Public health and development: actions in the field of the AIDS in developing countries, 1997-1999 programme

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Adopting the report by Mrs Anne ANDRE-LEONARD (ELDR, B) Parliament approved the regulation setting up an assistance programme to help the developing countries combat the spread of HIV/AIDS and deal with the impact on health and social and economic development. It asked, however, that priority be given to the following strategies and action: * Priorities: Parliament called on the Community to support strategies aimed at: - promoting an effective policy to prevent HIV/AIDS from being transmitted sexually, perinatally or through the blood and for the prevention and treatment of sexually transmitted diseases, by funding health information and prevention campaigns promoting the correct use of all means of protection, particularly condoms, and campaigns planned with the involvement of such mass media as are capable of reaching the population; - breaking the "poverty-instability-HIV/AIDS" cycle, with particular attention being accorded to groups in high-risk environments (refugees, migrants, itinerant workers, soldiers, prisoners, prostitutes, etc.); - stressing the need to reduce the co-factors that cause AIDS (poverty, malnutrition and poor hygiene); - reinforcing health and social services (sexual education courses aimed at young people that respect their cultural identity); - developing regional and international medical cooperation exchanges; - including action against AIDS in the general measures against other diseases which still exist in the developing countries by improving primary health care; - promoting a dialogue with the religious communities that continue to reject an open and wide-ranging anti-AIDS campaign; - promoting a policy aimed at ensuring respect for the fundamental human rights referred to in the decisions of the Fourth World Women's Conference in Bejing; - developing scientific knowledge on the epidemic. * Action to be taken: Parliament called for action to: - provide sexual and reproductive health education adapted to make it accessible to the target groups, with media involvement; - improve the availability and use of different means and methods of protection, in particular by means of improved information and through the promotion, distribution and social marketing of condoms; - promote methods for systematic HIV/AIDS screening among the populations in the developing countries; - increase the availability of medicinal products intended to treat sexually transmitted diseases; - study the setting up of a solidarity instrument to improve the treatment for people affected by HIV in the poorest countries, in conjunction with the Member States and the NGOs. - establish, with the active support of the major UN agencies and pharmaceutical laboratories, a financial connection between the treatments financed in the rich countries and the necessary treatments in the developing countries; - strengthen health services and care establishments; - involve local communities in the devising of local strategies for information campaigns and sexual education programmes; - promote freedom from stigma, isolation and ghettoization for those living with the virus; - improve national epidemiological surveillance notification and statistical systems; - support programmes that aim to increase women's decision-making powers in all spheres of the health sector. Parliament also asked that all AIDS prevention and control programmes should respect human rights and cultural and religious characteristics insofar as they are compatible with action against the disease. Parliament also wanted priority to be given during implementation to enhancing national capacities, particularly through training programmes designed to increase the beneficiary countries' involvement in and autonomy in relation to measures to control the spread of the virus. It also wanted a financial contribution from local partners, in particular to operating costs, in cases where a project is designed as a start-up for an ongoing activity.