Developing countries: health and poverty reduction

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The committee adopted the report by John BOWIS (EPP-ED, UK) on the Commission communication. It welcomed the emphasis on reducing poverty but said that the focus on three diseases was too limited and that other areas of healthcare, such as diarrhoeal diseases, deserved more attention. In particular, given that 3 million people die each year from water-borne diseases, MEPs wanted the Commission and the Member States to increase their contributions towards improving access to safe drinking water, this being one of the key Millennium Development Goals (MDGs) adopted at the UN Millennium Summit in September 2000. The report said that the strategy for effective health investment was as important as the total spending available and that extensive vaccination campaigns against common popular diseases were vital. As far as actual funding was concerned, however, the committee noted that the Monterrey commitments fell short of the funds needed to meet the MDG of reducing world poverty by 50% by 2015 and that an additional $31 billion of aid financing to the health sector was required. It pointed out that the governments of developing countries spend on average less than 15% of their national budgets on basic social services, while many poor or heavily indebted countries spend over 20% of their annual budgets servicing debt. The Commission was urged to ensure that the unspent EUR 10 billion of the EDF was spent on the purposes for which it was budgeted, including health. MEPs wanted to see support for initiatives aimed at reinforcing the role of primary health care, which, they said, was the only means of extending complete health to the very poor. There was also a need to ensure universal access to health care and to guarantee access to adequate sexual and reproductive health services and the access of local populations to medicines. Pharmaceutical producers should therefore be encouraged to make products available at affordable prices in increased volumes. The report also stressed the need to develop palliative care for those with life-threatening diseases such as HIV/AIDS, tuberculosis and cancer and said that treatment should also be authorised, under medical supervision, involving painkillers such as morphine which are otherwise considered as narcotics and whose use is legally restricted. Other points raised in the report included the need to introduce a gender perspective into health policies, given women's important role as primary health promoters, to pursue an active policy to combat trade and trafficking in counterfeit, adulterated or out-of-date medicines and to ensure that health is not included within the scope of the General Agreement on Trade in Services (GATS) as a 'service' subject to free market sources and productivity criteria.