

# Country progress report - Fiji

Global AIDS Monitoring 2018





# Contents

Overall - Fast-track targets

HIV testing and treatment cascade - Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Prevention of mother-to-child transmission - Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

HIV prevention; Key populations - Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90%% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Gender; Stigma and discrimination - Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Knowledge of HIV and access to sexual reproductive health services - Ensure that 90%% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Social protection - Ensure that 75%% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Community-led service delivery - Ensure that at least 30%% of all service delivery is community-led by 2020

HIV expenditure - Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6%% for social enablers

Empowerment and access to justice - Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

AIDS out of isolation - Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

# Overall

## **Fast-track targets**

## **Progress summary**

The GAM reporting period from January to December 2017 has been prepared predominantly through service utilization reports from service centres – which includes HIV testing and counselling (HTC), treatment, prevention, care and support services; monitoring and evaluation (M&E) data.

Looking forward, the impact of the HIV/AIDS epidemic on the country's economy and human development index remains high hence Fiji will continue to intensify implementation of proven interventions to consciously reverse the trend of HIV in the country. Strategic and feasible interventions have been clearly articulated in the five year National HIV Strategic plan which is in harmony with the global targets for fast tracking HIV response and to realize a 90% reduction in new adult HIV infections, zero new infections among children, 90% reduction in stigma and discrimination faced by PLHIV, and 90% reduction in AIDS related deaths.

The HIV program in the country will continue to focus on HIV prevention as the key intervention to ending the epidemic, mobilising resources for the epidemic and building strategic partnerships with national and global stakeholders in the fight of the epidemic.

The Fiji GAM Narrative Report will be provided soon once endorsement from the HIV/AIDS Board is received.

# HIV testing and treatment cascade

## **Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020**

### **Progress summary**

Year 2017 marked the 14th [fourteenth] anniversary since the roll-out of antiretroviral therapy (ART) in Fiji Islands. The Ministry of Health and Medical Services committed to support the procurement and provision of ART to meet the Global AIDS targets aim was to diagnose 90% of all HIV-positive persons, provide antiretroviral therapy (ART) for 90% of those diagnosed, and achieve viral suppression for 90% of those treated by 2020.

The comprehensive care, management and treatment programme by the Ministry of Health and Medical Services in the end of 2017, access to ART has increased dramatically.

Revisions to the national treatment guidelines have meant that more patients than ever are eligible to initiate lifesaving therapy. The shift from an ART eligibility criterion to "test and treat" from the previous threshold of CD4 count  $<500$  cells/ $\mu$ l, resulted in significant increase in adult ART coverage. HIV testing figures have increased in the country, mainly because of the increase in community awareness and National Testing Campaign and referrals from point of testing along with increase of sites utilizing rapid test kits within the Ministry of Health facilities.

There remain significant obstacles, both on the access to ART for those who need it and on sustaining those already on treatment.

The unavailability of viral load testing for the year 2017 was an obstacle in measuring and monitoring viral suppression however this should be rectified by the following year . Unfortunately due to challenges faced with in-country registry there was no validated data available in the reporting period to capture the number of people living with HIV from 2016 retain on ART in 2017.

Report submitted are under reported especially for people living with HIV who are on ART.

## **Policy questions (2016)**

Is there a law, regulation or policy specifying that HIV testing:

**a) Is solely performed based on voluntary and informed consent**

Yes

**b) Is mandatory before marriage**

No

**c) Is mandatory to obtain a work or residence permit**

No

**d) Is mandatory for certain groups**

No

**What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?**

TREAT ALL regardless of CD4 count; Implemented countrywide

**Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?**

**a) For adults and adolescents**

No policy on viral load testing

**b) For children**

No policy on viral load testing

# Prevention of mother-to-child transmission

**Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018**

## **Progress summary**

In terms of prevention, the scaling up of HCT services has benefited people accessing services easily as compared to previous years.

The national PPTCT Programme needs continuous strengthening for sustainability of programme targeted at prevention of vertical transmission.

Treatment coverage for children is still lagging and Fiji is expected to improve with the test and treat and EID services.

## **Policy questions (2016)**

**Does your country have a national plan for the elimination of mother-to-child transmission of HIV?**

No

**Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?**

Treat All; Other - Implementation is only done at the 3 main hospitals in Fiji

# HIV prevention; Key populations

**Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90%% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners**

## **Progress summary**

There has also been intensified condom programming amongst the key populations [MSM, Transgender and Sex Workers] through the support of the Ministry of Health and Medical Services and the aggressive strategy implementation by the Rainbow Pride Foundation [RPF]

## **Policy questions: Key populations (2016)**

### **Criminalization and/or prosecution of key populations**

#### **Transgender people**

Neither criminalized nor prosecuted

#### **Sex workers**

Selling and buying sexual services is criminalized

#### **Men who have sex with men**

Laws penalizing same-sex sexual acts have been decriminalized or never existed

**Is drug use or possession for personal use an offence in your country?**



Possession of drugs for personal use is specified as a criminal offence

**Legal protections for key populations**

**Transgender people**

Constitutional prohibition of discrimination based on gender diversity

**Sex workers**

No

**Men who have sex with men**

Constitutional prohibition of discrimination based on sexual orientation

**People who inject drugs**

No

# Gender; Stigma and discrimination

## **Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020**

### **Progress summary**

Gender Based Violence is indeed a significant public health challenge in many countries and Fiji is no exception to this.

“The Fiji Women’s Crisis Centres (FWCC) National Violence against Women prevalence study published in Fiji in 2013, revealed that the rates of violence against women and girls are among the very highest in the world; 64% of women who have ever been in an intimate relationship have experienced physical and/or sexual violence by a husband or intimate partner in their lifetime, and 24% are suffering from physical or sexual partner violence today.

In response to the national agenda of eliminating violence against women in Fiji, there is currently a national task force which meets regularly made of intergovernmental, UN Agencies, inco-operated with the Fiji Women’s Crisis Centre, Fiji Women’s Rights Movements and other important Non-Government Organizations to address violence against women in Fiji.

Ministry of Health and Medical Services sits on this task force through the Family Health Unit, and with the support of UNFPA (United Nations Population Fund) the Health sector developed a guideline for addressing holistically women and children affected by violence, whether it be physical or sexual.

The development and launch of the national training of health care workers in this area in addressing violence against women in Fiji has been a highlight of achievements for 2017 for the Ministry of Health and Medical Services.

### **Policy questions (2016)**

**Does your country have a national plan or strategy to address gender-based violence and violence against women that includes HIV**

Yes

**Does your country have legislation on domestic violence\*?**

Yes

**What protections, if any, does your country have for key populations and people living with HIV from violence?**

General criminal laws prohibiting violence

Specific legal provisions prohibiting violence against people based on their HIV status or belonging to a key population

Programmes to address intimate partner violence\*

Programmes to address workplace violence

**Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?**

Yes, policies exist but are not consistently implemented

# Knowledge of HIV and access to sexual reproductive health services

**Ensure that 90%% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year**

## **Progress summary**

The Ministry of Education Fiji has included sexual and family life education as part of the school curriculum. Family Life Education is also a pre-service for teachers.

The National Substance Abuse and Advisory Council under the Ministry of Education also carry out organized training for School Counselors and In school peer educators with the inclusion of relevant sexual and reproductive health presentations and the assistance of Ministry of Health and Medical Services.

Awareness campaigns organized by the Ministry of Health and Medical Services and/or CSOs targeting communities, sports activities, festivals etc, have also contributed to increase in awareness of the availability of sexual and reproductive health services.

## **Policy questions (2016)**

**Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education, according to international standards, in:**

**a) Primary school**

Yes

**b) Secondary school**

Yes

**c) Teacher training**

Yes

# Social protection

**Ensure that 75%% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020**

## **Progress summary**

The Fiji HIV/AIDS (Amended) Decree 2011 observes the rights and responsibilities of people living with or affected by HIV.

## **Policy questions (2016)**

Yes and it is being implemented

**a) Does it refer to HIV?**

Yes

**b) Does it recognize people living with HIV as key beneficiaries?**

Yes

**c) Does it recognize key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people, prisoners) as key beneficiaries?**

Yes

**d) Does it recognize adolescent girls and young women as key beneficiaries?**

Yes

**e) Does it recognize people affected by HIV (children and families) as key beneficiaries?**

Yes

**f) Does it address the issue of unpaid care work in the context of HIV?**

No

**What barriers, if any, limit access to social protection programmes in your country?**

Lack of information available on the programmes Fear of stigma and discrimination

# Community-led service delivery

## Ensure that at least 30%% of all service delivery is community-led by 2020

### Progress summary

Fiji has seen the benefit of having a multisectorial approach towards the HIV response. The National HIV and STI Monitoring and Evaluation Workshop 2017, was facilitated by UNAIDS Pacific and also supported by UNICEF Pacific saw the presence of other Government Ministries such as Ministry of Youth and Sports, Ministry of Women, Children and Poverty Alleviation; Faith Based Organization such as Council of Churches and Sangam representatives were also present apart from other important NGOs and CSOs.

The workshop provided and opportunity to reflect on the contributions of various stakeholders to the Republic of Fiji National Strategic Action Plan on HIV and STIs 2016-2020.

In the future, it is hoped that service delivery will not only be limited to NGOs but will also be provided by FBOs.

### Policy questions (2016)

**Does your country have a national policy promoting community delivery of antiretroviral therapy?**

No

**What safeguards in laws, regulations and policies, if any, provide for the operation of CSOs/CBOs in your country?**

Registration of HIV CSOs is possible

Registration of CSOs/CBOs working with key populations is possible

HIV services can be provided by CSOs/CBOs



Services to key populations can be provided by CSOs/CBOs

Reporting requirements for CSOs/CBOs delivering HIV services are streamlined

**Number of condoms and lubricants distributed by NGOs in the previous year**

**a) Male condoms:**

-

**b) Female condoms:**

-

**c) Lubricants:**

-

# HIV expenditure

**Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6%% for social enablers**

## **Progress summary**

Funding for HIV/AIDS in the Republic of the Fiji Islands remains predominantly domestic funded. The Government of Fiji contributes more than 80%, and 20% is from donor agencies including private sources. The government of Fiji also contributes 100% to the procurement of ART resulting in free provision of treatment to all PLHIVs. There is continuing evidence of the stewardship of the highest political leadership in response to HIV in Fiji.

# Empowerment and access to justice

## **Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights**

### **Progress summary**

The HIV Decree is there to provide Human Rights-based Measures to assist in HIV Prevention, and HIV/AIDS care and support and for related purposes. The decree in this context provides a right from an unborn child to persons either infected or affected by HIV/AIDS issues in the country.

This is regardless of the status of an individual being positive or negative. Also providing and securing the rights of health care workers to the appropriate treatment, care and support that they provide for persons living with HIV.

Under the Constitution of Fiji 2013, every individual has a right. In this regards in relations to sexual orientation as well is recognized.

Right to equality and freedom from discrimination : Section 26:

(1) Every person is equal before the law and has the right to equal protection, treatment and benefit of the law.

(2) Equality includes the full and equal enjoyment of all rights and freedoms recognised in this Chapter or any other written law.

(3) A person must not be unfairly discriminated against, directly or indirectly on the grounds of his or her:

a) actual or supposed personal characteristics or circumstances, including race, culture, ethnic or social origin, colour, place of origin, sex, gender, sexual orientation, gender identity and expression, birth, primary language, economic or social or health status, disability, age, religion, conscience, marital status or pregnancy; or

(b) opinions or beliefs, except to the extent that those opinions or beliefs involve harm to others or the diminution of the rights or freedoms of others, or on any other ground prohibited by this Constitution.

## **Policy questions (2016)**

**In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?**

Yes, one-off activities

**Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?**

The Ministry of health & Medical Services has a system in place to address all types of complaints including discrimination of PLHIVs in the health care settings. These complaints are addressed by the Clinical Risk manager and the Customer Services Officer. Investigations such as Root Cause Analysis are conducted for severe cases and recommendations are implemented following investigations. Training such HCW desensitization programmes are conducted to address such issues if any.

**What accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings does your country have, if any?**

Complaints procedure

Procedures or systems to protect and respect patient privacy or confidentiality

**What barriers in accessing accountability mechanisms does your country have, if any?**

Affordability constraints for people from marginalized and affected groups

Awareness or knowledge of how to use such mechanisms is limited

# AIDS out of isolation

**Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C**

## **Progress summary**

The collaboration and integration of TB/HIV services has been realized from planning, resource mobilization to service delivery resulting in the increase of HIV-positive TB patients on antiretroviral therapy (ART) in 2017. TB prophylaxis coverage amongst HIV positive patients still needs to be strengthened.

The launch of the Hepatitis Policy [in draft] with the technical support from WHO is pending.

## **Policy questions (2016)**

**Is cervical cancer screening and treatment for women living with HIV recommended in:**

**a) The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)**

No

**b) The national strategic plan governing the AIDS response**

No

**c) National HIV-treatment guidelines**

No

**What coinfection policies are in place in the country for adults, adolescents and children?**

Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV

Intensified TB case finding among people living with HIV

TB infection control in HIV health-care settings

Co-trimoxazole prophylaxis