Pacific HIV Symposium 2026

Including Sexual & Reproductive Health, Coinfections and other Related Issues

Pacific HIV Symposium: A Call to Action

This Call to Action following the inaugural Pacific HIV Symposium urgently calls on partners, donors, governments, healthcare workers, communities, key populations and people living with HIV to come together and collectively address the rapidly climbing HIV epidemic in Fiji and beyond.

We acknowledge the rapidly rising HIV infections in Fiji and parts of the Pacific, and that the time for Pacific-owned action is now.

We emphasise that:

1. Responding to HIV is an urgent concern for the entire region, not individual countries alone. No Pacific Island is Immune, unless we all are.
2. HIV disproportionately impacts key and vulnerable populations and communities experiencing stigma, discrimination and barriers to health services, including people living with HIV, LGBTQIA+ people, people who inject drugs, sex workers, transgender people, their families, and other affected communities.
3. HIV prevention, testing, treatment and care — including prevention, diagnosis and treatment of STIs as part of comprehensive sexual health and well-being — must be accessible to the wider population, including Pacific migrant communities across the Pacific and internationally.
4. People living with HIV, key populations and communities impacted by HIV must be meaningfully involved and central to the design, prevention, monitoring and evaluation of an effective HIV response.
5. Responding to HIV will require coordinated effort from healthcare workers, community, key populations, people living with HIV, government and beyond.
6. A sustainable HIV response requires long-term political commitment, adequate investment, strong health and community systems, and an enabling policy environment, including investment in community-led responses and the organisations supporting key populations and people living with HIV.

We must:

1. Establish a Pacific-owned regional HIV mechanism to support Pacific Island nations and promote economies of scale including regional procurement.
2. Modernise the HIV response to ensure it is fit for purpose for Pacific Island countries — including HIV self-testing and point-of-care diagnostics, long-acting PrEP, differentiated service delivery, and digital health solutions. Incorporate health promotion models into prevention and treatment interventions, and scale up investment in research to support evidence-based implementation.
3. Invest in at-risk community led approaches to enable timely and accessible prevention, testing, treatment and ongoing support. The need for governments to invest in health workers (not just training but incentives for more people to undergo relevant training).Scale the role of the peer workforce — including peer navigators — through task shifting to enable community testing and care, and ensuring they are appropriately remunerated. Advocate for increased and direct funding to community-based organisations (CBOs) to expand HIV prevention and support services to remote and underserved areas.
4. Greater investment into combination prevention interventions such as PrEP, PEP, condoms and harm reduction — including access to needle and syringe programmes, drug rehabilitation services, and decriminalisation of needle and syringe use — alongside advocacy for enabling legal environments including the decriminalisation of sex work.
5. Continue to build the capacity of health workers across the Pacific to respond to HIV, STIs, BBVs and sexual and reproductive health and rights (SRHR), delivering person-centred, confidential, stigma-free and culturally safe services. Strengthen comprehensive sexuality education (CSE) integrated into school curricula, and enhance SRHR literacy among adolescents and young people in and out of schools.
6. Ensure triple elimination of vertical transmission of HIV, syphilis and hepatitis B is central to the response. Strengthen infant, child and adolescent HIV testing, treatment, care and support, and adopt universal opt-out HIV testing across antenatal, TB, STI and other appropriate clinical settings.
7. Integrate gender-based violence prevention and response as a cross-cutting component of HIV and triple elimination efforts, recognising its impact on vulnerability, access to services and health outcomes for women and girls, people with disability and key populations. Strengthen legal frameworks and appropriate legislation to protect the rights of all people affected by HIV and those experiencing gender-based violence.
8. Ensure HIV responses are culturally grounded and responsive to diverse, cultural, spiritual and faith context communities while engaging traditional, faith and community leaders as partners in reducing stigma, strengthening prevention, supporting people living with HIV and promote compassionate,

inclusive care. Use behaviour change communication as a core language for prevention interventions.

9. Prioritise the health, quality of life and wellbeing of people living with HIV and their families, including mental health, chronic disease management, palliative care, and the management of advanced HIV disease. Incorporate quality of life assessment tools (such as PozQual) and validate the role of peer navigators in supporting people living with HIV.
10. Strengthen public health surveillance and programmatic data collection systems across Pacific countries to ensure accountability in tracking progress, identifying gaps, guiding action and sharing of findings — including systematic use of local data for evidence-based decision making. Advocate for the separation of Pacific HIV data from Asia-Pacific regional aggregates in global reporting frameworks, to ensure the Pacific crisis is visible, accurately represented and appropriately resourced. Invest in sustainable, climate-resilient public health infrastructure to support long-term surveillance capacity.
11. Ensure ongoing HIV research and surveillance in the Pacific is adequately supported and practically implemented, with findings translated into positive health outcomes for communities.

The Symposium convened 391 delegates from 15 countries across the region and beyond. This Call to Action outlines the key priorities discussed during the two-day Pacific HIV Symposium, which took place in Nadi, Fiji on 17 and 18 August 2026. A multisectoral response — involving Education, Social Welfare, Social Protection and other sectors — is essential to ensure HIV is addressed as a whole-of-society priority.