On 29 November to 1 December, the World Health Organization held a virtual Special Session of the World Health Assembly. This to discuss the establishment of a new legal instrument - often referred to as a “pandemic treaty”. Purpose is to address some of the many shortfalls in global pandemic preparedness and response that has been exposed during COVID-19 pandemic. A key priority for ReAct is to have antibiotic resistance included in the scope of a new global agreement - fortunately a handful of countries highlighted exactly that.

Among growing concerns over the Omicron coronavirus variant, Member States highlighted during the meeting that a new legal instrument needs to address growing health inequity, gaps and failures in global cooperation, weak health systems, and other critical public health threats – such as antibiotic resistance. Member States decided on an ambitious timeline whereby an intergovernmental negotiating body (INB) would be established and held its first meeting by March 2022. A first draft of a new legal instrument would be developed already by July 2022 and the ambition is to adopt this instrument during the 77th World Health Assembly in 2024.

**Inclusion of antibiotic resistance**

ReAct was pleased to note that antibiotic resistance was brought up in the debate as an important issue to include in the scope of a new instrument by a few countries, such as Sweden, the United Kingdom, and Malta (on behalf of the EU). ReAct has been calling for this since the proposal was first discussed at this year’s World Health Assembly.

Lena Hallengren, Minister of Health and Social Affairs, Sweden, stated:

> "The very real, surging global threat of antimicrobial resistance needs to be seen in the context of preparedness. AMR is one of the greatest health threats of our age. We all face great risks if our antibiotics are no longer effective. Regular medical interventions may be impossible to perform due to the risk of untreatable infections. We can mitigate the risk by acting together and include AMR preparedness in the pandemic treaty."

Lack of equitable, affordable and timely access to health commodities in low- and middle-income countries has been one of the most pressing issues during COVID-19 pandemic. Establishing clear rules to ensure global equitable access to protective equipment and biomedical tools such as vaccines, diagnostics and medicines in the advent of the outbreak of a new pandemic will therefore likely be a central element of a new agreement. With antibiotic resistance – often highlighted as the next global pandemic – it is of course essential that such rules cover antibiotics, and particularly, that it considers the importance of also ensuring stewardship of these medicines in times of crisis.

**Important lessons learned on R&D and access**

The report of the Member States Working Group, prepared before the special session, highlights a number of key topics for consideration when the new instrument is being developed. Equitable access to and distribution of medical countermeasures is at the top of the list. The report also includes issues such as research and development, intellectual property...
and technology transfer. Whether developing vaccines or novel antibiotics, the global Research & Development (R&D) response to the COVID-19 pandemic is a good example of what can be achieved when governments set clear priorities, direction and provide extensive public funding. However, it’s also been clear that unless such innovation is governed for the common good, many people in low-and middle-income countries are excluded from benefiting from its gains. For antibiotics R&D these are important lessons learned, and should be built on to ensure significant global coordination of R&D efforts and equitable and sustainable access to end-products.

**Taking a One Health approach**

Another important point lifted in the report is the need to apply a comprehensive ‘One Health approach’. It is stated that this...

“...also would yield significant benefits for the international community to reduce the risks posed by emerging diseases of zoonotic origin in the future.”

The connections between human, animal, and environmental health has been made clear with the emergence of COVID-19. This is also true for the development and spread of antibiotic resistant pathogens which can develop in the environment, in animals, and/or in humans and spread through the food supply chain and untreated water resources. Hence, preventative efforts to manage bacterial resistance development and spread requires taking a holistic approach, and cross-sectorial political coordination and commitment.

**Placing AMR on the WHO EB agenda in context of pandemic preparedness**

Building on the current political momentum it is important that the efforts now do not become too narrowly focused on addressing “another coronavirus epidemic”, but takes a wider view on pandemic preparedness. Many Member States called for a “whole-of-government” and “whole-of-society” response in their interventions during the WHASS2. This notion should be central to a new legal instrument. The upcoming 150th session of the Executive Board on 24-29 January 2022 is an opportunity to place antibiotic resistance back on the agenda in the context of pandemic preparedness efforts – both as it relates to the revision of the IHRs, as well as in the context of the new legal instrument. The recommendations listed within the first comprehensive review of the current ‘Global Action Plan on AMR’ published in September this year might help guide such discussions on where action needs to be further bolstered.

The COVID-19 pandemic has in many ways exposed the boundaries of current global health cooperation. To achieve a sustainable path forward to address current and future pandemics cornerstones such as transparency, needs-driven research and development, and above all – equity should be at the centre of efforts to establish a new global agreement.

Concluding in the words of Dr. Tedros Adhanom Ghebreyesus:

“There is still a long road ahead.”