

Coordination

The Secretariat of the Pacific Community (SPC) and UNAIDS coordinate the implementation of the Pacific Regional Strategy on HIV and other STIs for all 22 Pacific Island countries and territories.

PRSIP partners include civil society organisations, media, faith-based organisations, regional development and donor partners, UN agencies, regional societies of sexual health professionals, and national governments.

National planning and coordination

Two subregional PRSIP planning teams – one for the northern half of the region and one for the south – provide ongoing, direct support for country-level activities.

Funding

Funding sources for the Pacific Regional Strategy on HIV & other STIs include:

- ▶ Pacific Islands HIV & STI Response Fund;
- ▶ Regional and multi-country projects (e.g. the Global Fund to Fight AIDS, Tuberculosis and Malaria, Asian Development Bank);
- ▶ Operating budgets of regional development partners;
- ▶ National budgets attached to national strategic plans.

For more information, please contact:

Dr Dennie Iniakwala,
HIV & STI Section Head, Public Health Division,
Secretariat of the Pacific Community (SPC)
Ph: +679 337 0733; Email: Denniel@spc.int

Pacific Regional Strategy on HIV & other STIs 2009–2013

and implementation plan



Background

In the Pacific Islands region, HIV and other STIs (sexually transmitted infections) at present occur in quite a specific pattern. Papua New Guinea has a generalised HIV epidemic and the French territories and Guam are classified as having moderate cumulative HIV incidence rates. The rest of the region has a generally low reported prevalence of HIV. However, there are numerous risk factors that indicate the potential for rapid spread of the virus.

Challenges that need to be addressed include:

- High levels of gender-based violence, homophobia and gender inequality;
- Very high rates of other STIs;
- Large proportion of young people reporting unsafe sex practices;
- Prevailing environment of stigmatisation of people living with HIV and discrimination against them;
- Cultural taboos and religious beliefs that prevent open discussion of sexual matters;
- Uneven access to health services, both preventive and curative;
- Weak economies and limited economic opportunities.

HIV in the region is mostly sexually transmitted. Half of all infections are heterosexual and just over a quarter of cases are men who have sex with men. There is some perinatal transmission and a small but significant number of infections in injecting drug users.

Second-generation surveillance surveys conducted since 2004 show that chlamydia rates in several populations in the Pacific are among the highest in the world. Data from surveys of women attending antenatal services indicate that in some Pacific Island countries, up to 40% of pregnant women under the age of 25 may have chlamydia.

Goal

The Pacific Regional Strategy on HIV and other STIs was endorsed in 2004 by the 22 Pacific Islands Forum leaders, and later extended for another 5 years (2009–2013).

A strong focus on STIs – a key risk factor for the transmission and acquisition of HIV – is an important element of the 2009–2013 Pacific Regional Strategy.

Goal

To reduce the spread and impact of HIV and other STIs while embracing people living with and affected by HIV in Pacific communities.

Purpose

- Increase the capacity of Pacific Island countries and territories (PICTs) to achieve and sustain an effective response to HIV and other STIs
- Strengthen the coordination of the response at the regional level and mobilise resources and expertise to assist individual PICTs in achieving their targets
- Assist PICTs in achieving and reporting on their national and international targets in response to HIV and other STIs, in particular the Millennium Development Goals (MDGs), United Nations General Assembly Special Session on HIV/AIDS (UNGASS) – universal access to care and treatment.



Implementation

Structure

The Pacific Regional Strategy Implementation Plan (PRSIP) covers six broad thematic areas. Three relate to the delivery of improved services, and three to programme management and support.

Programme delivery

- HIV and STI prevention programmes
- HIV and STI testing and diagnosis
- Continuum of treatment, care, and supportive systems and services

Programme support

- Leadership and enabling environment
- Strategic information and communication
- Governance and coordination

