# **PROGRAMME BRIEF**



## Multi-Country Western Pacific Integrated HIV/TB Programme

**The Multi-Country Western Pacific Integrated HIV/tuberculosis (TB) Programme** is a three-year (2018-2020) US\$11,368,713 programme supported by the Global Fund aiming to strengthen control of HIV and TB in 11 Pacific island countries: Cook Islands, Federated States of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu.

#### Context

HIV prevalence in the 11 Western Pacific countries continues to be low, with overall prevalence estimated at 0.1 percent.<sup>1</sup> The cumulative number of persons ever diagnosed with HIV up until 2015 in the programme supported countries is 223.<sup>2</sup> Despite the low rates and numbers, HIV vulnerability is still high due to factors such as widespread migration and mobility, dense sexual networks, a large caseload of untreated sexually transmitted infections (STIs), low knowledge about HIV and STIs, high levels of transactional sex and significant levels of intimate partner violence.

To improve access to HIV care and diagnosis, community-based interventions are essential. HIV and STI services for key populations, including sex workers, men who have sex with men and transgender people, remain largely inadequate. Key populations are the most vulnerable and have limited access to prevention and diagnostic services due to stigma, discrimination and other social barriers. In 2016, a mapping and behavioural study among key populations was conducted in 9 of the 11 programme countries. The study revealed estimated populations of men who have sex with men and transgender people ranging from 20 (in Tuvalu) to 25,000 (in Samoa), and female sex workers from 10 (in Tuvalu) to 2,000 (in Vanuatu).<sup>3</sup> The behavioural data showed widespread high risk behaviour, such as multiple sexual partners and unprotected sex, and low access to prevention and testing services.

In 2016, TB incidence rates across the 11 programme countries was 112 per 100,000 with total notified cases being 1,019. The incidence rates per country are: Kiribati (469), Republic of Marshall Islands (327), Tuvalu (198), Federated States of Micronesia (141), Palau (129), Nauru (93), Vanuatu (35), Cook Islands (13), Tonga (9), Samoa (7) and Niue (0). Countries are performing well with successful treatment rates averaging 84 percent. Prevalence of MDR-TB cases remains low with a total of 7 cases detected from 2014 to 2016,<sup>4</sup> although this may increase with the universal use of GeneXpert machines in the countries. Similarly, cases of HIV-TB co-infection remain rare.

Despite achievements in the past decades, the TB mortality rate in the 11 programme countries is

high with 17 per 100,000 population.<sup>5</sup> The challenges, such as access to health services, insufficient quality of care and lack of financial and social protection, hamper further advancement of TB control. Formidable challenges must be overcome if the region is to become free from TB.

## Objectives

- Halt the spread of HIV among the populations and maintain HIV incidence rates below 0.1 percent annually;
- Reduce AIDS-related mortality by strengthening HIV case finding and case management;
- Reduce the prevalence, incidence and mortality from all forms of TB, thereby contributing to achieving the post-2015 global TB strategy; and
- Promote universal and equitable access to quality diagnosis and appropriate treatment of TB, Multi-Drug Resistant (MDR) TB, TB-DM (diabetes mellitus) and people with HIV and TB coinfection.

#### **Key activities**

#### HIV:

- Health systems and M&E: strengthening of routine reporting through the rapid assessment of information flows, updated guidelines and training manuals; technical assistance and capacity building.
- Provision of antiretroviral (ARV) treatment to all people living with HIV.
- Prevention of mother-to-child transmission (PMTCT): prevention of HIV infection among women of childbearing age; treatment, care and support to HIV positive mothers and their children.
- Prevention programmes for MSM, transgender people, sex workers and their clients, and other vulnerable populations: provision of condoms and lubricants, behavioral change communication, HIV counselling and testing (HST), diagnosis and treatment of STIs, and small grant funds to finance and build capacity of key population groups.
- Prevention programmes for the general population: condoms and lubricants; HCT; and diagnosis and treatment of STIs.
- A small grants programme to support initiatives to address legal barriers and advocacy in participating countries. Activities will focus on addressing structural drivers of the HIV epidemic, including gender-based violence.

• Advocacy programmes to address violence against women and girls.

Target groups include: men having sex with men, transgender people, sex workers, prisoners, seafarers, young people, people living with HIV or affected by HIV, people with STIS.

#### TB:

- National level training in TB case management, including training on childhood TB, and the use of recording and reporting registers and forms.
- Supporting TB screening and referral programmes for general and vulnerable groups and TB screening programmes for prison populations.
- Implementing community outreach activities/ programs with NGO partners and community members that target vulnerable groups.
- Strengthening service delivery through training of health staff.
- Harmonizing of TB recording and reporting (R&R) with National HMIS through development of electronic tools.
- MDR TB second line drug procurement.
- MDR help desk, supportive supervision and quality assurance.
- Treatment support to HIV patients during course of TB treatment.
- Training TB and HIV staff on TB/HIV collaborative activities.

Target groups include: people living with TB, household contacts of TB patients, prisoners, and health care providers and staff of TB control programmes.

#### **Regional activities:**

- M&E systems strengthening, in collaboration with UNAIDS: targeting M&E people and data collection.
- HIV Forum, in collaboration with FJN+: training for about 60 people living with HIV.
- Regional meeting with country TB managers organized by WHO.
- M-supply training for warehouse and lab staff.
- TB clinicians refresher training.
- TB lab refresher training.
- Gender-based violence meeting/training.

#### **Programme partners**

Cook Islands: Cook Islands Ministry of Health

**Federated States of Micronesia:** Chuuk Women's Council-FSM, Federated States of Micronesia Department of Health

Kiribati: Kiribati Ministry of Health

Republic of the Marshall Islands: Marshall Islands Ministry of Health

Nauru: Nauru Ministry of Health

Niue: Niue Ministry of Health

Palau: Palau Ministry of Health, PATLAB Initiatives members

Samoa: Samoa Fa'afafine Association, Samoa Family Health Association, Samoa Ministry of Health

Tonga: Tonga Family Health Association, Tonga Letis Association, Tonga Ministry of Health

Tuvalu: Tuvalu Family Health Association, Tuvalu Ministry of Health

Vanuatu: Vanuatu Ministry of Health

Regional: Fiji Network for People Living with HIV/AIDS, The Pacific Sexual Diversity Network

**Technical assistance:** Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine, World Health Organization

Principal recipient: United Nations Development Programme

#### **Performance coverage indicators**

	Target 2018	Target 2019	Target 2020
Number of men who have sex with men reached with HIV prevention programmes	673	1,035	1,592
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	289	445	685
Number of transgender people reached with HIV prevention programmes	1,345	2,070	3,185
Number of transgender people that have received an HIV test during the reporting period and know their results	995	1,532	2,357
Number of sex workers reached with HIV prevention pro- grammes	283	435	670
Number of sex workers that have received an HIV test during the reporting period and know their results	269	413	637
Number of people living with HIV currently receiving antiretro- viral therapy	58	68	79
Number of notified cases of all forms of TB-(i.e. bacteriolog- ically confirmed + clinically diagnosed), includes new and relapse cases	1,253	1,254	1,266
Treatment success rate- all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases	86%	87%	90%
Number of cases with RR-TB and/or MDR-TB that began sec- ond-line treatment	2	2	2

## **Budget by interventions**

	2018	2019	2020	Total
Comprehensive prevention programs for sex workers and their clients	\$55,877	\$42,503	\$42,503	\$140,884
Prevention programs for other vulnerable populations	\$238,137	\$243,128	\$248,559	\$729,825
Prevention programs for adolescents and youth, in and out of school	\$49,189	\$49,189	\$49,189	\$147,568
РМТСТ	\$16,832	\$17,014	\$17,202	\$51,048
Treatment, care and support	\$444,333	\$347,953	\$356,803	\$1,149,089
TB care and prevention	\$957,030	\$1,026,965	\$907,747	\$2,891,742
тв/ніv	\$207,099	\$204,721	\$244,993	\$656,814
MDR-TB	\$23,334	\$48,334	\$23,334	\$95,001
Integrated service delivery and quality improvement	\$43,660	\$153,174	\$43,660	\$240,493
Human resources for health (HRH), including com- munity health workers	\$38,820	\$38,820	\$38,820	\$116,459
Procurement and supply chain management systems	\$40,000	\$40,000	\$40,000	\$120,000
Community responses and systems	\$89,735	\$89,735	\$89,735	\$269,206
Health management information systems and M&E	\$254,276	\$136,067	\$136,067	\$526,411
Program management	\$1,152,935	\$1,136,417	\$1,145,864	\$3,435,217
Comprehensive prevention programs for TGs	\$232,347	\$118,435	\$118,435	\$469,217
Comprehensive prevention programs for MSM	\$84,811	\$71,437	\$71,437	\$227,686
Programs to reduce human rights-related barriers to HIV services	\$102,053			\$102,053
Total	\$4,030,468	\$3,763,894	\$3,574,350	\$11,368,713

#### **References:**

- 1 WPRO, (2017). HIV/AIDS data and statistics: Prevalence and rates of infection remain low.
- 2 UNAIDS, (2015). GARP Country Reports: 2015 Progress reports submitted by countries.
- 3 UNSW, (2016). Pacific Multi-Country Mapping and Behavioral Study: HIV and STI Risk Vulnerability among Key Populations.
- 4 UNDP, (2016). PUDR Reports.
- 5 Ibid.

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