

CALL PRE-ANNOUNCMENT

(Full Call for Proposals will be published in January 2016)



To unravel the dynamics of transmission and selection of antimicrobial resistance (AMR) at genetic, bacterial, animal, human, societal, and environmental levels, in order to design and evaluate preventive and intervening measures for controlling resistance.



OBJECTIVES

The primary aim of the third joint call of JPIAMR is to combine the resources, infrastructures, and research strengths of multiple countries in order to address transmission of antibiotic resistance following a 'One Health Approach'.

An organism develops resistance to a drug either by a gene mutation or by the acquisition of genetic components from another strain (i.e. transmission of resistance). Resistant organisms can multiply in the presence of a drug (i.e. selection of resistance traits) but without transmission, resistance would remain an isolated problem.

To understand the complex biological and environmental interactions that shape the spread of antibiotic resistance, we must identify and characterise the determinants that contribute to the spread of resistance in and between different reservoirs; including humans (sick and healthy people), animals (livestock, companion and wild animals) and the environment (indoor and outdoor).

Investigating the complex biology and epidemiology of selection and transmission of resistance is crucial in order to design preventive measures to address this public threat. The success and abundance of antibiotic resistant bacterial strains with particular public health importance should be determined through the development of risk assessment approaches that are based on the genomic repertoire of bacterial pathogens and the ecological constraints that determine their fitness in clinical, community, veterinary, and environmental settings.

We expect that most collaborations will be multidisciplinary with expertise that could include, but are not limited to, bacteriologists (clinical, veterinary, and environmental), chemists, ecologists, mathematicians, informatics and computational modellers, medical practitioners (human and veterinary), etc., where appropriate. Consortia are encouraged to include participants from academia, medical and public health practitioners (both human and veterinary), policy makers, and industry, where appropriate (please note the national/regional regulations).



PARTICIPATING COUNTRIES

Belgium, Canada, Denmark, France, Germany, Israel, Italy, Latvia, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland, Turkey, United Kingdom

ELIGIBILITY

Applicants must adhere to the specific regulations of the national funding organisations. Each transnational consortium submitting a proposal must involve:

- a minimum of 3 eligible partners from 3 different countries participating in the call

- a maximum of 6 project participants, or 7, if partners from under-represented countries in the JPIAMR funding scheme are included (= Poland or Latvia).

- a maximum of 2 project participants funded by the same funding organisation.

- Project participants not eligible to be funded (e.g. from non-funding countries or not fundable according to national/regional regulations of the participating funding countries) may be involved in projects if they secure their own funding and if their expertise is indispensable for reaching the objectives. However, the maximum number of 6 (7) participants may not be exceeded (see above). The consortia should always consist of a majority of funded project participants.

- Project participants not eligible to be funded cannot be consortium coordinators and must accept all JPIAMR rules and guidelines just as funded members.

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