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Dear Coordinator

Re: Submission – New international development policy

On behalf of the Australian Federation of AIDS Organisations (AFAO), I welcome the opportunity to provide input to the new international development policy expert panel to assist the Government's international development efforts to support a peaceful, stable, and prosperous Indo-Pacific.

AFAO is the national peak body 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 is thankful for the opportunity to contribute to the new policy that will set the long-term direction for Australia's international development program. **Australia has an opportunity to be a leader in the Indo-Pacific's response to HIV and AIDS. Ending HIV and AIDS in Australia's region is possible, but a clear commitment is needed.** AFAO calls for Australia to:

- further leverage the strength and expertise of Australia's local HIV sector in the delivery of Australia's response to HIV in the Indo-Pacific;
- contribute an equitable share of funding to the Global Fund;
- continue to set aside 10% of Australia's Global Fund contribution to strengthen the response to HIV in Asia and the Pacific; and
- use bilateral program assistance to support countries with unique needs and growing HIV infections including Indonesia, the Philippines and PNG.

Each of these opportunities are considered in the further detail below.

Strategic and sustained funding from Australia is required to address HIV in the Indo-Pacific.

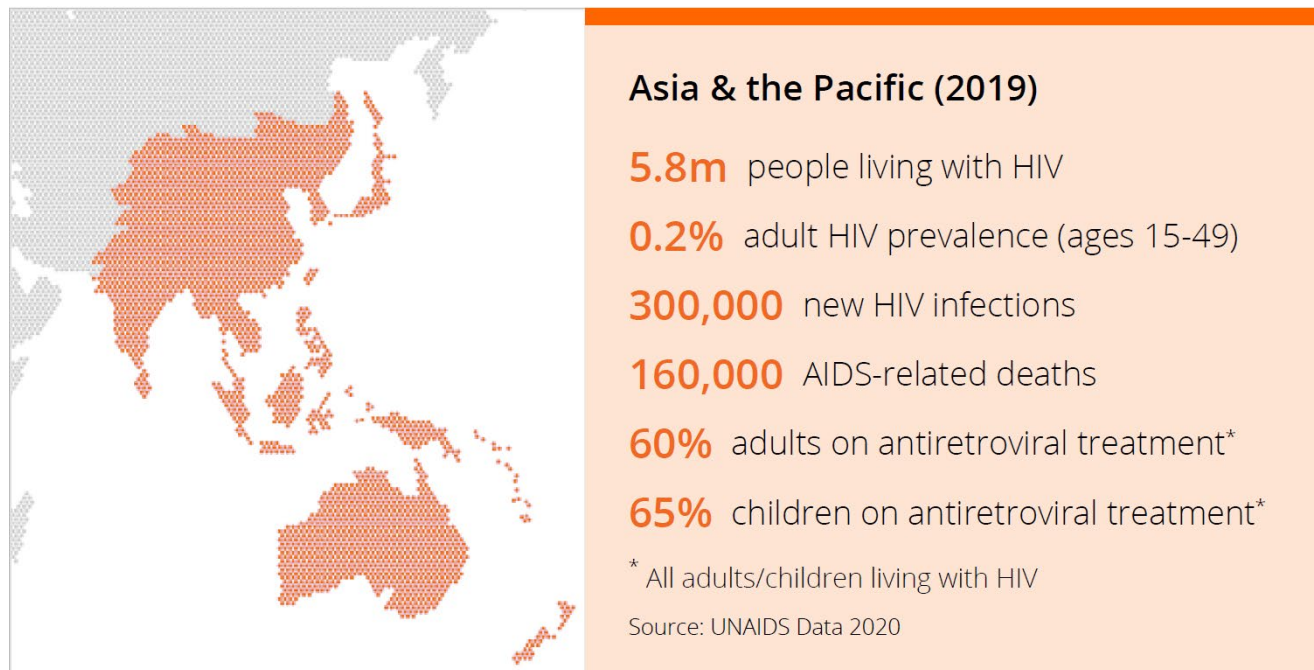
AFAO welcomes the new development policy's aim to generate collective action on global challenges that impact our region.

Responding to HIV and AIDS remains a significant challenge for Indo-Pacific countries. Global action has reduced deaths from HIV around the world by 43% in the last decade; however, action in the Indo-Pacific has been insufficient. As shown in Figure 1, there are 5.8 million people living with HIV in our region in 2019. Without adequate workforce and consistent funding, national governments have been unable to effectively curb transmission. In 2019, there were 300,000 identified transmissions of HIV. Furthermore, adults and children with HIV regularly do not receive the support they need to manage their infection. In 2019, there

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); the 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.

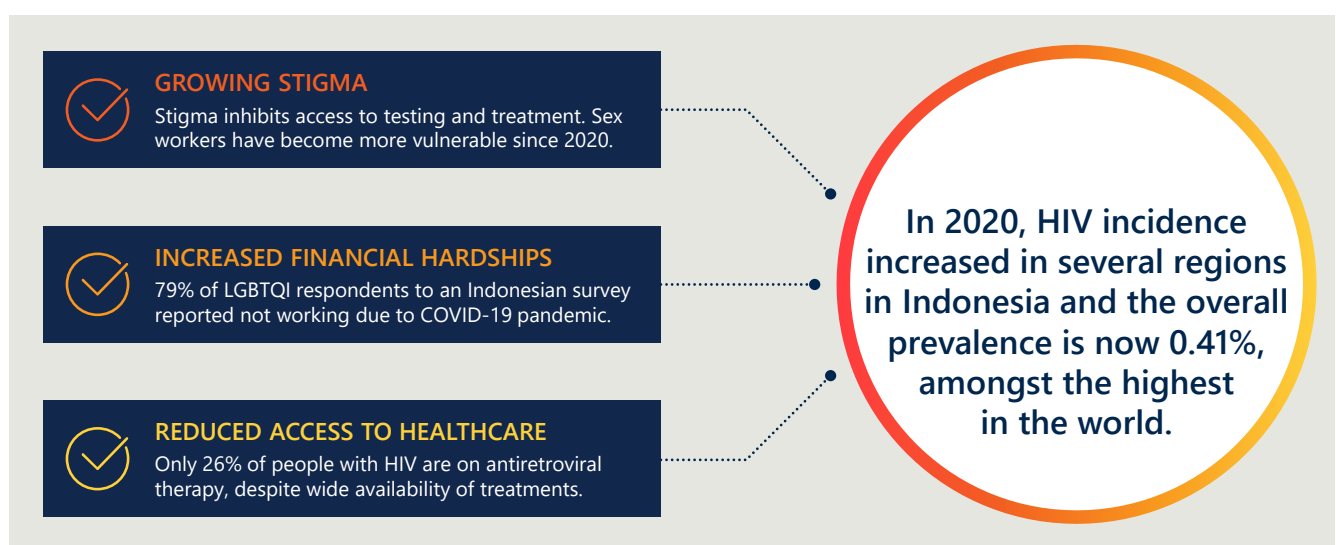
were 160,000 identified AIDS related deaths in the region. 60% of adults and 65% of children who have HIV are not on antiretroviral treatment. Whilst impacted communities differ across the region, the groups with the highest rates of HIV transmission include gay, bisexual and other men who have sex with men (GBMSM), sex workers, people who use drugs and trans and gender diverse people.

Figure 1 | HIV in the Asia-Pacific



The challenge of responding to HIV has recently intensified. Prior to 2020, reductions in infections have been achieved, especially Cambodia, India, and Thailand. Jurisdictions have been making steps towards the virtual elimination of HIV transmission. For example, Thailand was the first middle-income country in the region to eliminate mother-to-child transmission of HIV. However, especially since 2020, HIV epidemics are rising in neighbouring countries. This includes HIV-TB co-infections. COVID 19 interrupted the diagnosis, treatment, and prevention of HIV in the Indo-Pacific region and some HIV successes have been reversed. This means that services and access systems need to be rebuilt. Additionally, a decline in investment and programmatic commitment to HIV reduction coincided with increases in punitive laws and policies and rising stigma and discrimination. This has blunted reductions in new HIV infections. Figure 2 outline the confluence of factors that have contributed to a growing HIV crisis in Indonesia since 2020.

Figure 2 | Case study: Indonesia



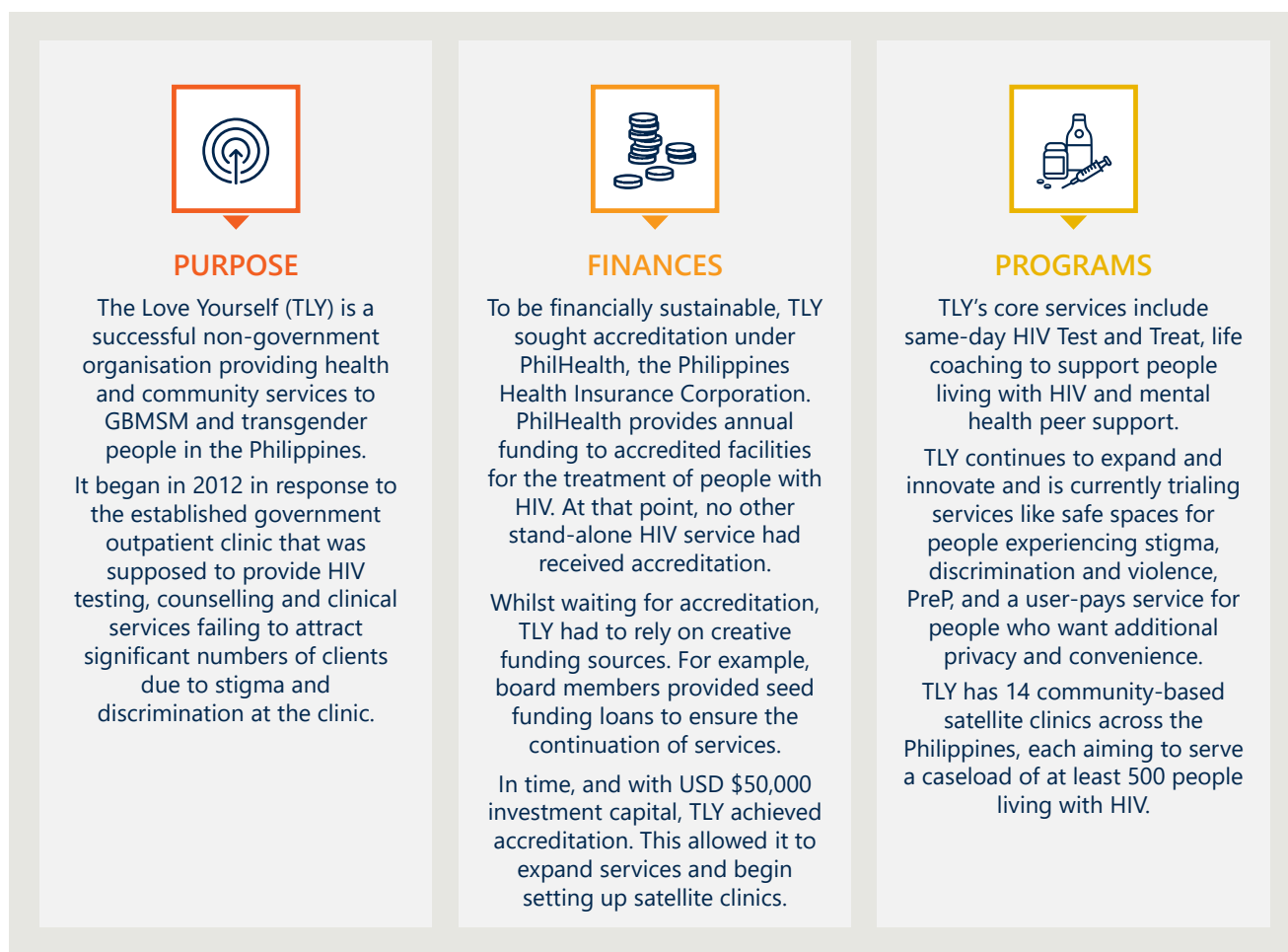
This is the right time for Australia to increase its participation in the HIV response in the Indo-Pacific. The advent of Covid 19 has increased understanding of pandemic responses within key countries as well as the importance of harm reduction. Additionally, the need to rebuild health services and systems within neighbouring countries because of Covid 19 means we can build back better, with an increasing focus on Universal Health Coverage (UHC) in countries' health systems.

To strengthen the Indo-Pacific's response to HIV, Australia should strengthen community initiatives.

AFAO welcomes the new development policy's focus on enhancing community resilience and connecting partners with Australia and regional architecture.

Civil society and effective community-led global health responses are invaluable resources in the Indo-Pacific's response to HIV. These groups and initiatives respond to HIV at the community level in a culturally appropriate and proportional way. Targeted, community-led programs that directly speak to and work with priority populations enable sustainable innovation. Local organisations have spearheaded initiatives relating to telehealth, take home opioid substitution therapy, needle syringe services, HIV self-testing and PrEP services that have made tangible impact on the HIV response. Figure 3 outlines a community organisation in the Philippines that has helped reduce the transmission of HIV whilst supporting those who are HIV positive through funding from Australia and multinational organisations to which Australia contributes.

Figure 3 | Case study: The Love Yourself in Philippines



The ability of civil society to respond to HIV has been eroded in some countries by restrictions in access to domestic funding and international support. Due to financial constraints in several countries, the civil society space in the Indo-Pacific region is diminishing. This is particularly true for community organisations

specialising in harm reduction and populations most impacted by HIV, which are widely marginalised. Due to an increase of nationalistic and religious-based health policies, there are acute barriers to domestic financing. Host governments' current public health policies point to a hardening of their positions. Reporting requirements and regulations have increased, and COVID-19 has also provided cover for greater political restrictions.

Current approaches to strengthening communities and civil society, while essential, are insufficient in tackling the legislative, policy and political contexts. This is an unresolved problem for donor governments, financing partners such as the Global Fund and the U.S. President's Emergency Plan for AIDS Relief and communities. Addressing these challenges requires sustained commitment to existing efforts alongside new programs that promote civil society business models that have the potential to accelerate gains and that are financially sustainable throughout donor transition. Australia should provide increased support directly to regional and national civil society organisations that encourage new models of sustainability such as social contracting, social enterprises and outcome-based financing models. As Australia's peak HIV organisation, AFAO looks forward to working with the Government to advance these new, sustainable business models for key population networks and activities.

Supporting partnerships between peer organisations in Australia and local community groups can strengthen local capabilities and make regions more resilient. Australia can make better use of its domestic HIV sector in providing technical, financial and other support in the Indo-Pacific. Australia's multisectoral response to HIV is recognised as a model of public health strategy. Australian organisations have the platform and expertise to play a lead role in assisting countries to integrate vertical HIV/tuberculosis programming into universal health care (UHC), implementation initiatives and into SDG achievement strategies. Many Australian organisations already have close connections with their Indo-Pacific country equivalents and can work effectively in partnership with local organisations on the ground. To maximise these relationships, the Australian government should build pathways to utilise Australian community advocacy skills to help key populations deal with ongoing challenges. This will enhance the visibility of Australian leadership, and foster partnership with our neighbours.

Australia should also extend its funding for research institutes undertaking HIV medical and implementation research. The Government is to be commended for extending its Indo-Pacific Centre for Health Security. This would be a useful basis for expanding HIV efforts in the region.

Australia should invest in multilateral initiatives to expand its impact on HIV in the Indo-Pacific.

Australia should continue and deepen its relationship with the Global Fund to Fight AIDS, Tuberculosis and Malaria (the "Global Fund"). The Global Fund mobilises and invests more than US\$4 billion a year to fight HIV, tuberculosis, and malaria. Its programs are run by local experts in more than 100 countries. It provides support for 22 million people on HIV treatment. It also provides funding for prevention and harm reduction programs among key populations.

Australia's relationship with the Global Fund has been mutually beneficial. Funding provided to the Asia-Pacific has been many multiples of Australia's contributions. Australia's influence is aided by holding an Alternative position on the Global Fund Board and a history of senior Australians active in the organisation. Australia's presence in the Global Fund ensures clear visibility of the needs of the Asia-Pacific region and substantial financing of the region's needs.

To strengthen Australia's influence in the region and uphold its international commitments, Australia should increase its financial investment in the Global Fund. Australia's prior contributions lag behind similar countries such as Canada, Norway and Sweden.

Furthermore, Australia has also long been active in the governance of UNAIDS and our region has benefited from the engagement of Australians in senior positions. The Department of Foreign Affairs and Trade should continue its active participation in the UNAIDS Programme Coordinating Board.

Whilst it is essential it equitably contributes to these multilateral organisations, Australia should ensure that its contributions are having an impact on the Indo-Pacific region specifically. Asia and the Pacific have the world's second largest burden of HIV and the greatest concentration of HIV among key populations. Australia should require that most its annual core contribution for UNAIDS (A\$4.5 million for 2021- 22) be expended in the Indo-Pacific region.

Australia 'set aside' 10% (A\$24.2 million) of its 2020-2022 pledge to the Global Fund supported investments such as HIV prevention and laboratory capacity strengthening in the Indo-Pacific. The Australian government should continue to set aside 10% of its future Global Fund contributions for technical assistance to countries in our region. This set aside is presently managed through UNAIDS. The delivery of this assistance should be transparent, including through the public reporting of outcomes. The agreement must also openly ensure that this funding leverages Australian expertise in strengthening community action and government responses. Through this funding, Australia can build and sustain vital partnerships and make Australia's leadership on HIV more visible.

Bilateral relationships should be used to support countries in the region that require the most assistance in their local HIV responses.

We urge Australia to complement its investments in multilateral initiatives with greater bilateral assistance to neighbouring countries experiencing rising HIV infections. Bilateral assistance can be an effective measure to quickly address increasing levels of HIV transmission. This can be executed through increased direct financial support for bilateral funding for countries, as well as civil society organisations. Strategic bilateral assistance allows Australia to build relationships and capacity in areas that fit within the national health agendas set by individual Indo-Pacific nations.

Should you require any further information, please do not hesitate to contact me at darryl.o'donnell@afao.org.au.

Yours sincerely



Adj Prof Darryl O'Donnell
Chief Executive Officer