



Food and Agriculture  
Organization of the  
United Nations



World Health  
Organization



## Antimicrobial Resistance Multi-Partner Trust Fund

Combatting the rising global threat of AMR through a One Health Approach

### Terms of Reference

26 July 2019

Antimicrobial Resistance (AMR) is a rising global threat to human, animal and plant health. It undermines the safety of our food and our environment. Antimicrobials play a critical role in the treatment of human, animal and plant diseases and their use is essential to food production, safety and security as well as to our well-being. Their misuse, associated with the emergence and spread of antimicrobial-resistant micro-organisms, places everyone at risk regardless of income, age and gender. This risk is exacerbated in countries where the regulatory and surveillance and monitoring systems are weak or inadequate for the prevention and control of AMR.

The Food and Agriculture Organization (FAO), World Organisation for Animal Health (OIE) and the World Health Organization (WHO) – collectively known as the Tripartite – have a pivotal role in leading and coordinating the global response against AMR in close collaboration with national governments, the UN system, other organisations as well as key stakeholders including civil society and the private sector. Through coordinated and collective efforts, we can effectively reduce AMR and contribute to achieving the Sustainable Development Goals (SDGs).

The ***Combatting Antimicrobial Resistance through a One Health approach: AMR Multi-Partner Trust Fund*** (AMR MPTF) is a strategic, intersectoral, multi-stakeholder initiative inviting partnership and financing to leverage the convening and coordinating power, mandates and technical expertise of the Tripartite to mitigate the risk of AMR and contribute to the achievement of the SDGs through supporting the implementation of One Health National Action Plans.

The AMR MPTF has been recognized by the United Nations Secretary-General as the mechanism to secure consistent and coordinated development financing to support One Health National Action Plans and Tripartite Workplans.<sup>1</sup>



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<sup>1</sup> [United Nations, General Assembly report, Follow-up to the political declaration of the high-level of the General Assembly on AMR: report of the Secretary-General, A/73/869 \(10 May 2019\).](#)

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## I. Introduction

### *The threat of AMR*

Antimicrobial Resistance (AMR) is arguably the most complex threat to global health security, which threatens to compromise the global community's progress towards the achievement of the Sustainable Development Goals (SDGs).

Misuse and overuse of antimicrobial drugs in human medicine, veterinary medicine and food production has put our future at risk, with few alternative solutions in the pipeline. Without coordinated and accelerated action, the world is heading towards a post-antibiotic era in which common infections could once again kill and routine medical procedures become high risk. Globalization has led to an unprecedented rise in the movement of people, animals and food commodities, providing opportunities for the spread of resistance. Stemming the spread of AMR requires bold and determined global commitment and action.

To ensure that today's cures are available for generations to come, a One Health approach is required to systematically address key challenges that include:

- Responsible use and stewardship, whilst ensuring access to existing and new antimicrobials;
- Universally agreed priorities and mechanisms to foster innovation towards quality and inexpensive diagnostic tests that provide care practitioners with quick and accurate information, as well as quality vaccines and infection prevention tools that are affordable and available to all;
- The transformation of animal husbandry (terrestrial and aquatic) to substantially reduce antimicrobial use whilst boosting agricultural productivity, ensuring food security and safety.

Priority areas for urgent action include:

(1) Ensuring national political engagement and support, organising national budget allocations and scaling up technical capacity for the human, animal and plant health and environmental sectors to accelerate the implementation of One Health National Action Plans (One Health NAPs);

(2) Enhancing the collection, analysis and reporting of comparable high-quality data, in particular by supporting surveillance of resistance and antimicrobial consumption and use, in order to establish baseline estimates and monitor trends;

(3) Strengthening regulatory frameworks to ensure access to safe, efficacious and quality antimicrobials, preventing the production, distribution and consumption of substandard and falsified medical products for humans and animals and prohibiting the use of antimicrobials for growth promotion in the absence of risk analysis;

(4) Improving global, regional and national coordination among all stakeholders and increasing the engagement of civil society and the private sector;

(5) Ensuring sustainable financing from multilateral and bilateral institutions development partners for the implementation of One Health NAPs and research and development;

(6) Providing greater support and incentives for research into and the development of new tools, vaccines, diagnostics and medicines through innovative financing mechanisms.

While there are no AMR specific SDG targets and indicators, sustainable development and AMR are inextricably interlinked. Combatting AMR will help achieve 15 of the 17 SDGs and is crucial to the 2030 Agenda.



The AMR MPTF will support activities that will contribute to mitigating the impact of AMR on the 15 relevant SDGs. In particular, the AMR MPTF will specifically support activities that focus on SDGs related to health, food security, clean water and sanitation, responsible consumption and production, and poverty and inequality, thereby supporting the following SDG targets:

- Target 2.1: By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round.
- Target 2.4: By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, that strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality.
- Target 3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.
- Target 3.d: Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.

## **FAO-OIE-WHO Collaboration: The Tripartite**

The FAO, OIE and WHO - the Tripartite - have been working together since the 1940s to manage and respond to complex health risks that require multi-sectoral and multi-institutional cooperation. Key milestones of the Tripartite are outlined below.

In 2010, the three organizations formally outlined their strategic alignment through ‘The FAO-OIE-WHO Collaboration: Tripartite Concept Note: Sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces’<sup>2</sup>. This Concept Note commits the Tripartite to share responsibilities and coordinate global action for health risks at the animal-human-ecosystems interface. Further to the FAO/OIE/WHO High Level Technical Meeting to Address Health Risks at the Human-Animal-Ecosystems Interfaces, held in Mexico in 2011, three priority areas were identified (antimicrobial resistance, zoonotic influenza and rabies) as priorities for future collaborative action through a One Health approach<sup>3</sup>.

In October 2017, ‘The Tripartite’s Commitment: Providing multi-sectoral, collaborative leadership in addressing health challenges’ reaffirmed the Tripartite commitment to the three previously defined priority areas of work and expanded its One Health collaboration to also include broader health systems strengthening, among others.

In May 2018, the Tripartite signed a Memorandum of Understanding (MoU)<sup>4</sup> to further formalize and strengthen their cooperation, with particular focus on AMR given its growing importance and global health security risk. Following the signature of this MoU, the Tripartite has been working closely with the United Nations Environment Programme (UN Environment) to strengthen linkages and join forces to address the environmental dimension of AMR.

Building upon this longstanding partnership, the Tripartite has agreed on a ten-year horizon to combat AMR as a major health risk at global, regional, country levels, and has developed an initial costed timebound

**Food and Agriculture Organization (FAO)** is a specialised agency of the United Nations that leads international efforts to address hunger and all forms of malnutrition. With 194 member states, FAO works in over than 130 countries worldwide to improve nutrition, increase agricultural productivity, raise the standard of living in rural populations, and contribute to global economic growth, worldwide.

**World Organisation for Animal Health (OIE)** is the intergovernmental organisation mandated to improve animal health and welfare globally. With 182 Member Countries, OIE ensures the transparency of the global animal disease situation, establishes international standards related to terrestrial and aquatic animal health (including zoonoses) and animal welfare, and develops the capacities of national Veterinary Services to control animal diseases.

**World Health Organization (WHO)** is the directing and co-ordinating authority on international health work and a specialized agency of the United Nations. The WHO is comprised of 194 Member States and operates in 150 countries to promote health, keep the world safe and serve the vulnerable.

Collectively, these organizations make up the **Tripartite**.

<sup>2</sup> WHO, FAO and OIE, [The FAO-OIE-WHO Collaboration: Tripartite Concept Note: Sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces](#), 2010.

<sup>3</sup> WHO, FAO and OIE, [The Tripartite’s Commitment: Providing multi-sectoral, collaborative leadership in addressing health challenges, 2017](#).

<sup>4</sup> [Memorandum of Understanding between the FAO, OIE and WHO regarding cooperation to combat health risks at the animal-human-ecosystems interface in context of the “One Health” approach and including antimicrobial resistance](#), 30 May 2018.



Tripartite Workplan on AMR (2019-2020) to support the implementation of the Global action plan on AMR<sup>5</sup> (GAP AMR) - endorsed by the three members of the Tripartite.

### ***The AMR MPTF: scaling up joint action***

The strength of the Tripartite is founded on the long-standing partnership, combined technical knowledge and global convening power of the three organizations; collectively they offer robust, cost-effective and efficient solutions to addressing complex health problems faced by the global community. National commitment to action is essential to develop multi-sectoral One Health NAPs as well as effective tools to facilitate implementation and integrated monitoring and evaluation.

Given the transnational and multi-sectoral nature of AMR, the support requested from countries, the recommendations of the ad hoc Interagency Coordination Group on Antimicrobial Resistance (IACG)<sup>6</sup>, the United Nations Secretary-General Report and other recent developments, the Tripartite has stepped up existing efforts to support countries to urgently counter this immediate threat through a One Health approach.

As part of these efforts and to ensure coordinated action and sustainable financing for catalyzing national level action, the Tripartite has established the 'Combating Antimicrobial Resistance through a One Health approach: AMR Multi-Partner Trust Fund (AMR MPTF<sup>7</sup>) and a Tripartite Joint Secretariat on AMR. The AMR MPTF, which will be established for an initial five-year period (2019-2024), enables stronger and sustained global leadership and advocacy to advance the global response to AMR, by raising the profile and urgency of addressing AMR, building and maintaining political momentum and public support, scaling up the technical capacity of the Tripartite to tackle AMR in human, animal and plant health and food and environment sectors in countries through joint and coordinated actions to develop, implement and scale up One Health NAPs.

The Tripartite Joint Secretariat on AMR consolidates cooperation between WHO, FAO and OIE, drawing on their core mandates and comparative advantages to address the wide range of needs of the global response against AMR in close collaboration with UN Environment, the World Bank and other UN and international organizations, Member States, civil society and the private sector. The Tripartite Joint Secretariat on AMR will play a pivotal role in supporting the operations of the AMR MPTF, ensuring consistency and coherency with the GAP AMR and the Tripartite Workplans, as well as maximizing synergies and new partnerships.

Funds from the AMR MPTF will support joint and coordinated actions based on the Tripartite Workplans on AMR at global, regional and country levels to catalyze national level action. The implementation of the Tripartite Workplans on AMR will concretely assist countries to adopt a comprehensive One-Health approach, tailored to country level needs to address the multi-sectoral complexity of AMR. Specifically, countries will be provided with policy support and technical assistance in the following areas:

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<sup>5</sup> WHO, [Global action plan on antimicrobial resistance](#), 2015.

<sup>6</sup> Interagency Coordination Group on Antimicrobial Resistance, [No Time To Wait: Securing The Future From Drug-Resistant Infections Report to the Secretary-General of the United Nations](#), April 2019.

<sup>7</sup> The [MPTF Office Manual on Designing Pooled Funds for Performance](#), June 2015, prepared under the auspices of the UN Working Group on Transition, contains further guidance on assessing the feasibility and functions of UN pooled funds.

- Development and implementation of One Health NAPs by ensuring effective coordination and assistance in understanding the socio-economic impact and political drivers to prioritize action and identify needed legislative and regulatory options;
- AMR and One Health awareness raising and behavioral change by supporting effective communication to translate evidence, guidance and policy into action towards behavior change;
- Surveillance and monitoring of AMR and antimicrobial use (AMU) by providing technical support to establish and run integrated surveillance systems and promoting data sharing across different sectors at local, regional and global levels;
- Stewardship and optimizing use by preserving the effectiveness of antimicrobials through promotion of research and development;
- Monitoring and evaluation to allow key stakeholders to assess effectiveness, impact and change.

Through such initiatives, the Tripartite aims to assist countries to take steps towards better integration of gender, equity and sustainability issues in their efforts to tackle AMR, to inform the implementation and scale up of strategies in One Health NAPs and contribute towards improved reach and effectiveness of AMR efforts for longer term impact.

A series of papers is being developed by the Tripartite to build a better global evidence base for implementing One Health NAPs. Particularly as regards gender issues, AMR within agriculture and rural development, specific segments of the rural population tend to be disproportionately affected by AMR. Inequalities between women and men have been linked to differences in the biological exposure between them. These inequalities are most likely linked with different roles and responsibilities that women and men play in rural societies and are likely to be mirrored in terms of outcomes and consequences for AMR, which are exacerbated by their frequent unequal access to sufficient health care.

These Tripartite Workplans on AMR work towards an initial ten-year horizon to address immediate needs and priorities, while also considering the potential for unforeseen shifts to the AMR landscape, through the application of new science, technologies and innovation.

Ultimately, the AMR MPTF aims to achieve real progress towards the SDGs through: reduced levels and slower development of AMR; continued ability to treat infectious diseases with effective and safe antimicrobials; and reduced impact of AMR on human and animal health, food production and economic development. This will have lasting impacts on populations worldwide, regardless of income, age, gender, ethnicity, disability, and geographic location.

## II. Functions of the AMR MPTF

The AMR MPTF<sup>8</sup> is the joint funding mechanism for the Tripartite over an initial five-year period (2019-2024). This Fund will ensure:

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<sup>8</sup> The [MPTF Office Manual on Designing Pooled Funds for Performance](#), June 2015, prepared under the auspices of the UN Working Group on Transition, contains further guidance on assessing the feasibility and functions of UN pooled funds.



- **Coherence:** provides a systematic coherent approach and joint interventions to address the global health risk of AMR, through shared responsibilities among the Tripartite.
- **Consolidation and specialization:** allows the three organizations to capitalize on their collective knowledge, insights and technical capacities, generating strong synergies, for robust, cost-effective and efficient solutions to counter the spread of AMR.
- **Innovation and scaled-up support:** provides a joint mechanism for clear attribution and transparency of all sources of finance. The Fund's activities - as detailed in the Theory of Change - are based on the application of best practices, innovative approaches and scaling up what has worked.
- **Value for money and return on investment:** shared planning and resource utilization, leveraging Tripartite institutional influence and achieving economies of scale through the aggregation of interventions at country, regional and global level.
- **Risk management:** reduces risks for partners and financial contributors through a comprehensive risk and results-based management system.

The AMR MPTF will act as a key catalyst for the implementation of the GAP AMR through the strategically targeted Tripartite Workplans on AMR at global/regional and country level.

Financing will importantly address identified implementation gaps and ensure coordinated and joint multi-sectoral delivery in addressing AMR at country level. Availability of, and access to, financial resources to support actions at scale that contribute to transformational change in addressing AMR are key factors for successful implementation. The private sector, public sector, and financial institutions will also be encouraged to support implementation through the MPTF.

#### **Benefits of the AMR MPTF**

- Rapid resource allocation by the Steering Committee enabling effective and prompt delivery
- Minimal transaction costs for resource partners (one contribution agreement, consolidated reporting) and Governments (unique coordination entry point through the UN);
- Greater visibility for resource partners focused on value for money and return on investment;
- Full transparency through use of a public online platform Gateway<sup>9</sup> providing real-time financial information and consolidated results-based reporting;
- Lean overhead costs of the Trustee (1%) and of implementing partners (7%).

### **III. AMR Programmatic Scope and Theory of Change**

The AMR MPTF aims to bring about transformative change and demonstrated progress in reducing the threat of AMR by supporting countries to apply a sustainable One Health approach. The structure of the MPTF, its Theory of Change and corresponding programme of work are based on the GAP AMR and Tripartite Workplans on AMR (see section I).

<sup>9</sup> Please see: <http://mptf.undp.org/>

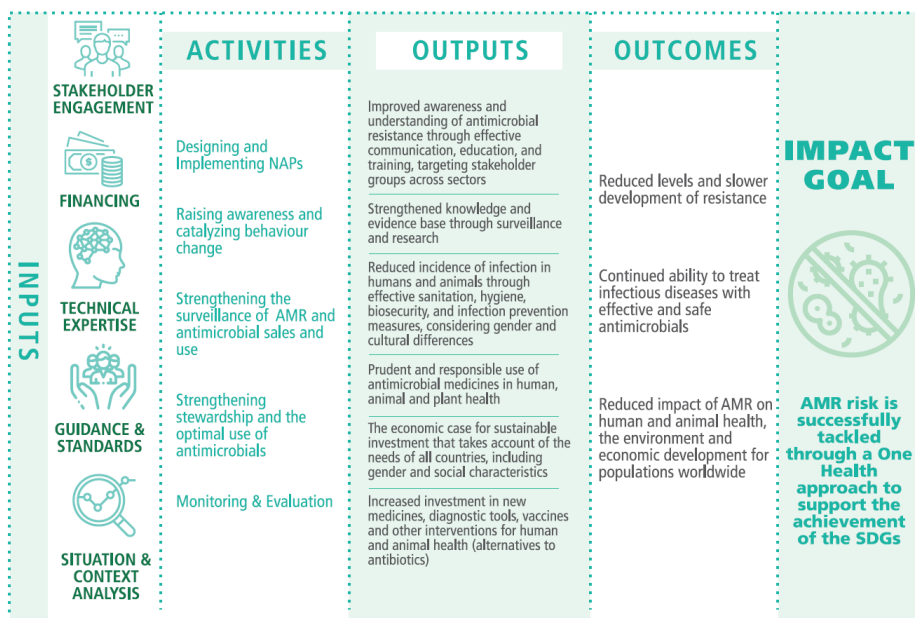
The AMR MPTF’s design is built upon best practices from the UN Development Group’s (UNDG) pass-through model, which provides the basis for allocating and managing multi-partner pooled funding and joint work. The Fund will consist of two main components: Global/Regional components and National components, each with well-defined programme cycles (see following sections).

The AMR MPTF seeks funding for an initial five-year period (2019-2024) aimed at influencing and contributing to the achievement of the 2030 Agenda. The AMR MPTF requires continued commitment and investment and is structured to target the following two components:

1. **Global/Regional:** foster the necessary environment to catalyze change by supporting the design and strengthening of One Health NAPs. Intelligence gathering and data will inform national investments and provide technical backstopping support to countries in the development and effective implementation of One Health NAPs.
2. **National:** full-size actionable national programmes to ensure that One Health NAPs are aligned with the GAP AMR and the standards, guidelines and best practices established by the FAO, OIE and WHO.

### Theory of Change<sup>10</sup> – Achieving Impact

Given the intersectoral nature of AMR, a One Health perspective informs the Theory of Change for the AMR MPTF and its programmatic logic, as highlighted in the below table:



The Theory of Change sets out the logic from inputs to activities to outputs and outcomes towards achieving the overall Impact Goal: *successfully tackling AMR through a One Health approach to support the achievement of the Sustainable Development Goals.*

<sup>10</sup> Finalized Results Framework with indicators to implement the theory of change to be approved by the Steering Committee.

Over the lifespan of the AMR MPTF, key progress will be measured through achievement of the following Outcomes:

- Reduced levels and slower development of AMR;
- Continued ability to treat infectious diseases with effective and safe antimicrobials;
- Reduced impact of AMR on human and animal health, food production and economic development for populations worldwide.

In turn, the following Outputs will contribute to achieving the Outcomes:

- Improved awareness and understanding of AMR through effective communication, education and training, targeting the different social groups;
- Strengthened knowledge and evidence based through surveillance and research;
- Reduced incidence of infection in humans and animals through effective sanitation, hygiene, biosecurity and infection prevention and animal husbandry measures, considering gender and cultural differences;
- Prudent and responsible use of antimicrobials in human, animal and plant health;
- Economic case for sustainable investment that takes account of the needs of all countries, including social and gender characteristics;
- Increased investment in new medicines, diagnostic tools, vaccines and other interventions (alternatives to antibiotics).

Considering that the Tripartite Workplans on AMR will drive the implementation of the GAP AMR, progress will be measured and evaluated using the Tripartite *Monitoring and Evaluation of the Global Action Plan on Antimicrobial Resistance: Framework and recommended indicators*, with an emphasis on Output level key performance indicators in the first five years as progress towards Outcome level indicators becomes evident.<sup>11</sup>

To achieve the Outputs, the following key Activities at global/regional and country level will be context-specific and based on demand:

- Designing and implementing One Health NAPs: (i) provide in-country support to develop, finance and implement One Health NAPs; (ii) build evidence and tools to support implementation and the evaluation of One Health NAPs; (iii) undertake assessments of the economic and social benefits of reducing AMR; and, (iv) develop guidance on the analysis of legal frameworks and regulatory options.
- Raising awareness and catalyzing behavior change: global and regional campaigns, as well as support to countries to identify key audiences, develop awareness raising campaigns to effect behavioral change, enable collective action, achieve national priorities, and strengthen monitoring and accountability.
- Strengthening surveillance and monitoring of AMR and antimicrobial sales and use: support the global, regional and country levels to obtain and standardize meaningful data to guide the development of tools, policies, and regulations. This includes integrated surveillance systems to promote data sharing

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<sup>11</sup> WHO, FAO and OIE, [Monitoring and Evaluating of the Global Action Plan on Antimicrobial Resistance: Framework and recommended indicators](#), 2019.

across sectors at local, regional and global levels. Provision of technical support to countries to establish and deliver national AMR surveillance programmes monitoring the sales, distribution, use/consumption of antimicrobials.

- Strengthening stewardship and the optimal use of antimicrobials: at all levels foster research and development, develop and support practical measures to minimize the need for antimicrobials (e.g. improved hygiene, biosecurity, animal welfare, vaccination programs, etc.), reduce the use of antimicrobials (e.g. implementing good practice and identifying alternatives to antimicrobials including vaccines), and prevent the spread of AMR or residues (e.g. good hygiene practices).
- Robust monitoring and evaluation: build capacities and processes at all levels to boost –monitoring and evaluation to measure progress towards the delivery of the objectives, and achievements and persisting gaps across sectors in efforts to tackle AMR.

As part of its Inputs, the Tripartite will engage relevant stakeholders, convene technical expertise, develop guidance and standards and mobilize necessary financing to deliver foreseen activities based upon individual country contexts.

### ***Key principles***

The Tripartite’s work in the context of the AMR MPTF will be guided by the following key principles:

- Ensure work is country-led and driven, operating in close consultation and collaboration with governments, as well as other key partners for lasting sustainable outcomes at country, regional and global levels. The United Nations Development Assistance Framework (UNDAF) will form the basis of the AMR MPTF’s alignment to government stated priorities in AMR and One Health more broadly. At national level, resident UN agencies of the Tripartite (FAO and WHO) contribute to the UNDAF processes, with the AMR MPTF providing an opportunity to scale up integration of key AMR elements in UN Country Team work according to country priorities;
- Align all work towards contributing to the 2030 Agenda for Sustainable Development;
- Focus on achieving the impact goal and delivering tangible and sustainable results;
- Work in a collaborative partnership through the application of a One Health approach to foster and encourage intersectoral collaboration within countries;
- Be guided by the respective governing bodies, normative frameworks already adopted by countries and other relevant instruments of the Tripartite;
- Take stock of the recommendations of the IACG and follow-up actions as well as relevant reports of the United Nations Secretary-General;
- Combine immediate action and longer-term strengthening of evidence-based data, legal frameworks and policies;
- Make full use of institutional mandates, strengths and value-added activities across the three agencies without duplication, utilizing existing standards and initiatives, knowledge platforms, groups, panels, networks and lessons learned;

- Ensure that a gender and equity lens is applied in all work executed by the implementing partners and countries, in particular in the development of strategies to inform One Health NAPs;
- Harness and build on credible data and analysis to monitor progress and impact at the national, regional and global levels, with global level monitoring undertaken using the Tripartite *Monitoring and Evaluation of the Global Action Plan on Antimicrobial Resistance: Framework and recommended indicators*, and including gender responsive indicators;
- Raise resources for AMR in a transparent and collaborative manner and ensure cost-efficiency and effectiveness, with a view to catalyzing longer-term resources for countries to sustainably deliver One Health NAPs.

### ***Assumptions***

The AMR MPTF's expected outcomes and impact goal is dependent on the below list of non-exclusive assumptions:

- AMR remains a high-level political priority at global, regional and national level;
- Resource partners are engaged and provide adequate financing throughout the lifespan of the AMR MPTF;
- National governments recognize the value of a One Health approach and commit to strengthen intersectoral collaboration, domestic resource allocation and communication in line with national AMR Committees;
- Beneficiary countries have sufficient political stability to implement country level actions and contribute to regional efforts;
- Capability is retained and sustained due to limited turnover within national institutions;
- National governments have or develop the capability to sustain necessary investments and take ownership of cross-sectoral information and evidence frameworks to generate data and inform policy;
- Policy makers, health care practitioners<sup>12</sup> and other key stakeholders, such as antimicrobial producers, commit to applying and promoting the prudent and responsible use of antimicrobial agents;
- Allied disciplines and industries related to food production systems (i.e. veterinarians, agronomists, feed industry) commit to applying and promoting the prudent and responsible use of antimicrobial agents;
- Industry and research institutions will develop effective new medicines, diagnostic tools, vaccines and other interventions as alternatives to antibiotics;
- The economic case proves that a One Health approach is the most cost-effective way for reducing AMR.

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<sup>12</sup> In this context, the term health care practitioners includes, but is not exclusive to: physicians, veterinarians, dentists, nurses, para-professionals.

#### IV. Governance Arrangements

The governance arrangements for the AMR MPTF are based on standard governance arrangements for pass-through MPTFs and UNDG best practices.

Governance	Steering Committee
Administration	MPTF Office
Implementation	AMR MPTF implementing partners (Tripartite and key partners)

##### ***Steering Committee***

The AMR MPTF Steering Committee is responsible for the overall strategic guidance on the AMR MPTF and meets on a six-monthly basis. The Steering Committee is composed of a representative of the three organizations forming the Tripartite (FAO, OIE, WHO), two representatives from Development/Resource Partners (participating on a biennial rotational basis), and the MPTF Office (ex-officio). The Steering Committee will be chaired by one of the Tripartite organizations on an annual rotational basis and the Tripartite Joint Secretariat on AMR will provide the Secretariat support. The representative of the participating organization that is serving as Steering Committee Chair shall also designate an alternate Chair.

The Steering Committee can call upon ad hoc expertise to provide insight to the AMR MPTF, as necessary, drawing upon existing platforms and networks of expertise on AMR. Expertise could also be sought from relevant governments, civil society, academia, private sector, regional counterparts, resource partners and UN agencies or other entities, as deemed necessary. Depending on the request of the Steering Committee, such experts could participate in the Steering Committee meetings as observers.

The main functions of the Steering Committee include:

- i. Provide general oversight and exercise overall accountability of the Fund in accordance with the AMR MPTF's Operational Manual;
- ii. Approve the strategic direction of the Fund;
- iii. Approve Fund risk management strategy and review risk monitoring regularly;
- iv. Review and approve proposals submitted for funding; ensuring their conformity with the requirements of the AMR MPTF Terms of Reference;
- v. Decide the allocation of funds;
- vi. Request fund transfers to the Administrative Agent (signed off by UN member of the Steering Committee);
- vii. Review Fund status and oversee the overall progress against the results framework through monitoring, reporting and evaluation;



- viii. Review and approve the periodic progress reports consolidated by the Administrative Agent and the Secretariat based on the progress reports submitted by the Participating Organizations;
- ix. Commission mid-term and final independent evaluations on the overall performance of the Fund;
- x. Approve direct costs related to fund operations supported by the Secretariat;
- xi. Approve extensions and updates to the Terms of Reference for the Fund, as required;
- xii. Approve resource mobilization strategies to capitalize the AMR MPTF;
- xiii. Convene advisory expertise to provide insight to the Steering Committee on ad hoc basis.

### ***Secretariat***

The Tripartite Joint Secretariat on AMR has been entrusted with the coordination of the AMR MPTF. This Secretariat will be composed of dedicated staff from each of the Tripartite organizations (FAO, OIE, WHO) will be tasked with supporting the AMR MPTF Steering Committee and overseeing the overall operations of the AMR MPTF. The Tripartite Joint Secretariat on AMR will not be co-located and will rely on staff located in each of the three Tripartite organizations (FAO, OIE, WHO).

The Tripartite also envisages a dedicated Coordinator to oversee the activities relating to the coordination of the Fund as described below and to act as a main contact point for the AMR MPTF. The Coordinator will report to the chair of the Steering Committee.

The detailed roles and functions of the Tripartite Joint Secretariat on AMR and of the Coordinator will be detailed in the Operational Manual of the MPTF and approved by the Steering Committee. Budget allocations to cover the costs pertaining to the Tripartite Joint Secretariat on AMR, the Coordinator and governance will be approved by the Steering Committee and will be charged to the Fund's account as direct costs. During implementation, these costs will be adjusted to: (i) align with recommended UNDG guidelines and thresholds and, (ii) duly reflect the complexity and multi-stakeholder nature of the Tripartite's approach to tackling AMR.

The Tripartite Joint Secretariat on AMR will provide coordination support for the following functions:

- i. Advise the Steering Committee on strategic priorities, programmatic and financial allocations in accordance with the AMR MPTF's Operational Manual (based on the inputs of inter-agency working groups and the Administrative Agent, if applicable);
- i. Provide planning, logistical and operational support to the Steering Committee;
- ii. Serve as AMR MPTF's central point of contact and liaises with other UN agencies and other related initiatives and stakeholders. This includes providing vital information for external partners, as well as liaising with existing and potential resource partners to mobilize necessary financing for the AMR MPTF;
- iii. Lead the drafting of the Operations Manual and risk management strategy in collaboration with the Participating Organizations and the MPTF Office.
- iv. Organize calls for proposals and convene the necessary technical expertise to appraise such proposals;

- v. Develop and implement resource mobilisation in accordance with approved strategies and in collaboration with staff from the Participating Organizations;
- vi. Ensure the monitoring of projects as well as potential operational risks and overall performance of the Fund (i.e., facilitate monitoring and evaluation of the Fund, draft risk management strategy);
- vii. Consolidate annual and final narrative reports provided by the Participating Organizations and share with the Steering Committee for review as well as with Administrative Agent for preparation of consolidated narrative and financial reports;
- viii. Facilitate collaboration and communication between Participating Organizations to ensure that the AMR MPTF's Theory of Change is implemented effectively;
- ix. Promote a One Health approach and joint activities of the Tripartite through communication, advocacy and political engagement as well as spearheading communications with external partners regarding the Fund;
- x. Liaise with the Administrative Agent on fund administration issues, including issues related to project/fund extensions and project/fund closure.

### ***The Administrative Agent***

The Administrative Agent Function will be performed by the MPTF Office in New York (<http://mptf.undp.org/>). The Administrative Agent will be entitled to allocate an administrative fee of one percent (1%) of the amount contributed by each resource partner, to meet the costs of performing the Administrative Agent's standard functions as described in the MOU. The Administrative Agent will conclude a Memorandum of Understanding (MOU) with the Participating Organizations (FAO, OIE, WHO) and Standard Administrative Arrangements (SAAs) with contributing partners.

Additional responsibilities include the receipt, administration, and disbursement of funds to the Participating Organizations according to the instructions of the Steering Committee, financial reporting and consolidation. The Administrative Agent will disburse funds to the Secretariat for direct costs based on the decision of the Steering Committee. On an annual basis, the Administrative Agent will notify the Steering Committee of the amounts used for such purposes.

### ***The Participating Organizations***

The Participating Organizations include FAO, OIE and WHO. They accept full financial and programmatic accountability for their programmes (developed jointly or individually) in accordance with their own rules and regulations and approved as per the programming cycles described below.

The OIE has entered into privileges and immunities with only a limited number of its Member Countries. In addition, the privileges and immunities afforded by the agreements that are in place may be different from those of the United Nations or of the UN Participating Organizations and may not be sufficient, alone, to cover OIE's activities under the Trust Fund.

The Participating Organizations agree that no activities should be undertaken under the AMR MPTF unless such activities are covered by appropriate arrangements and safeguards including with respect to privileges and immunities.

The Participating Organizations have therefore agreed that, prior to the commencement of any activities under the AMR MPTF, the Steering Committee will carefully review, on a case by case basis, whether the activities envisaged are covered by appropriate safeguards and that, with respect to privileges and immunities, necessary arrangements are in place or have been made for the purpose of such activities amongst the Participating Organizations. To this end, the Participating UN Organizations and the OIE, undertake to work diligently and in good faith together, in order to put in place such necessary arrangements (including with respect to privileges and immunities) according to their respective rules and procedures, to enable the OIE to operate with sufficient and appropriate safeguards and carry out activities agreed by the Participating UN Organizations and OIE in connection to the Fund.

Although the OIE is not a UN Organization, the Tripartite organizations regard each other as equal partners in delivering the Tripartite Workplans on AMR. More specifically and in the context of the AMR MPTF, the OIE will support the implementation of the GAP AMR, prevalently at the global and regional level. In line with its mandate and business model, the OIE Headquarters and Regional staff work directly with National Delegates to the OIE (national Chief Veterinary Officer) positioned in national Veterinary Authorities as well as national subject-matter focal points nominated by the National Delegate to the OIE. In collaboration with its Tripartite partners, the OIE will: ensure engagement of the animal health sector in the design and implementation of One Health NAPs; develop international standards and implement operational activities for development; conduct data collection and analysis; conduct capacity building and build awareness on AMR. The support provided by the OIE will include technical missions and backstopping to countries and is the OIE's platform for direct interaction to support national animal health services in OIE Member Countries.

Indirect costs of the Participating Organizations recovered through programme support costs will be 7 percent.

Should engagement with other UN organizations at country level be deemed pertinent in the context of this AMR MPTF, necessary arrangements will be taken to include these agencies as key implementing partners.

## **V. Fund Implementation**

Considering the GAP AMR and the AMR MPTF's Theory of Change, an initial five-year costed Global Programme Document 2019-2024 and accompanying results framework will be developed by the Tripartite and will be approved by the Steering Committee. Biennial Tripartite Workplans on AMR will be developed, highlighting the activities and costing inputs of each Participating Organization and will be approved by the Steering Committee in alignment with the strategic vision and approach outlined in the Global Programming Document (2019-2024).

Based on the Tripartite Work Plan on AMR 2019-2020<sup>13</sup>, an initial investment of USD 70 million is required to fund the following global/regional and national programming cycles. Additional investments will be required to support future Tripartite Workplans on AMR throughout the lifespan of the Fund.

- **Global/Regional Programming Cycle:** Implementation of the Tripartite Workplans on AMR, through the following actions: supporting countries to design and implement One Health NAPs; raising awareness and effecting behavior change; strengthening surveillance and monitoring of AMR and antimicrobial sales and use; strengthening stewardship and the responsible and prudent use of antimicrobials; and, robust monitoring and evaluation.
- **National Programming Cycle:** The majority of the funds will be allocated to the implementation of full-size actionable national programmes to ensure that One Health NAPs are aligned with the GAP AMR and the standards, guidelines and best practices established by the FAO, OIE and WHO. The total investment required for the full-size actionable national programmes will be dependent upon the total number of programmes in countries.

To support countries in the most adequate manner, commensurate with the advancement of national AMR efforts and the level of support received and absorptive capacity, the National Programming Cycle will be activated once the capitalization of the Fund exceeds the threshold of USD 10 million per annum.<sup>14</sup> Allocation of funding for the National Programming Cycle will be decided by the Steering Committee based on National Programme documents. Such documents can be prepared with seed funding from the Global Programme Cycle and can be submitted to the Steering Committee by the Tripartite or by an individual Participating Organization/Implementing partner (further to consultation with Tripartite), depending on the specific country scenario. In the case of joint National Programme proposals, the Tripartite will agree on the lead Organization entrusted with coordinating the preparation of the national programme document. All National Programme Documents will be based on the principle of national ownership and leadership; furthermore, they will be prepared in support of national priorities and approved by national AMR NAP Committees.

### ***Risk management***

A risk management strategy will be developed by the Tripartite Joint Secretariat and will take into account the nature of risks in relation to the implementation of the Tripartite Workplans on AMR. It will define the MPTF's risk tolerance, establish policies in relation to identified risks, and determine the risk treatment through mitigation measures or adaptation. This strategy will consider both the Global/Regional and National Programming Cycles. Risk monitoring will be done by the Tripartite Joint Secretariat on AMR as part of their regular reporting. Key mitigation or adaptation measures taken in accordance with the risk management strategy and their direct influence on achieving the expected results will be highlighted.

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<sup>13</sup> Finalized Results Framework with indicators to be approved by the Steering Committee.

<sup>14</sup> The Steering Committee may reconsider this threshold in exceptional circumstances.

## **VI. Contributions to the Fund**

To help ensure maximum flexibility and adaption to national priorities, resource partners are strongly encouraged to provide contributions to the MPTF as multi-year, non-earmarked contributions. If due to specific resource partner requirements non-earmarked contributions are not feasible, resource partners may earmark their contributions to a specific country. The earmarking will be reflected in the Standard Administrative Arrangement.

Contributions to the AMR MPTF can be made by development and resource partners, international financial institutions, foundations and other non-state actors. The Fund will also consider innovative financing sources.

To contribute to the AMR MPTF, resource partners will sign a Standard Administrative Arrangement. Financial contributions to the AMR MPTF may be accepted in fully convertible currency or in any other currency that can be readily utilized. Such financial contributions will be deposited into the bank account designated by the MPTF Office, as stated in the Standard Administrative Arrangement. The value of a contribution payment, if made in a currency other than US dollars, will be determined by applying the United Nations operational rate of exchange in effect on the date of payment.

Acceptance of funds from the private sector will be guided by criteria stipulated in the UN system-wide guidelines on cooperation between the UN and the Business Community. The receipt of financing from private sector companies is subject to UNDP's risk assessment tool for the assessment and approval of funding from non-state actors. Notwithstanding the forgoing, there shall be no engagement with the tobacco or arms industry in connection with the AMR MPTF. Prior to accepting any contribution from a private sector entity, all signatories to the MOU will be consulted by the Administrative Agent. The approval will be given on a non-objection basis within two weeks of the submission of the request to the Participating Organizations by the Administrative Agent.

## **VII. Reporting, Monitoring and Evaluation**

### ***Narrative and financial reporting***

The responsibilities related to reporting are gathered and detailed in the Memorandum of Understanding (section IV) and Standard Administrative Agreements (section V).

All Participating Organizations will provide annual and final reports on activities and expenditures according to a common format to be designed for the AMR MPTF by the Tripartite Joint Secretariat on AMR and the Administrative Agent. The reporting template, based on the UNDG standard, will be developed by the Tripartite Joint Secretariat on AMR and approved by the Steering Committee. Based on the reports received from the Participating Organizations, the Secretariat will prepare a consolidated narrative report and the Administrative Agent will consolidate the narrative report with the consolidated financial report. The consolidated narrative and financial report will be submitted to all Contributors to the AMR MPTF and its Steering Committee, as per the schedule established in the Standard Administrative Agreement.

### ***Global/Regional Level***

Monitoring and Evaluation activities funded under the AMR MPTF Global Programme shall be undertaken in accordance with the Global Programme Document (to be approved by Steering Committee), and the annual plans under the Global component of the MPTF (to be approved by Steering Committee). An evaluation of the AMR Global Programme – at Fund level – shall be undertaken within the initial period 2019-2024 in accordance with the guidance from the UN Evaluation Group (UNEG), focused on attributing impact and results as per the Theory of Change. Participating Organizations will share information and progress updates on accomplishments achieved, as well as undertake joint monitoring and evaluation, where appropriate.

### ***National Level***

National activities are monitored against the respective country programme documents (to be approved the Steering Committee), workplans and corresponding results-based frameworks. Depending on the size of such programmes, country-level evaluations may be required.

## **VIII. Accountability, transparency and public disclosure**

### ***Accountability***

Each implementing partner will provide the Tripartite Joint Secretariat on AMR and the MPTF Office annual and final narrative reports, as well as financial statements in accordance the legal agreements signed with the Administrative Agent.

The Administrative Agent and implementing partners will be audited in accordance with their organizational financial regulations and rules and, in the case of UN Participating Organizations, with the Framework for Joint Internal Audits of UN Joint Activities, which has been agreed to by the Internal Audit Services of Participating UN Organizations and endorsed by the UN Development Group in 2014.

### ***Transparency***

The MPTF Office website, Gateway (<http://mptf.undp.org>), is a web-based service portal that provides real-time financial data issued directly from the UNDP accounting system. Once established, the AMR MPTF will have a separate page in the Gateway portal which will allow partners and the public at large to track the Fund's contributions, transfers and expenses, as well as access important documents and reports.

## **IX. Modification and Expiration of the AMR MPTF**

The Steering Committee will be able to modify any of the provisions of the AMR MPTF's Terms of Reference, including the duration of the Fund. The Fund will have an initial duration of five years (2019-2024). Should the Fund not be capitalized within the first two years, the Administrative Agent, after consultation with the Steering Committee, reserves the right to close the Fund.



Any remaining balance in the Fund's account and separate accounts of the implementing partners after the closure of the Fund will be used for a purpose established by the Steering Committee and the resource partners, or it will be reimbursed to the resource partner(s) in proportion to their contribution to the Fund, as decided by the Contributor and the Steering Committee.