

Antimicrobial Resistance: Accelerating National and Global Responses

The Second GMWHO World Health Assembly,

Recalling the 2030 Agenda's commitment to universal health coverage and global cooperation to combat AMR, the critical impact of AMR on treatment efficacy and mortality, United Nations General Assembly 79/2 (2024) and WHA 68.7 (2015), along with the essential role of safe and effective antimicrobial medicines and diagnostic tools;

Reaffirming the 2024 UN High-Level Meeting on AMR and its commitment to a "One Health" approach, emphasizing the need for antimicrobial stewardship across medical, veterinary, agricultural and environmental sectors;

Underlining AMR's rising economic burden, which leads to increasing healthcare costs and reduced productivity, projecting an estimated 3.8% reduction in global GDP annually¹ and potential push of 28 million people into extreme poverty in the next decade, and emphasizing the urgent need for prevention, research, and education initiatives to mitigate AMR's anticipated \$1 trillion annual cost to healthcare by 2050;

Noting with concern the insufficient funding and limited capacities in Research and Development that hinder innovation and restrict equitable access to essential interventions;

Acknowledging recent advances in AMR research and the urgent need for coordinated global action to curb resistance, sustain treatment efficacy, and promote data sharing to accelerate the development of new antimicrobials;

Emphasizing the urgent need for targeted public awareness and educational frameworks for both communities and healthcare professionals about the danger of antimicrobial misuse and overuse;

¹ results of the World Bank report on AMR (2017)

Highlighting that AMR affects all countries but disproportionately burdens low- and middle-income countries (LMICs), where poverty, poor sanitation, and fragile healthcare infrastructure worsen its impacts,

1. URGES Member States:

- (1) to include under the umbrella of the One-Health Approach regulations of animal and agricultural antimicrobial use. e.g. the reduction of non-prescription antimicrobial availability, a report on the quantity used and a strict prohibition to use them as growth promoters in the growing of livestock;
- (2) to promote the development of local production of diagnostic and antimicrobial agents in low- and middle-income countries, strengthening self-reliance by improving access to targeted agents and decreasing reliance on imports;
- (3) to ensure the establishment of contextually sensitive national action plans about AMR across all Member States in alignment with the Global AMR Action Plan;
- (4) to strengthen existing international surveillance systems such as GLASS while working on possible mechanisms to widen its scope to transcend the Quadripartite organizations;
- (5) to prioritize an international R&D agenda focused on ESKAPE pathogens², including qualitative research on end-users perspectives in collaboration with other UN agencies and international organizations;
- (6) to establish a comprehensive environmental management system for antimicrobial resistance (AMR), Member States should introduce policies for monitoring and controlling AMR in water, soil, and waste, while reaffirming the critical role of the One Health approach that highlights the interdependence of humans, animals, and the environment;
- (7) to invest in public and professional awareness of AMR, advancing responsible antimicrobial use and the prevention of infectious disease spread across all sectors;

2. INVITES all relevant healthcare stakeholders:

- (1) to strengthen existing funding mechanisms and offer financial incentives—such as grants, tax breaks, and subsidies—to stimulate R&D investment in AMR

² Enterococcus, Staphylococcus, Klebsiella, Acinetobacter, Pseudomonas, and Enterobacter

solutions, diagnostics and collaboration through public-private partnerships and particularly for low-resource settings;

(2) to ensure the Global Action Plan on AMR is regularly updated to remain responsive to current challenges and is supported by up-to-date and comprehensive guidelines;

3. REQUESTS the Director General:

(1) to support the Member States in ensuring education is provided to the general public and health and relevant professionals;

(2) to work with the United Nations in order to implement a system addressing potential income losses and the added strain on resource-limited healthcare systems and secure funding;

(3) to prioritize offering incentives and resource allocation for the improvement of current antimicrobial agents and regimens, as well as for the development of innovative diagnostic tools, new mechanisms of drug action, and deeper understanding of resistance mechanisms;

(4) to encourage the Quadripartite to regularly report on progress and challenges in the One Health approach, and promote national and international regulations for responsible antimicrobial use in healthcare and agriculture, and strengthen partnerships between WHO, FAO, and OIE, as global forums like the G20 health summit advocate for a unified 'One Health' strategy to combat resistance across humans, animals, and the environment;

(5) to endorse a framework that ensures equitable access to AMR treatments, advocating for fair funding mechanisms, particularly for low-income countries disproportionately affected by AMR, to address disparities and promote balanced health outcomes across populations.