

# Time for a Treaty? ReAct Reports on Second Consultation on Global Development & Stewardship Framework to Combat AMR

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Last week, the **Second Consultation of Member States and Partners on the Global Development and Stewardship Framework to Combat Antimicrobial Resistance (AMR)** took place. Like the [last meeting](#) in November 2017, non-state actors were invited to participate in the first of the meeting, while discussions between Member States on the second day was held behind closed doors. ReAct - Action on Antibiotic Resistance represented Health Action International (HAI) at the meeting.

Since the last meeting, two main changes had been made to the [consultation document](#). First, the tripartite of World Health Organization (WHO), Food and Agricultural Organization (FAO), and the World Organization for Animal Health (OIE) had become a quadripartite with the addition of United Nations (UN) Environment—and the inclusion of Chapter 5 on the environment. Second, a separate chapter was written with concrete propositions for a treaty on AMR (Chapter 2). This became one of the main topics discussed during the meeting.

ReAct intervened on [Chapters 1 and 2](#), [Chapters 3, 4 and 5](#), and on [Annexes I and II](#).

## THE PROCESS SO FAR

This process began in the UN Political Declaration on AMR in 2016, which called upon “the WHO, together with the FAO and the OIE, to finalise a global development and stewardship framework, as requested by the World Health Assembly in its resolution 68.7.” The AMR Secretariat at WHO is working hard to prevent overlap with the work of the [Inter-Agency Coordination Group \(IACG\)](#) on AMR, set up by the UN General Assembly (UNGA) . The IACG is not Member State-led, but a group comprised of representatives of some UN agencies, international organisations, and individual experts also working on these issues towards the 73rd UNGA in 2019.

In both processes, the WHO AMR Secretariat, Member States (including Ethiopia and Ghana)—along with ReAct and HAI—noted that input from lower- and middle-income countries (LMICs) had, so far, been minimal. Low response levels could lead to an agreement that is not carried out by all States. HAI and ReAct noted that “the world’s collective response to antibiotic resistance will only be as strong as the weakest healthcare

delivery and food production system will allow.”

## **STEWARDSHIP: WORK CANNOT BEGIN DUE TO A LACK OF FUNDING**

Adequate and sustainable financing from the international community is essential for effective global governance, but is lacking. Only the [Fleming Fund](#) currently exists to fund implementation of National Action Plans. Representatives from Tanzania noted that even very basic AMR surveillance is not in taking place due to a lack of funding. They stated, “there is an assumption that we are all at the same level of surveillance. If that element is not taken care of, we have a challenge in adopting antimicrobial stewardship.”

## **RESEARCH AND DEVELOPMENT OF NEW ANTIBIOTICS: NO AGREEMENT YET**

As ReAct and HAI, we were glad to see that principles of the UN Political Declaration on AMR from 2016 are at the core of this framework—namely that research and development (R&D) should be “needs driven, evidence-based and guided by the principles of affordability, effectiveness and efficiency and equity” and “delinking the cost of investment in R&D from the price and volume of sales.”

Member States were not moving towards agreement on a global framework on R&D, and the topic was somewhat avoided during the first day of discussions.

The current draft of the framework acknowledges the need for applied and interventional research. This balances the discussion on the need for R&D on health technologies. However, there is room for further emphasis on the need to include research on innovation of practice across healthcare delivery and food production sectors, as well as the environment. Member States were not moving towards agreement on a global framework on R&D, and the topic was somewhat avoided during the first day of discussions.

## **ENVIRONMENTAL COMPONENT IS STARTING UP**

The inclusion of UN Environment was applauded, but Member States agreed that UN Environment still needs to be fully and formally included on an equal basis, and the environmental component still needs more work. WHO Director General, Dr Tedros, argued that we need to move from a Tripartite+ to a quadripartite. UN Environment, that only just entered the field of AMR, is currently working on a report to further develop its work in this field.

## **TIME FOR A TREATY?**

Much of the discussion at and around the meeting was on the need for a treaty. Dr Peter Beyer, Team Lead for Intellectual Property and Public Health at WHO, presented the various options possible through the mechanisms within the Tripartite+ organisations, as well as the pros and cons of binding and non-binding options. Member States expressed

varied opinions, often agreeing on a quicker non-binding option, and a binding option for the long term.

While discussions were mostly on the work towards a treaty and its form, the substance of such a treaty was little discussed. Also, the financing mechanisms needed to implement the global framework were left open. HAI and ReAct hope and believe that it is important these discussions are held in plenary soon to push discussions forward to a truly global agreement and action.