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2004



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Session document

29.11.2004

B6-0190/2004 }
B6-0191/2004 }
B6-0192/2004 }
B6-0193/2004 }
B6-0194/2004 } RC1

JOINT MOTION FOR A RESOLUTION

pursuant to Rule 103(4) of the Rules of Procedure, by

- John Bowis, Richard Seeber, Anders Wijkman and Françoise Grossetête, on behalf of the PPE-DE Group
- Anne Van Lancker, Glenys Kinnock, Miguel Angel Martínez Martínez, Margrietus van den Berg and Karin Scheele, on behalf of the PSE Group
- Holger Krahmer, on behalf of the ALDE Group
- Frithjof Schmidt, Marie-Hélène Aubert, Bernat Joan i Marí, Satu Hassi, Carl Schlyter and Marie Anne Isler Béguin, on behalf of the Verts/ALE Group
- Vittorio Emanuele Agnoletto, Ilda Figueiredo and Luisa Morgantini, on behalf of the GUE/NGL Group

replacing the motions by the following groups:

- ALDE (B6-0190/2004)
- GUE/NGL (B6-0191/2004)
- PSE (B6-0192/2004)
- Verts/ALE (B6-0193/2004)
- PPE-DE (B6-0194/2004)

on the World AIDS Day

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European Parliament resolution on the World AIDS Day

The European Parliament,

- having regard to World AIDS Day on 1 December 2004 and its theme: Women, Girls and HIV/AIDS,
 - having regard to the Commission Working Paper on a coordinated and integrated approach to combat HIV/AIDS within the European Union and in its neighbourhood,
 - having regard to the Dublin Declaration of 24 February 2004 on Partnership to fight HIV/AIDS in Europe and Central Asia,
 - having regard to the UN Declaration of Commitment on HIV/AIDS of 27 June 2001 and the on-going UNAIDS programme,
 - having regard to the goal of beginning to reverse the spread of HIV/AIDS by 2015 set in the Millennium Declaration signed by Heads of State and Government on 8 September 2000,
 - having regard to Rule 103(4) 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 40 million; whereas there are ever increasing infection rates among women worldwide,
- B. whereas, in 1997, 41% of HIV-positive people were women and girls, but today around half of all people living with HIV/AIDS worldwide are women and girls, and in sub-Saharan Africa the figure is 57%; whereas so far there are 40 million people infected with HIV and approximately 90% of them are from developing countries,
- C. whereas, in view of the gender inequalities associated with HIV/AIDS, finding vaccines that are available to women and young girls before the onset of sexual behaviour must be a budgetary and political priority; whereas women must be involved in all appropriate clinical research, including vaccine trials,
- D. whereas the proportion of newly reported HIV cases in Western Europe has doubled since 1995, with some of the highest rates of new infections to be found in some of the new Member States and those third countries that share our Eastern border,
- E. whereas increased investment in research and development with a view to more effective therapeutic and preventive medicines is vital to securing the long-term success of anti-HIV/AIDS action,
- F. whereas it is crucial to promote safe sex practices and microbicides, which are considered a promising prevention tool,
- G. whereas sexual and reproductive health rights are intrinsically linked to the prevention of HIV/AIDS and other poverty diseases, and whereas the Millennium Development Goals

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(MDG) in general and those on promoting gender equality and empowering women, reducing child mortality, improving maternal health and combating HIV/AIDS in particular will only be achieved if sexual and reproductive health issues are put at the heart of the MDG agenda,

- H. whereas recent UNAID figures also point to increased levels of infection throughout the EU, particularly in the 15-25 age group,
- I. whereas pharmaceutical companies must look at ways to reduce prices, since developing countries cannot afford the antiviral drugs available in the industrialised world,
- J. whereas in some countries HIV/AIDS-related costs will soon absorb over half the health budget,
- K. whereas insufficient action against the HIV/AIDS epidemic could result in an unprecedented crisis, in particular in Southern Africa, undermining not only health and development but also national security and political stability in a number of countries,
- L. whereas the WTO General Council has adopted a waiver to Article 31(f) of the TRIPS Agreement allowing WTO members to grant compulsory licences for manufacturing and distribution of patented pharmaceuticals intended for export to third countries with insufficient or no manufacturing capacity in the sector, which should increase the accessibility of low-cost medicines in those countries,
- M. whereas many developing countries will lose the possibility of producing generic medicines with the entry into force of TRIPS rules on 1 January 2005,
 - 1. Reaffirms the right of every human being to have access to medical care and treatment;
 - 2. Recalls that if the trend towards ever higher numbers of HIV infections is not reversed, there will be no chance of achieving the overarching Millennium Development Goal of eradicating extreme poverty and hunger by 2015 and reducing by half the proportion of people living on less than a dollar a day and suffering from hunger;
 - 3. 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 and the urgent development of vaccines and microbicides;
 - 4. Is concerned also about the increasing rates of infection in some societies that do, a priori, have full access to all the necessary information about prevention and risk avoidance and in particular in the 15-25 age group;
 - 5. Notes that the international AIDS Vaccine Initiative has drawn attention to the lack of funding from the private sector; calls therefore on private donors to join with the charitable and public sectors to develop vaccines, especially in Africa;
 - 6. 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;

7. Stresses that access to medicines, including vaccines and diagnostic products, is of crucial importance, and that bringing down the costs of such treatment should be one of the priorities; therefore calls on the pharmaceutical industry to reduce prices;
8. Calls on the Commission and the Member States to increase their commitments to research and development for more effective therapeutic and preventive medicines, in order to secure the long-term success of anti-HIV/AIDS action; in particular, calls on the EU and its Member States to mobilise additional funding to facilitate effective partnerships with the pharmaceutical companies for the development of vaccines;
9. Notes with great interest the recent finding that a relatively cheap antibiotic (co-trimoxazole) has almost halved the rate of AIDS-related deaths in African children; notes that, although the drug does not combat HIV, it is clearly instrumental in preventing secondary infections which kill many HIV-positive children with weakened immunity at an annual cost of just \$7-12 per child compared to \$300 for the cheapest antiretrovirals;
10. Regrets that, for many years in the past, prejudiced views in some sectors as regards the use of condoms prevented full and necessary attention being directed against HIV/AIDS;
11. Calls on the United Nations and its Members to increase dramatically the visibility and prominence of sexual and reproductive health issues during the review of the Millennium Development Goals next year;
12. Calls on the EU to continue to prioritise sexual and reproductive health issues through funding programmes on family planning, and in particular to influence sexual behaviour through risk-reduction strategies, to educate young people, and especially girls and young women, about STIs and HIV, and to encourage condom usage with other contraceptive methods and combat any misinformation spread on the effectiveness of condoms;
13. 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;
14. Stresses that HIV/AIDS cannot be dealt with in isolation and often goes hand in hand with other diseases such as tuberculosis, Hepatitis C and mental disorders such as depression, and that care and treatment solutions need to be pursued for all these;
15. 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;
16. Calls on all involved partners to speed up measures for the authorisation of new drugs and

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vaccines and to ensure that patients in poorer European countries also have access to treatment at affordable prices;

17. Regrets the lack of palliative care for those dying of AIDS and urges that palliative care teams be trained and supported;
18. Welcomes the Commission proposal setting up a uniform framework for issuing compulsory licences authorising production and exportation of cheaper medicines to the eligible countries in need;
19. 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 or by re-importation into the European Union of pharmaceutical products manufactured under compulsory licences;
20. Urges developed countries to adopt a waiver on the application of the TRIPS Agreement in this field so as to enable pharmaceutical companies in developing countries to continue to provide generic low-cost medicines;
21. Calls on the EU to develop policies and programmes in this area, and asks the Commission to ensure that increased resources are made available within the Financial Perspective for 2007-2013 to support a significantly scaled up response to HIV/AIDS, including by making a multiannual commitment to the Global Fund against HIV/AIDS, TB and malaria;
22. Firmly believes that the EU has a significant role to play for both its own citizens and those of third countries in the global fight against the disease; welcomes in this respect the already existing EU funding for research projects, exchanges of best practice and the involvement of NGOs, particularly those best placed to address the specific challenges faced by vulnerable groups such as immigrants, sex workers etc.;
23. Welcomes the decision by the UK, Sweden, and the Netherlands to agree to the request from many NGOs to make additional contributions to the Global Fund;
24. Calls on the EU Member States, and particularly on the Italian Government, to respect their commitment to donate financial resources to the Global Fund and to ensure the continuation of all on-going actions;
25. Calls on the new Commission to ensure that funding continues to plug the 'decency gap' left by the US withdrawal of UNFPA funding, not only in the developing world but also in Eastern Europe and Central Asia;
26. Welcomes the Commission's statement of 23 November 2004 on the presentation in April 2005 of an action plan to fight AIDS and looks forward to concrete actions;
27. Instructs its President to forward this resolution to the Council, the Commission, the Member States, the Co-Presidents of the ACP-EU Joint Parliamentary Assembly, the WHO and UNAIDS.