



# AMR Stakeholder Network – Conflict of Interest Policy and Disclosure Form

For: individual representatives of member organisations of AMR Stakeholder Network.

April 2026

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## Definition and context

**Conflicts of interest** within the AMR Stakeholder Network arise when have the ability to influence AMR-related policies, positions, research priorities, or advocacy in ways that may benefit them personally or their affiliated organisations.

In the context of antimicrobial resistance, such interests may include—but are not limited to—relationships with:

- Pharmaceutical, biotechnology, or diagnostics companies
- Healthcare providers or insurers
- Agricultural, veterinary, or food production sectors
- Research institutions receiving industry funding

These interests may result in financial, political, scientific, or reputational advantage, whether direct or indirect.

Given the cross-sectoral nature of AMR (human health, animal health, environment – “One Health”), conflicts of interest and **conflicts of engagement** (time, roles, competing mandates) are often unavoidable.

EPHA and its AMR Stakeholder Network therefore prioritize **full transparency, proactive disclosure, and trust**, rather than attempting to eliminate all potential conflicts through rigid rules.



## Code of Conduct

### Article 1

This Code applies to all individual representatives of member organisations of the EPHA AMR Stakeholder Network.

### Article 2

EPHA as the secretariat shall strive to ensure balance, independence, objectivity and evidence-informed rigor in all AMR-related activities. Members of the Network are expected to uphold these principles in their contributions, paying particular attention to any actual, potential or perceived conflicts of interest or engagement, including those arising from external funding, collaborations or institutional affiliations.

### Article 3

Any actual, potential or perceived conflict of interest or conflict of engagement in relation to AMR stakeholder network activities must be disclosed without delay by the concerned individual. This obligation also applies to any changes in circumstances that may create a new conflict or aggravate an existing one. EPHA as the secretariat to the network shall review all declarations and, where a conflict is deemed to risk compromising the AMR stakeholder network integrity or independence, may require the individual concerned to refrain from participating in relevant discussions, decisions or activities, or to comply with other appropriate mitigation measures.

### Article 4

Failure to disclose a relevant conflict of interest, or misconduct related to such a conflict, may result in disciplinary measures by removal from the network.

## Disclosure form

**Disclosure** pertains to any actual, possible or apparent **conflict of interest** (as defined under 'Definition and context') of individual representatives of member organisations of the AMR Stakeholder network. The purpose of identifying any potential conflict of interest is for the network to maintain its integrity when developing and implementing its activities.

Please select one of the following statements and fill in and sign the declaration accordingly.

- I have no actual, possible or apparent conflict of interest in relation to the AMR Stakeholder network activities or to the overall purpose.
- I have an interest, arrangement or affiliation that could potentially be *perceived* as a conflict of interest, but which is not an actual or possible conflict of interest (= an apparent/seeming conflict of interest), that I would like to declare.

Please specify:

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Please detail why this interest, arrangement or affiliation does not constitute an actual or possible conflict of interest:

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Please specify AMR Stakeholder Network activities that this apparent/seeming conflict relates to:

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- I have an interest, arrangement or affiliation that could be seen as a possible or actual conflict of interest with one or more of AMR Stakeholder network activities.

Please specify: \_\_\_\_\_

Please detail the conditions and/or measures taken to prevent this interest, arrangement or affiliation from becoming an actual conflict of interest

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Please specify AMR stakeholder network activities that this potential conflict relates to:

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I, (insert full name) \_\_\_\_\_, in my capacity individual representative of a member organisation of AMR Stakeholder network, hereby agree to update this disclosure throughout the period of my term as a as individual representative of a member organisation of the AMR Stakeholder network, when a new conflict arises, or until such time as the conflict ceases to exist or arises.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_