Towards a Results-Oriented Political Declaration from the UN General Assembly High-level Meeting on Antimicrobial Resistance 2024

Effective antibiotics are key for human and animal health and should be viewed as common global goods. The high-level meeting on antimicrobial resistance (AMR) at this year’s UN General Assembly provides world leaders the opportunity to maintain political attention, and its political declaration can be instrumental in leveraging Member States’ commitment to counteract the increasing development and consequences of AMR in the world.

Preventive measures – such as clean water and proper sanitation, infection control, vaccines, sustainable production systems for animals and food as well as good animal husbandry – are essential to counteract AMR. Moreover, we need responsible prescribing of antibiotics based on diagnostics and reliable surveillance, in addition to communications initiatives and behaviour insights. All such elements should permeate a political declaration on AMR for it to be meaningful. AMR is further an issue that cuts across several levels and sectors in society, and should be seen through a One Health lens. This should also be reflected in the declaration in order to mirror the complex context in which the issue resides. Key here is to implement the many already existing commitments to prevent AMR in legislation, action plans, codes of conduct and standards at national, regional and international levels.

Sweden has three focus areas for the processes and dialogues leading up to the high-level meeting in September.

Global coordination, governance and accountability – the joint infrastructure to secure progress

Building on the consensus and commitments of 2016, the new declaration would benefit from new language and more concrete, time-bound and measurable objectives and targets. The declaration could include a few well-chosen global targets while Member States could commit to setting national targets, based on local needs and conditions in line with the country’s National Action Plan (NAP). A framework for monitoring of progress could be developed by a dedicated task force with the remit to present a proposal to the UNGA in, for example, two years time.

The declaration should call for swift establishment of an independent evidence panel, as proposed to the UN Secretary-General in 2019 by the ad hoc Interagency Coordination Group on AMR, to assess existing evidence and make policy recommendations for limiting the development, spread and consequences of AMR, and to identify significant research gaps.
The declaration could mandate and define the role of the Quadripartite in global cooperation. Multilateral organisations such as the United Nations Development Programme (UNDP), the World Bank and the United Nations Children’s Fund (UNICEF) whose responsibilities are linked to AMR could also be encouraged to cooperate closer with the Quadripartite on relevant aspects of their core missions such as poverty reduction, water, sanitation and hygiene, sustainable food production systems, and preparedness.

**Assuring access to new and existing antibiotics, and stimulating research and innovation of novel antibiotics**

Alternative reimbursement models as incentives, delinking reimbursement for antimicrobials from volume- and price-based sales is a key principle which was included in the 2016 declaration and should be further implemented. Enhanced cooperation could contribute to increased predictability and incentives to invest in research and development of novel treatments. A potential concrete goal to recommend is a specific number of novel antibiotics to combat relevant global infections within a certain time span, for example “ten by 2040”. Similar targets could be set for vaccines and diagnostics.

Agreements in connection to research and development incentives for novel antibiotics should include initiatives to ensure availability in low- and middle-income countries, and measures on responsible use. Additional initiatives to ensure reliable access to existing antibiotics, vaccines and diagnostics should also be supported.

**Funding for implementation of National Action Plans**

Implementation of NAPs is key to whether there will be reliable access to effective antibiotics in the future. Resource mobilisation must be promoted at national level. Only 11 per cent of the 177 Member States that, in line with the 2016 declaration have developed NAPs for AMR, have allocated budgetary resources for its implementation. In particular high- and upper-middle-income countries need to ensure resource allocations for the work. Resource-constrained countries also need support in their national efforts. Through coordination of catalytic, existing and possible new funding, including private sector, philanthropic organisations and development banks, capacity-building and implementation of NAPs in low- and middle-income countries can be leveraged.

AMR is affecting us all, all around the globe and hits low- and middle-income countries and the most vulnerable groups the hardest. We have the necessary tools in our hands. Under a shared vision in line with: Reliable access to, and responsible use of, effective antibiotics for humans and animals the efforts need to accelerate urgently through broad, global commitments – by all relevant sectors – to the declaration.