EC–EuropeAid
AMR – Health Sector Development Activities

One-Health Network on AMR, Brussels, 5 February 2018

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• The EU supports partner countries to **improve their health systems** in order to achieve **universal health coverage**, implementing 2030 Agenda and the new **European Consensus on Development**. It also supports partnerships which aim to eradicate poverty-related diseases and improve health such as the Global Alliance on Vaccines and Immunisation (GAVI) and the Global Fund to fight against HIV/AIDS, Tuberculosis and Malaria.

• Between 2007 and 2013 **€3.2 billion** went to 43 countries (around €500 million p.a.) – 40% countries fragile.

• Commission budget – the Development Cooperation Instrument (**DCI**) and directly from Member States, as part of the European Development Fund (**EDF**). Between 2007-2013:
  - **Around 75%** went to bilateral support to countries
  - **Around 25%** went to support to global initiatives such as the Global Fund, GAVI, WHO and UNFPA

• From **2014-2020 €2.6 billion** will be committed – focus on fragile, less resilient countries, roughly 1.3 billion bilaterally & 1.3 billion through global actions

• The EU to dedicate at least 20% of its aid to **human development** (including health).
Transforming our World: The 2030 Agenda for Sustainable Development


17 Goals – 169 targets

Universal, global

Three dimensions of Sustainable Development: the economic, social and environmental

Focus on inequalities “transformative” - shift the world onto a sustainable and resilient path
Figure 9.1
A framework for the SDG health goal and targets

**SUSTAINABLE DEVELOPMENT GOAL 3 AND ITS TARGETS**

**SDG 3:** ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

**TARGET 3.8:** ACHIEVE UNIVERSAL HEALTH COVERAGE, INCLUDING FINANCIAL RISK PROTECTION, ACCESS TO QUALITY ESSENTIAL HEALTH-CARE SERVICES, MEDICINES AND VACCINES FOR ALL

**MDG UNFINISHED AND EXPANDED AGENDA**

3.1: Reduce maternal mortality
3.2: End preventable newborn and child deaths
3.3: End the epidemics of AIDS, TB, malaria and NTDs and combat hepatitis, waterborne and other communicable diseases
3.7: Ensure universal access to sexual and reproductive health-care services

**NEW SDG 3 TARGETS**

3.4: Reduce mortality from NCDs and promote mental health
3.5: Strengthen prevention and treatment of substance abuse
3.6: Halve global deaths and injuries from road traffic accidents
3.9: Reduce deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

**SDG 3 MEANS OF IMPLEMENTATION TARGETS**

3.a: Strengthen implementation of framework convention on tobacco control
3.b: Provide access to medicines and vaccines for all, support R&D of vaccines and medicines for all
3.c: Increase health financing and health workforce in developing countries
3.d: Strengthen capacity for early warning, risk reduction and management of health risks

INTERACTIONS WITH ECONOMIC, OTHER SOCIAL AND ENVIRONMENTAL SDGs AND SDG 17 ON MEANS OF IMPLEMENTATION
Bilateral Support 2014-2020: € 1.3 B
Health as sector of concentration in 17 countries
Health Systems Strengthening
4.3 Cooperating with developing countries – EU Action Plan against AMR

“The AMR threat to public health and the social and economic burden it entails is even greater in developing countries. This is due to political, social, epidemiological and economic factors which may vary from those in developed countries. The EU’s development policy can play an important role in raising awareness, sharing experiences and supporting capacity building in developing countries in order for them to be better equipped to control infectious diseases and prevent AMR. This process can be supported through dialogue, aid and cooperation activities, taking account of partner countries’ individual policy priorities to strengthen health systems and implement the sustainable development goals, in particular the third goal on good health and well-being. Particular attention should be given to lower income countries, where support is most needed.”
“The Commission will:

- continue to contribute to reducing AMR in least developed countries through infectious disease programmes such as the Global Alliance for Vaccines and Immunisations (GAVI);
- assist in the development of AMR strategies in the areas of food safety and animal health through regional training workshops on AMR organised under the BTSF World initiative;
- support partner countries’ policy initiatives on AMR, where appropriate, through international cooperation and development instruments (e.g. Global Public Goods & Challenges, the European Development Fund);
- support the development of resilient health systems in partner countries, e.g. by strengthening the knowledge and evidence base, infection prevention and control and the quality and use of antimicrobials.”
Work already started on AMR activities under the EU/ACP/WHO Renewed Partnership on strengthening pharmaceutical systems

**Overall objectives:**
To contribute to the achievement of health-related MDGs (4, 5, 6 & 8)
To contribute to Universal Health Coverage (UHC)

**Purpose:**
To strengthen pharmaceutical systems and improve availability, affordability and use of safe, effective and quality assured medicines in 15 African countries

**Timelines and budget:**
1st Oct 2012 – 30 Sept 2017, 10 M EUR
Ensuring access to medicines and health products needs....
Five Result Areas:

1. Improved availability and supply of selected essential medicines in national, regional and community health facilities through national supply systems.
2. Reduced medicines prices and improved mechanisms for financing and for coverage of essential medicines in social protection schemes.
3. Improved quality of medicines and reduced occurrence of substandard and counterfeit medicines.
4. Improved medicines selection, prescribing, dispensing and use.
5. Improved access to reliable country pharmaceutical sector information; evidence-based national medicines policies and plans developed and monitored; enhanced transparency and good governance of the pharmaceutical sector.
Selection & Rational Use

- 14 countries updated national standard treatment guidelines and essential medicines lists based on scientific evidence provided by the WHO Expert Committee on Selection and Rational Use.
- 10 countries monitored, trained and developed policy for appropriate prescription and use of medicines.
- A regional AMR Action Plan is developed and provides guidance to countries on priority interventions to combat AMR.
- 12 countries trained on antimicrobial consumption survey methodology and data collected in 7 RP countries.
EuropeAid funded Pilot Project on ‘Mapping the global threat of AMR in sub Saharan countries’

- 750 000 EUR provided to WHO to implement this project
- Pilot Project kicked off August 2017 (2 years to run)
- Building on work of the EU/ACP/WHO Renewed Partnership on strengthening pharmaceutical systems
- A further 750 000 EUR made available in 2017 by the European Parliament to extend the project
Work areas include:

- Developing a WHO point prevalence protocol on antimicrobial prescribing
- Carry out a survey in sub-Saharan countries using this protocol
- Analyse and report on the surveys
- Review the protocol and finalise the tool for further use in other countries and regions

Planned work under the project extension:

- Capacity building for implementation of antimicrobial programmes in hospitals in sub-Saharan Africa
- Prevention, detection & response to substandard and falsified antibiotic products in Africa
Useful Links

http://ec.europa.eu/europeaid

http://www.eeas.europa.eu

http://www.dev-practitioners.eu

http://www.concordeurope.org

http://www.odi.org.uk

http://die-gdi.de

http://www.ideas4development.org

EuropeAid

EEAS

(Public Network)

(Confederation NGOs)

(Think Tanks)

(Blog)
EuropeAid Basic Literature

Annual Report 2012

MDGs

Agenda for Change
Thank you & Questions?

EuropeAid website: http://ec.europa.eu/europeaid/index_en.htm