Science and Content

Among other things, the UNGA High-Level Meeting Political Declaration,

"30. Invite[d] the Quadripartite organizations to establish an independent panel for evidence for action against antimicrobial resistance in 2025 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 deliverables"

Diversity and Distribution of Resistance Markers in *Pseudomonas aeruginosa* International High-Risk Clones.

Kocsis, B.; Gulyás, D.; Szabó, D. Microorganisms 2021, 9, 359.



Genomic analysis of sewage from 101 countries reveals global landscape of antimicrobial resistance

Munk, P., Brinch, C., Møller, F.D. et al. Nat Commun 13, 7251 (2022).



Learning Lessons

- John Amuasi, Kwame Nkrumah University of Science and Technology (KNUST), Kumasi, Ghana, Bernhard Nocht Institute of Tropical Medicine (BNITM) & University Medical Center Hamburg-Eppendorf (UKE), Hamburg, Germany; Co-Chair, The Lancet One Health Commission
 - Lessons from One Health
- Hannah Hughes, Senior Lecturer International Politics and Climate Change, Department of International Politics, Aberystwyth University
 - Lessons from the IPCC

Science and Content: Questions for discussion

- 1. How should the Panel's agenda be set? Who should prioritize it's to-do list and how?
- 2. How can The Panel be viewed as inclusive and consultative, particularly as there are very many and very many types of AMR stakeholders. What will transparency mean for SPEAR?
- 3. Will the **panel focus** more on curating evidence and promoting gap filling or in ensuring the uptake of evidencebased interventions?

4. What kind of evidence should SPEAR seek out or solicit?

- 1. What data sources should SPEAR consider? How will it close the gap in evidence breadth and depth from low-resource settings that bear most of the AMR brunt? How will it balance the generation of more granular data in data-rich areas with obtaining the most basic data from data poor ones?
- 2. Quite a bit is already known about AMR. How best can the panel synthesize and use existing information rapidly and effectively?
- 3. There are imbalances with data availability across the One Health spectrum, with most available data relevant to human health alone. How should SPEAR address these?
- 5. There will likely be tensions between completeness and speed in the workings of the panel. Should the Panel aim for workings that are highly **robust and inclusive or push towards rapid decision-making**?
- 6. How should SPEAR interface with Panels that have complementary/ overlapping interests and responsibilities to ensure that outcomes are **synergistic and there are no duplications** (as requested by UNGA)?