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MOTION FOR A RESOLUTION

to wind up the debate on the statement by the Commission

pursuant to Rule 103(2) of the Rules of Procedure

by Frithjof Schmidt, Marie-Hélène Aubert, Bernat Joan i Marí, Satu Hassi,
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on behalf of the Verts/ALE Group

on World AIDS Day

European Parliament resolution on World AIDS Day

The European Parliament,

- having regard to the HIV/AIDS day,
 - having regard to the meeting of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) in Arusha, from 16 to 19 November 2004,
 - having regard to the International Conference on HIV/AIDS held in Bangkok in July 2004,
 - having regard to the ministerial summit on health research to ensure the development of new medicines (Mexico, 16 to 19 November 2004),
 - having regard to Rule 103(2) of its Rules of Procedure,
- A. whereas the total number of people living with HIV/AIDS rose in 2004 in every region to reach an estimated level of 39.4 m,
- B. whereas it is estimated that HIV/AIDS has already caused the death of 40 m people, including 36 m from developing countries and 28 m from sub-Saharan Africa,
- C. whereas HIV/AIDS, tuberculosis and malaria affect mostly the poorest people in developing countries and kill between 14 to 17 m people each year, impacting negatively on the economic development of these countries,
- D. whereas the HIV/AIDS epidemic is affecting women in increasing numbers; whereas approximately half of all people living with HIV are female and the risk of contaminating their children is very high,
- E. whereas it is very clear that with a comprehensive approach including both preventive and curative measures HIV/AIDS can be eradicated if the political will exists,
- F. whereas the Commission and the Member States' financial contributions to the Global Fund to Fight AIDS Tuberculosis and Malaria (GFATM) remain inadequate and is much less than the amount expected from them,
- G. whereas only 1% of the new medicines developed by the pharmaceutical industries are dedicated to the big infectious diseases that affect the majority of developing countries, and most of the industries choose to dedicate their resources to the more profitable products,

- H. whereas 90% of research spending goes on the health problems of less than 10% of the world's population; whereas no research is currently being carried out into the most neglected diseases which affect developing countries only, such as sleeping sickness, Chagas' disease and leishmaniasis,
- I. whereas the debt burden, the adverse impact of structural adjustment programmes and the current pressure to liberalise services are reducing the capacity of many developing countries to provide basic public services (water supply, health and education) for their populations,
- J. whereas Brazil has established free access to anti-HIV/AIDS medicines, obliging the pharmaceutical industry to cut its prices, with the threat of using generic drugs,
- K. whereas the implementation of the TRIPS provisions by the WTO and industrialised countries by 1 January 2005 will interrupt the production of generic medicines, which are the only possibility for millions of people to have access to vital medicines,
- L. whereas the US is including in its bilateral trade agreement with developing countries provisions that will threaten or block the use of the flexible elements of the TRIPS agreement that allow countries to use or produce generic drugs; whereas this is undermining the Doha declaration and is total contradiction with the commitments endorsed by all WTO members in November 2001,
- M. whereas the EU is calling for the inclusion of similar TRIPS+ provisions in its bilateral or regional agreements with developing countries, and is establishing, in parallel to the existing WTO dispute settlement body, a mechanism similar to the '301 list' that the US is using, to threaten, and punish through bilateral economic sanctions, countries that do not implement sufficiently strict intellectual property legislation, with no regard for public health considerations,
- N. whereas the prevention and treatment of communicable diseases must be regarded as indispensable for the world community and thus considered as a 'global public good',
1. Reaffirms the right of every human being to have access to medical care and treatment;
 2. Urges the Commission to make a proposal for a European public health policy in order to guarantee respect for human rights principles in the field of access to medicines for all;
 3. Expresses its deep concern at the huge progression of HIV/AIDS, combined with tuberculosis and malaria, mostly in developing countries and causing suffering to their populations and destroying their economies;
 4. Urges the Commission and the Member States, in accordance with the EU's external policy objectives, to provide developing countries with the necessary tools to eradicate these diseases;
 5. Urges the Commission and the Member States to increase their contribution to the Global Fund to Fight AIDS Tuberculosis and Malaria (GFATM);

6. Urges the Commission to take an immediate initiative at WTO level for a moratorium on the TRIPS provisions planned to enter into force by 1 January 2005, which will impede the production of generic drugs that are essential for the survival of millions of people in developing countries;
7. Urges the Commission to oppose the US policy which undermines the Doha principles on access to drugs for developing countries, and calls on the EU to refrain from taking any step in this direction;
8. Welcomes the Commission's proposal for a regulation on the compulsory licensing of patents for export to countries with health problems, but expresses its concern at the bureaucratic obstacles to applying the agreement of 30 August 2003;
9. Urges the Commission to create specific legislative instruments to encourage R&D on neglected and poverty diseases, and to ensure that the results of the research meet the specific needs of developing countries and contribute towards a swift improvement in the public health situation;
10. Invites the Commission to establish and strengthen its programmes and the international mechanisms for exchanging and transferring research results, knowledge and technology;
11. Calls on the Commission to promote an agreement at international level on the R&D needs of developing countries, designed to stimulate investment which meets those countries' priorities, i.e. guaranteeing the effective, appropriate and affordable nature of the medicines concerned;
12. Calls on the Commission to encourage developing countries to restore and develop public services in basic areas such as water access and sanitation, health and education, and to withdraw its demands for liberalisation in these sectors;
13. Calls on the Commission to provide support for technology transfer and the establishment of local pharmaceutical industries, particularly in relation to clinical trial programmes in developing countries;
14. Notes that debt repayment and servicing account each year for almost 40% of the least developed countries' GDP, while the budget for education and health remains very low; considers that the debt must be cancelled and that the recent example of Iraq's debt cancellation proves that it is feasible;
15. Calls on the EU to develop policies and programmes, and asks the Commission to ensure that increased resources are made available within the financial perspective for 2006-2011 to support a significant scaled-up response to the three diseases;
16. Instructs its President to forward this resolution to the Council and Commission, the WTO, the WHO, UNAIDS, the ACP/EU Joint Parliamentary Assembly, the African Union, the European Federation of Pharmaceutical Industries and Associations, and relevant NGOs.