

## Dods EU Briefing

**Source:** EP plenary session in Strasbourg

**Subject:** Council and Commission statements - HIV/AIDS: Early Diagnosis and Early Care

**Date:** November 19/20 2008

**Procedure:** Motion for a resolution

**Documents:** [Motion for a resolution](#) / [Amendment](#)

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The motion for a resolution on **HIV/AIDS: Early Diagnosis and Early Care** was adopted today with **480** votes in favour, **4** against and **10** abstentions. The [voting list](#) can be found below the debate, which is summarised below.

**Jean-Pierre Jouyet of the Council** made a statement that contained some facts as well as some political remarks:

- 25 years have passed since the discovery of HIV, in which 25 million have died;
- The EU must fight this scourge;
- Universal access to treatment and early screening is essential, something that the European parliament (EP) stressed this in 24/4/07
- We need educational campaigns, warning campaigns, and new strategies new methods of screening. These need to be flexible to cope with the changing nature of the epidemic;
- Retroviral drugs need to be accessible;
- Early screening allows for successful deployment of antiretroviral drugs to keep patients well for longer - without early screening we need rapid screening techniques;
- Fear of stigmatisation can mean people are unwilling to go for early screening. We need to eliminate discrimination of HIV. Restrictions on them will be counter productive as they are carriers but not contagious. It will not benefit them or the Union to not allow them to participate in society;
- People with a positive result should benefit from quality care without discrimination;
- International coordination will be decisive in fighting this pandemic;
- The EU, now more than ever, needs to engage actively in combating this pandemic;

**Commissioner Janez Potočnik** then made his statement:

- A nobel prize for medicine went to two Europeans who isolated the HIV virus in 1983;
- There is still no cure, and still thousands of new infections annually;
- We know how it is transmitted and how to prevent it;
- Social responsibility, education and awareness are key;
- We need to be ambitious;
- Appreciate EP keeping HIV/AIDS high on the political agenda;
- Experts estimate 30% of HIV Europeans are not aware of their status. They may not receive treatment, and may infect partners;
- European position must concentrate on the prevention and raise awareness;

- Fight for affordable medications;
- Seek to support best practice;
- Create effective actions on the ground;
- Fight discrimination;
- Look beyond our borders to Africa to help others;
- Fully endorse the principal barriers of HIV testing and care;
- Establishment of testing centres operating within acknowledged international standards is a must for member states
- What a successful prevention approach requires most is openness and tolerance;
- EC will continue to play its role to a great extent;
- We all need to live up to our responsibilities.

### **Group Speakers**

**John Bowis (EPP-ED, UK)** stated that 30% of those with HIV do not know their status as disease carriers. Surprisingly less than 10% are injecting drug users. 30% are homosexual males. Many are heterosexuals, who traditionally would be classed as a low risk group. We need early diagnosis, early testing, education, ongoing research and development and care; fewer people are dying of AIDS – more people have to live with it.

**Zita Gurmai (PES, HU)** said that HIV/AIDS is one of the most serious diseases of our century. There have been 215,000 infected within the EU within the last 10 years. It has important implications with regard to neighbourhood and migration policy. Women are the most at risk group when talking about HIV/AIDS. Reductions strategies must be rolled out across MS. We must recognise that increased effort for new and effective medicines is required, and we must eliminate discrimination.

**Georgs Andrejevs (ALDE, LT)** said that this situation needs to be tackled urgently.

**Vittorio Agnoletto (GUE/NGL, IT)** stated that there are 30 antiviral drugs which can prolong life, but there is nothing that can destroy the virus. Lower rates of mortality have been achieved but more people are living with it. Most EU countries do not have preventive campaigns most having not had them for years. In Italy, people do not know they have AIDS often until they are ill as there is very little early screening available, and where there is, it is not utilised. People often hide as they do not want to know the risks they face or those of other people.

### **Individual Speakers**

**Avril Doyle (EPP-ED, IE)** said that there were 86,000 cases reported in 2006, while 18,000 AIDS cases were diagnosed. 35% of newly infected were female. Risks are geographical by nature with Eastern Europe succumbing to drug injection, while the transfer of the disease in Western Europe is often through heterosexual sex. Late diagnosis of the disease means late therapy. We need best practice in testing, treatment and care. Prevention strategies need to be headline material again as the fear has evaporated. We need to re-instil it!

**Michael Cashman (PES, UK)** said that people do not go for early testing for the fear of stigmatisation. This fear still exists here and in other continents. Unless we engage this fear, we are still at risk. He welcomed this resolution. This year is the 20<sup>th</sup> anniversary of AIDS day, although

there have been little changes. He congratulated the EC, EP and the rapporteur for sending a signal to the world.

**Toomas Savi (ALDE, EE)** stated that it is vital that people with HIV can be open about their condition without fear of discrimination.

**Colm Burke (EPP-ED, IE)** said that there is a growing impression that AIDS is a treatable condition and therefore the fear is not as great as it should be.

**Mairead McGuinness (EPP-ED, IE)** stated that the fear of the 1980's is no longer present. The message of prevention needs to be brought in, although in a manner which does not bring about discrimination.

**Jean-Pierre Jouyet of the Council** thanked **Michael Cashman** for his strong testimony. He then said that we need to:

- Have a common approach;
- Step up research and development;
- Make the necessary funding available;
- Be vigilant and fight all the forms of discrimination;
- Be aware of what has happened in the past and avoid returning to that point.

**Commissioner Janez Potočnik** explained that the big three diseases, HIV, TB and malaria each year kill the equivalent of the population of Denmark. Traditionally they are diseases associated with poverty. HIV is expanding – it is no longer a preserve of poor nations with a lack of facilities. We need to commit funds towards finding a vaccine, and research should continue in this area. One thing not mentioned is the importance of the neighbourhood policy, where in the EU and in our area this is a critical issue. He concluded the debate by stating that ‘we have a moral obligation as human beings to do all we can.’

### Voting list

Subject of the amendment	Am No	Author	RCV etc.	Vote	Remarks
<b><i>Joint motion for a resolution RC6-0581/2008 (EPP-ED, PES, ALDE, UEN, Greens/EFA, EUL/NGL)</i></b>					
§ 5	1	EUL/NGL		+	
<b><i>vote: resolution (as a whole)</i></b>			RCV	+	480, 4, 10
<b><i>motions for resolutions by political groups</i></b>					
B6-0581/2008		PES			ad. = all MRs fall
B6-0583/2008		ALDE			ad. = all MRs fall

Subject of the amendment	Am No	Author	RCV etc.	Vote	Remarks
B6-0584/2008		Greens/ EFA			ad. = all MRs fall
B6-0585/2008		EPP-ED			ad. = B6-0586 and B6-0587 fall
B6-0586/2008		UEN			ad. = B6-0587 falls
B6-0587/2008		EUL/NGL			

Requests for roll-call votes

IND/DEM final vote