

Resolution adopted by the General Assembly

XX/XXX. Political Declaration of the High-level Meeting of the General Assembly on Antimicrobial Resistance

The General Assembly

Adopts the Political Declaration of the High-level Meeting of the General Assembly on Antimicrobial Resistance annexed to the present resolution.

X plenary meeting

XX September 2016

Annex

Political Declaration of the High-level Meeting of the General Assembly on Antimicrobial Resistance

We, Heads of State and Government and representatives of States and Governments, assembled at the United Nations on 21 September 2016, in accordance with resolution 70/183, which decided to hold a high-level meeting in 2016 on antimicrobial resistance;

1. Reaffirm that the blueprint for tackling AMR is the WHO “Global Action Plan on Antimicrobial Resistance” and its five overarching strategic objectives, developed by WHO in collaboration with and subsequently adopted by FAO and OIE;

2. Reaffirm that the 2030 Agenda for Sustainable Development offers a framework to ensure healthy lives, and recall commitments to fight malaria, HIV/AIDS, tuberculosis, hepatitis, Ebola and other communicable diseases and epidemics, including by addressing growing antimicrobial resistance and neglected diseases particularly affecting developing countries, while reiterating that AMR challenges the sustainability and effectiveness of the public health response to these and other diseases as well as gains in health and development and attainment of the 2030 Agenda;

3. Acknowledge that resistance of bacterial, viral, parasitic, and fungal microorganisms to antimicrobial medicines that were previously effective for treatment of infections, is mainly due to inappropriate use of antimicrobial medicines in human, animal, food, agriculture and aquaculture sectors; lack of access to health services, including to diagnostics and laboratory capacity; as well as residues of antimicrobials into soil, crops and water. Within the broader context of AMR, resistance to antibiotics which are not like other medicines, including medicines for the treatment of tuberculosis, is the greatest and most urgent global risk that requires increased attention and coherence at the international, regional, and national levels;

4. Acknowledge that due to AMR many 20th century achievements are being gravely challenged, particularly the reduction in illness and death from infectious diseases achieved through social and economic development; access to health services and to quality, safe, efficacious and affordable medicines; hygiene, safe water and sanitation; prevention of diseases in communities and healthcare settings including immunization; nutrition and healthy food; improvements in human and veterinary medicine, and introduction of antimicrobial and other medicines;

5. Recognize that these achievements are now gravely challenged by AMR, including the development of resilient health systems and progress towards the goal of Universal Health Coverage; treatment options for HIV and STI, tuberculosis and malaria, besides other infections acquired in community and health care settings; gains in infection prevention and control in communities and health care settings; advances in agriculture and animal husbandry, helping to ensure that the quality of food is preserved; and prevention and treatment options for infectious diseases in veterinary medicine;

6. Recognize further that due to AMR there will be less options for the protection of people most vulnerable to life-threatening serious infections, especially women giving birth, newborns, patients with certain chronic diseases, or those undergoing chemotherapy or surgery;

7. Note with concern that the fulfillment for the right to the enjoyment of the highest attainable standard of physical and mental health and access for millions of people to health services and to quality, safe, efficacious and affordable antimicrobial medicines, food, clean water, and a healthy environment, remains a distant goal especially in developing countries;

8. Further note with concern that while currently, lack of access to health services and access to antimicrobial medicines in developing countries contributes to more deaths than AMR, without effective one-health and other multisectoral cooperation and actions, AMR is projected to cause millions of deaths worldwide with massive social, economic and global public health repercussions;

9. Recognize that the keys to tackling AMR are the prevention and control of infections in humans and animals, including immunization, monitoring and surveillance of AMR, sanitation, safe and clean water, and healthy environments; investing in strong health systems capable of providing universal health coverage; promoting access to existing and new quality safe, efficacious and affordable antimicrobial medicines based on, where available, diagnostic tests; sustained research and development for new antimicrobials and alternative medicines, rapid diagnostic tests, vaccines and other important technologies, interventions and therapies; promoting affordability and accessibility; and resolving the lack of investment in R&D, including through the provision of incentives to innovate and improve public health outcomes, particularly in the field of antibiotics;

10. Recognize that the overarching principle for addressing AMR is the promotion and protection of human health within the framework of the One Health Approach, and emphasize that this requires coherent, comprehensive and integrated multisectoral action, as human, animal and environmental health are interconnected, and in this regard:

a) Recognize further that effective antimicrobial medicines and their prudent use represent a global public benefit and for addressing AMR it is essential to allow for people to have access to efficient and resilient health systems; as well as to quality, safe, efficacious and affordable antimicrobials and other technologies when they are needed; and to healthy food and environment;

b) Underline that basic and applied innovative research and development, including in areas such as microbiology, epidemiology, traditional and herbal medicine, social and behavioral sciences, as appropriate, is needed to better understand AMR and to support R&D of quality, safe, efficacious and affordable antimicrobial medicines, especially new antibiotics and alternative therapies, vaccines and diagnostics;

c) Underline further that all research and development efforts should be needs-driven and evidence-based, and guided by the principles of affordability, effectiveness, efficiency, equity, and considered as a shared responsibility. In this regard we acknowledge the importance of delinking the cost of investment in R&D on AMR from the price and volume of sales to facilitate equitable and affordable access to new medicines, diagnostic tools, vaccines and other results from R&D. We welcome innovation and R&D models that deliver effective solutions to AMR challenges, including that promote investment in R&D. All relevant stakeholders, including governments, industry, non-governmental organizations, and academics, should continue to explore ways to support innovation models that address the unique set of challenges presented by AMR, including the importance of appropriate and rational use of antimicrobial medicines, while promoting access to affordable medicines;

d) Underline further that affordability and access to existing and new antimicrobial medicines, vaccines and diagnostics should be a global priority and should take into account the needs of all countries, in line with the “WHO’s Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property” and taking into consideration its internationally agreed follow-up processes;

e) Improve surveillance and monitoring of AMR and the use of antimicrobials to inform policies, and to work with stakeholders from industry, agriculture and aquaculture, local authorities and hospitals to reduce antimicrobial residues in soil crops and water, is needed;

f) Enhance capacity building, technology transfer on mutually agreed terms, and technical assistance and cooperation for controlling and preventing AMR, is needed; as well as international cooperation and funding to support the development and implementation of national action plans, including surveillance

and monitoring, strengthening of health systems, research and regulatory capacity, without jeopardizing, particularly for low and middle income countries, health or posing barriers for access to care;

g) Acknowledge that increasing awareness and knowledge on AMR and all of its implications requires sharing of good practices, findings, and collaboration with the media, national and multisectoral actors, as well as provision of sufficient financing for these activities across sectors;

11. Recognize that national conditions and priorities should be taken into account at all levels and relevant sectors of government should be engaged in the development and implementation of multisectoral national action plans, policies, regulations, and regional initiatives taking into account the domestic context, legislation and jurisdictional responsibilities;

12. We therefore commit to work at national, regional, and global levels to:

a) Develop in line with resolution WHA 68.7 multisectoral national action plans, programs and policy initiatives, in line with One Health approach and with the WHO Global Action Plan on AMR and its five overarching strategic objectives, with a view to implementing national measures for strengthening appropriate antibiotic use in humans and animals. To support implementation of these plans, domestic and international collaboration is needed to assess resource needs, sustainable technical and financial investment in shared research, laboratories and regulatory capacities, as well as professional education and training with a view to safeguard human health, animal health and welfare, and the environment;

b) Mobilize adequate, predictable and sustained funding and human and financial resources and investment through domestic, bilateral and multilateral channels to support the development and implementation of national action plans, research and development of existing and new antimicrobial medicines, diagnostics and vaccines, and other technologies, and strengthening of related infrastructure, including through engagement with multilateral development banks, traditional and voluntary innovative financing and investment mechanisms, based on priorities and local needs set by governments and on ensuring public return on investment;

c) Take steps to ensure that national action plans include the development and strengthening, as appropriate, of effective surveillance, monitoring and regulatory frameworks on the preservation, use and sales of antimicrobial medicines for human and animals, that are enforced according to national contexts and consistent with international commitments;

d) Initiate, increase and sustain awareness and knowledge-raising activities on AMR to engage and encourage behavioral change in different audiences; promote evidence-based prevention, infection control, and sanitation programs; optimal use of antimicrobial medicines in humans and animals and appropriate prescription by health professionals; active engagement of patients, consumers and the general public as well as professionals in human and animal health; professional education, training and certification among health, veterinary and agricultural practitioners; and consider, as appropriate, innovative approaches to increase consumer awareness, giving attention to local conditions and needs;

e) Support a multisectoral and One Health approach to address AMR, including through public health-driven capacity building activities, and innovative public private partnerships and incentives and funding initiatives, together with relevant stakeholders in civil society, industry, small- and medium-sized enterprises, research institutes and academia, to promote access to quality, safe, efficacious, and affordable new medicines and vaccines, especially antibiotics, and alternative therapies and medicines to treatment with antimicrobials, and other combined therapies, vaccines and diagnostic tests;

13. Call on WHO together with FAO and OIE, to finalize a global development and stewardship framework, as requested by WHA 68.7 to support the development, control, distribution and appropriate use of new antimicrobial medicines, diagnostic tools, vaccines and other interventions, while preserving existing antimicrobial medicines, and promoting affordable access to existing and new antimicrobial medicines and diagnostic tools, taking into account the needs of all countries, and in line with the Global Action Plan on AMR;

14. Call upon WHO, in collaboration with FAO, OIE, regional and multilateral development banks, including the World Bank, relevant UN agencies and other intergovernmental organizations, as well as civil society and relevant multisectoral stakeholders, as appropriate, to support the development and implementation of national action plans and AMR activities at the national, regional, and global levels;

15. Request the Secretary-General to establish, in consultation with WHO, FAO and OIE, an *ad hoc* interagency coordination group, co-chaired by the Executive Office of the Secretary General and WHO, drawing where necessary on expertise from relevant stakeholders, to provide practical guidance for approaches needed to ensure sustained effective global action to address AMR; and request the Secretary-General to submit a report for consideration by member States by the 73rd session of the General Assembly on the implementation of this declaration and further developments and recommendations emanating from the *ad hoc* interagency group, including on options to improve coordination, taking into account the Global Action Plan.