

## **Prevention is Resistance:**

### **Upholding LGBTQIA+ Health Equity in the Era of Retrenchment**

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## **Introduction: A Public Health Inflection Point**

In Delaware and across the nation, LGBTQIA+ communities stand at a dangerous crossroads. Just as decades of advocacy, research, and public health programming have begun to bear fruit—increased access to PrEP, more affirming healthcare spaces, and youth-led movements demanding visibility—those very gains are now under threat. Federal HIV prevention funding is uncertain. State and local programs are bracing for cuts. And amidst it all, anti-LGBTQIA+ rhetoric and policy initiatives are proliferating.

Yet within this volatility lies an undeniable truth: prevention is not simply a public health tool. It is an act of resistance, of solidarity, and of care.

As someone who has worked in Delaware's public health sector for nearly a decade, I have seen firsthand what happens when systems invest in people, and what happens when they don't. In this moment, we must treat community-rooted prevention work not as a luxury, but as a lifeline.

## **Beyond the Metrics: Humanizing Prevention Work**

At the Delaware HIV Consortium, we see the impact of affirming prevention work every day. We see it in the young trans woman who, after months of missed appointments and instability, makes the difficult decision to cross state lines in search of a better life and finally starts PrEP with a provider who sees her fully. We see it in the outreach worker providing free testing and distributing harm reduction kits beyond the typical work hours, offering support and information in moments when it matters most. We sense it in the relief of a client when they hear that HIV prevention services can be free, anonymous, and judgment free.

This is the type of care that cannot be captured solely by epidemiological graphs or budget line items. It is messy. It is labor-intensive. And it is undoubtedly essential.

## **The Impact of Retrenchment: When Cuts Compound Inequity**

The current wave of federal-level instability, including delayed FY2025 awards, CDC reductions in force, and proposed eliminations of key prevention funding, has sent shockwaves through organizations like ours. For communities already marginalized because of their race, gender identity, immigration status, housing insecurity, or criminal justice involvement, these funding cuts do not represent mere bureaucratic shifts. They are a direct hit to access, to safety, and in many cases, to survival.

Delaware, like many states, has seen rising HIV and STI rates, particularly among young LGBTQIA+ individuals, Black and Brown communities, and people who inject drugs. These trends are not coincidental; they are the predictable outcomes of system-level disinvestment and policy regression. When the safety net is shredded, those furthest from power fall first.

## **Intersectionality Is the Work**

Too often, public health discussions treat LGBTQIA+ health as a silo. But the truth is, prevention work, when done right, cuts across systems. HIV prevention is a gateway to mental health support, care referrals, food assistance, legal aid, and more. A peer navigator offering a safer sex kit might also be the first person a youth confides in about suicidal ideation or domestic violence in their home.

This is why the integration of trauma-informed care, gender-affirming practices, and anti-racist frameworks is not optional. It is what makes programs effective, especially in high-burden zip codes and among historically excluded populations. It is how we build trust in systems that have historically failed LGBTQIA+ communities.

## **Delaware's Commitment to Affirming Care**

Despite national backsliding, Delaware has taken steps to reaffirm its commitment to health equity. One powerful example came in June 2025, when Governor Mathew Meyer signed Executive Order #11, affirming the state's unwavering support for access to gender-affirming care and the rights of providers who deliver it. In doing so, Delaware sent a strong message: in this state, your identity does not diminish your right to health, and your healthcare provider will not face persecution for offering medically necessary, affirming care.

This Executive Order wasn't just symbolic. It builds upon a foundation of inclusive policy, protects providers from out-of-state legal interference, and reinforces the principle that equitable care is a public good. In a climate where even basic protections are being stripped away elsewhere, Delaware's stance is both reassuring and necessary.

## **Policy, Power, and the Role of Public Health Practitioners**

Public health should not be a political act. The erosion of LGBTQIA+ protections, the criminalization of gender-affirming care, and the undermining of reproductive rights all have direct and measurable impacts on health outcomes. As practitioners, we must be prepared to speak not just as clinicians or administrators, but as resolute advocates.

We must challenge policymakers who cut prevention funding while lamenting rising HIV rates. We must resist narratives that suggest LGBTQIA+ health disparities are inevitable rather than constructed. And we must support a new generation of public health leaders, many of whom are queer, trans, and BIPOC, who are reimagining what public health can and should be.

## **A Call to Action: Centering Community, Reclaiming Prevention**

We are at a critical juncture. The choices we make now will reverberate for decades. Will we allow our prevention infrastructure to erode under political pressure? Or will we invest boldly in the community-based models that have already proven effective?

To truly advance LGBTQIA+ health equity in Delaware, we must:

- Fund and expand trauma-informed, culturally competent HIV prevention programs.
- Strengthen mental health services and suicide prevention efforts tailored for LGBTQIA+ youth.

- Protect and scale harm reduction initiatives, particularly for people who use drugs and justice-involved populations.
- Engage directly with trans and nonbinary community leaders to co-design services.
- Advocate relentlessly for sustained and increased funding at the state and federal level.

Public health cannot be separated from the social conditions in which people live and love. Prevention is about more than avoiding disease; it is about affirming the right to exist safely and with dignity.

To those on the frontlines, navigators, educators, testers, advocates, know this: your work is not invisible. It is revolutionary. And even in the face of austerity, it must endure.

Because prevention is not a program. It is a promise that every person, regardless of who they are or where they come from, has the right to protect their health.

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