
Chair: H.E. Mia Amor Mottley, Prime Minister of Barbados

Participants: Dr Hamad A. Al-Batshan (Saudi Arabia); Ms Tamara van Ark (Netherlands, Day 1 only); Prof. António Correia de Campos (Portugal); Prof C. O. Onyebuchi Chukwu (Nigeria); Dr Guilherme Antônio da Costa Júnior (Brazil); Prof Dame Sally Davies, (UK); Dr Maggie De Block (Belgium); Dr Christopher Fearne (Malta); Mr Jean-Christophe Flatin (US); Ms Grace Fu (Singapore); Prof. Julie Gerberding (US); Ms Lena Hallengren (Sweden, Day 1 only); Ms Sunita Narain (India); Ms Aminata Mbengue Ndiaye (Senegal); Mr Yasuhisa Shiozaki (Japan); Ms Dechen Wangmo (Bhutan, Day 1 only); Dr Jeffrey Scott Weese (Canada); and Prof Lothar H. Wieler (Germany).

Ex-officio: Ms Inger Andersen (UNEP); Dr Qu Dongyu (FAO); Dr Monique Eloit (OIE) and Dr Tedros Adhanom Ghebreyesus (WHO).

Apologies: Prof Anna Y. Popova (Russia); Prof Sir Jeremy Farrar (UK); Ms Sussan Ley (Australia).

Absent: Dr Hasan Mohammed Abbas Al-Temimi (Iraq).

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Process of the Meeting: The first official meeting of the Global Leaders Group (GLG) on Antimicrobial Resistance (AMR) was held virtually on May 4 and 5, 2021 (14:00-16:00 Central European Time).

The meeting was chaired on both days by H.E. Mia Amor Mottley, the Prime Minister of Barbados and co-chair of the GLG. H.E. Sheikh Hasina, Prime Minister of Bangladesh and co-chair of the GLG, provided opening remarks in a pre-recorded video message. The Directors-General of FAO, OIE, WHO and the Executive Director of UNEP spoke at the opening of the meeting. Ms Lena Hallengren, Minister of Health and Social Affairs of Sweden, chaired the meeting during a period when Co-Chair H.E. Mottley was temporarily unavailable on Day 1. During the meeting, Co-Chair H.E. Mottley welcomed Dr Julie Gerberding, Executive Vice President of Merck, who replaces Kenneth Frazier as a GLG member following his departure as CEO of the company.

The agenda of the meeting covered four areas: (1) Action Plan of the GLG 2021-22; (2) Follow-up on the UN General Assembly High-level Dialogue and Call to Action on AMR; (3) Mapping of key opportunities for GLG engagement and influence; and (4) GLG communications strategy. The first two agenda items were discussed during the first day (May 4) of the meeting and the latter two on the second day (May 5). Background papers with one-page summary sheets were provided for each agenda item in advance of the meeting.

GLG members who co-facilitated the development of the draft Action Plan of the GLG representing the different sectors (Dame Sally Davies; Ms Sunita Narain; and Dr Scott Weese) introduced the agenda item for the meeting and described the prioritisation process used to further refine the activities that were discussed during the inaugural meeting of the GLG. GLG members acknowledged the sound progress in the development of the action plan and appreciated the role of the co-facilitators, the technical teams and the Secretariat.
The following key issues were discussed during the meeting:

A. Rolling GLG action plan for 2021-2022

1. Agreement on the six priority areas for GLG action: The GLG technical discussion sessions in late March and early April resulted in six defined priority areas in the context of a One Health approach: sustaining political action; transforming systems; improving surveillance and monitoring; mobilization of internal and external financial resources; increasing effective and affordable innovations and their equitable access; and understanding environmental dimensions of AMR. The GLG discussed the outcomes, key performance indicators, key deliverables and key activities of the priority areas identified and provided specific comments for each area, which will be considered in the revision of the rolling action plan. The GLG affirmed that further technical discussions are needed to finalize priorities related to transforming systems and environmental dimensions of AMR so that concrete actions are identified for the GLG to act on. The GLG noted that the technical discussions should seek clarity and consensus on issues raised including antimicrobial use in food systems and ensuring that a One Health approach is reflected in key deliverables and actions. GLG’s environmental actions should consider affordable solutions including prevention efforts that help to mitigate AMR transmission. It was suggested that global genomic surveillance of AMR integrated with all relevant pathogens is explored, since it would have value for AMR and beyond. The Secretariat will organize further discussions for the expedited finalization of the action plan.

2. Build bridges across One Health sectors with urgency and ambition: It was emphasized that the Action Plan will ensure coherent multisectoral engagement on AMR across the One Health spectrum as well as increase the level of ambition to implement the different global commitments on AMR and ensure that prevention is a hallmark of efforts across all sectors to minimize the need for antimicrobials. It was underlined that more needs to be done faster and together.

3. Sustainable financing is critical: It was recognized that the lack of sustainable financing for the implementation of national action plans as well for research and development activities across all sectors is a critical limiting factor of progress and needs to be prioritized. Dialogue with Ministers of Finance and exploring all upcoming opportunities for innovative internal and external financing sources as the world builds forward after the COVID-19 pandemic should be pursued to resume progress towards the Sustainable Development Goals, including universal health coverage.

4. Bolster key performance indicators and accountability: The GLG agreed on the need to define mechanisms for tracking progress of its prioritized actions and key performance indicators. It was suggested that a dashboard could be created to regularly monitor and
report on the performance of the GLG in each of the priority areas. The issue of if and how the GLG can hold stakeholders accountable was also mentioned, as well as how the GLG can use specific quantified indicators and targets to advance sustained political action for impact.

B. Follow up on the Call to Action of the UN General Assembly High-level Dialogue on AMR

5. **GLG supports the Call to Action:** The High-Level Interactive Dialogue on AMR was convened by the President of the UN General Assembly on April 29, 2021. The Dialogue provided an opportunity to share the vision of the GLG through a dedicated panel discussion. Five of the 19 articles of the Call to Action acknowledge the role of GLG in mobilizing political action and global coordination. The GLG reiterated its support and commitment to the content of the Call to Action and to advocating for its implementation across all sectors.

6. **GLG will champion the Call to Action:** GLG members discussed different approaches and expressed commitment to reach out to the different sectors to champion the Call to Action with tailored messages including Heads of State and government, regional political and economic structures, development agencies, financial institutions and influential non-governmental organizations.

C. Mapping of opportunities for engagement and influence

7. **GLG will prioritize political structures for tangible action:** Political momentum and political environments should be considered in further prioritization of upcoming events and opportunities for engagement. The G7 and G20 were highlighted for discussion during the meeting. The GLG recognized that in recent years G7 and G20 leaders have indicated that they will explore opportunities to respond to the increasing threat of AMR. It was agreed that the GLG will engage with these political structures for more ambitious and sustained commitment for tangible action on AMR. It was agreed to prioritize G7 in light of the upcoming leaders summit in the UK.

8. **GLG will use key opportunities to build and sustain momentum:** GLG members discussed key upcoming political engagements and better linking AMR with key areas on the global agenda including climate change, science and economic issues. Other suggestions included: the need to find ways of engaging highly populated countries; the importance of making links between AMR and COVID-19 recovery plans; development of a social media strategy; and the importance of individual GLG members leveraging influence in their respective sector and regional fora. GLG members provided their specific commitments, which will be reflected in the internal document to be finalized by the Secretariat.

9. **GLG requires disruptive and uncomfortable engagement in light of global inequalities:** The GLG noted the powerful intervention of H.E. Ms. Mottley in which she drew a comparison between global COVID-19 vaccine inequity and the impending dual threat of AMR and climate
change. This calls for disruptive and uncomfortable engagement of the GLG to challenge and change current systems.

D. Communications strategy

10. **Communications Strategy should align with the GLG action plan:** GLG members provided their input on the draft outline of the GLG communication strategy that should be aligned with the GLG action plan. Specific suggestions were shared for inclusion into the strategy in which GLG can influence including engagement with youth, celebrities and the general public for popular sensitization on AMR. It was agreed to establish a GLG communication team composed of communication focal points of the GLG members or their institutions to be coordinated by the GLG Secretariat with the mandate to advance GLG communications.

E. Other items

11. **Way of working:** The GLG appreciated the approach used for the action plan development using technical working group discussions organized by the GLG Secretariat as a sound model that enhances participation and transparency and can be used for future efforts. / END