

AMR: A KEY FOCUS OF THE UPCOMING 2019 GLOBAL HEALTH SECURITY CONFERENCE

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Antimicrobial resistance (AMR) necessitates a comprehensive approach that brings together stakeholders across multiple sectors from public health and medicine, to veterinary science and the social and behavioural sciences. Developing strategies to tackle the problem of AMR will be a key theme of an upcoming conference on Global Health Security, to be held in June 2019, Sydney, Australia (GHS 2019). GHS 2019 aims to bring together 1,000 delegates from government, academia, NGOs and the private sector to consider the critical health issues confronting the world and develop new evidence-informed policies. AMR will be one of the top agenda items.

The complex, slow-burn challenge arising from antimicrobial resistance (AMR) necessitates a comprehensive, multi-sectoral approach. Regrettably, the international community has a poor track record with dealing effectively with such menacingly slow-onset issues, as challenges in collaboration on dealing with the threat of global climate change highlights. Even so, if AMR is not successfully addressed, it is estimated that the current 700,000 annual AMR-related deaths will increase to 10 million by the year 2050 (1). The onus of responsibility thus falls to our generation to tackle this problem.

Jim O'Neill, former chair of the United Kingdom's Independent Review on AMR, recently noted there has thankfully been considerable progress in some AMR areas (2). They include the number of researchers now focusing on AMR, investment in early research and development, and the G20's commitment to eliminating the inappropriate use of antibiotics as growth promoters in food animals. Efforts undertaken by multiple international organizations ranging from the World Health Organization (WHO), Food and Agriculture Organization (FAO), the World Organization for Animal Health (OIE), even the United Nations General Assembly, have also sought to raise global awareness of AMR, and in so doing, generate new commitments to tackling the problem (3).

Even so, significant challenges remain. A recent report produced by the WHO's new Global Antimicrobial Surveillance System (GLASS) has documented widespread prevalence of antibiotic resistance in some 500,000 people across 22 high and low-income countries (4). Importantly, however, only 52 countries – just one quarter of WHO's 194 member states – have agreed to participate in the GLASS network to date.

Further compounding the lack of surveillance has also been significant under-investment in the development of new drugs, diagnostic tools, and local government-led strategies aimed at increasing public awareness about AMR (3). Without concerted, multi-sector wide action in these areas, it is estimated that AMR will result in up to US\$ 3.4 trillion in lost GDP by the year 2030 (5). AMR thus not only has a tremendous human cost, but also a significant economic one if left unaddressed.

Creating a new global conversation – GHS 2019

In June 2019, the first ever international scientific conference on Global Health Security will be held in Sydney, Australia. This event aims to bring together 1,000 delegates from across government, academia, the NGO and private sectors to measure progress, determine gaps, and identify new opportunities to enhance national, regional and global health security. AMR, as one of the most critical health issues confronting the international community, will be a key theme of the conference. By bringing together at least 200 representatives from low-income countries (supported by travel bursaries generously provided by our conference partners) GHS 2019 also seeks to provide a platform to enable a truly global conversation – one that will lead to new commitments from government, the academy, non-government and private sectors aimed at tackling the challenge of AMR.

To that end, GHS 2019 aims to do things differently. From the outset, we – as the conference co-convenors – have actively sought to create an alternative to the standard conference format. Ensuring equitable gender and regional representation, not only in approaching a number of global leaders to serve on the conference steering committee but also in those delegates

attending the event, will be a hallmark of the forum. Similarly, the conference seeks to ensure diverse representation from across government, academia, the NGO and private sectors in order to expose decision-makers to the latest evidence and stimulate new thinking. We also endeavour to provide a forum for emerging researchers from around the world to share their work, create a network of collaborators, and push our collective thinking about best approaches to improving global health security.

In addition to AMR, the conference will also address themes around contemporary health emergencies, planetary health, the International Health Regulations, pandemic preparedness, the animal-human health interface, deliberate biological events, dual use research of concern, and the intersections between universal health coverage and global health security. We anticipate a series of side meetings dedicated to Joint External Evaluations, innovative financing, and norms for biological sample sharing. These issues, along with AMR, challenge all populations, and we hope GHS 2019 provides a forum for solutions.

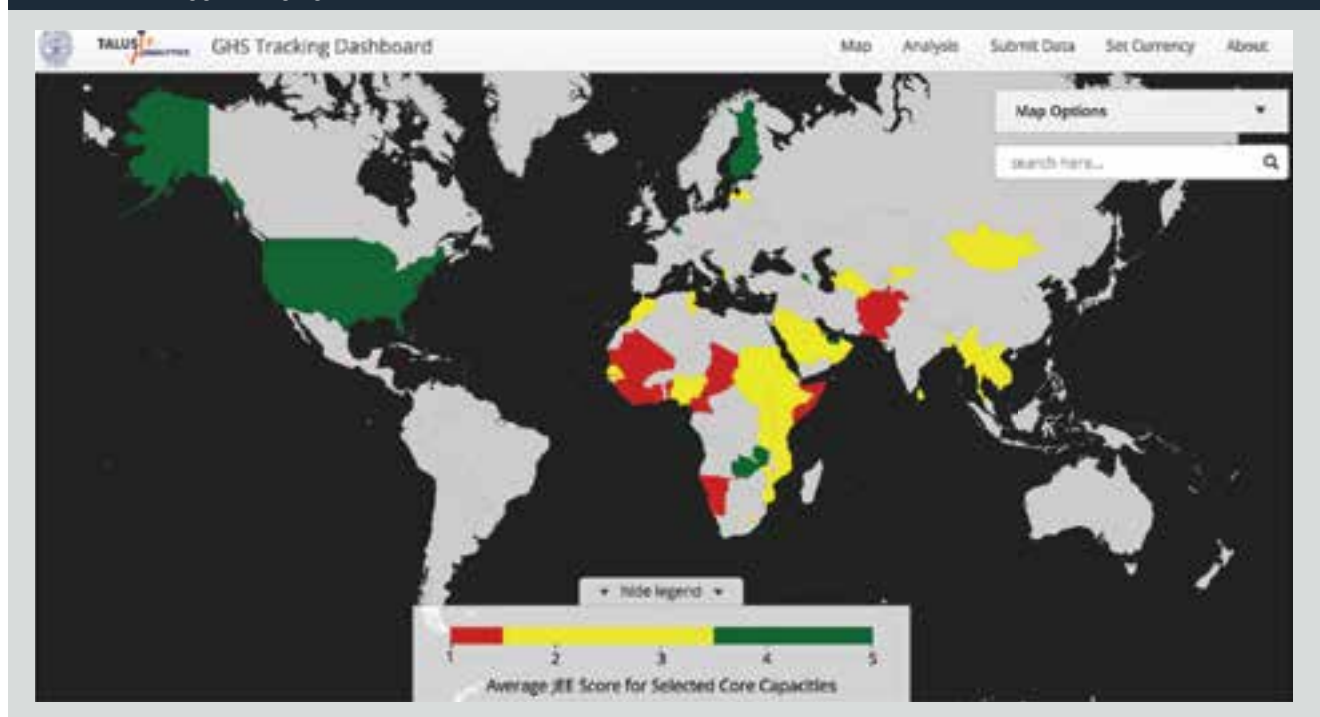
Why a conference on global health security and why now?

To date, there has already been strong interest expressed in the event. In part, this is because there appears to be a genuine desire amongst the international community to prevent a repeat of the 2014–2016 West African Ebola outbreak that resulted in over 28,600 cases and 11,315 deaths (6). There is

also now seemingly widespread acceptance that health issues can and do, in a highly interconnected world, cause widespread health, social, economic, and political impacts if not efficiently addressed. The Australian Department of Foreign Affairs and Trade has, for instance, recently come on board as a Conference Partner for GHS 2019 as part of the Australian Government's commitment to enhancing health security within the Indo-Pacific region and its assumption of the role of co-chair for the Joint External Evaluation (JEE) Alliance (7, 8). Other entities have similarly expressed a willingness to support GHS 2019, and it is anticipated that further announcements will be forthcoming soon.

Critically, however, it must also be acknowledged there continues to remain much confusion about global health security and what precisely it refers to. For while the WHO's new director-General, Dr Tedros Adhanom Ghebreyesus, recently reinforced his organization's commitment to global health security, arguing strongly that universal health coverage is critical to achieving security for all (9), fault-lines remain amongst his member states, the policy and academic communities as to the alleged benefits of framing health issues within security language and concepts (10). One of the core objectives of the GHS 2019 conference, therefore, is to develop a consensus statement that will establish a series of guiding principles for actors working in this field, thereby building on the Oslo Ministerial Declaration on global health (11). To ensure global participation in the development of any set of guiding principles, submissions to inform the consensus

Figure 1: Joint External Evaluation Scores on AMR, as of February 2018. Only countries in green have sufficient capacity for AMR. Available at tracking.ghscosting.org



statement will be invited from any interested parties from May 2018 onwards via the conference website (www.ghs2019.com).

The global health challenges such as AMR that now confront us are profound. Initiatives like the US-led Global Health Security Agenda (GHSA) and the JEE Alliance have helped to generate renewed interest in the need for investing in health systems. Yet despite decades of work led by organizations like the WHO, the World Bank and others, multiple reports and thousands of recommendations on what health issues require priority funding, divisions remain on the best way forward. Recent announcements by the US Centers for Disease Control and Prevention (CDC) that it is reducing funding to its global outbreak alert and response efforts by 80% also should give the wider international community pause (12), and highlights that the need for obtaining political consensus on what health issues deserve priority.

GHS 2019 will not be the panacea for the world's ills. By itself, it will not solve the problem of AMR nor the raft of pressing health issues that daily cause widespread human suffering and death. Having said this, bringing stakeholders together from across not only the diversity of society but the globe to measure the progress made to date, engage in new conversations, and identify priorities and principles to inform new investment, presents an opportunity for contributing to making a healthier and safer world. We hope you will join us in

Sydney in this endeavour.

For regular updates about GHS 2019, follow the conference Twitter handle: @GHS2019conf To lodge an expression of interest to attend the event, please go to the conference website: www.ghs2019.com, ■

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