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A 'PAINFUL' CHOICE

An NIH Grant Is Restored, With a Catch: Cut a Study on Trans Youth

By Stephanie M. Lee May 21, 2025



ILLUSTRATION BY THE CHRONICLE; ISTOCK

In March, the National Institutes of Health terminated grants to an HIV-research network it had funded for decades, devastating the scientists who were conducting studies under its umbrella.

One of those scientists, Kristi Gamarel at the University of Michigan, learned last week that the program was getting its funding back. But her study, about transgender youth of color, was not.



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The federal government, Gamarel was told, had "specifically identified" her research as "not compatible with current NIH priorities."

The Adolescent Medicine Trials Network for HIV/AIDS Interventions, also known as ATN, has been NIH-backed since 2001, when it formed with the goal of preventing, diagnosing, and treating HIV infections and AIDS in young people. Last year, the agency awarded a total of nearly \$22 million to multiple universities to operate the ATN and more than a half-dozen research projects, including Gamarel's, under its umbrella, records show.

In an email last Thursday, ATN's leaders informed Gamarel that the program would resume without her. They wrote that while the NIH's requirement was "not unexpected, it was painful for many reasons."

"I don't believe they wanted to do this by any means," said Gamarel, an associate professor of health behavior and health equity. "But they had to look out for the larger network."

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The move marks yet another effort by Trump's administration to eliminate what it considers ideologically slanted research. After months of unprecedented funding cuts, grants are now being withheld from scientists and universities unless they agree to neither study nor recognize transgender people. The partial resurrection of the ATN illustrates that compliance comes at a cost.

That is a top priority of President Trump, who directed the government in an executive order to recognize two sexes, male and female, on the first day of his second term. The NIH proceeded to cancel <a href="https://doi.org/10.21/2016/journal.org/10.21

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Similar language has been wielded to slash and burn in other research areas, potentially totaling upwards of \$2.5 billion. The NIH cut the ATN's grants on the rationale that "so-called diversity, equity and inclusion ('DEI') studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans," according to *Stat*.

An NIH spokesperson said that the Department of Health and Human Services and the NIH are complying with Trump's executive order against what he called "gender ideology extremism." "NIH remains dedicated to restoring our agency to its tradition of upholding

gold-standard, evidence-based science," the spokesperson wrote in an email. "As we begin to Make America Healthy Again, it's important to prioritize research that directly affects the health of Americans. We will leave no stone unturned in identifying the root causes of the chronic disease epidemic as part of our mission to Make America Healthy Again."

The ATN was in the third year of seven-year research grants focused on topics like a potential new product to <u>prevent both HIV and pregnancy</u>, and a behavioral-based approach to reducing HIV transmission in <u>young men who use stimulants</u>. In March — by the end of which the NIH had scrapped <u>more than 200 HIV/AIDS grants</u> — the ATN's leaders said they were "heartbroken." "I don't know how anything we do could be conceived as DEI," one told <u>Roll Call</u>. "We serve all youth. Infectious diseases, STIs, they don't discriminate. And neither do we."

Adolescents and young adults account for about <u>one-fifth of new HIV diagnoses</u> in the United States. Transgender people <u>made up 2 percent of new infections</u> in 2019, and most were Black and Hispanic as well as ages 13 to 34. In his first term, Trump pledged to <u>end the nation's HIV epidemic</u> by 2030.

Along with Sari Reisner, an associate professor of epidemiology at Michigan, Gamarel had been setting up peer advising, legal support, financial education, and other services for trans youth of color between ages 15 and 24. Researchers planned to follow 250 participants for a year and track whether access to these resources lowered HIV infections and improved health outcomes in those with the virus, Gamarel said.

The study received strong scores in peer review, she said, and was partnering with organizations in the seven cities where it was going to take place. Then on January 31, the NIH notified the ATN that it was putting a stop-work order on Gamarel's project specifically, she said, and the cuts to the rest of the ATN followed on March 21.

"We're not giving hormones to children," she said. "It was literally, 'How do we follow the epidemiology and what we know are factors that lead to HIV acquisition and not being engaged in HIV treatment among these young people?"

Some states have sued over Trump's "gender ideology extremism" executive order and temporarily won back funding for LGBTQ+ research. At first, Gamarel said, she'd hoped that all the scientists involved with the ATN would band together to preserve the network. She said she wasn't involved in the conversations between the NIH and the ATN's leaders: Lisa Hightow-Weidman, a professor at Florida State University, and Sybil Hosek, a research professor at the University of Illinois at Chicago.

"While it's celebratory to have ATN reinstated, this moment has made collaboration in trans health increasingly fraught — and that's not accidental."

Their May 15 email to her started with the good news. "Very soon we will be distributing an announcement that the ATN Scientific Leadership Center award has been reinstated," they wrote. "However, it comes with mixed feelings that we wanted to share with you in advance."

They explained that "in order to reinstate the ATN, NIH required us to eliminate components of the network that are not compatible with current NIH priorities, and they specifically identified the ATN 167 LEAP protocol" — Gamarel's study. The leaders did not name which other elements had to be eliminated.

According to Gamarel, her study had more than \$3 million in unspent funds. The ATN leaders wrote that the NIH "required us to return those funds rather than reallocate or save them."

"It's wonderful the ATN was reinstated," Gamarel said. And "the situations these investigators are placed in are awful."

Arjee Restar, an epidemiologist at Yale University who was going to be a co-researcher of the study, said by email that "while it's celebratory to have ATN reinstated, this moment has made collaboration in trans health increasingly fraught — and that's not accidental."

She continued: "It's revealing the depth of people's commitments to equity, not just in principle but in practice. It's also exposing the conditional and fragile nature of allyship, especially as initiatives like Project 2025 are deliberately structured to disrupt and disconnect solidarity and dismantle collective efforts toward justice."

Reached for comment, Hosek shared the text of an email that she and Hightow-Weidman had sent to the ATN. "We are extraordinarily grateful for the tremendous advocacy in response to the ATN termination, including bipartisan support at the local and national levels and strong backing from our institutions," they wrote. "We have had to make some difficult changes to the network in order to align with new NIH priorities, but we remain appreciative of the opportunity to continue to engage adolescents and young adults in prevention and treatment research."

Their message, sent last Thursday, noted that while the funding for the network's leadership center had been reinstated, funding for its operations was still under review, so the ATN's research could not yet begin. (Hightow-Weidman did not return a request for comment.)

Scientists seeking funding are increasingly being required to comply with the administration's stance on trans people, even when their research isn't about that population. Over the last month, the NIH has issued some grants on the condition that grantees follow Trump's anti-transgender executive order.

A scientist at a research university in the South told *The Chronicle* that an NIH program officer recently gave her "deeply disturbing" instructions on how to fill out paperwork to get grant money released. She said she was told to remove the following: language that could be considered gender-affirming or related to gender identity, such as "Latinx" and "sex assigned at birth"; mentions of training activities about gender-minority health; and plans to collect and analyze data on gender identity. The officer also recommended toning down references to racism and using the word "various" instead of "diverse," the scientist said.

"I had to sit with it a while to really unpack what was being asked of me," said the scientist, who requested to speak anonymously because she feared possible consequences of discussing her situation publicly. "I had to decide if I wanted to comply." For now, she's decided to do so. It feels "terrible."

"I feel like the entire exercise of cleaning these documents was just trying to convince myself that it's just language on a page and this isn't going to become the way that I practice research," she said. She worries that under this pressure, "we're going to see kind of everyone give up on equity work."

Days before the ATN news arrived, Gamarel had published an editorial calling the moment "a crisis for HIV science." "Institutions and researchers must resist all forms of trans erasure, elevate trans leadership, and prioritise equity — not as rhetorical gestures but as foundational principles of HIV science and ethical practice," she and her co-authors wrote in *The Lancet*, a scientific journal. The essay was inspired partly by Gamarel's grief at losing funding the first time around.

"Now," she said, "it feels like that all over again."

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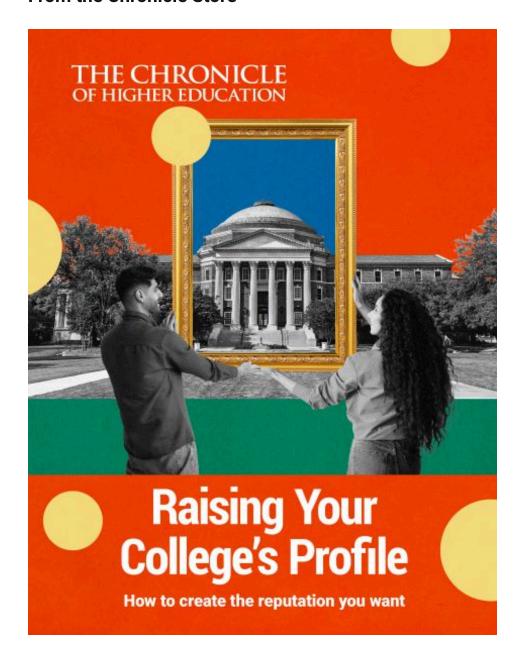


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