## Basic information

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|---|---|
| **2006/2232(INI)**<br><br>INI - Own-initiative procedure | Procedure completed |
| Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009<br><br>**Subject**<br><br>4.20.01 Medicine, diseases | |

## Key players

### European Parliament

| Committee responsible | Rapporteur | Appointed |
|---|---|---|
| ENVI Environment, Public Health and Food Safety | ANDREJEVS Georgs (ALDE) | 11/05/2006 |

| Committee for opinion | Rapporteur for opinion | Appointed |
|---|---|---|
| AFET Foreign Affairs | The committee decided not to give an opinion. | |
| ITRE Industry, Research and Energy | The committee decided not to give an opinion. | |
| LIBE Civil Liberties, Justice and Home Affairs | CASHMAN Michael (PSE) | 19/12/2006 |
| FEMM Women's Rights and Gender Equality | GURMAI Zita (PSE) | 24/01/2006 |

### Council of the European Union

| Council configuration | Meetings | Date |
|---|---|---|
| General Affairs | 2796 | 2007-04-23 |
| Employment, Social Policy, Health and Consumer Affairs | 2803 | 2007-05-30 |

### European Commission

| Commission DG | Commissioner |
|---|---|
| Health and Food Safety | KYPRIANOU Markos |

## Key events

| Date | Event | Reference | Summary |
|---|---|---|---|

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|---|---|---|---|
| 15/12/2005 | Non-legislative basic document published | COM(2005)0654 | Summary |
| 28/09/2006 | Committee referral announced in Parliament | | |
| 21/03/2007 | Vote in committee | | Summary |
| 29/03/2007 | Committee report tabled for plenary | A6-0091/2007 | |
| 23/04/2007 | Resolution/conclusions adopted by Council | | Summary |
| 24/04/2007 | Decision by Parliament | T6-0137/2007 | Summary |
| 24/04/2007 | Results of vote in Parliament | | |
| 24/04/2007 | Debate in Parliament | | |
| 24/04/2007 | End of procedure in Parliament | | |
| 30/05/2007 | Resolution/conclusions adopted by Council | | Summary |

## Technical information

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| **Procedure reference** | 2006/2232(INI) |
| **Procedure type** | INI - Own-initiative procedure |
| **Procedure subtype** | Initiative |
| **Legal basis** | Rules of Procedure EP 55 |
| **Stage reached in procedure** | Procedure completed |
| **Committee dossier** | ENVI/6/33979 |

## Documentation gateway

**European Parliament**

| Document type | Committee | Reference | Date | Summary |
|---|---|---|---|---|
| Committee opinion | FEMM | PE378.730 | 20/11/2006 | |
| Committee draft report | | PE382.406 | 19/12/2006 | |
| Amendments tabled in committee | | PE384.531 | 07/02/2007 | |
| Committee opinion | LIBE | PE384.282 | 28/02/2007 | |
| Committee report tabled for plenary, single reading | | A6-0091/2007 | 29/03/2007 | |
| Text adopted by Parliament, single reading | | T6-0137/2007 | 24/04/2007 | Summary |

**European Commission**

| Document type | Reference | Date | Summary |
|---|---|---|---|
| Non-legislative basic document | COM(2005)0654 | 15/12/2005 | Summary |

# Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009

2006/2232(INI) - 24/04/2007 - Text adopted by Parliament, single reading

The European Parliament adopted a resolution drafted by Georgs **ANDREJEVS** (ALDE, LV) welcoming the Commission communication on combating HIV/AIDS within the EU and in the neighbouring countries, 2006-2009, and supporting the actions and initiatives suggested in it. It asked the Commission 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. The Commission must specify, according to national data provided by the Member States, the most vulnerable groups in each society and establish a comprehensive list of such groups.

It pointed out that, 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. 95% of the people affected by HIV/AIDS live in developing countries. Reports from EuroHIV and UNAIDS confirm that the number of new HIV infections is still rising at an alarming rate within the EU 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. The epidemic among IDUs is one of the reasons for the rapid spread of HIV infection in many Eastern European countries.

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. According to UNAIDS, over the past two years, the number of women and girls infected with HIV has increased in every region of the world, with rates rising particularly rapidly in Eastern Europe, Asia, and Latin America.

Parliament urged the Commission to consider appropriate measures to reach migrant and immigrant populations within the EU, 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. It also urged the Commission to use all available instruments, such as the Neighbourhood Policy and the Northern Dimension Instruments, to reach the vulnerable population groups in the neighbouring countries, with particular attention to the Kaliningrad area of Russia.

Amongst many recommendations, Parliament asked the Commission (and the Member States when within the purview of the latter) to do the following:

- to develop evidence-based programmes and 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 exchanges; -to promote communication campaigns which will provide the population with clear information concerning HIV infection, on ways of preventing infection, on unsafe practices and on practices which help to prevent infection with HIV;

- to offer political support and technical assistance to neighbouring countries which wish to take advantage of the flexibilities contained in the TRIPS Agreement when faced with a public-health problem, and to offer support in building up infrastructure for HIV counselling and testing as well as distribution and follow-up of medication;

- to pay particular attention to the promotion of sexual and reproductive health programmes for women, in order to counter the increasing spread of the epidemic among the female population;

- to define clearly the rules for using the Structural Funds and the Social Funds for HIV/AIDS related projects and/or programmes;

- to use all the possibilities available within the Seventh Framework Programme on Research and Development to continue to fund and identify further promising projects concerning HIV/AIDS research and the development of new innovative ARV drugs, vaccines and microbicides;

- to ensure that HIV/AIDS research is gender balanced and includes various physiological and biological aspects as regards the nature of transmitting viruses;

- to explore the possibilities and practical means and to use the results of clinical research to combat HIV/AIDS in the partner countries, the Western Balkans and Central Asia, following the procedures for external aid and respecting the directives for action as agreed in the strategy documents with the relevant countries and the indicative programmes;

Parliament also strongly encouraged the Commission and the Member States to subsidise research and development of microbicides and female condoms which give women the power to protect themselves and a male partner from HIV/AIDS with or without the partner's agreement.

It was concerned about the high costs of new and second-line drugs to treat AIDS, and called for a fundamental debate on patent law. Small adjustments to a product or to an active ingredient should be allowed to result only in a proportional extension to the period of patent protection. It asked Member States to consider giving a mandate, in accordance with Articles 300 and 308 of the EC Treaty, and limited in scope and time, to the Commission on behalf of the EU to negotiate with the pharmaceuticals industry an agreement aiming at lower prices for ARV drugs in the EU.

Lastly, Parliament suggested the establishment of a "clearinghouse" at EU level with the objective of collecting and analysing best practices from all institutions and organisations active in the fight against HIV/AIDS. It felt that such a mechanism would help to identify shortcomings in the existing actions and to formulate new strategies.

# Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009

2006/2232(INI) - 30/05/2007

The Council held a policy debate on combating HIV/AIDS within the EU and in the neighbouring countries covering, in particular, the following topics:

- how to intensify both prevention efforts and civil society involvement, in each country and at EU level; examples of best practice;

- access to antiretroviral treatment and prices of antiretroviral drugs; sustainability of universal access to treatment also in some parts of Europe, measures / initiatives appropriate to tackle this problem.

Recognising that prevention is a key element to concretise the efforts aimed at fighting HIV/AIDS disease, the delegations suggested a number of examples of best practice, such as:

- the use of the Internet to inform a large number of people;
- programmes of education on health matters addressed to young people;
- identification of high risk population groups and preparation of information programmes targeted at such groups;
- personal advice, preserving the patient's anonymity;
- distribution of condoms at low prices;
- end of stigmatisation, with respect for human rights and of the right to privacy.

Concerning access to antiretroviral treatments at accessible prices, the delegations underlined the need to negotiate with the pharmaceutical industry and to show solidarity with the countries in economic difficulties. The Council further adopted conclusions based on the outcome of the Presidency conference on this topic, held in Bremen on 12-13 March 2007.

# Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009

2006/2232(INI) - 23/04/2007

The Council and the representatives of the Member States adopted the conclusions on recent issues highlighted concerning HIV/AIDS.

Highlighting the important role the European Union plays in confronting HIV/AIDS, malaria and tuberculosis, the Council welcomes the Presidency Paper on “Recently Emerging Issues regarding HIV/AIDS” that focuses on newly emerging issues and barriers that hinder progress in tackling HIV /AIDS and the effective implementation of the European Programme of Action. The Council recognises that the fight against HIV/AIDS can only be successful if a comprehensive approach is taken that includes scaling up significantly towards the goal of universal access to prevention, treatment, care and support by 2010.

Whilst these Conclusions focus on the recent trend of feminisation, the Council emphasises the need to also focus on young people, especially young women and girls, children infected with and affected by HIV/AIDS, including children orphaned by AIDS and children and infants in need of treatment, women and girls in conflict situations as well as other key populations at particular risk of HIV infection, including men who have sex with men, injecting drug users, sex workers, prison populations, migrants, refugees, trafficking victims and others and to support their inclusion in the planning of strategies and programmes as well as in the decision making process in order to tackle HIV/AIDS successfully.

The Council asks the Commission and the Member States to:

- support the adoption and strengthening of legal, policy and administrative measures at country level to promote and fully protect women's and girls’ rights and reduce their vulnerability to HIV/AIDS through the elimination of all forms of violence, stigma and discrimination as well as all kind of sexual exploitation of women, girls and boys including for commercial reasons;

- promote and support the enactment and enforcement of legislation in order to uphold and fully protect women’s rights;

- confront gender based violence, including female genital mutilation and other harmful traditional and customary practices, through political dialogue at country level and identify and develop social protection mechanisms that benefit households affected by HIV/AIDS and relieve the burden of care for women;

- promote and support increased participation of women where AIDS policies are formulated, agreed and implemented, and funds are allocated, with targets that can be measured and for which there is accountability;

- promote and support the inclusion of the issue of feminisation of HIV/AIDS in education programmes in order to raise awareness among girls and boys as well as young women and men of the threat posed by the pandemic;

- strengthen women’s organisations to play an active role in developing and implementing such policies;

- reaffirm their commitment to prevention and to focus on aspects of prevention such as sexual and reproductive health rights (SRHR), harm reduction and preventing mother to child transmission (PMTCT), including through actions that support the reversing of the downward trend in financing for SRHR;

- support programmes that work with men and women to address gender and behaviour norms and norms around sexual relations that make women vulnerable to HIV/AIDS infection;

- promote the collection, analysis and use of age and sex-disaggregated data and their inclusion in reporting;

- promote strategies that ensure that HIV/AIDS and SRHR programmes contribute to the overall strengthening and sustainability of health systems including funding and implementation of the European Programme for Action to tackle the critical shortage of health workers in developing countries for the time period 2007-2013;

- promote universal access to sexual and reproductive health services and rights and commodities, including male and female condoms as the most efficient means to reduce the sexual transmission of HIV and other sexually transmitted diseases, and to join efforts and explore ways to fill the commodities gap in this regard;

- promote the greater involvement of potential beneficiaries, including people living with HIV, women and youth groups in the design, programming and implementation of SRHR programmes and HIV/AIDS initiatives;

- ensure that SRHR and HIV/AIDS policies, programmes and services are built on the fundamental commitment to respect, protect and promote human rights;

- promote linkages between HIV/AIDS and SRHR within all existing national development plans and budgets, including health sector reforms, PRSPs as well as sector wide approaches and ensure that the linkages are addressed within EC instruments;

- work with existing organisations that currently support microbicide research;

- sponsor an EU or international Conference at the expert level with a wide group of stakeholders including representatives of the WHO, the European Medicines Agency (EMEA), civil society, including the International Partnership for Microbicides and the Association for Microbicide Development, regulatory authorities from developing countries and the pharmaceutical industry, on expanding HIV/AIDS preventive options;

- address as a priority the vulnerability of children affected by and living with HIV/AIDS, providing support to them and their families and caregivers, women and the elderly;

- provide support to awareness campaigns on linkages between HIV/AIDS and education;

- support developing countries in developing and improving formal strategies for an education sector response to HIV/AIDS;

- support the strengthening of social and legal protection systems as well as the creation of less susceptible livelihoods as an integral part of PRSPs in order to support households caring for orphans and vulnerable children as well as child headed households;

- support comprehensive education programmes which address HIV/AIDS Systematically;

- foster the sharing of information and best practices in sectoral approaches to HIV/AIDS;

- support capacity building programmes in the education sector.

The Council emphasises the importance of achieving sufficient, long-term, predictable, sustainable and increased funding to tackle HIV/AIDS in order to build-up and strengthen health and other social services, including basic health services, and to intensify research and development of new, improved and affordable tools of prevention, treatment and early diagnostics, including vaccines, paediatric drugs and microbicides. In this respect, the EU will continue working in the area of HIV/AIDS through a wide array of existing financing instruments at global and country level including the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria (GFATM). The EU will collectively maintain and increase funding to the GFATM.

Lastly, the Council encourages the Commission and Member States to ensure implementation of existing commitments within the EU Programme for Action on HIV/AIDS, Malaria and Tuberculosis and calls on the Commission and Member States to report on progress, including on these emerging issues regarding HIV/AIDS, in the context of the joint monitoring and reporting on the European Programme for Action in 2008 and 2010.

# Combating HIV/AIDS within the European Union and in the neighbouring countries, 2006-2009

2006/2232(INI) - 15/12/2005 - Non-legislative basic document

PURPOSE: the presentation of an EU strategy on combating HIV/AIDS both within the Community and in neighbouring countries (2006-2009).

CONTENT: this Communication sets out the EU's main line of action in combating HIV/AIDS covering the period 2006-2009. The Communication is centred along six main axes: Involving civil society; Surveillance, Prevention of new HIV infections; Counselling, testing, treatment, care and support; Research; and the Neighbourhood countries. With rising numbers of HIV/AIDS cases the Commission emphasises the importance of prevention, which as it points out, is the cornerstone for all other activities. Without the vigorous promotion of primary prevention measures, such as education and the use of condoms, any other target set will be much harder to achieve. As there is no vaccine or cure, prevention remains one of the top priorities in the fight against HIV/AIDS.

### 1. Involvement of Civil Society

The aim of this priority will be to strengthen the involvement of civil society in all aspects relating to policy development, implementation, monitoring and evaluation. The Commission invites regional and national authorities to facilitate the sustainability of the non-governmental and community-based

organisations. Similarly, the Commission invites European businesses via UNICE to strengthen their response to the epidemic and to play their role in implementing this strategy.

**2. Surveillance**

The aim of this priority is:

- to improve and harmonise surveillance systems which track and monitor the epidemic, risk behaviour and groups vulnerable to HIV/AIDS.
- to monitor the incidence and prevalence of other sexually transmitted infections such as hepatitis C, hepatitis B and to monitor diseases associated with HIV/AIDS such as tuberculosis. Particular attention will be given to high risk and vulnerable groups.
- to support the surveillance of HIV testing.

To realise these aims the Commission will collaborate closely with the ECDC, with the Member States and with the EU's neighbouring countries. More specifically the Commission, will help complete the geographic coverage of HIV case reporting; it will reassess the objectives of AIDS surveillance; it will design a standardised approach on prevention indicators; it will develop estimates of HIV incidence in Europe; it will help set-up sentinel surveillance in high-risk groups and lastly it will seek practical solutions to current obstacles associated with confidentiality.

**3. Prevention of new HIV infections**

The aim of this priority is:

- to implement population-wide targeted HIV prevention measures;
- to ensure that all citizens have access to information, education and services;
- to improve access to prevention, drug dependence treatment and harm reduction services for injecting drug users;
- to address the specific needs and requirement of migrant population in terms of offering them support to information, prevention methods, treatment, care and support.

In order to help increase preventative measures the Commission proposes a number of actions. These include, inter alia, the implementation of comprehensive prevention programmes and their expansion; supporting innovate strategies promoting safe sex and preparing a situation report on mother-to-child transmission in Europe. In addition the Commission promises to develop tailor-made curricula for health care personnel and other professionals dealing with HIV/AIDS patients. Lastly, the Commission will help implement a skills-based approach which promotes youth behaviour change in schools and other youth settings.

**4. Voluntary counselling and testing, treatment, care and support**

The aim of this priority is:

- to combat stigma and discrimination;
- to support universal access to effective, affordable and equitable treatment and care, including safe antiretroviral treatment;
- to promote social and labour market integration for those living with HIV/AIDS.

The Commission will support Member States in building up their capacities and will provide them with a toolkit of possible models for comprehensive HIV/AIDS services. This toolkit will also be offered to European Neighbourhood Policy partners. The Commission will ensure the availability of affordable ARVs to the Member States.

**5. HIV/AIDS Research**

The aim of this priority is:

- to increase commitments to research and development for vaccines and microbicides;
- to invest in the development of affordable and easier to use therapeutics and diagnostics;
- to support research driven by public health needs;
- to support private sector involvement and participation;
- to support research into behavioural and preventative methods.

The Commission proposes to implement this action through the EU's 7$^{th}$ Research Programme, where an increase in HIV/AIDS research funds is being supported by the Commission. Research centres on three main pillars, namely biotechnology; translational research and the delivery of health care to European citizens.

**6. Neighbourhood**

Geographically, “Neighbourhood” covers the following countries: the Russian Federation; Algeria. Armenia, Azerbaijan, Belarus, Egypt, Georgia, Israel, Jordan, Lebanon, Libya, Moldova, the Palestinian Authority, Syria, Tunisia and Ukraine. Under this heading, the Commission will continue dialogue at a political level in a bid to develop collaboration between the different authorities responsible for tackling HIV/AIDS. In addition, the Commission will sponsor ENP partners’ activities within the HIV/AIDS think tanks and within the Civil Society Forum.

To conclude, the Commission together with other organisations involved in HIV/AIDS prevention such as UNAIDS and the WHO will develop a set of appropriate core indicators for monitoring the development of this disease.