

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

REVITALIZING THE HIV, TB AND MALARIA RESPONSE IN THE PACIFIC

At a glance

- Despite global reductions in HIV new infections, countries such as Fiji and PNG have been reported as one of 38 countries with rapidly increasing new HIV infections globally which places a substantial health security threat to other Pacific countries due to vast mobility between countries, low condom use and an absence of innovative combination prevention methods.
- Tuberculosis (TB) remains a significant public health challenge for the Pacific which includes missing cases, drug-resistant TB, a huge pool of latent TB, slow uptake of innovations, and lack of multisectoral action to address catastrophic costs faced by TB patients and their families, coupled with the growing HIV infections and high NCD burden which exacerbates the disease.
- Gains against malaria achieved through decades of hard work and investments are at risk of being rapidly overturned, due to poor program resilience caused by COVID-19 and weak program implementation.
- Member state countries need to maximise the impact of Global Fund grants through country ownership to introduce innovative practices, upscale delivery and increase investments into community leadership to provide quality sustainable services to hard-to-reach populations.

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

Current situation

The Pacific Island Regional Multi Country Coordinating Mechanism (PIRMCCM) of the Global Fund Grant for HIV, TB and Malaria, and technical partners such as UNAIDS, UNDP (who serves as the Principal Recipient) and WHO expresses concerns over the current situation of the 3 diseases managed under the Global Fund grant and urges member countries to uphold political commitments through the recommendations proposed. This paper serves as a brief to the current situation in the Pacific and proposed directions towards ending AIDS, TB and Malaria.

HIV

It is evident now that the 2025 HIV targets for the Pacific countries are off track and AIDS related deaths are increasing annually. These are setting off alarm bells for health security in the Pacific currently caused by limited resources, shifting donor priorities, and weakened health systems due to emerging priorities. This experience shows that in the last decade the countries' focus has shifted from HIV/AIDS reversing the many gains from the early HIV response. The impact of this is that the Pacific now has a generation of young people with low HIV knowledge, poor HIV testing uptake, low condom use, high levels of stigma and discrimination, poor comprehensive sexual education (CSE) coupled with major social changes in dating through social media and dating apps such as Tinder and Grinder, plus the emerging threat of synthetic drug use and needle sharing practices. This situation is now coupling with the high number of [sexual and gender-based violence incidences as per the statistics by UNFPA¹ indicating increase of the potential for HIV/STI transmission among most at risk population groups](#). The situation is further compounded by the economic challenges of COVID-19 in the region which has individuals resorting to sex work to provide for their families.

Despite these trends the HIV response has not caught up with new HIV best-practices resulting in drastic changes to the HIV epidemic. A country of concern in the Pacific is Fiji. In the [2022 UNAIDS Global AIDS Update²](#) Fiji and PNG are noted as one of 38 countries globally with increasing HIV cases. Since 2010, there has been an increase of estimated new infections by 129% in Fiji alone.

¹ UNFPA Issue 2: Gender based Violence 2000 <https://www.unfpa.org/resources/issue-2-gender-based-violence>

² In Danger: UNAIDS Global AIDS Update 2022 https://www.unaids.org/sites/default/files/media_asset/2022-global-aids-update-summary_en.pdf

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

Tuberculosis

Despite the success achieved in reducing the mortality and morbidity of TB over the years, TB still remains as public health issue around the world. The Western Pacific Region accounts for 18 % of the Global TB burden. There has been reduction in TB deaths by 13% and incidence by 6.7% between 2015 and 2020. TB remains a significant public health challenge which includes missing cases, drug-resistant TB, a huge pool of latent TB, slow uptake of innovations, and lack of multisectoral action to address catastrophic costs faced by TB patients and their families. With rapid economic growth, many countries are transitioning their health financing from international to domestic. The flourishing private sector indicates the need to focus on a public-private mix strategy. There is an ever-growing burden of non-communicable diseases (NCD) among the general population which is an important risk factor for TB disease while other risk factors like, alcohol, air pollution, malnutrition and tobacco also need to be addressed. The region has an increasing elderly population requiring the TB program to collaborate with palliative and rehabilitative geriatric care.

Malaria

On the malaria situation in the Pacific, Vanuatu is the only endemic country supported through the PIRMCCM, although this vector-borne disease also occurs in the Solomon Islands and Papua New Guinea. Until 2021, Vanuatu was making remarkable progress towards malaria elimination; had no malaria deaths since 2012; and was among 8 countries in the Western Pacific likely to eliminate malaria by 2025 (the E-2025 initiative)³. The goals of Vanuatu's own National Malaria Plan were to achieve zero indigenous malaria cases in all provinces by the end of 2023; and to receive WHO certification of malaria-free status by 2026. This now seems unlikely due to an upsurge in cases in four provinces, and interruption to implementation during the period when COVID19 closed borders and funds and malaria staff were reportedly redirected to COVID activities. Currently 100% of the population of Vanuatu is at risk of malaria transmission; 55% at high risk of transmission⁴; and the Annual Parasite Incidence (API) has increased from 1.05 in 2021 to 3.63 in 2022.

To the end of 2022, 1143 cases had already been reported. These outbreaks threaten to undermine the elimination target of December 2023 set out in the Strategic Plan for Malaria Elimination (2021-2026), necessitating urgent response to prevent any further increases. Gains against malaria achieved through decades of hard work and investment are at risk of being rapidly overturned, as has been the case in other countries close to elimination which could not sustain momentum or efficiently manage outbreaks. The malaria increases observed in 2022 highlight the need for intensified and targeted implementation of proven interventions, such as case-based surveillance, radical treatment with primaquine, indoor residual spraying, distribution of long-lasting insecticidal nets, and community engagement.

³ World Malaria Report 2022, WHO <https://www.who.int/teams/global-malaria-programme/reports/world-malaria-report-2022>

⁴ NSPME Annual Report, 2022, MOH

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

Future vision

Need for government ownership and expanded investments in community leadership for the HIV, TB and Malaria response in the Pacific.

A small investment will have a significant positive impact towards achieving global targets for HIV, TB and malaria. These 3 diseases remain unfinished business in the Pacific. It is crucial that Pacific member states increase its ownership towards steering focus into these 3 diseases to introduce innovative approaches with strategic moves to include collaboration with community-based organizations to deliver much needed services and to hard-to-reach populations. The direction and the guidance of key development partners is critical to support the Pacific in navigating the path to achieving this, with health leaders, the international community, civil society, health care workers and key populations.

The investments into these 3 diseases have wider impacts to other areas including health security, human rights, supportive legal environments, focusing on wider STI's, inclusivity, youth-led interventions, and community leadership for service delivery. For governments there will be reduced burden on health systems to manage and treat HIV/STI's TB and Malaria with sustainable delivery through greater community-based programming. As a region these investments will result in stronger community and health systems to prevent, detect and treat HIV/STI/ TB and Malaria with a human rights and person-centred approach.

Pacific Island Countries need to reprioritize these 3 diseases and seize this opportunity to address early warning signs through modernizing, upscaling and introducing new modes of delivery as well as initiating policy change in the Pacific Island countries to realizing global health targets.

An absence in this leadership will result in the continuation of increasing HIV, TB & malaria infections and AIDS-related deaths, as well as threaten any possibility of eliminating HIV, TB and Malaria transmission in the Pacific in the near future.

Examples of recent progress

Innovations

Great progress has been made in the prevention and treatment of HIV. PrEP (pre-exposure prophylaxis) is the use of antiretroviral medication by people who are HIV negative to prevent them from acquiring HIV. In several cities in North America, Europe and Australia where PrEP is widely available, this relatively new prevention tool has contributed to steep reductions in

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

HIV infections among key populations. A rapid roll-out of PrEP, in New South Wales, Australia, led to a 25% decline in new HIV diagnoses⁵ in just 1 year among key populations.

Community leadership

Communities are at the heart of everything we do. By empowering the communities most at risk we ensure that lifesaving services reach the most vulnerable, including those marginalized by poverty, stigma, discrimination, or criminalization. Putting people and communities at the centre of national response plans helps build the trust that is the vital foundation for achieving and ensuring no one is left behind. Its importance is further reiterated in the 2021 United Nations Political Declaration on Ending AIDS, Member States affirmed the critical role of communities in advocacy, and the participation of AIDS responses. In the Philippines a successful example is between *Love Yourself*, is an LGBTQ oriented CSO that holds an arrangement through the National UHC insurance scheme so that they get paid for delivering HIV tests and get paid enough to not only cover the costs of the testing process, but also turn a profit which keeps the organisation running, which sustains the organization and increases the testing reach. Also in Indonesia, a [descriptive study of community led Tuberculosis program](#)⁶ showed improving knowledge and behaviours related to the cause, transmission and prevention of Tuberculosis and early case detection.

In the Pacific, Samoa's Integrated Community Health Approach Programme (ICHAP) was launched in 2017 by the HIV, Sexually Transmitted Infections (STIs) and TB National Programme and the Health Education and Promotion team at the Ministry of Health in cooperation with a range of partners from civil society, and with support from the Global Fund and the United Nations Development Programme (UNDP) through the Multi-Country Western Pacific Integrated HIV/TB Programme.

The collaboration has positively impacted HIV, STI and TB programming with increased program coverage, program resilience and sensitizing the communities on health issues due to high stigma and discrimination.

Missed opportunities in community mobilization and leadership with testing and directly observed treatment (DOTS) has led to low compliance for completion of treatment in Vanuatu, with malaria treatment available only from dispensaries and health centres. Opportunities to have community malaria committees and trained village health workers ready for outbreaks have been missed. The potential of communities in reaching global health

⁵ Grulich A et al. Rapid reduction in HIV diagnoses after targeted PrEP implementation in New South Wales, Australia. 25th Conference on Retroviruses and Opportunistic Infections (CROI 2018), Boston, abstract 88, 2018.

⁶ Dewi, C., Barclay, L., Passey, M. et al. Improving knowledge and behaviours related to the cause, transmission and prevention of Tuberculosis and early case detection: a descriptive study of community led Tuberculosis program in Flores, Indonesia. BMC Public Health 16, 740 (2016). <https://doi.org/10.1186/s12889-016-3448-4>

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

goals needs to be realized and supported by governments. These mechanisms for community leadership and involvement for DOTS in TB is a crucial component for effective programming.

Why urgent action is needed now

Fiji is the 'hub of the Pacific', it is a transit point for the vast migration between the Pacific, Australia, and New Zealand. This is a red flag for disrupting health security among these countries. [Past trends](#)⁷ have suggested that risky behaviours prominent in Fiji tend to extend to other Pacific Island countries. If unaddressed these trends could pose serious threats to the HIV and TB situation in the Pacific, given the global [experience](#) of synthetic drug use and re-emergence of HIV waves. The existence of HIV drivers such as low condom use, poor sex education and high TB burden coupled with poor HIV data and behavioural studies will lead to a health security crisis in the Pacific. The international community needs to support national action to avert this crisis. While the Pacific is in early stages, there is a great opportunity to address current risk factors, through health system strengthening through upscaling innovative health prevention tailor-made services to create demand for HIV/TB services and improving the detection of HIV/TB infections, treatment adherence, and monitoring HIV/TB treatment in the Pacific.

For malaria, the revitalization of current programs now can avert new infections and bring Vanuatu back to on target to eliminate malaria. For all three diseases, solutions are available, the missing link is the ownership and commitment to drive this change.

⁷ Sladden T. Twenty years of HIV surveillance in the Pacific--what do the data tell us and what do we still need to know? Pac Health Dialog. 2005 Sep;12(2):23-37. PMID: 18181491

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

Recommendations to be considered by the Heads of Health

Recommendations for governments

Pacific Island countries uphold their political commitments towards ending of AIDS, TB and Malaria and mobilize resources through international support or domestic funds to strengthen their national response by:

1. Protecting healthy security through **country ownership** addressing problematic challenges focusing on health system strengthening through upscaling innovative health prevention tailor-made services for creating demand for HIV, TB & Malaria services and improving the detection of these infections, treatment adherence, and monitoring treatment in the Pacific.
2. Recognize the importance of **community leadership** and create an enabling environment in which civil society can fully contribute to the implementation of programs to expand essential services and cater towards too hard-to-reach populations.

Recommendations for development partners

Development Partners in the Pacific support national actions through providing technical assistance towards

1. Improving strategic information to produce data that can positively impact and inform national HIV/TB and Malaria strategies to address the gaps that exist in current programs.
2. Contribute towards the upskilling of civil society for community leadership to implement community led programming and monitoring.
3. Enhance the potential of health technologies and innovations to advance the HIV, TB and Malaria responses.