
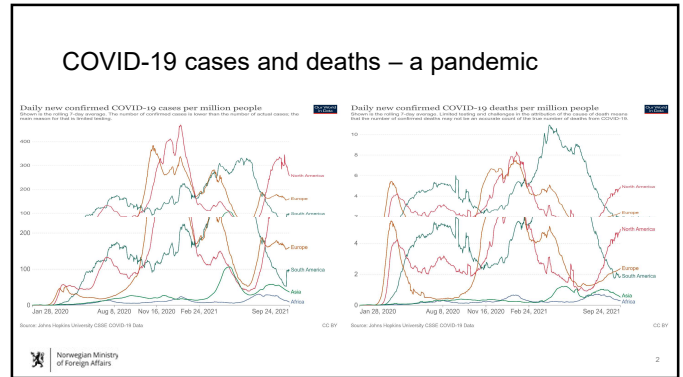


Norwegian Ministry of Foreign Affairs

The global response to antimicrobial resistance Lessons learned from Covid19

John-Arne Rottingen, Ambassador for Global Health

The global response to antimicrobial resistance, in the context of COVID-19
WMA scientific session 2021
8.10.21

COVID-19 has a devastating impact on the world

- >230 million** Reported cases
WHO, Sep 8, 2021
- >4.7 million** Reported deaths
WHO, Sep 8, 2021
- >9 trillion** Cum. US\$ loss on global output by '25
IMF, October 2020

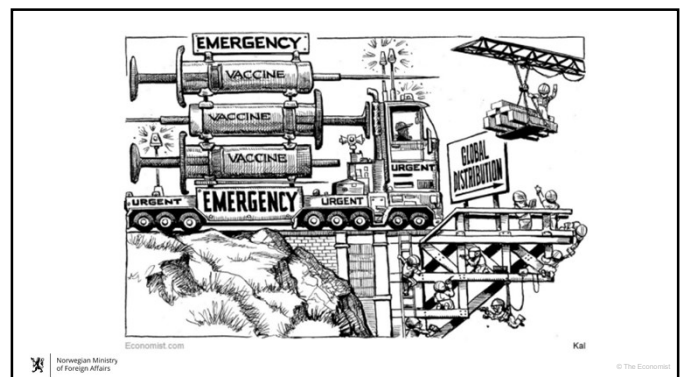
ACT-A was created to save lives and the economy

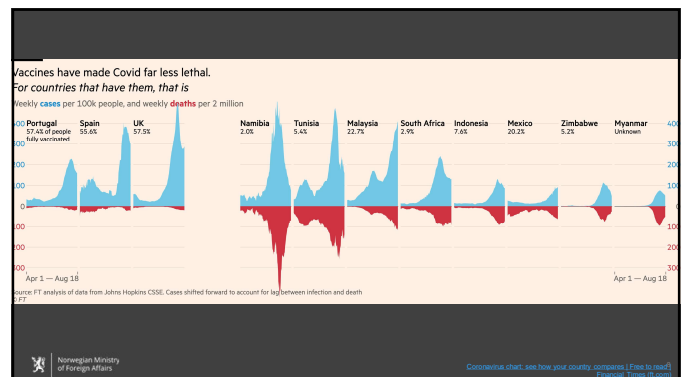
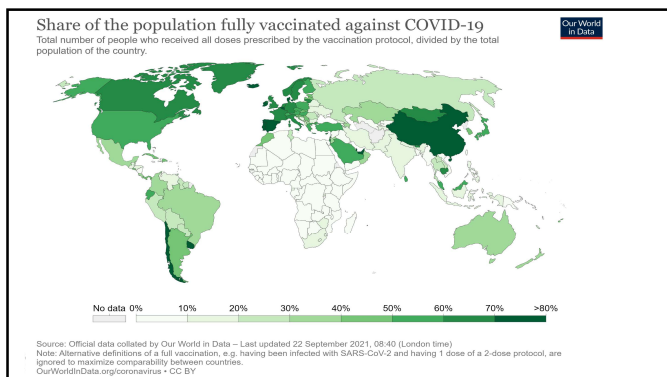
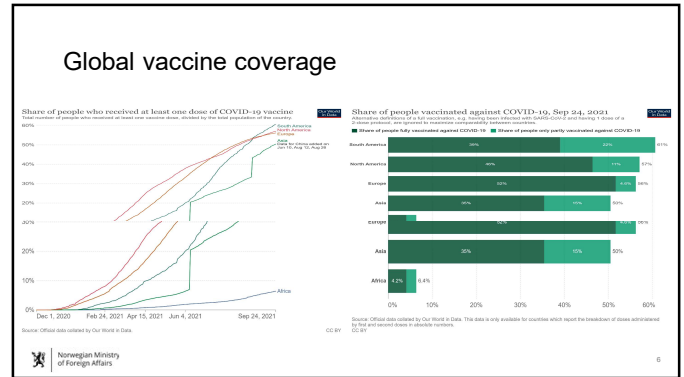
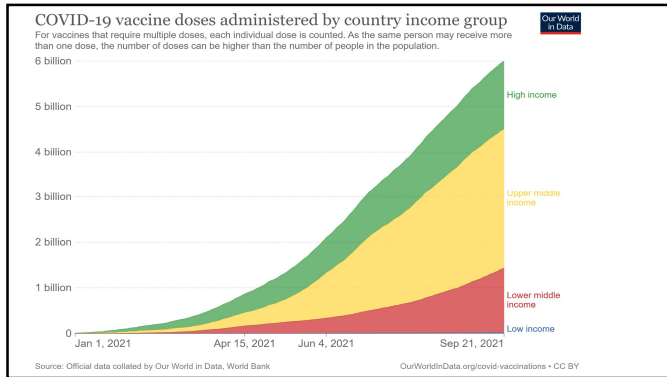
World Health Organization, Unitaid, WFP, UNICEF, CEPI, Gavi, The Global Fund, Bill & Melinda Gates Foundation

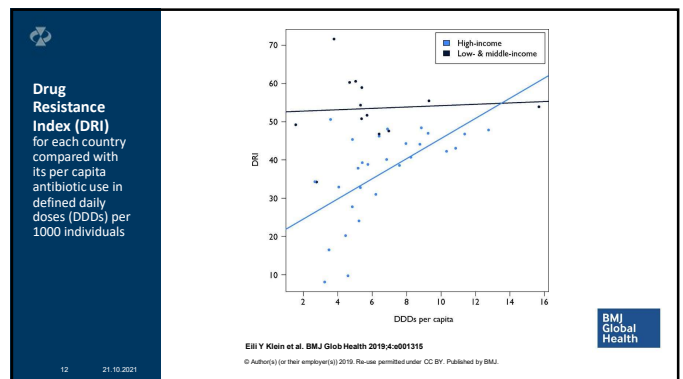
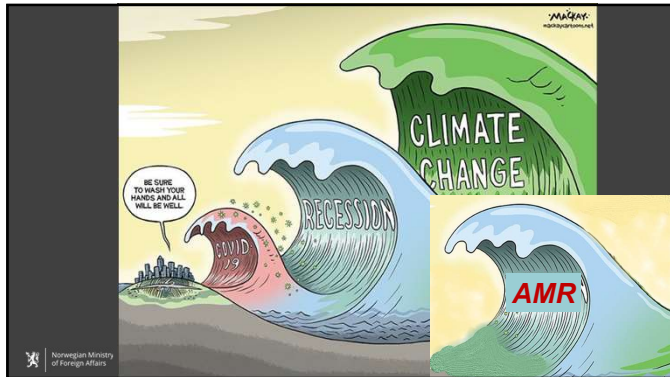
Working with Governments, Industry, CSO & development system for impact

ACT-Accelerator's core focus:

- accelerate development of tests, treatments & vaccines
- ensure equitable access globally









Orphanage in Bamako, Mali
ESBL colonized 100% of the children and 63% of the adult staff studied.

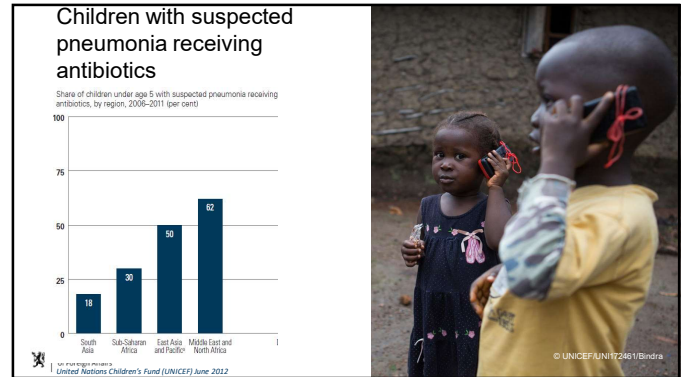
Tombé et al. Emerg Infect Dis. 2009 Mar;15(3):472-4.



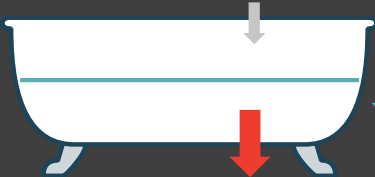
Mumhilibili hospital, Tanzania
The paediatric mortality rate from Gram-negative infections were more than 40 %. Antibiotic resistance were a significant risk factor for a fatal outcome

Blumberg et al. BMC Infect Dis. 2007 May 22;7:43.

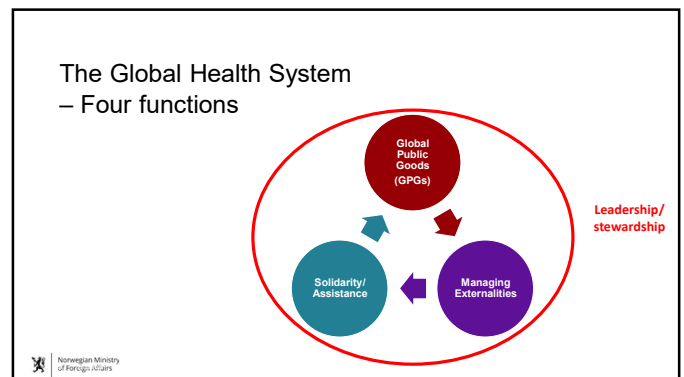
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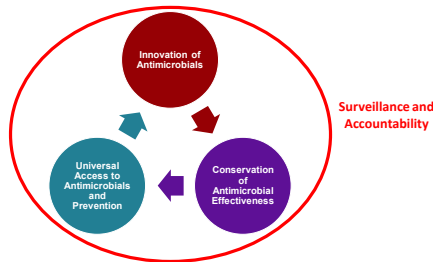
Sustainable effectiveness of antibiotics - a «bath tub problem» – a common pool resource



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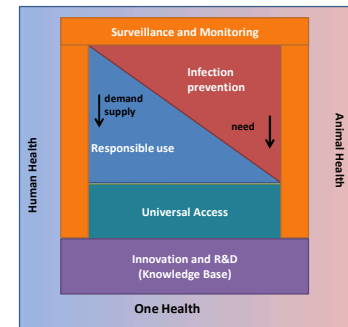


AMR – Interconnectedness of policies



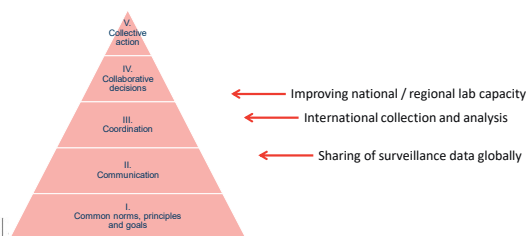
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Policy framework for Sustainable Access to Effective Antimicrobials



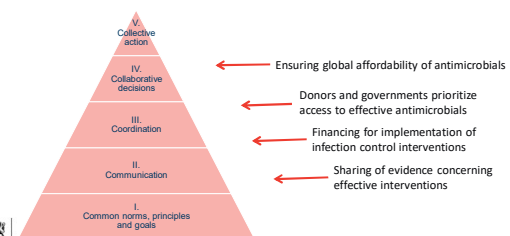
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Surveillance Policies Requiring International Collaboration



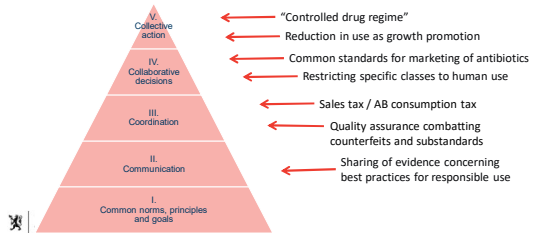
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Infection Control and Access Policies Requiring International Collaboration

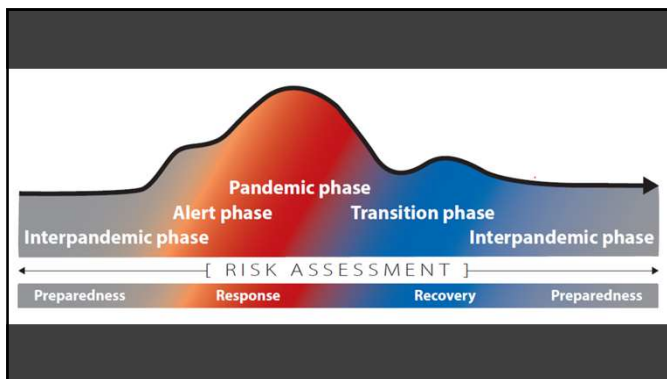
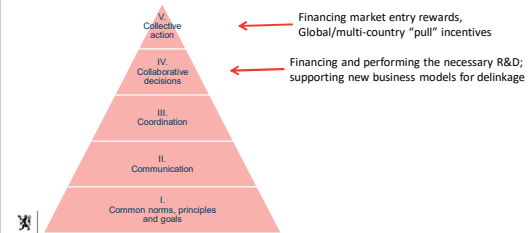


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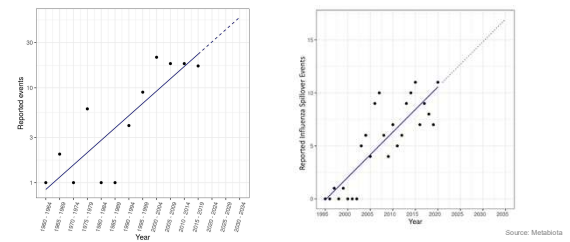
Responsible Use Policies Requiring International Collaboration

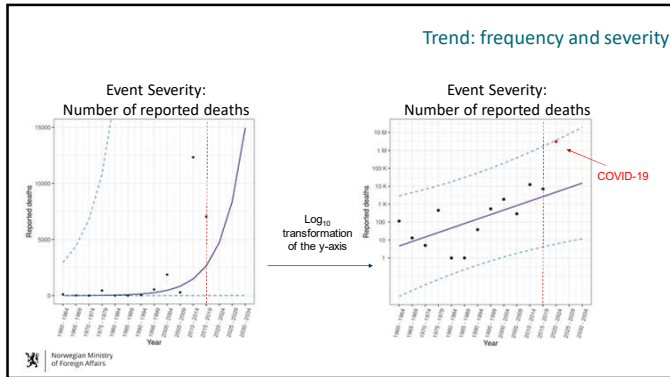


Innovation Policies Requiring International Collaboration



Increasing Frequency of Epidemics caused by Wildlife Zoonoses (excluding Influenza) and Reported Influenza Spillover Events (log-normal scale)





Post Covid-19 reforms: Global governance for health

- Global Health Threats Council/Board
- Global Health Threats Fund/Financing Facility
- Pandemic Preparedness Partnership & Pandemic Radar (G7)
- ACT-A 2.0 – platform for medical countermeasures
- Strengthening the International Health Regulations
- Pandemic treaty – Framework convention



Norwegian Ministry of Foreign Affairs

Plugging Four Major Global Gaps
Recommendations of the G20 HLIP on Financing the Global Commons for PPR

- 1 Globally networked surveillance and research: to prevent and detect emerging infectious diseases
- 2 Resilient national systems: to strengthen a critical foundation for global pandemic preparedness and response
- 3 Supply of medical countermeasures and tools: to radically shorten the response time to a pandemic and deliver equitable global access
- 4 Global governance: to ensure the system is tightly coordinated, properly funded and with clear accountability for outcomes

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Global health security – Pandemic Preparedness and Antimicrobial Effectiveness - as Global Public Goods



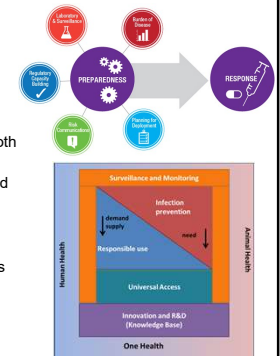
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Five types of Global Public Goods

- Dependent on total **aggregate efforts**
 - Efforts to reduce unnecessary use of antimicrobials in human and animal health sectors
 - Prevention efforts within environment and food safety to reduce zoonotic spillovers and prevention efforts to control infections
- Dependent on the **weakest link**
 - Surveillance and alert systems to detect emerging pathogens and infectious outbreaks – as well as evolution of antimicrobial resistance
- Dependent on **coordination**
 - Common norms, standards and interoperable systems to share information and data
- Dependent on **single best effort**
 - Development and warm base capacity for production of medical countermeasures like vaccines, therapeutics, diagnostics and other technologies – both relevant for epidemics as well as endemic infections
- Dependent on **joint regulations to prohibit/ban** activity that pose risks

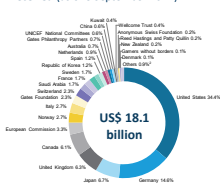
Commonalities – PPR and AMR

- The zoonosis aspect and the need for a One Health approach
- The need for improved global surveillance for both viral and bacterial infections
- The need for a health-needs driven research and development model
- Increasing transparency and strengthening of global pharmaceutical supply chains
- Ensuring equitable, affordable and timely access to health products and prevention efforts
 - And ensuring Stewardship - access without excess

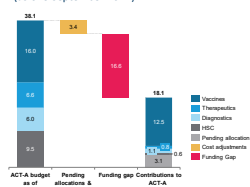


Contributions | ACT-A's generous contributors have funded US\$ 18.1 Bn so far, but still has a US\$ 16.6 Bn gap for 2021

US\$ 18.1 billion contributions for ACT-A received (as of 3 September 2021)

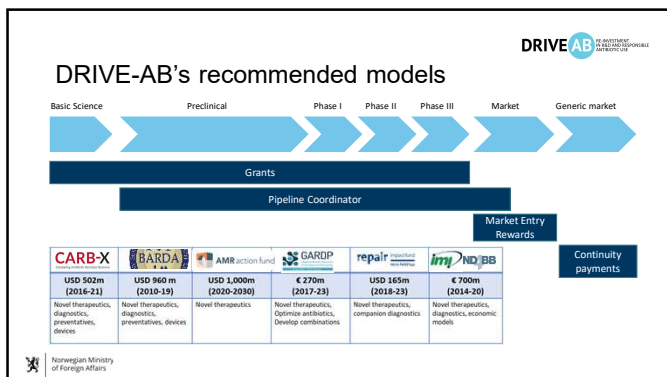
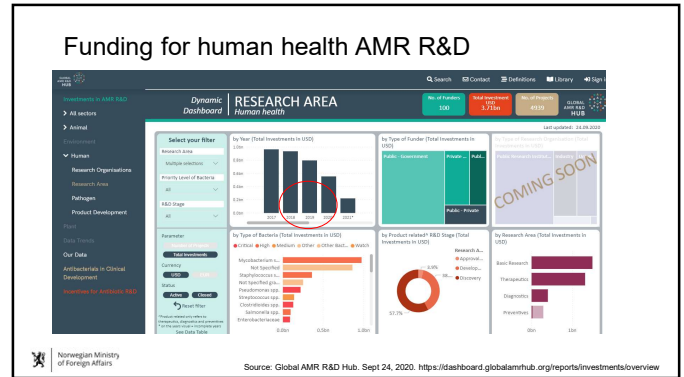


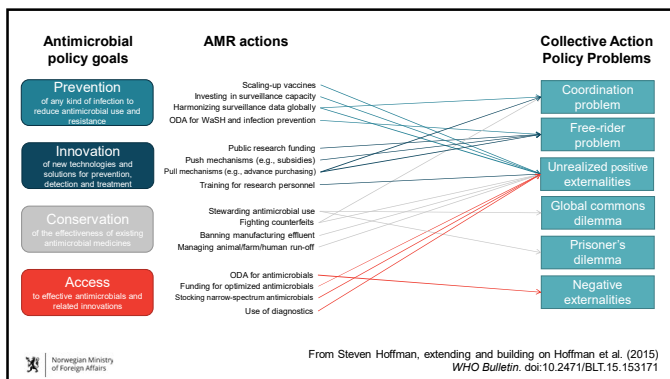
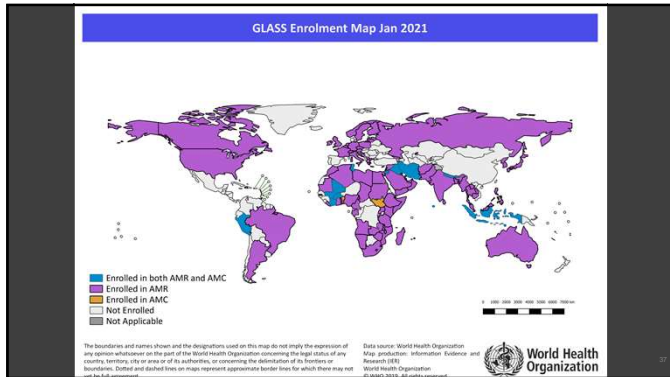
US\$ 16.6 billion funding gap for 2021 (as of 3 September 2021)



Public, philanthropic & industry funding for COVID-19 R&D

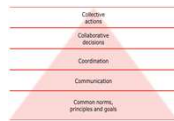






Global Governance for Health Threats

- Norms and obligations
 - Strengthening the International Health Regulations
 - Pandemic treaty – Framework convention
- Tools and solutions
 - Pandemic Preparedness Partnership & Pandemic Radar (G7)
 - ACT-A 2.0 – platform for medical countermeasures
- Financing
 - Global Health Threats Fund/Financing Facility
- Oversight and accountability
 - Global Health Threats Council/Board



Addressing PPR and AMR requires multisectoral approach – One Health

