

Antimicrobial Resistance

Member States briefing session on Antimicrobial resistance (AMR):

Implementing UNGA 2024 commitments and
updating the Global Action Plan (GAP)

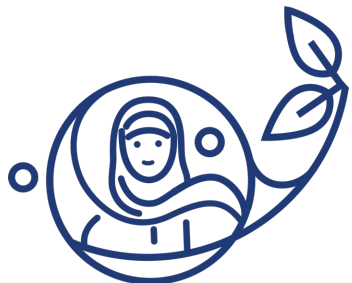
Date: 26 March 2025



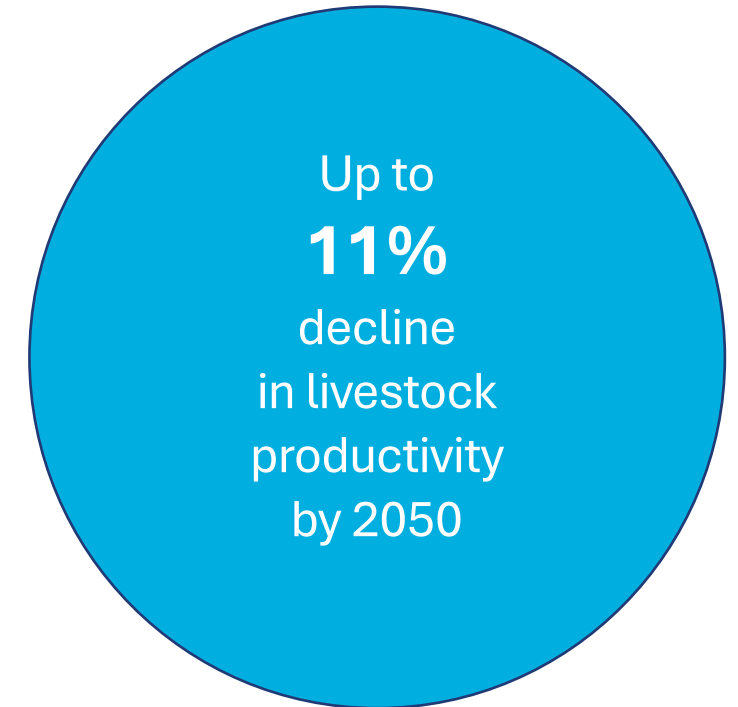
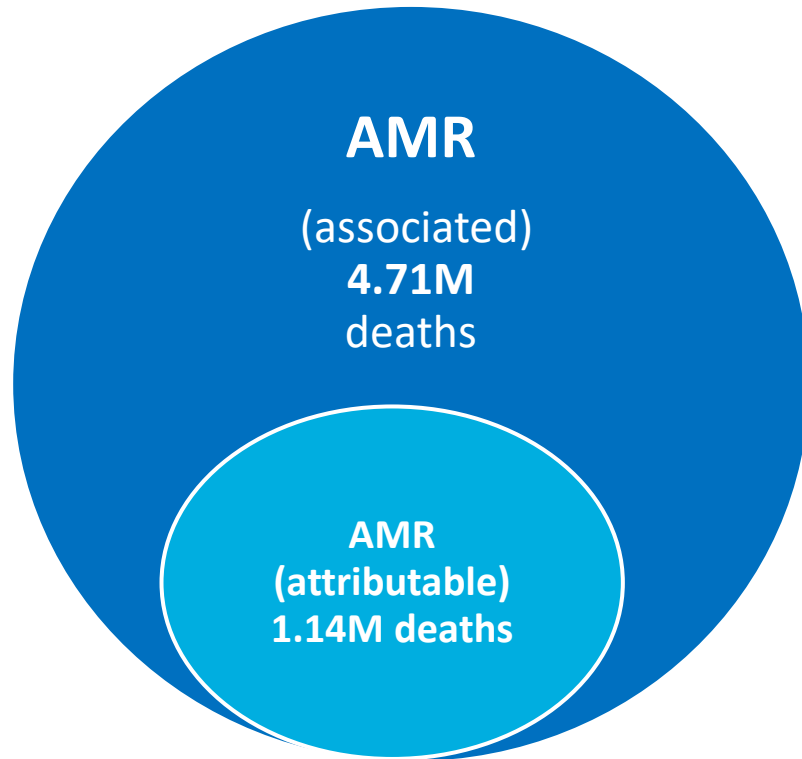
Presentation outline:



- Background
- Update on implementation of the 2024 UNGA and WHA commitments
- Updating the Global Action Plan on AMR
- Key considerations
- Next steps at global level



AMR is a threat for global health and development



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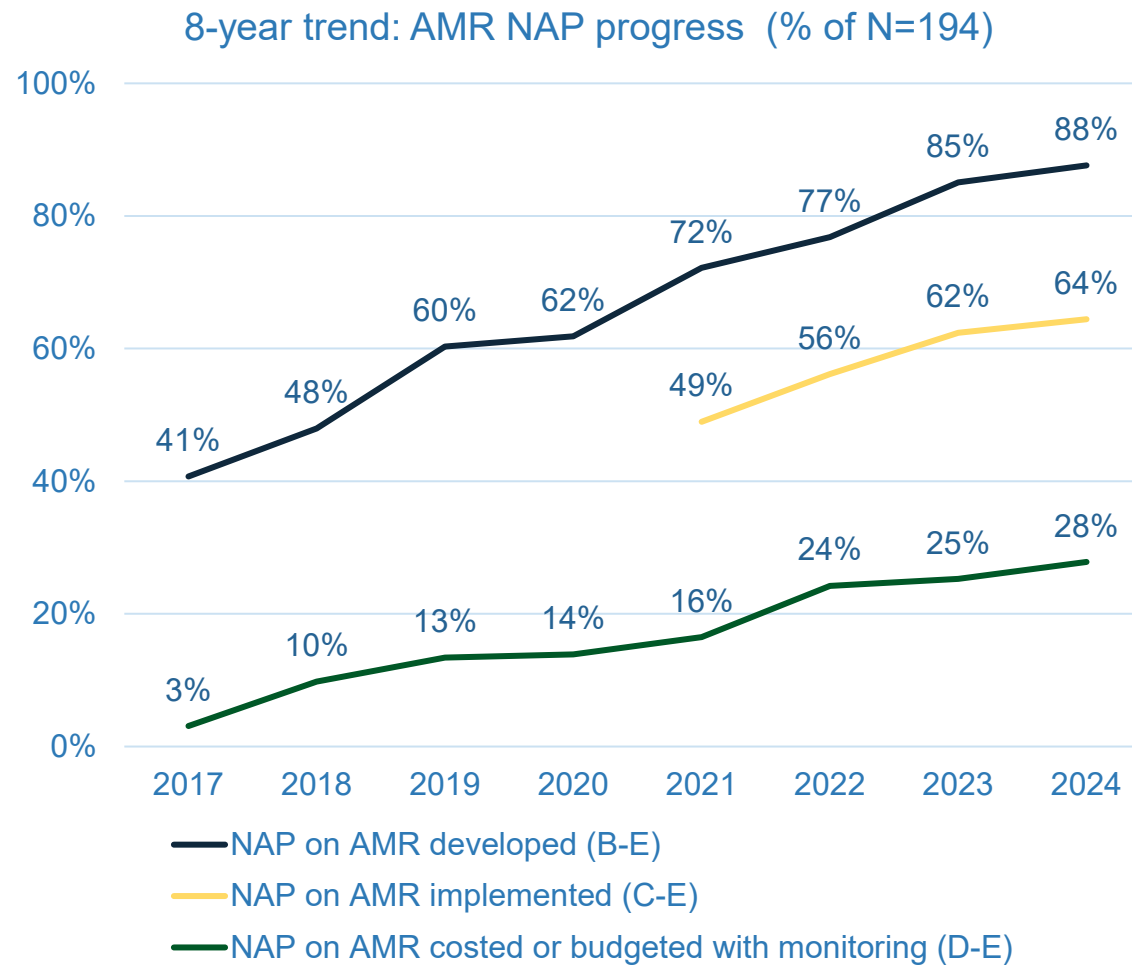
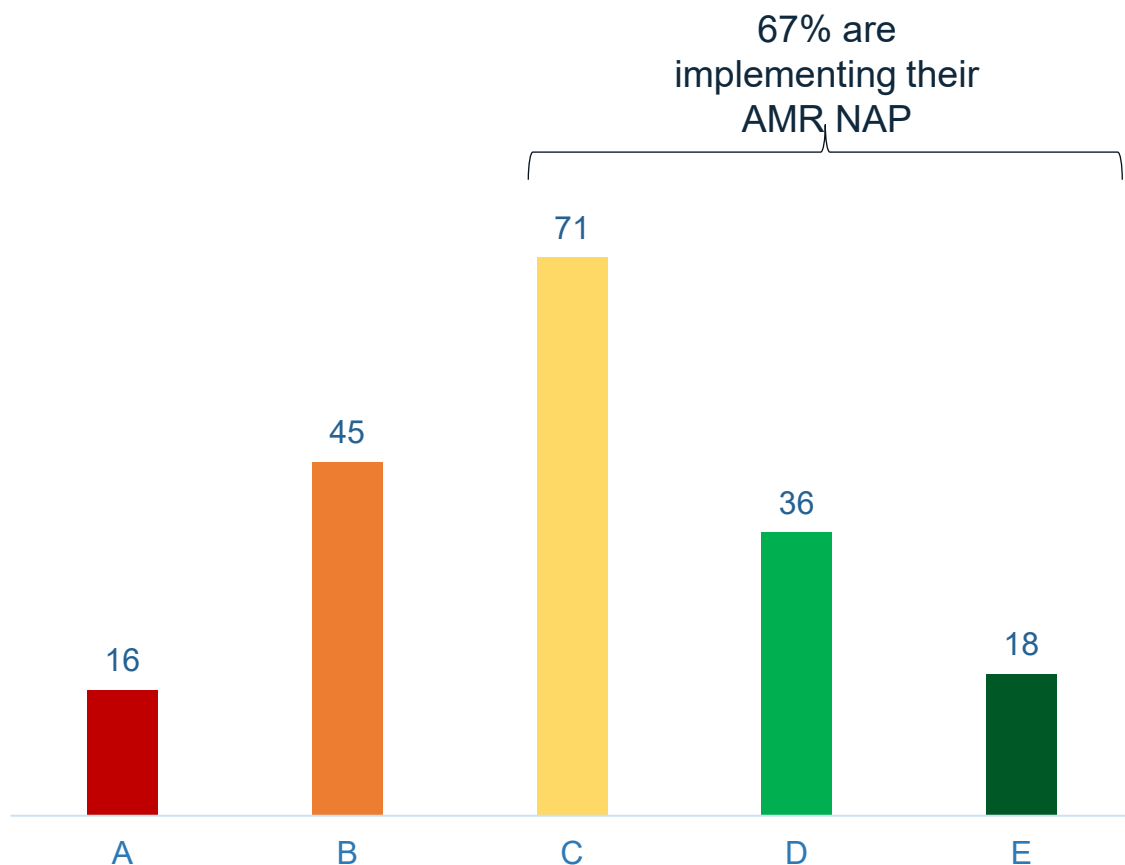
1. Global burden of bacterial antimicrobial resistance 1990–2021: a systematic analysis with forecasts to 2050. Lancet, 2024
2. Drug-Resistant Infections: A Threat to Our Economic Future. World Bank Group. 2017; 2.





Global status of AMR National Action Plans (AMR NAPs)

TrACSS 2024: AMR NAP progress
(Number of countries, N=186)



An implementation gap persists – only 28% have AMR NAP that is costed or budgeted with monitoring in place

Note: A - No national AMR action plan or plan under development; B - National AMR action plan developed; C - National AMR action plan approved by government and is being implemented; D - National AMR action plan has costed and budgeted operational plan and has monitoring mechanism in place; E - Financial provision for the National AMR action plan implementation is included in the national plans and budgets.

WHO strategic and operational priorities to address drug-resistant bacterial infections in the human health sector, 2025-2035

Resolution WHA77.6 welcomed WHO priorities for addressing drug-resistant bacterial infections, 2025-2035. Priorities align with **WHO's Fourteenth General Programme of Work**.



Priority 1:
Prevention of
infections through
IPC components,
WASH guidelines,
and vaccine
research.



Priority 2:
Universal access
to affordable,
quality diagnosis
and appropriate
treatment of
infections.



Priority 3:
Strategic
information,
science and
innovation



Priority 4: Effective
governance and
financing



Overview of the 79th UNGA Political Declaration on AMR*



Mortality:
**Reduce AMR
related deaths
by 10% by 2030**

KEY OUTCOMES



- **Governance:**
 - Actionable national multisectoral action plans on AMR in all countries
 - Quadripartite to update Global Action Plan by 2026, formalize the standing Quadripartite Joint Secretariat and establish Independent Panel on Evidence for Action on AMR in 2025
 - **Financing:** mobilize US\$ 100 million to support at least 60% of countries to have funded NAPS
 - **Access:** Equitable access to affordable, effective, and quality antimicrobials and point-of-care diagnostics, EMLs, EVMLs, GARDP, SECURE
 - **Human Health:** At least 70% of human antibiotic use globally from WHO “Access” group
 - **Prevention:** WASH services in all health facilities, 90% to meet WHO’s minimum requirements
- **Agric/Animal Health:** Meaningful reduction in the use of antimicrobials in the global agri-food system by 2030
- **Environment:** Catalyse preventative and mitigation action to address pollution sources. Strengthen regulations and invest in research.
- **R&D, Innovation:** Invest in research based on WHO Global Research Agenda for AMR in Human Health; and One Health AMR Agenda.
- **Diagnostic capacity:** 80% countries with capacity to perform bacterial and fungal resistance testing
- **Surveillance systems:** all countries to report quality surveillance data on antimicrobial resistance and antimicrobial use by 2030, through existing global surveillance systems: WHO Global Antimicrobial Resistance and Use Surveillance System (GLASS), InFARM, ANIMUSE
- **M&E:** 95% country participation in annual Tracking Antimicrobial Resistance Country Self- Assessment Survey

WHO AMR "value proposition" to implement the strategic and operational priorities + achieve the UNGA targets



Theory of change for WHO to contribute to impact at country level





AMR commitments & WHO contributions



Prevention

- 100% of countries having basic water, sanitation, hygiene and waste services in all healthcare facilities by 2030.
- 90% of countries meeting all WHO minimum requirements for IPC by 2030.

Access to diagnosis & Treatment

- Equitable access to affordable, effective, and quality antimicrobials and point-of-care diagnostics
- 70% overall human antibiotic use globally within the WHO Access group by 2030
- 80% countries having access to bacterial and fungal resistance testing by 2030

Strategic information, science and information

- All countries to report quality surveillance data on AMR and AMU by 2030 through existing global surveillance systems, including GLASS.
- Investment in research based on WHO global research agenda for AMR in human health and One Health AMR agenda.

Governance and financing

- QJS to Update Global Action Plan by 2026
- Formalize Quadripartite Joint Secretariat
- Establish Independent Panel on Evidence for Action on AMR in 2025
- Actionable national multisectoral action plans on AMR in all countries
- Mobilize US\$ 100 million to support 60% of countries to have funded NAPS

WHO Outputs

- WASH and health care waste management (HCWM) in health care facilities (HCFs)
- Antimicrobial stewardship and IPC integration
- Vaccine introduction and increase in coverage
- WASH in communities

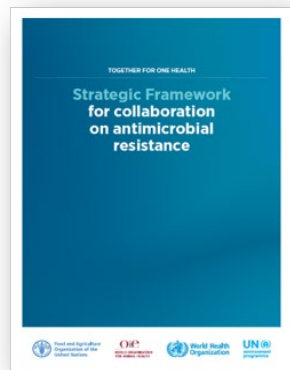
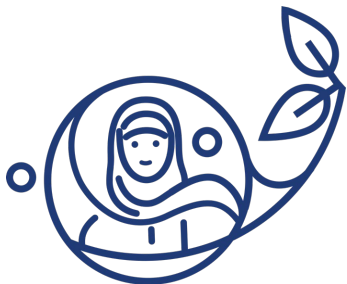


- Mainstreaming AMR interventions into UHC/PHC efforts and health emergency preparedness and response
- Treatment guidelines based on AWaRe and the AWaRe antibiotic book
- WHO AMR Diagnostic Initiative enhancing access to and quality of diagnostic tests for bacteriology and mycology.
- Strengthening the role of medicines regulatory agencies across sectors in AMR

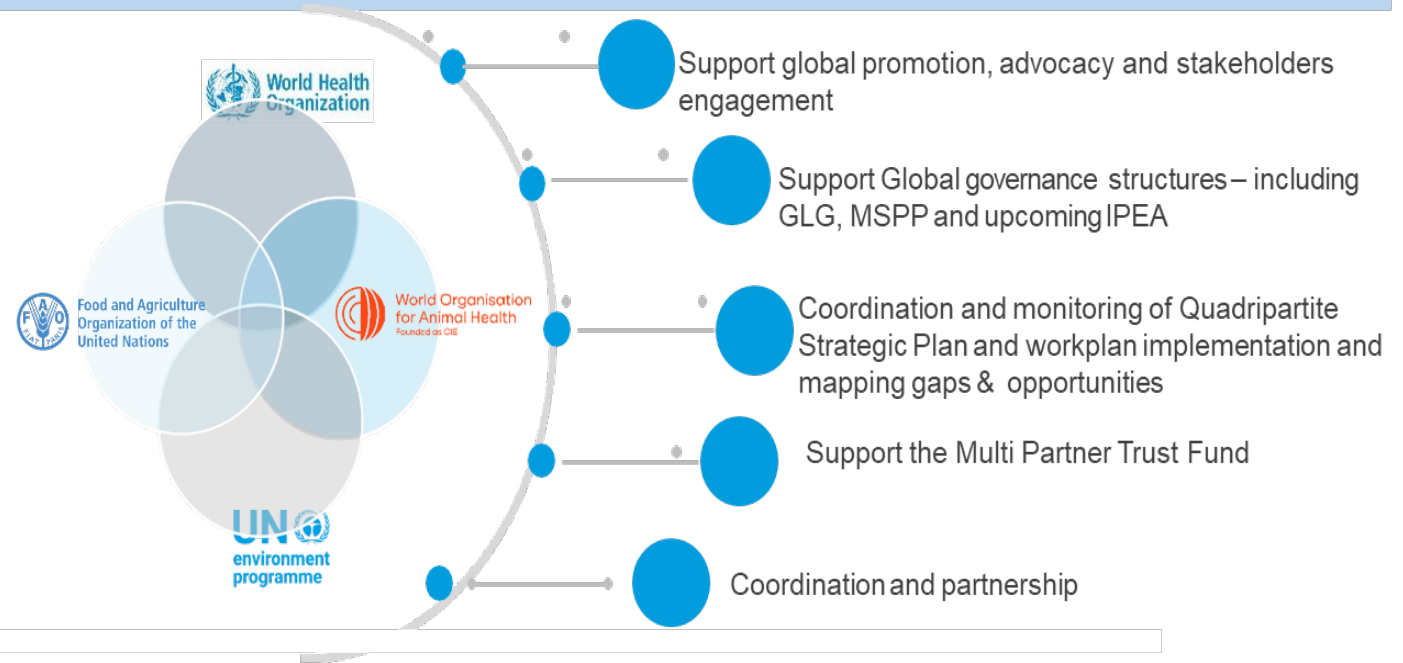
- Prioritized research, development and innovation targeting areas of greatest public health needs
- Routine national GLASS AMR and AMU data collection and reporting
- One health Integrated AMR/U Surveillance
- Enhanced Impact measurement
- Monitoring of national and global progress in addressing AMR including thru TrACSS

- AMR One Health Global Governance, Advocacy and Coordination via the Quadripartite Joint Secretariat on AMR
- Support for National AMR Action
- Raising Awareness of AMR – WAAW, WHO Taskforce of AMR Survivors, AMR awareness in policy makers, communities, health workers, youth, schools and media
- Resource Mobilization - 25 countries integrated AMR activities into GF requests, Over 80% of approved initial Pandemic Fund grants addressing AMR, AMR-MPTF supporting 14 LMICs, AMR investment case.

WHO hosts the Quadripartite Joint Secretariat on AMR, a central coordinating mechanism of multisectoral response to AMR



Purpose: Consolidated cooperation between FAO, UNEP, WHO and WOAH, drawing on their core mandate and comparative advantages to address the wide range of needs of the global response against AMR.



Each agency works with constituencies and addresses AMR issues according to its mandate and comparative advantage. The Quadripartite will address areas where joint action is necessary and most impactful.

The WHO 2015 Global Action Plan on AMR and UNGA 2016 Political Declaration have driven the global AMR response



The GAP established the foundations for the work on AMR



2015

2016

Global Action Plan on AMR adopted at the World Health Assembly

UN General Assembly Political Declaration September in 2016

Global Action Plan as blueprint for the Global AMR response

“ The Political Declaration of the 2024 UN General Assembly High-Level Meeting (HLM) on AMR, called on the Quadripartite organizations to ‘Request the Quadripartite organizations, in consultation with Member States, to update the Global Action Plan on Antimicrobial Resistance by 2026 **to ensure a robust and inclusive multisectoral response, through a One Health approach, that aligns with current realities to drive greater impact against antimicrobial resistance, and request the Quadripartite to report biennially on progress made.**



2024

UNGA HLM on AMR
More progress needed at country level



Preliminary elements/suggestions for GAP update



While much of the GAP's content remains relevant, the update will focus on addressing critical lessons, gaps, and new developments, with attention to the following key areas:



- Accountable global, regional, and national AMR governance and coordination mechanisms.



- The environmental dimensions of AMR.



- The role of diagnostics, laboratory capacity, and surveillance systems across human, animal, and plant health sectors.



- The need to reinforce a One Health approach that guides sector-specific strategies.



- Define specific financing mechanisms, workforce development and system-wide strategies for effective implementation.

Updating the GAP-AMR: timeline & engagement



Request in UNGA political declaration: update the GAP to ensure a *robust and inclusive multisectoral response, through a One Health approach, that aligns with current realities to drive greater impact against antimicrobial resistance*

[Q4 2024 – Q2 2025]	[Q2 – Q3 2025]	[Q2 – 2025]	[Q3 2025]	[Q1 2026 – Q4 2027]
 Consultation 1: Key content, evidence and inputs	 Drafting the Updated GAP	 78th WHA Director-General Report on AMR and request for GAP update	 Final consultations and revisions	 Adoption and Endorsement

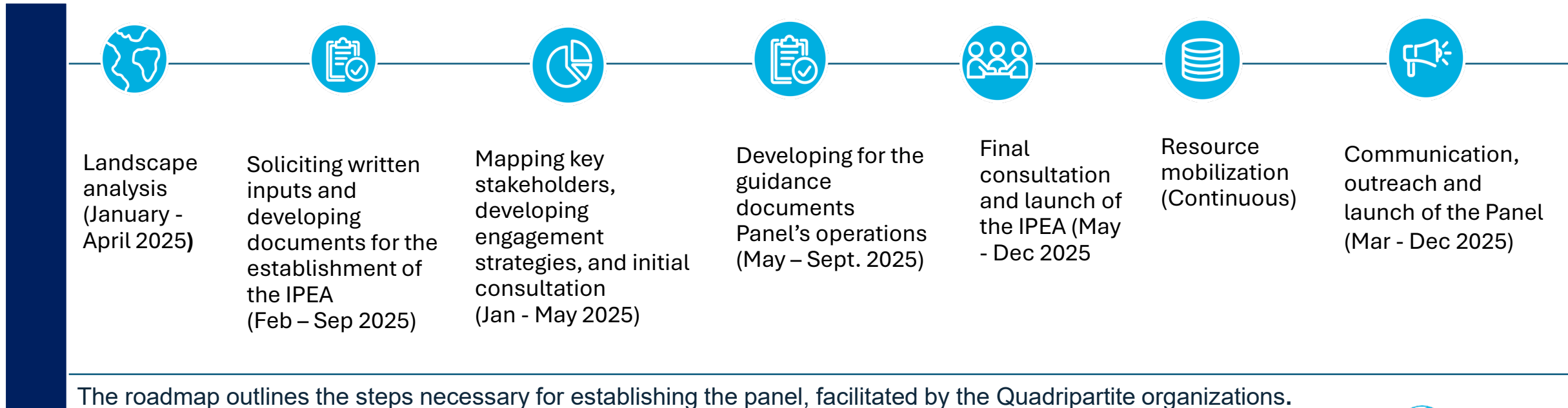
*Timeline subject to change deepening on the governing bodies resolutions.



Establishment of the Independent Panel for Evidence for Action against AMR (IPEA)



30. Invite the Quadripartite organizations to establish an independent panel for evidence for action against antimicrobial resistance in 2025 to facilitate the generation and use of multisectoral, scientific evidence to support Member States in efforts to tackle antimicrobial resistance, making use of existing resources and avoiding duplication of ongoing efforts, after an open and transparent consultation with all Member States on its composition, mandate, scope and deliverables;





Conclusion

- 2024 commitments for accelerated action to address AMR (WHA, UNGA)
- WHO is supporting countries to implement strategic & operational priorities to address drug-resistant bacterial infections, & with Quadripartite to respond to requests in UNGA declaration
- Evolving context & challenges for countries & for WHO, especially funding
- Upcoming WHA: DG progress report, AMR agenda item and formal request for GAP update
- Upcoming MS & stakeholder engagement in GAP & IPEA



Thank you

