Political leadership at the country level in response to the growing threat of antimicrobial resistance (AMR) and the role of young people in the response were the focus of discussions at an event hosted by the Global Leaders Group (GLG) on AMR on the sidelines of the Commonwealth Heads of Government Meeting in Kigali, Rwanda, on June 23, 2022. More than 80 Commonwealth Heads of State, government ministers and officials from a diverse range of sectors, representatives of international organizations and youth advocates participated in the meeting. The event was moderated by Dr Chris Fearne, GLG member, Deputy Prime Minister and Minister of Health of the Republic of Malta, who thanked the government of Rwanda for its support in holding the event and the Quadripartite Joint Secretariat on AMR for its efforts, noting the importance given to this issue by the Quadripartite organizations, the Food and Agriculture Organization of the United Nations (FAO), the United Nations Environment Programme (UNEP), the World Health Organization (WHO) and the World Organisation for Animal Health (WOAH). Speaking for the host country, Dr Tharcisse Mpunga, Minister of State in charge of primary health care in the Ministry of Health of Rwanda, noted that “AMR undermines the successful prevention and treatment of an increasing range of bacterial, viral and fungal infections that have a significant impact of public health, food security, economies, livelihoods, animals and the environment.”

**Global cooperation but local solutions**

Moderator of the event, Dr Chris Fearne, noted that AMR is already directly responsible for 1.3 million deaths per year, but is likely to get far worse without more urgent action. He emphasized the importance of greater political leadership in the response to AMR - the reason for the creation of the GLG - and urged meeting participants to advocate for the inclusion of AMR on national and international development agendas. He also called for the implementation of national AMR action plans because, he said, “while there is a need for international cooperation, a lot of the solutions to this challenge are local”.

**Health of the nation is wealth of the nation**

The Prime Minister of the Bahamas, H.E. Mr Philip Davis, noted that Commonwealth leaders have an important role to play in advocating for action on major health challenges, many of which are made worse by human activity, as in the case of AMR. He called on meeting participants to bear in mind that “the health of the nation is the wealth of the nation”.

---

**Dr Chris Fearne**
Deputy Prime Minister and Minister of Health of Malta, GLG Member

**H.E. Mr Philip Davis**
Prime Minister of The Bahamas

---

Photos: Clodagh O’Neill
AMR is a political, not a technical matter

Speaking on behalf of GLG Co-Chair and Prime Minister of Barbados H.E. Ms Mia Amor Mottley, who was unable to attend due to illness, the Minister of Foreign Affairs of Barbados, Dr Jerome Walcott, noted that “while AMR is not a compelling acronym, antimicrobial resistance is an issue that should compel us all.” At stake are “our most precious medicines, global food production, plants and the environment, and human livelihoods and economies”, he said, referring to AMR as “a looming crisis, a silent pandemic” and calling for political leadership and action on AMR in every country. “We need political action”, he said. “AMR is not a technical matter. It is political... We also need to engage the private sector. We need to engage young people in the same way that they are engaged in the climate crisis, because it is their future at stake. And we need a response that is adequately financed,” Minister Walcott said. “Please act. Please engage in this issue, and in so doing, help to create a healthier, safer, more equitable and prosperous world.”

AMR transcends national boundaries and socioeconomic divisions

Mr Alan Ganoo, Foreign Minister of Mauritius, noted that AMR is a growing threat to global public health that transcends national boundaries and socioeconomic divisions. “We are fully alive to the fact that AMR is a multifaceted problem of crisis proportions with significant health, economic and human implications”, he said, noting that in 2019-2020 Mauritius reported having among the highest prevalence of multi-drug-resistant organisms in its ICUs in the world. “We fully support the GLG in its efforts to scale up international action and coordination in promoting appropriate antibiotic use”, said Minister Ganoo, “and we will work further together in promoting a One Health approach.”

AMR increases risk of poverty and inequality

Dr A.K. Abdul Momen, Foreign Minister of Bangladesh, spoke on behalf of GLG Co-Chair and Prime Minister of Bangladesh H.E. Ms Sheikh Hasina, expressing her gratitude for the leadership of her fellow GLG members. He noted that the misuse of antibiotics and other antimicrobials in humans, animals and plants was accelerating the development and prevalence of AMR and increasing the risk of future pandemics. Calling for action on AMR that is integrated across the Sustainable Development Goals, he emphasized the cascading effects of AMR on human and animal health, food systems, livelihoods, the economy and increased risks of poverty and inequality. Concrete actions that governments must take include regulating the prescription, sale and marketing of antimicrobials, surveillance and ensuring access to innovation. Minister Momen also emphasized the importance of breaking institutional silos and working transversally across governments, international organizations, civil society and the private sector in a whole-of-society approach. “Since AMR has emerged as another substantial threat to humanity”, he said, “we need committed, coherent actions for an accelerated response to secure our common future from drug resistant diseases.”
Quadripartite commitment to support countries reiterated

Speaking on behalf of the Quadripartite partner organizations (FAO, UNEP, WHO and WOAH), Dr Tedros Adhanom Ghebreyesus, Director-General of WHO, thanked the governments of Rwanda and Malta and the GLG for bringing Commonwealth leaders together to discuss the pressing challenges of AMR. He noted that in our modern industrialized world, a fundamental truth has too often been pushed aside: that the health of humans, animals and our environment are intimately connected. “The growing threat of AMR”, he said, “threatens to send us to back the time before antibiotics when even a routine injury could kill.”

Dr Tedros emphasized that we can only truly address the major health challenges of our time with a One Health approach, and as COVID-19 has demonstrated, shared global threats require a shared, multisectoral response. That response must include changing practices to protect the antimicrobials we have, and investments in surveillance, research and development for new antibiotics and better approaches to waste management. Dr Tedros noted that earlier this year the longstanding Tripartite partnership officially became a Quadripartite with the welcome addition of UNEP. The four organizations recently published a strategic framework for their collaboration on AMR. On behalf of the Quadripartite, he reiterated the organizations’ shared commitment to supporting national One Health responses to AMR, which need to be underpinned by policy and technical frameworks and sufficient institutional capacity and resources.

Unregulated access to antibiotics is a key challenge

Dr Osagie Ehanire, Minister of Health of Nigeria, was asked to identify two specific political challenges in the response to AMR. He said the two key challenges are the uncontrolled and unregulated access to antibiotics in our countries, and the lack of awareness of the consequences of such abuse. Under the national AMR Action Plan established in 2017, Nigeria adopts a One Health approach across human, animal and environmental sectors to create an integrated response, including to improve regulation, strengthen the national agency for food and drug administration and restrict the

Development financing is needed for AMR

 Asked how countries can respond to the challenge of AMR, Ms Khumbize Kandodo Chiponda, Minister of Health of Malawi, highlighted the ongoing need for investment in countries. “We might have good plans on paper”, she said, “but we need funding, and we need sustainability because it is only sustainability that will make a difference in the fight against AMR”. She noted that Malawi is one of the few countries in the African region with a small, dedicated, national budget for AMR. “I’m happy that here we have our WHO DG here, we have other members from other organizations here”, she said. “We need your support in our countries for us to advance the fight against AMR.”
Quality data are needed to strengthen the AMR response

Ms Jo Lomas, UK Commonwealth Envoy, was asked how the Commonwealth community can use the tools of data and partnerships in the fight against AMR. She noted that as with many public health and other policy challenges, much better-quality data are needed to inform effective policymaking. Accordingly, the United Kingdom (UK) is investing some of its Fleming Fund, a UK aid program, to support the GRAM project. GRAM is looking at the global burden of bacterial AMR and helping to build the evidence base for action. The data show that AMR is a burden for all countries across the Commonwealth, but is disproportionately affecting some regions, such as sub-Saharan Africa. She reiterated that partnership with the private sector is critical. A strong example of this is the £100 million UK collaboration with Unilever on handwashing, which has reached over 1.2 billion people in 37 countries, including 18 from the Commonwealth.

AMR is a generational catastrophe, but youth are committed to action

Lucy Fagan, Chair of the Commonwealth Youth Health Network, was asked to reflect on how younger generations look at the challenges of AMR and what the Commonwealth Youth Health Network is doing to address these issues. She highlighted the work of the Network to engage in discussions on AMR with young people across 54 Commonwealth countries, increase young people’s understanding of AMR and empower them to share knowledge with their peers, other young people, the community, their parents and colleagues. Ms Fagan emphasized that AMR is a crisis and a generational catastrophe and that if anyone is to worry about AMR then it should be young people, who face a future without effective antibiotics. “Youth engagement is not enough”, she said. “To actively address AMR, we need effective intergenerational partnerships that really bring together young people with other actors to mobilize on this as we have done with other crises, like the climate crisis.”

Health professionals are critical players in the fight against AMR

Professor Michael Borg, Chair of the National Antibiotic Committee of Malta, was asked how he would see professional health care workers contributing to the fight against AMR at a local level. He responded that health care professionals and their associations are key stakeholders in efforts to address AMR. They are the ones who are the most effective in convincing their peers, patients and the general public about the real threat that AMR poses as well as the need to take action. He shared the experience in Malta, where the efforts of numerous health care professionals - with effective support from policy and decision makers - managed to achieve an 80% reduction in life-threatening bloodstream infections caused by MRSA.