



AMPLIFY-AMR

*Advancing **Multisector**
Partnerships &
Leadership
for **Innovation in**
Fighting AMR*

**ASC-PROPOSED
OPPORTUNITIES TO
COMBAT ANTIMICROBIAL
RESISTANCE IN THE USA**

MAY 2026



AMR™
Strategic
Coalition

Acknowledgements

The AMR Strategic Coalition (ASC) acknowledges the invaluable contributions from the members of the ASC Executive Advisory Council. The proposed opportunities laid out in this report represent their unanimous consensus as U.S. stakeholders across disciplines and One Health sectors. The ASC would like to extend a specific thank you to Cody R. Fisher, Ph.D. (ASC) for his writing and formatting contributions, Ana Ayala, JD, LL.M (ASC; Global Health Law Strategies) and Jomana Musmar, PhD, MS (ASC; Advisors of Global Health, LLC) for their writing and editorial contribution, and to Zannah K Francis, PhD (ASC) for her project support on this report. The ASC also thanks our non-voting expert consultants, C.S., PhD; K.A.; Josh Glasser, MS; Katie Ballering, PhD; Kristen K. Clark, DVM, MPH, DACVPM, CCRT; Edie Marshall, DVM, MPVM, DACVPM; Lynn Marks, MD (DDL Solutions, LLC); Monique Mansoura, PhD, MBA (Beacon Biostrategies); Paul McGovern, MD (McGovern ID Consulting LLC); and Trish Simner, PhD, for their personal insights and support.

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Material from this publication can be used with acknowledgement.

Citation: AMR Strategic Coalition. (2026, May). AMPLIFY-AMR: Advancing Multisector Partnerships & Leadership for Innovation in Fighting AMR, AMR Strategic Coalition, Washington, D.C., U.S.A.

Published by:

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About ASC

Established in September 2025, the **AMR Strategic Coalition (ASC)** unites leading U.S. experts across One Health sectors to build stakeholder consensus, amplify voices, and deliver policy solutions to combat antimicrobial resistance (AMR). Led by trusted independent leaders with decades of combined deep federal policy, diplomacy, and scientific experience advancing AMR efforts, the ASC assembles partners to develop critical evidence-based and holistic policy postures that are reflective of the interdisciplinary AMR community in the United States.



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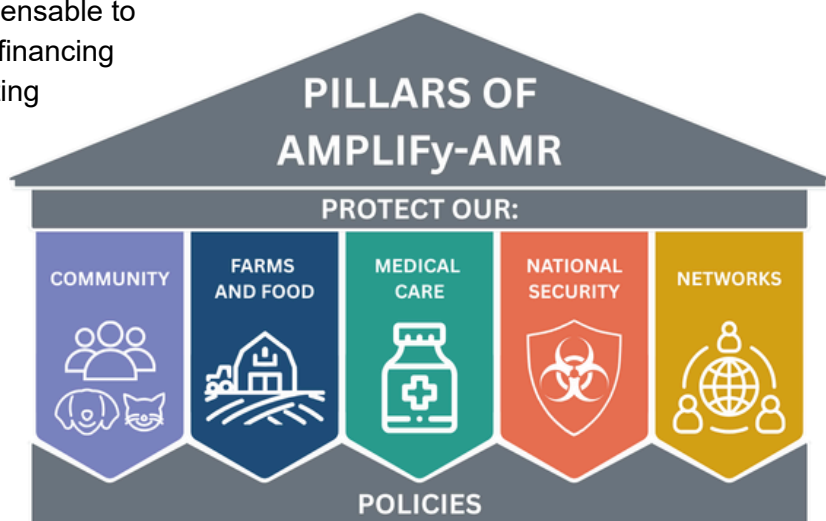
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Executive Summary



Antimicrobial resistance (AMR) is one of the most consequential threats facing the United States today, cutting across public health, national security, food systems, economic resilience, and the future of modern medicine. The AMR Strategic Coalition (ASC), an independent organization uniting expert leaders across One Health sectors, presents *AMPLIFy-AMR: Advancing Multisector Partnerships & Leadership for Innovation in Fighting AMR*, as its second major report. This strategic, action-oriented framework strengthens the U.S. response to AMR through coordinated leadership across human health, animal health, agriculture, the environment, industry, and national security. Reflecting the collective expertise of clinicians, veterinarians, public health practitioners, researchers, industry leaders, agricultural partners, and national security experts, *AMPLIFy-AMR* is intentionally aligned with existing U.S. National Action Plans, biodefense frameworks, and One Health commitments, while offering practical pathways for implementation that extend beyond federal government action alone.

The report is organized around five interdependent pillars (Protect Our Community, Protect Our Farms and Food, Protect Our Medical Care, Protect Our National Security, and Protect Our Networks) built upon a foundation of consistent, transparent, and durable policy. Progress in each area reinforces the others, and translating these opportunities into sustainable solutions will require focused working groups, public-private partnerships, and cross-sector coalitions. While federal leadership remains indispensable to sustaining surveillance systems, financing core infrastructure, and coordinating biodefense preparedness, non-federal partnerships serve as essential force multipliers that amplify impact and sustain momentum across political cycles. *AMPLIFy-AMR* calls on all sectors of the U.S. AMR community to engage, align, and act together to preserve the effectiveness of life-saving antimicrobials and protect the health, security, and prosperity of current and future generations.



The report is organized around five interdependent pillars built on a strong foundation, each reflecting a core national interest threatened by AMR.

INTRODUCTION

Antimicrobial resistance (AMR) is one of the most significant threats to public health, national security, food systems, and medical care in the United States and globally. Antimicrobial resistant pathogens undermine the treatment of common infections and jeopardize routine medical procedures, including cancer chemotherapy, organ transplantation, and major surgery, that depend on effective prevention and treatment strategies. For example, if a patient becomes septic, a serious, life-threatening condition caused by the body's response to infection, the presence of an AMR germ increases the risk of delayed or ineffective treatment, making sepsis more likely and more deadly. Without sustained and coordinated action, AMR threatens to reverse decades of medical progress, weaken economic resilience, jeopardize our food and farmers, and increase U.S. vulnerability to both naturally emerging and deliberately introduced biological threats.

AMPLIFy-AMR: Advancing Multisector Partnerships & Leadership for Innovation in Fighting AMR, the second report from the AMR Strategic Coalition (ASC), presents a strategic, action-oriented framework for strengthening the U.S. response to AMR through coordinated leadership across human health, animal health, agriculture, environment, industry, and national security. As an independent initiative, this report is intended to complement and reinforce existing action plans, strategies, and guidelines by the U.S. federal government while offering practical pathways for implementation that extend beyond federal government action alone.

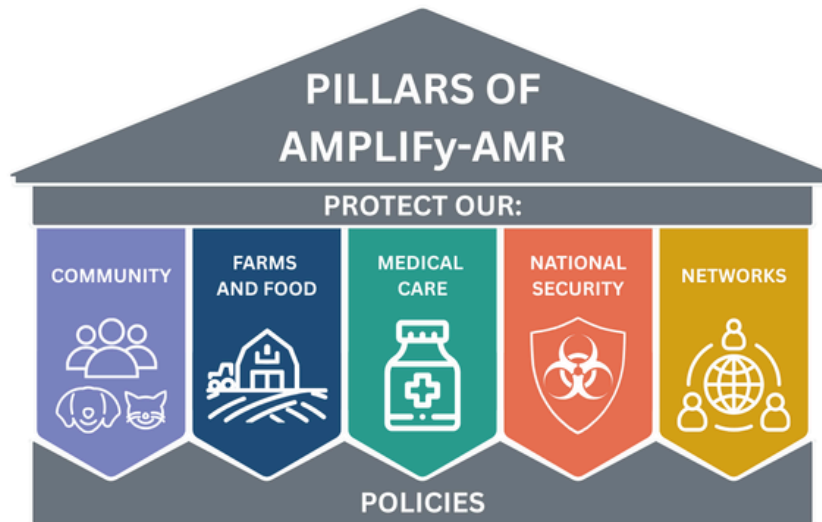
This report reflects the collective expertise of stakeholders across the U.S. AMR ecosystem, including veterinarians, clinicians, public health practitioners, researchers, industry leaders, agricultural partners, and national security experts. It is written for the entire U.S. AMR community, recognizing that progress against AMR requires shared responsibility, sustained coordination, enhanced public-private partnerships, and long-term commitment across sectors. The ASC appreciates the unique and irreplaceable role of the federal government in addressing AMR, particularly in funding core infrastructure, sustaining surveillance systems, supporting innovation pipelines, coordinating national preparedness, and ensuring equitable access to countermeasures.

The ASC also recognizes how non-federal partnerships can amplify, support, and accelerate federal priorities, and identify areas where federal leadership can leverage its authority to scale up ongoing federally-led initiatives and maximize reach for high impact. Therefore, the *AMPLIFy-AMR* report presented by the ASC is deliberately aligned with existing U.S. AMR strategies, biodefense frameworks, and One Health commitments, as well as with current priorities related to domestic manufacturing, supply-chain resilience, health initiatives, and public-private partnerships, especially in the agricultural sector. To complement U.S. federal government efforts, this report focuses on operationalizing shared goals, strengthening cross-sector linkages, and translating policy intent into sustained action.

AMPLIFy-AMR is designed to highlight and define strategic opportunities for action rather than to prescribe fully developed or finalized solutions. The recommendations in this report identify where progress is both urgently needed and realistically achievable, highlighting areas where coordinated leadership, investment, and innovation can yield meaningful impact. However, translating these opportunities into sustainable, scalable solutions will require continued collaboration, technical development, and shared ownership across sectors. Implementation must occur through focused and action-oriented working groups, public-private partnerships, and cross-sector coalitions that bring together the scientific, operational, financial, and policy expertise necessary to move from concept to execution. These mechanisms are essential for refining approaches, testing models, addressing barriers, and ensuring that solutions are practical, equitable, scalable and sustainable.

The ASC is uniquely positioned to convene and lead these efforts. By serving as a neutral, multisectoral, and multidisciplinary platform, ASC can catalyze the partnerships, working groups, and coordinated action needed to transform the opportunities outlined in this report into implementable strategies. In doing so, ASC can help ensure that *AMPLIFy-AMR* functions as a living framework for collective action, continuous learning, and measurable progress against AMR, which maintains progress across political cycles while adapting to evolving scientific and geopolitical realities.

Taken together, this report provides a practical roadmap for how the U.S. can amplify leadership, mobilize partnerships, and sustain innovation to confront AMR as the complex, cross-cutting threat that it is before its consequences become irreversible.



The report is organized around five interdependent pillars built on a strong foundation, each reflecting a core national interest threatened by AMR:

Protect Our Community: People and Animals: Through a One Health approach, strengthen stewardship, diagnostics, infection prevention, surveillance, education, and workforce capacity across human, animal, environmental, and agricultural health to optimize judicious antimicrobial use and prevent resistant infections before they occur.

Protect Our Farms and Food: Securing the livelihoods of our farmers while advancing productive and resilient agriculture and food safety and availability through stewardship, diagnostics, innovation, and One Health integration across soil, water, animals, and crops.

Protect Our Medical Care: Ensuring and maintaining the discovery, development, availability, and access to novel and existing antimicrobials, diagnostics, and alternative therapies needed to preserve modern human and veterinary medicine across the One Health spectrum, including in the fight against sepsis, a serious life-threatening condition worsened by AMR.

Protect Our National Security: Addressing AMR as a homeland security and defense challenge regularly integrated into efforts related to biodefense preparedness, resilient supply chains, domestic manufacturing, and protection against high-risk research and malicious use.

Protect Our Networks: Strengthening domestic and international networks for One Health surveillance, data sharing, partnership, accountability, privacy, and long-term coordination across administrations, sectors, and borders; because timely, trusted, and coordinated information sharing is essential to detect emerging threats early, mount effective responses, and prevent the spread of AMR across communities and countries.

Protect Our Policies: Consistency is a key element for sustainable change. Frequent changes to legal systems and frameworks lead to confusion, and importantly, a lack of trust by the public. With the development of consistent, long-term policies, clear and transparent legal frameworks, all informed by and developed with the perspectives of the communities directly impacted by them, the ASC believes that our nation can work hand in hand across One Health domains.



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Protecting communities from AMR begins with preventing infections, preserving the effectiveness of existing antimicrobials, and ensuring that both human and animal health systems are equipped to respond to emerging resistance threats. Because most antimicrobial use occurs outside of acute-care hospital settings (including in outpatient care, long-term care, veterinary medicine, and agricultural settings), community-centered strategies are essential to reducing inappropriate use and limiting the spread of antimicrobial resistant pathogens. Delivery of practical, context-specific education and peer-learning opportunities supports day-to-day decision-making. For the animal and agricultural sectors, strengthening responsible antimicrobial use requires interventions that tackle the underlying economic pressures and expand access to veterinary expertise.

This pillar emphasizes opportunities that empower individuals, clinicians, veterinarians, and communities through stewardship, diagnostics, infection prevention, education, surveillance, and workforce investment, supported by regulatory frameworks aligned to enable these efforts across all sectors. A One Health approach is foundational to this effort, recognizing that resistant organisms and genes move freely across settings, species, and ecosystems.

One Health and Environmental Integration



A One Health approach recognizes that AMR is shaped by environmental systems as much as by human and animal health practices, with soil, water, wildlife, and agricultural ecosystems serving as interconnected reservoirs where resistance, from any group, can emerge and persist. Integrating environmental stewardship into AMR strategy enables upstream prevention through monitoring of pharmaceutical manufacturing waste, hospital and municipal wastewater, and agricultural runoff, providing early warning of emerging threats while protecting ecosystems and public health. By embedding environmental action within a One Health framework, AMR is elevated from a siloed healthcare issue to a systems-level challenge, reinforcing shared responsibility across public health, veterinary medicine, agriculture, industry, and environmental sectors, and establishing environmental integration as essential infrastructure for durable, long-term control of AMR.

To this end, legal preparedness is essential to operationalizing One Health and environmental integration for AMR, translating policy intent into enforceable action through existing legal and regulatory frameworks without the need to create new ones. Clear and fully coordinated legal authorities foster and enable cross-sectoral collaboration, such as to facilitate data sharing among human, animal, and environmental sectors; environmental surveillance; regulation of pharmaceutical manufacturing waste and agricultural runoff; authorization of veterinary emergency use of diagnostics and countermeasures during disease outbreaks; and standardization of practices consistently across jurisdictions. Without fit-for-purpose legal and regulatory frameworks, environmental AMR risks remain under-monitored and under-addressed, weakening upstream prevention and limiting the effectiveness of broader One Health strategies.



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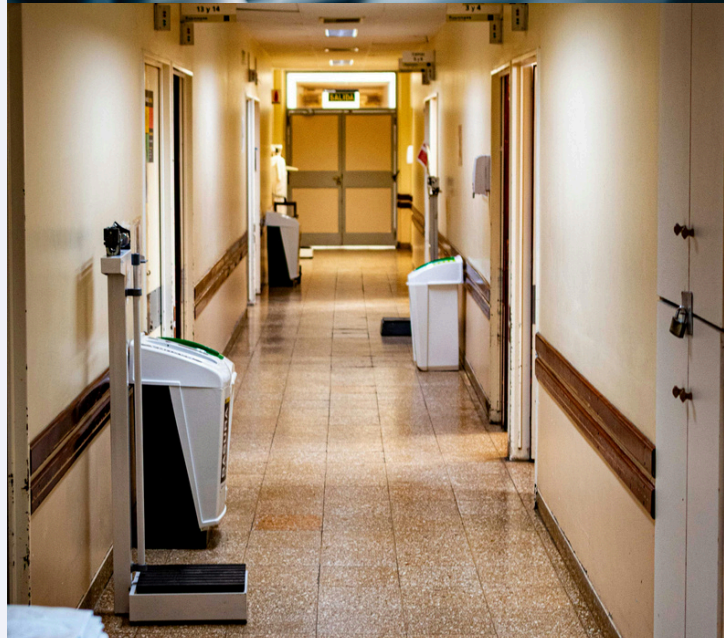
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Antimicrobial and Diagnostic Stewardship through a One Health Lens

Effective antimicrobial stewardship programs (ASPs) remain one of the most proven tools for reducing inappropriate antimicrobial use while improving patient outcomes. ASP emphasizes appropriate use of the best available drugs and diagnostics, in the right patient at the right time. In the United States, progress has been made in hospital-based stewardship, but significant gaps persist across care settings.

Hospital and Long-Term Care Facility Stewardship

All U.S. acute-care hospitals are required to maintain ASPs; however, program quality, staffing availability and training, and scope vary widely, especially in non-academic centers, serving rural and/or critical access areas. Sustained progress will require moving beyond minimum compliance toward standardized expectations for action, integration of diagnostics into prescribing workflows, and dedicated, trained personnel. For example, standardized, evidence-based protocols for sepsis recognition and treatment, including timely antibiotic administration, should be incorporated into stewardship frameworks. Progress must be coupled with sustained investment in and access to novel, rapid diagnostics to guide timely and appropriate antibiotic use, reduce diagnostic uncertainty, and enable more precise and targeted treatment decisions. Federal and state public health efforts, such as grants and technical support programs, play a critical role in supporting staffing standards, health information technology integration, and data-driven stewardship in hospitals and long-term care facilities, where vulnerable populations face disproportionate AMR risk. Additionally, reimbursement systems must be reassessed to ensure that hospital formularies are empowered and appropriately reimbursed to procure and use the latest innovation in AMR products (therapeutics and diagnostics) so patients heal faster and safer with less adverse reactions, and ultimately achieve overall economic savings with a less burdened system.





Antimicrobial and Diagnostic Stewardship through a One Health Lens (cont.)

Veterinary Stewardship

ASPs are increasingly being implemented in veterinary hospitals, reflecting growing recognition and application of available tools and techniques in a One Health framework. Existing resources, such as stewardship templates and One Health training programs developed by academic centers, provide a foundation for broader adoption. Scaling these efforts will require incentives, professional education, and integration with existing medical records, veterinary prescribing, and diagnostic data systems, particularly in small and independent practices.

Outpatient and Community Stewardship

Outpatient settings, including urgent care centers, retail clinics, and primary care, account for a substantial share of inappropriate antimicrobial prescribing, especially for acute respiratory tract infections, which are often due to viruses, for which antibiotics are ineffective. Moreover, incentives focused on patient satisfaction metrics can lead to excess antibiotic prescriptions. Community-focused stewardship should include public education campaigns, prescribing feedback and accountability mechanisms, and integration into quality measurement and reimbursement models. Pilot programs supported through federal and state funding mechanisms could help establish ASPs in high-volume outpatient settings and generate evidence to support national expansion.

Align Legal and Reimbursement Frameworks for Stewardship

Antimicrobial stewardship remains uneven across human healthcare settings in the United States, in part because the legal and regulatory frameworks that support stewardship are fragmented or underdeveloped outside acute-care hospitals. Effective stewardship across hospital, outpatient, long-term care, and community settings requires targeted legal and policy interventions to align accreditation standards, reimbursement mechanisms, staffing, and prescribing authorities so that audit-and-feedback, diagnostic-guided prescribing, and dedicated stewardship capacity can function consistently and at scale. Similarly, the availability of advanced diagnostics varies widely across the continuum of care, and this gap is compounded by inconsistent and often inadequate reimbursement for proven diagnostic tools; limiting their adoption and undermining efforts to enable appropriate, evidence-based antibiotic use across settings. Legislative efforts such as the [Diagnostic Accuracy in Sepsis Act \(DASA\)](#) highlight the importance of improving diagnostic reliability while supporting antimicrobial stewardship goals.

Education and Outreach

Stewardship depends on sustained behavior change among prescribers, patients, and veterinary clients alike. National education campaigns should reinforce appropriate antimicrobial use, clarify the distinction between bacterial, viral, and fungal infections, and address misconceptions that drive demand for unnecessary antibiotics. Social science experts must be incorporated into these efforts to ensure best practices are followed that actually result in behavior change. Additionally, this work should align with broader priorities in public and animal health, including emerging interest in the links between antimicrobial use, microbiome disruption, and chronic disease.



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Infection Prevention and Control

Infection Prevention and Control (IPC) programs reduce the need for antimicrobials and limit opportunities for antimicrobial resistant organisms to spread within the community, veterinary, and healthcare settings.



Healthcare and Veterinary Infection Prevention

Hospitals and long-term care facilities require sustained investment in IPC infrastructure, workforce training, and compliance monitoring; nurses, in particular, play a critical role in patient care and should be included and empowered to lead in every effort. Additionally, emerging technologies, including wastewater surveillance within healthcare facilities, offer promising tools for early detection of resistant pathogens and outbreak prevention, but adoption remains uneven. Collaborative nationwide efforts, like the [APIC Veterinary Medicine IPC Council](#), are also underway to advance and implement IPC in veterinary settings. Federal guidance and enforcement, coupled with technical assistance, financial resources and necessary infrastructure, can help ensure consistent implementation of IPC best practices nationwide.

Community and Outbreak Control

In community settings, IPC extends beyond healthcare facilities to include sanitation, hygiene, vaccination, and rapid outbreak response. Strengthening public health capacity and IPC programs at the state and local level is essential to detecting and containing resistant infections before they escalate, such as progression to sepsis, especially in vulnerable populations. States, locals, tribes, and territories should have the necessary tools to support their communities with the appropriate resources to engage private partners as well to achieve their goals.



Strengthening Enforceable Infection Prevention Standards

Infection prevention efforts vary widely across human healthcare and congregate care settings, reflecting gaps in the legal standards and enforcement mechanisms that underpin consistent practice. Strengthening infection prevention in human healthcare settings requires clear, enforceable guidelines, supported by workforce standards and accountability mechanisms, that establish baseline expectations across facilities and jurisdictions and reduce preventable infections that drive antimicrobial use.



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Diagnostics

Diagnostics are central to effective stewardship and patient care, ensuring that patients get the right therapeutic treatment promptly, reducing unnecessary antimicrobial exposure.

Integration with Stewardship

Diagnostic-guided prescribing, supported by affordable rapid tests, clinical decision support, and telehealth, should be embedded into routine care. Aligning diagnostic use with stewardship protocols ensures that results meaningfully influence prescribing behavior rather than serving as standalone tools. In parallel, the development and adoption of companion diagnostics for novel antimicrobial therapies should be encouraged in infectious diseases, ensuring the right drug is used for the right patient at the right time through precise, diagnostic-informed decision-making.

Point-of-Care Deployment

For human healthcare, expanding access to affordable, high-quality point-of-care diagnostics requires reimbursement reform, improved data integration, and sustained investment in development. Expansion of financial resources is needed in veterinary medicine, where diagnostic access remains limited and cost barriers are significant.

Enabling Diagnostic-Guided Care Through Legal and Payment Alignment

Despite the availability of effective diagnostic technologies, legal and regulatory barriers, including misaligned approval pathways, reimbursement policies, and liability considerations, continue to limit their routine use in human health clinical care. Modernizing the regulatory, payment, and liability frameworks surrounding diagnostics would remove persistent barriers to routine use, empowering clinicians to integrate rapid and point-of-care testing into everyday patient care and stewardship decisions.

Public Education

Long-term AMR prevention depends on early and sustained education. State and local interventions are essential to building the public understanding and professional capacity needed to combat AMR.

Build Foundational AMR Literacy Through K-12 Curricula

Working with state and local governments to effectively integrate educational content into elementary and secondary school curricula can build foundational understanding of infection prevention through hand hygiene, nutrition, sanitation, and differences between bacterial, viral, fungal, and parasitic pathogens.

Community-Based Health and Stewardship Education

Community-based education can reinforce best practices and empower individuals to engage constructively with human healthcare and veterinary providers. Efforts should support broader public and animal health priorities related to inappropriate antimicrobial use and chronic disease while remaining grounded in evidence-based messaging.

Policy Enablers for AMR Education

To incentivize the uptake of these educational efforts and to ensure that they are implemented consistently and sustained over time, policy interventions and guidance play a critical enabling role to portray the benefits of programs that incorporate best practices. For example, state and federal policy levers (including continuing education standards) can be used to institutionalize AMR education across the human and agricultural health workforce, clinicians and veterinarians, and public-facing programs, ensuring that prevention and stewardship principles are embedded within routine training, professional practice, and community engagement rather than dependent on ad hoc or time-limited initiatives.



Surveillance and Data Integration

Effective response to AMR requires timely, integrated data to detect emerging antimicrobial resistance patterns and guide interventions across sectors. However, surveillance and data monitoring efforts remain fragmented across healthcare and public health systems, limiting situational awareness and coordinated response.

State, Territorial, Tribal, and Local (STTL) Surveillance

Strengthening STTL data collection, sharing, and analytic capacity is essential to understanding local AMR patterns and informing interventions. Investment in robust technologies and AI-enabled analytics can enhance outbreak detection, forecasting, and situational awareness.

Integrated One Health Data

Human, animal, and environmental data should be augmented under the existing National Antimicrobial Resistance Monitoring System (NARMS) and fortified to provide a further comprehensive picture of AMR trends. Additional public-private partnerships being explored for the development of cross-sector databases, as well as support and expansion of laboratory capacity, including antimicrobial susceptibility testing and next-generation sequencing, such through as the National Animal Health Laboratory Network (NAHLN) and Veterinary Laboratory Investigation and Response Network (Vet-LIRN), will help support this integration.

Wastewater and Environmental Surveillance

Monitoring wastewater, agricultural and hospital waste runoff, and other environmental sources can provide early warning of emerging resistance and inform upstream prevention strategies. It supports and enhances clinical AMR surveillance, taking into account gaps in existing public health data to inform prioritization. Data obtained should be appropriately linked to public health decision-making, including tracking AMR trends over time, detecting increases or emergence of resistant strains, supporting decisions on AMR policies, and evaluating intervention impact.

Modernizing Legal Authorities and Governance Frameworks for Public Health Surveillance and Data Sharing

Strengthening surveillance requires modernized governance frameworks that enable timely, secure data collection and sharing across federal, state, territorial, tribal, and local public health partners, as well as commercial entities. However, maintaining privacy protections and security are of utmost importance to gain public and participant trust. Therefore, clear, context-based, community-informed legal frameworks for data use and exchange are essential to support integrated analysis, especially within the animal health sector. For example, the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and the National Animal Health Monitoring System (NAHMS) Confidential Information Protection and Statistical Efficiency Act (CIPSEA), which should be maintained and may be used as an exemplar to inform all data collection efforts. CIPSEA provides a way for Federal agencies to collect statistical information and protect its confidentiality using the force of law.



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Workforce Recruitment and Retention

A resilient AMR response depends on a skilled and sustainable workforce, yet persistent shortages threaten stewardship, surveillance, laboratory testing and outbreak response capacity.

Clinical Infectious Diseases and Microbiology Workforce

Infectious disease clinicians and pharmacists play a critical role in caring for patients with resistant infections and leading stewardship and infection prevention programs. The clinical microbiology workforce is also essential, as trained Medical Laboratory Scientists are required in the development, validation and implementation of diagnostic tools required to support laboratory testing and doctoral level Clinical Microbiologist to guide and implement the testing. Yet financial disincentives, including low reimbursement and high educational debt, often deter trainees from entering the field. Addressing these barriers through reimbursement reform, loan repayment, and programmatic support is essential.

Public Health Workforce

Public health professionals are central to surveillance, outbreak response, and addressing the needs of the community. Sustained investment in training programs, such as the [CDC's Epidemic Intelligence Service](#), and efforts to reduce financial barriers to public health careers will strengthen national readiness.

Reducing Workforce Barriers Through Statutory and Regulatory Tools

Persistent shortages in the infectious diseases and public health workforce are exacerbated by legal and regulatory barriers that affect reimbursement, training pathways, and career sustainability. Statutory and regulatory interventions (e.g., workforce designation authorities, funding support for training, loan repayment programs, and payment reforms) are necessary to stabilize and grow the workforce required to sustain stewardship, surveillance, and outbreak response. One such example is the USDA's [Veterinary Medicine Loan Repayment Program](#), which helps qualified veterinarians offset a significant portion of the debt incurred from receiving their veterinary medicine degrees in return for their service in certain high-priority veterinary shortage situations.

Cross-Cutting Community Considerations

Stewardship and diagnostic efforts should be linked to existing human healthcare system levers, including quality measures and reimbursement models, to ensure sustainability and scale. Communication strategies tailored to prescribers, patients, and the public can reinforce behavior change and maintain momentum. Finally, meaningful engagement with tribal nations, rural communities, and underserved populations is essential. Collaboration with the [Indian Health Service](#) and [Tribal Epidemiology Centers](#) can help ensure that AMR strategies reflect diverse contexts, respect data sovereignty, and address inequities in access to care, diagnostics, and veterinary services.



AMR threatens food safety and security by increasing the risk of resistant pathogens entering the food supply and disrupting production, processing, and distribution systems. Resistant pathogens affecting livestock, crops, soil, and water can disrupt agricultural productivity, undermine food security, and pose risks to human and animal health through direct exposure and environmental pathways. Addressing AMR in agriculture requires balancing stewardship with farmer viability, recognizing the economic realities of food production while advancing practices that protect long-term public, animal, and environmental health integrity.

This pillar emphasizes opportunities in sustainable agriculture, food safety, farmer support, and One Health integration, emphasizing incentives, innovation, and partnership rather than punitive or one-size-fits-all mandates.

Food Security, Safety, and Access

A resilient AMR response depends on a skilled and sustainable workforce, yet persistent shortages threaten stewardship, surveillance, laboratory testing and outbreak response capacity.

Agricultural Diagnostics and Surveillance

Strengthening surveillance for AMR pathogens in food and livestock systems is essential to protecting domestic food supplies and detecting emerging threats, including potential foreign interference. Modernized and expanded support for the NARMS should incorporate additional incentives for voluntary reporting that would support state-to-state data sharing, standardized analysis and integration with human and environmental surveillance systems.

Sustainable Farming Practices

Farmers face increasing challenges from resistant plant and animal pathogens that can devastate yields and livelihoods. Government subsidies and technical assistance can help offset losses, support adoption of preventative measures, and facilitate precision agriculture approaches that reduce unnecessary antimicrobial use. Investment in research and development for vaccines, biologics, non-antibiotic preventatives and treatment alternatives, and their availability as products to a range of animal species are particularly important.



Nutrition and Access

Food policy plays a critical role in public health. Promoting nutrition-focused initiatives, such as “food as medicine” programs, can improve health outcomes while strengthening demand for sustainably produced foods. Simplifying certification processes and reducing administrative burdens can help small and mid-sized producers participate in these initiatives and ultimately increase access to healthy and sustainable food.



Farmers and Farmland

Recognizing the limitations and challenges faced by farmers is essential. AMR strategies must be designed with producer input and structured to support, rather than penalize, those working to adopt best practices.

Farm Biosecurity

Farm-level biosecurity is a first line of defense against the introduction and spread of all pathogens, including resistant ones, protecting not only individual producers but the integrity of regional and national food systems. As agriculture becomes increasingly interconnected through animal movement, feed supply chains, and trade, localized outbreaks can rapidly escalate into broader economic and public health crises. Strengthening biosecurity therefore serves both public health and market stability functions, preserving consumer confidence, safeguarding export markets, and reducing the likelihood that resistant organisms establish persistent reservoirs within agricultural systems. Effective biosecurity must be practical, scalable, and developed in partnership with farmers, ensuring that measures enhance resilience without creating unsustainable operational burdens. Secure Food Supply Plans, funded by USDA-APHIS and in collaboration between industry, state governments, USDA, and academia, are real-world examples of practical and sustainable implementation of biosecurity in this space.

Research and Innovation in Agriculture

Agricultural systems represent a critical but still underexplored frontier in AMR research. Soil, water, crops, livestock, companion animals, and wildlife form interconnected ecosystems that interface with humans; resistance can emerge, persist, and spread in any and all compartments. Expanding research not only supports improved stewardship but also strengthens national understanding of how environmental and agricultural practices influence human health outcomes and, inversely, how human activities impact the environment. Innovation in this space, such as improved preventatives, biologics, diagnostics, and non-antibiotic disease prevention strategies offer farmers tools to maintain productivity while reducing reliance on antimicrobials. Investing in this research aligns agricultural sustainability with long-term public health protection.

Farmer Support and Incentives

Aligning stewardship with farmer economic viability and animal welfare is at the core of minimizing the incidence of AMR by ensuring sustainable long-term efforts. Producers operate under narrow margins and high financial risk, making voluntary adoption of new practices difficult without meaningful, material support. Incentive-based approaches recognize farmers as essential partners in national AMR prevention rather than compliance subjects. By coupling stewardship goals with grants, tax credits, market recognition, and stable procurement opportunities, AMR strategies can reinforce rural economic resilience while accelerating adoption of best practices for the welfare of their animals. These investments also strengthen trust, encourage innovation, and ensure that agricultural AMR policies remain both effective and politically durable.



Farmers and Farmland (cont.)

Support Farmers and Farmland Through Enabling Policy Tools

Farmers face growing pressures from resistant plant and animal pathogens, climate stressors, and market volatility, thus additional support is needed to increase the adoption of stewardship-aligned and preventative practices. Incentive-based programs, technical assistance authorities, and flexible compliance mechanisms can help farmers protect productivity and livelihoods while reducing reliance on antimicrobials and supporting long-term land stewardship. Furthermore, data sharing and standardization efforts have been long discussed, yet trust, including ensuring privacy and security, and incentives must further be developed within the farming community to garner acceptance. The need to institute acceptable privacy measures must be further explored, primarily through the inclusion of the farming community's perspectives, to thoroughly appreciate and understand the sensitivities and concerns shared and to address them appropriately. Legal frameworks can be developed to be useful policy tools toward fostering these and other measures needed to minimize the pressures on farmers in a way that brings long-term protections for the sector.

Economic Resilience and Global Context

Framing AMR action within economic resilience and the global context recognizes that food security, public health, and national competitiveness are deeply interconnected. Strengthening domestic agricultural capacity, supporting U.S. producers, and aligning stewardship practices with international standards such as Food and Agriculture Organization (FAO)'s Codex Alimentarius protect both public health and market stability while reinforcing the reliability of U.S. food systems. At the same time, AMR is inherently a cross-boundary challenge, shaped by global trade, supply chains, and environmental flows, making international coordination essential to safeguarding domestic gains.

Agricultural AMR strategies should be situated within this broader economic and global landscape, emphasizing that investments in stewardship, surveillance, and sustainable production are not only health interventions, but also strategic actions that enhance long-term economic resilience, trade security, and global leadership. Legal and policy engagement in trade frameworks, international food safety standards, and supply-chain governance is necessary to ensure U.S. producers operate on a level playing field while aligning domestic AMR practices with global expectations and market access requirements.





Modern medicine depends fundamentally on the availability of effective antimicrobials. Cancer chemotherapy, organ transplantation, major surgeries, neonatal care, and the use of many biologics and immunosuppressive therapies all rely on the ability to prevent and treat infections. As antimicrobial resistance erodes the effectiveness of existing drugs, the foundation of routine and advanced medical care is placed at risk. Protecting modern medicine requires sustained investment in innovation, regulatory modernization, and systems that ensure access to effective therapies while supporting responsible use.

This pillar emphasizes opportunities to revitalize the antimicrobial innovation ecosystem, ensure sustainable access to diagnostics and therapeutics, and align regulatory and economic incentives with public health needs.

Novel Research and Development

Revitalizing the antimicrobial innovation ecosystem requires modernizing regulatory pathways, leveraging emerging technologies, linking therapeutic and diagnostic development, and sustaining funding across the full research continuum, from basic science to clinical trials, in both human and animal health.

Reducing Legal and Regulatory Barriers to Innovation

Scientific advances, like next-generation sequencing, multi-omics technologies, synthetic biology, and AI, offer unprecedented opportunities to accelerate antimicrobial discovery and development. However, regulatory complexity and misaligned incentives that are not calibrated to the scientific, clinical, and stewardship realities of AMR can slow progress. Targeted legal and regulatory interventions, including modernizing regulatory approval pathways, adaptive trial authorities, and clearer guidance for novel antimicrobial modalities, while maintaining rigorous safety and efficacy standards, can reduce unnecessary barriers that stifle innovation.

Innovative Therapeutics

Advanced technologies should be leveraged to support the development of novel antibiotics, antifungals, antivirals, antiparasitics, bacteriophages, antimicrobial peptides, and immune-based therapies. Safeguards are essential to ensure responsible development and deployment, particularly when using AI-enabled approaches.

Diagnostics-Linked Development

Pairing therapeutics with companion diagnostics can optimize patient outcomes and stewardship by ensuring that treatments are used appropriately and effectively. Co-development and co-approval pathways should be expanded, with incentives for partnerships between therapeutic and diagnostic developers.

Foundational Science Investments

Sustained funding across the research continuum, from basic science to translational clinical trials, is essential. Areas for priority support include alternatives to antimicrobials, comparative effectiveness studies, trials to optimize the use of existing antimicrobials, clinical utility studies assessing diagnostic impact, and molecular epidemiology research to inform targeted interventions. Animal health funding should be further enhanced in relation to existing human health investments to achieve greater synergies in research, analysis, and development.



Availability and Access

Ensuring that novel antimicrobials and diagnostics reach all patients requires coordinated action across equitable distribution, regulatory harmonization, liability reform, and sustainable pricing and reimbursement models.

Equitable Access Across Health Systems

Novel antimicrobials and diagnostics must be accessible to rural hospitals, tribal health systems, and smaller facilities that often lack the resources to adopt new technologies. Policies that support distribution, training, and reimbursement can help ensure that innovation translates into real-world impact.

Regulatory Harmonization

Global regulatory fragmentation increases development costs and delays patient access. Once an antimicrobial has been approved by multiple stringent regulatory authorities, other jurisdictions should adopt streamlined approval processes. Aligning post-approval requirements can also reduce duplicative efforts and accelerate global availability.

Liability Risk Management and Legal Preparedness in Human Health

Even when novel antimicrobials and diagnostics reach the human health market, legal uncertainty around liability, procurement, and reimbursement can discourage adoption, particularly in rural, tribal, and under-resourced health systems. Clarifying liability standards and establishing targeted legal safe harbors for use consistent with evidence-based clinical and stewardship guidelines can reduce barriers to access, particularly for rural, tribal, and under-resourced health systems, while preserving patient safety and accountability.

Sustainable Pricing and Reimbursement

Antimicrobial markets are uniquely challenged by stewardship-driven volume constraints. Adjusted reimbursement models and pricing mechanisms, particularly for products manufactured and available in the United States, can support company viability while maintaining patient affordability and access.

Scientific Workforce Development

A robust innovation ecosystem depends on a skilled and stable scientific workforce. However, AMR research careers are often undermined by funding instability, regulatory complexity, and limited cross-sector mobility. Consistent funding to support training, early-career development, and long-term research careers in AMR and infectious diseases are necessary to maintain momentum and institutional knowledge. Workforce strategies should span academia, industry, and government, ensuring cross-sector mobility and collaboration.

Legal and policy tools, including sustained funding authorities, training and fellowship mechanisms, and workforce mobility provisions across sectors, are essential to retaining talent and preserving institutional knowledge across the antimicrobial development pipeline.



Incentives for Novel Therapies and Diagnostics

Addressing the fundamental market failures that undermine antimicrobial development requires a balanced combination of pull incentives, including delinked revenue models and federal procurement mechanisms like the PASTEUR Act, and push incentives through sustained public-private partnerships and support

Pull Incentives

Pull incentives are a cornerstone of a legally prepared AMR response, addressing fundamental market failures while aligning innovation with stewardship. Delinked revenue models, implemented through federal contracts, subscription-based reimbursement, or other procurement mechanisms, provide predictable and solid returns independent of sales volume. By establishing clear, stable legal and economic frameworks, these approaches support sustained antimicrobial development, domestic manufacturing capacity, responsible use, and equitable access.

The PASTEUR Act, legislation reintroduced in February 2026, represents a critical opportunity to reinvigorate antimicrobial innovation by providing federal contracts for highly novel, clinically meaningful antimicrobials that are delinked from sales volume. Market entry rewards, exclusivity extensions, and incentives tied to domestic manufacturing can further strengthen the pipeline. Similar efforts are needed on the animal health side to further augment stewardship practices and provide farmers with effective, affordable, and available products.

Push Incentives

Public-private partnerships remain essential to supporting early-stage research and development. Maintaining and expanding ASPR/BARDA's antimicrobial support programs can help de-risk innovation and advance candidates through critical development stages, while encouraging collaboration across human and animal health sectors.

In all, adequate adoption and support of pull and push incentives will strengthen the development and sustainable availability of novel antimicrobials and diagnostics critical to all healthcare, including AMR, sepsis, and other infectious diseases.



Veterinary and Agricultural R&D

Innovation in animal health must proceed in parallel with human health while minimizing overlap that could compromise the effectiveness of human-use antibiotics. Dedicated R&D mechanisms for both companion and animal agriculture therapeutics and preventatives can improve animal welfare and reduce inappropriate antimicrobial use without exacerbating resistance risks.



*AMR is not only a public health challenge but a growing threat to U.S. national security. Resistant pathogens, such as *Candidozyma auris* (formerly *Candida auris*), *New Delhi metallo-β-lactamase-producing carbapenem-resistant Enterobacterales* (NDM-CRE), *Carbapenem-resistant Acinetobacter baumannii* (CRAB), *Methicillin-resistant Staphylococcus aureus* (MRSA), and other pathogens described in CDC AMR threats reports, undermine military readiness, strain emergency response systems, and increase vulnerability to biological incidents, whether naturally emerging, accidental, or deliberate. The COVID-19 pandemic exposed persistent weaknesses in preparedness, supply chains, and workforce capacity that continue to affect national resilience. Addressing AMR through a national security lens is therefore essential to protecting the homeland, supporting allies, and maintaining strategic advantage. AMR should not be seen as a silo topic area but a regular and organic factor in all defense considerations addressing the protection of life, be it civilian, military, environmental, or agricultural.*

This pillar emphasizes opportunities to elevate preparedness, biodefense, supply-chain resilience, and biosecurity, recognizing that AMR intersects directly with defense health, emergency response, and global stability.

Biodefense and Preparedness

Protecting military readiness and national preparedness requires embedding AMR into biodefense authorities, operational planning, and whole-of-alliance frameworks that ensure service members, first responders, and civilian populations are defended against resistant pathogens at home and abroad. Furthermore, within the One Health approach, additional harmonization and coordination among federal agencies and initiatives engaged in animal/agricultural biosecurity and biosafety, including USDA, FDA, CDC, are necessary, particularly in concert with state-led initiatives; including animal health veterinarians and subject matter experts in biodefense measures presents a true whole-of-government approach to preparedness and response, augmenting our national security.

Force Health Protection

Through the Multidrug-Resistant Organism Repository and Surveillance Network (MRSN) and other systems, the Department of Defense/War (DoD/W) plays a critical role in monitoring, preventing, and responding to resistant infections within military populations. Strengthening surveillance, infection prevention, and access to first-in-class treatments in military healthcare settings is essential to maintaining force readiness. DoD/W-supported research and surveillance efforts also provide valuable early warning signals for emerging resistance threats that may later affect civilian populations.

Global Deployment and the Frontline AMR Threat

U.S. military personnel serve across geographic regions where resistant pathogens are more prevalent, local healthcare infrastructure is limited, and access to appropriate diagnostics and treatments may not be available. Deployed personnel face direct exposure to resistant organisms that may be absent or rare in U.S. settings, and without adequate surveillance and treatment access in theater, those organisms can return home with them. AMR situational awareness must therefore be built into operational planning and field-level medical preparedness, and not deferred until personnel return to domestic care. The U.S. should work with host nations and allied forces to share surveillance data, align diagnostic capacity, and ensure that service members have access to effective countermeasures wherever they are deployed.



Biodefense and Preparedness (cont.)

Embedding AMR within Biodefense and Preparedness Authorities

AMR remains inconsistently addressed within governing biodefense laws and preparedness authorities. Explicitly incorporating AMR into biodefense statutes, emergency authorities, and preparedness frameworks, including procurement, contracting, and response powers, is necessary to ensure rapid legal activation of diagnostics, therapeutics, and manufacturing surge capacity during resistant pathogen threats.

Whole-of-Alliance Commitments

AMR is a shared threat among allies, requiring coordinated international commitments. The U.S. should increase and dedicate funding toward AMR threat mitigation through whole-of-alliance approaches, integrating AMR into broader biodefense and security partnerships. These commitments can reinforce shared surveillance, information exchange, and coordinated response capabilities.



Military Physician Advocacy and Workforce Support

Establishing a Military Physician Advocacy Group focused on AMR can elevate awareness within defense leadership and promote a “Protect Our Troops” campaign that emphasizes stewardship, infection prevention, and access to effective countermeasures. Our service men and women should have access to the most innovative medical countermeasures and appropriate healthcare service.

National Preparedness Workforce

National preparedness for AMR requires treating resistant pathogens as a standing, systemic threat rather than a series of isolated public health events. Readiness depends on the ability to rapidly detect emerging resistance, ensure availability of effective countermeasures, maintain resilient supply chains, and coordinate response across civilian, military, and emergency management systems. AMR preparedness, therefore, must be embedded within existing biodefense and all-hazards frameworks, alongside pandemic, CBRN, and disaster response planning.

Additionally, augmentation of the emergency, infectious diseases, and first responder workforce is critical to restoring national preparedness capacity still strained from the COVID-19 response. By adequately integrating AMR into national preparedness infrastructure, the U.S. can strengthen its capacity to respond not only to routine resistant infections, but also to large-scale outbreaks, supply disruptions, and deliberate biological threats.



Supply Chain Resilience and Onshoring

Reducing U.S. dependence on foreign manufacturing of essential antimicrobials requires strategic investment in domestic production infrastructure, aligned with priority pathogen threats and supported by strengthened statutory procurement authorities and long-term contracting mechanisms.

Domestic Manufacturing

Reliance on foreign manufacturing for critical antibiotics and their components presents strategic vulnerabilities. Incentivizing domestic manufacturing can reduce dependence on entities of concern and improve surge capacity during emergencies. These investments should span human, animal, and plant health to support the availability of both novel and generic antibiotics, antifungals, alternative therapies, and diagnostics.

Infrastructure for Priority Pathogens

Manufacturing and development capacity should align with priority pathogen lists, including ESKAPE organisms and Public Health Emergency Medical Countermeasures Enterprise (PHEMCE)-designated threats. Ensuring readiness for chemical, biological, radiological, and nuclear (CBRN) events requires infrastructure capable of rapid scale-up and sustained production during shortages or crises.

Securing Supply Chains Through Statutory and Contracting Authorities

Dependence on foreign manufacturing for essential antimicrobials and inputs exposes legal and operational vulnerabilities during crises and geopolitical disruption. Strengthening statutory procurement authorities, long-term contracting mechanisms, and incentive-based legal tools can support domestic manufacturing, diversify sourcing, and ensure legally enforceable supply continuity for national security needs.

Countermeasure Development and Federal Programs

Sustaining a robust countermeasure development pipeline against AMR-related biological threats requires reauthorizing key preparedness legislation, securing predictable federal funding, and maintaining clear statutory mandates that ensure timely procurement and deployment of novel diagnostics and therapeutics.

ASPR/BARDA and Project BioShield

Reauthorizing the Pandemic and All-Hazards Preparedness Act (PAHPA) and strengthening Project BioShield are essential to sustaining countermeasure development. Increased and predictable funding for the Administration for Strategic Preparedness and Response (ASPR)/Biomedical Advanced Research and Development Authority (BARDA), particularly for diagnostics that enhance surveillance and early detection, will reinforce national preparedness and innovation pipelines.

Development and availability of AMR-relevant countermeasures depends on predictable legal authorization and funding for federal preparedness programs. Maintaining clear statutory mandates and appropriations for programs such as BARDA and Project BioShield is essential to sustaining antimicrobial development pipelines and ensuring lawful, timely procurement of countermeasures for AMR threats.

Innovative Countermeasures

Dedicated investment is needed to advance novel antibiotics, mono- and polyclonal antibodies, antimicrobial peptides, and other preventatives or therapeutics relevant to biothreats. Maintaining and updating the Strategic National Stockpile to reflect evolving resistance patterns is critical to ensuring readiness for resistant pathogen scenarios.



Biosecurity and Research Oversight

Safeguarding national security against AMR-related biosecurity risks requires rigorous oversight of high-risk research, strengthened animal and crop biosecurity frameworks, explicit legal recognition of emerging threats like fungal AMR, and clear statutory authorities to ensure accountability across research, manufacturing, and distribution.

Oversight of High-Risk Research

Robust oversight of dual-use research of concern (DURC) and enhanced pathogen pandemic experiment oversight (PEPP) is essential to minimizing risks associated with high-consequence biological research. Transparent risk mitigation, ethical review, and compliance mechanisms should be consistently applied across sectors.

Animal and Crop Biosecurity

Resistant pathogens affecting animals and crops pose risks to food security, economic stability, and national defense. Strengthening biosecurity measures across sectors and commodity groups through increased communication and collaboration can promote best practices to help safeguard against the introduction and spread of invasive, resistant organisms, including those associated with malicious actors or regions of biological concern. Additional support for legislation for the [Farm, Food, and National Security Act of 2026](#) is critical since it supports antibiotic stewardship indirectly through veterinarian-led prescribing frameworks, disease prevention that reduces antimicrobial demand, AMR research and surveillance (ex. NARMS and NAHMS), and producer education tools.

Fungal AMR Risk

Fungal AMR represents an under-recognized but growing threat to both civilian and military populations. Expanding antifungal research and cross-sector studies can help close critical knowledge gaps and inform preparedness strategies. Knowledge gained from this research can inform rapid diagnostics for these often insidious pathogens. There has been a steady rise of deadly resistant *C. auris* primarily spreading in long-term care facilities, nursing homes, and hospitals, contaminating the environment and surviving on surfaces (e.g, bed rails, chairs, medical equipment) for long periods, making it hard, and at times impossible, to eradicate. [Over 50% of states in the United States have already reported cases as of 2026.](#)

The risk of fungal AMR is in part because it is insufficiently reflected in existing preparedness authorities and surveillance mandates. Explicit legal recognition of fungal AMR within surveillance requirements, research authorities, and biodefense planning is necessary to close gaps in detection, countermeasure development, and response readiness.

Strengthening Biosecurity Through Clear Oversight and Compliance Authorities

AMR intersects with biosecurity risks related to high-risk research, manufacturing, and distribution, where fragmented legal oversight can create gaps in accountability. Applying clear statutory and regulatory authorities for biosecurity oversight, inspection, and compliance, while preserving pathways for responsible research and manufacturing, is critical to mitigating misuse risks and reinforcing national preparedness.



Effectively confronting AMR requires strong, sustained networks that connect data, people, institutions, and countries. AMR does not respect jurisdictional boundaries; progress depends on coordinated action across state, national, and global systems.

This pillar emphasizes opportunities to strengthen the networks that enable surveillance, information sharing, accountability, and long-term continuity, ensuring that AMR efforts remain active and resilient across administrations and evolving conditions.

Strengthening Domestic Networks

Safeguarding national security against AMR-related biosecurity risks requires rigorous oversight of high-risk research, strengthened animal and crop biosecurity frameworks, explicit legal recognition of emerging threats like fungal AMR, and clear statutory authorities to ensure accountability across research, manufacturing, and distribution.

State, Territorial, Tribal, and Local (STTL) Collaboration

Empowering STTL partnerships is foundational to an effective national AMR response. Investments in shared surveillance systems, interoperable data platforms, interprofessional education, and specimen and laboratory-sharing capacity can enhance situational awareness and response at the community level. Supporting tribal data sovereignty and government-to-government collaboration is essential to building trust and ensuring that AMR strategies reflect the full national landscape.

Availability and Access Across Jurisdictions

AMR burdens often fall disproportionately on rural, low-income, and tribal communities where access to medical care, diagnostics, and veterinary services may be limited. Ensuring equitable access to antimicrobials, diagnostics, and expertise across all states and regions requires coordinated planning, resource sharing, and targeted interventions to disrupt the factors causing the disparity to begin with. State and national alignment can help mitigate disparities and ensure readiness during outbreaks or shortages.

National Metrics and Dashboards

Establishing standardized metrics and public-facing dashboards can improve transparency, accountability, and coordination. Indicators may include stewardship adoption, surveillance coverage, workforce capacity, domestic manufacturing readiness, and access to novel therapies. Periodic updates, shared platforms, and coordinated planning cycles can help sustain momentum and inform course corrections, as well as maintain continuity across administrations and leadership transitions.

Communications and Engagement

Clear, consistent communication across agencies, sectors, and communities is essential to keeping AMR visible as a national priority. Regular updates, shared learning platforms, and inclusive engagement strategies can help translate policy into sustained action.



International Partnerships

AMR is inherently a transboundary threat, shaped by global patterns of antimicrobial use, pathogen movement, trade, and supply chains that no single country can manage alone. Effective AMR action therefore depends on strong international partnerships that enable coordinated surveillance, aligned policy approaches, shared innovation, and resilient manufacturing and distribution systems. By investing in bilateral, regional, and multilateral collaboration, including trusted supply-chain alliances, the United States strengthens domestic preparedness and reduces the risk that resistant pathogens and critical shortages undermine health security at home.

Bilateral and Regional Cooperation

Strengthening bilateral relationships, particularly with close allies and leaders in the AMR space, can accelerate innovation, harmonize policy approaches, and enhance shared preparedness. Expanding regional partnerships supports coordinated surveillance, stewardship, and response across borders.

Sustain International Technical and Policy Partnerships to Strengthen U.S. Preparedness Initiatives

U.S. engagement in international initiatives that focus on technical implementation and those that shape international AMR policy is essential to an effective response. Participation in technically focused efforts, such as surveillance coordination, laboratory standards, and data-sharing platforms, strengthens early detection and operational readiness, while engagement in policy-oriented forums helps align international norms, regulatory approaches, and investment priorities with U.S. public health and security interests. Collaborative research augments these efforts by finding methods to enhance current technology and policy. Together, these complementary engagements ensure that global AMR action supports, rather than complicates, domestic preparedness and innovation.

Strategic Partnerships with Low- and Middle-Income Countries (LMICs)

Working in partnership with LMICs to strengthen surveillance, stewardship, prevention, and access is essential to protecting U.S. public health and national security. Many antimicrobial resistant pathogens and resistance mechanisms emerge or are detected earliest in settings with high disease burden and constrained resources; investing in shared capacity, data exchange, and early warning systems reduces the likelihood that emerging resistance threatens communities, healthcare systems, and supply chains in the United States.

Supply Chain Security and the Bio-5 Coalition

Continued engagement with allies and combining joint efforts, such as reconsideration of the Bio-5 Coalition, linking the United States, the European Union, the Republic of Korea, Japan, and India, can strengthen biopharmaceutical supply chains and reduce overreliance on single-source manufacturing, particularly in regions of strategic concern.



CONCLUSION: PROTECT OUR POLICIES

Consistency forms the foundation for durable, meaningful change. When decisions, legal systems, and policy frameworks shift too frequently and are poorly formed and/or communicated, they create uncertainty and erode public trust. By committing to stable, clearly described, long-term policies and transparent legal structures, shaped with the insight and lived experience of the communities most affected, the ASC believes the nation can advance a unified, coordinated approach across all One Health domains.

AMR is a defining challenge of this century, one that cuts across public health, national security, food systems, economic resilience, and the future of modern medicine. The consequences of inaction are neither abstract nor distant. Resistant infections already compromise patient outcomes, strain healthcare systems, threaten military readiness, and undermine confidence in the safety and security of the nation's food supply. Without sustained and coordinated action, these impacts will intensify, placing growing burdens on communities and institutions across the United States. Sepsis, for example, is among the most costly conditions in the U.S. healthcare system, and infections caused by resistant pathogens are associated with higher mortality, longer hospital stays, and increased healthcare costs.

AMPLIFY-AMR offers a strategic framework for confronting this challenge through shared leadership, multisector partnerships, and sustained innovation. While aligned with existing [U.S. National Action Plans](#) and federal priorities, this report reflects the recognition that AMR cannot be addressed by government action alone. Progress depends on coordinated efforts across human and animal health, agriculture, industry, academia, public health, defense, and civil society; working together toward common goals while respecting distinct roles and responsibilities.

At the same time, this report underscores that federal leadership remains indispensable. Only the federal government has the scale, authority, and reach to sustain national surveillance systems, finance core infrastructure, coordinate biodefense preparedness, and support innovation pipelines over the long term. Non-federal leadership and bottom-up partnerships are not substitutes for federal action; rather, they are force multipliers that can amplify impact, accelerate implementation, and sustain momentum across political cycles.

The five pillars and foundation of *AMPLIFY-AMR* (Protect Our Community: People and Animals; Protect Our Farms and Food; Protect Our Medical Care; Protect Our National Security; Protect Our Networks; and Protect Our Policies) are intentionally interdependent. Progress in one area reinforces progress in others. Stewardship is strengthened by diagnostics; innovation depends on sustainable markets; food and environmental health shape human health outcomes; and strong networks enable accountability, learning, and resilience; lastly, and most importantly, consistency is key to ensuring that all of these efforts remain clear, transparent, and on a path of trustworthy partnership. Addressing AMR effectively requires recognizing and acting on these connections.

AMPLIFY-AMR is not an endpoint, but a starting point. This report defines a set of strategic opportunities where progress against AMR is both urgently needed and realistically attainable. It does not present fully developed solutions, nor does it presume that any single institution or sector already possesses all of the answers. Instead, it is intended to catalyze the next phase of work: the deliberate development, testing, and implementation of solutions through sustained collaboration across the One Health spectrum.

Call to Action

Meaningful impact will depend on the formation of creative partnerships that translate these opportunities into actionable programs, policies, and investments. The ASC is poised to serve as a central convener and driver of implementation. By bringing together stakeholders, ASC can help transform the framework outlined in *AMPLIFY-AMR* into coordinated action and ensure that the opportunities identified here lead to measurable and lasting progress against AMR.

AMR will not be solved by a single policy, program, or plan but will be addressed through sustained commitment, adaptive leadership, and collective responsibility. *AMPLIFY-AMR* calls on all sectors of the U.S. AMR community to engage, align, and act together to preserve the effectiveness of life-saving antimicrobials and protect the health, security, and prosperity of current and future generations.





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