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Dear Sirs,

Thank you for your letter about EU action on HIV, hepatitis, and tuberculosis. I share the concerns expressed in this letter about the necessity to improve access to health and social care for marginalised or vulnerable people for the achievement of the Sustainable Development Goal 3.3 to end the epidemics of AIDS, tuberculosis, viral hepatitis and other communicable diseases by 2030, as well as goal 3.8 to achieve universal health coverage (UHC).

All EU Member States have subscribed to meeting the Sustainable Development Goals and their targets. The political commitment at EU level to support Member States in their fight against HIV/AIDS, hepatitis and Tuberculosis was reaffirmed with the adoption of the Commission Communication on next steps for a sustainable European future, adopted on 22 November 2016.

The Commission will contribute to these efforts by:

- Supporting Member States in their national efforts recognising the need to work across sectors through different funding instruments at EU level,
- Working with Member States and the Civil Society Forum to identify concrete measures to implement and meet the relevant targets of the SDGs, in particular "by 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis" (SDG 3.3) and ensure "universal health coverage, including financial risk protection, access to quality essential health-care services" (SDG 3.8),
- Identifying a common integrated and systematic monitoring system to monitor the progress of SDG implementation at EU level with the European Centre for Disease Prevention and Control and other relevant partners,



- Continuing assistance to non-EU countries through the Enlargement and EU Neighbourhood policy processes to align with the EU response to communicable diseases.

A Commission report (staff working document) is currently being drafted and will take stock of EU action against HIV/AIDS, viral hepatitis B and C and tuberculosis. It will present the activities undertaken to implement the Commission communications on combatting HIV/AIDS within the European Union and in the neighbouring countries (2005 and 2009) and the accompanying action plans.

It is clear that, in addition to all our work on prevention, access to testing and care, we need to intensify efforts to reach out to people in need and address social inequalities and social determinants. Health instruments must be combined with social instruments and efforts should be transversal across health, social and educational policies. Only a broad approach across society and government leads to success, this includes a stronger push to overcome stigma and discrimination of risk groups and to break down the barriers to prevention, testing and timely treatment. There are many examples where this works very well. What is important now is for us, together with Member States, to act and deliver real results on the ground.

I am very pleased that the Commission's co-funded project: *Joint Action INTEGRATE*, launched on 20 September 2017 harnesses the efforts of 29 partners from 15 EU Member States plus Serbia and 21 collaborating partners to integrate prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and sexually transmitted infections in Europe. I hope that this will result in scaling up prevention and testing programmes, reaching out to people at increased risk of HIV, sexually transmitted infections and hepatitis C infections, including: LGTBI, homeless, migrants, people who inject drugs, sex workers and prisoners.

Finally, I encourage those of you who are also members of the Commission's Civil Society Forum on HIV/AIDS, viral hepatitis and tuberculosis to also engage actively in the meetings of the Think Tank on HIV/AIDS, viral hepatitis and tuberculosis. The Think Tank has Member States represented and you can use this opportunity to ensure that the priorities identified in your letter to provide universal health coverage and genuine equity of access are also addressed to Member States

Yours sincerely,

