Basic information

2006/2668(RSP) RSP - Resolutions on topical subjects	Procedure completed
Resolution on Aids **Subject** 4.20.01 Medicine, diseases 6.40.12 Relations with developing countries in general 6.40.13 Relations with/in the context of international organisations: UN, OSCE, OECD, Council of Europe, EBRD	

Key players

Council of the European Union

Council configuration	Meetings	Date
Economic and Financial Affairs ECOFIN	2766	2006-11-28

Key events

Date	Event	Reference	Summary
28/11/2006	Debate in Council		
30/11/2006	Decision by Parliament	T6-0526/2006	Summary
30/11/2006	Results of vote in Parliament		
30/11/2006	Debate in Parliament		
30/11/2006	End of procedure in Parliament		

Technical information

Procedure reference	2006/2668(RSP)
Procedure type	RSP - Resolutions on topical subjects
Procedure subtype	Resolution on statement
Legal basis	Rules of Procedure EP 136-p2
Stage reached in procedure	Procedure completed

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Motion for a resolution		B6-0619/2006	30/11/2006	

Motion for a resolution		B6-0620/2006	30/11/2006	
Motion for a resolution		B6-0622/2006	30/11/2006	
Motion for a resolution		B6-0623/2006	30/11/2006	
Motion for a resolution		B6-0624/2006	30/11/2006	
Text adopted by Parliament, topical subjects		T6-0526/2006	30/11/2006	Summary

European Commission

Document type	Reference	Date	Summary
Commission response to text adopted in plenary	SP(2007)0329	13/02/2007	

Resolution on Aids

2006/2668(RSP) - 30/11/2006 - Text adopted by Parliament, topical subjects

The European Parliament adopted a joint resolution on aids by 546 votes in favour to 34 against with 24 abstentions, and expressed its deepest concern at the spread of HIV/AIDS and other epidemics among the poorest peoples in the world and at the lack of focus on the prevention of HIV /AIDS, the inaccessibility of key medicines, the insufficiency of funding and the continuing need for more research into the major epidemics. It called on the Commission to increase to EUR 1 billion the EU's contribution to the global fund against HIV/AIDS, malaria and TB, and on all Member States and G8 members to increase their contribution to EUR 7 billion in 2007 and EUR 8 billion in 2008, in order to provide UNAIDS with the resources necessary to reduce the extent of these epidemics.

Figures indicate that over 95% of the 39.5 million people in the world suffering from HIV/AIDS live in developing countries. Of the 6.8 million people living with HIV in low and middle-income countries and in need of anti-retroviral medication, only 24% have access to the necessary treatment. Moreover, only 5% of HIV-positive children receive medical help, and fewer than 10% of the 15 million already orphaned by AIDS get financial support.

HIV/AIDS in the world: Parliament stressed the accountability of governments, health service providers, the pharmaceuticals industry, NGOs, civil society and others involved in prevention, treatment and care. All international donors must work to ensure that HIV prevention programmes reach the people most at risk of infection. The EU must fund specific programmes to ensure that children affected by the AIDS epidemic by the loss of one or both parents or by contracting the disease themselves remain in education and are supported. Furthermore, aid programmes should ensure that once a patient starts a course of treatment, funding is provided so that treatment can continue to be provided uninterruptedly, in order to prevent the increased drug resistance that results from the interruption of treatment. Parliament called the newly elected US Congress to overturn the Bush administration's "global gag rule", which stops funding from non-US NGOs to any reproductive health organisations that counsel on abortion.

Sexual and reproductive health: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, improved access to treatment and the development of vaccines as a matter of urgency. The European Commission and the governments of the EU's partner countries must ensure that health and education, and HIV/AIDS and sexual and reproductive health in particular, are prioritised in Country Strategy Papers. Parliament called on the Commission and Member States to support programmes that combat homophobia and break down the barriers that prevent the disease from being addressed effectively, especially in Cambodia, China, India, Nepal, Pakistan, Thailand and Vietnam and across Latin America, where there is increasing evidence of HIV outbreaks among men who have sex with other men. It welcomed the inclusion of research into HIV/AIDS in the 7th Research Framework Programme and called for research on vaccines and microbicides, diagnostic and monitoring tools suited to developing countries' needs, epidemic transmission patterns and social and behavioural trends to be supported. The House underlined that women must be involved in all appropriate clinical research, including vaccine trials. Parliament also called for investment in the development of female-controlled prevention methods such as microbicides, female condoms and post-exposure prophylaxis for survivors of rape.

Access to medicines:five years after the Doha Declaration, Parliament noted that the WHO warned that 74% of AIDS medicines are still under monopoly and 77% of Africans still have no access to AIDS treatment. In addition, fierce competition in the generic pharmaceuticals industry has helped prices for first-line AIDS drug regimens fall by 99% since 2000, from USD10,000 to roughly USD130 per patient per year, although prices for second-line drugs – which patients need as resistance develops naturally – remain high, mostly owing to increased use of patents in key generic pharmaceutical-producing countries. Under these circumstances, Parliament encouraged governments to use all means available to them under the TRIPs Agreement, such as compulsory licences, and for the WHO and the WTO and its members to review the whole TRIPs Agreement with a view to improving access to medicines. The Commission and the Member States must now recognise, five years after the adoption of the Doha Declaration, that its application has been a failure. The TRIPS Agreement must be modified and its provisions based on the Decision of 30 August 2003 (Article 31a), in order in particular to abolish the complex and time-consuming procedural steps in the authorisation of compulsory licenses. Meanwhile, Parliament encouraged all countries facing major epidemics to make immediate use of Article 30 of the TRIPS Agreement to access the necessary medicines without paying patent royalties to right-owners.

Whilst it supported the commitment undertaken by heads of state and government at the 2005 UN World Summit calling for universal access to HIV /AIDS prevention services, treatment and care by 2010, Parliament believed that a clear plan for funding universal access should be developed and international and interim progress targets set. There must be support for the development of regional and national generic pharmaceutical-producing industries in affected areas with a view to facilitating access to affordable drugs.