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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 Carl Schlyter, Marie-Hélène Aubert and Raül Romeva i Rueda on behalf of the Verts/ALE Group on HIV/AIDS (World AIDS Day)

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European Parliament resolution on HIV/AIDS (World AIDS Day)

The European Parliament,

- having regard to World AIDS Day on 1 December 2006 and its theme, 'Accountability: Stop AIDS, Keep the Promise',
- having regard to the 2001 Abuja Declaration,
- having regard to the UNAIDS/WHO 2006 AIDS epidemic update, published on 21 November,
- having regard to the UN General Assembly meeting to review progress on the Declaration of Commitment on HIV/AIDS, held from 31 May to 1 June 2006,
- having regard to the UN Millennium Development Goals (MDGs) and in particular the goal of reversing the spread of the HIV/AIDS epidemic by 2015,
- having regard to the goal set by the International Conference on Population and Development to achieve universal access to reproductive health by 2015,
- having regard to the European Programme for Action to confront HIV/AIDS, tuberculosis and Malaria, covering all developing countries for the period 2007-2011, WHICH WAS adopted by the Commission in April 2005,
- having regard to the Gleneagles and UN 2005 commitments to achieve universal access to prevention treatment and care by 2010,
- having regard to Rule 103(2) of its Rules of Procedure,
- A. whereas in 2006 there were 4.3 million new infections, with 2.8 million (65%) of these in Sub-Saharan Africa alone, according to the UNAIDS report published on 21 November 2006,
- B. whereas over 95% of the 39.5 million people worldwide suffering from HIV/AIDS live in developing countries,
- C. whereas there are indications that infection rates in Eastern Europe and Central Asia have risen by more than 50% since 2004, and there are only a few examples of countries that have actually reduced new infections,
- D. whereas, of the 6.8 million people living with HIV in low- and middle- income countries who are in need of anti-retroviral medication, only 24% have access to the necessary treatment,

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- E. whereas there are an estimated 15 million HIV/AIDS orphans globally, 12.3 million of these being in Sub-Saharan Africa alone,
- F. whereas older siblings and grandparents take on responsibility for often large numbers of AIDS orphans, and the dying generation of HIV/AIDS-infected young adults is leaving some countries without enough teachers, nurses, doctors and other key professionals,
- G. whereas AIDS disproportionately affects the generation of economically active young people,
- H. whereas women now represent 50% of people living with HIV worldwide and nearly 60% of people living with HIV in Africa,
- I. whereas women's socio-economic status and dependence on men in many countries often leave them unable to practise safe sex, and microbicides are therefore considered a promising prevention tool,
- J. whereas gender inequality and violence against women remain a major driver of the epidemic,
- K. whereas sexual and reproductive health rights are intrinsically linked to HIV prevention and other poverty diseases,
- L. whereas the Millennium Development Goals (MDGs) will only be achieved if sexual and reproductive health issues are fully integrated into the MDG agenda,
- M. whereas people living with HIV have special needs with regard to their reproductive health in terms of family planning, safe birthing and breastfeeding of babies, which are often overlooked in spite of the feminisation of the epidemic,
- N. whereas preventive tools such as PMTCT (Prevention of Mother-To-Child Transmission) should be complemented with the provision of continued antiretroviral treatment to the mothers,
- O. whereas, five years after the Doha Declaration, rich countries are failing to fulfil their obligation to ensure that cheaper life-saving drugs are available in developing countries,
- P. whereas, according to the World Health Organisation, 74% of AIDS medicines are still under monopoly, 77% of Africans still have no access to AIDS treatment and 30% of the world's population still do not have regular access to essential medicines,
- 1. Recognises that HIV/AIDS constitutes a global emergency and poses one of the most formidable challenges to the development, progress and stability of our respective societies and the world at large;

- 2. Calls on all international donors to work to ensure that HIV prevention programmes reach the people most at risk of infection as identified in UNAIDS' conclusion that these vulnerable groups are not being provided for;
- 3. Calls on the IMF to end monetary conditions and fiscal ceilings that force countries to restrict spending on public health and education;
- 4. Recognises the overall expansion and feminisation of the pandemic and the fact that women now represent 50% of people living with HIV worldwide;
- 5. Calls on all aid programmes to ensure that, once a patient starts a treatment, funding is for continued uninterrupted treatment in order to prevent increased drug resistance that follows with interrupted treatments;
- 6. Stresses the need to combat all violence against women, including domestic violence, rape, forced marriage, prostitution, women trafficking and kidnapping during armed conflicts, and girls slavery, which are one of the reasons for the propagation of HIV/AIDS epidemics; urges the Commission and partner countries, therefore, to prioritise and set up programmes to protect women against these practices;
- 7. Stresses the need for the EU to fund programmes to ensure that women that are victims of rape gain access to health services and are given opportunities to reintegrate into society and combat the stigma often associated with victims of such crimes;
- 8. Stresses the need for the EU to fund specific programmes to ensure that those children affected by the AIDS epidemic, through the loss of one or both parents or through contracting the disease themselves, remain in education;
- 9. Calls on the Commission and the governments of our partner countries to ensure that health and education, and HIV/AIDS and sexual and reproductive health in particular, are prioritised in Country Strategy Papers;
- 10. Calls on the Commission and the Member States to support programmes that combat homophobia and break down the barriers that stop the effective tackling of the disease, especially in Cambodia, China, India, Nepal, Pakistan, Thailand and Viet Nam and across Latin America, where there is increasing evidence of HIV outbreaks among men who have sex with men;
- 11. Stresses the need for an overall funding increase from donors over the next years for all contraceptive supplies, including condoms for HIV prevention, to fill the gap between supplies and availability to purchase them;
- 12. Stresses that all health-care providers, including all family-planning providers, should be given specialised training in the prevention and detection of, and counselling on, sexually transmitted diseases, especially infections in women and youth, since such diseases also facilitate transmission of HIV;

- 13. Expresses concern that the UNAIDS report highlights the fact that levels of knowledge of safe sex and HIV remain low in many countries, including those in which the epidemic has had a high impact; calls, in this regard, for information, education and counselling for responsible sexual behaviour and effective prevention of sexually transmitted diseases, including HIV, to become integral components of all reproductive and sexual health services;
- 14. Calls for the promotion and the reliable supply and distribution of high-quality condoms to be prioritised in the EU's sexual and reproductive health programmes, as well as encouragement for condom usage with other contraceptive methods; stresses the need to combat any misinformation spread on the effectiveness of condoms;
- 15. Stresses that the strategies needed to combat the HIV/AIDS epidemic effectively must include a comprehensive approach to prevention, education, care and treatment and must include the technologies currently in use, expanded access to treatment as well as the urgent development of vaccines;
- 16. Calls on the EU and its Member States to dramatically increase funding for the development of microbicides, given that conservative estimates suggest that the introduction of even a partially effective microbicide would result in 2.5 million averted cases of HIV over three years, and that an effective microbicide could be developed by the end of the decade with the necessary financial support;
- 17. Calls on the newly elected US Congress to overturn the Bush administration's 'global gag rule', that stops funding from non-US NGOs to any reproductive health organisations that counsel on abortion, and calls on the Commission and Members States to ensure that the US Government reverses its 'global gag' on reproductive health spending;
- 18. Calls on the WTO to review the impact of the TRIPs agreement on the affordability and availability of medicines in developing countries five years after the adoption of the Doha Declaration and to ensure that all countries are able to protect public health;
- 19. Calls on the US to stop coercing developing countries into adopting stricter intellectual property rules especially through its bilateral and regional trade agreements;
- 20. Calls on the EU to clarify that it will not push for TRIPS-plus measures within Economic Partnership Agreements (EPAs), and that they will guarantee developing countries the policy space to freely use TRIPS flexibilities;
- 21. Calls for support to be given to developing the growth of regional and national generic drug industries in affected areas in order to facilitate access to affordable drugs;
- 22. Calls on pharmaceutical companies to stop lobbying rich-country governments to promote stricter intellectual property rules worldwide, and stop pressuring poor countries to accept stronger intellectual property rules that undermine public health;

- 23. Insists on the importance of ensuring that the objective of providing developing countries with affordable medicines is not jeopardised by excessively restrictive or cumbersome procedures;
- 24. Instructs its President to forward this resolution to the Commission, the Council, the governments of the EU Member States and ACP countries, the IMF, United States Government, the UN Secretary-General, and the heads of UNAIDS, UNDP and UNFPA.

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