



## Resolution 1536 (2007)<sup>1</sup>

# HIV/AIDS in Europe

## Parliamentary Assembly

1. The Parliamentary Assembly recalls its [Resolution 812 \(1983\)](#) on the acquired immune deficiency syndrome (Aids), [Recommendation 1080 \(1988\)](#) on a co-ordinated European health policy to prevent the spread of Aids in prisons, [Recommendation 1116 \(1989\)](#) on Aids and human rights as well as its [Resolution 1399 \(2004\)](#) and [Recommendation 1675 \(2004\)](#) on a European strategy for the promotion of sexual and reproductive health and rights, in view of the devastating impact HIV/Aids has on human, social and economic development.

2. It also recalls the International Guidelines on HIV/Aids and Human Rights, issued by the Joint United Nations programme on HIV/Aids (UNAIDS) and the United Nations High Commission for Human Rights in 1998, and the Declaration of Commitment on HIV/Aids adopted by the United Nations General Assembly Special Session on HIV/Aids in 2001 and the draft political declaration adopted by the United Nations General Assembly Special Session on HIV/Aids in 2006, as well as the European Union statement on HIV prevention for an Aids-free generation of December 2005.

3. While reaffirming the Millennium Development Goals (MDGs) contained in the United Nations Millennium Declaration, the Assembly is aware that the achievement of the MDGs, will not be possible unless progress is made in addressing the challenge of sexually transmitted infections including HIV/Aids and sexual and reproductive health and rights.

4. The Assembly is concerned that:

4.1. each year the number of people infected with HIV continues to rise;

4.2. physiologically and due to discrimination, women are particularly vulnerable to HIV/Aids;

4.3. ignorance and intolerance – because they lead to discriminatory acts in the fields of medical assistance, job opportunities, education, housing and, in general, in every aspect related to the social well-being of people affected by HIV/Aids – are still a reason for the marginalisation of persons infected or presumed to be infected by HIV/Aids;

4.4. some governments are still reluctant to acknowledge the existence and gravity of the HIV/Aids pandemic and to recognise that the stigma and discrimination faced by people living with HIV/Aids, particularly women, hampers the effectiveness of responses to this pandemic.

5. The Assembly recognises that the global HIV/Aids pandemic constitutes a formidable threat to human life and dignity and to the full enjoyment of human rights, and that the full realisation of human rights and fundamental freedoms for the people infected is an essential element in the global response to the pandemic.

6. It also affirms that respect for, and the protection and fulfilment of, the human rights of women and girls are necessary and fundamental components in the fight against HIV/Aids. Moreover, this fight cannot be separated from the fight against poverty, which affects primarily women and children, thus weakening the workforce and hindering economic and social development.

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1. *Assembly debate* on 25 January 2007 (8th Sitting) (see [Doc. 11033](#), report of the Social, Health and Family Affairs Committee, rapporteur: Mrs McCafferty). *Text adopted by the Assembly* on 25 January 2007 (8th Sitting).



7. The Assembly considers that although the use of antiretroviral medication (ARV) combined with proper therapies can delay the advance of HIV/Aids, millions of infected people cannot afford these treatments. In that context, it stresses that under the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) of the World Trade Organization (WTO), WTO members may allow the production of patented medicines in the event of health emergencies, and it encourages World Health Organization (WHO) member states to utilise fully the flexibility of the TRIPS Agreement to promote access to ARVs and other essential pharmaceutical products.

8. Aware that, to exercise their rights, people living with HIV/Aids require non-discriminatory access to services including health care, treatment and social and legal services, within a supportive social environment, the Assembly is convinced that:

8.1. recognising the degree of the infection levels of the HIV/Aids pandemic within each country will help the respective governments tailor their prevention, treatment, care and support programmes to meet their particular needs;

8.2. capacity-building in the field of public health is critical to the effective prevention and treatment of HIV/Aids;

8.3. any response to the epidemic will be effective only if it addresses the causes of its spread, including human trafficking, in particular trafficking in women and girls, drug abuse and drug trafficking and gender-based violence, and in this context the pivotal roles of the family, religion and long-established fundamental ethical principles and values need to be underlined.

9. While emphasising that the HIV/Aids pandemic is an emergency at the medical, social and economic level, the Assembly calls upon parliaments and governments of the Council of Europe to:

9.1. ensure that their laws, policies and practices respect human rights in the context of HIV/Aids, in particular the right to education, work, privacy, protection and access to prevention, treatment, care and support;

9.2. protect people living with HIV/Aids from all forms of discrimination in both the public and private sectors, promote gender equality, ensure privacy and confidentiality in research involving human subjects, and provide for speedy and effective judicial, administrative and civil remedies in the event of a violation of the rights of people living with HIV/Aids;

9.3. ensure the development and accelerated implementation of national strategies for women's empowerment by, inter alia, ensuring they have access to property rights, promoting and protecting women's full enjoyment of all human rights, and reducing their vulnerability to HIV/Aids through the elimination of all forms of discrimination, as well as all forms of violence against women and girls, including harmful traditional and customary practices, abuse, rape and other forms of sexual violence; and protect the right of women living with HIV/Aids to make free decisions about their sexuality and reproductive health, in particular by ensuring access to services that prevent mother-to-child transmission of HIV and provide pregnant women with access to long-term ARV treatment;

9.4. adopt and finance the measures necessary to ensure, on a sustained basis and for all affected persons (irrespective of social or legal status, gender, age or sexual orientation), the availability and accessibility of quality services and information for HIV/Aids prevention, management, treatment, care and support, including the provision of means of HIV/Aids prevention such as male and female condoms, sterile hypodermic needles, and basic preventive care kits, as well as affordable ARV medication and other safe and effective medicines, psychological support, diagnostics and related technologies for all persons, with particular attention to vulnerable individuals and groups such as women and children;

9.5. implement measures to increase the capacity of women and adolescent girls to protect themselves from the risk of HIV infection, principally through education, including peer education, and access to the provision of health-care services, including those related to sexual and reproductive health;

9.6. adopt the measures necessary to continue, intensify, combine, make mutually beneficial and harmonise national and multinational research and development efforts aimed at developing new treatments against HIV/Aids, including medicines prepared specifically for use in children living with HIV/Aids, new means of prevention and new diagnostic tools and tests, including vaccines and female-controlled prevention methods such as microbicides;

- 9.7. recognise the health, socio-economic and other effects of HIV/Aids on individuals, families, societies and nations, and to take the appropriate legislative and executive social measures to halt its spread;
  - 9.8. adopt and implement policies that respect the human rights of persons living with HIV/Aids, and through all available media, to advocate for and raise awareness of their rights;
  - 9.9. develop and implement national legislation and policies that address the needs and human rights of the growing number of children orphaned and made vulnerable through the HIV/Aids pandemic;
  - 9.10. ban compulsory HIV/Aids screening for people applying for travel visas, asylum, jobs or enrolment at a university in favour of voluntary testing;
  - 9.11. establish co-ordinated, participatory, transparent and accountable national policies and programmes to combat HIV/Aids, and to translate these national policies into action at district and local levels, wherever possible involving, in development and implementation, non-governmental and community-based organisations, religious organisations, the private sector, and more importantly, people living with HIV/Aids, and particularly the most vulnerable among them, including women and children.
10. The Assembly further invites member states of the Council of Europe to:
    - 10.1. prepare national strategies with the aim of stopping the spread of HIV/Aids by 2015 and to begin reversing the trends in the development of this pandemic;
    - 10.2. sponsor the official launch of national HIV/Aids strategies and the periodic establishment of national and regional reports taking stock of the degree of achievement of the fight against HIV/Aids and the achievement of the MDGs, in particular in the field of the fight against HIV/Aids;
    - 10.3. ensure adequate HIV/Aids awareness training for members of the military, the police and peacekeeping personnel, in conformity with United Nations Security Council [Resolution 1325 \(2000\)](#) on women, peace and security;
    - 10.4. co-ordinate efforts with and support the work of the United Nations, non-governmental organisations and other bodies or institutions involved in HIV/Aids prevention in order to ensure that the human rights of individuals living with HIV/Aids are upheld and protected;
    - 10.5. address poverty issues, intrinsically linked with HIV/Aids and implement multisectoral approaches to combat the negative effect on economic and social development;
    - 10.6. allocate sufficient resources to their health care systems, including human resources and resources for HIV/Aids prevention, treatment, care and support, taking into consideration the UNAIDS “Three Ones” guiding principles for national authorities and their partners;
    - 10.7. implement the measures recommended in the UNAIDS/WHO document “Guidance on ethics and equitable access to HIV treatment and care” to promote equity in the distribution of HIV care in settings where resources are limited.
  11. The Assembly calls upon parliaments to:
    - 11.1. draw up laws or amend existing legislation to define national standards of protection for those suffering from HIV/Aids, especially for people in vulnerable groups, such as women and children, with particular attention being paid to the situation of anyone having lost a close family member as a result of HIV/Aids;
    - 11.2. review and adjust legislation to ensure that it conforms to the International Guidelines on HIV/Aids and Human Rights;
    - 11.3. enact legislation to punish those who wilfully transmit HIV/Aids.
  12. In order to attain these goals, the Assembly calls upon parliamentarians to:
    - 12.1. be informed about HIV/Aids and act as advocates for people living with HIV/Aids and demonstrate an open-minded approach in dealing with HIV;
    - 12.2. speak out to reduce stigmatisation, social taboos and discrimination, and address myths;

12.3. visibly demonstrate the political will and commitment to combating HIV/Aids, participate in national HIV bodies and support NGOs, including faith-based NGOs and community organisations addressing sexual and reproductive health and rights, sexually transmitted infections, HIV/Aids and drug-related issues, as well as private enterprises working in the area of HIV/Aids;

12.4. create parliamentary committees and/or other structures formally linked to parliaments with the specific task of tackling the issue of halting and reversing the spread of HIV/Aids, to share experience, information and best practices and involve all sectors of society through partnership programmes in high-level decision-making processes;

12.5. effectively utilise the parliamentary processes to provide for increased accountability and strengthen national mechanisms such as commissions, courts, legislation and co-ordinated strategies to protect, enforce and monitor, in their respective countries, the human rights of individuals infected with and affected by HIV/Aids, and to eliminate all forms of stigma and discrimination, especially in respect of vulnerable groups.

13. Finally the Assembly calls for special attention to be given to preventing HIV/Aids by disseminating adequate and target group-oriented information, using all available media and multipliers, raising awareness and educating both men and women, with particular attention paid to adolescent boys and girls; it requests the inclusion of sex education in school curricula, for both boys and girls, as a means of prevention; it urges the competent national and local bodies to give high priority to assisting pregnant and breastfeeding women suffering from HIV/Aids in order to protect their babies from infection and provide mothers with an ARV treatment to slow the progress of the HIV infection and thereby ensure they live longer and healthier lives.

14. The Assembly considers that it would be useful to study whether and how the principles, outlined in this resolution as well as in [Resolution 1537 \(2007\)](#) on a future for children with HIV/Aids and Aids orphans and in [Recommendation 1785 \(2007\)](#) on the spread of HIV/Aids to women and girls in Europe, may be applied outside the European context and therefore decides to continue its studies on HIV/Aids in respect of developing countries and particularly in respect of Sub-Saharan Africa, possibly in close co-operation with the Pan-African Parliament (PAP), the Association of European Parliamentarians for Africa (AWEPA) and with competent professional organisations.