

## Governmental Changes and Their Impact on Health Equity Presented to the 119th U.S. Congress | February 5, 2026

**Protecting health equity amid shifting governmental changes is a priority.** Recent federal policy shifts threaten decades of progress toward health equity, particularly for Black Americans. Cuts to community health programs, weakened civil rights enforcement, and restrictions on Medicaid and reproductive health access risk widening disparities in maternal health, chronic disease, and mental health outcomes. Nurses play a vital role in advancing health equity through care, education, advocacy, and community leadership, but we cannot do this work alone. Congress must act now to prevent widening disparities and ensure every person's right to equitable health care, regardless of race, income, or zip code. The **National Black Nurse Association, Inc. (NBNA), representing over 308,000 Black nurses nationwide**, calls on Congress to act decisively to protect vulnerable communities and uphold the principle that health equity is a national priority.

### Policy Priorities for Congressional Action

1. **Reverse cuts to community-based public health programs** by increasing funding for HRSA Health Centers and community health workers and expanding programs targeting maternal health, chronic disease, mental health, HIV, and infectious disease prevention in underserved areas.
2. **Protect Medicaid Expansion and health coverage** by blocking proposed Medicaid work requirements and maintaining Medicaid expansion incentives under the Affordable Care Act, which disproportionately benefit Black and low-income communities.
3. **Reinforce Civil Rights protections in health care** by strengthening and enforcing anti-discrimination provisions under Section 1557 of the ACA to protect against racial, gender, and language-based bias in health care settings.
4. **Support reproductive justice and access to comprehensive care** by ensuring federal protections for reproductive health services, maternal care, and contraceptive access.
5. **Reverse cuts to U.S. federal HIV prevention funding**, unfreeze foreign aid including President's Emergency Plan for AIDS Relief (PEPFAR), reestablish USAID, and budget proposals for domestic CDC HIV prevention programs and increase Ryan White HIV/AIDS Program funding.

### Why This Matters

- **Over 60% of Black Americans** live in states that have restricted or denied Medicaid expansion or reproductive health access.<sup>1</sup>
- **Cuts to community health programs** directly impact access to preventive care, cancer screenings, mental health services, and chronic disease management.<sup>2</sup>
- Without dedicated policy action, **these shifts risk reversing years of progress** in reducing racial health disparities.<sup>3</sup>
- **Cuts to federal HIV prevention funding** will have immediate and severe consequences impacting research, care, and services for vulnerable populations. State governments rely heavily on these funds, and **89%** of HIV prevention dollars directly support state health departments and community-based organizations.<sup>4</sup>
- Disruptions in funding may result in a considerable increase in HIV, viral hepatitis, STI's and tuberculosis cases.<sup>4</sup>

### References

1. Kaiser Family Foundation. (2025). *Medicaid Expansion and access to care*.
2. Trust for America's Health. (2025). *Shortchanging public health: Impacts of underfunding*.
3. HHS Office for Civil Rights. (2023). *Protecting Civil Rights in healthcare settings*.
4. HIV +Hepatitis Policy Institute. (2025). *Hepatitis prevention rolled into state block grant*.