

# GARPNet News

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## GARP efforts bear fruit at the World Health Assembly

We would like to congratulate all the GARP member countries for their hard work to finalize national action plans (NAPs) on antimicrobial resistance (AMR) ahead of the 70th World Health Assembly (WHA), which took place in Geneva from May 22nd to 31st.

On May 24th, member states were scheduled to discuss progress on the Global Action Plan (GAP) for Antimicrobial Resistance, including [the adoption of national action plans](#), definition of a coordinating mechanism, and the development of a global stewardship framework. In addition, the newly approved budget allocated US\$23 million for combating antimicrobial resistance.

This issue features stories from a number of GARP working groups that supported the national action plan development process. Looking forward, GARP will be focusing on supporting countries in implementation efforts, in collaboration with government and other stakeholders.



*The Nigerian AMR Technical Working Group and stakeholders in Ibadan in March 2017*

## GARP-Nigeria joins Nigeria AMR Secretariat to finalize national policy documents

By Pharm. Love Omoniyei, GARP-Nigeria Administrative Assistant

The Nigeria AMR Secretariat at the Nigeria Centre for Disease Control (NCDC), supported by GARP-Nigeria, held a stakeholder's workshop on April 19-20, 2017 at Kini Country Lodge, in Akwanga, Nassawara State. The secluded setting helped focus attention on the main objective of the workshop: finalizing the country's AMR situation analysis and national action plan for AMR.

With NCDC leadership, the two-day intensive workshop included representatives from all quarters: academia, the World Health Organization (WHO), non-governmental organizations, the pharma industry and even the media; and the full range of subject areas: environment, agriculture, and health. Attending her first Nigeria AMR meeting was Hellen Gelband, Associate Director of CDDEP and GARP international coordinator. More than 60 active participants attended.

The Nigeria AMR Technical Working Group (TWG) was constituted by the Honourable Minister of Health just a few months prior, in November 2016, with support from the GARP-Nigeria team. The arrangement has turned out to be an effective public-private partnership, for an issue that depends on everyone for solutions.

A lot had been accomplished in the short time leading up to the Akwanga meeting. An inaugural first AMR stakeholders' meeting was held on January 16-17 at the AMR Secretariat in Abuja. Situation analysis assignments were handed out to individuals and agencies, and a one-year AMR timeline was developed. Thereafter, the technical working group convened in Ibadan from March 21-23. The highlight was a thorough SWOT analysis of the situation analysis and the beginnings of the NAP. A series of working group meetings and a two-day writing workshop followed, where the situation analysis and NAP were further streamlined, incorporating changes and feedback from stakeholders.

On both days at Akwanga, the meeting started early and breakout groups worked late into the evenings, working for the first day on the situation analysis and the second on the NAP. Dr. Joshua Obasanya, the GARP-Nigeria Deputy Chair, emceed the sessions and kept the momentum up. Pharmacist Hamzat Omotayo, from the Nigeria WHO office, spoke, as did Hellen Gelband, who talked about GARP activities globally and assured the country of GARP's continued support and collaboration.

Prof Iruka Okeke, Pharm Onyekachi Estelle Mbadiwe, Pharm Love Omoniyei – On behalf of the Nigeria AMR Technical working group:

*“According to Thomas Carlyle, ‘every noble work is at first impossible.’ But even more intimidating than the job at hand and the extremely short timeline of five months to complete it, were the AMR challenges Nigeria had already faced and the fear of what lies ahead without intervention. These challenges inspired the Nigeria AMR working group and its tripartite stakeholders to work tirelessly, with incredible commitment, passion and dedication, eventually achieving a NAP in record-breaking time.”*



*The Nigeria Technical Working Group and expanded stakeholder group in Akwanga in April 2017*

Prof Iruka Okeke, Pharm  
Onyekachi Estelle Mbadiwe,  
Pharm Love Omoniyei – On be-  
half of the Nigeria AMR Techni-  
cal working group:

*“Nigeria’s NAP is truly local, building on global resources for NAP development but also reflecting the intense meetings, deliberations, and invaluable input provided by stakeholders, internal and external consultants. The NAP provides a high-level SWOT analysis of our current AMR situation analysis and presents a 5-year strategic framework that addresses the many challenges of AMR in the country. The next few years will be crucial for the successful implementation of this strategic plan and the sustainability of AMR interventions in the long term. Our goal is that this plan will increase awareness of AMR, contain resistant organisms and ensure optimal use and improved access to quality antimicrobials.”*

Professor Iruka Okeke, from the University of Ibadan and Chair of GARP-Nigeria, has been instrumental in developing the national documents and highlighted their importance in assessing the current AMR situation in Nigeria and developing recommendations forging a way forward.

Oladipo Aboderin, a consultant and Professor of Medical Microbiology and Parasitology at Obafemi Awolowo University/Teaching Hospital, Ile-Ife, gave the NAP marching orders for review and final inputs.

Working group members displayed great commitment and worked tirelessly. By the end of the workshop, the working drafts had been transformed into polished, near-final documents.

GARP-Nigeria Coordinator, Pharmacist Estelle Onyekachi Mbadiwe (Director, Ducit Blue Solutions), has been shepherding the effort since the beginning and appreciated all for their efforts and anticipated sustained collaboration going forward.

UPDATE: The documents made it to the WHO by the April 30 deadline. (Now the hard work—and excitement—of implementation begins!)

## World Antibiotic Awareness Week 2017

GARP is beginning to plan activities to celebrate this year’s awareness week at the global and the local level. Have ideas for what you might do? Curious about what GARP working groups have done in the past? Please share your ideas, questions, and comments with [Molly Miller-Petrie](#).



*Members of GARP-Pakistan at the stewardship workshop*

## **GARP-Pakistan supports the national action plan and looks toward the future of antibiotic stewardship and infection prevention and control**

By Drs. Ejaz Khan and Ammad Fahim, GARP-Pakistan Working Group Chair and Coordinator

Pakistan's Ministry of National Health Services, Regulations & Coordination has transformed the "National Strategic Framework for Containment of Antimicrobial Resistance 2016" into the official NAP-AMR. This process involved the full participation of the Inter-sectoral Core Committee, representatives from the health, veterinary, and agricultural sectors, ministries, departments of health, and other sectors at the federal, provincial and regional levels.

A consultative workshop for development of the NAP-AMR took place from February 27 to March 3 in Islamabad. The workshop was conducted in close collaboration with the National Institute of Health (NIH), the National Agricultural Research Centre, and the National Veterinary Laboratory - the designated focal points for AMR in the health and veterinary sectors, respectively. The workshop was technically supported and financed by the WHO, and a team of international consultants and national experts facilitated technical discussions during the workshop with all relevant national, provincial and regional stakeholders. Partners interested in supporting antimicrobial resistance containment and the implementation of national action plans, including the U.S. Centers for Disease

Control and Prevention (CDC), GARP, and USAID also participated in the process.

The major strategic priorities of the NAP-AMR, which emerged from the consultation process, include:

1. Development and implementation of a national awareness raising and behavior change strategy on AMR;
2. Establishment of an integrated national AMR surveillance system (use and resistance, human and animal);
3. Improvement of infection prevention and control in health care settings, the community, animal health, food, agriculture and the environment;
4. Update and enforcement of regulations for human and veterinary antimicrobial use;
5. Phase-out of antimicrobial use for growth promotion and provision of appropriate alternatives (such as prebiotics, probiotics) in food animals;
6. Integration of AMR into all public health research agendas, including research on vaccines; and,
7. Estimation of the health and economic burden of AMR, for use in decision-making.

The NAP-AMR will be shared with all stakeholders, including Health Development Partners (HDPs) at the national, provincial, and regional levels under the One Health approach for the development and adoption of respective provincial and regional level implementation plans.

A technical joint stakeholder workshop for the implementation of the NAP-AMR and GLASS surveillance was held in Islamabad, Pakistan on 22-24 May 2017. Dr. Ejaz Khan, GARP-Pakistan chair, participated along with other stakeholders including WHO, the U.S. CDC, and Health Security partners that have expressed interest in assisting the NIH, Pakistan in detecting, preventing, and responding to AMR challenges in the country. It was agreed that Pakistan's NAP-AMR would serve as the reference guiding AMR related interventions by all partners.

The main objectives were:

1. To identify priority areas for support by primary stakeholders in 2017, including assessment and training plans for the NIH and GLASS sentinel sites;
2. To create a network of partners working in, or with the capacity and interest to be working in, AMR in Pakistan for harmonization and synergy of interventions; and,
3. To initiate discussions to develop an all-partner Pakistan work plan for implementation

#### GARP-Pakistan:

*“The full commitment and participation of every Pakistani, in every sector, in every institution, from every discipline, in every province, every region and on every day is essential for controlling antibiotic resistance.”*

of the NAP-AMR aligned with national priorities as well as other relevant programs (such as Global Health Security) with clear roles and responsibilities.

Other AMR-related workshops also took place alongside the policy process. “Antibiotic Stewardship... A way forward” was a workshop held in Multan, Pakistan on March 7 as a part of the 14th Annual Meeting of the Medical Microbiology and Infectious Disease Society of Pakistan (MMIDSP), with support from GARP. Speakers included Dr. Ejaz Khan, Mrs. Komal Fizza and Dr. Faisal Sultan. Dr. Khan, Chair of GARP-Pakistan, gave a keynote lecture on “Antibiotic Stewardship – What pediatricians should know.”

A joint WHO-World Organization for Animal Health (OIE) International Health Regulations National Bridging Workshop was held on May 9-11 in Islamabad. The meeting aimed to refine and align WHO IHR Monitoring and Evaluation Framework (IHRMEF) and OIE Performance of Veterinary Services (PVS) Pathway tools for joint use in capacity building in human and animal health sectors at the country level. The main objective of the IHR-PVS Pathway National Bridging Workshop was to provide an opportunity for the human and animal health sectors to build on the assessments conducted in their respective sectors, to explore options for improved coordination, and to jointly strengthen their preparedness for and control of the spread of zoonotic diseases.

## GARP in the news

GARP-Nepal PI Dr. Sameer Dixit co-authored a paper on One Health and AMR: [www.myrepublica.com/news/17810/?categoryId=81](http://www.myrepublica.com/news/17810/?categoryId=81)

## GARP activities on the CDDEP blog

India’s strides against AMR: local solutions, global implications (April 27) [http://cddep.org/blog/posts/india’s\\_strides\\_against\\_amr\\_local\\_solutions\\_global\\_implications](http://cddep.org/blog/posts/india’s_strides_against_amr_local_solutions_global_implications)

GARP Rendezvous with the 70th World Health Assembly (May 23) [http://cddep.org/blog/posts/garp\\_rendezvous\\_70th\\_world\\_health\\_assembly](http://cddep.org/blog/posts/garp_rendezvous_70th_world_health_assembly)

## GARP-Uganda supports the development of the National Action Plan on AMR

Prof. Denis K. Byarugaba, Chair, GARP-Uganda

Uganda was part of the 71st United Nations General Assembly and the 68th World Health Assembly (2015), where organizations including the WHO, the Food and Agriculture Organization, and the World Organization for Animal Health agreed on a set of actions for the containment of AMR. Member countries agreed to develop national action plans to operationalize the GAP. With support from CDDEP, GARP-Uganda, hosted by the Uganda National Academy of Sciences (UNAS) standing committee on antimicrobial resistance, coordinated the development of the Uganda National Action Plan on Antimicrobial Resistance. The plan was submitted to the relevant government ministries for review and approval before the official launch, while GARP-Uganda develops the implementation plan and the monitoring and evaluation framework to finalize the process. The plan proposes five focus areas for intervention that are consistent with the WHO GAP:

1. Raising awareness and understanding of the AMR problem and containment options;
2. Improving prevention, detection and control of infectious agents;
3. Optimizing the use of antimicrobial medicines;
4. Generating knowledge and evidence through surveillance; and
5. Research and innovation.

The plan also proposes that implementation of the interventions should be coordinated by a multi-stakeholder committee (The Uganda National Antimicrobial Resistance Committee). Implementation of the interventions in each focus area will be supervised by technical working groups composed of relevant specialists.

### GARP-Zimbabwe:

*“The making of the NAP has brought people of different sectors to work together in improving lives in all sectors whether it be human or animal in Zimbabwe. Commitment and collaboration will be the key to success during implementation of the AMR policies for a better tomorrow globally.”*



## Bangladesh and the National Action Plan on AMR Containment 2017 – 2022

Bangladesh, a signatory of the “Jaipur Declaration 2011” on the containment of antimicrobial resistance, is taking a multi-sectoral approach to implement integrated AMR activities. The Disease Control Unit in the Department of Communicable Disease Control (CDC) in the Directorate General of Health Services of the Ministry of Health and Family Welfare (MoHFW), has established a number of national and local level committees to support AMR work. These include the National Steering Committee, National Technical Committee (NTC), and the Core Working Group (CWG), which all aim to address antimicrobial resistance containment.



*Bangladesh AMR National Steering Committee meeting chaired by the Honorable Minister of Health*

AMR has long been a policy item in the MoHFW. The CWG, led by the director of the CDC, developed the “National Strategy for Antimicrobial Resistance Containment in Bangladesh 2011 – 2016,” which was approved by the National Steering Committee chaired by the Honorable Minister of Health in 2011. A follow-up “National Action Plan on AMR Containment 2017 – 2022” was developed in November 2016, and further updated in April 2017 ahead of its presentation at the World Health Assembly.

GARP-Bangladesh has been an instrumental support to the CDC, providing both technical and scholarly inputs at different stages of the NAP’s development. Meetings and focus group discussions with stakeholders and government representatives triggered this latest NAP process. Country AMR experts from government and non-governmental organizations attended a NTC meeting on April 20, 2017. At that meeting, stakeholders from all three health sectors – human, livestock, and environment – emphasized the importance of monitoring AMR. Subsequently, a summary presentation was given by the chair of the CWG at the Ministry of Health in the presence of the Honorable Minister of Health, Mr. Md. Nasim, MP (chair of the NSC) on April 23rd, 2017. At that meeting, the Honorable Minister approved the NAP for implementation with the consent of the meeting attendees and with great appreciation for their efforts to develop the NAP. The Minister took the NAP on to Geneva to be taken up at the World Health Assembly.

### New publications and media

Laxminarayan, R., Kakkar, M., Horby, P., Malavige, G. N., Basnyat, B., 2017. “Emerging and re-emerging infectious disease threats in South Asia: status, vulnerability preparedness, and outlook.” BMJ. <http://www.bmj.com/content/357/bmj.j1447>

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