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on combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009
(2006/2232(INI))

Committee on the Environment, Public Health and Food Safety

Rapporteur: Georgs Andrejevs

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MOTION FOR A EUROPEAN PARLIAMENT RESOLUTION

**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 AIDS²,
- having regard to the Council Conclusions of 6 June 2005 on Combating HIV/AIDS,
- having regard to the Council Conclusions 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 Council on 22 November 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 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 17 September 2004,
- having regard to the United Nations Millennium Declaration adopted by the United Nations General Assembly at its 55th Session on 18 September 2000 as well as to the UN

¹ P6_TA(2006)0321.

² P6_TA(2006)0526.

Millennium Goals (MDGs) and in particular the goal of reversing the spread of HIV/AIDS by 2015,

- having regard to the Declaration of Commitments 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" of 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 at the UN General Assembly of 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 (A6-0000/2007),
- 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,
- 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 Organisation (WHO),
- C. 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,

- D. Whereas the groups exposed to the highest risk of contracting HIV include Injecting Drug Users (IDUs), men having sex with men, sex workers, migrants, prisoners and young people under the age of 25,
- E. Whereas the UNAIDS Epidemic Update 2006 found out that about three quarters of heterosexually acquired HIV infections in Western and Central Europe are among immigrants and migrants,
- F. Whereas prevention programmes, including education, increased access to information, and access to treatment and drug rehabilitation, constitute the most effective tools for combating HIV/AIDS,
- G. Whereas EuroHIV has no national data from Spain and Italy although both are considered sites of major epidemics by EuroHIV,
- H. 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, and so are the groups that are considered most vulnerable,
- I. 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,
- J. 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 45% 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",
- K. 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",
- L. 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"; both Declarations emphasise the need for strong and comprehensive follow-up measures for the actions outlined in them,
- M. Whereas the "Vilnius Declaration" explicitly mentions the use of national financial instruments as well as Community funds, including the Structural Funds, for the implementation of (our) policies to tackle HIV/AIDS,

- N. 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 other international sources than those of the EU,
- O. Whereas over the last years a fierce generic competition regarding the first line Antiretroviral Drugs (ARVs) has contributed to a price reduction of almost 99%, from \$10,000 to approximately \$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,
- P. Whereas there is no vaccine for HIV and research into microbicides and other developments for innovative new drugs are ongoing,
- Q. Whereas the 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,
- R. 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 tuberculosis,
1. Welcomes the Commission's Communication on combating HIV/AIDS within the European Union and the neighbouring countries and supports the actions and initiatives suggested therein;
 2. Requests the Commission to 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;
 3. 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 could address and reach them efficiently, taking into account country specificities, and provide them with information on how to protect themselves and their partners;
 4. 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;
 5. Underlines the importance of reporting correct data; invites the Member States to improve the quality of their respective testing and reporting methods;
 6. 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;

7. Calls on Spain and Italy to report their national data to the ECDC;
8. Urges the Commission to use all available instruments, such as the Neighbourhood Policy, the Northern Dimension and TACIS, to reach the vulnerable population groups in the neighbouring countries;
9. Calls on the Commission 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 exchange and counselling for members of groups considered vulnerable or infected with HIV;
10. 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;
11. Encourages Member States to examine the possibilities to establish Civil Society Forums at national level in order to improve cooperation between national government public authorities, health care services and local NGOs working in the field of HIV/AIDS;
12. Emphasises the importance of both the "Dublin Declaration" and the "Vilnius Declaration" and urges the Commission to follow them up;
13. 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 double standards and to achieve the best possible synergies;
14. 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;
15. Reiterates that EU membership often means a sudden end of financial support for NGOs from other international sources than those of the EU; therefore calls on the Commission as a matter of urgency to monitor the situation in Bulgaria and Romania and propose measures to bridge the financial gap;
16. Calls on the Commission to clearly define the rules for using the Structural Funds and the Social Funds for HIV/AIDS related projects and/or programmes;
17. Encourages the Commission to use all the possibilities available within the 7th Research Framework Programme to continue to fund and identify further promising projects concerning the development of new innovative ARV drugs, vaccines and microbicides;
18. Urges the Commission to allocate resources to prevention measures within the framework of the Public Health Action Programme to combat HIV/AIDS;
19. Asks the Commission to pay particular attention to the promotion of sexual and reproductive health programmes for women, in order to counter the feminisation of the epidemic;

20. Requests the Commission to 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;
21. Points out that HIV/TB co-infection is the cause of death for one third of HIV positive people; therefore strongly recommends to the Commission and the Member States to acknowledge this fact by establishing and promoting programmes to fight both infections at the same time;
22. Stresses the importance of the accountability of 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;
23. Calls on the Commission and the Member States to initiate or support programmes that combat homophobia and stigma to break down the barriers that slow down the effective tackling of HIV/AIDS;
24. Encourages the Commission and the Member States to show leadership in promoting and funding at European, national and local level the access to HIV/AIDS education, including counselling for responsible sexual behaviour and prevention of sexually transmitted diseases, and to information, testing and related services, with due regard for the principles of confidentiality and informed consent;
25. Urges the Commission to assess the possibilities of establishing Public Private Partnerships within the neighbouring countries in order to promote additional ways of combating HIV/AIDS;
26. Welcomes the initiative of the upcoming German Presidency to organise the Conference "Responsibility and Partnership - Together against HIV/AIDS" from 12 to 13 March 2007 in Bremen as well as the fact that Madrid will host the XIth European Conference on AIDS from 24 to 27 October 2007;
27. Appreciates the important work of NGOs working in the field of HIV/AIDS education, prevention and awareness-raising as well as the work by people living with HIV/AIDS (PLWHA);
28. Suggests the establishment of a "clearinghouse" at the European 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;
29. Instructs its President to forward this resolution to the Council, the Commission and the governments of the Member States.

EXPLANATORY STATEMENT

Introduction

Recent trends clearly show that the number of people infected with HIV (Human Immunodeficiency Virus), including people living with AIDS (Acquired Immune Deficiency Syndrome) and people dying of AIDS related diseases, continue to grow. Every year more women and young people are infected with HIV within the European Union as well as in the neighbouring countries. Risky behaviour, like unprotected sex and injecting drug use, remain the main routes for HIV infection. The latest studies alarmingly show how immigrant and migrant populations have become one of the most important risk groups. Other particularly vulnerable populations include sex workers and men having sex with men.

The first cases of HIV infections were witnessed in 1981 in the United States. Doctors observed an accumulation of unusual cases of death caused by rare forms of cancer usually only occurring in older people, as cause of death of young gay men. Having closely monitored the development of the new disease, which was then believed to affect only gay men, scientists quickly realized that they were dealing with a new kind of virus infection, which could affect all people. Until today the development of a treatment for the new set of symptoms has proved to be very challenging because of its retroviral nature.

The introduction of Antiretroviral Drugs (ARVs) in the late 1980s together with various awareness campaigns were essential in slowing down the growth of the epidemic in Western Europe and in the United States. In the recent years, however, the number of new HIV infections has been rising again. The new wave of infections predominantly affects women, injecting drug users and young people. Because AIDS is no longer considered as the death sentence it once was, many people engage in risky behaviour and neglect the risk of an infection.

Due to the development of the new ARV drugs, a growing number of people are living with HIV/AIDS. This is put a strain on the existing health care infrastructure and introduces a whole new set of logistic concerns in terms of resources. The access to Antiretroviral Treatment is reasonably good in Western Europe (EU-15). In the new Member States, however, the situation is completely different. Since their accession to the EU, these Member States have to pay the standard western European prices for ARV drugs. They face great difficulties in financing the general access to ARVs for all the people who need them.

This year is the 25th anniversary of the syndrome later named AIDS. During these years, many important developments have been achieved and many breakthroughs accomplished. But still the basic facts remain the same: there is no vaccine against HIV and no cure for AIDS related diseases. In order to change this situation we need to step up our common endeavours towards finding a cure for this epidemic. Also another fact remains true since the very first cases were witnessed: people living with HIV/AIDS are still subject to a variety of prejudices and discrimination. This seems to be due to the fact that the most vulnerable groups already belong to the marginalized populations in the society.

Rapporteur's Opinion

The Rapporteur expresses his satisfaction with the "Dublin Declaration" and the "Vilnius Declaration" as well as underlines their importance. Furthermore, he invites the Commission and the Member States to keep their promises of a thorough follow up on the commitments made therein. He also welcomes the Commission Communication on combating HIV/AIDS within the EU and the neighbouring countries. Considering the fact that the Eastern European countries have to deal with high new HIV infection rates, he is especially glad that the Commission has suggested such a broad approach and included neighbouring countries in the scope of the communication, thus acknowledging the fact that HIV/AIDS knows no borders and can only be tackled with an integrated and comprehensive approach addressing various political, social, institutional and economic issues. The Rapporteur firmly believes that this disease can only be dealt with and tackled, if all actors and institutions responsible including civil society as well as private companies work together towards this common goal, streamlining all the various efforts, permitting synergies and allowing for a stronger, coordinated and integrated effort in combating HIV/AIDS.

Suggestions and recommendations

The Rapporteur points out that there is a need for a comprehensive awareness campaign for the European Union. The Commission introduced a campaign: "AIDS . . . Remember me?" in the course of this year. Your rapporteur is convinced that Member States should follow the campaign by launching national awareness campaigns targeted at groups that are considered the most vulnerable in the various countries. Additionally, he suggests taking additional comprehensive and coordinated action in order to fight stigma and discrimination.

As far as the neighbouring countries are concerned, the Rapporteur recommends taking full advantage of the existing structures to facilitate a coordinated approach in the fight against HIV/AIDS, including the funds available for cross-border cooperation. To further support the neighbouring countries in addressing and fighting this epidemic, your Rapporteur suggests exploring the possibilities which lie within Public Private Partnerships to aid and raise awareness within the most vulnerable population groups.

In addition, the Rapporteur would like to stress the important work that various NGOs within the EU are doing. He is concerned about the serious lack of funding for NGOs in some of the Member States, which joined the European Union in 2004. He strongly recommends the re-evaluation of the mechanisms regarding project and programme funding by the European Commission. Local and national NGOs in the European Union and in the neighbouring countries do very important groundwork in fighting the epidemic. It is therefore of utmost importance to ensure that those organisations receive continuous funding also in the future. Your rapporteur would also like to point out that Romania and Bulgaria are likely to face similar problems once they become Members of the European Union in 2007.

Regarding the various national health care systems, the Rapporteur would like to invite the Commission and the Member States to evaluate measures on how to provide assistance for those health care systems affected by the difficult situation of providing universal access to expensive ARV treatment. In order to ease the strain on health care systems, especially in the neighbouring countries, it would be important to develop new ways of working together with,

for example the pharmaceutical industry and other private companies in the form of Private Public Partnerships.

The "Vilnius Declaration" explicitly suggests the use of Structural Funds and other community funds in order to fight this epidemic. It would be important to take full advantage of the Structural Funds and to immediately start exploring all possibilities that this instrument as well as the other EU instruments can provide.