

Executive summary

On 8-9 September 2025, the AMR Multi-Stakeholder Partnership Platform (AMR MSPP) convened, on behalf of the Quadripartite organizations (FAO, UNEP, WHO and WOAH), the global multi-stakeholder consultations on the zero draft founding document for the establishment of the Independent Panel on Evidence for Action against Antimicrobial Resistance (IPEA), bringing together a diversity of perspectives from governments and intergovernmental organizations, research and academia, civil society organizations and networks, private sector, financial institutions, including philanthropies and resource partners from human, animal, plant, agrifood and environment sectors, and various disciplines, including social, economic, policy and behavioral science, etc. The objective of this participatory and inclusive consultative process was to get stakeholder constructive feedback on the draft founding document of the future panel, helping the Quadripartite organizations refine it and prepare for further discussions with the Member States.

Across four virtual sessions and via written inputs, stakeholders expressed strong support for establishing "..an independent panel for evidence on action against antimicrobial resistance (IPEA) to facilitate the generation and use of multisectoral, scientific evidence to support Member States in efforts to tackle antimicrobial resistance, making use of existing resources and avoiding duplication of on-going efforts, after an open and transparent consultation with all Member States on its composition, mandate, scope, and deliverables¹".

The consultations revealed broad convergence on four overarching important aspects of the panel and namely the need for: (1) ensuring scientific independence, (2) achieving functional clarity and proportional governance, (3) guaranteeing balanced representation and inclusivity across sectors, regions and gender, and (4) focusing on action-oriented outputs that directly inform national and global AMR strategies across sectors. This synthesis consolidates some discussion points and views emerging from both written and virtual consultations with stakeholders.

1. Background

Antimicrobial resistance is one of the most urgent global health threats and development challenges and demands immediate action to safeguard our ability to treat human, animal, and plant diseases, as well as to enhance food safety, food security and nutrition, foster economic development, equity and a healthy environment, and advance the 2030 Agenda for Sustainable Development Goals².

Antimicrobial resistance occurs when bacteria, viruses, fungi and parasites evolve, rendering antimicrobials ineffective against them. The misuse of antimicrobials in public health and agrifood systems further fuels AMR. Moreover, evidence is mounting that environmental drivers play a significant role in the development, transmission and spread of AMR and are linked to the triple planetary crises of climate change, biodiversity loss and pollution. Consequently, infections become harder to treat, heightening the likelihood of disease transmission, illness, mortality and morbidity. AMR is on the rise globally, disproportionally affecting low- and middle-income countries (LMICs), posing a great challenge to the effectiveness of current and new antimicrobials.

The importance of addressing AMR was highlighted at the <u>2016</u> and <u>2024</u> United Nations General Assembly's High-Level Meetings on AMR, which emphasized the need to scale up multisectoral, cross-sectoral and inter-disciplinary efforts and the engagement of all relevant sectors applying the One Health approach.

In 2019, the report of the ad hoc Inter-Agency Coordination Group on AMR (IACG) to the UN Secretary-General (UNSG) called "No time to wait: securing the future from drug-resistant infections" recommended the establishment of an Independent Panel on Evidence for Action against AMR (IPEA) as part of AMR global governance structures, as well as a Global Leaders Group on AMR (GLG) and the AMR Multistakeholder Partnership Platform (AMR MSPP), both of which have already been established.

At the 79th Session of the UN General Assembly in September 2024, countries adopted the <u>Political Declaration of the High-level Meeting on Antimicrobial Resistance</u>. The Declaration invites the Quadripartite organizations to establish an IPEA in 2025 to facilitate the generation and use of multisectoral, scientific evidence to support Member States in efforts to tackle AMR. The Political Declaration further notes the need for open and transparent consultation with all Member States and other relevant stakeholders on its composition, mandate, scope, and deliverables, making use of existing resources and avoiding duplication of on-going efforts.

Effective policymaking relies on robust evidence, yet AMR data are often fragmented across sectors, making it challenging for policymakers to evaluate, prioritize and act on proven solutions. Additionally, significant evidence gaps limit progress and weaken the case for essential and sustainable funding and interventions. Independent panels illustrate the impact of objective, authoritative science-policy bodies in building global consensus and fostering action on complex issues. The IPEA's primary purpose would be to equip Member States with reliable evidence to guide informed policy and funding decisions and to promote high-impact interventions against AMR across diverse contexts.

As part of the establishment process, and following the <u>proposed roadmap</u>, the Quadripartite organizations conducted global multi-stakeholder consultations, convened and hosted by the AMR Multi-Stakeholder Partnership Platform (AMR MSPP), to hear from all stakeholders their views on the composition, mandate, scope, and deliverables of the IPFA.

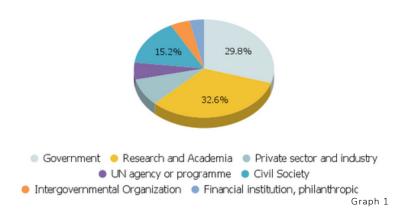
The Quadripartite organizations prepared a zero draft of the founding document, drawing on prior work, including outputs from the <u>Global Leaders Group (GLG) technical session on AMR</u>, <u>multi-stakeholder survey</u>, and <u>analysis of the existing science-policy panels</u>, such as the IPCC and IPBES.

The consultations took place virtually on 8-9 September 2025 within four sessions (morning and afternoon) and were complemented by written inputs submitted via an online form to gather input from a wide array of stakeholders on the zero draft of the founding document of the IPEA.

2. Multistakeholder consultation mechanism and stakeholder profile

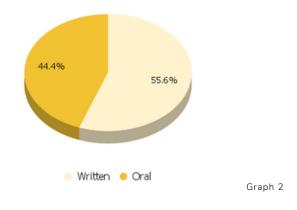
The consultation mechanism was designed by the AMR MSPP to maximize participation from diverse regions and countries, with particular focus on developing countries and underrepresented stakeholder groups. All relevant sectors—including human, animal, and plant health, agrifood systems, and the environment—were involved. Interdisciplinary perspectives, encompassing social, economic, and political, among others, were also actively sought to ensure comprehensive input. The sessions were facilitated by members of the AMR MSPP.





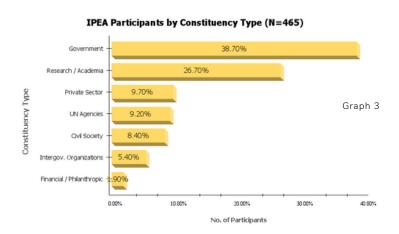
The consultations were open to all stakeholders, both members and non-members of the AMR MSPP, assuring a truly global, inclusive, and participatory process. A total of 1,241 individuals registered for the IPEA consultations, with 522 participants taking part across the four sessions, representing a turnout of approximately 50%. 180 contributions have been received during and after the consultations.

Forms of Contributions in the IPEA Consultations (N=180)



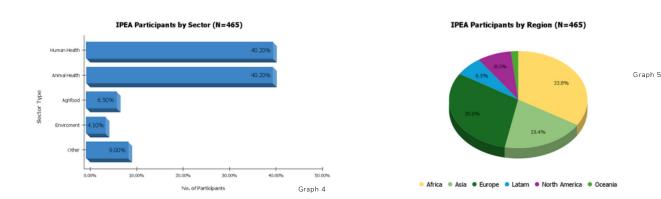
Of these, 55.6% were written submissions and 44.4% were oral contributions shared by participants who intervened during the consultation sessions to provide feedback on the founding document.

Among stakeholder groups, government (38.7%) and research and academic (26.70%) institutions had the greatest engagement, followed by the private sector and Industry (9.7%), UN agencies (9.2%) and civil society organizations (8.4%).



Most participants were from the human health (40.2%) and animal health (40.2%) sectors, together accounting for roughly 80% of all participants. Other represented sectors included food and agriculture (6.5%), environment (4.1%) and other fields (9%), highlighting the multisectoral nature of AMR.

Stakeholders came from all world regions, with the largest share from Africa (33.8%), followed by Europe (30.8%) and Asia (19.4%). The active participation of stakeholders from developing countries was a defining feature of the consultations, reflecting the need for inclusive global engagement and alignment around critical aspects of AMR.



3. Summary of discussions

Stakeholders welcomed the One Health approach embedded in the zero draft founding document and stressed that evidence and knowledge generated by the Panel should cover antimicrobial resistance (AMR) and antimicrobial use (AMU). At the same time, they emphasized the need to have the draft rules of procedure to ensure strong scientific independence, and a nimble governance, with larger Interdisciplinary Expert Committee (IEC) to ensure inclusivity, particularly for developing countries.

3.1. Scientific Independence

Consultations underscored the paramount importance of safeguarding the scientific independence of the IPEA, which constitutes the foundation of its credibility, legitimacy, and authority. Stakeholders emphasized that the Panel's scientific integrity must remain fully insulated from political, institutional, or commercial interference. Participants requested more information about certain elements of the proposed governance arrangements, particularly the size and composition of the Plenary and the Interdisciplinary Expert Committee (IEC), as well as the elements to be included in the draft rules of procedure to be adopted by the Panel once established related to the associated decision-making modalities, including those governing the validation of outputs and the election of experts. Participants stressed that, if not carefully designed, these arrangements could inadvertently compromise the Panel's independence.

It was underscored that the selection of experts should be conducted through open, transparent, merit-based, and competitive processes. Participants expressed that the Quadripartite organizations' role in the panel could remain strictly advisory, ensuring that final decision-making authority resides with the independent scientific body.

Participants further emphasized the critical importance of the principles of scientific impartiality and transparency. They also stressed the need for an interdisciplinary and multidisciplinary approach that incorporates a broad range of relevant disciplines and evidence sources to the composition of the panel bodies. In addition, they highlighted the importance of promoting balanced and equitable representation. Finally, they noted that producing policy-relevant deliverables while ensuring operational efficiency requires robust diversity and inclusion criteria in the rules of procedure. These criteria should encompass gender balance, equitable regional representation, and cross-sectoral expertise across all dimensions of the One Health spectrum. Some stakeholders mentioned that decisions regarding priorities, research questions, and deliverables should remain under the purview of independent experts, rather than intergovernmental or administrative bodies, whereas others had the opposite view.

There was broad convergence on the need to establish a comprehensive conflict-of-interest policy, to be applied to all Panel's elements, to prevent any form of undue influence. Stakeholders further highlighted the importance of implementing robust safeguards to ensure financial integrity, including full transparency of financial contributions, the prohibition of earmarked funding, and systematic due diligence in all partnership arrangements. Such measures were stated to be essential to guarantee that the Panel retains full autonomy in defining its agenda, articulating its findings, and upholding the highest standards of methodological rigour and independence.

3.2. Scope, main functions and deliverables of the Panel

Some stakeholders asked for further precision in defining the Panel's core mandate and stressed that some aspects of IPEA presented in the zero-draft document, such as the main functions, could be further strengthened and better defined:

- 1. **Evidence synthesis and knowledge governance** mapping the global evidence, identifying data gaps, and promoting data accessibility and visibility, especially in developing countries.
- 2. **Frameworks, modeling, and horizon scanning** providing analytic tools to assess policy trade-offs, risks, and long-term projections.
- 3. **Promotion of local research and research capacity-building** supporting national and regional data generation and integrating local knowledge, including community–based organizations, ingenious peoples, etc.
- 4. **Knowledge translation into policy for action** ensuring that complex scientific findings are transformed into practical guidance for policymakers and practitioners.

Stakeholders called for clarity on whether the Panel will generate new evidence or synthesize existing data, cautioning against duplication of ongoing efforts by FAO, UNEP, WHO and WOAH, and other technical agencies and institutions. The prevailing view was that IPEA should serve as a science-policy interface, not a new research institution, assessing, facilitating the generation of knowledge and consolidating existing knowledge into actionable insights.

Some stakeholders mentioned that the Panel should prioritize assessments as its core output, with other functions embedded within the assessment process, and key deliverables should be defined from the outset. Some stakeholders provided suggestions of the outputs, such as annual global assessment reports or a global assessment every two years on the status, trends, and impacts of AMR. They also suggested that outputs should include policy options and be referenced against existing targets, such as those from the UN Political Declaration on AMR commitments. It was mentioned that the Panel's scope should cover the full range of resistance, including antiviral resistance, as well as fungal and parasitic organisms. Scope should recognize the negative impact of AMR on immunocompromised populations, such as the cancer community, and integrate issues like WASH (Water, Sanitation, and Hygiene) in healthcare facilities and animal welfare.

3.3. Governance structure

Some stakeholders highlighted the need to see the draft rules of procedure to better understand the Panel's way of operating as some saw the proposed architecture of the zero draft founding document—comprising a Plenary, Bureau, Interdisciplinary Expert Committee (IEC), ad hoc groups, and a Secretariat—as complex.

Some stakeholders suggested a nimbler structure with clear lines of accountability and defined roles and responsibilities in the draft rules of procedure. There was a broad view that the IEC should have a bigger number of experts as it forms the scientific core or "engine room" of the Panel. Some stakeholders suggested having IEC empowered to undertake assessments and prepare reports independently, while the Plenary should provide strategic oversight rather than direct control.

Participants also sought clarity on decision-making modalities (e.g., consensus or qualified majority voting) and the mechanisms for interaction between governance levels to be defined in the draft rules of procedure. Some requested clear differentiation in the roles between the Secretariat and the Bureau to prevent overlap. Some participants suggested modeling IPEA's governance following the High-Level Panel of Experts on Food Security and Nutrition (HLPE) model.

Plenary

The proposed Plenary, envisaged to comprise eight country representatives from each of the eight UN regional groups, was considered by some participants as complex. Participants widely highlighted the need to see the draft set of documents for the operationalization of IPEA to understand the selection and nomination mechanisms, and the Plenary's role in approving the Panel's work programme and the deliverables produced by the Interdisciplinary Expert Committee (IEC) as it could introduce the risk of politicizing scientific outputs. Moreover, details were requested on term lengths, rotation cycles, and nomination procedures, ensuring equitable representation across human, animal, agrifood, and environmental sectors. Some stakeholders noted that regional disparities in the number of constituent countries could give rise to representation imbalances and clarification is needed regarding accountability mechanisms for the Plenary, and whether its members, including those of the Bureau, should serve in a governmental capacity or as independent scientific experts. Many participants agreed on the approach of the zero draft founding document that the Plenary and Bureau should include policymakers to strengthen the science-policy interface, while the IEC should remain composed of scientific and technical experts.

	While the Plenary is envisaged as open to observers from a broad range of entities, including Indigenous Peoples, local communities, and groups in vulnerable situations, some stakeholders emphasized that the meaningful engagement of non-state actors should be more centrally integrated into the Panel's functioning.
Bureau	Stakeholders highlighted the need for clearer differentiation of the roles and mandates of the Bureau and Secretariat, to avoid any risk of duplication and inefficiency.
Inter Disciplinary Expert Committee (IEC)	The IEC is recognized as the principal scientific engine of the Panel. The proposed composition of six experts representing human, animal, plant, environmental, and social-behavioral sciences was widely recognized as insufficient. Stakeholders suggested expanding the IEC to 10–12 experts to ensure a fully multidisciplinary perspective and a 360-degree approach to antimicrobial resistance (AMR). It was emphasized that the selection process must ensure sectoral, regional, disciplinary, gender, and stakeholder diversity. Also, participants expressed that the rules of procedure require operational clarity regarding the IEC's functions, including defining research priorities, stakeholder engagement for evidence gathering, and the types of knowledge to be considered. It was suggested that detailed terms of reference be developed to ensure the IEC operates with full scientific integrity and independence. The nomination of experts solely by the Quadripartite organizations and their subsequent election by the Plenary was subject to some concerns for potentially risking compromising the Panel's scientific independence and creating a perception of bias. Stakeholders favored a transparent, merit-based selection process through an open call for nominations. Some stakeholders requested further clarity on the relationship between the IEC, ad hoc groups, Bureau, Plenary, and Secretariat, ideally represented in an organizational diagram with defined functions. Some stakeholders demanded a wider array of expertise beyond the core One Health sectors.
Ad-hoc groups	Some participants confirmed as per the zero draft document that these groups should support IEC activities, with clearly defined terms of reference, including expert selection processes, and some suggested that the groups stay in time. Some stakeholders considered that, besides scientists, these groups should also include representatives from the private sector, and civil society to capture diverse knowledge and innovation.

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³ For example, disciplines such as economics, social sciences (e.g., behavioral science, anthropology, sociology), policy translation, animal welfare, engineering, diagnostics, and microbiologists covering all microorganism types (bacteria, viruses, fungi, parasites), traditional and complimentary medicine.

Secretariat	The Secretariat intends to provide administrative and technical support to the Panel. Participants emphasized that its functions should avoid overlap with the Bureau and ensure support across all Panel bodies. Some participants mentioned that terms of reference are necessary to further delineate responsibilities.
Quadripartite role	Quadripartite organizations are referenced as ex officio members of the Bureau and as providers of the technical and administrative support as part of the Secretariat. Stakeholders recommended clarifying their role, limiting involvement to advisory and technical and administrative support, to preserve the Panel's independence.
Operational arrangements	The operational arrangements of the Panel will be included in the set of documents to be approved by the Panel once established. Some participants stressed that clear terms of reference, decision-making processes, and procedures—such as voting by consensus or two-thirds majority—should be specified in the operating rules and procedures to prevent deadlocks and ensure transparent and efficient operations.

3.4. Membership and stakeholder engagement

Representation and inclusivity were consistently identified as critical to the credibility and legitimacy of the IPEA. Stakeholders emphasized the necessity of a transparent and open nomination process that ensures balance across regions, disciplines, sectors, and genders. Engagement with non-state actors—including civil society, youth organizations, Indigenous Peoples, and the private sector—was highlighted as essential to fostering pluralistic and policy-relevant science.

Regional organizations were identified as critical partners to facilitate the participation of developing countries and ensure the contextual relevance of the Panel's work. Inclusivity was further understood in epistemic terms, reflecting the need to value diverse knowledge systems, including traditional and community-based systems. The private sector was recognized as a source of significant data, innovation, and implementation expertise. Moreover, some participants expressed that engagement should encompass contributions to evidence generation, horizon scanning, and scientific assessments. Few participants requested the explicit inclusion of private sector representatives as observers in the Plenary and, where appropriate, within the IEC to incorporate innovation-driven expertise.

At the same time, concerns were raised regarding potential conflicts of interest and the risk of undue influence, which could undermine the Panel's credibility. Accordingly, it was suggested that any private sector participation must be accompanied by clearly defined safeguards, and a formal partnership framework should be enshrined in the Panel's founding documents to ensure transparent, ethical engagement and financial integrity.

Some stakeholders emphasized that civil society organizations (CSOs) are knowledge holders capable of contributing substantively to expert deliberations. It was highlighted that CSOs, often close to affected populations, can serve as a bridge between technical evidence and lived experience. Some stakeholders cautioned that restricting CSOs to observer status risks disconnecting the Panel from communities directly impacted by antimicrobial resistance. Participants underscored that CSOs, youth groups, and Indigenous Peoples are to be recognized as full partners and knowledge holders, with meaningful opportunities to influence the Panel's work. Community engagement was deemed essential by stakeholders to ensure that policies are translated into daily practices and achieve measurable impact. Particular attention was drawn to the low level of awareness of AMR at the grassroots level, especially in developing countries. The Panel is thus called upon to consider mechanisms through which its work can effectively reach local communities and support awareness-raising initiatives.

3.5. Relations with other AMR global governance structures

Stakeholders emphasized the need for a clearly defined relationship between the IPEA and existing global AMR governing structures, particularly the Global Leaders Group (GLG) on AMR and the AMR Multi-Stakeholder Partnership Platform (MSPP) to avoid duplication and fragmentation of efforts.

Some participants proposed that IPEA leverage the AMR MSPP's membership and avoid overlapping with MSPP's knowledge dissemination and sharing work. Some stakeholders mentioned that IPEA's role should focus on generating and synthesizing independent scientific evidence and these could inform the actions of AMR MSPP stakeholders. Furthermore, the GLG can utilize this evidence to guide high-level advocacy and political engagement, ensuring a complementary and mutually reinforcing relationship between the Panel and existing AMR global governance structures.

3.6. Outputs and deliverables

Stakeholders repeatedly called for tangible, high-impact outputs that demonstrate IPEA's value and relevance.

Some participants suggested deliverables such as annual or biannual Global AMR/AMU Assessment Reports summarizing global trends and providing evidence-based policy options; thematic assessments (e.g., AMR and climate change, AMR in conflict zones, gender dimensions of AMU); evidence maps to guide policymakers in identifying priority interventions; benefit-risk analyses of AMR mitigation strategies; policy briefs and dashboards tailored to national decision-makers.

Communication and awareness raising emerged as a cross-cutting issue. Stakeholders urged that IPEA adopts clear strategies to translate complex science into accessible language, combining academic rigor with policy relevance. Few stakeholders proposed IPEA to have a small public communication unit or PR sub-panel to manage outreach and stakeholder relations.

3.7. Monitoring, evaluation, and accountability

Several participants agreed that credibility depends on measurable results and transparent accountability. They called for a robust M&E framework to assess both process and impact: quality and timeliness of outputs, relevance to policymaking, cost-efficiency, and uptake by Member States. Stakeholders proposed that evaluations be publicly available and include independent external reviewers. Tracking mechanisms should link recommendations to policy outcomes, facilitating learning across regions. Accountability was also viewed as multidirectional —experts must be accountable to evidence standards, but Member States should reciprocally commit to using and reporting on evidence-based actions.

3.8. Funding and sustainability

Stakeholders consistently identified financing as a critical determinant of the Panel's work opportunities, impact and independence. The draft financial provisions were considered an important element to be developed as part of the set of documents for the operationalization of IPEA, prompting calls for explicit clarity regarding funding sources, governance, and oversight. There was broad consensus that IPEA should operate under a pooled funding mechanism, combining assessed and voluntary contributions, to minimize the risk of donor influence. Participants considered that all contributions should be publicly disclosed, and any exceptions to the prohibition on earmarked funds should be strictly justified.

Participants emphasized the need for a long-term investment and communications strategy to articulate the Panel's value proposition to donors, ensuring resource mobilization reinforces autonomy while leveraging strategic partnerships. Some stakeholders mentioned that resource mobilization should prioritize efficiency, cost-sharing, and synergy with existing mechanisms. Stakeholders also highlighted the importance of preparing a detailed costing plan for the proposed governance model, recognizing that transparency on financial requirements is essential for the establishment of the Panel.

4. Way Forward

The Quadripartite organizations (FAO, UNEP, WHO and WOAH) and the AMR MSPP express their appreciation to all stakeholders who participated in the global multi-stakeholder consultations — both virtually and in writing — for their invaluable inputs, expertise, and time.

Building upon previous work — including survey results, other consultations such as the GLG technical session, and the global multi-stakeholder consultations hosted by the MSPP — the zero-draft document will be further refined. In addition, a set of supporting documents, including the rules of procedure, the conflict-of-interest policy, and the work plan development process, will be developed and prepared for targeted consultations with UN Member States as the next step in the roadmap.

The consultations with Member States will enable the Quadripartite organizations to further refine the zero-draft founding document, conduct the legal review, and prepare the document for the formal launch of the panel. The supporting documents — including the rules of procedure, the conflict-of-interest policy, and the work plan development process — will integrate inputs from both the multi-stakeholder and Member State consultations and will be finalized and approved by the panel after its establishment.

A high-level launch event will be announced, marking the beginning of the panel's work to provide robust, multisectoral, and interdisciplinary evidence grounded in the One Health approach to support Member States in tackling AMR.

For more information about the roadmap and next steps, please visit the <u>QJS</u> <u>webpage</u>.

For more information and contact QJS website AMR MSPP webpage