The "Regional operational framework for implementation of the Global Action Plan on Antimicrobial Resistance" was developed by the WHO Regional Office for the Eastern Mediterranean, in consultation with Member States. It aims to provide countries of the Region with an operational basis for planning and implementing national action plans on antimicrobial resistance. It identifies the steps in preparing national action plans on antimicrobial resistance and provides prioritized interventions and key resources for countries to use in developing their plans.

The framework outlines 5 global strategic objectives:

- improve awareness and understanding of antimicrobial resistance through effective communication, education and training; strengthen the knowledge and evidence base through surveillance and research;
- reduce the incidence of infection through effective sanitation, hygiene and infection prevention measures; optimize the use of antimicrobial medicines in human and animal health;
- develop the economic case for sustainable investment that takes into account the needs of all countries, and
- increase investment in new medicines, diagnostic tools, vaccines and other interventions.

Regional operational framework for implementation of the WHO Global Action Plan on Antimicrobial Resistance (2016)

National action plans

National planning is important for controlling antimicrobial resistance. Member States of the Region are urged to develop national plans following resolution WHA68.7 on the Global Action Plan for Antimicrobial Resistance.

Resolution WHA68.7. Global action plan for Antimicrobial resistance

Laboratory and surveillance capacity

Surveillance is a core activity that allows for the detection and tracking of antimicrobial-resistant

microorganisms, as well as rapid notification of authorities during an outbreak. Surveillance data can also inform authorities on evidence-based standards and regulations, and help health care managers make appropriate decisions.

In the "WHO Worldwide Country Situation Assessment (2015)" approximately 38% of countries in the Region reported having conducted surveillance for resistant bacteria.

Laboratory capacity remains limited; less than half of the countries in the Region have a national reference laboratory and 5 of the countries participated in external quality assessments. None reported having submitted reports on antimicrobial resistance surveillance and none of the countries had prevalence data.

Access to quality assured antimicrobials

Access to quality assured antimicrobials is essential to avoid the further emergence and spread of antibiotic resistance. Poor quality medicines may have incorrect amounts of active ingredients that can lead to suboptimal dosing. Strong national regulations on the production of antimicrobials and the ability of authorities to monitor quality are key to ensuring high quality antimicrobials.

In the WHO situation analysis only 10 countries in the Region had a national regulatory authority of which 7 could enforce standards, and 4 had quality standards. Nine countries had a list of essential medicines.

Counterfeit medicines are also a problem in Region as in other WHO regions, which is linked to weak regulatory authority. Similarly, the ability to obtain antimicrobials from the Internet remains a problem in the Region as elsewhere in the world.

Infection prevention and control programmes

Infection control and hygiene are critical to stopping the spread of resistant infections in health care settings. Without appropriate infection control practices, health care facilities may act as permanent reservoirs of resistance or amplify the transmission of resistant bacteria within facilities and in the community. Sustainable infection control requires ongoing investments in health care infrastructure, staffing and knowledge.

Current strategies for infection prevention and control efforts in the Region are fragmented. Based on worldwide situation analysis, only 5 out of 21 countries in the Region had infection prevention and control strategies, and only 4 reported that an infection prevention and control programme was available in all tertiary hospitals.

Related link

Worldwide country situation analysis: response to antimicrobial resistance (2015)

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