Chair, distinguished delegates,

Antimicrobial resistance is a major threat to global health and development. Tackling this challenge requires a coordinated, and cross-sectoral approach. For research and development this means applying an end-to-end approach, focusing on public health priorities, and ensuring both old and new antibiotics are available, affordable and effective.

The Global Antibiotic Research and Development Partnership, initiated by the WHO and the Drugs for Neglected Disease initiative (DNDi), as part of the Global Action Plan, works throughout the drug development pipeline in partnership with governments, the private sector and academia, to develop new treatments.

Through the support of its donors and partners, GARDP is already demonstrating how such partnerships, based on principles set out in the UN Declaration on AMR, can contribute to addressing the AMR challenge.

GARDP has launched four programmes: accelerating the development of new drugs and treatments for drug-resistant infections in children and sepsis in newborns, development of a new treatments for drug resistant sexually transmitted infections, including a first-in-class treatment for gonorrhoea, and a knowledge recovery and exploratory programme to identify new treatments.

Access and stewardship is integrated as early as possible in the GARDP development process. But this should not only be left to individual organisations. There is an urgent need to move the discussion about access and stewardship from principles to practice, where all stakeholders have a critical role to play, including the Tripartite Plus and funders.

For R&D to make a real contribution to global health and the SDGs, all involved must work together to ensure new and existing antibiotics are made available, affordable, and used wisely.