



Department
for International
Development



Rt Hon Alistair Burt MP
Minister of State

Stephen Doughty MP
Chair, APPG on HIV and AIDS
House of Commons
London
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Dear Stephen,

Thank you for your letter of 24 October on behalf of the APPG on HIV and AIDS and its recent report "No One Left Behind: Towards a sustainable HIV response for key populations and women and girls".

I very much enjoyed the lively STOPAIDS quarterly meeting ahead of the International AIDS Society conference in Amsterdam in July and was glad to have the opportunity to comment briefly on the report.

You asked me in your letter to set down, more formally and in more detail, our responses to the main recommendations. These can be grouped into three main areas: a) our overall approach to transition, b) our work with the Global Fund and c) how we influence partner governments and ensure accountability.

Overall approach

I agree with the report that the situation is complex. There are technical capacity gaps which can and should be addressed, but our assessment is that the critical barrier to accessing services for those most left behind in the HIV response is political will, not external financing.

In many upper middle-income countries, restrictive laws, stigma and discrimination, and inadequate service provision for key populations (LGBT people, sex workers, injecting drug users, prisoners, migrants), are resulting in high HIV and TB infection rates among key populations and addressing this is not straightforward.

As countries transition through different stages of development our programme will adapt. How our partnerships will change depends on the country context; there is no one-size-fits-all approach and development is not a linear process. DFID is establishing working principles on how we transition our work in-country. This reflects that a more flexible approach, rather than the more formal use of transition frameworks that the report suggests, allows us to remain sensitive to the changing contexts we operate in.

DFID works closely with other Government Departments when we transition, and actively engages with civil society and partner governments to ensure development gains are protected.

Our work with the Global Fund

To be clear, all low and lower-middle income countries are eligible for Global Fund support regardless of disease burden, which covers just under two thirds of those living with HIV. Of the remaining third living in upper middle-income countries, many of which are eligible for Global Fund support, two thirds are living in South Africa where women and girls are disproportionately affected alongside key populations who are particularly vulnerable to HIV in all settings.

The transition to domestic financing is not easy and will take time. DFID fully supports the Global Fund's sustainability, transition and co-financing policy, which has been successful in securing greater domestic financing for HIV. Countries accessing Global Fund grants (covering HIV as well as TB and malaria) in the 2015-2017 implementation cycle spent 31 percent more in fulfilling their commitments than in the previous cycle. We believe that a successful transition from external financing is important for every country. To achieve this, countries and partners need to start planning early for transition and look at sustainability from multiple angles, including the effectiveness, efficiency, equity and financing of systems and services. This is a key objective for the Global Fund and a priority for DFID.

Influence and accountability

The UK continues to focus most of its aid in countries with the highest need in low-income, fragile, and conflict-affected regions. Where countries can afford to finance HIV interventions themselves, the UK Government will work with partners and national governments to encourage them to develop their own programmes and financing, while ensuring key populations and women and girls are properly supported.

The UK continues to put women and girls at the heart of everything we do and leads the world in our long-term support for comprehensive sexual reproductive health and rights which significantly impacts HIV outcomes. We are the largest donor to UNFPA, and the second largest bilateral donor on family planning. We are the second largest donor to the Global Fund in the current replenishment. We have made the biggest ever donor commitment to help end FGM, and we spend around £1 billion per year on maternal, newborn and child health. Our long-term commitment provides stability as the SRHR landscape changes and evolves.

The UK Government also firmly believes that human rights are universal and should apply equally to all people and therefore remain committed to supporting civil society, as they hold governments to account for the human rights of those most left behind in the HIV response. That is why I was delighted to announce the uplift to our support to the Robert Carr Civil Society Networks Fund at AIDS 2018 and proud to be supporting through the Global Britain Fund, LGBT activists to demand their rights around the world.

Once again, thank you for your letter and the continued engagement of the All-Party Parliamentary Group on HIV and AIDS. We commend all those who contributed to the report which highlights clearly the challenges that remain to end AIDS by 2030.

Al Burt

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