

Shaping the Future Agenda on Antimicrobial Resistance

Discussion with Stakeholders on the Draft IACG Recommendations

Summary report of 10 meetings conducted between 31 January and 27 February 2019

Introduction

The United Nations Inter-Agency Coordination Group (IACG) was established in 2017 to provide practical guidance for approaches needed to ensure sustained effective global action to address antimicrobial resistance. In April 2019, the IACG will deliver its report to the UN Secretary-General for consideration by Member States through the United Nations General Assembly.

On 29 January 2019, the IACG posted 14 draft recommendations on its website proposing urgent actions in the following five areas: (A) Accelerate progress in countries, (B) Innovate to secure the future, (C) Collaborate for more effective action, (D) Invest for a sustainable response, and (E) Strengthen global accountability and governance. In January and February 2019, stakeholder engagement events and a web-based forum were held to solicit feedback on the draft IACG recommendations to inform the finalization of the IACG report and foster ownership and commitment to the global response to antimicrobial resistance.

This report summarizes 10 stakeholder engagement events that the IACG Secretariat conducted between 31 January and 27 February 2019 in cooperation with the Governments of Finland, India, Iran, Sweden, Thailand and Zambia, plus the Wellcome Trust, South Centre, UN Foundation, Business Council for the UN and UNAIDS. More than 400 people representing 68 Member States, 38 civil society organizations¹ and 49 private sector constituencies² attended the events, along with 12 international organizations (Tables 1 and 2).

Table 1. Stakeholder engagement events organized to solicit feedback on the draft IACG recommendations.

Location	Date	Co-host	Stakeholder group focus	Participants (No.)
Bangkok	31 Jan	Sweden, Thailand	All	50
Paris	5 Feb	Finland	Member States	30
Rome	5 Feb	Iran, Sweden	Member States	100
London	7 Feb	Wellcome Trust	Private Sector	40
Geneva	8 Feb	-	Member States	49
Webinar	18 Feb	-	Civil Society	18
New York	21 Feb	India, Sweden, Zambia	Member States	34
Geneva	25 Feb	South Centre	Civil Society	35
New York	27 Feb	UN Foundation, Business Council for the UN	Private Sector	33
New York	27 Feb	UN Foundation, UNAIDS	Civil Society	20

¹ Civil society organizations also included universities and professional associations

² Private sector constituencies included i) pharmaceutical and biotechnology industry, ii) food producers and retailers, and iii) banks, insurance companies and investment groups

At all meetings, the draft IACG recommendations were presented and discussed. During the discussions, stakeholders were asked whether the recommendations are practical and can help to move implementation of national action plans forward and help to build a global community with shared vision and goal to tackle antimicrobial resistance. Participants were also asked if there are any critical issue missing that need to be addressed. Key outcomes of the discussions were sent to IACG members within two working days of each meeting. The outcomes of the 10 stakeholder engagement events as well as feedback received by 80 stakeholders providing written comments on the draft IACG recommendations will be taken into consideration when finalizing the IACG recommendations and report.

Outcomes of stakeholder discussions

1. Comments on the IACG process

All stakeholders acknowledged the important, timely and extensive work of the IACG. They commended the structured work and the standardized approach that the IACG has followed in developing its recommendations and in seeking feedback from a wide range of constituencies before the finalization of the IACG report and recommendations.

2. Comments on the overall content of the draft recommendations

There was unanimous support for the principles of the draft recommendations and for putting countries at the centre of the response. No major contentious issues were highlighted within the draft recommendations, which will help to facilitate their uptake by countries and partners. Participants mentioned that the IACG recommendations and their implementation offer a unique opportunity to tackle the antimicrobial resistance crisis. Several stakeholders stressed that the draft recommendations focus on urgent actions that will help to create and galvanize the global community against antimicrobial resistance and to develop a shared vision and goals.

Member States commended the IACG for considering the complexity of issues related to antimicrobial resistance and addressing multiple key challenges in a practical manner. Similarly, they applauded the IACG's strong emphasis on coordination at all levels and by all sectors to strongly promote a One Health approach cutting across human, animal and plant health, food production and the environment. Several countries noted that their governments are taking antimicrobial resistance and the IACG recommendations seriously. Member States appreciated the concise nature of the document and the limited number of recommendations, which is appealing to policy makers. At the same time, some other Member States suggested that there be fewer recommendations and a shorter document. Some Member States and civil society groups would prefer stronger language in some of the recommendations but acknowledged the IACG's efforts to reach consensus focusing on key issues that bring most partners together.

There was a frequent request to develop indicators and set targets and timelines to monitor progress in the global response to antimicrobial resistance. There was also a request to prioritize recommendations and identify key problems related to antimicrobial resistance that can be tackled by the global community as a matter of priority.

3. Comments provided according to the five recommendation categories and stakeholder group

A. Accelerate progress in countries

Comments by multiple stakeholders

- Participants appreciated the inclusion of access to antimicrobials as lack of access and delays in access to antibiotics currently kill more people than antibiotic resistance.
- Several stakeholders stressed that infection prevention leading to reduced antimicrobial consumption and resistance is of the highest priority. Accordingly, Members States and civil society appealed for more focus on water, hygiene, sanitation, immunization, improved animal husbandry and strengthened resilience in people and animals.
- Several partners noted the insufficient focus on raising public awareness about antimicrobial resistance, as well as the issue of education and training across One Health sectors.
- The need for improved diagnostic tools and access to diagnostics; surveillance to inform policy options; and laboratory systems was repeatedly highlighted; with potential reference to existing tools such as GLASS and ATLASS.
- Several participants mentioned the advantages of pooled procurement and highlighted the advantage of using existing mechanisms.

Comments by Member States

- There was a request for the recognition of specific challenges in resource-limited countries.
- The call to phase out the use of antimicrobials in growth promotion was supported but it was suggested to highlight in the considerations of the recommendations the importance of collateral measures that are needed to address the potential rise of infections. It is important to mention the link between sustainable food production systems and low antimicrobial consumption and resistance.
- A reference to Codex Alimentarius on antimicrobial use for growth promotion in animals was suggested.
- There was a plea to include cooperation to curb cross-border spread of resistant infections because of international travel and trade.

Comments by civil society

- The important role of civil society organizations in ensuring action at country level should be highlighted in the recommendations.
- While the focus on the implementation of national action plans was applauded, civil society stressed that action is hindered by country realities including lack of full time and dedicated staff working on antimicrobial resistance, weak infrastructure, poor awareness and shortage of funds.
- Hospitals are not specifically mentioned in the draft recommendations despite being a main reservoir/amplifier of drug-resistant infections.
- Civil society highlighted that good animal husbandry leads to sustainable prevention of antimicrobial use in animals and in this area; research into good practices may be more important than research into new medicines. More emphasis should therefore be given on alternatives to

using antimicrobials for growth promotion, including education of farmers, promoting research to identify interventions and provision of economic incentives (e.g. economic transition funds) as farmers opt out from using antimicrobials as growth promoters.

- The need for stronger wording about the phasing out of antimicrobials not only as growth promoters but also for disease prevention in animals and plants was noted. Recommendation A3 could include stronger language in line with WHO and European Commission recommendations.
- Conducting risk analysis for phasing out antimicrobials for growth promotion was felt to be unrealistic in resource-constrained countries.
- There was a call to reserve the Highest Priority Critically Important Antibiotic Agents for human use only.
- Civil society noted the need for international standards to reduce and monitor antimicrobial waste in the environment.
- On access to quality-assured and affordable medicines, the suggestion to establish production facilities for antimicrobials by governments was welcomed.
- Civil society suggested that risk of occupational acquisition of drug resistant infections by health and farm workers required more attention, and to consider the International Labor Organization as a partner in the global response against antimicrobial resistance.

Comments by private sector

- Participants noted that access and stewardship go hand-in-hand and should be referenced together throughout the report.
- There was a request to include stronger language to Member States that providing access to medicines on the WHO Essential Medicines List is a key responsibility.
- There was a call to ensure ethical obligation of food producers through training and capacity building in tandem with the phase out antimicrobials for growth promotion.

B. Innovate to secure the future

Comments by civil society

- Participants appreciated the alignment of the draft recommendations with the 2016 political declaration and its principles for research and development efforts (affordability, effectiveness, efficiency and equity). However, guidance on how to adhere to these principles are lacking.
- Civil society requested guidance for manufacturers on good practices for access to medicines.
- There was a plea for more specificity and concrete action related to: i) delinking the cost of investment from the price and volume of sales, ii) full transparency of underlying costs for developing and producing health products, and iii) more focus on repurposing of old antibiotics, combination products, and optimizing medicines to meet the needs of specific populations (heat-stable, oral and child-friendly formulations). It was also suggested to focus research activities on priority pathogens.
- A consideration should be given to underline pull incentives, without which small startup companies have little chance of viability.
- Operational research is needed on alternatives to antimicrobials for growth promotion; improved sanitation and stocking density for poultry were also given as examples.
- Civil society expressed concern on the lack of resources for R&D which has led to a massive exodus of capable researchers.

- There was strong support for to the recommendations on data sharing, mapping of research activities and research prioritization.

Comments by private sector

- Participants agreed that more mechanisms to support investment and innovation in R&D are needed across the One Health spectrum (not just human health).
- There should be clear direction on what to prioritize for R&D and suggestion to use the WHO priority pathogens list for prioritizing the research agenda.
- The importance of sustainable markets for R&D should be elevated in the main part of the recommendation.

C. Collaborate for more effective action

Comments by multiple stakeholders

- The recommendations on civil society and the private sector as agents of change were appreciated by all stakeholders.
- A description of the role and power of consumers and patients to further advance the global response was identified as a gap by several participants. The example of Thailand was given, where the Ministry of Public Health's 10 years' experience working with civil society and consumer groups has helped to catalyze the national response.
- The power of consumers could further be strengthened with a mention of food labelling.

Comments by civil society

- It was noted that front-line health care workers are critical partners in the response to antimicrobial resistance.
- Further cooperation between the private sector and civil society need to be explored.

Comments by private sector

- It was noted that the IACG recommendations will facilitate and catalyze ongoing activities within the private sector for better impact and coordination. The engagement of the private sector in the partnership platform to develop a shared vision and goals will be very important. There was also a request to make the partnership platform a true partnership with representation across Member States, private sector and civil society.
- Participants representing food producers said that antimicrobial resistance in food manufacturing is becoming more complex and is recognized as a risk for sustainable food production and safety. Retailers requested guidance on how to collect data on the use of antimicrobials in the food produced by their suppliers.
- The need to engage generic drug producers in the response to antimicrobial resistance was emphasized as 95% of antimicrobial drugs are produced by generic companies.

D. Invest for a sustainable response

Comments by multiple stakeholders

- Commitments of G7 and G20 countries on antimicrobial resistance should be captured in the recommendations, noting that they need to honor these commitments.

Comments by civil society

- Civil society suggested that stronger language should be used regarding the urgent need for additional funding for all antimicrobial resistance areas based on national priorities.
- The need for increased domestic resources should be highlighted.

Comments by private sector

- There is increasing awareness among the investor community that ‘AMR is a business risk’ and investment managers are increasingly looking into antimicrobial resistance as they do with climate change to ensure that their investments are risk free or are mitigated. Participants therefore suggested that the need for an ‘antimicrobial lens’ to applied to private investments needs to be captured in the recommendations, as well more emphasis on equating antimicrobial resistance with climate change.
- A strong investment case needs to be made for positioning antimicrobial resistance as a global issue, especially in light of finite donor resources.

E. Strengthen global accountability and governance

Comments by multiple stakeholders

- There was overarching agreement on the importance of the One Health Global Leadership Group, the Partnership Platform and the Independent Panel on Evidence for Action. Some Member States expressed interest in supporting and joining these groups. Denmark expressed interest in its “International Center for Interdisciplinary Solutions on AMR” participating in and contributing to the global partnership platform when created.
- More clarity was requested on the terms of reference, composition, establishment, and reporting channels of the proposed governance structures.
- Member States and the private sector expressed the need for additional clarity on the relationship of the Global Leadership Group and the Independent Panel on Evidence for Action to the Tripartite agencies. It was noted that these new structures should build upon existing Tripartite mechanisms to prevent duplication of efforts and mandates in the global response against antimicrobial resistance.
- It was noted that robust and consistent policies are needed to manage conflicts of interest for all stakeholders.
- Participants underlined the importance of a binding legal framework on antimicrobial resistance in order to ensure accountability. The International Health Regulation and the WHO Framework Convention on Tobacco Control were mentioned as examples for future consideration. More linkage with the global health security agenda was also suggested.

Comments by Member States

- There was a question about the proposed governance structures in the context of UN reform.
- Some Member States noted that the role of the private sector (particularly large retail chains and food producers), consumers and farmers could be more comprehensively addressed in the recommendations.

Comments by civil society

- The importance of diversity in membership of the One Health Global Leadership Group was underlined.
- Civil society suggested clarification of the role of civil society organizations in the One Health Global Leadership Group and noted that consideration should be given to potential conflicts of interest on the part of the private sector.
- Civil society also called for assured independence of the governance structures through neutral funding sources.

Comments by private sector

- Participants called for the representation of the private sector in the One Health Global Leadership Group as it will help to boost their action and engagement in the global response. Appropriate declarations of conflict should be made available not only for the private sector but also for all stakeholders, civil society included, so engagements are free from conflicts.
- Private sector representatives called for inclusion of Ministers of Finance in the One Health Global Leadership Group.
- Farmers' advocates called for inclusion and recognition of farmers and their associations as a distinct constituency in the recommended global governance structures.

Conclusions

The comments on draft recommendations received during the stakeholder discussion events will be taken into account when finalizing the IACG report. In addition to helping inform the final the IACG recommendations, the stakeholder events have contributed to building political momentum, fostering cooperation, mobilizing One Health stakeholders and increasing advocacy on issues related to antimicrobial resistance (see: <https://twitter.com/uniacgmr>). These activities are important as stakeholders consider how the IACG recommendations can best be implemented.

Table 2. Representatives present at the stakeholder events held to discuss the draft recommendations.

Meeting	Participants
Bangkok 31 Jan	<p>Academia: University of Sydney, Simon Fraser University, University of Toronto, Harvard T.H. Chan School of Public Health</p> <p>Civil society: Health and Global Policy Institute of Japan/Japan Antimicrobial Resistance Alliance, Access to Medicine Foundation</p> <p>International Organizations: FAO, OIE, UNAIDS, UNICEF, WHO</p> <p>Member States: Myanmar, Nepal, South Africa, Sweden, Thailand, United Kingdom</p> <p>Private sector: International Federation of Pharmaceutical Manufacturers and Associations, AMR Industry Alliance, IQVIA</p> <p>Regional organizations: Asia Pacific Leaders Malaria Alliance</p>

Paris 5 Feb	International Organizations: OECD, OIE Member States: Austria, Azerbaijan, Bulgaria, Canada, Czech Republic, Germany, Greece, Finland, Ireland, Italy, Mexico, Netherlands, Portugal, Romania, Slovakia, Slovenia, South Africa, Sweden, USA
Rome 5 Feb	International and other Organizations: FAO, World Farmer Organisation, WHO Member States: Denmark, Eritrea, Finland, France, Germany, India, Iran, Italy, Japan, Kenya, Kuwait, Madagascar, Mexico, Norway, Palestine, Peru, Poland, Dominican Republic, Sudan, Sweden, Switzerland, Thailand, Uganda, Ukraine, USA, Venezuela, Zambia, Zimbabwe
London 7 Feb	International and other Organizations: OIE, World Farmers Organisation, WHO Private sector: Access to Medicine Foundation, Antibio, Aquaculture Alliance, Association of the British Pharmaceutical Industry, Becton Dickinson, Centrient Pharmaceuticals, Danone Foods, European Bank for Reconstruction and Development, F2G, FAIRR Initiative, Foundation for New and Innovative Diagnostics, GlaxoSmithKline, HealthforAnimals, Hermes Investment, HSBC, International Federation of Pharmaceutical Manufacturers and Associations, Johnson & Johnson, Legal and General - Investment Management, M&G Investment, McKinsey & Company, Merck, Neem Biotech, Nordea, Pfizer Inc., Sainsbury's, Shionogi Limited, Summit Therapeutics, SustainAbility, Teva Pharmaceuticals
Geneva 8 Feb	International Organizations: FAO, UNEP, Unitaids, WHO, WIPO, WTO Member States: Argentina, Australia, Austria, Brazil, China, Colombia, Denmark, Eswatini, Ethiopia, European Union, France, Guatemala, Iceland, Iran, Japan, Luxemburg, Mexico, Mozambique, Netherlands, Norway, Portugal, Romania, Serbia, Spain, Sri Lanka, Sudan, Sweden, Ukraine, United Kingdom, Uruguay, USA, Zambia
Webinar 18 Feb	Civil society: British Society for Antimicrobial Chemotherapy, East Central and Southern Africa Health Community, European Public Health Alliance, Fight the Fakes, Fundación IFARMA, Medicines Patent Pool, MSF Access, ReAct (Europe and America), TB Europe Coalition, The Union
New York 21 Feb	International Organizations: FAO, UNICEF, WHO, Executive Office of the UN Secretary-General Member States: Brazil, Egypt, Fiji, Georgia, Germany, Hungary, Iceland, India, Indonesia, Israel, Japan, Mexico, Morocco, Netherlands, Portugal, Romania, Russian Federation, Sweden, Thailand, United Kingdom, Zambia Permanent Observer State: Holy See
Geneva 25 Feb	International and other Organizations: FAO, OIE, South Centre, WHO Civil society: Center for Science and Environment, Ecumenical Pharmaceutical Network, Global Antibiotic Research & Development Partnership, Global TB Caucus, Health Action International, International Union of Food, Agricultural, Hotel, Restaurant, Catering, Tobacco and Allied Workers' Associations, Medicines Patent Pool, MSF Access Campaign, Pasteur International Network Association, ReAct (Africa and Europe), The Union, The Wellcome Trust, Universities Allied for Essential Medicines, World Alliance Against Antibiotic Resistance, World Veterinary Association
New York 27 Feb	International and other Organizations: UNAIDS, UNICEF, Executive Office of the UN Secretary-General, UN Foundation, World Farmers Organisation, WHO Private sector: Antibiotic Resistance Action Center Milken Institute, Becton Dickinson, BluePearl Veterinary Partners, Butterball, Inc., CARB-X, Centrient Pharmaceuticals, Ceva Animal Health, Elanco Animal Health, FAIRR Initiative, Green Century Capital Management, International Egg Commission, JLens Investor Network, Mars, McCann, McDonald's Corporation, Merck, Mountaire Farms Inc., Nordea, Pfizer Inc., Phibro Animal Health Corporation, Shionogi, Subway, Sumitomo Chemical, Zoetis
New York 27 Feb	International and other Organizations: WHO, UNAIDS, Executive Office of the UN Secretary-General, UN Foundation Civil society: Access Challenge, ACTION, Animal Health Institute, CARB-X, Consumer Reports, Global Health Strategies, MSF Access Campaign, MSF, Pew Charitable Trusts, ReAct North America and Antibiotic Resistance Coalition, United States Pharmacopeia, Wellcome Trust