- 24. Calls on the Commission to inform Parliament which reasons, other than its intention to close the Agency in 2008, led to the fact that the Agency was not given the task of implementing the Union's special programme for the northern part of Cyprus and aid to the Palestinian population;
- 25. Considers that the Agency has not only the systems (logistics, IT systems, and others) to implement swiftly large amounts of support in post-conflict areas, but that it has especially also proven high levels of expertise and know how in post-war reconstruction;
- 26. Is convinced that at a point where the Commission wants to take over the management of the new Instrument for Pre-Accession Assistance in view of the acquis-related tasks related to the Balkans, the Agency should take over the tasks required by a 'RELEX external actions Agency';
- 27. Considers that a new mandate of this successful agency would be the most efficient way to implement the new tasks in external actions, which cannot be implemented by Commission services in Brussels or by delegations of the Commission;
- 28. Considers that the Agency could play a most efficient role in areas where traditional development assistance cannot be implemented; considers also that this would significantly increase the EU's visibility;
- 29. Welcomes the measures taken by the Agency to improve contract award procedures following the Court of Auditors' observations raised in its 2003 and 2004 annual reports, which resulted in increased transparency in various areas: for instance, important decisions made during the evaluation process which affect the contract award are better documented and furthermore the overall discipline of the evaluation and contract award procedures is improved;
- 30. Invites the Agency to further develop selection criteria in order to make them more realistic as they sometimes are ill-suited to the circumstances in which the Agency is operating;
- 31. Welcomes the progress made in the area of tendering and encourages the Agency to further intensify its efforts in order to ensure that contracts awarded fully comply with all regulatory provisions;
- 32. Notes that in its 2004 report the Court of Auditors stated in a review of operations entrusted to UNMIK an absence of adequate financial control when making payments and serious difficulties in closing operations, mainly due to an absence of adequate accounts for the projects and of sufficient justification for the expenditure; welcomes the significant efforts made by the Agency in 2005 to resolve this situation, but notes however that some problems for closing operations remained.

P6_TA(2007)0137

Combating HIV/Aids within the EU and in the neighbouring countries 2006-2009

European Parliament resolution of 24 April 2007 on combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009 (2006/2232(INI))

The European Parliament,

- having regard to its resolution of 6 July 2006 on 'HIV/AIDS: Time to deliver' (1),
- having regard to its resolution of 30 November 2006 on AIDS (2),
- having regard to the Council Conclusions of 6 June 2005 on Combating HIV/AIDS,

⁽¹⁾ Texts Adopted, P6_TA(2006)0321.

⁽²⁾ Texts Adopted, P6_TA(2006)0526.

- having regard to the note from the General Secretariat of the Council of 24 November 2005 on 'World AIDS Day EU Statement on HIV Prevention for an AIDS Free Generation',
- having regard to the EU Drugs Strategy (2005-2012) adopted by the European Council on 17 December 2004.
- having regard to the Commission Communication to the Council and the European Parliament on 'Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009' (COM(2005)0654),
- having regard to the Commission Communication to the Council and the European Parliament on a 'Coherent European Policy Framework for External Action to Confront HIV/AIDS, Malaria and Tuberculosis' (COM(2004)0726),
- having regard to the Communication from the Commission on the European Neighbourhood Policy Strategy Paper (COM(2004)0373),
- having regard to the Communication from the Commission to the Council and the European Parliament on strengthening the European Neighbourhood Policy (COM(2006)0726),
- having regard to the 'Dublin Declaration' on Partnership to fight HIV/AIDS in Europe and Central Asia, adopted at the Ministerial Conference 'Breaking the Barriers Partnership to fight HIV/AIDS in Europe and Central Asia' held within the framework of the Irish EU Presidency on 23-24 February 2004,
- having regard to the 'Vilnius Declaration' on Measures to strengthen the response to HIV/AIDS in the European Union and in the Neighbouring Countries, adopted by Ministers and representatives of Governments from the European Union and neighbouring countries at the conference 'Europe and HIV/AIDS New Challenges, New Opportunities', held in Vilnius, Lithuania, on 16-17 September 2004,
- having regard to the United Nations Millennium Declaration adopted by the United Nations General Assembly at its 55th Session on 8 September 2000 as well as to the UN Millennium Development Goals (MDGs) and in particular the goal of reversing the spread of HIV/AIDS by 2015,
- having regard to the Declaration of Commitment on HIV/AIDS adopted by the UN General Assembly Special Session on HIV/AIDS on 27 June 2001,
- having regard to the Resolution adopted by the United Nations General Assembly on the 'Declaration of Commitment on HIV/AIDS' on 2 August 2001,
- having regard to the UN General Assembly's follow-up on the implementation of the Declaration of Commitment on HIV/AIDS, 'Towards universal access: Assessment by the United Nations Programme on HIV/AIDS on scaling up HIV prevention, treatment, care and support' of 24 March 2006,
- having regard to the Report of the Secretary-General of the United Nations regarding the Declaration of Commitment on HIV/AIDS: five years later, of 24 March 2006,
- having regard to the 'Political Declaration on HIV/AIDS' adopted by the UN General Assembly on 2 June 2006,
- having regard to the WHO HIV/AIDS Programme 'Towards Universal Access by 2010' of 2006,
- having regard to the UNAIDS 2006 Report on the Global AIDS Epidemic,

- having regard to the UNAIDS Epidemic Update of December 2006,
- having regard to the EuroHIV Mid-year Report 2005 of August 2006,
- having regard to the Eurobarometer on AIDS Prevention of February 2006,
- having regard to the Council of Europe's Parliamentary Assembly Resolution 1399 (2004) as well as its Recommendation 1675 (2004) on a European Strategy for the promotion of sexual and reproductive health and rights,
- having regard to Rule 45 of its Rules of Procedure,
- having regard to the report of the Committee on the Environment, Public Health and Food Safety and the opinion of the Committee on Women's Rights and Equal Opportunities (A6-0091/2007),
- A. whereas according to the UNAIDS Epidemic Update for 2006 more than 39.5 million people worldwide are living with HIV and 4.3 million people were newly infected with HIV in 2006; whereas 95% of the people affected by HIV/AIDS live in developing countries,
- B. whereas EuroHIV's Mid-year Report 2005 shows that 215,510 people were newly infected with HIV in 1998-2005 within the European Union and 646,142 people were newly infected with HIV in the European Region of the World Health Organization (WHO),
- C. whereas according to EuroHIV almost one quarter of all new HIV infections affect young people under the age of 25,
- D. whereas people living with HIV/AIDS face stigma and discrimination,
- E. whereas recent progress in HIV/AIDS treatment, together with a decline in prevention funding, has
 contributed to an increase in unsafe behaviour and consequently to growing numbers of new HIV
 infections,
- F. whereas the Reports from EuroHIV and UNAIDS confirm that the number of new HIV infections is still rising at an alarming rate within the European Union as well as in the neighbouring countries, and that in some countries the estimated number of people infected with HIV is almost three times higher than the official number,
- G. whereas despite the increased number of HIV infections, the steady decrease in the number of AIDS cases diagnosed in recent years has continued in 2005, with less than half the number of cases diagnosed in 2005 in comparison to 1998,
- H. whereas a large proportion of HIV infections remain undiagnosed; whereas many people do not know their sero-status and are likely to discover it only once afflicted by HIV/AIDS-related illnesses (1),
- I. whereas the infectivity of HIV increases significantly in the presence of other sexually transmitted diseases (such as gonorrhoea, chlamydia, herpes and syphilis),
- J. whereas the groups exposed to the highest risk of contracting HIV include Injecting Drug Users (IDUs), men having sex with men, sex workers and their clients, migrants, prisoners and young people under the age of 25,
- K. whereas the epidemic among IDUs is one of the reasons for the rapid spread of HIV infection in many Eastern European countries,

HIV/AIDS in Europe, Council of Europe, Social, Health and Family Affairs Committee, rapporteur: Mrs Christine McCafferty, doc. 11033, 27 September 2006.

- L. whereas the UNAIDS Epidemic Update 2006 found that about three quarters of heterosexually acquired HIV infections in Western and Central Europe are among immigrants and migrants,
- M. whereas in most countries of Central and Western Europe, the prevalence of HIV in blood donations remains low; whereas recent figures for some Eastern European countries, however, show a trend in the opposite direction,
- N. whereas the Dublin Declaration recognises that 'the promotion of equality between women and men, and girls and boys, and respecting the right to reproductive and sexual health, and access to sexuality education, information and health services as well as openness about sexuality, are fundamental factors in the fight against the pandemic',
- O. whereas prevention programmes, including education, increased access to information and condoms, and access to treatment and drug rehabilitation and to harm-reduction services, constitute the most effective tools for combating HIV/AIDS,
- P. whereas the female condom is still underutilised, even though it is the single women-controlled device protecting women against unwanted pregnancy, HIV and other sexually transmitted infections which is already available,
- Q. whereas EuroHIV has no national data from Spain or Italy although both are considered sites of major epidemics by EuroHIV,
- R. whereas recent data confirm that the scope of new HIV infections as well as the number of people living with AIDS are different for each Member State and the neighbouring countries, as are the groups which are considered most vulnerable,
- S. whereas women now represent 50% of people living with HIV/AIDS worldwide, but their special needs with regard to reproductive health in terms of family planning, safe births and breastfeeding of babies are often overlooked; whereas, according to UNAIDS, over the past two years, the number of women and girls infected with HIV has increased in every region of the world, with rates rising particularly rapidly in Eastern Europe, Asia, and Latin America; and whereas, according to WHO, women are probably more susceptible than men to infection from HIV in any heterosexual encounter, due to biological factors,
- T. whereas increasing numbers of women are being infected unwittingly with the HI-Virus in their private life through unsafe heterosexual contact and becoming carriers of the virus which it is then possible for them to transmit to their offspring; whereas effective responses to AIDS must address the factors that continue to put women at risk and increase their vulnerability, such as lack of self-determination, violence against and trafficking in women, poverty and gender discrimination,
- U. whereas the latest Eurobarometer on AIDS prevention of February 2006 showed that 54% of the EU-25 population believe or are convinced that it may be possible to become infected with HIV from 'kissing on the mouth someone with AIDS or who is HIV positive' and 42% believe or are convinced that it is possible to become infected by HIV from 'drinking from the same glass which has just been used by someone with AIDS or who is HIV positive',
- V. whereas in the 'Dublin Declaration', government representatives from Europe and Central Asia promised to 'promote strong and accountable leadership at the level of our Heads of State and Government to protect (our) people from this threat to their future, and promote human rights and tackle stigma and ensure access to education, information and services for all those in need' and 'make the fight against HIV/AIDS in Europe and Central Asia a regular item on the agendas of our regional institutions and organisations',

- W. whereas Ministers and Representatives of Governments from the European Union and neighbouring countries reaffirmed the commitments made in the 'Dublin Declaration' with the 'Vilnius Declaration'; whereas both Declarations emphasise the need for strong and comprehensive follow-up measures for the actions outlined in them,
- X. whereas the 'Vilnius Declaration' expressly mentions the use of national financial instruments as well as Community funds, including the Structural Funds, for the implementation of policies to tackle HIV/AIDS.
- Y. whereas NGOs are often dependent on public financing; whereas tender procedures for Community-financed programmes are usually complicated and EU membership often means a sudden end of financial support for NGOs from international sources other than those of the EU,
- Z. whereas not all Member States have equal access to treatment and drugs and in many of them particularly the new Member States inequalities exist as regards the availability of funding and resources,
- AA. whereas Member States need support in building up programmes that encourage testing, training of counsellors as well as life-long follow-up and support for the people living with HIV, in particular since the medication is life-long, often causes side-effects and since poor compliance with the use specification of HIV medication, once started, can result in resistance of the HIV strains,
- AB. whereas over the last years fierce generic competition regarding the first line Antiretroviral Drugs (ARVs) has contributed to a price reduction of almost 99%, from USD 10000 to approximately USD 130 per patient per year, but the prices for the second line drugs, which patients need, as resistance develops naturally, remain high, mostly due to increased patent barriers in the key countries producing generic medicines,
- AC. whereas there is no vaccine for HIV and research into microbicides and other developments for innovative new drugs are ongoing,
- AD. whereas five years after the Doha Declaration (pursuant to which each WTO member State 'has the right to grant compulsory licences and the freedom to determine the grounds upon which such licences are granted'), WHO has pointed out that 74% of AIDS drugs are still protected by a patent,
- AE. whereas WHO estimates that 10% of all new HIV infections globally are related to injecting drug use, and that less than 5% of injecting drug users worldwide have access to effective HIV prevention, treatment and care services,
- AF. whereas tuberculosis (TB) accelerates the progression of HIV into AIDS, and 90% of HIV positive people die of TB within months of developing active TB symptoms due to a lack of adequate treatment, which has resulted in an estimated one-third of AIDS deaths being caused by TB,
- 1. Welcomes the Commission's Communication on combating HIV/AIDS within the European Union and the neighbouring countries, 2006-2009, and supports the actions and initiatives suggested therein;
- 2. Reaffirms the right of every human being to health education, correct information, prevention of illnesses, health care, medical services and access to pharmaceutical products;
- 3. Requests that the Commission analyse the latest available data on new HIV infections to identify the countries and population groups most affected by this epidemic and communicate its findings to the respective Member States;

- 4. Calls on the Commission to specify, according to national data provided by the Member States, the most vulnerable groups in each society and to establish a comprehensive list of such groups so that the Commission and Member States can address and reach them efficiently, taking into account country specificities, and provide them with information on how to protect themselves and their partners;
- 5. Alarmed at the rapidly growing number of cases of multi-drug-resistant strains of HIV/AIDS as well as multi-drug-resistant or totally resistant TB, calls on the Commission to maintain separate statistics on these and to identify and share best practice in preventing them;
- 6. Urges the Commission to consider appropriate measures to reach migrant and immigrant populations within the European Union, especially when they come from countries with high prevalence rates, in order to slow down the alarming trend of new HIV infections among these groups;
- 7. Insists that Member States fully implement Directive 2002/98/EC of the European Parliament and of the Council of 27 January 2003 setting standards of quality and safety for the collection, testing, processing, storage and distribution of human blood and blood components (1), in particular as regards the systematic HIV screening of blood donations;
- 8. Underlines the importance of reporting correct data; points out that data collection should be confidential and based on anonymous and voluntary testing; invites the Member States to improve the quality of their respective testing and reporting methods;
- 9. Notes that the European Centre for Disease Prevention and Control (ECDC) will take full responsibility for surveillance, collecting and publishing data regarding HIV/AIDS in 2008; urges the Commission to take appropriate measures to prevent a possible gap in the reporting of new data; asks the ECDC to bear in mind the sensitivities relating to the topic when publishing reports;
- 10. Calls on Spain and Italy to report their national data to the ECDC;
- 11. Urges the Commission to use all available instruments, such as the Neighbourhood Policy and the Northern Dimension Instruments, to reach the vulnerable population groups in the neighbouring countries, with particular attention to the Kaliningrad area of Russia;
- 12. Calls on the Commission to develop evidence-based programmes and to promote the implementation of prevention and harm-reduction measures, including the use of condoms, drug substitution treatment, access to voluntary testing, clean needle and syringe exchanges and counselling for members of groups considered vulnerable, affected by or infected with HIV, to stimulate and disseminate best practices in positive prevention and to provide an annual report on the implementation of such measures;
- 13. Calls on the Commission and the Member States to promote communication campaigns which will provide the population with clear information concerning HIV infection, on ways of preventing infection, on unsafe practices and on practices which help to prevent infection with HIV;
- 14. Calls on the Member States and the Commission, in view of the fact that women infected with HIV have often been subjected to violence by a male partner and that women run a greater risk of HIV infection, to take the measures to combat violence which are set out in its resolution of 2 February 2006 on the current situation in combating violence against women and any future action (²);
- 15. Welcomes the Commission's initiative to create a Civil Society Forum and encourages the Commission to continue and intensify its cooperation with civil society within the framework of this Forum;

⁽¹⁾ OJ L 33, 8.2.2003, p. 30.

⁽²⁾ OJ C 288 E, 25.11.2006, p. 66.

EN

- 16. Encourages Member States to examine the possibilities of establishing Civil Society Forums at national level in order to improve cooperation between national governments, public authorities, health care services and local NGOs working in the field of HIV/AIDS;
- 17. Emphasises the importance of both the 'Dublin Declaration' and the 'Vilnius Declaration' and urges the Commission to follow them up;
- 18. Stresses the need for the Commission to streamline its efforts to fight HIV/AIDS within the different responsible Directorates-General and to improve the various administrative processes and mechanisms in order to provide the most effective and coordinated measures possible, to avoid dual standards and to achieve the best possible synergies;
- 19. Encourages the Commission to offer political support and technical assistance to neighbouring countries which wish to take advantage of the flexibilities contained in the TRIPS Agreement when faced with a public-health problem, and to offer support in building up infrastructure for HIV counselling and testing as well as distribution and follow-up of medication;
- 20. Deplores the fact that the current rules on direct financing of NGOs by the Community as well as rules on their participation in projects financed by Community programmes have not been harmonised; asks the Commission to assess current procedures with a view to improving the access of NGOs to various forms of Community financing;
- 21. Reiterates that EU membership often means a sudden end of financial support for NGOs from international sources other than those of the EU; therefore calls on the Commission to monitor the situation in Bulgaria and Romania as a matter of urgency and propose measures to bridge the financial gap;
- 22. Calls on the Commission to define clearly the rules for using the Structural Funds and the Social Funds for HIV/AIDS related projects and/or programmes;
- 23. Encourages the Commission to use all the possibilities available within the Seventh Framework Programme on Research and Development to continue to fund and identify further promising projects concerning HIV/AIDS research and the development of new innovative ARV drugs, vaccines and microbicides; calls on the Commission to ensure that HIV/AIDS research is gender balanced and includes various physiological and biological aspects as regards the nature of transmitting viruses;
- 24. Welcomes the Commission's aim to develop research and evaluation of behavioural preventive methods and encourages the Commission to work towards evidence-based behavioural preventive programmes;
- 25. Calls on the Commission and the Member States to allocate greater public funding to pharmaceutical research by requiring the beneficiaries of public funds to devote a certain amount of their research to such diseases:
- 26. Urges the Commission to allocate resources to prevention measures within the framework of the Public Health Action Programme to combat HIV/AIDS;
- 27. Urges the Commission to explore the possibilities and practical means and to use the results of clinical research to combat HIV/AIDS in the partner countries, the Western Balkans and Central Asia, following the procedures for external aid and respecting the directives for action as agreed in the strategy documents with the relevant countries and the indicative programmes;
- 28. Believes that palliative care has an important part to play in the care of people with HIV/AIDS and urges its development and expansion throughout the European Union;

- 29. Asks the Commission to pay particular attention to the promotion of sexual and reproductive health programmes for women, in order to counter the increasing spread of the epidemic among the female population;
- 30. Strongly encourages the Commission and the Member States to subsidise and provide money for research and development of microbicides and female condoms which give women the power to protect themselves and a male partner from HIV/AIDS with or without the partner's agreement, since condoms continue to be the most well known and widely available protection against HIV/AIDS and sexually transmitted diseases (STDs), but require a male partner's agreement (1),
- 31. Calls on the Member States to develop national strategies to increase the capacity of women and young girls to protect themselves from the risk of HIV infection;
- 32. Emphasises the need to strengthen the synergies between HIV/AIDS prevention and programmes to promote sexual rights and health;
- 33. Calls on the Member States to respect the sexual and reproductive rights of people living with HIV/AIDS:
- 34. Calls on the Member States to promote the gender-balanced involvement of both women and men in AIDS response; urges them to review national AIDS coordinating bodies;
- 35. Calls on the Commission and the Member States to enable all persons affected, and in particular pregnant women, to have access to anti-HIV drugs in order to reduce the incidence of transmission of the disease to unborn children;
- 36. Requests that the Commission continue the financial assistance and overall support of the valuable efforts of the Global Fund to fight AIDS, tuberculosis and malaria; invites the Member States to do the same:
- 37. Points out that HIV/TB co-infection is the cause of death for one third of HIV-positive people; therefore strongly recommends that the Commission and the Member States acknowledge this fact by establishing and promoting programmes to fight both infections at the same time; notes the alarming spread of multi- or total-drug-resistant strains of TB; further notes the frequent dual diagnosis of HIV and hepatitis and depression, and urges action to treat and care for such patients;
- 38. Stresses the importance of the accountability of national, regional and local governments, health service providers, the pharmaceutical industry, NGOs and civil society in order to ensure that the targets regarding universal coverage of prevention, treatment and care are being met;
- 39. Is concerned about the high costs of new and second-line drugs to treat AIDS; calls for a fundamental debate on patent law; considers that small adjustments to a product or to an active ingredient should be allowed to result only in a proportional extension to the period of patent protection;
- 40. Asks Member States to consider giving a mandate, in accordance with Articles 300 and 308 of the EC Treaty, and limited in scope and time, to the Commission on behalf of the EU to negotiate with the pharmaceuticals industry an agreement aiming at lower prices for ARV drugs in the European Union;
- 41. Calls on the Member States to promote greater use of the media and the most appropriate distribution channels to step up information for the population, especially adolescents and young people, on HIV infection, the ways it is transmitted, HIV testing and the kind of behaviour that fosters prevention;

^{(1) &#}x27;Women and HIV/AIDS: Confronting the Crisis' A joint Report by UNAIDS/UNFPA/UNIFEM 2004:45.

- 42. Calls on the Commission to consider the possibility of including in the European Youth Portal a section devoted to the fight against AIDS, including data on the information, guidance and care resources concerning HIV/AIDS available in the Member States;
- 43. Calls on the Commission, the Member States, civil society and the private sector to initiate or support programmes and develop information and awareness campaigns that combat homophobia, the stigma that attaches to all people living with HIV/AIDS and discrimination against vulnerable groups and those infected with HIV, with a view to breaking down the barriers that slow down the effective tackling of HIV/AIDS; urges Member States to prohibit discrimination against people living with HIV/AIDS, in particular in the services sector (for example with regard to insurance, bank services and health care);
- 44. Calls on the Commission and the Member States to establish policies and programmes for the social integration and entry into the labour market of people living with HIV/AIDS;
- 45. Encourages the Commission and the Member States to show leadership in promoting and funding at European, national and local level access to HIV/AIDS education, including counselling for responsible sexual behaviour and prevention and treatment of STDs, and to information, testing and related services, with due regard for the principles of confidentiality and informed consent;
- 46. Calls on the Member States to promote health education at schools in order to raise awareness and promote safe sexual behaviour;
- 47. Strongly encourages the Member States to guarantee that all citizens receive sexual education and information, which includes respect and responsibility for one's partner and equal rights for homosexual, bisexual and transgender people, and underlines the importance of giving sexual education in schools;
- 48. Calls on the Commission and the Member States to gauge how competent and knowledgeable primary health workers are on the subject of HIV/AIDS and to provide training courses for health workers in order to enable them to provide suitable public guidance and to raise public awareness appropriately;
- 49. Calls on the Member States to give full support to women and men who are responsible for the daily care of people living with AIDS, and/or care for their children and orphans; points out that they should be provided with home-based care training and awareness-raising on the prevention of HIV/AIDS and on the benefits of good treatment and care for the people living with AIDS;
- 50. Urges the Commission to assess the possibilities for establishing Public Private Partnerships within the neighbouring countries in order to promote additional ways of combating HIV/AIDS;
- 51. Welcomes the initiative of the German Presidency in organising the Conference 'Responsibility and Partnership Together against HIV/AIDS' in Bremen (12 to 13 March 2007), as well as the fact that Madrid will host the XIth European Conference on AIDS from 24 to 27 October 2007;
- 52. Underlines the pivotal role of communities, community-based organisations, NGOs and people living with HIV/AIDS (PLWHA) in the fight against HIV/AIDS;
- 53. Suggests the establishment of a 'clearinghouse' at EU level with the objective of collecting and analysing best practices from all institutions and organisations active in the fight against HIV/AIDS; believes that such a mechanism would help to identify shortcomings in the existing actions and to formulate new strategies;
- 54. Instructs its President to forward this resolution to the Council, the Commission, the European Centre for Disease Prevention and Control, WHO (Europe) and the governments of the Member States.