

Inquiry into the strategic effectiveness and outcomes of Australia's aid program in the Indo-Pacific and its role in supporting Australia's regional interests

12 June 2018

Contact

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

Australian Federation of AIDS Organisations

The Australian Federation of AIDS Organisations (AFAO) is the national federation for the HIV community response in Australia. AFAO works to end HIV transmission and reduce its impact on communities in Australia, Asia and the Pacific. AFAO's members are the AIDS Councils in each state and territory; the National Association of People with HIV Australia (NAPWHA); the Australian Injecting & Illicit Drug Users League (AIVL); Anwernekenhe National HIV Alliance (ANA); and Scarlet Alliance, Australian Sex Workers Association. AFAO's affiliate member organisations – spanning community, research and clinical workforce – share AFAO's values and support the work we do.

Introduction

The Australian Federation of AIDS Organisations (AFAO) welcomes the opportunity to provide a submission to the Inquiry into the strategic effectiveness and outcomes of Australia's aid program in the Indo-Pacific and its role in supporting Australia's regional interests.

AFAO is the national federation for Australia's community-led response to HIV. We are recognised nationally and globally for the leadership, policy expertise, coordination and support we provide. Through advocacy, policy and health promotion, we champion awareness, understanding and proactivity around HIV prevention, education, support and research.

AFAO has a 30-year record of achievement in building stronger civil society responses to HIV, health and human rights, and contributing to effective policy and program responses in Australia, Asia and the Pacific and globally. AFAO's work in Asia and the Pacific is focussed on technical and funding support to facilitate community advocacy and leadership, network development, strategic planning and organisational development. As Principal Recipient of the *Sustainable HIV Financing in Transition* (SHIFT) Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) grant, AFAO provides program leadership, grant management and technical support to our regional and country sub-recipients in Indonesia, Philippines, Malaysia and Thailand.

AFAO has recently been selected by the Global Fund to lead a regional dialogue that will guide the development of strategic priorities for HIV key populations across eight countries in Asia. The dialogue will inform a USD \$12.5 million three-year Global Fund grant that will operate in the Philippines, Timor Leste, Malaysia, Indonesia, Bhutan, Sri Lanka, Mongolia and Lao PDR.

AFAO's submission will focus on *innovation in Australia's aid program* and its ability to foster confidence, stability sustainable and community determined goals and best outcomes, particularly by utilising local procurement and smaller/local entities as it relates to HIV prevention, testing and treatment, human rights and access to universal health coverage in Asia and the Pacific.

Background

The Asia Pacific region has the second highest number of people living with HIV in the world, with an estimated 5.1 million people diagnosed by 2015 and some 300,000 new infections per year. There was a 5% decline in new infections in the region in the period 2010-2015. This progress has slowed in recent years and new HIV infections are on the rise in some countries.¹

The epidemic in the region continues to affect key populations, with concentrated epidemics among gay, bisexual and men who have sex with men who have sex with men (GBMSM), transgender people, sex workers, people who inject drugs and migrant communities.

Access to the means of prevention remains sub-optimal across the region, with UNAIDS noting low levels of consistent condom use across key populations, insufficient access to testing and treatment, and lower levels of coverage of needle and syringe programs than would be required to reduce new HIV infections. At current levels of activity and investment, the region is not anticipated to reach the UNAIDS Fast-Track target for reducing new HIV infections by 2020.²

¹ HIV and AIDS in Asia and the Pacific Regional Overview <https://www.avert.org/professionals/hiv-around-world/asia-pacific/overview>

² UNAIDS Snapshots: HIV Epidemic in Asia and the Pacific, 2016 UNAIDS-ap.org.

Australian aid: responding to HIV in Asia and the Pacific

While the response – and progress in tackling the epidemic – varies across the diverse countries of Asia and the Pacific, there has been notable progress across much of the region in building clinical, policy and funding infrastructure to improve access to treatment among people living with HIV. There are now some 2.1 people diagnosed with HIV and on treatment. The region is well-placed to meet the UNAIDS Fast Track target of having 4.2 million people living with HIV on treatment by 2020.

In comparison, there has been limited progress in investment or innovation in HIV prevention in the region. There has been slower progress towards the inclusion of key populations in decision-making processes about funding allocation, and prevention in many countries has continued to be reliant on donor rather than domestic funding.

There continues to be significant variation across the region in relation to the creation of supportive legal, political and social environments. Whilst some countries have made significant progress in addressing legal, policy and social barriers to HIV prevention, other countries have experienced a marked increase in stigma, discrimination and criminalisation of key populations.

Economic changes in the region have brought challenges to the HIV response. The majority of multilateral institutions and bilateral funders determine where and how to allocate their development investments based on specific criteria laid out in an eligibility policy or set of political priorities. For almost all global health funders, one of the central metrics used is a country's Gross National Income (GNI) per capita. While donors also consider other metrics such as disease burden in determining which countries are eligible for which forms of assistance, low GNI per capita is often the clearest eligibility criteria.

As many low-income countries in the Asia Pacific continue to experience rapid economic growth, they continue to cross donors' eligibility thresholds, triggering "transition," or withdrawal of critical development financing. In the Asia Pacific, countries likely to face transition from multiple donors with the next five years include: Indonesia, Laos, Myanmar, Papua New Guinea, Timor Leste and Vietnam. Many of these countries are also experiencing an increase in privatisation or health insurance coverage which covers part of the costs of treatment rather than preventative measures. The departure of donors means that countries need to ensure expenditure on prevention is maintained or increased to stop their domestic HIV epidemic worsening.

At the same time Australia's support to the region continues to decline with the Australian Aid budget set to reach a new historic low in 2021, with a spend of AUD \$0.19 in every AUD \$100 of gross national income³. These financial constraints will have a detrimental impact on both the scope, innovation and impact of development programs implemented by Australia in the future. This is of concern to AFAO and the work we conduct in the region on supporting sustainable HIV financing and ensuring our communities have equitable access to healthcare.

In this context, civil society organisations (CSOs) - including community organisations and key population networks - have a critical role in shaping the regional and national HIV responses. This includes ensuring key populations are represented in the development of policy and programs, the allocation of resources to prevention and treatment, and implementing programs that directly address prevention, testing, access to treatment, and stigma and discrimination.

The Australia aid program has a role to play in ensuring that Australian organisations, such as AFAO, that work in the region are resourced to engage and partner with local organisations to build their capacity to generate innovative solutions to HIV and to become self-sustainable.

³ Development Policy Centre Australian Aid Tracker. <http://devpolicy.org/aidtracker/trends/>

Recommendations

AFAO recommends that the Department of Foreign Affairs and Trade (DFAT):

1. Recognise the powerful contribution that advocacy by country-level civil society – particularly community groups – can make in stimulating domestic action by Governments toward improved health, education, economic and other development outcomes
2. Recognise this country-level action as a further pillar in Australia's overseas development agenda, alongside diplomacy, engagement with multilateral agencies and development assistance for services and infrastructure
3. Resource regional and country-level community-led organisations in Asia and the Pacific to support their advocacy and other efforts for improved domestic development outcomes
4. Leverage Australia's recognised track record of civil society and government partnership – particularly on HIV – by resourcing agencies like AFAO, that work in the region, to engage with community-based organisations in Asia and the Pacific in their work with governments to generate locally-informed and innovative solutions to HIV
5. Provide capacity for partnerships between Australian researchers and community organisations to partner with country-level counterparts in innovative, practice-focused evidence building that pilots innovative, scalable models and service arrangements
6. Establish a funding program that enables investment in innovative and agile projects in Asia and the Pacific for emergency and rapid response activities.