

GLOBAL IMPACTS OF PROJECT 2025

**How the blueprint for the next Republican administration
may impact US foreign and development policy
on SRHR and gender equality.**

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ACRONYMS

- ADF** Alliance Defending Freedom
- AFPI** America First Policy Institute
- C-Fam** Center for Family and Human Rights
- CSOs** Civil Society Organisations
- EMCP** Expanded Mexico City Policy
- fNGOs** foreign Non-Governmental Organisations
- GPAHE** Global Project Against Hate and Extremism
- GCD** Geneva Consensus Declaration
- GFF** Global Financing Facility
- The Global Fund** The Global Fund to fight AIDS, TB and Malaria
- GGR** Global Gag Rule
- IWH** Institute for Women's Health
- INGOs** International Non-Governmental Organisations
- LGBTQ+** Gay, Bisexual, Trans, Queer +
- MCP** Mexico City Policy
- NGOs** Non-Governmental Organisations
- ODA** Official Development Assistance
- PPFA** Planned Parenthood Federation of America
- PR** Principal Recipients
- PIOs** Public International Organisations
- PLGHA** Protecting Life in Global Health Assistance
- PLFA** Protecting Life in Foreign Assistance
- Sida** Swedish International Development Agency
- RFSU** The Swedish Association for Sexuality Education
- UN** United Nations
- UNESCO** United Nations Educational, Scientific and Cultural Organization
- UNAIDS** United Nations Joint Program on HIV and AIDS
- UNFPA** United Nations Population Fund
- UNRWA** United Nations Relief and Works Agency for Palestine Refugees in the near East
- US** United States
- USAID** United States Agency for International Development
- USA** United States of America
- GPC** White House Gender Policy Council
- WHO** The World Health Organisation

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1. INTRODUCTION

This rapid study focuses on how the implementation of “Project 2025” and its policy platform ‘**The Mandate for Leadership**’ (hereafter referred to as The Mandate) would impact United States (US) Official Development Assistance (ODA), engagement with the multilateral system and foreign policy should Donald Trump win the next US Presidential election.

The report aims to ‘unpack,’ and analyse Project 2025, to make it more easily accessible to policymakers and provide an analysis of the potential impacts and risks¹. The study provides an initial look at how some US-based International Non-Governmental Organisations (INGOs) and selected United Nations (UN) agencies are preparing. It also provides recommendations for European civil society organisations (CSOs) and governments. The central methodology has been a review of documents and media and 13 semi-structured key informant interviews (Annex 1).

This report focuses on the devastating impact the Project’s implementation would have on international support for Gender Equality and Sexual and Reproductive Health and Rights (SRHR), while making the case that these agendas need to be seen through a ‘bigger lens’. The inter-linkages in organisations pushing against gender equality and SRHR and those focused on climate change denialism and ‘anti-vaccination’, are now better understood as part of larger wider movements designed to threaten democratic governance, human rights and multilateralism. Countering this situation and preserving and advancing human rights requires broader entry points and greater collective action.

Project 2025’s policy proposals outlined in The Mandate are positioned as a blueprint and roadmap for the next ‘conservative’ administration. While Donald Trump has recently attempted to distance himself from Project 2025, his close ties with its architect and authors, the ideological similarity of many of his positions and the selection of JD Vance as his Vice President candidate, make this distancing unconvincing. Project 2025 is widely understood to be the platform for a future Trump Administration. Project 2025 should not be seen as a ‘stand-alone’ initiative but rather an integral part of the wider global anti-gender and anti-SRHR movements that have been growing in force. While Project 2025 covers a huge range of issues, attacks on gender equality, gender and SRHR (in particular abortion) are at its heart.

The study was commissioned by the Swedish Association for Sexuality Education (RFSU) in July 2024. As part of its work to promote SRHR in Sweden, Europe and globally, RFSU follows and monitors shifts in foreign and international development corporation policies and official development assistance (ODA) in the US. Changes in policy and political landscape related to SRHR and gender equality in the US have huge implications for the foreign policy and development cooperation agenda of the European Union and European governments, including Sweden. This report’s insights, analyses, and recommendations inform RFSU’s policy and programmatic response and are shared with other civil society organisations and policymakers.

2. WHAT IS PROJECT 2025?

The next conservative President must make the institutions of American civil society hard targets for woke culture warriors. This starts with deleting the terms sexual orientation and gender identity (“SOGI”), diversity, equity, and inclusion (“DEI”), gender, gender equality, gender equity, gender awareness, gender-sensitive, abortion, reproductive health, reproductive rights, and any other term used to deprive Americans of their First Amendment rights out of every federal rule, agency regulation, contract, grant, regulation, and piece of legislation that exists.

The Mandate for Leadership, page 4

2.1 Project 2025 – an overview

The **Heritage Foundation**², an influential American right-wing think tank, working with a broad coalition of ultra-conservative and Christian nationalist groups has made public policy plans and a road map for 2025 should Donald Trump win the next Presidential election in November 2024. This is titled **The Mandate for Leadership: The Presidential Transition Plan**. The Mandate is the policy arm of an initiative commonly known as **Project 2025**³. The Heritage Foundation has created similar presidential roadmaps most notably the first ‘Mandate for Leadership’ which heavily influenced Ronald Reagan’s administration in 1981.

However, the current Mandate is markedly different. It is the most detailed and far right of previous proposals and the authors and contributors have strong links to the previous Trump administration. For many, Republicans and Democrats alike, Trump’s win in 2016 came as a surprise and President Trump lacked a policy, transition and staffing plan that would allow him to swiftly deliver on his agenda. The Heritage Foundation was determined not to let this happen again. They established Project 2025 so that he could begin his term with a policy roadmap, executive orders and pre-vetted and trained political appointees, that could be put in place from day one.

At over 920 pages, The Mandate was drafted over two years and brought together 34 authors and over 420 contributors. The 54-member advisory board has many familiar Christian Right Nationalist organisations such as Center for Family and Human Rights (C-Fam), the Alliance Defending Freedom (ADF) and the Institute for Women’s Health (IWH).

This Mandate maps out sweeping reforms that are anti-democratic, with detailed plans for partisan courts, potential withdrawal from the United Nations (UN), removing the apolitical career civil service and putting far-right political partisans in their place across all federal government agencies, and centralising more power in the hands of the president⁴. The Mandate overall has a central focus on “fetal-personhood” and “hetero-normative family structure” and proposes to remove rights and protections from transgender people referring to ‘transgender extremists’ and ‘transgender ideology’ as pornography⁵. Proposed measures for USAID include a significant restructuring, and reduction of budget, the removal of diversity, equity, and inclusion programs, and dismantling of the apparatus that supports gender equality and LGBTQ+ rights⁶. With respect to safe abortion care, information and services, The Mandate, mentions abortion 199 times and lays out

plans for a massive expansion of the **Mexico City Policy (MCP)**, also known as the **Global Gag Rule (GGR)**. Under President Trump's first administration, the MCP was already extended to cover all ODA in global health, known as **Protecting Life in Global Health Assistance (PLGHA)**. Project 2025 goes further, proposing to make 'protecting life' a cornerstone of US foreign policy work and extending the MCP to all U.S. foreign assistance (including humanitarian), known as **Protecting Life in Foreign Assistance (PLFA)** and put in place other measures to remove what the Mandate authors refer to as 'loopholes'.

The Mandate for Leadership proposes to use a range of channels to achieve its aims - ODA, multilateral engagement, and foreign policy - making this a cross-government concern for Sweden and other European countries. As the world's largest contributor of development assistance (\$66 billion in FY23), the U.S. has a huge influence in partner countries.⁷ The implementation of the PLFA, coupled with the removal of evidence-based, human-rights and gender-sensitive approaches to development programming would have a huge impact not just on SRHR, health outcomes and progress towards Universal Health Coverage, but would also severely curtail civic voice, human rights, and democracy.

The architects of Project 2025 are intimately linked with transnational anti-rights movements. The Alliance Defending Freedom (working through their international arm), are members of (and have provided support to) far-right, anti-rights movements in Europe such as 'Agenda Europe' (now called VisionLink). Other contributors to The Mandate, such as the Institute for Women's Health, run by Valerie Huber, are leading efforts to roll out the Geneva Consensus Declaration, GCD (Box 1 and Figure"/Map" 1')

Box 1: The Geneva Consensus Declaration (GCD), signed on October 22, 2020, under the Trump administration, is an anti-abortion manifesto currently endorsed by a coalition of 37 countries. The US, Brazil and Colombia were original signatories which have currently withdrawn. Efforts to cultivate signatories have continued and been led by Valerie Huber, a former senior staffer in the Trump Administration and founder of the Institute for Women's Health.

The GCD is currently hosted by the Government of Hungary which serves as the secretariat of the GCD coalition. The GCD extensively co-opts human rights language - *human rights of women are an inalienable, integral part of all human rights and fundamental freedoms*, and it commits to Universal Health Coverage, while at the same time seeking to deny access to abortion, stating that there is no international right to abortion or any international obligation.

Project 2025 has four pillars. The first outlines the policy promise and the other three are structured to operationalise the policy mandate from day one of the administration. The Pillars are:

1. The Mandate for Leadership, which is the 920-page policy promise.
2. A Presidential Personnel Database of vetted loyal conservatives that can be drawn on and put in place from day one in key offices.
3. The Presidential Administrative Academy provides a variety of master classes in public service to ensure that the conservative administration is trained (videos leaked in August 2024).
4. A 180-day Transition Playbook (not yet publicly available).

How much of the Mandate will be implemented, should Donald Trump win the election remains an open question. Some analysts point to inconsistencies within The Mandate as evidence of fractures within the ultra-right movement and note that Project 2025 is not the only conservative organisation developing a policy playbook⁹. The American First Policy Institute (AFPI) has a similar mission and also engages former senior Trump staffers.

Donald Trump's campaign has been careful to distance itself from Project 2025¹⁰ and has denied any knowledge of Project 2025 and who is behind it, calling many of the ideas 'extreme'. However, most media outlets and the key informants for this report see his new positioning as "electioneering" given the microscope the Democrats have placed on the Project's extreme policy proposals and their implementation. There is in fact, ample evidence of Donald Trump's close relationship with the President of the Heritage Foundation, Kevin Roberts and in April 2022 he praised the work of the Heritage Foundation saying they are "going to lay the groundwork and detail plans for exactly what our movement will do and what your movement will do when the American people give us a colossal mandate to save America"¹¹ A large number of well-funded, influential organisations have also been involved, as well as a huge number of former senior staffers loyal to Donald Trump. According to an analysis by CNN "In total at least 140 people who worked in the Trump administration have had a hand in drafting Project 2025".¹² A review of the 14 hours of leaked training video for the Presidential Academy shows that 29 of the 36 speakers worked for Donald Trump in some capacity¹³.

His efforts to publicly disavow Project 2025 are further compromised by the selection of Senator J.D. Vance as his VP running mate, given Mr. Vance's close alliance with the Heritage Foundation President. Senator Vance has written the foreword to the President of the Heritage Foundation's forthcoming book, *Dawn's Early Light: Taking Back Washington to Save America*. The book was originally scheduled for release in September but given the scrutiny that Project 2025 is under it has been pushed back until a week after the US election. Senator Vance's public positions on abortion and traditional family, immigration and ideology are closely aligned to the Project¹⁴.

2.2 Project 2025's Approach

The Project uses a myriad of tactics to dismantle the existing international and foreign policy system with proposals on how it should function in the future. Four key strategies stand out, and their impact is even greater when considered alongside other global anti-gender and anti-SRHR movements. These strategies can be broadly described as:

1. Dismantling the administrative state and politicising the civil service.

One of the central promises of the Project is to “dismantle the administrative state and return self-governance to the American people¹⁵”. This promise is outlined in every chapter of the Mandate along with details of politicising senior positions throughout the government¹⁶. The Mandate document argues that a large state is both wasteful and not in the spirit of the original intent of the Constitution and that it interferes with the free will of the American people by imposing ‘woke’ ideals on them. One of many examples cited is that *“bureaucrats at the State Department infuse US foreign aid programs with woke extremism about ‘intersectionality’ and abortion.”* The Mandate lays out which tools can be used to *‘fire the supposedly unfireable federal bureaucrats and how to muzzle woke propaganda at every level of government’*.¹⁷

2. Co-opting the narrative and misinformation on human rights. What is notable about this, and other transnational ultra-conservative and anti-rights agendas and movements is how they have understood the tools of human rights progress and used those same tools, strategies, and tactics to undermine human rights, whether globally in multilateral UN settings, through diplomacy or in programmatic work.¹⁸ For example, the Mandate positions the promotion of the right to abortion and LGBTQ+ rights as countering the right to religious freedoms and ‘anathema to the traditional societies’ were USAID works. It positions protections on the basis of gender, LGBTQ+ status and race as ‘discrimination’ and it speaks about the need to create a healthy culture of respect for life, the family, sovereignty and ‘authentic human rights’ in international organisations and agencies.¹⁹ Furthermore, in 2019 under the Trump administration, then Secretary of State, Mike Pompeo established the US Commission on Unalienable Human Rights which focused on the primacy of civil and political rights grounded in the nation’s founding principle and the broader tradition of natural law and natural rights. In doing so, the Commission co-opted terminology and framing inherent in the Universal Declaration on Human Rights and other Human Rights agreements.²⁰

3. Breaking down the rules based multilateral order, the architecture that supports the channelling of official development assistance and the silencing of dissenting voices.

Proposed measures include using the multilateral systems as an extension of US foreign policy, withdrawing from agencies that do not comply and creating obstructions that stall international agreements (an approach known as norm spoiling). These approaches would have a significant negative impact on the rules based multilateral order. As the final section of the report shows, the proposed additional expansions of the Mexico City Policy (MCP) will significantly affect people’s access to comprehensive SRHR considerably hamper the delivery of all foreign assistance (not just US foreign assistance). Thousands of local partners risk being mired in bureaucracy and “gagged”. The impact would lead to a dramatic shrinking civic space and an erosion of human rights and democracy.

4. Building a new international system with faith-based and private sector approaches at its core. The final strategy rests on what the authors propose can fill the gaps and where money can be reprogrammed. The Mandate calls consistently for the integration of faith-based approaches and religious freedoms into all USAID country cooperation strategies, the implementation of the Geneva Consensus Declaration and the transfer of financing to faith-based actors and the private sector.²¹

2.3 What are the main provisions within Project 2025 relevant to work on Gender, Human Rights and SRHR in global spaces?

The solution to all of the above problems is not to tinker with this or that government program, to replace this or that bureaucrat. These are problems not of technocratic efficiency but of national sovereignty and constitutional governance. We solve them not by trimming and reshaping the leaves but by ripping out the trees—root and branch. International organisations and agreements that erode our Constitution, rule of law, or popular sovereignty should not be reformed: They should be abandoned.

The Mandate for Leadership, page 12

This section focuses on analysis of the Mandate Chapter 2 (the Executive Office), written by Russ Vought, the former Director of the Office of Management and Budget during the Trump administration; Chapter 6 (the Department of State), written by Kiron Skinner who served as the Director of Policy Planning at the State Department under Donald Trump and Chapter 9 (the Agency for International Development), written by Max Primorac, who served as the senior advisor to the USAID administrator during the Donald Trump's administration. The Heritage Foundation claims that 64% of their policy recommendations were used in the first Trump Presidency This section provides a brief overview and analysis of a few key areas. The aim is to make the Mandate more accessible and to provide context for this report's recommendations. Project 2025 proposes:

i) Centralising additional power in the hands of the President. Some of the key strategies to achieve this are through direct partisan appointments, a stronger focus on executive actions that do not require congressional oversight and the restructuring of federal agencies. Frustrated by activities of senior career executives, a few months before Donald Trump left office in 2021, he issued Executive Order 13957²² known as schedule F. Schedule F meant that federal civil servants, who previously had protections from political influence, could be fired and replaced by political appointees. Schedule F was revoked by President Biden two days after taking office. To slow down the reinstatement of schedule F by any future administration, President Biden's Office of Personnel Management has passed a new rule to protect federal employees and make it more difficult to reinstate schedule F. Key informants indicated it would now be cumbersome for a new Trump administration to reinstate schedule F but not impossible. Within the Mandate, they indicate their intention to reinstate schedule F and USAID has been identified as one of the agencies to pilot-test this executive order.²³

ii) International Organisations. The Project plans to fundamentally alter American diplomacy, using its voice in the UN and other international bodies to push anti-abortion and anti-LGBTQ+ agendas, and adopt an alternative narrative on "human rights" distinct from the Universal Declaration

of Human Rights, the International Convention of Civil and Political Rights, the International Convention on Economic, Social and Cultural Rights etc. The project also plans to abandon international organisations and traditional diplomatic and security alliances.²⁴ To pursue this alternative agenda The Mandate includes designating a political appointee to help coordinate cross agency efforts to hold “the US government’s multilateral partners (U.N. and WHO agencies and other international organisations) to a higher level of financial and programmatic accountability, including assurances that language promoting abortion will be removed from U.N. documents, policy statements, and technical literature”²⁵. It is clear from the Mandate that international organisations, are expected to support the US foreign policy interests and if they do not the US should give serious consideration to withdrawing from them as the previous Trump Administration did with the Human Rights Council or terminate/reduce funding for them as in the case of UNESCO, UNRWA and WHO. The Mandate further lays out proposals to transition from large awards to ‘corrupt’ UN agencies and global NGOs to local, especially faith-based entities and unleash the power of America’s private sector.²⁶

iii) Agency for International Development (USAID). The chapter on USAID proposes a comprehensive restructuring of the Agency. A number of areas are highlighted which if implemented in their entirety would substantially reshape the nature of US official development assistance and all but eliminate its gender and human rights work. It would also give rise to substantial increases in funding to private sector and faith-based groups. Overall, the Mandate proposes cuts in USAID’s global footprint and budget and it decries how USAID programs are “infused with woke extremisms about ‘intersectionality’ and abortion.”²⁷ It proposes the rapid deployment of political appointees in key positions including senior attorneys, human resources, and the appointment of a senior officer to report on adherence to the administration’s policy priority including protecting life in foreign assistance (PLFA) critical race theory, climate change, gender and diversity and inclusion.

iv) Refocusing Gender Equality on Women, Children and Families

Democratic Administrations have nearly erased what females are and what femininity is through ‘gender’ policies and practices.

The Mandate for Leadership, page 259

Significant changes affecting foreign policy and international assistance related to gender would be undertaken. This includes shutting down the White House Gender Policy Council (GPC), which advances gender equity and equality in both domestic and foreign policy development and takes an intersectional, whole of government, approach.²⁸ Large-scale adjustments to USAID are proposed, such as restructuring the USAID Office of Gender Equality and Women’s Empowerment and positioning it as USAID’s Office of Women, Children, and Families. This would include eliminating the more than 180 gender advisors across USAID and the position of Senior Gender Coordinator. This post would be renamed the Senior Coordinator of the Office of Women, Children, and Families and be explicitly pro-life and politically appointed. The approach to “Integrating Gender Equality and Female Empowerment in USAID’s Program Cycle” will be modified to align with the new focus. It is proposed to remove all references and language such

as gender, gender equality, gender equity, gender awareness, gender-sensitive, abortion, reproductive health, reproductive rights, and anything inclusive of diverse gender identities from all programming material, USAID communications and outreach materials²⁹. President Biden's memorandum on "Protecting Women's Health at Home and Abroad," issued on January 28, 2021 would also be revoked.

Eliminating Diversity, Equity, and Inclusion (DEI). USAID currently places importance on DEI. Within The Mandate this is seen as racializing the agency and creating a hostile work environment and it recommends that the next conservative administration should issue a directive that ceases the promotion of the DEI agenda and the 'bullying LGBTQ+ agenda'. It should dismantle USAID's DEI apparatus by eliminating the Chief Diversity Officer position along with DEI advisers and committees, cancelling monitoring mechanisms and removing requirements in contracts and grants. Furthermore, the Mandate aims to rescind employer regulations 'prohibiting discrimination' (sic) on the basis of sexual orientation, gender identity, transgender status, and sex characteristics.³⁰

Ending diplomatic support and assistance for the LGBTQ+ community
The Mandate dramatically erodes support for the LGBTQ+ community domestically and abroad calling for the removal of policies and programs that respect and protect the community to be replaced by policies that advocate for stable, married, nuclear families (by which is meant heterosexual unions).³¹ It also calls for an end to using US diplomatic soft power in Africa to protect the rights of LGBTQ+ communities, and refers to this diplomacy as 'imposing pro-LGBT initiatives'. This call almost certainly refers to the passage of the anti-homosexuality Act in Uganda³². In response to its passage US President Biden issued a statement calling the Act a tragic violation of universal human rights and in response to it he put in place visa restrictions, some sanctions, and signalled a decrease in aid and trade engagement.³³

The signposting from the Mandate is clear - a new Republican government is being asked not to stand up for the rights of LGBTQ+ populations around the world. This grave situation calls for strengthening the interconnectedness of the movements that erode LGBTQ+ human rights, the right to bodily autonomy, abortion, and democracy.

v) Restrictions on access to Safe Abortion

The next Administration should ensure that USAID's goal in service of its mission is to help protect and propel all members of society—women, children, and men—from conception to natural death
The Mandate for Leadership, page 260

The Mandate similarly proposes a number of foreign policy, multilateral and ODA modalities to limit access globally to safe abortion and it applauds the efforts during the Trump presidency that resulted in the Geneva Consensus Declaration.

It calls on any future Republic administration to ensure that abortion is not 'funded or promoted' in international programs or multilateral organisations and calls on the US government to create a coalition of like minded nations to shape "the work of international agencies by functioning as a united front".³⁴ The intention of this call can be seen as a commitment to engage more concertedly in norm spoiling through multilateral processes and to influence other 'public interest organisations' such as the Global Fund, the Global Financing Facility (GFF) etc through collective action.

At a minimum the Mandate calls on the reinstatement of the expanded MCP (applied to all foreign NGO health recipients and subrecipients) and the defunding of UNFPA. However, the central proposal of the Mandate is to dramatically expand the MCP by extending it in four key areas:

- 1. Remove exemptions for US International NGOs. This expansion also apply to contracts (which are often awarded to private sector organisations).*
- 2. Extend the MCP to Protect Life in **all Foreign Assistance** (PLFA), including humanitarian assistance (covering about \$66 billion of and thousands of partners).*
- 3. Remove exemptions for Public International Organisations (PIOs) and Multilateral organisations (this includes Gavi, the Global Fund, the Global Financing Facility and UN entities).*
- 4. Apply the policy to bilateral government-to-government agreements*

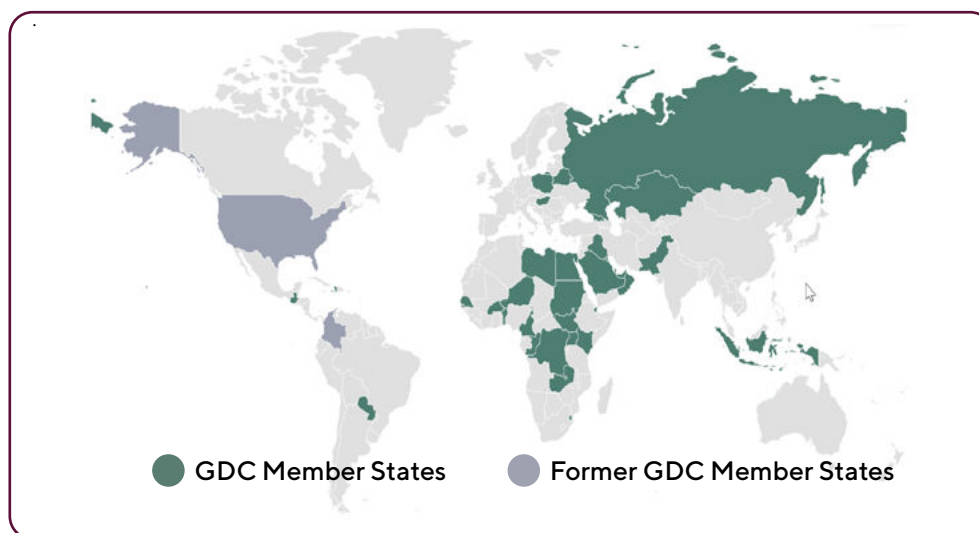
These proposals and their implications are discussed in a special section later in the report given the scope, scale, and magnitude of impact their implementation would have.

2.4 Project 2025 is already here

Project 2025 lays out a policy mandate for the next Republican President that would have severe implications for human rights and international cooperation. However, it is important for policymakers to realise that many of the significant elements of Project 2025 are already here. The policy proposals are being rolled out and they will continue to be rolled out even if President Trump loses the election in November 2024.³⁵

One example of how Project 2025 is already having an impact is the rollout of the **Geneva Consensus Declaration (GCD)** and the development of its operational arm **Protego**.³⁶ Work cultivating national signatories did not cease with President Trump's departure from office in 2021. The GCD's continued influence has been spearheaded by Valerie Huber, a former Trump official who went on to form the Institute of Women's Health (IWH) in 2021³⁷. The GCD is currently being hosted by the government of Hungary with support from IWH. The IWH, is a US anti-abortion, anti-comprehensive sexuality education US INGO. It is listed among those organisations on Project 2025's Advisory Board and Valerie Huber is a contributing author to the Project. As a multi-country political declaration, the GCD lacked an implementing modality. In response to this, the IWH created their 'Holistic Framework for Women's Health, known as **Protego**.³⁸ Research by Ipas has shown that Protego's core aim is the operationalization of the GCD. A key component of Protego is "International Engagement" which is dedicated to discrediting the work of the multilateral system and their promotion of the human rights of women, girls, and LGBTQ+ people³⁹. Protego is envisaged as an agreement at the highest level of government. Guatemala is piloting Protego, and it was recently launched in Uganda by First Lady Janet Museveni. Fifteen countries are said by the IWH to be considering launching the approach in their country.⁴⁰

Figure 1: Current Geneva Consensus Declaration Signatories



While Protego is not mentioned by name in The Mandate, it is implied in a recommendation for launching a new approach that focuses on 'Holistic Health Care and Support for Women, Children, and Families'. It asks that the next leadership at USAID focus attention on women's and children's health (including unborn children) as well as health risks across the lifespan⁴¹.

A second example of the operationalisation of Project 2025 is the large funding flows and influence from US evangelical Christian groups to influence and remove the rights of the LGBTQ+ community in Africa. These groups were directly engaged in influencing the recently passed anti-homosexuality Act in Uganda. Orga-

nisations such as the Fellowship Foundation are thought to have spent over \$20 million in Uganda, to bolster local support for anti-LGBTQ+ laws between 2008 and 2018⁴² and evangelical Christian influence has been instrumental in drafting and promoting the legislation⁴³. The US Supreme Court's anti-abortion decision *Dobbs v. Jackson Women's Health* organisation, (which overturned *Roe v. Wade*), was also cited by the Ugandan Constitutional Court as part of its justification to pass the Ugandan Anti-Homosexuality Act in March 2023. Specifically, Uganda's court stated that it is within a nation's sovereignty to define and regulate rights according to its "history and traditions", similar to how the U.S. reconsidered abortion rights.⁴⁴ These decisions are important because of the emphasis on cultural and societal norms over democracy and rule of law and international human rights standards. The linkage illustrates how international judicial decisions, particularly from influential courts like the US Supreme Court (and backed by US money and advocacy) can influence legal arguments in other countries.

Other examples include attempts by Republican congressmen to pass legislation aimed at restricting funding for international non-governmental organisations that support gender-affirming care, surgeries, or promote transgender rights. These efforts have been part of a broader strategy to embed anti-LGBTQ+ provisions into various must-pass appropriations bills⁴⁵. While these measures have not yet been successfully passed into law, their inclusion in significant funding bills highlights ongoing legislative efforts to curtail transgender rights domestically and internationally.

This bill came after the publication of Project 2025 so it is not specifically mentioned within it, but it raises concern that a transgender "gag-rule" may be unilaterally enacted should Donald Trump become the next US President.

These cases show that even if Vice President Kamala Harris wins the election, Project 2025 will still be with us. It will just be delivered through different mechanisms. Furthermore, if Kamala Harris wins the election but loses one or other of the houses it will have a significant impact on whether budgets or legislation can pass.

With this in mind, Project 2025 should not be seen as a Mandate for the next four years, but as a plan for decades and European partners should be planning accordingly with a mix of long and short term coordinated strategies.

3. WHY SHOULD PROJECT 2025 CONCERN EUROPEAN GOVERNMENTS, CSOS AND LIKEMINDED ALLIES?

3.1 Geopolitical context and solidarity

Project 2025 has significant geopolitical implications. The alignment of US foreign policy with ultra-conservative or populist agendas, as proposed by Project 2025, risks undermining human rights values globally. This is particularly concerning in the global south, where as a result of new US positioning they may by default - ally to authoritarian regimes that also undermine human rights globally such as Russia. This shift has significant implications for the geopolitical landscape potentially diminishing Europe's ability to work in support of local civil society actors in human rights and democratic governance. As an example, in the African context, the Lusaka Agenda emphasises the importance of maintaining solidarity and support for human rights, gender equality, and SRHR, which could be severely compromised under Project 2025. Strong support for local agendas like Lusaka and stronger integration of SRHR, climate, human rights, democratic governance and security may help position countries in the global south to resist the rolling back of human rights standards, but that will only prevail if there is space for a strong civil society voice at the table.

3.2 The Effect on UN agencies and the UN system

Project 2025's proposals to defund or reshape international organisations like the UN agencies and the WHO will disrupt the global aid architecture, global solidarity and foreign policy. European donors often work through these multilateral organisations and rely on them for global solidarity and norms and standards setting. This in turn helps provide principles for ODA and allows for it to be delivered effectively. US withdrawal, conditional funding to the UN and/or continued norms spoiling in multilateral negotiations based on ultraconservative agendas compromises the UN's ability to function, and also changes how European partners work with and through them.

3.3 Impact on health and SRHR outcomes

The U.S is the largest contributor to overseas development assistance, with \$66 billion allocated in 2023⁴⁶ and their assistance in health is approximately \$12.9 billion (see below). Changes in US policy, such as the proposed implementation of the Protecting Life in Foreign Assistance (PLFA) and other measures outlined earlier in this report will severely affect global SRHR, health and development outcomes and progress towards Universal Health Coverage. It will seriously disrupt European development assistance by limiting the number of collaborating partners in countries as well as restraining their activities. In addition, this shift towards ideological approaches over evidence and human rights-sensitive would curtail civic voice, human rights, and democracy in partner countries, directly impacting the effectiveness of European official development assistance and results. Countries with a large dependence on US ODA will likely be impacted the most. Estimates need to be generated to understand where, when and how the biggest impacts will materialise so that partners can prepare.

The US is by far the largest donor government to global health, SRHR, HIV-programming and Family Planning (figures in USD, actual):

- **ODA total:** 66 billion (2023).⁴⁷
- **Global health:** 12.9 billion (2023).⁴⁸
- **Family Planning:** 583 million. Followed by the Netherlands at 217 million, U.K: 175 million, Sweden: 121 million (2022).⁴⁹
- **SRHR 9.35 billion:** Followed by the UK: 734 million, Germany: 651 million, France 531 million (2022).⁵⁰

More than half of US' SRHR disbursements and a large part of its Family Planning and RMNCH disbursements came from its support to STD control including HIV & AIDS⁵¹. The US continues to be the largest donor to HIV programs at 6.1 billion, providing 74% of all donor government HIV funding⁵².

4. PREVIOUS US POLICIES RESTRICTING ACCESS TO SAFE AND LEGAL ABORTION

The Mexico City Policy is not just an abortion restriction. It's called a gag rule because it's about speech. It's a way for Republican Administrations and their supporters to buy out the ideological composition of governments and organisations around the world. The moment we are in today with anti-gender movements globally is because the first Trump administration bought or forced the silence of civil society and muffled the advocacy movement.

That is the point of the Global Gag Rule.

Beirne Roose-Snyder, senior director, Perclusion Project, Key Informant

4.1 The Mexico City Policy (MCP)

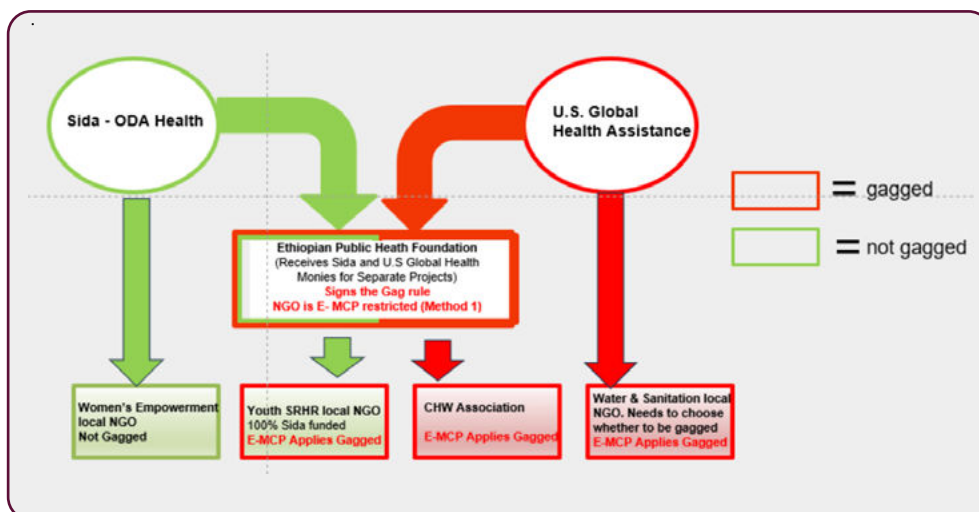
In 1984 the administration of US President Reagan was the first to implement the **Mexico City Policy (MCP)** which is also known as 'the **Global Gag Rule**' (**GGR**). The original MCP prohibited foreign Non-Governmental Organisations (fNGOs) that received US government family planning monies from using US funds or their own funds for performing, providing counselling, referring, or advocating for safe abortion as a method of family planning.^{53 54}

That meant that even if a local organisation was providing information and service on abortion paid for by another donor, or their own funds, they would not be eligible for family planning money from the US government. To remain eligible for US Government (USG) family planning funds they would need to certify compliance with the policy. Essentially agreeing to be 'gagged'. They would stop all work on abortion-related information, referral, or services in exchange for USG family planning funding. The policy at the time applied to \$300-600 million in family planning monies per annum. The GGR has since been implemented with every republican administration and repealed with every democratic one.

In 2017, President Trump reinstated and radically expanded the Global Gag Rule applying this policy to all health assistance in what became known as **Protecting Life in Global Health Assistance (PLGHA)**. This increased the level of funding affected to an estimated \$12 billion per annum in fiscal year 2018 and affected over 1,300 global health projects.⁵⁵ These figures do not include how much of other donors' money or domestic money was gagged. Historically the MCP was limited to only USAID funding. Under the expansion the restrictions applied to all US global health awards, affecting numerous US government agencies with programs abroad. It also extended to programs awarded through the State Department. This meant that for the first time the President's Emergency Plan for AIDS Relief (PEPFAR) was bound by the MCP. Given the integrated nature of health sector responses, over 2/3 rds of health funds were linked in some way to supporting HIV and AIDS programming and 2/3 were linked to Africa.⁵⁶ In 2019 in an unprecedented move further guidance was issued stating that the GGR would now apply to sub-recipients of "gagged" organisations even if they do not receive any US foreign assistance. Overnight, local organisations with no programs supported by the US government became subject to the policy simply because they were subgrantees of an organisation that did⁵⁷.

The explanation of how this works to gag other donors' projects can be explained in Figure 2 using a hypothetical situation of a project funded by Sida. In this situation, a local community Youth SRHR NGO (at the bottom, second from left), is 100% supported by Sida to provide comprehensive SRHR information to young people, inclusive of information on safe abortion care. Sida passes its funds through the Ethiopia Public Health Foundation (EPHF) who is primarily responsible for the overall project. This local Youth SRHR NGO becomes gagged even though it does not receive a single dollar in USAID funds and it has not signed the gag rule. It becomes gagged because it is sub-granted by the EPHF to deliver the project. The EPHF decided to sign the gag rule so it can continue to receive funds from the US. The consequence of being gagged is that the Youth SRHR NGO can not provide comprehensive SRHR programs and must remove any reference to abortion or safe abortion in its materials. To provide for comprehensive SRHR for youth in communities, Sida will need to find another partner providing youth friendly information and services. In the geographic area where the project operates there may not be another partner. This is the system that existed under the 2019 expansions. Under future scenarios this may expand to all US foreign assistance.

Figure 2: How expanded MCP (2019) Gags Local Organizations including those with no US funding



A significant amount of research has been done since the MCP has been implemented to show the devastating impacts of the policy expansion, not just on access to abortion information and services, but on overseas assistance during Covid, maternal health programming and to HIV services. Organisations supported by PEPFAR to support integrated HIV prevention, treatment and care with comprehensive sexual and reproductive health and rights have been among the hardest hit.

The irony is that the GGR applies even in countries where abortion is legal. The majority of countries that receive US global health funding allow for legal abortion in at least one case not permissible by the exemptions of the gag rule (rape, incest, or to save the life of the mother). By applying the gag rule in these instances, the United States is attempting to override or disregard local laws⁵⁸.

The GGR was rescinded in early 2021 when President Biden took office. Should Trump win the next Presidential election he will almost certainly re-apply the MCP and it is assumed that he will take guidance for its expansion from the Mandate for Leadership outlined in Project 2025.

5. SPECIAL SECTION: PROPOSED FURTHER EXPANSIONS OF THE MEXICO CITY POLICY AND OTHER MEASURES TO CURTAIL ACCESS TO SAFE ABORTION

Should it be implemented, Project 2025 seeks at a minimum to reinstate the PLG-HA and block funding to the United Nations Population Fund UNFPA by reinstating the **Kemp-Kasten Amendment**⁵⁹. However, the proposals cut much deeper, recommending four areas of significant expansions⁶⁰. The implication of four expansions of the PLGHA and how US-based NGOs are preparing and responding are outlined below.

Expansion 1 – Apply the MCP to US-based International NGOs and their recipients and sub recipients

In the US the 1973 **Helms Amendment**, prohibits US NGOs from using US foreign assistance to fund abortion as a “method of family planning” and is in place even during Democratic administrations⁶¹. However, under Helms, US-based INGOs are not ‘gagged’ and they can receive funding to provide abortion information or services through other sources such as the Swedish, British, Canadian funders and foundations. Under Project 2025 there are proposals to expand the GGR to cover US-based INGOs and that this would be applied to contracts as well as cooperative agreements. This would mean that US-based INGOs that receive non-USG monies for comprehensive SRHR inclusive of abortion information or services **would no longer be eligible for USG funding**. Under this expansion US-based INGOs would need to make a choice whether or not to be gagged. For organisations that agree to be gagged it would mean forgoing important funding for safe abortion programs that are supported through other donors.

Since the MCP was first applied in 1984 there was a long-held belief that US based NGOs **could not** be gagged. This was formed from three main points i) existing case law, ii) a constitutional right to free speech under the First Amendment and iii) up until 2 years ago Constitutional Rights to Abortion domestically.

After the proposals in Project 2025 emerged, US based INGOs have been meeting and their legal counsels have been reviewing provisions. After discussions with many US based INGOs, it remains uncertain whether or not they could legally be subject to the policy or not. It seems however the larger question would be whether and how they would fight any attempted gag order which would likely end up in the courts on the basis of the First Amendment. However, this might ultimately end up in the Supreme Court, which (with the exception of the recent ruling on mifepristone access) has not been favourable to these issues and the court has not relied on precedent as much as previous courts⁶².

The implications for large US-based INGOs if subjected to the policy would be immense. If a US INGO refused to be ‘gagged’ they would be ineligible for **any** USAID money. One INGO key informant indicated that USG money is about 50% of the budget for their organisation and for others, it is higher. Some INGOs do not take US Government money for their overseas work such as Planned Parenthood Foundation America (PPFA). Six organisations are specifically called out in Project2025 and would likely be the first to be targeted. These are PSI, Pathfinder, PATH, Population Council, EngenderHealth, Women Care International, but the policy would undoubtedly be applied uniformly.

US INGOs are currently organising to understand the impacts of these potential events. They are 'running the financial numbers' to see if they could continue to operate and some are looking at alternate structures. They are sharing information through spaces such as the US based International Community of Family Planning organisations and the network of CEOs working in Reproductive Health.

The implications for comprehensive health and SRHR programs and services would be significant. US based NGOs have some of the most advanced infrastructure, policies and systems and provide high quality technical support in many areas and they have an ability to work at scale. A loss of them as partners for European governments and communities might be significant. An analysis could be done with major European donors to gain a fuller picture of which US INGOs they work with to provide comprehensive SRHR programming and the impact should they no longer be available. Similarly, analysis could be undertaken to understand how much funding US INGOs are receiving from the US government and the impact of this loss in funding on unintended pregnancies, unsafe abortions and SRHR service delivery.

Expansion 2 – Extension of the Mexico City Policy to Protect Life in *all Foreign Assistance (PLFA), including humanitarian assistance.*

This expansion of the MCP to all foreign assistance was initially proposed in a bill in January 2021, which was unsuccessful. It is re-proposed in Project 2025⁶³. If it was passed by a future Trump administration it would mean applying the expanded MCP to all foreign assistance and all US and non-US recipients. It would cover **\$66 billion** of US foreign assistance (FY2023) of which **\$51.5 billion** is estimated to be provided to non-USG prime recipients. This is tens of billions of dollars greater than the previous policy of PLHA which affected **\$12 billion** of health assistance. It would also cover 178 countries (an increase from 93 under PLGHA) and approximately 2,400 non-USG prime recipients and thousands more sub-recipients, including sub-recipients who do not have any USG funding and may be supported by European donors and partners.^{64 65}

The majority of this funding in FY 22 was provided to multilateral organisations (\$29.8 billion) which under proposed expansion 3 (outlined below) would be newly subject to the policy. US based INGO recipients received \$15.1 billion and would be newly subject to the policy as outlined under Expansion 1 (above). Foreign governments received \$862 million and there are proposals to subject them to the policy under expansion 4 (outlined below).

However, the greatest concern rests with the application of the MCP to the humanitarian sector which currently receives \$16.4 billion in assistance each year. Project 2025 specifically cites the inclusion of medication abortion on the essential drugs list in the Covid-19 Humanitarian Response Plan as one of the reasons to justify the expansion to humanitarian organisations. Safe Abortion Care is also included in the Minimum Initial Service Package for humanitarian responses.⁶⁶

The GGR would apply to local organisations even if they do not receive USG funds. In this way, even a single dollar of U.S. money taints an entire organisation's operating budget from all sources and who they partner with.⁶⁷ The impacts are enormous:

Impact on Broad-based community organisations that work on education or women's agriculture, might also have SRHR programs inclusive of information, referrals and services for abortion. Their work on abortion (even if funded from non-USG sources) would make them ineligible to receive ANY USG funds. A loss of USAID funding, results in a loss of staff, operating capability, and overheads which can hamper Sida/other donor programs even if those programs are unrelated to abortion.

Impacts on the Integration of services- health services have become more integrated in the last decade, particularly with moves to strengthen primary health care. The expansion of the PLGHA interrupts service integration and health systems strengthening, affecting services and patient referrals in a variety of health areas.

Localisation - Moreover, the US government is currently pursuing a policy of localisation and is actively looking to engage more local organisations across a range of programming. In the future, the GGR is applied to these local organisations. It will limit the range of partners that other donors could work with on comprehensive SRHR.

Punitive and pre-emptive selection bias is a risk for local organisations. Using the Global Fund as an example, Country Coordinating Mechanism (CCMs) have the responsibility to select Principal Recipients for the Global Fund grants. CCMs may have a selection bias against certain Principal Recipients based on whether they provide comprehensive SRHR. CCMs may decide not to choose those organisations as principal recipients for fear that all their sub-recipient systems will be gagged.

Many other sectors would be affected as described above as would the programs and partnerships of non-US donors⁶⁹. Due to the expansion to sub-recipients (even those with no USG funding) other bilateral government investments in essence become gagged (figure 2 previously). This raises an important question concerning interference with the sovereignty and democratic functioning of other countries if US policy restrictions are attached to a foreign government's own appropriations and expenditure.⁷⁰

Many settings lack a wide array of NGOs to work with. This is particularly pronounced in the humanitarian ecosystem. If some organizations are gagged, they are unavailable to extend life-saving comprehensive SRHR in these environments, where GBV is very high, and rape is often used as a weapon of war. If organisations choose not to be gagged, they will not be able to receive USAID funds. The sheer scale and complications of the bureaucracy and compliance in fast moving settings is hard to fathom. There is reason for concern that a vacuum may be left in these settings and with the complexity of implementing the rule.

Expansion 3 – International Organisations – Remove any exemptions for Public International Organisations and Multilateral Organisations (Box 2)⁷¹

In the past, organisations and agencies categorised by USAID as “Public International Organisations”(PIO), like the Global Fund or Gavi, have not had to certify compliance with the expanded MCP when they have entered into new agreements for US funding. However, Project 2025 proposes to change that and ask PIOs and the United Nations to certify compliance.

Box 2. Public International Organisation

According to USAID, Public International Organisation (PIOs) include but is not limited to:

- **A selection of UN organisations, funds and programmes and related organisations, including UNFPA, UNAIDS, WHO and UNWOMEN.**
- **The category “Other International Organisations”, that is GAVI, the Global Fund to fight AIDS, malaria, and tuberculosis (the Global Fund).**
- **International finance institutions such as the World Bank Group.**

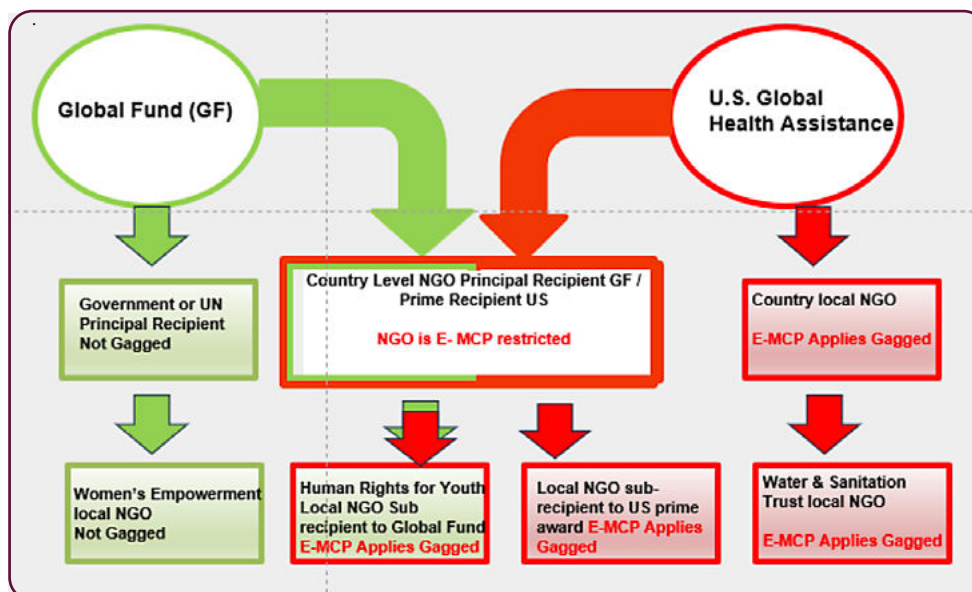
In total in FY 22 the US government provided \$29.8 billion to multilateral organisations and PIOs of which \$18 billion was for the UN. According to the Council on Foreign Relations, the United States remains the largest donor to the UN accounting for one-third of the funding for the body’s collective budget.⁷² According to key informants, the mechanism used to defund the UN may be the 1981 **Siljander Amendment** which forbids US funding from being used to lobby for or against abortion, though it may also be applied through the GGR. Some elements of this expansion could take effect quite quickly, such as removing voluntary contributions for UN organisations, but full defunding would likely take more time. The table below, covers only health focused funds and helps to clarify the scale of US Government contributions in 2022, in USD:

- **The Global Fund:** 2 billion⁷³
- **Gavi:** 271 million⁷⁴
- **WHO assessed contributions:** 349 million⁷⁵
- **UNFPA (2023):** 161.7 million, which represents 11% of UNFPA’s total budget, 30 million was for core and 131 for humanitarian action (representing ¼ of their entire humanitarian budget).⁷⁶

The expanded MCP and Public International Organisations – The Global Fund example

Traditionally the MCP has not applied to PIOs and therefore the Global Fund has not had to comply with the GGR institutionally at the global Secretariat level. However previous gag rules did significantly affect its programs as can be seen in figure 3 below.

Figure 3: How the expanded Mexico City Policy (2019)
Gagged Global Fund NGO Principal Recipients and Sub-recipients



Under the expanded MCP in 2019, many Global Fund Civil Society Principal Recipients (PRs) had to take a decision on whether to comply with the GGR or not, which also directly impacted on their sub-grantees⁷⁷. Analysis by amfAR (2019) suggests up to 12% of Global Fund resources (over \$1 billion) might have been subjected to the GGR- with Nigeria, South Africa, and Tanzania among the most affected countries in terms of the dollar amount. Importantly, the highest proportion of Global Fund programming affected by the expanded MCP (PLGHA) was for the most vulnerable populations – prevention programming for men who have sex with men (at 49%) and prevention programs for adolescents and youth in and out of school (at 39%) and removing Human Rights barriers to HIV services. These high percentages are a factor of having relatively few partners working in these areas and a large degree of overlap between the partners that USAID works with and the global fund.⁷⁸

Most Global Fund principal recipients are still governments, and in crisis situations the UN is responsible for a significant amount of delivery.⁷⁹ As a result, in the past the MCP has not applied to them. However, the Mandate for Leadership proposes ‘closing the loopholes’ and gagging governments and the UN. In addition, the Mandate proposes to gag PIOs directly which could mean directly gagging all global health organisations.

The implications are enormous⁸⁰. This harms relationships with other donors and recipients, as it is an imposition of regressive US policies on the taxpayer resources of other nations and infringes on the sovereignty of host countries.

The Mandate does not provide details on how Public International Organisations such as Gavi, the Global Fund, the Global Financing Facility would be asked to comply with an expanded MCP. In the Global Fund’s case it is not straightforward as the funds are administered at country level through Principal Recipients, and not managed by the Secretariat. If the Global Fund Secretariat was asked to ‘certify’ compliance with the MCP before entering into new agreements with the US government, this would be contentious and would presumably need to be agreed by the Global Fund Board and Technical Review Panel, posing considerable challenges for an organisation that prides itself on evidence informed interventions and as a leader on human rights. It will be important to proactively look at the possible implications of a gag for the main ‘health’ PIOs, the GFATM, GFF and Gavi.

Expansion 4 – Apply restriction to government-to-government bilateral agreements.

The fourth area of expansion calls on a future Republican Administration to use the **Geneva Consensus Declaration** as a cornerstone for its foreign policy and international assistance strategies. It proposes aligning all US foreign policy engagements with the GCD's principles, which include protecting life, promoting women's health, supporting the family as the basic unit of society and defending national sovereignty' (sic). This alignment is seen as a means to 'build a coalition of nations' that share these values and to shape the policies of international organisations accordingly by functioning as a united front and limiting bilateral assistance to those countries who are signatories.⁸¹

This proposal is a political tool, and while legally it may be difficult to put this in place, key informants suggested that pressure could be exerted on countries, particularly if those countries receive significant amounts of ODA and have progressive abortion laws (e.g. Mozambique). Most of these countries are those in Southern Africa that also receive large amounts of support for HIV. Once again suggesting that potentially HIV programming would be hit harder than other areas. There is a lot that could be done to support and prepare countries from a legal as well as financing perspective.

6. SUMMARY IMPLICATIONS FOR A NEW EXPANDED GLOBAL GAG RULE IN LINE WITH PROJECT 2025'S PROPOSAL

The full implications of such a massive expansion need to be fully worked out, but much has been learned from the MCP expansion in Donald Trump's first Administration. The new proposals in Project 2025 would be an order of magnitude greater than those implemented in 2017-2021. Six areas of impact are highlighted:

- **Weaken and silence civil society in countries at a time when they are countering polarisation and civic space is shrinking.** The GGR fractures and polarises civil society and human rights advocacy in countries. A massive expansion would cause chaos and confusion and divide countries into two camps. In addition to abortion information and services being impacted, it would affect those organisations working on maternal and child health, adolescent SRHR, HIV and human rights the hardest. Decades of work bringing governments and civil society together may be replaced by a reluctance to do joint projects due to uncertainty on whether the partner will be gagged or ineligible for US government funding. The expanded MCP, also silences civil society involved in policy, legal, governance, and accountability in health. This would be happening at the same time that anti-human rights, anti-gender movements are emboldened and when faith based groups are anticipated to receive additional funding (for example for Protego).
- **Substantially lower funds for SRHR will also directly impact the programs of European donors.** Analysis needs to be undertaken to understand the full scale and scope and in which the gag rule would impact on the programs supported by European partners.
- **Significant impact on the delivery of essential services.** Disruptions would create unacceptable service delays and a breakdown in integrated services and primary health care. In many settings there aren't many local organisations to work with. For example, if a local partner is no longer available to support adolescent SRHR because they are gagged it is not easy to find another. Many local actors are effective because they have built trust with communities and can not be easily replaced. When applied across all ODA this may have the effect of breaking down the system so substantially that it cannot be rebuilt.
- **Impacts vulnerable groups the hardest.** Earlier implementation of the GGR shows that vulnerable groups were hit hardest, for example in areas like youth-friendly services where trusted community relationships are paramount or in a context of a limited number of providers, such as in humanitarian settings.
- **Break down institutional structures.** Evidence from the application of the MCP has shown that the legacy of the gag rule lives on long after it is rescinded. Infrastructure and skills are lost and CSOs who have been gagged under previous administrations need to re-establish their systems and re-compete for projects and funding once the gag rule is lifted.
- **Have a 'chilling effect' on local organisations and country governments.** – The sheer complexity and misinterpretation of the MCP has led to many cases of over-implementation by organisations who fear falling foul of the rules. This is referred to as the chilling effect. If the MCP is expanded beyond health to all foreign assistance, the task of explaining it to partners with no background in health is enormous.

7. OVERALL CONCLUSION

Project 2025 is not a short-term plan but rather a strategy for decades. When it is combined with other strands of the anti-gender movements it is increasingly becoming a Gordian knot.

The implementation of Project 2025 poses significant challenges for global SRHR, human rights, and democratic values. In its new iteration the proposed further expansions to the MCP (while immensely damaging to SRHR) dismantles the international aid architecture well beyond health and weakens the fabric of societies.

Should Project 2025 and the expanded MCP be implemented it will have profound impacts on global official development assistance, foreign policy and human rights, well beyond the 4-year term of any Trump Presidency (should that come to pass).

Should Donald Trump take office in 2025, it will be impossible to stop the application of many of the policy proposals within the Mandate. With this in mind, perhaps the strategy is to come to collective agreement on the areas where partners can limit its impact, or slow down its implementation. This entails working with key partners in the US (including political partners) and entering into diplomatic negotiations. Collective agreement among progressive European and other partners will be essential.

European partners working on SRHR and gender equality globally need to consider developing long-term, proactive, coordinated 'big-tent' strategies to counter the effects of Project 2025. This includes raising awareness among like-minded governments in the global north and south, countering misinformation, leveraging influence through the multilateral systems to support comprehensive SRHR and human rights programs as well as funding the immediate gaps. An emergency fund or emergency response plan could be considered.

In terms of the MCP specifically, the tap-on and tap-off approach of the MCP is immensely damaging, and it is time for the world (led by countries in the global south) to consider long-term strategies that allow partners to stop being held hostage to it and to stop the imposition of this foreign policy impacting on local sovereignty.

Large-scale efforts to support and amplify the voice and leadership of countries and communities in the global south should be a priority. Some organising entities already exist and could be considered or repurposed as a convenor to bring countries in the global south together (for example there is a global coordinating body of CEOs for the National AIDS Commissions) to share information, influence governments and reach civil society.⁸² Countries themselves need to identify the principles of any strategy. Identifying entry points, such as through the Lusaka Agenda could allow partners to support global health and human rights agendas in a way that can permanently and positively reshape the power dynamics of international assistance.

This is ultimately a foreign policy issue. While it needs strong vocal support from actors in SRHR, it needs to be elevated to a higher level of diplomacy and have leadership from civil society organisations working in the area of human rights and democracy.

8. RECOMMENDATIONS – FOR EUROPEAN CIVIL SOCIETY AND GOVERNMENTS

At global, regional, and country level and across sectors – what is at stake is the years and years of infrastructure work that the human rights community has done to bring the indivisibility and the inter-dependence of human rights together. For women, when we're talking about human rights, there is almost always an element of SRHR that's relevant. That is why the opposition is targeting all aspects of cooperation and human rights. They know as a community that we have done a really great job of integrating SRHR services across all sorts of development assistance programs.

Rebecca Brown, Vice President Global Advocacy, Center for Reproductive Rights, Key Informant

The following recommendations were informed by the key informants.

Recommendation 1 - Meet the moment

A. Break down silos. Address the fragmented nature of the movement responding to global polarisation and Project 2025 and bring communities together under a 'Big-Tent' approach to ensure comprehensive and inclusive engagement across communities focused on access to safe abortion, LGBTQ+ rights and even climate⁸³.

B. Urgent Coordination. There is an urgent need for a stronger coordination infrastructure for analytical work, information sharing and action. European governments and CSOs should consider establishing and funding a time-limited umbrella coordinating structure or repurposing an existing forum to facilitate coordinated action. Some suggested that this should be housed in a platform focused on democracy or human rights rather than SRHR in order to elevate these issues in foreign policy circles. Or it could be situated as a consultancy. A coordinator could be hired on a time-limited basis.

C. Develop the Action Agenda. Map out which coalitions have formed, what action is taking place and where the gaps are. This could be organised by constituencies, to understand what action European governments are taking and through which fora and what action civil society are prioritising. Work with others to set up a tracking and monitoring system in advance so that the effects of MCP and other measures can be monitored and mitigated in real time, the impacts known and information shared quickly.

Recommendation 2 – Raise awareness of Project 2025 among European governments and amplify this to be a foreign policy priority

Elevate Project 2025 as a foreign policy issue that impacts democracy, human rights and sovereignty. Recognize and mitigate the financial, programmatic, and policy implications of Project 2025 and an expanded Global Gag Rule (GGR). Develop diplomatic, programmatic and community strategies to counter its influence, ensuring coordinated actions among like-minded donor countries. Recognize that the extension to gagging ODA from other countries is an imposition of regressive US policies on the taxpayer resources of other nations.

Note that Project 2025 does not plan to create a vacuum, but rather to create a space to fill with faith based and private sector responses. The starting point for action is to look at the countries that are most likely to be affected (such as those with a higher dependence on US funding).

Recommendation 3 – Counter Mis-Information

Implement proactive, systematic, and large-scale plans to counter misinformation at country, regional, and global levels, including misinformation on human rights provisions. Should the MCP policy be re-applied, ensure that clear and transparent information is provided to local organisations, governments and PIOs, along with mitigating strategies to limit the 'chilling effect'.

Recommendations 4 – Work closely with Global Public International Organisations (such as the Global Fund, Gavi and the Global Financing Facility) supporting them to prepare and be vocal in defence of human rights and the impacts for these policies.

Encourage PIOs (starting with the health-related ones, Global Fund, Gavi, GFF) to prepare, defend and raise awareness of the human rights impacts associated with the implementation of Project 2025. This should include conducting organisational legal assessments on the application of MCP and regressive anti-LGBTQ+ policies. Support PIOs to issue proactive statements ensuring non-discrimination against SRHR and LGBTQ+ organisations, principal recipients, and sub-recipients. PIOs should conduct and release public impact analyses on the effects of past MCP implementation and document future impacts^{82 83}. European governments and CSOs should use their positions on global boards and technical review panels, program policy committees, etc to assist PIOs in these efforts. Similar action should be taken in support of UNFPA and UNAIDS given that analysis shows that local actors engaged in SRHR and HIV programming have been hit the hardest.

Recommendation 5 – European and other partners should establish an emergency fund (or enhance an existing mechanism). This is necessary to protect and grow civic space and expand gender responsive and human right programs in support of LGBTQ+ and other CSOs in partner countries who will lose US funding because they refuse to be gagged. Map and quantify the potential gaps and impacts before the gaps occur. Have unified multi-donor discussions.

Recommendation 6 – Humanitarian – Undertake analysis and be prepared to fill the gaps for humanitarian action, the impacts in this area would be immense and hit the most vulnerable populations the hardest. Consider the impacts on UNFPA's humanitarian program and cover the defunded portion of UNFPA's budget. Without this the overall humanitarian response with local actors will be significantly weakened.

Recommendation 7 – Redouble efforts to build and support the infrastructure for a progressive Gender and SRHR movement with governments and other actors leading from the Global South – The funding and political support of European Governments is critical but substantial support is also needed for coordinated voice and actions from governments and civil society in the global south. Partners in Europe can work hand in hand with key allies, while letting them lead. Mexico, Columbia, Sierra Leone, Nepal, Thailand, Cabo Verde, South Africa for example – can be further supported to have a global voice to disrupt the incorrect narrative and link with other countries in the global south. Find the existing spaces in the global south where coordinated action is already happening. In terms of the MCP specifically, the tap-on and tap-off approach of the MCP is immensely

damaging. It is time for the world (led by countries in the global south) to consider long-term strategies that allow partners to stop being held hostage to it. Countries where abortion is legal in some circumstances and where the gag rule is at odds with the legal provisions, should be supported to speak out about the US, disregard for local sovereignty. Encourage organisations not to accept to be gagged, and help them organise locally.

Recommendation 8 – Leverage the influence of European governments through multilateral systems, International Financial Institutions etc. This helps position positive coordinated voices for human rights and dignity on multilateral platforms and provides a platform to leverage additional funding.

By implementing these recommendations European civil society and governments can help proactively address the challenges posed by Project 2025, support global human rights and SRHR initiatives, and ensure that local voices are empowered and at the forefront of shaping the laws, policies and programs that affect their communities.

ANNEX 1: 13 KEY INFORMANTS

1. Center for Reproductive Rights

Rebecca Brown, Vice President, Global Advocacy

2. EngenderHealth

Traci Baird, President and CEO

3. European Parliamentary Forum

Neil Datta, Executive Director and Founder

4. FosFeminista

Kemi Akinfaderin, Chief Global Advocacy Officer / Shiphrah Belonguel

5. The Global Fund

Dianne Stewart, Deputy Director and Head Donor Relations

6. The Global Project Against Hate and Extremism (GPAHE)

Heidi Beirich, Chief Strategy Officer and Co-Founder

7. IPAS

Gillian Kane, Senior Technical Manager for Policy and Advocacy /
Jennifer Davies, IPAS UK Director

8. Planned Parenthood Foundation of America (PPFA)

Caitlin Horrigan, Senior Director Global Advocacy/ Christina Krysinki,
Associate Director Global Advocacy

9. Preclusion Project

Beirne Roose-Snyder, Senior Director

10. UNFPA

Klaus Simoni Pederson – Chief Resource mobilisation

11. WHO/HRP

Aasa Hanna Mari Nihlen, Human Rights Advisor

*Other People / agencies were not in a position to be cited in the report.

FOOTNOTES

¹ This report by drawing heavily on the expertise and analysis of key informants and organisations

² [The Heritage Foundation](#)

³ [The Project 2025](#)

⁴ What is project 2025? The Council for Global Equality, February 2024 and The Global Project Against Hate and Extremism, Fact Sheet, Project 2025 A Primer.

⁵ *“Pornography, manifested today in the omnipresent propagation of transgender ideology and sexualization of children, for instance, is not a political Gordian knot inextricably binding up disparate claims about free speech, property rights, sexual liberation, and child welfare. It has no claim to First Amendment protection” Project 2025, page 5*

⁶ [The Mandate for Leadership](#) Chapter 9.

⁷ [KFF What the Election Could Mean for the Mexico City Policy and U.S. Foreign Aid](#) May 30th, 2024

⁸ [The Institute for Women’s Health](#)

⁹ Phillips-Fein, Kim, “The Mandate for Leadership, Then and Now”, The Nation, June 4, 2024

¹⁰ Adler-Bell, Sam, “[The Shadow War to Determine the Next Trump Administration](#)” The New York Times, Jan 10, 2024

¹¹ Trump took a private flight with Project 2025 Leader in 2022, The Washington Post, Aug 2024 <https://www.washingtonpost.com/elections/2024/08/07/trump-heritage-project-2025-roberts/> downloaded 15th Aug 2024

¹² “Trump claims not to know who is behind Project 2025”. CNN. 11 July 2024. Downloaded 15th Aug 2024 <https://edition.cnn.com/2024/07/11/politics/trump-allies-project-2025/index.html> An insight into how some authors to the Trump Administration are described further below in the section on the Geneva Consensus Declaration

¹³ “Inside Project 2025’s Secret Training Videos”. Propublica. 10th Aug 2024. Downloaded 20th Aug 2024 <https://www.propublica.org/article/inside-project-2025-secret-training-videos-trump-election>

¹⁴ Alex Shephard. “Read J.D. Vance’s Violent Foreword to Project 2025 Leader’s New Book”. The New Republic. July 30th 2024. <https://newrepublic.com/article/184393/jd-vance-violent-foreword-kevin-roberts-project-2025-leader-book>

¹⁵ The Heritage Foundation 5 [Things You Can Do Right Now to Help Dismantle the Federal Bureaucracy](#), Aug 2023

¹⁶ Smith, David, The Guardian, [Trump’s Project 2025 plot would take ‘wrecking ball’ to US institutions, key democrats warn](#) 11 June 2024 and key informant Interview Heidi Beirich, Global Project Against Hate and Extremism.

¹⁷ The Mandate for Leadership, page 9

¹⁸ An example in programmatic work is the Institute for Women’s Health – Framework for Holistic Women’s Health.

¹⁹ The Mandate for Leadership, page 262 and Podcast, digital politics, Raising Alarm About the Mandate for Leadership with Anne Christine Stop the Coup 2025, Jan 22, 2024.

²⁰ [Report of the Commission on Unalienable Rights](#) and The Mandate

²¹ The Mandate for Leadership (throughout) but specifically pages 260-265

²² President Donald J. Trump, Executive Order 13957, “[Creating Schedule F in the Excepted Service.](#)” [October 21, 2020, in Federal Register, Vol. 85, No. 207](#) (October 26, 2020), pp. 67631–67635

- ²³ The Mandate for Leadership, page 271,
- ²⁴ Global Project Against Hate and Extremism – Project 2025, the road to authoritarianism A Primer – Fact Sheet 2024
- ²⁵ The Mandate for Leadership, page
- ²⁶ The Mandate for Leadership, page 191, 265, 268, 269
- ²⁷ The Mandate for Leadership, page 8
- ²⁸ The Mandate for Leadership, page 62 and the [White House Gender Policy Council](#)
- ²⁹ The Mandate for Leadership, page 258, 259
- ³⁰ The Mandate for Leadership, page 258 (DEI) 584 (Sex Discrimination)
- ³¹ The Mandate for Leadership, throughout and page 451
- ³² The Mandate for Leadership, page 89, 187
- ³³ [The White House Statement December 11 2023](#)
- ³⁴ The Mandate for Leadership, page 192
- ³⁵ Kane, Gillian IPAS [Project 2025 is Already Here](#), In these times, April 2024 and The Mandate for Leadership
- ³⁶ Map from the [Institute for Women's Health](#)
- ³⁷ Protego: Operationalizing the Geneva Consensus, Ipas, 2024
- ³⁸ [The Institute for Women's Health](#)
- ³⁹ Ibid
- ⁴⁰ Kane, Gillian, IPAS [Project 2025 is Already Here](#), In these times, April 2024
- ⁴¹ The Mandate page 265
- ⁴² 2020 Open Democracy [Interactive site exploring US Christian right dark money](#)
- ⁴³ Okereke, Caleb, "[How US Evangelicals Helped Homophobia Flourish in Africa](#)," Foreign Policy, March 2023
- ⁴⁴ Mcshane, Julianne, [Uganda cited Dobbs in an Anti-LGBTQ Crackdown. Americans should worry too](#). 4th April 2024, Mother Jones.
- ⁴⁵ Matsumoto, Rio, The Latest Must-Pass Bill Barreling Through Congress is an Attack on Gender-Affirming Care, 16 November 2023, ACLU
- ⁴⁶ [OECD-DAC](#) ODA statistics
- ⁴⁷ [OECD-DAC](#) ODA statistics
- ⁴⁸ KFF: [The US Government and Global Health](#): 28 May, 2024
- ⁴⁹ KFF: [Donor Government Funding for Family Planning in 2022](#)
- ⁵⁰ [Donors Delivering for SRHR Report 2024](#) (2022) DSW
- ⁵¹ [Donors Delivering for SRHR Report 2024](#) (2022) DSW
- ⁵² KFF [In 2022, Donor Governments Spent US\\$8.2 billion on Efforts to Fight HIV/AIDS Globally](#), July 2023
- ⁵³ Schaaf, Marta et. al, *Protecting Life in Global Health Assistance? Towards a framework for assessing the health systems impact of the GGR*, BMJ July 2019

⁵⁴ Under the policies definition “abortion as a method of family planning includes abortions for any reason other than when the pregnancy arose from rape or incest or if carrying the pregnancy to term would endanger a woman’s life”. However, in practice, lack of understanding of the policy or fear of falling foul of it meant the policy has been interpreted as a total ban on abortion. The policy does not provide for exemptions to protect the health of a woman or pregnant person or for foetal abnormalities. Foreign NGOs are prohibited from providing, counselling, or referring for abortions in these circumstances while receiving U.S. GHA. Moreover, expansions of the MCP meant that any fNGO subject to the Policy must include the same restrictions on any of their sub-recipients of funding, even if those sub-recipients are not in receipt of US funds AmfAR – Issues Brief November 2019, *The Expanded Mexico City Policy: Implications for the Global Fund*

⁵⁵ Ahmed, Zara, *The Unprecedented Expansion of the Global Gag Rule: Trampling Rights, Health and Free Speech*, Guttmacher Policy Review Vol 23 2020

⁵⁶ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund, November, 2019](#)

⁵⁷ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund, November 2019](#), page 47

⁵⁸ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund](#), November 2019

⁵⁹ The Kemp-Kasten Amendment was first applied in 1985 and states that no U.S. funds may be made available to any organisation or program which, as determined by the president of the United States, supports or participates in the management of a program of coercive abortion or involuntary sterilisation. Multiple sources including, KFF, Global Health Policy, [UNFPA Funding & Kemp-Kasten: An Explainer, 30 Sept 2022](#)

⁶⁰ The Mandate for Leadership, page 261, 190-192

⁶¹ Repealing the Helms Amendment completely is an important advocacy point for US NGOs

⁶² Key informant Interview, CRR

⁶³ S. 137, [Protecting Life in Foreign Assistance Act](#), 117th Congress, introduced January 28, 2021, (accessed January 20, 2023), and H.R. 534, [Protecting Life in Foreign Assistance Act](#), 117th Congress, introduced January 28, 2021, (accessed January 20, 2023).

⁶⁴ KFF, What the Election Could Mean for the Mexico City Policy and U.S. Foreign Aid May 30th, 2024 https://www.kff.org/global-health-policy/issue-brief/what-the-election-could-mean-for-the-mexico-city-policy-and-u-s-foreign-aid/?utm_campaign=KFF-Global-Health-Policy&utm_medium=email&_hsenc=p2ANqtz-8VpUYzGSaJKStoK

⁶⁵ There are other areas of expansion such as the extension to contracts, potential for retroactive review under the section ‘righting the ship’ page 174 which are beyond the scope of this analysis.

⁶⁶ Interagency Steering Committee on Reproductive Health in Crisis, [Minimum Intervention Service Package](#)

⁶⁷ Ahmed, Zara, [The Unprecedented Expansion of the Global Gag Rule: Trampling Rights, Health and Free Speech](#) Guttmacher Inst. Volume 23,2020

⁶⁸ Schaaf, [Marta, Protecting Life in Global Health Assistance? Towards a framework for assessing the health systems impact of the expanded Global Gag Rule](#) BMJ Global Health, 13 July 2019

⁶⁹ [PAI and WaterAID](#) How the Expanded Global Gag Rule Affects Water, Sanitation and Hygiene, October 2019

⁷⁰ amfAR [The Expanded Mexico City Policy: Implications for the Global Fund](#), November 2019

⁷¹ The Mandate for Leadership, pages 190-193, page 261

⁷² CFR, [Funding the United Nations, how much does the US pay?](#) Latest update 29 Feb 2024

⁷³ [Annual pledge](#) (total three-year pledge 2023-25 is 6 billion).

⁷⁴ https://donortracker.org/donor_profiles/united-states (24th June 2024)

⁷⁵ https://donortracker.org/donor_profiles/united-states (24th June 2024)

⁷⁶ UNFPA Key Informant Interview

⁷⁷ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund](#), 2019

⁷⁸ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund](#), 2019

⁷⁹ Exact figures need to be received from the Global Fund.

⁸⁰ amfAR, [The Expanded Mexico City Policy: Implications for the Global Fund](#), 2019

⁸¹ The Mandate for Leadership, page 192, 260

⁸² SheDecides, IPPF etc.

⁸³ Disengaging internationally from work to support the climate crisis is also featured in Project 2025 but was beyond the scope of this report.

⁸⁴ amfAR in 2019 [The Expanded Mexico City Policy: Implications for the Global Fund](#), 2019
"In nominating prime recipients for Global Fund grants, CCMs should be cognizant of the implications of choosing a prime recipient that is or may become restricted by the Expanded Mexico City Policy and how that may affect sub-recipients that can be partnered with to perform grant activities."

⁸⁵ Ibid

RFSU's aim, since it was founded in 1933, has been to give people the means to change their lives for the better.

RFSU is a nonprofit organisation independent of any political party or religion. We are dedicated to promoting a well-informed, open-minded attitude about sexuality and relationship issues. RFSU is founded on a firm belief that sexuality and relationships are central to the individual and to society. By informing and educating people and shaping opinion, RFSU aims to break down prejudices, overcome ignorance and improve sexual health in Sweden and abroad. RFSU views sexuality as a matter of individual liberty and human rights, in which all of us have the freedom to be ourselves, the freedom to choose and the freedom to enjoy.

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