1. Country : [scrolling menu?]
2. Is your country a member of the JPIAMR:
* Yes
* No
1. Name of the person submitting feedback:
2. e-mail address of the person submitting feedback:

SECTION ANTIPARASITIC RESISTANCE

In human health, the use of antiparasitic drugs is limited in high income countries. However, antiparasitic drugs are more frequently used in low and middle income countries to treat, for example, malaria, leishmaniasis, sleeping sickness, and different intestinal pathologies, leading to the development of antiparasitic resistance. In addition, antiparasitic drugs are widely used in the animal health sector both in high and in low and middle income countries, also promoting the development of antiparasitic resistance.

1. Does your country has any specific national research programs/actions on antiparasitic resistance?
* Yes but not a part of the National Program on Antimicrobial Resistance
* Yes, as Part of the National Program on Antimicrobial Resistance
* No
* I don’t know

If Yes, please comment:

1. In your country, which funding organizations could support research on antiparasitic resistance?

For each funding organization, please indicate:

- the Full Name

- the Acronym

- the status of the funding organization (Ministry, Public Funding Organization, private funding organizations)

- The One-Health Sector (Human Health, Animal Health, Environment) they can support.

- Their current involvement in international funding programs

- If possible, the approximate funding (in KEuros) dedicated to antiparasitic resistance within the last 5 years (2017-2021).

- Any additional relevant information

1. How would you estimate the size of your national research community working on antiparasitic resistance (included animal health and plants):
* Similar to the scientific community working on antibiotic resistance (100%)
* Reasonable in comparison of the antibiotic resistance community (50%)
* Small in comparison of the antibiotic resistance community (20%)
* Very small in comparison of the antibiotic resistance community (10%)
* Very few researchers working on this subject (<10%)
1. Parasitic diseases can be divided into three categories in function of the type of parasites responsible for those diseases (worms, protozoa and ectoparasites). Please rank here the three categories of parasitic disease in function of the funding volume in your country (1: More funding; 3: Less Funding)
* Worm related diseases: such as lymphatic filariasis (Wuchereria bancrofti, Brugia malayi, Brugia timori), onchocerciasis (riverblindness), loiasis, intestinal strongyloidiasis, schistosomiasis,, fascioliasis, clonorchiasis, paragonimiasis, cysticercosis, echinococcosis (hydatid disease), diphyllobothriasis, hymenolepiasis
* Ectoparasites related diseases: such as leishmaniasis, Trichomoniasis, sleeping sickness, Chagas disease, Malaria, Toxoplasmosis
* Protozoa related diseases: such as Such as Scabies, Myiasis, pediculosis and trombiculosis
1. Would your country consider to invest more in antiparasitic resistance?
* Yes, in animal health only
* Yes, in human health only
* Yes, in plant only
* Yes, both in Animal Health and Human Health
* No, due to limited funding available, antiparasitic resistance is not a funding priority
1. Would your country be willing to fund research on antiparasitic resistance in the candidate One-Health AMR Partnership?
* Yes
* No
1. If yes, which One-Health compartment should be covered by the candidate One-Health AMR partnership for antiparasitic resistance?
* Human health
* Human Health and Animal Health
* Human Health and Plants
* Human Health, Animal Health, and Plants
1. If yes, what should be the funding priority? (More than one answer possible)
* Research in the context of resistance of bacterial/fungal infection, for example in the context of coinfections
* Research focused on neglected diseases where funding is for the moment still limited
* Research focused on diseases where antiparasitic resistance is a major issue for public health (for ex: Malaria)
* Research on how the tremendous impact of antiparasitic resistance on animal health could impact human health
* Other priority: Please comment
* No priority
1. If no, which of the following applies? (More than one answer possible)
* Research on antiparasitic resistance is timely for animal health, but not for human health. For this reason, research on antiparasitic resistance is more relevant if included in the candidate partnership “Animal Health and Welfare”
* Antibiotic and antifungal resistance should be the priority of the candidate One-Health AMR partnership
* The link between antibiotic/antifungal resistance and the treatment of some parasitic diseases should be anyway explored in the candidate One-Health AMR partnership (antibiotics and antifungals are used to treat some parasitic infection)
* The mechanism of resistance (development, spread) present great differences with antibacterial/antifungal resistance.
* The therapeutic pipeline (companies, stakeholders…) and the issues related to economic incentives are different between antibiotic/antifungal resistance and antiparasitic resistance.
* Antiparasitic resistance is not a major concern for European public Health
1. If antiparasitic resistance is included in the candidate One-Health AMR Partnership, would your country prefer:
* Separate Calls/activities for antiparasitic resistance
* Calls/activities tackling both antibiotic/ antifungal and antiparasitic resistance (similar to the current practice where antifungal and antibiotic resistance are included in the same calls)
* No preferences
1. Please indicate here any comment regarding the research needs and gaps regarding antiparasitic resistance
2. Please provide information on any international program/organisation funding research on antiparasitic resistance that you are aware of
3. Please indicate here additional comments on antiparasitic resistance

SECTION ANTIVIRAL RESISTANCE

The viruses causing common diseases of man and domestic animals comprise approximately 25 known families classified on basis of their genome and replication strategies. Following the process of evolution, viruses have acquired various attributes that limit the ability to control viral infections, among them, is resistance to antiviral therapy.

1. Is research on antiviral resistance a priority for your country/region?
* Yes
* No
* I don’t know
1. Does your country has any specific national research programs/actions on antiviral resistance?
* Yes but not a part of the National Program on Antimicrobial Resistance
* Yes, as Part of the National Program on Antimicrobial Resistance
* No
* I don’t know

If Yes, please comment:

1. In your country, which funding organizations could support research on antiviral resistance?

For each funding organization, please indicate:

- the Full Name

- the Acronym

- the status of the funding organization (Ministry, Public Funding Organization, private funding organizations)

- The One-Health Sector (Human Health, Animal Health, Environment) they can support.

- Their current involvement in international funding programs

- If possible, the approximate funding (in KEuros) dedicated to antiviral resistance within the last 5 years (2017-2021)

- Any additional relevant information

1. How would you estimate the size of your national research community working on antiviral resistance (included animal health and plants):
* Similar to the scientific community working on antibiotic resistance (100%)
* Reasonable in comparison of the antibiotic resistance community (50%)
* Small in comparison of the antibiotic resistance community (20%)
* Very small in comparison of the antibiotic resistance community (10%)
* Very few researchers working on this subject (<10%)
1. If your country is funding research on antiviral resistance, please rank the categories of viral disease in function of the funding volume (1: More funding; 8: Less funding)
* HIV
* HCV
* HBV
* HSV-1 and 2 and/or VZV
* CMV
* Influenza A and /or B
* RSV
* Other

If other, please comment:

1. Would your country consider to invest more in antiviral resistance?
* Yes, in animal health only
* Yes, in human health only
* Yes, in plant only
* Yes, both in Animal Health and Human Health
* No, due to limited funding available, antiviral resistance is not a funding priority
1. Would your country be willing to fund research on antiviral resistance in the candidate One-Health AMR Partnership?
* Yes
* No
1. If yes, which One-Health compartment should be covered by the candidate One-Health AMR partnership for antiviral resistance?
* Human health
* Human Health and Animal Health
* Human Health and Plants
* Human Health, Animal Health, and Plants
1. If yes, which should be the funding priority for research on antiviral resistance (More than one answer possible)
* Research on the effect and prevention of antibiotic misuse to treat viral infections
* Research in the context of resistance of bacterial/fungal infection, for example in the context of coinfections
* Research on viral vaccination
* Research on antiviral resistance in the context of diseases representing a major issue for public health (for ex: HIV and HCV)
* Research on Optimizing Drug Combinations to Avoid Resistance
* Research on Evolutionary Outcomes that have Enabled Viruses to Resist Control
* Other Please comment
1. If yes, please rank the categories of viral diseases in function of what should be the candidate One-Health AMR Partnership priorities (1: More funding; 8: Less funding)
* HIV
* HCV
* HBV
* HSV-1 and 2 and/or VZV
* CMV
* Influenza A and /or B
* RSV
* No priority
* Other

If other, please comment:

1. If antiviral resistance is included in the candidate One-Health AMR Partnership, would your country prefer:
* Separate Calls/activities for antiviral resistance
* Calls/activities tackling both antibiotic/ antifungal , antiparasitic and antiviral resistance (similar to the current practice where antifungal and antibiotic resistance are included in the same
* No preferences
1. Please indicate here any comment regarding the research needs and gaps regarding antiviral resistance
2. Please provide information on any international program/organisation funding research on antiviral resistance that you are aware of

31) Please indicate here additional comments regarding funding initiatives on antiviral resistance