

AMR WATCH -AFRICA-

VOICES OF THE COMMUNITY

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FROM AWARENESS
TO ADVOCACY

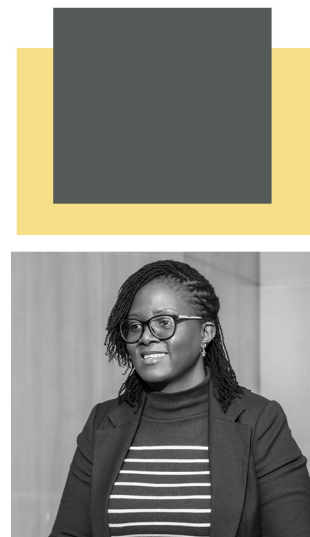
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EDITORIAL

Note.

This issue of AMR Watch captures antimicrobial resistance (AMR) action unfolding across the African continent, grounded in local realities, driven by communities, and shaped by emerging leaders. The stories span from east to west Africa, reflecting the diverse yet interconnected fronts of Africa's AMR response.

In Ghana, community-focused initiatives during World Antimicrobial Awareness Week 2025 show how evidence-based engagement can translate awareness into action. In Tema, AMR education was embedded within broader community health services, positioning stewardship as a shared, people-centred responsibility rather than a stand-alone message.

Student-led advocacy at Egerton University in Kenya highlights the growing role of young people in shaping the AMR narrative, moving from awareness to active engagement and leadership.

While the youth in Zambia take centre stage through the establishments of One Health Clubs that culminated in the National Inter-University AMR Debate Competition in Lusaka, where students critically examined human, animal, environmental, and policy drivers of resistance. From local innovation to national change, this issue shows how African actors are advancing One Health and converting what works into policy that lasts. microbial stewardship learning with Kenya.

Together, these contributions reflect a continental truth: Africa's response to AMR is already in motion—locally led, youth-driven, and increasingly connected across borders.

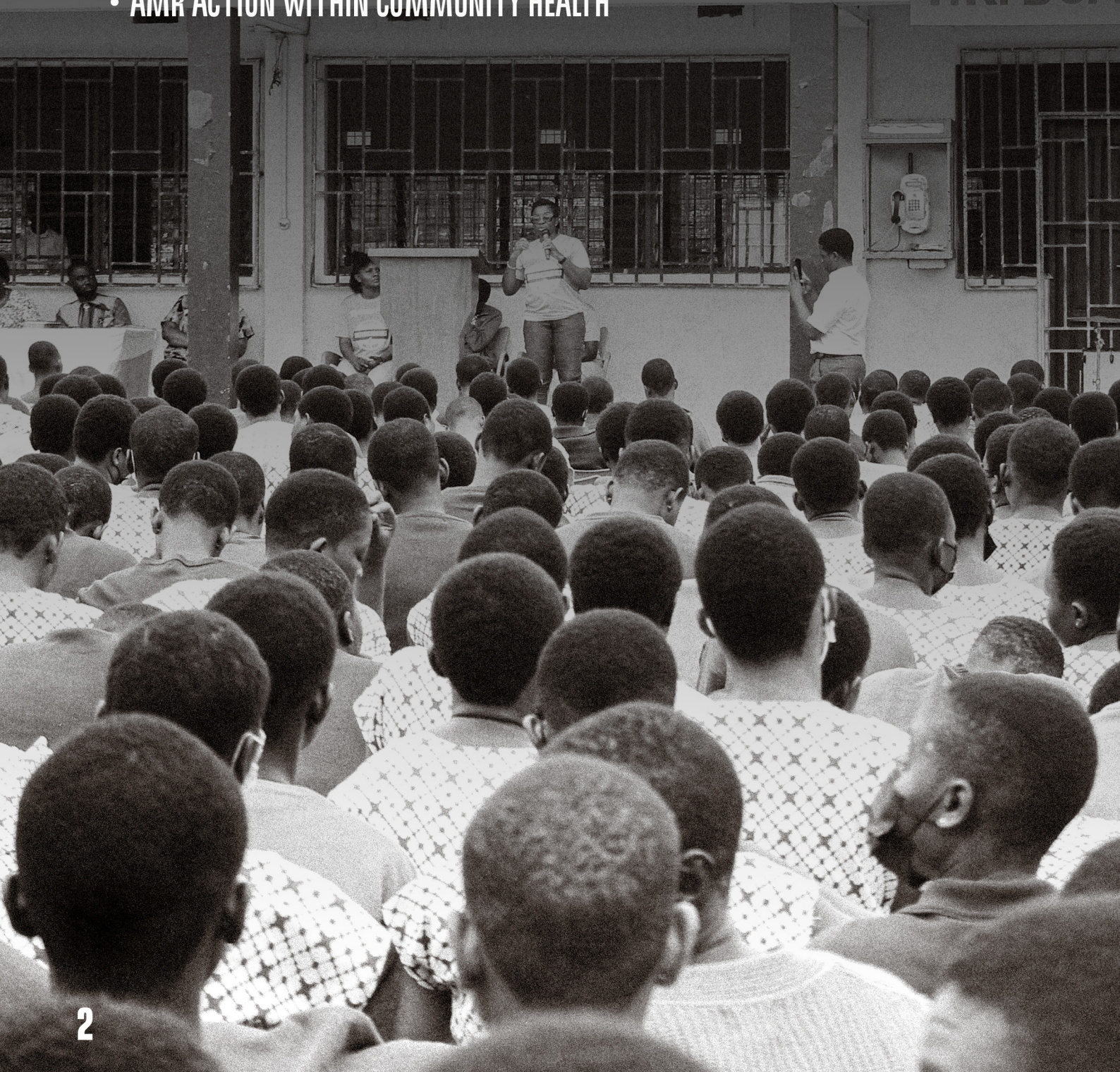
– *Prof. Mirfin Mpundu*



COMMUNITY INITIATIVES

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LOCAL LEADERSHIP GLOBAL SUPPORT

HOW CPA POWERS AMR ACTION ACROSS AFRICA AND BEYOND



Kenyan graduates of CPA's Africa Leadership Fellowship in AMS (ALF-A) Class of 2024.



WAAW 2025 significantly strengthened our capacity to detect, report, and prevent substandard and falsified medicines. The campaign empowered both staff and community members, creating a more vigilant environment.

— **Neverson Njobvu**, CPA SFMs Champion in Zambia

Across Africa, health systems face persistent AMR challenges, including limited stewardship and surveillance capacity, fragmented laboratory-clinical linkages, and inconsistent access to prescribing guidance. Addressing these issues requires technically robust solutions that are locally led, sustainable, and embedded within health systems.

The Commonwealth Pharmacists Association (CPA) plays a leading technical role in advancing AMR programmes across ten African countries. Working alongside teams at each level of the health ecosystem – from government ministries to professional bodies and frontline health workers – CPA supports the translation of global AMR commitments into practical, community-level action.

In Malawi, CPA-supported antimicrobial stewardship committees are driving improved practices and informing hospital and national policy; we are also working with the Ministry of Health to strengthen digital medicines management systems. In Uganda, CPA is revitalising microbiology laboratories and strengthening interdisciplinary collaboration, leading to the development of the country's first local hospital antibiogram which, in turn, enables evidence-based practices. CPA also supports national AMR surveillance and One Health coordination, strengthening data systems across the human, animal and environmental sectors. In Kenya and

Zambia, CPA collaborates with national authorities to optimise the interoperability, quality and timeliness of AMR data, strengthening its use in clinical decision-making.

Since 2019, CPA's AMR programmes have trained over 40,000 healthcare workers across over 300 intervention sites in Africa, utilising peer-learning, hub-and-spoke, and fellowship models to build local leadership. During World AMR Awareness Week 2025, 25 CPA-supported Champions led coordinated advocacy and community engagement activities across seven countries, reaching an estimated 6,500+ people through professional training, community outreach and digital campaigns, and engaging thousands more through various sensitisation initiatives. Digital tools such as the CPA's Prescribing Companion further support frontline decision-making, with over 125,000 active users across nearly 50 African countries.

As AMR priorities evolve, CPA continues to actively engage with partners to scale proven, evidence-based interventions that empower local AMR champions and strengthen health systems.

The Commonwealth Pharmacists Association (CPA) is an international organisation advancing pharmacy leadership, workforce development and medicines optimisation to strengthen health systems across the Commonwealth.



Dr Emmanuel K. Ireland at Ghana's national launch event of the Prescribing Companion App.



Olayinka Adeyemi leading an AMR awareness presentation during WAAW 2025.

FROM AWARENESS TO ACTION:

NPHRL Strengthening Community Voices Against Antimicrobial Resistance



NPHRL Sensitization Highlights

Antimicrobial resistance (AMR) remains a critical public health threat, driven largely by inappropriate antimicrobial use and limited awareness at the community level. Ghana's National Public Health and Reference Laboratory (NPHRL), with support from the South Centre (Geneva) advanced community-focused and evidence-based action to tackle the growing challenge of antimicrobial resistance.

As part of WAAW25, NPHRL spearheaded community sensitization efforts to champion responsible antibiotic use. The conversations tackled everyday drivers of AMR—self-medication, stopping treatment too soon, and using antibiotics without professional advice. Using simple, relatable examples, facilitators invited people to take a hard look at common habits like sharing leftover antibiotics or buying medicines without a prescription—and how these choices quietly fuel resistance.

Within health facilities, NPHRL emphasized the importance of diagnostics in guiding appropriate treatment. Through interactions with healthcare workers and laboratory professionals, they reinforced evidence-based prescribing, infection prevention and control, and adherence

infection prevention and control, and adherence to laboratory results before initiating antimicrobial therapy. These engagements strengthened collaboration between clinicians and laboratories, a cornerstone of effective antimicrobial stewardship.

Youth and community volunteers were actively engaged as AMR champions, helping to extend NPHRL's messages beyond formal sessions into households, schools, and social spaces. This approach ensured that AMR awareness was sustained and community-driven rather than limited to a one-week campaign.

WAAW25 highlighted NPHRL's critical role in bridging laboratory science, clinical practice, and community action. By empowering local voices and promoting diagnostics-led decision-making, NPHRL continues to contribute to preserving antimicrobial effectiveness and safeguarding public health in Ghana and beyond.



WHEN AN AWARENESS WEEK CHANGES A LIFE

The Voice of a Woman Facing AMR in Guinea

In Guinea, buying medicines on the street is often a survival strategy. Yet behind this widespread practice lies a serious and largely invisible threat: antimicrobial resistance (AMR). From 18 to 24 November 2025, the NGO, **STOP RAM**, led a community-based awareness campaign to challenge this reality and promote safer health practices.

STOP RAMS's real innovation isn't technological - it's social. The organization engaged directly with public high schools, mosques, markets, neighborhoods, and women's empowerment centers (CAAF). By prioritizing dialogue over stigmatization, STOP RAM transformed everyday community spaces into platforms for public health education, reaching motorcycle taxi drivers, religious leaders, and women's associations.

The impact of this approach is powerfully illustrated through the testimony of a woman who had sold medicines on the street for many years. She believed she was helping her community by providing quick access to treatment, unaware that the uncontrolled use of antibiotics was making microbes stronger and treatments less effective.

Through open and interactive discussions, she learnt how misuse of antibiotics, including self-medication and incomplete treatments, fuels antimicrobial resistance and puts lives at risk. Because these exchanges were grounded in lived experiences and local realities, the messages carried credibility, resonated deeply and were difficult to dismiss.

At the end of the discussion, the woman shared her decision with the group: "I have decided to stop selling medicines in the street. I would rather look for another activity than continue something that could put lives in danger."



The field team calls on communities to take action in the fight against AMR.



Women on the front lines in the fight against antimicrobial resistance.

Over the course of the week, the campaign generated tangible outcomes. Participants showed strong interest through active engagement and questions. Community members made verbal commitments to avoid self-medication, religious leaders agreed to share AMR messages in their places of worship, and women gained greater awareness of their central role in protecting family health.

In a context where AMR action lags, STOP RAM shows that meaningful change is built with communities and not behind desks. By embracing the One Health approach and listening to local voices, the organization turns awareness into sustainable action. The fight against AMR in Africa will be won where people live: at the heart of households and communities.



Volunteers raise awareness among communities about the risks associated with self-medication.



STOP RAM involved in sanitation alongside the Ministry of Sanitation, Hydraulics, and Hydrocarbons.

EMBEDDING AMR ACTION WITHIN COMMUNITY HEALTH

VOICES FROM TEMA, GHANA

By the Antimicrobial Stewardship Team, Tema Urban Hospital, Ghana.



A mother supports her child during routine immunisation at a community outreach in Tema Community



Health workers engage community members during blood pressure and health screening at a community outreach in Tema Community 2

Most people don't think about antimicrobial resistance when they're worried about refilling their diabetes medication, a child's missed vaccine, or a neighbour's rising blood pressure. And that's exactly why many AMR awareness campaigns struggle: the message arrives as a lecture when communities need a conversation that speaks to their lived experiences.

In Tema, Ghana, community-led dialogues supported by the Antimicrobial Stewardship (AMS) team at Tema Urban Hospital (formerly Tema Polyclinic) took on a different approach. Implemented in partnership with the Commonwealth Partnerships for Antimicrobial Stewardship (CwPAMS-2.5) programme, AMR awareness was embedded within holistic, people-centred community health engagements.

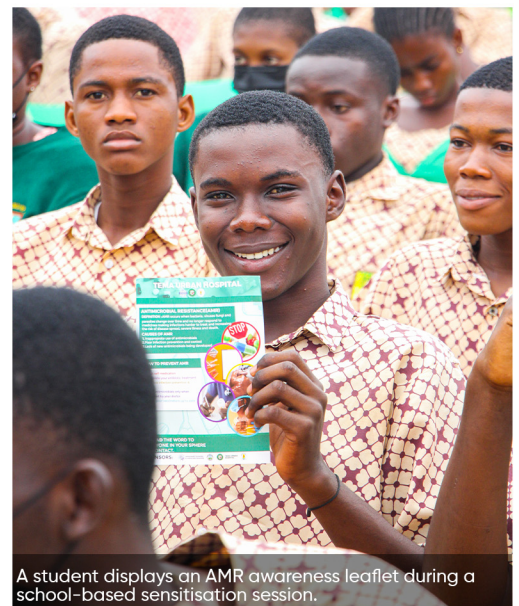
Instead of stand alone sensitization, AMR messaging was embedded in people-centered engagements that combined health screening, vaccination services, with safe dialogue spaces for honest and open discussion. Using Social and behaviour Change Communication methods, communities explored how common practices- self medication, stopping treatment early or using antibiotics without professional advice- can quietly accelerate resistance.

At Tema Secondary School (TEMASCO), students actively shaped discussions during SBCC sessions paired with basic health screening and private question-and-answer spaces. These

candid exchanges allowed students to challenge misconceptions around antibiotic use, self-medication, and incomplete treatment, and explore how everyday choices influence resistance. The sessions also introduced the One Health concept, linking human, animal, and environmental health, while practical demonstrations on hand hygiene reinforced infection prevention as a cornerstone of AMR control. Students were encouraged to carry these messages into their homes and peer networks.

In Tema Community 2, residents shaped the agenda around what mattered most to them, prompting the inclusion of preventive services alongside AMR messaging. Community members accessed blood pressure and blood sugar screening, while vaccination was highlighted as a powerful often overlooked AMR prevention tool. Hepatitis B testing and vaccination were offered to eligible participants, and mothers were supported to update routine childhood immunisations for their infants.

By centering local voices, trust, and prevention, this experience shows how community-led action can drive meaningful, sustainable change in the fight against AMR.



A student displays an AMR awareness leaflet during a school-based sensitisation session.



Students actively participate during an interactive AMR session at Tema Secondary School.

FROM AWARENESS TO ADVOCACY:

STUDENT-LED ACTION AGAINST AMR AT EGERTON UNIVERSITY

“The fight against AMR is being led by students, one walk, one dialogue, and one bold step at a time”

Member of Egerton University

Antimicrobial resistance (AMR) is no longer a distant scientific concept, it is a real and growing threat, especially across sub-Saharan Africa. As infections become harder to treat, young people are increasingly being called upon to protect the future they will inherit. At Egerton University, students are answering that call.

Through the One Health approach, which connects human, animal, and environmental health, students have moved beyond awareness into action. In November 2025, members of the Egerton University One Health Club established an AMR Subcommittee to champion antimicrobial stewardship and peer-to-peer advocacy on campus.

That same month, students partnered with the Nakuru County AMR Committee to participate in a World Antimicrobial Awareness Week (WAAW) walk. Twenty-five students walked six

kilometres through Nakuru City, engaging the public in conversations about responsible antimicrobial use, completing prescribed treatments, and the dangers of misuse. The walk transformed AMR from a classroom topic into a community conversation.

Building on this momentum, a group of 15 students independently mobilised to attend an AMR Symposium at Kabarak University in December 2025.

Despite logistical challenges, they ensured student voices were represented. One student joined a panel discussion, while another delivered a presentation titled “Back to the Future,” examining the pre-antibiotic era and the risks of a post-antibiotic future.

These experiences underscored a powerful message: youth are not passive recipients of AMR policy, but active agents of change. Moving forward, Egerton University students aim to strengthen antimicrobial stewardship education, infection prevention and control, and expand community outreach, aligning their efforts with the Nakuru County AMR Action Plan (2023–2027).



Egerton University students with KMTC, Nakuru Campus and Kabarak University on a public AMR awareness walk during WAAW 2025



A final year medical student at the Egerton University at the post-walk reception during WAAW 2025.



Egerton University students at an AMR Symposium as a conclusive crowning of WAAW 2025.

WAVE TACKLING AMR RISK FACTORS

FROM PRODUCTION TO CONSUMPTION



Farm Sessions

In the rolling hills of the Kigezi region in Uganda, livestock farming is more than just a job, it's an integral part of daily life.

Families depend on nearby farms, abattoirs, and markets for their meat and milk. However, as consumers, we began to observe concerning trends: products spoiled quickly, quality varied, and both vendors and farmers expressed their frustrations. Beneath these issues was a deeper concern regarding the use of antimicrobials throughout the food system.

In response, Working Against Virulent Epidemics (WAVE) developed a community-based intervention led by youth to address AMR risk points across the entire food chain. Instead of concentrating on a single stage, we traced the journey of food from production to consumption.

We trained university students as Trainers of Trainees, equipping them with practical skills in responsible antimicrobial use, infection prevention and control, and farm biosecurity. These young individuals collaborated with selected farms to help farmers and workers emphasize prevention rather than routine drug usage. Six months later, farmers reported healthier animals, fewer disease occurrences, and enhanced productivity. These findings

matched what we observed during our random visits to the farms.

Acknowledging the abattoir as a vital link in this chain, WAVE expanded its intervention to Kabale Central Abattoir. In addition to training, our team participated in hands-on cleaning activities and donated materials to promote ongoing hygiene practices while reinforcing effective and sustainable infection prevention protocols.

Next, we followed products to Kabale Central Market, where vendors confirmed improvements in quality and shelf life. They received training on safe handling practices and contamination prevention to ensure food safety before it reached consumers.

Our efforts were bolstered by mentorship from ReAct Africa, which enhanced our technical and leadership skills, along with partial funding support from South Centre that facilitated key field activities. Our experience demonstrates that when youth, communities, and partners collaborate effectively, actions against AMR can be both practical and deeply rooted in everyday life where people live, farm, and eat.



Market Sessions



Abattoir Sessions

Resistance is Rising: Humans Arise

*A*ntimicrobial resistance, a growing dread,
Silent threat, spreading far and wide,
In our waters, soil, and air,
A hidden danger, lurking with care.

Bacteria adapt, evolve, and thrive,
Resisting our best, our last defence alive,
A world where antibiotics lose their might,
A future uncertain, a looming fight.

In the rivers, lakes, and oceans deep,
A toxic brew, our waste does seep,
Pharmaceuticals, pesticides, and more,
Contaminate the environment, forever to pour.

In the soil, resistant genes reside,
A silent threat, our future to decide,
Crops and livestock, a breeding ground,
For superbugs, that will not be found.

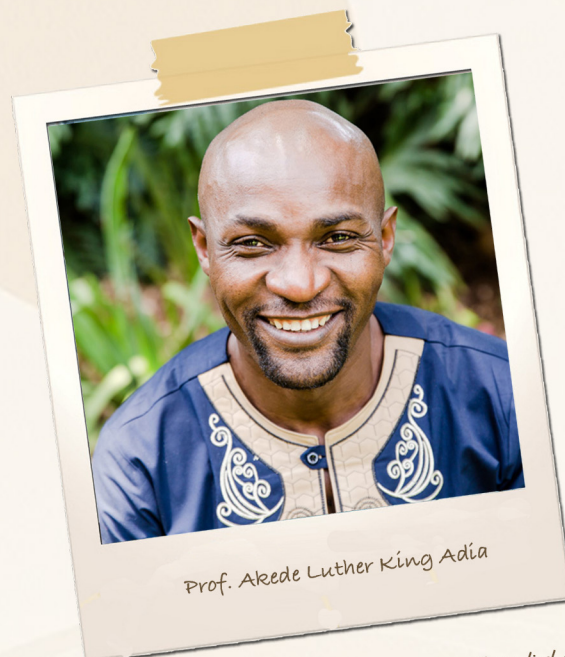
The WHO sounds the alarm, a warning clear,
A post-antibiotic era, drawing near,
A world where infections, once treatable and mild,
Become death sentences, our future, grim and wild.

But hope remains, a glimmer in the night,
Solutions sought, to reclaim our light,
One Health approach, a global call,
Human, animal, environment, standing tall.

Reduce, reuse, recycle, a new way,
Waste management, a crucial sway,
Sanitation and hygiene, a basic right,
Stopping spread, a global fight.

Pharmaceuticals, used with care and thought,
Alternatives sought, nature's way brought,
Research and innovation, a beacon bright,
New treatments, shining with all our might.

Education and awareness, key to the door,
Changing habits, a collective score,
Policy and action, a global plan,
Together we stand, AMR, we can.



Dr Akebe Luther King Abia is a high-impact applied and environmental microbiologist at the University of KwaZulu-Natal and an advisory board member at ReAct Africa. He is also an Aspen New Voices Senior Fellow.



REGISTRATION NOW OPEN

Early Bird Registration (Before April 31st 2026)	\$160
Standard Registration	\$200
Virtual Participant	\$40

THEME:

Africa leading the way to institutionalizing pragmatic people-centred
AMR solutions from grassroots to regional level

REGISTRATION LINK:

<https://cvent.me/IKA7KP>





LIFEARC VISIT

AFMS Innovation in Africa

A major highlight of the past year was the series of joint engagements led by LifeArc, a not-for-profit life sciences organization supporting global health innovation, across

Zambia and Kenya. These visits marked a significant step forward in advancing antimicrobial stewardship (AMS) through a combination of high-level strategic alignment and practical, on-the-ground implementation.

The Zambia visit set the stage; through high-level courtesy calls to the Zambia National Public Health Institute (ZNPHI) and the Ministry of Health, the engagements reinforced national commitment to strengthening AMS systems. The delegation included LifeArc UK representatives Thorsten Forster, Scientific Director, and Magdalena Koscielniak, Clinical Development Manager, whose participation underscored the strong technical and strategic backing behind the

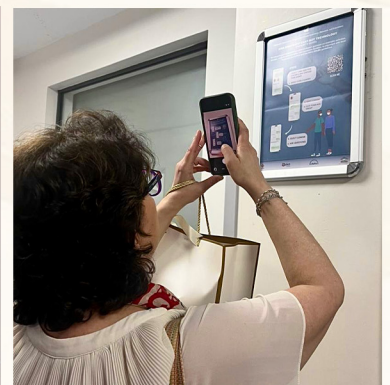
initiative.

Equally impactful was the coming together of implementing teams from Zambia and Kenya, creating a platform for cross-country collaboration, benchmarking, and shared learning. This exchange of experiences highlighted both common challenges and innovative solutions, reinforcing the value of regional partnerships in addressing antimicrobial resistance (AMR).

At the heart of the Zambia engagement was an abbreviated Target Product Profile (TPP) workshop, convening over 20 multidisciplinary experts, including clinicians, policymakers, digital health specialists, and patient advocates. The workshop focused on co-developing a scalable digital AMS solution tailored to low- and middle-income country (LMIC) contexts. Participants worked collaboratively to define user needs, map technical requirements, and develop a strategic implementation roadmap, balancing ideal functionality with practical feasibility. A strong consensus emerged: digital innovation is not optional, but essential for the future of AMS.

Site visits to the University Teaching Hospital (Children's Hospital) and Levy Mwanawasa University Teaching Hospital further grounded these discussions in reality. Here, LifeArc engaged directly with local AMS teams implementing the ASPIRE Project, gaining insight into both the operational challenges and the opportunities for scaling digital interventions. These interactions highlighted the commitment of frontline teams to improving patient outcomes through evidence-based and contextually relevant practices.

Building on this strategic groundwork, the February 2026 visit to Nairobi, Kenya, offered a

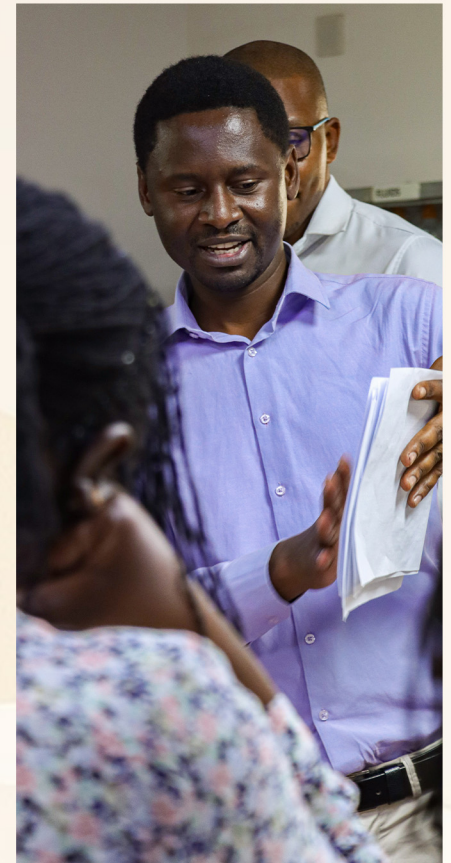


LifeArc Visit Highlights



"The use of digital tools is necessary in our hospital. It must be comprehensive and not too niche. Otherwise one must expect poor uptake."

Dr Musaku Mwenechanya
Senior Medical Superintendent
University Teaching Hospital – Children's
Hospital, Zambia



complementary perspective; from design to implementation. The Kenya engagement included LifeArc UK leadership Carolyn Hall, Head of Partnerships and Alliance Management, and Ghada Zoubiane, Head of Global Health, reflecting a continued commitment to strengthening partnerships and scaling impact across the region.

At AAR Hospital, the LifeArc team witnessed firsthand how ASPIRE's digital innovations are being integrated into clinical practice. The ASPIRE AMS Application and WhatsApp Chatbot, designed to support real-time clinical decision-making, demonstrated their value in busy healthcare settings. Clinicians were observed using these tools during ward rounds and patient consultations, leveraging them to guide antibiotic selection and access up-to-date treatment recommendations at the point of care. Their accessibility, particularly through mobile platforms, has made them both practical and widely adoptable.

Feedback from healthcare providers was encouraging; many reported increased confidence in prescribing decisions and improved adherence to antimicrobial guidelines. These early outcomes point to the transformative potential of digital tools when they are designed with end-users in mind and embedded within existing clinical workflows.

At the national level, the Kenya visit also reinforced the importance of coordinated stewardship efforts. Engagements with the Kenya National Public Health Institute (KNPHI) reaffirmed a shared commitment to advancing AMS, with priority areas identified including scaling digital solutions, strengthening data use, and enhancing capacity building, reporting, and feedback mechanisms.

Together, the Zambia and Kenya visits tell a compelling story of progress from strategic vision to practical application. They underscore that effective antimicrobial stewardship requires not only strong policy support and technical design, but also

continuous engagement with frontline users, adaptability to local contexts, and sustained collaboration across countries. Ultimately, these engagements highlight a clear pathway forward: one where innovation is co-created, implementation is context-driven, and digital tools serve as enablers of better decision-making, improved patient outcomes, and stronger health systems in the fight against antimicrobial resistance.

FROM FARMS TO POLICY TABLES:

HOW REACT AFRICA IS REFRAMING AMR ACTION IN THE ANIMAL HEALTH SECTOR

Antimicrobial resistance (AMR) is often framed as a hospital problem, a crisis of overprescription, failing antibiotics, and rising treatment costs.

But across Africa's food systems, a quieter front line exists: small-scale farms where antibiotics are used daily, often without guidance, and where the future of food security and public health quietly intersect.

In Zambia, ReAct Africa is working to shift this narrative and the response by embedding animal health at the heart of its AMR strategy.

Through two complementary initiatives under the International Training Programme (ITP) on AMR, ReAct is demonstrating what One Health looks like in practice: from poultry houses in Chilanga District to national policy discussions on traceability, surveillance, and food safety.

STARTING WHERE THE ANTIBIOTICS ARE USED

In Chilanga District, small-scale poultry farming is more than a livelihood, it is a survival strategy. Yet limited access to veterinary services and extension support has created a perfect storm: high disease burden, heavy antibiotic use, and low productivity.

ReAct Africa's change project, "enhancing productivity and antibiotic use among small-scale poultry farmers", begins with a simple but powerful insight: stewardship starts with skills.

Baseline findings revealed that while most farmers rear more than 100 birds and rely on poultry as their main source of income, nearly 80 percent lack access to animal health extension services.

Antibiotics are used universally, often for disease prevention rather than treatment, and decisions about medicines are frequently guided by peers or availability at agro-vet shops rather than veterinary advice.

Instead of approaching this as a compliance problem, ReAct is addressing it as a capacity gap by integrating basic project management skills. Farmers are learning that biosecurity, record keeping, and other preventive practices reduce losses, cut costs, and protect both animal and human health. Importantly, the work is embedded within Farmer Field Schools and aligned with Zambia's National AMR Action Plan, ensuring sustainability beyond the project lifecycle.



ITP Piggery Visit in Zimbabwe during the regional meeting.





ITP In-country Meeting in Zambia

EXPANDING THE LENS: FROM ANTIBIOTICS TO FOOD SYSTEMS

While Chilanga focuses on immediate stewardship practices, a second ITP-linked project takes a broader view, asking what sustainable poultry farming should look like in an AMR-constrained future.

The study, "Comparative Analysis of Organic vs. Conventional Poultry Farming in Zambia", explores how different production systems influence antibiotic use, environmental sustainability, and gender equity. Conducted among small-scale farmers linked to FAO-supported Farmer Field Schools, the project applies a strong gender lens, recognizing that women who form the backbone of poultry production, are often excluded from decision-making, access to financial services, and markets.

By comparing conventional, antibiotic-dependent systems with traditional and organic approaches that emphasize hygiene, vaccination, and housing, the project aims to generate locally grounded evidence for policymakers and practitioners. The goal is not to idealize one system over another, but to identify feasible pathways that balance productivity, affordability, and reduced antimicrobial reliance.

For ReAct Africa, this work is strategic. It strengthens the organization's understanding of animal health and food safety, areas historically underrepresented in AMR advocacy, and opens new avenues for collaboration with agricultural, veterinary, and food system actors.



ITP In-country Meeting in Zambia



ITP Piggery Visit in Zimbabwe during the regional meeting.

DEBATING THE FUTURE

ZAMBIAN YOUTH AT THE FOREFRONT OF THE NATIONAL AMR AGENDA

Antimicrobial Resistance (AMR), one of the world's fastest-growing public health threats, took centre stage at the 2025 National Inter-University AMR Debate Competition. Held in Lusaka, the three-day event brought together 341 students from over 15 tertiary institutions, positioning youth voices at the heart of Zambia's AMR response.

Organised in line with Zambia's National Action Plan on AMR, the competition used structured debate to unpack the human, animal, environmental, and policy drivers of antimicrobial resistance. Students interrogated issues ranging from antibiotic misuse and weak regulatory enforcement to veterinary drug overuse, while proposing evidence-based, One Health solutions. "AMR is not just a medical issue, it is a development challenge that demands cross-sectoral thinking," noted one adjudicator during the finals.

A defining highlight of the 2025 debates was the participation of four established One Health AMR Clubs from Cavendish University, Eden University Great East Campus, Eden University Main Campus, and Lusaka Apex Medical University. Their involvement demonstrated a clear and sustainable pathway for integrating young people into national AMR structures through an institutionalised approach to advocacy, education, and awareness.



2025 Debate Highlights



"The presence of organised AMR clubs shows that youth engagement can be structured, sustained, and impactful beyond one-off events," a competition organiser observed.

The debates attracted students from medicine, pharmacy, veterinary science, agriculture, public health, nursing, law, business, education, and mass communication, reinforcing AMR as a shared responsibility across sectors. Levy Mwanawasa Medical University emerged as overall winners, followed by the University of Zambia and the University of Lusaka. Ten outstanding speakers were recognised for excellence in research, articulation, and policy awareness.

The event achieved strong public visibility. The grand finale was broadcast live on ZNBC during prime time, while radio, campus media, and social media platforms extended the conversation nationwide. Online analytics recorded a reach of 5,634 users and 592 engagements, highlighting growing public interest in AMR and youth leadership.

Despite its success, challenges such as judging fatigue, scheduling delays, limited access to AMR reference materials, and technical audio issues were noted. Addressing these gaps through improved planning, judge orientation, and pre-event AMR learning resources will further strengthen future editions.

Ultimately, the 2025 National AMR Debates affirmed that young people are not passive recipients of policy, but active partners in safeguarding antimicrobial effectiveness. By institutionalising youth engagement through university-based One Health AMR clubs and national platforms like these debates, Zambia is cultivating a resilient generation of advocates ready to protect public health today and into the future.



FROM MARKETS TO MICROBES:

HOW ZAMBIAN YOUTH ARE REDEFINING THE FIGHT AGAINST ANTIMICROBIAL RESISTANCE



WAAW 2025 Community Awareness Highlights

from Copperbelt and Mulungushi universities. The dialogue strengthened student capacity on AMR drivers, antimicrobial stewardship, environmental risks of poor disposal, and effective community communication. Follow-up assessments conducted two weeks later demonstrated improved understanding of AMR, One Health linkages, and greater confidence in advocacy.

"AMR is not just a medical issue, it is a development challenge that requires cross-sectoral thinking," noted one expert during the dialogue.

Equipped with this knowledge, students led community outreach at Chisokone Market in Ndola, engaging approximately 200 vendors and members of the public. Interactive discussions revealed common practices such as reusing old prescriptions, saving leftover antibiotics, and disposing medicines in sinks or pit latrines, behaviours driven by medicine shortages, long waiting times, and negative healthcare experiences. The outreach reframed AMR in relatable terms, linking resistance to household health, productivity, and healthcare costs. Infection prevention messages were reinforced through the distribution of hand sanitiser to market vendors.

"I have learnt that beyond the complexity of AMR, there is a socially easier way of communicating it to communities," reflected a Public Health student.

During World Antimicrobial Awareness Week (WAAW) 2025, Zambia's Copperbelt Province became a testing ground for 2025 National Inter-University AMR Debate Competition. Held in Lusaka, the three-day event brought together 341 students from over 15 tertiary institutions, positioning youth voices at the heart of Zambia's AMR response.

Organised in line with Zambia's National Action Plan on AMR, the competition used structured debate to unpack the how youth-led, One Health action can translate global antimicrobial resistance (AMR) priorities into practical community impact. The project, "Amplifying Youth Voices: A One Health Youth-Led Awareness and Disposal Campaign," was implemented by the Alliance Against Antimicrobial Antipathy (AAA) with technical support from ReAct Africa and funding from the South Centre.

Antimicrobial resistance poses a growing threat in low and middle income countries, where inappropriate antimicrobial use, informal access to medicines, weak disposal systems, and limited public awareness accelerate the spread of resistant microorganisms. In the Copperbelt, dense urban markets and widespread medicine stockpiling create ideal conditions for misuse and environmental contamination. Yet, youth, particularly students in health-related fields, remain an underutilised force in addressing these challenges.

To bridge this gap, AAA convened a Youth One Health Dialogue with experts from human health, veterinary medicine, and pharmacy, bringing together 25 medical and health sciences students



2025 WORLD ANTIMICROBIAL AWARENESS WEEK



A pilot antimicrobial disposal (mop-up) initiative further exposed hidden risks. Although only four adults participated, 36 medicines were collected—25 of them antimicrobials—many in large unfinished quantities, poorly labelled, or already expired. The findings pointed to incomplete treatment courses, weak patient counselling, and unsafe storage practices that enable self-medication and environmental contamination.

To extend reach beyond Ndola, the campaign leveraged Radio Ichengelo, broadcasting a one-hour AMR awareness programme with an estimated national reach of two million listeners. The programme amplified messages on responsible antimicrobial use, safe disposal, and community participation in AMR mitigation.

Despite limited funding and logistical constraints, the project demonstrated that youth-led AMR advocacy and community-based disposal initiatives are both feasible and acceptable. Importantly, the initiative catalysed the establishment of a One Health Club at Copperbelt University, providing an institutional platform for sustained youth engagement.

By placing young people at the centre of One Health action, the Copperbelt campaign shows that youth are not passive beneficiaries of AMR policy but critical partners in safeguarding antimicrobial effectiveness for Zambia and



In markets, we rarely receive such health lessons. Sharing this knowledge widely can save lives.

– Market vendor.





CtC club members

SMALL VOICES, SERIOUS IMPACT:

HOW MAARIFA KIDS 2.0 IS SHAPING HEALTHIER FUTURES IN BUSIA COUNTY

In the global fight against antimicrobial resistance (AMR), solutions are often sought in laboratories, policy rooms, and hospitals. Yet in two primary schools in Busia County, the movement is being powered by something far more unexpected: children.

Maarifa Kids 2.0 initiative engaged more than 200 learners aged 7 to 14 at Otiiri and Lupida Primary Schools, equipping them with knowledge and practical skills to address antibiotic misuse, promote responsible health-seeking behavior, and strengthen hygiene practices within their communities.

At the heart of the project lies the Child-to-Child (CtC) methodology, an approach that recognizes children not as passive recipients of health information but as capable educators and influencers. Through peer-led learning, pupils translated complex concepts about antibiotic stewardship and AMR into relatable messages, using songs, poems, and skits to spark understanding among classmates and parents alike.

The learning extended beyond textbooks. In school kitchen gardens, pupils explored the intersection between agriculture and antimicrobial

use. They prepared organic compost and cultivated crops, grounding scientific principles in hands-on experience. Health education, in this context, was not abstract – it was planted, watered, and harvested.

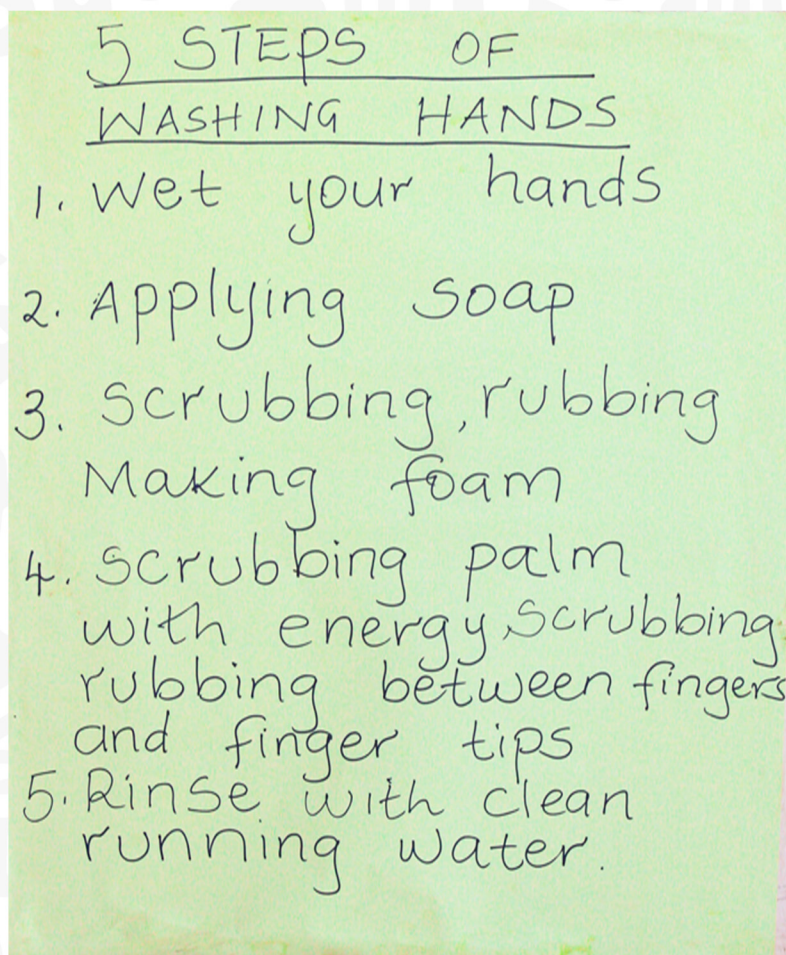
Hygiene promotion became both practical and creative. Students constructed “tippy taps,” simple handwashing stations strategically placed around school compounds. They composed handwashing songs outlining the five essential steps, reinforcing correct practices through rhythm and repetition. The impact soon crossed school boundaries: similar handwashing stations were observed in the homes of CtC club members, signaling that the message had taken root within families and neighborhoods.

Peer champions from upper grades assumed mentorship roles, guiding younger pupils and reinforcing adherence to prescribed medication when brought to school. Meanwhile, student-led environmental initiatives saw the placement of dustbins across the school grounds, strengthening the culture of cleanliness and shared responsibility.

The results speak to both engagement and ownership. CtC club membership grew from 70 to over 100 pupils per school; a clear indicator that the initiative resonated deeply with learners. Other than participation numbers, the project fostered confidence. Children demonstrated that when given the tools and trust, they can grasp sophisticated health concepts and communicate them with clarity and conviction.

Maarifa Kids 2.0 offers an important lesson for public health practitioners: sustainable change does not always begin at the top. Sometimes, it begins in a classroom, in a school garden, or beside a handmade handwashing station. By empowering children as ambassadors of responsible antibiotic use and hygiene, the project has cultivated not only knowledge but leadership.

In Busia County, small voices are carrying a powerful message – one that reaches from schoolyards into homes and communities. And in the broader fight against antimicrobial resistance, that message may prove transformative.



Participants learn about antimicrobial use in agriculture during a hands-on session at the CTC kitchen gardens



Handwashing stations strategically placed across the school compound to promote hygiene.

2026

A Rundown Of Our Biggest UPCOMING EVENTS



28-30
JUNE

5th Global Ministerial
High Level Meeting on AMR



21-22
JULY

RAN Conference
2026



JULY

Life-Arc Visit 2026



TBA

National AMR
Awareness Debates



18-24
NOV

World Antimicrobial
Awareness Week 2026



Reactgroup.org/africa
Madalitso Road, Meanwood Ibex
Lusaka, Zambia