

AFRICAN UNION
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**SPECIAL SUMMIT OF AFRICAN UNION
ON HIV/AIDS, TUBERCULOSIS
AND MALARIA (ATM)
2-4 MAY, 2006
ABUJA, NIGERIA**

**Sp/Assembly/ATM/4 (I)
Rev.2**

Theme:

***Universal Access to HIV/AIDS, Tuberculosis and Malaria
Services by a United Africa by 2010***

**DECISION OF AU HEADS OF STATE AND GOVERNMENT OF THE AFRICAN
UNION TO THE WORLD HEALTH ASSEMBLY, GENEVA, SWITZERLAND, 22 - 27
MAY 2006**

RESOLUTION OF AU HEADS OF STATE AND GOVERNMENT OF THE AFRICAN UNION TO THE WORLD HEALTH ASSEMBLY, GENEVA, SWITZERLAND, 22 – 27 MAY 2006

1. We the African Heads of State and Government of the African Union, assembled at the Special Summit on HIV/AIDS, Tuberculosis and Malaria at Abuja, Nigeria, on 4 May 2006, around the theme “*Universal Access to HIV/AIDS, Tuberculosis and Malaria Services by a United Africa by 2010*”;
2. **Gravely concerned** about the impact of HIV/AIDS, Tuberculosis and Malaria and other infectious diseases as well as poverty on the African populations. It was in this regard that we gathered at Abuja to review the achievements towards implementation of our Abuja Declaration on Roll Back Malaria (2000) and on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases; share best practices, identify the related challenges and more effective ways and means to fight against disease and poverty in Africa.
3. **Recalling with satisfaction** the global concern for the state of the world population and the acknowledgement that good health is fundamental to socio-economic development; as expressed through the Millennium Development Goals (MDGs), the recommendations of the WHO Commission on Macroeconomics and Health, other important commitments and initiatives;
4. **Commending** the sustained efforts of the World Health Assembly to promote health the world over, particularly in Africa which bears the heaviest burden of diseases;
5. **Conscious** that poor health is compounded by other factors such as poverty, inadequate nutrition, environmental factors, gender inequalities, internal and external migration due to conflicts and other factors;
6. **Conscious also** that prevention is the cornerstone of health promotion. It is in this regard that we strongly welcome the Resolution of the WHO Regional Committee for Africa, declaring “*2006 the Year for HIV Prevention in Africa*” and “*Tuberculosis as an emergency in Africa*”; and continue to mobilize society as a whole;
7. **Further aware** that efforts taken to promote good health entail good infrastructure, sustained financing and access to support of affordable medicines and other commodities, and human resources for health.
8. **In this regard**, we welcome the amendment introduced by the WTO Members on the provisions of TRIPs which allow countries that do not have the capacity to produce generic medicines to import them, in a permanent way from countries that produce them under compulsory licensing..

9. **Recognizing** that success in our endeavours lies in promoting policies and programmes based on an integrated, decentralized and multi-sectoral approach which reaches all communities, as well as promote well-coordinated local, regional and international partnerships.
10. We adopted, among others,
- The Abuja Call for Accelerated Action Towards Universal Access to HIV/AIDS, Tuberculosis and Malaria Services by 2010; and
 - The African Common Position to the UN General Assembly Special Session on AIDS, due to be held in New York, June 2006.
11. Reaffirm our previous commitments towards promotion of the health of our populations; and resolve to accelerate action to promote universal access to health services for the achievement of the MDGs. In this regard, we undertake to work in partnership with the Civil Society, private sector and development partners to address the following challenges and priorities:
- (i) Strengthen health systems, including development of human resources for health, among others;
 - (ii) Reduce poverty, ensure safe water and sanitation, good nutrition and food security;
 - (iii) Promote access to medicines and health commodities through the strengthening or promotion of local and regional production of generics and increased use of traditional medicine;
 - (iv) Ensure sustainable financing through local and international resources mobilization. In this regard, we welcome the initiatives of the G8 Leaders. We urge the G8 to enhance the new aid support modality as we have started to experience reduction of allocation of resources to the health sector.
 - (v) Urge the international community to support the Global Fund to fight AIDS, TB and Malaria which should simplify its methods of operation; and commit ourselves to ensure that the resources are utilized rationally;
 - (vi) In line with the recommendations of the Global Task Team (GTT) on Improving Coordination among multilateral Institutions and International Donors, we will ensure that international support and collaboration is streamlined, simplified, harmonized and better coordinated;

- (vii) Ensure that health services reach all communities, particularly the most vulnerable and those at highest risk of major causes of morbidity and mortality;
 - (viii) Lay emphasis on prevention particularly among population groups at risk, through education, information and communication; while at the same time ensuring availability of required commodities;
 - (ix) Continue to share best practices and experiences from each of our countries' experiences.
12. Request therefore WHO to continue assisting Africa in the fight against malaria by mobilizing the necessary financial resources.
 13. Commend the World Health Assembly in supporting AU Member States and urge its 59th session to support the outcomes of this Special Summit.

4 May 2006, Abuja, Nigeria