at <https://publications.aap.org/aapnews/news/33401/AAP-breaks-from-federal-vaccine-panel-continues-to>).

⁴³⁶ Commentary Donald J. Trump Truth Social Posts On X (@TrumpTruthonX), X (Sept. 26, 2025) (online at <https://x.com/TrumpTruthOnX/status/1971588655669297173>); Deputy Secretary Jim O’Neill (@HHS_Jim), X (Oct. 6, 2025) (online at https://x.com/HHS_Jim/status/1975208317850116544).

⁴³⁷ *Worried About Splitting Up the MMR Vaccine into Three Separate Shots? You Should Be, This Doctor Says*, CNN (Oct. 8, 2025) (www.cnn.com/2025/10/08/health/mmr-vaccine-split-wellness).

⁴³⁸ See University of Minnesota Center for Infectious Disease Research and Policy, *CIDRAP Op-Ed: Why the CDC Director is Wrong About the MMR Vaccine* (Oct. 9, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/cidrap-op-ed-why-cdc-director-wrong-about-mmr-vaccine).

⁴³⁹ *Worried About Splitting Up the MMR Vaccine into Three Separate Shots? You Should Be, This Doctor Says*, CNN (Oct. 8, 2025) (www.cnn.com/2025/10/08/health/mmr-vaccine-split-wellness).

⁴⁴⁰ University of Minnesota Center for Infectious Disease Research and Policy, *CDC Advisers Drop Decades-old Universal Hepatitis B Birth Dose Recommendation, Suggest Blood Testing After 1 Dose* (Dec. 5, 2025) (online at

immunization at birth will only be recommended for newborns whose mother tested positive for the virus or whose hepatitis B status is unknown. Mothers who test negative for the virus are recommended to consult with their health care provider to decide whether their child should be vaccinated against hepatitis B, despite the fact that transmission from an infected mother accounted for only half of cases of hepatitis B before universal vaccination began in 1991.⁴⁴¹ Vaccinating all infants against hepatitis B at birth has been credited with saving the lives of more than 90,000 children.⁴⁴²

ACIP also voted to recommend that parents request an antibody blood test after a child receives the first dose of vaccine in order to decide whether to proceed with the second and third dose.⁴⁴³ This recommendation has no scientific basis and is likely to have catastrophic consequences. There is no scientific consensus on what hepatitis B antibody levels correspond to long-term protection, and the hepatitis B vaccine has only been tested as a three-shot regimen—stopping at one or two shots would assume efficacy that has not been studied or supported by data.⁴⁴⁴ This vote from ACIP raises risks that newborns and young children will acquire hepatitis B and face increased rates of liver damage, liver failure, liver cancer, and even death over the course of their lifetime.⁴⁴⁵

Even among vaccine skeptics who make up the majority of ACIP members under Secretary Kennedy, the decision to no longer universally recommend the hepatitis B vaccine at birth was controversial. When asked at the December meeting about the decision to revisit the recommendation for universal hepatitis B vaccinations, ACIP member Dr. Vicky Pebsworth—who is also employed by one of the country’s oldest anti-vaccine organizations—explained: “We were aware that there was pressure coming from stakeholder

www.cidrap.umn.edu/anti-science/cdc-advisers-drop-decades-old-universal-hepatitis-b-birth-dose-recommendation-suggest).

⁴⁴¹ *Panel Votes to Stop Recommending Hepatitis B Shots at Birth for Most Newborns*, New York Times (Dec. 5, 2025) (online at www.nytimes.com/2025/12/05/health/kennedy-vaccine-committee-vote-hepatitisb.html).

⁴⁴² University of Minnesota Center for Infectious Disease Research and Policy, *During Chaotic Meeting, CDC Advisors Handpicked by RFK Jr. Postpone Vote on Changing Hepatitis B Vaccine Recommendations* (Dec. 4, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/during-chaotic-meeting-cdc-advisers-handpicked-rfk-jr-postpone-vote-changing).

⁴⁴³ Katelyn Jetelina (@Yourlocalepidemiologist), *ACIP Key Takeaways: What Really Happened and What It Means for You*, Substack (Dec. 5, 2025) (online at <https://yourlocalepidemiologist.substack.com/p/acip-key-takeaways-what-really-happened>).

⁴⁴⁴ *Id.*: *CDC Advisers Vote to Overturn Decades-Long Policy on Hepatitis B Vaccine for Infants*, NPR (Dec. 5, 2025) (online at www.npr.org/sections/shots-health-news/2025/12/05/nx-s1-5634004/cdc-hepatitis-b-vaccine-acip-meeting).

⁴⁴⁵ American Academy of Pediatrics, *Fact Checked: Hepatitis B Vaccine Given to Newborns Reduces Risk of Chronic Infection* (online at www.aap.org/en/news-room/fact-checked/fact-checked-hepatitis-b-vaccine-given-to-newborns-reduces-risk-of-chronic-infection) (accessed Dec. 7, 2025).

groups wanting the policy to be revisited.”⁴⁴⁶ One ACIP member, pediatrician Dr. Cody Meissner, pushed back on the new recommendation, saying of the hepatitis B vaccine, “We know it is safe, and we know it is very effective.” He also said that if the proposal passed “we will see more children and adolescents and adults infected with hepatitis B.”⁴⁴⁷ Another ACIP member, Dr. Joseph Hibbeln, has spoken out against the changes and the lack of data supporting them, stating, “I repeatedly asked for it, and no data was presented.”⁴⁴⁸

Case Study: One pediatrician in Atlanta, Georgia, reported to Committee Democrats that the conversations they have had with parents about their children’s vaccinations has shifted, with the biggest changes being a new focus on the hepatitis B vaccine. While pediatricians have always had conversations with parents regarding vaccines, recent shifts have been more acute and this new hesitancy regarding the hepatitis B vaccine has come only after the HHS Secretary himself sowed confusion and uncertainty through his comments and handpicked ACIP. The physician reported to the Committee that they have seen the effect of the misinformation coming from the HHS Secretary and the confusion it leads to for families. Even when families know that the changes to vaccine policies are not rooted in evidence, the messaging and narrative amplified by the Trump Administration leads to confusion and uncertainty.⁴⁴⁹

C. The Trump Administration increased risks of illness, hospitalization, and long-term chronic disease by taking away COVID-19 vaccines from people trying to keep their families safe.

COVID-19 vaccines saved millions of lives during the COVID-19 pandemic and continue to save lives today. Decades of public and private laboratory research allowed work on vaccines to progress quickly at the start of the pandemic in early 2020, with Operation Warp Speed coordinating the federal government’s efforts to move quickly to test, approve, and produce safe and effective COVID-19 diagnostics, vaccines, and treatments.⁴⁵⁰ The first three years of the COVID-19 pandemic caused 5.9 million hospitalizations and 1.1 million reported deaths in the U.S. alone, and without the development of these vaccines, the death toll would have been much higher. Researchers estimate that the development and deployment of

⁴⁴⁶ University of Minnesota Center for Infectious Disease Research and Policy, *During Chaotic Meeting, CDC Advisors Handpicked by RFK JR. Postpone Vote on Changing Hepatitis B Vaccine Recommendations* (Dec. 4, 2025) (online at www.cidrap.umn.edu/childhood-vaccines/during-chaotic-meeting-cdc-advisers-handpicked-rfk-jr-postpone-vote-changing).

⁴⁴⁷ *CDC Advisers Vote to Overturn Decades-Long Policy on Hepatitis B Vaccine for Infants*, NPR (Dec. 5, 2025) (online at www.npr.org/sections/shots-health-news/2025/12/05/nx-s1-5634004/cdc-hepatitis-b-vaccine-acip-meeting).

⁴⁴⁸ *CDC Adviser: Newborn Vaccine Rollback “Wasn’t Based on Data”*, The Hill (Dec. 8, 2025) (online at <https://thehill.com/policy/healthcare/5639251-cdc-adviser-acip-drops-hepatitis-b-recommendation/>).

⁴⁴⁹ Information provided to Committee Democrats.

⁴⁵⁰ National Institute of Health, National Institute of Allergy and Infectious Diseases, *Decades in the Making: mRNA COVID-19 Vaccines* (online at www.niaid.nih.gov/diseases-conditions/decades-making-mrna-covid-19-vaccines) (accessed Apr. 10, 2026).

COVID-19 vaccines prevented more than 18 million additional hospitalizations and more than 3 million additional deaths by the end of just 2022.⁴⁵¹ Today, COVID-19 vaccines continue to protect people against serious illness, hospitalization, death, disability, and chronic health conditions.⁴⁵²

What the Trump Administration Has Said: Secretary Kennedy promised the public that “[i]f vaccines are working for somebody, I’m not going to take them away. People ought to have choice[.]”⁴⁵³ In September 2025, he told the Senate Finance Committee that “everybody can get” the updated COVID-19 vaccine.⁴⁵⁴

What the Trump Administration Has Done: Restricted, delayed, and complicated access to COVID-19 vaccines for millions of Americans—including pregnant women, babies, and children—despite medical evidence that continued vaccination protects them from severe illness and chronic disease.

CDC estimates that, from October 1, 2025, through April 18, 2026, the United States saw up to 11.9 million cases of COVID-19. On top of the up to 240,000 estimated hospitalizations and 40,000 estimated deaths resulting from these cases,⁴⁵⁵ a significant number of people develop long COVID following infection, with unvaccinated individuals at greater risk than vaccinated individuals.⁴⁵⁶ CDC identifies long COVID as “a serious illness that can result in chronic conditions, require comprehensive care, and can sometimes cause disability;” states that “anyone who gets COVID-19 can experience it, including children;” and acknowledges that “staying up

⁴⁵¹ *Two Years of U.S. COVID-19 Vaccines Have Prevented Millions of Hospitalizations and Deaths*, Commonwealth Fund (Dec. 13, 2022) (online at www.commonwealthfund.org/blog/2022/two-years-covid-vaccines-prevented-millions-deaths-hospitalizations); Elisha Hall, Barbara E. Mahon, Georgina Peacock, *The U.S. COVID-19 Program: A Look Back and Future Directions*, Vaccine (Sept. 17, 2024) (online at www.sciencedirect.com/science/article/pii/S0264410X24000653#b0005).

⁴⁵² Mayo Clinic, *COVID-19 Vaccines: Get the Facts* (Oct. 24, 2025) (online at www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-vaccine/art-20484859); *COVID Vaccines Reduce Long COVID Risk, New Study Shows*, Yale Medicine (Sept. 2, 2024) (online at www.yalemedicine.org/news/vaccines-long-covid).

⁴⁵³ *What RFK Jr Could Do on US Vaccines, Fluoride and Drugs*, BBC (Jan. 28, 2025) (online at www.bbc.com/news/articles/c4gx3kkz8z3o).

⁴⁵⁴ *RFK Jr. Said “Everybody Can Get” a Covid Vaccine. Is That True?*, KFF Health News (Sept. 10, 2025) (online at <https://kffhealthnews.org/news/article/rfk-jr-covid-vaccine-access-fact-check/>).

⁴⁵⁵ Centers for Disease Control and Prevention, *Preliminary Estimates of COVID-19 Burden* (Feb. 6, 2026) (online at www.cdc.gov/covid/php/surveillance/burden-estimates.html) (accessed Apr. 28, 2026).

⁴⁵⁶ *New Study Highlights Scale and Impact of Long COVID*, University of Oxford (Aug. 1, 2024) (online at www.ox.ac.uk/news/2024-08-01-new-study-highlights-scale-and-impact-long-covid); Greenhalgh T, Sivan M, Perlowski A et al., *Long COVID: A Clinical Update*, *The Lancet* (Aug. 17, 2024) (online at [www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)01136-X/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)01136-X/fulltext)).

to date on COVID-19 vaccination” is an important step for protection.⁴⁵⁷ Some groups face unique increased risks from COVID-19 infection. For example, health care workers and school teachers have jobs that make them more likely to frequently contract COVID-19.⁴⁵⁸ People with lower incomes suffer some of the worst outcomes from COVID-19 infections but are less likely to receive a COVID-19 vaccine if it is not covered by insurance.⁴⁵⁹ Until the Trump Administration, updated annual COVID-19 vaccines were widely available to anyone over 6 months old.⁴⁶⁰

Case Study: In late summer and fall 2025, as a COVID-19 wave swept the country, Americans trying to receive an updated COVID-19 vaccine faced mass confusion and delays manufactured by the Trump Administration. On August 27, 2025, Trump Administration officials at FDA dramatically reduced access to the annual updated COVID-19 vaccines by approving them only for people considered “higher risk”—those over age 65 or who had a risk factor outlined in a May 2025 journal article.⁴⁶¹ As a result, major pharmacies across the country were forced to restrict access to the vaccine due to uncertainty.⁴⁶² In some states, people were required to obtain authorization from a health care professional to receive a vaccine; in others, people were required to sign a form attesting that they had certain health conditions; in some, people were not able to access the vaccine at major pharmacies at all.⁴⁶³

Additional issues were caused by a delay between FDA updating its approval for the shot and CDC’s ACIP issuing a recommendation which pharmacies in some states needed before they

⁴⁵⁷ Centers for Disease Control and Prevention, *Long COVID Basics* (Mar. 9, 2026) (online at www.cdc.gov/long-covid/about/index.html).

⁴⁵⁸ *Cold and Flu and Walking Pneumonia, Oh My! How Teachers Can Stay Healthy This Winter*, EducationWeek (Dec. 9, 2024) (online at www.edweek.org/teaching-learning/cold-and-flu-and-walking-pneumonia-oh-my-how-teachers-can-stay-healthy-this-winter/2024/12); University of Minnesota Center for Infectious Disease Research and Policy, *Studies Detail High Rates of Long COVID Among Healthcare, Dental Workers* (Apr. 23, 2025) (online at www.cidrap.umn.edu/covid-19/studies-detail-high-rates-long-covid-among-healthcare-dental-workers).

⁴⁵⁹ *The F.D.A. May Restrict Covid Shots. Who Will Be Able to Get Them?*, New York Times (May 23, 2025) (online at www.nytimes.com/2025/05/23/health/covid-vaccine-restrictions-eligibility.html).

⁴⁶⁰ *FDA Limits Approval for New Coronavirus Vaccines to High-Risk People*, Washington Post (Aug. 27, 2025) (online at www.washingtonpost.com/health/2025/08/27/fda-approves-covid-vaccines/).

⁴⁶¹ *Id.*; *F.D.A. Poised to Restrict Access to Covid Vaccines*, New York Times (May 20, 2025) (online at www.nytimes.com/2025/05/20/health/fda-covid-vaccines.html).

⁴⁶² *C.D.C. Uncertainty Upends Covid Vaccine Access at CVS and Walgreens*, New York Times (Aug. 28, 2025) (online at www.nytimes.com/2025/08/28/well/cvs-pharmacy-covid-vaccine-16-states.html); *States Where You Can Get a COVID Vaccine at CVS Following RFK Jr. Changes*, Axios (Aug. 29, 2025) (www.axios.com/2025/08/29/cvs-covid-vaccines-kennedy-rfk).

⁴⁶³ *States Where You Can Get a COVID Vaccine at CVS Following RFK Jr. Changes*, Axios (Aug. 29, 2025) (www.axios.com/2025/08/29/cvs-covid-vaccines-kennedy-rfk).

could begin offering the updated vaccine.⁴⁶⁴ In previous years, ACIP’s recommendation would come very quickly or immediately after FDA made its determination, meaning that pharmacies could immediately begin offering the new booster. However, in 2025, Secretary Kennedy’s gutted and hand-selected ACIP took 23 days from FDA’s approval to vote on its recommendation for the updated COVID-19 vaccine.⁴⁶⁵ The combination of the Trump Administration’s narrowing of FDA’s approval, followed by the extended delay before CDC’s sign off, caused unnecessary stress, exposure, cost, and illness for millions of Americans. According to a pediatrician in Orange County, California: “Anything that makes it harder to get a vaccine because of bureaucracy, because of unnecessary doctor’s appointments... is going to lead to fewer people getting vaccinated, which, in the end, is going to lead to more people getting severely sick, which is going to lead to more people hospitalized and potentially more people dying.”⁴⁶⁶

Case Study: Complicating the situation further, in September 2025, ACIP changed its recommendation for COVID-19 vaccines from “routine” to “shared clinical decision-making,” indicating that CDC would no longer actively encourage COVID-19 vaccines and would require the majority of Americans to consult with a doctor, nurse, or pharmacist before receiving it. This consultation generally already occurs,⁴⁶⁷ and health researchers are concerned that the Trump Administration’s use of the term “shared clinical decision-making” is being used to undermine confidence in vaccine safety rather than to improve clinical outcomes.⁴⁶⁸

Confusingly, ACIP’s recommendation that the COVID-19 vaccine be available under “shared clinical decision-making,” conflicts with FDA’s authorization for COVID-19 vaccines for only a subset of the U.S. population, casting a wide swath of the U.S. population seeking COVID-19 vaccines into what is known as “off-label use,” which is typically used for small populations in limited circumstances—not for the tens of millions of Americans who could

⁴⁶⁴ *C.D.C. Uncertainty Upends Covid Vaccine Access at CVS and Walgreens*, New York Times (Aug. 28, 2025) (online at www.nytimes.com/2025/08/28/well/cvsv-pharmacy-covid-vaccine-16-states.html).

⁴⁶⁵ *F.D.A. Approves Covid Shots with New Restrictions*, New York Times (Aug. 27, 2025) (online at www.nytimes.com/2025/08/27/health/fda-covid-vaccines-rfk-jr.html); Department of Health and Human Services, *Press Release: ACIP Recommends COVID-19 Immunization Based on Individual Decision-Making* (Sept. 19, 2025) (online at www.hhs.gov/press-room/acip-recommends-covid19-vaccination-individual-decision-making.html).

⁴⁶⁶ *People Can’t Get COVID Vaccines as Cases Surge. Anger is Building Against Trump.*, Los Angeles Times (Sept. 5, 2025) (online at www.latimes.com/california/story/2025-09-05/covid-vaccines-are-harder-to-get-under-trump-and-people-are-angry-about-it).

⁴⁶⁷ University of Minnesota Center for Infectious Disease Research and Policy, *CDC Announces Changes to COVID, Childhood Vaccines, Touting “Informed Consent”*, (Oct. 6, 2025) (online at www.cidrap.umn.edu/covid-19/cdc-announces-changes-covid-childhood-vaccines-touting-informed-consent).

⁴⁶⁸ *Is “Shared Decision-Making” Being Hijacked by U.S. Health Officials to Sow Doubt About Vaccines?*, Stat News (Jan. 20, 2026) (online at www.statnews.com/2026/01/20/shared-decision-making-vaccine-guidance-twists-meaning-of-term/).

benefit from a COVID-19 booster.⁴⁶⁹ While private insurers have committed to fully covering COVID-19 vaccines for all individuals through the end of 2027, they are only legally required to cover at no cost vaccines recommended by ACIP.⁴⁷⁰ There is no longer a legal requirement that insurance companies continue to cover COVID-19 vaccines and thus insurers could stop covering them at any time, leaving it unclear whether COVID-19 boosters will remain accessible after 2027 for all people who want one.

Case Study: Contracting COVID-19 during pregnancy puts even healthy mothers at a higher risk for severe illness and death, while also increasing the risk of requiring a cesarean birth, developing preeclampsia or eclampsia, and developing blood clots.⁴⁷¹ Research also suggests that exposure to COVID-19 in utero may increase a baby's risk of the very health conditions Secretary Kennedy has promised to combat, including autism and chronic disease.⁴⁷² Experts strongly recommend that pregnant women be vaccinated for COVID-19.⁴⁷³ Yet in a May 2025 social media video, Secretary Kennedy announced that the COVID-19 vaccine would no longer be recommended for healthy pregnant women.⁴⁷⁴ Later in the year, ACIP quietly voted to

⁴⁶⁹ Yale School of Public Health, *A Look at the New COVID Vaccine Guidelines and What Happened at ACIP* (Sept. 25, 2025) (online at <https://ysph.yale.edu/news-article/a-look-at-the-new-covid-vaccine-guidelines-and-what-happened-at-acip/>).

⁴⁷⁰ *US Insurers' Move to Back Vaccines Sends "Powerful" Message About Safety of Shots, Experts Say*, The Guardian (June 7, 2026) (online at www.theguardian.com/us-news/2026/jun/07/insurance-coverage-vaccines-trump); KFF, *ACIP, CDC, and Insurance Coverage of Vaccines in the United States* (June 13, 2025) (online at www.kff.org/other-health/acip-cdc-and-insurance-coverage-of-vaccines-in-the-united-states/).

⁴⁷¹ American College of Obstetricians & Gynecologists, *COVID-19, Pregnancy, Childbirth, and Breastfeeding: Answers from Ob-Gyns* (online at www.acog.org/womens-health/faqs/coronavirus-covid-19-pregnancy-and-breastfeeding) (accessed Apr. 28, 2026).

⁴⁷² Kaiser Permanente, *COVID-19 In Early Pregnancy Could Increase Child's Likelihood of Autism* (Feb. 6, 2026) (online at <https://divisionofresearch.kaiserpermanente.org/covid-19-in-early-pregnancy-could-increase-childs-likelihood-of-autism/>); University of Minnesota Center for Infectious Disease Research and Policy, *Kids Exposed to COVID in Utero May Be At Higher Risk for Autism, Other Brain Problems* (Oct. 31, 2025) (online at www.cidrap.umn.edu/covid-19/kids-exposed-covid-utero-may-be-higher-risk-autism-other-brain-problems); National Institutes of Health, *Science Update: Children Born to Women with COVID-19 Could Be at Risk for Heart Disease, Diabetes Later in Life, NIH-Funded Study Suggests* (Apr. 18, 2023) (online at www.nichd.nih.gov/newsroom/news/041823-COVID-19-pregnancy).

⁴⁷³ American College of Obstetricians & Gynecologists, *COVID-19, Pregnancy, Childbirth, and Breastfeeding: Answers from Ob-Gyns* (online at www.acog.org/womens-health/faqs/coronavirus-covid-19-pregnancy-and-breastfeeding) (accessed Apr. 28, 2026).

⁴⁷⁴ *RFK Jr. Ends Coronavirus Shot Recommendation for Healthy Children, Pregnant Women*, Washington Post (May 27, 2025) (online at www.washingtonpost.com/health/2025/05/27/covid-vaccine-children-recommendation-rfk/). Notably, although FDA is responsible for determining whether a vaccine is safe and should be available to be recommended for use, it is CDC which determines whether an approved vaccine should be recommended and to what demographic groups. CDC did not issue any revised guidance in spring 2025 regarding COVID-19 vaccination for certain demographic groups.

recommend the shot for pregnant women, finally ending the uncertainty caused by Secretary Kennedy’s statement.⁴⁷⁵

Case Study: Infants and toddlers under 2 years of age are at high risk for severe COVID-19.⁴⁷⁶ Additionally, research shows that children and young adults who contract COVID-19 twice have a 3.5 times greater risk of myocarditis, a potentially life-threatening heart condition, and are twice as likely to develop long COVID,⁴⁷⁷ which can lead to poorer academic learning, difficulty concentrating, and less fulfilling experiences with friends.⁴⁷⁸ Yet in the same May 2025 social media video referenced above, Secretary Kennedy stated that he “couldn’t be more pleased” to rescind CDC’s recommendation that healthy children receive an annual COVID-19 vaccine. This change directly contradicted medical evidence showing that many infants and young children who are hospitalized with a COVID-19 infection are considered healthy, without underlying conditions.⁴⁷⁹

Beyond the 23 days it took ACIP to vote to recommend updated COVID-19 vaccines for children aged 6 months and older, it then took the Acting CDC Director more than two weeks to approve the recommendation—a process that typically occurs within 48 hours. One expert explained that “many children, especially those who are uninsured or underinsured, couldn’t get vaccinated, even if they wanted to” because the Vaccines for Children Program—responsible for providing more than half of all childhood vaccines in the United States—couldn’t order the updated vaccine until that time.⁴⁸⁰ Even families across the country that could afford health insurance struggled to find updated COVID-19 vaccines for their young children during the

⁴⁷⁵ CDC, *Its Advisors Quietly Expand Access to COVID-19 Shot for Pregnant Women*, Politico (Oct. 8, 2025) (online at www.politico.com/news/2025/10/08/cdc-covid-vaccine-pregnant-women-recommendation-00599151?_hsmi=384428761&utm_content=384428761).

⁴⁷⁶ American Academy of Pediatrics, *Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement* (Oct. 20, 2025) (online at <https://publications.aap.org/pediatrics/article/156/5/e2025073924/203222/Recommendations-for-COVID-19-Vaccines-in-Infants>).

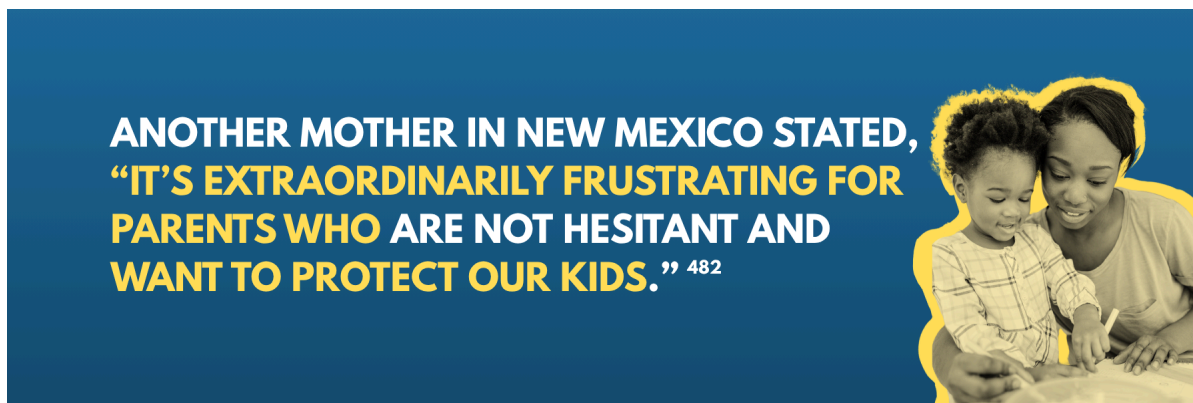
⁴⁷⁷ Penn Medicine, *Second Infection in Kids Doubles Long COVID Risk* (Oct. 1, 2025) (online at www.pennmedicine.org/news/second-infection-in-kids-doubles-long-covid-risk).

⁴⁷⁸ University of Minnesota Center for Infectious Disease Research and Policy, *Study Links Long COVID in Kids to Worse Grades, Attention, and Social Life* (Apr. 17, 2026) (online at www.cidrap.umn.edu/covid-19/study-links-long-covid-kids-worse-grades-attention-and-social-life).

⁴⁷⁹ RFK Jr. *Ends Coronavirus Shot Recommendation for Healthy Children, Pregnant Women*, Washington Post (May 27, 2025) (online at www.washingtonpost.com/health/2025/05/27/covid-vaccine-children-recommendation-rfk/).

⁴⁸⁰ Katelyn Jetelina, (@Yourlocalepidemiologist), *Blog: The Shutdown’s Impact on Health, RSV is Stirring, Covid-19 Vaccines Finally Given Green Light, Deadly Pasta Outbreak, and Lots of Good News!*, Substack (Oct. 6, 2025) (online at <https://yourlocalepidemiologist.substack.com/p/the-shutdowns-impact-on-health-rsv>).

back-to-school season and at least through October 2025 due to the Trump Administration’s policies. One mother in Maine stated, “It’s just like a nightmare.”⁴⁸¹



Emergency department visits due to COVID-19 infections during the September and October 2025 surge were highest for children age 4 and younger,⁴⁸³ and COVID-19 vaccines have been shown to decrease the risk of emergency department and urgent care visits by 76% for that same age group.⁴⁸⁴ By delaying and restricting access to COVID-19 vaccines, the Trump Administration needlessly increased children’s risk of severe COVID-19 infection and long COVID complications, including chronic disease.

Case Study: In November 2025, then-FDA vaccine division chief Dr. Vinay Prasad sent a memo to FDA staff claiming, without evidence, that at least 10 children had died as a result of COVID-19 vaccination. He also announced that there would be changes to vaccine regulation, including requiring new clinical trials and implementing a greater focus on potential harms from receiving multiple vaccinations at the same time.⁴⁸⁵ If implemented, these changes would add

⁴⁸¹ *Seeking Covid Shots for Their Children, Some Parents Hit a Wall*, New York Times (Oct. 7, 2025) (online at www.nytimes.com/2025/10/07/well/covid-vaccine-children-parents-issues-rfk-jr.html).

⁴⁸² *Id.*

⁴⁸³ University of Minnesota Center for Infectious Disease Research and Policy, *News Brief: US Covid Declining After Reaching Peak* (Sept. 26, 2025) (online at www.cidrap.umn.edu/covid-19/us-covid-declining-after-reaching-peak); UC Davis Health, *COVID Is Surging Again: What You Need to Know About the New Vaccine* (Sept. 10, 2025) (online at <https://health.ucdavis.edu/news/headlines/covid-is-surging-again-what-you-need-to-know-about-the-new-vaccine/2025/09>).

⁴⁸⁴ *Covid Vaccines Reduced Children’s Likelihood of E.R. and Urgent Care Visits, the C.D.C. Reported*, New York Times (Dec. 11, 2025) (online at <https://www.nytimes.com/2025/12/11/health/cdc-covid-vaccines-children-er-visits.html>).

⁴⁸⁵ Email from Prasad Vinayak to “CBER-SUBSCRIBERS-ALL” re *Deaths in children due to COVID-19 vaccines and CBER’s path forward* (Nov. 28, 2025) (online at www.fda.gov/media/191442/download?attachment); University of Minnesota Center for Infectious Disease Research and Policy, *FDA Official Proposes “Impossible” Standards for Vaccine Testing That Could Curtail Access to Immunizations* (Dec. 1, 2025) (online at

burdensome requirements on top of already rigorous and effective safety testing, resulting in fewer vaccines making it to market and reaching the children and adults who need them.

The only source that Dr. Prasad provided for the claims in his memo were reports from the Vaccine Adverse Event Reporting System (VAERS), a database of unverified, voluntary submissions from individuals who have reportedly experienced any negative health event even years after receiving a vaccine. Dr. Prasad did not supply additional information as to how he came to believe that the deaths reported to VAERS had been substantiated and demonstrated to have been caused by the COVID-19 vaccination.⁴⁸⁶ In May 2026, the underlying analysis for Dr. Prasad's claims was published and did not support his claims regarding pediatric deaths. The analysis, conducted by the FDA office responsible for vaccine safety surveillance after vaccines have gone on the market, reviewed every pediatric death reported to VAERS after a COVID-19 shot from 2021 to 2024 and found that none could be classified as a result of the COVID-19 vaccine like Dr. Prasad had claimed.⁴⁸⁷

D. The Trump Administration pushed out respected scientists, canceled lifesaving vaccine research, and censored evidence that demonstrates vaccines are safe.

What the Trump Administration Has Said: Repeatedly promised to “restore” the United States to “Gold Standard Science,”⁴⁸⁸ which it defined as “federally funded research [that] is transparent, rigorous, and impactful, and that Federal decisions are informed by the most credible, reliable, and impartial scientific evidence available.”⁴⁸⁹

What the Trump Administration Has Done: Pushed out unbiased, nonpolitical scientists with decades of expert knowledge and canceled and censored research that did not align with Secretary Kennedy's anti-vaccine agenda.

www.cidrap.umn.edu/childhood-vaccines/fda-official-proposes-impossible-standards-vaccine-testing-could-curtail-access).

⁴⁸⁶ Email from Prasad Vinayak to “CBER-SUBSCRIBERS-ALL” re *Deaths in children due to COVID-19 vaccines and CBER's path forward* (Nov. 28, 2025) (online at www.fda.gov/media/191442/download?attachment); Johns Hopkins School of Public Health, *What VAERS Is (And Isn't)* (May 3, 2022) (online at <https://publichealth.jhu.edu/2022/what-vaers-is-and-isnt>).

⁴⁸⁷ University of Minnesota Center for Infectious Disease Research and Policy, *CIDRAP Op-Ed: Manufacturing a Scandal: What FDA's COVID Vaccine Pediatric Death Review Actually Says* (May 27, 2026) (online at www.cidrap.umn.edu/covid-19/cidrap-op-ed-manufacturing-scandal-what-fda-s-covid-vaccine-pediatric-death-review).

⁴⁸⁸ *What Does Trump's Call for “Gold Standard Science” Really Mean?*, Science (May 27, 2025) (online at www.science.org/content/article/what-does-trump-s-call-gold-standard-science-really-mean).

⁴⁸⁹ The White House, *Restoring Gold Standard Science* (May 23, 2025) (online at www.whitehouse.gov/presidential-actions/2025/05/restoring-gold-standard-science/).

Case Study: In April 2026, CDC’s Acting Director, Jay Bhattacharya, who is also the NIH Director, blocked the publication of research regarding vaccine safety which showed that the COVID-19 vaccine reduced emergency department visits and hospitalizations among healthy adults by approximately half over the past winter. The report had successfully passed through the agency’s scientific review process and was slated to be published in CDC’s Morbidity and Mortality Weekly Report (MMWR) in March. HHS’s spokesperson claimed that it was because of issues with the report’s methodology, but that same methodology has long been used to study vaccine effectiveness and was also used in research that was published in the MMWR only a week earlier, for which there were no concerns.⁴⁹⁰

Case Study: Political leadership at FDA also blocked the publication of multiple studies regarding vaccine safety, including the COVID-19 and shingles vaccines. Conducted by FDA scientists, the studies found that the vaccines were safe and that serious side effects were rare. In late 2025, FDA staff had submitted two COVID-19 vaccine studies for publication in medical journals but were directed to withdraw them. In early 2026, staff were blocked from sharing the results of their studies on the shingles vaccine. HHS defended the decision to suppress the studies with claims that the study conclusions were not supported by the data, but multiple experts who were able to review the studies found no such issues with them, and the COVID-19 studies had been accepted for publication in a journal after passing peer review.⁴⁹¹

Case Study: In March 2025, Dr. Peter Marks, FDA’s then-vaccine chief and Director of the Center for Biologics Evaluation and Research (CBER), was forced out of FDA.⁴⁹² He had led the FDA division responsible for vaccine safety since 2016.⁴⁹³ In his resignation letter he wrote: “It has become clear that truth and transparency are not desired by the Secretary, but rather he wishes subservient confirmation of his misinformation and lies.”⁴⁹⁴

Case Study: In August 2025, only a month after she was confirmed by the Senate, President Trump fired CDC Director Dr. Susan Monarez for refusing to fire vaccine scientists without cause or to promise she would rubber stamp ACIP’s vaccine recommendations without first

⁴⁹⁰ *CDC Won’t Publish Report Showing COVID Shots Cut Likelihood of Hospital Visits*, Washington Post (Apr. 22, 2026) (online at www.washingtonpost.com/health/2026/04/22/covid-vaccine-report-blocked-cdc-mmwr/). See, e.g. Jeremy Faust, MD (@Insidemedicine), *Exclusive: Here’s the Covid-19 Vaccine Paper CDC Censored*, Substack (Apr. 27, 2026) (online at <https://insidemedicine.substack.com/p/exclusive-heres-the-covid-19-vaccine>).

⁴⁹¹ *F.D.A. Blocked Publication of Research Finding Covid and Shingles Vaccines Were Safe*, New York Times (May 5, 2026) (online at www.nytimes.com/2026/05/05/us/politics/fda-covid-vaccine-studies.html); *FDA Halts Publication of Studies of COVID, Shingles Vaccines*, New York Times (May 5, 2026) (online at www.washingtonpost.com/health/2026/05/05/fda-blocks-covid-shingles-vaccine-studies/).

⁴⁹² *Peter Marks, FDA’s Top Vaccine Regulator, Forced Out*, Stat News (Mar. 28, 2025) (online at www.statnews.com/2025/03/28/fda-peter-marks-cber-director-resigns-rfk-jr/).

⁴⁹³ , Association for the Advancement of Blood and Biotherapies, *Peter Marks Resigns as CBER Director* (Mar. 31, 2025) (online at www.aabb.org/news-resources/news/article/2025/03/31/peter-marks-resigns-as-cber-director).

⁴⁹⁴ *Top F.D.A. Vaccine Official Resigns, Citing Kennedy’s “Misinformation and Lies”*, New York Times (Mar. 28, 2025) (online at www.nytimes.com/2025/03/28/health/fda-vaccines-rfk-jr-peter-marks.html).

reviewing them. According to Dr. Monarez, Secretary Kennedy “just wanted blanket approval” for the new vaccine recommendations.⁴⁹⁵

Case Study: In December 2025, Dr. Richard Pazdur, a longtime career FDA official who had recently been promoted by the Trump Administration to lead CDER and serve as FDA’s chief drug regulator, retired less than a month into his new role.⁴⁹⁶ He shared publicly that he left the agency he had been a part of for 26 years because political leadership was newly interfering in drug approvals. For example, FDA Commissioner Makary proposed reducing the number of clinical trials required for drug approval from two to one. CDER had five different leaders in 2025 alone.⁴⁹⁷

Case Study: On January 21, 2025, then-Acting HHS Secretary Dorothy Fink issued a directive requiring HHS personnel to “refrain from publicly issuing any document or communication until it has been reviewed and approved by a Presidential appointee.”⁴⁹⁸ This directive led to the immediate cancellation of advisory panel meetings held by federal health agencies and prevented CDC from publicly sharing data on the spread of avian flu.⁴⁹⁹ While this communications freeze was eventually lifted, one former HHS staff member reported to Committee Democrats that restrictions and confusion regarding what communications were allowed between career staff and external entities continued for months, including for program officers whose primary role is liaising with external entities.⁵⁰⁰

⁴⁹⁵ University of Minnesota Center for Infectious Disease Research and Policy, *CDC Director Fired After She “Refused to Rubber-Stamp” Kennedy’s Vaccine Directives* (Aug. 28, 2025) (online at www.cidrap.umn.edu/public-health/cdc-director-fired-after-she-refused-rubber-stamp-kennedys-vaccine-directives/); *5 Takeaways from Ousted C.D.C. Director’s Hearing*, New York Times (Sept. 17, 2025) (online at www.nytimes.com/2025/09/17/health/susan-monarez-cdc-hearing-takeaways.html).

⁴⁹⁶ *Top Drug Regulator Richard Pazdur Set to Leave FDA*, Stat News (Dec. 2, 2026) (online at www.statnews.com/2025/12/02/richard-pazdur-cder-director-fda-set-to-retire/).

⁴⁹⁷ *Top FDA Scientist Explains Why He Quit After Getting a Promotion from RFK Jr.*, Wall Street Journal (Feb. 13, 2026) (online at www.wsj.com/health/healthcare/top-fda-scientist-explains-why-he-quit-after-getting-a-promotion-from-rfk-jr-2c85a510).

⁴⁹⁸ *Federal Health Agencies Told to Halt All External Communications*, NPR (Jan. 22, 2025) (online at www.npr.org/sections/shots-health-news/2025/01/22/nx-s1-5270866/hhs-cdc-healthcommunications-trump); Memorandum from Deputy Executive Secretary to Acting Secretary Dorothy Fink, *Immediate Pause on Issuing Documents and Public Communications* (Jan. 21, 2025) (online at <https://s3.documentcloud.org/documents/25502931/acting-hhs-secretary-communications-memo-1-21-25.pdf>).

⁴⁹⁹ *Health Researchers Alarmed as Trump Administration Pauses Travel, Communications*, Washington Post (Jan. 23, 2025) (online at www.washingtonpost.com/health/2025/01/23/trump-administration-hhs-health-agencies-pause-travel-communications/); *Trump Administration Temporarily Mutes Federal Health Officials*, New York Times (Jan. 22, 2025) (online at www.nytimes.com/2025/01/22/health/trump-health-communications.html).

⁵⁰⁰ Information provided to Committee Democrats.

Case Study: In March 2025, NIH terminated dozens of research grants awarded to scientists studying the uptake of vaccines and vaccine hesitancy.⁵⁰¹ Trump Administration officials also reportedly informed NIH personnel that going forward “it is the policy of NIH not to prioritize research activities that [focus on] gaining scientific knowledge on why individuals are hesitant to be vaccinated and/or explore ways to improve vaccine interest and commitment.”⁵⁰²

One such grant the Administration terminated was to examine when and why children fall behind on recommended vaccines, including analyzing differences by whether children had health insurance or lived in rural areas. The study was focused on identifying ways to improve preventive care services for children, particularly in rural areas where vaccination rates have historically been low. The researcher reported to Committee Democrats that they received an email in spring 2025 with an attached letter saying their work “no longer effectuates agency priorities.”⁵⁰³

For years, the researcher’s work had focused on how to improve outcomes for rural families. The researcher reported to Committee Democrats that their research was aimed at making sure that people in all corners of the country, including in rural states, have access to vaccines and that when people have questions about vaccines, they can have that conversation with their doctor. This researcher stated, “Parents should have easy access to vaccines for their children, and a care team they can talk to when they have questions about vaccines. Looking across the studies that were terminated, researchers were working to improve vaccination services from start to finish. With the grant cancellations, that work was stopped.”⁵⁰⁴

Case Study: On May 30, 2025, NIH announced the termination of a \$258 million program focused on finding a vaccine to prevent new HIV infections. The termination halted ongoing HIV vaccine research at both Duke University and the Scripps Research Institute, and jeopardizes promising new treatments for HIV, autoimmune diseases, and other critical therapeutics.⁵⁰⁵ The Trump Administration provided little to no information for its decision, other than a brief statement that “NIH expects to be shifting its focus toward using currently available approaches to eliminate HIV/AIDS.”⁵⁰⁶ HIV researchers have warned that the Trump

⁵⁰¹ *NIH to Terminate or Limit Grants Related to Vaccine Hesitancy and Uptake*, Washington Post (Mar. 10, 2025) (online at www.washingtonpost.com/health/2025/03/10/vaccines-nih-rfk-research-canceled/).

⁵⁰² *NIH to Terminate or Limit Grants Related to Vaccine Hesitancy and Uptake*, Washington Post (Mar. 10, 2025) (online at www.washingtonpost.com/health/2025/03/10/vaccines-nih-rfk-research-canceled/). The email followed a late-February request by NIH Director Matthew Memoli that each of NIH’s institutes supply a list of current and future grants involving vaccine hesitancy. *NIH to Ax Grants on Vaccine Hesitancy*, Science (Mar. 10, 2025) (online at www.science.org/content/article/nih-ax-grants-vaccine-hesitancy).

⁵⁰³ Information provided to Committee Democrats.

⁵⁰⁴ Information provided to Committee Democrats.

⁵⁰⁵ *Trump Administration Ends Program Critical to Search for an H.I.V. Vaccine*, New York Times (May 30, 2025) (online at www.nytimes.com/2025/05/30/health/trump-hiv-cuts.html).

⁵⁰⁶ *Id.*

Administration's decision to eliminate this program could be catastrophic and terminates promising clinical trials for vaccines already in the pipeline.⁵⁰⁷

Case Study: Secretary Kennedy has reportedly surrounded himself with devoted anti-vaccine activists who serve in his inner circle.⁵⁰⁸ One former senior career HHS leader shared with Committee Democrats that Secretary Kennedy is closely guarded by aides, such that senior HHS officials outside of his inner circle have little to no access to him.⁵⁰⁹ There has also been near constant leadership turnover at HHS, even of hand-picked MAGA and MAHA members of the Secretary's leadership team.⁵¹⁰ Despite this churn of leadership and advisors, including some people he hand-picked to lead the Department, Secretary Kennedy has held onto one close advisor: Stefanie Spear, who ran CHD's anti-vaccine blog.⁵¹¹

Case Study: The former president of CHD, Lyn Redwood, was not only allowed to present debunked vaccine misinformation at the June 2025 ACIP meeting but has also been appointed to a leadership position in CDC's vaccine safety office.⁵¹² As one former CDC vaccine official noted: "Lyn Redwood is well-known for spreading vaccine misinformation. It is troubling that Redwood may now have an official role within HHS and will potentially be in a position to interfere with official messaging about vaccine safety."⁵¹³

⁵⁰⁷ *Trump Administration Ending Multiple HIV Vaccine Studies, Scientists and Officials Say*, CBS News (May 30, 2025) (online at www.cbsnews.com/news/trump-administration-ending-multiple-hiv-vaccine-studies/); *Trump Administration Ends Program Critical to Search for an H.I.V. Vaccine*, New York Times (May 30, 2025) (online at www.nytimes.com/2025/05/30/health/trump-hiv-cuts.html).

⁵⁰⁸ The Defender, *Robert F. Kennedy Jr.* (online at <https://childrenshealthdefense.org/authors/robert-f-kennedy-jr/>) (accessed June 9, 2025); *Inside RFK Jr.'s Nonprofit's Legal Battles Over Vaccines and Public Health*, NPR (Dec. 4, 2024) (online at www.npr.org/2024/12/03/nx-s1-5198506/rfk-jr-anti-vaccine-chd-lawsuits).

⁵⁰⁹ Information provided to Committee Democrats.

⁵¹⁰ *Kennedy Fires Two Top Aides in Health Department Shake-Up*, New York Times (July 16, 2025) (online at www.nytimes.com/2025/07/16/us/politics/rfk-fires-aides-hhs.html); *RFK Jr.'s Top Ranks Rocked by Personality Clashes*, Wall Street Journal (July 16, 2025) (online at www.wsj.com/politics/policy/robert-kennedy-jr-hhs-staff-1bcc5b88).

⁵¹¹ *Kennedy Fires Two Top Aides in Health Department Shake-Up*, New York Times (July 16, 2025) (online at www.nytimes.com/2025/07/16/us/politics/rfk-fires-aides-hhs.html); Vanity Fair, *Meet Stefanie Spear, RFK Jr.'s "Attached at the Hip" HHS Deputy* (Sept. 25, 2025) (online at www.vanityfair.com/news/story/meet-stefanie-spear?srsltid=).

⁵¹² *CDC to Hire Former Head of Anti-Vaccine Group Founded by RFK Jr.*, CBS News (June 25, 2025) (online at www.cbsnews.com/news/cdc-vaccine-safety-office-hire-former-head-anti-vaccine-group-founded-rfk-jr/); *RFK Jr. Appoints Longtime Anti-Vaccine Ally Lyn Redwood to HHS Position*, ABC News (June 25, 2025) (online at <https://abcnews.go.com/US/rfk-jr-appoints-longtime-anti-vaccine-ally-lyn/story?id=123213887>).

⁵¹³ *RFK Jr. Appoints Longtime Anti-Vaccine Ally Lyn Redwood to HHS Position*, ABC News (June 25, 2025) (online at <https://abcnews.go.com/US/rfk-jr-appoints-longtime-anti-vaccine-ally-lyn/story?id=123213887>).

Case Study: In March 2025, Secretary Kennedy hired anti-vaccine activist David Geier to consult on the purported connection between autism and vaccines. Mr. Geier is not a doctor or a scientist of any kind and his work has long focused on the erroneous claim that vaccines cause autism.⁵¹⁴ Six months after hiring Mr. Geier, CDC announced it would be awarding a noncompetitive grant to the Rensselaer Polytechnic Institute to study a purported link between vaccines and autism, despite the multitude of scientific evidence disproving such a link.⁵¹⁵ In November 2025, Secretary Kennedy directed CDC to change its website to state that “‘vaccines do not cause autism’ is not an evidence-based claim because studies have not ruled out the possibility that infant vaccines cause autism.”⁵¹⁶ This change contradicts the substantial body of scientific evidence debunking any link between vaccines and autism and was condemned by a broad coalition of autism advocacy organizations.⁵¹⁷

What the Trump Administration Has Said: Secretary Kennedy committed to “ending the corruption, ending the corporate capture of those agencies, getting rid of the people on those panels that have conflicts of interest.”⁵¹⁸

What the Trump Administration Has Done: Invited corporate influence into HHS and its divisions.

Case Study: By replacing longtime experts with political ideologues and pushing out career scientists, Secretary Kennedy has created an HHS that is extraordinarily beholden to corporate influence. In particular, new lobbying avenues have reportedly opened up as pharmaceutical companies and other industry actors have been given far more access to FDA than they have had in the past. According to one lobbyist: “It was always the case: if it’s FDA, leave it alone...”

⁵¹⁴ University of Minnesota Center for Infectious Disease Research and Policy, *DC Warns of Major Measles Exposure; HHS Names Geier to Study Autism and Vaccines* (Mar. 26, 2025) (online at www.cidrap.umn.edu/measles/dc-warns-major-measles-exposure-hhs-names-geier-study-autism-and-vaccines).

⁵¹⁵ *Rensselaer Polytechnic Institute to be Awarded CDC Funding for Vaccine-Autism Study*, Politico (Sept. 19, 2025) (online at www.politico.com/newsletters/weekly-new-york-health-care/2025/09/15/rensselaer-polytechnic-institute-to-be-awarded-cdc-funding-for-vaccine-autism-study-00563460).

⁵¹⁶ *Kennedy Says He Told C.D.C. to Change Website’s Language on Autism and Vaccines*, New York Times (Nov. 21, 2025) (online at www.nytimes.com/2025/11/21/us/politics/rfk-jr-cdc-vaccines-autism-website.html); Centers for Disease Control and Prevention, *Autism and Vaccines* (online at www.cdc.gov/vaccine-safety/about/autism.html) (accessed Dec. 18, 2025).

⁵¹⁷ Autism Science Foundation, *Autism and Vaccines: Read the Science* (online at <https://autismsciencefoundation.org/autism-and-vaccines-read-the-science>) (accessed Dec. 18, 2025); Autistic Self Advocacy Network, *Leading Autism and Disability Organizations Statement on CDC’s Vaccines and Autism Page* (Nov. 19, 2025) (online at <https://autisticadvocacy.org/2025/11/leading-autism-and-disability-organizations-statement-on-cdcs-vaccines-and-autism-page>).

⁵¹⁸ The American Presidency Project, *Remarks During a Swearing-in Ceremony for Robert F. Kennedy, Jr., as Secretary of Health and Human Services and an Exchange with Reporters* (Feb. 13, 2025) (online at www.presidency.ucsb.edu/documents/remarks-during-swearing-ceremony-for-robert-f-kennedy-jr-secretary-health-and-human).

There's been a swing... Now the conversations are: Can we influence the process? I had never had that conversation before."⁵¹⁹ According to FDA's former chief drug regulator Dr. Pazdur, "This wall between the commissioner's office and the [drug] review staff has been breached."⁵²⁰

Case Study: FDA's political leadership has pushed to dramatically limit the review time for some new drugs in a quid pro quo arrangement between the White House and a pharma company. After the firm made a deal with the White House to lower the cost of its weight loss medication, FDA granted them vouchers for three speedy drug reviews.⁵²¹ Approval decisions are typically handled by expert career review scientists who ensure that a drug is safe and effective, yet political leadership at FDA pushed to cut the review time for the drug from 60 days to one week, though reportedly compromised at two or three weeks after internal pushback. A timeline of a few weeks would have been even shorter than the already fast-tracked schedule offered through the Administration's National Priority Voucher program which was launched in June 2025 to speed up reviews for drugs that the Trump Administration deems to have a critical public health or national security impact.⁵²² Ultimately, the medication was approved under the voucher program, highlighting the program as an avenue for political interference that risks exposing the public to drugs that have not been sufficiently reviewed.⁵²³

Case Study: Two of the individuals that Secretary Kennedy appointed to the ACIP previously served as paid witnesses in litigation related to vaccines. One provided paid testimony regarding the human papillomavirus (HPV) vaccine Gardasil, asserting that the vaccine had not been sufficiently tested. Historically, ACIP's rules barred members from serving as paid consultants or witnesses in litigation involving a vaccine manufacturer due to the conflict of interest and clear bias of individuals who have accepted payment to support legal action against a vaccine manufacturer, rather than those who are tasked with assessing vaccines based on their scientific

⁵¹⁹ *Pharma Lobbyists Focus on a Surprising New Target: the FDA*, Stat News (Feb. 23, 2026) (online at www.statnews.com/2026/02/23/fda-lobbying-efforts-grow-under-trump-administration/).

⁵²⁰ *Top FDA Scientist Explains Why He Quit After Getting a Promotion from RFK Jr.*, Wall Street Journal (Feb. 13, 2026) (online at www.wsj.com/health/healthcare/top-fda-scientist-explains-why-he-quit-after-getting-a-promotion-from-rfk-jr-2c85a510).

⁵²¹ *Pharma Lobbyists Focus on a Surprising New Target: FDA*, Stat News (Feb. 23, 2026) (online at www.statnews.com/2026/02/23/fda-lobbying-efforts-grow-under-trump-administration/).

⁵²² *Exclusive: FDA Leaders Pushed to Cut Lilly Weight-Loss Pill Review Time*, Reuters (Dec. 12, 2025) (online at www.reuters.com/sustainability/boards-policy-regulation/us-fda-brass-pushed-internally-speedier-lilly-weight-loss-pill-verdict-2025-12-12/); *Pharma Lobbyists Focus on a Surprising New Target: the FDA*, Stat News (Feb. 23, 2026) (online at www.statnews.com/2026/02/23/fda-lobbying-efforts-grow-under-trump-administration/).

⁵²³ *Eli Lilly's Obesity Pill Approved by FDA, Setting Up Fierce Competition with Novo Nordisk*, Stat News (Apr. 1, 2026) (online at www.statnews.com/2026/04/01/eli-lilly-obesity-pill-approved-orforglipron-foundayo/); *FDA Voucher Program Has Become Vehicle for Political Interference in Drug Review Decisions, Staffers Say*, Stat News (Dec. 19, 2025) (online at www.statnews.com/2025/12/19/fda-voucher-program-political-interference/).

merits.⁵²⁴ After falsely claiming he had to fire all existing ACIP members because of conflicts of interest, Secretary Kennedy then selected individuals with clear and obvious conflicts of interest to serve on the Committee.

Case Study: Despite decrying the supposed conflicts of interest of ACIP members and other former government leaders, Secretary Kennedy has surrounded himself with advisors with significant conflicts of interest, including financial stakes in the very industries they have influence over at HHS. One such HHS aide, Calley Means, brother to former-Surgeon General nominee Casey Means, was President of a wellness company—in which he held over \$25 million in stock—while serving as a senior advisor at HHS. The wellness company, Truemed, benefited from the Trump Administration’s move to increase the number of people who can use health savings accounts, and thus Truemed’s services, to buy expensive wellness products. It was only months into his tenure at HHS that Means converted to a permanent employee, began making financial disclosures, and finally divested from his dual role at the nation’s public health department and a wellness company.⁵²⁵

Case Study: The families of members of the Trump Administration have also benefited financially from their connections to the Administration. Secretary Kennedy’s son, Finn Kennedy, has launched an investment fund seemingly targeted at taking advantage of his connection to his father’s position as HHS Secretary and relationship with the MAHA movement. The fund is targeting investments in health care companies, including healthcare AI, consumer health, and other health technologies—types of companies his father has influence or even regulatory authority over as HHS Secretary. The fund has received approximately \$70 million in commitments and aims to raise \$100 million.⁵²⁶

III. CONCLUSION

In March 2026, a federal judge found that the Trump Administration had broken the law in amending the immunization schedules and remaking ACIP’s membership. The court temporarily blocked many of the changes the Trump Administration and Secretary Kennedy had made to ACIP and the childhood vaccine schedule.⁵²⁷ Despite this setback to Secretary Kennedy’s vaccine policies, he has continued to politicize ACIP by attempting to revise its

⁵²⁴ *Kennedy’s New Vaccine Advisers Helped Lawyers Raise Doubts About Their Safety*, New York Times (June 13, 2025) (online at www.nytimes.com/2025/06/13/us/politics/rfk-jr-vaccine-advisers.html).

⁵²⁵ *While Advising Kennedy, Top Aide Had More than \$25 Million Stake in Wellness Company*, New York Times (Apr. 24, 2026) (online at www.nytimes.com/2026/04/24/health/calley-means-truemed-trump-health-savings.html); *With Boost from RFK Jr. and Tucker Carlson, Two Chronic Disease Entrepreneurs Vault Into Trump’s Orbit*, Stat News (Oct. 7, 2024) (online at www.statnews.com/2024/10/07/calley-means-casey-means-conservative-voices-of-chronic-disease-crisis/).

⁵²⁶ *US Health Secretary’s Son Launches Investment Fund Tied to Health Movement*, Financial Times (Apr. 24, 2026) (online at www.ft.com/content/2cf36d19-ebd8-4c99-bb6f-d32abb7e0aba?syn-25a6b1a6=1).

⁵²⁷ *AAP’s Historic Victory in Vaccine Lawsuit a “Critical Step” in Restoring Science to Federal Policy*, AAP News (Mar. 16, 2026) (online at <https://publications.aap.org/aapnews/news/34722/AAP-s-historic-victory-in-vaccine-lawsuit-a>).

charter. Establishing a new charter would not just allow Secretary Kennedy to mold ACIP to his liking, but would also likely allow ACIP to skirt the litigation that had put its work—and the dangerous changes made during the Trump Administration—on hold.⁵²⁸ HHS published a revised ACIP charter in April 2026 to downgrade the expertise requirement for membership and focus the panel’s work on studying potential vaccine injuries,⁵²⁹ which are exceedingly rare and already thoroughly documented.⁵³⁰ That new charter was soon withdrawn and in May 2026 replaced with another new revised charter with some of the most controversial language removed but with the reduced expertise requirements still included.⁵³¹

The changes to vaccine recommendations for both children and adults are causing confusion not only for parents who may not have a background in medicine and science, but also for pediatricians, pharmacists, other health care providers, and pharmaceutical and insurance companies. In a survey conducted in late 2025 by the Academy of Managed Care Pharmacy, 90% of respondents said they believed that changes to ACIP’s vaccine recommendations would result in fewer patients receiving vaccines.⁵³² If fewer patients receive vaccines, more people across the country will get sick—with costly, painful, and sometimes fatal results. Under the guise of “Making America Healthy Again,” the Trump Administration is rolling back progress and facilitating the return of diseases we have not seen in large numbers for generations, many of which can cause permanent disability and death.⁵³³

At the same time that individuals and families face new challenges in accessing vaccines, multiple pharmaceutical companies have pulled back on their investments into vaccine research. In early 2026, Moderna announced that it would not conduct any new late-stage vaccine trials

⁵²⁸ *New Rules for CDC Vaccine Panel Aim to Address Lawsuit, Empower Kennedy’s Allies*, Stat News (Apr. 9, 2026) (online at www.statnews.com/2026/04/09/new-acip-charter-cdc-vaccine-advisers-rfk-jr-address-legal-defeat/); *Federal Judge Stalls Health Secretary RFK Jr.’s Overhaul of Vaccine Policy*, Stat News (Mar. 16, 2026) (online at www.statnews.com/2026/03/16/kennedy-childhood-vaccine-changes-blocked-judge/).

⁵²⁹ *More than 100 Medical Groups Say Changes to ACIP “Potentially Jeopardizing Access to Life-Saving Vaccines”*, AAP News (Apr. 15, 2026) (online at <https://publications.aap.org/aapnews/news/34859/More-than-100-medical-groups-say-changes-to-ACIP>).

⁵³⁰ See e.g., KFF, *How Does the Federal Government Monitor Vaccine Safety?* (July 16, 2025) (online at www.kff.org/other-health/how-does-the-federal-government-monitor-vaccine-safety/); Zauche LH, Miller ER, Kim SS, Jazwa A, Shay DK. *Monitoring Vaccine Safety: United States Vaccine Safety Surveillance Systems*. *J Pediatr Health Care* (Feb. 3, 2026)(online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC12863265>).

⁵³¹ University of Minnesota Center for Infectious Disease Research and Policy, *The State of US Vaccine Policy – May 28, 2026* (May 28, 2026) (online at www.cidrap.umn.edu/childhood-vaccines/state-us-vaccine-policy-may-28-2026).

⁵³² AMCP, *AMCP Vaccine Access Survey Results* (online at www.amcp.org/sites/default/files/2025-10/AMCP%20Vaccine%20Access%20Survey%20Results%2010.29.25.pdf) (accessed Apr. 5, 2026).

⁵³³ See e.g., Senate Finance Committee Ranking Member Ron Wyden and Senator Angela Alsobrooks, *Costs, Chaos, and Corruption: 365 Days of Robert F. Kennedy Jr.’s Disastrous Leadership* (Feb. 2026) (online at www.alsobrooks.senate.gov/wp-content/uploads/2026/02/One-Year-of-RFK-Updated-Report.pdf).

because of uncertainty as a result of the Trump Administration's policies.⁵³⁴ Companies are no longer confident about the return on investment, resulting in a chilling effect on expensive late-stage vaccine research and development.⁵³⁵ This means that new vaccine innovations designed to save lives and keep children healthy may never become available.

⁵³⁴ *Moderna's Chilling Announcement is a Symptom of a Deeper Sickness*, Washington Post (Feb. 3, 2026) (online at www.washingtonpost.com/opinions/2026/02/03/vaccine-development-moderna-rfk-china-drug-prices/).

⁵³⁵ *Vaccine Makers Curtail Research and Cut Jobs*, New York Times (Feb. 16, 2026) (online at www.nytimes.com/2026/02/16/health/rfk-vaccine-manufacturers.html).