Comments received on the draft terms of reference of the Independent Panel on Evidence for Actional Against Antimicrobial Resistance (15 May- 15 June, 2020)

Member States

- Australia
- Canada
- Chile
- Colombia
- Costa Rica
- Denmark
- European Commission
- Finland
- France
- Germany
- Hungary
- Japan
- Kenya
- Mexico
- Namibia
- The Netherlands
- Russian Federation
- Spain
- Sweden
- Thailand
- United Kingdom
- United States
- Uruguay
- Zambia

CSOs/NGOs

- American Veterinary Medical Association (AVMA)
- Antimicrobial Resistance Coalition (ARC)
- British Society for Antimicrobial Chemotherapy (BSAC)
- Edinburgh Infectious Diseases
- European Society of Clinical Microbiology & Infectious Diseases (ESCMID)
- Global Strategy Lab, WHO Collaborating Centre
- Global 1 Health Network
- Malaria Consortium
- MSF Access Campaign
- National Institute of Antimicrobial Resistance Research & Education (NIAMRRE)
- PA International Foundation
- RBM Partnership to End Malaria
- ReAct-Action on Antibiotic Resistance
- TB Alliance
- The United States Pharmacopeial Convention (USP)

Private Sector

- Aequor, Incorporated
- AMR Industry Alliance
- Becton Dickinson and Company (BD)
- BioMerieux
- HealthforAnimals
- International Dairy Federation (IDF)
- International Feed Industry Federation (IFIF)
- International Pharmaceutical Federation (FIP)
- International Poultry Council (IPC)
- Mars, Incorporated
- National Office of Animal Health Ltd (NOAH)

Individuals

- Aaron Oladipo Aboderin, Obafemi Awolowo University, Nigeria
- Afreenish Amir, National Institute of Health, Pakistan
- Anand Anandkumar, Bugworks Research Inc, India
- Besong Samuel, WHO, Cameroon
- Devi Sridhar, University of Edinburgh, United Kingdom
- Estelle Mbadiwe, Duct Blue Solutions, Nigeria

- Esther Dsani, Veterinary Services Department, Ghana
- Fengqin, China National Centre for Food Safety Risk Assessment, China
- Fred Tenover, Cepheid, United States
- Jesus Campos, Center for Genetic Engineering and Biotechnology (CIGB), Cuba
- John Rex, F2G Ltd, United Kingdom
- Joshua Obasanya, Formerly at Centre for Disease Control, Nigeria
- Junshi Chen, National Centre for Food Safety Risk Assessment, China
- Kevin Outterson, Boston University & CARB-X, United States
- Laetitia Gahimbare, WHO AFRO
- Maxwell Suuk, Ghana
- Niti Jadeja, Ashoka Trust for Research in Ecology and the Environment, India
- Olivier Espeisse, Ceva Animal Health, France
- Ralalicia Limato, University of Oxford, United Kingdom
- Roman Kozlov, Russian Academy of Sciences, Ministry of Health on Clinical Microbiology and AMR, WHOCC for Capacity Building on AMR Surveillance and Research, Russia
- Roxana Gonzalez, The American British Cowdray Medical Center, United States
- Sharper Mirza, Lahore University of Management Science, Pakistan
- Trudi Hilton, United Kingdom
- Vanessa Carter, Healthcare Communications and Social Media South Africa, South Africa
- Vera Vlahović-Palčevski, University Hospital Rijeka, Croatia

Other

- European Centre for Disease Prevention & Control (ECDC)
- Global Antibiotic Research & Development Partnership (GARDP)
- International Centre for Antimicrobial Resistance Solutions (ICARS)
- Nigeria Centre for Disease Control (NCDC)
- OECD
- South Centre
- UN Foundation
- UNICEF
- Unitaid
- Wellcome Trust

Australia
Department of Health & Department of Agriculture, Water & the Environment

Comments on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

General comments

Please find below some specific comments on the terms of reference. Overall we consider that its goals align with the objectives in the 2020 AMR strategy released earlier this year. This group promises valuable scientific and technical evidence that would be useful for Australia's AMR research agenda.

We consider that the overall budget and financing mechanism for the panel needs to be clearly addressed and be included as an appendix in the document. It is also not clear how many in- and out-of-session meetings will be scheduled during the year – if possible, this should be articulated in the document.

Monitoring & Evaluation is required to support the guiding principle of independence and political neutrality. An independent review of the outputs and the panels' efficacy needs to be in place to support appropriate governance.

Specific comments

- Mandate – it is suggested the mandate could be reviewed every 3 years following the acknowledgement in the text that AMR is highly dynamic challenge.
- Consideration should be given to ensuring that the purpose statement is more concise. It indicates a report-based activity for the panel. It would be preferable to provide an actionable outcome at the country level from this work. It is not clear whether a global risk assessment will be undertaken with the gathered information.
    - Suggest the following modified purpose statement: The panel will collate and analyse scientific information on antimicrobial resistance across various One Health disciplines to provide an independent, risk-based assessment that identifies impacts, future risks and appropriate management measures to inform and assist stakeholders' actions.
- Objectives
    - It is preferred that the objectives are written in a manner that addresses the SMART approach (Specific, Measureable, Achievable, Relevant and Time-based).
    - Point 1 - assessing the evidence and science – There is a need to indicate the sources for datamining and make this objective measurable or time-based. For example, assess evidence and science related to antimicrobial resistance every six months to identify gaps and assess emerging and future risks, impacts, and risk management.
    - Point 2 – duplicates the intent of Point 1 and could be deleted.
    - Point 3 – could be merged into Point 1 as shown.
    - Point 4 – could just state that the main focus is to assist low to middle income countries. For example, provide evidence-based practical solutions for mitigation, containment and intervention for low to middle income countries.
    - Point 5 – identified the production of periodic reports. Given the dynamic and urgent nature of AMR, these could be provided every six months.
- Accountability – The Panel report should be a standing agenda item for UN General Assembly.
- Guiding Principles
    - Independence and political neutrality – The panel is to define its priorities and workplan. As outlined under 'comprehensiveness and inclusivity', it is suggested a prioritisation process with countries through a survey and subsequent circulation of the draft workplan would improve the panel's effectiveness.

    - Non-duplication and complementarity – As evidence assessment and reporting will support normative and standard setting activities, the approach on how this will occur needs further explanation in the document. For Codex, a joint WHO-FAO expert meeting mechanism exists to undertake similar evidentiary processes, so the complementarity and niche of the panel needs further explanation.
- Structure and membership
    - Nomination and selection, and the selection of chair and vice chair – it would be preferred that a competitive selection process be implemented to support the guiding principle on independence and political neutrality for the panel.
- Terms of office – appear reasonable and allow for staggered turnover of the panel, which would fit with the suggested change in frequency for the review of the mandate.
- Communication with governments and other stakeholders – It is suggested that the panel should devise and consult on an appropriate communication strategy, which could be easily achieved through a short survey with stakeholders.
- Key performance indicators (KPIs) – Any indicator will need to be tangible, measureable targets relating to specific activities on the agreed workplan, which determine whether the purpose of the panel has been achieved through a monitoring and evaluation process. For example, the identification of gaps relating to some aspect of AMR and appropriate interventions developed. The indicator should not merely be the delivery of a six-monthly report to stakeholders. It would be useful for some KPIs to align with the core indicators of the *Monitoring and Evaluation of the Global Action Plan on Antimicrobial Resistance – Framework and recommended indicators*.

Australia
Department of Agriculture, Water and the Environment

[EXT] Re: Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance [SEC=OFFICIAL]

Schipp, Mark [redacted]
Fri 6/12/2020 7:41 AM

To: amr-tjs [redacted]

Thank you for the opportunity to comment upon the above draft terms of reference.

As has been stated, AMR is a highly dynamic challenge, for this reason we suggest the **mandate** be regularly reviewed, perhaps every 3 years.

The **purpose** statement needs to be concise, for example: *The panel will collate and analyse scientific information on antimicrobial resistance across various One Health disciplines to provide an independent, risk-based assessment that identifies impacts, future risks and appropriate management measures to inform and assist stakeholders' actions.* The purpose suggests that the panel will be largely producing reports, it would be preferable if the panel's work resulted in actionable outcomes at the country level. Will a global risk assessment be undertaken with the information gathered?

We would prefer to see the **objectives** written in a way that is Specific, Measurable, Achievable, Relevant and Time-based (SMART).
For example the first objective "assessing the evidence and science" should indicate the sources and should be both measurable and time-based. We think this objective has been adequately covered many times before as is evidenced in the reports from the IACG and to the UNGA. For example: *assess evidence and science related to antimicrobial resistance every six months to identify gaps and assess emerging and future risks, impacts, and risk management.*

The second objective duplicates the intent of the first and can be deleted. The third can be merged into the first as shown above.
The fourth objective should simply state that the main focus is to assist low to middle income countries. For example: *provide evidence-based practical solutions for mitigation, containment and intervention for low to middle income countries.*
The fifth objective could indicate that the periodic reports will appear every six months.

We believe the **accountability** should be to the UN General Assembly and the panel report should be a standing item, given its importance.

We would like to comment on two of the **guiding principles**. We do not agree that the panel ought to determine its own priorities and workplan, as presently outlined under 'comprehensiveness and inclusivity'. Rather, our view is that those commissioning the work should establish ambitious goals for the panel which are reflected in the performance indicators. A prioritisation process with countries through a survey might inform this commissioning process. Enhancing transparency by circulating the draft workplan would improve member country engagement and support. Monitoring and evaluation is required to support the guiding principle of independence and political neutrality. An independent review of the outputs and the panels' efficacy should be in place to support appropriate governance.
In relation to non-duplication and complementarity, as evidence assessment and reporting will support normative and standard setting activities, the approach on how this will occur needs further explanation in the document. There are well established normative and standard setting processes in place addressing AMR already through OIE, FAO and WHO (Codex).

We would prefer to see a competitive selection process employed to fill the roles of chair and vice-chair, this would support the guiding principle on independence and political neutrality outlined under **structure and membership**. Further, in the interests of transparency we believe that compensable travel costs should be shown in this document, it is not clear how many in- and out-of-session meetings will be scheduled during the year and consequently how much this will cost.

The first objective of assessing the science and evidence should drive the selection of the panel constituents. They should be selected on the basis of their ability to contribute to a structured review with membership selected on the basis of expertise and effective coverage of the required knowledge areas.

In terms of **communication**, we suggest that the panel should devise and consult on an appropriate communication strategy, which could be easily achieved through a short survey with stakeholders.

Our greatest concern is in relation to the **key performance indicators**. The evaluation framework should be described and the performance indicators explicit. This is not something the panel should do for itself. Those commissioning the work should clearly state their expectations and priorities and these should form the basis for evaluation of the panel as a whole and individual panel member performance. It would be disappointing if the only outcomes were further reports that do not change behaviour or identify the immediate risks that need to be addressed. Our expectation is that the panel would be able to identify immediate AMR priorities and how these should be addressed and then follow through on evaluation of the effectiveness of implementation. The indicator should not merely be the production of reports. It would be useful for some KPIs to align with the core indicators of the *Monitoring and Evaluation of the Global Action Plan on Antimicrobial Resistance – Framework and recommended indicators*.

Our final comment is in relation to the overall budget and financing mechanism which is not identified, this could usefully be provided in an appendix.

Thank you once again for the opportunity of providing our comments.

Your sincerely,

Mark Schipp
Chief Veterinary Officer (Australia)
OIE Delegate (Australia)
President OIE Assembly

Department of Agriculture, Water and the Environment
7 London Cct, Canberra ACT 2600
GPO Box 858, Canberra ACT 2601 Australia

RE: [EXT] Extension Request: Public Discussion - Draft Terms of Reference for the Independent Panel on Evidence for Action against AMR

Fersht, Natalie (PHAC/ASPC) [redacted]

Fri 6/19/2020 3:25 PM

To: amr-tjs [redacted]

1 attachments (37 KB)

Draft ToR_Independent Panel on Evidence for Action Against AMR_GoC combined input_v6.docx;

Dear Leena,

On behalf of the Government of Canada, I would like to thank you for the opportunity to provide our feedback on the draft Terms of Reference for the Independent Panel on Evidence for Acon ag ainst AMR.
Overall, Canada is supporv e of the establishment of an Independent Panel on Evidence for Acon ag ainst AMR.

Please find below some of our main quesons or c omments, and suggesons on the dr aft Terms of Reference. We've also provided specific comments and suggested edits in the a. ached document, for your consideraon.

- Related to **accountability**, we note the importance of avoiding duplicaon and ensuring alignmen t with ongoing efforts, as well as a way to fund and evaluate the Panel's work. Specifically:
    - What is the relaonship be tween the Global Leaders Group on AMR and the Independent Panel? How will they will be different/or how they will complement each other?
    - How does the Independent Panel fit in with other global AMR fora, and how can these enes work together to ensure alignment?
    - Who will the Panel will report to and how they will be evaluated on their outputs? We recommend that the Panel's performance is assessed and evaluated by a separate, objecv e group.
    - We would appreciate further clarificaon on ho w the Independent Panel will be financed and what the source of funding will be.
    - There is some discussion in the background about an "urgent need to generate evidence" – how will the Panel consider what has been done to date? Perhaps here there can be some recognion that much work has been done, priories ar e known and will be taken into account as the Panel begins its work.
    - To further strengthen the Guiding Principles, we recommend removing the condional languag e (e.g. should, could, would) and using stronger verbs (e.g. will).
    - We recognize the importance of polic al neutrality in such a group. We recommend that experts parcipa te independently from their government organizaon.

- A couple more general comments on other topics include:
    - We note that the dra T erms of Reference has minimal consideraons on C OVID-19. We believe this should be reflected in the work that is being proposed.
    - We note that the objecv es/ the work being proposed is a large undertaking. Will 10-15 experts be enough to fulfill these objecv es? How will the work be managed and divided among Panel members?

Please let me know if you have any quesons or c oncerns.

Kind regards,
Natalie *on behalf of the Government of Canada*

Natalie Fersht, MSc

Policy Analyst – Interna onal Ini a ves, AMR Policy Team / Infec ous Disease Preven on and Control Branch
Public Health Agency of Canada / Government of Canada

Analyste des poli ques – ini a ves interna onales, Équipe spéciale de la RAM / Direc on générale de la préven on et contrôle des maladies infec euses
Agence de la santé publique du Canada / Gouvernement du Canada

Chile

Independent Panel on Evidence for Action Against Antimicrobial Resistance

Final Draft Terms of Reference for Public Discussion

COMMENTS FROM CHILE

JUNE 15, 2020

In the present table, **bold letter** will be used to sign new text introduction and strikethrough text (~~ABC~~) to sign deletion of current text.

CURRENT DRAFT	COMMENT OR SUGGESTION	RATIONALE
Background, 1st paragraph, 2nd line: …., the effectiveness of prevention and control strategies and policies,	the effectiveness of prevention and control strategies and ~~policies~~ **interventions**,	Policies are elaborated by risk managers after they analyze the information provide by risk assessors, we believe that policies, such as national regulations should not be evaluated in their efficacy by the panel and then included in their report, this can imply impairment of risk management that each country performs in sovereignty.
Background, 2nd paragraph: "The COVID-19 pandemic and its impact on the entire global community illustrates the importance of heeding warnings about current and future disease threats, and the imperative for evidence-based action in the aftermath of the pandemic. The Panel's output will help to prevent and mitigate exacerbation of such risks."	Delete. ~~The COVID-19 pandemic and its impact on the entire global community illustrates the importance of heeding warnings about current and future disease threats, and the imperative for evidence-based action in the aftermath of the pandemic. The Panel's output will help to prevent and mitigate exacerbation of such risks~~.	There is no relation between Covid 19 and AMR in terms of risk management, the origin and complexity of the SARS- COV 2 and the AMR is completely different, and we don´t think is appropriate to justify the need of this panel on this. However, we recognize the imperative need for neutral scientific evidence based actions to be apply by risk managers around the world, being this the real reason for this panel to be constituted.
Background 3rd paragraph. …" The IACG concluded its mandate by submitting its report to the UN Secretary General in 2019. One of the recommendations of the IACG for the UN Secretary General was to convene an Independent Panel on Evidence for Action	**…"** The IACG concluded its mandate by submitting its report to the UN Secretary General in 2019. One of the recommendations of the IACG for the UN Secretary General was to convene an Independent Panel on Evidence for Action against Antimicrobial Resistance in a One Health context in close	Understanding that one of the main factors for this panel is to maintain its independence, not all international organizations could guarantee that, our proposal is either detailed which type of international organization may be included in this collaborartion or any international organization that is

against Antimicrobial Resistance in a One Health context in close collaboration with the Tripartite agencies (FAO, OIE and WHO), UN Environment Programme and other international organizations."	collaboration with the Tripartite agencies (FAO, OIE and WHO), UN Environment Programme and other international organizations, **where a public consultation determines its participation appropriateness**.**"**	not already listed in the ToR should be included after a public consultation of its appropriateness. Securing in this way the transparency and independence of this Panel.
Background, 3rd paragraph, last line: …" The mandate of the Panel will be reviewed every 5 years."	…" The mandate of the Panel will be reviewed ~~every~~ ~~5 years~~.**after the development and evaluation of each report"**	As it is said in the text, the highly dinamyc, complex, cross-sectoral and multidisciplinary nature of the AMR, using a fix period of time may lose the dynamic and emergence risk related to AMR. In case time is needed, our proposal is to revise at the same time of period when panel participants are changed.
Section 2 "Objectives" Bullet 1, 2, 4 • Assess the evidence and science • and identify gaps in the evidence, science • Provide evidence-based practical options	• Assess the **scientific** evidence ~~and science~~ • and identify gaps in the **scientific** evidence, ~~science~~ • Provide **scientific** evidence-based practical options	The work of this panel should be based on sound scientific evidence in order to provide assessment that can be used by policy makers without being questioned.
Section 4, Chapeau: "The following are the key principles that are proposed to guide the evidence assessment and reporting of the Panel:"	The following are the key principles that are proposed to guide the **scientific** evidence assessment and reporting of the Panel	The work of this panel should be based on sound scientific evidence in order to provide assessment that can be used by policy makers without being questioned.
Section 4, 1st bullet: "… the work of the Panel should be free from political and group influence. It will define its priorities and workplan."	"… the work of the Panel should be free from political and group influence. It will define its priorities and workplan. **The workplan will be published and submitted to secure it meets countries' needs"**	Even when the work of the panel is independent, the workplan and priorities in terms of work should be driven by countries needs in order this panel can fulfil with this aim and efficacy indicators.
Section 5, Composition, Sectors: "Sectors: human, terrestrial and aquatic animal and plant health, environment, food and feed	Sectors: human, terrestrial and aquatic animal and plant health, environment, food and feed	Food trade is recognize as one of the sectors where AMR can have an influence and is mentioned in section 4. Principles-

production and development sectors”	production, **food trade** and development sectors	
Section 5, Nomination and Selection “…Nomination of members will take into consideration gender balance and geographic diversity as well as representation from across the One Health spectrum. “	... “…Nomination of members will take into consideration gender balance and geographic diversity as well as representation from across the One Health spectrum. **Nominated and selected participants should be published on the IACG website**.”	List of Panel Members should be available and published for public known to maintain transparency of this group.

Colombia

[EXT] Comentarios COLOMBIA - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

LUIS HERNAN HINCAPIE MATOMA [redacted]

Fri 6/12/2020 8:40 PM

To: amr-tjs [redacted]
Cc: XIMENA ASTRID VALDIVIESO RIVERA [redacted]; EB Colombia [redacted]

Esmados Señor es:

De manera atenta me permito remir a c onnuación los c omentarios de COLOMBIA, para la consulta sobre los *Términos de referencia del Panel Independiente sobre evidencia para la acción contra la resistencia anmicrobiana:*

2. Objecves of the P anel across the One Health spectrum

- *Assess the evidence and science related to anmicrobial resis tance in an independent, comprehensive and objecve manner using a holis c s ystems approach;*

  Adicionar: *incluyendo las estrategias definidas en los planes nacionales o globales en curso para contener la resistencia a anmicrobianos .*

Incluir objev o adicional*:*

- *Desarrollar herramientas o estrategias que permitan difundir los informes realizados o sobre la evidencia disponible para contención de la resistencia anmicrobiana de manera que se involucre a los países en la apropiación e implementación de conocimiento generado por el panel.*

Jusfic ación: *en los objev os no se evidencia alguno específico relacionado con la apropiación y difusión de conocimiento generado por el panel para los países, más allá de la elaboración de informes técnicos. Se considera que en este objev o se puede tener en cuenta la formación de profesionales de los países en temas específicos y en idenfic ación de fuentes bibliográficas, análisis y búsqueda de información sobre resistencia a anmicrobianos de acuerdo c on los productos que genere el panel.*

5. Structure & Membership

- *Compensaon: Members will rec eive no fees or other remuneraon f or their me. Should travel or other acvies be needed, support will be pro vided. Details will be added in the operaonal guidanc e.*

Comentario: *Se debería considerar permir alguna t arifa de compensación mínima de trabajo de los miembros considerando el empo que será requerido para el desarrollo de las acvidades y obje v os propuestos, que puede ir más allá de gastos de viaje y reuniones"*

Agradecemos tu atención y quedamos atentos a las conclusiones de la consulta.

Atentamente,

Luis Hernán Hincapié M.
Asesor – Grupo Interno de Trabajo de Asuntos Sociales Multilaterales
Dirección de Asuntos Económicos, Sociales y Ambientales
Calle 10 No. 5 – 51. Bogotá, Colombia.
www.cancilleria.gov.co

Dear Sirs:

I would like to refer to COLOMBIA's comments below for consultation on the *Independent Panel's Terms of Reference on Evidence for Action Against* Antimicrobial Resistance:

2. Objectives of the Panel across the One Health spectrum

- *Assess the evidence and science related to antimicrobial resistance in an independent, comprehensive and objective manner using a holistic systems approach;*
  Add: *including strategies defined in ongoing national or global plans to contain antimicrobial resistance.*

Include additional objective*:*

- *Develop tools or strategies to disseminate reports made or on the evidence available for antimicrobial resistance containment in a way that engages countries in the appropriation and implementation of knowledge generated by the panel.*

Justification: *the objectives do not provide any specific evidence related to the appropriation and dissemination of knowledge generated by the panel for countries, beyond the development of technical reports. It is considered that in this objective it is possible to take into account the training of professionals from countries in specific topics and in identification of bibliographic sources, analysis and search for information on antimicrobial resistance according to the products generated by the panel.*

5. Structure & Membership

- *Compensation: Members will receive no fees or other remuneration for their time. Should travel or other activities be needed, support will be provided. Details will be added in the operational guidance.*

Comment: *Consideration should be given to allowing some minimum compensation fee for members considering the time that will be required for the development of the proposed activities and objectives, which may go beyond travel expenses and meetings"*

We appreciate your attention and are attentive to the conclusions of the consultation.

Kind regards

Luis Hernán Hincapié M.
Adviser - Internal Working Group on Multilateral Social Affairs
Directorate of Economic, Social and Environmental Affairs
10th Street No. 5 – 51. Bogota, Colombia.
www.cancilleria.gov.co

Costa Rica
Ministry of Health

[EXT] Fw: WHO: (IACG) terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance. Deadline: 15 June 2020

Alexander Peñaranda Zárate [redacted]
Sun 6/14/2020 3:41 PM
To: amr-tjs [redacted]

Good a. ernoon

The Ministry of Health of Costa Rica, would like to share some comments and suggesons t o the text propose on the terms of reference of the Independent Panel on Evidente for Acon Ag ainst Anmicr obial Resistance, as follows:

# Parragraph	# líne	Comments	Comments / text suggesons
5	4	” Considering that part of the purpose of the creaon of the Expert P anel is... "The Panel will rigorously evaluate and synthesize exisng and ne w data, impacts and future risks, to address the urgency and complexity of anmicr obial resistance"... together that, among the essenal da ta on Anmicr obial Resistance are those generated by Laboratory surveillance, it is recommended to include among the objecv es the informaon of laboratory surveillance of anmicr obial resistance. For this reason, taking advantage of the word in Objecv e 2 "implementaon", the change set out in the next column is proposed. If the implementaon of the Sur veillance System is not included, it could be considered to include in the same objecv e "gaps of data from AMR surveillance	Evaluate exisng da ta and idenf y gaps in the evidence, science and implementaon of the Naonal An micr obial Resistance Laboratory Surveillance Systems. or Evaluate exisng da ta and idenf y gaps in the evidence, science and implementaon of data from AMR Laboratory Surveillance.
13	3	As indicated in the document, the Panel will be made up of experts from a wide range of geographic regions. On this topic, we consider it important to include that the Panel should have representaon of all ar eas at the global or global level, as well as specifying that it should include experts from "low-and-middle-income countries", which would support Objecv e Four, which menons lo w-and-middle-income countries.	Panel members should represent **all the regions of the world, including experts from low-and middle-income countries**, relevant disciplines and sectors.
14	1	Within the possible disciplines menoned f or the experts to be considered for the Panel, it is recommended to include microbiologists, professionals who are usually in charge or have a relevant role in naonal sur veillance of anmicr obial resistance, in addion t o being	Disciplines: Biological and Pharmacological Sciences; **Microbiologist**, Human and Veterinary Medicine; Agricultural Sciences;

		the one who analyzes the data from laboratory surveillance.	

With my consideraon,

Alexander A. Peñaranda
Ministro Consejero

Misión Permanente de Costa Rica ante la O icina de las Naciones Unidas y demás organismos internacionales en Ginebra, Suiza
23 Avenue de France 1202 Ginebra - Suiza

Denmark

[EXT] Denmark's written comment on draft Tor of the AMR independent panel on evidence for action

Gitte Hundahl [redacted]

Tue 6/16/2020 2:16 PM

To: amr-tjs [redacted]
Cc: M Denmark [redacted]; M Denmark [redacted]; Jeannette Nybo [redacted]; M Denmark [redacted]

Dear Tripartite Joint Secretariat on Antimicrobial Resistance at WHO

I have been requested to convey the following written comment from the Danish health authorities to your request for feed back from stakeholders, in your email of 3 June copied below:

"Denmark would like to express our support to the establishment of the Independent Panel on Evidence for Action Against Antimicrobial Resistance.

We support the draft Terms of Reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance and are also pleased to see the emphasis on implementation of measures and practical solutions to reduce the spread of AMR – particularly in low and middle-income countries. We see this as an important focus in the way forward for the global fight against AMR.

The panel will be of great importance to the national and international community providing much needed recommendations based on evidence analysis."

Best regards
Gitte Hundahl
WHO mission focal point for Denmark

GITTE HUNDAHL
MINISTER COUNSELLOR (GLOBAL HEALTH)

PERMANENT MISSION OF DENMARK TO THE UN IN GENEVA
MISSION PERMANENTE DU DANEMARK AUPRÉS DE L'OFFICE DES NATIONS UNIES À GENÉVE
RUE DE MOILLEBEAU 56, CASE POSTALE 435, 1211 GENÈVE 19

WHO: Inter-Agency Coordination Group terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Comments following consultation

Overall, these ToR are fine though a bit wordy.

There are several points that require clarification:

- This phrase at the beginning needs editing: *'Generate and communicate independent, robust and authoritative assessments of the science related to antimicrobial resistance across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment.'* It is suggested deleting all words after *'spectrum'*.

- There are some contradictions between the point *'Terms of office'*, which states that *'Members are expected to attend at least two thirds of the meetings of the Panel in a year to continue as members'* and the point *'Termination of membership'*, which states that '*The Chair and Vice Chair, in consultation with the Panel and the Secretariat, will reconsider membership if a member has acted in a manner that undermines the scientific and/or operational integrity of the Panel, or has been unable to attend two thirds of the meetings per annum (without apology)'*. This point would deserve some clarification, taking into account that missing one third of the meetings is already a lot (too much?): If a member is allowed to miss even more than one third of the meetings provided the member apologises, there is a high risk that business continuity and the quality of the work are jeopardised.

- Method of work: The draft ToRs have one main important shortcoming, which is that they do not define explicitly HOW the panel will work, i.e. it can be expected that such a scientific panel should mainly rely on scientific review of already published literature and evidence. It is somehow mentioned in part 4 on Guiding Principles but could be made a bit more explicit. It is unrealistic to expect that it would conduct research on its own; first, because that would duplicate other existing research initiatives and second, more importantly, because it seems that the Panel will have no resources on its own (see also comment below on this). It is unclear how the 10-15 members of the Panel will be able to do a global review (especially if they are to be unpaid, see below). In comparison, the existing Intergovernmental Panel on Climate Change (IPCC) relies on thousands of scientists all over the world for its assessment reports on climate change (compare ToR accessible at https://www.ipcc.ch/site/assets/uploads/2018/09/ipcc-principles.pdf: The role of the IPCC is to assess on a comprehensive, objective, open and transparent basis the scientific, technical and socio-economic information relevant to understanding the scientific basis of risk of human-induced climate change, its potential impacts and options for adaptation and mitigation. IPCC reports should be neutral with respect to policy, although they may need to deal objectively with scientific, technical and socio-economic factors relevant to the application of particular policies. Review is an essential part of the IPCC process. Since the IPCC is an intergovernmental body, review of IPCC documents should involve both peer review by experts and review by governments. The draft ToR for the AMR panel mention under point 5, last bullet point that operational guidance to describe ways of working, including functions and roles, Working Groups, meetings, reviews (peer and external),

consultations and Secretariat support is yet to be developed. However, the principle of work – i.e. scientific review of existing research – should be more explicitly mentioned already in the ToR.

- Relations with the Tripartite Plus: WHO, FAO, OIE, UNEP individually and to governments and the Global Leaders' Group. The text mentions that the Tripartite will provide the Secretariat of the panel. The Panel will not include anybody from these organisations, unlike the IPCC that includes people from WMO and UNEP. The Panel will be accountable only to the UN Secretary General. The ToR need to make it a bit more explicit then how the work of the Panel will feed/inform the work of the Tripartite and the Global Leaders' Group. Besides providing the secretariat, in terms of content, what would be the formal relationship between the new panel and the Tripartite organisations, and with governments? The ToR only very generally touch upon this regarding the need for a communication strategy under point 7.

- Funding: It seems that the panel will not have any funding, which of course puts in question how it will deliver a global scientific review of evidence encompassing such a wide range of disciplines across the One Health spectrum. According to point 5, 8th bullet point: Compensation: Members will receive no fees or other remuneration for their time. This would be a tricky point to raise because it would immediately open questions on the funding of the Tripartite organisations. IPCC is funded by its parent organisations WMO and UNEP and by voluntary contributions from its member governments and the United Nations Framework Convention on Climate Change. Also, for the IPCC governments provide further substantial in-kind support for activities, in particular by hosting Technical Support Units, supporting the participation of experts from their respective countries in IPCC activities, and by hosting meetings.

Finland

MINISTRY OF SOCIAL AFFAIRS AND HEALTH

Government of Finland; Feedback on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Date: 15 June 2020

There is a need for a Global AMR Panel. AMR is a silent pandemic. The epidemiology of AMR is complex, involving many sectors of the society. It is important to consider objectively how to guarantee the best expertise and ultimately effectiveness for the Panel to have a real impact on the decision-making process and the global progress.

The aims of the Panel are ambitious, including "providing evidence-based practical options for mitigation and containment actions and interventions". However, it may not be a very realistic objective for a high level Panel to be able to provide practical options for preventing AMR. Instead, the Panel should stay at higher level of collecting, assessing, evaluating and sharing the scientific evidence concerning AMR. The Panel would play a critical role in communicating the information across different sectors. This would help governments, multilateral organizations and stakeholders receive reliable, factual information that is useful in implementing practical actions on regional and local levels.

The Panel includes human, terrestrial and aquatic animal and plant health, environment, food and feed production and development sectors. The COVID-19 pandemic has raised global discussion on the importance of the work between human and veterinary sector in zoonosis prevention. Therefore, the relevant public health sector should be included as a sole sector to this Panel in order to ensure the expertise on zoonotic diseases prevention.

The epidemiology of AMR is complex and experts from multiple sectors are needed to assemble the Panel. However, when forming the Panel with highly multidisciplinary members, there is a risk that the focus may be lost. It is crucial to keep the focus of the Panel in preventing infectious diseases and keeping antimicrobials effective. Any other use of antimicrobials or aims in AMR prevention are not reasonable.

In proposing options for a multisectoral global AMR response, the panel should draw on experiences from other international health related processes and give in the first place priority to solutions that build on existing structures and processes.

The frequency of the Panel meetings should be mentioned in the Terms of Reference. Otherwise it is not possible for the potential Panel members to realistically assess the amount of work. It would also be advisable to include in the ToRs the possibility for virtual meetings.

Skillful communication should be one of the guiding principles of the Panel. Communication should be carried out in a way that scientific evidence can be used as part of the decision-making process, which is inextricably linked to several factors influencing in the society simultaneously. The COVID-19 pandemic has shown that it is difficult to implement, act and make decisions on the basis of contradictory scientific results, especially if they are not based on the most recent evidence. For the same reason, the requirement of consensus should not be an obstacle to communicating information.

Communication, information and conclusions of the Panel should rather be few and crystallized and to add value to tackling AMR instead of repeating already existing strategies and recommendations.

MINISTRY OF SOCIAL AFFAIRS AND HEALTH, Meritullinkatu 8, Helsinki, Finland.
P.O. Box 33, FI-00023 Government

France

[EXT] TR: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

JOUY Morgan [redacted]
Mon 6/15/2020 6:44 PM

To: amr-tjs [redacted]
Cc: M France [redacted]; M France [redacted]

Madame/Monsieur,

Suite à l'appel à commentaires sur le projet de termes de références du *Independent Panel on Evidence for Against Anmicrobial R esistance*, je vous prie de bien vouloir trouver ci-dessous les commentaires pour la France :

Avis favorable quant à la mise en place d'un panel d'experts indépendants, sous les conditions suivantes :

- La collaboration tripartite OMS, OIE et FAO fonconne bien eat il faut la conserver en « chapeau » tout en renforçant ses liens avec ou en y intégrant le PNUE ;
- Afin qu'il soit efficace et opérationnel, la composion du panel deavra être équilibrée et ne comprendre qu'un petit nombre d'experts ;
- Ce groupe d'experts devra se limiter aux mandats qui lui seront fixés et travailler en bonne intelligence et collaboraon aàvec les organisations internationales de la tripartite ainsi qu'avec le PNUE ;
- Il ne faudra pas multiplier les sous-groupes, afin de ne pas consommer trop de ressources humaines et financières qui seront plus utiles sur le terrain.

Cordialement,

Morgan JOUY
Attaché santé

Représentation permanente de la France auprès de l'ONU à Genève
et des Organisations Internationales en Suisse
route de Prégny 36 – 1292 Chambésy – Genève

France Unofficial Translation

Madam/Sir,

Following the call for comment on the Independent Panel's draft terms of reference for *Against Antimicrobial Resistance,* please find the comments for France below:

Favourable opinion on the establishment of a panel of independent experts, under the following conditions:

- The tripartite collaboration of WHO, OIE and FAO is working well and must be kept that way while strengthening its links with or integrating UNEP;
- In order for it to be effective and operational, the composition of the panel will have to be balanced and include only a small number of experts;
- This group of experts should limit itself to the mandates set for it and work in good intelligence and collaboration with international tripartite organisations as well as with UNEP;
- Subgroups should not be multiplied, so as not to consume too many human and financial resources that will be more useful in the field.

Kind regards

Morgan JOUY
Health attaché

France's permanent representation to the UN in Geneva
international organisations in Switzerland
Pregny Road 36 - 1292 Chambésy - Geneva

Germany

16.06.2020

Background

- From the document it does not become clear which role the UN member states will play in the establishment of the Independent Panel and the selection of experts. DEU suggests to foresee that member states have the possibility to propose members of the nomination committee.
- The scope of the work of the Independent Panel is not completely understandable: Does "health" include human and animal health? Why economic risks but not social risks? What is meant by "hygiene and sanitation risks"?
- A couple of the Panel's objectives will apparently overlap with the aims and objectives of already established international structures, e.g. WHO's Strategic and Technical Advisory Group for Antimicrobial resistance and the Global AMR R&D Hub. Therefore, we see a need to foster in depth collaboration and avoid duplication of efforts. More effort is needed for analyzing overlaps and including (the work of) identified actors in the work of the Panel

2. Objectives of the Panel across the One Health spectrum:

- We suggest editing bullet #2: Evaluate existing data and identify gaps in the evidence, science and implementation on antimicrobial resistance [Add] *and ways forward to fill these gaps*;

4. Guiding Principles

- We suggest adding a guiding principle titled: *Based on best practices*. This guiding principle aims to ensure that experiences and lessons of similar, existing entities, including the Intergovernmental Panel on Climate Change are considered (see also IACG Report, Considerations to Recommendation E3).

5. Structure & Membership

- ***Composition***
  - 10-15 experts are a sensible size for such a panel, but in the light of the comprehensive scope of the Independent Panel, expert support adding to the expertise of Panel members should be provided. Such support could be achieved within the proposed working groups. Relationship between organizational structures like the working groups with the Panel should be further elaborated and described.
  - Consider including other expertise, e.g. legal, supply chain management, special logistics.
- ***Selection of Chair and Vice Chair:***
  - To underline the independence of the Independent Panel, the Chair and Vice Chair should by appointed by the Panel itself.
- ***Terms of office***
  - "Panel members will serve for an initial term which can be renewed once*, for two years*." The addition of this would ensure for the future that the Panel members turns are ending in an alternating fashion, ensuring consistency of experience within the Panel.

- ***Decision making***
    - The definition of a quorum (e.g. 2/3 of members) would be useful.
- ***Secretariat***
    - The request for adequate funding of the Tripartite Joint Secretariat in order to support the work of the Independent Panel is well understandable, but misplaced in the terms of reference of the Panel.

8. Key performance indicators

- The input, process, and output indicators should be subject to a round of comments by member states, since they will be the main target group for the panel's work.

- It could be sensible to foresee an external evaluation accompanying the process (formative evaluation).

Hungary

[EXT] FW: (IACG) terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance. Deadline: 15 June 2020

Gaál Miklós - GVA [redacted]

Thu 6/18/2020 2:30 PM

To: amr-tjs [redacted]
Cc: M Hungary [redacted]

Dear Colleagues,
with reference to the below call for consultation on the ToR of the Independent Panel on Evidence for Action Against Antimicrobial Resistance (AMR), I am happy to forward to you – albeit a bit belatedly – the below considerations from Hungary.

We warmly welcome the progress made so far in setting up the Independent Panel on Evidence for Action Against Antimicrobial Resistance, and strongly endorse its mandate. The draft terms of reference (TOR) sets out relevant and important objectives for the Panel, that we support. We would only suggest two modifications and some further clarification, which are the following:

1. We would suggest unanimous decision-making within the Panel, instead of simple majority as per the current draft. Given that the reports to be made by the Panel should be strongly based on evidence, we suggest that all eventual disagreements among Panel members should be settled before their release. (Point 5)
2. We would suggest to reformulate the current reference to early to mid-stage professionals as priority members of the panel. In our view, as the composition of the Panel is rather concise, the early-carrier experts should rather have an observatory role, and participate in the working groups. Mid-stage professionals, on the other hand, should be included based on their scientific track record. (Point 5)
3. As the Tripartite secretariat should have an important role in supporting the Panel, its tasks (e.g. literature search, editing of reports, etc.) and its relationship with the Panel (e.g. accountability) could eventually be clarified in the TOR. (Point 5)
4. We consider the principle of non-duplication and complementarity to be of particular importance. In order to secure its effectiveness, we would suggest to put in place dedicated mechanisms at the Tripartite secretariat to support the Panel's and its working groups' communication and cooperation with the fellow experts and working groups of Tripartite and other international organisations, potentially also national institutes, academia, etc. (Point 4)
5. Furthermore, the TOR could also mention some of the key products to be prepared by the Panel (e.g. reports, evidence syntheses in specific thematic domains). (Point 8)

Finally, we would like to wish great success to this important initiative.

Once again, we apologise for the slight delay in our responses.
Best regards,

Miklós GAÁL
Attaché
Permanent Mission of Hungary to the United Nations Office and Other International Organizations in Geneva
1202 Geneva Rue de Grand-Pré 64, Switzerland

Japan

The comments in red are the feedback from JAPAN. These comments are made for the words/sentences highlighted in yellow in the draft ToR.

P1

Background

The COVID-19 pandemic and its impact on the entire global community illustrates the importance of heeding warnings about current and future disease threats, and the imperative for evidence-based action in the aftermath of the pandemic. The Panel's output will help to prevent and mitigate exacerbation of such risks.

Suggest deleting these sentences. COVID-19 is not relevant to AMR and in fact they are quite different infection in nature.

It causes loss of lives, impacts livelihoods, and disrupts the economy and the attainment of many of the Sustainable Development Goals .

Suggest listing main SDGs concerned for clarifying the problems.

P2

1. Purpose

Generate and communicate independent, robust and authoritative assessments of the science related to antimicrobial resistance across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment.

Suggest replacing "at" with "including". "at" implies only interfaces are assessed. It should not be forgotten that the most important and relevant science to control AMR lies in human health and medicine, not their interface with other sectors.

2. Objectives of the Panel across the One Health spectrum

Assess the evidence and science related to antimicrobial resistance in an independent, comprehensive and objective manner using a holistic systems approach;

Suggest adopting "scientific evidence" instead of evidence and science. It is hard to imagine evidence unrelated to science in this context.

Evaluate existing data and identify gaps in the evidence, science and implementation on antimicrobial resistance;

Suggest adding scientific before evidence.

Provide evidence -based practical options for mitigation and containment actions and interventions, including on local knowledge, and considering existing normative and standard setting functions, to address challenges in all settings, particularly in low-and middle-income countries;

Suggest adding scientific before evidence.

P3

4. Guiding Principles

The following are the key principles that are proposed to guide the evidence assessment and reporting of the Panel:

Suggest adding scientific before evidence.

Independence and political neutrality: As antimicrobial resistance is a complex issue that cuts across several sectors including economic, trade, food safety and security, human, animal and plant health and the environment, the work of the Panel should be free from political and group influence. It will define its priorities and workplan.

AMR is a health issue. AMR should not be considered as a trade issue. If international movement of resistant bacteria is a concern, international travels of human would be much more relevant than movement of agricultural products. Inclusion of “trade” sector would give a wrong message and avert people’s eyes from the real problem.
Suggest adding "reflecting the needs of Member States after workplan.

5. Structure & Membership

Sectors: human, terrestrial and aquatic animal and plant health, environment,

food and feed production and development sectors.

The list of sectors heavily biased on agricultural sector. Considering that the main concern of AMR has been human death, there should be more contribution from detailed human health related sectors. For example, food and feed production sectors can participate in issue specific working groups, rather than in the panel.

P4

・Decision making (including handling disagreements): Decisions shall be taken generally by consensus. Should a vote be necessary, decisions shall be taken on simple majority with the Chair having the casting vote should the vote be equal. When disagreements cannot be resolved, divergent views will be recorded and made publicly available.

What kind of decision of the panel would make?

P5

8.Key performance indicators: The Panel's performance will be measured by key input, process, and output indicators that assess the impact of its work. The metrics of these indicators will be agreed upon by the Panel at an early date. The Panel should assign members responsibility for collating and presenting stakeholder evaluation and supporting information to inform its effectiveness, drawing on independent expertise as needed. This information and assessment should be made publicly available.

It is odd that the panel itself develops indicators of its own performance. Suggest that indicators to be developed by the tripartite and agreed by their Member States.

Kenya

[EXT] Fw: Fwd: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

pmutuma@kenyamission.ch [redacted]

Tue 6/16/2020 11:00 AM

To: amr-tjs [redacted]

Good afternoon,

Please note below the comments on the draft terms of reference of the Independent Panel

1. There is need to clearly articulate the value add in having three separate structures being established, in addition to the tripartite secretariat. There is a risk of having duplicity of efforts and confusion of Member States when similar or sometimes opposing recommendations are presented to them from all these entities.
2. Include a timeframe within which the panel should present their report or recommendations for action. Against an open ended panel.
3. Define how you will ensure representation from developing countries. Explicit mention that Geographic representation of panel members will be based on nationalities and not where the members are based geographically for their work
4. Need to specify how the technical experts will be selected based on a balance between from MS, Research, Academia and Civil Society.
5. Elaborate on financing of the work of the Group. Travel and operating costs etc. This is important for conflict of interest.

Kind regards,
Peace Masinde-Mutuma
Counsellor Health

Permanent Mission of the Republic of Kenya
Geneva, Switzerland

Mexico

[EXT] NUA0402.- Comentarios de México / Borrador de Términos de Referencia RAM

Misión Italia [redacted]
Mon 6/22/2020 10:32 AM
To: [redacted]
Cc: amr-tjs [redacted]

Roma, a 22 de junio de 2020.

En relación con el **borrador de términos de referencia** para el establecimiento de un Panel Independiente sobre Evidencia para la Acción contra la Resistencia a los Antimicrobianos, se informa que los mismos fueron analizados por el personal técnico correspondiente de la Secretaría de Agricultura y Desarrollo Rural de México, entidad responsable del seguimiento de las acciones relacionadas contra la resistencia a los antimicrobianos.

En ese sentido, se considera que **el borrador contiene un claro planteamiento, así como los elementos necesarios** para la integración del citado Panel Independiente.

Mucho se agradecerá acusar recibo de la presente comunicación.

Atentamente,

Misión Permanente de México ante las Agencias de la ONU con sede en Roma

SRE
SECRETARÍA DE RELACIONES EXTERIORES

Permanent Mission of Mexico to the UN Agencies based in Rome
Via Bartolomeo Eustachio 15, 00161 Rome, Italy
[redacted]

Mexico, Unofficial Translation

Rome, 22 June 2020.

With regard to the **draft terms of reference** for the establishment of an Independent Panel on Evidence for Action against Antimicrobial Resistance, it is reported that they were analyzed by the relevant technical staff of the Ministry of Agriculture and Rural Development of Mexico, the entity responsible for monitoring related actions against antimicrobial resistance.

In this regard, the draft is considered to **contain a clear approach, as well as the elements necessary** for the integration of the independent panel.

Much will be appreciated to acknowledge receipt of this communication.

Kind regards

Permanent Mission of Mexico to the Rome-based UN Agencies

Namibia

[EXT] Contribution to terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Xungileni Chitundu [redacted]

Thu 6/25/2020 8:57 AM

To: amr-tjs [redacted]

Good day, please excuse us for the late submission. Please see the contribution of the Republic of Namibia below:

The rise in microbial resistance incidents is a threat to public health security. As a country, we have been confronted with microbial resistance in the clinical management of three diseases, namely HIV, TB and Malaria. The establishment of the Independent Panel on Evidence for Action Against Antimicrobial Resistance is critical for early identification of microbial resistance; inform termination of non-effective drugs, and the selection of effective drugs that are cost effective in a timely manner. Consideration of representation of experts from regions which disproportionately carry a huge burden of communicable diseases in the panel is recommended.

Submitted by,
Xungileni Chitundu, Second Secretary, Permanent Mission of Namibia, Geneva

The Netherlands

The Netherlands contribution to the consultation on the Terms of Reference for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

IACG recommended to establish an Independent Panel on Evidence for Action Against Antimicrobial Resistance in a One Health context to monitor and provide MS with regular reports on the science and evidence related to AMR, its impacts and future risk, and to recommend options for adaptation and mitigation.

The Netherlands thanks the Tripartite secretariat for the draft Terms of Reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance. We have the following remarks:

Purpose

The NL agrees that there is an urgent need to provide robust and authoritative assessment of the science, data and evidence related to AMR. The purpose of the panel, as described in the draft ToR, is to focus on the evaluation and analysis of data.
We would like to emphasize that it is important that the panel complements on ongoing work and not duplicates the work already done by MS or other organisations in this area.
We would also like to stress that identification of gaps and areas where data is missing should also be an important purpose of the panel.

Objectives of the panel:

- Analysis of data: It is not clear whether the group itself will analyse data or will work on assessments provided by MS or other organisations and which.
- In this context, it is important to ensure that there is no duplication with the scientific and technical work that has already been done by Member States, Tripartite or other international organisations or initiatives.
- The work of the panel should also prioritize identifying gaps and provide advice in areas where data to generate evidence is missing.
- It is not clear what will happen with the reports published by the panel.
  For example: Will there be a follow up of the implementation of the recommendations or translation into interventions by Member States/Tripartite, etc. for each of the reports? Will this be included as key performance indicator?

Accountability:

- We think that is important that the panel also reports to the governing bodies of each Tripartite organizations and UN environment.

Guiding principles:

- The independence of the panel and its working groups, in relation to other established groups, organizations, data providers, etc. should be ensured and reflected in the ToR.
- The relation of the panel and its working groups with other existing expert groups of the Tripartite or other UN organisations is not described.
- The ToR should also include how the panel will address possible requests for advice by the Tripartite/UN environment, MS or other organisations.
- The Netherlands emphasises that it is essential not only to include in the panel representation across the One Health spectrum, but to ensure that the work of the panel will work in all the One Health spectrum. Especially plant health, environment, food and feed production and food safety sectors should be covered.

Structure and membership:

- Working groups: overlap with other established groups should be considered in order to avoid duplication of work.
- It is not clear how the panel and its working groups will be financed.

Communication with governments and other stakeholders:

- The communication strategy with governments and other stakeholders needs to be broader described in the ToR.
- The tripartite launched a public discussion last year on ToR of the One Health Leaders Group on AMR. The definitive ToR has not been published yet. A consultation to discuss the ToR of both groups is necessary to understand how this independent panel will function in relation to the Leaders group.

Key performance indicators

- It is also important to assess the impact of the reports of the panel, to evaluate the implementation by MS, tripartite (plus) and the impact of the recommendations.

Russian Federation

Dear colleagues!

Let me thank the Advisory group for the prepared materials, the terms of reference of the Independent Panel on Evidence for Action Against AMR.

There are several suggestions on the points of the draft document:

1. Goal. It is important to provide for the **development of recommendations** based on **periodic reports** for the implementation of evidence-based measures at the global and national levels. The report raises the awareness of States about the problem of AMR and the variety of ways to overcome it with the most advanced methods, but the mission of the recommendations is to provide specific tools and mechanisms against AMR both at the national and global level.

2. In order to achieve the **objectives of the Panel** across the entire spectrum of health, access to various sources of information is required, where scientific, practical, organizational, managerial, and economic data on AMR issues are presented in all relevant sectors. Therefore, in order to achieve the objectives of the Panel, it is necessary to provide a **Dynamic Dashboard** that will be linked to observatories of documents and data from WHO, FAO, OIE, Global R&D centers, international partnerships, foundations, the academic communities and the private sector.

One of the objectives: "Provide evidence-based practical options for mitigation and containment actions and interventions, including on local knowledge, and considering existing normative and standard setting functions, to address challenges in all settings, particularly in low-and middle-income countries", these information should also be supplemented with recommendations. Given that the Panel will accountable to the UN Secretary-General, it is desirable that the Panel's **periodic reports and recommendations** be approved by a resolution of the UN GA. In this case, they will become a guide to action for the UN member States.

5. Structure and membership: Who will select experts as Panel members and how? As the text ensues, this mechanism will be presented in another document. We suggest creating a **Database or List of experts** with the necessary competencies. This database will be useful not only for creating a Panel, but also for selecting members of **Working groups** or **Advisory group** to solve various current tasks. This **List of experts** will allow the members of the group to rotate after the expiration of their terms of office to the other experts who are competent in this field.

Gabbasova Lyalya, Assistant to the Minister of Health of Russian Federation, MD, PhD, Professor, Member of IACG, the Representative of the Russian Federation in the Committee on Bioethics of the Council of Europe, Member of G20 Health Working Group from the Russian Federation, Coordinator of the intersectoral Action Plan against AMR in the Russian Federation.

Spain

[EXT] SPANISH COMMENTS - Online Consultation with Member Countries - Establishment of an Independent Panel on Evidence for Action Against Antimicrobial Resistance

Consejeria Fao [redacted]
Wed 6/10/2020 10:02 AM

To: CVO@fao.org [redacted]; amr-tis [redacted]
Cc: Prieto Gómez, Juan [redacted]; Eiriz Gervás, Gonzalo María [redacted]

En relación con la pe ción de comentarios sobre el borrador del mandato para el Panel Independiente sobre Evidencia para la Acción contra la Resistencia a los An microbianos, comunicamos que por parte de España **no hay comentarios.**

Aprovechamos la ocasión para enviar un atento saludo.

Consejería de Agricultura, Pesca y Alimentación y
Representación Permanente de España ante la FAO
(Oficina de los Representantes Adjunto y Alterno)
EMBAJADA DE ESPAÑA
Via del Gesù 62 - 00186 Roma

GOBIERNO DE ESPAÑA
MINISTERIO DE AGRICULTURA, PESCA Y ALIMENTACIÓN

Spain, Unofficial Translation

With regard to the request for comments on the draft mandate for the Independent Panel on Evidence for Action against Antimicrobial Resistance, we communicate that **there are no comments** from Spain.

We took the opportunity to send a greeting.

Ministry of Agriculture, Fisheries and Food and
Permanent Representation of Spain before FAO
(Office of the Deputy and Alternate Representatives)
EMBASSY OF SPAIN
Via del Jesus 62 - 00186 Rome

Government Offices of Sweden

15 June 2020

Swedish comments on the draft Terms of Reference (ToR) for the Independent Panel on Evidence for Action against AMR

Sweden would like to thank the Advisory Group for drafting these Terms of Reference and the Tripartite Joint Secretariat for the opportunity to provide feedback. We find the draft to be clear and concise and have only a few comments and requests for further clarifications.

General comments:

Sweden is firmly committed to the fight against AMR. In this context, we welcome the recommendations provided by the Interagency Coordination Group, IACG and the establishment of the Independent Panel on Evidence for Action against AMR, hereinafter referred to as the panel.

It is important that this panel contributes to tangible impact at country level and that the secretariat support provided by the Tripartite does not draw resources from support to country implementation. Furthermore, existing work must be considered to avoid unjustified overlap, duplication of work, or conflicts with existing structures and systems. The panel's mandate could possibly be reviewed more often than every 5 years and adding a vision for the panel in the background section could further strengthen its focus and legitimacy

We would have appreciated to consider the ToR for the Partnership Platform simultaneously as well as information on the status of the One Health Global Leaders Group on AMR (GLG) as these functions complement one another to form a strong structure for global governance of AMR.

Specific comments:

1. **Purpose**

The purpose of the panel is currently formulated close to its objectives and we propose focusing more on the reason *why* the panel is needed in order to not overlap with section 2, objectives. You may also want to specify the periodicity of the panel to deliver its reports, for example at 2-year-intervals.

2. **Objectives of the Panel across the One Health spectrum**

The number of the panel delegates seem low in relation to the work to be delivered and areas of competence required, especially as members are not to be compensated financially and activities include attending meetings and regular participation in the development of reports. We assume that therefore working groups may be established ad hoc, but this should be clearer to the reader. In this context it is important to emphasize the importance of covering all areas of competence as well as representation from countries with different conditions in the panel activities. We also suggest mentioning the One Health strategy and the work to be done also within the sectors, not only mentioning the interface between sectors in the objectives.

Moreover, the ToR might benefit from clarity on what the panel should not do, in addition to defining what it will do.

3. **Accountability**

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4. **Guiding Principles**

The panel is to *seek input and feedback on its work and priorities*, but who assigns the panel? In comparison it can be mentioned that the Intergovernmental Panel on Climate (IPCC) is commissioned by UNGA and IPPBES by conventions. In order to provide a good basis for decision and priorities there should be a clear mechanism for panel assignments or tasks.

Moreover, the panel should be complementary and not duplicate work - yet we believe there is a risk that panel will do things that FAO, WHO, UNEP and others do today. Thus, we propose clear wordings that panel will draw on these organizations' data and knowledge followed by a description of the

added value of the panel, which we believe should be *to analyze and interpret data and information*.

Point 4.3 regarding the relationship with the standard setting organizations is very important. Reports from the panel must not be used as arguments for not meeting internationally negotiated standards in for example OIE and Codex Alimentarius Commission and we propose to add some wording on that. It is important that international standards can continue to be negotiated and adopted without further increasing the requirements for evidence before measures are implied. This is especially important in areas and sectors in which there may be gaps in knowledge regarding the direct impact on human health.

5. Structure & Membership

Expertise of evaluating and validating evidence must be reflected in the requirements of the panel members as this is a key objective for this panel.

The relatively low number of panel members does not allow for all disciplines to be represented at the same time and we assume that is the reason behind the working groups. We see a clear advantage to use ad hoc working groups given the breadth of issues the panel will address. However, as the composition of the working groups will be important, we think that the ToR should clarify that if any of the listed competencies is lacking in the panel for a certain assignment, this should be accounted for in the establishment of a working group. We note that health systems research is not mentioned as a discipline and would like to emphasize that this is a highly relevant research field for AMR.

Regarding the selection and nomination processes, it is vital that these are transparent, and we propose to be more specific about which requirements are placed on those who may be included in the nomination committee.

Gender and regional balance must be ensured in the composition of the panel.

According to the proposed draft, no remuneration will be paid to the members. We propose to re-consider the possibility of compensating the *employers* of a potential member as we believe this would increase the chance for experts who for various reasons are difficult to replace in their home organizations to participate in the panel or in the working groups. Moreover, experts from low-income countries may not be able to participate in the

panel's activities if remuneration is not paid and this needs to be addressed in the creation of the panel.

Please clarify the type of support provided by the Tripartite Secretariat. Does it include communication or administrative support?

6. **Declaration of interests**

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7. **Communication with governments and other stakeholders**

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8. **Key performance indicators**

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Thailand
Ministry of Public Health

Responses to the Final Draft Terms of Reference (TOR) to the Independent Panel on Evidence for Action Against Antimicrobial Resistance

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Overall, the draft TOR is clear and concise. There is an observation about a communication pathway of the Panel with the UN Secretary General and the Global Leader Group. The draft TOR may not clearly specify this issue. According to one of the IACG's recommendations, the Panel would be convened under the UN Secretary General and indeed it should collaborate closely with the Global Leaders Group. As a result, we think the communication pathway should be clearly specified. Thus, we propose that the Panel should confer and report to the UN Secretary General and the Global Leaders Group on related matter at least once a year – to be a part of TOR. A minor observation is about the panel characteristics that should include expertise such as policy and strategic development and management, implementation sciences and evaluation in order to bring a holistic systems approach into consideration and actions.

United Kingdom

HM Government

Independent Panel on Evidence for Action against Antimicrobial Resistance (AMR) - Draft Terms of Reference

UK Government response to the WHO/FAO/OIE-led public consultation

Submitted 15 June 2020

Contents

Our Response

The UK Government response to the draft terms of reference (ToR) for the new Independent Panel on Evidence for Action Against Antimicrobial Resistance (AMR) includes both overarching comments as well as more detailed feedback aligned to each of the ToR sections. It responds to the public consultation published by the Tripartite Joint Secretariat on 15 May 2020.

The response has been coordinated by the Global AMR Diplomacy Team, Department of Health and Social Care, with contributions from:

- Defence Science and Technology Laboratory;
- Department for Environment, Food and Rural Affairs;
- Food Standards Agency;
- Foreign and Commonwealth Office (FCO), including:
    - UK Mission to United Nations, New York
    - UK Mission to the United Nations, Geneva
    - The UK Science and Innovation Network
- Public Health England;
- The UK Special Envoy on AMR;
- UK Research and Innovation; and
- Veterinary Medicines Directorate

Overarching Comments

Introduction

1. The UK is very encouraged by the steps that are being taken to meet the UN Secretary General's request for the Tripartite Joint Secretariat to take forward the modalities of implementation of the UN Ad-Hoc Interagency Coordination Group (IACG) on AMR's 2019 recommendations. We would like to thank the members of the Advisory Group who gave their time to consider 'best practice' in the area of global governance and evidence panels and the members of the Tripartite Joint Secretariat who supported them. While many global health professionals have been redeployed to tackle the current acute crisis of the SARS-CoV-2 pandemic, it is vital that work to progress international action on antimicrobial resistance (AMR) is taken forward.

2. While welcome as a step forward, the draft Terms of Reference (ToR) does, however, raise more questions than it answers. The UK would like to see a more detailed ToR developed and consulted on rapidly that clarifies among other things:

    a. the engagement of the Independent Panel on Evidence for Action against AMR (hereafter, 'Panel') with the other global governance structures;

    b. the internal structure of the Panel and its sub-groups; and

    c. the scope of work that the Panel will undertake, including the prioritisation of focus, the appointment of the working groups to address these topics and the process for report delivery.

3. The UK welcomed the involvement of a multidisciplinary Advisory Group to support the Tripartite Joint Secretariat in developing the draft ToR and was therefore surprised not to see more evidence of the Advisory Group's thinking and where they considered - from the 11 examples of other panels drawn together for their consideration by the Tripartite Joint Secretariat and any other relevant models - specific 'best practice' to be the most relevant to the specific context of AMR. We feel that our response to the draft ToR - and the overarching consultation exercise - would have been enhanced by having more insight into the critical appraisal that the Advisory Group undertook. We are disappointed that the Advisory Group's evaluation of the other models and their rationale for their recommendations that should ultimately underpin the ToR were not been published alongside the draft ToR itself and would respectfully request this be rectified.

4. More specifically, we were disappointed to see that several important areas that had been critically appraised by the Advisory Group were not included in the draft ToR. The Introduction (Executive Summary) to the reference paper on models to inform the

development of Terms of Reference of the Independent Panel on Evidence for Action against AMR states that the Advisory Group critically appraised data for the 11 different relevant models identified on:

a. **Governance structure:** Describes the composition and responsibilities of the different levels including plenary, executive, oversight/project management, output production and secretariat levels.

b. **Prioritization:** Outlines the approaches to selection of topics and priority areas and who is involved in the process.

The draft ToR would benefitted from more detail on both of these areas and a diagram illustrating the proposed working structure, in a similar vein to the GEO-6 structure shown in Figure 1 of the Executive Summary.

5. In the spirit of greater transparency in this process, we would like to see all of the responses to this consultation published on the WHO's website, just as they were for the consultation on the Global Leaders' Group on AMR.

Panel structure, scope, roles and interdependencies

6. While the draft ToR clarifies many aspects we would like to see included in the establishment of the Panel, it devolves much of the responsibility around decision-making on key functionalities and rules to the as yet unformed Panel itself. While it is right that the detailed ways of working should be decided by those who will be implementing the actions, the overarching mandate and structure for the Panel should be agreed prior to its establishment - informed by the ToR Advisory Group and the responses to this consultation - so that future Panel members are aware of their commitments before joining. This would include a steer on how many meetings per year that Panel members would be expected to attend, the amount of work required of them, how research questions would be prioritised, how the scope of reports would be defined, how contributions to the reports would be sought and how frequently reports would be published, for example.

7. The Panel should report to its convening bodies (the WHO, FAO and OIE, along with the Office of the UN Secretary General) and to the Member State governing bodies[1] of the three Tripartite organisations on an annual basis. In the first three years of its existence, as the Panel establishes itself and its ways of working, it should produce

[1] The Council and/or Conference of the Food and Agriculture Organisation of the United Nations, the Executive Board and/or World Health Assembly of the World Health Organisation and the Council and/or World Assembly of Delegates of the World Organisation for Animal Health

yearly reports on the latest science and evidence on AMR; thereafter, it may wish to consider reducing the frequency of reporting to every two years.

8. In an area as vast as AMR, prioritisation is key. The Panel should conduct some sort of consultation process on the scope of each report, with the input of the Tripartite and other relevant stakeholders, including other relevant UN and international organisations, Member States, civil society and industry. The new Partnership Platform could be a useful convening tool for the non-state actor/industry stakeholder views. If different stakeholders are involved in shaping the scope of a report, they may be more invested in engaging with the outcomes and supporting recommendations for action.

9. When compared to the composition of the 11 panels and committees whose structures were critically appraised to inform these Terms of Reference, 10-15 experts working on a *pro-bono* basis is a very small resource to undertake the tasks allocated. AMR is a vast area, with a significant amount of evidence to review, synthesise and translate into policy recommendations. The need for a single independent body to report on the latest science and evidence is critical to the global community moving its thinking and collective action forward. Therefore, we should ensure that the Panel - in whatever format it takes - is sufficiently resourced, supported and endorsed by UN Member States.

10. To address the mismatch between the resource allocated and the aims of the Panel, we would suggest that the Panel - with the support of the Tripartite where appropriate - operates as a 'hub and spoke' model, creating working groups to complete specific reports or sections of reports. Once the scope of a report has been agreed, the Panel (the 'hub') should put out a call for proposals from relevant stakeholders interested in forming working groups (the 'spokes') and providing input on a *pro bono* basis. The stakeholders should be from academic centres, universities, learned societies and WHO/FAO/OIE Collaborating or Reference centres. The Panel may also wish to consider accepting additional support from philanthropic and non-government organisations. Similar to the model used by the Intergovernmental Panel on Climate Change, the experts on these working groups would be funded for their work either through the institutions they represent or directly by Member States rather than through the Panel structure. The make-up of the working groups should represent a balance across geographic regions and gender.

11. Ideally, the Panel would produce reports that are tailored to the needs and circumstances of different stakeholders, in the same way that Global Environmental Outlook does. If resource constraints preclude this, the reports should be structured in a way that different sections, including the high-level summaries and findings, can be used independently according to geographic or sectoral context.

12. It has regrettably not been possible for us to comment on the interaction of the Panel with the Global Leaders' Group and the Partnership Platform as this is still to be finalised. Once the Terms of Reference for the other two governance structures have been agreed, the Tripartite Joint Secretariat should develop an overarching Terms of Reference that describes how the three structures will relate to each other and other stakeholders, including Member States, international organisations, the Global AMR R&D Hub, the Joint Programming Initiative on AMR, the International Centre for Antimicrobial Resistance Solutions, the CGIAR AMR Research Hub and any other structures synthesising evidence on AMR, and release this document for public consultation. The Panel's work should not duplicate work happening in other fora.

13. In addition to the above, a key gap in the current ToR is how the Panel should interact with the scientific advisory panels to the Tripartite organisations (such as the WHO Strategic and Technical Advisory Group for Antimicrobial Resistance (STAG-AMR)), panels established to develop normative products and guidelines and the large number of AMR-relevant WHO-, FAO- and OIE-designated collaborating and reference centres around the world that are already generating and synthesising key evidence and supporting policy-making across the 'One Health' spectrum.

14. Finally, with regard to the question of secretariat support, we acknowledge that there could be some conflict between the objective to create a fully independent Panel and the provision of support from the Tripartite Joint Secretariat. However, there is also no appetite to create new and expensive structures and processes. A hybrid model could be for the Tripartite Joint Secretariat to continue to facilitate the creation of the Panel before handing over to a small secretariat function that could be funded/provided by a non-state actor in official relations with the WHO/FAO/OIE. The Panel and their secretariat could retain the Tripartite Joint Secretariat as the mechanism by which they 'dock' into the Tripartite organisations, their governing bodies and the other two key AMR governance structures (the Leaders' Group and the Partnership Platform).

The context of COVID-19

15. There are clear comparisons to draw between the impact of SARS-CoV-2 and the effects that increased AMR are projected to have on our global health systems, economies, food systems and more. In addition, emerging evidence suggests that secondary bacterial and fungal infections, including those that are drug-resistant, are present in some COVID-19 deaths, and that the global response to the novel coronavirus may impact on the development of AMR. However, due to the pace of the pandemic, much of this literature is yet to be peer-reviewed, and robust evidence highlighting the links between COVID-19 and AMR remains to be developed.

16. These links include the potential impact on rates of drug-resistant infections and development of new resistance directly or indirectly attributable to COVID-19, lessons to learn for AMR mitigation in the way the current pandemic is being addressed, and

the similarities between the impacts of COVID-19 and AMR on health, society and the economy which can be used to make a clear case for more investment in action on AMR. Addressing this evidence gap should be one of the Panel's first priorities.

17. More broadly, the changes to the political, economic and social environment that COVID-19 has wrought and the risks and opportunities these present for ongoing action to address AMR should be considered by the Panel as part of their reports.

The environment as a priority

18. Another clear gap in current understanding that should be prioritised by the Panel is the causes and impacts of AMR in the natural environment, and the role of AMR reservoirs. A priority within this is the development of a clear evidence base around the suspected link between antimicrobial residues and AMR in the environment (and indeed in animals) and the presence of drug-resistant pathogenic microbes in humans: a significant gap when it comes to policy generation globally.

19. Please see the next page for our detailed comments on each section of the draft Terms of Reference.

Section-by-Section Review

Purpose

1. One of the most important roles of the Panel will be to collate the latest science and evidence and what it means, highlight evidence gaps and advocate for additional evidence generation where it is needed most. The latter role should be given more prominence in this section.

2. Given the importance of the work of the Panel and its influential role, and the intersectoral and cross-cutting nature of AMR, the purpose should also include reference to improving global health security and supporting the realisation of the UN Sustainable Development Goals. It is also important to link to efforts to achieve universal health coverage (UHC), as highlighted in the 2019 UN resolution on UHC.

Objectives of the Panel across the One Health spectrum

3. As mentioned in the 'Overarching Comments' section, in order for the Panel to be truly independent, the Tripartite Joint Secretariat could continue to facilitate the creation of the Panel before handing over to a small secretariat function that could be funded/provided by a non-state actor in official relations with the WHO/FAO/OIE.

4. The evidence reviewed and reports and recommendations produced by the Panel should cover the full spectrum of multisectoral aspects of AMR, in the development of resistance, and the impact of different interventions to address and mitigate AMR within and across the key sectors including but not limited to:

    - Microbiology;
    - Public health, including infection prevention and control;
    - Agricultural and crop science;
    - Water, Sanitation and Hygiene;
    - Health and food systems research;
    - Macroeconomics, global finance and trade;
    - International law;

- Political science; and
- Anthropology, sociology, implementation and behavioural sciences.

5. Under the third bullet in this section of the draft ToR, the Panel should also assess the impacts of AMR on global trade, food safety and food security.

6. Whilst we anticipate that the Panel will focus on science and evidence from the 'natural' sciences, they must also seek input from the relevant 'social' sciences, including anthropology and economics as well as implementation and behavioural sciences.

7. The Panel's ultimate aim is to generate the evidence for action to address AMR from a position of independence and *not* to generate policy or guidance. For that reason, any recommendations for action that the Panel makes should be passed to the normative committee(s) of the relevant Tripartite organisation(s) (or other relevant UN or international body) for their consideration and for them to take forward as appropriate.

8. Member States and the relevant normative committees as described above should be the principal audience for the Panel's reports. The reports should synthesise the very latest science and evidence, highlight gaps in evidence, advocate for further work in these under-researched areas, and recommend possible areas for action for the Tripartite normative committees. The existing governance of the relevant UN/international organisations and their normative committees will provide the authority for the follow-up of the recommended action and will provide the oversight to ensure action is non-duplicative.

9. The publication of reports should also be timed to ensure that their findings can feed into global decision-making processes relevant to AMR, for example UN events on AMR, the 2021 UN Food Systems Summit and the 'Great Reset' convened by the World Economic Forum in January 2021 as well as the relevant governing bodies' calendar of meetings.

Accountability

10. We agree that the UN Secretary General should be involved in the establishment of the Panel. However, it is unclear what it means in practical terms for the Panel to be 'accountable' to the UN Secretary General, beyond convening the Panel itself. This needs to be clarified. For the Panel to be truly 'independent', the UN Secretary General's role in supporting the Panel should not be unduly influenced by the Tripartite. Furthermore, to ensure continued member state ownership and engagement, the governing bodies of the Tripartite organisations (WHO, FAO and OIE) must have a role in the Panel's accountability structure.

Guiding Principles

11. We broadly agree with the guiding principles as drafted, but suggest the addition of a further three points:

    - **Public and community engagement:** The work of the Panel will provide an excellent opportunity to generate public interest in - and action on - the latest science and evidence on AMR. It is therefore vital that the Panel's outputs include - at a minimum - plain language summaries that are accessible to non-experts and can be used by civil society and non-state actors. The Panel may wish to consider what it can learn from other panels regarding how they manage their public engagement strategies;

    - **Strengthening existing systems:** AMR is a cross-cutting issue that needs to be mainstreamed into existing systems: this raises awareness, facilitates synergies and improves efficiencies; and

    - **Sustainability:** AMR is a long-term issue and any interventions to address it need to be sustainable.

Structure and Membership

12. It is unclear from the ToR how the proposed Nomination Committee will be established. Whilst it is unnecessary to create layers of bureaucracy on who nominates whom, it will be important to set out who in the Tripartite will act as this Committee and on what basis they will make their recommendations.

13. In order to recruit the right composition, it is important that the Nomination Committee is multi-disciplinary and contains representatives from across the One Health spectrum.

14. The Panel membership needs to be able not only to review the available science and advocate for new research where there are gaps but to make recommendations for action for the consideration of normative committees and member states. Hence, we propose that the Panel and/or working groups include expert practitioners in disciplines that can support the translation of evidence into action, covering:

    - International law and trade (especially agricultural and pharmaceutical trade);

    - Agriculture (business, practice and management); and

    - Macro economics and finance.

15. Member states should be invited to provide recommendations for Panel members.

16. There is a mismatch between the resources provided to the Panel (10-15 experts working on a *pro-bono* basis) and the expected outputs. In addition to our feedback in the 'Overarching Comments' section on this matter, we want to emphasise that the Panel must be sufficiently resourced to perform its functions whilst recognising there may be little collective appetite to create any significant new funding stream for its work. It is for this reason that a creative solution - such as leveraging in-kind support from outside institutions - will be necessary.

17. Whatever the final secretariat model becomes (whether it is provided by the Joint Tripartite Secretariat or smaller, independent support team), the Panel should be resourced and supported to fulfil the actions under the ToR to:

    - Establish and maintain Working Groups;
    - Develop and employ a communications plan;
    - Develop operational guidance;
    - Develop Key Performance Indicators; and
    - Collate and present stakeholder evaluation and supporting information.

18. All of these processes and documents should be subject to regular review. In addition to these actions, the Panel should be supported to develop any policy briefs or highlights for any relevant high-level forums.

Declaration of Interest

19. This is a vital point. If a conflict of interest would interfere with the work of the Panel and/or its working groups, or violate the guiding principles, this should result in termination of membership, or a prospective member's application being rejected.

Communication with governments and other stakeholders

20. Whilst the primary audience for the outputs of the Panel should be the relevant governing bodies, it will be vital for the Panel to communicate more widely. It would be sensible for the three elements of the AMR governance structure - the Panel, the Global Leaders' Group and the Partnership Platform - work together on a joint communications strategy where this is appropriate.

21. The future UN High-Level Dialogue on AMR or equivalent UN-level meeting should include a targeted session on all three governance structures, their mandate and ways of working and interaction.

22. The Panel will need to engage with other structures working on the evidence base for AMR, including but not limited to the Global AMR R&D Hub, the Joint Programming Initiative on AMR, the CGIAR AMR Hub and the International Centre for Antimicrobial Resistance Solutions, as well as the WHO/FAO/OIE collaborating and reference centres, ensuring that it complements rather than duplicates the work of other research mechanisms.

23. Key stakeholders for communications should include those working in AMR-relevant sectors, such as infection prevention and control, health systems strengthening, access to medicines and universal health coverage programmes, as well as animal husbandry and waste water management. We would like to see the Panel engage with efforts to strengthen the International Health Regulations 2005. A clear mechanism should be identified to link the outputs from this panel to influencing actions at national and local level to improve global health security.

24. In the absence of the formal participation of UNEP in the Tripartite Joint Secretariat, it will be vital to establish strong, informal links with UNEP as well as the UN Environment Assembly to ensure that the environmental elements of the One Health agenda are fully supported by and feed into the correct part of the UN/international organisation family.

25. The three organisations of the Tripartite (WHO, FAO and OIE) should be equally represented in their engagement with the Panel.

Key Performance Indicators

26. We would like to see clear action-oriented and time-bound indicators developed by the Panel, with outcomes shared publicly and in a timely manner using clear impact assessment frameworks. The indicators should include, for example:

    - Quality, quantity and frequency of reports and recommendations produced within a specific timeframe;

    - Linkages with AMR-relevant areas, including but not limited to universal health coverage, infection prevention and control and the international health regulations; and

    - Evidence of recommendations translating into policy and into normative guidance and standards.

United States Comments on "Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

General

- The mandate of the panel – to review evidence about the entire spectrum of science pertaining to antimicrobial resistance across the One Health spectrum – is very broad. This, combined with a small panel of 10-15 members, may make it quite challenging to address the breadth of evidence and has the potential to mislead motivations and prioritization of what the Panel decides is and is not worthy of their attention.
- To maintain confidence in the Panel, we encourage transparently whenever possible and ask the Panel provide public and transparent work plans with clear ranking of project priorities, who and what the proposed working group subjects and mandates are, and proposed time frames.
- The TOR appears to oversimplify a very complex issue, which can vary greatly in countries based on disease prevalence, antimicrobial drug susceptibilities, antimicrobial drug availability, animal species present, husbandry practices, and local conditions.
- It is not clear whose auspices this Panel is operating under. To whom does the Panel report? We kindly request a comprehensive outline and/or platform to understand how this group will interface with the Tripartite, IACG recommended governance bodies, and UN governance structures and groups to ensure it conducts its work in unison with ongoing work in AMR in a non-duplicative, transparent, and independent fashion.
- In addition, the TOR should provide clear information on how it will remain independent while being supported by an IO Secretariat and being linked to IOs and other governance structures. Will the WHO/FAO/OIE have input into the work products or work plans of the Panel? Where will the funding come from? And if the IOs are providing funding how will the Panel maintain independence?
- The TOR calls on the panel to coordinate with other international organizations. There are also a number of authoritative national scientific organizations, such as the U.S. National Academy of Medicine, that evaluate the evidence about antimicrobial resistance. In the interests of non-duplication, which is stated as a principle to guide the panel, it would be desirable for the TOR to direct the panel to coordinate with such authoritative national scientific organizations.
- If terminology such as "evidence-based" is used, it will need further definition and transparency in regards to the quality of evidence found. "Scientific" evidence is more in line with existing international standard setting bodies and we suggest putting science into the title to read: "Independent [Scientific] Panel on Evidence for Action Against Antimicrobial Resistance".
- We remain concerned that there have not been consultations with Member States on the Interagency Coordinating Group's (IACG) recommendations, the follow-up work taken on by the Tripartite since their release, or during the time the IACG was forming their advice. Member States have expertise in both governance and technical AMR action, including funding and implementation of policy and programs, that should be considered when determining how the global governance of AMR should be formed. The TOR only

references the group reporting to Member States but does not provide any information on consulting with them. We request more information on how this group will engage with Member States and encourage it do so in a frequent and transparent manner. Please note we are not requesting Member States have any approval or ability to censor the work of the Panel as that would preclude this from being an independent panel. We are expressing our concern that if the current trend of excluding Member States continues, there will be little trust in the work products coming from the Tripartite and the governance structures it is creating.

Specific

Background

- The background sections explains that the Panel will "resolve scientific disagreements". Resolve implies that the Panel would work as a mediator between studies or provide additional research to determine which side of the disagreement is correct. As both of these things are unlikely based on the TOR, we suggest this be changed to provide insight and advice when there are scientific disagreements.

Purpose

- Please clarify if the Panel will specifically focus on the interface between "…human, terrestrial, and aquatic animals and plant health, etc…" or will also focus on the individual categories (for example antibiotic stewardship for human medicine)? Certainly a One Health approach is important, but some antimicrobial resistance issues and pathogens are largely focused in one domain - human health (S. aureus for example).
- We suggest the Panel clearly define which categories of pathogens will be covered under its mandate. We encourage the Panel to focus on bacterial resistance, and fungal resistance (Candida), and not include viruses (HIV), parasites (malaria) and mycobacteria (TB). If the Panel defines a broad mandate that includes viruses (HIV), parasites (malaria) and mycobacteria (TB) we ask the TOR be updated to clearly explain how the Panel will work with the already existing expert groups dedicated to those topics.

Objectives of the Panel across the One Health spectrum

- Determining evidence-based options for all scenarios seems unfeasible. Rather, the Panel's reports should help inform stakeholders about how to evaluate evidence and inform on options for making planning or policy decisions.
- In providing "evidence-based practical options" for mitigation and containment actions, are these risk management options? Appropriate risk needs to be assessed based on local conditions to help countries prioritize based on risk in their own countries. Any development of risk management options should be done in consultation with Member States.

- What is the quality of evidence the group is looking for? Low? Medium? High? There is a lot of evidence already that countries use for developing risk-proportionate, risk management actions. What added value will this panel bring?

Guiding Principles

- *Independence and political neutrality:* Trade should not be included in the Panel's mandate. This Panel as written is meant to be "free from political and group influence" which we agree with, therefore subjects such as trade which are inherently political should not be included in the mandate.
- *Non-duplication and complimentary:* In order to further prevent duplicative efforts, will existing ISSB standards and guidance, including from the World Organization for Animal Health (OIE) and Codex, be used for agriculture issues? The Codex Alimentarius Commission (CAC) is made up of 189 Member States and has developed guidelines for foodborne AMR through risk analysis (CAC/GL-77-2011). The work that experts have already developed over years, after spending many resources, should be leveraged and not duplicated.

Structure and Membership

- In regards to *Composition*:
    - More specificity in either disciplines or sectors is needed – for example expertise in: health systems, public health, infection prevention and control. Most physicians have no expertise in these sub disciplines. Same might be true for the other listed disciplines - for example expertise in program evaluation could be sub discipline called out under social sciences.
    - The TOR states early-to mid-stage professionals are being encouraged to apply, however, antimicrobial resistance is a highly technical topic and takes many years to develop expertise and understand well. It is highly recommended that those well-versed in the issue be the primary Panel members and early and mid-stage professionals can help support, be observers, or working group members.
    - Member States should have the opportunity to nominate a selection of experts to the Panel. FAO rules provide helpful information for permitting the establishment of expert panels for consultation on specific subjects or intergovernmental technical working groups, perhaps they can be helpful in informing the establishment of the experts on this panel as well.

Key Performance Indicators

- The Panel's key performance metrics should be proposed and outlined now, before the Panel is selected and established. This will allow for their independent creation from the Panel and with Member State and key stakeholder input.

Uruguay
Directorate General of Livestock Services & Directorate General of Food Safety Control

[EXT] FAO - Panel Independiente sobre Evidencia para la Acción contra la Resistencia a los Antimicrobianos - URGENTE PLAZO LIMITE 16.6

Piperno De La Rosa Oriana [redacted]
Tue 6/16/2020 5:54 PM
To: CVO@fao.org [redacted]; amr-tjs [redacted]; Dir. Gral. para asuntos Economico Internac. [redacted]
Cc: Unidad de Asuntos Internacionales [redacted]; Lupinacci Olaso Adriana Eugenia [redacted]

Esmados,

Desde esta Secretaria de Estado y en cumplimiento de lo solicitado en empo y f orma, se envían a connuación comentarios realizados por las Unidades Ejecutoras vinculadas a la temác a, ellas son la Dirección General de Servicios Ganaderos y la Dirección General de Control de Inocuidad Alimentaria.

Saludos cordiales,
Dra. Oriana Piperno

Ministerio de Ganadería, Agricultura y Pesca

Dra. Oriana Piperno de la Rosa
Unidad de Asuntos Internacionales - Cooperacion Internacional
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De: Fernandez Federico [redacted]
Enviado el: martes, 16 de junio de 2020 14:05
Para: Piperno De La Rosa Oriana [redacted]
CC: Lagarmilla Patricia [redacted]; Benne Norman [redacted]
Asunto: RV: FAO - Panel Independiente sobre Evidencia para la Acción contra la Resistencia a los Anmicr obianos - URGENTE PLAZO LIMITE 16.6

Esmada Oriana:

Habiendo leído los términos de referencia para establecer un Panel Independiente sobre Evidencia para la Acción contra la Resistencia a los Anmicr obianos, entendemos que su redacción es totalmente comparble.

Opinamos que el trabajo del "Grupo especial de coordinación interinstucional (IA CG)" es un invalorable aporte para hacer frente a los desaos que supone la R esistencia a los Anmicr obianos, en la actualidad y como un problema mayor aún para la salud, en los próximos años.

El Ministerio de Ganadería, Agricultura y Pesca, ha afrontado este reto, diseñando el Plan Nacional de Contención de la Resistencia Anmicr obiana de Uruguay, con enfoque en la salud animal y cadenas productoras de alimentos, y trabajado con los organismos internacionales competentes (Tripart o formado por la FAO, la OIE y la OMS) y países de la región. En consecuencia, valoramos la acción propiciada desde Naciones Unidas, que seguramente ayudará a mig ar y prevenir futuros riesgos asociados a esta problemác a.

Saludos cordiales

Ministerio
de Ganadería,
Agricultura y Pesca

Dirección General de SERVICIOS GANADEROS

Dr. Federico Fernández
Asesor Técnico
Dirección General de Servicios Ganaderos
D.G.S.G. – M.G.A.P.
Ruta 8 Brig. Gral. J. A. Lavalleja km. 17,500
[redacted]
Montevideo, Uruguay

From this Secretary of State and in compliance with the requests in a timely manner, comments made by the Executing Units related to the subject are the Directorate General of Livestock Services and the Directorate General of Food Safety Control.

Greetings,
Dra. Oriana Piperno

Ministerio
de Ganadería,
Agricultura y Pesca

Dra. Oriana Piperno de la Rosa
International Affairs Unit - International Cooperation
Constituent 1476 office 317 Bis ,
Montevideo, 11,100, Uruguay

Estimated Oriana:

Having read the terms of reference for establishing an Independent Panel on Evidence for Action against Antimicrobial Resistance, we understand that its wording is fully shareable.

We believe that the work of the "Interagency Coordination Group (IACG)" is an invaluable contribution to addressing the challenges of antimicrobial resistance, today and as an even greater health problem, in the coming years.

The Ministry of Livestock, Agriculture and Fisheries has faced this challenge, designing Uruguay's National Antimicrobial Resistance Containment Plan, with a focus on animal health and food-producing chains, and worked with relevant international agencies (Tripartite formed by FAO, OIE and WHO) and countries in the region. We therefore value the action taken by the United Nations, which will surely help mitigate and prevent future risks associated with this problem.

Cordial greetings

Ministerio
de Ganadería,
Agricultura y Pesca
Dirección General de SERVICIOS GANADEROS

Dr. Federico Fernández
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Montevideo, Uruguay

Zambia

THE PERMANENT MISSION OF THE REPUBLIC OF ZAMBIA
TO THE UNITED NATIONS OFFICE IN GENEVA

37-39, Rue de Vermont
1202 GENEVA
SWITZERLAND

REF:

16 June 2020

The secretariate

Antimicrobial Resistance Unit.

WHO Headquarters.

SUBMISSION TO THE PUBLIC CONSULTATION ON TERMS OF REFERENCE FOR AN INDEPENDENT PANEL OF EVIDENCE FOR ACTION AGAINST ANTIMICROBIAL RESISTANCE - ZAMBIA

Zambia has joined the fight to stem the threat of Antimicrobial Resistance (AMR), a global public health emergency that threatens the very existence of mankind. In line with the Global Action Plan on AMR, Zambia developed a 10-year National Action Plan (NAP) that provides the framework for a coherent and coordinated approach to addressing AMR at all levels within the country. Recognising that the generation of clear and up-to-date data to inform actions and policy in the diverse and changing AMR landscape is a key aspect in the fight against AMR, one of the focus areas in Zambia 's AMR NAP is strengthening knowledge base through surveillance and research.

Recognizing the not so unique challenges around misuse of existing antimicrobials, Zambia endorses the importance of increasing efforts of intergovernmental agencies of the UN system and other organisations in the fight against AMR.

The establishment of the **Independent Panel on Evidence for Action against AMR** in a response to the urgent need for evidence based decisions in addressing AMR is welcomed; however, below are some concerns regarding the Independent panel's Terms of Reference (ToRs) that need to be addressed.

1. With the proposed new governance structures including the Global Leadership Group, multi-stakeholder platform and the new Independent Evidence Panel, there is need for clearly defined ToRs to address possible duplication of efforts and prudent utilisation of the limited resources.
2. Reporting mechanisms; it is important that the ToRs clearly stipulate the role of member states in the drafting of reports on progress made in the AMR agenda. It is therefore key that clearly defined mechanisms are in place to timely engage

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REF:

governments for input into the reports before publication.

3. Representation of member states on the new Independent Panel; Regional experiences in challenges and solutions are best described by representatives from respective regions themselves, it is therefore imperative that they have representation on the Panel. Equal numbers of continental representation should be considered.
4. Sources of resources to fund organisations and other structures have been known to influence decision making; it is subservient that the financing is neither from the tripartite secretariat nor member states to avoid a conflict of interest. This should be clearly stated in the ToRs. The same applies to formation of a separate secretariat to support the panel as this would help preserve the independence of the Panel.
5. While appreciating the fact that the new Independent Panel has the reserve of deciding the scope and topics of focus, the country specific challenges such as disease burden due to Malaria, HIV and TB and common bacterial infections such as those prescribed in the WHO's Global Antimicrobial Resistance Surveillance System (GLASS) in which antimicrobial resistance remains high more so in developing countries must be considered.

The foregoing are the views of the national Antimicrobial Resistance Coordinating Committee (AMRCC) endorsed by the Ministry of Health.

Francis Bwalya

Counsellor-Health

American Veterinary Medical Association (AVMA)

June 15, 2020

Dr. Tedros Adhanom Ghebreyesus
Director General, World Health Organization, Co-Chair
Ms. Amina Mohammed
United Nations Deputy Secretary-General, Co-Chair
United Nations Interagency Coordination Group on Antimicrobial Resistance
c/o World Health Organization
Avenue Appia 20
1211 Geneva

RE: Draft terms of reference for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Dear Dr. Ghebreyesus and Ms. Mohammed:

The American Veterinary Medical Association appreciates the opportunity to provide its thoughts regarding the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance.

We understand establishing this group is intended to fulfill one of the recommendations contained within the IACG's report, *No Time to Wait: Securing the Future from Drug-Resistant Infections*, that was submitted to the Secretary General of the United Nations in April 2019. According to that report, the IACG recommended establishment of the Independent Panel on Evidence for Action Against Antimicrobial Resistance (hereafter referred to as the Panel). The Tripartite Joint Secretariat convened an Advisory Group across the One Health spectrum to develop the draft Terms of Reference for the Panel. The AVMA understands the Tripartite Organizations are engaging with Member States and partners to obtain feedback and to assist in refining the draft terms of reference for the Panel before implementation.

According to the draft terms of reference, the purpose of the Group is to "generate and communicate independent, robust and authoritative assessments of the science related to antimicrobial resistance across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment." The WHO describes One Health as "an approach to designing and implementing programmes, policies, legislation, and research in which multiple sectors communicate and work together to achieve better public health outcomes."[i] The WHO also states that for better health outcomes to be achieved, "Many professionals with a range of expertise who are active in different sectors, such as public health, animal health, plant health and the environment, should join forces to support One Health approaches."[ii]

The AVMA has a question regarding the scope of the Panel. Is the scope of the Panel limited to plants and animals used for food, or are non-food uses of antimicrobials on ornamental or other non-food plants, and non-food producing animals, such as cats, dogs, and horses to be considered by the Panel as well? Irrespective of the answer, the AVMA believes the scope of the Terms of Reference are too broad and vague. The Panel should focus on substantive scientific evidence as to the impact of antimicrobial therapy used on or in plants, humans, and other animals on the development of acquired antimicrobial resistance, which in turn would cause reduced therapeutic efficacy against pathogens of plants, humans,

and other animals for which the antimicrobials are intended. Misunderstanding or misconceptions that lead to policy recommendations regarding innate resistance, or resistance in organisms that are not pathogens of plants, humans, or other animals may be avoided by more clearly and narrowly defining the scope of the Panel so that limited resources are allocated most efficiently to increase the likelihood of effective results.

The draft Terms of Reference state that the Panel will "consist of a core group of 10-15 experts" and that members should represent "a wide range of geographic regions, relevant disciplines and sectors." The draft Terms of Reference also state, "At a minimum, a panel member should have expertise in one or more of the following:

- Disciplines: Biological and Pharmacological Sciences; Human and Veterinary Medicine; Agricultural Sciences; Environmental Sciences; Economic Sciences; Social or Political Sciences; Humanities; Bioethics; Behavioral science; and Epidemiology and Modelling.
- Sectors: human, terrestrial and aquatic animal and plant health, environment, food and feed production and development sectors."

The AVMA is concerned that a "core group of 10-15 experts" will be not be able to encompass the "wide range of geographic regions, relevant disciplines and sectors." We find it difficult to believe that only 15 people will be able to encompass all of the knowledge and experience related to the cited disciplines and sectors, not to mention the geographic differences manifested within those disciplines and sectors, necessary to adequately and fairly "generate and communicate independent, robust and authoritative assessments of the science related to antimicrobial resistance across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment." The AVMA believes the Panel will need to be at least twice its currently planned size to come close to having the necessary expertise needed to achieve its purpose. Examples of expertise that are not clear from the disciplines and sectors provided include experts in husbandry of non-food animals, companion animal veterinarians, experts in food security and transport of food to food insecure areas, the impact of food price on global food insecurity, food safety and processing, expertise in oversight of professional licensure in the human medical and veterinary medical professions, and oversight of plant production. The visible engagement of subject matter experts with applicable knowledge and geographical experience across all One Health sectors on such a leadership group is necessary to ensure that the broad-based support that is needed for this critical topic is gained and/or not eroded.

The draft Terms of Reference also describe the Nomination and Selection process for inclusion on the Panel. "Experts will be identified and appointed by the UN Secretary General upon recommendation of a Nomination Committee that will be convened by the Tripartite organizations." The WHO states that, "Antimicrobial resistance is a global problem with serious local impacts,"[iii] Because antimicrobial resistance is a global problem, nominations should not be limited to those proposed by a Nomination Committee convened by the Tripartite organizations. Rather, nominations should be solicited from the global community, then all nominees should transparently be identified to allow member nations to provide substantial input to the UN Secretary General on the education, experience, and expertise of particular nominees prior to appointment. Similarly, selection of the Chair and Vice-Chair should be made by the Panel as operational guidance not by the UN Secretary General, unless the Panel cannot agree. This further reinforces our previous comment that the Panel should be expanded to include more experts so as to incorporate a wider geographical point of view of local impacts. The visible engagement of subject matter experts with applicable knowledge and geographical experience across all One Health sectors on such a leadership group is necessary to ensure the broad-based support that is needed for this critical topic is gained and/or not eroded.

The AVMA questions whether convening this Panel is necessary. The Tripartite Organizations have already established science-based committees that are charged to serve in an advisory capacity, and effective communication and advocacy functions already exist within and across all three Tripartite Organizations. The Panel's charge, thereby, mirrors direction to groups that already exist and duplicates activities that are already underway. In addition to diluting valuable financial and personnel resources that are needed to refine and implement emerging and already developed plans, establishing the Group could create significant internal and external confusion as to who is responsible for what in leading the global effort.

Should it be deemed necessary that the Panel be created, the AVMA believes that: (1) its priority should be the identification of broadly accepted measures of public health and animal health and welfare that are based on sound science, and that take into account similarly critical needs related to food security, availability, and sustainability; (2) the Panel's success should be carefully evaluated with attention to whether its actions result in improved human and animal health and welfare; and (3) the Panel should be able to articulate how broad-based policy is a better pathway for achieving such goals than is comprehensive, science-based professional and public education and respecting the professional judgment of licensed health care providers as they work to care for their patients.

To meet these goals, we believe the Group must be accountable to the science-based committees of the Tripartite Organizations. Accordingly, if the Group is communicating about activities to be undertaken in human medicine, it should be accountable to the science-based committees focusing on that practice area for appropriate background and accurate messaging. Similarly, if the Group is communicating about food or companion animal veterinary medicine, agriculture, or husbandry, it should be accountable to the Tripartite committees responsible for those topics.

We thank the United Nations and the WHO for the opportunity to provide our input. For questions regarding the AVMA's comments, please contact Dr. Michael Costin [redacted]

Sincerely,

Janet D. Donlin, DVM, CAE
Executive Vice President and Chief Executive Officer

[i] https://www.who.int/features/qa/one-health/en/
[ii] https://www.who.int/features/qa/one-health/en/
[iii] https://www.who.int/features/2013/amr_conserving_medicines/en/

The AVMA, founded in 1863, is one of the oldest and largest veterinary medical organizations in the world, with more than 93,000 member veterinarians worldwide engaged in a wide variety of professional activities and dedicated to the art and science of veterinary medicine.

ARC

JUNE 14, 2020

Comments for the Tripartite Secretariat's Public Discussion on Terms of Reference for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Antibiotic Resistance Coalition

ignitetheidea.org/arc

Antibiotic Resistance Coalition Feedback on the
Independent Panel on Evidence for Action against Antimicrobial Resistance

As members of an intersectoral, global coalition of civil society organizations, we appreciate the opportunity to provide feedback on the proposed terms of reference for the Independent Panel on Evidence for Action against Antimicrobial Resistance in a One Health context. The UN IACG on AMR recogni. ed the need for such a Panel "to provide robust and authoritative assessments of the science, data and evidence related to antimicrobial resistance across all sectors, assess its impacts and future risks and recommend options for adaptation and mitigation to governments and all stakeholders in the form of periodic reports."

Role of Independent Panel in Governance

In previous feedback to the Tripartite Secretariat on AMR, members of the Antibiotic Resistance Coalition made several key recommendations that still apply:

- The potential roles of the Independent Panel on Evidence for Action Against Antimicrobial Resistance should be considered alongside the Global Leaders Group and the Multi-stakeholder Partnership Platform.
- The Independent Panel on Evidence for Action Against Antimicrobial Resistance must be considered a critical part of the proposed global governance structure. Today there is no global, cross-sectoral mechanism to manage the assimilation of the rapidly expanding scientific literature on AMR, and there is a gap in providing independent and multi-sectoral analyses of existing evidence in a One Health context. There is also the need for mechanisms that manage scientific disagreements and synthesize evidence from a systems perspective with engagement of experts from different disciplines. This process must have robust safeguards against the influence and bias of financial conflict of interest.
- Avoiding the appointment of those with fiduciary and financial conflict of interests from representational roles in the governance structures will be critical. FENSA was set up to deal with institutional conflict of interest, particularly among non-State actors, with the World Health Organization. The guidelines for Declaration of Interests for independent experts at the WHO, however, have raised considerable confusion and concern. Rather than focus on fiduciary and financial interests, it puts forward a standard of "intellectual" bias. Diversity of views is where we can better strike a balance, if needed. Otherwise, these governance structures risk overregulating intellectual viewpoints and leaving out important perspectives.
- The workings of the Independent Panel should be transparent and independent. Adhering to the principles of transparency, scientific inclusiveness and independence is at the core of ensuring authoritative and credible outputs from the Independent Panel. To ensure that the outputs of the Independent Panel are authoritative, credible and legitimate, a rigorous and robust scientific process must be in place. Finally, the advice should be produced independent of the influence of governments and businesses.

Principles behind the Independent Panel

The recently drafted Terms of Reference for the Independent Panel provide a useful starting framework for discussion. We concur that making the Independent Panel accountable to the UN Secretary General is critical to place it "beyond the mandate of any one agency of the United Nations or other international organizations." A key principle proposed to guide the evidence assessment and reporting of the Panel is "independence and political neutrality."
To ensure this foundational principle, however, the Panel's workings must be independent and politically neutral with respect to the Tripartite agencies. In order to bridge the intersectoral gaps among the work of these agencies, the Panel must have the freedom to operate truly independent of them. Several parts of the Terms of Reference risk compromising this foundational principle, including the fact that:

- The Nomination Committee recommending its membership will be convened by the Tripartite organizations;
- The Panel's support will be reliant on the Tripartite Joint Secretariat;
- The Secretariat also plays a consultative role in reconsidering membership "if a member has acted in a manner that undermines the scientific and/or **operational integrity** of the Panel.

Collectively, these factors undermine the necessary independence of the Panel. The Panel's Nomination process, its staffing, and the handling of its membership should all be independent of the Tripartite Secretariat. Alternative approaches to dealing with these factors could be proposed in the revised Terms of Reference. The Nomination Committee could be convened out of the UN Secretary-General's office. For example, the Panel also might have a Secretariat hosted in UNOPS, as the Stop TB Partnership does, with core funding mandated and guaranteed from the AMR Multi-Partner Trust Fund.

However, we take issue with the framing of "political neutrality" as part of the foundational principle of independence. This conflates two quite different issues. Maintaining political neutrality is at odds with finding optimal policy options based on the weight of the available evidence. Having a commitment to tackle antimicrobial resistance and save human lives is not politically neutral, but it should be the guiding beacon to the Independent Panel's work.

We are also unclear and concerned about the statement in the Terms of Reference that "the work of the Panel should be free from political and group influence." While requiring the Panel's work to be rooted in scientific evidence, divorcing the Panel's work from "group influence" sounds like its membership could only include scientists who have no ties to groups grounded in the reality of AMR policymaking, and there is no reason that such insularity would lead to better development of policy options. By contrast, more could be done to ensure financial conflict of interest does not bias the work of the Independent Panel. Mere disclosure of potential financial conflicts of interest should not be considered as having met the bar for participation on the Panel or for involvement of non-Panel members in working group processes.

The proposed principle of "non-duplication and complementarity" would limit the Panel's charge to "complement and not duplicate, the ongoing normative and standard setting activities

of the Tripartite and other international organizations." This principle not only could compromise the independence of the Panel, but also strip the Panel of the necessary scope and the ability to apply the interdisciplinary systems approach to problems that might be under the jurisdiction of one or more of the Tripartite agencies (or other international organizations), none of which have such independence from the political interests of their Member States. Any international organization could claim that they are exploring an issue within their broad ambit, thereby blocking the Panel from fulfilling its charge. So this proposed principle should be dropped in its entirety.

The other proposed principles of inter and intradisciplinary (trans-disciplinary) systems approach; transparency, peer review and open access; and comprehensiveness and inclusivity speak importantly to the process that the Independent Panel must take. A trans-disciplinary systems approach, for example, might have prioritized the need to address how an environmental surveillance system might identify hotspots for emerging infections, including drug-resistant pathogens. The global monitoring of sewage might have value not only in tracking antimicrobial resistance through metagenomic analyses, but also serve as a sentinel alert system for the spread of COVID-19 as it has for polio eradication efforts. Transparency in the evidence base, the methods of analysis, and the synthesis in laying out policy options, as well as the peer review process, is core to establishing credibility to the workings of the Independent Panel. Transparency must include not only freely available, online access to the products contributing to this stepwise process, but also an openness of the process itself, without encumbering the deliberative discussions of Independent Panel members and its workgroups with interference from vested interest groups that have financial interests in the outcome.

Similarly, the proposed Communication with governments and other stakeholders draws its bidirectionality from the principles of "comprehensiveness and inclusivity," where the "Panel will seek input and feedback on its work (including its priorities) from national, regional and global stakeholders." For civil society, the Independent Panel plays a critical role in analyzing evidence objectively, and in so doing, this supports the "systematic and meaningful engagement of civil society groups and organizations as key stakeholders in the One Health response to antimicrobial resistance," as recommended in the UN IACG report. We urge that the Terms of Reference for the Independent Panel assure a clearer specification of how civil society would be engaged in its input process, involved in public consultations in the gathering of evidence for its reports, and enlisted in efforts to carry forward the findings of the Independent Panel.

Accountability to Independent Panel Findings

The Terms of Reference for the Independent Panel do not provide, however, much clarity as to how its systematic reviews laying out policy options might influence the work of the Tripartite agencies, other parts of the global governance of AMR (specifically the Global Leaders Group and the Multi-stakeholder Partnership Platform), Member States, or the three standard-setting organizations (Codex, IPPC and OIE) which serve as reference for the WTO's Sanitary and Phytosanitary Agreement. To ensure that the expert and evidence-based findings of the Independent Panel receive consideration, a pathway might be established to place its reports forward before the Codex Alimentarius.

The review period is oddly long at five years when the full-term of a Panel member is three years. We would recommend taking stock earlier than five years, so that mid-course adjustments can be made and evidence-based guidance can feed into the global policy making process on AMR in a timely manner.

The Antibiotic Resistance Coalition considers the establishment of an Independent Panel on Evidence for Action on Antimicrobial Resistance as a key recommendation from the UN IACG on the AMR report that requires follow-through. However, a half-way approach in implementing this approach would add little to the global governance of AMR, so the steps we suggest in ensuring its independence are critical to its credibility and strategic value in tackling this global health challenge. We appreciate the opportunity afforded by the Tripartite Secretariat on AMR in providing this input to the public consultation process on these terms of reference.

ARC

Signatories

- Alliance to Save Our Antibiotics
- Consumers' Association of Penang
- European Public Health Alliance
- Food Animal Concerns Trust
- Health Action International
- Health Care Without Harm
- IFARMA Foundation
- Initiative for Health & Equity in Society
- Instituto Brasileiro de Defesa do Consumidor
- Natural Resources Defense Council
- Pan-African Treatment Access Movement
- Public Citizen
- ReAct–Action on Antibiotic Resistance
- Sahabat Alam Malaysia (Friends of the Earth Malaysia)
- Society for International Development
- Third World Network
- Universities Allied for Essential Medicine
- What Next Forum
- US Public Interest Research Group

Corresponding Contact, on behalf of the Antibiotic Resistance Coalition: Anthony D. So, MD, MPA, Professor of the Practice and Director, ReAct Strategic Policy Program, Johns Hopkins Bloomberg School of Public Health

British Society for Antimicrobial Chemotherapy (BSAC)

Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

Response from the British Society for Antimicrobial Chemotherapy (BSAC), June 15, 2020

Thank you for giving us the opportunity to share our thoughts on the soon-to-be-established Independent Panel on Evidence for Action. We have responded in red to the following items from the final draft of the Panel's terms of reference:

2. Objectives of the Panel across the One Health spectrum

- *Assess emerging and future economic, health, environmental, hygiene and sanitation risks and impacts of antimicrobial resistance, and actions and interventions for risk management*
    - We would like to see the Panel go further and commit to undertaking some form of financial modelling to ascertain how much investment is likely to be required, where the investment should come from, and how the spending of this investment should be prioritised.

- *Provide evidence-based practical options for mitigation and containment actions and interventions, including on local knowledge, and considering existing normative and standard setting functions, to address challenges in all settings, particularly in low- and middle-income countries*
    - One radical - but ultimately very practical - way to address the challenges in all settings would be to create a single global measurement for antibiotic consumption. A first attempt at this has already been made through the creation of the Antibiotic Footprint initiative, which BSAC helped to lead.

5. Structure & Membership

- ***Nomination and Selection:*** *Experts will be identified and appointed by the UN Secretary General upon recommendation of a Nomination Committee that will be convened by the Tripartite organizations. Nomination of members will take into consideration gender balance and geographic diversity as well as representation from across the One Health spectrum*
    - Will the Nomination Committee be taking any steps to guard against the risk of cognitive bias when identifying potential members of the Panel?

7. Communication with governments and other stakeholders

- *The Panel will confer and communicate with the Global Leaders Group (pending its establishment), the Tripartite and other organizations as well as the partnership platform (pending establishment) where governments, civil societies and the private sector interact"*
    - It is critically important that sharper definition is given to the roles of the Independent Panel, the Global Leaders Group, the Tripartite, and the partnership platform - as well as to the relationship of one to the other.
    - We look forward to hearing more about the partnership platform as BSAC is preparing to launch a global health initiative called Stop Superbugs. We know many public engagement projects are happening in communities across the world. We also know there is an untapped reservoir of support, in the form

of financial and human capital. The challenge is to connect these projects with potential supporters and then to promote the partnerships by sharing stories and encouraging more projects and more support. By building an international support network, co-ordinating community action, and championing local leadership, we aim to stop superbugs one project at a time. We look forward to understanding how this, and other initiatives, might work with the partnership platform.

Edinburgh Infectious Diseases

[EXT] re: feedback on draft trms of reference

WOOLHOUSE Mark [redacted]

Mon 6/15/2020 10:04 AM

To: amr-tjs [redacted]

From: Professor Mark Woolhouse, AMR Lead, University of Edinburgh

on behalf of Edinburgh Infecous Diseases

Dear IACG,

Re: **Public discussion - Draft terms of reference of the Independent Panel on Evidence for Acon Ag ainst Anmicr obial Resistance**

I am wring t o record our full support for the draft terms of reference for this important new body.

Kind regards,

Mark Woolhouse

Professor M.E.J. Woolhouse OBE,
Chair of Infecous Disease Ep idemiology and TIBA Director,
Usher Instut e, Ashworth Laboratories, Kings Buildings,
University of Edinburgh,
Charlo e Auerbach Road, Edinburgh EH9 3FL, UK
www.epigroup.biology.ed.ac.uk

FW: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

From: Jeroen.Schouten@radboudumc.nl [redacted]
Sent: Monday, June 15, 2020 2:15 PM
To: [redacted]
Cc: [redacted]
Subject: RE: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

Dear sir, madam

Please find enclosed the ESCMID comments on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance, I have left the remarks within the PDF text, a. ached

- The text is generally straightforward and clear, we have mostly textual comments
- Please consider that some terminology is used that may not resonate with candidate members of the panel, like “input indicators” and “early to mid-stage professionals”. These terms may need some explanaon
- Some clarificaon on the a vailability and extent of addional scien fic support t o the panel would be welcome

Otherwise we have no vital remarks.
Good luck with pung t ogether the definiv e terms of reference. We are looking forward to receiving a final version.

On behalf of Maurizio Sanguine (E SCMID president) and Nico Mu ers (EUCIC chair),

Jeroen Schouten, ESGAP chair

12 June 2020

Department of Global Coordination & Partnership
Antimicrobial Resistance Cluster
World Health Organization
Avenue Appia 20
1211 Geneva 27
Switzerland

Dear colleagues,

Re: Feedback on the Draft Terms of Reference for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

On behalf of the WHO Collaborating Centre on Global Governance of Antimicrobial Resistance, we would like to express our appreciation for the opportunity to provide feedback on the proposed Terms of Reference for the Independent Panel on Evidence for Action against Antimicrobial Resistance (AMR). This engagement with stakeholders in the field of AMR demonstrates your commitment to developing and maximizing the effectiveness of this Independent Panel in a transparent and participatory manner. We applaud your efforts.

At the WHO Collaborating Centre, we are committed to generating and translating knowledge for evidence-based global collective action. We advise global institutions, governments, and public health organizations on how to address transnational health threats in order to make the world a healthier place for everyone. As part of our commitment to informing policy based on the best available research evidence, we have previously undertaken a large, multi-year, WHO-commissioned study on the institutional design of Scientific Advisory Committees and developed a set of best practices for how to create these committees. As a result of that past scientific work – which included the development of a conceptual framework, a systematic review, new empirical studies, and several case studies – and our in-depth expertise in the global governance of AMR, we believe we are well-positioned to offer feedback on these proposed Terms of Reference and provide recommendations for how best to ensure the Independent Panel will act as a valuable addition to global efforts on AMR.

Our past research explored the institutional design features necessary to ensure that Scientific Advisory Committee possess and balance three key attributes: 1) quality; 2) relevance; and 3) legitimacy. Fundamental to this framework is the belief that enhancing each of these three attributes will also enhance the effectiveness of Scientific Advisory Committees. For ease of reference, we have appended a table to

this letter that comes from a journal article we published on Scientific Advisory Committees at WHO,[1] and have included a second previously published journal article to this letter which outlines the key principles guiding the design of Scientific Advisory Committees and their relationships with quality, relevance, and legitimacy.[2] In keeping with this framework, it will be critical for the Advisory Group to consider and clarify the Terms of Reference with regards to these attributes to ensure the design of a successful, evidence-based Independent Panel.

Quality: In our view, the institutional design described in the Terms of Reference sets out a model for *expert-based* decision-making rather than *evidence-based* decision-making. This is a key distinction; the Independent Panel on Evidence must be driven by a commitment to high-quality evidence and policy advice regardless of the individuals selected to serve on the panel. To ensure the quality of scientific advice, the Terms of Reference should specify a clear and robust process for evidence-gathering, synthesis, and interpretation that emphasizes conducting and interpreting systematic reviews – the gold standard for collecting and summarizing available evidence about a specific research question. Thus, in addition to specifying the process of selecting panel members, we recommend that the Terms of Reference provide equal specificity on how evidence will be generated, synthesized, and interpreted.

Relevance: Ensuring the relevance of the Independent Panel to all citizens, stakeholders and decision-makers is essential for ensuring progress towards global AMR goals. The draft Terms of Reference are largely focused on ensuring representation among panel members; more emphasis should be placed on the nature of the research the Independent Panel will undertake. To this end, the Terms of Reference must ensure that the analyses conducted employ best-practices for equity, diversity and inclusion, and that the policies recommended reflect the diversity of and are relevant to all the individuals the Independent Panel's efforts are meant to serve. The next iteration of the Terms of Reference should set out a process to ensure that the research addresses issues of gender, equity, inclusion and the needs of those most likely to be impacted by AMR (e.g., individuals in low- and middle-income countries). This will mean including the types of data and measurement tools that will allow progress to be measured on multiple dimensions (e.g., gender; low- and middle- vs. high-income countries).

Legitimacy: Our research shows that in order to achieve legitimacy, Scientific Advisory Committees must have autonomy from the institutions convening the committee, from the institutions where committee members work, and from the institutions to whom the advice is directed. To ensure the independence of the Independent Panel on Evidence for Action against AMR, we recommend that the Terms of Reference outline all of the necessary measures that will be taken to safeguard that independence. By indicating that panel members will not be paid for their work, the draft Terms of Reference address one component of this autonomy; however, more details are needed regarding members' ability to represent themselves rather than their institutions, and the panel's independence to set their own agenda and priorities. Clearer Terms of Reference are needed to outline the role of the

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[1] Gopinathan U, Hoffman SJ, Ottersen T. Scientific Advisory Committees at the World Health Organization: A Qualitative Study of How Their Design Affects Quality, Relevance, and Legitimacy. *Global Challenges* 2018; 2: 1700074.

[2] Hoffman SJ, Ottersen T, Tejpar A, Baral P, Fafard P. Towards a Systematic Understanding of How to Institutionally Design Scientific Advisory Committees: A Conceptual Framework and Introduction to a Special Journal Issue. *Global Challenges* 2018; 2: 1800020.

Independent Panel in deciding what research questions should be answered, which systematic reviews will be conducted, by whom, and in what order. To ensure independence from the outset, we recommend that the Terms of Reference more clearly articulate the relationship between the Independent Panel outlining their respective responsibilities for agenda-setting, evidence synthesis, and normative standard-setting.

***

We at the WHO Collaborating Centre on Global Governance of Antimicrobial Resistance wish once again to state our enthusiasm for this initiative to create an Independent Panel on Evidence for Action against AMR. We are grateful to have had the opportunity to share our evidence, experience, and feedback, and we eagerly await the next iteration of the Terms of Reference.

We would be delighted to offer any further assistance that may be productive at this time. Please do be in contact if you think we can be further helpful.

Sincerely,

Steven J. Hoffman BHSc JD MA PhD LLD
Director, Global Strategy Lab / Directeur, Labo de stratégie mondiale
Director, WHO Collaborating Centre on Global Governance of Antimicrobial Resistance
Dahdaleh Distinguished Chair in Global Governance & Legal Epidemiology
Professor of Global Health, Law, and Political Science, York University, Canada
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Global 1 Health Network

http://global1hn.ca/

June 15, 2020

To the Advisory Group for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

On behalf of the Global One Health Network (Global 1HN), we would like to thank the Advisory Group for the opportunity to offer comments on the proposed Terms of Reference for the Independent Panel on Evidence for Action against Antimicrobial Resistance (AMR). Enabling feedback from stakeholders in the field of AMR is commendable and will assist in strengthening the contributions of the Independent Panel.

The goal of the Global 1HN, funded by the Canadian Institutes of Health Research, is to build and sustain a transdisciplinary and inter-sectoral OH approach to improve the global governance of Infectious Disease (ID) and AMR http://global1hn.ca/. The network connects researchers and knowledge users with a background in the social sciences with those in the human, animal, and environmental health sciences. As part of this network, four research-enabling platforms (on surveillance, capacity development, institutionalization and equity) were established across four Canadian universities (University of Calgary, Université de Montreal, University of Ottawa, York University) with expertise in the OH governance of IDs and AMR.

Given our research focus on the global governance of AMR, we would like to suggest that in addition to the Independent Panel objectives to assess and develop reports based on scientific evidence, and provide evidence-based practical options for mitigation and containment actions, it would be important for the terms of reference to include the assessment of governance, accountability and regulatory models that could be leveraged to prevent AMR. To illustrate, a regression analysis of European states found only 33 percent of variation in AMR was attributable to antibiotic use. With the inclusion of an indicator on corruption, the regression explained 63 percent of the variation in AMR (1). Although addressing corruption is beyond the scope of the Independent Panel, synthesizing evidence concerning models of global and national

policy and accountability mechanisms effective in addressing AMR would support global and national actors.

A focus at both global and national governance levels would be important. At the global level, marketing and import of falsified antibiotics remain a burden particularly in low- and middle-income countries. An assessment of the effectiveness of governance fora in addressing falsified medicines in order to advise on the manner in which regulatory processes could be improved to circumvent the spread of falsified antibiotic and antiparasitic medications could support current efforts. Although universal access to water, sanitation and hygiene (WASH) in LMICs would significantly reduce IDs and the volume of prescribed antibiotics, LMICs may be stretched to access the resources needed to ensure universal access to WASH. Although there are several bilateral and multilateral initiatives supporting WASH programs, large funding gaps remain for many countries, most of them LMICs (2). Would a global strategy to support LMICs, similar to the Global Fund to fight AIDS, tuberculosis and malaria, be feasible to support increased access to WASH to which LMICs would contribute?

Advice regarding national governance guiding stewardship of AMU would also be insightful (3). Assessing models of national agricultural industry self-governance that include cessation of preventive use of antibiotics in feed could offer insights. For example, the Canadian poultry industry has ended preventative use of Class 1 and 2 antibiotics in feed and will phase-out preventive use of Class 3 antibiotics in the future, offering one such model. Consideration of incentives to diminish antibiotic use for the agricultural sector in response to consumer demand from the fast food industry suggests another promising mechanism.

Procedurally, we have a few suggestions. In ¶1 (Purpose) we suggest specific reference to the need for an equity analysis of the One Health evidence being generated (i.e. to examine how well equity is being considered in the studies being reviewed with the intent to make recommendations accordingly). In particular, men and women, and different groups in society, may be differently at risk of or impacted by AMR and the efforts to address it. This is why improved knowledge about how to design AMR strategies, programs and activities in a way that will ensure their full success by better considering gender and equity issues is needed. Also. evidence-based has multiple interpretations and, narrowly interpreted, has been used in various trade challenges to new public health regulations. Since regulations are important tools in preventing AMR, to minimize interpretative disagreements here we suggest using ‘evidence-informed’ instead, in order to broaden the contextual importance of interpretation of different research findings and their policy implications. We also recommend specifically referencing the precautionary principle, which allows for regulatory measures to be imposed (if only temporarily) in the face of widespread or potentially serious health risks, even if the evidence base remains equivocal.

Our one concern with objectives under ¶2 is that reference to ‘practical options for mitigation and containment…’ could result in reinforcing ineffective or insufficient measures. For example, if evidence suggests a need to improve governance measures (with respect to corruption issues noted earlier), or to institutionalization of global

financing arrangements for WASH measures (as described above), these could be ignored or given scant attention on the basis of being 'impractical'. We suggest changing this objective to read: 'Provide evidence-informed options for mitigation … etc.' omitting reference to practicality and allowing panelists to debate differing degrees of implementation challenges and feasibility. What is necessary may not always be practical.

The Guiding Principles under ¶4 are generally excellent, although reference to 'political neutrality' is problematic. Political partisanship should be avoided, but the inference here that panelists 'should be free from political…influence' assumes that panelists do not themselves hold certain political beliefs or that policy options under consideration do not inevitably involve political interpretations. This assumption rests on notions of objectivity more common in the natural sciences but generally rejected by the social sciences. It would be better here to state that the evidence assessment should include a discussion (transparency) of any *a priori* assumptions held by panelists that might affect their interpretation of the research findings. Relatedly, reference to 'technical challenge' of AMR should be re-drafted as 'technical and political challenge' of AMR, since restricting evidence or interpretation to technical matters only ignores the many stratifiers that affect the health equity impacts of different AMR mitigating or containment strategies under discussion.

Under ¶5, we simply caution on the importance of avoiding the natural science disciplines crowding out the social science disciplines in the final make-up of the Panel. We have striven in our own Global 1HN to have an equal balance between the two broad disciplinary streams. A similar caution is offered with respect to the referenced sectors. If an equity dimension is to suffuse the generation, analysis, and assessment of evidence on AMR mitigation and prevention, other sectors must include those related to fiscal (taxation) measures, trade/foreign policy, labour rights/standards, and social protection. This may appear to be a large order for the IACG itself, and not simply its Panel members, but without a 'whole of government' approach (or what is sometimes considered a 'health-in-all-policies' approach) to evidence assessment, the science and its assessment critical to promoting action on AMR will remain limited.

In summary incorporating objectives to assess evidence of governance instruments that strengthen antibiotic stewardship, and that evidence and its assessment being given Panel consideration incorporate equity analyses, within the Terms of Reference will add meaningful dimensions to the Panel's important activities. In addition, we believe some of the procedural principles could be improved.

As members of the Global 1HN, we appreciate the important and timely work of the Independent Panel on Evidence for Action against AMR and are grateful for the opportunity afforded for feedback on the Terms of Reference.

We look forward to the Independent Panel's contributions that we would be pleased to support.

Yours truly,

Dr. Ronald Labonté, MA, PhD
Distinguished Research Chair in Globalization and Health Equity
School of Epidemiology and One Health, University of Ottawa
Global 1 Health Network

Dr. Hélène Carabin, DMV, MSc, PhD
Professor and Research Canada Chair in Epidemiology and One Health
Faculté de Médecine Vétérinaire, Université de Montréal
Global 1 Health Network

References

1) Collignon P, Athukorala P-c, Senanayake S, Khan F (2015) Antimicrobial Resistance: The Major Contribution of Poor Governance and Corruption to This Growing Problem. PLoS ONE 10(3): e0116746. doi:10.1371/journal.pone.0116746

2) National systems to support drinking-water, sanitation and hygiene: global status report 2019. UN-Water global analysis and assessment of sanitation and drinking water (GLAAS) 2019 report. Geneva: World Health Organization; 2019. Licence: CC BY-NC-SA 3.0 IGO.

3) Rogers Van Katwyk S, Grimshaw JM, Nkangu M, Nagi R, Mendelson M, Taljaard M, et al. (2019) Government policy interventions to reduce human antimicrobial use: A systematic review and evidence map. PLoS Med 16(6): e1002819. https://doi.org/10.1371/journal.pmed.1002819

Malaria Consortium

[EXT] Feedback on draft Terms of Reference of Independent Panel on Evidence for Action against Antimicrobial Resistance

Helen Counihan [redacted]

Mon 6/15/2020 3:50 PM

To: amr-tjs [redacted]

Dear Sir or Madam

Thank you for the opportunity to review the draft ToR of the Independent Panel on Evidence for Acon ag ainst AMR. I am providing feedback on behalf of Malaria Consorum and m y full name, tle and a ffiliaon c an be found in my signature below.

There a few points, the first ones are more general and the last two quite specific:

1. Will the Panel plan to idenf y focal points within naonal g overnments through which they can have a two way channel of communicaon r egarding the context in each country and how global evidence and developments can be important for local decision making and also how the local contextual evidence can inform the global evidence base and decision making? If not part of this Panel's responsibility, can they link with another mechanism which may provide this type of communicaon channel?
2. Overall, but especially in **2. Objecv es of the Panel across the One Health spectrum**, there is virtually no menon of the import ance of community engagement acvies including social beha viour change. This aspect of addressing AMR is recognised to be key as without changes in behaviour typically leading to the over-prescripon and use of an biocs, both in human and animal health, it will be impossible to achieve major success in reducing the trend of AMR development.
3. In **4. Guiding Principles, *Transparency, peer review and open access*** it will be good to also commit to making the reports available through a public website or webpage, once finalised.
4. In **5. Structure and Membership, Composion** : the sentence which introduces the bullets "At a minimum, a panel member should have experse in one or mor e of the following:" It is not clear whether a panel member should have experse in jus t one area out of the two following bullets, or one of each - one bullet is on Disciplines, the other is on Sectors. It would be good to reword that phrase to make this clearer.

I wish you the best with the finalisa on of this ToR and look forward to shortly hearing more on this important initiative.

Kind regards
Helen

Helen Counihan
Head of Technical – West & Central Africa
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disease control, be er health

Malaria Consorum impro ves lives in Africa and Asia through sustainable, evidence-based programmes that combat targeted diseases and promote child and maternal health.

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Médecins Sans Frontières Access Campaign's (MSF AC) response to the Public discussion - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

MSF AC applauds the efforts of the Tripartite Organizations in leading the development of this critical work on evidence-based global governance. As it is paramount for global and national policies governing access to and stewardship of antimicrobials, as well as incentive frameworks for research and development (R&D) to be informed by an independent comprehensive evidence, MSF AC is keen to engage in this discussion for the benefit of patients and communities around the world. To that end, we put forward some points for consideration regarding the Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance (the Panel).

It will be essential to ensure the mandate of the Panel for action is firmly anchored in the 2016 Political Declaration of the High-level Meeting on Antimicrobial Resistance (Resolution A/RES/71/3). This is currently omitted from the *Guiding Principles* of ToR, presenting the risk of a mission drift.

For the Panel to achieve its stated goal, it will need to be (a) a trusted source of data and evidence, free of vested interests and (b) a source of evidence comprehensive enough to reliably inform prioritization of interventions, including those targeting resource-limited settings.

1. Objectives of the Panel across the One Health spectrum

The phenomenon of antimicrobial resistance necessitates multi-disciplinary and multisectoral response. To ensure this, the scope and prioritization of the Panel's work needs to be defined at an early stage. This includes defining the focus on bacterial pathogens or spanning beyond the narrow definition by including TB, malaria, HIV and fungi resistance. What's more, the humanitarian response offers a unique set of evidence generation and implementation skills that need to be reflected accordingly in the Panel's scope of work

Similarly, to enable efficiencies and complementarity in science-policy translation, capitalizing on existing global health architecture should be explored, including in programmatic areas where AMR is indirectly addressed such as IPC and WASH.

2. Guiding Principles

The appropriate treatment of private commercial interests in evidence generation and global governance

MSF agrees that all relevant actors must be engaged in this process, while ensuring the red lines between their roles and responsibilities. MSF urges the Tripartite Organizations to practically address the inclusion of private sector expertise in science-policy and policy-practice arrangements due to conflict of interest concerns. The conflicted role of pharmaceutical corporations, which have a record of unethical promotion of antibiotics, is not explicit in the draft ToRs. We note that the final Inter-Agency Coordination Group on AMR report stops

short of recommending that governments adopt legally binding measures to regulate these actors, but this should be the minimum concrete step taken.

Several published MSF studies from West Bengal, India show that pharmaceutical corporation representatives are often primary providers of information to prescribers and dispensers, and that this information is typically biased and misleading. This raises serious concerns about conflicts of interest, compromised patient care and unethical commercial practice. Legislation and regulation are needed not only to guide the introduction, manufacture, labelling, pricing and distribution of antibiotics, but also to prohibit their promotion. Leaving this to voluntary measures is not the solution: best practice by not actively promoting antibiotics or fully decoupling sales agents' bonuses from volumes sales is being reported only by significant minority of companies.

3. Structure & Membership

Composition of the Panel needs to reflect on the unique challenges communities face in low- and middle-income countries (LMICs) and the experts from these settings needs to be guaranteed a proportional representation. The evidence-generation in low-resource settings where the most knowledge gaps lie is critical to complement the global picture in addressing the issue collectively.

The form of which the nomination for the expert members will take place is critical and should be conducted through an open and transparent process, adding legitimacy and independence to the Panel. The current proposal with Tripartite Organizations' nomination function may be in odds with sought Panel's independence.

4. Accountability and Declaration of interests:

It is essential that the needs of LMICs, and particularly neglected people, are not left behind. This must be assured through a transparent, accountable evidence generation framework – inclusive in scope of all Member States challenges and lessons learned – that also provides for civil society engagement, oversight and consultation. Transparency is currently mentioned in the draft ToRs as a fundamental principle of governance of the Panel. Being a prerequisite for both accountability and legitimacy, we urge the Tripartite Organizations that the pathway towards the operationalization of transparency within the Panel and in its interactions with external bodies is likewise transparent.

The principle of accountability must also be built into the process of development and formalization of the Panel. As any lasting science-policy framework must come from a Member State-led process it is currently unclear how the Panel will reach global legitimacy, including crucial voices from LMICs, by a group of ten to fifteen experts.

5. Communication with governments and other stakeholders:

To ensure an efficient science-policy translation, the Panel needs to be aligned with parallel governance structures, including Global Leadership Group, Multi- stakeholder Partnership Platform. Furthermore, the Panel should also explore synergies with WHO STAG group to accelerate the coordination of evidence synthesis. Currently, lack of clarity on the linkages between these groups does not offer a room for a strategic discussion on the Panel's set-up with a lasting policy relevance and a robust policy for dealing with any conflict of interest.

To add leverage to the process, an evidence-based, holistic systems approach with periodic reports that can inform governments, multilateral organizations and all other stakeholders should be anchored in existing Member States-led governing structures, such as WHO Executive Board meeting or UN General Assembly.

To: The Antimicrobial Resistance Tripartite Joint Secretariat for the United Nations
From: Paul Plummer DVM PhD, Executive Director,
National Institute of Antimicrobial Resistance Research and Education
Re: Public comment opportunity on the "Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion"
Date: June 15, 2020

The National Institute of Antimicrobial Resistance Research and Education (NIAMRRE, www.niamrre.org) appreciates the opportunity to provide comment on this draft document. NIAMRRE's mission is to drive collaborative and integrative research, education, and engagement to solve AMR challenges and benefit society using a One Health approach. NIAMRRE was developed in 2018 as a result of a national search process led by the Association of Public and Land-grant Universities (APLU) and the American Association of Veterinary Medical Colleges (AAVMC) to identify a collaborative center to lead One Health efforts in AMR.

We acknowledge the efforts of the Advisory Group in the development of this draft Terms of Reference document and appreciate the opportunity to provide comment and feedback on the draft.

Comment on Panel Purpose and Guiding Principles: The future success and credibility of this group requires that they stay focused on the evidence and apply the guiding principles, as such, there is need for a mechanism to assure that conjecture and "opinion" are not primary drivers of the work-product.

- NIAMRRE strongly endorses the necessity of using an **evidence-based approach** to coordinating the global response to antimicrobial resistance. As discussed in the background section of the ToR draft "the challenge of antimicrobial resistance lies in its highly dynamic, complex, cross-sectoral and multidisciplinary nature" and there is "an urgent need to generate an evidence base for action to address and mitigate emerging risk, to resolve scientific disagreements and create synergies, and to improve communication among different stakeholder."
- **Concern**: If the panel strays from complete adherence to the guiding principles, the work product of this panel could be misconstrued as "evidence-based" purely due to the name and nature of the panel. Evidence, by its very nature, requires data and there needs to be mechanisms and processes in place to assure that the work product does not step into the realm of conjecture or precaution.
- **Recommendations to improve:**
    - The work product of the panel should be required to include a ranking of evidence quality appropriate for health research and the ranking should be prominently displayed in the reports.

- Work product of this effort should be subjected to a rigorous and balanced peer review process. The peer review should be managed independent of the panel (ie. outside selection of peer reviewers, not selection by this panel) and the panel should be required to respond to the peer review with substantive and balanced corrections or additions. Assurance of diverse peer review with a focus on geographic and disciplinary diversity as outlined below should be required.
- All statements in a work product of this type of panel should be supported by scientific citations and specific data.
- The panel should be provided annual training regarding causal inference assessments and there should be a requirement that work product appropriately reflect, in writing, this evaluation of causal inference when presenting conclusions drawn from data and scientific publications.

Comment on Panel Composition: Given the complexity of AMR, the panel size needs to be larger than proposed in the ToR in order to assure diversity and balance necessary to assure panel credibility.

- Given the a) complexity of the AMR issue, b) the diversity of health and agricultural production systems in differing geographical and cultural settings, c) the diversity of scientific disciplines and d) the need for broad stakeholder confidence and engagement **it is critical that the composition be of sufficient size, scope and diversity to lend credibility**. Furthermore, for the broad stakeholder confidence to embrace the recommendations of the group there must be significant effort exerted to assure **balance** between the one-health sectors.
- **Concern**: We are concerned that the proposed size of 10-15 individuals will be insufficient to meet the diversity and balance described above and would encourage the secretary to take a more holistic and balanced approach to development of the committee size and structure.
- **Recommendations to improve:**
  - We recommend populating the panel with intentional balance between human, animal and environmental health expertise and representation.
    - This means the panel structure should be divided into equal size groups across these issues.
  - Furthermore, we recommend populating the panel with intentional geographic balance in expertise.
    - This means the panel structure should be divided into equal size groups across member state continents.
  - Finally, we recommend populating the panel with appropriate expertise in:
    - Regional differences and experience with types of production systems
      - These would include intensive and extensive production systems represented by each geographic region
    - Diverse commodities and an understanding of the specific production needs and challenges they face

        - These would include swine, cattle, chickens, turkeys, aquatics, goats, and sheep
    - Diverse disciplines including human, animal and environmental health experts with actual experience managing and treating disease in the diversity of environments and geographies described above, risk assessment, epidemiology, causal inference, evidence-based medicine, sociology, ethics, microbiology and ecology.

Comment on Panel Nomination Process: In order to assure an open and transparent process there should be a call for open nominations and a clearly defined and balanced approach for the nomination review and appointment process.

- In order for this panel to have credibility as an independent panel on evidence it is critical that stakeholders hold confidence in the expertise, balance and diversity of panel formation.
- **Concern**: The current ToR simply state that a nomination committee formed by the tri-partite will make recommendations and the UN Secretary General will make appointments. It is not clear that this is an open call for nominations and how nominees will be evaluated. It is critical that this process be open and transparent with clear efforts to balance the diversity outlined in the previous comment or the credibility of the panel will be lost.
- **Recommendations for improvement**:
    - There should be an open call for nominations from the public and member states
    - The nominating committee should develop a clear and publicly available process for reviewing nominees and assuring balance of the characteristics outlined above. That information should be available and distributed at the time of the call for nominees.

We appreciate the opportunity to provide this specific feedback and look forward to seeing revisions in this current draft ToR based on feedback.

Sincerely,

PA International Foundation

PA International Response to the Draft ToR

After consultation with other stakeholders (notably the TB Alliance, the Access to Medicine Foundation, the Medicines for Malaria and the Chitkara Spaak Centre for Multidisciplinary European Studies), the PA International Foundation presents the following recommendations in response to your request for input into the draft Terms of Reference of the Independent Panel on Evidence Against Antimicrobial Resistance (AMR). These recommendations reflect our work of the past 8 years against AMR at both at EU and global level. At EU level, our work has been particularly focused at both *public and professional awareness creation* through conferences (in the European Parliament) and a website (www.stopAMR.eu) and at *identifying solutions to the antibiotic market failure dimension of AMR*. During a a webinar hosted by the European Parliament (cf. attachment 1) several trajectories were addressed. On the websites of both The Parliament Magazine and the StopAMR website this public and transparent dialogue involving the European Parliament, the European Commission and experts is gaining traction.

Ensure the committee has a mandate to tackle all facets of the fight against AMR:

- **AMR Governance:**
  - **Assumption:** Challenges created by AMR require an interdisciplinary analysis of causes and consequences, and hence interdisciplinary/holistically integrated solutions. These typically require actions that should be *taken* (such as the production of new antibiotics, alternatives to antibiotics and mixes of these; taxing antibiotics to raise the price; giving antibiotics a status similar to morphines) and that must *stopped* (over-use and wrong use in both husbandry and public health). The approach must be that simple and unavoidable. Challenges are also created by the current bureaucratic top-down approach that prohibits accurate analysis, reporting and decision making. Covid19 suggests the penalty if this continues. *Even within the EU the numbers of annual AMR deaths and their causes are partly inadvertently unknown and partly virtually deliberately unregistered.*
  - **Current problem at the national level**: in most of the nation states – as well as in regional organisations such as the European Union – the governance against AMR is left in the hands of the Ministry of Health, supported by the public authorities dealing with scientific research; yet often veterinarians appear to be the key policy advisers mostly defending the right of farmers to use antibiotics in other roles than to combat an infection in humans. Equally often health care workers such as nurses and other caretakers are entirely left out of policy making even though *their* experiences, data storage, and practical insights and actions are critical to human survival. The transport, storage and manufacturing sectors are critical to be involved in preventive and reactive measures – that they are both identified and implemented. How can challenges related to multiple social/economic/industrial/trade/transport domains be effectively tackled by a single authority? Should AMR's governmental action be based on vertical or holistically integrated horizontal and vertical governance?
  - **Envisaged solution**: creation at initially the national level – growing to regional and global levels – of inter-ministerial task forces that include science and health care workers, agricultural, trade, transport and economic representatives. Within the European Union this can be done by *expanding the current Health Security Committee into a new EU Health Security Council.* All UN Member States could observe this pilot and consider to establish a similar new Ministerial level Council –

with its own DG, budget and full focus at what (pandemics) threatens public health and what must be done in a preventive, pre-emptive and preparedness way. "The economy and health are one and the same thing", said Lord Jim O'Neil at a recent webinar (attachment 2). Therefore the governance of AMR must be both horizontal and vertical, involving a wide spectrum of governmental, scientific, civic society and industrial actors, headed by human health and not veterinarian authorities and subjected to legally required public reporting. Furthermore, Covid19 has taught that outbreaks do not respect borders; regional and global diplomacy has a key role to play to timely start countermeasures and encourage similar counter actions at both sides of all borders. Globalised transport and exchange will require globally agreed and enforceable rules. This approach may promote win-win initiatives that include advanced and developing economies. By consequence, AMR must be included in the all UN Member States' foreign policy agenda's and eventually be part of UN Security Council deliberations as AMR threatens to kill more people than any war so far has managed to kill.

As science has entered political decision making as a legitimizing force, Ministries of (Higher) Education have a role to play. Schools are indispensable communicators to both pupils/students and their families regarding health risks and the required action to mitigate risk. This can relate to the overuse of antibiotic in farming and to the behavioural patterns of both medical doctors and patients in terms of wrong and inappropriate use. Ministries of Environment, of Fisheries, Transport and Sports are equally indispensable for effective AMR policies to reach targets and prevent potential outbreaks.

- **Access**: this aspect, which mostly covers the supply of antibiotics in developing countries and the dependence on China and India for APIs, has been overlooked one time too many. It is no country's interest to be fully dependent of another as abuse of one event on one moment can even more dramatically backfire at another event at another time. Moreover the consequences of abuse will create massive risk 'when the wind turns' as chemical weapon experts usually say. Furthermore, one aspect that is often missing in the AMR debate is the local availability of antibiotics especially for poorer populations. A global approach related to the production, storage and correct use of (new) antibiotics must be thus be prioritized. This is part of the flow-model proposed in the attachment (attachment 3).
- **Need for replacement antibiotics and alternative antimicrobials**: addressing the Market Failure of antimicrobial development will be critical very soon. The post-antibiotic era announced by then WHO Director General Margareth Chan may hit within just a few years; over the past 20 years the European Union already mourns 400.000 AMR deaths. This may grow to 10 million people per year globally by 2050. *Insurance companies must become involved in the prevention of this scenario*. They will pay a horrendous price if we take years and billions of USD to develop a new antibiotic against killer bacteria. These are already around: MCR1 and NDM-1 gene bacteria are in the world's food chains already and have *no cure.* The world spends billions of USD on the funding of multinational enterprises to develop new medicines but – quite apart of the *market failure* – mostly Small and Medium Sized Enterprises (SMEs) develop new antibiotics. And *because of the market failure these SMEs cannot survive.* The remedy is to *both create very substantial SME oriented funds and – as advised by Lord Jim O'Neill – to if necessary establish wholly publicly owned companies to produce what profit-based pharma companies cannot produce.*

- General Proposals:
  - The Panel will not be successful/useful if it does not include a working group as well as a strong focus on Research & Product Development (R&D) as well as its global and regional distribution and financing. This will be one of the make-or-break factors in the fight against AMR.
  - The fact that antibiotics are overused can to some extent be considered as an opportunity. In order to raise the required public funds to regularly finance the research of new antibiotics, *an alliance of countries could jointly create a tax on antibiotics.* This could be done mainly in middle-high income countries. Antibiotics are relatively cheap, representing one of the causes of overconsumption particularly in agriculture. As coordinated action, a league of countries could introduce a proportional tax on the selling of antibiotics to generate a regular income to allocate to the fight to AMR. This *could be done immediately by individual jurisdictions.*
    In the medium term, importation taxes should be imposed on drugs manufactured in countries not respecting the common multilateral commitment on AMR prevention (e.g. environmental and human health standards and legislation, etc.). This medium-term vision envisages a further enlargement of the international agencies involved in tackling AMR. Basically, it recalls the first recommendation related to the need of inter-ministerial task forces. In the case of additional export duties, the WTO should be actively involved. Similarly, the low-income countries should have access to a dedicated credit line of the World Bank, and their national insurances should have a privileged dialogue with the Multilateral Investment Guarantee Agency (MIGA) to ensure that farmers for low-income countries would not face poverty due to livestock diseases.
  - The true cause of the antibiotics market failure resembles a system failure that would occur if States would leave their military defense to industries. In other words, the securing of prevention, pre-emption and timely action may require direct involvement of the State in production, storage and distribution. Industries must make profit. If the discovery, production and distribution of new antibiotics and similar medicines such as phages do not secure profit for industries, these new products will not be produced. Laws will not be adopted or created as pharmaceutical industries will consider these contrary to their interests. It will be important for the panel to properly identify these problems and propose solutions. Here, **PA International, after consulting with a variety of experts and stakeholders, has come up with an alternative market system, based on some degree of direct purchasing by the states, to ensure new antibiotics/antimicrobials are produced (attachment 3)**
  - **Overuse and wrong use of antibiotics**: a severe restriction of the use of antibiotics for any other purpose than combating infections will be obtained, according to experts, through either outlawing such use or taxing overuse or a combination of both. After all, farmers globally invariably continue to use antibiotics for growth promotion and disease prevention because of the low prices of antibiotics. Excesses such as large-volume sales to farmers with price reductions up to 80% must be outlawed. Unless this happens, industrial competitiveness will disallow pharmaceutical industries to stop the practice of antibiotics price wars.
  - **Environmental pollution**:
    Assumption: it is well known that environmental pollution is among the key sources of AMR. This is even more evident for the developing/transition economies (India,

China) that hold a relevant market position in the production of antibiotics. The virtually total negligence of environmental and human health elements in API production in both countries allows the production of the cheapest APIs without any means to address such production issues in both countries. Whilst for instance the US import policy requires Asian producers to be inspected *in situ* before a US import permit is provided, this is not the case for other Countries/Unions, including the EU. The US approach should be globally introduced.

- **Current problem**: there are countries where antibiotics are excluded from the list of water pollutants. In several countries it is not possible to address this; therefore, new AMR/water related environmental protection and corporate social responsibility elements should be included in laws and enforceable regulations .
- **Envisaged solution**: a) in the multilateral arena: promotion of an international treaty against antibiotics pollutions; b) in bilateral/limited multilateral negotiations: promote legislative improvements in the affected countries as part of a comprehensive bilateral or multilateral cooperation framework supporting technology transfer and channelling targeted investments in developing/transition economies countries.

Structure of the Panel

We support the argumentation of the TB Alliance concerning the inclusion of a representative from a Product Development Partnership Organization (PDP) in the panel as they "will ensure that experience from a successful, public health-driven global public health approach, focused on patients' needs, is incorporated into the panel." We also support Medicines for Malaria in proposing having a member of the Panel who is familiar with the industry and aware of its importance in the fight against AMR. We also advocate for the panel being divided into working groups, with one specifically focused on Research and Product Development (R&D) in AMR and its global financing.

Funding of AMR

We agree with the TB Alliance, that Tuberculosis must be addressed specifically in some capacity by the Panel. However, we also want to underline that, *as AMR will critically impact all modern medicine, we believe in the establishment of a Global AMR fund which could be coupled to the Global AIDS, Tuberculosis and Malaria Fund. This topic, along with how to address Antibiotic Market Failure (through the establishment of both the Global Fund and of a new market model, including but not limited to push and pull incentives) should be addressed by the above-mentioned working group on R&D and AMR financing.*

Establishing a global fund and proposing key policy measures to ensure new antimicrobials are developed and produced will be critical in guiding the different countries in setting up their own strategies.

Other Comments

- The passive wording of the ToR: e.g. "evaluate existing data and identify gaps in the evidence" must be replaced by the identification of clear deliverables and ways to deliver. Otherwise the entire exercise is doomed to be a bureaucratic effort to control matters far beyond its reach. The initial lack of support by the UN/WHO Secretariat to IACG cannot be repeated. Either the AMR threat is real and even the UN Security Council becomes involved

to *secure broadly supported and timely effective action* or it is accepted that the next Covid or AMR outbreak will have a far more ruinous effect on the world's population and economy than Covid19.

- The non-overlap with the normative functions of other UN agencies, such as the WHO is critical. However, it is also important to recognize that some of the lack of progress to develop a one-health agenda has been the individual UN agencies themselves. It could be important to strengthen the statement about the IACG ToR here to ensure that this is seen not only as integrating the strands of work from the individual agencies but setting a clear agenda and roadmap for change in the way the agencies work together possibly as mapped by the Security Council.
- We believe that the Panel should investigate how it would be possible to ensure that the EU, US and China's AMR priorities and policies are aligned – if necessary through the UN Security Council. *Since the US has decided to leave the WHO the Security Council is the right and only place where global catastrophes can be timely addressed and avoided*. This would certainly pave the way for a stronger sustainable and responsible AMR mandate.

PA International Foundation, Brussels, 15th June 2020.

[EXT] RE: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Lilya Boaron [redacted]
Tue 6/2/2020 7:55 AM

To: Veronika Jakobi [redacted]
Cc: amr-tis [redacted]; IGO UNOPS [redacted]; [redacted]; IGO UNOPS [redacted]; Daddi Wayessa [redacted]

Dear Ms Jakobi,

[redacted]

[redacted]

In the meantime, on behalf of Dr Diallo, allow me to confirm that we have reviewed the Terms of Reference for the panel and do not have any comments on this draft.

With our best wishes,

Lilya Boaron
Assistant to the Chief Executive Officer and Board Chair
RBM Partnership To End Malaria

5th floor, Global Health Campus, Chemin du Pommier 40
1218 Le Grand-Saconnex, Geneva, Switzerland

RBM Partnership To End Malaria hosted by UNOPS

ReAct Feedback on the draft ToR of the Independent Panel on Evidence for Action against Antimicrobial Resistance

We appreciate the opportunity to provide feedback on the draft terms of reference of the Independent Panel on Evidence for Action against Antimicrobial Resistance.

Important role of the Panel

We welcome the steps towards establishing the Independent Panel on Evidence. Independent and sound evidence is a well-acknowledged dimension of an effective and credible policy development process, and it is an important aspect of global and national governance on AMR. Such assessments of the evidence will provide critical support not just to Member States, but also to the Global Leaders Group, the Tripartite and other UN agencies part of the AMR response, and other actors in designing strategies for addressing AMR.

To ensure that the outputs of the Panel are authoritative, credible and legitimate, a rigorous and robust scientific process must be ensured. While preparing this feedback, we have looked in detail on the ToR of other independent panels and expert groups. This ToR is rather abridged and does not provide the level of detail many other ToR or rules of procedures do. It lacks clarity on many aspects of how the panel will function and thereby risks undermining the credibility of the Panel.

Clarity on procedures

The ToR needs more clarity on the procedures for how the panel will operate and not place this responsibility on the Panel itself to develop its own operational guidance. The current language leaves it open for different interpretations. A clearer vision on what is expected would be good to outline. More clarity is needed on the process to define the scope and topics of the reports of the Panel, how the Panel will engage with other stakeholders to develop proposals for reports and evidence synthesis, how the process to produce the Panel's outputs will look like, and the ways the Panel will seek feedback on draft reports. Therefore, we suggest:

- To introduce a new section providing further details on procedures and modes of working that the Panel can then use as a starting point for developing its more detailed operational guidance.
- To provide details on opportunities for different stakeholders including CSOs, so as to initiate suggestions on reports and evidence synthesis, especially clarifying the role of the partnership platform and any consultations beyond this mechanism.

The Panel's outputs will be an essential component of the global governance mechanisms, to facilitate informed discussions and decision-making processes. The establishment of the Panel must not happen in isolation of establishing the Global Leaders Group and the Partnership Platform. Unless the relative interactions and dynamics of the whole governance system and its relations with stakeholders beyond it is developed and clearly described, it might be difficult to correct and change course at a later stage. We suggest:

- To include mentioning of the Global Leaders Group and the Partnership Platform in the *Background*, and to more clearly describe the interlinkages and respective roles of the different components of the global governance mechanism beyond the communication aspects brought up in *7. Communication with governments and other stakeholders*.

Today there is no global, cross-sectoral mechanism to manage the assimilation of the rapidly expanding scientific literature on AMR, and there is a gap in providing independent and multi-sectoral analysis of existing evidence in a One Health context. There is also the need for a mechanism that is an adjudicator of the knowledge base that manages scientific disagreements, and synthesizes evidence from a systems perspective with engagement of experts from different disciplines. We suggest:

- Adding language to the second point in *2. Objectives* to the following effect: [...], to synthesize and interrogate the knowledge base from a systems perspective by addressing scientific disagreements and competing views on priorities arising from the assessed evidence and interventions.

Independence and safeguarding from conflicts of interest

Adhering to the principles of transparency, scientific inclusiveness and independence is at the core of ensuring authoritative and credible outputs from the Independent Panel. The Panel's work should be produced independent of influence of financial interests by governments, and financial conflicts of interest of businesses. The guiding principle of "independence and political neutrality" states that "the work of the Panel should be free from political and group influence." This raises questions on what is meant by political neutrality and what group influences would be covered by this principle. Also, this principle does not specifically address financial conflicts of interest. More could be done to ensure financial conflict of interest does not bias the work of the Independent Panel. Therefore, we suggest:

- To reconsider the framing of "political neutrality" and "political and group influence" of *4. Guiding Principles "independence and political neutrality"*, and to add language on "safeguarding from financial conflicts of interests".

- Some additions in *6. Declaration of interests*: 1) to assign the Panel's Chair to have the main responsibility that the panel and all its work adheres to the guiding principles, including safeguard from conflicts of interests; 2) to task the Panel with developing a strategy and operating procedures on how to manage conflicts of interests; and 3) to introduce more stringent language to ensure that mere disclosure of potential financial conflicts of interest is not considered as having met the bar for participation on the Panel or in working groups.

An important step towards securing the panel's independence is reflected in making the Independent Panel accountable to the UN Secretary General and placing it "beyond the mandate of any one agency of the United Nations or other international organizations." To ensure this foundational principle however, the Panel's workings must also be independent with respect to the Tripartite agencies. In order to bridge the intersectoral gaps among the work of these agencies, the Panel must have the freedom to operate truly independent of them. Several parts of the Terms of Reference risk compromising this foundational principle, including the fact that:

- The Nomination Committee recommending its membership will be convened by the Tripartite organizations;
- The Tripartite will provide secretariat support to the Panel;
- The Secretariat also plays a consultative role in reconsidering membership "if a member has acted in a manner that undermines the scientific and/or operational integrity of the Panel."

Collectively, these factors undermine the necessary independence of the Panel. The Panel's nomination process, its staffing, and the handling of its membership should all be independent of the Tripartite Secretariat.

To secure an independent process for the nomination and the selection of panel members, that also adheres to the principle of safeguarding conflict of interests, we suggest:

- To modify the language i*n 5. Nomination and selection*, to place the convening of the Nomination Committee in the Secretary General's office, instead of the Tripartite organizations. Seeking inspiration from the Rules of Procedure of the Committee on World Food Security, we would also suggest that the Nomination Committee should have representation of civil society organizations.
- In addition, seeking inspiration from Appendix C to the Principles Governing the Intergovernmental Panel on Climate Change (IPCC) work, we suggest adding that "Nominations should be submitted in writing to the Nomination Committee. A nomination should include the curriculum vitae of the person nominated, as well as a Disclosure on Conflict of Interest."

To address the matters of where the Panel is housed, by whom it receives secretariat support, and what the role of the Tripartite Secretariat should be in relation to the Panel, we ask:

- That alternative proposals for secretariat support of the Panel are considered, and how the Panel's independence can be ensured.

The content of the Guiding principle 'Non-duplication and complementarity' is phrased in a way that could not only compromise the independence of the Panel, but also strip the Panel of the necessary scope and ability to apply the interdisciplinary systems approach to problems that might be under the jurisdiction of one or more of the Tripartite agencies (or other international organizations). As it is framed now, any international organization could claim that they are exploring an issue within their broad ambit, thereby blocking the Panel from fulfilling its charge. We suggest:

- To delete the content of the principle *Non-duplication and complementarity*;
- To add Complementarity to the *Comprehensiveness and inclusivity* principle. With inspiration from the Principles of the Intergovernmental science-policy platform on biodiversity and ecosystem services (IPBES), language to include could be to the effect of "Collaborate with existing initiatives, including United Nations bodies and networks of scientists and knowledge holders, to fill gaps and build upon their work while avoiding duplication through processes of knowledge sharing and consultations."
- With inspiration from the IPBES, additional language to include in either *2. Objectives of the Panel* or *4. Guiding Principles* could be to the effect of: "Provide policy-relevant information, but not policy-prescriptive advice."

Enable low- and middle-income countries' involvement

Finally, we call on strengthening the language on low- and middle-income countries' involvement, throughout the ToR. This also includes reconsidering the point on compensation for the work and the notion that "Members will receive no fees or remuneration for their time". Depending on the amount of work required, it may be difficult even for members from high-income countries to contribute without receiving compensation, but will pose an even greater barrier for LMIC representation, and must be addressed in the crafting and funding of the Panel.

The establishment of an Independent Panel on Evidence for Action on Antimicrobial Resistance is a key recommendation from the UN IACG that requires follow-through. It is instrumental that the approach by which it is implemented, and how it functions, will ensure its independence, as this is critical to its success, credibility and strategic value.

[EXT] Input into the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance (AMR)

Willo Brock [redacted]

Thu 6/11/2020 9:29 PM

To: amr-tjs [redacted]
Cc: Ana Maria Harkins [redacted]

Dear madam/sir

This email is in response to your request for input into the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance (AMR) and additional instructions as available here.

Our feedback and recommendations are short and action oriented and focus on structure and membership and the establishment of working groups.

Structure & Membership
Composition of the 10-15 member panel should include a representative from a product development partnership organization (PDP) and ideally a member deeply knowledgeable on Tuberculosis, the largest individual contributor to AMR both from a health as well as socio-economic impact perspective. This will ensure that experience from a successful, public health-driven global public health approach, focused on patients' needs, is incorporated into the panel. PDPs design products for use globally, focused on high disease burden and mortality, and contribute to the 'policy to practice' remit of the Terms of Reference. Various PDPs have experience with products battling key diseases affected by Antimicrobial Resistance and a track record of developing new antibiotics with major global health impact.

Establishment of Working Groups
We strongly advocate for a working group focused on Research and Product Development (R&D) in AMR and its global financing. Priority setting, coordination, resourcing and implementation mechanisms for AMR research and development are an essential topic for this Terms of Reference, especially in light of the COVID-19 pandemic which has upended R&D on every level and shows the key role global coordinaon in R&D plaàys in fighting pandemics and AMR.

This feedback is submitted by me, as legal representative of TB Alliance, a globally operation not-for-profit with offices in the US and South Africa.

Willo Brock
Senior Vice President, External Affairs

TB Alliance | 20 YEARS OF IMPACT

Dear Tripartite Joint Secretariat,

Thank you for the opportunity to provide feedback on the draft terms of reference (TOR) of the Independent Panel on Evidence for Against Antimicrobial Resistance (AMR). The United States Pharmacopeial Convention (USP), a nonprofit organization that sets standards for the identity, strength, quality, and purity of medicines, food ingredients, and dietary supplements worldwide, is committed to the global response to antimicrobial resistance.

We stand in support of the TOR and the establishment of this AMR One Health Panel as per recommendation of the IACG. Assuring medicines quality is essential to address the global threat of AMR. USP is helping with standards, capability building, and advocacy. These efforts have included providing a statement of support to the resolution on Antimicrobial Resistance at the 72nd World Health Assembly, providing input to the development of the IACG, and developing a policy paper on Advancing Quality of Medicines to Combat Antimicrobial Resistance.

We would like to suggest two potential refinements to the TOR that we believe would enhance the work of the Panel:

1. We recommend that the TOR include as a task of the Panel to adopt a framework to clarify the levels of evidence it will be seeking as well to standardize its approach to evidence evaluation. This recommendation would mirror accepted practice for evidence-driven policy recommendations. This framework would inform the strength of the Panel's assessments and recommendations and should be developed in consultation with recognized experts in science and policy.

2. We recommend that the Composition of the Panel (Section 5) should explicitly include experts in the regulation of human and veterinary medical products.

As a non-State actor engaging with the WHO and an independent standards-setting organization, we welcome opportunities to work with the Panel and to integrate its findings. We look forward to learning more about any public process for solicitation of experts for consideration. As we continue our efforts to generate evidence to guide policy on AMR, the recommendations of the Panel will help to inform gaps and to determine our future research investments. Recognizing that medicine quality is a key driver of AMR, we welcome the opportunity to advocate for the recommendations of the Panel through our network of medicine quality leaders and champions. Thank you.

Sincerely,

Damian Cairatti
Senior Director, Country and Regional Regulatory Policy and Engagement
U.S. Pharmacopeial Convention (USP)

Aequor, Incorporated

[EXT] Feedback on AMR

Marilyn Bruno [redacted]
Mon 6/15/2020 4:10 PM
To: amr-tjs [redacted]
Cc: Cynthia Burzell [redacted]

Name: Marilyn Bruno, Ph.D., J.D.
Title: Co-Founder and CEO – Aequor, Inc.

Aequor is a company founded in 2006 on the premise of the United Nations' One Health approach for controlling pandemic outbreaks at 3 vectors of transmission: animals, humans, and the environment – water, air, food, and inert, nano and organic agro-industrial, consumer and clinical surfaces.

We believe several elements of the AMR discussion have not been adequately addressed: Microbiology, Biofilm, and the Environment.

--Microbiology.
Specialists in basic microbiology need to be included in the discussion. By having decisionmakers coming from backgrounds only in medicine, epidemiology and Pharma leaves serious gaps that directly impact the prioritization of efforts and deployment of resources.

--Biofilm
Biofilm is the extracellular matrix formed by most bacteria, fungi and some viruses as their first resistance response against environmental stresses: heat/sterilization, and the plant and animal immune systems, even when bolstered with biologics, vaccines, biocides and antibiotics – which are designed to kill only free-floating (planktonic) microorganisms and are rendered ineffective in the presence of biofilm. It is no coincidence that every pathogen on the WHO and CDC lists of priority, pandemic, and bioterrorist threats is a "biofilm-former" – as is every AMR and multidrug-resistant organism (MDRO), including MRSA, TB, VRE, ESBLs, PRSP, etc. Possibly even COVID-19 is a biofilm-former (https://grfpublishers.com/article/view/MjI4/Examining-Covid-19-from-a-Novel-Perspective). It is also no coincidence that most new drug candidates fail in later state clinical trials (after $millions have been spent) because they cannot work in the presence of biofilm.

--Environmental transmission:
Microbial testing shows that no surface can be considered sterile and decontaminated until bacterial and fungal biofilm is completely removed. Biofilm was found on a titanium plate within 30 seconds of sterilization. This has direct impact on AMR, emerging infectious diseases (EIDs) and, chemical, biological, radiologic and nuclear (CBRN) contamination. According to clean room operators, the harshest biocides, gas fogging, sonication, UV, and other methodologies fail to remove biofilm. Additionally, once the biofilm matrix is formed, it captures ambient particles and different species of pathogens, enveloping them in the same biofilm as it builds. These pathogens share genetic material ("horizontal gene transfer"), spawning new mutations and AMR strains. As biofilm builds, it sloughs off, becomes air and water-borne, and spreads its contents to other surfaces. The examples of biofilm as a key element in AMR transmission are increasing: a wave of deaths in a hospital ward was traced to the biofilm on the tie knot of the doctor making the rounds; the deadly *Candida auris* outbreak in New York hospitals was traced to the curtains; most dentists and doctors have removed sinks from their offices because of biofilm in the plumbing; Legionnaire's disease was traced to *Legionella* biofilm in the air conditioner that became airborne and inhaled; etc.

Aequor urges focus on these missing elements and non-traditional approaches. and would be happy to provide additional information, citations, etc. upon request. Aequor's Founder, Cynthia Burzell, Ph.D., is a Marine and Medical Microbiologist and one of the few world experts in biofilm. Upon validating her

discoveries of novel, non-toxic molecules in the ocean that remove biofilm in minutes and prevent its formation for days, Lonza stated that “nothing else known can remove biofilm at non-toxic doses.” Her molecules also potentiate obsolete antibiotics (e.g. Penicillin) to kill AMR pathogens, which could be saving millions of lives -- and reducing the healthcare burden -- now.

As an anecdote on the importance of environmental biofilm: To solve NASA's problem of astronaut health due to the discovery that bacteria form biofilm thicker and faster in Space (to protect themselves from the extreme environmental stresses of zero gravity, radiation, etc.), Aequor's Founder undertook a 3-year project with the Marshall Space Flight Center to address bacterial contamination in the water recycling/reuse system used on board the International Space Station. One dose of her treatment removed the biofilm in minutes and kept the system free of bacteria for over one year. (She won several NASA awards in the life support category because biofilm was declared the "number one impediment to long-duration manned Space travel.") The thicker biofilm is similar to that of AMR and MDR pathogens.

We look forward to hearing from you and appreciate this opportunity to comment.

With best regards,

Marilyn J. Bruno, Ph.D., J.D.

CEO, Aequor, Inc.
3210 Merryfield Row, San Diego CA 92121
Website: www.aequorinc.com

AMR Industry Alliance

To the Tripartite Joint Secretariat on Antimicrobial Resistance

Comments on the document: Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

The AMR Industry Alliance, having previously also submitted comments on the One Health Global Leaders Group Terms of Reference, appreciates the opportunity to comment on the present Panel Draft Terms of Reference. We support the work of the Tripartite Joint Secretariat in advancing global AMR efforts to address the AMR threat, which is further exacerbated in times of infectious disease pandemics like the present COVID-19. We believe global progress can only be achieved with joint coordination and action of all stakeholders. Please see below a couple of general, as well as specific comments.

I. General comments

1. The Alliance agrees that the Independent Panel should be a multi-sectoral and multi-disciplinary and multi-stakeholder group. Operating based on science and reliable evidence, the life sciences and healthcare industry sector possesses considerable knowledge and expertise relevant to generating AMR-relevant scientific assessments, and supporting development and implementation of interventions such as relating to medicines, vaccines and diagnostics, surveillance programs, and stewardship. As such, the panel should also consider individual experts from various subsectors of life sciences industry (such as R&D-based pharmaceutical companies, biotechs, generic manufacturers, diagnostic companies, and other). Expertise and recommendations which originate from the private sector experts will help ensure that solutions leverage all capabilities and achieve maximum impact. Important insights on ideas generated by other stakeholders on how to leverage private sector resources can also be shared. While appropriately managing potential conflicts of interest, the Independent Panel should include experts from private sector as full members.

2. We believe the Advisory Group, with the function to help establish the Panel and its framework of operating, could have been set up more broadly to encompass additional Non-State Actor representatives from sectors other than those already included.

3. We would appreciate additional clarity on the planned interaction and coordination between the eventual Panel, the Global Leaders Group, the Partnership Platform, and the Tripartite Joint Secretariat.

II. Specific comments on the draft Terms of Reference (ToR)

1. In reference to point 2 on “Objectives of the Panel”, it is evident that the broad scope of the Panel areas of work will necessitate a broad range of expertise. For example, on the environmental risks and impacts of AMR noted in the draft ToR, the expertise of Alliance member companies and their experts allowed for the development of a common Alliance

antibiotic manufacturing framework, and the adoption of a list of predicted no-effect concentrations (PNECs)[1]. This resulted in a peer reviewed SETAC publication[2] and external expert and stakeholder recognition of the work. It is thus critical that experts from the private sector are closely involved in this work.

2. In reference to point 4, bullet point no. 3 on "Non-duplication and complementarity", it would be helpful to clarify in more detail the role of the Panel as it relates to other organizations and Tripartite activities.

3. In reference to point 5 on "Structure and Membership" bullet point no. 3 on "Nomination and Selection", while the document states the Nomination Committee will present candidates to the UN Secretary General, the process of selection of experts is unclear, such as whether the process will include an initial collection of interest from individual experts.

4. The draft ToRs state under point 7 on "Communication with governments and other stakeholders" that "… *the Panel will confer and communicate with the Global Leaders Group (pending its establishment), the Tripartite and other organizations as well as the partnership platform (pending establishment) where governments, civil societies and the private sector interact*." We believe additional clarity on the interaction, coordination, and scope of engagement of the Panel with the groups mentioned would be helpful.

5. On point 8 regarding KPIs, we suggest aligning the KPIs to the work of other organizations and Tripartite activities. For example, the Alliance previously submitted comments on the Global Leaders Group ToRs in November 2019, relating to the Partnership Platform KPIs, noting that the Platform *could be convened within six months to take on programming work or it could help initiate a campaign within a year. Gaps and opportunities on the global front to further programmatic goals could be identified within 3 months.*

[1] https://www.amrindustryalliance.org/shared-goals/common-antibiotic-manufacturing-framework/
[2] https://setac.onlinelibrary.wiley.com/doi/pdf/10.1002/ieam.4141

Becton Dickinson and Company (BD)

BD Feedback - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

- Formation of the Independent Panel on Evidence for Action Against AMR is welcome, though the plan appears ambitious. There is no reference to lessons learned from the Interagency Coordinating Group (IACG) and their recommendations, leaving it up to the panel to begin the process of developing a background. It would be welcome to include the IACG recommendations as a starting point for this new Independent Panel. Further, there is no mention of National Action Plans which, today, form the basis of country-level action to respond to the threat of AMR. Evaluation of the adequacy, and gaps, in National Action Plans is recommended.
- It is great to see that the panel will work in close collaboration with the Tripartite agencies (FAO, OIE and WHO) and UN Environment Program. This will certainly bring focus to the One Health issue. However, since the Independent Panel is structured to be accountable to the UNSG while the Governance Team is accountable to the Tripartite, there is a risk for one group to be viewed as subordinate to the other. Recommend making the Evidence Panel and Governance Team co-equal.
- The frequency of panel meetings, and reports, is not defined. We recommend this group meet biannually, at minimum.
- The most glaring omission we see in the document is the absence of private sector engagement in the inter-sectoral composition of the 10-15 experts in the panel. While the intent may be to engage the private sector in working groups, this is not mentioned but we believe should be encouraged.

Best regards,

Adam Zerda

Director, AMR Strategy and Development
BD (Becton Dickinson and Company)

BioMerieux

[EXT] Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance

TISSIER Jean-Louis [redacted]

Sat 6/13/2020 3:29 PM

To: amr-tjs [redacted]
Cc: MILLER Mark [redacted]

To the Tripart e Joint Secretariat on Anmicr obial Resistance
Comments on the document: Independent Panel on Evidence for Acon Ag ainst Anmicr obial Resistance Final Draft Terms of Reference for Public Discussion

bioMérieux is a global diagnosc c ompany for which Anmicr obial Resistance (AMR) is a major corporate focus. We are a member of the AMR Industry Alliance and have included some of our feedback into that collecv e response which has already been sent to you by them. However, we would like to complete that answer with the following comments from our Company:

General comments
The mandate and objecv es of the Panel are considerable, large and diverse. It is expected that in order to achieve these objecv es, the Panel's acvies will r equire considerable funding and support, aside from the Tripart e Joint Secretariat menoned in the T erms of Reference. There is no menon of financial or other support for the Panel, other than the Secretariat. This should be clarified or it is unlikely that the Panel will achieve its goals. We are concerned that, despite these admirable goals, the Panel will not be able to achieve their objecv es without pre-determined, guaranteed, available and clear manpower resources and funding.

Specific comments
Background. Page 1, paragraph 2: we don't think that so much emphasis should be put on COVID-19. After all, AMR preceded COVID-19 and will connue a . er COVID-19 with tens of thousands of ongoing AMR-related deaths per year. We would propose to change the first line to: "The COVID-19 pandemic *and the ongoing increasing threat of AMR* and their impacts on the enr e global community illustrates the importance of heeding warnings about current and future disease threats, and the imperav e for evidence-based acon a t all mes. "

We thank you for the opportunity to comment on this important inia v e.

Most sincerely,

Jean-Louis Tissier, VP Public & Government Affairs (AMR)
Mark Miller, Execuv e VP, Chief Medical Officer

Jean-Louis Tissier
bioMérieux | Vice-President of Public and Government Affairs -AMR

www.biomerieux.com

HealthforAnimals comments on the TOR for the
Independent Panel on Evidence for Action Against Antimicrobial Resistance

General comments

Thank you for the opportunity to comment on the TOR.

Proportionality. We commend the UN Secretary General for the One Health approach and the qualifications of the Advisory Group that provided input for this draft. The Group was heavily weighted toward animal health and was light on human health. This level of disproportionality risks a product that is narrow in expertise and provides minimal benefit to Member Countries.

Fit for Purpose. This effort should meet the objectives within each of the tripartite agencies, instead of forming a new scientific editorial body. Extensive expertise (and governance structures) exist within the agencies to follow the journals, national reports, and the leading science, and conduct appropriate analysis of its merits or relevance for public health outcomes.

On sections: "Purpose" and "Objectives of the Panel"

The TOR should contain a description of the specific public health objectives. The best public health outcomes are derived when the evidence serves as the foundational basis for informed, science-driven decision-making. Many countries are keen to consider benefits and risks in public health policy when presented. The TOR does not detail the health outcomes for people, the analysis that would be conducted, and how this would be used or disseminated.

We note the TOR state the idea is to *"Generate….assessments of the science …. across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment."*

We advise the panel to focus where the most difference can be made in reducing resistance - the most important places and routes of transfer. The scientific evidence time and again points to human healthcare settings as the places where most transfer happens. The most important leaps forward can be made there. The European Centre for Disease Control (ECDC) reported that "*75% of the burden of bacteria resistant to antibiotics …is due to healthcare-associated settings".* The European Medicines Agency that: "*…it is recognized that the biggest driver of AMR in people is the use of antimicrobials in humans or human health."* The UK Department of Health that "*…. the clinical issues with antimicrobial resistance that we face in human medicine are primarily the result of antibiotic use in people, rather than the use of antibiotics in animals."* Contrary to human care health settings, a considerable number of "farm to fork" risk assessments performed by authorities in many markets show the low (not zero) risk to humans from appropriate antibiotic use in animal agriculture.

We advise that there should be an important focus on developing nations.

On "Guiding Principles"
We are pleased that the principles of independence and neutrality for the panel are included. It is also important to state that the individual experts must represent these values. With due respect to the necessity for balance (gender, geographies, belief systems, types of employment, etc.…), these types of

considerations should not take precedence over scientific excellence when selecting experts. Too often this has happened, and it detracts from credibility.

We are pleased that peer review is included. In the past, AMR has been politicized with questionable data that has not peer reviewed forming the basis of public policy.

We are also pleased that non-duplication and complementarity are specifically mentioned. We note that every new panel or initiative created endeavours to do this, but few succeed. What are the mechanisms this panel will apply to avoid duplication? To avoid duplication, we recommend to use of a simple and widely used management methodology: to deliberately agree and list the areas that the panel will not delve into, because these areas are being dealt with by other organizations (like the OIE, WHO, FAO, Global AMR R&D Hub, and others). Some of these organisations have been working on AMR successfully for many years, indeed decades.

Given that the scope is enormous, focus is important to avoid mission-creep and spreading of energy too thinly over too many topics. The focus areas should be clearly delineated at the start. The panel should focus on the 2-3 most important scientific questions.

On "Structure and membership"
10-15 experts are a small manageable group. But it will by far not be enough to cover the range of expertise needed as described in the TOR. Even with agreement on core focus areas, there will be a need to call on the insight of additional experts outside of the core panel. The process for this needs to described. Such experts should include specialists working in the private sector in human and animal health companies where there is a wealth for experience.

On "Key performance indicators"
We welcome the setting of key performance indicators. The private sector works with these types of indicators and targets. The panel should, at the start of projects, set detailed quantitative and qualitative metrics to be achieved for each KPI. What will be achieved by what date. It should report back on a regular basis how well it has achieved these or not. The simple red, orange, green stoplight reporting method works well.

International Dairy Federation (IDF)

IDF comments to the Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

The International Dairy Federation (IDF) is grateful to the Independent Panel on Evidence for Action Against Antimicrobial Resistance for the opportunity to comments on the draft terms of reference.

General Comments:

The draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance provided by the IACG lack technical information on how it plans to prevent and mitigate antimicrobial resistance. In addition, it lacks information on how this Independent Panel will cooperate with Codex, FAO, OIE and other stakeholders. The draft terms of reference do not mention how the main inputs will be collected, or the process neither the key performance indicators that will be used to evaluate the work of the Independent Panel.

The draft terms of reference should take into account the central role of the private sector in promoting good practice in the use of antibiotics in the dairy sector. The IDF plays a central role in promoting good practice in antimicrobial use in the dairy sector by ensuring coordination and collaboration of all stakeholders along the dairy production chain. IDF cooperates with FAO and OIE on antimicrobial resistance and the work done by IDF should be taken into consideration.

International Feed Industry Federation (IFIF)

04 June 2020

Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

International Feed Industry Federation (IFIF) Comments

Reference	Quote	Comment
P1, Background, Para 2	It causes loss of lives, impacts livelihoods, and disrupts the economy and the attainment of many of the Sustainable Development Goals	Attainment of which sustainable development goals? Why would this term be in capital letters?
P2, Purpose, Para 1	This will be accomplished through an evidence-based, holistic systems approach and in the form of periodic reports that can inform governments, multilateral organizations and all other stakeholders. The Panel will rigorously evaluate and synthesize existing and new data, impacts and future risks, to address the urgency and complexity of antimicrobial resistance. It will provide options for evidence generation, and mitigation and containment strategies and interventions.	Only the first sentence of this paragraph is about the purpose. The other sentences are about how the purpose will be achieved. I suggest relocating the last three sentences of Para 1 to new section on how to achieve the objective.
P2, Objectives, Point 4	… including on local knowledge …	Remove 'including' and replace with 'based' Does not make sense as it presently stands
P4, Point 3	The UN Secretary General will appoint the Chair and Vice Chair of the Panel.	Will the Chair and Vice Chair be selected from the panel put forward by the Nomination Committee or otherwise. This needs to be made clear.
P4, Point 5	When resigning from the Panel, members are expected to give prior notice of at least one meeting in advance.	As there isn't a schedule of meetings this may not be practical. Meetings may be only 6 monthly. I suggest stating that the notice given is a months' notice enabling agility in replacement.
P5, Declaration of Interests, 2nd sentence	These potential conflicts of interest must be disclosed by members before the start of their terms of office.	The sentence as it stands assumes that no other conflicts of interest will arise during the term of the member. An additional clause needs to be included stating that new conflicts will be disclosed as soon as they arise or the member is aware of the conflict (potential or otherwise).

International Pharmaceutical Federation (FIP)

[EXT] Independent Panel on Evidence for Action against Antimicrobial Resistance

Zuzana Kusynová [redacted]

Mon 6/15/2020 11:52 AM

To: amr-tjs [redacted]
Cc: V.Jakobi@wellcome.ac.uk [redacted]

Dear Tripart e Joint Secretariat on Anmicr obial Resistance,

Please find below the comments on behalf of the Internaonal Pharmaceuc al Federaon (FIP).

The draft terms of reference of the Independent Panel on Evidence for Acon Ag ainst Anmicr obial Resistance are logical, broad and comprehensive in their scope. Internaonal Pharmaceuc al Federaon (FIP) has lile t o add except to endorse these, mainly based on their breadth. However, because they are so broad, they don't really address the 5 elements (accelerate progress, innovaon, c ollaboraon, in vestment and most importantly accountability and global governance) in the Final IACG recommendaons r eport "No me t o Wait report". We would support acon based on these 5 elemen ts, as a ma er of urgency.

Whilst FIP understand this group will review new evidence and make recommendaons t o the yet to be formed Global Leaders Group on AMR, it is important to highlight that there is a wealth of evidence already with lile pr ogress being made. There is sll a lack of data on anmicr obial consumpon or AMR in all sect ors being submi ed to WHO or the other agencies to truly inform the current or future posion outside of Eu rope mainly.

In terms of representaon, it ma y be challenging to get 10-15 experts in early or middle career that meet the gender and ethnicity mix across the broad range of disciplines required. FIP would instead argue that experience would be useful here, and to queson whether such a small group will have the breadth and depth of experse and e xperience required. We would also queson whe ther an individual is the best way to access experse in some ar eas and propose that access to a network of experts and experienced colleagues may be required as well. We agree with pharmacy sing with pharmac ological sciences.

Best regards,

Zuzana

Zuzana Kusynová Mgr. PharmDr. | *Lead for Policy, Practice and Compliance*
International Pharmaceutical Federation (FIP)
Andries Bickerweg 5 | 2517 JP | The Hague | Netherlands

Website | Pharmacy Event Calendar | Publications

COVID-19 & pharmacy *FIP is commi ed to supporng you in the response t o the COVID-19 pandemic. Please visit the FIP Covid-19 Informaon Hub for free up-to-date resources, guidelines, webinars and more and join our Facebook group COVID-19 and pharmacy to engage with colleagues around the world. You can check for upcoming FIP COVID-19 Online Programme events here.*

SEVILLE 2021 FIP WORLD CONGRESS 12-16 September

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Regarding: **Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance**

Comments for consideration submitted by:

International Poultry Council
2300 West Park Place Blvd.,
Stone Mountain, Georgia, USA
30087
www.internationalpoultrycouncil.org

By:
Nicolò Cinotti
Secretary General
[redacted]
Email:
[redacted]

May 10, 2020

The International Poultry Council (IPC) offers the following specific points for consideration. Antimicrobial resistance is a serious public health and animal health concern. The IPC has taken measures to address antimicrobial resistance and the appropriate use of antimicrobials in poultry production. In 2017 IPC adopted the "International Poultry Council (IPC) Position Statement on Antimicrobial Use and Antimicrobial Stewardship Principles" and in 2019 adopted the "International Poultry Council Best Practice Guidance to reduce the need for antibiotics in poultry production". These actions seek to ensure proper stewardship of antimicrobial use and to reduce the need to use antimicrobials. Both sets of measures are supported by strong scientific evidence and professional experience.

IPC has supported and participated in the work of the tripartite organizations' (WHO, FAO, and OIE) One Health approach as each has unique and complementary programs underway. IPC also made submissions to the IACG during its mandate.

In respect of the new Independent Panel on Evidence for Action Against Antimicrobial Resistance, we strongly urge that it focuses on independent assessment of the science, identifying evidence gaps, and advising how to address these, but that actions to deliver on these it should be within the programs of the Tripartite bodies. The Panel should not seek to communicate to member countries alternative interventions or actions that are counter to the programs of the Tripartite bodies but should work through and build upon existing Tripartite organizations' successes.

IPC's specific points and comments are:

1. **Purpose:** The Purpose, as drafted, is a very broad remit which carries a danger of the Panel being unproductively preoccupied with the vast amount of accepted scientific data that is the foundation of existing programs against AMR of the Tripartite and in Industry. A narrower remit focusing on where there are gaps in addressing identified risks and what evidence is

needed to close those gaps would ensure the Panel is able to make progress and avoid replicating existing work of the Tripartite.

2. **Objectives of the Panel across the One Health spectrum:**
   We endorse the Objective that the Panel's assessments be undertaken in an independent, comprehensive, and objective manner **in accordance with a scientific evidence-based approach**. We strongly urge that evidence-based science should underpin all the work of the Panel.
   We suggest that focus be on building evidence-based data, especially within the lower income countries, to inform practical interventions delivered through the Tripartite programs. We further suggest that there needs to be more of a focus on achieving take-up and application of the existing interventions to mitigate known major existing risks, including the possible need for adaptations to fit local circumstances.

3. **Accountability:** No comment.

4. **Guiding Principles:** We suggest adding the guiding principle of following a ***Scientific evidence-based approach*** for the work of the Panel.

5. **Structure & Membership:** We are concerned that it will be exceedingly difficult to find experts of sufficient calibre, who are independent of the existing Tripartite AMR programs and politically neutral, to conduct all the work outlined under the Objectives, even with the help of ad hoc Working Groups. There is a strong need to ensure engagement from the least-resourced low-income countries to help avoid a high and middle-income country perspective bias in the Panel's work.

6. **Declaration of interests:** Honest declaration and appropriate and transparent account will be essential to ensure stakeholder trust is maintained and the Panel's work is taken up.

7. **Communication with governments and other stakeholders:** The Communications Strategy is vital to ensure understanding and the widest buy-in by those identified as "priority stakeholders."

IPC appreciates the opportunity to provide comments on the draft Terms of Reference and trusts that their consideration will be reflected in the final document. IPC remains committed to the One Health approach and to continuing our engagement with all stakeholders to address antimicrobial resistance.

[EXT] Public discussion - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Wolf, Bethany [redacted]

Mon 6/15/2020 3:58 PM

To: amr-tjs [redacted]
Cc: Baker, Bob [redacted]

-Sent on behalf of Bob Baker-

To the members of the Tripartite Joint Secretariat,

Thank you very much for the opportunity to review the "*Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion*." The document is concise and includes a sensible way forward for the independent panel. It would be beneficial to clearly define the scope of AMR and to clarify all terminology/definitions used. For example, is the scope comprehensive of all elements of antimicrobial resistance, including antibiotic resistance, disinfectants, pesticides, etc.? It would also be helpful to clearly indicate future ownership of this body of work to ensure sustainability going forward.

I hope this feedback is helpful to you. I am very happy to discuss the feedback with you further if you would like.

Warm regards,
Bob Baker
Corporate Food Safety Science and Capabilities Director
Mars, Incorporated

Bethany Wolf
Global R&D Strategy Project Manager
Corporate R&D

mars.com

National Office of Animal Health Ltd (NOAH)

3 Crossfield Chambers, Gladbeck Way, Enfield, EN2 7HF, United Kingdom
[redacted]
Website: www.noah.co.uk www.noahcompendium.co.uk

Registered in England No: 2145809

Representing the UK Animal Health Industry

12/06/20

NOAH comments on Terms of Reference for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

The National Office of Animal Health (NOAH) ltd is the trade association for the UK animal health industry, representing more than 95% of the UK market. We welcome and appreciate the opportunity to comment on this document.

Feedback re the section titled "Purpose" and "Objectives of the Panel"

The Terms of Reference state the idea is to *"Generate….assessments of the science …. across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment*."

The NOAH view is as follows:

- The Independent Panel should focus future activities and initiatives where they are expected to have the greatest impact.
- From our perspective, the place where great gains could be made is in human health settings such as hospitals, care homes etc, where development and transfer of resistance can and does occur as has been referred to in many scientific reports globally.
- The need to address transfer in healthcare has been noted by numerous regulatory and government bodies. Here in the UK, the UK Department of Health 5-year strategy on Antimicrobial Resistance (2013) stated that *".... the clinical issues with antimicrobial resistance that we face in human medicine are primarily the result of antibiotic use in people, rather than the use of antibiotics in animals."*
- While the European Centre for Disease Control (ECDC) reports that *"75% of the burden of bacteria resistant to antibiotics …is due to healthcare-associated settings".*
- It should also be noted that regulatory authority risk assessments on veterinary medicinal products, that are carried out prior to being licensed for use, for all veterinary medicines (including antibiotics) are there to ensure that use of medicines in animals does not have a negative impact on human health via the food chain.

Feedback re "Guiding Principles"

In our view the following principles should be considered when developing and selecting the panel:

- Scientific expertise to ensure outputs from the panel stand up to scrutiny
- Independence and neutrality
- A peer review process
- Efforts should be made to avoid duplication of other activity elsewhere

- We would recommend that the group tries to focus on a small number of issues and questions and attempts to make progress there. Attempts to cover too many topics could lead to work being ineffective across the board. The small number of focus areas should be identified and agreed very early in the process.
- The work already underway by many organisations in this area (e.g. FAO, OIE, WHO etc) should be identified and noted so as to avoid duplication and so that the work done complements rather than duplicates this work.

Feedback on "Structure and membership"

The NOAH feedback is as follows:

- A group of between 10 and 15 experts is a size that could function well
- However, a group of that size might still struggle to achieve and cover the range of matters as described in the Terms of Reference and there is likely to be a need to seek expert input from additional experts outside of the core panel
- This needs to be considered at the outset and a mechanism developed to allow for this
- For example, there may be a need to engage with experts employed by human and animal health companies as experts involved in the development of antibiotics and who have experience with how these products are used under field conditions could provide valuable input.

Feedback on "Key performance indicators"

The NOAH feedback is as follows:

- Key performance Indicators as a valuable tool to ensure the panel remains focussed on its key objectives.
- The panel should provide regular updates on an ongoing basis as to how well it has achieved its objectives.

ENDS

Aaron Oladipo Aboderin, Professor of Medical Microbiology & Parasitology, Obafemi Awolowo University, Nigeria

[EXT] Re: Final Draft Terms of Reference - Independent Panel on Evidence for Action Against Antimicrobial Resistance

Oladipo Aboderin [redacted]

Sat 6/13/2020 11:34 AM

To: amr-tjs [redacted]

Feedback:

1. I suppose it is essential that UN Environment Programme be actively engaged in the activities of the proposed Panel. As such, should also have representation in the Nomination Committee (page 4 of Draft Terms of Reference, **Nomination and Selection**) that will recommend experts to the UN Secretary General.

2. My understanding is that experts in mass media/communication are already considered in **Structure & Membership**, page 3.

Kind regards

Aaron Oladipo Aboderin
Professor
Medical Microbiology & Parasitology
College of Health Sciences
Obafemi Awolowo University/Teaching Hospital,
Ile-Ife, Nigeria.

Dr Afreenish Amir
Medical Microbiologist
National Institute of Health
Islamabad Pakistan *31.5.2020*

Review : Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

1. The suggestion about 10-15 core members needs to be carefully considered. As one health approach is the theme, multi disciplinary team should be developed with representatives from every sector with relevant experience.
2. Time frame for the activities e.g., evaluation reports should be part of document. This can be considered as deliverables.
3. The point of Panel communication with stakeholders about improvement is imperative and rightly mentioned. I just need to add in here. The suggestions need to be evaluated at fixed term to see the improvement at country level and that will also help to identify the pace of change for the improvement. At times tasks are not achieved in defined timelines, and this could help to identify the reasons for delay in achieving the task. This can be mainly seen with low and middle income countries, which face the AMR situation more gravely and contribute substantially to the global AMR picture. The success of the evaluation program depends largely on focusing on the areas which are reluctant to improve.

Anand AnandKumar, Co-founder/CEO, Bugworks Research Inc, India

Re: [EXT] Re: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

Anand AnandKumar [redacted]

Sat 6/13/2020 9:10 AM

To: amr-tjs [redacted]

Dear Leena thanks for your message.

I went through the draft terms of reference of the Independent panel on evidence for action against AMR. Looks great, and I have only some minor feedback

Will follow the following format for feedback

- include the full name, title and affiliation of the respondent (e.g. representing a Member State, organization or individual) in the e-mail.
- Feedback should be submitted either directly in the body of the e-mail or as an e-mail attachment (Word document or PDF). Track changes or comments in the original document will not be considered.
- Feedback should be precise, feasible and action-orientated.

Anand Anandkumar PhD, Co-founder and CEO, Bugworks Research Inc (representing the SME's who are toiling to find solutions in the AMR space)

Feedback

1. Any AMR plan that does not have some focus on the Economics of AMR (or lack thereof) would be doing a disservice to the field. I would strongly recommend that one of the Working Groups needs to be around making sustainable AMR innovation a reality. Lack of pull incentives have broken this space to where lile to no new innovation happens. This innovation also happens only from SME's as big pharma have fled the field. So please add sustainable innovation ecosystem for AMR to the document.
2. Cost and time for clinical trials is extremely high in AMR – we have to look at doing trials in parts of the world (LMIC mainly) where the unmet need is very high and cost of conducting trials is reasonable. If trials can be done with the same high standards of the west, and data from LMIC can be used as 'Real World Evidence' to support dossiers in FDA/EMIA etc, that will make the space far more affordable and will accelerate solutions in AMR. This may also need a working group

Thanks

Anand

Besong Samuel, AMR Focal Person, WHO, Cameroon

AMR CONTRIBUTIONS

WHO COUNTRY OFFICE CAMEROON

Independent Panel on Evidence for Action Against Antimicrobial Resistance

Final Draft Terms of Reference for Public Discussion

1- In the Background: replace the terminology "**drugs**" by "**medicines and other antimicrobial agents**"; N.B This Panel should reflect the technical challenge of antimicrobial resistance that requires involvement of multiple disciplines with a holistic systems approach to examine interactions and the interface across the One Health spectrum.

2- On section 5. Structure and Membership: In addition to the Panel being established at global level, it could be useful to have **similar Panels at regional levels for ground work and feed the global level.**

Thanks
Dr BESONG SAMUEL
NPO/EDM
Focal Person AMR
WHO/CAMEROON

Devi Sridhar, Professor of Global Health, University of Edinburgh, United Kingdom

[EXT] Fwd: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

SRIDHAR Devi [redacted]

Fri 6/12/2020 6:55 PM

To: amr-tjs [redacted]

It is great to see that the TOR has accounted for key aspects such as diversity of gender and geographical locaon.` A few thoughts on some areas of the TOR:

On the structure and membership(Item #5): The TOR highlights that the Panel composion` will include members from geographic variaons` and encourage contribuon` of early- mid stage professionals:

- Considerations need to be made on inclusion of Early Career Researchers and other professionals from LMICs which bear/ are expected to bear most of the AMR burden. And, accommodations should be made for non-English speaking LMICs who are even further excluded in publishing and/or conferences.
- Transparency in the structuring and membership processes

On communicaons with g overnment and other stakeholders (Item #7):

- There might be value in capturing how the Panel's communication strategies will take into account **advocacy** for
    - Promoting political commitment and local ownership (of research, mitigation and containment actions highlighted in the Panel reports)
    - Resource mobilization to build national/ regional capacity for sustainable interventions in LMICs and considerations for AMR stewardship, monitoring and surveillance, data quality and sharing.
    - Inclusion of AMR evidence and data from non-human health sectors (particularly plant health/food safety/environment) in LMICs which remain far behind

On Key performance indicators (Item #8):

- There might be value in defining the specific KPIs once the Panel is formed -which I see is already highlighted in the TOR- but there should be an overall objective and how it will contribute to the broader Global Action Plan e.g. closing the gap between NAP development and implementation.

Estelle Mbadiwe, Pharmacist/Founding Partner, Duct Blue Solutions, Nigeria

Independent anel n vidence or ction gainst Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

Full Name: Esteller Mbadiwe

Title: Pharmacist, Founding Partner

Affiliation: Individual

This public discussion addresses the second part of the recommendation on the Independent Panel on Evidence for Action against Antimicrobial Resistance.

My recommendations are found below based on these highlighted sections from the document.

1. Purpose

Generate and communicate independent, robust and authoritative assessments of the science related to antimicrobial resistance across the One Health spectrum at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment.

2. ***Objectives of the Panel across the One Health spectrum***

- *Provide evidence-based practical options for mitigation and containment actions and interventions, including on local knowledge, and considering existing normative and standard setting functions, to address challenges in all settings, particularly in low-and middle-income countries****;***

4. Guiding Principles

- ***Non-duplication and complementarity:*** *The evidence assessment and reporting of the Panel should complement and not duplicate, the ongoing normative and standard setting activities of the Tripartite and other international organizations.*

- ***Comprehensiveness and inclusivity:***

5. Structure & Membership

- ***Working Groups:*** *The Panel can establish Working Groups with time bound and clearly defined tasks and objectives. The Working Groups will consist of Panel and non-Panel members for specific areas. The Panel has the responsibility to define its priorities and to establish the Working Groups with clear terms of reference and accountability mechanisms*.

Recommendations:

The document captures the appropriate subsections for developing robust outcomes.

My recommendations are based around suggestions to support the work of the panel. There is a grave need to build a database of One-health experts, as well as research capacity across regions, to support the work of the panel. This will address the local knowledge, normative and standard setting functions, whilst addressing the data gap especially in LMICs. The COVID-19 pandemic has further highlighted the need for capacity building locally to inform local, regional and global decision-making. There are a lot of work in Silos and supporting a data base of expertise will significantly support the work of the panel and guide policy development and local buy-in.

We have already started some work in this regard and happy to collaborate on building this further to support the panel if the need arises.

Esther Dsani, Veterinary Services Department, Ghana

[EXT] Feed back on Draft Terms of Reference

Esther Dsani [redacted]

Thu 6/11/2020 2:48 PM

To: amr-tjs [redacted]

My Comments:
The entire document is well written, concise and straight to the point. It captures the scope and purpose of the panel, and eligibility criteria for panel members quite well. It is not clear though what criteria will be used to assign some members a 3 year term and others a 2 year term.

Esther Naa Dei Dsani (DVM, MPhil)
Regional Veterinary Laboratory
Veterinary Services Department
Ho, Ghana

Fengqin Li, National Center for Food Safety Risk Assessment, China

[EXT] Re:Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

李凤琴 [redacted]

Thu 6/11/2020 3:06 AM

To: Veronika Jakobi [redacted]; amr-tjs [redacted]

Dear Sir/Madam

Thanks very much for your email and infirmation. I read the document with interest and my comment for item 5 are given below marked in yellow background.

5. Structure & Membership

Nomination and Selection: Experts will be identified and appointed by the UN Secretary General upon recommendation of a Nomination Committee that will be convened by the Tripartite organizations. Nomination of members will take into consideration gender balance, geographic diversity, developed and developing country as well as representation from across the One Health spectrum.

Thanks again for giving me the chance to reviewing the document

Best wishes

Fengqin

--
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Fred Tenover, Vice President, Scientific Affairs, Cepheid

[EXT] RE: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

Tenover, Fred C [redacted]

Fri 6/12/2020 11:41 PM

To: amr-tjs [redacted]

From:

Fred C. Tenover, Ph.D. D(ABMM), F(IDSA), F(AAM)
Vice President, Scientific Affairs, Cepheid
Consulting Professor of Pathology, Stanford University School of Medicine
Adjunct Professor of Epidemiology, Rollins School of Public Health, Emory University
Consulting Professor of Biology, University of Dayton
Former Director of the Office of Antimicrobial Resistance, US Centers for Disease Control and Prevention

Thank you for the opportunity to respond as a private citizen and not specifically as a representative of any of the institutions listed above.

RE: Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion

I would like to emphasize three points made in the document:

1. The Panel will rigorously evaluate and synthesize existing and new data…
2. It will provide options for evidence generation, and mitigation and containment strategies and interventions.
3. (It will) provide evidence-based practical options for mitigation and containment actions and interventions…

The functions of evaluating and synthesizing data are only of value in the context of points 2 and 3, i.e., providing mitigation and containment strategies and options for mitigation and containment actions. For decades, public health agencies have been tracking the spread of antimicrobial resistance globally. Tracking but not doing much about it. More recently, public health agencies, with the availability of increased funding, have improved surveillance, encouraged antimicrobial stewardship programs, and have raised awareness of the issue globally. Unfortunately, what we still lack are the actions described in 2 and 3 above. We still need to address the questions of: 1.) at what point will specific actions be taken (at what threshold)? 2.) What exactly will change? 3.) Who has the responsibility for ensuring the action happens? 4.) Who assesses the impact and efficacy of the intervention?

An example of setting an action threshold that linked surveillance data to a concrete intervention is when CDC declared that when fluoroquinolone resistance in *Neisseria gonorrhoeae* reached 7% nationally (based on its gonococcal isolate surveillance program), the STI treatment guidelines would be changed to move away from fluoroquinolones as first line treatments, now favoring the use of azithromycin and cephalosporins. For better or worse (because it was a prospective program), it was a concrete action linked specifically to a surveillance datapoint and it was indeed implemented. That is what I believe we need this panel to do as part of their mission. Set the thresholds for action, monitor the data, implement the action when the thresholds are exceeded, and assess the impacts of the actions. Setting thresholds for action (i.e., a concrete number or percent) is very difficult. When discussed, which is not often enough, few agree on what they should be. That is the point; we have few if any global thresholds for action. What happens is that we track the spread of resistance with

improved surveillance and bemoan the fact that the resistance curves continue to rise. If we are to flatten the antimicrobial resistance curve, we need thresholds for action that impact antimicrobial use, whether in humans, animals or agriculture. We need definitive actions that will move the needle. Surveillance does not move the needle unless tied to action.

I hope that this concept of establishing thresholds for action with accountability for enforcement will be more clearly defined in the Panel's mission. One or two clear thresholds is fine as a beginning. The three organizations have not done this. The panel needs to do this.

Thank you.

Fred C. Tenover, Ph.D. D(ABMM)
Vice President, Scientific Affairs
Cepheid
904 E. Caribbean Drive
Sunnyvale, CA 94089
USA

Jesus Campos, Center for Genetic Engineering & Biotechnology (CIGB), Cuba

About the Final Draft Terms of Reference for Public Discussion.

Havana, June 14, 2020

Dear colleague,

Thanks for sent me this document.

I think this is very complete and good document, but I am proposing you to include or analyze the following items:

1) To stimulate the scientific research in universities, research centers and institutions, regarding "Antimicrobial Resistance". It could be by the way of some financial support for new research projects aimed to mitigate AMR and to obtain new molecules, peptides and other ways for the control of pathogenic microorganisms on plants, animals and humans, taken in to account the holistic principle.
2) To increase the standards for the sanitary and commercial registration of any new antimicrobial product for humans (WHO), animals (OIE), plants (IPPC) or any food (CODEX) containing antimicrobial components. Reevaluate all the registered products and the new ones, taking in to account the risks of AMR as a very important regulatory standard to keep commercial and sanitary register.

I look forward to discussing any aspect with you in greater detail. Should you require any further information please get in touch with me.

Regards,

Jesús Mena Campos

John Rex, Chief Medical Officer, F2G Ltd, United Kingdom

[EXT] RE: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance

John Rex [redacted]

Fri 5/15/2020 7:51 PM

To: amr-tjs [redacted]
Cc: BEYER, Peter [redacted]

Dear Tripartite Joint Secretariat:

I'm pleased to learn of your progress towards establishing an Independent Panel!

My one critique of the draft TOR is that you should seek to include at least one panelist with experience in Veterinary drug (antimicrobial) development and one with experience in human drug (antimicrobial) development.

I recognize that there would be conflict of interest issues to be managed, but this can certainly be done … as an example, as I was a voting member of the US Presidenal Council on Combaàtting Antimicrobial Resistance (US PACCARB) for 3 years and was one of two experts on that panel with experience in human drug development.

Best wishes with this important work!

John

John H. Rex, MD
Chief Medical Officer, F2G Ltd.
Operating Partner, Advent Life Sciences
Adjunct Professor of Medicine, McGovern Medical School, Houston, Texas

Joshua Obasanya, Formerly at Centre for Disease Control, Nigeria

[EXT] Re: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Joshua Obasanya [redacted]

Thu 6/11/2020 11:07 AM

To: Veronika Jakobi [redacted]; amr-tjs [redacted]

Dear Veronika,
I thank you for extending to me, the opportunity to parcipaàte in the ongoing public consultation on the draft TOR.
An excellent work was done on the draft which deserves commendations.
However, I wish to kindly bring your a ention to my suggestion as follows:

Under #4 Guiding Principles, I suggest the slight adjustment to the last bullet point as indicated below:

"• **Comprehensiveness and inclusivity:** The Panel will seek input and feedback on its work (including its priorities) from national, regional and global stakeholders across all relevant disciplines, sectors and local communities across geographic regions in a balanced and inclusive way to reflect diversity of socio-economic determinants, resource availability and challenges to the implementation of the options provided."

Best regards
Joshua

Junshi Chen, Co-convenor & Member of IACG, National Centre for Food Safety Risk Assessment, China

FW: Re:Re: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance

From: 陈君石 [redacted]
Sent: Saturday, May 16, 2020 4:08 AM
To: To disseminate all Anmircrobial` resistance news and announcement to all our pa [redacted]
Subject: Re:Re: Public discussion on the dra terms` of reference of the Independent Panel on Evidence for Against Anmicrobial` Resistance

I have one comment on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance. Obviously, this is an UN work and it is global. However, the work could provide guidance to member states. I suggest to add a few words on the "relevance to member states" in the Purpose part.

Junshi Chen
China National Centre for Food Safety Risk Assessment
Co-convenor and member of IACG

Kevin Outterson, Professor of Law at Boston University & Executive Director of CARB-X, United States

[EXT] My comments on the draft Terms of Reference

Outterson, Kevin [redacted]

Wed 5/20/2020 5:08 PM

To: amr-tjs [redacted]

Please find a risk/mitigation chart for the ToR for the Panel. Happy to discuss.

Keep safe -

Kevin

_____

Professor of Law & N. Neal Pike Scholar in Health and Disability Law - Boston University
Executive Director, CARB-X
Research papers at SSRN & Google Scholar

Comments on Draft ToR for Independent Panel for Evidence for Action Against AMR	
Risks	**Mitigations**
Groupthink/herd mentality; premature dismissal of innovative ideas, especially those that challenge orthodoxy	Red team / blue team in the Working Groups; transparency & publication (iterative & transparent peer review); scientific culture supporting criticism; process to protect against premature consensus
Politicization of science	Fierce independence of experts & process; limit role of funders/conveners
Interest group capture, including self-interested experts	Very strict conflict of interest rules; transparency; external process evaluation; membership diversity / rotation; salary support for Panel and WG Members from LMICs
Bland consensus	"Evidence for Action"; dynamic, responsible leadership

Poor buy-in; top-down	Credible people & process; sustained outreach to all stakeholders (budget for Secretariat to include outreach); ground evidence-based findings in local (social) contexts (or acknowledge these gaps)
	Prof. Kevin Outterson, Boston University & CARB-X

Laetitia Gahimbare, AMR Technical Officer, WHO AFRO

FW: [EXT] Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

GAHIMBARE, Laetitia [redacted]

Fri 6/12/2020 2:04 PM

To: amr-tjs [redacted]

Dear Sir/Madam

I trust this finds you well.
I went through the TORs and found them perfect for me.
Let me take this opportunity to thank and congratulate the team who worked hard on this.

Best regards
Laetitia Gahimbare
AMR Technical officer
WHO AFRO

Maxwell Suuk, Journalist, Ghana

[EXT] Response: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Maxwell Suuk [redacted]

Mon 6/15/2020 4:56 PM

To: amr-tjs [redacted]

Hello WHO team.

Thanks for sharing the draft terms.

I finally went through the report and I must acknowledge the team put a great effort into compiling the terms. The draft looks great and comprehensible and touches on several aspects.

What I will suggest in the fight against the resistance in my country is a more serious and targeted grassroot projects. What is currently done seems to me like too much talk than acons.

From the first policy that was dra. ed to the latest policy, none of them have been effecv ely implemented.

The problem with the issue is weakness in the enforcement, as well as a "perceived" corrupon among stakeholders. If pharmaceuc al companies decide to sell out drugs to over-the-counter agents against the rules, what do you expect?

A er carefully studying the work of the Ghanaian Pharmacy Council at the regional levels as a journalist and a public health advocate, I realized how the council is handicapped and have tacitly succumbed to pressure from their bosses at the top anyme the y try to enforce the laws. For instance, they will close shops that sell harmful drugs to the public and the next hour a big man calls to say that shop should be reopen because the owner has links to policians.

In the region I stay—Northern Ghana and the country at large; this business of retailing is le in the hands of school drop outs and even those that have not step foot in classroom and they take it as a job. The department that issues the license claims it is allowing that because it wants to promote jobs. Jobs to the detriment of people health because those that sells them do not sck t o the rules because they want to make profit.

Again, government is talking about seeking proper health care to solve the problem whilst in most communies there are no health centers; and other instances where there are health centers, health experts are absent—can we begin to challenge the government to make health infrastructure a priority? Otherwise, we will come back to talk about the same thing in 2025.

Same to access to animal drugs. Veterinary services are almost ignored by the locals. In most markets I have visited and I have footage to back this; people retail drugs for animals like pepper and salt are sold in the market tables. We need to be more serious with the regulaons.

My recommendaon: We need to begin to indict countries that only put their acons on paper than implemenng them. Once an in vesg aon is c ommenced into why the problems sll per sist, and findings published (we name and shame those leaders and departments) things will begin to get be□er with the fight.

In my organizaon , we have designed an approach after realizing that awareness of the issue is almost absent at the community level. If people don't understand the implicaons of their beha vior, it is difficult to accept change. So, we work with video experts, illustrators and journalists to champion this singular objecv e. We try to use community faces that have direct stories of resistances, for example, a household that suffered a previous drug resistance problem as a case to illustrate in a short film which we in intend to project to the community during a forum or at night gathering. And then the community begins to understand the sense of what problem they are dealing. That solves the problem be□er.

We also have a booklet illustrang the c omplicated social behavior of sharing medicine in a community which fuels the problem and how this resistance comes about.

In the concept, we plan to have public educaon such as r adio discussions and community durbars as a way of deepening the awareness.

Funding has been our stumbling block. As a startup, we approached several organisaons and no one is willing t o support us financially. But we are sll doing out bit t o that effect whilst waing t o seek support from anywhere that can help us reach out to the people with our concept. Drug resistance is becoming a naonal security thr eat in Ghana but the ciz ens are pretending.

Thank you and hopes to read you again especially on ways we can work together in the future.

Niti Jadeja, Postdoctoral Researcher, Ashoka Trust for Research in Ecology and the Environment, India

[EXT] feedback

Niti Jadeja [redacted]
Sun 6/14/2020 6:59 AM
To: amr-tjs [redacted]

Dear IACG,

Thank you for sharing the draft terms for the Independent Panel on Evidence for Action against Antimicrobial Resistance. The set objectives are so critical in current and future times, and I look forward to contributing towards the same, in the near future.

My feedback:

For the **5. Structure and Membership** part, the **working groups** could further have ***Country-wise chapters***. Owing to the facts that AMR is a severe concern in the developing world, and uneven population density exists, probably forming country-wise chapters/teams could accelerate the set tasks of the Panel.

Best Wishes,
Dr. Niti B Jadeja
Postdoctoral Researcher
Ashoka Trust for Research in Ecology and the Environment
Bangalore,
India

Olivier Espeisse, Public Affairs Director, Ceva Animal Health, France

[EXT] Comments

Olivier ESPEISSE [redacted]

Mon 5/18/2020 12:30 PM

To: amr-tjs [redacted]

Hello,

Please find here my feedback on the TOR for the Independent Panel on Evidence for Action against Antimicrobial Resistance.

First, thank you for this opportunity to comment on this very important step.

I can only commend the proposal and look forward to the deliverables, which I understand to be a scientific assessment followed by recommendations.

The task is huge, all the more because the scope of the work is comprehensive, and that the Panel is not supposed to duplicate work. I have concerns about duplication because it is hard to think which unique facts, relationships and insights the Panel will bring forward that have not already been written or said before. After all, the first significant WHO on AMR workshops already started more than 20 years agore from the last century. Most international organizations (FAO, Codex, OIE, etc.) and many national governments have devoted significant scientific resources to the issue for decades.

I think that it is not WHAT the panel will propose, but rather it is its unique position that will give the Panel a position of authority that may eventually influence stakeholders. Perhaps that consideration should influence proposed TORs.

I note with satisfaction the numerous scientific fields that will be represented in the panel. It is indeed very important not to leave the field of AMR to bacteriologists, with all due respect for the critical work they do. I note that the panel will be relatively small – ten to fifteen – which more or less matches the scientific categories to be represented. Yet this presents serious concerns, since each specialist will probably be alone for his/her scientific specialty matter. Such a setup would not offer the conditions for a healthy debate - rather the opposite – as scientists tend not to question specialists they recognize to be subject leaders. In addition, what is the panel to do if they find out that they need expertise from outside, as will likely be the case?

With all due respect to the holistic approach taken, the subject matters are numerous. To name a few: incentives to pharma companies to do research in the field, AMR in indigenous people and wildlife, agricultural practices, physician-patient relationship, socio-economic factors, hand hygiene, etc. ….I would propose that significant focus should be given to the core items of AMR (without spoiling the work of the panel, some hotspots should be defined and focused on). Is there a way for the TORs to reflect on that?

Thanks again for the opportunity to comment

O. Espeisse

Olivier Espeisse
Public Affairs Director
Ceva Animal Health / Ceva Santé Animale

Ralalicia Limato , Doctoral Student, University of Oxford, United Kingdom

[EXT] Feedback Public discussion - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Ralalicia Limato [redacted]

Tue 6/9/2020 3:15 AM

To: amr-tjs [redacted]

Dear WHO team for AMR,

My name is Ralalicia Limato MD MPH, individual representation as a health system researcher and social scientist. I am currently doing my DPhil with topic: antibiotic use and dynamics of prescribing practice in Indonesian hospitals: implications for antimicrobial stewardship (a mixed-method study). This is the reason why I am interested in providing feedback for this draft.

My feedback for the draft:

- In the process of panel member recruitment, it is advisable to also include government officials with a note to have neutral political positions as a panel member. In some countries, at the policy making level, it is would much easier to do advocacy when government officials are included in these type of pla. orm.
- To add on some thoughts on this point: *Provide evidence-based pracc al opons f or migaon and containment acons and in tervenons, including on loc al knowledge, and considering exisng normave and standard seng funcons, t o address challenges in all sengs, parcularly in lo w-and middle-income countries*; I want to add the consideraon of socio-cultur al and norms of parcular c ountries. Parcularly in health system and governance, I have seen numbers of the 'isomorphic mimicry' whereas LMICs copy the concept and intervenons of HICs but do not pr oduce desirable outcomes as the HICs' because local contexts and (naon/ community) identy ar e not considered.

All the best for the IACG and all the experts in the panel,

Licia

Ralalicia Limato MD MPH

DPhil Candidate in Clinical Medicine
Nuffield Department of Medicine, University of Oxford
Oxford OX3 7BN, UK

EXPLAIN Study Coordinator
Eijkman-Oxford Clinical Research Unit
Jl. P. Diponegoro No. 69, Jakarta Pusat 10430, Indonesia

Roman Kozlov, Corresponding Member, Russian Academy of Science & Chief Specialist, Ministry of Health on Clinical Microbiology and AMR & Head, WHO Collaborating Centre for Capacity Building on AMR Surveillance and Research, Russia

[EXT] Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Roman Kozlov [redacted]

Thu 5/28/2020 6:51 AM

To: amr-tjs [redacted]

Dear Sir/Madam,

Thank you very much for the opportunity to discuss proposed ToR of the IP on Evidence for Action against AMR. In general, it is very well written. The only comment I have is related to number of members within the panel and representation. I am absolutely sure that total number of panelist must be increased up to minimum 20 persons with more geographic representation.

With the best regards,

Роман Сергеевич Козлов

Член-корреспондент Российской академии наук (РАН), профессор, доктор медицинских наук

Ректор ФГБОУ ВО «Смоленский государственный медицинский университет» Министерства здравоохранения Российской Федерации

Главный внештатный специалист Минздрава России по клинической микробиологии и антимикробной резистентности

Руководитель Сотрудничающего центра ВОЗ по укреплению потенциала в сфере надзора и исследований антимикробной резистентности

Professor Roman S. Kozlov, MD, MSc, DSc

Corresponding Member of the Russian Academy of Sciences (RAS)

Rector, Smolensk State Medical University (SSMU)

Chief Specialist of Ministry of Health of Russian Federation on Clinical Microbiology & Antimicrobial Resistance

Head, WHO Collaborating Centre for Capacity Building on Antimicrobial Resistance Surveillance and Research

[redacted]

[redacted]

Roxana Gonzalez, Infection Control & Epidemiology Manager, The American British Cowdray Medical Center, United States

[EXT] Re: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

Roxana Trejo [redacted]

Mon 6/15/2020 2:53 AM

To: amr-tjs [redacted]

Roxana Trejo Gonzalez

Infection Control and Epidemiology Manager in The American British Cowdray, Medical Center.

Vice President of the Association of Infection Control un LatinAmerica (ASLACI).

Annex two important points within the activities and responsibilities of the group.

1. Purpose.....Having reliable information regarding antimicrobial resistance with the finality of having a situational diagnosis.

2 Objectives of the Panel across the One Health spectrum..... Promoting innovative programs give us the information of each country in relation to antimicrobial resistance in order to structure indicators that allow us to evaluate the implementation of the intervention in the decrease of antimicrobial resistance.

Thanks for the invitation

Quedo atenta.

Saludos cordiales

Dra. Roxana Trejo González
Gerente Corporativo de la Unidad de Vigilancia
Epidemiológica Hospitalaria.
The American British Cowdray Medical Center, I.A.P.

Sharper Mirza, Lahore University of Management Science, Pakistan

[EXT] Fw: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Shaper Mirza [redacted]

Wed 6/17/2020 12:53 PM

To: amr-tjs [redacted]

Need to develop strategies of oversight in low to middle income countries, as the quality of data is poor and data collection instruments in appropriate and inefficient.

Parcipaàting reference centres. Need to include both public and private sector hospitals so a wider picture of antimicrobial resistance could be achieved from low to middle income countries. Data acquisition from some of the elite hospitals will not be a representative data.

Set up system by which surveillance data is made accessible to general public in the country.

Awareness and education campaigns should not be limited to hospitals and academic institutions.

Funds should be invested in public awareness campaigns, where communities should be educated about the consequences of in-appropriate usage (not completing their antimicrobial treatment and using antimicrobials where they are not necessary)

Equip public sector hospitals so that they can digitalise their reporting system, thus providing be er quality data for antimicrobial resistance.

Also take into account the fact that bacteria don't need to come in contact with antimicrobial to develop antimicrobial resistance. Bacteria are constantly altering their genome and by default they can make a change that will render them antimicrobial resistance. Need to address this issue in particular in low to middle income countries, where general sanitation conditions, provides an excellent environment to microorganisms to alter their genome.

There are qualified individuals in the country who can be incentivised to motivate government to mobilise funds into controlling antimicrobial resistance.

Need to develop clear strategies to monitor implementaon of Naàtional Action Plan in countries like Pakistan

Best

shaper

Trudi Hilton, Independent Global Pharmacy Consultant, United Kingdom

[EXT] Feedback on ToR for Independent Panel on Evidence for Action Against Antimicrobial Resistance

T Hilton [redacted]

Mon 6/15/2020 11:04 AM

To: amr-tjs [redacted]

Good morning
I have recently come across this excellent initiative and would like to contribute to the Public Discussion for the Tripartite Joint Secretariat.

My contribution comes from my expertise as an independent Global Health Pharmacist [redacted] having worked in low- middle- and high income countries improving access to quality medicines in public health systems.

I have no conflicts of interest to declare, being independent of any commercial and political bodies.

The draft ToR is comprehensive but neither the 'Disciplines', nor the 'sectors' appears to include pharmaceutical expertise - the process of ensuring quality medicines are available 'from production to patient'.

RECOMMENDATION: Pharmacist membership is essential under Disciplines. Antimicrobial medicines, whether for animals or humans, must be manufactured, distributed, handled and dispensed correctly, which is the expertise of pharmacy teams.

Learning directly from Covid19 we know
a) all active pharmaceutical ingredients (API) are manufactured only in China and less so in India - the world's total dependence on these two countries for essential medicines, including antibiotics, is highly undesirable. As we have seen, the closure of those manufacturing facilities leads to global shortages.

b) Where there are shortages, counterfeits or at best 'substandard' medicines flood the market; 'entrepreneurs' recognise the potential market for significant volumes of medicines, made cheaply without the necessary knowledge, expertise and governance to assure quality. Substandard antimicrobials are a major cause of resistance as there is insufficient active ingredient to deliver the dose required. Many expert centres are providing the evidence for this and it is an increasing problem as the penalties for counterfeiters are significantly less severe than for narcotic dealers, despite the potential gains being massive.

c) Broken or disrupted antimicrobial medicine supply chains lead to increased antimicrobial resistance through incomplete courses of treatment. The process of procurement of medicines is complex and requires pharmaceutical expertise to augment logistical and fiduciary approaches.

FIP https://www.fip.org/about the International Pharmaceutical Federation, CEO Dr Catherine Duggan and CPA https://commonwealthpharmacy.org/ (Commonwealth Pharmacists Association), CEO Victoria Rutter, have demonstrated the extraordinary difference pharmacy teams can make in Antimicrobial stewardship.

Pharmacists, or global organisations such as those shown above, must be at the AMR Strategy table as the whole premise of the development of resistance relates to the taking of medicines!

There is often a perception that pharmacies and the Pharmaceutical Industry are part of the problem, but the professional of pharmacy brings expertise on the whole pharmaceutical supply chain, including educating and supporting patients, not just earning a living from the sale or manufacture of medicinal products.

I do hope you will consider this representation in your deliberations.
It would be a pleasure to elaborate, if required, from my own experience of working in the field with improving access to quality assured medicines.

Regards
Trudi

Trudi Hilton
Independent Global Pharmacy Consultant

Vanessa Carter, Founder, Healthcare Communications and Social Media South Africa, South Africa

Healthcare Communications and Social Media South Africa

hcsmSA

13 June 2020

Dear Sir/Madam,

Public Discussion on the Draft Terms of Reference (ToR) for the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Thank you for this opportunity to comment on the WHO Draft Terms of Reference (ToR) Document to establish an Independent Panel on Evidence for Action Against Antimicrobial Resistance. To begin, I believe we must deeply question what tackling antimicrobial resistance will look like from a one health context, because this complex crisis is not only confined to hospitals and farms, it is also ubiquitous in the community. Civil society has been mostly unchartered territory in tackling AMR, yet without their involvement, future efforts to manage it will be futile.

Because my background lies in patient advocacy, I can only offer my observations from those perspectives and not as a qualified medical expert.

General comments and suggestions:

1. Civil society should be considered as equal stakeholders in the one health challenge
Civil society often referred to as the "third sector", "social sector" or "volunteerland" need to be acknowledged as equal stakeholders in the challenge to reduce antimicrobial resistance (AMR) globally.

2. One health requires a balanced membership
From a one health perspective, civil society stakeholders should include a balanced membership from the economic, food, human, animal and environmental sectors as it will be represented by leadership of the WHO, FAO, OIE and other organisations on this advisory panel and associated groups. In other words, there should be civil actors represented from these different sectors.

3. Civil society don't all have degrees but they do have experience
In terms of having expertise in a certain discipline like the humanities or bioethics as outlined under structure and membership, I would advise to add in a sentence that reads; "Civil society actors with extensive experience working in antimicrobial resistance including representatives of various organisations like NPO's or NGO's, patient advocates and caregivers". I think the wording should also include whether a discipline must be in the form of a degree or whether experience is sufficient. In other words, a panel member might have worked in the human health sector as a volunteer for an AMR charity for twenty years, but not hold a degree and on the other hand a patient advisor might

have a lifetime of experience and no degree. On first impression, this section read that way to me, therefore I felt it was important to add this in a way which was more inclusive.

4. 10-15 decision makers for one of the most complex issues on earth
Given the breadth of one health, I am concerned that 10-15 members won't be enough to represent the diversity that this important panel is aiming for in terms of geographic representation, gender balance and other socio-economic determinants as well as expertise in animal, environmental, human, food and other sectors. I saw the term "core group" was used which made me automatically assume a future panel would be more extensive, but I wasn't sure. If there is an imbalance in the "core group", could new members be invited and appointed on an ongoing basis through a voting process?

5. Civil society is as multiplex as one health, let's make sure that diversity is acknowledged
It is important to recognise that civil society actors can start from grass-root movements to non-governmental organizations (NGOs), non-profits/charities (NPO's), faith-based groups, trade unions, charity-based groups, pro-business associations, caregivers and patient advocates like me, therefore such a one health advisory panel which includes us should consider this.

6. Civil society actors help to represent the voice of meaningful change
Civil society, especially in a digital age, provides a critical foundation for holding governments accountable, ensuring good governance, patient safety, consumer and other human rights, including economic, social and cultural therefore I agree that a communications strategy for including this sector is imperative.

7.What lessons have pandemics like COVID-19 taught us about the importance of civil society?
The draft ToR refer to the impact of an entire community's involvement in relation to antimicrobial resistance. The COVID-19 pandemic has highlighted the importance of civil society's participation in terms of advocacy, public awareness, co-operation and in some cases the provision of services to assist government's pandemic response, especially in Low-to-Middle-Income Countries (LMIC's) where resources are constrained. Lessons from their involvement during COVID-19 should be taken seriously when nominating such a dynamic panel and associated groups for AMR and one health.

8. Civil society is a rapidly evolving landscape
I believe the mandate of the "core" panel should be reviewed every 2-3 years initially as opposed to 5 years given the urgency of antimicrobial resistance and rapidly evolving landscape and understanding of civil society's role in antimicrobial resistance.

9. Civil society do not have the same access to funding as many of their advising peers do
Purely from a Patient and Public Involvement (PPI) perspective, compensation should be carefully considered. Patient advocates and the public are often not funded by anyone. Costs beyond travel and other incidentals relative to a country's per diem that are not recovered can include:

1. Caregiver costs (e.g. when a patient advisor is in a wheelchair and requires assistance)
2. Childcare costs (e.g. when a patient is not able to work, neither has family support)
3. Administration (e.g. high cost of printing documents or data)

In addition to the above, the following needs to be documented and presented to civil society members:

1. Flights should be paid for upfront as opposed to a civil society member paying then being refunded later as many cannot afford these high costs, especially from LMIC's like South Africa.
2. Per diem calculations should be provided and explained upfront.
3. Where civil society members are asked to provide extensive contributions to such a panel or working groups an honorarium or agreed fee should be paid if the project is funded (e.g. where an online course needs to be made and they contribute content or where they retrieve data at their own cost).

The Patients Included Code of Ethics Charter does offer some useful direction to base initial policies on for this panel and can be visited at www.patientsincluded.org, alternatively another useful PPI resource is at www.invo.org.uk/.

10. Please be mindful of our barriers

To be more inclusive of civil society, the panel and associated groups should be mindful of participation barriers such as disabilities. Using my own experience participating in such advisory panels as a visually impaired patient, audio would have been useful in terms of reading extensive reports and articles. As you know, antimicrobial resistance does have a direct relation to disabilities such as amputations/prosthetics as well as other medical conditions related to chemotherapy, rare diseases, TB or HIV which might impact their ability to participate equally such as when making long journeys from a country like South Africa. These barriers are often neglected from my experience. I recommend you mention this in your ToR so it is more inclusive to civil society panel members who do have a medical condition or disability and give the initial option for them to attend virtually when this is the case. I also recommend asking if any of these barriers exist during your nomination process. These barriers must be explored so that civil society membership is more accessible. Perhaps this can initially be discussed by the "core" panel then by a working group which is established later.

12. Conflicts of interests explained clearly

No discrepancies about declaring conflicts of interests except to provide a clear, lay explanation to potential civil society members as to what those may be during the nomination process.

13. If we do not talk the same language then how might we all agree?

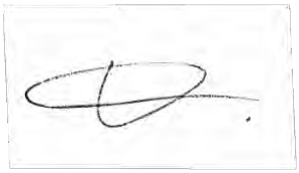
One of the most important areas of PPI is training and development and should be considered when

establishing various groups where this capacity building can be provided. This advisory panel should decide where that will take place and how, so that civil society's participation is more meaningful when working with high-level academics and other AMR experts.

14. What if I want to make a difference, but I don't really want my story exposed?
This should also be considered in future by this panel if they call on civil society. Some civil society participants may want to remain anonymous, especially in LMIC's where there can be stigma for various types of conditions associated to AMR (e.g. HIV/AIDS and now even potentially in future for COVID-19). If civil members are nominated it should be clear to them whether their privacy will be maintained or not as well as given the choice in either this panel or related groups.

15. WHO Governance in AMR and one health
The above is not exhaustive. I have briefly reviewed other documents which are related to this Independent AMR Advisory Panel such as the UNSG report and IACG Report as well as for the Global Leaders Group (The Group) and Strategic and Technical Advisory Group on Antimicrobial Resistance (STAG-AMR) and look forward to understanding further how each of these will inform and support the other as well as where and how civil society will be included in each of them.

Yours sincerely,



Vanessa Carter

e-Patient Scholar and Founder of Healthcare Communications and Social Media South Africa
Web: www.vanessacarter.co.za | www.healthcaresocialmedia.co.za

Founder: #hcsmSA - Health Care Social Media South Africa | ePatient Scholar: Stanford University Medicine X
ePatient Advisor: The South African Antibiotic Stewardship Program (SAASP)
Member: Society for Participatory Medicine | Co-chair: Public Health Association of South Africa (PHASA) Health IT SIG | Member: Interaction Design Foundation (IDF)
Social Media Ambassador: Health Information Management Systems Society (HIMSS17)
WOS – Woman of the Year 2015 | ePatient Advisory: eyeforpharma | ePatient Member: The International Walking Gallery of Healthcare | Patient Reviewer: British Medical Journal (BMJ) | Civil Society Champion at the Africa CDC, African Union | FINDdx Voices for Diagnosis Award Winner 2019

Vera Vlahovic-Palcevski, Professor, University Hospital Rijeka, Croatia

[EXT] Re: Public discussion on the draft terms of reference of the Independent Panel on Evidence for Against Antimicrobial Resistance - deadline by 15 June 2020

Vera Vlahovic-Palcevski [redacted]

Sun 6/14/2020 3:41 PM

To: amr-tjs [redacted]

Dear Secretariat,

Thank you for the invitation and the opportunity to comment on the draft ToR of the One health Global Leaders Group.

My personal and only comment is on the Structure and Membership point. Being a member of the Panel is a demanding position requiring a high level of expertise and may not be suitable for early-stage professionals.

Kind regards,

Vera Vlahović-Palčevski

Vera Vlahović-Palčevski, MD, PhD

Professor

Department of Clinical Pharmacology

University Hospital Rijeka

Krešimirova 42

51000 Rijeka

Croatia

[EXT] Public discussion - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance: reply from ECDC

Dominique Monnet [redacted]

Thu 5/28/2020 7:20 AM

To: amr-tjs [redacted]
Cc: Director [redacted]; Karl Ekdahl [redacted]

Dear colleagues from the Tripartite Joint Secretariat,

Below please find the feed-back from the **European Centre for Disease Prevention and Control (ECDC)** re. the public consultation on the terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance.

The reply is a corporate reply and should be attributed to ECDC. The corresponding e-mail address is Director@ecdc.europa.eu.

Yours sincerely,

D. Monnet

- -

Page 2, paragraph 2, "Objectives…":
- Work has already been done by WHO and other organisations, or is ongoing, in several of these areas. Please add a sentence mentioning that the Panel should first consider available reports and reviews, including ongoing work, before embarking on its own reports/reviews.

Page 3, next-to-last paragraph, "Disciplines":
- Very few potential candidates will have a degree in both, for example, human and veterinary medicine. We therefore suggest three small changes as below:
  "Disciplines: Biological or Pharmacological Sciences; Human or Veterinary Medicine; Agricultural Sciences; Environmental Sciences; Economic Sciences; Social or Political Sciences; Humanities; Bioethics; Behavioral science; and Epidemiology or Modelling

Page 4, paragraph 2, "Nomination and selection":
- "Experts": Are these experts the panel members? If yes, then please replace "experts" by "panel members". If not, then please explain who are these experts.
- The paragraph on working groups mentions "non-Panel members for specific areas". How will these be appointed? The process for nomination and selection of non-Panel members for specific areas should be mentioned here.

Page 4, paragraph 7, "Compensation":
We are concerned about the amount of work of Panel members, for which they will not get financial compensation. Unless Panel members have specific time reserved for working for the Panel and receive a financial compensation for this work, it is unlikely that the Panel will be able to fulfil its objectives.
If compensation cannot provided from WHO, then there should be a mention, somewhere else in the document, that applicants to become a Panel member will need to provide proof that they will be able to reserve a specific amount of time for their work on the Panel (e.g. as part of their current position) and/or that specific salary/compensation for this work will be provided by another organisation and name this organisation.

Dominique Monnet

Head of Disease Programme AMR and Healthcare-Associated Infections

One Health Related Diseases, DPR

European Centre for Disease Prevention and Control (ECDC)

Gustav III:s boulevard 40, 169 73 Solna, Sweden

To whom it may concern:

Submission by the Global Antibiotic Research and Development Partnership (GARDP)
to the
Public Consultation on the Independent Panel on Evidence for Action Against Antimicrobial Resistance Final Draft Terms of Reference for Public Discussion
12 June 2020

GARDP submits the following for the consideration of the Panel.
General comments:

1. In order to make a comprehensive assessment of the independence of the panel, and its suitability to complete its task, there is a need to understand its relationship to the proposed Global Leadership Group and Partnership platform, their cross-functional ways of working with each other and with other actors.
2. For ease of reference this relationship should be presented as an organigram that elaborates the interlinkages and roles of each of the structures and shows the reporting and management relationships.
3. In addition, clarity is needed on the relationship between the three structures within and to the UN system, given the role of the UN Secretary General in appointing the Chair and Vice-Chairs of the Panel, and the participation of the Tripartite in the Global Leadership Group. The impact of existing multilateral agreements with impact on AMR, and the consultations with existing Secretariats that manage these agreements should be further elaborated.

With regard to the itemized terms of reference, GARDP provides the following feedback:

1. **Purpose:** Clarity is required on the regularity of periodic reviews, and proposed procedures for handling reviews that are incomplete when a member's term of service expires.

2. **Objectives of the Panel across the One Health spectrum:** elaboration is required of the criteria that will be used to determine and ensure objectivity, comprehensiveness, the elements of the proposed holistic systems approach, and the modes of working to ensure their execution. In addition, detailed elaboration is required of procedures and modes of working to be adopted should the aforementioned criteria not be met.

   Given that implementation of the recommendations of the Independent Panel will need to be executed by governments, detail is required about the proposed modes of interaction with governments, including procedures to receive their input for the consideration of the panel.

   It is unclear how the Panel proposes to address eventual disagreements and/or conflicting viewpoints on evidence presented to and by Panel members or by external actors. This is especially important where such evidence may have an impact on prioritization of the action to be taken. Therefore, it will be crucial that the Panel has procedures in place that provide confidence that its synthesis and interrogation of evidence is robust and provides an authoritative way forward.

3. **Accountability:** The Terms of Reference would benefit from greater detail in the procedures for remedy should there be concerns about lack of accountability of, or real or perceived undue influence upon individual members of the Panel or the Panel as a whole.

4. **Guiding Principles:** The diversity of interests implicated in AMR necessarily mean that political considerations will intrude on the work of the Panel. As such, the Panel should consider developing and making open to public scrutiny from the outset clear guidelines/checklists for the definition of priorities and workplans. To ensure comprehensiveness and inclusivity, the Panel should consider publication/public notification of its meeting and reporting schedules, giving sufficient time for solicited inputs. These should take into account the different levels of development and modes of access to information of different stakeholder groups. Similarly, every effort should be made to ensure that access to reports is ensured for stakeholders in and from resource-limited settings.

5. **Structure & Membership:** Insufficient detail is provided on the modes of operation of the Panel and subsidiary working groups. Such detail is necessary to ensure that transparency, inclusivity, openness and independence are integrated into the constitution and modes of working of the Panel; these should be made publicly available.

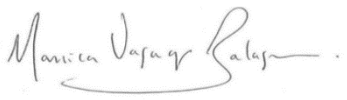
   The composition of the panel should take into account the need for the inclusion diverse constituencies of those communities affected by AMR and civil society participation between and within countries from across the One Health spectrum. Allowances should be made and consideration of extending financial resources to affected communities and civil society for their participation in the work of the Panel.

   The panel should provide clear details on how it will ensure gender and diversity balance in its composition and modes of working, including through arrangements made for meetings, and support for attendance of participants.

6. **Declaration of interests:** Considerable additional detail is required on the procedures for reporting and addressing conflicts of interest, including periodicity of review of conflicts, immediacy and robustness of remedy. A public register of reports and reviews of conflicts of interest should be established.

7. **Communication with governments and other stakeholders**: To ensure consistent and regular exchange with governments and other stakeholders, the Panel should recommend the appointment of governmental representatives, and establish a clear calendar for exchange of information, evidence, views and recommendations with these representatives for dissemination by that government.

   Clear procedures should be in place to receive inputs from stakeholders from across the One Health spectrum, and safeguards elaborated to ensure that imbalances in power and access are not exploited to attempt undue influence upon the work of the Panel. Interactions with stakeholders should be recorded and made publicly available.



Manica Balasegaram
Executive Director, GARDP

International Centre for Antimicrobial Resistance Solutions (ICARS)

[EXT] ICARS feedback on the independent panel on evidence for action against AMR

Ghada Zoubiane [redacted]

Mon 6/15/2020 2:42 PM

To: amr-tjs [redacted]
Cc: Robert Leo Skov [redacted]; Helle Engslund Krarup [redacted]

The Internaonal Cen tre for Anmicr obial Resistance Feedback on the Independent Panel on Evidence for Acon ag ainst Anmicr obial Resistance

The Internaonal Cen tre for AMR Soluons (ICAR S) appreciates the opportunity to provide feedback to the Draft Terms of Reference of the Independent Panel on Evidence for Acon Ag ainst Anmicr obial Resistance. The panel will be of great importance to the naonal and in ternaonal c ommunity providing very much needed recommendaons based on e vidence analysis. We strongly support and wait for this panel to be acv e.

With this in mind, it is crucial that the panel maintains its independence from exisng UN en es and any polic al influence. An independent secretariat can provide support when choosing panel members, supporng the panel's acvies as w ell as addional e fforts by the working groups.

Addional f eedback includes:

- The mandate of the panel is proposed to be reviewed every five years: we believe that the panel will benefit from a shorter duraon f or the review (a. er 2 years for instance). The review should ideally be conducted by an independent enty .
- The type of evidence analysed: It would be important for the panel not to limit itself to evidence that is only published in scienfic journals especially e vidence from low- and middle- income countries, where such evidence is mostly unpublished and at mes only a vailable with local policy makers and stakeholders. In addion, the priv ate sector holds a large number of unpublished evidence of great relevance to the AMR community (especially in LMICs) and we strongly encourage the panel to have engagement with both public and private sectors for a complete picture of the different acvies
- It would be of great importance to have clarity about how recommendaons fr om the independent panel will feed into the AMR global governance, the Global Leaders Group, how it will influence the work of the tripart e and other naonal and in ternaonal or ganisaons.

We strongly support the set up of the independent panel and the efforts of the tripart e in tackling AMR.

best wishes
Dr Ghada Zoubiane on behalf of ICARS

GHADA ZOUBIANE, PHD
HEAD OF PARTNERSHIPS AND STAKEHOLDER ENGAGEMENT

ICARS · INTERNATIONAL CENTRE FOR ANTIMICROBIAL RESISTANCE SOLUTIONS

ARTILLERIVEJ 5 · 2300 COPENHAGEN S · DENMARK
WWW.ICARS-GLOBAL.ORG

Nigeria Centre for Disease Control (NCDC)

[EXT] Public discussion - Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Abiodun Egwuenu [redacted]

Tue 6/9/2020 2:13 PM

To: amr-tjs [redacted]
Cc: chikwe.ihekweazu [redacted]

Dear Administrator.
Full name: Abiodun Egwuenu (Dr.)
Title: Epidemiologist
Affilia on of the respondent: represen ng Nigeria Centre for Disease Control
Feedback: The only substan ve issue is the need to consistently include the Environment in all the processes, for instance Nomina on Commi ee will be convened by he Tripar te organiza ons. I hope this takes into considera on the environment sector.

Dr. Abiodun Egwuenu
Thank you.

Administrative Headquarters
Plot 801, Ebitu Ukiwe Street, Jabi - Abuja

Deputy Director
DIRECTORATE FOR EMPLOYMENT, LABOUR AND SOCIAL AFFAIRS

Tripartite Joint Secretariat on AMR

DELSA/MP(2020)36 11 June 2020

Objective: OECD feedback on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance.

Dear Sir, Dear Madam,

In May 2020, the Tripartite Joint Secretariat on Antimicrobial Resistance (AMR) made available, for public discussion, a draft terms of reference (TOR) for the creation of an Independent Panel of Experts (IPE) that will assess the evidence for action against AMR. In this context, I am pleased to share with you a number of comments on the proposed TOR prepared by the Secretariat of the Organisation for Economic Co-operation and Development (OECD). More specifically, this document conveys feedback from the Directorate for Employment, Labour and Social Affairs as well as the Trade and Agriculture Directorate.

1. **Section 5 of the TOR should include language to ensure a balanced representation of all the required expertise areas needed to the effective functioning of the IPE; the choice of these expertise areas should be based on a pre-defined framework**. Section 5 of the draft TOR, which discusses the structure and the membership of the IPE, mentions a comprehensive set of disciplines but fall shorts in clarifying a rationale to partition these disciplines and the related expertise areas. In practice, the current version of the TOR does not ensure that there will be a balanced representation of all the needed expertise to achieve an effective coverage of all the key One Health sectors. The choice of the high-priority expertise areas should be based on a framework which should be designed with a One Health perspective to reflect the intersectoral nature of AMR and should be consistent with other standards set by the Tripartite Joint Secretariat including, for example, the framework developed to monitor and evaluate the global action plan on antimicrobial resistance[1].

2. **The TOR should explicitly mention the criteria, based on a rational partitioning of the AMR evidence, that will guide the IPE throughout its activities and, in particular, the review process; the same framework used in (1) should be used to design these criteria**. The current version of the TOR does not mention any particular framework that will be used by the IPE to define priorities areas and to ensure a balance partitioning of work and activities across all the different sectors part of the One Health approach. To ensure consistency with the selection of the expertise areas and the production of outputs that are consistent with other standards set by the Tripartite Joint Secretariat, it is proposed that these criteria are based on the framework developed to monitor and evaluate the global action plan on antimicrobial resistance.

[1] WHO, FAO, OIE (2019). Monitoring and evaluation of the global action plan on antimicrobial resistance: framework and recommended indicators. Available at: https://www.who.int/antimicrobial-resistance/global-action-plan/monitoring-evaluation/tripartite-framework/en/.

3. **Section 8 of the TOR, on key performance indicators, should explicitly and clearly list priorities and expectations including, for example, in terms of outputs and timelines to produce these outputs**. The current draft of version 8 does not mention any specific performance indicator and leaves to the IPE to set its own performance assessment methods and standards.

4. **The Tripartite Joint Secretariat may wish to consider the addition of a clause mentioning that the IPE should make publicly available for consultation and feedback certain intermediate outputs of its work**. The timeframe for producing outputs is relatively long and both the IPE and the broader community of experts may benefit from regular progress reports on the work. Also, with the objective to maintain momentum, these progress reports could be made public via special high-level meetings on AMR. The current draft of the TOR only refers to periodic reports but it does not clarify whether these reports will be publicly available and whether the IPE will seek feedback from the broader community of researchers.

We thank for the opportunity to comment on the draft TOR and wish the new IPE all the best for a fruitful activity.

Yours sincerely,

Mark Pearson

Health, Intellectual Property and Biodiversity Programme

SUBMISSION BY THE SOUTH CENTRE TO THE PUBLIC CONSULTATION ON THE TERMS OF REFERENCE (TORS) FOR THE INDEPENDENT PANEL ON EVIDENCE FOR ACTION ON AMR

The South Centre supports the objective of increasing evidence base for action on AMR, and in this regard, submits the following comments on the draft terms of reference (TORs) for the establishment of an Independent Panel.

The purpose of the Independent Panel on Evidence for Action on AMR

Addressing AMR requires actions across different sectors, including in human health, agriculture, food chains and the environment. While the rise in AMR is evident in all countries, it has even more dire consequences in developing countries that are already disproportionately affected by infectious diseases and which have other structural issues that also make addressing AMR more challenging. Therefore, in analyzing the scientific evidence for action on AMR and in shaping its recommendations, the Panel will need to consider the particular context of developing countries.

New Governance Bodies for AMR

The role of the Independent Panel on AMR needs to be considered as part of the broader global governance structure for AMR proposed by the UN Interagency Coordination Group (IACG) which includes the considerations submitted in regard to the Global Leaders Group (GLC) and the terms to which the multi-stakeholder platform will operate. The Independent Panel functions need to be considered alongside the other two governance bodies proposed.

The interaction among the three governance structures, to whom each will be accountable, and how their work will mobilize effective action on AMR at the national level, are essential aspects that can be detailed further in revised TORs.

Public Consultations on the Independent Panel on Evidence for Action Against AMR

The lead for the follow up for the establishment of the new governance structures lies with the Tripartite Secretariat. The Tripartite Secretariat developed TORs for the Global Leaders Group on AMR, opened public consultations to inform on its report, and subsequently delivered the final TORs in February 2020 to the office of the United Nations Secretary-General (UNSG). However, the final TORs and outcome of the process have not yet made public.

Accordingly, one of the challenges for governments and other stakeholders to provide feedback to the public consultations and specifically on TORs for the Independent Panel, is that the public

consultation has not described the whole structure of the new governance bodies proposed, but rather a consultation for each different governance body is being done separately and with different timelines. It would be helpful for the office of UNSG to inform the status on the set up for the Global Leaders Group and its TORs so that the relationship of this body and the proposed independent panel can be better understood.

Considerations for the Proposed TORs for the Independent Panel

Representation from experts from developing countries:

Ensuring the participation of developing country experts across different sectors would be critical in reviewing the evidence adequately and identifying gaps in particular concerning developing country contexts. TORs of the independent panel suggest that a nomination committee will be established through the Tripartite Organizations. The options for formulas to ensuring geographical representation from cross-sectors should be further described in revised TORs.

Periodic reporting: TORs of the independent panel propose that the outcome? of their deliberations will be through periodic reports that can inform governments, multilateral organizations and all other stakeholders. The Panel will provide findings and assessments of present and future scenarios that can be used by policy and decision-makers to limit the consequences associated with antimicrobial resistance. Two issues require further specification. The first is the reporting mechanism, as it is proposed that the independent panel is accountable to the UNSG office. Yet, a plan should be provided for how the reporting will permeate back to the UN General Assembly, tripartite organizations and other relevant decision-making bodies so that the reports serve to advance the AMR action globally, regionally and nationally effectively. Secondly, how feedback will be obtained from governments and other stakeholders before the finalization of the periodic reports. The reporting time for the panel should also be considered given that the proposed five-year period may be too long.

Relationship with the other governance structures:

The independent panel, together with the GLG and multi-stakeholder platform, should provide value-added and avoid duplications to the existing governance structures. For this, more clarity is needed in terms of the scope in TORs. Justification of the need for the independent panel can be strengthened, pointing concretely to themes where there are gaps or where consensus based on evidence needs strengthening. A constrain for overall work on AMR is limited resources. Bearing this in mind, it is crucial to ensure that the new structures will support the much-needed financial mobilization for National Action Plan (NAP) implementation, and do not divert resources away from these critical efforts or from the technical support provided through the tripartite organizations.

The mechanism through which the findings of the Independent Panel will be shared and discussed with the GLG and the multi-stakeholder platform needs to be better articulated. Therefore, TORs should take into consideration their work alongside the other two structures. The Independent Panel aim is to review existing scientific evidence, so it would be important that the information that is collected can be presented and discussed with the other two structures.

Engagement with governments:

The current TORs do not sufficiently explain the relationship between the independent panel and the Member States of UN and the tripartite institutions, and why this model was chosen as most suitable. The advisory group that drafted TORs for the panel considered 13 models of independent panels, including many models in which there is member state participation. The draft TORs for the independent panel do not provide the establishment of a formal mechanism for engagement with member states. The independent panel TORs note that it can provide periodic reports and a communication strategy to be devised to ensure the reports reach governments. However, the engagement with governments could be improved in the TORs. For example, models such as the Intergovernmental Panel on Climate Change (IPCC) allow governments to give comments on draft reports prior to their finalization. Another possibility would be to design reporting mechanisms through current governing bodies of the tripartite organizations such as the Executive Board or the World Health Assembly of the WHO and similar structures in FAO and OIE Member States governing process, or to UNGA.

Independence, Financing and Conflicts of interest:

Appropriate consideration should be given to what would be the best mechanism to ensure the independence of the panel. For example, it could be considered that the panel is supported by a small independent secretariat, rather than the current proposal for the panel to be serviced by the tripartite secretariat. One option could be to establish a specific trust fund for this purpose as well as to support the overall work of the independent panel. This trust fund could be supported by the tripartite, other organizations and governments. There is a similar trust fund for AMR country support that was set up in 2019 and administered by the tripartite secretariat. This proposal mirrors the funding for IPCC that is done through a trust fund. However, this set up could delay the establishment of the independent panel and a new trust fund could take away resources from the existing trust fund that is meant to support NAPs. Currently, of the 70 million sought up to 2024, the fund only has 12 million now.

If it is determined that the Panel should be supported by the tripartite secretariat, as proposed in the TORs, then in order to ensure the independent nature of the Panel there needs to be clarity and transparency related to the procedures for its operation, the nomination process for panel members and the support to be provided by a Tripartite Secretariat so that there would not be an undue influence on its deliberations.

The terms of reference do not specify how the independent panel will be financed. There will be costs even though the experts will not be remunerated. The source of financing could potentially lead to a conflict of interest. Attention needs to be given to this in considering TORs.

Scope:

The selection of topics by the panel will benefit from input and feedback from national and regional institutions. It may also be necessary to consider including issues related to the increase of resistance in treatments for malaria, HIV, and TB as crucial health areas for developing countries.

The South Centre would also like to stress the importance of active civil society participation and supports the submission related to the TORs from the Antibiotic Resistance Coalition

UN Foundation consolidated comments
ToR Independent Panel on Evidence for Action against AMR

General comments

- We appreciate the opportunity to comment on the ToR and support the AMR Tripartite Joint Secretariat's efforts to obtain stakeholder input.
- We applaud the Panel's strong focus on work across the One Health spectrum, at the interface between human, terrestrial and aquatic animals and plant health, food and feed production and the environment, with a systems-level approach. We encourage that the Panel remain at the interface, and with systems-level approach, so that it does not duplicate important work done elsewhere.
- In terms of the operationalization of the Independent Panel vis a vis other governance structures, we appreciate as stated in the email soliciting input to the ToR's for the Panel, "stakeholders will be engaged to provide feedback on all three governance structures enabling them to examine the overall architecture of these structures including synergies and interactions."
- As it exists now, the synergies between the Independent Panel, the Global Leaders Group and the Partnership Platform remain unclear (vaguely stated under the Communication Section of the ToR) and we call for a dedicated process to ensure each aligns and the inter-relatedness is clearly understood by all stakeholders so that there is maximum effectiveness and efficiency across the governance structures.
- There would be high value in the potential that the Independent Evidence Panel could inform the work and priority advocacy and actions of the Leaders Group as well as the Partners Platform to build momentum.
- We note that the document does not contain language on funding the work of the Independent Panel. Will resources come from the Multi-partner trust-fund or from existing resources in the tri-partite agencies? The funding source(s) should be included somewhere in the document to ensure transparency and to adhere to the principles of independence and political neutrality.

Comments by Section

1. Purpose
   - The overview includes examples of the types of research the Panel will undertake but the nature of the Panel's research function is not explicitly stated in the purpose. We would suggest detailing the spectrum of evidence to be undertaken, as stated in the overview – the impact of AMR (included), the effectiveness of IPC, and the impact of changes in the future. It also lacks language on the need to resolve scientific disagreements and create synergies, for example, and to improve communications amongst stakeholders to ignite action.
2. Objectives of the Panel Across the One-health Spectrum
   - The objectives are significant and strong. If implemented, the recommendations would considerably advance the role that the Panel is designed to fill. Nevertheless, there is a

troubling lack of clarity – noting only "periodic reports" – of how the Panel will fulfill its objectives. Noting that operational guidance will be established by the Panel itself, it is still important at this stage to provide a greater level of detail on the outputs of the Panel – the frequency of reports, for example, specifying if it is expected to produce one seminal (annual/biannual) report, or a set of reports oriented around each objective.

- The assessment of the evidence and science is being done or concurrently done by others. To avoid redundancy, it would be helpful to summarize that ongoing work to avoid redundancy.
- The reports should include the successes *and* challenges of assessed scenarios to address the effectiveness of implemented strategies.

3. Accountability
   - The Panel's reports should be made available to the UN General Assembly and the Panel should be invited by the General Assembly to update Member States on its work and findings.
   - Add the OIE Director General (or the Head of the Antimicrobial Resistance and Veterinary Products Department of OIE) in the accountability section. OIE is not part of the UN, but it is always difficult to be accountable to two different agencies.
4. Guiding Principles
   - We propose a new bullet on ensuring effective coordination with other existing mechanisms in the global AMR space, such as the Global AMR R&D Hub and any other relevant entities (such as any regional bodies conducting research).
   - Will the group aim to have people-centered approaches? Will it consider implementation research in its scope?
5. Structure and Membership
   - We agree that membership should represent "a wide range of geographic regions, relevant disciplines and sectors". We also strongly urge adding gender to these considerations (it is stated in the Nomination section, but we urge it be explicitly stated up front in the Composition section).
   - We are concerned that the total number of members (10-15) will constrain the Panel's ability to represent the desired diversity of expertise, which we support fully. Either the ToR should require the establishment of working groups to add and augment expertise, or the ToR should increase the Panel's size to at least 20 – perhaps both options should be implemented.
   - We are unsure how best to address the need to recruit members from LMIC, beyond geographical diversity. Since there is no compensation for members, prospective nominees from LMIC may face difficulties working on a voluntary basis.
   - While we strongly affirm the importance of independent panelists, we also support the inclusion of researchers from different sectors, including but not exclusive to academia: eg. private sector, civil society organizations.
   - It is not clear from the ToR who is responsible for drafting the Panel's reports – the Panelists themselves, or the Secretariat (or both)? This should be made clear in this section of the ToR. It should also be clarified that the Secretariat's role is primarily operational in nature so that the Secretariat does not have undue influence on the content of the Panel's work.

- While the ToR states the group will decide on the operationalization and frequency of reports, the meetings and time required to input into reports should be clear so that the level of effort expected from those nominated is understood.
- We agree with the staggered approach to term limits, with an initial duration of 2 and 3-years for members. However, language such as ***Member terms will initially be for 2 to 3 years, with flexibility for a second 2-year term*** should be clarified. As it is currently worded, it is unclear if those serving a 3-year initial term will be eligible to serve an additional 3-year term. After the initial establishment of the group, term limits should be uniform.
- We suggest including language on a policy to limit the designation of deputies. Deputies should not be permitted unless in extreme cases and with advanced notice to and permission of the chairs. (To ensure continuity and ownership of panel discussions/outcomes.)

6. Declaration of Interests
   - No comments
7. Communication with Governments and other Stakeholders
   - How can practitioners of AMR solutions and action have an open, transparent opportunity to recommend areas of focus for consideration by the Independent Panel? Will there be touchpoints and/or interactions with CSO and private sector actors? Such opportunities would give civil society and private sector actors the opportunity to flag areas requiring the Panel's attention and allow an exchange of real-world problems – in a way that doesn't bias the Panel, but rather ensures the Panel's focus is responsive to AMR action, and that the Panel's outputs are thus highly valued and catalytic in the global AMR response.
8. Key performance indicators
   - This section is vague and should include some nominal goal posts. The ToR should at least state that the Panel should define an annual work plan with relevant KPIs.
   - The group should also consider developing an annual (or longer) list of research priorities that could then be referenced as benchmarks to convey progress against those priorities.

UNICEF

[EXT] FEEDBACK: Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance

Alexandre Costa [redacted]

Mon 6/15/2020 8:48 PM

To: amr-tjs [redacted]

Dear Sir or Madam:

On behalf of UNICEF, I would like to offer feedback on the draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance:

2. Objecv es of the Panel across the One Health spectrum

The objectives are all focused on outputs and consideration should be given to objectives based on outcomes.

4. Guiding Principles:

AMR is a multisectoral problem: There is no reference to the multisectoral nature of AMR. In addition to inter- and intra-disciplinary, AMR is a multisectoral issue that requires a multisectoral response, involving governments, donors, intergovernmental organizations, private sector, civil society, professional associations, and academic, training and research institutions. Besides scienfic eạvidence provided by academic and research institutions, evidence from implementation research, psychosocial research (e.g., CSOs), education (e.g., professional associations); regulatory elements (e.g., legal, political sciences); human rights organizaons; eạtc. are necessary to support comprehensive multisectoral recommendations.

5. Structure and Membership:

Composition: The proposed core number of experts (10-15) is not sufficient to encompass all relevant areas of expertise involved in AMR. The panel should have a least two experts in each technical area relevant for AMR to ensure technical representaon aàt every meeting and mitigate expert bias.

Sectors: The list of expertise requirements is very narrow and excludes many sectors that play a key role in the fight against AMR (e.g., communications, advocacy, legal, education, research). The absence of any references to public, private and civil society sectors is noceable, eạxcept in reference to the partnership pla. orm where governments, civil sociees and the priv ate sector will interact. In parcular , the inclusion of community/civil society representav es to represent community-based research and findings would be cric al for compiling any recommendaons and ensuring these c an be applicable to pracc al implementaon.

Working Groups: The proposed organizaon is v ery simplisc – i.e., 10-15 e xperts who can organize me-bound working groups. The Panel could benefit by having more structure while sll r etaining flexibility. As a suggeson, the Panel could expand on the organizaon of the T ripart e and establish 4 working groups on Human sciences, Veterinary sciences, Agricultural sciences, Environmental sciences, and a cross-cung One Health sciences. Verc al and horizontal task forces (e.g., Implementaon sciences, Communic aons/ Advocacy) could be established to complete me bound t asks. A visual diagram would provide more clarity on the organizaon of and relaonship s between different elements of the Panel.

Other important consideraons:

- The TOR does not read like a final dra insof ar as many important areas have not been sufficiently developed (e.g., Panel operaon, r elaonship with other pla tforms).
- The relaonship pr ocedures between the Panel and other relevant platforms menoned in the documen t (e.g., Global leaders Group, Tripart e, Partnership platform, governments, civil society and private sector)

should be, at a minimum, outlined in the document.

- If the purpose of the Panel is to communicate findings and to inform governments and acons, ther e must be resources and experse dedic ated to this either in the secretariat or a dedicated working group. This cannot be an afterthought or just a disseminaon email. F or research to have an impact, appropriate resources and accountability must be placed on actually ensuring the research is used.

Feel free to contact me if you have any queso ns.

Best regards,

Alex Costa

UNICEF, HIV/AIDS Secon , 3 UN Plaza, New York, NY 10017 USA

Feedback on the Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance:

GALLUZZO, Katerina [redacted]

Thu 5/28/2020 1:33 PM

To: amr-tjs [redacted]
Cc: WENDES, Sanne [redacted]; BLANKENHORN, Anne-Line [redacted]

Dear Tripartite Joint Secretariat on Antimicrobial Resistance,

Please see below suggested feedback on the *Draft terms of reference of the Independent Panel on Evidence for Action Against Antimicrobial Resistance*:

We would like to suggest the TOR considers the impact of the current COVID-19 situation on AMR and the immediate evidence-based actions that can be taken during the pandemic. Several COVID-19 related AMR challenges, particularly in low resource settings, have been identified e.g. an increased abundance of substandard/falsified products, antibiotic stockouts reducing access to quality medicines, and the potential impact of mass drug administration (MDA) and presumptive treatment on AMR. The extraordinary implementation of MDA and presumptive treatment for malaria and other illnesses are being considered as a means to limit contact and ensure continuity of care during the pandemic. However, while there are clear benefits to these approaches, they can inadvertently increase the use of antimicrobials in patients who may not need them, and also cause unintended supply shortages. This emphasizes the need for strong health systems, including surveillance systems, and robust evidence to be able to respond quickly and prevent an increase in AMR during the pandemic.

Thank you for your consideration.

Best regards,
Katerina

Katerina Galluzzo
Technical Manager, Strategy Team
Unitaid

Unitaid

Independent Panel on Evidence for Action Against Antimicrobial Resistance

Final Draft Terms of Reference for Public Discussion

Wellcome Trust Consultation Response*

We welcome the focus given by the Tripartite towards the implementation of the IACG global governance recommendations. The establishment of the Independent Panel on Evidence for Action Against Antimicrobial Resistance as laid out in the IACG recommendations is key to the successful implementation of the wider IACG recommendations and overall progress on antimicrobial resistance (AMR).

Below we outline some comments on the draft Terms of Reference.

General comments:

1. **Purpose** Key to the success of the Panel will be the relevance of its recommendations. **Proposed amendment:** Wellcome is of the view that the purpose section should be amended to highlight the importance of generating relevant recommendations which set the frame for global action on AMR, using overall burden of AMR and generating trajectories of current interventions as examples of how this could be achieved.
2. **Diversity** It is essential that diversity is considered in the selection of the Independent Panel because representation in public and academic settings is important. Wellcome acknowledges that personal identity is complex and that not all aspects of diversity are visible. Nevertheless, we would strongly encourage the promotion of a diverse group of panel members, in particular considering race and ethnicity, gender, career stage, geography and sector. We also support proposals which thoughtfully consider diversity in this way across the membership of the main panels and ad-hoc groups.
3. **Transparency, peer review and open access** Wellcome supports the proposals to ensure a transparent and rigorous peer review process of reports, and that all outputs should be available through open access publication. It is essential that the Tripartite secures appropriate funding to cover the human resources required to review, consider and address comments received through peer review which could be extensive.
4. **Relationship to Member States** Whist it is essential that the panel is independent and politically neutral, Member States are a key stakeholder in respect to the uptake and implementation of the recommendations/outputs from this panel. It will be important for the Panel to develop a robust mechanism to engage Member States in the process in an appropriate way to secure an ongoing mandate, and we welcome the 'comprehensiveness and inclusivity' guiding principle as well the clear direction for the Panel to communicate with governments and other stakeholders. **Proposed amendment:** The operational guidance section should be strengthened to specify engagement with Member States as a key function to be defined by the panel.
5. **Chair and Vice Chair '**One Health' representation is a key principle throughout the terms of reference. Wellcome is of the opinion that the Chair and Vice Chair appointments should follow the same principle to ensure diversity of representation. There should be clear accountability assigned to both the Chair and Vice Chair roles.
6. **Structure and membership** The Terms of Reference suggest 10-15 panel members. Wellcome is of the opinion that a panel of 15 risks being too large to function effectively. **Proposed amendment:** We believe that draft ToR should require a clear justification for

increasing membership above 12. If the panel does exceed 12 members, the panel should be required to take steps to address this in future recruitment rounds, identifying possible members who are able to cover multiple areas of expertise and thus reduce the panel size back to 12.

Transparency is a guiding principle of the panel but there is limited information for how this is achieved. This should be a key function listed in 'operational guidance' section of the draft Terms of Reference.

Time bound: The Terms of Reference suggest that the panel can establish working groups which are time bound however there is no mention as to what this timeframe should be. Wellcome suggests working groups are initially established for a period of up to two years, with extensions (no more than an additional two years without further review) to be considered and agreed upon by the Panel.

Communications: Wellcome considers communication to be a key function of the Panel's responsibility and therefore fully support the inclusion of the 'communication with governments and other stakeholders paragraph. If reports are simply published with no plans to communicate the findings with stakeholders then it is likely that recommendations and the Panel will fail to have impact. Panel members should be clear about their responsibilities to support the dissemination and communication of reports and the Panel should devise clear communications strategies around each of its publications, including how they will target those stakeholders who should have an interest in any specific recommendations of a report.

*Declaration of Interest: Edward Whiting, Director of Strategy, Wellcome Trust chaired the Advisory Group convened by the Tripartite Secretariat to develop these draft Terms of Reference.