THE PRESIDENT
OF THE
GENERAL ASSEMBLY

29 March 2021

Excellency,

Further to my letter dated 15 March 2021 regarding the High-level Interactive Dialogue on Antimicrobial Resistance (AMR), to be held on Thursday, 29 April 2021 in the General Assembly Hall, I have the honour to circulate a concept note and a preliminary programme.

The high-level meeting will consist of an opening segment, followed by four interactive panels and a closing segment. The four interactive panels will: (i) review the AMR issue in the context of the COVID-19 pandemic, (ii) take stock of global progress on AMR, (iii) assess national level progress on AMR, and (iv) discuss sufficient and sustainable AMR financing.

Due to the interactive nature of the discussions, there will be no pre-established list of speakers for the high-level meeting. Delegations will be invited to request the floor to pose a question to the panelists by pressing the microphone button at their desks in the General Assembly Hall. To ensure the widest possible participation in the interactive dialogue, interventions should be brief and concise, and no more than two minutes.

For further information on the meeting, you may contact my Senior Advisers, Mr. Shaoxuan Liu (shaoxuan.liu@un.org) and Ms. Toni-Shae Freckleton (toni-shae.freckleton@un.org).

Please accept, Excellency, the assurances of my highest consideration.

Volkan BOZKIR

All Permanent Representatives and
Permanent Observers to the United Nations
New York

HIGH-LEVEL INTERACTIVE DIALOGUE ON ANTIMICROBIAL RESISTANCE (AMR)

29 April 2021, United Nations Headquarters, New York

Concept Note

BACKGROUND

In September 2019, the UN high-level meeting on universal health coverage (UHC) adopted a political declaration[1] which called for a discussion on AMR during the seventy-fourth session of the General Assembly. Originally scheduled for March 2020, this High-Level Interactive Dialogue has been rescheduled for April 29, 2021 after being postponed due to COVID-19.

> *"Enhance cooperation at the national, regional and global levels to address antimicrobial resistance, using an integrated and systems-based one-health approach, including through health system strengthening, capacity-building, including for research and regulatory capacity, and technical support and ensure equitable access to affordable, safe, effective and quality existing and new antimicrobial medicines, vaccines and diagnostics as well as effective stewardship, as antimicrobial resistance poses a challenge to achieving universal health coverage, noting the work of the ad hoc inter-agency coordination group on antimicrobial resistance and its recommendations as contained in the report of the Secretary-General on antimicrobial resistance, and look forward to the discussion thereof during the seventy-fourth session of the General Assembly, taking into account World Health Assembly resolution 72.5 of 28 May 2019."*

Antimicrobial Resistance (AMR) occurs when bacteria, viruses, fungi and parasites change over time As a result of drug resistance, antibiotics and other antimicrobial medicines become ineffective and infections become increasingly difficult or impossible to treat- increasing the risk of disease spread, severe illness and death.

The COVID-19 pandemic has shown the ease with which infections can spread, threaten global health security and destabilize economies, lives and livelihoods. AMR is a rising pandemic and challenges the effective delivery of the Sustainable Development Goals (SDGs). Currently, at least an estimated 700,000 people die each year due to drug-resistant diseases. If no action is taken, drug-resistant diseases could cause 10 million deaths each year by 2050 and damage to the economy as catastrophic as the 2008-2009 global financial

[1] General Assembly Resolution 74/2: Political declaration of the high-level meeting on universal health coverage https://undocs.org/en/A/RES/74/2

crisis; and by 2030, AMR could force up to 24 million people into extreme poverty[2]. As a present and growing pandemic, AMR may be considered a central part of future pandemic preparedness.

Rising levels of AMR are making infections in humans, animal and plants harder to treat and threatening recent gains in key areas of global health, food security, economic growth, and development. COVID-19 has exacerbated inequalities and AMR will also drive inequalities between countries and communities. No health system will be sustainable without access to affordable and effective antibiotics.

Although antibiotics are not recommended for majority of the COVID-19 patients, many patients are nevertheless receiving antibiotics. Such increased use of antibiotics, coupled with disruption of health care services such as TB, HIV and malaria treatment and vaccination, may increase the risk for antimicrobial resistance.

Much of what needs to be done to tackle AMR is part of overall good public, animal, and ecosystem health and would respond to the UN's calls to build back better from COVID-19 with a sustainable and inclusive recovery. Strengthening WASH provisions, biosecurity measures in animal rearing and along the food chain, as well as the supply of first line medicines, all have huge co-benefits beyond tackling AMR. There are, however, some AMR specific actions where focused action on AMR is required, including data collection, multisectoral coordination and regulations to enforce and manage the supply and use of quality antibiotics for human, animal and plant health, along with environmental controls to prevent pollution from antibiotic residues and limit the transmission of resistant organisms.

In recent years, there has been good progress on tackling AMR but there is an urgent need to scale up action in all relevant sectors as we build back from COVID-19 and build a sustainable future for people, animals and the planet.

In May 2015, the World Health Assembly adopted a Global Action Plan on AMR, also adopted by the Food and Agriculture Organization (FAO) and World Organisation for Animal Health (OIE). In September 2016, the first ever UN high-level meeting on AMR saw member states adopt an ambitious political declaration.

In May 2019, the UN Secretary-General (SG) issued his report, "Follow-up to the political declaration on the high-level meeting of the General Assembly on AMR". This took stock of progress and critical challenges at national, regional, and global levels; and identified five critical shifts focused on urgency, a One Health approach, stakeholder engagement, implementation of national action plans (NAPs), and resource mobilisation. The report requested that a Tripartite Joint Secretariat be established to implement the IACG recommendations. Also, in May 2019, the World Health Assembly, FAO Conference, and OIE

[2] http://documents1.worldbank.org/curated/en/323311493396993758/pdf/final-report.pdf

General Session adopted resolutions which called for stronger actions at all levels to tackle AMR and the establishment of the Tripartite Joint Secretariat.

In November 2020, the One Health Global Leaders Group, co-chaired by the Prime Ministers of Bangladesh and Barbados and including representatives from all sectors government, civil society, foundations and the private sector, was launched to scale up attention and advance political action on the urgent challenge posed by antimicrobial resistance.

Welcomed by the General Assembly in the Global Health and Foreign Policy Resolution of 2020, the Global Leaders Group aims to develop and work towards a shared global vision and goals on AMR, including by strengthening global cooperation and engagement, advocating for sustainable investment for research, development and access to antimicrobials, and prioritising the implementation of National Action Plans in the countries that need them most.

OBJECTIVE

The General Assembly High-Level Interactive Dialogue on Tackling AMR is an important opportunity to strengthen political commitment, take stock of progress, recommit to actions, and build back better from COVID-19 by agreeing further practical steps that can effectively address challenges to tackling AMR as part of future pandemic preparedness through a One Health approach while supporting the delivery of the SDGs.

PROGRAMME

10:00am-10:30am	**Opening Segment**
10:00am – 11:45am	**Panel 1: AMR in the context of COVID-19** AMR – referred to as a 'silent tsunami' – has the potential to be the next global health crisis and has already affected our response to COVID-19. As the world grapples with the devastating impacts of the pandemic and looks towards the future, this is a critical opportunity to include AMR in our recovery. This includes and the need to apply the 'One Health' approach to build back better and achieve the SDGs, including SDGs 1, 3, 5, 8, 10 and 12, and especially for people living in LMICs, and in vulnerable situations.
11:45am-1:00pm	**Panel 2: Overview of global progress on AMR and vision of the Global Leaders Group** Overview of the current global progress including work of the Tripartite – WHO, FAO and OIE on AMR, recommendations by the Inter Agency Coordination Group (IACG) on AMR, mapping of global commitments to date, and presentation of the One Health Global Leaders Group vision

3:00pm-4:15pm	**Panel 3: Tackling AMR at country level** Case studies of AMR national action plan (NAP) design and implementation; linking AMR to development work e.g. data/surveillance, SDG indicator on AMR, and UN development cooperation frameworks.
4:15pm-5:30pm	**Panel 4: Ensuring sufficient and sustainable AMR financing** Discussions regarding the current state of financing; needed investments in strengthening health systems, and in the research and development of new of new drugs to address the lack of new classes of antibiotics currently in the pipeline; an overview of the work of the AMR multi-partner trust fund; ensuring agency-specific AMR work funding; and sharing of best practices and innovative solutions
5:30pm-6:00pm	**Closing Segment**

OUTCOME

- **Presidential Summary** will be prepared and circulated to Member States