Creation of an Evidence Panel for Action against AMR

A Wellcome Policy Note

Background

In May 2024, Wellcome published our recommendations for action at the September 2024 UN High-Level Meeting (HLM) on AMR. These draw on our experience over the last decade as the world's largest funder of research into drug-resistant infections, as well as analysis of what has successfully driven sustained action in other areas of global health.

Central to these recommendations is our support for the creation of a scientific evidence panel to guide national and global action on AMR.

Core function of a panel

An evidence panel would guide more effective global and national action on AMR by helping governments make sense of the dynamic and growing body of evidence on the development, spread and control of drug resistance. In doing so, it would encourage better political prioritisation of action on AMR, strengthening decision-making by national and global bodies across multiple sectors. It would also provide a valuable basis for independent stocktaking of progress in the global response to AMR.

By focusing attention on the global challenges of AMR in this way, it will act as a champion for progress, highlighting gaps and inequities in the global response and encouraging more effective action to correct these.

Design considerations

The current zero draft of the HLM political declaration proposes formation of a panel and seeks to set a timeframe for its establishment. However, it is not clear that there is yet alignment between member states, the quadripartite, and the wider AMR community on core design characteristics and principles of the panel.

For the panel to achieve the desired impact, we believe that member states need to consider certain key aspects of the scope, governance, and composition. Some of these issues need to be discussed between member states as part of political negotiations leading up to the HLM. Many of the more detailed design questions, though, will need to be more thoroughly explored as part of implementation discussions after the HLM.

Below, we make some high-level recommendations about core aspects of the Panel's design.

Scope:
To be effective, the panel needs to be able to synthesise and advance the evidence base on AMR across the One Health spectrum.

This should support effective prioritisation and policy choices at both a national and global level and complement and enhance existing work of the quadripartite. It should also identify evidence gaps and, in doing so, inform research priorities for the research community and funders. While its primary role should be on synthesis of evidence created by others, it should also have a defined remit to undertake or commission novel analysis or modelling where necessary.

The panel should play a central role in advising how global and sectoral progress targets and indicators are set for the response to AMR. It could also help inform national-level targets through providing evidence to member states.

The scope of the panel should complement existing advisory bodies in AMR and other areas of public health concern. It should avoid duplicating existing technical and operational guidance and norm-setting functions held by the quadripartite (e.g. the WHO's ownership of the Priority Pathogens List, or AWaRe guidance). Additionally, whilst the Global Leaders Group (GLG) should be guided by the outputs of the panel, there should be a clear distinction between the panel's technical role and the political advocacy of the GLG.

Governance:
The model of an intergovernmental panel of the UN should be explored that draws a clear mandate from member states.

While the panel could be established by the members of the quadripartite, and a secretariat could be hosted within one of them, its accountability should be directly to member states. It should establish national-level AMR focal points for its work, with a transparent process for the acceptance by member states of recommendations and conclusions from the panel. This should be designed in such a way as to maintain the scientific integrity and independence of the panel's work.

As a core function, the panel should provide regular (at least biannual) high-level summaries on global progress and future prioritisation, but there should be scope for member states to request guidance on particular topics. In addition, the panel should be able to provide guidance to the research community on where it sees evidence gaps and specific needs for further research.

Composition:
The panel should draw flexibly on experts from a wide range of disciplines and sectors, reflecting its scope.

The panel should broadly reflect the global burden of AMR, and therefore be weighted towards expert representation from LMICs.

While breadth and depth of expertise should be paramount, consideration should be given to whether participating member states play a direct role in nominating members of the panel. Appointment of these members could then be decided by the four Director Generals of the quadripartite agencies.