Fiji Battles Surging HIV Cases and Deaths Amid Growing Crystal Meth Scourge

The number of people living with HIV in Fiji jumped from 500 to nearly 6,000 in recent years. Here's how public health advocates on the Pacific island are responding.

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The number of people living with HIV in Fiji rose from 500 in 2014 to 5,900 in 2025, making the South Pacific island nation the site of one of the world's fastest-growing HIV epidemics, reports UNAIDS. Of those diagnosed with HIV in the past year, nearly half reported using intravenous drugs, notably crystal meth. To combat the outbreak, public health efforts aim to address HIV stigma by fostering peer support and promoting safe drug use.

Since the island's first HIV diagnosis in 1989, new HIV cases in Fiji increased slowly. In 2000, Fiji, which has a population of slightly less than 1 million, saw only 21 new diagnoses, according to UNAIDS estimates. In the past decade, however, new HIV cases began to rise at alarming rates.

In January 2025, following a sharp increase in new diagnoses, the government declared an outbreak. At the time, a third of people diagnosed with HIV were not receiving treatment, according to UNAIDS. With help from the Burnet Institute, an Australian public health research organization, Fiji implemented an HIV peer counseling protocol. When someone is newly diagnosed with the virus, they are matched with a peer counselor to support accessing treatment, contact tracing and continuity of care.

But by the end of the year, the outbreak had escalated. In 2024, 1,583 people were newly diagnosed with HIV, but in just the first six months of 2025, over 1,200 new HIV diagnoses were recorded, according to a World Health Organization (WHO) press release.

The WHO Division of Pacific Technical Support and the United Nations Development Program commissioned a rapid assessment of HIV risk, prevention and treatment in Fiji that exposed limited HIV awareness and testing and treatment accessibility as well as unsafe drug use

practices.

All 56 people interviewed in the assessment reported using a needle or syringe that someone else had used due to lack of access to safe equipment when injecting methamphetamine. Many participants noted that their first time injecting the drug was also the first time they tried meth.

Unsafe injection drug use is a known transmission route for both HIV and hepatitis C. To learn more about this, see the POZ Basic “HIV Transmission and Risks."

In response to the continued outbreak, Fiji’s Ministry of Health and Medical Services is implementing the WHO’s needle and syringe program (NSP) to provide people using intravenous drugs with clean needles and syringes and help dispose of used needles and syringes safely.

“In the context of Fiji’s HIV situation, introducing NSP is essential to reducing transmission, protecting communities and linking people to health services that are safe, confidential and stigma-free,” said Mark Jacobs, director of WHO’s Division of Pacific Technical Support, in a press release. “I welcome the progress toward implementation of this critical program, and WHO stands ready to support the Ministry of Health and Medical Services and partners to translate plans into action.”

In addition, Fiji is implementing a comprehensive HIV Surge Strategy and a national HIV Outbreak Response Planoffering long-term HIV prevention, testing and treatment with the goal of getting 95% of people tested for HIV, 95% of those people treated and 95% of those on treatment virally suppressed.

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