



Opinion piece from Ministry of Health and Social Affairs

Sweden's fightback against AMR

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Opinion piece in Adjacent Government, October 28, 2016. Gabriel Wikström, Swedish Minister of Healthcare, Public Health and Sports, discusses the need for leadership and action in the global fightback against AMR.

For the first time, antimicrobial resistance (AMR) is being actively discussed on a much wider stage than just by health experts and scientists. A high-level meeting on AMR was recently held during the UN General Assembly – with good reason.

In 1945, Alexander Fleming held his Nobel Lecture in Stockholm City Hall, having recently won the Nobel Prize in Medicine for the discovery of penicillin. "One note of warning," he said. "It is not difficult to make microbes resistant to penicillin in the laboratory [...] and the same thing has occasionally happened in the body."

Unfortunately, far too many decades passed before enough momentum had gathered for this problem to be addressed.

Sweden has a long tradition of working to combat AMR. A combination of highly engaged individuals and a coordinated 'One Health' policy has largely been successful. Today, the situation in Sweden is relatively favourable in both the human and animal sectors. But much still remains to be done. In a globalised world, people, animals, food and other goods cross borders every day. This means that health threats do as well.

The Alliance of Champions

A growing momentum – and an increasing number of allies in a growing number of countries – in combination with hard work eventually led to the

Member States of the World Health Organization (WHO) adopting a global action plan on AMR in May 2015. At the same time, a call for a high-level meeting in the UN General Assembly was made, and an initiative taken by Sweden and the United Kingdom resulted in founding the Alliance of Champions – including over a dozen health ministers – to work towards the high-level meeting and the implementation of the global action plan.

Later that year, the UN Food and Agriculture Organization and World Organisation for Animal Health adopted the same global action plan. And we eventually brought about the high-level meeting.

Is AMR worthy of such attention? Undoubtedly, yes. The AMR review by Lord O'Neill showed that by 2050, the number of deaths due to resistant microbes will have increased from about 700,000 per year today to around 10 million. This is more than the current annual death toll from cancer.

Importantly, we are also starting to get better data on the economic and social consequences of AMR. The World Bank recently published a report demonstrating that drug-resistant infections have the potential to cause a level of economic damage comparable to that caused by the 2008 financial crisis.

The report also shows that low- and middle-income countries are being hit the hardest.

National action plans are key

This is part of the reason why the fight against AMR is so closely connected to the work of implementing the 2030 Agenda for Sustainable Development. And not just Goal 10 on reducing inequalities within and among countries, but more particularly Goals 1, 2 and 3 on poverty, food security and health. Naturally, other goals are also connected to this work.

So, what do we need to do? An integral part of the work ahead is the development and implementation of the national action plans that all countries have committed to. Specific measures need to be adapted to different countries' varying circumstances and across different sectors, with a clear One Health perspective. Sweden, for example, recently adopted an updated national strategy to complement its existing action plan. The national action plans must be linked to the general development of strong health and veterinary systems. Strong systems are the only way we can ensure access to antibiotics for those in need and yet avoid excess and

unnecessary use.

Surveillance to inform public health action is an important part of health systems. The Public Health Agency of Sweden is contributing to the recently launched Global AMR Surveillance System via both WHO and bilateral cooperation. And a WHO Collaborating Centre was recently inaugurated at the Agency. Sweden is also involved in other efforts, and other countries are doing their part, for example, concerning funding for new antibiotics.

A long road ahead

We need to cooperate and provide support to other countries in order to tackle AMR. In this regard, the European dimension is valuable. The EU has been an important actor and provides a platform for European countries to exchange experience and coordinate amongst themselves. In addition, legislation in some crucial areas is partially decided at European level, for example in the agricultural and pharmaceutical sectors.

But everything currently being done to combat AMR is not the end, nor even the beginning of the end, of the battle. It is rather the start of a long period of hard work ahead of us. The resolution from the high-level meeting gives us a good foundation, and the ad hoc interagency coordination group and the Secretary-General's follow-up report to the General Assembly are essential parts of this.

Now, we just need to get out there and do it. Otherwise, the 2030 Agenda, or even more than that, will be at risk.

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Opinion piece from Ministry of Culture, Ministry of Health and Social Affairs, Ministry of Justice

Strengthen the right of LGBTQ people to be themselves

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Legislation must keep pace with developments in society. The Government therefore plans to implement changes that aim to offer the same conditions for everyone, regardless of their choice of partner and type of family, write five government ministers.

People have the right to be themselves in all areas of life. This includes the right to live with the person you love and to have your family formation treated with respect. Efforts to break old norms that limit people from fully living their lives must continue. This applies particularly to policies for the rights of those who identify as lesbian, gay, bisexual, transgender or queer (LGBTQ people).

Proactive organisations in civil society and courageous politicians before us have helped to move the situation of LGBTQ issues in the right direction. Society is constantly evolving, and perceptions of parenthood, family, gender and the rights of the child in the family evolve with it. Today, there are numerous family constellations other than the traditional nuclear families: single, friends with children, step-families or families with several mothers or fathers. Our social systems must also meet the needs of these families.

Legislation and its application must keep pace with developments in society. It must accommodate various ways of forming a family and ensure the right of all people to good health. The Government is therefore planning to implement changes that aim to offer the same conditions for everyone, regardless of the choice of partner and type of family that each of us chooses

to live with:

- Parental support and family law issues in social services need to be more modern, equitable and gender equal. Family constellations vary and have different needs. In light of this, the Government has concentrated responsibility for these issues at the Family Law and Parental Support Authority. An important task for the Authority is producing knowledge support for relevant actors so that these, in turn, can provide better support and guidance to parents and children.
- Families can take many different forms, but when the parental insurance system was designed, it was still based on the idea of a nuclear family with two co-habiting parents. The living conditions of families with children have changed over time.

More than one in five children grows up in a family constellation other than one including both their biological parents. The inquiry on parental insurance that is now to be conducted has therefore been tasked with identifying problems and investigating possibilities for facilitating the use of parental insurance by different family constellations.

- There are currently large health disparities between different groups in society. To close the avoidable health gaps within a generation, the Government has appointed a commission for equitable health. We know that LGBTQ people in general have poorer health and young LGBTQ people are particularly vulnerable with regard to mental health. In its work, the commission will therefore take into account health disparities between LGBTQ people and the rest of the population.
- The treatment of LGBTQ people in health and medical care is unequal across the country. Unfortunately, in their contacts with different authorities, individuals are sometimes doubted and treated ignorantly. This leads to LGBTQ people in some cases refraining from seeking care.

The National Board of Health and Welfare has been tasked with analysing care and treatment of intersex people (persons whose gender cannot be determined due to biological reasons) and implementing measures in the various areas of activity of social services. The objective is to raise awareness of LGBTQ people's living conditions and the various forms discrimination can take. The National Board of Health and Welfare and the Public Health Agency of Sweden will also review how issues concerning the health of young transgender people could be highlighted within the

framework of other mental health initiatives.

- There have been several high-profile cases where information was registered in the population registration regarding a person who had changed gender in such a way that the link between individuals, such as a child and a parent, was lost. The Swedish Tax Agency has now been tasked with describing what has been done or will be done to prevent problems that may arise.
- Current regulations regarding paternity and parenthood are based on heterosexual marriage. There is reason to review whether the regulations should be updated and for this reason, the Government intends to appoint an inquiry in the spring to conduct a review of the legislation.

These are some of the initiatives the Government is now implementing. We know there is a lot left to do. Discrimination, inequitable treatment and violence are still part of daily life for many LGBTQ people all around the country. This is never acceptable. The Government will continue its efforts to strengthen the possibility for LGBTQ people to fully be themselves in all areas of life.

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