

Keynote Speech  
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*“Building a New Innovation Ecosystem  
for Antimicrobial Research & Development”*

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### Introduction

Ladies and gentlemen, distinguished colleagues,

It is a profound honor to stand before you today — not merely as a former minister, but as someone who has spent more than a decade watching a slow-motion crisis unfold.

In 2016, as Japan’s Minister of Health, Labour and Welfare, I placed AMR on the agenda of the Ise-Shima G7 Summit four months before the first UN General Assembly High Level Meeting on AMR.

More recently, in preparation for the second UN High-Level Meeting on AMR in 2024, I served as a member of the Global Leaders Group, working alongside Dame Sally Davies and other colleagues, to elevate AMR on the global political agenda.

I am not a scientist. I come from the world of governance and political decision-making.

Today, I would like to speak frankly: we are not moving fast enough.

### Antimicrobials Are Civilization's Foundation

Let me begin with an inescapable truth.

When electricity fails, civilization stops. When water systems collapse, civilization stops. When antimicrobials stop working — civilization stops.

Without effective antimicrobials, the operating theater becomes a place of death. The cancer ward becomes untenable. Every surgery depends on the quiet, invisible protection of antimicrobials.

We have built an extraordinary system of modern medicine — but it stands on a foundation we have failed to protect.

This is not only a health crisis. It is also an economic crisis. And it is a national security crisis.

The COVID-19 pandemic showed us clearly how fragile our supply chains are.

When essential health systems are disrupted, economies suffer, society becomes unstable, and public trust declines.

AMR represents the same kind of fragility —but it is permanent, structural, and much harder to reverse.

### *The Market Has Failed — And Policy Created That Failure*

Why have we made insufficient progress? The answer is uncomfortable.

Our markets are designed to protect our survival.

When a company develops an excellent antibiotic, it is told to use it as little as possible. The more responsibly we use these medicines, the smaller the financial return becomes.

In what other sector do we punish success with financial loss?

This is not a failure of corporate virtue. This is a failure of governance — and that failure belongs to those of us in politics.

We created these market structures. And we have the power to change them.

Subscription models — paying for access rather than volume — are viable. Guaranteed demand mechanisms can de-risk private investment.

Blended finance can rebuild pipelines that have been allowed to shrink for decades.

The solutions exist. What is absent is political will.

### *Layered Governance for a Fragmented World*

At the same time, we face another structural challenge.

I must speak frankly about multilateralism — because I have worked within it, I respect it, and precisely for that reason I cannot ignore its limitations.

The 2024 UN Political Declaration on AMR was a genuine achievement.

The agreement to establish an independent evidence panel — an IPCC for AMR — was important progress.

But we must be realistic. Geopolitical tensions are intensifying. Budgets are constrained. Reaching consensus takes time.

Yet bacteria do not wait for consensus.

This is why we need layered governance.

The United Nations must remain the anchor of global legitimacy — that is irreplaceable.

But implementation must proceed through complementary pathways, that do not require unanimous agreement before every step forward.

G7 and G20 coalitions can pioneer subscription models. Regional partnerships can build supply resilience. Development finance institutions can mobilize the capital needed to transform the investment landscape.

This is not a rejection of multilateralism. It is a pragmatic way to strengthen it.

We also must face another hard truth. AMR is not only about health. It affects agriculture, trade, and the environment.

Antimicrobial pollution is still poorly regulated. Global rules and surveillance are not enough.

That is why WHO, FAO, WOA, and UNEP support the One Health approach.

If antimicrobials are essential public goods, all sectors must take responsibility.

The Independent AMR Panel must provide strong, trusted evidence —like the IPCC does for climate change.

Evidence can reduce division. But evidence alone is not enough.

*Access Is Co-Creation, Not Charity*

One more truth I must speak directly.

Too often, solutions are designed in the capitals of wealthy nations and presented to low- and middle-income countries as answers for them to implement. This is not partnership.

The realities of lower-income countries must be built into research priorities, surveillance systems, and financing models from the beginning — not as an afterthought.

When R&D is designed *with* global health systems rather than merely *for* them, laboratory capacity improves, regulatory institutions strengthen, and local ownership deepens.

This is not charity. This is co-creation. And co-creation produces better outcomes for everyone.

### *The Coalition We Need*

Japan's pharmaceutical industry brings world-class manufacturing quality. The United States and Europe bring advanced innovation pipelines.

India and our Asian partners bring scale and cost competitiveness indispensable for global access.

These capabilities are complementary — and they can be organized through subscription frameworks, demand guarantees, and sustainable pricing into a system that serves both commercial viability and global health security.

The technical feasibility is not in question. The industrial feasibility is not in question. What is required is credible, sustained political commitment.

Yes, fiscal space is constrained. Yes, geopolitical tensions complicate cooperation.

But bacteria do not wait for institutional reform.

### *A Call to History*

Ten years from now, will we look back and say we acted with the foresight this moment demanded? Or will we inherit the regret of hesitation?

History is not written by those who waited for perfect conditions. It is written by those who understood the stakes, built coalitions where consensus was incomplete, and acted when the cost of inaction was becoming irreversible.

Antimicrobials are social infrastructure. Antimicrobials are economic security. Antimicrobials are our obligation to generations not yet born.

The moment is now.

The path is clear. The only question is whether we have the courage to walk it.

Thank you very much.