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U.S. Hints at Pressure On Zambia to Trade Health Aid for Minerals

By STEPHANIE NOLEN

LUSAKA, Zambia — The State Department is considering withholding lifesaving assistance to people with H.I.V. in Zambia as a negotiating tactic to force the government of the southern African country to sign a deal giving the United States more access to the country's critical minerals.

"We will only secure our priorities by demonstrating willingness to publicly take support away from Zambia on a massive scale," a draft of a memo prepared for Secretary of State Marco Rubio by the department's Africa Bureau staff says. A copy of the memo was obtained by The New York Times.

Some 1.3 million people in Zambia rely on daily H.I.V. treatment that is provided through the decades-old U.S. President's Emergency Plan for AIDS Relief, s or PEPFAR, and on tuberculosis and malaria medications that save tens of thousands of Zambian lives each year. The Trump administration is considering whether to "significantly cut assistance" as soon as May, to increase pressure on Zambia, the memo says.

In the wake of the Trump administration's broad cut to foreign aid last year, the State Department has been pushing countries to sign new agreements pledging to meet certain conditions to receive American funds. Twenty-four countries have signed agreements so far, worth a total of $20 billion in health aid over five years. In most cases, the main requirement on the recipient country is that its government commit to increasing its own health spending.

While most countries have signed, Zimbabwe's government recently walked away from negotiations, saying demands about data and biological sample-sharing were an intolerable infringement on sovereignty. Activists in Kenya have taken that country's deal to the courts over similar concerns.

Unlike the other agreements, which are limited to funding for health programs, the United States is trying to use the deal it is negotiating with Zambia to address a longtime source of frustration: what is sees as China's unfettered access to the country's mineral wealth. Zambia is one of the world's major copper producers and also has huge reserves of minerals like lithium and cobalt.

While the terms of the deal have not been made public by either government, a draft of the health component seen by The Times says the United States proposes to give Zambia $1 billion in health funding over five years if Zambia commits to $340 million in new health spending of its own. This is less than half the amount of health assistance Zambia received before the Trump administration took office.

The second piece is an agreement on steps that would give American businesses more access to Zambia's mineral deposits and, by extension, end what the United States sees as China's preferential access to Zambian mines.

The third is a renegotiation of a contract with the Millennium Challenge Corporation, a U.S. foreign-assistance agency focused on economic governance. The original contract, signed in 2024, gave Zambia a $458 million grant to support its agricultural sector. The Trump administration wants it restructured to require regulatory changes in mining and other industries.

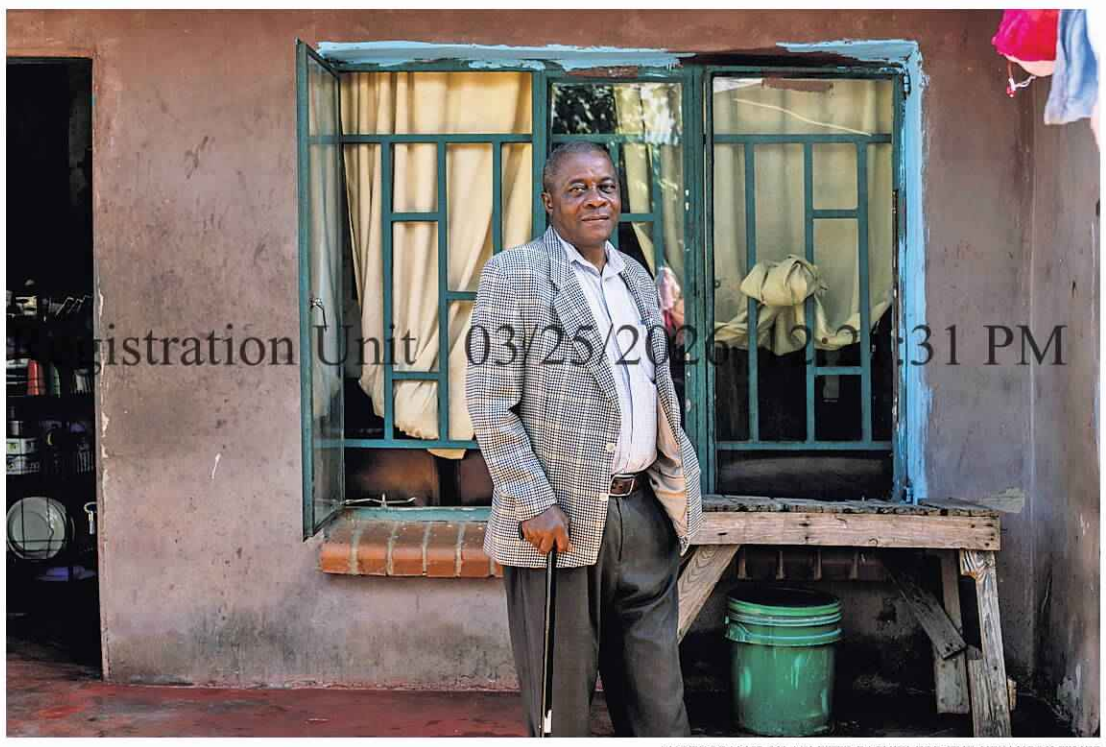
Zambia will need to agree to all three by May in order to keep a portion of the health aid it now receives through PEPFAR, the draft memo suggests.

The State Department declined to respond to questions about the memo. Responding to questions from The Times, the department's press office said by unsigned email that it would not comment "on purportedly leaked documents or on deliberative diplomatic discussions."

Cornelius Mweetwa, Zambia's minister of information and its chief government spokesman, declined to comment on the negotiations.

The Trump administration had expected Zambia to sign late last year, when other African countries were agreeing to contracts, and officials traveled from Washington to Lusaka, the Zambian capital, to try to close the deal.

But it remains unfinished, and the administration's frustration has grown with Zambia — a country with an immense foreign debt burden that has long been dependent on foreign aid and cheap loans from China.



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Julius Kachidza, an advocate for people with H.I.V. in Chongwe, Zambia, said he could not afford treatment: "I barely eat a meal a day." Left, unloading medicine at the Chipulukusu Health Center.

The draft memo prepared for Mr. Rubio says that getting the agreement signed would involve "the potential use of sticks" and warned that Zambia could not be allowed to backtrack because other countries were watching.

If Zambia won't sign, "sharp public cuts to U.S. foreign assistance would significantly demonstrate to aid-receiving countries the seriousness of our interest in collaboration and our insistence on tangible benefits under our America First foreign policy," the draft memo says.

Zambia has been one of the largest recipients of PEPFAR assistance — more than $6 billion — in the past two decades. When the assistance began, during the administration of George W. Bush, 90,000 people a year were dying of H.I.V. in Zambia, and the health system was overwhelmed.

The Zambian government has been taking over some of the H.I.V. programs since the Trump administration's cuts to aid began last year. Nevertheless, everything from the essential medicine supply chain to the medications that stop babies from being infected with H.I.V. at birth still relies on U.S. financial and logistical support.

The Trump administration has already wielded a heavy cudgel to advance the talks, according to the memo.

In December, the United States suspended health funding talks when Zambia wasn't engaging on the mineral issue, the memo says.

"At every point in the negotiation, we communicated what the G.R.Z. would lose if they failed to act," the memo says, referring to the Government of the Republic of Zambia. "Repeatedly, we needed to threaten or actually withdraw assistance important to the GRZ to elicit progress on our priorities."

More recently, the memo says, the State Department notified the Zambian government that it would cancel a planned deal that would have relieved Zambia of hundreds of millions of dollars in foreign debt payments, an amount roughly equivalent to half of what the country receives in health aid.

"Within days, the Zambian Mines Minister explicitly reversed course, telling USG officials the GRZ is amenable to negotiating preferential access, and the GRZ gave USG technical experts unprecedented access to their mining database," the draft memo says.

There is a limited presence of American companies in Zambia. Corruption levels are high — the official recently appointed by the president to lead a new anticorruption effort was herself under investigation for graft — and the process of obtaining licenses and permits is onerous and convoluted.

Would-be investors from the United States, Canada and Europe have long complained that Chinese companies bribe senior officials to obtain mining licenses, and smuggle out much of what they produce without paying taxes, viewing the occasional small fine as a cost of doing business.

The proposed bilateral compact would require Zambia to undertake significant reform of the governance of minerals and other key sectors.

The draft memo notes that the health of Zambia's democracy has frayed under President Hakainde Hichilema, and that the silencing of opposition has limited public criticism. However, transparency and human rights organizations are using the country's freedom of information system to try to make the proposed health agreement public.

They are chiefly concerned with a provision in the draft deal that requires Zambia to share its citizens' health data with the United States for 10 years, although the United States pledges health funding for only five; and to share biological specimens collected through disease surveillance for 25 years, with no guarantee Zambia would have access to any product of research done with those samples, such as development of a vaccine.

Rumors about the negotiations have spread through Zambia, and they are wrenching for people dependent on the U.S.-supplied antiretroviral medications, or ARVs, they take each day.

"If they told me to be buying ARVs, the fifty kwacha, or a hundred, that's four or five dollars per month, even three dollars, where am I going to get it?" asked Julius Kachidza, a 56-year-old advocate for people living with H.I.V. who lives in Chongwe, near the capital. "I barely eat a meal a day."

Mr. Kachidza was diagnosed with H.I.V. in 2001 and was near death when he first got access to the drugs. His wife, who was also H.I.V.-positive, died 15 years ago. A son who was born with the virus is now in his 20s and also reliant on U.S.-financed medication.

"If this agreement is not signed, if the funding is not here for the next five years, government has got no capacity to respond to that immediate impact," he said.

Perhaps, over five years, the government might successfully take over the program, but an abrupt slash in funds, like the country saw last year when the Trump administration took office, would be apocalyptic, he said. "It could be quite a disaster, especially to me. And the majority of people living with H.I.V. in Zambia."

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In 1998, the Good Friday Agreement was signed, with the support of Irish-America. It provides a peaceful and democratic pathway to Irish Unity.

In 2025 the Irish Parliament unanimously called on the Irish Government to plan and secure a date for the Unity Referendums provided for in the Good Friday Agreement.

This Saint Patrick's Day, we call on the Irish government to **establish Citizens' Assemblies** to encourage the conversation on the shape of the New and United Ireland.

We urge the Irish and British governments to honor the commitment in the Good Friday Agreement and **set a date for Unity Referendums**.

IT'S TIME FOR THE PEOPLE TO HAVE THEIR SAY.

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