

COMMISSION OF THE EUROPEAN COMMUNITIES

Brussels, 29.11.1995
COM(95) 632 final

94/0222 (COD)

OPINION OF THE COMMISSION

pursuant to Article 189 b (2) (d) of the EC Treaty,
on the European Parliament's amendments
to the Council's common position regarding the

proposal for a
EUROPEAN PARLIAMENT AND COUNCIL DECISION

adopting a programme of Community action on the prevention of AIDS and certain other
communicable diseases within the framework for action in the field of public health
(1996-2000)

AMENDING THE PROPOSAL OF THE COMMISSION

pursuant to Article 189 a (2) of the EC Treaty

[REDACTED]

Commission opinion concerning the amendments proposed by the European Parliament to the common position adopted by the Council on 2 June 1995 with a view to adopting a European Parliament and Council Decision adopting a programme of Community action on the prevention of AIDS and certain other communicable diseases within the framework for action in the field of public health (1996-2000)

*** In accordance with Article 189b(2)(d) of the Treaty**

With the entry into force of the Treaty on European Union, the Community acquired explicit competence in public health matters. In order to achieve the health protection objectives set out in Articles 3(o) and 129 of the Treaty establishing the European Community, the Commission, in its Communication COM(93) 559 final, set out a framework for action in the field of public health.

In initiating action under Article 129, the Community has to address itself to preventing disease and protecting health. On the basis of the criteria laid down in the above Communication, AIDS and other communicable diseases were identified as a priority for Community action.

The objective data (morbidity, morbidity tables and health indicators) and more subjective factors confirm that AIDS and other communicable diseases are a major health scourge. Moreover, these are diseases for which preventive measures can be taken; this highlights the importance of pursuing Community action in this field.

This Community programme on the prevention of AIDS and certain other communicable diseases seeks to support the action taken by the Member States, to strengthen European cooperation at each stage of the prevention process - awareness of the phenomenon, identification of risk situations, counselling and guidance, social and medical aid - and to encourage cooperation between the various players involved at each stage and coordination between the various policies and programmes. The specific AIDS and communicable disease prevention activities envisaged under this programme are compatible with and complementary to other public health activities proposed under "horizontal programmes".

The Commission adopted its decision on 9 November 1994 and submitted the proposal for a Decision to Parliament and the Council on 21 November 1994¹.

The Economic and Social Committee adopted its opinion on 30 March 1995².

The ESC supports the programme and the approach proposed by the Commission in its Communication and its proposal for a Parliament and Council Decision.

The ESC underlines the modest nature of the financial and human resources envisaged compared with the ambitious scale of the programme and urges that the social partners be closely associated with the activities it covers.

The ESC also expresses the hope that the advisory committee for the programme will involve all interested parties in the consultation process.

The Committee of the Regions adopted its opinion on 21 April 1995³. It makes the same points as the Economic and Social Committee, adding that it would like to see regional representatives included in the programme's advisory committee and would like to receive the programme implementation reports.

Parliament adopted its opinion at the first reading on 27 April 1995⁴, putting forward 61 amendments to the Commission's proposal. The amendments adopted focus on the following:

- the usefulness of condoms and disposable syringes in preventing HIV/AIDS;
- the importance of education in combating discrimination against HIV patients and their families and friends;
- the need for greater transparency in access to and implementation of the programme;
- the need for greater coordination between Member States in collecting epidemiological data.

¹ OJ No C 333, 29.11.1994, p. 34.

² OJ No C 133, 31.5.1995, p. 23.

³ Opinion delivered on 21 April 1995 (not yet published in the OJ).

⁴ OJ No C 126, 22.5.1995.

In its amended proposal⁵, the Commission accepted in full or in part 33 of the 61 amendments proposed by Parliament.

On 2 June 1995⁶, the Council unanimously adopted a common position with a view to adopting this Decision adopting a programme of Community action on the prevention of AIDS and certain other communicable diseases within the framework for action in the field of public health.

The Commission was unable to support this common position and entered reservations on the following points:

- **Article 5 (Committee procedure):** the Council wished to introduce a "mixed" committee procedure for the programme, similar to that instituted for the Socrates programme and covering seven fields of activity pertaining to the Committee's "management" functions and other areas pertaining to its "advisory" functions. The Commission entered a reservation with regard to this approach, preferring a purely advisory committee, whose remit might include the seven areas of activity proposed by the Council.

The Commission therefore had a statement recorded in the minutes of the Council meeting.

- **Annex (action to be taken under the programme):** the Council accepted 30 of the amendments proposed by Parliament out of the 33 incorporated by the Commission into its amended proposal. The three parliamentary amendments which were not included in the Council's common position relate to combating discrimination (point 6 of the Commission's proposal, and the corresponding recital) and the exchange of information on certain population groups (point 4 of the Commission's proposal). In view of the importance attached by Parliament to these two aspects, the Commission was obliged to enter a reservation with regard to their non-inclusion in the Council's common position and had a statement to this effect recorded in the minutes.

On 25 October 1995, Parliament adopted eighteen amendments to the Council's common position.

The Commission's opinion on each of these eighteen amendments is shown in the annex.

⁵ OJ No C 228, 2.9.1995, p. 6.

⁶ OJ No C 216, 21.8.1995, p. 11.

The Commission wishes to point out that, under the terms of Article 189b(3) of the Treaty, if, within three months of the matter being referred to it, the Council, acting by a qualified majority, approves all the amendments of the European Parliament, it amends its common position accordingly and adopts the act in question; however, the Council must act unanimously on the amendments on which the Commission has delivered a negative opinion. If the Council does not approve the act in question, the President of the Council, in agreement with the President of the European Parliament, forthwith convenes a meeting of the Conciliation Committee.

ANNEX

Amendment n° 1: Commission's opinion: accepted.

It adds a reference to the major role played by the Community which can undertake organisation of exchanges of experience and the dissemination of information with regard to the specific training and information of all the players involved.

Amendment n° 2: Commission's opinion: accepted.

It adds a reference to the actions envisaged in the framework of Chapter VII of the White Paper on Social Policy with regard to communicable diseases.

Amendment n° 3: Commission's opinion: accepted.

The system envisaged for operating the programme in this amendment corresponds to the type of Committee proposed by the Commission (i.e. an Advisory Committee). Amendment common to the three programmes (Health promotion, Cancer, AIDS).

Amendment n° 4: Commission's opinion: accepted.

It improves the wording as regards the need to safeguard and develop actions implemented in previous action plans.

Amendment n° 5: Commission's opinion: accepted.

This amendment describes the aims of the programme and adds a reference to NGOS and sufferers' associations.

Amendment n° 6: Commission's opinion: accepted.

It simplifies the wording as regards the implementation of the programme by the Member States.

Amendment n° 7: Commission's opinion: accepted.

The wording is preferable in the amendment to that of the Common Position for reasons of clarity and of coherence between the three programmes under examination (Cancer, Health Promotion and AIDS).

Amendment n° 8: Commission's opinion: rejected.

The Commission appreciates the spirit of this amendment. However, since the Commission has entered an overall reservation concerning the comitology approach proposed in the common position, it cannot accept this amendment as it implies acceptance of the Council's position.

Amendment n° 9: Commission's opinion: rejected.

The information of the Parliament envisaged in the amendment goes beyond the spirit of the Modus Vivendi. (Health promotion, Cancer, AIDS).

Amendment n° 10: Commission's opinion: accepted.

This amendment specifies that cooperation with NGOs particularly involved in the combating and prevention of AIDS must be encouraged in the course of implementing the programme.

Amendment n° 11: Commission's opinion: rejected.

Community measures to ensure the safety of blood products fall outside the context of this programme

Amendment n° 12: Commission's opinion: accepted in part.

The Commission can accept a reference to the promotion of condoms in the text of the programme, therefore this amendment is acceptable in part.

Amendment n° 13: Commission's opinion: accepted in part.

The Commission can accept this amendment in part with a more flexible wording as follows: "... and proposal, where appropriate, for a code of good practice in this area".

Amendment n° 14: Commission's opinion: accepted in part.

The Commission can accept a reference to the promotion of condoms in the text of the programme, therefore this amendment is acceptable in part.

Amendment n° 15: Commission's opinion: rejected.

The measures envisaged in this amendment fall outside the context of this programme.

Amendment n° 16: Commission's opinion: rejected


The measures envisaged in this amendment fall outside the context of this programme.

Amendment n° 17: Commission's opinion: accepted in part.

The Commission can accept a reference to the promotion of condoms in the text of the programme, therefore this amendment is acceptable in part.

Amendment n° 18: Commission's opinion: rejected.

The measures envisaged in this amendment fall outside the context of this programme.



AMENDED PROPOSAL

**FOR A EUROPEAN PARLIAMENT AND COUNCIL DECISION
ADOPTING A PROGRAMME OF COMMUNITY ACTION
ON THE PREVENTION OF AIDS
AND CERTAIN OTHER COMMUNICABLE DISEASES
WITHIN THE FRAMEWORK FOR ACTION
IN THE FIELD OF PUBLIC HEALTH
(1996-2000)**

**(submitted by the Commission in accordance with Article 189a(2)
of the EC Treaty)**

THE EUROPEAN PARLIAMENT AND
THE COUNCIL OF THE EUROPEAN
UNION,

Having regard to the Treaty establishing
the European Community, and in
particular Article 129 thereof,

Having regard to the proposal from the
Commission¹,

Having regard to the Opinion of the
Economic and Social Committee²,

Having regard to the Opinion of the
Committee of the Regions³,

Acting in accordance with the procedure
referred to in Article 189b of the Treaty⁴,

1. Whereas the Council, in its
Resolution of 2 June 1994⁵, in
response to the Commission
communication of 24 November
1993 on a framework for
Community action in the field of
public health, included AIDS and
other communicable diseases among
the priority areas for Community
action for which the Commission
was invited to bring forward
proposals for action;

1 OJ No C 333, 29.11.1994, p. 34.

2 OJ No C 133, 31.5.1995, p. 23.

3 Opinion delivered on 21 April 1995 (not
yet published in the Official Journal).

4 Opinion of the European Parliament of 27
April 1995 (OJ No C 126, 22.5.1995),
Council common position of ... (not yet
published in the Official Journal) and
Decision of the European Parliament of ...
(not yet published in the Official Journal)

5 OJ No C 165, 17.6.1994, p. 1.



2. Whereas AIDS is at present an incurable disease regarded as a major scourge, to combat which coordinated action is required in the areas both of research and of prevention;

2a (new)

Whereas it is important to promote the utilization and proper use of condoms as a means of combating the transmission of the HIV virus and other communicable diseases;

3. Whereas AIDS is a phenomenon that poses a dilemma not only for those parts of human relationships of most intimate concern to individuals, but also for modes of collective behaviour; whereas its implications extend to law and the economy, to politics, public health, education and culture, as well as to medicine, sociology and research;
4. Whereas the plan of action adopted by Decision 91/317/EEC of the Council and the Ministers for Health of the Member States, meeting within the Council⁶, in the framework of the "Europe against AIDS" programme expired at the end of 1993;
5. Whereas the "Europe against AIDS" programme has been extended until the end of 1995 by Decision 1729/95/EC of the European Parliament and the Council of 19 June 1995⁷;

6 OJ No L 175, 4.7.1991, p. 26.

7 OJ No L 168, 18.7.1995, p. 1.

6. Whereas the Council, in its conclusions of 13 December 1993⁸ and the European Parliament in its Resolutions of 26 May 1989⁹, 15 May 1991¹⁰ and 19 November 1993¹¹ took the view that it was essential to acquire a better knowledge of diseases on the basis of their causes and their epidemiological context; whereas, accordingly, the two institutions have called on the Commission to submit proposals for the setting up of an epidemiological network in the Community;
7. Whereas the European Parliament and the Council emphasized that the smooth running of a network for gathering epidemiological data requires that the comparability and compatibility of data be ensured and that theoretical training in epidemiology and practical preparation in epidemiology in the field be developed for the teams participating in the network;
8. Whereas the European Community can make a contribution towards the organization of exchanges of experience and the dissemination of information with regard to the specific training of health professionals and the information of all the social players involved, such as teachers, families, authorities and heads of undertakings;
8. Whereas as the European Community is in a position to make a major contribution towards the organisation of exchanges of experience and the dissemination of information with regard to the specific training of health professionals and the information of all the social players involved, such as teachers, families, authorities and heads of undertakings;

8 OJ No C 15, 18.1.1994, p. 6.

9 OJ No C 158, 26.6.1989, p. 477.

10 OJ No C 158, 17.6.1991, p. 45.

11 OJ No C 329, 6.12.1992, p. 1.

9. Whereas, in their Resolution of 13 November 1992¹², the Council and the Ministers for Health meeting within the Council invited the Commission to consider the existing arrangements which provide for cooperation between Member States in the field of monitoring and control of communicable diseases;
10. Whereas the actions undertaken at Community level in the field of AIDS need to be continued, extended to cover certain other communicable diseases, in particular sexually transmissible diseases (STDs) and consolidated within the framework of the action in the field of public health set out by the Commission¹³;
10. Whereas the actions undertaken at Community level in the field of AIDS need to be continued, extended to cover certain other communicable diseases, in particular sexually transmissible diseases (STDs) and consolidated within the framework of the action in the field of public health set out by the Commission¹⁴ and in the framework of Chapter VII of the White Paper on social policy¹⁵;
11. Whereas these actions must take into account, as the Council requested in its Resolution of 27 May 1993¹⁶, other actions undertaken by the Community in the field of public health or having an impact on public health;
12. Whereas, by reason of its scale and effects, Community action in support of the prevention of AIDS and other communicable diseases enables the desired objectives to be reached more effectively;

12 OJ No C 326, 11.12.1992, p. 1.

13 COM(93) 559 final, 24.11.1993.

16 OJ No C 174, 25.6.1993, p. 1

14 COM(93) 559 final, 24.11.1993

15 COM(94) 0333, 27.7.1994.

13. Whereas policies and programmes formulated and implemented at Community level should be compatible with the targets and objectives of Community action on the prevention of AIDS and other communicable diseases; whereas, in particular, implementation of actions under the Community's biomedical and health research programme must be closely coordinated with the implementation of Community actions on prevention of these diseases;
14. Whereas it is necessary to promote studies in the Member States to identify the most effective methods of prevention and to publish the most significant results of this work;
15. Whereas cooperation with the competent international organizations and with non-member countries should be strengthened;
16. Whereas a multiannual programme is required, defining the objectives of Community action, the priority actions for the prevention of AIDS and other communicable diseases, and the appropriate evaluation mechanisms;

17. Whereas it is important that the Commission ensure implementation of the programme in close cooperation with the Member States; whereas, to that end, provision must be made for a procedure to ensure that Member States are fully involved in implementing the programme;

18. Whereas agreement on a modus vivendi between the European Parliament, the Council and the Commission concerning measures implementing acts adopted in accordance with the procedure laid down in Article 189b of the Treaty was reached on 20 December 1994;

19. Whereas, from an operational point of view, the investment made under the preceding action plans in terms of both the European pilot networks and of the mobilization of all those involved in combating AIDS and other communicable diseases should be safeguarded and developed;

17. Whereas it is important that the Commission ensure implementation of the programme in close cooperation with the Member States;

19a (new)

Whereas this programme should take account of previous or current initiatives implemented in the Member States either by the appropriate authorities or by others involved in health policy;

20. Whereas, however, possible duplication of effort should be avoided by the promotion of exchanges of experience and by the joint development of basic information modules for the general public, for health education and for training members of the health professions, which may be targeted on specific groups and on non-governmental organizations, including patients' associations;
21. Whereas the objective of this programme must be to contribute towards stemming the spread of AIDS and other communicable diseases in the Community by improving knowledge concerning their prevalence and patterns, improving recognition of risk situations and practices and improving early detection and social, health and medical support, with a view to preventing the transmission of AIDS and other communicable diseases and thus reducing the associated mortality and morbidity as well as combating all forms of discrimination against people suffering from AIDS or infected with the HIV virus;
22. Whereas in order to increase the value and impact of this programme a continuous assessment of the measures undertaken should be carried out, with particular reference to their effectiveness and the achievement of objectives at both national and Community level, and the necessary adjustments should be made where appropriate;

23. Whereas the objectives of this programme and of the measures undertaken to implement it form part of the health protection requirements referred to in the third paragraph of Article 129(1) of the Treaty establishing the European Community and as such form a constituent part of the Community's other policies;
24. Whereas access to this programme should be facilitated, with especial stress on reaching organizations which lack means of easy access to information on Community programmes;
25. Whereas the procedures for granting financial aid should be simple and accessible, and there should be guarantees of total transparency of these procedures and the relevant controls;
26. Whereas this Decision lays down, for the entire duration of the programme, a financial framework constituting the principal point of reference, within the meaning of point 1 of the Declaration of the European Parliament, the Council and Commission of 6 March 1995, for the budgetary authority during the annual budgetary procedure;
27. Whereas this programme should be of five-year duration in order to allow sufficient time for actions to be implemented to achieve the objectives set,

HAVE DECIDED AS FOLLOWS:

Article 1

Establishment of the programme

1. A programme of Community action on the prevention of AIDS and certain other communicable diseases, hereinafter referred to as "this programme", is hereby adopted for the period 1 January 1996 to 31 December 2000 within the framework for action in the field of public health.
2. The aim of this programme is to help in reducing mortality and morbidity due to communicable diseases and reducing the risk of infection by the AIDS virus or other infectious agents, by encouraging cooperation between Member States, supporting their operations and promoting coordination between their prevention policies and programmes.
2. The aim of this programme is to help contain the spread of AIDS and reduce mortality and morbidity due to communicable diseases by encouraging cooperation between Member States, promoting coordination between prevention policies and programmes and supporting the activities of non-governmental organisations, including sufferers' associations.
3. The actions to be implemented under this programme and their specific objectives are set out in the Annex under the following headings:
 - A. Surveillance and monitoring of communicable diseases
 - B. Combating transmission
 - C. Information, education and training
 - D. Support for persons with HIV/AIDS and combating discrimination.

Article 2

Implementation

1. The Commission shall ensure the implementation, in close cooperation with the Member States, of the actions set out in the Annex in accordance with Article 5.
2. The Commission shall cooperate with institutions and organizations active in preventing AIDS and other communicable diseases.
3. Member States are called upon to take the measures they judge necessary to coordinate and organize the implementation of this programme at national level.
3. Member States are called upon to take the necessary measures to implement this programme.

Article 3

Budget

1. The total appropriation for implementation of this programme for the period referred to in Article 1 shall be ECU 49,6 million.
2. The annual appropriations shall be authorized by the budget authority within the limits of the financial perspective.

Article 4

Consistency and complementarity

The Commission and the Member States shall ensure that there is consistency and complementarity between actions to be implemented under this programme and other relevant Community programmes and initiatives, including the biomedical and health research programme under the Community's framework programme for research and Community action in developing countries.

The Commission shall ensure that there is consistency and complementarity between actions to be implemented under this programme and the other relevant Community programmes and initiatives, including the biomedical and health research programme under the Community's framework programme for research and Community action in developing countries.

Article 5

Committee

1. The Commission shall be assisted by a Committee hereinafter referred to as "the Committee" consisting of two members designated by each Member State and chaired by a representative of the Commission.
2. The representative of the Commission shall submit to the Committee draft measures concerning:
 - (a) the Committee's rules of procedure;
 - (b) an annual work programme indicating the priorities for action;
 - (c) the arrangements, criteria and procedures for selecting and financing projects under this programme, including those involving cooperation with international organizations competent in the field of public health and participation of the countries referred to in Article 6(2);

Article 5

Committee

- (1)
- (1) The Commission maintains its reservation concerning this Article.

- (d) the evaluation procedure;
- (e) the arrangements for dissemination and transfer of results;
- (f) the arrangements for cooperating with the institutions and organizations referred to in Article 2(2).

The Committee shall deliver its opinion on the draft measures referred to above within a time limit which the Chairman may lay down according to the urgency of the matter. The opinion shall be delivered by the majority laid down in Article 148(2) of the Treaty in the case of decisions which the Council is required to adopt on a proposal from the Commission. The votes of the representatives of the Member States within the Committee shall be weighted in the manner set out in that Article. The Chairman shall not vote.

The Commission shall adopt measures which shall apply immediately. However, if these measures are not in accordance with the opinion of the Committee, they shall forthwith be communicated by the Commission to the Council. In that event, the Commission shall defer application of the measures which it has decided upon for a period of two months from the date of such communication.

The Council, acting by a qualified majority, may take a different decision within the time limit referred to in the preceding subparagraph.

3. In addition, the Commission may consult the Committee on any other matter concerning the implementation of this programme.

The representative of the Commission shall submit to the Committee a draft of the measures to be taken. The Committee shall deliver its opinion on the draft within a time limit which the Chairman may lay down according to the urgency of the matter, if necessary by taking a vote.

The opinion shall be recorded in the minutes; in addition, each Member State shall have the right to ask to have its opinion recorded in the minutes.

The Commission shall take the utmost account of the opinion delivered by the Committee. It shall inform the Committee of the manner in which its opinion has been taken into account.

4. The representative of the Commission shall keep the Committee regularly informed about:

- financial assistance granted under this programme (amounts, duration, breakdown and beneficiaries);
- Commission proposals or Community initiatives and the implementation of programmes in other policy areas which are of direct relevance to achievement of the objectives of this programme, with a view to ensuring the consistency and complementarity required under Article 4.

Article 6

International cooperation

1. In the course of implementing this programme, cooperation with non-member countries and with international organizations competent in the field of public health, in particular the United Nations, the World Health Organization and the Council of Europe, shall be encouraged and implemented in accordance with the procedure laid down in Article 5.
 2. This programme shall be open to participation by the associated countries of Central and Eastern Europe (ACCEE), in accordance with the conditions laid down in the Additional Protocols to the Association Agreements relating to participation in Community programmes, to be concluded with those countries. This programme shall be open to participation by Cyprus and Malta on the basis of additional appropriations in accordance with the same rules as those applied to the EFTA countries, in accordance with procedures to be agreed with those countries.
1. In the course of implementing this programme, cooperation with non-member countries, with international organizations, in particular the United Nations, the World Health Organization and the Council of Europe, and with non-governmental organisations competent in the field of public health or particularly involved in the fight against AIDS and certain other communicable diseases and the prevent thereof, will be encouraged and implemented in accordance with the procedure laid down in Article 5.

Article 7

Monitoring and evaluation

1. The Commission, taking into account the reports drawn up by the Member States and with the participation, where necessary, of independent experts, shall ensure that an evaluation is made of the actions undertaken.
2. The Commission shall submit to the European Parliament and the Council an interim report halfway through this programme and a final report on completion of this programme. It shall incorporate into these reports the results of the evaluations. It shall also send the reports to the Economic and Social Committee and the Committee of the Regions.

ANNEX

PROGRAMME OF COMMUNITY ACTION ON THE PREVENTION OF AIDS AND CERTAIN OTHER COMMUNICABLE DISEASES (1996-2000)

A. SURVEILLANCE AND MON- ITORING OF COMMUNICABLE DISEASES

Objective

To help to improve knowledge and dissemination of information and data concerning HIV/AIDS and other communicable diseases, taking into account international disease-classification provisions, and to improve the coordination of systems for monitoring these diseases and coordinating Community-level responses, particularly in the event of an epidemic outbreak.

Actions

1. Exploration with Member States of ways to increase the amount and improve the quality, comparability and availability of data and provide support for strengthening national or regional monitoring systems and implementing them as part of a network and, in the case of HIV/AIDS and connected diseases, support for the European Centre for the Epidemiological Monitoring of AIDS.
2. Contribution towards improving the quality and coordination of Member States' epidemiological monitoring systems and participation in the development of surveillance networks on the basis of the jointly-defined methodologies and conditions for data transmission, prior consultation and coordination of replies.

3. Setting up of a Community network of public health epidemiologists for the purpose of defining common surveillance methods and tools and enhancing the ability to respond in a coordinated way to the development of communicable diseases, especially in the case of epidemic outbreaks.

4. Contributing, in particular by the provision of the logistical support necessary, to the production and dissemination of a regular information notice and of a Community bulletin on communicable diseases surveillance, comprising both routine surveillance data and reports on specific epidemiological investigations.

5. Encouraging action aimed at increasing awareness of the problems and including comparable and reliable data on nosocomial infections particularly in routine surveys of hospital conditions; promoting knowledge and exchanges of experience on the ways in which surveillance results for infections caused by germs resistant to normal treatment (antibiotics) are analysed, processed and used by the actors in the field.

6. Promotion of investigations of the effectiveness and feasibility of screening for certain types of communicable diseases (tuberculosis, hepatitis, etc.), in particular among pregnant women. Coordination of research to minimize transmission of diseases from mother to child.

B. COMBATING TRANSMISSION

Objectives

To assist efforts to prevent the transmission of HIV and other sexually transmitted diseases (STDs), particularly as regards risk environments and behaviour and ensure optimum vaccination cover in the Community for certain communicable diseases.

Actions

7. Examination of and exchanges of information on the problems and situations of persons engaging in risk behaviour (parenteral drug use, prostitution and at-risk sexual relations, etc.), or placed in particular situations (travel, penal institutions, etc.) and modes of transmission; exchange of experience on preventive action and risk-reduction measures; promotion of appropriate preventive measures and of pilot projects.

8. Exchange of views and experience on information, advice and counselling for women who are pregnant or wanting to have children and who may be at risk of transmitting HIV to their babies.

7. Coordination of studies and information on the problems and situations of persons whose behaviour places them at risk (parenteral drug use, prostitution, at-risk sexual relations, etc.), or who are placed in particular situations (travel, penal institutions, etc.), and on modes of transmission; exchange of experience on preventive action and risk-reduction measures; promotion of appropriate preventive measures and of pilot projects, in particular promotion of the use of good-quality condoms with instructions for use.

9. Exchanges of information on messages and promotion of appropriate measures for the dissemination of effective messages aimed at the general public and at target groups, notably through campaigns to inform, educate and raise awareness concerning means of protection against the risk of sexual transmission of diseases, the problems they raise and their use.

10. Promotion of cooperation and of exchange of information between Member States on their vaccination policies and programmes as well as their arrangements for implementing them and their results among the general population and especially among children, groups exposed to risk and persons living in certain risk situations. Promotion of exchange of experience and information as regards determining vaccination cover, vigilance concerning vaccines and encouragement of measures and initiatives to ensure optimum vaccination cover.

C. INFORMATION, EDUCATION AND TRAINING

Objective

To help to increase awareness and improve public information and education and provide, including with regard to the early detection of communicable diseases, better training for health professionals and relevant personnel.

Actions

11. Evaluation of the impact of information campaigns on communicable diseases and their prevention; encouragement of exchanges between Member States on information campaigns at all levels; development of ways of linking and reinforcing campaigns in the Member States, such as provision of specific materials; utilization of telephone and other response mechanisms, and development and promotion of activities to complement national efforts, including the setting-up or strengthening of networks and the exchange of experience and expertise.

12. Gathering, analysis and promotion of the dissemination of information concerning preventive measures; promotion of the development and use of assessment methods to determine the effectiveness of preventive measures and information campaigns aimed at the general public and target groups.

13. Encouragement of initiatives to ascertain and disseminate existing information about the knowledge, attitudes and behaviour of the general public and certain target groups, particularly children and young people, regarding HIV/AIDS and other STDs and about the preventive measures taken in the European Community; examination and evaluation of current practice in providing information both within and outside formal structures such as schools, training institutions and sports clubs, promotion of the exchange of educational and training material and methods, and support for pilot projects, especially those centred on groups of young people without any specific organizational framework or formal educational structure; development of training suited to every stage of the individual's development and exchange of educational material for this purpose.

Carrying out new Eurobarometer surveys on trends in knowledge and behaviour with regard to HIV/AIDS, where existing information is inadequate.

13a (new)

The promotion of information campaigns on the utilisation and the proper use of condoms as a means of combating transmission of the HIV virus and certain other communicable diseases.

14. Encouragement of initiatives relating to messages intended to inform and educate migrants in the countries of the Member States, taking particular account of cultural and linguistic differences.

15. Surveys and exchange of experience on training given to health professionals and those who, through their work, are brought into contact with certain communicable diseases or can act to prevent them, including workers responsible for social support and counselling for HIV-infected persons and those living with them, in order to identify weaknesses and gaps in them and to help in devising and promoting new further training programmes; promotion of exchanges among the health professionals involved, where such action is not covered by existing Community programmes.

16. Support for the training of health personnel, in particular in the context of epidemiology and early detection of and screening for communicable diseases, including personal advice at the time of screening.

D. SUPPORT FOR PERSONS WITH HIV/AIDS AND COMBATING DISCRIMINATION

Objective

To assist efforts to ensure that persons living with HIV/AIDS receive assistance in line with their needs and are not discriminated against in any way.

Actions

17. Exchanges of experience and information concerning modes of assistance and support for those testing seropositive, those infected with AIDS and persons living with them. Promotion of studies, pilot projects and actions on the psycho-social aspects of HIV/AIDS.

18. Production and dissemination of information bulletins and directories giving the latest information on organizations providing information and support; encouragement of networks of associations providing information and psycho-social support.

19. Examination of actual or potential discriminatory situations in the Member States. Exchange of information on measures taken in the Member States to avoid or combat discrimination, particularly as regards employment, insurance, credit, housing, education and health care. Exchange of information and experience on HIV-testing policies and practices.

19. Examination of actual or potential discriminatory situations in the Member States. Exchange of information on measures taken in the Member States to avoid or combat discrimination, particularly as regards employment, insurance, credit, housing, education and healthcare. Exchange of information and experience on HIV testing policies and where appropriate, proposal of a code of good practice in this field.