

From declaration to accountability –
Progress on implementing the Dublin
Declaration on partnership to fight
HIV/AIDS in Europe and Central Asia

Meeting report

Prepared by DODS and European AIDS Treatment Group
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Sponsored by MEPs Prof. Georgs Andrejevs and Dr. Peter Liese, the European AIDS Treatment Group (EATG) and Aids Action Europe (AAE) held a lunch debate on **“From Declaration to accountability - Progress on implementing the Dublin Declaration on partnership to fight HIV/AIDS in Europe and Central Asia”**, 1 April, with a wide-ranging audience comprising community representatives, public affairs consultants, representatives from the European Commission and members of the European Parliament.



Speaking from his perspective as a doctor who has been confronted with HIV/AIDS while working in Latin America, and now concerned with the issue as MEP, **Peter Liese (EPP-ED, DE)** gave the opening address in which he firmly expressed his belief that HIV/AIDS must be on the EU agenda, as it is will continue to be an area of growing concern. The relationship between infection and the economy, he said, is clear for all to see.

Regarding current debates, he stated that despite his Catholic faith, he did not support the position of the Vatican regarding condoms. On the progress report, he highlighted the emphasis in chapter 7 of the Dublin Declaration that makes reference to mother-to-child transmission. Possible measures exist which are available to reduce this transmission to almost zero.

Martin Donoghoe from **WHO Europe** presented key findings of the WHO/UNAIDS progress report on implementing the Dublin Declaration, a declaration that represents one of the most important declarations governments in the European Region have committed to in tackling HIV/AIDS. He pointed out that monitoring of the progress

- Accessible;
- Equitable;
- Non-discriminatory.

Following on from this was **Nikos Dedes, EU Civil Society Forum on HIV/AIDS Co-chair**, who analyzed the significance and the outcomes of the Dublin Declaration from a community perspective, as well as the respective roles of the various institutions involved in terms of accountability, in particular the Commission, the Presidencies and the Members States. He also highlighted the key messages of the 1st Progress Report from the perspective of the Community, and invited the EP to review the progress report and take political initiatives to address the gaps.

The response of the Commission to the renewed political momentum of the Dublin Declaration included the creation of the **EU Think Tank**, the **EU Civil Society Forum on HIV/AIDS**, an **Interservice group** and finally the **EU Communication 2006-2009** published on December 2005 covering 4 years. In September 2008, Commissioner Vassiliou had announced that a new communication would be prepared and be released in 2009.



Furthermore, several presidencies had taken up issues related to HIV/AIDS: The German Presidency had made HIV/AIDS the top priority of its presidency in the area of health. The Portuguese dealt with HIV and Migration under the then priority on Migrants Health, and organised the first National AIDS Coordinators Meeting inviting all 53 countries. The French Presidency, while not choosing HIV as priority topic, focused on travel restrictions and organised a Think Tank roundtable on the subject.

EU countries had a poor record in living up to their commitments, starting by not monitoring and reporting on the progress on implementing commitments within the Dublin Declaration. The first progress report was published in 2008, with 2 years delay, and only thanks to the financial support of the German Ministry of Health. This reflected a poor level of commitment and capacity to monitoring and evaluation.

Mr Dedes then highlighted the key recommendations of the report in the fields of:

- Political leadership
- Civil society involvement
- Eastern Europe
- Injecting drug users
- Prevention in vulnerable groups
- Youth
- HIV in the workplace
- Research
- Treatment and care
- Stigma and discrimination human rights
- Testing and counseling

He welcomed the most recent EP resolution on Early Testing and Access to Care voted upon in November 2008, and asked the Parliament to act upon the findings of the monitoring of the Dublin Declaration, as well as help in holding all relevant actors accountable in delivering their commitments.

Michael Huebel from **DG SANCO** initiated the panel discussion. The Dublin Declaration, he said, was particularly crucial in that it brought an end to a period of complacency towards HIV/AIDS in the EU, an issue previously considered to be a problem confined to developing countries. To have a clear and committed EU response was of utmost importance.

He stated that the key findings of the WHO/UNAIDS Progress Report on the Dublin Declaration would certainly be considered in the upcoming **EU Communication on HIV/AIDS** (September 2009). He also stressed the significance of the ECDC continuously co-ordinating action in this area.

He explained that the EU Commission HIV/AIDS strategy forms a significant part of the EU overall public health strategy. Sufficient resources will be made available to ensure successful implementation, and a joint effort of all actors involved in this area will be of utmost importance to its successful implementation. Furthermore, a broad group of stakeholders will need to be engaged, and monitoring systems in countries will have a key role to play. He particularly stressed that the implementation of the Dublin Declaration, along increasing accountability in HIV/AIDS in general, is a continuous process and needs a sustained effort from all sides – and that this was not just about producing reports, but about serious signs of commitment to the cause that then will need to be acted upon.

The **EU Civil Society Forum on HIV/AIDS** and regional actors too will continue to play important roles. Priority areas for the upcoming EU communication on HIV/AIDS would be on prevention, priority regions and particularly vulnerable groups. The first will build on existing work, but for the second two to be realised, stronger political commitment will be required. He concluded by highlighting that the EU Communication will come out in September 2009, and that by the end of the year 2009 a reaction from the new Commission and Parliament could be expected.

Teymor Noori from the European Centre for Disease Control (ECDC), responsible for the next progress report on the declaration, presented the history of the Dublin Declaration monitoring process that had started with the UNGASS commitment and detailed the steps and key principles guiding the project of the next report.

The just recently established advisory group comprises 9 country representatives (Bulgaria, Estonia, Germany, Italy, Portugal, Spain, Sweden, UK and Ukraine), 3 NGO

representatives (2 from the Civil Society Forum and 1 from AIDS Accountability International), EU Commission, UNAIDS, WHO Regional Office for Europe, European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) as well as ECDC.

4 key principles will guide ECDC in developing the next report:

- Building on the previous WHO/UNAIDS report
- Indicators should be simple and straightforward
- Indicators must be relevant to the European context
data collection should be harmonised with other efforts, in particular as part of the UNGASS reporting.

Other than producing a country-driven status report on the implementation of the Dublin Declaration, the project is designed to:

- Develop specific indicators to adequately monitor HIV/AIDS in Europe
- Provide a clear understanding of why EU Member States have difficulties in monitoring their commitments in HIV/AIDS.

This will then provide a basis to:

- Develop alternative ways to monitor global commitments in the field of HIV/AIDS
- Convince UNAIDS to look more into meeting the specific needs of the EU
- Increase EU country reporting to global monitoring (i.e. UNGASS)

As part of ECDC's ongoing work, ECDC supports member states in implementing their Dublin Declaration commitments by:

- Improving epidemiological and behavioural surveillance of HIV/STI in the EU

- Improving the evidence-base by evaluating key HIV prevention strategies in providing
 - Scientific guidance on Chlamydia control (2009),
 - Partner notification (2009) and
 - HIV testing (2010-2011).

In addition, ECDC reviews national HIV prevention and control programmes through country visits, and has the potential to recommend actions on national level.



Denis Haveaux from UNAIDS reminded the audience of the challenge the geographical coverage of the Dublin Declaration represents, as it is not straightforward for the EU institutions to cover 53 countries. As to what accountability was concerned, he pointed out that a major step had been achieved by the 2001 Declaration of Commitment on HIV/AIDS adopted by all Member States, in which all signatories committed to provide bi-annually reports on the

their country's response to the epidemic. This mechanism should be used by countries as a chance to thoroughly assess the situation in their own country, identifying strengths and weaknesses and to modify national strategic plans accordingly – and not as a mere 'business as usual' exercise. Although the submission rates of UNGASS reports from within the EU are lowest worldwide, it comes as encouraging news that the submission rate is increasing.

UNAIDS generally advocates for the creation of strong national HIV/AIDS commissions in charge of responding to the epidemic, however, fine-tuning and adapting to the specific situations in the country in question was important. Having one person/body accountable for HIV/AIDS is a minimum and a key feature that must be in place in each country

Giving another parliamentary perspective was **MEP Prof. Georgs Andrejevs (ALDE, LV)**. As rapporteur on the EP report on combating HIV/AIDS in neighbouring countries, 2006-2009, he explained that his report above all encourages debate on still-controversial issues such as stigmatisation and discrimination. It also covers issues surrounding the free movement of people, and most importantly access to medicines.



After stating his pleasure that the commission will recast a communication on HIV/AIDS, he expressed his firm belief that there is a 'huge' consensus on what the problems are and what can be done to tackle them.

The floor was then opened up for questions. **Heather Clark** from **International AIDS Vaccine Initiatives** referred to article 19 of the declaration on the need for research and development into new prevention technologies including vaccines and microbicides. Not all countries have been active in this area, and the monitoring process should highlight this.

Nikos Dedes lamented the fact that there is currently no co-ordinated EU research strategy in place. This and the fact that only 5 per cent of research of the research budget in the EU comes from the commission, makes joint EU research efforts in the field difficult. He suggested that the European Parliament reviews and increases the budget in the field of HIV/AIDS as to allow for coordinated action, in particular as the present situation possibly meant that research is being repeated in different Member States.

Martin Donoghoe agreed that in the current situation, 'no one knows who is doing what' regarding HIV/AIDS research, and that transparency regarding sources of funding was lacking. Enhanced co-ordination in this area would be extremely beneficial. He

stated that in addition to vaccine development, research into other technologies was necessary.



MEP Hiltrud Breyer (Greens/EFA, DE) wondered how much money exactly goes into specific areas of HIV/AIDS research, as in her opinion not enough is being done in certain areas, citing Chlamydia as disease that is lacking in research. This is something that the FEMM committee in the parliament had raised, in addition to research into

microbicides. She made the point that in some African countries, women are left especially vulnerable if the man refuses to wear a condom.

Denis Haveaux stated his agreement with Breyer's comments, particularly the part about Chlamydia, and later confirmed that new guidelines would be published later this year. **Martin Donoghoe** lamented the wide variation across the EU in terms of STI data collection, commenting that in Eastern Europe this is especially problematic. He confirmed the ECDC is making a conscious effort to strengthen their database. Responding to Breyer's mention of gender, he was of the opinion that in Europe gender was indeed an important factor when it came to HIV/AIDS, but claimed that it was rather men that suffered greater discrimination. Overall, the specific issues should be addressed based on evidence and epidemiologically sound reporting.

Wim Vandavelde, EATG Chair, highlighted the fact that more and more member states are experiencing increasing difficulties to provide HIV treatment and care to their citizens, due to declining health budgets in the current global economic downturn. In this context he also inquired about the progress on the ARV price-reduction pilot scheme in Estonia, Bulgaria and Romania initiated by the German EU presidency in 2007.

In a following comment, **Laura Bachelor, FIPRA**, stressed that in the forthcoming EU Communication on HIV/AIDS, monitoring was of key importance, and praised the monitoring action plan of the Dublin Declaration.

Denis Haveaux agreed that monitoring needs further strengthening. He also confirmed that the strategy for prevention in 2010 should place greater emphasis on HIV testing and also counselling, with a special focus on men who have sex with men.

Martin Donoghoe acknowledged that there are very few specific recommendations in the current WHO/UNAIDS report, but was confident that the next ECDC report will provide these. **Nikos Dedes** believed that rather than new recommendations, it was increased commitment by all parties what is really needed, and ensuring that monitoring is thorough. Regarding the role of the EU institutions, the European parliament, he stated, must be able to bring the EU Commission to account. The commission on the other hand should, above all, provide leadership, address discrimination against people living with HIV/AIDS and provide legislative solutions, i.e. via the Equality Directive.

Georgs Andrejevs and **Peter Liese** closed the debate by thanking all of the participants, pledging their personal commitment to continue working in this area and expressing the hope that the next European parliament will continue to demonstrate and moreover increase its commitment to address HIV/AIDS in Europe.