



Half of DG Development staff to be moved to EEAS

Following majority approval by the European Parliament at the last plenary session in Strasbourg before the summer break, the final preparations for establishing the European External Action Service (EEAS) are underway. The latest plans envisage the Commission's Directorate General for Development being divided, with around half of its 300 staff being subsumed into the EEAS.

DG Development's departments for governance and thematic issues are to be divided, and geographical desks will be entirely incorporated into the EEAS. DG Development will retain expert staff responsible for the substance of development policy and cross-cutting issues such as education and good governance.

An article in *New Europe* suggested that these changes "would leave a rump DG Development, which would probably be restructured along with Aidco". However, Development Commissioner Andris Piebalgs stated: "I do not believe there will be a big revolution in-house... At this stage, there is no merger."

In *European Voice's* special report on EU development policy last week, Tobey Vogel elaborated: "The EEAS will help prepare overall aid allocations and strategies for individual countries, but responsibility will be in the hands of the development commissioner, whose role vis-à-vis the EEAS was amplified as a result of negotiations between Ashton and the European Parliament last month. To take effect, strategic policy and programming decisions will require the endorsement of the college of commissioners".

Vogel quotes a diplomat's opinion that the separation of the thematic experts from the country desks is the greatest threat to maintaining a poverty-focused development policy. "If the thematic experts remain at the [Commission's] directorate-general for development and the EEAS is responsible for strategic programming, then who will ensure that the thematic issues are properly reflected?" said the diplomat.

Sources:

- [New Europe](#)
- [European Voice](#)

Ashton should be more outspoken on human rights, says MEP

Heidi Hautala, the Finnish Green MEP who is chair of the European Parliament's sub-committee on human rights, has publicly urged EU foreign policy chief Catherine Ashton to be more outspoken in criticising countries that have poor records on human rights. Ms. Hautala said she believed that Baroness Ashton's discreet approach was not appropriate for the EU's stance towards human rights abuses in China, Russia, Israel and the Palestinian territories, and undermined the bloc's aspiration to project a strong voice on the world stage.

"We have to be very vocal on these things at the moment," Ms. Hautala said. "I have to some extent disputed her first statements that she believes in quiet diplomacy."

Ms. Hautala claimed that the human-rights "dialogues" on fundamental rights which the EU conducts with over 40 countries were making no progress, and argued that, in dealing with major powers such as Russia or China, "vocal public statements can mean more".

The MEP also called for more parliamentary access to confidential documents on human rights abuses in non-EU countries.

"The game is quite dirty sometimes and we need to know which countries are playing for human rights and which are playing against," she said.

Source:

- [European Voice](#)

New WHO code aims to curb health worker “brain drain”

The United Nations World Health Organization (WHO) has developed a global code of practice which aims to halt the damage done to developing country health systems by the emigration of vital healthcare workers. The Global Code of Practice on the International Recruitment of Health Personnel is intended to achieve “an equitable balance of the interests of health workers, source countries and destination countries”.

The WHO acknowledges that migration of healthcare workers has positive benefits for the home countries as well as filling the demand in wealthier host countries. The organisation states: “On the positive side, migration generates billions of dollars in remittances (the money sent back to home countries by migrants) to low-income countries and has been associated with a decline in poverty. Health workers also may return and bring significant skills and expertise back to their home countries.”

However, the “brain drain” effect can do great harm to developing countries’ often fragile healthcare systems. In some low-income countries, notes the WHO, over 50 per cent of highly trained health workers emigrate, leaving devastating staff shortages in the health service.

The new code of practice makes a series of recommendations for both the source and destination countries of health worker migrants. For the source countries it recommends stronger protection and fairer treatment of health workers, improved domestic training of health workers and the development of policies that facilitate the return of migrants. For the destination countries, it recommends the adoption of policies to reduce dependency on migrant health workers, such as educating and training more health workers domestically.

Read the Global Code of Practice in full at: [WHO](#)

Source:

- [IDN-InDepthNews](#)

HIV-related mortality could be reduced by 20% between 2010 and 2015

According to the World Health Organisation (WHO), 5.2 million people worldwide are now receiving life saving treatment for HIV, compared to 4 million at the start of 2008. It is estimated that HIV-related mortality could be reduced by 20% between 2010 and 2015 if the WHO's guidelines on early treatment are widely adopted.

"This is the largest increase in people accessing treatment in a single year. It is an extremely encouraging development," says Dr Hiroki Nakatani, WHO Assistant Director-General for HIV, Tuberculosis, Malaria and Neglected Tropical Diseases.

"Starting treatment earlier gives us an opportunity to enable people living with HIV to stay healthier and live longer," says Dr Gottfried Hirnschall, WHO Director of HIV/AIDS. "In addition to saving lives, earlier treatment also has prevention benefits," he adds. "Because treatment reduces the level of virus in the body, it means HIV-positive people are less likely to pass the virus on to their partners."

At the 18th International AIDS conference in Vienna last week, scientists and advocacy groups echoed the WHO's call for early treatment for people with HIV. An important focus of the conference was the sharing of research on the development of an anti-HIV vaccine, which would be a major scientific breakthrough. Experts are optimistic that greater cooperation and pooling of resources by scientists around the globe will bring that discovery closer, but there remains widespread concern about insufficient funding for the research and treatment efforts needed.

Sources:

- [WHO](#)
- [IPS - Inter Press Service](#)

Intellectual property rights prevent poor from accessing medicines

Participants at a symposium on access to medicines in Geneva on 16 July, jointly hosted by the World Health Organisation (WHO), the World Trade Organization (WTO) and the World Intellectual Property Organisation (WIPO), discussed the controversial issue of intellectual property rights and access to medicines. The enforcement of these rights has kept the prices of some medicines too high for the world's poor, said participants.

WTO Director General Margaret Chan commented: "The price has a decisive impact on access to medicines, together with the remoteness of services, lack of staff, poor procurement practices and delivery systems and the absence of health insurance schemes. But price can be an absolute barrier for the poor."

"Up to 90 percent of the population in developing countries purchase medicines through out-of-pocket payment — it is their second highest expenditure after food", she added.

While some mechanisms have been put in place to allow developing countries to circumvent intellectual property rights in the interests of public health, for example the amendment to the TRIPS agreement which permitted countries to issue "compulsory licences" for the production of generics without the patent owner's consent, developing countries have often felt pressured into avoiding making use of them.

As Ms. Chan notes, "The debates are often clouded by the suspicion that medicines are being treated just like any other commodity, despite their health-promoting and life-saving roles."

Source:

- [IPS - Inter Press Service](#)