

PHM Day 3-(25 January 2017) report of the WHO EB 140th session

Report prepared by Linda Shuro

Post of Director General Election process: interviews and nominations

The morning and afternoon session were scheduled as an open meeting (i.e. closed to us) for interviews and nomination of the candidates until approximately 6pm. From the 5 candidates the following 3 were nominated for the post of Director General of WHO in accordance with article 31 of the Constitution:

*Dr. Tedros Adhanom Ghebreyesus *Dr. David Nabarro and *Dr. Sania Nishtar

The nominations will be submitted for the seventieth World Health Assembly. The draft contract of the post of the DG was discussed.

Next on the agenda was item 7.2 on Antimicrobial resistance and discussion on Sepsis

The countries commended the efforts of WHO to address antimicrobial resistance (AMR). The political declaration confirms the fight against AMR. It was stressed that countries would like to ensure rational use of antibiotics. Emphasis should be on acceleration of implementation of the global action plan and within different systems to address AMR like One Health, International Health Regulations (IHR), National Action Plans (NAPs) to strengthen health systems for AMR. Response must recognise multi-sectoral action and regulation of private sector and put the needs of the patient and health workers first and translate ideas into action. There are some challenges faced such as the lack of effective laboratory, surveillance and control of AMR and deficient health systems. Countries requested WHO, FAO and OIE to provide support to countries to fight AMR. There is support for the ad-hoc Inter-Agency Coordination Group (IACG) urging haste, and building on momentum. Expert consultations will be conducted before May. There was also support for the development and engagement with MS on the global development and stewardship framework to fight AMR; the need for clarity on future implementation of framework and global action plan and for politicians at highest level to be aware. Implementing the global action plan will be a challenge to many countries and will require a system for data collection.

PHM/MMI statement was read by Linda Shuro urging continued civil society engagement, transparency, financial and technical commitments.

See EB140 website: http://apps.who.int/gb/e/e_eb140.html

<https://extranet.who.int/nonstateactorsstatements/meetingoutline/7>

Feedback from DG: stressed AMR importance and thanked all MS for their global action plan and approving the political declaration. The IACG had been stalled by transition to the new Secretary General (SG) but they are working on it and will propose a way forward to the new SG to uphold the political declaration. It is difficult to get women scientist who know the AMR subject in developing countries to address the gender balance. On the technical level, WHO has not slowed down to support countries and will look at connection between stewardship framework with the global political declaration as nothing will work without the other.

Dr. Hajimi:noted that they are working on:

- IACG - working closely with UN SG's office to move it forward, expecting decision soon and once established to ensure transparency by providing an occasional mission briefing in Geneva to all MS.
- NAPs: All member states (MS) agreed to finish by this year's World Health Assembly (WHA) and they are surveying progress. 49 completed, 67 countries in good progress - covers >80% of global population. So generally on track and supporting MS who are behind. An update will be provided at coming WHA.
- Global Antimicrobial Resistance Surveillance System (GLASS): launched March last year, now 30 countries involved, additional 10 in progress.

- Development and Stewardship framework: Not ready to make a final report in coming WHA but good progress:
 1. Establishment of essential medicines list which includes for antibiotics. Draft ready this week etc. more detail in coming WHA
 2. Working to guide Research and Development (R&D) priorities, including priority list for pathogens for which product development needed. More updates at coming WHA.

Sepsis: Sepsis is a critically relevant health issue which is preventable and treatable. it was discussed that there is need to take initiative on global scale and member states to align themselves with implementation in other regions. Editorial changes to the draft resolution passed. The EB took note of the report and adopted resolution with amendments proposed by Jamaica.

AMR and sepsis discussion concluded.

End of day.