

CONTEXT

1. On 21 September 2016, during the 71st Session of the United Nations General Assembly (UNGA), Member States adopted the Political Declaration of the High-level Meeting on Antimicrobial Resistance (AMR) contained in Resolution A/RES/71/3.
2. In accordance with paragraph 15 of the resolution, the Secretary-General has established an ad hoc Interagency Coordination Group (IACG) on AMR, in consultation with the tripartite, which comprises the Food and Agriculture Organization of the United Nations (FAO), the World Organisation for Animal Health (OIE), and the World Health Organization (WHO). The Group is co-chaired by the UN Deputy Secretary-General and the Director-General of WHO and comprises high-level representatives of relevant UN agencies, other international organizations, and individual experts across different sectors. Three conveners were appointed to direct the group's work—Dr Junshi Chen, Dame Sally Davies, and Ms Martha Gyansa-Lutterodt.
3. The mandate of the IACG is to provide practical guidance on approaches needed to ensure sustained effective global action to address AMR, including options to improve coordination, taking into account the Global Action Plan (GAP) on AMR. The Group is a catalyst for action against AMR, assisting in mobilizing actors across all sectors through a multi-stakeholder process.
4. This work plan sets out the intended activities of the IACG between 2017 and 2019. It is firmly grounded in Resolution A/RES/71/3, takes into account the terms of reference of the Group¹ and the Global Action Plan on AMR, and is intended to add value above and beyond the work many others are currently undertaking, including within the UN system.
5. The Group will establish multiple ways of working, including teleconferences and face-to-face meetings. It will divide into subgroups, based on specific issues and questions, and will make requests to the tripartite and other groups and organizations, without assuming accountability for the work of others. The IACG may commission studies and reports to complement its deliberations, and it may hold open hearings.
6. The IACG agreed on the following principles to guide its work:
 - Ensuring that practical approaches are phased and stepwise
 - Ensuring that recommendations are based on utilization of existing tools across organizations and systems through collaboration and coordination, and avoiding redundancy
 - No apportioning of blame, but working to ensure that the AMR situation gets better, not worse
 - Working to support systems strengthening, promoting the dissemination of best practices and case studies, and access to services and health technologies
 - Committing to an inclusive and transparent process that is based on the GAP objectives and is aligned with the SDGs

¹ <http://www.who.int/antimicrobial-resistance/interagency-coordination-group/IACG-AMR-ToR.pdf?ua=1>

- Not duplicating the work of others.
7. The main objective of the IACG is, in accordance with the resolution, to issue a full report to the Secretary-General during the 73rd session of the UN General Assembly in 2019. This will be accompanied by a Secretariat report on progress in the implementation of the UN Resolution A/RES/71/3. The group will also submit an interim report to the Secretary-General in September 2018.
 8. The IACG is committed to engagement with stakeholders and to keeping Member States, stakeholders and the governing bodies of FAO, OIE and WHO fully apprised of its progress. It will provide briefings to UN Member States and other stakeholders, with regular calls for input to the website managed by the IACG Secretariat, and will publish an online report after each IACG meeting.

OBJECTIVES AND ACTIONS²

Objective 1. Champion and advocate for action against AMR at the highest political level, ensuring that the UNGA resolution, the GAP, and the SDGs are brought together in a cohesive manner.

- 1.1 Advise on ways to mainstream AMR action into the SDGs, in a way that addresses antibacterial resistance as well as resistance to antimicrobials used to treat other infectious diseases, such as HIV, TB, and malaria (HTM). Using a systems perspective, the IACG will take into account HTM experience, including lessons learned in awareness, advocacy, and community engagement, and will seek opportunities to collaborate with HTM initiatives where appropriate.
- 1.2 Recommend work in areas that are not currently addressed by the GAP, including: (1) ensuring sustainable production and access to existing and future antibiotics and other antimicrobial medicines, vaccines, and diagnostics, (2) addressing the need for innovative R&D models for new antibiotics and other antimicrobial medicines, vaccines, diagnostics, and other interventions across the spectrum of human, animal, and agricultural needs, including the delinkage approach and other models of innovative financing, (3) conducting basic and applied innovative R&D, including implementation and behavioral sciences, (4) identifying mechanisms for private-sector engagement (through such organizations as pharmaceutical umbrella organizations, food producers, etc.), (5) ensuring sustainable and safe food production, as part of responsible use, (6) putting greater focus on the management of waste that might contain antimicrobial residues or resistant microbes, and (7) other issues that may emerge during the course of this work.
- 1.3 Engage with a wide range of stakeholders through several mechanisms, including as external advisors to subgroups, open sessions, and web consultations.
- 1.4 Regarding National Action Plans (NAPs): (1) Review tools available to support NAPs, (2) identify gaps and barriers to implementation, especially in low- and middle-income countries, (3) seek partners to fill the gaps or strengthen existing systems, and (4) share best practices.

² From IACG's Terms of Reference: <http://www.who.int/antimicrobial-resistance/interagency-coordination-group/IACG-AMR-ToR.pdf?ua=1>

- 1.5 Engage with Member States through consultations and country visits to identify priorities and challenges.
- 1.6 An IACG Framework for Action, based on the UNGA resolution, the GAP and the SDGs, will be used to inform the scope and content of the group's program of work, reports, and recommendations.

Objective 2. Coordinate mapping of actions being taken by UN agencies and other organizations and key stakeholders towards achieving measurable results, and identify opportunities for collaboration, as well as gaps, redundancies and duplication.

- 2.1 A mapping exercise of high-level AMR activities in key organizations, to identify current players and, and where possible, funding flows, and identify synergies, gaps and opportunities for coordination, has been undertaken. Revised versions of this exercise, including mapping against the Framework for Action, will be extended to all relevant UN organizations and other partners, published, and regularly updated.
- 2.2 Develop a registry of commitments to action against AMR, based in part upon the "Call to Action" events hosted in October 2017 by the Governments of Ghana, Thailand, and the United Kingdom, the UN Foundation, and the Wellcome Trust (other Calls to Action are anticipated). This registry, which will be integrated into the mapping, is intended to become a publicly available database to inform global AMR activities.
- 2.3 Analyze the mapping results and registry of commitments to identify gaps to be filled as well as opportunities for collaboration, and use this information to inform the work of the subgroups and to make recommendations for coordination.

Objective 3. Promote plan, and facilitate collaborative action to align activities.

- 3.1 Consult with UN agencies and others, including funding bodies and development banks, to explore new mechanisms to optimize collaboration and resource use, share resources, and identify synergies in investments. Advocate for innovative models of financing for AMR work.
- 3.2 Recommend ways to ensure better collaboration and operationalization of the global response to AMR, at local, national, regional, and international levels.

Objective 4. Develop a vision and roadmap for the desired response to AMR in 2030, through evaluation of current progress and the development of recommendations for collaboration, coordination and global governance.

- 4.1 Assess progress made since adoption of the GAP in 2015, based on tripartite reporting.
- 4.2 Develop a roadmap and overarching vision towards 2030 with targets for action on AMR to minimize its negative impact on SDGs. These targets should be coordinated with, complement and not duplicate ongoing work by the tripartite and others to establish targets and indicators.
- 4.3 Propose mechanisms for global collaboration, coordination, and governance among all relevant stakeholders, with the aims of strengthening existing mechanisms and maintaining political commitment to combat AMR.

MEETINGS

10. IACG members will meet face-to-face at least twice a year, and communicate by email or teleconference as needed. The IACG will use these meetings and leverage any other opportunities to promote multi-stakeholder engagement with Member States and other appropriate stakeholders through open consultations during meetings or web consultations. The IACG also commits to regularly debriefing Member States and other stakeholders about their deliberations after meetings.

REPORTING

11. The IACG intends to provide an interim progress report to the Secretary-General ahead of the UN General Assembly in September 2018, with a final report provided in July 2019. Meeting reports and other updates will be published online³ as frequently as possible.

³ <http://www.who.int/antimicrobial-resistance/interagency-coordination-group/en/>