The
G20 Research Group
at Trinity College at the Munk School of Global Affairs in the University of Toronto
with the
International Organisations Research Institute
at the National Research University Higher School of Economics, Moscow
present the

2014 Brisbane G20 Summit
Interim Compliance Report
17 November 2014 to 1 March 2015

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“The University of Toronto … produced a detailed analysis to the extent of which each
G20 country has met its commitments since the last summit … I think this is important;
we come to these summits, we make these commitments, we say we are going to do these
things and it is important that there is an organisation that checks up on who has done
what.”

— David Cameron, Prime Minister, United Kingdom, at the 2012 Los Cabos Summit
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“We also commit to fight anti-microbial resistance.”

G20 Leaders’ Brisbane Statement on Ebola

Assessment

<table>
<thead>
<tr>
<th>Country</th>
<th>Lack of Compliance</th>
<th>Work in Progress</th>
<th>Full Compliance</th>
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<tbody>
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<tr>
<td>Average</td>
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Background

The G20 addressed the issue of antimicrobial resistance (AMR) for the first time at the Brisbane Summit in the Statement on Ebola.1195

The World Health Organization (WHO) defines AMR as “resistance of a microorganism to an antimicrobial drug that was originally effective for treatment of infections caused by it.”1196 In that case standard treatments become ineffective, increasing the risk of infection spread to others. While “the evolution of resistant strains is a natural phenomenon” their emergence is accelerated by “the use and misuse of antimicrobial drugs,” including in animal husbandry, “poor infection control practices, inadequate sanitary conditions and inappropriate food-handling.”1197

In 2014, WHO published its first global report on surveillance of antimicrobial resistance, with data provided by 114 countries. The report said that “antibiotic resistance is no longer a prediction for the

future; it is happening right now, across the world, and is putting at risk the ability to treat common infections in the community and hospitals.” The World Trade Organization noted that “without urgent, coordinated action, the world is heading towards a post-antibiotic era, in which common infections and minor injuries, which have been treatable for decades, can once again kill.”

**Commitment Features**

In making the commitment on AMR the G20 also noted that “interested G20 members are supporting this goal through initiatives to accelerate action across the Economic Community of West African States and other vulnerable regions and will report progress and announce a time frame by May 2015 at the World Health Assembly.” Given that it does not constitute a separate commitment and does not cover all G20 members these actions should not be regarded as binding for achieving full compliance. However, they should be included in the report as additional actions.

As measures that policymakers can take to tackle AMR, WHO defines the following:

1. strengthening resistance tracking and laboratory capacity;
2. strengthening infection control and prevention;
3. regulating and promoting appropriate use of medicines;
4. promoting cooperation and information sharing among all stakeholders;
5. fostering innovation and research and development of new vaccines, diagnostics; infection treatment options and other tools.

**Scoring Guidelines**

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
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<tbody>
<tr>
<td>−1</td>
<td>Member does not take actions to fight antimicrobial resistance in any of five areas defined by the World Health Organization.</td>
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<tr>
<td>0</td>
<td>Member takes actions to fight antimicrobial resistance in fewer than four out of five areas defined by the World Health Organization.</td>
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<tr>
<td>+1</td>
<td>Member takes actions to fight antimicrobial resistance in four or five areas defined by the World Health Organization.</td>
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**Argentina: +1**

Argentina has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance as defined by the World Health Organization (WHO).

On 18 November 2014, a delegation from Argentina’s Ministry of Health attended a meeting on health cooperation agreement with Caribbean countries signed in 2013. According to the agreement, its sides are to collaborate in such spheres as organ procurement and transplantation, strengthening antimicrobial resistance and control of chronic noncommunicable diseases. During the two days of the conference, the sides analyzed the current outcomes of collaboration as well as proposed new measures to foster cooperation. In that way, Argentina, on the one hand, strengthened resistance tracking and, on the other hand, promoted international cooperation in the field.

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1198 Antimicrobial resistance: global report on surveillance 2014, WHO.
1200 Argentina asiste a reunión por acuerdo de cooperación sanitaria con los países del Caribe, Ministerio de Salud de Argentina. 18 November 2014. Date of Access: 7 April 2015.
On 8 January 2015, Argentina started a nationwide rotavirus vaccination, which will be compulsory and free for all children born after 1 November 2014. The vaccine has been included into the official national vaccination calendar and is available in all public hospitals and health centres. In Argentina, rotavirus is reported to cause between 100,000 to 165,000 cases of acute diarrhea annually among the children under five years old. As a result, Argentina has strengthened infection control and prevention.\textsuperscript{1201}

On 15 January 2015, Argentina announced the vaccination of children against chickenpox that is due to start in the second quarter of 2015. The vaccination is already included into the National Immunization Schedule and will be compulsory and free for all children at the age of 15 months. Chickenpox leads to about 400,000 new cases, 1,000 hospitalizations and between 15 to 20 deaths every year. Therefore, this vaccination will be a step to greater infection control and prevention.\textsuperscript{1202}

On 3-4 March 2015, the Ministry of Health held a two-day training course on the prevention and treatment of the Chikungunya virus. The event was organized in cooperation with the Pan American Health Organization (PAHO) of WHO to prepare for possible outbreaks of the virus that has already been detected in several Caribbean and South American countries. By holding this training course, Argentina has strengthened infection control and prevention.\textsuperscript{1203}

On 6 March 2015, the Ministry of Health announced the start of registration for a free online course “Drugs in Primary Care Health Care: Medication Management Cycle” organized in close collaboration with PAHO. The ones who enroll for the course will get acquainted with the production, distribution and medication use. Thus, Argentina has taken steps to promoting appropriate use of medicines.\textsuperscript{1204}

On 17 March 2015, the Ministry of Health of Argentina introduced a two-day Remediation Programme that is aimed at promoting the importance of rational drug use. The event was attended by teachers from a number of Argentinian universities and institutes and can be rated as a step to promoting appropriate use of medicines.\textsuperscript{1205}

On 22 March 2015, Daniel Gollan, the Minister of Health, officially included the meningococcal vaccination into the official national vaccination calendar. The vaccine will be free for all children


under one year old (one dose of the vaccine used to cost almost USD100). In Argentina, 200-300 cases of meningococcal disease are recorded annually (with the 100% hospitalization rate), in 1 case out of 10 the infection leads to fatal outcome. Therefore, this vaccination will improve infection control and prevention.\textsuperscript{1206}

On 26 March 2015, Gollan received Francisco Osuna Ortega, the Secretary for Health of the Federal District of Mexico. During the meeting, the officials discussed the potential areas of future cooperation including the possibility for the exchange of the medical staff as well as the practical experience in the prevention of various diseases. In this way, Argentina took actions on promoting cooperation and information sharing among the G20 stakeholders.\textsuperscript{1207}

Argentina has taken actions to fight antimicrobial resistance in four of the five areas defined by WHO. Thus, it is awarded a score of +1.

\textit{Analyst: Anton Markov}

\textbf{Australia: +1}

Australia has fully complied with the commitment on fighting antimicrobial resistance (AMR).

The Australian government plans to develop the National AMR Strategy, focusing on bacterial resistance and the use of antibiotics. The development is being led by the Australian Antimicrobial Resistance Prevention and Containment Steering Group, which includes government officials from the Departments of Health and Agriculture, as well as the chief medical officer and chief veterinary officer.\textsuperscript{1208} Using scientific and clinical expert advice, the steering group promotes infection prevention and control activities, while ensuring integration of AMR policies across health and agriculture.\textsuperscript{1209}

The Australian Strategic and Technical Advisory Group on AMR was created by the Departments of Health and Agriculture “to develop and provide technical, scientific and clinical advice to the steering group to inform the development of the National AMR Strategy, and strategic advice to help ensure actions under the strategy are effectively and efficiently implemented.”\textsuperscript{1210}

According to the Australian Strategic and Technical Advisory Group on Antimicrobial Resistance Terms of reference, published in November 2014, the group will, in addition to the functions mentioned above, ensure “effective linkages between governments, industry, professional bodies, educational institutions and other key stakeholders.” The group also provides advice to the

According to portfolio budget statement 2015-2016, in the forthcoming year Australia will develop the National AMR Implementation Plan to support the National AMR Strategy. The Australian government also pledges to continue funding the Australian Commission on Safety and Quality in Health Care to establish national surveillance of AMR and antibiotic usage. The statement also stipulated the establishment “of a national surveillance system for antimicrobial resistance and antibiotic usage across hospital and community settings” as a deliverable of the Safety and Quality in Health Care program for 2015-2016.1212

Thus, Australia has taken actions conforming to the following recommendations by the World Health Organization (WHO): strengthening resistance tracking and laboratory capacity, strengthening infection control and prevention, regulating and promoting appropriate use of medicines, promoting cooperation and information sharing among all stakeholders.

During the compliance period Australia has taken steps aimed at fighting AMR in four of five areas defined by WHO. Thus, it has been awarded a score of +1.

Analyst: Andrei Sakharov

Brazil: +1

Brazil has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) as defined by the World Health Organization (WHO).

On 19 November 2014, ANVISA suspended the distribution, sale and use of D713005 Lot Aldosterin medicine (Spironolactone 100 mg tablet with 16 tablets). The product was manufactured by Aspen Pharma Ind. Farm. Ltda and is valid until April 2016. The measure was taken because of the unsatisfactory results obtained in the description of sample essays and appearance.1213 The action refers to regulating and promoting appropriate use of medicines.

On 27 November 2014, Brazil closed first stage of restructuring Haiti’s public health. Brazil financed the reconstruction of two specialized laboratories in epidemiological surveillance, responsible for carrying out the main examinations necessary for the identification of relevant diseases such as malaria, dengue, tuberculosis, leptospirosis and cholera, and the vector control and insects. Brazil also made other measures aimed at health surveillance, such as hiring of professionals specializing in the prevention and control of communicable diseases. Other actions were promoted by supporting vaccination campaigns and sending vaccines — Brazil sent nearly six million doses to the Caribbean

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island, worth about USD1.9 million. The actions refer to strengthening resistance tracking and laboratory capacity; strengthening infection control and prevention.

On 1 December 2014, ANVISA updated antimicrobial list prescription. New substances on the list are Besifloxacin, rifabutin, Ceftarolima fosamila, dactinomycin, mitomycin, Nitrofuralt, Sulfacetamide Chlorphenesin and Gramicidin. The new determination came into force from 16 December 2014. The purpose of the standard is to reduce the damage due to the misuse of antibiotics. Incorrect use of these products leads to increased microbial resistance and the medium term makes them less effective. The action refers to regulating and promoting appropriate use of medicines.

On 5 December 2014, the ministers of health of Brazil, Russia, India, China and South Africa (BRICS) developed joint strategy to expand supply of medicines to patients with the disease in the BRICS and in low-income countries. The action refers to promoting cooperation and information sharing among stakeholders.

On 8 December 2014, ANVISA registered two generics which can be use as alternative to Nitazoxanide and Mebeverine Hydrochloride. The registration of generics results in drop in prices of medicines and provides both patients and physicians with variety of options for treatment. The action refers to fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools.

On 10 December 2014, the Inter-American System Rapid Alerts (Siar) was launched during the meeting of the Organization of American States Permanent Council on 10 December in Washington. ANVISA contributed technical information and financial resources to develop the project. Siar is a tool to exchange information and experience on the safety of consumer products and their impact on health. The action refers to strengthening infection control and prevention; promoting cooperation and information sharing among all stakeholders.

On 1 January 2015, ANVISA granted a registration application for a new drug to treat hepatitis C, the Daklinza (daclatasvir). Thus, physicians and patients now have another treatment option for the disease. The action refers to fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools.

On 20 January 2015, the law 13,097/15 was introduced and includes several innovations to the work of health surveillance in Brazil. It changes the way of doing the sanitary regulation in the country, giving more flexibility to ANVISA and the National Health Surveillance System to prioritize risk

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situations. The standard will also allow an expansion of the laboratory network that perform control and supervision of analyzes for the health surveillance, that because ANVISA or own official laboratories may accredit other public or private laboratories for this purpose.\textsuperscript{1220} The action refers to strengthening resistance tracking and laboratory capacity; strengthening infection control and prevention.

On 5 February 2015, ANVISA approved the new standard which requires that in case the agency does not perform the evaluation of the drug clinical development briefings containing clinical trials projects to be held in Brazil within 90 days, the study can be started, if approved by the bodies that assess the ethical aspects of research. Thus, clinical trials which are necessary for the development of new medicines and health products gained more agility in the country.\textsuperscript{1221} The action refers to fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools.

On 19 February 2015, the National Health Fund transferred USD16.2 million to the state and municipal health funds, which are used for investments in the public health network. These investments are allocated to the construction of the health clubs and the UBS Renewal Program and the basic health units.\textsuperscript{1222} The action refers to strengthening resistance tracking and laboratory capacity and strengthening infection control and prevention.

On 25 February 2015, the Ministry of Health announced it would select 50 people between 18 and 26 years of age to monitor and supervise the public health policies on HIV/AIDS. The goal is to form a group to participate in the New Training Course Leaders Population Key Aiming at the Social Control of the Unified Health System. The course is performed by the Sexually Transmitted Disease, AIDS and Viral Hepatitis Surveillance Secretariat of Health of the Ministry of Health, together with the UNAIDS, UNICEF and the United Nations Educational, Scientific and Cultural Organization.\textsuperscript{1223} The action refers to promoting cooperation and information sharing among stakeholders.

On 9 March 2015, the Health Minister Arthur Chioro, launched a country-wide vaccination campaign against human papillovirus.\textsuperscript{1224} The action refers to strengthening infection control and prevention.

On 10 December 2014, Brazil made a dummy for Ebola suspected case in Port of Santos. The objective was to put into practice the developed protocol for this situation, serving as training institutions involved in conditions simulating a real case.\textsuperscript{1225}

On 4 December 2014, it was reported that Brazil’s government had provided more than USD9.76 million to help efforts against Ebola in Guinea, Liberia, and Sierra Leone. The donation was allocated to multiple UN divisions. Half the amount was given to the WHO to provide care to infected populations and support prevention efforts. The UN High Commissioner for Refugees received USD2.54 million for basic services including healthcare. The World Food Programme received USD1.76 million to provide food. The remaining USD590,000 was channelled into the UN Mission for Ebola Emergency Response. According to a statement by the Foreign and Health Ministries, Brazil had provided another USD1.17 million to WHO and the Pan American Health Organization in November for the same purpose.\textsuperscript{1226}

Brazil has taken actions to fight AMR in all five areas defined by WHO. Thus, it is awarded a score of +1.

\textit{Analyst: Sergey Barok}

\textbf{Canada: +1}

Canada has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

On 13 April 2015, the government of Canada announced it would invest CAD4 million to support researchers to work with international partners on projects that focus on identifying new targets for antimicrobial drug development, new approaches to treating drug-resistant bacterial infections, and methods for preserving the effectiveness of existing antibiotics.\textsuperscript{1227}

On 17 April 2015, Health Canada proposed new measures and strengthen regulations to minimize the global emergence and spread of AMR, and conserve the effectiveness of available antimicrobials.\textsuperscript{1228} These actions will protect public health and food safety. These initiatives are part of the government’s recently released Action Plan on Antimicrobial Resistance (AMR) and Use in Canada.\textsuperscript{1229} This plan refers to actions in all five areas.

During the compliance period Canada has taken actions to fight AMR in five areas defined by WHO. Thus, it has been awarded a score of +1.

\textit{Analyst: Vitaly Nagornov}

\textbf{China: +1}

China has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in four areas defined by the World Health Organization (WHO).

On 3 December 2014, members of the China-aided Ebola centre in Liberia reported that they could start to receive and diagnose suspected Ebola patients. The medical treatment procedures includes

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patients’ reception, diagnosis and nursing care to be provided in accordance with a carefully designed process and a very strict standard. Thus China cooperates with Liberia to fight AMR.

On 14 January 2015, the China Food and Drug Administration stated that it “approved the production of the first inactivated poliomyelitis vaccine made from Sabin strains (single component), which was researched and developed by the Institute of Medical Biology, Chinese Academy of Medical Sciences. The vaccine protects children against infecting poliovirus by injection. The launch of the Sabin IPV will be critical to eradicating poliomyelitis in China.” This fact demonstrates that China develops new vaccines to fight AMR.

On 31 January 2015, China’s first laboratory to study highly contagious and fatal diseases opened in Wuhan city, which provides scientists possibility to research live Ebola viruses. China thus strengthened its laboratory capacity to fight AMR.

On 2 March 2015, Botswana and China signed a protocol on the 14th China Medical Team to work in Botswana. Botswana Minister of Health Dorcas Makgato said China will also provide scholarships for short- and long-term training in different health programs, particularly in medicine, nursing, laboratory sciences, HIV/AIDS and pharmacy. China thus provides Botswana with specialized medical personnel to promote cooperation, and shares information in health sphere with them.

On 11 March 2015, China opened a biosafety laboratory in Sierra Leone to support lab testing for contagious diseases and provide a foundation for redeveloping Sierra Leone’s health system. This lab will play a major role in preventing and controlling Ebola. China thus promotes cooperation and information sharing with Sierra Leone specialists, and strengthens infection control and prevention.

On 27 March 2015, at a China-Africa health roundtable director of the Foreign Ministry’s African Affairs Department, Lin Songtian stated that China will help the African Union to construct a disease prevention and control centre, which will join epidemic surveillance facilities in each member countries. It will improve Africa with its public health system post-Ebola. Consequently China not only promotes cooperation with the African Union, but also strengthens infection control and prevention in African countries.

During the compliance period China has taken actions to fight AMR in four areas defined by WHO. Thus, it has been awarded a score of +1.

Analyst: Svetlana Nikitina

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France: +1

France has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in four areas defined by the World Health Organization (WHO).

France supports a large number of projects on resistance to Ebola and other viruses in Guinea and other African countries. In 2015 France continues financing retrovirus actions to eradicate Ebola. This action refers to strengthening resistance tracking and laboratory capacity, as well as strengthening infection control and prevention.

On 4 December 2014, France proposed special network to serve as a host panel to unite researchers and health authorities to discuss AMR. Also the Institute Pasteur’s Ebola Task Force is fighting the virus on the ground and in the laboratory in France, together with WHO and nongovernmental organizations including Médecins Sans Frontières and the Red Cross and Red Crescent. This action is in line with promoting cooperation and information sharing among all stakeholders, as recommended by WHO.

On 27 January 2015, the French Minister of Finance and Public Accounts, the French Minister of State for Development and Francophonie, and the Bill and Melinda Gates Foundation announced the innovative mechanism aimed at increasing funding to support vaccination and immunization programs and to improve the efficiency of the health sector in the Sahel region. The pilot initiative will amount to EUR100 million over the period 2016-2020. This action refers to fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools.

During the compliance period France has taken actions to fight AMR in four areas defined by the WHO. Thus, it has been awarded a score of +1.

Analyst: Vitaly Nagornov

Germany: +1

Germany has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) as defined by the World Health Organization (WHO).

On 10 December 2014, the German Ministry of Health posted on its website a report concerning the main measures already taken against Ebola. Among them are measures that correspond with the following guidelines:

• In the course of strengthening resistance tracking and laboratory capacity 24-hour hotline was set up at the Robert Koch Institute, the Bernhard Nocht Institute for Tropical Medicine and the

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Institute for Virology of the University of Marburg provide a 24-hour emergency service for diagnosis-related questions;

• In the course of strengthening infection control and prevention all airports have special emergency plans and special spaces, the Robert Koch Institute cooperated with the health authorities of the Federal Länder and the scientific medical societies to draw up the Ebola virus disease framework;

• In the course of promoting cooperation and information sharing among all stakeholders a special human pathogen information sheet about the Ebola virus was issued, regular training and simulation exercises are conducted under the supervision of the competent health authorities (for example, by Robert Koch Institute, the National Association of Statutory Health Insurance Physicians, the German Hospital Federation and the Federal Union of German Associations of Pharmacists).

On 26-27 January 2015, Germany hosted the GAVI pledging conference to replenish the fund for 2016-2020.\textsuperscript{1242} (GAVI is an international organization bringing together the public and private sectors to create equal access to new and underused vaccines for children living in the world’s poorest countries.) On the whole, USD7.539 billion were pledged. From 2016 to 2020, there will be EUR600 million just from the increases in German support. These funds are also intended to support efforts to develop an Ebola vaccine and establish basic healthcare structures in the affected countries.\textsuperscript{1243} Thus, the event can be referred to fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools.

Germany has taken actions to fight AMR in four areas defined by WHO. Thus, it is awarded a score of +1.

\textit{Analyst: Sergei Titov}

\textbf{India: +1}

India has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) as defined by the World Health Organization (WHO).

On 10-13 November 2014, in Jaipur at the Regional Meeting on Antimicrobial Resistance India and 11 other member states of the South-East Asian Region, pledged to carry out research studies in order to assess trend of AMR and address local challenges and to make the communities aware of the particular risks connected with self-medication. This action strengthens infection control.

According to the conclusions of the meeting, India will use social institutes to raise awareness of the issue of AMR, which promotes information sharing.

The countries have to create a system to test and assess the quality of drugs, recovery methods and conditions of sale to promote appropriate use of medicines.\textsuperscript{1244}

Acting within the WHO Regional Office for South-East Asia, the Indian government published booklets on prevention of antibiotic resistance\textsuperscript{1245} and on how to use antibiotics rationally\textsuperscript{1246} in order to promote both appropriate use of medicines and information sharing.

On 27 February 2015 the Department of Community Medicine and Family Medicine (All India Institute of Medical Sciences) published an article that stated that according to the recommendation of the National Technical Advisory Group on Newer Antimicrobials four new vaccines would be included in the Universal Immunization Program.\textsuperscript{1247} The establishment of National Technical Advisory Group was an obligation of the government of India (National Centre for Disease Control) according to the incumbent National Policy for Containment of Antimicrobial Resistance and aimed at fostering research and development of new drugs and vaccines.\textsuperscript{1248}

India’s Ministry of Health and Family Welfare and Department of Health and Family Welfare announced that 12 medical college labs are collaborating with the National Centre for Disease Control and nine with the Indian Council of Medical Research.\textsuperscript{1249} The Ministry of Health set up a goal to establish 10 medical college labs by the year of 2015.\textsuperscript{1250} Thus, India is strengthening its laboratory capacity.

India has acted to fight AMR in the five areas defined by WHO. Thus, it is awarded a score of +1.

\textit{Analyst: Anastasiia Matiukhina}

**Indonesia: 0**

Indonesia has partially complied with the commitment on health. It has taken some actions to fight antimicrobial resistance (AMR) as defined by the World Health Organization (WHO).

On 24 March 2015, Indonesian Vice-President Jusuf Kalla and Minister of Health Nila F. Moeloek launched the National Strategy of Tuberculosis Control for 2015-2019. The strategy provides for a number of measures to address tuberculosis, including those related to tackling drug resistance. The measures included in the strategy correspond with the following areas defined by WHO: strengthening resistance tracking and laboratory capacity; strengthening infection control and prevention; and regulating and promoting appropriate use of medicines.\textsuperscript{1251}

Indonesia has taken actions to fight AMR in three areas defined by WHO. Thus, it is awarded a score of 0.

*Analyst: Andrey Shelepov*

**Italy: +1**

Italy has fully complied with the commitment on fighting antimicrobial resistance (AMR). In cooperation with the European Union it maintains several policies aimed at fighting AMR.

The Italian Ministry of Health, in accordance with the EU guidelines for the control of antibiotic resistance in the veterinary field, guarantees the application of the EU requirements in development and production of veterinary medicines containing antibiotics, provides instructions to ensure the prudent use of antibiotics, and monitors educational and outreach initiatives to inform farmers and veterinarians on the conscious use of antibiotics and chemotherapeutics. It is also taking steps to make available national guidelines on prudent use of antibiotics in veterinary.\(^{1252}\)

The Experimental Veterinary Institutes (Istituti zooprofilattici sperimentali) network serves as an important mechanism of surveillance for the National Health Service of Italy, monitoring animal diseases and of their transmissibility to humans and supporting veterinaries through providing, upon request, specific diagnostic services for antimicrobial resistance assessment.\(^{1253}\)

Thus, Italy takes actions which correspond with the following recommendations by the World Health Organization (WHO): strengthening resistance tracking and laboratory capacity, strengthening infection control and prevention, regulating and promoting appropriate use of medicines, and promoting cooperation and information sharing among all stakeholders.

During the compliance period Italy has taken steps aimed at fighting antimicrobial resistance in four out of five areas defined by WHO. Thus, it has been awarded a score of +1.

*Analyst: Andrei Sakharov*

**Japan: +1**

Japan has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

Japan surveys 110 infectious diseases including seven AMR bacterial infections using National Epidemiological Surveillance of Infectious Disease.\(^{1254}\) This action refers to strengthening resistance tracking and laboratory capacity, as well as strengthening infection control and prevention.

On 18 December 2015, the UK-Japan Workshop on AMR was held in Tokyo. The workshop brought together expert scientists, clinicians, academics and veterinarians from the UK and Japan to discuss this threat and to explore ways of mutually tackling antimicrobial resistance in a joint

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This action refers to the promoting cooperation and information sharing among all stakeholders action area defined by WHO.

As of 1 January 2015, about 1,600 hospitals are participating in the Japan Nosocomial Infections Surveillance to fight AMR. It is organized by Ministry of Health Labour and Welfare and the National Institute of Infectious Diseases. This action refers to the area of fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools, and also with regulating and promoting appropriate use of medicines especially among children.

During the compliance period Japan has taken actions to fight AMR in five areas defined by WHO. Thus, it has been awarded a score of +1.

**Korea: 0**

Korea has partially complied with the commitment on health. It has taken some of the five actions to fight antimicrobial resistance (AMR) defined by the World Health Organization (WHO).

On 14-15 May 2015, Korea hosted the 10th International Symposium on Antimicrobial Agents and Resistance to discuss strategies and actions. The conference was supported by the Seoul-based Asia Pacific Foundation for Infectious Diseases.

On 10-12 June 2015, Korea hosted the sixth Annual Meeting of the Advisory Group on Integrated Surveillance of Antimicrobial Resistance. On of the objectives of the meeting was to “develop a five-year strategic plan following the adoption of the WHO Global Action Plan on Antimicrobial Resistance at the Sixty-eighth World Health Assembly in May 2015.”

During the compliance period Korea took steps to fight AMR through promoting cooperation and information sharing among all stakeholders, which corresponds to one of the five areas defined by WHO. Thus, it has been awarded a score of 0.

**Mexico: 0**

Mexico has partially complied with the commitment on fighting antimicrobial resistance (AMR). Several measures were adopted by Mexico in this way.

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Individual Mexican specialists as well as Mexican Society of Infectious Diseases and Clinical Microbiology supported the World Alliance Against Antibiotic Resistance declaration against antibiotic resistance.\textsuperscript{1262} The declaration advocates 10 actions aimed at adopting proactive strategies to preserve efficacy of antibiotics. These actions include promoting awareness of all the stakeholders of the threat represented by AMR; elaborating in each country a national plan for the containment of antibiotic resistance; development and implementation of new rapid, cost-effective and accurate diagnostic tests to aid in distinguishing bacterial and nonbacterial etiologies; and stimulating research of new drugs and vaccines.

The priority research areas indicated in the annual work program of Mexican National Institute of Public Health for 2015 include antimicrobial resistance.\textsuperscript{1263}

On 3 February 2015, during his visit to Tlaxcala state Mexican Minister of Health Mercedes Juan inaugurated new units of State Laboratory of Public Health.\textsuperscript{1264} Medical equipment of new units will help to address health risks and strengthen epidemiological surveillance. A sum of USD2.9 million was allocated to expand the State Laboratory of Public Health areas of work by including molecular biology, epidemiology and bacterial control spheres. The laboratory will provide an opportunity to detect contagions such as HIV and rotavirus.

On 16 February 2015, new rules on adoption of biotech pharmaceuticals were approved,\textsuperscript{1265} including the requirements on control of biotech pharmaceuticals production. According to new rules all biotech pharmaceuticals should be approved by Committee on New Molecules and Subcommittee on Evaluation of Biotech Products comprising of specialists and researchers in biotechnologies to test safety, quality and efficiency of new pharmaceuticals.

During the compliance period Mexico has taken steps aimed at fighting antimicrobial resistance in less than four out of five areas defined by the World Health Organization. Thus, it has been awarded a score of 0.

\textit{Analyst: Elizaveta Safonkina}

**Russia: 0**

Russia has partially complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

In December 2014, an aid to Russia’s Minister of Healthcare participated in the WHO high-level meeting on AMR in Stockholm, where the development of a Global Action Plan on AMR was discussed.\textsuperscript{1266}

In January 2015, representatives of the Ministry of Healthcare participated in the meeting of the APEC Working Group on Healthcare in Philippines. A special working plan for 2015 was adopted by the Asia Pacific Economic Co-operation (APEC) forum. Russia supported the need of developing a new strategic cooperation plan after 2016 and a roadmap on implementation of the Healthy Asia-Pacific 2020 initiative. Russia supported APEC economies’ initiatives on universal health coverage and infectious diseases control, including AMR.\(^{1267}\)

On 11 March 2015, the Minister of Healthcare adopted an order creating a special position within the ministry — senior specialist on clinical microbiology and antimicrobial resistance.\(^{1268}\)

Russia has taken actions to fight antimicrobial resistance in less than four out of five areas defined by the WHO. Thus, it has been awarded a score of 0.

*Analyst: Mark Rakhmangulov*

**Saudi Arabia: +1**

Saudi Arabia has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

On 2 January 2015, Muhammad bin Ali Alhayaza, Minister of Health, announced reshuffling leadership of the Command and Control Centre, and activating it to combat Corona virus, Ebola and others infectious diseases. The centre will undertake control of all infectious diseases and the early preparation for the protection against them.\(^{1269}\) This action refers to strengthening resistance tracking and laboratory capacity, as well as strengthening infection control and prevention of risks.

On 3 December 2014, Adel Faqih, Acting Minister of Health, met with experts from WHO and the United States Centers for Disease Control to develop the responding to the risks of coronavirus. This comes within the framework of the ongoing cooperation between the Ministry of Health and the international health organizations aiming at combating coronavirus.\(^{1270}\) This action refers to promoting cooperation and information sharing among all stakeholders.

On 16-18 May 2015, the Saudi Health Exhibition was held in Riyadh. The second session was on the microbes resisting antibiotics and discussed several important topics about the burden of antibiotic-resistant microbes, including a lecture on how to overcome antibiotics resistance and on the antibiotics management program.\(^{1271}\) This action is in line with fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools area defined by WHO.

On 1 February 2015 the Ministry of Health launched a three-month vaccination campaign against pneumococci. The PCV13 vaccine is secure and provides broader protection against the most

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\(^{1270}\) Fruitful Cooperation between MOH, WHO, and CDC Targeting Control of MERS-CoV http://www.moh.gov.sa/en/Ministry/MediaCenter/News/Pages/News-2014-12-03-001.aspx

common and serious types than the previous vaccines due to antimicrobial resistance measures.\textsuperscript{1272} This action is in line with fostering innovation and research and development of new vaccines, diagnostics, infection treatment options and other tools area defined by WHO, and also with regulating and promoting appropriate use of medicines especially among children.

During the compliance period Saudi Arabia has taken actions to fight antimicrobial resistance in five areas defined by WHO. Thus, it has been awarded a score of +1.

\textit{Analyst: Vitaly Nagornov}

\textbf{South Africa: +1}

South Africa has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

South Africa’s Antimicrobial Resistance National Strategy Framework 2014-2024 provides for four objectives:

\begin{itemize}
  \item Strengthen, coordinate and institutionalise interdisciplinary efforts;
  \item Optimize surveillance and early detection of antimicrobial resistance;
  \item Enhance infection control and prevention;
  \item Promote appropriate use of antimicrobials in human and animal health.\textsuperscript{1273}
\end{itemize}

During the compliance period South Africa has taken actions to fight antimicrobial resistance in four areas defined by WHO. Thus, it has been awarded a score of +1.

\textit{Analyst: Lyudmila Tarasenko}

\textbf{Turkey: +1}

Turkey has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

On 19 November 2014, the Turkish Ministry of Health and the Istanbul Provincial Health Directory organized a symposium for medical and academic societies aimed at raising awareness on the misuse and overuse of antibiotics. Ali Alkan, representative of the Ministry of Health, said that there was an increasing consumption of antibiotics between 2007 and 2013, and the government had taken measures to promote their adequate use to avoid stronger resistance.\textsuperscript{1274} Thus, Turkey took actions in regulating and promoting appropriate use of medicines.

On 15 April 2015, the Ministry of Foreign Affairs announced measures taken by Turkey to help fight the Ebola outbreak. These include delivering medical supplies worth TRY2.5 million to Guinea, Sierra Leone and Liberia, and granting grant USD1 to the mechanism established by the African Union to support the fight against the Ebola virus (Africa Union Support to Ebola Outbreak in West

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\end{itemize}
Thus, Turkey took actions in strengthening resistance tracking and laboratory capacity, as well as strengthening infection control and prevention.

On 23 April 2015, Minister of Health Mehmet Müezzinoğlu participated in the World Malaria Day in Saudi Arabia, organized in the cooperation with the Islamic Development Bank. One of the goals of this event was delivering the Turkish experience in implementing its “Malaria Elimination Program.” Thus, Turkey took actions in promoting cooperation and information sharing among all stakeholders.

Turkey has acted to fight AMR in four areas defined by WHO. Thus, it is awarded a score of +1.

** Analyst: Nadezhda Sporysheva**

**United Kingdom: +1**

The United Kingdom has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

On 2 September 2013, the UK Department of Health published the Five-Year Antimicrobial Resistance Strategy 2013 to 2018, providing for actions in all five areas defined by WHO.1277

According to the annual progress report and implementation plan published on 11 December 2014, progress has been achieved on all action areas defined in the Antimicrobial Resistance Strategy.1278 In particular, the Public Health England (PHE) established a new system enabling hospital laboratories that submit data on resistance to PHE to interrogate their own local data. PHE also contributes data on antibiotic resistance and prescribing to pan-European surveillance, and works with WHO to support development of a Global Action Plan to tackle antibiotic resistance.1279

The United Kingdom has taken actions to fight AMR in five areas defined by WHO. Thus, it is awarded a score of +1.

** Analyst: Andrey Shelepov**

**United States: +1**

The United States has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).
On 23 March 2015, the U.S. Department of Health and Human Services announced USD31 million arrangement with Emergent BioSolutions Inc. that will develop an improved anthrax vaccine to provide protection in fewer doses and with lower costs than currently used vaccine.  

This action fosters innovation and research and development of new vaccines.

On 27 March 2015, the White House released the National Action Plan for Combating Antibiotic-Resistant Bacteria. The aims of the plan by 2020 include creating detect network of antibiotic resistance regional laboratories, improving international cooperation and capacities for antibiotic resistance prevention and control, supporting research and development for new antibiotics and other drugs, as well as vaccines, reducing the inappropriate antibiotic use and eliminating the use of medically important antibiotics for growth stimulation in animals. Thus, this action contributes to all five areas defined by WHO.

On 31 March 2015, the Office of the Assistant Secretary for Preparedness and Response of the US Department of Health and Human Services granted USD12 million to BioCryst Pharmaceuticals to develop a promising experimental medicine for Ebola. This action fosters innovation and research and development of new vaccines.

During the period under review, the United States has taken steps to fight AMR in all five areas defined by WHO. Thus, it has been awarded a score of +1.

Analyst: Tatiana Lanshina

European Union: +1

The European Union has fully complied with the commitment on health. It has taken actions to fight antimicrobial resistance (AMR) in five areas defined by the World Health Organization (WHO).

On 17 November 2014, the new aid was announced by Christos Stylianides, EU Ebola Coordinator and Commissioner for Humanitarian Aid and Crisis Response. New funding of USD36 million was made by the European Commission to fight Ebola including improvement of local health facilities and provision of early detection and public awareness measures in the affected countries. These measures will strengthen infection control and prevention.

On 18 November 2014, the European Commission confirmed USD199 million funding for a multi-sectoral research program until 2020 to address Ebola-related challenges such as vaccines development, clinical trials, storage and transport, as well as diagnostics and treatments to tackle Ebola. The European Commission also announced that the first projects are expected to begin in early 2015. These projects will assess the safety of several potential vaccines and the level of

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protection they offer against the disease. These measures will foster innovation and research and development of new vaccines, diagnostics and infection treatment options.

To stop the Ebola epidemic from spreading further, mobile laboratories for early detection of the virus are deployed by the European Union in the affected region. For example, on 4 December 2014, one more mobile laboratory was deployed to Guinea with support of the EU Civil Protection Mechanism. These measures will strengthen laboratory capacity.

On 26 February 2015, the European Commission also published a progress report on its five-year Action Plan on Antimicrobial Resistance adopted in 2011. Among the new measures there is the commitment of the European Commission to develop a strategic approach to the pollution of water by pharmaceuticals by September 2015. There is also confirmed the commitment of the European Commission to fund USD28 million for HIV vaccine research in 2015. These measures will foster innovation and research and development of new vaccines, diagnostics and infection treatment options.

On 26 February 2015, the European Commission announced a USD1.1 million prize to the person or team that develops a rapid test to tell whether a patient needs to be treated with antibiotics or not. The aim of this prize was to stop overuse of antibiotics and prevent the growing antimicrobial resistance. These measures will help to regulate appropriate use of medicines.

On 2 April 2015, the European Parliament published the draft report “Safer Healthcare in Europe: Improving Patient Safety and Fighting Antimicrobial Resistance.” The first reading of the document was planned on 18 May 2015. The document contains a wide range of measures including regulating and promoting appropriate use of antibiotics, launching awareness campaigns on the rational use of antibiotics, engaging in a dialogue with all stakeholders and develop a EU strategy for patient safety. These measures will help to regulate appropriate use of medicines and promote cooperation and information sharing among all stakeholders.

During the compliance period the European Union has taken actions to fight AMR in five areas defined by WHO. Thus, it has been awarded a score of +1.

Analyst: Mark Rakhmangulov