



Strategic priorities for Australia's international response to HIV

Australia's leadership in the international HIV response

Australia is proud of our leadership in the international HIV response over the past decade. Since 2004 the Australian aid program has committed over \$1 billion to HIV, and HIV remains a priority for the Australian Government.

- Australia's development policy recognises that improving health outcomes is an enabler for economic development. Our policy focuses on the Indian Ocean-Asia Pacific region and includes a commitment to combatting HIV and other communicable diseases.
- Advances in science, medicine and improved data, combined with changes in the aid funding landscape, signal new hopes and challenges for the regional and international HIV response. In our region in 2012, new infections had declined by 26 per cent since 2001 and 1.25 million people were on lifesaving treatment which also reduced their infectivity.
- Asia and Papua New Guinea are both characterised by a distinctive pattern of HIV transmission in urban areas through key populations of men who have sex with men, transgender people, sex workers and, in Asia, people who inject drugs. Evidence shows that targeting these populations with prevention and treatment interventions is high impact and low cost.
- Economic growth in the region and the slowing of growth in donor economies necessitates new approaches to social sector funding. Previously many countries in Asia and the Pacific relied heavily on donor assistance for their HIV response. The proportion of domestic public spending on HIV has been increasing and in 2012 comprised 59 per cent of HIV spending in Asia and the Pacific. This trend is continuing.

Australia's regional and international response to HIV will be guided by three principles and ten priorities. They build on our 25 years of experience in HIV and development, reflect the evidence base, the current context and our comparative advantage as a member of the Asia Pacific region.

Australia's Principles

The three principles at the heart of our HIV response are:

- **equity** - advocating for equitable access to health and HIV services, especially for key populations that are marginalized and vulnerable, and for legal and policy environments that are free from discrimination, protect human rights, and enable equitable access;
- **effectiveness** - making strategic, evidence based choices that prioritise and target key populations: sex workers, men who have sex with men, transgender people, people who inject drugs and people living with HIV;
- **sustainability** - supporting partner governments to allocate donor and domestic funding effectively and equitably, employ efficient governance and coordination mechanisms, and increase domestic funding for health and HIV.

Australia's priorities for the international HIV response

Consistent with the Australian Government's overall aid policy, *Australian aid: promoting prosperity, reducing poverty, enhancing stability*, where health is identified as a priority area that supports countries in our region to remove constraints to development; and through our broader diplomatic, trade and aid programs, Australia will:

SHOW LEADERSHIP

1. **Promote and demonstrate leadership on HIV and AIDS** in advocating for and supporting global, regional and national efforts to develop effective, equitable and sustainable HIV responses.

PROMOTE EQUITY

2. **Advocate for equitable, enabling legal and policy environments** and targeted action on policies and laws that stigmatise key populations, infringe their human rights and inhibit their access to services.

MAKE STRATEGIC CHOICES

3. **Focus geographically** on the higher burden countries in Asia where we have a comparative advantage, and PNG which has 99 per cent of the HIV cases in the Pacific, through our bilateral, regional and multilateral investments.
4. **Invest strategically in key populations**, sex workers, men who have sex with men (MSM), transgender people, people who inject drugs and people living with HIV; and seek to fill gaps in the current responses, where Australia has a comparative advantage and based on a clear understanding of country epidemics and responses.
5. **Balance integrated and dedicated services**, integrating HIV clinical services within broader health services to maximize access and efficiency while providing targeted services for key populations where required and strengthening government partnerships with non-government organisations to support these.
6. **Strengthen the evidence base through a focus on research** on what works within the existing aid program to improve effectiveness of programming in health and HIV.

BUILD SUSTAINABILITY

7. **Encourage more effective and efficient governance** for the HIV response, including through reviewing and rationalising governance and coordination mechanisms.
8. **Support sustainable national financing strategies** by partner countries to allocate donor and domestic funding **effectively and equitably**; and **increase domestic funding** for health and HIV. Continue Australian support through bilateral, regional and multilateral programs relating to HIV.
9. **Engage emerging donors** such as India and China **and engage the private sector**, for example on regional medicines quality and access
10. **Build and support multilateral partnerships** (particularly the Global Fund, WHO and UNAIDS) to improve their effectiveness and efficiency.