

HIV Prevention in Delaware

A Local and Global Public Health Crisis

Suzan Abdallah, MBBS, MPH

Delaware HIV Consortium

The fight against HIV is at a pivotal moment, both here in Delaware and globally. While we have made significant advancements in treatment and prevention, rising infection rates and severe funding cuts threaten to reverse decades of progress. Delaware has experienced a year-over-year increase in HIV diagnoses, with new infections rising by 26% since 2020—a stark reminder that the HIV epidemic is far from over. At the same time, federal prevention funding for Delaware was reduced by 64%, leaving vital community-based services underfunded and at risk of shutting down. These cuts jeopardize essential services, including HIV testing, PrEP navigation, harm reduction, and outreach programs, further straining an already overburdened healthcare system.

But this is not just a Delaware issue—it reflects a troubling global trend. International HIV programs such as USAID’s HIV/AIDS initiatives and PEPFAR (President’s Emergency Plan for AIDS Relief)—which have provided lifesaving resources to combat HIV worldwide—now face threats of funding reductions. The potential rollback of these programs could disrupt access to antiretroviral therapy (ART) for millions, weaken prevention efforts, and lead to a resurgence of infections in high-incidence populations. According to UNAIDS, an estimated 39 million people were living with HIV worldwide in 2023, with 9.2 million lacking access to treatment.¹ Studies suggest that without sustained investment, global HIV-related deaths could increase by up to 30% over the next decade. One study published in the *Annals of Internal Medicine* underscores the grave consequences of reduced HIV prevention funding.² The study modeled the impact of PEPFAR funding cuts in South Africa and found that reductions could lead to significant increases in new HIV infections and HIV-related deaths.² Additionally, the study highlighted the economic consequences, predicting that scaling back prevention efforts would result in increased long-term healthcare costs due to higher treatment expenses and a greater burden on healthcare systems. These findings mirror concerns in Delaware, where federal prevention cuts threaten to increase new infections and strain an already overburdened healthcare infrastructure.

The COVID-19 pandemic served as a glaring reminder that public health crises do not recognize geographic boundaries. The lessons learned from that crisis underscore the urgent need for proactive interventions. We cannot afford to wait until HIV cases reach crisis levels to act. Prevention—through expanded HIV testing, increased PrEP (pre-exposure prophylaxis) accessibility, harm reduction programs, and targeted community outreach—remains the most effective tool in controlling the epidemic.

Delaware has a unique opportunity to lead by example. Investing in state-level HIV prevention is not only a moral imperative but also a cost-effective public health strategy. Each HIV infection averted saves an estimated \$500,000 in lifetime medical costs³ reducing strain on the healthcare system and allowing resources to be allocated more efficiently. Without immediate intervention, Delaware risks a preventable public health crisis—one that will disproportionately impact marginalized communities, including Black and Brown populations, LGBTQ+ individuals, and those with limited healthcare access.

HIV prevention is global health, and global health is our shared responsibility. Delaware must take decisive action to safeguard funding for community-based HIV prevention services and ensure that rising infections do not spiral into a crisis. We stand with bipartisan leaders who recognize that public health investment is essential for strengthening healthcare systems, reducing long-term costs, and protecting future generations. The time to invest in prevention is now.

Dr. Abdallah may be contacted at sabdallah@delawarehiv.org.

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