



Record of the Australian Support for Pacific HIV Action (ASPHA) Information and Q&A session on 20 January 2026

Summary of ASPHA information and Q&A

Enquiries relating to ASPHA

DFAT welcomes questions relating to the ASPHA call for proposals (CfP) beyond the information and Q&A session to the [CHS inbox](#). DFAT will continue to accept questions relating to this CfP up until 8 February 2026. Responses to questions will be published on [DFAT's Business Notifications page](#) by 13 February 2026. The closing date for submissions to the ASPHA CfP is 23:59 AEDT 22 February 2026.

ASPHA monitoring, evaluation and learning (MEL) framework

This CfP, which invites proposals to deliver on the National Systems and Community streams, requests that applicants include in their proposals a program logic, supported by a robust monitoring, evaluation and learning (MEL) framework and gender equality, disability equity and social inclusion (GEDSI) approach. DFAT will establish coordination mechanisms and facilitate discussions between partners managing each stream to develop a program logic, MEL framework and GEDSI action plan for the ASPHA initiative as a whole.

Consulting with countries and ministries

DFAT does not expect applicants to undertake consultations at the proposal development stage and requests partners to refrain from contacting Ministries of Health, HIV task forces and community organisations in Fiji and/or other Pacific island countries (PICs), some of which are under acute pressure responding to HIV outbreaks. A document detailing priorities for support has been developed by Fiji's Ministry of Health and Medical Services and is available by contacting chs@dfat.gov.au. Successful applicants will have the opportunity to undertake consultations during the implementation phase.

Applicant- and eligibility-related questions

It is clear that multilateral organisations and intergovernmental agencies are not eligible to apply or be partners. Can you advise whether SPC falls under this category?

Section 2 of the [ASPHA Guidelines](#) covers eligibility criteria. Point 2.2 states that an eligible organisation is a non-governmental organisation, civil society organisation, a university, a research institution or a Pacific regional organisation. As a Pacific regional organisation, the Pacific Community (SPC) is eligible to apply.

How about community-led organisations for affected communities?

Section 2 of the [ASPHA Guidelines](#) covers eligibility criteria. Civil society and non-governmental organisations are eligible to apply.

If an organisation is a consortium partner in a non-lead role, can it also submit as a lead of a separate consortium?

Yes. Section 2.5 of the [ASPHA Guidelines](#) states that an organisation may submit only one proposal as an individual application or consortium lead and that there is no limit on the number of proposals for which an organisation can be a consortium partner.

Can one delivery partner/consortium address both streams of work or would they need to be two separate submissions?

Each proposal should address only one stream (National Systems or Community). An individual organisation cannot be the lead organisation for proposals submitted in more than one stream. However, an organisation can be a lead on one stream and a consortium partner on the other stream.

Can you please confirm if only one grant will be provided under each stream or will there be possibility for two (or more) consortia/organisations contributing to different countries in the region?

DFAT intends to fund one agreement of up to \$8 million for each of the three streams in the initial 30-month period. DFAT reserves the right to fund additional proposals received through this call in future, should additional funding become available and the proposal addresses a clear need.

Does DFAT expect to award multiple grants of up to \$8 million in the initial 30-month period? Or just one for the community and one for the national systems streams?

DFAT intends to fund one agreement of up to \$8 million for each of the three streams in the initial 30-month period. DFAT reserves the right to fund additional proposals

received through this call in future, should additional funding become available and the proposal addresses a clear need.

Will DFAT match organisations to work within a consortium per stream to cover all intervention areas?

DFAT will not match organisations to form consortia. Proposals are not required to address all eligible intervention areas.

Re Annex 3. Is there a template for endorsement letters from each non-lead organisations?

There is no template. Applicants may provide letters in any form.

Scope- and activities-related questions

If an organisation is not able to cover all the elements of the streams, can it submit a proposal for a small component? Or is DFAT seeking a proposal where all partners are able to cover everything?

DFAT intends to enter into only one agreement per stream. DFAT encourages organisations in this situation to consider partnering in a consortium.

For Fiji there is a guidance document on country priorities, but what about the other countries? The Investment Concept mentions a 2025 Burnet Institute rapid assessment of the HIV and TB response that will inform the rapid response phase. Can these be shared with applicants to assist with their proposal development?

Section 1.8 of the [ASPHA Guidelines](#) outlines country-specific approaches. Australia's support for non-Fiji PICs will be informed by baseline 'rapid assessments' of national HIV and TB programs undertaken by the Burnet Institute. As these assessments are still ongoing, detailed planning for interventions in these countries is not required. For Fiji, applicants are advised to describe and justify proposed interventions and main activities. For other eligible PICs, it is sufficient to describe proposed approaches at a higher level. Detailed activities for PICs are not required and proposed approaches do not need to be country specific. Successful applicants will have the opportunity to access rapid assessment reports and refine their approach in PICs during the inception phase. An addendum outlining the rapid assessments approach is available on [DFAT's Business Notifications page](#).

Can you please clarify whether interventions are expected to include Papua New Guinea as well?

Australia's bilateral health program will remain the main channel for support to Papua New Guinea on HIV. Papua New Guinea may be included in region wide activities supported through ASPHA.

Is it expected that a consortium (either stream) will address all eight core/ eligible intervention areas in their proposal or can they focus on a subset of areas?

Section 4.4 of the [ASPHA Guidelines](#) provides guidance on preparing activity proposals. Proposals do not need to address all eligible interventions; addressing a subset is acceptable based on country needs and priorities.

How does DFAT see the ASPHA streams linking together and with existing HIV responses in Fiji and PICs, such as the new HIV positions in WHO Pacific?

DFAT will encourage close coordination between ASPHA partners and with other relevant organisations, including WHO, supporting HIV responses in the Pacific to avoid duplication and maximise the effectiveness of interventions. An addendum summarising existing Australian-funded support to Fiji's HIV response, including the relevant implementing partner, is available on [DFAT's Business Notifications page](#).

There is discrepancy between how the streams are referred to in the Fiji support brief and the ASPHA Guidelines. Can you clarify how to address this discrepancy in proposals?

Section 2.1 in the [ASPHA Guidelines](#) invites proposals to deliver on the National Systems stream and Community stream. Proposals addressing activities outlined in the Fiji support brief should be in accordance with the **National Systems** or **Community** streams.

Acknowledging that the guidelines state that DFAT will not be funding ARVs, has there been any consideration of conducting a trial of long-acting injectable ARVs in Fiji or elsewhere in the Pacific as part of this program?

At this stage, ASPHA will not support HIV research and development activities. DFAT recognises the considerable promise of long-acting injectable ARVs for national HIV responses in the Pacific. Operational research and pilot initiatives related to the implementation of WHO recommended interventions in a Pacific context will be considered under ASPHA.

Evaluation-related questions

Who will review the proposals? Will it be DFAT or will there be partners in Fiji and PICs involved in the review?

The evaluation panel will comprise DFAT staff from Global Health and Education Division and Pacific posts and an external independent technical expert.

Where proposals contain multiple interventions, will they be scored overall, or by their specific intervention components?

Interventions will be assessed against Criterion 1: *Technical soundness and strategic alignment* of the [ASPHA Guidelines](#) and will be scored overall, not by specific intervention components.

Could you please clarify whether tables or diagrams may be included within the proposal, and if so, whether text contained within tables or diagrams counts towards the stated word limits for each section?

Tables and diagrams may be included as part of proposals where appropriate (for example, the program logic). Reasonable text contained within tables and diagrams will not count towards the stated word limits.

Can we use footnotes in the submission and if so, please confirm if these don't count against word count?

Reasonable usage of footnotes will not count towards the stated word limits.

Could you please clarify whether proposals for the Community and National Systems streams should use the End of Program Outcomes (EPO) defined in the ASPHA Investment Concept Note, or whether each stream is expected to articulate its own EPOs within the proposal?

Partners are expected to articulate their own EPOs for the National Systems stream and the Community stream, including a GEDSI outcome. These should align with the ASPHA EPOs.

Budget-related questions

Are there any caps on items such as management fees, administration costs and institutional overheads?

DFAT has not set any limits on management fees, administration costs and institutional overheads under this CfP. Criterion 3 of the [ASPHA Guidelines](#) outlines how proposals will be assessed against *Budget and Value for Money*. DFAT advises proposals should align with DFAT's Value for Money principles.

What are DFAT's expectations regarding financial (or in-kind) contributions by applicants as noted in the budget template?

Financial or in-kind contributions are not required. Any financial or in-kind contributions should be listed and will be considered by the evaluation committee when assessing Criterion 3: *Budget and Value for Money* in the [ASPHA Guidelines](#).

Please confirm that commodity procurement costs are to be excluded from the budget – as per note in Annex 4.

DFAT advises commodity costs be excluded from the proposal budget. Applicants should provide a best estimate of the types and quantities of commodities needed.

Could you please clarify the funding split of the 8 million stream allocation. Is it divided equally between Fiji and other PICS for each stream?

DFAT has suggested an indicative 50/50 split in funding between Fiji and other PICs. Applicants may propose and provide justification for alternative allocations.

How should interventions be presented in the budget table? Specifically, should applicants include one budget line per proposed intervention area, drawn from the eight eligible intervention areas outlined in the Investment Concept Note?

The budget should be split out by intervention area using the eight eligible intervention areas described in the ASPHA Invitation to Submit an Activity Proposal. DFAT recommends applicants include one budget line per intervention area. For Fiji, applicants may wish to budget down to the activity level, though this is not a requirement at the proposal stage. DFAT recommends applicants present this in Excel and preferably broken down by consortium partner.

Can you please advise if ASPHA proposals, through the National systems stream, can include salary support for government staff? Particularly whether salaries for staff working in government operated health services can be included.

Proposals under the National Systems stream can include salary support for government staff. DFAT will assess proposals against Criterion 1: *Technical soundness and strategic alignment* in the [ASPHA Guidelines](#), which includes consideration to the sustainability of interventions.