WORLD AIDS DAY 2026





HEALTH EQUITY MATTERS
HIV. LGBTIQA+. COMMUNITIES.

Dash Heath-Paynter

Chief Executive Officer Health Equity Matters

For more than four decades, Australia has led the world in its response to the HIV crisis. Successive governments from across the political spectrum have backed a community-led, evidence-based approach, and that multipartisan support continues to drive strong progress towards the virtual elimination of HIV transmission in Australia by 2030.

On World AIDS Day 2026, we acknowledge the Albanese Government for extending its commitment to Australia's response. Investments announced over the past year will make vital medicines such as PrEP affordable to those who need them, and will ensure everyone living with HIV in Australia can access treatment. Recent investments also include substantial, multi-year funding to the national community sector, recognising that a sustained focus on underserved communities is vital.

Delivering on the recommendations of the HIV Taskforce remains a priority, and I thank the Taskforce's Chair, Minister for Health and Ageing, the Hon Mark Butler MP, for his enduring support. Many of the programs that arose from the HIV Taskforce report in 2023 are now in full implementation, including measures to boost the supply of HIV self-test devices across the country, improve health promotion and education for the community and clinical workforces, and extend a national HIV multicultural peer navigation program.

Internationally, Australia is continuing to invest in global efforts to tackle HIV and continues to demonstrate a commitment to multilateralism. This is crucial at a time when global HIV funding is under pressure even as need is rising.

In the Indo-Pacific, infections continue to increase at a concerning rate. Government investment in community-led responses in Fiji and Papua New Guinea will help build local capacity to treat and prevent HIV, drawing on the lessons learned from Australia's domestic response. This investment recognises that key populations and people with HIV must be at the centre of HIV prevention, advocacy and care, while reinforcing the government's commitment to supporting the health of Pacific Island countries as well as protecting Australia's health security.

As we mark World AIDS Day 2026, there is much to celebrate. The partnership between governments, affected communities, researchers, advocates and clinicians has brought the virtual elimination of HIV transmission within reach at home, and puts us in a strong position to support our Indo-Pacific neighbours in their responses. Let us take pride in what has been achieved, while renewing our commitment to ending the HIV epidemic everywhere and ensuring that no one is left behind.

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HIV Online Learning Australia 36
Dr Selina Namchee Lo 37
Adjunct Associate Professor Mark Orr AM 38

Credits

Coordination
Rachel Doran, James Gray

Design & Production
Biotext

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World AIDS Day

1 December 2026



End stigma
Start respect



Australian Government

Renee Coffey MP and the Hon Tim Wilson MP

Co-Chairs Parliamentary Friendship Group on HIV, Viral Hepatitis and STIs

The virtual elimination of HIV transmission is an ambition made possible by decades of scientific progress, community advocacy and multipartisan cooperation. Australia's achievements give us confidence in this goal and a responsibility to sustain our efforts.

As co-hosts of the annual World AIDS Day Parliamentary Breakfast, we are honoured to welcome you. We gather to reaffirm our commitment and remember those who have died from AIDS. We acknowledge the grief carried by their families, partners, friends and communities.

Australia's leadership in HIV testing, treatment and prevention reflects a collective effort. Community organisations and peers have informed policy and services through lived experience. Health professionals have delivered care, and researchers have advanced our understanding of HIV and the tools available to address it.

Cooperation across political lines has long been central to Australia's response to HIV. Today, we reaffirm our commitment to continuing that multipartisan approach. Through this breakfast and its wider work, the Parliamentary Friendship Group on HIV, Viral Hepatitis and STIs brings parliamentarians together to deepen their understanding and sustain a shared commitment to action.

We know there is more work to do. Barriers to testing, prevention and care remain. First Nations communities and overseas-born gay, bisexual and other men who have sex with men face continuing challenges. Stigma surrounding sexuality creates obstacles in some communities, and Australians living with HIV continue to experience discrimination.

Reaching people who are not getting tested remains a priority for preventing transmission and connecting people with treatment.

People living with HIV can lead healthy lives. Effective treatment can reduce HIV in the blood to an undetectable level. People who maintain an undetectable viral load cannot pass HIV on through sex. This is known as Undetectable equals Untransmissible, or U=U. Helping more Australians understand these facts is an important part of challenging stigma.

Our commitment extends to working with neighbouring countries to reduce transmission across the region. The withdrawal of international support for HIV prevention and treatment reinforces the need for sustained engagement.

More than four decades after the first cases, scientific advances provide grounds for optimism. New technologies offer further possibilities for long-acting treatment and PrEP, and research towards a cure continues.

We thank everyone contributing to this effort, inside and outside Parliament. Together, we must sustain the accessible services, research and community partnerships that will help achieve the virtual elimination of HIV transmission in Australia.



Australian Government

Senator the Hon Penny Wong
Minister for Foreign Affairs

On World AIDS Day, we remember those we have lost to HIV and AIDS. We stand with those living with HIV and we renew our commitment to ending AIDS as a public health threat.

Across the Pacific, our HIV response is at a critical moment.

Fiji has declared HIV a national emergency. Papua New Guinea is responding to a major epidemic. Several other Pacific countries are also reporting rising HIV infections.

As a member of the Pacific family, Australia stands with our neighbours. We recognise it is our collective responsibility to uphold a peaceful, stable and prosperous region; because a strong Pacific means a strong Australia.

UNAIDS estimates that across the wider Asia-Pacific region, 7.1 million people are living with HIV. In 2025, 120,000 lives were cut short due to AIDS-related deaths.

At the same time, cuts to global health financing are placing immense pressure on national responses.

Australia is committed to protecting the global gains made against HIV and supporting Pacific countries to respond to the current challenge.

Since Fiji's outbreak was declared in January 2025, the Australian Government has provided over $14 million to support surveillance, community-based prevention and testing, workforce development, health information systems, harm reduction, and health commodities.

Australia is also working across the Pacific to combat transnational crime and its effects, including the growing HIV/AIDS crisis. Australia is contributing $600 million to Waqa Moana, an opt-in maritime security initiative to counter illicit drug trafficking, which will help address an underlying cause of the HIV/AIDS crisis in the Pacific.

In Papua New Guinea, we tripled our investment in HIV to around $10 million in 2025-26, expanding access to prevention and testing services through partnerships with government, churches, and non-government organisations, with a strong focus on services for pregnant women.

We are also implementing the Australian Support for Pacific HIV Action Initiative, a $48 million investment over six years to strengthen national systems, support community-led responses and improve access to essential health commodities across the Pacific.

Early efforts include a $15 million commitment on HIV through the Fiji-Australia Vuvale Union Health Partnership, and technical assistance to ten Pacific island countries to identify preparedness and service delivery needs.

Sustainable progress depends on national leadership, strong institutions and empowered communities.



Foreign Minister the Hon Senator Penny Wong and the Hon Atonio Lalabalavu, Minister for Health and Medical Services at the official opening of Fiji's Sexual and Reproductive Health and HIV Unit Headquarters in Suva Fiji on the 6th August 2026.

Australia is committed to supporting Pacific governments, health workers and community organisations as they lead responses tailored to their contexts. We are also drawing on Australian world leading expertise, through partnerships with ASHM Health, and Health Equity Matters, and including the Burnet, Doherty and Kirby Institutes.

At a time of growing uncertainty, effective multilateral action remains critical to protecting health security and safeguarding development gains.

We are investing in global partnerships, including the Global Fund and UNAIDS, to strengthen health systems, build resilience and maintain access to essential services.

This is part of Australia's broader commitment to a peaceful, stable, and prosperous region, where Pacific countries have the capacity to protect the health and wellbeing of their people.

Together, we can build a healthier, more resilient region and advance our shared goal of ending AIDS as a global public health threat.

Australian Government
Department of Foreign Affairs and Trade

HEALTH EQUITY MATTERS
HIV. LGBTIQA+. COMMUNITIES.

Fiji's HIV response: the vital role of community leadership

Australia's investment in HIV responses across the Pacific plays an important role in strengthening regional health security. By supporting countries to prevent new infections, improve health outcomes and build resilient health systems, Australia is helping Pacific nations address emerging public health challenges while promoting healthier, more inclusive communities.

In Fiji, this investment is supporting a nationally led response to the rapidly growing HIV epidemic. In September 2026, the Fijian Government declared a national HIV emergency in recognition of increasing HIV transmission rates and the urgent need for a whole-of-society approach to strengthening prevention, testing, treatment and care. The declaration marked a significant step in mobilising a coordinated national response and highlighted the importance of partnership between government, civil society and affected communities.

Through the Australian Government's $48 million Australian Support for Pacific HIV Action initiative, Health Equity Matters leads the Community Stream in partnership with the Burnet Institute, Fiji Women's Rights Movement, Pacific Conference of Churches, and the Pacific Sexual and Gender Diversity Network. These partners work alongside national stakeholders to strengthen community engagement, expand access to services, and improve HIV prevention and treatment outcomes.

A key component of this work is the Peer Outreach Worker Program, implemented by Rainbow Pride Foundation under the Pacific Sexual and Gender Diversity Network. Sixty trained peer outreach workers operate across Fiji, providing trusted, community-based links to HIV prevention, testing and support services. Outreach workers distribute condoms, lubricants and needle and syringe program commodities, provide accurate health information, and connect individuals with services tailored to their needs.

Importantly, the impact of the program extends beyond service delivery. By reaching people who may otherwise face barriers to accessing healthcare, peer outreach workers support earlier HIV testing and diagnosis, improve access to prevention and treatment services, and strengthen engagement in ongoing care, contributing to better health outcomes. Information gathered through outreach activities provides insights into community needs and helps inform national planning and decision-making, supporting a more responsive and evidence-based HIV response.

As Fiji responds to the HIV emergency, the partnership between government and community organisations demonstrates the value of community-led approaches in achieving national HIV targets. Community organisations bring trusted relationships, local knowledge and lived experience, while government provides the policy leadership and systems needed to deliver services at scale. Together, these complementary strengths are helping Fiji build a more effective, sustainable HIV response that contributes not only to national health outcomes but also to the broader goal of regional health security across the Pacific.

HIV Globally

41 million

People living with HIV

39.7 million adults
1.3 million children

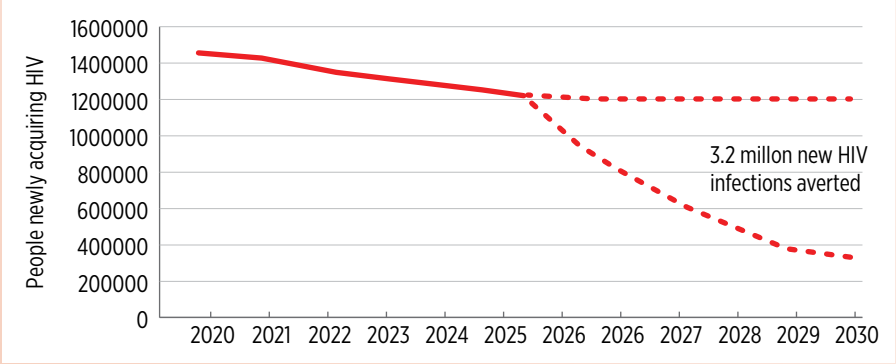
Source: www.unaids.org/en/resources/fact-sheet

UNAIDS estimates that achieving the 2030 HIV targets could prevent 3.2 million new HIV infections and avert 1.3 million AIDS-related deaths by 2030.

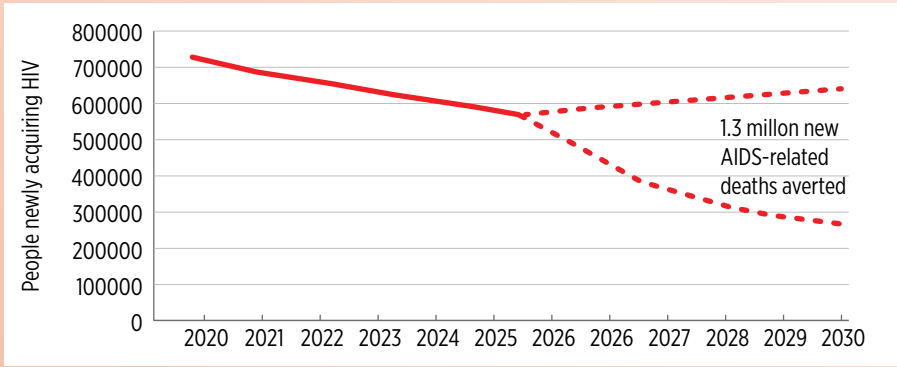
Achieving these gains will require sustained investment in HIV prevention and treatment, support for community-led responses, and action to reduce stigma, discrimination, criminalisation and other barriers to accessing services.

Ending the global HIV epidemic remains within reach, but only if global commitment and investment is renewed.

Potential new HIV infections averted



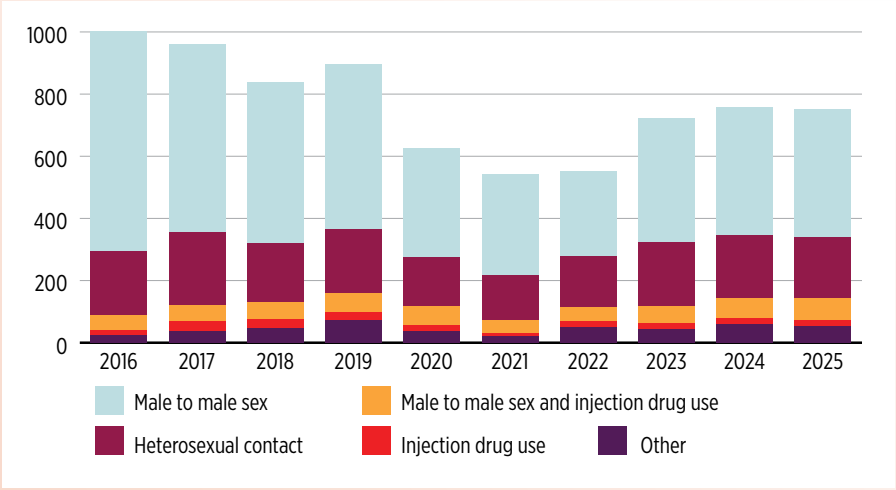
Potential AIDS-related deaths averted



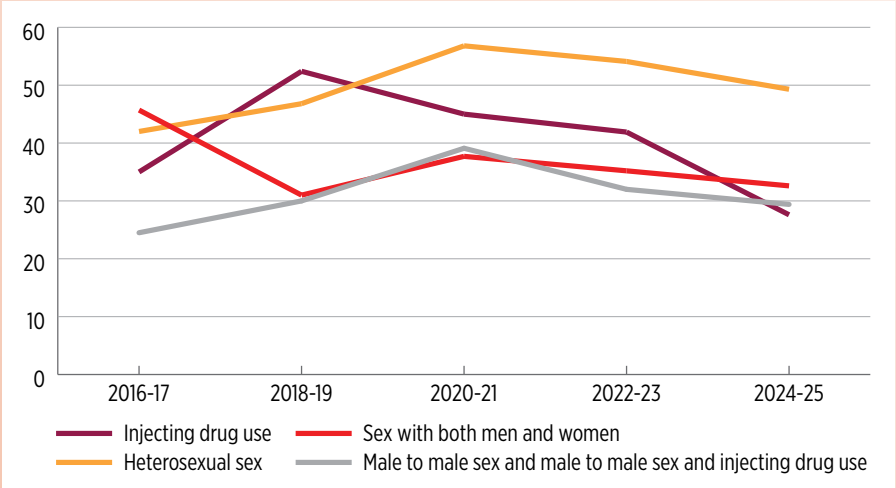
Source: UNAIDS Special report for the 26th International AIDS Conference: united to end AIDS. Geneva: Joint United Nations Programme on HIV/AIDS; 2026. Licence: CC BY-NC-SA 3.0 IGO.

HIV in Australia

Number of HIV notifications by exposure, 2016–2025



Late HIV diagnoses (%) by select population, 2016-2025



Source: King, J., Ogilvie, E., Kwon J., Gray, R., Monaghan, R. & McGregor, S., 2026, HIV, viral hepatitis and sexually transmissible infections in Australia: Annual surveillance report 2026, The Kirby Institute, UNSW Sydney, Sydney, Australia.



Australian Government

The Hon Mark Butler MP

Minister for Health and Ageing
Minister for Disability and the National Disability Insurance Scheme

World AIDS Day is an opportunity to remember those we have lost, reflect on the progress we have made, and recommit ourselves to ending HIV transmission in Australia.

This year's theme, "End Stigma. Start Respect", recognises that respect has always been one of the foundations of Australia's HIV response.

Over more than four decades, Australia has built a world-leading response to HIV through partnership between people with lived experience, governments, and health and community organisations. Together, we have transformed what was once a devastating diagnosis into a condition that people can live long and healthy lives with. Importantly, we have moved closer than ever to achieving the virtual elimination of HIV transmission.

In 2025, 753 new HIV diagnoses were reported nationally, around 25 per cent fewer than in 2016. In 2025, Australia also reached the global milestone of achieving the 95-95-95 HIV targets set by UNAIDS. This means that 95 per cent of people with HIV know their HIV status, 95 per cent of people with a diagnosis are receiving treatment, and 95 per cent of people receiving treatment have achieved viral suppression. These landmark results reflect decades of investment, innovation and sustained collaboration across the HIV sector.

This is progress worth celebrating, but our work is not finished.

While medical advances have changed what is possible, stigma remains one of the greatest barriers to achieving our goals. Stigma can discourage people from seeking information, accessing testing, engaging in care or talking openly about HIV, and it has no place in a modern public health response.

We are implementing initiatives to reduce stigma, including education which incorporates messaging to counteract stigma.

We also know that progress has not been shared equally. Recent data show an increase in HIV notifications among Aboriginal and Torres Strait Islander people, reminding us that continued effort, genuine partnership and culturally safe approaches remain essential.

Earlier this year, the 7th National Anwernekenhe Conference brought together Aboriginal and Torres Strait Islander leaders and communities to help shape the future of Australia's HIV response.

On World AIDS Day, we honour the people who have lost their lives to HIV over the past four decades. We recognise the contribution of people with HIV, whose leadership and advocacy have helped drive many of the advances we celebrate today.

Most importantly, we recommit to creating an Australia where every person is treated with dignity and respect, where stigma no longer stands in the way of health and wellbeing, and where the virtual elimination of HIV transmission by 2030 is within reach.



Australian Government

Ted O'Brien MP

Shadow Minister for Foreign Affairs

Australia has come a long way in the fight against HIV/AIDS, but there is still much more to do.

Thanks to decades of dedicated work by medical professionals and community organisations, backed by governments on both sides of politics, Australia is now a world leader in HIV treatment and prevention.

In 2025, Australia recorded 753 new HIV diagnoses, around a quarter fewer than a decade earlier.

The former Coalition Government was proud to contribute to this progress. In 2018, we invested $180 million to make pre-exposure prophylaxis (PrEP) available through the Pharmaceutical Benefits Scheme, helping more Australians protect themselves against HIV.

But there's no room for complacency, either here in Australia or beyond – including in the Pacific Islands.

During a recent visit to Fiji, a doctor at a hospital in Suva told me that one in 10 pregnant women who present to her have HIV. This is due to a growing scourge of drug-taking and the partners of these women sharing needles.

The latest data shows that one in 60 Fijian adults now have HIV.

It was a confronting reminder of the human cost of a growing crisis on Australia's doorstep, in large part due to the region being exploited as a transit route for illegal drugs destined for Australia.

Fiji recorded 2,016 new HIV diagnoses in 2025.

Australia has a responsibility to work alongside our Pacific neighbours to tackle this problem, while also supporting local organisations and health professionals on the front line of the HIV response.

We must never lose sight of the people at the heart of this challenge.

Behind every diagnosis is a person who deserves the opportunity to live a healthy life without fear of discrimination.

Australia's experience has shown that progress is possible when governments take the challenge seriously and communities are engaged and empowered.

While the progress we have made is worth celebrating, the fight against HIV is far from over.



Australian Government

Senator the Hon Anne Ruston

Shadow Minister for Health and Aged Care
Senator for South Australia

World AIDS Day is an opportunity to reflect on how far Australia has come in its response to HIV, and to recommit to the work that remains.

Australia's success in this area has never been the achievement of a single individual or entity. It has been built through decades of cooperation between parliamentarians, both state and federal, clinicians, researchers and, most importantly, the community organisations and people with lived experience who have driven this response from the very beginning. That spirit of support across Parliament is something I am proud to support, and it is why events like the World AIDS Day Parliamentary Breakfast matter: they remind us that on this issue, we are stronger working together.

I want to thank Health Equity Matters, the National Association of People with HIV Australia, and Pacific Friends of Global Health for their tireless work throughout the year, and for continuing to bring parliamentarians, health professionals and community advocates together to mark this important day.

Australia is rightly regarded as a world leader for our HIV response. Over the past decade, new HIV diagnoses nationally have fallen by around a quarter, a genuine achievement built on decades of community-led prevention, testing and treatment work. But this day is not only a moment to celebrate progress. It is also a moment to be honest about where more needs to be done. Too many Australians living with HIV still face stigma and discrimination, whether in the workplace, in healthcare settings or in their own communities. First Nations Australians continue to be diagnosed at nearly twice the rate of non-Indigenous Australians, a gap that has widened rather than narrowed over the same 10 years. Australians in regional and remote areas face particular barriers to testing and care, and our region still carries a significant burden of HIV, with Australia having a role to play in supporting our Pacific neighbours' own responses.

As Shadow Minister for Health and Aged Care, I recognise that continuing to reduce stigma, improve access and support innovation in prevention and treatment must remain a national priority, regardless of who is in government.

On this World AIDS Day, I join with colleagues from across Parliament in remembering those we have lost, standing with those living with HIV today, and recommitting to a response built on evidence, dignity and cooperation.



Australian Government

Senator David Shoebridge

Leader of the Australian Greens

World AIDS Day is an important moment to remember the lives lost to HIV and AIDS, recognise the momentum built in the HIV response, and galvanise meaningful and ongoing work in treatment, ending transmission and reducing stigma.

Inner Sydney on Gadigal Country, where my electorate office is located, is recognized as one of the first places in the world to virtually eliminate HIV transmission, coming close to global UN targets to end AIDS. That is representative of a proud history of organised community action, ground-breaking research, accessible testing, treatment and information, as well as responsive public health programs which meet at-risk communities where they are at.

This legacy in Sydney can never be separated from the tragedy that AIDS and HIV represent to so many. We lost so many gay men in particular and that community still carries the weight of this. The voices and leadership of those living with HIV must stay at the centre of every decision.

We also must not become complacent. People living with HIV are still subject to stigma and discrimination, and this prejudice deters testing and care. It erodes dignity and wellbeing. Where we have seen wins in some communities, others are being left behind.

Our response to HIV and AIDS must be equitable and flexible to meet diverse needs and experiences. We need safe, communityled services for First Nations peoples, Culturally and Linguistically Diverse communities, and people in remote or regional areas.

Globally, Australia has an opportunity to become a leader in the fight to end AIDS as a public health threat by 2030, supporting our Pacific neighbours and international partnerships to do so.

As Leader of the Australian Greens, I will keep championing evidencebased prevention, accessible testing and treatment, harm reduction and a rightsbased response free from stigma. I thank people living with HIV, community groups, political advocates, researchers and clinicians whose dedication has changed lives. This World AIDS Day I pay my respects to those we have lost too soon and I proudly join in re-committing to this work.



UQ Poche Centre for Indigenous Health

Professor James Ward

Director
University of Queensland Poche Centre for Indigenous Health

Every year, World AIDS Day provides an opportunity to recognise the millions of people globally living with HIV, and honour those whom we have lost. It's also a time to recognise the work of many individuals and organisations, and to reflect on the job done and the tasks ahead as we move towards eliminating HIV transmission.

At the University of Queensland Poche Centre for Indigenous Health we continue our efforts to achieve elimination of HIV among Aboriginal and Torres Strait Islander people. We continue to focus on improving access to HIV testing and care by providing regular data to over 90 Aboriginal Community Controlled Health Services as well as delivering ongoing health promotion work through Young Deadly Free and Aboriginal and Torres Strait Islander HIV Awareness Week platforms.

In recent years, we have seen around 20 cases of HIV per year among our people – but last year we saw almost double that. Our progress towards elimination is precarious at best. It's still a relatively small number of cases, but 37 cases is 37 too many, and over five years this adds up. We have seen worldwide – most recently in Fiji – just how fast HIV can explode in populations without appropriate access to and use of healthcare. That we have avoided this outcome among First Nations communities for more than 30 years is worth celebrating.

However, we will need to sustain efforts to achieve elimination of HIV among Aboriginal and Torres Strait Islander peoples by:

1. reducing stigma and discrimination, and eliminating racism, especially in our healthcare settings but also more broadly
2. maintaining and increasing HIV testing
3. continuing HIV prevention and education strategies in all areas
4. scaling up harm-reduction strategies, especially for people who inject drugs
5. continuing to develop models of care that improve quality of life for Aboriginal and Torres Strait Islander people living with HIV
6. investing in healthcare for temporary visa holders and populations from countries with high HIV prevalence who socialise, live and mix with Indigenous Australians.

The greatest asset we have to get us to elimination is the collective strength of our communities. They have the power and the voice that can get us through anything. What we want is to be sovereign, healthy peoples in our own land, with the right to instigate and control our own destinies – and it's no different with HIV. Together we can do this.

Emen8 and Welcome by Emen8: reaching those who are new to country and new to community

Emen8 is Australia's pre-eminent platform delivering sexual health education specifically for gay, bisexual and other men who have sex with men. Led by ACON and Thorne Harbour Health, Emen8 has spent almost a decade building trust with gay and bisexual men, and other men who have sex with men. Over the past 12 months, emen8 has reached more than 3 million people through digital advertising and attracted approximately 650,000 users to the platform.

Now, in line with the Ninth National HIV Strategy 2024–2030, we are sharpening our focus on gay and bisexual men who have recently arrived in Australia or who are new to the LGBTIQA+ community.

Engaging these communities and connecting them with services is critical to achieving our ambition of the virtual elimination of HIV transmission by 2030.

In August, Emen8 launched the 'Sexual Health Is Yours' campaign, which is about empowering people to take control of their sexual health. Throughout the campaign, we showcase a broad range of community talent so people see others who look like them, both in the messaging and on the platform.

Following the recommendations of the HIV Taskforce report and the Ninth National HIV Strategy, we're incredibly proud to announce a new service, 'Welcome by Emen8'. It is a highly targeted, peer-based service designed to help men who have recently arrived in Australia to connect with services, whether they live in an inner-city area or in regional and rural Australia.

Currently available in English, Mandarin, Thai, Vietnamese, Spanish and Portuguese, Welcome by Emen8 helps community members make sense of their sexual health options and feel confident building their new life in Australia.

During the migration process, sexual health isn't always top of mind – people are focused on housing, study and finding work. Welcome by Emen8 is designed to support new migrants to navigate new sexual health norms and to connect with sexual health services and community.

It runs nationally as a free virtual chat service, providing a safe and private space for people to ask the questions they may not feel able to ask anywhere else, and ultimately connecting them with services wherever they are.

Find out more about Emen8 and Welcome by Emen8 at www.emen8.com.au.





Emen8 National Campaign in Melbourne.



Professor Zoe Wainer

Director-General

Australian Centre for Disease Control

As the inaugural Director-General of the Australian Centre for Disease Control (CDC), I am honoured to mark my first World AIDS Day in this role. One of the strengths of Australia's HIV response is the enduring partnership between governments, communities, researchers, clinicians and people with HIV.

The CDC is proud to support the national coordination of World AIDS Day. Chaired by the CDC, the World AIDS Day Coordinating Committee brings together community HIV organisations, people with lived experience, governments and sector partners, and sets the annual national theme. It is a strong example of co-design in practice, ensuring World AIDS Day activities are informed by community perspectives and helping to maintain trust between government and the communities it serves. This partnership, underpinned by respect, community leadership and evidence-based action, has made Australia's response internationally recognised.

Australia has achieved a long-term decline in HIV diagnoses. In 2025, 753 new diagnoses were reported nationally, around 25 per cent fewer than in 2016. However, while diagnoses have remained stable over the past three years, that progress has not been shared equally. HIV continues to impact some communities more than others, including Aboriginal and Torres Strait Islander peoples, people born overseas and people from culturally and linguistically diverse communities. Stigma, discrimination and inequitable access to services remain barriers to prevention, testing and care.

The CDC has an important role in advancing national HIV policy and programs. Through the Ninth National HIV Strategy 2024–2030 and the recommendations of the HIV Taskforce, we are working with governments, community organisations, researchers and healthcare providers to achieve the virtual elimination of HIV transmission in Australia by 2030.

This year's World AIDS Day theme, 'End stigma. Start respect', reflects a shared commitment to reducing stigma and promoting respect across the HIV response. It's a reminder that eliminating HIV transmission is not only a public health challenge, but also a social one. Respect means listening to lived experience, designing services with communities rather than for them, and making sure every person can access care, free from judgement or discrimination.

On World AIDS Day, I thank the people and organisations who have shaped Australia's HIV response. By continuing to work together, we can create a future where HIV transmission is virtually eliminated and where all people living with HIV can live well, with dignity and respect.



Australian Government
Department of Health, Disability and Ageing

Professor Michael Kidd AO

Chief Medical Officer

World AIDS Day is a time to remember those who have been lost to AIDS-related illnesses, to stand alongside people with HIV, and to reflect on the extraordinary progress made over more than four decades.

For me, this day also carries deep personal meaning. Early in my career, as a young gay general practitioner, I worked with people with HIV at the Victorian AIDS Council Gay Men's Health Centre, and later in general practice in Darlinghurst. Over the decades since, I have witnessed remarkable advances in HIV prevention, testing and treatment, and the profound difference they have made to people with HIV and those who love and care for them.

Yet one lesson has remained constant: an effective response to HIV must be grounded in respect.

The 2026 World AIDS Day theme, 'End Stigma. Start respect', brings together community HIV organisations, people with lived experience, governments and sector partners. It reflects a shared commitment to reducing stigma and promoting respect across every part of the HIV response.

Respect means valuing the leadership, knowledge and advocacy of people with lived and living experience. It means ensuring that prevention, testing, treatment and care are accessible, culturally safe and free from judgement.

This is especially important because stigma can deter people from seeking information, testing, commencing treatment or accessing support. Ending stigma is not separate from our public health response. It is fundamental to its success.

This year also marks 30 years since the introduction of antiretroviral treatment. Treatment that has enabled people with HIV to live longer, healthier lives and transformed our understanding of transmission. We now know that a person with an undetectable viral load cannot transmit HIV through sexual activity: Undetectable equals Untransmissible, or U=U. This knowledge is powerful, both medically and in challenging outdated attitudes and fear.

Australia has continued to expand access and choice. This includes treatment and PrEP for people not eligible for Medicare, free and confidential self-testing, greater availability of rapid testing, permanent telehealth items for bloodborne viruses and sexual and reproductive health, and long-acting injectable treatment through the Pharmaceutical Benefits Scheme.

These achievements reflect Australia's enduring partnership between communities, governments, clinicians and researchers. That partnership, grounded in evidence, human rights and community leadership, remains central to achieving the virtual elimination of HIV transmission by 2030.

This World AIDS Day, I pay tribute to those we have lost and everyone who has shaped Australia's response. Ending stigma begins with each of us. Respect must remain at the heart of everything we do.



THE GLOBAL FUND

Peter Sands

Executive Director

The Global Fund to Fight AIDS, Tuberculosis and Malaria

In today's challenging global health landscape, the leadership of steadfast partners like Australia has never been more important. Recent disruptions to global health financing have shown how quickly decades of progress against HIV can be placed at risk. Around the world, this moment has highlighted the resilience of communities, governments and partners working together to protect progress and keep the goal of ending AIDS within reach.

Australia has made remarkable progress against HIV and remains on track to virtually eliminate HIV transmission by 2030. Its response is recognised globally as a model of evidence-based, community-led action. Even as HIV declines as a public health threat at home, Australia continues to share its expertise and support across the Indo-Pacific.

That commitment is especially vital in a region where progress remains uneven. Asia and the Pacific account for nearly a quarter of new HIV infections worldwide and remain home to the largest HIV epidemic outside eastern and southern Africa. While many countries have made significant progress, several, including Fiji, Papua New Guinea and the Philippines, are experiencing rising infection rates, underscoring the need for sustained investment, strong community leadership and expanded access to prevention services.

The Global Fund is responding by directing resources where they are needed most and supporting countries to develop solutions tailored to local contexts. Across the Indo-Pacific, we work closely with governments, including Australia's, technical partners, civil society organisations and affected communities to protect progress and strengthen the HIV response.

The Global Fund is also investing in innovations to transform HIV prevention. Lenacapavir, a long-acting injectable for HIV prevention, has the potential to dramatically reduce new infections and expand access to protection for people at greatest risk. Together with other promising innovations in development, including monthly oral PrEP options, it offers an unprecedented opportunity. Realising that promise will require sustained investment and a commitment to ensuring these new tools reach the people and communities that need them most.

On World AIDS Day, we celebrate the extraordinary progress made against HIV and honour the communities whose leadership has driven this progress. The lesson of today is clear: ending AIDS is possible, but it is not inevitable. The Global Fund is deeply grateful for Australia's continued leadership and partnership. Together, we can help end HIV as a public health threat and build a healthier future for all.



Pacific Friends of Global Health

Professor Helen Evans AO

Board Member
Pacific Friends of Global Health

World AIDS Day 2026 comes at a time of considerable uncertainty for global health. After decades of extraordinary progress against HIV and AIDS, the international systems, partnerships and investments that have made these achievements possible are facing significant change.

Across our region, the stakes are particularly high. While Australia is on track to virtually eliminate HIV transmission, many of our neighbours face a very different reality.

Sustained international cooperation has been central to progress to date. The Global Fund to Fight AIDS, Tuberculosis and Malaria is a powerful example of what can be achieved by working together. Since 2002, this partnership has helped save an estimated 26.5 million lives across the Indo-Pacific, including 213,000 in the Pacific.

In 2025, we welcomed Australia's $266 million commitment to the Global Fund's Eighth Replenishment. While several major donors reduced their contributions, Australia maintained its support, reflecting a longstanding bipartisan commitment to global health. The return on this investment is substantial: for every dollar Australia contributes, the Global Fund invests $13.60 in our region.

Large cuts to international development assistance now risk further widening health inequities. However, on a positive note, they are also accelerating important discussions about the future of global health cooperation. Much of the discussion centres on the need to move beyond rhetoric and shift to country-led health priorities, to sustainable domestic financing and to move beyond aid dependency towards genuine partnership. These shifts are necessary, but must be carefully managed to ensure that vulnerable communities and countries are not left behind.

For Australia, this emphasises the value of multilateral investments and bilateral partnerships working together. The Global Fund brings global reach, scale and a proven model of inclusive governance that gives governments and affected communities a seat at the table. Australia's bilateral program draws on longstanding, trusted relationships with Pacific governments, deep regional knowledge and the flexibility to respond to locally determined priorities. Together, they can strengthen national and regional health systems, achieve greater impact than either could alone, and help ensure Pacific voices and priorities shape global decision-making.

On World AIDS Day, we honour those we have lost and the communities whose leadership has transformed the HIV response. With powerful new prevention tools like lenacapavir becoming available, ending AIDS remains within reach. The challenge is ensuring these innovations reach those who need them most. Australia has an important role in protecting gains while advancing equitable and sustainable partnerships. Pacific Friends of Global Health thanks parliamentarians across the political spectrum who continue to champion this cause.

thread: community + health

World AIDS Day is an opportunity to remember those we have lost, recognise the strength of people living with HIV, and renew our commitment to a future free from HIV transmission and discrimination.

For WAAC, now part of thread: community + health following our recent merger with HepatitisWA, this commitment extends beyond prevention and treatment. It means supporting people to live well, maintain meaningful connections and access care that recognises the whole person.

Throughout 2026, our work has brought together HIV prevention, sexual health, harm reduction, counselling, case management and peer support. M Clinic continues to provide a welcoming setting for sexual health testing and prevention, while our health promotion and needle and syringe services support informed choices and access to practical resources.



Internal thread brand launch event 2026.

For people living with HIV, wellbeing is shaped by more than clinical care. Housing, financial security, mental health, relationships and experiences of stigma can all affect a person's ability to access support. Our social support services work alongside individuals to navigate these challenges, connecting people with services and advocating for their needs. Addressing these barriers helps people stay connected to care.

Peer connection remains central to this response. Through individual support, our Monthly Meet Up, Women's Group and HIV and Ageing initiative, we create opportunities to share experiences, build relationships and explore the realities of living and ageing with HIV. These spaces recognise the knowledge and strength within our communities and the value of being understood by someone with shared experience.

Our partnership with Positive Organisation WA (POWA) reinforces the importance of people living with HIV shaping the services and decisions that affect their lives.

The creation of thread brings complementary expertise in HIV, viral hepatitis, sexual health and harm reduction, strengthening our capacity to respond to interconnected community needs while maintaining our commitment to people living with HIV.

As we look ahead, equitable access must remain a priority, particularly for people facing geographical, financial, cultural or social barriers to care. Government partnership remains essential to reaching people who might otherwise miss out on support.

This World AIDS Day, we thank the people living with HIV, peer workers, volunteers, staff and partners who sustain this work. Together, we remain committed to a response grounded in dignity, community leadership and the right of every person to live well.

HIVtest.au: Australia's national mail-order HIV self-testing project

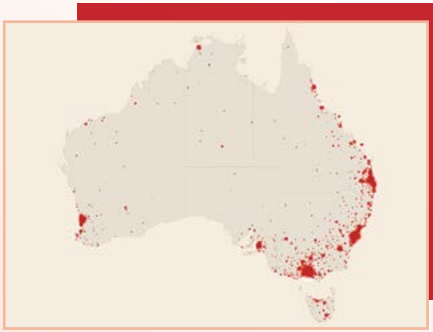
HIVtest.au was built on the premise that knowing your HIV status needs to be as simple as possible. With this goal in mind, NAPWHA worked alongside communities – especially people with HIV – to build a national platform that allows anyone in Australia to order an HIV self-testing kit to any address of their choosing. The program has now been running for three years and has distributed more than 80,000 testing kits across every state and territory.

The launch of the pilot program at the end of 2023 showcased high demand across Australia, especially among gay, bisexual, queer and other men who have sex with men. Building off this initial pilot, we have worked alongside many partners to build an ongoing national program, distributing over 30,000 kits between September 2025 and August 2026. This is a massive achievement and speaks to the need within our communities for increased access to HIV testing.

Although the numbers themselves are impressive, we are particularly proud that our service is reaching parts of our communities that we know are most in need of improved testing access. Drawing on analysis from our research partner Dr James MacGibbon at the UNSW Sydney Centre for Social Research in Health, we can be confident we have a clear overall picture of who uses our services.

Results from a survey of users showed that:

- two-thirds lived outside inner-metropolitan areas
- one in four had never tested for HIV
- 48 per cent were born overseas
- 25 per cent had no access to Medicare
- first-time testers were more likely to be under 30, women, bi+ or heterosexual, and living outside inner-metropolitan areas.



Australian HIVtest.au order map. Postcode dot size proportional to orders. Source: James MacGibbon

These results show that free, low-barrier self-testing can engage people not reached by conventional testing.

Looking to the future, we are working to ensure that HIVtest.au is not the end of anyone's engagement with their own health. This means improving pathways and connections to other services and initiatives across the country. Knowing your HIV status is an important step in taking control of your health, but it is only one of many. We are committed to ensuring that people who are engaging with HIVtest.au are connected to services that can meet the needs of their present and their future, regardless of where they are located.



HIVtest.au Promotional Poster



THE GLOBAL FUND

Lady Roslyn Morauta

Chair Emeritus

The Global Fund to Fight AIDS, Tuberculosis and Malaria

World AIDS Day is a day to remember family, friends and colleagues who have died from HIV-related illnesses. It is also a moment to reflect critically. We have much to celebrate. But after decades of progress, gains remain uneven, and some regions, such as the Pacific, now face unprecedented epidemics of regional and global concern. We must reinvigorate our efforts to ensure timely diagnosis, effective treatment and monitoring for all people living with HIV. And we must reinvest in prevention. We cannot treat our way out of HIV.

For Australia, that means paying close attention to its region, especially Papua New Guinea and Fiji, as well as smaller Pacific Island states.

HIV testing in Papua New Guinea doubled between 2023 and 2025, as did new diagnoses, with more than 11,000 people newly diagnosed in 2025. This contrasts sharply with the 42 per cent global decline in new infections since 2010. An estimated 30 new infections occur every day, including seven children acquiring HIV through vertical transmission. National positivity is 2.9 per cent, with provincial rates ranging from 1.0 per cent to 7.6 per cent. Women and girls account for more than 60 per cent of infections.

Fiji is also seeing an unprecedented escalation. One in 60 adults now lives with HIV, and more babies are being born with it. Lack of access to sterile injecting equipment is driving the epidemic, which disproportionately affects young indigenous Fijian men.

Both countries urgently need stronger prevention, testing, rapid access to treatment and monitoring, community-led approaches, and better data. Fiji also needs harm reduction services introduced and scaled up.

The introduction of lenacapavir at the end of 2026, a twice-yearly injectable PrEP, is an important advance. The Global Fund, working with national health authorities, the Australian Government and other partners, is committed to expanding access in the region and looks forward to early results from the first programs in both countries.

Long-acting PrEP is a gamechanger, but only part of the answer. Sustaining high-quality ART to achieve viral suppression, and supporting adherence and retention in care to avoid drug resistance (a growing concern in Papua New Guinea), are also essential. As is better coverage of prevention of mother-to-child transmission, including a more effective three-drug infant prophylaxis.

We know what needs to happen. We must tackle stigma and discrimination, and keep communities at the centre: women, young people, people who inject drugs, and sexual and gender diverse people. As always, our greatest hope rests with communities.



UNSW Kirby Institute

The Hon Michael Kirby AC CMG

Patron Kirby Institute, UNSW Sydney
Past Member WHO Global Commission on AIDS
Past Member UNAIDS Reference Group on HIV and the Law

World AIDS Day provides us with an opportunity to reflect on the history of the pandemic – the achievements and fresh challenges – and future initiatives that should guide us in tackling new challenges.

At the very beginning, Professor David Cooper (who later helped establish the Kirby Institute) introduced me to Jonathan Mann, first head of the WHO Global Program on AIDS, then visiting Australia. He, in turn, appointed me to the inaugural Global Commission on AIDS.

Considering the dire situation in those early years, humanity has made great progress: in therapies; in legal and social responses; and in political initiatives. Most importantly, in Australia, we have sometimes led the world in recognising that to defeat AIDS, we must embrace and support people most at risk. Yet we still do not have a cure. A safe and universal vaccine still eludes us.

Preliminary data show that Australia has met the ambitious UNAIDS 95-95-95 targets for HIV testing, treatment, and viral suppression by 2025. I praise and honour our great medical institutes: the Kirby, Burnet and Doherty institutes. They have supported our legislatures and civil society, as well as thousands of citizens who continue to survive and lead lives in which HIV is kept under control. For this, we must thank and praise our clinicians, scientists, politicians, and even occasionally lawyers.

However, progress in Australia is not matched within our region: especially Papua New Guinea, Fiji and neighbouring countries that struggle with new crises. Their challenges are also ours. Medications, education, supportive laws and outreach remain our tools to combat this continuing challenge to humanity.

In August, researchers from the Kirby Institute joined almost 400 delegates from 15 nations at the Pacific HIV Symposium in Fiji. The scale of collaboration from all sectors was encouraging. Yet the serious reduction in funding from the USA has resulted in the disruption of essential programs for HIV research, prevention and treatment. Pending restoration of international funding, Australia must shoulder additional challenges and help to promote strategies that, until now, have worked in our interests. This is not only a humanitarian imperative. It is plain self-interest.

On World AIDS Day we acknowledge that the past has given us the tools to combat HIV and ultimately to eliminate it. Yet there are new risks that call for renewed commitment to ourselves and enlarged help to our neighbours and countries worldwide. HIV and AIDS are a global challenge. That challenge has not gone away. Unexpectedly, it has now manifested new imperatives.



UNSW Kirby Institute

Scientia Professor Anthony Kelleher

Director
Kirby Institute, UNSW Sydney

World AIDS Day 2026 follows the Kirby Institute's release of a snapshot of the latest annual surveillance data on HIV and sexually transmissible infections across Australia. The data offer a chance to reflect, celebrate progress and identify where we need to refocus our efforts.

Australia has made important progress. The rate of HIV diagnoses has fallen by about one-third over the last decade. Preliminary estimates also show that Australia has achieved the UNAIDS fast-track global 95-95-95 targets. This is a significant achievement.

However, the latest surveillance data also show where progress is uneven. In 2025, we reported the second-highest number of diagnoses among First Nations Australians in a decade. They were diagnosed at almost twice the rate of non-Indigenous people, a gap that has widened since 2016.

While these numbers are small and need to be interpreted carefully, they remind us that national success does not automatically translate to health equity for all.

Australia's responsibility does not end at our borders. HIV epidemics are escalating rapidly across the Pacific, reminding us that the global response is far from finished.

Fiji is now facing one of the fastest-growing HIV epidemics in the world. New infections have risen dramatically over the past decade, while too many people living with HIV remain undiagnosed or are not receiving treatment.

The Fijian Government has declared HIV a national emergency and is strengthening its response, including through expanded testing, treatment, PrEP and harm reduction.

The Kirby Institute is proud to work with and support our Fijian partners across a range of outbreak response disciplines. This includes working with people who inject drugs and community organisations to develop evidence-based harm reduction approaches. Our contribution forms part of a broader regional response to strengthen local capacity and public health systems.

Papua New Guinea declared its own national HIV crisis in 2025. The Kirby Institute has a long history of partnership with PNG communities, government agencies and public health organisations, which we continue to build on in support of the local response.

Curbing these epidemics and maintaining our own national progress cannot be achieved without sustained government support. Australia has demonstrated what is possible when governments invest in collaborative research, public health action and community-led responses. Continued Australian investment in supporting regional HIV programs is an investment in stronger health systems, healthier communities and a healthier Pacific.



Professor Sharon Lewin AO

Director
The Peter Doherty Institute for Infection and Immunity

This World AIDS Day, there is much to celebrate in our progress towards eliminating HIV as a public health threat. It is also a reminder of the work still ahead, given the significant global shifts in HIV and health funding. Most importantly, today we remember and honour the millions of people and friends we all lost from HIV and AIDS.

At AIDS 2026 in Brazil, we heard about new developments across prevention, treatment and cure. We are moving closer to a world where managing or preventing HIV no longer means taking a daily pill. A weekly oral pill and injectable antivirals given every six months have been shown to be effective, while researchers continue to work towards once-a-year dosing.

In prevention, six-monthly injectable lenacapavir showed close to 100 per cent efficacy in preventing HIV acquisition in clinical trials. Other options, including a monthly pill for prevention, are also being explored. These advances are important. We must ensure they are accessible to everyone living with or at risk of HIV, offering choices for both prevention and treatment options.

HIV cure research is also making important progress. We heard about two new cases of people who achieved cure following stem cell transplants for blood cancers. These procedures are too toxic for widespread use, but they remind us that cure is possible.

Research into broadly neutralising antibodies is also showing promise, with some clinical trial participants controlling HIV without daily medication. Other trials testing immune-boosting drugs for an HIV cure are underway, including in Australia.

Science alone cannot end an epidemic. Changes to international health funding and reductions in global aid are significantly affecting the global HIV response, programs and communities that rely on them.

Today, Fiji is experiencing the world's fastest-growing HIV outbreak and has declared a national emergency. Through an Australian Government-funded partnership, the Doherty Institute is working alongside Fiji and other Pacific countries on community-centred programs to strengthen prevention, testing, treatment and laboratory capacity.

HIV is not just a medical or scientific issue; it is about communities, political leadership, stigma and discrimination. Community needs to be at the centre of everything we do in HIV and in all health challenges.

After more than three decades working in HIV, I remain optimistic. We have come an extraordinary distance from where we started, and the advances we are seeing today give me hope for what is still possible.



Burnet
reach for the many

Professor Brendan Crabb AC

Director and Chief Executive Officer

Burnet Institute

Burnet Institute's 40-year history in HIV research and our work with affected communities date back to the epidemic's earliest years. At Fairfield Hospital, our researchers confronted a virus with no effective treatment, at a time when an HIV diagnosis often carried a devastating prognosis.

Burnet's HIV research evolved from understanding how the virus replicates in human cells to developing antiviral therapies that have transformed HIV treatment and care.

Today, that work spans drug-resistance research built into genotyping tools clinicians use, research into a new HIV drug class that could contribute to a cure, global outbreak modelling, a vaginal gel in preclinical development to reduce HIV risk, and partnerships with communities to ensure equitable access to HIV prevention and testing.

That experience matters as our region faces a critical moment in the HIV response. Fiji declared HIV a national emergency in September, following one of the sharpest increases in new HIV infections globally. In Fiji, a baby is born with HIV every week, and a child dies from an AIDS-related illness every month. Last year, Papua New Guinea declared a national HIV crisis, with an estimated 30 new infections every day.

Australia has deep ties with our Pacific neighbours, and Burnet supports a Pacific-led response that helps people access HIV prevention, testing, treatment and care.

Australia's HIV response has shown us that biomedical tools alone do not end epidemics. They must be backed by strong health systems, sustained government commitment and genuine partnerships with affected communities. Testing is a critical entry point, but it must sit alongside accessible treatment and prevention, harm reduction, stigma reduction and community-led responses.

The Australian Government has committed $48 million over six years through the Department of Foreign Affairs and Trade's Australian Support for Pacific HIV Action, supporting evidence-based, locally led responses shaped by the Pacific's own priorities, policies and health-system contexts.

Burnet brings expertise in HIV prevention, testing, disease surveillance, health-system strengthening and supporting community-led responses.

What is needed now is sustained commitment: strengthening local health workforces and systems, expanding testing and treatment, through services people already use, and resourcing communities to reach people where they are.

Burnet has spent four decades working at the intersection of rigorous science and public health action. What matters now is making sure effective approaches reach the people who need them. That means working in partnership with Pacific governments, health services and communities to strengthen and build upon locally led responses to HIV.



UNAIDS

Eamonn Murphy

Regional Director

UNAIDS Asia Pacific, Eastern Europe and Central Asia

We are living through a period of profound uncertainty. Development assistance is under pressure, health systems face competing demands and progress against HIV cannot be taken for granted. Yet scientific advances have given us more tools than ever to prevent HIV infections, save lives and end AIDS as a public health threat. The challenge is not a lack of solutions, but whether we have the political commitment to deliver them.

Across Asia and the Pacific, a new HIV infection occurs every two minutes. While some countries are making progress, others are moving in the wrong direction. The situation in the Pacific should concern us all. The region is falling behind global HIV targets, with new HIV infections and AIDS-related deaths rising while much of the Asia-Pacific is seeing declines.

Fiji is experiencing the fastest-growing HIV epidemic in the world. Papua New Guinea continues to face a major HIV challenge, and new diagnoses are increasing in several Pacific Island countries. These trends are a warning that no country is safe unless all countries are safe. Delayed action will cost lives, fuel preventable infections and make the epidemic more difficult and expensive to contain.

The good news is that we know what works. Effective treatment enables people living with HIV to live long, healthy lives and eliminates the risk of sexual HIV transmission when the virus is undetectable, the promise of U=U (Undetectable = Untransmissible). A growing range of prevention options, including oral and long-acting PrEP, is expanding choice and reaching people previously left behind. The challenge now is ensuring equitable access to these advances.

Community leadership remains central to the HIV response. Communities are often the first to identify emerging risks, overcome stigma, reach underserved populations, and connect people to prevention, testing, and treatment services. When communities are empowered and resourced, the HIV response becomes more effective and sustainable.

Australia demonstrates what sustained political commitment, evidence-based policy and community partnership can achieve. Through its domestic leadership and investments, including the Indo-Pacific HIV Partnership and Australian Support for Pacific HIV Action, Australia strengthens HIV services, expands access to innovation and supports community-led responses across the region.

On World AIDS Day, we thank the people and government of Australia for their continued leadership and solidarity. The Pacific can still change its HIV trajectory, but the window for action is narrowing. The tools exist. The evidence is clear. The time to act is now.



UNSW Centre for Social Research in Health

Professor kylie valentine

Director
Centre for Social Research in Health, UNSW Sydney

Staff and students at the Centre for Social Research in Health (CSRH) welcome the opportunity to mark World AIDS Day and pay tribute to the tenacity and expertise of the communities who have worked with us for decades. Changes over time in the lived experiences of people with HIV mean that our focus on strengths- and rights-based social and behavioural research – that responds to community priorities – remains vital.

CSRH monitors HIV-related behaviour among gay and bisexual men and non-binary people through the GBQ+ Community Periodic Surveys, which are 30 years old in 2026 – a testament to enduring collaboration between the Centre, community organisations, and state, territory and federal governments. As the HIV epidemic continues to evolve in Australia, so do the practices community members tell us about, including the growing use of on-demand PrEP and the rapid uptake of doxy-PEP to prevent STIs. The surveys also highlight ongoing challenges in improving the HIV response, including disparities in prevention and care among younger people, bisexual people, suburban residents, and recently arrived migrants.

The GLAAAM+ Survey is a major Australian study examining the health, wellbeing and experiences of gay, bisexual+, queer and other men who have sex with men from multicultural backgrounds. Previously known as the Gay Asian Men Survey, the study expanded in its latest data collection round to include people from Asian, African, Latin American, Middle Eastern and other culturally diverse backgrounds. The key findings point to existing strengths and areas where further support may be beneficial. Awareness of PrEP and PEP and that of LGBTIQA+ friendly sexual health services were both high, and HIV treatment outcomes were reaching their peak performance. There was further scope to strengthen consistent condom use, understanding of U=U, awareness of where to access doxy-PEP, and access to culturally safe services. These findings highlight the importance of social inclusion, cultural safety and community connection in promoting sexual health and supporting holistic wellbeing.

CSRH's Stigma Indicators Monitoring Project provides national data to monitor progress towards strategic targets of reducing stigma. Since 2016, the proportion of people with HIV reporting any stigma in the past year has decreased slightly, though overt stigma is still reported by more than one-third of participants. In 2024, nearly 40 per cent of a sample of the public and 30 per cent of healthcare workers expressed stigmatising attitudes towards people with HIV, highlighting an ongoing need to invest in initiatives to address stigma across Australia.



LA TROBE UNIVERSITY | Australian Research Centre in Sex, Health and Society

Professor Adam Bourne

Director

Australian Research Centre in Sex, Health and Society,
La Trobe University

Since its foundation in 1998, the Australian Research Centre in Sex, Health and Society (ARCSHS) has worked alongside communities to build knowledge and strengthen Australia's response to HIV. Nearly three decades later, our commitment to the health, rights and wellbeing of people living with HIV remains as strong as ever.

ARCSHS is proud to host HIV Futures, Australia's largest and longest-running study of people living with HIV. Its eleventh iteration, published this year, provides a striking picture of both how far Australia has come and where important gaps remain. Biomedical outcomes among participants of HIV Futures 11 were exceptional: 99 per cent of participants were taking antiretroviral therapy and, among those reporting a recent result, 96 per cent had an undetectable viral load. Yet only 70 per cent reported good quality of life, well short of Australia's national target of 95 per cent by 2030. These findings remind us that living well with HIV requires more than effective treatment. Quality of life was closely tied to social connection, financial security and freedom from stigma. More than one in five participants had experienced significant financial stress in the previous year, while almost half reported some experience of HIV-related stigma or discrimination. People with insecure residency status were among those reporting poorer outcomes.

Our recently published Newly Positive study shows that inequities can begin even before diagnosis. Interviews with people recently diagnosed with HIV and HIV physicians identified missed opportunities for testing within healthcare, lower HIV awareness among some women and heterosexual men, and particular barriers for newly arrived migrants navigating testing, PrEP and PEP. Once diagnosed, however, participants were generally linked rapidly to care, commenced treatment quickly and achieved an undetectable viral load soon afterwards.

Together, these studies point to the next frontier of Australia's HIV response: sustaining our world-leading treatment outcomes while ensuring earlier diagnosis, equitable access to prevention and care, and the social and economic conditions that enable people with HIV to live well.

On World AIDS Day 2026, ARCSHS reaffirms its commitment to research undertaken with people living with HIV, grounded in meaningful involvement, human rights and equity. We celebrate what Australia has achieved, while keeping our attention firmly on the work still to be done.



Alexis Apostolellis

Chief Executive Officer

Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine

Australia's HIV response is at a critical moment. As we move towards the ambitious goal of virtual elimination by 2030, there is much to celebrate – but it is not time for complacency.

The HIV landscape today looks very different to even a few years ago. We are seeing shifts in who is receiving a diagnosis, alongside an increase in late diagnoses. These trends challenge longstanding assumptions about who is at risk of HIV and serve as an important reminder that HIV can affect anyone. To reach our 2030 goals, every clinician must be thinking 'could it be HIV?' regardless of the patient sitting in front of them.

As the peak professional body supporting the HIV health workforce, ASHM has a responsibility to ensure clinicians are equipped with the knowledge, confidence and tools they need to identify HIV early and provide best-practice care for those living with HIV. Achieving elimination targets will depend not only on advances in treatment and prevention, but also on maintaining awareness of HIV across the healthcare system.

While we close in on the end of HIV transmission in Australia, it comes in the context of rapidly rising HIV epidemics right on our doorstep. Papua New Guinea and Fiji have among the fastest-growing HIV epidemics in the world, with Fiji declaring a national HIV emergency this year. This is a stark reminder that progress is neither inevitable nor guaranteed.

The inaugural Pacific HIV Symposium, convened by ASHM, demonstrated the resilience of the region – and reminded us that Australia has both an opportunity and a responsibility to support our regional neighbours to strengthen HIV responses while we complete the final mile at home. HIV does not recognise borders, and the epidemic will not be over until it is over for everyone.

The pathway to 2030 is clear. We must maintain momentum, challenge outdated assumptions, empower our health workforce, and ensure that we are doing all we can to educate and champion our clinicians. Only then can we truly achieve the goal of ending HIV transmission in Australia, advance the quality of life of people living with HIV and contribute to a stronger regional response.



napwha national association of people with HIV australia

Scott Harlum

President

National Association of People with HIV Australia

In September, at the Australasian HIV&AIDS Conference in Melbourne, the Kirby Institute released preliminary data showing that Australia met the UNAIDS 95-95-95 targets in 2025: 95 per cent of people with HIV diagnosed, 95 per cent of those diagnosed on treatment, and 95 per cent of those on treatment with an undetectable viral load.

Few countries can say that. HIV diagnoses in Australia have fallen by a quarter in a decade. That isn't luck. It's what happens when governments of every persuasion, clinicians, researchers and communities pull in the same direction, year after year. Australia's response keeps kicking goals, and it remains the global gold standard.

But the national figures aren't the whole story. A third of diagnoses in 2025 were still made late. Diagnoses among First Nations Australians rose. Overseas-born gay and bisexual men aren't seeing the decline their Australian-born peers are. We've hit the target as a nation without yet reaching every community, and virtual elimination by 2030 depends on closing those gaps.

Beyond our shores, the picture is more bleak. In July I was in Rio de Janeiro for AIDS 2026, where the mood was part conference, part protest: angry, emotional and defiant. The Global Fund's eighth replenishment raised US$12.64 billion against a target of US$18 billion. The United States cut its pledge from US$6 billion to US$4.6 billion. France cut its by 58 per cent. UNAIDS estimates that if funding isn't restored there could be up to 6 million additional HIV infections and 4 million AIDS-related deaths by 2029.

Behind each of those figures are people losing access to treatment and to the community-led services that Australia's own success was built on. Our government hasn't looked away. The $266 million pledge to the Global Fund and the near tripling of support for Papua New Guinea matter, and I thank the government for both. In Fiji and Papua New Guinea, where diagnoses are climbing, they matter urgently. Australia has shown what's possible when a response is funded, community-led and politically united. Too much of the world is being denied the chance to do the same. So let's mark World AIDS Day at Parliament House on 26 November, and then get back to work. Our neighbours can't wait, and neither can the communities here at home we haven't yet reached.



Jenna Love

Interim Chief Executive Officer

Scarlet Alliance

For decades, sex workers have been central to the HIV response. The extraordinary success of HIV prevention among sex workers in Australia is no accident. It is the result of sustained investment in peer organisations, community-led health promotion, access to testing and treatment, and the leadership of sex workers ourselves. Australia continues to maintain some of the lowest HIV rates among sex workers in the world, demonstrating what is possible when sex workers are trusted, resourced and empowered to lead.

While advances in prevention, testing, and treatment continue to transform the HIV landscape, the global infrastructure that puts these tools in people's hands is being pulled apart. According to the July 2026 UNAIDS Special Report United to end AIDS, community-led services for sex workers dropped by 82 per cent across 47 countries surveyed. Condom funding has been cut by more than 90 per cent in some places, at least 168 countries criminalise sex work, and UNAIDS has recorded criminalisation of marginalised communities rising for the first time since it began tracking this trend.

Across much of the Indo-Pacific, sex work remains criminalised, driving HIV vulnerability and blocking access to prevention, testing and treatment. Following Papua New Guinea in 2025, Fiji has now declared HIV a national emergency. It is critical that our allies across the sector join sex worker organisations in championing what science and lived experience have proven beyond doubt: peer-led, rights-based responses work. The danger right now is not a lack of biomedical tools but a lack of investment in the communities that make those tools accessible.

Australia has much to offer here beyond money. Decriminalisation, paired with 40 years of sex worker peer education and outreach, demonstrates what an effective HIV response looks like in practice. But success is not completion. Sex workers still face stigma, discrimination and barriers to healthcare, and in several jurisdictions criminal law and regulation continue to undermine health outcomes. Migrant sex workers remain excluded from the benefits of decriminalisation in many settings and face disproportionate barriers to safety, healthcare and workplace rights. Against this backdrop, peer organisations continue to respond with resilience, innovation and care, despite diminishing resources.

So we continue to work for what works: the decriminalisation of all sex workers, an end to discrimination, and direct, sustainable funding for our organisations, here and across the Indo-Pacific. Not as a gesture towards our community, but as the intervention itself.



AIVL Australian Injecting & Illicit Drug Users League

John Gobeil

Chief Executive Officer

Australian Injecting and Illicit Drug Users League

Australia's success in keeping HIV rates low among people who inject drugs reflects decades of investment in harm reduction – including in needle and syringe programs, accessible testing and treatment, and peer education – as well as the leadership of people who use drugs.

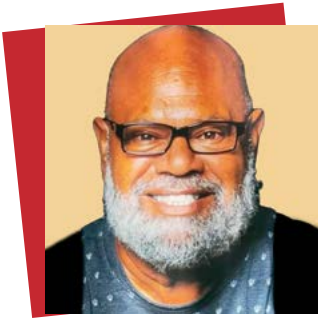
This World AIDS Day we should celebrate that success. And we should recognise that progress can never be taken for granted.

People who use drugs still experience significant stigma and discrimination across our health system and in the broader community. Discrimination stops people from accessing HIV testing, treatment and related healthcare. Access to sterile injecting equipment and peer-led services, including testing and treatment, remains inconsistent, particularly in regional and remote communities. In custodial settings, sterile injecting equipment is not available at all.

We know what works. When people have access to the information, education and healthcare they need, HIV transmission can be prevented. When services are peer led, accessible, well resourced, and free from stigma and discrimination, people who use drugs are more likely to use them.

Australia also has an opportunity to share what we have learned. Across the Pacific region, we are seeing how quickly HIV can impact communities where access to harm-reduction information, education and services is limited. Australia has a responsibility to share our successes and support community-led harm reduction across our region.

People who use drugs have always been part of Australia's HIV response. If we are to achieve virtual elimination, our communities must remain at the centre of it.



anwernekenhe
National HIV Alliance

Colin Ross

Chairperson

Anwernekenhe National HIV Alliance

World AIDS Day is an important opportunity to reaffirm our support for people with HIV, and to commemorate those we have lost. While we should reflect on the progress made towards virtual elimination of HIV transmission, we must also consider who is at risk of being left behind, including those who are not yet diagnosed or who cannot access appropriate care and support.

Affected communities must remain central in program and policy development. The Anwernekenhe National HIV Alliance (ANA) continues to uphold this commitment to a community-driven approach, with the goal of providing national leadership and promoting effective and culturally appropriate responses to HIV among Aboriginal and Torres Strait Islander peoples. It provides an essential voice for Indigenous Australians, who continue to be disproportionately impacted by HIV.

It is with great pride that I reflect on the 2026 Anwernekenhe National HIV Alliance Conference, which brought together community leaders, people living with HIV, Sistergirls, Brotherboys, LGBTIQA+ communities, health professionals, researchers, policy makers and partners from across the country and the Western Pacific.

Delegates participated in important discussions about HIV prevention and treatment, stigma and discrimination, social and emotional wellbeing, ageing, community leadership, health equity and self-determination.

We were honoured to hear from the Hon Rebecca White MP, Assistant Minister for Women, Assistant Minister for Indigenous Health and Assistant Minister for Health and Aged Care, who spoke about Australia's commitment to addressing inequalities experienced by Aboriginal and Torres Strait Islander peoples. Importantly, she recognised that community leadership has been at the heart of Australia's HIV response for decades and must continue to shape future policy and programs.

Our keynote speaker Professor James Ward talked about syndemics and the need for public health professionals to understand the interaction of multiple different conditions. This synergy has been yarned about at Anwernekenhe Conferences for more than thirty years.

Looking ahead, we see opportunities to strengthen relationships with the National Aboriginal Community Controlled Health Organisation (NACCHO), other Aboriginal Community Controlled Health Organisations and other national peak bodies.

It is important we continue to improve knowledge of, and access to, PrEP for Aboriginal and Torres Strait Islander people. This requires tailored, resourced programs that are built by and for our communities. Advances in HIV prevention, treatment, care, and support must be shared through workforce development, education and learning.

As we mark World AIDS Day 2026, ANA and our partners commit to ensuring Aboriginal and Torres Strait Islander leadership, mindfulness and advocacy in achieving the shared goals of the HIV response. Stronger Together.

HIV Online Learning Australia

HIV Online Learning Australia (HOLA) is a workforce development program delivered by Health Equity Matters and the National Association of People with HIV Australia (NAPWHA). HOLA provides free, high-quality HIV education and professional development for staff and volunteers in Australia's HIV community workforce.

Established in 2021, HOLA continues to deliver online HIV education through e-learning modules, webinars and workshops. These equip the community workforce with the knowledge, skills and attributes to work effectively with people affected by or at risk of HIV.

In 2026, HOLA expanded opportunities for peer workers, social workers and health promotion staff in Health Equity Matters member organisations to engage in collaborative, cross-jurisdictional learning. Examples include:

- a HOLA-facilitated health promotion community of practice
- a HOLA-facilitated national face-to-face health promotion forum
- an externally facilitated action learning set for peers and social workers
- an externally facilitated action learning set for managers.

In 2025–2026, HOLA delivered six webinars and 10 workshops. In post-event evaluations, a large majority of participants reported that these sessions increased their confidence in the subject matter and helped them gain practical skills and transferable tools.



Webinars provided opportunities for participants to engage with emerging research and innovative practice on issues affecting people living with HIV and priority populations. Webinar topics this year included:

- differing levels of HIV knowledge between straight men and gay, bisexual and other men who have sex with men
- AI overviews and their relevance for health promotion
- strategic advertising design for health promotion
- hidden power dynamics for peer workers in healthcare settings.

Workshops provided live, small-group training opportunities, with a focus on practice change or skill development. Workshops this year included:

- cultural awareness and responsiveness: working effectively in multicultural contexts
- communication skills for peer workers
- mental health first aid
- grant writing.

This year, HOLA expanded beyond its original audience of HIV community organisations, giving Hepatitis Australia, Scarlet Alliance and their member organisations access to its e-learning modules, webinars and learning packages.

An independent evaluation completed by Nous Group in July 2026 highlighted HOLA's ongoing contribution to workforce development and its role in supporting a connected, skilled and informed community workforce. As the program continues to build momentum across health and community sectors, HOLA remains committed to building capability, fostering collaboration and supporting effective community responses to HIV.



AUSTRALIAN GLOBAL HEALTH ALLIANCE

Dr Selina Namchee Lo

Executive Director
Australian Global Health Alliance

On World AIDS Day 2026 we stand in solidarity with people living with HIV and renew our commitment to ending AIDS as a public health threat. Australia has community advocates and world-class global health research institutions who have long contributed to this effort. The bipartisan support shown by the Australian Parliament across generations for HIV and AIDS efforts is a legacy that inspires.

Global health itself is the subject of significant dialogue around reform, in architecture, resourcing, and approach. Global health also looks fundamentally different to what it did a few short years ago. The rise of AI has transformed opportunities in innovation, health services, and in new philanthropy. AI has also heralded very real biosecurity risks and added another layer to existing planetary health threats. Yet a common understanding and mandate remains: global health is about all of us, not some of us, as the HIV movement brought home so starkly.

This year's UNAIDS theme, 'Ending AIDS starts with access', focuses our efforts on the fact that scientific advances (in prevention, treatment and testing), resources, and political leadership must be accessible to all, regardless of geography, who you are, or economic and legal circumstances. The centring of human rights with science, community engagement and activism as a global public good, and a whole-of-society approach, has shown what success looks like. It is a general combination approach that could be replicated for nearly all global health challenges.

Progress on HIV in our region and globally is, however, uneven. In 2025, UNAIDS reported that nearly 9 million people living with HIV worldwide still had no access to treatment. Unwavering commitment is needed to multilateral health initiatives such as the Global Fund, local communities, country leadership, and knowledge-based networks that actually connect innovative science, community, and evidence to policy.

The Australian Global Health Alliance acknowledges and works towards addressing complex global health challenges through an intentional focus on collaboration, a commitment to transdisciplinary approaches, the offering of safe spaces to convene tough conversations, and the continued nurturing of evidence-based ecosystems with global health equity values and human rights at the centre.

The Australian Global Health Alliance is the national member-based peak body of global health organisations strengthening the Australian ecosystem for global health, and proudly hosts Pacific Friends of Global Health and the Australian Network of WHO Collaborating Centres.



HEALTH EQUITY MATTERS
HIV. LGBTIQA+. COMMUNITIES.

Adjunct Associate Professor Mark Orr AM

National President
Health Equity Matters

World AIDS Day 2026 is an opportunity to remember all those whose lives have been affected by HIV and AIDS. We honour the colleagues and friends we have lost, and the affected communities whose leadership has set the standard for Australia's response. We also recognise the researchers, clinicians and advocates who have dedicated their careers to ending HIV. Together, they continue to inspire us as we work towards the virtual elimination of HIV transmission by 2030.

Since the earliest days of the HIV epidemic in Australia, the resilience, collaboration and innovation of all those who have contributed has been enabled by successive governments, who recognised that multipartisanship – backed by sustained Commonwealth investment – was the only effective way to tackle the crisis. The resulting partnership remains the single greatest reason for Australia's progress, and has established our response as a global benchmark.

That partnership continues today. We thank the Albanese Government for reaffirming its commitment to the national response, and acknowledge the leadership that the Minister for Health and Ageing, the Hon Mark Butler MP, has shown in implementing the recommendations of the HIV Taskforce. This has helped turn an ambitious plan into programs that are driving real progress.

Partnership also defines Australia's contribution to the global HIV response. In an increasingly uncertain international environment, the government has remained committed to a multilateral approach, based on the understanding that no country can end an epidemic alone. Programs delivered through international institutions such as the Global Fund continue to save lives, including across our own region, where Health Equity Matters is proud to support community-led responses in countries including Sri Lanka, Malaysia and Bhutan. Closer to home, Australia has stepped up its support for Fiji and Papua New Guinea as they confront rapidly growing epidemics. We thank the Minister for Foreign Affairs, Senator the Hon Penny Wong, and the Department of Foreign Affairs and Trade for their sustained commitment to this important work.

Australia's HIV partnership continues to deliver impressive results. Notably, 2025 saw Australia meet the UNAIDS 95-95-95 targets for HIV testing and treatment. This achievement shows once again what the partnership can achieve when backed with sustained investment.

However, there is still work to do. Inequity persists, particularly among First Nations peoples and overseas-born gay and bisexual men. This World AIDS Day, let us draw on the strength of our partnership to meet the challenges we face, extend its reach to every community still missing out, and share its lessons with our neighbours as we work together towards 2030.


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Australian
Centre for
Disease
Control


napwha national association of
people with HIV australia


Pacific Friends of
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UNSW
Kirby Institute


Doherty
Institute


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and Society


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